IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# REPAIR PIN# REPAIR DATE 3/23/00

OWNER OR CONTRACTOR JOHN REAVIS PHONE: Business Home 546-2356

ADDRESS 431 HAMLET RD HARMONY 28634

LOCATION 21N - TR POWELL BRIDGE - TR HAMLET - LAST HOUSE ON LEFT #431

SUBDIVISION — BLOCK / SECTION — LOT — LOT AREA ~63AC SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3gal/ft2

Septic Tank: EXISTING 1000 Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 3@133 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☐ New System ☑ Repair System Type: I, II, III, IV, V, VI

System Description:

Repair System Description: GRAVITY CONVENTIONAL

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms 2 No. Employees

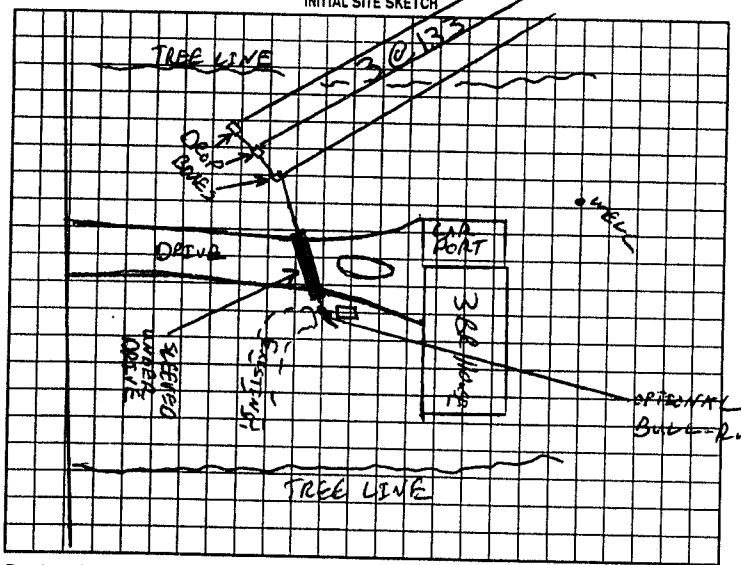
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

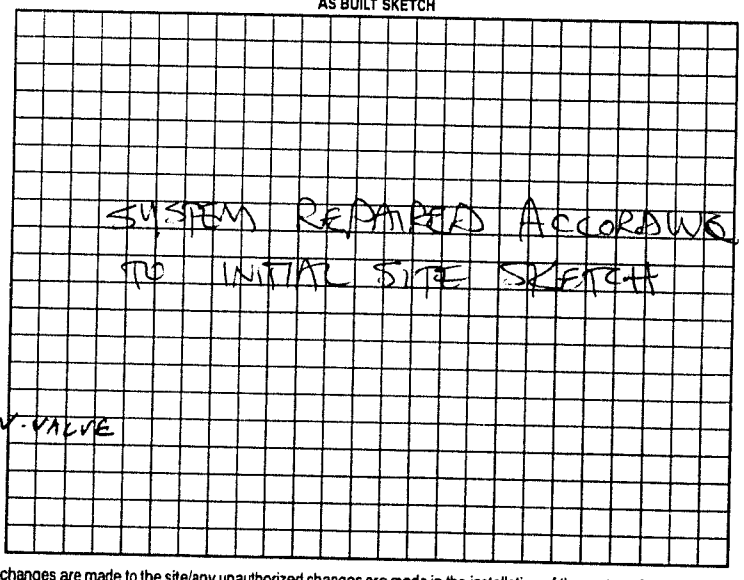
Comments/Conditions: 1) USE EXISTING TANK, REPLACE TEE IF NECESSARY 2) BULL-RUN VALVE IS OPTIONAL 3) SLEEVE UNDER DRIVE WITH DUCTILE IRON OR EQUIVALENT

Comments/Conditions: SUPPLY LINE CONNECTED TO EXISTING DISTRIBUTION BOX

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: John T Reavis date

Improvement Permit by: C. [illegible] PS date 3/23/00

Authorization to Construct by: C. [illegible] PS date 3/23/00

Installed by: Sammy REAVIS

Operation Permit by: STEVE HEDRICK date 8-26-02

Existing System Inspection by: date

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