IREDELL COUNTY HEALTH DEPARTMENT

As Built

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

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

PERMIT # NA PIN # 4628966306.000 DATE 12/4/08

OWNER or APPLICANT Alan Kolb PHONE: Business 903 935-7823 Home: 903 926-4787

OWNER or APPLICANT ADDRESS PO Box 1267 Marshall TX 75671

LOCATION / DIRECTIONS N. Perth Rd TL Fern Hill To End Pt of View LT on Left

SUBDIVISION Point of View BLOCK / SECTION LOT # 3 LOT AREA .97 DESIGN FLOW 480 L.T.A.R. 35

Septic Tank 1500 Installed Gallons: STB FRALO 2012 Date

Pump Tank Gallons: PT Date

Pump Make Model Serial #

Nitrification Field No Fields 1 No Lines 5 Linear Feet 150'

Trench Width 24" Max. Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: Grav PPBPS

Repair System Description: Pump 25% of Panel

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

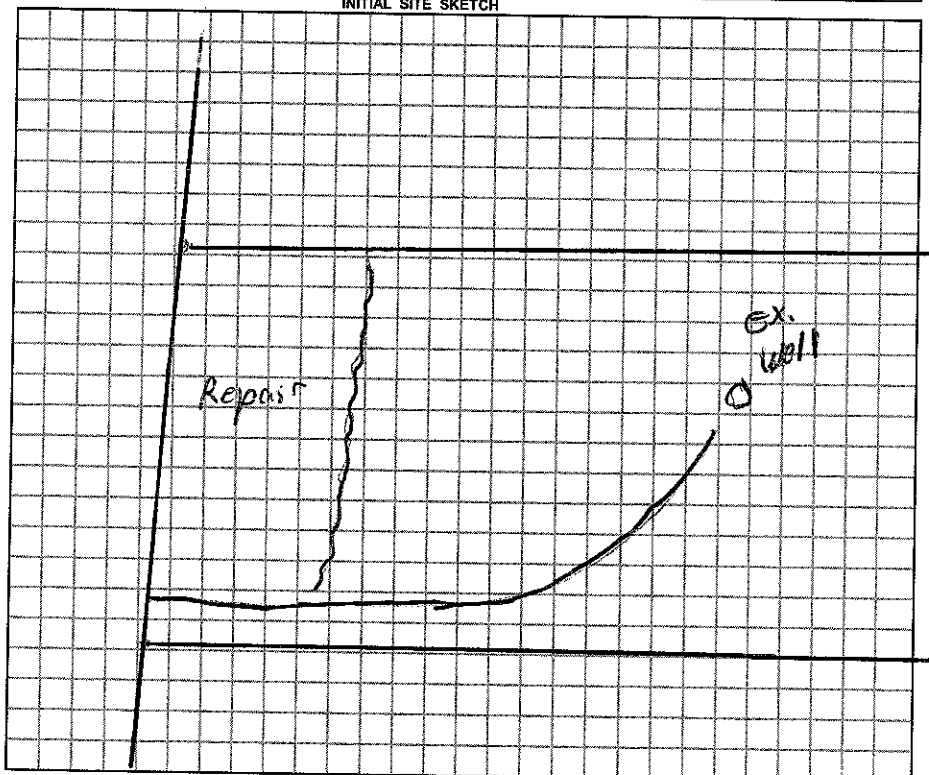
Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions

