704-664-6509

IREDELL COUNTY HEALTH DEPARTMENT

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

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

Paid #67000

PERMIT # 141488 PIN # 4624 21 1796 DATE August 30, 2010

OWNER or APPLICANT Jeff Hunt & Colleen Hunt PHONE: Business 914-474-6130 Home:

OWNER or APPLICANT ADDRESS 1061 Rt. 376 Wappinger Falls NY 12590

LOCATION / DIRECTIONS Brawley School Rd. to the end bear right on to Points End Dr. on right Address 158

SUBDIVISION Ch & T (Mack-Neck) BLOCK / SECTION 6 LOT # 437 LOT AREA .63 Ac. DESIGN FLOW 600 gpd L.T.A.R. .3 gpd/ft²

Septic Tank [redacted] Gallons: STB [redacted] 441 Date 5-7-11

Pump Tank [redacted] 1500 Gallons: PT 477 Date 4-11-11

Pump Make Gould's Model Vesim Serial # ½ HP

Nitrification Field No Fields 1 No Lines 6 Linear Feet 336

Trench Width 24" Max. Trench Bottom Depth 36" Gravel Depth 6" sand ☐ GRAVITY ☒ PRESSURE

☒ New System ☐ Repair ☐ Expansion System Type I II III (IV) V VI

System Description: LP PPBPS

Repair System Description: TS-II Pretreated PPBPS LP

Maintenance Agreement Required ☒ YES ☐ NO

☒ Residence No. Bedrooms 5

☐ Business No. Persons 10

☐ Other No. Employees

☐ Slab ☐ Crawl Space

☒ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions

Remove berm below system before OP

Call H.D. about inspection of septic tank installed by owner

Comments / Conditions

INITIAL SITE SKETCH

See Plan from Michael Athanas & Assoc.
Approved by ICHD

AS BUILT SKETCH

1000 GAL TANK INSTALLED
THEN CHANGED TO 500
BERM REMOVED

The proposed / existing Pool addition does not appear to impact the existing septic system.

**NOTE: _____ REHS

Date: 5-20-11

ICHD-Environmental Health Division

PRESSURE HEAD SET
CVS CHECKED

STILL NEEDS ELEC.

FAXED
ABERNATHY 7-12-11

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: [signature] Date 9/13/10

Improvement Permit by: Judy Melville Date 8-30-10

Authorzation to Construct by: Judy Melville Date 9-13-10

Installed by: ABERNATHY

Operation Permit by: [signature] Date: 6-28-13

Existing System Inspected by: _____ Date: _____

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

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