IREDELL COUNTY HEALTH DEPARTMENT - *ENVIRONMENTAL HEALTH* ☐ STATESVILLE OFFICE 704-878-5305 ☒ MOORESVILLE OFFICE 704-664-5281

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

PERMIT # _____ PIN # 4664 39 4702 DATE 9-29-11

OWNER _____ APPLICANT: RUSSELL WILLIAMS PHONE: Home/Cell # _____ Business # _____

SITE ADDRESS 145 HUNTINGTON RIDGE DR. OWNER / APPLICANT ADDRESS _____

SITE DIRECTIONS SHEARERS RD, TR INTO HUNTINGTON RIDGE, ON ①

SUBDIVISION HUNTINGTON RIDGE BLOCK / SECTION 4 LOT # 26 LOT AREA 5.843 AC DESIGN FLOW 480 L.T.A.R. .3

Septic Tank Ex. 1000 Gallons: STB _____ Date _____

Pump Tank Ex. 1000 Gallons: PT _____ Date _____

Pump Make GOULDS Model WE1012H Serial # _____

No. Nitrification Fields: 1 No. Lines 5 Linear Feet 400'

Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth _____

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

System Description: 25% RED

Repair System Description: LP- PANEL BLOCK

Maintenance Agreement Required ☐ YES ☒ NO

☐ GRAVITY ☒ PRESSURE

☒ Residence No. Bedrooms 4

☐ Business No. Persons _____

☐ Other No. Employees _____

☐ Slab ☒ Crawl Space

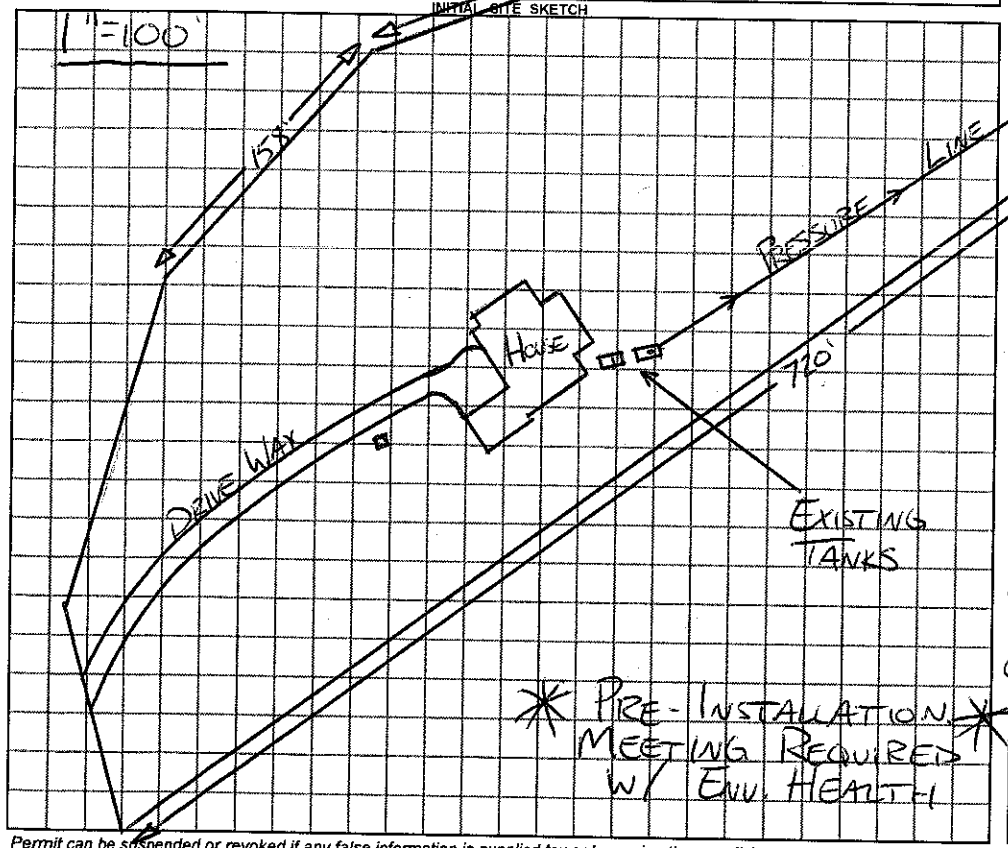
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

