IREDELL COUNTY HEALTH DEPARTMENT

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

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

4639303784

PERMIT# 135545 PIN# 4639 80 3783 DATE 5/10/06

OWNER OR APPLICANT Pete Bertemus PHONE: Business [illegible] Home 704-528-7946

ADDRESS 395 Kenway Lp. Mooresville, NC. 28117

LOCATION Perth N TL Perth Hill TL Bayley TL Kenway Lp. to 2nd drive on R

SUBDIVISION CL+T BLOCK / SECTION 15 LOT 1027 LOT AREA ~1AC SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: EXISTING Gallons; STB ____ Date ____

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields EXISTING Square Feet SYSTEM Linear Feet ____

No Lines ____ Trench Width ____ Max Trench Bottom Depth 5' 3' GRAVEL Gravel Depth ____

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

System Description: EXISTING - GRAVITY

Repair System Description: ____

Maintenance Agreement Required: ☐ Yes ☒ No

☐ Gravity ☐ Pressure

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Persons 3

☐ Business No. Employees ____

☐ Other ____

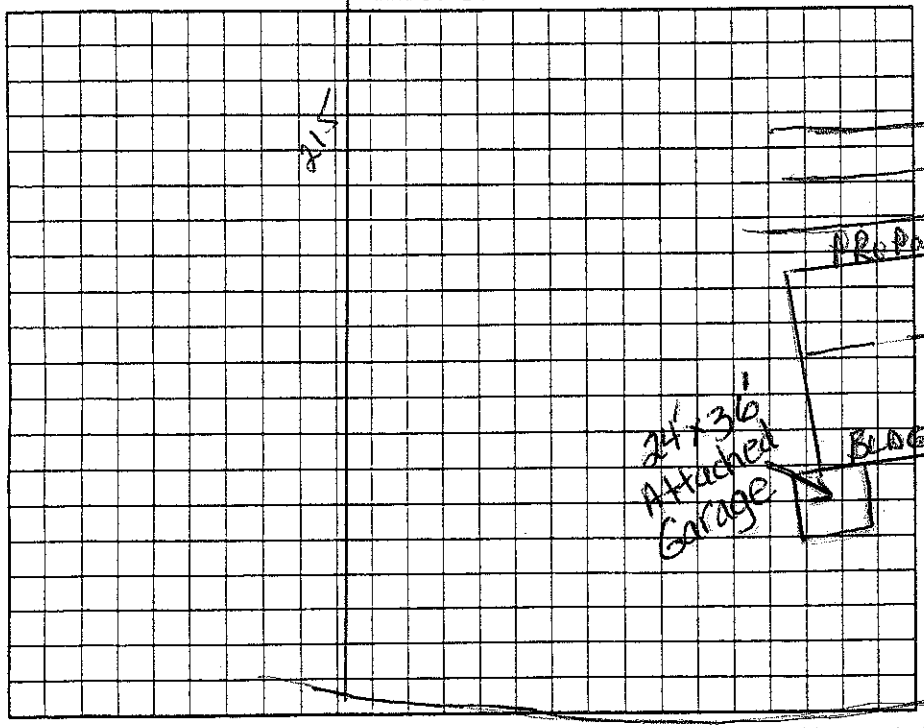
Water Supply: ☐ Individual ☐ Public ☐ Community

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

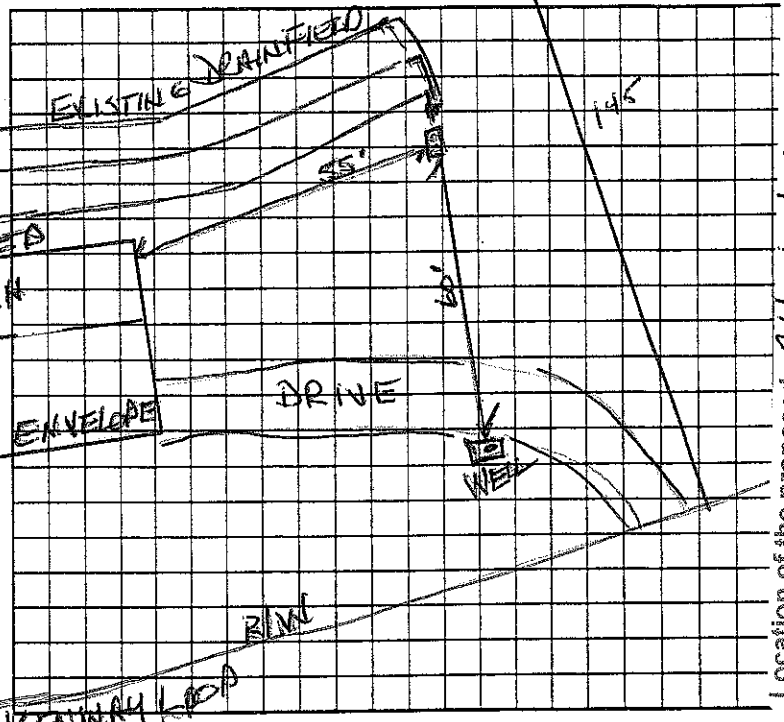
Comments:/Conditions:

Comments:/Conditions:

INITIAL SITE SKETCH



AS BUILT SKETCH



Location of the proposed Attached Garage addition does not appear to impact the existing on-site septic system. **NOTE: >25' from well

Date: 6-14-11 REHS

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 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: Pete Bertemus date 5/17/06 Installed by: Harry Reep

Improvement Permit by: ____ date ____ Operation Permit by: ____ date ____

Authorization to Construct by: ____ date ____ Existing System Inspection by: Wesley Sparks RS date 5/10/06

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