IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 20527B

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

PIN # 4636980171

APPLICANT: BERT HRUSKA | APPLICANT ADDRESS: 151 AMSTERDAM DR CLAYTON NC

SITE ADDRESS: 117 WOOD DUCK LOOP | PHONE: | ALT. PHONE:

SITE DIRECTIONS: BRAWLEY SCHOOL RD (L) CANVASBACK (L) 1st WOOD DUCK LOT ON (R)

SUBDIVISION: LAKESIDE FARMS | SECTION: 1 | LOT # 3 | LOT AREA: .55 AC | DESIGN FLOW: 360 | L.T.A.R.: .25 gpd/Ft²

Septic Tank	1000 (gal)	STB	825	Date	10-3-14	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms 3
Pump Tank	1000 (gal)	PT	302	Date	9-10-14	System Description:	PPBAS-CVB-40P see			☐ Business	No. Persons 6
Pump Make	ZOLLER	Model	N152	Serial #		Repair System Description:	REPAIR EXEMPTED PLAT			☐ Other	No. Employees
# Nitrification Fields	1	# Lines	5	Linear Ft:	240	Maintenance Agreement Required:	☒ YES	☒ NO		☐ Slab	☒ Crawl Space
Trench Width	24"	Max. Trench Bottom Depth	40"	Gravel Depth	N/A SAND		☐ GRAVITY	☒ PRESSURE		☐ Basement w/ plumbing	☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☒ Community

Comments / Conditions: INSTALL AS PER ATTACHED DESIGN

* 5/32 Hole used
* 55 Total Panels

INITIAL SITE SKETCH

SEE ATTACHED DESIGN BY MICHAEL ATHANAS & ASSOCIATES APPROVED BY ICHD 8-28-14

FOUNDATION DRAIN REMOVED PER TIM @ CUSTOM CONST.

BA

Wood Duck Lp

	Date	Initials
Drain Lines Checked	11-14-14	ALP
Tanks Checked	11-14-14	ALP
Pressure Manifold or Valve Box Checked	11-14-14	ALP
Pressure Head Set	11-14-14	ALP
Electrical Checked	2-19	BA
Floats Set		
Alarm Checked	2-19	BA
Maintenance Contract Y / N		

AS BUILT SKETCH

1"=50'

157.17' | 20.37' | 39.68' | 224.54' | 25.93' | 50' | 22' | 119.55' | 53' | 61' | 18' | 15' | CVB | PT | ST | HOUSE | DRIVE | PRIVATE LAKE | OF | WATERS | EDGE | NEIGHBORS WELL

* FOUNDATION DRAIN AROUND WHOLE HOUSE, GARAGE NEEDS DRAIN REMOVED PRIOR TO ISSUING THE OP TO MEET SETBACK, TANK ARE LOCATED WELL BELOW DRAIN ELEVATION.

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**

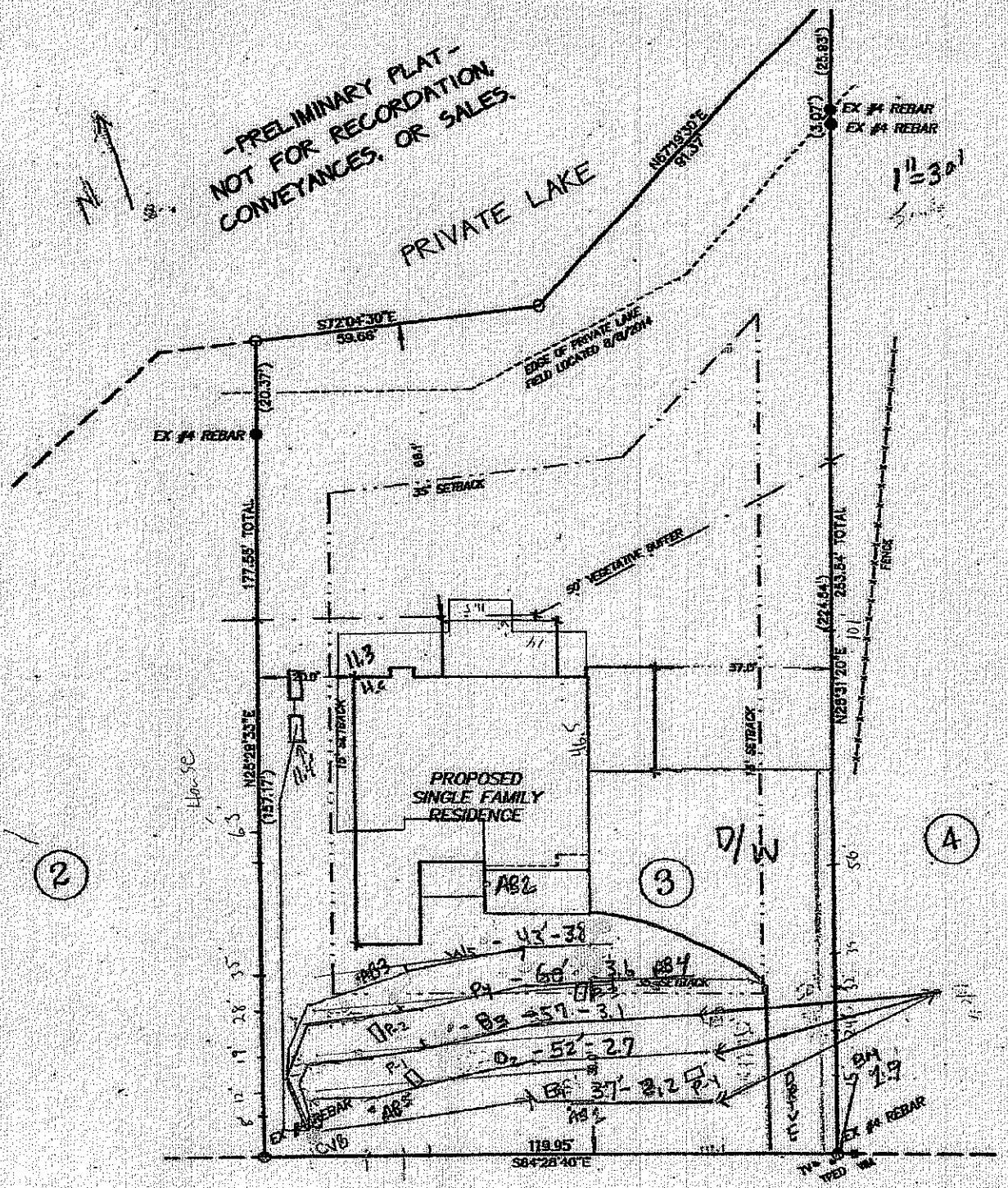
☐ **IMPROVEMENT PERMIT** *with plan valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: [signature] Date: 9/9/14 Installed by: Rowan Septic

IMPROVEMENT PERMIT by: [signature] REHS-CSS Date: 9-28-14 OPERATION PERMIT by: [signature] Date: APPROVED FEB 20 2015

AUTHORIZATION TO CONSTRUCT by: [signature] Date: APPROVED SEP 10 2014 Existing System Inspected by: Date:

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



OF
ICHD
8-28-14