IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 / 25.00 Paid / MOORESVILLE 704-664-5281

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

PERMIT# 089517 PIN# ~~4713632748 (pt.)~~ 4713-03-3325 DATE July 27, 01

OWNER OR CONTRACTOR Earl Garrick PHONE: Business _____ Home _____

ADDRESS 9815 J Sam Furr Rd. Huntersville NC 28078

LOCATION From Trautman Old Mtn Rd. TL Angel Oaks Dr. TR Falling Leaf Ln TL Turning Leaf Ln Attend on left

SUBDIVISION Angel Oaks BLOCK / SECTION _____ LOT 31, 31A LOT AREA 1.04Ac+, 12(SFE) SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. .02-.25

Septic Tank: 1000 Gallons; STB ~~4012~~ Date 6-1-02

Pump Tank: 1000 Gallons; PT 17 Date 12-10-02

Pump Make: Gould Model WE0311m Serial No. 50386 0386 (1/2 HP)

Nitrification Field: No Fields 1 Square Feet 1260 Linear Feet 420

No Lines 7 @ 60' Trench Width 36" Trench Bottom Depth 36" Gravel Depth NA

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

System Description: PM Innovative -25% Red.

Repair System Description: PM/LP PPBPS on 31A

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms 2 No. Employees _____

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

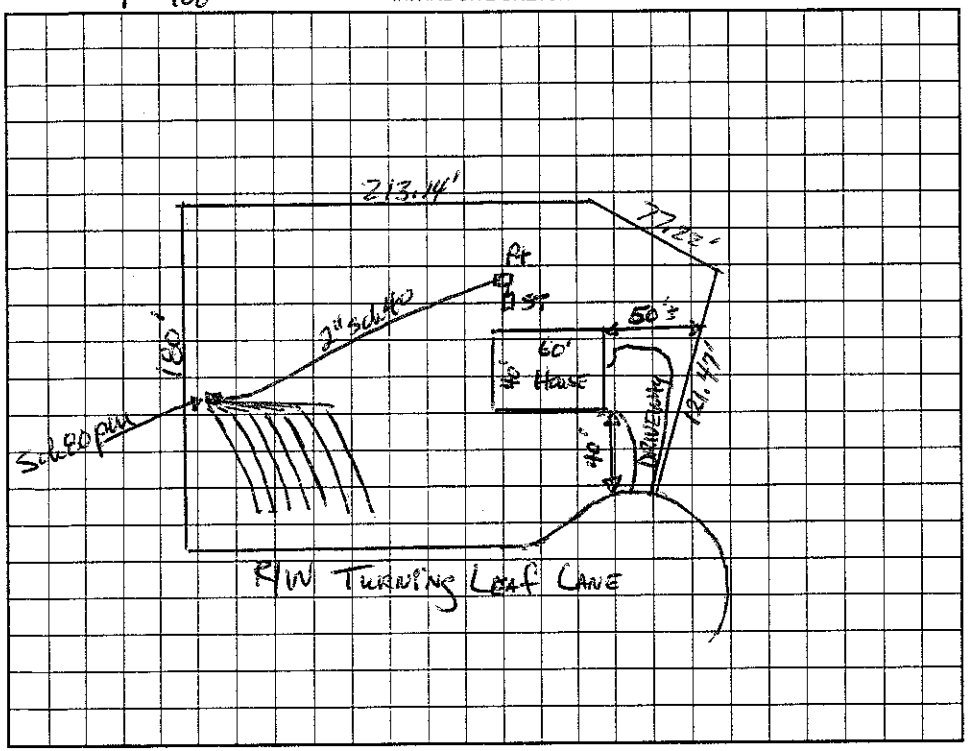
Water Supply: ☐ Individual ☑ Public ☐ Community

Comments:/Conditions: Install Laterals at 36" trench bottom depth. Prior Health Dept approval to move House 50 ft. to left - 1-10-02. BJ.

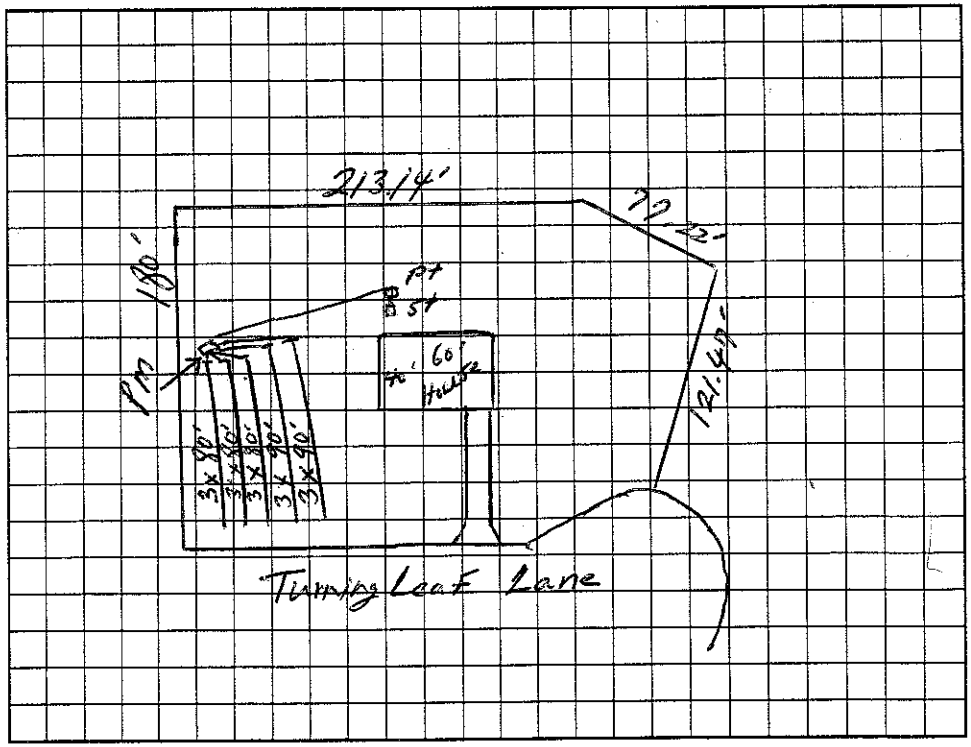
Comments:/Conditions: S.T. Marker Installed, T-58 - Tee Filter Installed. Pressure Check, Lines Check, 1-29-03 ugh. 920# E-2 Lay Installed.

INITIAL SITE SKETCH

1" = 100'



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 7-27-01

Improvement Permit by: _____ date 7-27-01

Authorization to Construct by: William O. Johnson date 1/9/02

Installed by: A-1 Backhoe

Operation Permit by: STEVE HARRICK date 2-14-03

Existing System Inspection by: _____ date _____

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