Repair

# IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PERMIT # N/A PIN # 4761016691 DATE 11-22-2010

OWNER or APPLICANT Leslie Belkin PHONE: Business 704 677-6437 Home:

OWNER or APPLICANT ADDRESS 176 Weathers Creek Trail Troutman NC 28166

LOCATION / DIRECTIONS Hwy 115 N TR Oswalt Amity TR Weathers Creek on

SUBDIVISION Oakridge BLOCK / SECTION LOT # 9 LOT AREA DESIGN FLOW 450 L.T.A.R. .3

Exist / Add

Septic Tank 1000 Gallons: STB Date

Pump Tank Gallons: P T Date

Pump Make Model Serial #

Nitrification Field No Fields No Lines 2 Linear Feet 200'

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: Gravity - 25% Reduction

Repair System Description: Grav 25-50% Reduction

Maintenance Agreement Required ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

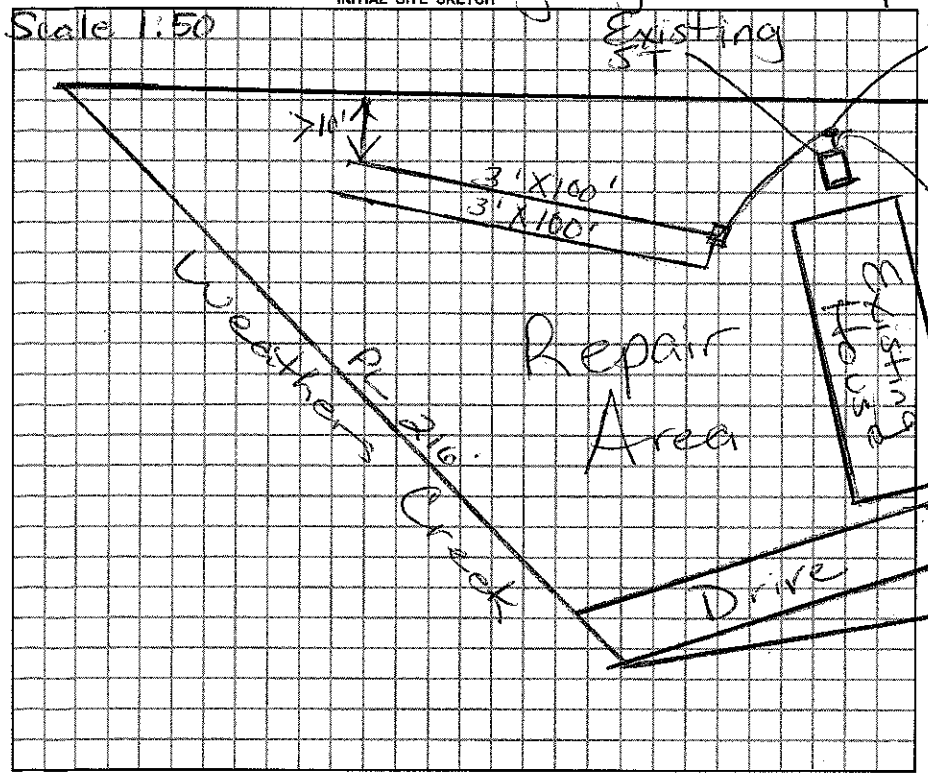
☒ Residence No. Bedrooms 4 ☐ Business No. Persons ☐ Other No. Employees ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

