IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 PERMIT # 206745

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

PIN # 4785120878

APPLICANT: Al Gingerich APPLICANT ADDRESS: 445 Airport Rd Mooresville NC

SITE ADDRESS: 501 Barry Oak Rd Statesville NC PHONE: 704-305-6402 ALT. PHONE: N/A

SITE DIRECTIONS: 64E T/R Barry Oak Rd Lot on left past church

SUBDIVISION: Tommy C Turner SECTION: N/A LOT # 1 LOT AREA: 4.581 ac DESIGN FLOW: Ex L.T.A.R.: Ex

Septic Tank Ex (gal) STB Date
Pump Tank (gal) PT Date
Pump Make Model Serial #
Nitrification Fields Ex # Lines Ex Linear Ft: Ex
Trench Width Ex Max. Trench Bottom Depth Ex Gravel Depth N/A

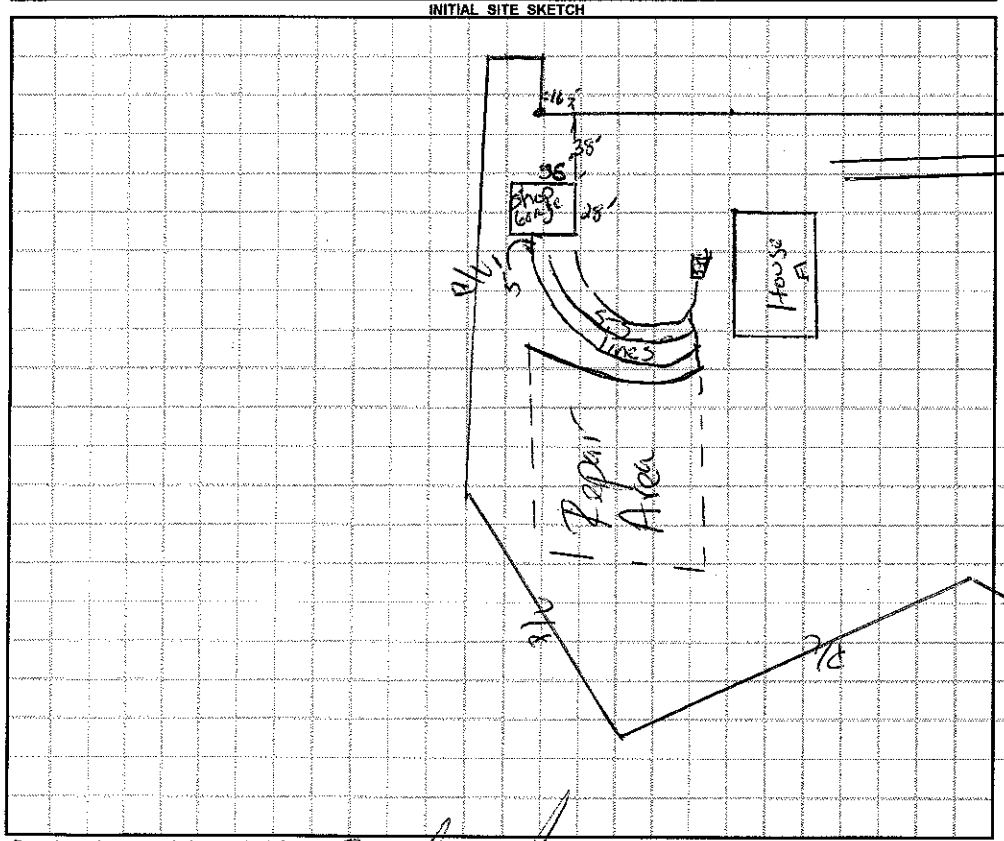
☐ New System ☐ Repair ☐ Expansion System Type: I II [III] IV V VI
System Description: Existing
Repair System Description:
Maintenance Agreement Required: ☐ YES ☒ NO
☒ GRAVITY ☐ PRESSURE

