*Repair

IREDELL COUNTY HEALTH DEPARTMENT

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

AL

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

PERMIT # Repair PIN # 3793-91-0525 DATE 17 September 10

OWNER or APPLICANT John Zika PHONE: Business Home: (704) 871-9858

OWNER or APPLICANT ADDRESS 3732 Hickory Hwy Statesville, N. C.

LOCATION / DIRECTIONS @ old Mt. Ml. Twn ofc Hwy 70 W 2 1/2 miles on R7.

SUBDIVISION BLOCK / SECTION LOT # LOT AREA 2.37ac. DESIGN FLOW 480 gpd L.T.A.R. 0.3/HTP

Septic Tank 1000 Gallons: STB 1012 Date 10-11-10
Pump Tank Gallons: PT Date
Pump Make Model Serial #
Nitrification Field No Fields 1 No Lines 5 Linear Feet 400
Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth NA

☐ New System ☑ Repair ☐ Expansion System Type I II III IV V VI
System Description:
Repair System Description: 25% Reduction
Maintenance Agreement Required ☐ YES ☑ NO
☐ GRAVITY ☐ PRESSURE

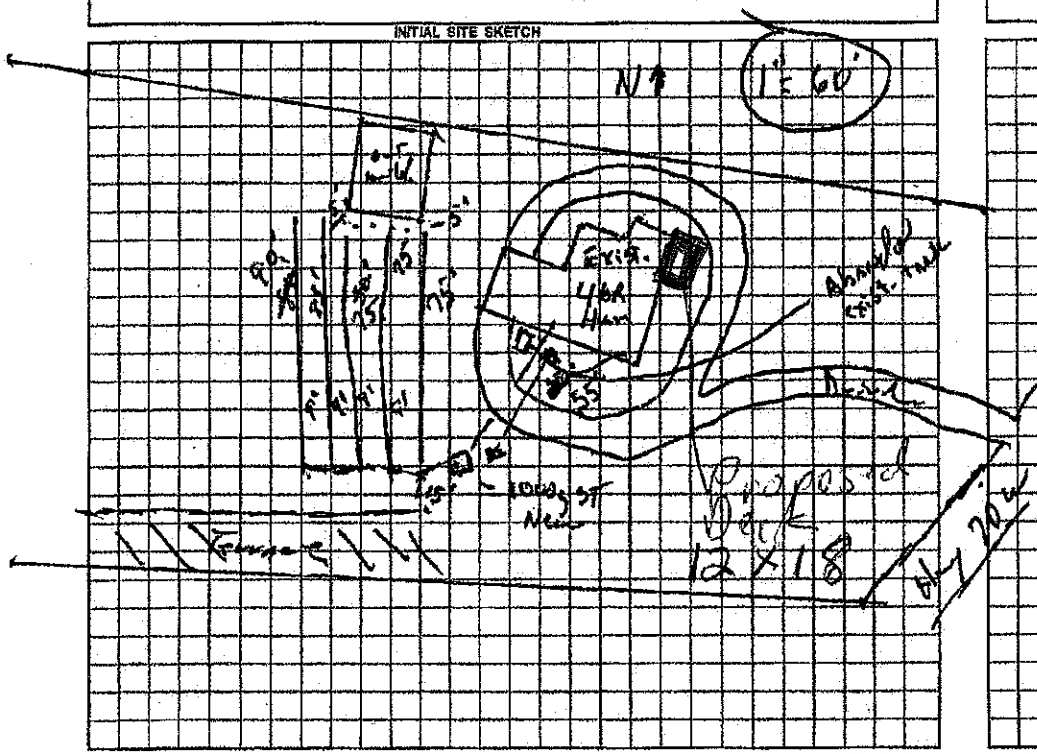
☐ Residence No. Bedrooms 4
☐ Business No. Persons
☐ Other No. Employees
☐ Slab ☐ Crawl Space
☑ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☑ Public ☐ Community

Comments / Conditions * Crossing only drive shall be greater than 30" in depth or constructed of ductile iron.

Comments / Conditions Polytuck Filter / Septic Tank has marker.

INITIAL SITE SKETCH



AS BUILT SKETCH

BioBa36 chambers installed.
Installed as drawn

Location of the proposed DECK addition does not appear to impact the existing on-site septic system.**NOTE: KEEP MINIMUM 5' FROM SYSTEM

R. STEVE HENDRICK REHS
Date: APRIL 4 2012
ICHD-Environmental Health Division

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 w / plat valid without expiration. ☑ IMPROVEMENT PERMIT w / site plan valid for 60 mos. ☑ AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT-not to exceed 60 mo.

Owner / Applicant Signature: Karen Zika Date 9-23-2010
Improvement Permit by: R.S. Date 21 Sept. 10
Authorization to Construct by: R.S. Date 21 Sept. 10
YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

Installed by: Ground Improvement
Operation Permit by: R.S. Date: 14 Jul 11
Existing System Inspected by: Date:

WHITE COPY Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant