11:00 Repair - Tank Replacement

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT # Repair PIN # 4821-36-3885 DATE 1 July 10

OWNER or APPLICANT Jon Perreault PHONE: ~~Business~~ (978) 807-7479 Home: (704) 876-1872

OWNER or APPLICANT ADDRESS 472 Mountain View Hwy Statesville, NC

LOCATION / DIRECTIONS I-77 TL Brookhaven Rd.

SUBDIVISION BLOCK / SECTION LOT # LOT AREA 0.95ac DESIGN FLOW 360 gpd L.T.A.R.

NA

Septic Tank 1000 Gallons: STB 1017 Date 2-17-10

Pump Tank Gallons: P T Date

Pump Make Model Serial #

Nitrification Field No Fields No Lines Linear Feet

Trench Width Max. Trench Bottom Depth Gravel Depth

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

System Description:

Repair System Description: ST Replacement

Maintenance Agreement Required ☐ YES ☑ NO

☑ GRAVITY ☐ PRESSURE

☑ Residence No. Bedrooms 3

☐ Business No. Persons

☐ Other No. Employees

☐ Slab ☐ Crawl Space

☐ Basement w/plumbing ☑ Basement w/o plumbing

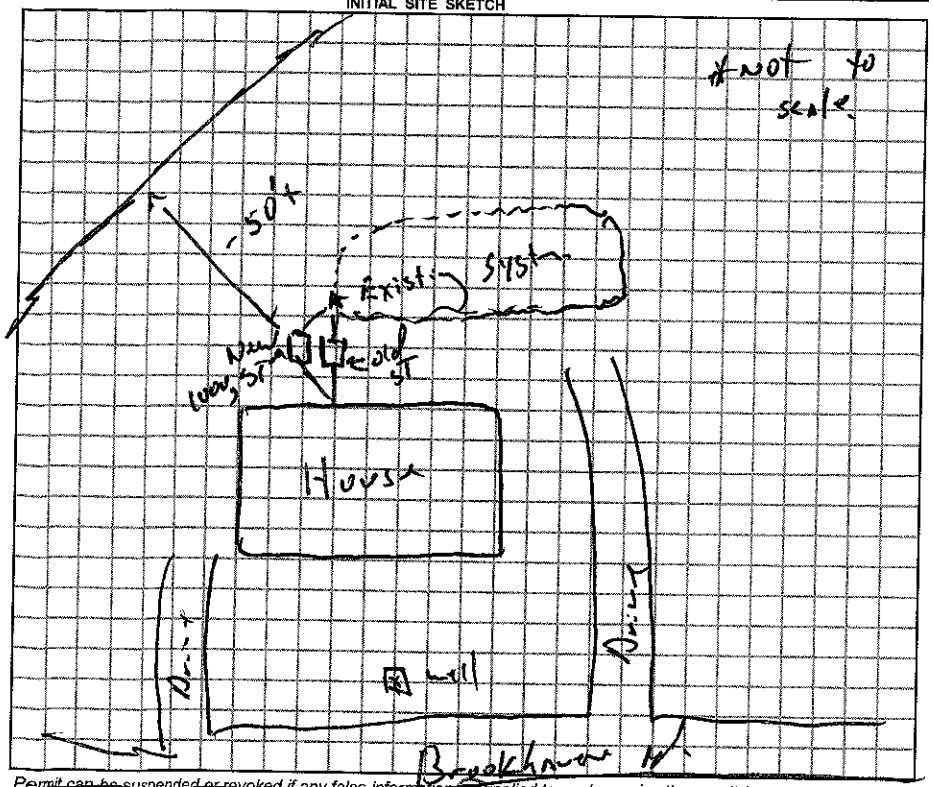
Water Supply ☑ Private - Exist. ☐ Public ☐ Community

Comments / Conditions

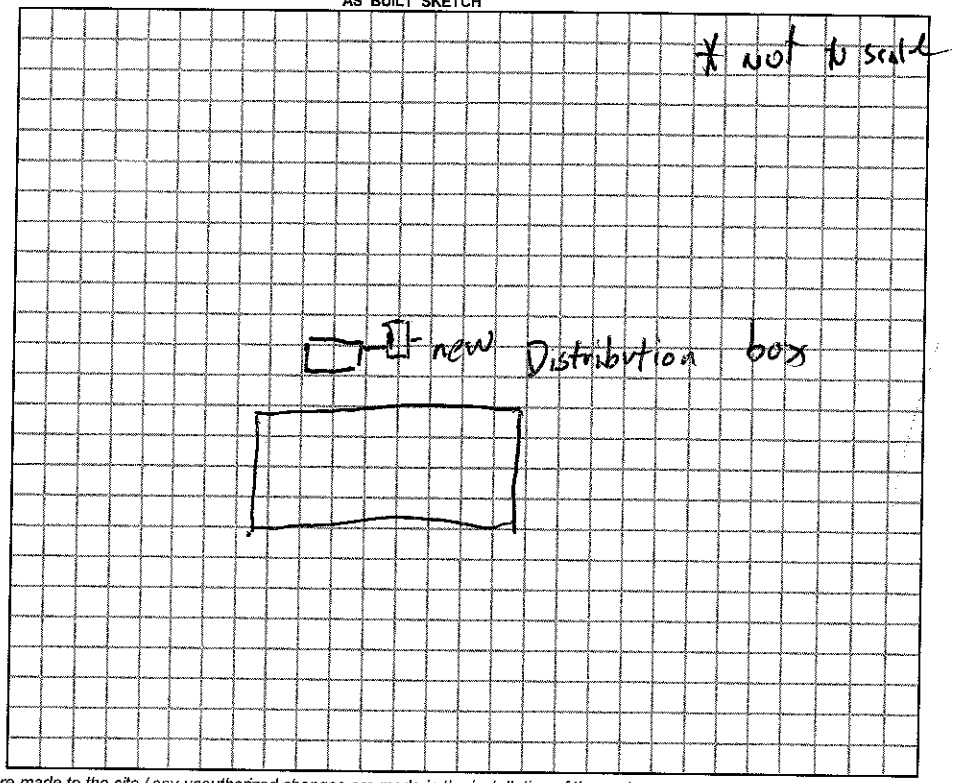
* Replace existing septic tank. / Properly Abandon existing ST. / Keep 50'± from stream / Keep 50'± from existing well.

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 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: Paulne Perreault Date 7-13-2010

Improvement Permit by: Date

Authorization to Construct by: R.S. Date 1 Jul 10

Installed by: Tommy Fryo

Operation Permit by: Date: 7-22-10

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