Comments / Conditions

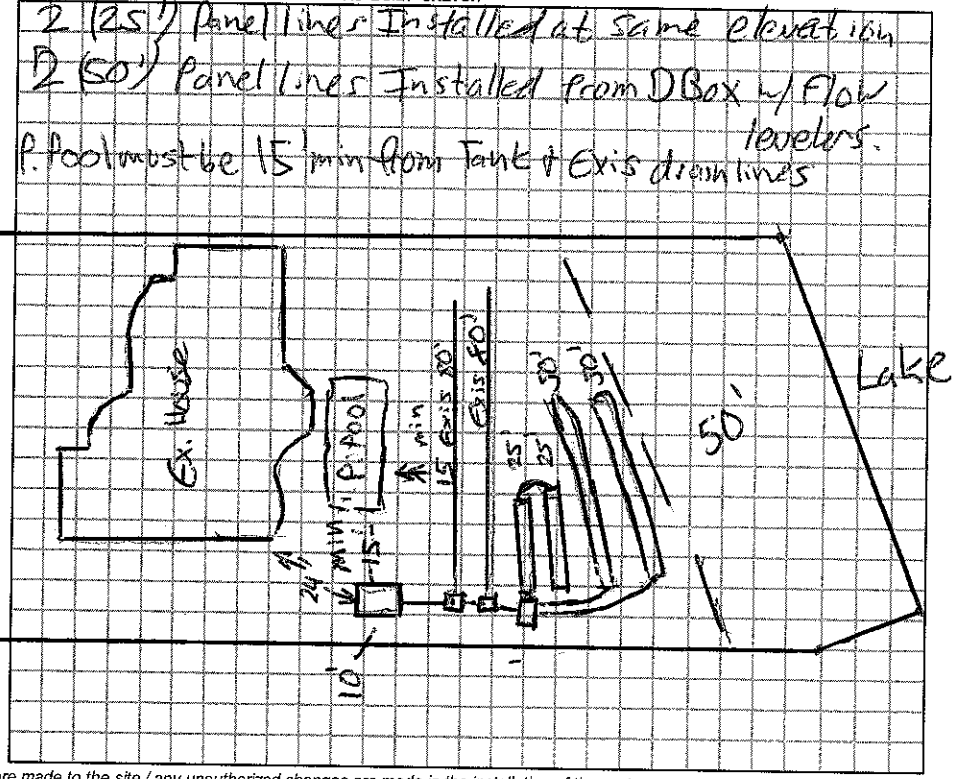
1" = 50'

INITIAL SITE SKETCH



AS BUILT SKETCH

2 (25') Panel Lines Installed at Same elevation
2 (50') Panel Lines Installed from DBox w/Flow levelers.
P. Pool must be 15' min from Tank & Exis drain lines



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 _____

Improvement Permit by: _____ Date _____

Authorzation to Construct by: _____ Date _____

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

Installed by: Gary Leatherman

Operation Permit by: Anthony Cokes for RS. Date: 12/4/08

Existing System Inspected by: _____ Date: _____

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

IREDELL COUNTY HEALTH DEPARTMENT

Expansion ones Ø

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

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

PERMIT# N/A PIN# 4628966300.000 DATE 7/18/08

OWNER OR APPLICANT Alan Kolb PHONE: Business 903 926-4781 Home 903 935-7823

ADDRESS PO Box 1267 Marshall TX 75671

LOCATION North Rd TL Fern Hill to End Pt of View 117 on Left

SUBDIVISION Point of View BLOCK / SECTION ____ LOT 3 LOT AREA .97 ac. SITE CLASS PS DESIGN FLOW 480 (Total) L.T.A.R. .35

Septic Tank: 1000 New Gallons: STB ____ Date ____

Pump Tank: ____ Gallons: PT ____ Date ____

Pump Make: ____ Model ____ Serial No. Use Exis 160'

Nitrification Field: No Fields 1 Square Feet 450' new Linear Feet 150'

No Lines 3 new Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth ____

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

System Description: Gravelless PPBPS

Repair System Description: Pump 25% or Panel

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Persons ____

☐ Business No. Employees ____

☐ Other ____

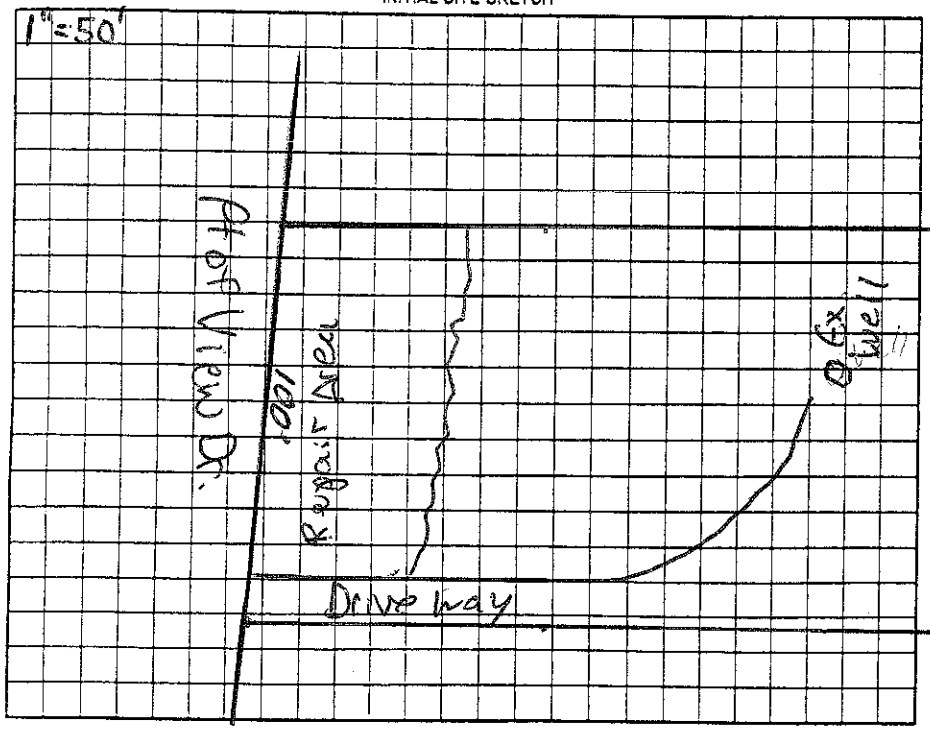
Water Supply: ☑ Individual Exis. ☐ Public ☐ Community

