# IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 18192

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

PIN # 4736596661

APPLICANT: Paul May APPLICANT ADDRESS: 878 Windover Rd.

SITE ADDRESS: 2635 S. Chipley Ford Rd. PHONE: 704-902-0167 ALT. PHONE: N/A

SITE DIRECTIONS: Hwy 115 N TR S Chipley Ford Rd. 4th House on Left past Summer Farm Rd.

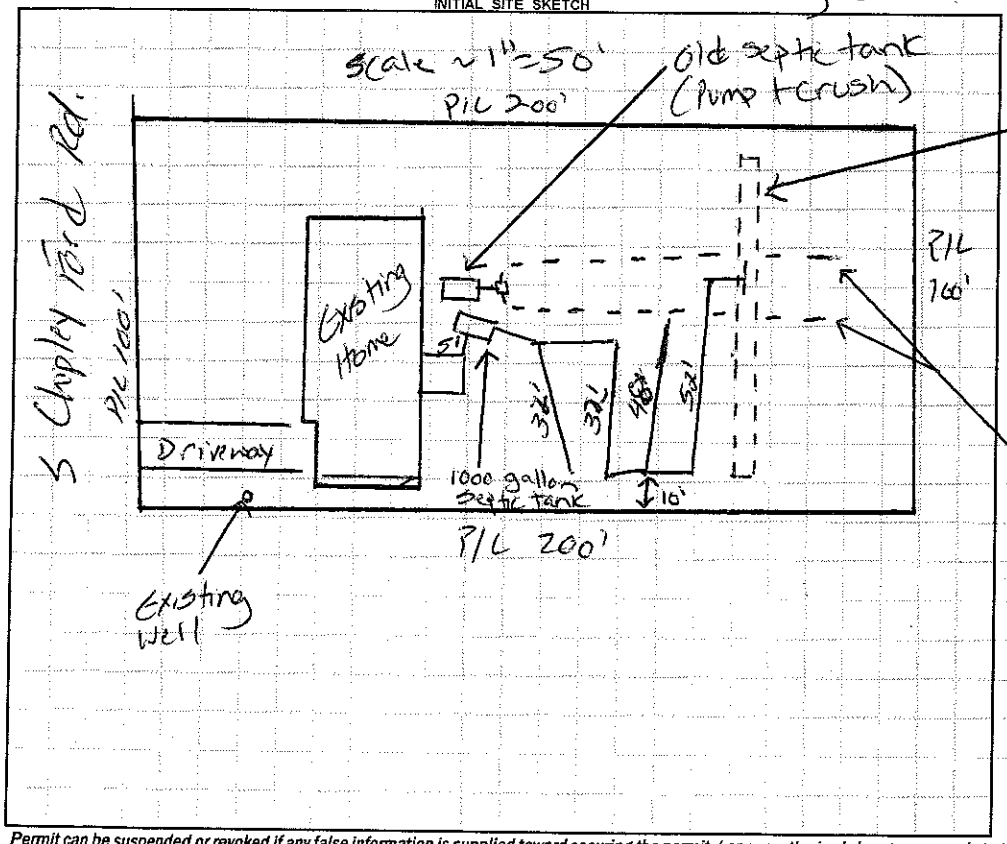
SUBDIVISION: Chipley Park SECTION: N/A LOT # 298-301 LOT AREA: .47 acres DESIGN FLOW: 360gpd L.T.A.R.: 0.3

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 | (gal) | STB 1012-1000 | Date | 8-20-13 | ☐ New System | ☑ Repair | ☐ Expansion | System Type: I II III IV V VI | ☑ Residence | No. Bedrooms 3 |
| Pump Tank | | (gal) | PT | Date | | System Description: | | | | ☐ Business | No. Persons |
| Pump Make | | Model | | Serial # | | Repair System Description: | 25% Reduction | | | ☐ Other | No. Employees |
| # Nitrification Fields | 1 | # Lines | 4 | Linear Ft: | 164 | Maintenance Agreement Required: | ☐ YES | ☑ NO | | ☐ Slab | ☑ Crawl Space |
| Trench Width | 36" | Max. Trench Bottom Depth | 36" | Gravel Depth | N/A | | ☑ GRAVITY | ☐ PRESSURE | | ☐ Basement w/plumbing | ☐ Basement w/o plumbing |

Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions: Install a new septic tank @ location shown below. Pump + crush existing septic tank. Install a 25% Reduction system on contour with serial distribution. Intersect existing drainline as shown below + tee into existing bed drainfield. Maintain a minimum of 75' between existing well + all components of septic tank system.

INITIAL SITE SKETCH




AS BUILT SKETCH

- 2ea Polylok filter installed
- Quick 4 Chambers installed
- 2" PVC septic tank marker installed
- Installed as drawn

*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: 10-29-13 Installed by: Tom Frye

IMPROVEMENT PERMIT by: Justin Henderson Date: 10-29-13 OPERATION PERMIT by: Justin Henderson Date: 10-30-13

AUTHORIZATION TO CONSTRUCT by: Justin Henderson Date: 10-29-13 Existing System Inspected by: Date:

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