# IREDELL COUNTY HEALTH DEPARTMENT

THIS PERMIT VOIDS PREVIOUS ISSUED 2/10/2005

STATESVILLE 704-878-5305 (2) MOORESVILLE 704-664-5281

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

PERMIT# 073299/129348 PIN# 4711-32-4870 DATE 8-1-05

OWNER OR CONTRACTOR JOHN KOVATCH PHONE: Business 704-517-5660 Home 704-992-0160

ADDRESS 9323 OLD BARNETTE PL, HUNTERSVILLE, NC 28078

LOCATION BUFFALO SHOALS RD TO LAUREL COVE RD, TR HARBORGATE, TR HARBOR WATCH, TL LAUREL RIDGE, 3RD LOT ON R

SUBDIVISION HARBR WATCH BLOCK / SECTION IV LOT 115 LOT AREA 1.423 ACRES SITE CLASS PS DESIGN FLOW 480 L.T.A.R. 0.30 GPA/FT²

Septic Tank: 1000 Gallons: STB 1012 Date 5-22-06

Pump Tank: 1000 Gallons: PT 17 Date 8-14-06

Pump Make: GOULDS Model WEDS 2HP Serial No.

Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 270

No Lines FIVE Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth SAND 24"

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: 50% REDUCTION, LOW-PRESS

Repair System Description: 50% REDUCTION, LOW-PRESSURE

Maintenance Agreement Required: ☑ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms

☐ Business No. Employees

☐ Other

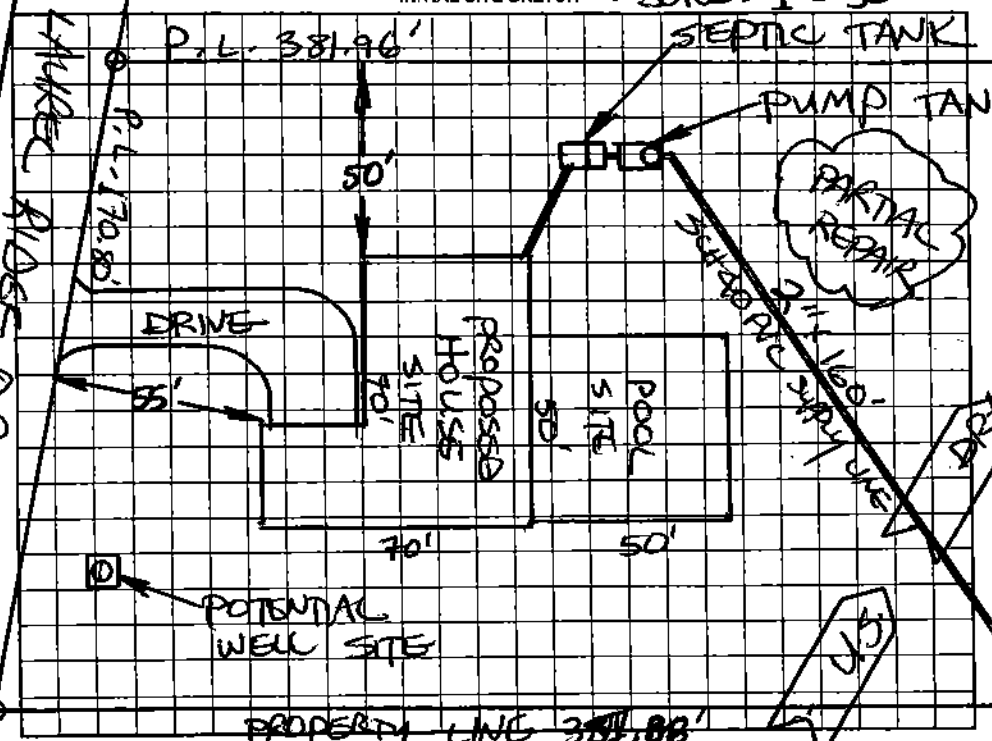
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community WELL

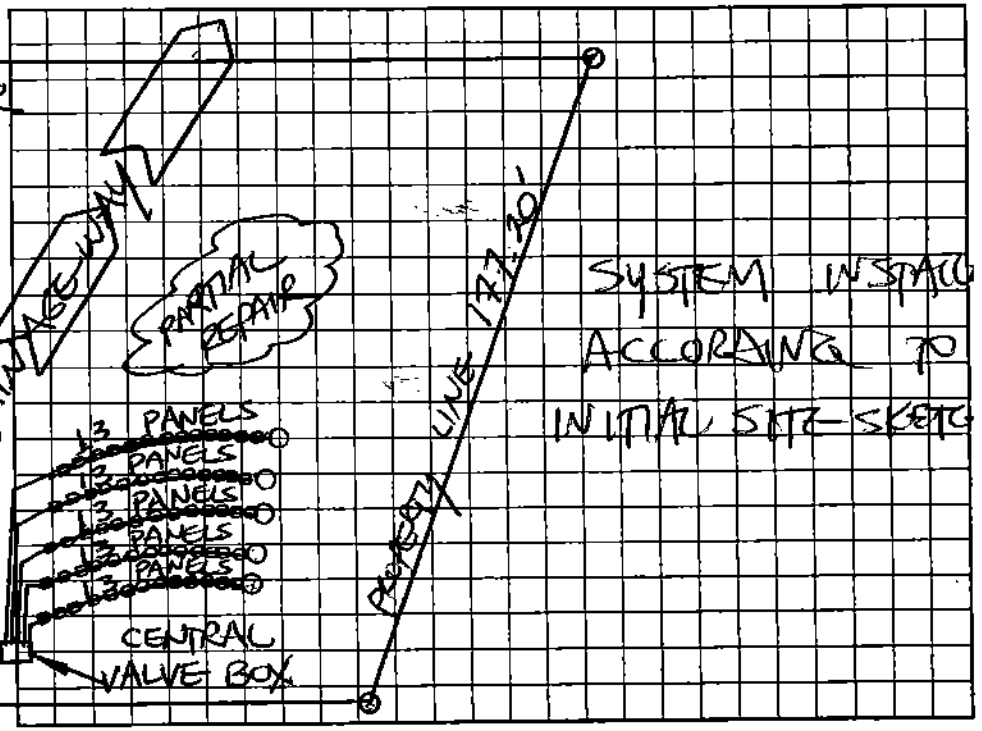
Comments/Conditions: INSTALL 50% REDUCTION SYSTEM USING 65 PPBPS PANELS WITH LOW PRESSURE DISTRIBUTION. SEE ATTACHED SHEETS FOR PUMP & PRESSURE DISTRIBUTION REQUIREMENTS

Comments/Conditions:

INITIAL SITE SKETCH ~ SCALE: 1" = 50'




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 site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: _____ date 8/12/05

Improvement Permit by: STEVE HEDRICK date 8-1-05

Authorization to Construct by: STEVE HEDRICK date 8-1-05

Installed by: DAVID YOUNTS

Operation Permit by: STEVE HEDRICK date 11-17-06

Existing System Inspection by: _____ date _____

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK