IREDELL COUNTY HEALTH DEPARTMENT - *ENVIRONMENTAL HEALTH* ☐ STATESVILLE OFFICE 704-878-5305 ☐ ...E 704-664-5281

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

PERMIT # 17157 PIN # 4638-37-0880 DATE 3-28-12

OWNER ANGELA & TY WIGGINGTON APPLICANT: NANTZ BUILDING CO. PHONE: Home/Cell # 704-528-6043 Business #

SITE ADDRESS 605 KENWAY LP. OWNER / APPLICANT ADDRESS 17472 TUSCANY LN. CORNELIUS

SITE DIRECTIONS PERTH, FERNHILL, KENWAY, ON R

SUBDIVISION CLT BLOCK / SECTION 15 LOT # 51 LOT AREA 1.51 AC DESIGN FLOW 720 GPD L.T.A.R. .3

Septic Tank 1500 Gallons: STB 578 Date 12-5-11
Pump Tank ____ Gallons: P T ____ Date ____
Pump Make ____ Model ____ Serial # ____
No. Nitrification Fields: 1 No. Lines 60 Linear Feet 600'
Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth ____

☒ New System ☐ Repair ☐ Expansion System Type I II III IV V VI
System Description: GRAVITY 25%
Repair System Description: PANEL BLOCK
Maintenance Agreement Required ☐ YES ☒ NO
☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 6
☐ Business No. Persons ____
☐ Other No. Employees ____
☐ Slab ☒ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions

INITIAL SITE SKETCH

SEE ATTACHED DRAWING BY ICHD

RA

NO DRAWING FOUND

NO SITE PLAN

AS BUILT SKETCH

INSTALLED SEPTIC

HOUSE

POOL

REPAIR

The location of the proposed Pool addition does not appear to impact the existing septic system.
**NOTE: Shall be min. 15' from septic system

See site Plan Paid $40

Audrey Melvill REHS
Date: November 6, 2012
ICHD-Environmental Health Division

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

Owner / Applicant Signature: ____ Date 3-28-12 Installed by: TOMMY FRY

IMPROVEMENT PERMIT by: RA REHS Date 3-28-12 OPERATION PERMIT by: ____ REHS Date 7-18-13

AUTHORIZATION TO CONSTRUCT by: RA REHS Date 3-28-12 Existing System Inspected by: ____ REHS Date ____

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

White Copy – Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant