IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 178621

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

PIN # 4761235974

APPLICANT: MICHAEL ATHANAS APPLICANT ADDRESS: 1999 CANDLEWICK DR FORTMILL 29715

SITE ADDRESS: 128 LOGAN RIDGE DR. STATESVILLE PHONE: 803 803 4403 ALT. PHONE:

SITE DIRECTIONS: OSWALT AMITY . TR WHEATFIELD - TR EMMA MAE - TR LOGAN RIDGE - ON RT

SUBDIVISION: WHEATFIELD SECTION: 1 LOT # 19 LOT AREA: .69AC DESIGN FLOW: 360 GPD L.T.A.R.: .225 gal/ft²

Septic Tank 1000 (gal) STB 786 Date 1-11-13
Pump Tank 1000 (gal) PT 32 Date 4-15-13
Pump Make GOULDS Model WE05111H Serial #
Nitrification Fields 1 # Lines 4 5 Linear Ft: 400
Trench Width 36" Max. Trench Bottom Depth 18" Gravel Depth N/A

☑ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI
System Description: PUMP 25% REDUCTION
Repair System Description: LP 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:

INITIAL SITE SKETCH

SEE MICHAEL ATHANAS
+ ASSOCIATES PLAN

AS BUILT SKETCH

TANKS ~52' FROM WELL
INSTALLED AS SHOWN
CHECKED LINES & TANKS 8-23-13
CHECKED ELEC. 8-30-13
BA

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: Date: 5-21-13 Installed by: ADAN CLEMENTE

IMPROVEMENT PERMIT by: C. B[illegible] CHES Date: 5/17/13 OPERATION PERMIT by: BA Date: 8-30-13

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 5-21-13 Existing System Inspected Date:

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