IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C1) MOORESVILLE 704-664-5281

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

(C)

PERMIT# 14849 PIN# 4843-98-9382 DATE 3-11-08

OWNER OR APPLICANT ANITA VARGAS PHONE: Business 336-468-2856 Home 704-539-4573

ADDRESS 379 HOWARDS BRIDGE ROAD, UNION GROVE, NC 28689

LOCATION FROM NC 901 TO HOWARDS BRIDGE ROAD, TR TOBYS FOOTLOG DRIVE, MH ON RIGHT

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 3.175 ACRES SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. 0.30 GPD/FT²

Septic Tank: EXISTING Gallons; STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet ERTS 800 Linear Feet 200

No Lines TWO Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: 25% REDUCTION, GRAVITY

Repair System Description: 25% REDUCTION, GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other _____

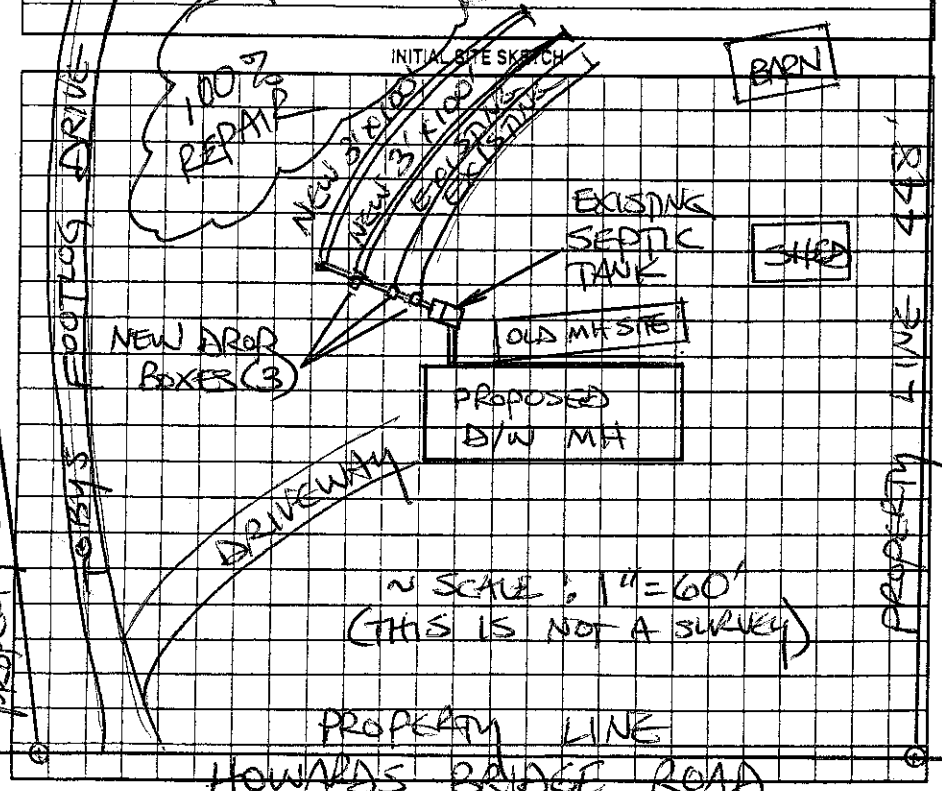
No. Bedrooms 2 No. Persons ____ No. Employees ____

Water Supply: ☐ Individual ☑ Public ☐ Community

☐ Gravity ☐ Pressure ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions: INSTALL 25% REDUCTION SYSTEM ON CONTOUR AS SHOWN USING SERIAL DISTRIBUTION

INITIAL SITE SKETCH



Comments:/Conditions:

AS BUILT SKETCH

SYSTEM EXPANDED ACCORDING TO INITAL SITE 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: Anita C. Vargas date 3.12.08

Improvement Permit by: STEVE HENDRICK date 3-11-08

Authorization to Construct by: STEVE HENDRICK date 3-11-08

Installed by: SAMMY REALS

Operation Permit by: STEVE HENDRICK date 5-30-08

Existing System Inspection by: _____ date _____

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