IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (@) MOORESVILLE 704-664-5281

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

PERMIT# Repair - 16457 PIN# 4771474697 DATE 10-27-08

OWNER OR APPLICANT FRANK VALENTE PHONE: Business Steve JORDAN 542-2961 Home

ADDRESS PO BOX 3402 HOBOKEN NJ 07030

LOCATION 70 EAST (R) Triplett (L) WATERMOSS (L) bear Away Ahead ON LEFT

SUBDIVISION Willows Ridge BLOCK / SECTION 2 LOT 81 LOT AREA .91 ACRES SITE CLASS PS DESIGN FLOW 480 L.T.A.R. .4

Septic Tank: 1000 Gallons; STB 1012 Date 5-20-09
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 18-36" Gravel Depth 12" ☒ Gravity ☐ Pressure

☐ New System ☒ Repair ☐ Expansion System Type: I II III IV V VI
System Description: NEW TANK
Repair System Description:
Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home ☒ Mobile Home ☐ Business ☐ Other
No. Bedrooms 4 No. Persons No. Employees

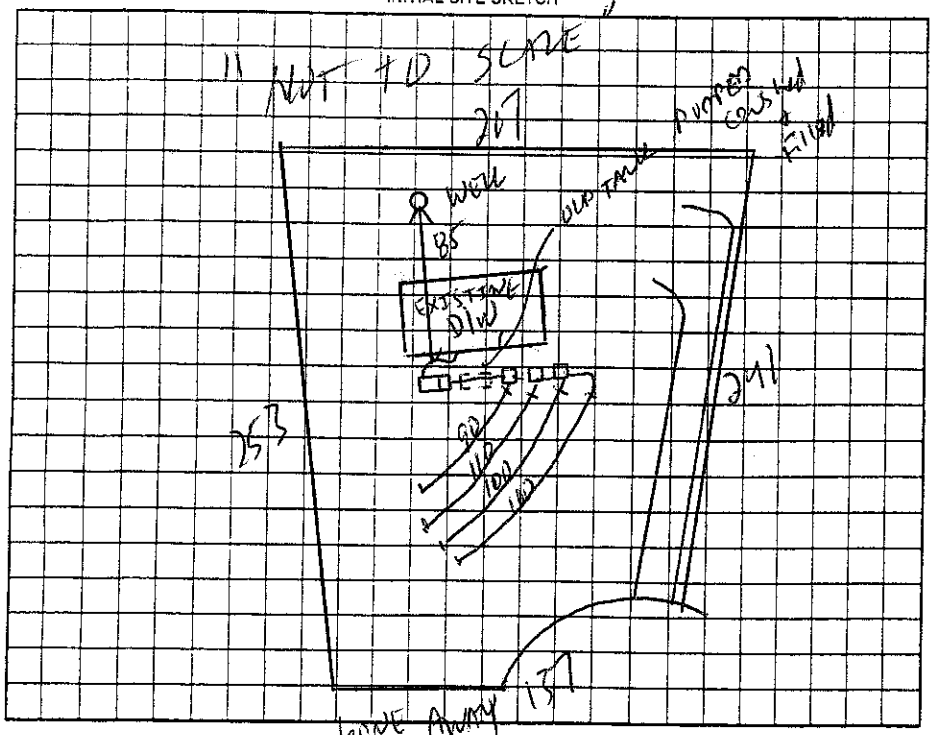
Water Supply: ☒ Individual ☐ Public ☐ Community

☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions: ① TANK Inspection During Real ESTATE sale showed tank was cracked, Replace TANK ② This Permit Serves As Notice of Violation And must be repaired within 30 DAYS

Comments:/Conditions:

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 with plat valid without expiration ☐ 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: Steve Jordan date 10/27/08 Installed by: Piedmont Backhoe

Improvement Permit by: date 10-27-08 Operation Permit by: date 10-27-08

Authorization to Construct by: date 10-27-08 Existing System Inspection by: date

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