IREDELL COUNTY HEALTH DEPARTMENT

704-36-5215 – 704-746-7726

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

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

PERMIT # 164405 PIN # 4645-09-5874 DATE 1-19-11

OWNER or APPLICANT JOHN ANDRETTI PHONE: Business 704-664-2809 Home:

OWNER or APPLICANT ADDRESS 107 KEATS RD MOORESVILLE NC 28117

LOCATION / DIRECTIONS 21, ALCOVE, TEMPLETON, IRISH, KEATS

SUBDIVISION ~~BLACK-ANGUS~~ WHITE BLOCK / SECTION LOT # 10 & 11 LOT AREA .87 AC DESIGN FLOW 480 GPD L.T.A.R. 3

Septic Tank ~~1000~~ 500 Gallons: STB 335 Date 1-7-11

Pump Tank ____ Gallons: PT ____ Date ____

Pump Make ____ Model ____ Serial # ____

Nitrification Field No Fields 1 No Lines 60 Linear Feet 270'

Trench Width 24-36" Max. Trench Bottom Depth 30" Gravel Depth 24" SAND GRAVITY PRESSURE

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

System Description: G- PANEL BLOCK

Repair System Description: LP- PANEL BLOCK

Maintenance Agreement Required ☐ YES ☒ NO

☒ Residence No. Bedrooms 4 ☐ Business No. Persons ____ ☐ Other No. Employees ____

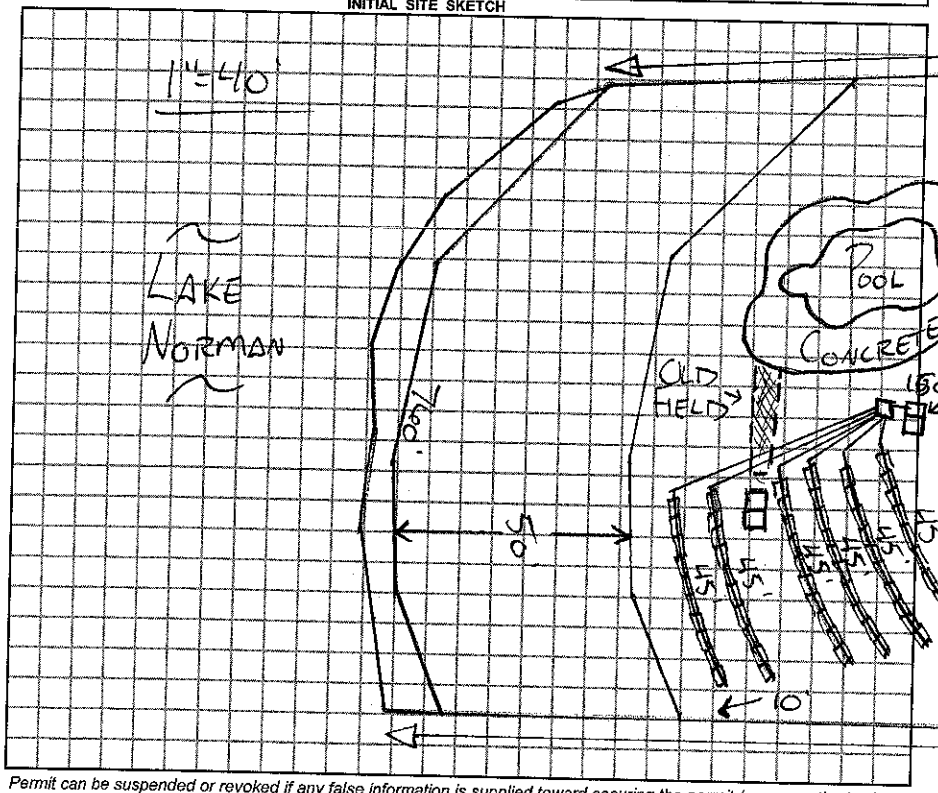
☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

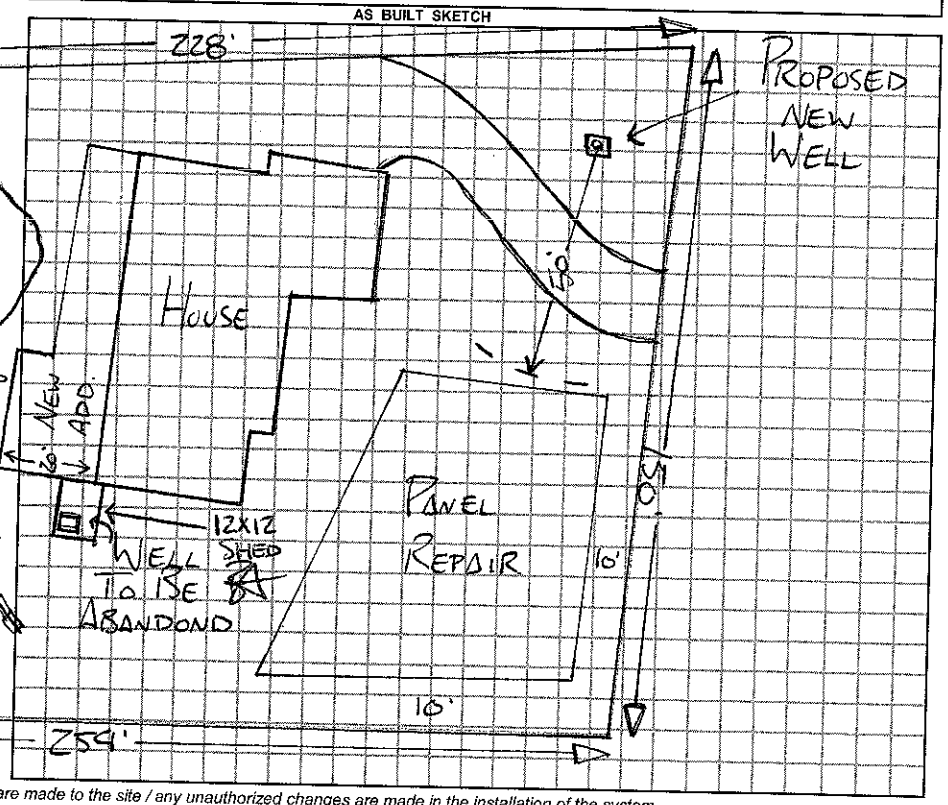
Comments / Conditions 1) PUMP, CRUSH & FILL OLD TANK 2) KEEP DRAINLINES OUT OF OLD TANK AREA 3) SEPTIC MUST BE 15' FROM WATERS EDGE OF POOL

Comments / Conditions 10 PANELS PER LINE

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

Owner / Applicant Signature: Eugene Kennon Date ____

Improvement Permit by: R.A. Lee REHS Date 1-19-11

Authorzation to Construct by: R.A. Lee REHS Date 1-19-11

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

Installed by: E.J. ERVIN

Operation Permit by: R.A. Lee REHS Date: 3-8-11

Existing System Inspected by: ____ Date: ____

WHITE COPY Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant