IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C1) MOORESVILLE 704-664-5281

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

(C1)

PERMIT# 104167 PIN# 4891-08-6203.B DATE 2-14-02

OWNER OR CONTRACTOR JOSHUA B. SMITH PHONE: Business _____ Home 704-546-7425

ADDRESS 801 POWELL BRIDGE ROAD HARMONY NC 28634

LOCATION HWY 21 NORTH, TR POWELL BRIDGE ROAD, 1ST LOT ON RIGHT PAST ROCKY FORD ROAD

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 1.0 ACRE SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.40 GAL/FT²

Septic Tank: 1000 Gallons; STB 760 Date 12-31-01
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines THREE Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I (II) III. IV. V. VI
System Description: CONVENTIONAL GRAVITY
Repair System Description: CONVENTIONAL GRAVITY
Maintenance Agreement Required: ☐ Yes ☑ No
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

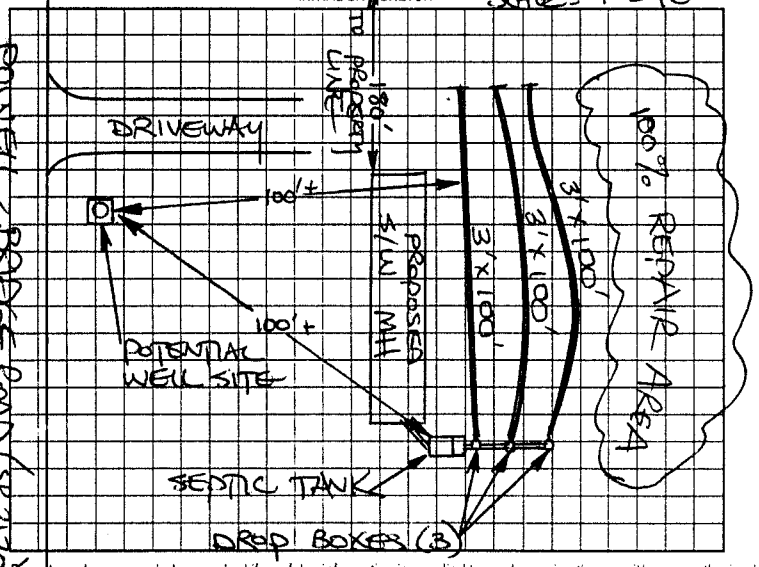
☐ House/Mod. Home No. Bedrooms 2
☑ Mobile Home No. Bathrooms 1
☐ Business No. Employees _____
☐ Other FUTURE 3 BR

Water Supply:
☑ Individual
☐ Public
☐ Community
WELL

Comments/Conditions: KEEP SYSTEM MINIMUM 100 FEET FROM WELL

Comments/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "ZABEL" FILTER

INITIAL SITE SKETCH SCALE: 1"=40'



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE 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: [signature] date 2-14-02 Installed by: BRENT GALLIHER

Improvement Permit by: STEVE HEDRICK date 2-14-02 Operation Permit by: STEVE HEDRICK date 3-26-02

Authorization to Construct by: STEVE HEDRICK date 2-14-02 Existing System Inspection by: _____ date _____

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