This Permit replaces expired permit #0741060

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 # 184 PIN # 4711225227 DATE 8-20-12

OWNER Andrew Chamra APPLICANT: Same PHONE: Home/Cell # 215-579-2582 Business # N/A

SITE ADDRESS Bargate Dr. OWNER / APPLICANT ADDRESS 1 Armstrong Circle NewTown PA

SITE DIRECTIONS Buffalo Shoals to Laurel Cove Rd to Harbor Ridge to Huntcliff Dr. to Bargate Dr.

SUBDIVISION Harbor Watch BLOCK / SECTION 55 LOT # 145 LOT AREA 1.98acres DESIGN FLOW 360 gpd L.T.A.R. .025

Septic Tank 1000 Gallons: STB 760 Date 11-20

Pump Tank ____ Gallons: P T ____ Date ____

Pump Make ____ Model ____ Serial # ____

No. Nitrification Fields: 1 No. Lines 4 Linear Feet 480

Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair ☐ Expansion System Type I (II) III IV V VI

System Description: Conventional - gravity

Repair System Description: 25% Reduction

Maintenance Agreement Required ☐ YES ☑ NO

☑ GRAVITY ☐ PRESSURE

☑ Residence No. Bedrooms 3BR

☐ Business No. Persons ____

☐ Other No. Employees ____

☐ Slab ☑ Crawl Space

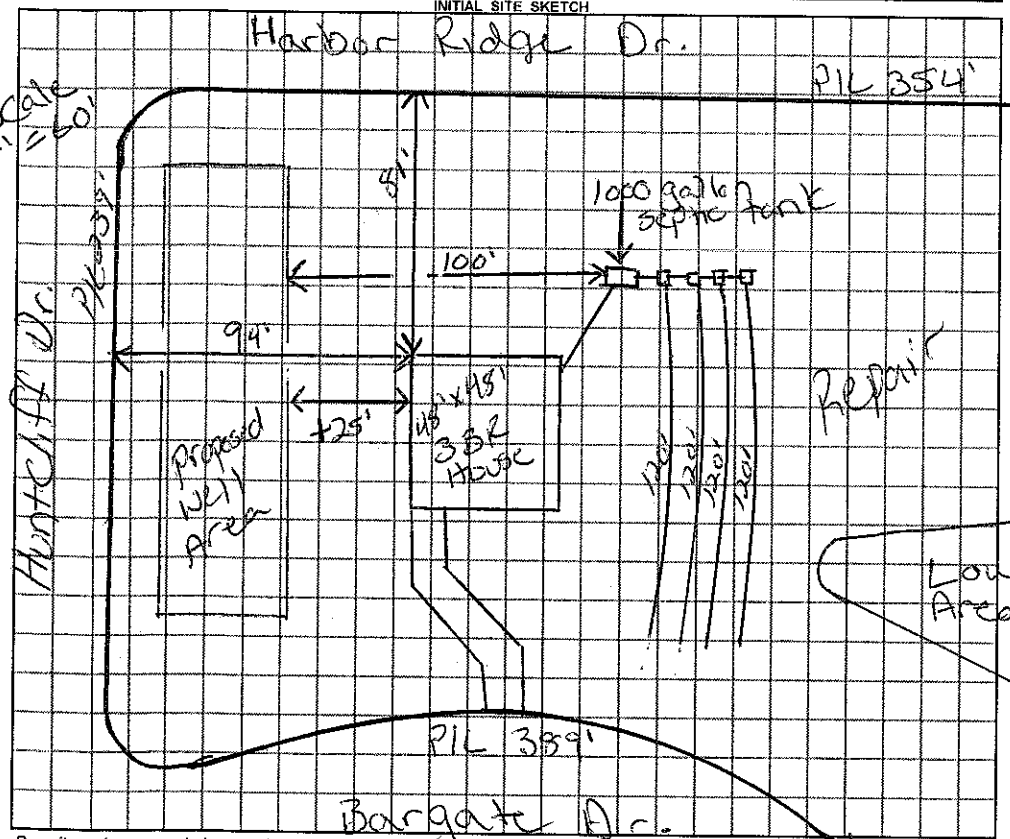
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☑ Private ☐ Public ☐ Community

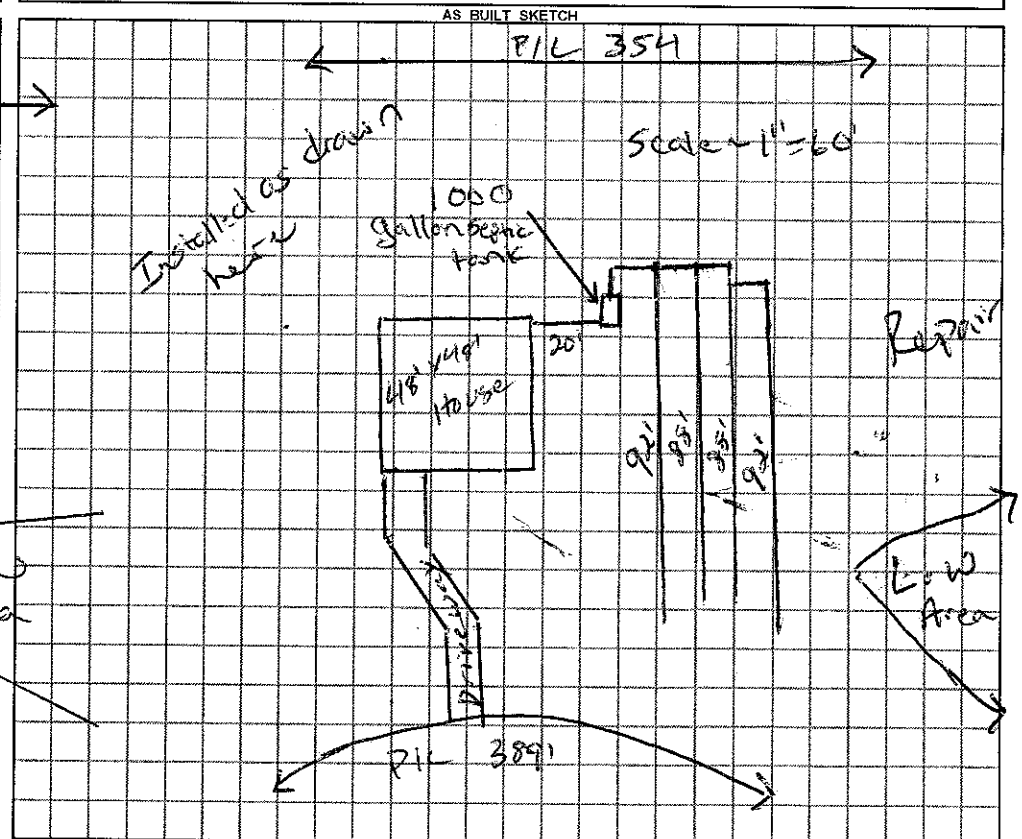
Comments / Conditions: Install a conventional system on contour with serial distribution. An accepted system may also be installed.

- Red Polyloc filter installed
- Quick 4 Chambers installed = 360' total line length

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: A Chamra Date ____ Installed by: Specialty Septic

IMPROVEMENT PERMIT by: Justin Henderson REHS Date 8-20-12 OPERATION PERMIT by: Justin Henderson REHS Date 3-15-13

AUTHORIZATION TO CONSTRUCT by: Justin Henderson REHS Date 8-20-12 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