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 # 17171 PIN # 4676722235 DATE 5-23-2012

OWNER Van Bernhardt APPLICANT: Aloha Pools PHONE: Home/Cell # Business #

SITE ADDRESS 153 Riverchase Ln M'Ville OWNER / APPLICANT ADDRESS

SITE DIRECTIONS ~~Walden~~ Main St N TR Linwood TL Teeter Rd TR Walden Dr TR Riverchase on left

SUBDIVISION Walden Ridge BLOCK / SECTION LOT # 40 LOT AREA DESIGN FLOW 600 L.T.A.R. .3

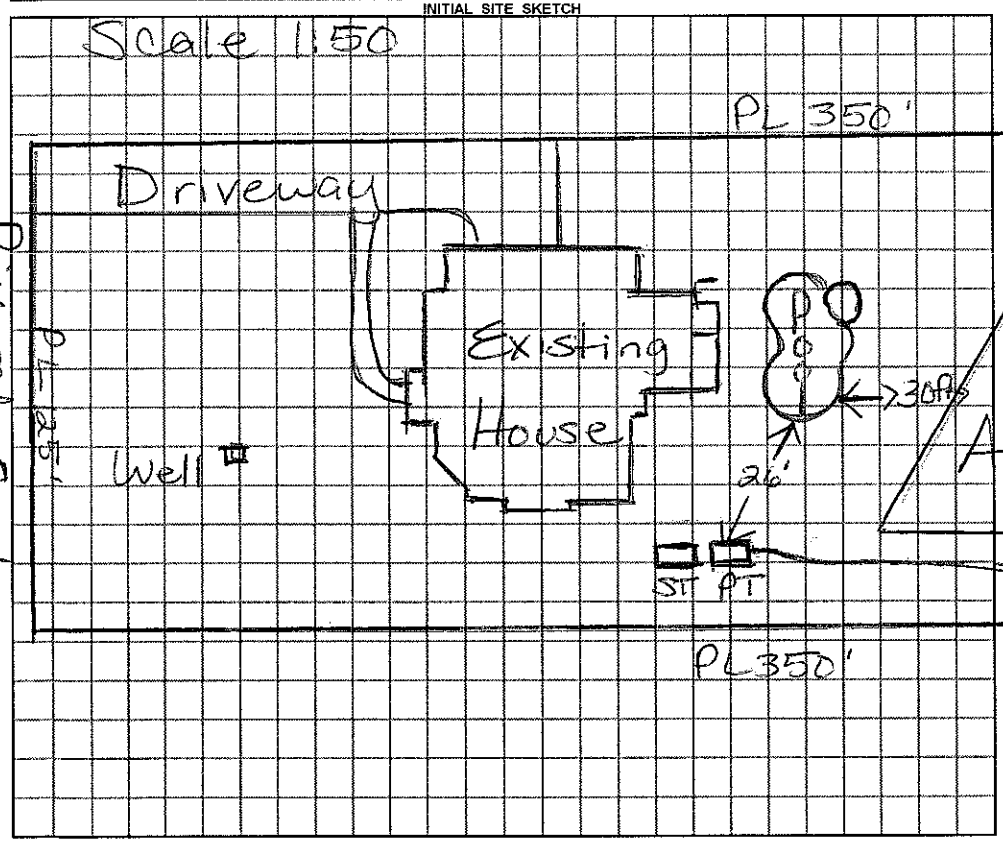
Septic Tank	1500	Gallons: STB		Date	☐ New System ☐ Repair ☐ Expansion System Type I II III IV V VI	☒ Residence	No. Bedrooms	5	Water Supply
Pump Tank	1500	Gallons: P T		Date	System Description: Existing Pump-Up Panel Blk	☐ Business	No. Persons		☒ Private
Pump Make		Model		Serial #	Repair System Description: Same	☐ Other	No. Employees		☐ Public
No. Nitrification Fields:	1	No. Lines	4	Linear Feet 332'	Maintenance Agreement Required ☒ YES ☐ NO	☐ Slab	☐ Crawl Space		☐ Community
Trench Width		Max. Trench Bottom Depth	36"		Gravel Depth N/A ☐ GRAVITY ☒ PRESSURE	☐ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions

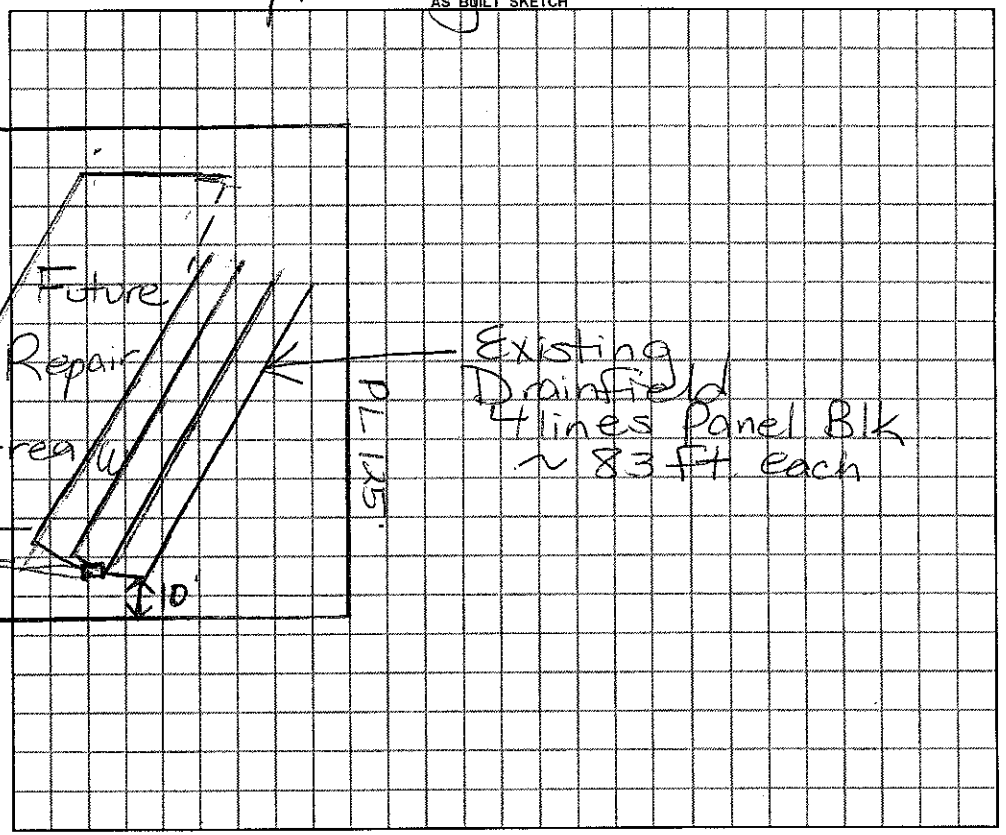
Must Continue Maint. Agreement with Certified Operator.

Existing Septic System "appears" to be functioning OK at time of inspection. Pool "cut" must be at least 15Ft from Septic System.

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 plan valid 60 mo. ☐ ***AUTHORIZATION TO CONSTRUCT*** valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: X [signature] Date 5/30/2012 Installed by: Richard Abernathy 8/15/07

IMPROVEMENT PERMIT by: ***REHS*** Date

AUTHORIZATION TO CONSTRUCT by: ***REHS*** Date

OPERATION PERMIT by: ***REHS*** Date

Existing System Inspected by: [signature] ***REHS*** Date 5/30/12

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

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