IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625

3130

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

PERMIT # 201716 ✓ JHA

PIN # 4638297369

APPLICANT: Tonya Mansch

APPLICANT ADDRESS: 543 Kenway Ln

SITE ADDRESS: 505 Kenway Ln

PHONE: 980-722-2813 ALT. PHONE: N/A

SITE DIRECTIONS: Hwy 150W TR Beth Rd TL Fern Hill Rd TL Kenway Ln

SUBDIVISION: CL+T

SECTION: 15 LOT # 1022 LOT AREA:

DESIGN FLOW: 360gpd L.T.A.R.: 0.3

Septic Tank 1000 (gal) STB 760 Date 5-21-14

Pump Tank 1000 (gal) PT 3603 Date 7-1-14

Pump Make Model Serial #

Nitrification Fields 1 # Lines 3 Linear Ft: 300

Trench Width 36" Max. Trench Bottom Depth 33" Gravel Depth N/A

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

System Description: 25% Reduction

Repair System Description: 50% Reduction

Maintenance Agreement Required: ☐ YES ☑ NO

☐ GRAVITY ☐ PRESSURE

☑ Residence ☐ Business ☐ Other ☐ Slab ☑ Basement w/plumbing

No. Bedrooms 3 No. Persons 6 No. Employees

☐ Crawl Space ☐ Basement w/o plumbing

Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions: Install a 25% Reduction system on contour with parallel distribution utilizing a pressure manifold. IMPROVEMENTS ONLY! Submit floor plan prior to issuance of CA!

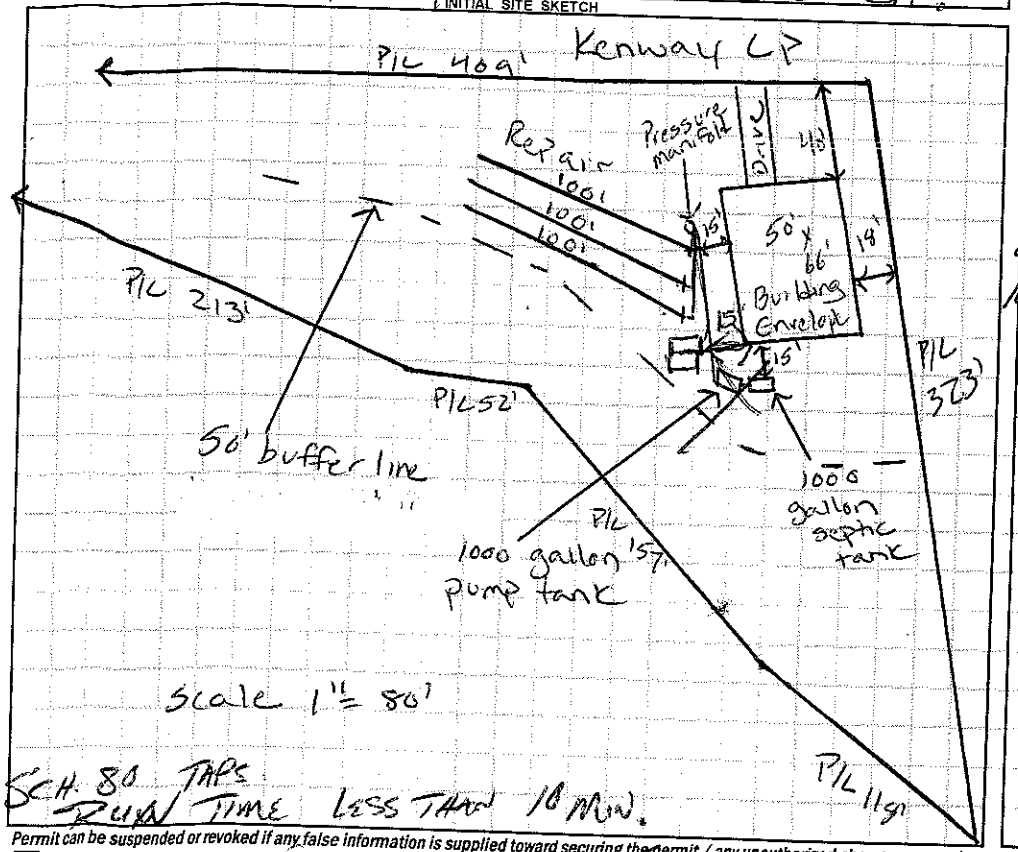
15ft from house to tanks

9/19/14 Checked tanks & topline only

Used Infiltrator Quick 4

9/22/14 Checked lower 2 lines

INITIAL SITE SKETCH



AS BUILT SKETCH

Need to shave off a little fill on end of last line

Pump & Alarm on same breaker 10/28/14

Checked O/K SC

10/31/14 SC

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: Tonya Mansch Date: 3/17/14 Installed by: Gunter Grading

IMPROVEMENT PERMIT by: Date: 3-12-14 OPERATION PERMIT by:

AUTHORIZATION TO CONSTRUCT by: Date: 5-23-14 Existing System Inspected by: Date:

APPROVED OCT 31 2014

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