IREDELL COUNTY HEALTH DEPARTMENT

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

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

(D)

PERMIT# 142318 PIN# 4892-36-1992 DATE 5-16-07

OWNER OR APPLICANT JOHN BULLARD PHONE: Business _____ Home 336-468-6025

ADDRESS P.O. BOX 189 HAMPTONVILLE, NC 27020

LOCATION US 21 NORTH, TR E. HOUSTONVILLE ROAD, TR SANDY SPRINGS ROAD, 0.2 MILE ON LEFT

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 17.75 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 760 Date 6-10-07

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

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

No Lines FIVE Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: CONVENTIONAL, GRAVITY

Repair System Description: CONVENTIONAL, GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

☑ Gravity ☐ Pressure

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

No. Bedrooms 3 No. Persons ____ No. Employees ____

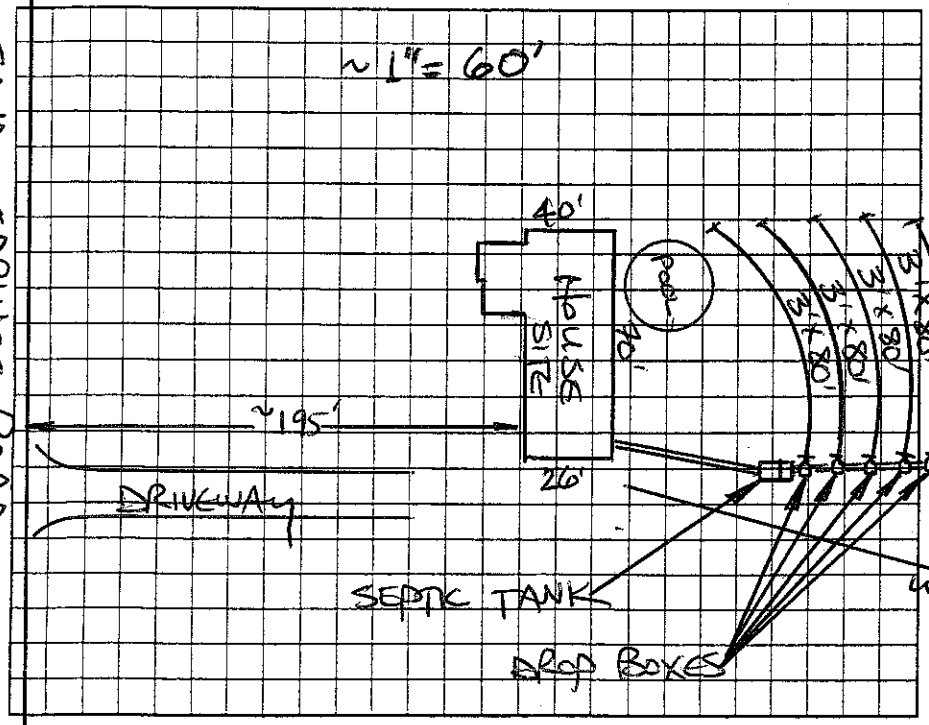
Water Supply: ☑ Individual ☐ Public ☐ Community WELL

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

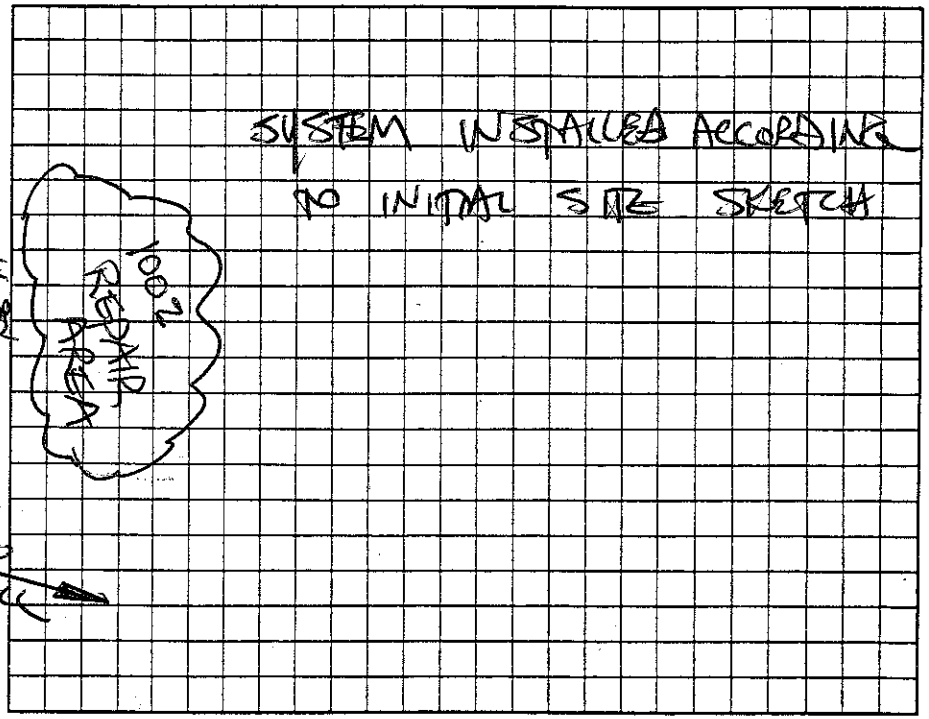
Comments:/Conditions: AN "ACCEPTED" SYSTEM MAY ALSO BE USED

Comments:/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING RED "POLY LOK" FILTER

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: J.D. Bullard date 5-16-07

Improvement Permit by: STEVE HEDRICK date 5-16-07

Authorization to Construct by: STEVE HEDRICK date 5-16-07

Installed by: SHERMAN DUNN

Operation Permit by: STEVE HEDRICK date 9-13-07

Existing System Inspection by: _____ date _____

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