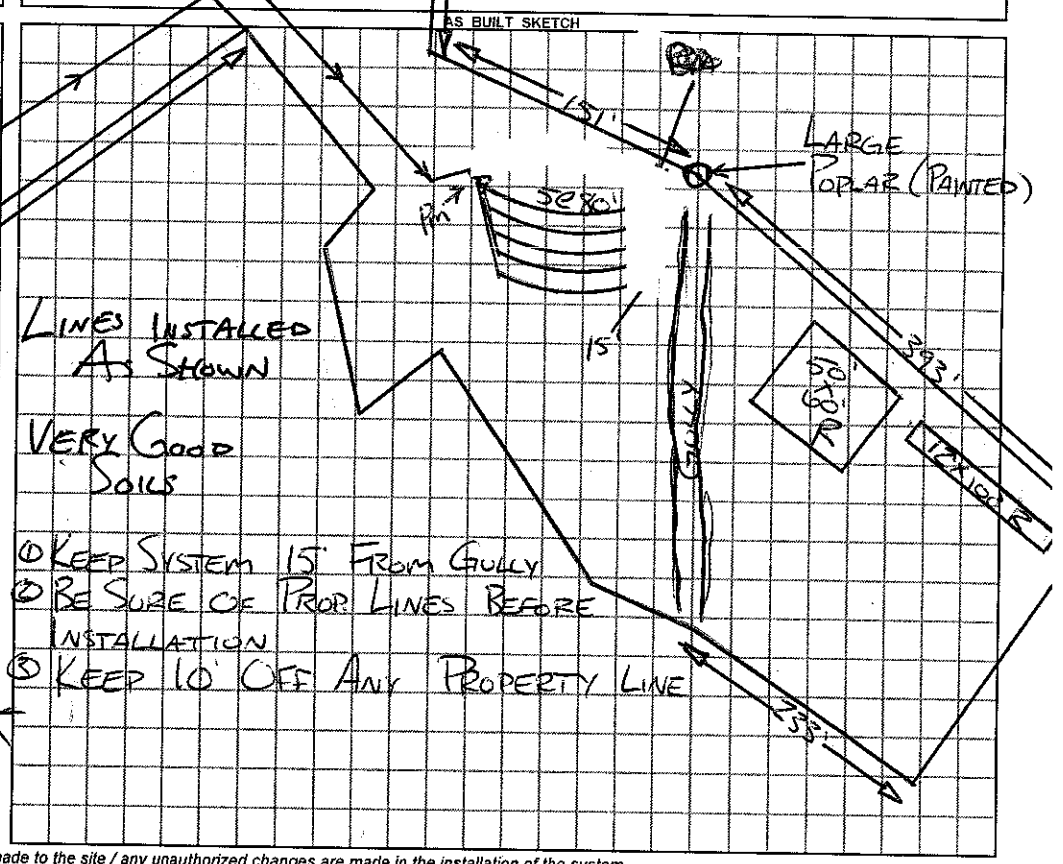
Comments / Conditions

CHECKED LINES & CH. PRESSUREMAN & SET 2' PH +

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

Owner / Applicant Signature: _____ Date 10/3/11 Installed by: FJ ERWIN

IMPROVEMENT PERMIT by: _____ REHS Date 9-29-11 OPERATION PERMIT by: _____ REHS Date 10-14-11

AUTHORIZATION TO CONSTRUCT by: _____ REHS Date 9-29-11 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