☐ Gravity ☐ Pressure ☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

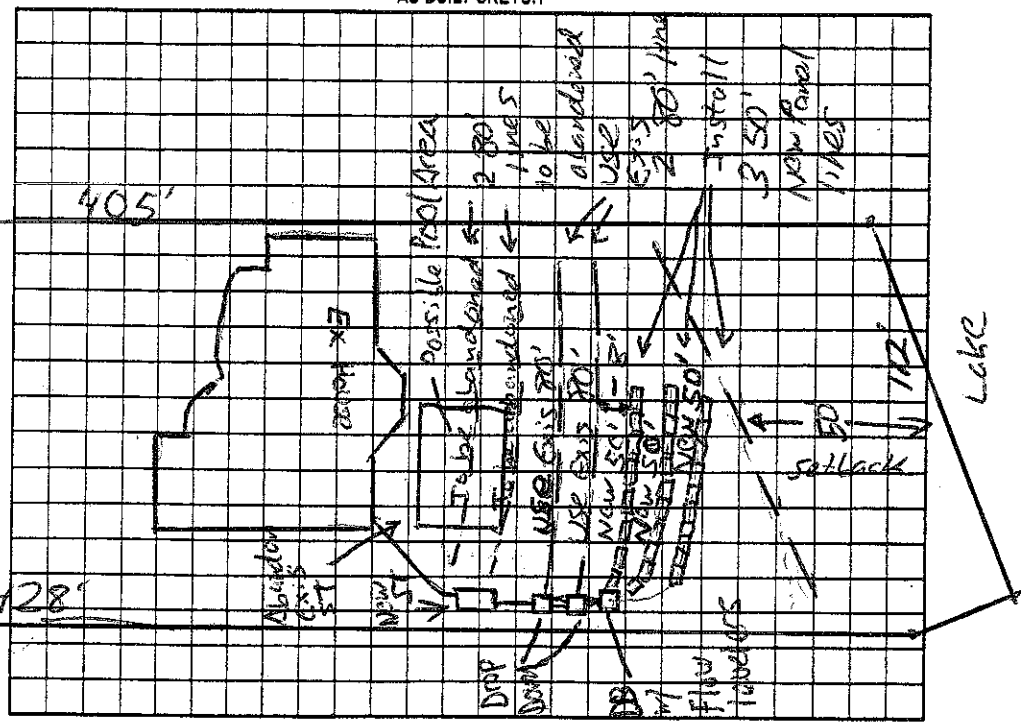
Comments/Conditions: Use last 2 Exis 80' drain lines use Drop downs for serial distribution into a new DBox w/ Flowleveler to feed 3 New 50' PPBPS lines. Abandon Exis ST & Abandon 1st 2 80' Exis lines.

Comments/Conditions: House is using room as Bedroom making it 4 BR house NO zoning permit necessary Keep 1st grav Panel line 8' min from Exis. 80' line.

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. 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 [signature] date 7-18-08

Improvement Permit by: Anthony Cokers Jr. R.S. date 7/18/08

Authorization to Construct by: Anthony Cokers Jr. R.S. date 7/18/08

Installed by: ____

Operation Permit by: See Asbuilt date ____

Existing System Inspection by: ____ date ____

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