IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PERMIT# 31163 PIN# ~~4886334342168~~ 4880334268 DATE

OWNER OR CONTRACTOR DAN Clendenyn PHONE: Business 704-546-7228 Home

ADDRESS 1409 East Memorial Highway Harmony NC 28634

LOCATION 901 E - 548 memorial Highway .2 miles from exit

SUBDIVISION Gaither BLOCK / SECTION LOT 5 LOT AREA .342 SITE CLASS P5 DESIGN FLOW 360 L.T.A.R.

Septic Tank: Excel Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields Square Feet Linear Feet

No Lines 3/bed Trench Width Max Trench Bottom Depth Gravel Depth

☐ New System ☐ Repair System Type: I (II) III IV V VI

System Description:

Repair System Description:

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms

☐ Business No. Employees

☐ Other

☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply:
☐ Individual
☑ Public
☐ Community

Comments:/Conditions:

Comments:/Conditions:

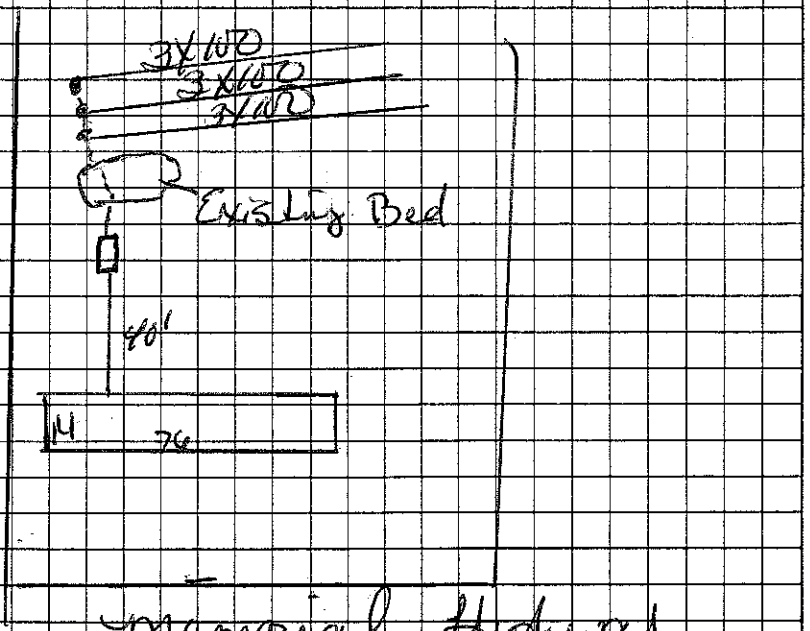
Existing Bed / Existing lines

INITIAL SITE SKETCH

Paid $50.00
to Kerr Cook
for total of 100.00
to health dept.
and 45.00 to zoning
145.00

Kerr L Cook

AS BUILT SKETCH



Permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: Dan Clendenyn date Dan Clendenyn Installed by:

Improvement Permit by: date Operation Permit by: date

Authorization to Construct by: date Existing System Inspection by: Kerr L Cook date 10-13-05

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK