IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 128362 PIN# 4891-41-1439 831 DATE 7-5-05

OWNER OR CONTRACTOR RICKY VAUGHN PHONE: Business (704) 546-5216 Home

ADDRESS 111 ROCK SPRINGS RD. HARMONY, NC 28634

LOCATION I-77N TR HWY 901 TL SHEFFIELD TL ROCK SPRINGS 1ST DRIVE ON LEFT

SUBDIVISION BLOCK / SECTION LOT LOT AREA 41.09 SITE CLASS. PS DESIGN FLOW 125 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB SHOAF 760 Date 6-19-05
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 417 Linear Feet 140
No Lines TWO (2) 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: SAME
Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home No. Bedrooms
☐ Mobile Home No. Bathrooms
☑ Business No. Employees 5
☐ Other OFFICE

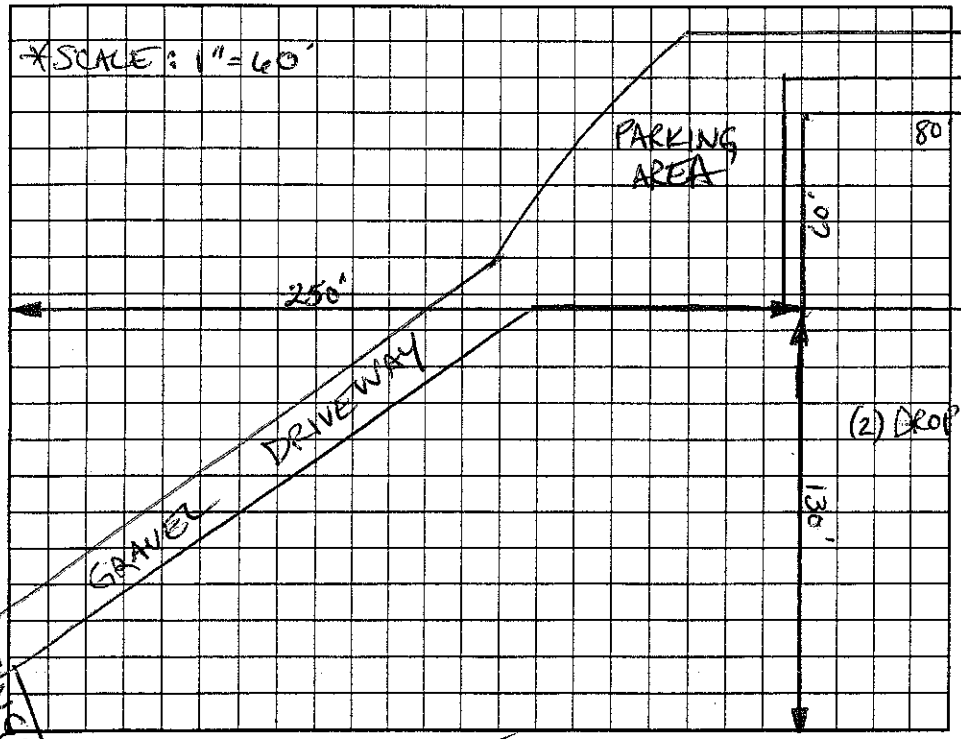
☑ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

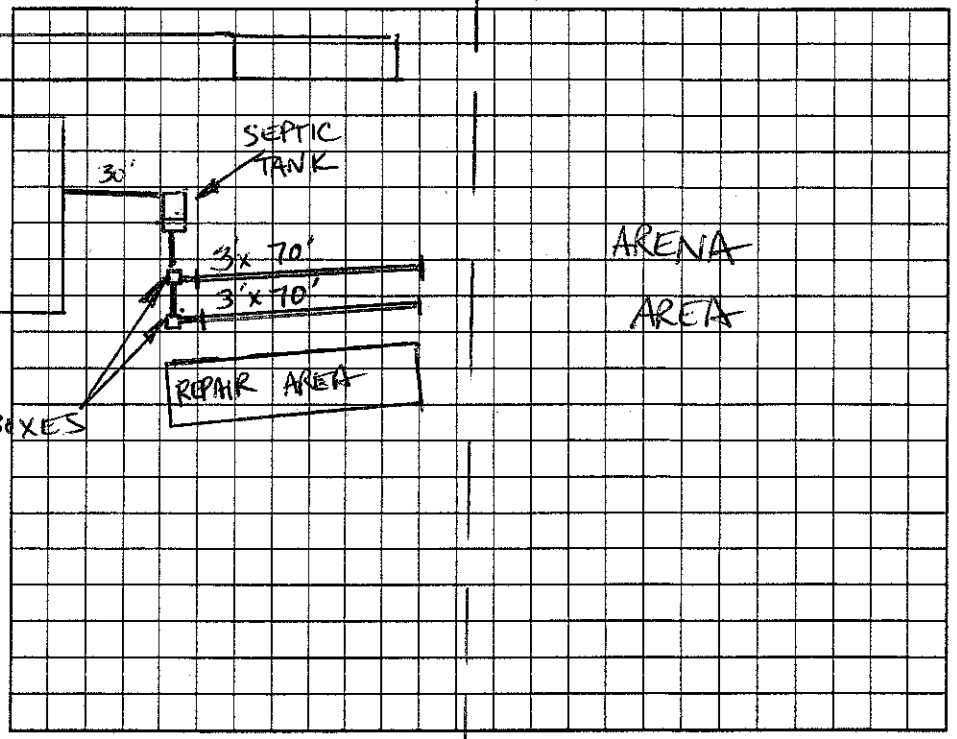
Comments:/Conditions: ① INSTALL SYSTEM ON CONTOUR ② MAINTAIN SETBACKS ③ DO NOT PARK VEHICLES, OR EQUIPMENT OVER SEPTIC AREA

Comments:/Conditions: Red filter No Risers; Green Tank

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: Thang Vu date

Improvement Permit by: Christy M. Sheppard PS, LSS date 7-5-05

Authorization to Construct by: Christy M. Sheppard PS, LSS date 7-5-05

Installed by: Dunn Grading

Operation Permit by: date 10/27/05

Existing System Inspection by: date

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