IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 202067

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

PIN # 4614-95-7533.000

APPLICANT: Kenneth Beaver Homes APPLICANT ADDRESS: P.O. Box 3398 Mooresville NC, 28117

SITE ADDRESS: 292 Tuskaroora Trail Mooresville, NC 28117 PHONE: 704-662-6400 ALT. PHONE:

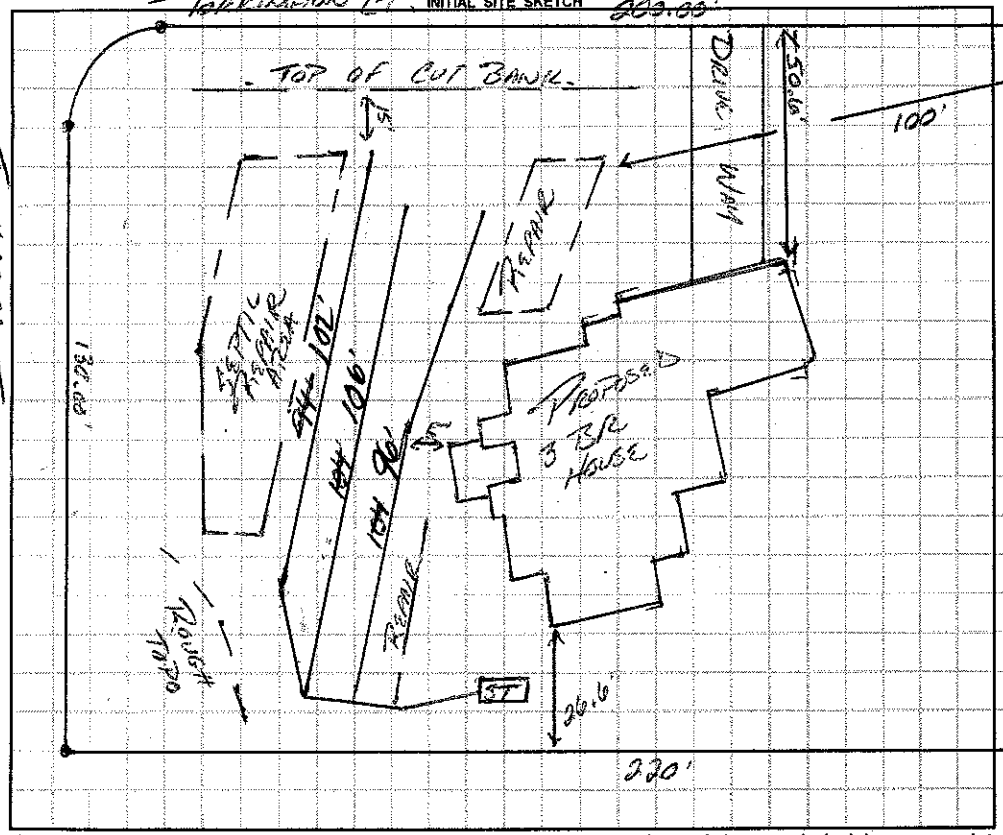
SITE DIRECTIONS: BSR, TR Tuskaroora Trail, AT Corner of Tuskaroora & Torrington.

SUBDIVISION: Rock Spring Park SECTION: LOT # 3 LOT AREA: .758 Acre DESIGN FLOW: 360 GPD L.T.A.R.: .3

Septic Tank 1000 (gal)	STB 1012	Date 12/8/14	☑ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☑ Residence	No. Bedrooms 3	Water Supply
Pump Tank (gal)	PT	Date	System Description: 25% Reduction - Gravity		☐ Business	No. Persons 6	☑ Private
Pump Make	Model	Serial #	Repair System Description: 25% Reduction - Pump		☐ Other	No. Employees	☐ Public
# Nitrification Fields 1	# Lines 3	Linear Ft: 300	Maintenance Agreement Required:	☐ YES ☑ NO	☐ Slab	☑ Crawl Space	☐ Community
Trench Width 36"	Max. Trench Bottom Depth 36"	Gravel Depth N/A	☑ GRAVITY	☐ PRESSURE	☐ Basement w/plumbing	☐ Basement w/o plumbing	

Comments / Conditions: Fallow All Septic Rules. Install on Contour. Use Minimum 1' Cover. (At least 36" Trench Bottom.) Maintain Minimum 100' Separation From Well With Initial And Repair. Smooth Any Unsuitable Topography At Septic Area. Use End Cap Distribution.

INITIAL SITE SKETCH



AS BUILT SKETCH

Arc 36 Chambers Installed Essentially As Drawn.

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: Kevin Beaver Date: 10/21/14 Installed by: Steve Jordan

IMPROVEMENT PERMIT by: APPROVED OCT 13 2014 OPERATION PERMIT by: Date: 5/5/15

AUTHORIZATION TO CONSTRUCT by: APPROVED OCT 13 2014 Date: Existing System Inspected by: Date:

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