IREDELL COUNTY HEALTH DEPARTMENT

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

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

(C1)

PERMIT# 13659 PIN# 4893-55-4570 DATE 7-2-03

OWNER OR CONTRACTOR PAUL JOYNER PHONE: Business _____ Home 704-546-7738

ADDRESS 2710 SANDY SPRINGS ROAD, HARMONY NC 28634

LOCATION US 21 NORTH, TR E. NEWTONVILLE RD, TL SANDY SPRINGS RD, TR PATRICK ROAD, NEXT TO LAST ON LEFT

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 100 ACRES SITE CLASS. PS DESIGN FLOW 360' L.T.A.R. 0.25 GPD/FT²

Septic Tank: 1000 Gallons; STB 620 Date 10-26-02
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 480
No Lines SIX 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: CONVENTIONAL, PUMP
Maintenance Agreement Required: ☐ Yes ☑ No

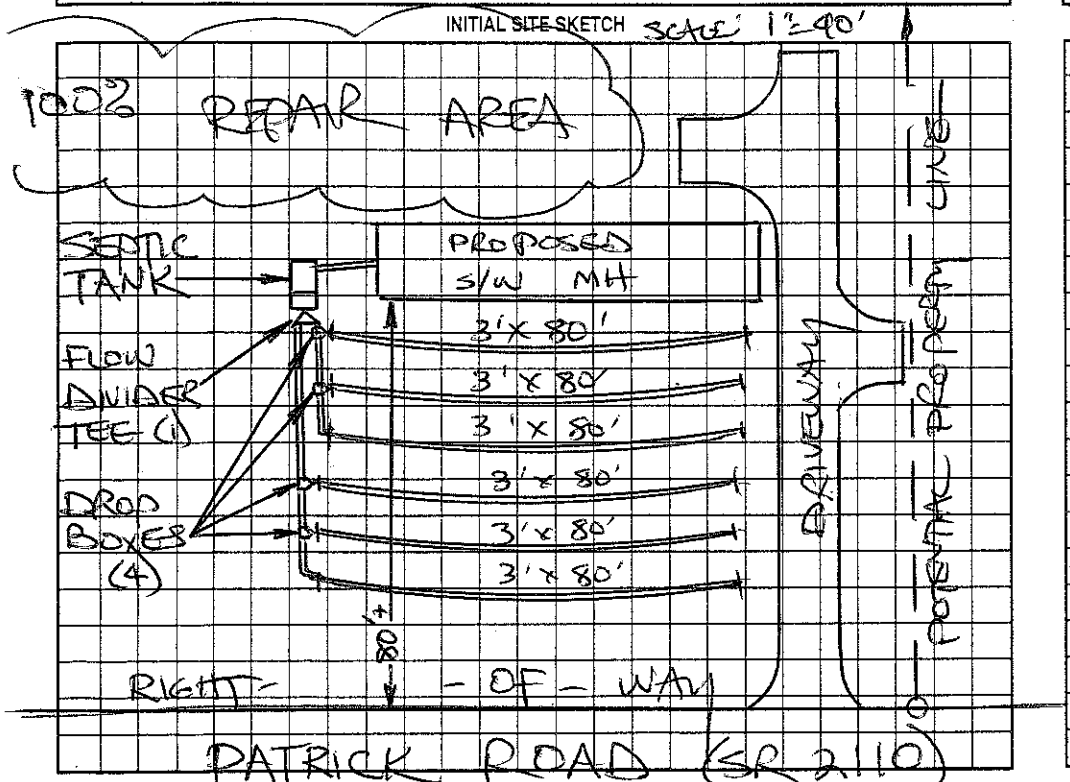
☐ House/Mod. Home No. Bedrooms 3
☑ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other _____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community
WELL

Comments:/Conditions: KEEP SYSTEM MINIMUM 100 FEET FROM WELL

Comments:/Conditions: SEPTIC TANK WITH RISERS INSTALLED USING "ZABEL" FILTER

INITIAL SITE SKETCH SCALE 1"=40'



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE 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: PAUL W JOYNER date 7-2-03 Installed by: SAMMY REAVIS

Improvement Permit by: STEVE HERRICK date 7-2-03 Operation Permit by: STEVE HERRICK date 7-25-03

Authorization to Construct by: STEVE HERRICK date 7-2-03 Existing System Inspection by: _____ date _____

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