# IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 204822

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

PIN # 4628698745

APPLICANT: Richard Clay APPLICANT ADDRESS: 1005 Paschal Dr Winston Salem NC 27106

SITE ADDRESS: 226 Allendale Circle PHONE: 336-782-5624 ALT. PHONE: N/A

SITE DIRECTIONS: 115 to Reth T/L State Park T/L Moorison Farm T/L Allendale Cir

SUBDIVISION: Allendale Point SECTION: N/A LOT # 21 LOT AREA: .5ac DESIGN FLOW: EX L.T.A.R.: EX

Septic Tank 1000 (gal) STB 794 Date 7-17-14
Pump Tank N/A (gal) PT N/A Date N/A
Pump Make N/A Model Polylok Serial # PL-68
# Nitrification Fields 1 # Lines EX Linear Ft: EX
Trench Width EX Max. Trench Bottom Depth EX Gravel Depth EX

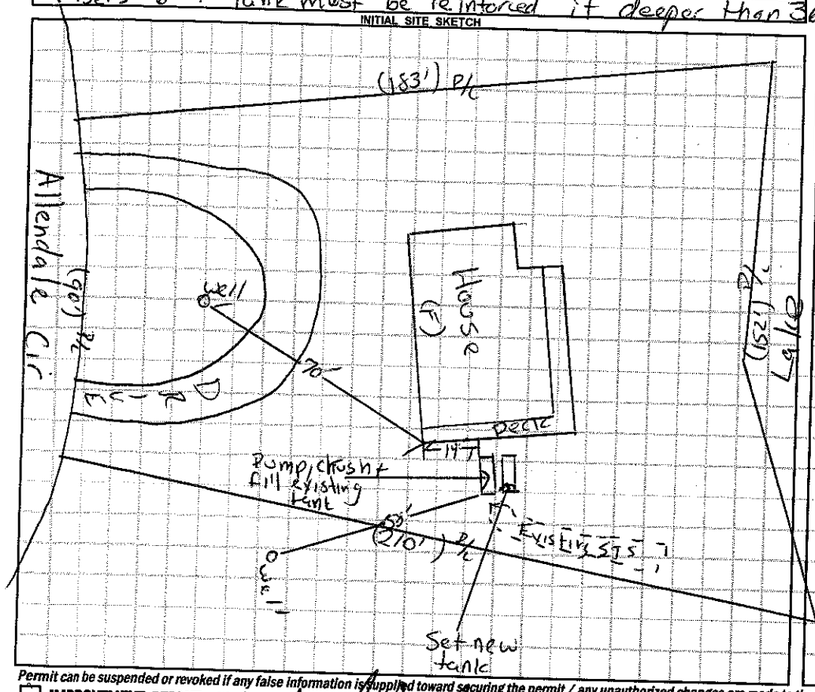
☐ New System ☒ Repair ☐ Expansion System Type: I / II / III IV V VI
System Description: Tank
Repair System Description:
Maintenance Agreement Required: ☐ YES ☒ NO
☒ GRAVITY ☐ PRESSURE

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

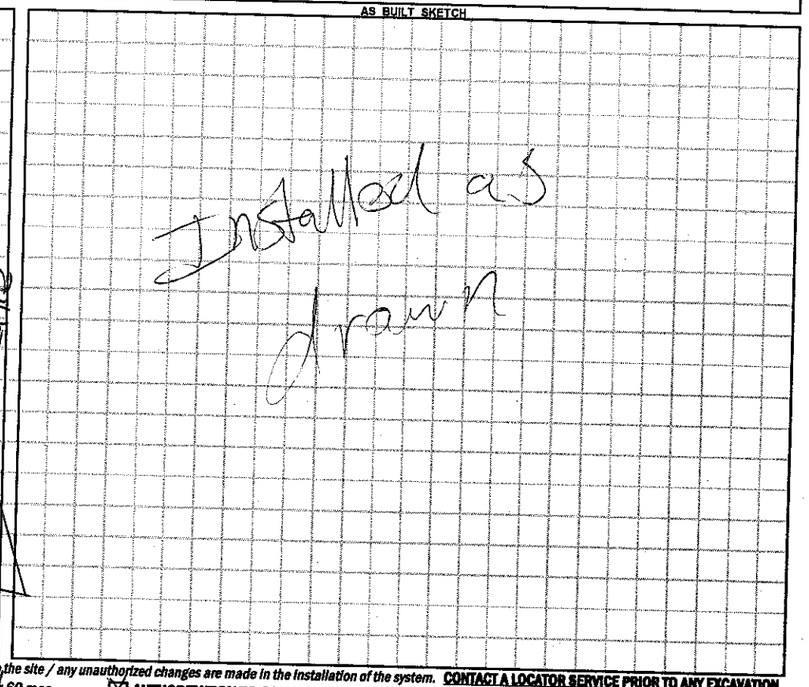
Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Pump, crush & fill existing tank. Maintain minimum of 5' off basement, 10' off P/L and 50' off lake. Maximum amount of cover over risers 6". Tank must be reinforced if deeper than 36"

INITIAL SITE SKETCH




AS BUILT 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.* **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Richard Clay Date: 7/28/14 Installed by: Abernathy Septic

IMPROVEMENT PERMIT by: Date: 07/28/14 OPERATION PERMIT by: Date: 08/27/14

AUTHORIZATION TO CONSTRUCT by: Date: 07/28/14 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK