

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooreville Office (704) 660-3625

PERMIT # 200228

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

PIN # 4635-05-9727

APPLICANT: Gary Rinaldi APPLICANT ADDRESS: 36 Burchard Dr Smithtown, NY 11787

SITE ADDRESS: 109 Kingsbury Court Mooresville NC 28117 PHONE: 631-724-2880 ALT. PHONE:

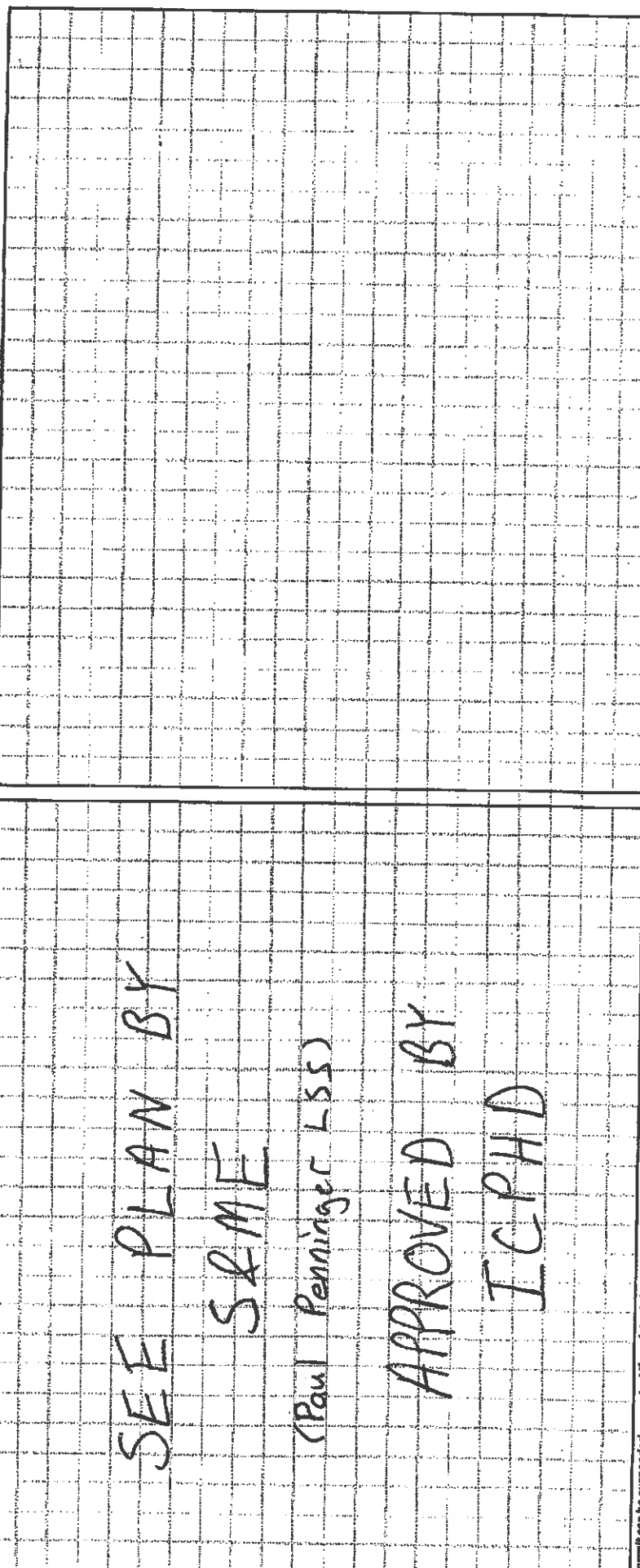
SITE DIRECTIONS: Bowley Sch Rd, TL on Chatham Dr TL on Kingsbury Ct, Lot on corner on L

SUBDIVISION: The Point SECTION: 1B LOT # 14 LOT AREA: 10.8 ac DESIGN FLOW: 480 gpd L.T.A.R.: 0.3

Septic Tank (gal)	1500	STB	Date	<input checked="" type="checkbox"/> New System	<input type="checkbox"/> Repair	<input type="checkbox"/> Expansion	System Type: I II III IV V VI	<input checked="" type="checkbox"/> Residence	No. Bedrooms	4	<input type="checkbox"/> Private
Pump Tank (gal)	1500	PT	Date	System Description:				<input type="checkbox"/> Business	No. Persons	8	<input type="checkbox"/> Public
Pump Make			Serial #	Repair System Description:				<input type="checkbox"/> Other	No. Employees		<input checked="" type="checkbox"/> Community
# Nitrification Fields	1		Linear Ft:	Maintenance Agreement Required:				<input type="checkbox"/> Slab	<input checked="" type="checkbox"/> Crawl Space		<input type="checkbox"/> Basement w/o plumbing
Trench Width	36"		Max. Trench Bottom Depth	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> GRAVITY	<input type="checkbox"/> PRESSURE	<input type="checkbox"/> Basement w/ plumbing			

Comments / Conditions: ***GULLY ON SITE PLAN MUST BE FILLED BEFORE AC IS ISSUED***
 Reviewed floor plans 4/11/14 in compliance with original Septic plan.

