IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT # 157870 PIN # 4627607285 DATE 8-14-2009

OWNER or APPLICANT Joseph Polak PHONE: Business 704 516 5593 Home: 704 360-4330

OWNER or APPLICANT ADDRESS 409 Grasshopper Circle Mooresville, NC 28117

LOCATION / DIRECTIONS Brawley School

SUBDIVISION C & T BLOCK / SECTION 8 LOT # 458 LOT AREA _____ DESIGN FLOW 360 gpd L.T.A.R. _____

Septic Tank Exist 1000 Gallons: STB _____ Date _____

Pump Tank _____ Gallons: P T _____ Date _____

Pump Make _____ Model _____ Serial # _____

Nitrification Field No Fields ____ No Lines ____ Linear Feet Existing

Trench Width _____ Max. Trench Bottom Depth _____ Gravel Depth _____

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

System Description: Exist: Grav. Conv.

Repair System Description: _____

Maintenance Agreement Required ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

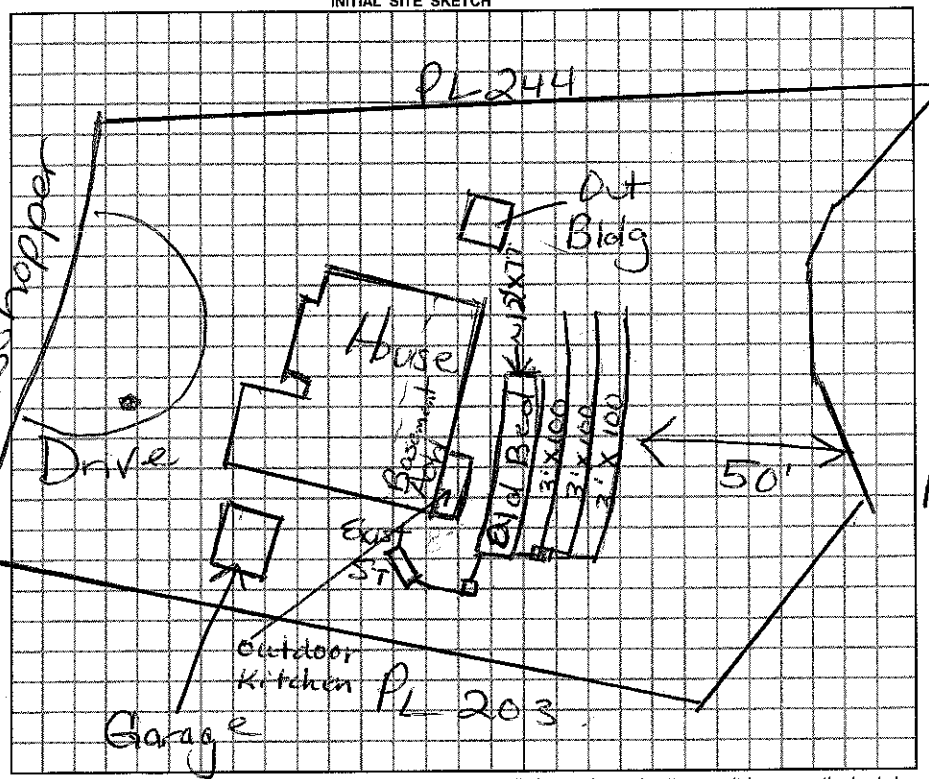
☒ Residence No. Bedrooms 3-4 ☐ Business No. Persons _____ ☐ Other No. Employees _____ ☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Existing Septic System appears to be functioning okay at time of inspection.

Comments / Conditions: Addition of Basement, formerly a Crawl space Should not impact Septic System. Permit referenced was Existing permit 3/22/96

INITIAL SITE SKETCH



AS BUILT SKETCH

Could not find original permit
* Note if Old Bed ~ 17ft x 12ft is used Site may be approved For 4 Bedrooms.

The location of the proposed Outdoor Kitchen addition does not appear to impact the existing septic system.

**NOTE: Shall be min. 5' from septic system

Cindy Melville REHS

Date: 11-01-12

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: _____ Date 8/21/09

Improvement Permit by: Maria H. Dotson RS Date 8/17/09

Authorization to Construct by: Maria H. Dotson RS Date 8/17/09

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION!

Installed by: _____

Operation Permit by: _____ Date: _____

Existing System Inspected by: Maria H. Dotson RS Date: 8/17/09

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