IREDELL COUNTY HEALTH DEPARTMENT

THIS PERMIT REPLACES PREVIOUS EXPIRED PERMIT # 25250

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

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

PERMIT# 127611 PIN# 3774-93-3066 DATE 6-20-05

OWNER OR CONTRACTOR ROBERT C. BARTSCH PHONE: Business 336-918-8964 Home 631-737-6519

ADDRESS 282 COLLINGTON DR RONKONKOMA NY 11779

LOCATION STEWART ROCK ROAD TO FULBRIGHT ROAD, TR GARDNER POINT DR, TR RIDGE POINT DR 1ST LOT ON (L)

SUBDIVISION RIVERWALK BLOCK / SECTION V LOT 17 LOT AREA 6.18 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 760 Date 2-14-05
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model EQUITO Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 300
No Lines FIVE Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair System Type: I (II), IV, V, VI
System Description: 25% REDUCTION, GRAVITY
Repair System Description: 25% REDUCTION, GRAVITY
Maintenance Agreement Required: ☐ Yes ☑ No

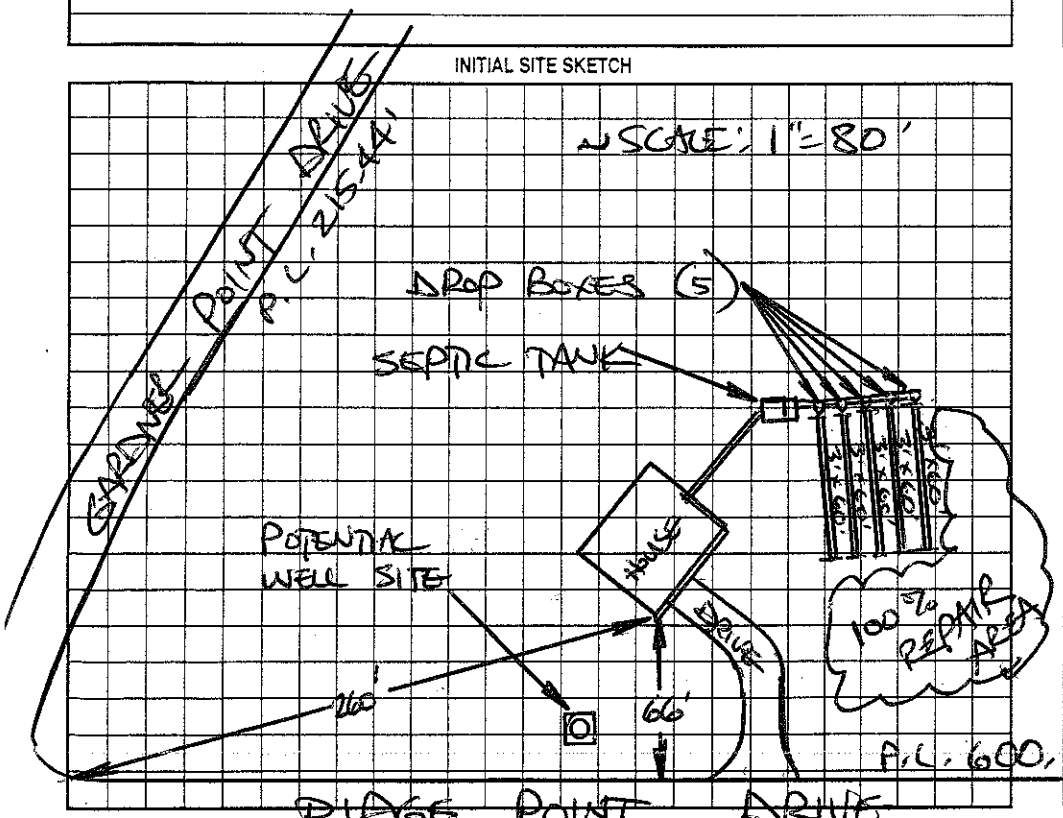
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms ____
☐ Business No. Employees ____
☐ Other ____
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community WELL

Comments:/Conditions: KEEP SYSTEM MINIMUM 100 FEET FROM WELL, INSTALL 25% REDUCTION

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

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE SKETCH USING 75 "QUICK-4" INFILTRATOR CHAMBERS

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: _____ date 6-21-05 Installed by: BRENT GAUTHER

Improvement Permit by: STEVE HEDRICK date 6-20-05 Operation Permit by: STEVE HEDRICK date 7-12-05

Authorization to Construct by: STEVE HEDRICK date 6-20-05 Existing System Inspection by: _____ date _____

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