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

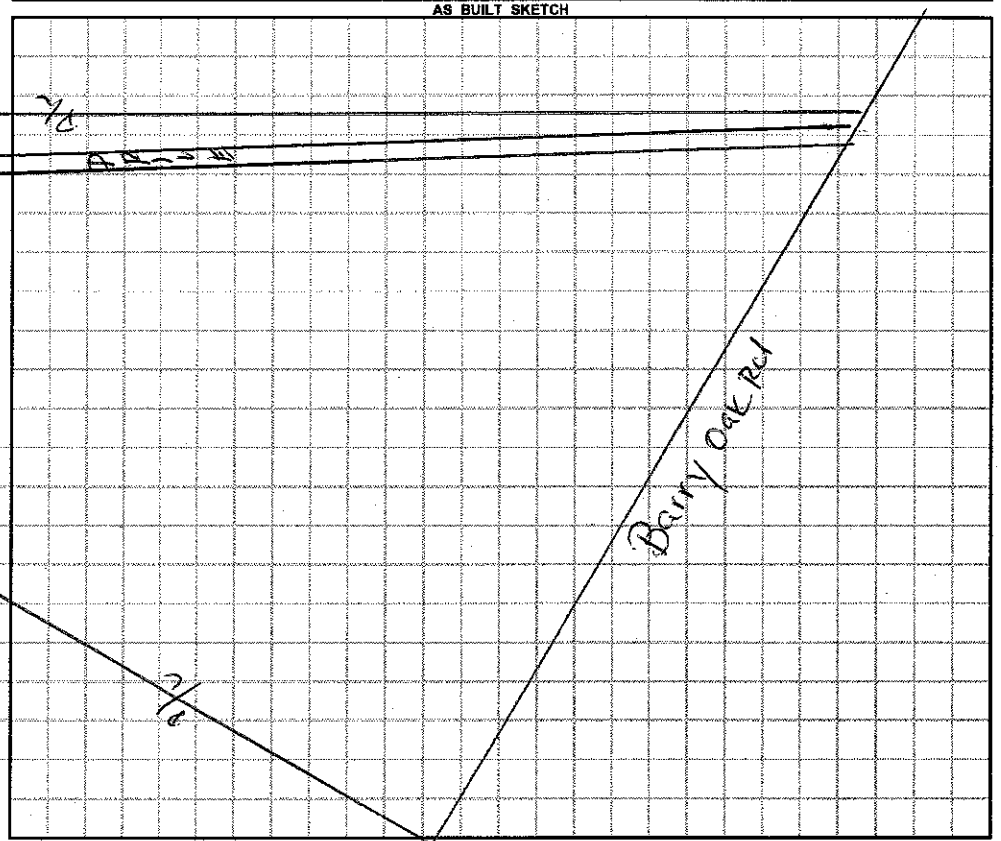
Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: All building foundations must be 5' from any part of STS

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. **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: 2/13/15 Installed by:

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Date: 01/20/15

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

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 301583

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

PIN # 4785120878

APPLICANT: Al Gingerich APPLICANT ADDRESS: 445 Airpark Dr Mooresville NC

SITE ADDRESS: 501 Barry Oak Rd Statesville NC 28625 PHONE: 704-662-8628 ALT. PHONE: N/A

SITE DIRECTIONS: 64E TR Barry Oak Rd 1mile on Left

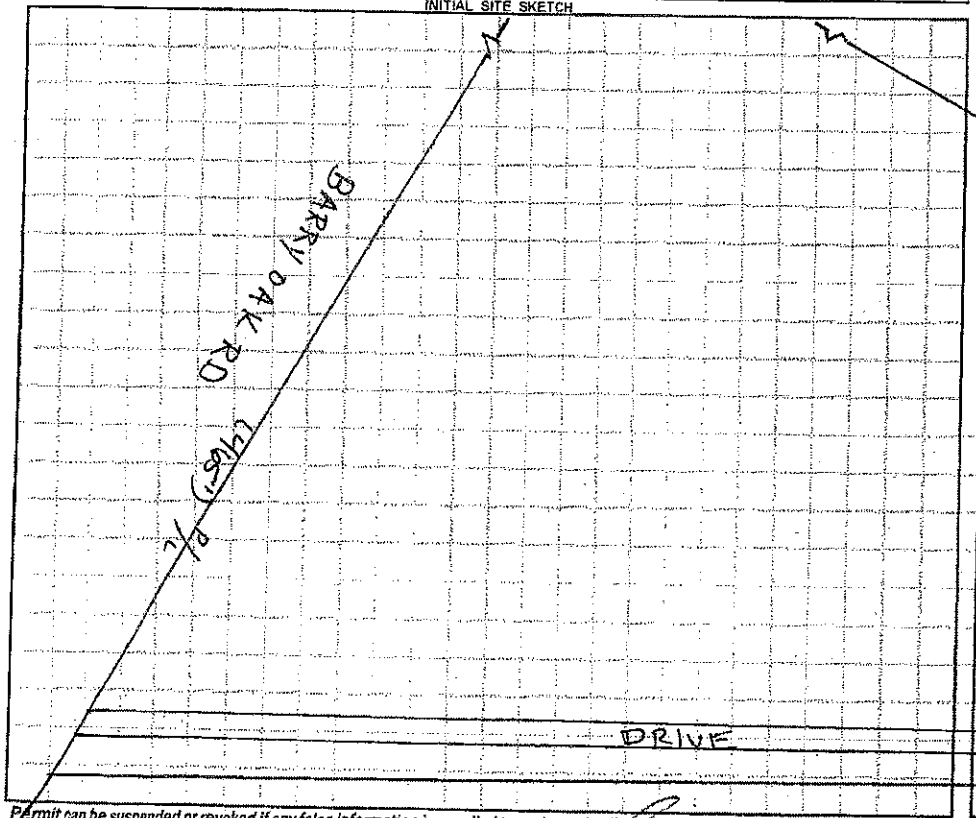
SUBDIVISION: N/A SECTION: N/A LOT # N/A LOT AREA: 4ac DESIGN FLOW: 360 L.T.A.R.: .3

