IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 125.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 089338 PIN# 4713632148 (pt) DATE June 8, 01

OWNER OR CONTRACTOR EARL GARRICK PHONE: Business _____ Home _____

ADDRESS 9815 I 77 Exit RD. Huntersville N.C. 28078

LOCATION From Trautman Old Mtn Rd TL Angel Oaks Dr. TR Mornington Ct 1st Left

SUBDIVISION Angel Oaks BLOCK / SECTION _____ LOT 21/21A LOT AREA .54+ .34Ac SITE CLASS PSSFE DESIGN FLOW 360 gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 07/06/02
Pump Tank: 1000 Gallons; PT 17 Date 04/09/02
Pump Make: MYERS Model ME1003-21 Serial No 25325D022
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 380
No Lines 3@100' Trench Width 36" Max Trench Bottom Depth 36"

☒ New System ☐ Repair System Type: I. II. III. IV. V. VI
System Description: PM-INNOVATIVE-25% Red.
Repair System Description: SAME
Maintenance Agreement Required: ☐ Yes ☒ No
Gravel Depth NA

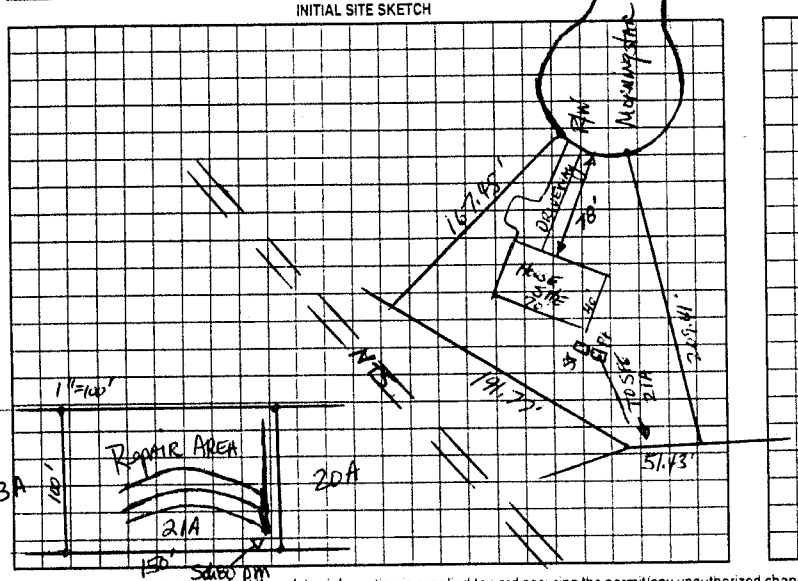
☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees _____
☐ Other _____
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply:
☐ Individual
☒ Public
☒ Community

Comments/Conditions: OK to have BASEMENT w/ plumbing in house if desired.

Comments/Conditions: - SEPTIC TANK INSTALLED USING TUFF-TIGHT FILTER & SEPTIC MARKER.
* SYSTEM INSTALLED DURING WET SOIL CONDITIONS.

INITIAL SITE SKETCH



AS BUILT SKETCH

* SYSTEM INSTALLED AS SHOWN IN INITIAL SITE 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 7-18-01 Installed by: A-1 BACKHOE

Improvement Permit by: _____ date 6-8-01 Operation Permit by: _____ date 12/17/02

Authorization to Construct by: _____ date 09/19/02 Existing System Inspection by: _____ date _____

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