IREDELL COUNTY HEALTH DEPARTMENT

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

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

DATE 5-15-00

PERMIT# 089129 PIN# 4891 56 3928

OWNER OR CONTRACTOR JAMES R. YORK PHONE: Business _____ Home 546-5639

ADDRESS 449 ROCK SPRINGS ROAD, HARMONY, NC 28634

LOCATION US 21 N, TR NC 901, TL SHEFFIELD RD, TL ROCK SPRINGS RD, 1.3 MILE ON LEFT

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 2.3 ACRES SITE CLASS PS DESIGN FLOW 100 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 9-13-00

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No. Fields 1 Square Feet 330 Linear Feet 110

No. Lines ONE 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: CONV. GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

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

☐ House/Mod. Home No. Bedrooms _____

☐ Mobile Home No. Bathrooms _____

☑ Business No. Employees 3

☐ Other PRIVATE SHOP

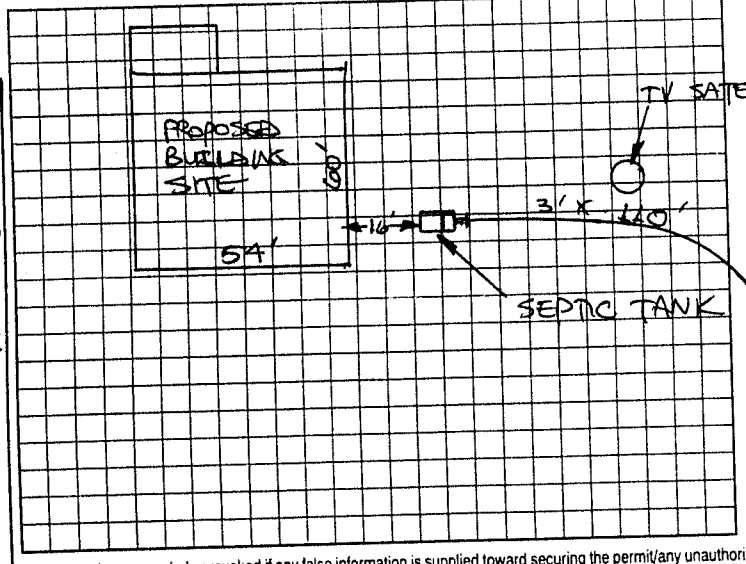
Water Supply: ☑ Individual ☐ Public ☐ Community

WELL NEAR DOOR

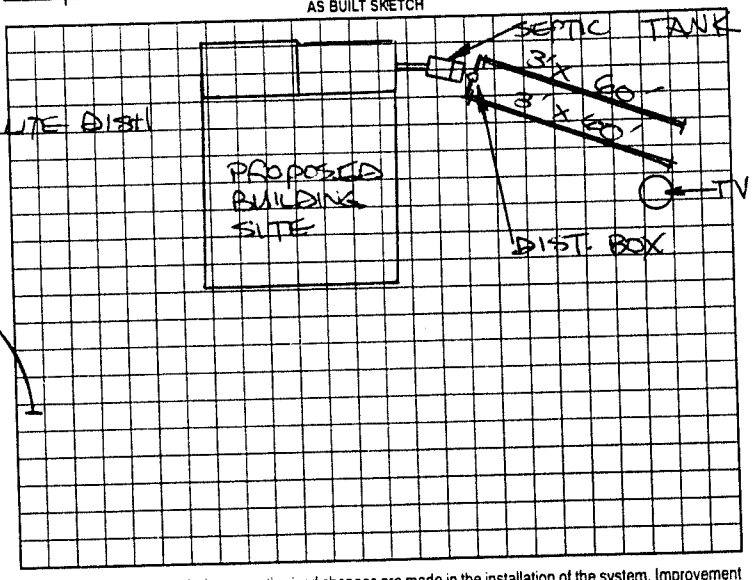
Comments:/Conditions:

Comments:/Conditions: ① SYSTEM ALTERED AS SHOWN DUE TO SUB-GRADE LOCATION WITH PRIOR HEALTH DEPT. APPROVAL ② SEPTIC TANK WITH RISERS INSTALLED USING "POLY LOK" FILTER

INITIAL SITE SKETCH SCALE: 1"=40'



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: James R. York Jr. date 5-15-00 Installed by: DAVID YOUNTZ

Improvement Permit by: STEVE HEDRICK date 5-15-00 Operation Permit by: STEVE HEDRICK date 2-1-01

Authorization to Construct by: STEVE HEDRICK date 5-15-00 Existing System Inspection by: _____ date _____

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

ROCK SPRINGS ROAD (SR 2121)