Septic Tank	1000 (gal)	STB	825	Date	8-1-14	[X] New System	[ ] Repair	[ ] Expansion	System Type: I II [III] IV V VI
Pump Tank	N/A (gal)	PT	N/A	Date	N/A	System Description:	25% Reduction		
Pump Make	N/A	Model	Tuffite	Serial #		Repair System Description:	25% Reduction		
# Nitrification Fields	1	# Lines	4	Linear Ft:	300	Maintenance Agreement Required:	[ ] YES	[X] NO	
Trench Width	36"	Max. Trench Bottom Depth	36"	Gravel Depth	N/A	[X] GRAVITY	[ ] PRESSURE		

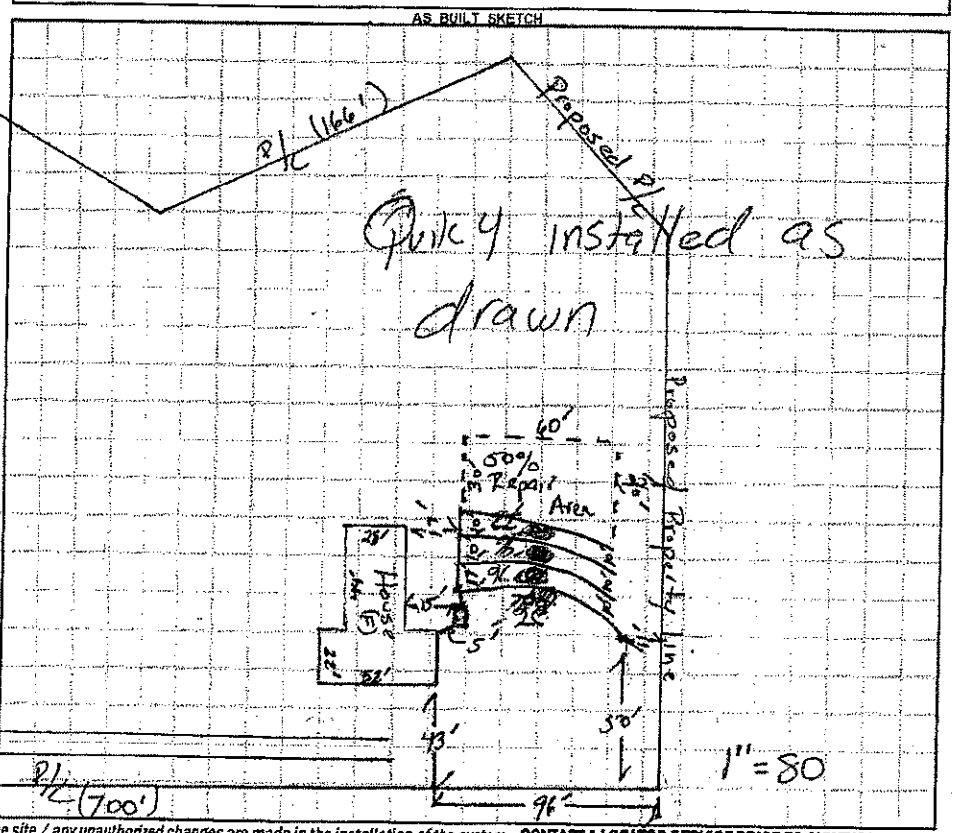
[X] Residence [ ] Business [ ] Other [ ] Slab [ ] Basement w/plumbing
No. Bedrooms 3 No. Persons 6 No. Employees [ ] Crawl Space
Water Supply: [X] Private [ ] Public [ ] Community
[X] Basement w/o plumbing

Comments / Conditions: * Improvements Permit only * must submit new plat and floor plan. Install 25% Reduction on contour with serial distribution

INITIAL SITE SKETCH



AS BUILT SKETCH



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[ ] **IMPROVEMENT PERMIT** *with plat valid without expiration.* [X] **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* [X] **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Date: 4/7/14 Installed by: Rowan Sept 10

IMPROVEMENT PERMIT by: Date: 02/27/14 OPERATION PERMIT by: Date: 09/16/14

AUTHORIZATION TO CONSTRUCT by: Date: 04/03/14 Existing System Inspected by: Date:

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