IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 211283

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

PIN # 4756466396

APPLICANT: Joseph Gocentz APPLICANT ADDRESS: 621 Jane Sowers Rd.

SITE ADDRESS: 621 Jane Sowers Rd. PHONE: 704-876-4840 ALT. PHONE: N/A

SITE DIRECTIONS: Hwy 21 N TR Jane Sowers Rd Property on Left

SUBDIVISION: N/A SECTION: N/A LOT # N/A LOT AREA: 0.86acres DESIGN FLOW: 360gpd L.T.A.R.: 0.25

Septic Tank 1000 (gal) STB 1612-1000 Date 3-21-15
Pump Tank (gal) PT Date
Pump Make Model Serial #
Nitrification Fields 1 # Lines 6 Linear Ft: 360
Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A

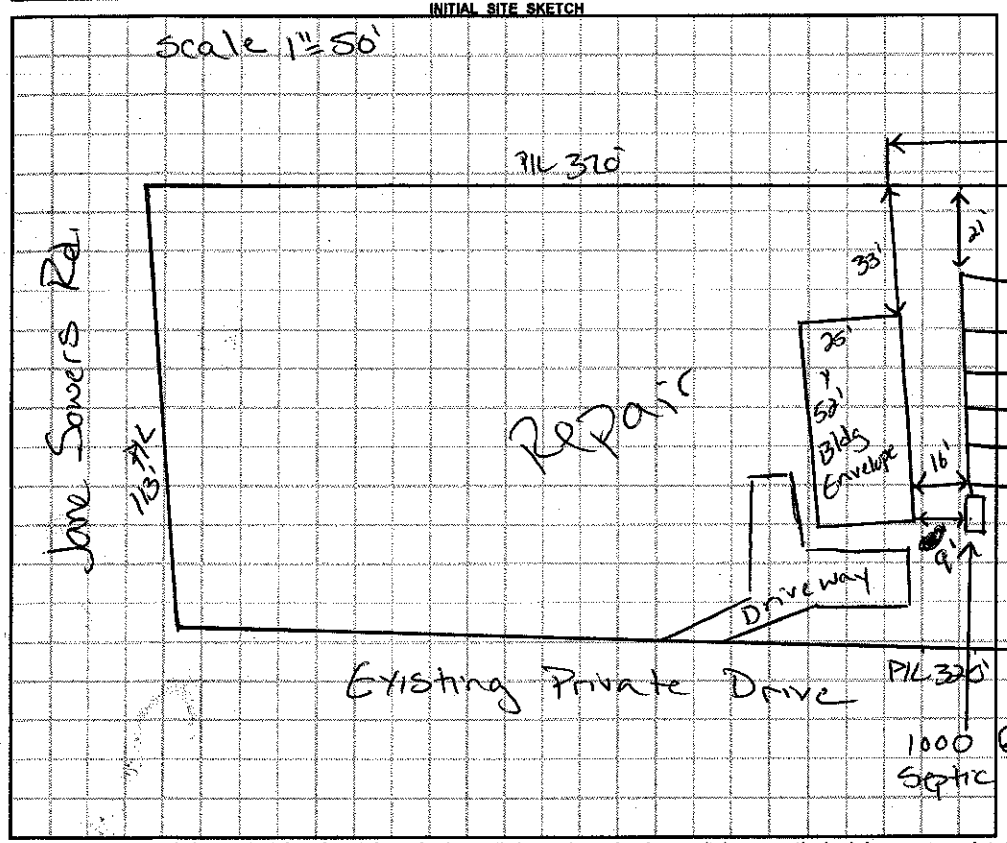
☑ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI
System Description: 25% Reduction
Repair System Description: 25% Reduction
Maintenance Agreement Required: ☐ YES ☑ NO
☑ GRAVITY ☐ PRESSURE

☑ Residence No. Bedrooms 3
☐ Business No. Persons 6
☐ Other No. Employees
☐ Slab ☑ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☑ Public ☐ Community

Comments / Conditions: Install a 25% Reduction system on contour with scral distribution. Install TRENCH BOTTOMS @ 36" High Side

INITIAL SITE SKETCH



AS BUILT SKETCH

- Yellow Tuf-tite filter installed
- 2" PVC ST marker installed
- Quick 4 Chambers 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: Nita M Gocentz Date: 7-1-15 Installed by: Steve Jordan

IMPROVEMENT PERMIT by: Justin Henderson Date: 6-30-15 OPERATION PERMIT by: Justin Henderson Date: 10-22-15

AUTHORIZATION TO CONSTRUCT by: Justin Henderson Date: 6-30-15 Existing System Inspected by: Date:

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