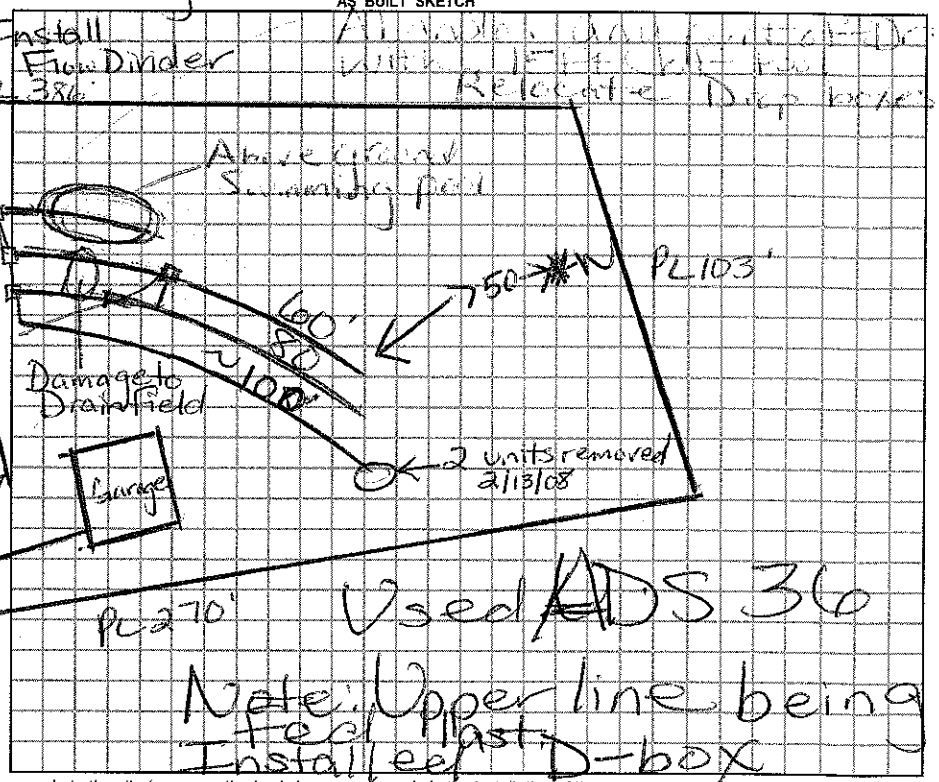
Comments / Conditions: Note: Existing Drainfield damaged by Dump truck crossing Drainfield. Pool installed on top of Drain line & to close to other lines. Must abandon anything within 15Ft of pool

Comments / Conditions: Supply line can be 10ft from pool. Ok to Salvage Drainfield > 15Ft from pool (see drawing) Install Flow Divider outside of ST & split flow to remaining Drainfield & install 2 new lines as shown.

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.*

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

Owner / Applicant Signature: Leslie Belkin Date 8/18/11

Improvement Permit by: Maina M. Wilson RS Date 11/23/10

Authorization to Construct by: Maina M. Wilson RS Date 11/23/10

Installed by: Abees Gradings

Operation Permit by: Maina M. Wilson RS Date: 9/1/2011

Existing System Inspected by: Date:

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

WHITE COPY Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant

# IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-~~664-5231~~

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

PERMIT# 1451472 PIN# 4761016691.000 DATE 9/7/07

OWNER OR APPLICANT Leslie Belkin PHONE: Business 704 528-4425 Home 704 677-6437

ADDRESS 153 B Wagner St. NC Troutman 28166

LOCATION 115W Tr on Oswalt Amity TR Weathers Creek on R

SUBDIVISION Oakridge BLOCK / SECTION 1 LOT 9 LOT AREA ±1 ac SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 1000 Date 11/8/07

Pump Tank: _____ Gallons: PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400'

No Lines 4 Trench Width 36" Max Trench Bottom Depth 36"

