IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 133614 PIN# 4882-54-7552 01 DATE 2-9-06

OWNER OR CONTRACTOR BRIAN BLANTON PHONE: Business 704-657-9248 Home 704-546-3437

ADDRESS 181 REAVIS ROAD, HARMONY, NC 28634

LOCATION US 21 N, TR E. HOUSTONVILLE RD, TR REAVIS ROAD, 0.4 MILE ON LEFT

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA ~2.5 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.25 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 10-3-01
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet EQ. TO 1440 Linear Feet 360
No Lines FOUR Trench Width 36" Max Trench Bottom Depth 24" Gravel Depth N/A

☐ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: 25% REDUCTION, GRAVITY
Repair System Description: LOW PRESSURE PIPE
Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home No. Bedrooms 3
☑ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other _____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

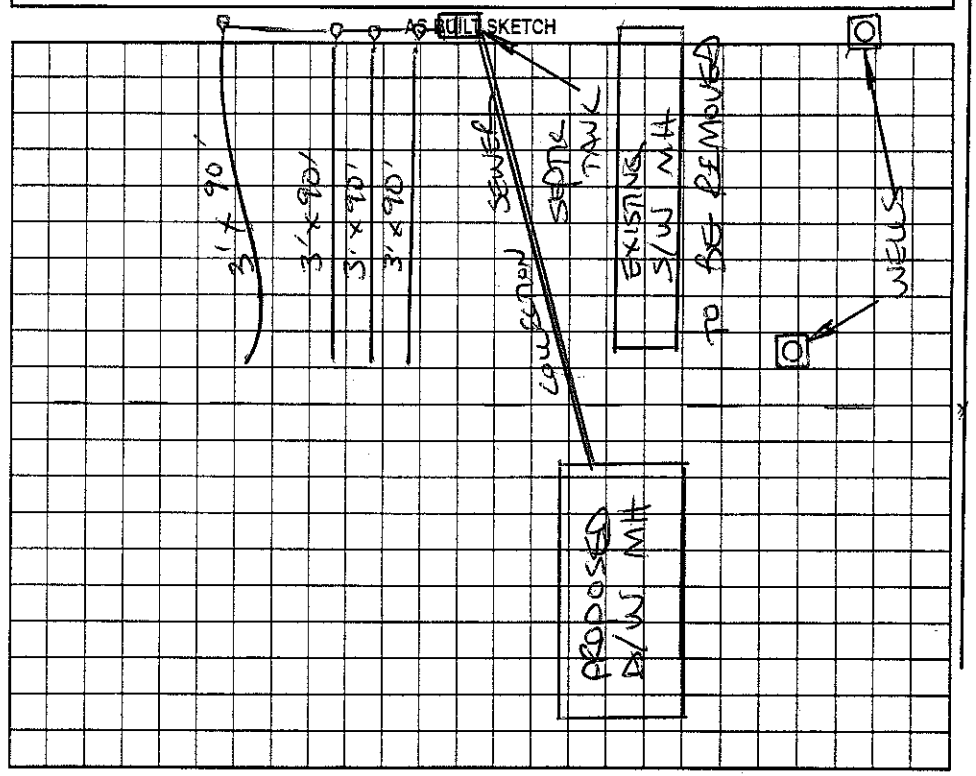
Water Supply: ☑ Individual ☐ Public ☐ Community
WELL

Comments:/Conditions:

Comments:/Conditions: EXISTING S/W MH TO BE REMOVED UPON OCCUPANCY OF D/W MH.

INITIAL SITE SKETCH

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: _____ date _____ Installed by: _____

Improvement Permit by: _____ date _____ Operation Permit by: _____ date _____

Authorization to Construct by: _____ date _____ Existing System Inspection by: STEVE HENDRICK date 2-9-06

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