IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 209564

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

PIN # 4737795885

APPLICANT: Bill Harsche APPLICANT ADDRESS: 173 Ranch Dr Bridgeport, CT 06606

SITE ADDRESS: 213 Bluegill Ln Statesville NC 28625 PHONE: 203-371-5060 ALT. PHONE: 203-257-2989

SITE DIRECTIONS: 115 N T/L Cnipley Food Rd T/L Bluegill Ln Lot on left

SUBDIVISION: Poplar Ridge SECTION: P1 LOT # 59 LOT AREA: 1.176 ac DESIGN FLOW: 360 L.T.A.R.: 0.25

Septic Tank 1000 (gal) STB 821-1000 Date 10-25-15
Pump Tank (gal) PT Date
Pump Make Model Serial #
Nitrification Fields 1 # Lines 3 Linear Ft: 360
Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A

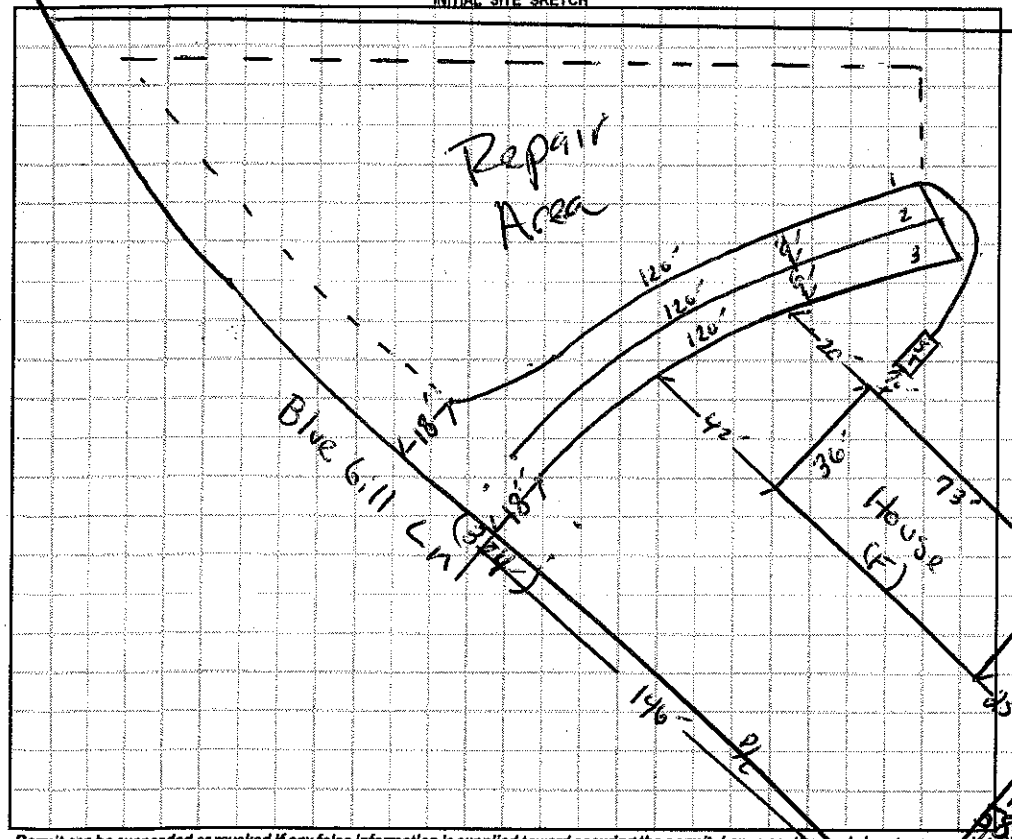
[X] New System [ ] Repair [ ] Expansion System Type: I II [III] IV V VI
System Description: 25% Reduction
Repair System Description: Pump - 25% Reduction
Maintenance Agreement Required: [ ] YES [X] NO
[X] GRAVITY [ ] PRESSURE

[X] Residence No. Bedrooms 3
[ ] Business No. Persons 6
[ ] Other No. Employees
[ ] Slab [X] Crawl Space
[ ] Basement w/plumbing [ ] Basement w/o plumbing

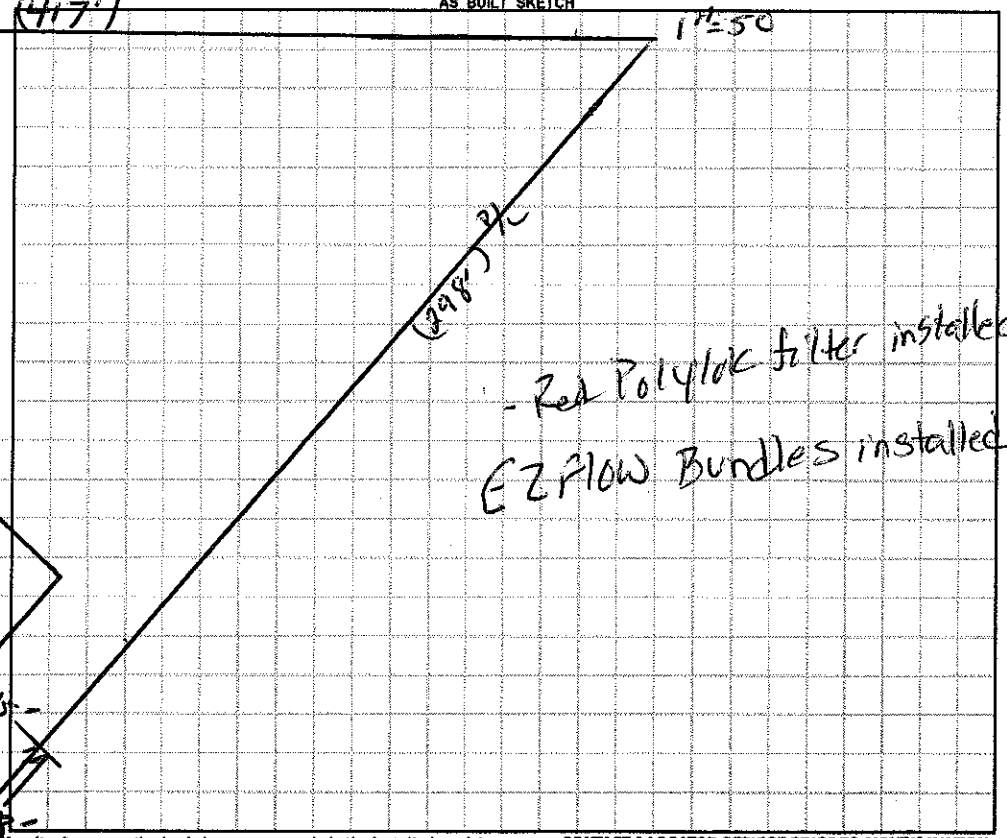
Water Supply: [ ] Private [X] Public [ ] Community

Comments / Conditions: Install 25% reduction on contour with Serial distribution. *Minimum trench depth 32"* House must be plumbed out at same elevation as line 1

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.* [X] **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* [X] **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Date: 11/9/15 Installed by: Tim Summey Septic

IMPROVEMENT PERMIT by: Date: 07/28/15 OPERATION PERMIT by: Date: 12-8-15

AUTHORIZATION TO CONSTRUCT by: Date: 07/28/15 Existing System Inspected by: Date:

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