☑ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI

System Description: 25% Reduction Gravity

Repair System Description: Same

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Persons ____

☐ Business No. Employees ____

☐ Other _____

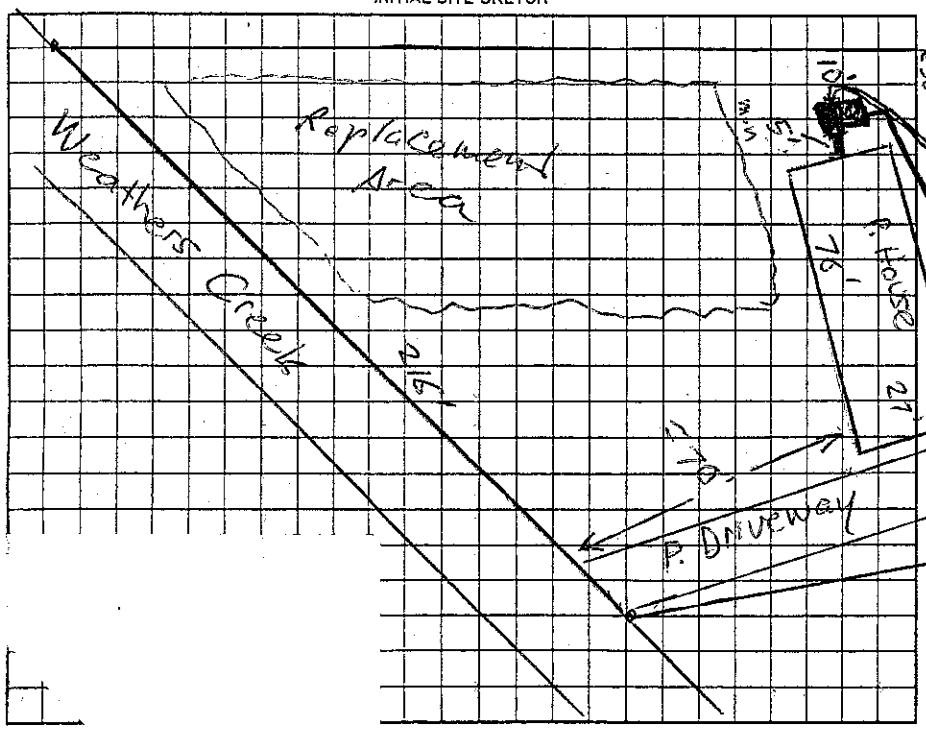
Water Supply: ☑ Individual ☐ Public ☐ Community

Gravel Depth NA ☑ Gravity ☐ Pressure ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

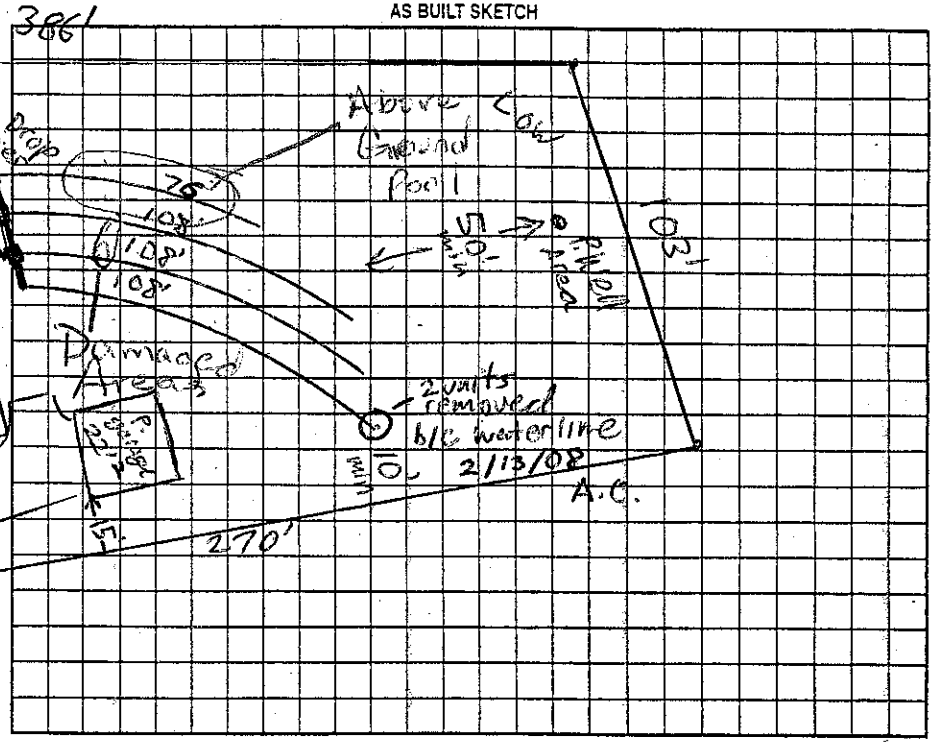
Comments:/Conditions: * Use Serial distribution

Comments:/Conditions:

INITIAL SITE SKETCH




AS BUILT SKETCH




Permit can be issued when site 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

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: _____

Improvement Permit by: _____ date 9/7/07

Authorization to Construct by: _____ date 9/7/07

_____ date 9/7/07

Installed by: ELBERT BALDING

Operation Permit by: Wesley Sparks RS date 1/28/08

Existing System Inspection by: _____ date _____

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