# IREDELL COUNTY HEALTH DEPARTMENT

THIS PERMIT VOIDS PREVIOUS ISSUED JAN 27, 2001

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

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

PERMIT# 089341 12/0440 4713-62-4509

OWNER OR CONTRACTOR EARL GARRICK DATE 4-22-04

ADDRESS 9815T SAM FURR ROAD HUNTERSVILLE NC 28078 PHONE: Business 704.948-6466 Home 704-374-9700

LOCATION OLD MOUNTAIN ROAD TO ANGEL OAK'S DRIVE TR MORNINGSTAR COURT, 1ST LOT ON LEFT

SUBDIVISION ANGEL OAKS BLOCK / SECTION ____ LOT 18 LOT AREA 0.54 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.25 GPD/FT²

Septic Tank: 1000 Gallons; STB 1007 Date 4-7-04

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet EQ. TO 1440 Linear Feet 360

No Lines THREE Trench Width 36" Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: 25% REDUCTION, GRAVITY

Repair System Description: 50% REDUCTION LOW PRESSURE

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

☐ Other ____

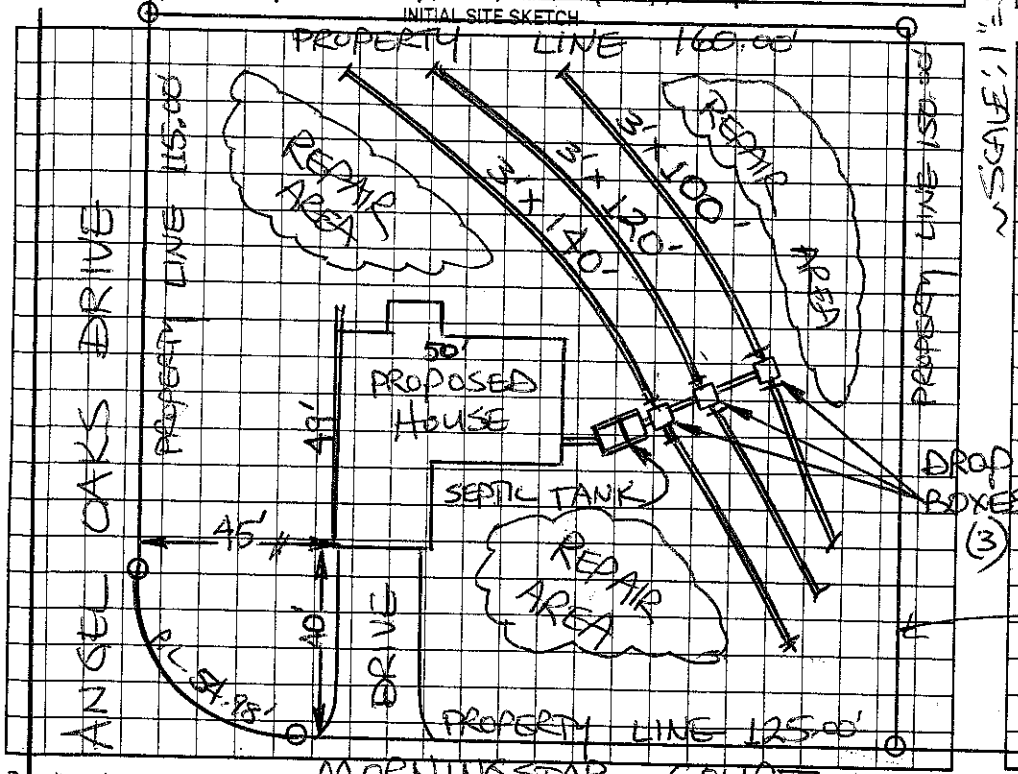
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☐ Community

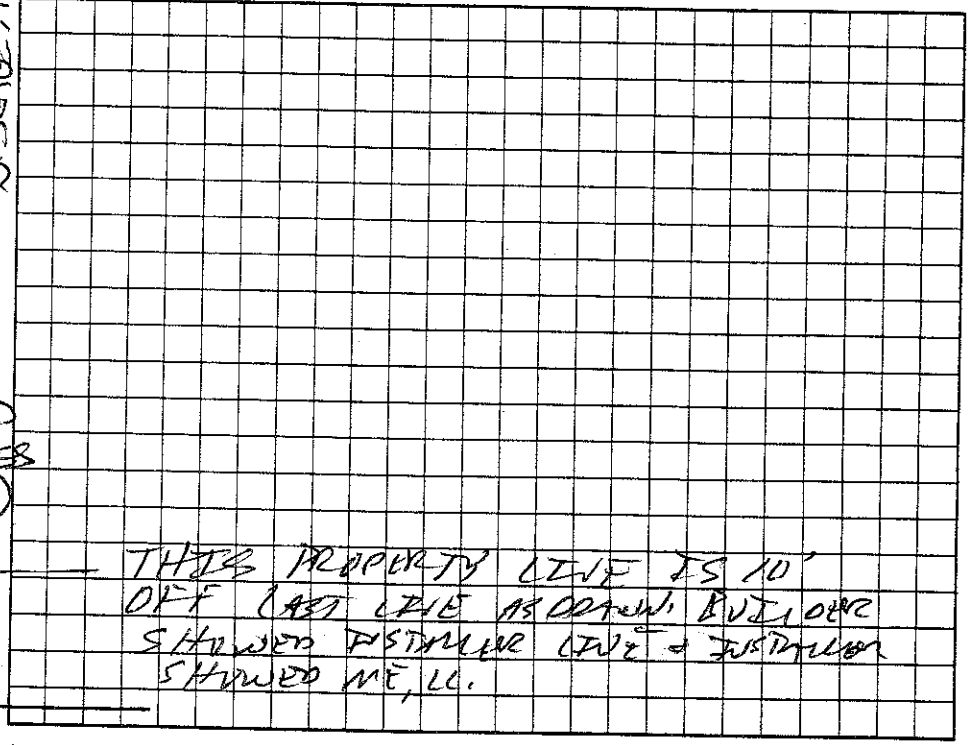
Comments:/Conditions: (1) INSTALL DRAINLINES (36" DEEP) ON CONTOUR USING 25% REDUCTION SYSTEM (2) DISCONTINUE INSTALLATION IF FILL MATERIAL ENCOUNTERED DURING EXCAVATION & CALL HEALTH DEPARTMENT.

Comments:/Conditions: POLYLOK FILTER & MARKER INSTALLED AS DRAWN.

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 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: [signature] date 4/23/04 Installed by: IREDELL BUILDING

Improvement Permit by: STEVE HEDRICK date 4-22-04 Operation Permit by: [signature] date 6-3-04

Authorization to Construct by: STEVE HEDRICK date 4-22-04 Existing System Inspection by: ____ date ____

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