IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT # 126083 PIN # 4674-18-7684 DATE 12-5-12

OWNER or APPLICANT AUGUST REGANESS PHONE: Business 920-650-5629 Home:

OWNER or APPLICANT ADDRESS 130 BROOKSTONE LN

LOCATION / DIRECTIONS HWY 3 TR JOHNSON DAIRY TL BROOKSTONE

SUBDIVISION BLOCK / SECTION LOT # LOT AREA 12.58AC DESIGN FLOW 480 L.T.A.R. .3

Septic Tank Ex. 1000 Gallons: STB Date

Pump Tank Gallons: P T Date

Pump Make Model Serial #

Nitrification Field No Fields 1 No Lines 1 Linear Feet 100'

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% REDUCTION

Repair System Description: SAME

Maintenance Agreement Required ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 4

☐ Business No. Persons

☐ Other No. Employees

☐ Slab ☐ Crawl Space

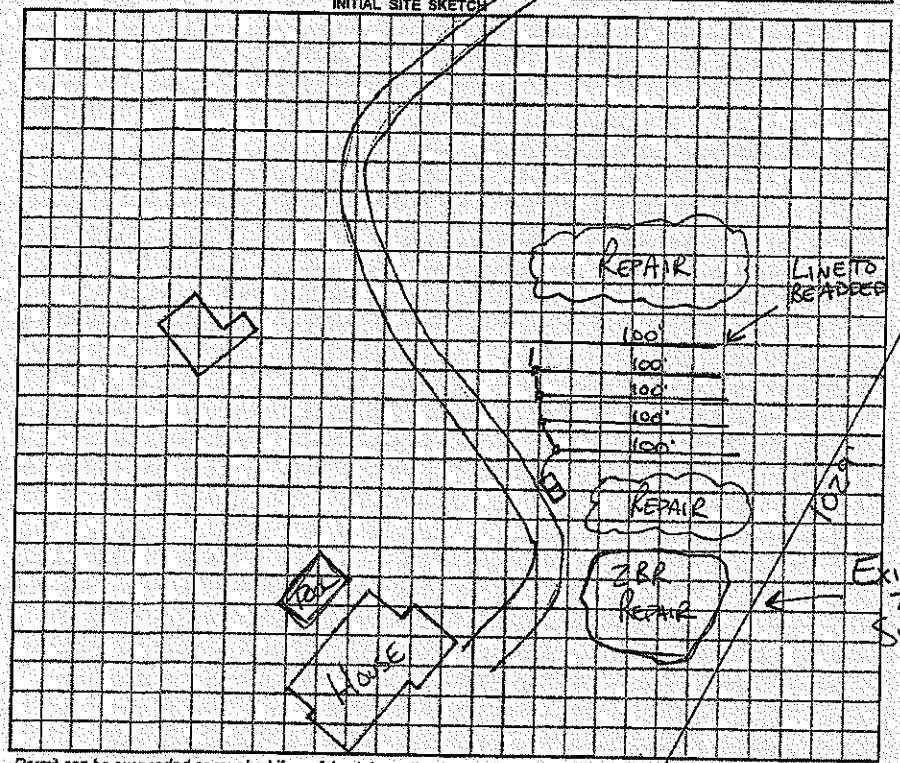
☒ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions

Comments / Conditions ADD 100' OF 25% REDUCTION BELOW EXISTING GRAVEL LINES

INITIAL SITE SKETCH



AS BUILT SKETCH

2 PREVIOUS PERMITS ATTACHED

INSTALLED AS DRAWN

BEREGANESS@GMAIL.COM

The proposed / existing POOL addition does not appear to impact the existing septic system.

**NOTE:

R.S.

Date: 5-23-13

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 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: A. Reganess or WELL Date 12-6-12

Improvement Permit by: Date 12-6-12

Authorization to Construct by: Date 12-6-12

Installed by: KOWAN SEPTIC

Operation Permit by: Date: 12-10-12

Existing System Inspected by: 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