IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 133985 PIN# 4636826241 DATE 3-17-06

OWNER OR APPLICANT Gabriel Varga PHONE: Business 828-217-2800 Home 828-441-0360

ADDRESS 4509 18th St. LN. NE Hickory NC 28601

LOCATION Brawley School Rd TL Canvas back on left across from Kelly Cove Ct.

SUBDIVISION Woodland Hills BLOCK / SECTION 3 LOT 39 LOT AREA .47 Ac SITE CLASS. P3 DESIGN FLOW 480gpd L.T.A.R. .3gpd/ft²

Septic Tank: 1000 Gallons; STB 1012 Date 10/10/06

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 400

No Lines 4 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: 25% Reduction Gravity

Repair System Description: LP Panel

Maintenance Agreement Required: ☐ Yes ☒ No

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

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Persons ____ No. Employees ____

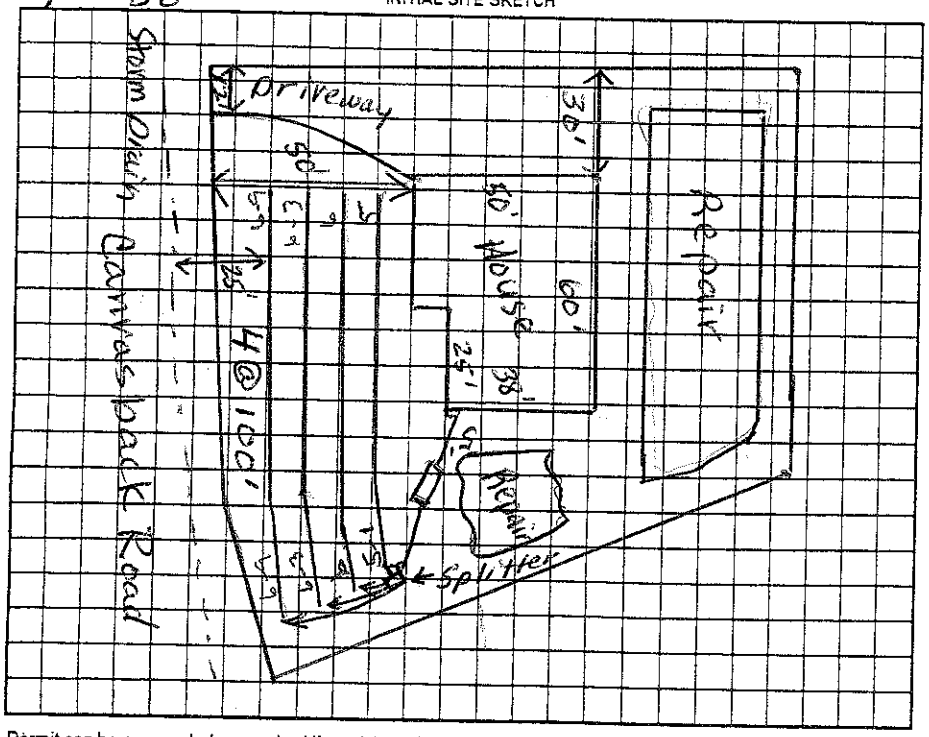
Water Supply: ☐ Individual ☐ Public ☒ Community

Comments:/Conditions: Keep water line 10' from septic system
Use Effluent Splitter such as Zoehler

Comments:/Conditions: Applicant will ensure that water line will be installed w/in 1' of property line

1"=50'

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: _____ date 3/27/06 Installed by: Tony Fuge

Improvement Permit by: Judy Merrill date 3-17-06 Operation Permit by: _____ RS date 11/27/06

Authorization to Construct by: Judy Merrill date 5-9-06 Existing System Inspection by: _____ date _____

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