IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 222634

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

PIN # 4874727423

APPLICANT: Alberto Araiz APPLICANT ADDRESS: 192 Barnard Mill Rd

SITE ADDRESS: 192 Barnard Mill Rd. - Hamptonville PHONE: 910-644-2544 ALT. PHONE: N/A

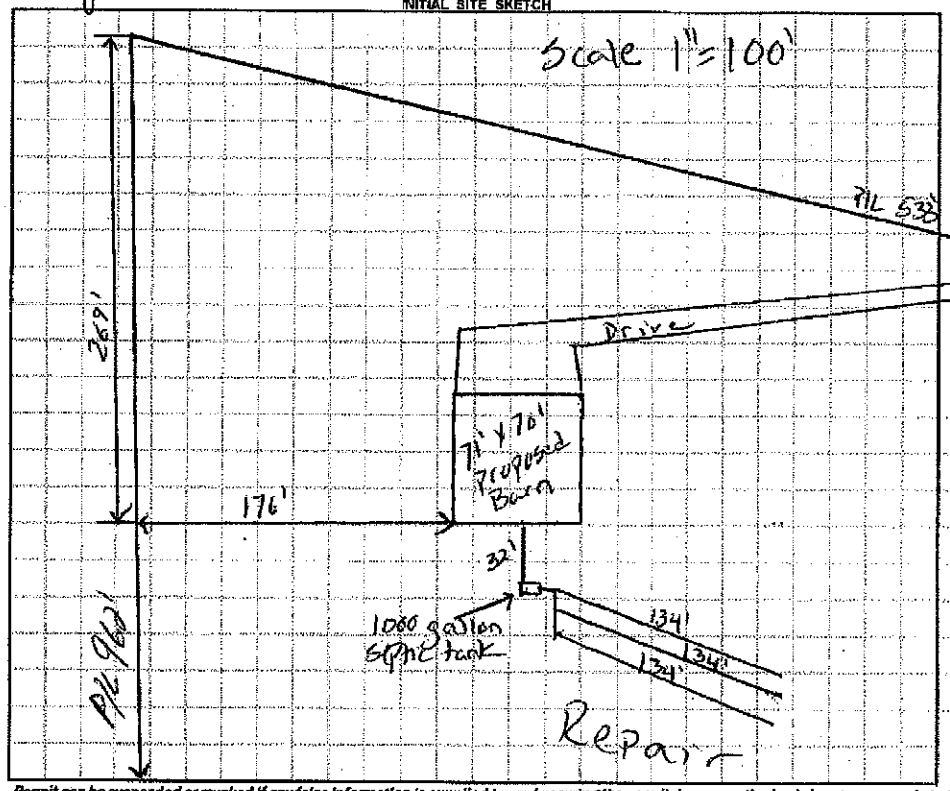
SITE DIRECTIONS: HWY 21 N TL Barnard Mill Rd. Property on Right

SUBDIVISION: N/A SECTION: N/A LOT # N/A LOT AREA: 15.21 DESIGN FLOW: 480gpd L.T.A.R.: 0.3

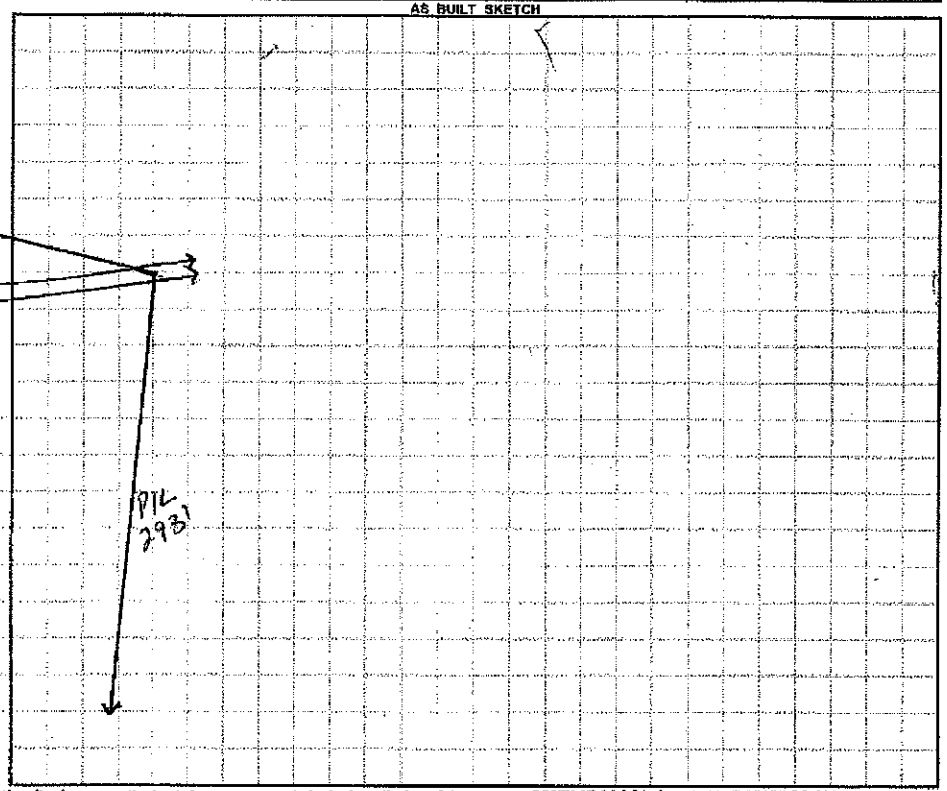
Septic Tank	1000 (gal)	STB	1012	Date	9-4-16	☑ New System ☐ Repair ☐ Expansion System Type: I II ☑III IV V VI	☐ Residence No. Bedrooms		Water Supply
Pump Tank	(gal)	PT		Date		System Description: 25% Reduction	☐ Business No. Persons :		☑ Private
Pump Make		Model		Serial #		Repair System Description: 25% Reduction	☑ Other BARN No. Employees		☐ Public
# Nitrification Fields	1	# Lines	3	Linear Ft:	402	Maintenance Agreement Required: ☐ YES ☑ NO	☑ Slab ☐ Crawl Space		☐ Community
Trench Width	36"	Max. Trench Bottom Depth	25"	Gravel Depth	N/A	☑ GRAVITY ☐ PRESSURE	☐ Basement w/plumbing	☐ Basement w/o plumbing	

Comments / Conditions: Install a 25% Reduction system on contour with serial distribution. System sized @ 480gpd per applicant's request.

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: [signature] Date: 11/28/16 Installed by: Steve Jordan

IMPROVEMENT PERMIT by: [signature] Date: 11-14-16 OPERATION PERMIT by: [signature] Date: 2/10/17

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 12/12/16 Existing System Inspected by: Date:

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