IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 103507 PIN# 4783-13-0039 B DATE 12-5-01

OWNER OR CONTRACTOR TRACY MONTAGINO PHONE Business 704-455-8523 Home 704-872-8639

ADDRESS [redacted] 8219 CALDWELL RD HARRISBURG NC 28075

LOCATION 64E @ BARRYOAK RD, ON LEFT IN FIELD B-4 ELMWOOD RD & RIGHT AFTER MILLS GARDEN

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 2.0 SITE CLASS _____ DESIGN FLOW _____ L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 1012 Date 01-13-02
Pump Tank: _____ Gallons: PT _____ Date _____
Pump Make: _____ Model _____ Serial No _____
Nitrification Field: No Fields 1 Square Feet 1600' Linear Feet 533'
No Lines 5X107' Trench Width 36" Max Trench Bottom Depth 36"

X New System ☐ Repair System Type: I (1) III IV V VI
System Description: CONV GRAV
Repair System Description: SAME / 25% REDUCTION
Maintenance Agreement Required: ☐ Yes X No
Gravel Depth 12" ☐ Slab X Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

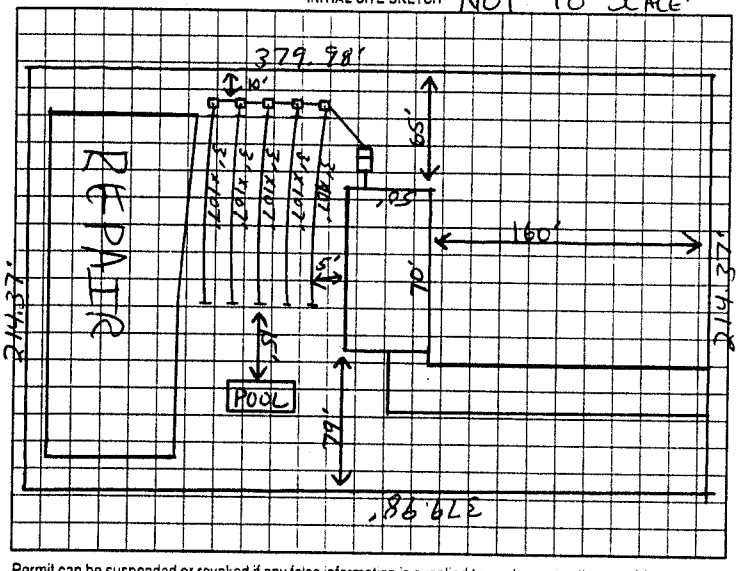
X House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees _____
☐ Other _____

Water Supply: ☐ Individual X Public ☐ Community IREDELL

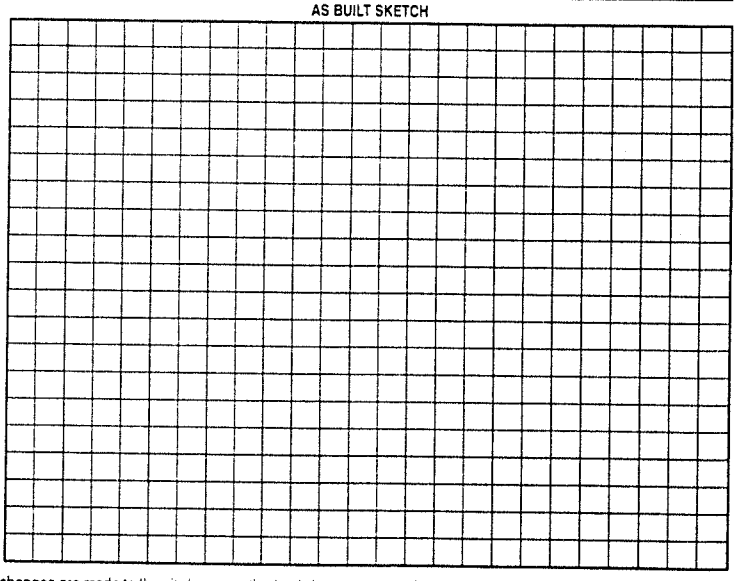
Comments/Conditions: (1) INSTALL LINES ON CONTOURS (2) MAINTAIN SETBACKS (3) GRADE OUT TERRACE'S UNIFORM & ON CONTOURS AS DRAWN (4) KEEP ANY PART OF SYSTEM 5' FROM FOUNDATION & 10' OFF PROPERTY LINES

Comments/Conditions: POLYLOK FILTER & MARKER INSTALLED AS SHOWN

INITIAL SITE SKETCH "NOT TO SCALE"



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: William H Parker date 12-5-01

Improvement Permit by: [signature] RS date 12-5-01

Authorization to Construct by: [signature] RS date 12-5-01

Installed by: STEVE JORDAN

Operation Permit by: [signature] RS date 05-28-02

Existing System Inspection by: _____ date _____

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