INITIAL SITE SKETCH AS BUILT SKETCH



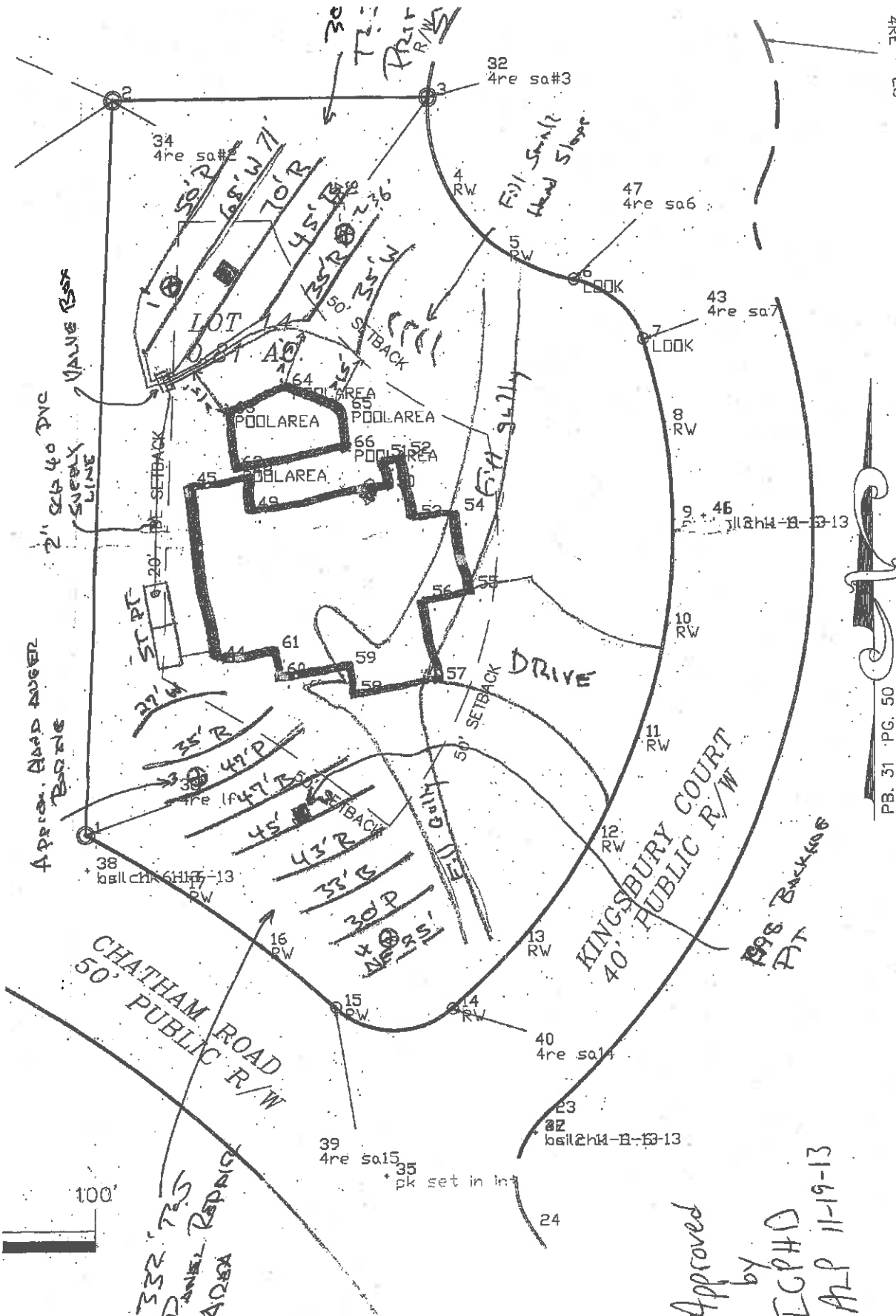
Permit can be suspended or revoked if any false information is supplied toward securing the permit / any unauthorized changes are made to the site / any unauthorized changes are made in the installation of the system. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

IMPROVEMENT PERMIT with plan, valid without expiration. IMPROVEMENT PERMIT with also 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: 11-22-13 Installed by: [Signature]
 IMPROVEMENT PERMIT by: [Signature] Date: 11-19-13 OPERATION PERMIT by: [Signature] Date: 4/11/14
 AUTHORIZATION TO CONSTRUCT by: [Signature] Date: 4/11/14 Existing System Inspected by: [Signature] Date: 4/11/14

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

1 = 30'



PB. 31 PG. 50 LC. 1C. 13

Approved
by
ICPHD
APR 11-19-13

1584-13-132 GARY RINALDI

The Point 13 Lot 14
11-15-132

* SITE PLAN MUST ACCOMPANY WRITTEN REPORT
AND BE APPROVED BY THE ICAD