IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 21517 1

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

PIN # 4736580319

APPLICANT: Lena Garibyan APPLICANT ADDRESS: 105 Rock Island Dr.

SITE ADDRESS: 159 Harriet Lane PHONE: 704-682-2436 ALT. PHONE: N/A

SITE DIRECTIONS: Hwy 115 N TR S Chipley Ford Rd TL Harriet Ln. Property on Left

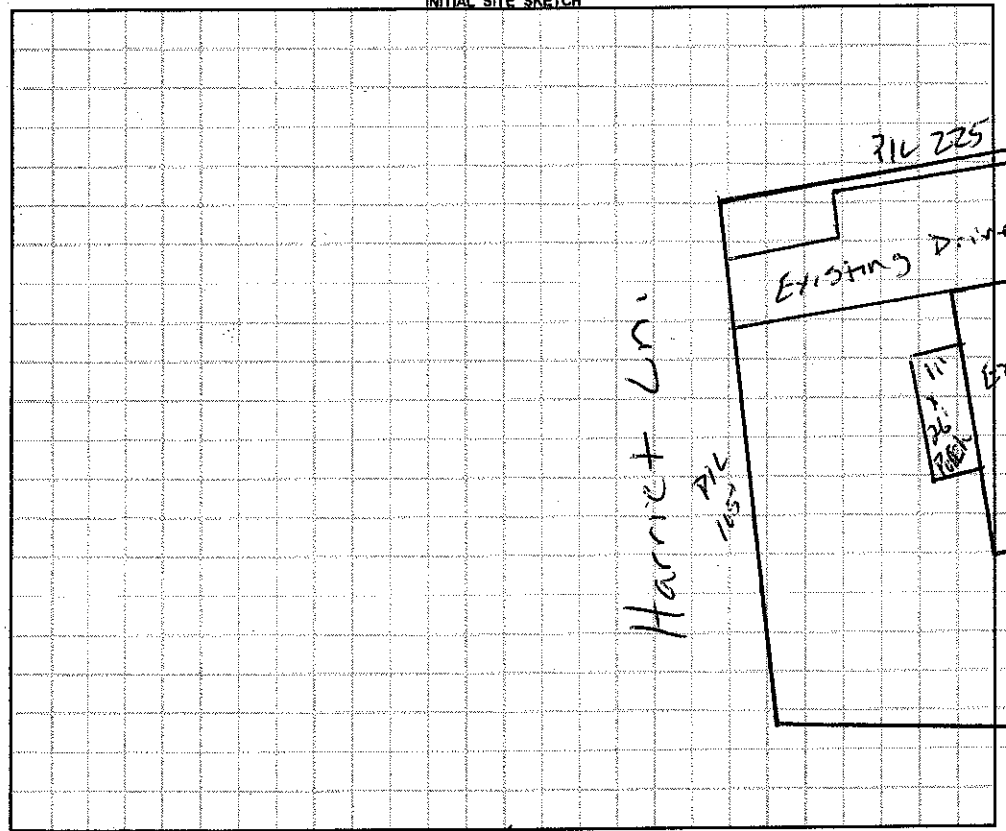
SUBDIVISION: Chipley Park Townes West SECTION: B LOT # 76 LOT AREA: 0.72 acres DESIGN FLOW: Existing L.T.A.R.: Existing

Septic Tank	Existing	(gal)	STB		Date		☐ New System	☐ Repair	☐ Expansion	System Type:	I	II	III	IV	V	VI	☑ Residence	No. Bedrooms	Ex	Water Supply
Pump Tank		(gal)	PT		Date		System Description:	Existing									☐ Business	No. Persons	Ex	☐ Private
Pump Make			Model		Serial #		Repair System Description:										☐ Other	No. Employees		☑ Public
# Nitrification Fields	Ex	# Lines	Ex	Linear Ft:	Ex		Maintenance Agreement Required:	☐ YES	☑ NO								☐ Slab	☑ Crawl Space		☐ Community
Trench Width	Ex	Max. Trench Bottom Depth	Ex		Gravel Depth	Ex		☐ GRAVITY	☐ PRESSURE								☐ Basement w/plumbing			☐ Basement w/o plumbing

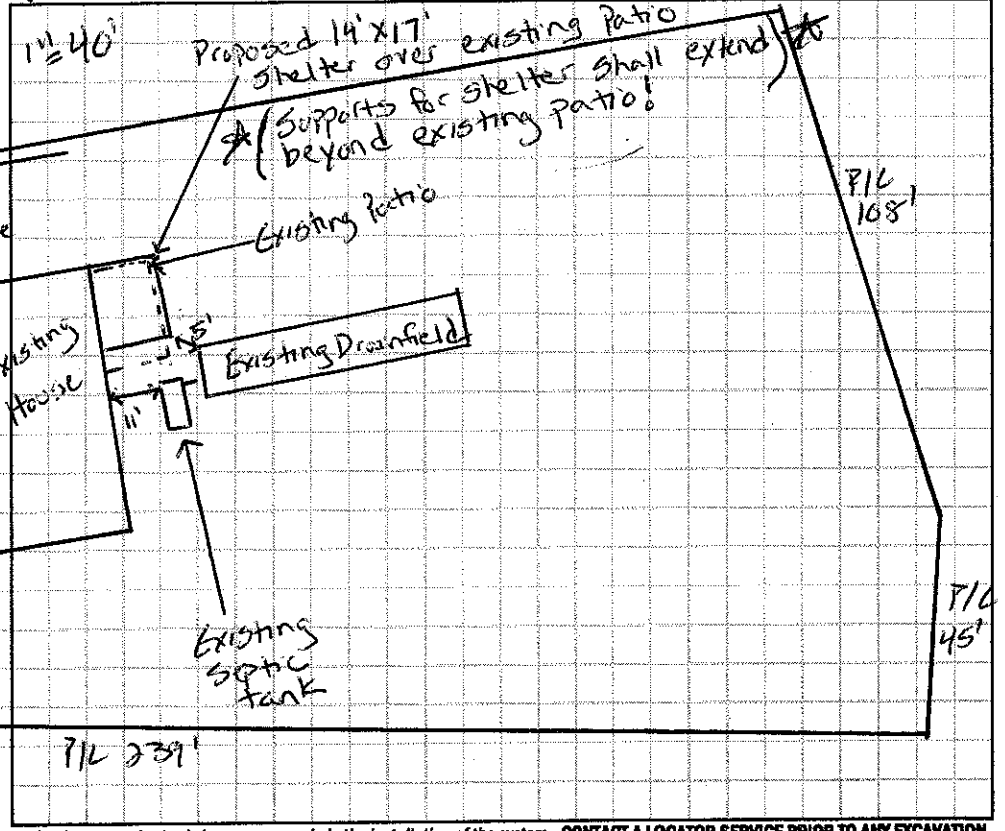
Comments / Conditions:

- Maintain a minimum of 5' between shelter foundation & all components of septic system. ~~A~~ Shelter support posts shall extend beyond existing patio ~~AA~~

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. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☐ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: [signature] Date: 1-6-16 Installed by:

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Justin Henderson Date: 1/05/16

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK