ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 x3456 | Mooresville Office (704) 660-3625

PERMIT : OSWP OSWP 2024-49126

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

PIN # 4614 - 97 - 5334

APPLICANT/OWNER: David Allen | APPLICANT ADDRESS: 191 Balmoral Dr. Mooresville 28117

SITE ADDRESS: 191 Balmoral Dr. Mooresville 28117 | PHONE: 480-839-8043 | ALT. PHONE —

SITE DIRECTIONS: BSR - @ Tuskarora - @ Balmoral - Lot on (L) | SAP CONTROLLED: ☐ YES ☐ NO

SUBDIVISION: CLET | SECTION: 6 | LOT # 232 | LOT AREA: 0.5 | DESIGN FLOW: 360gpd | L.T.A.R.(Initial): EX | L.T.A.R (Repair): —

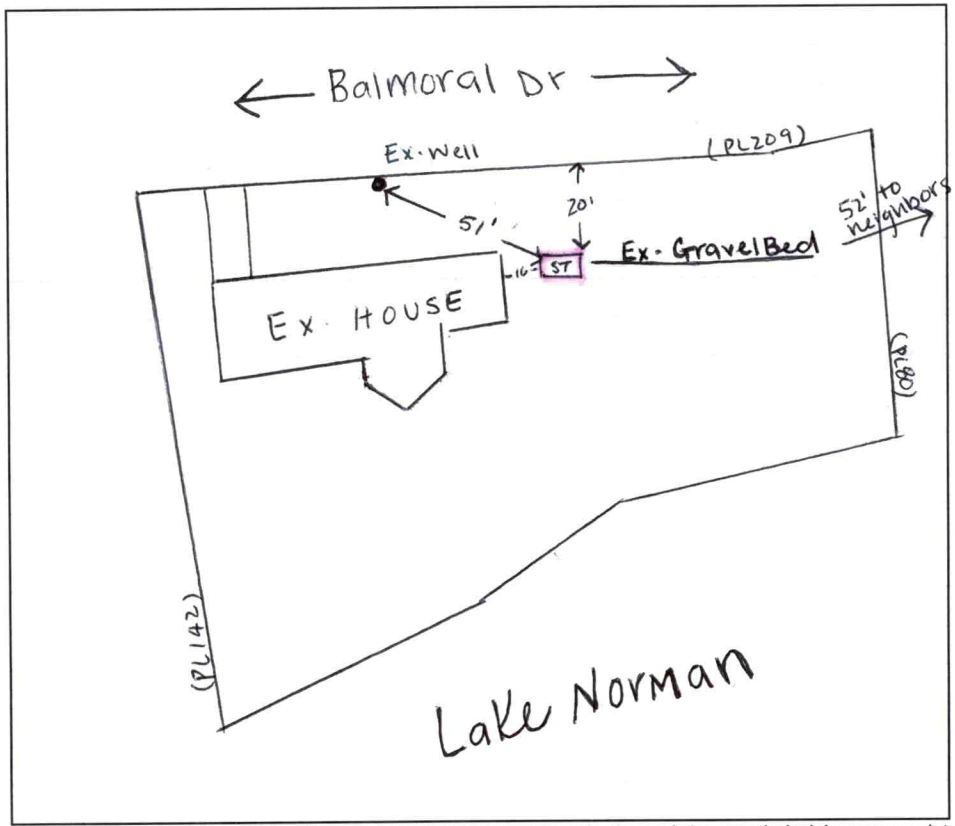
EXISTING

Septic Tank 1000 (gal)	STB 760	Date	☐ 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: —				☐ Business	No. Persons 6	☑ Private
Pump Make	Model	Serial #	Repair System Description: Tank Replacement				☐ Other	No. Employees	☐ Public
# Nitrification Fields	# Lines	Linear Ft	Maintenance Agreement Required:	☐ YES	☑ NO		☐ Slab	☐ Crawl Space	☐ Community
Trench Width —	*Max Trench Depth(Initial)	*Max. Trench Depth(Repair) —	Gravel Depth —	☑ GRAVITY	☐ PRESSURE		☑ Basement w/ plumbing	☐ Basement w/o plumbing	

* Measured on the downhill side of the trench | Effluent Standard: ☑ DSE ☐ HSE ☐ TS-I ☐ TS-II ☐ RCW ☐ NSF/ANSI 40 | Usable Depth to LC (Initial): — | Usable Depth to LC (Repair): — | *Limiting Condition*

Comments / Conditions: Keep tank 50' from existing well. Place new tank in same hole as existing tank.

INITIAL SITE SKETCH



AS BUILT SKETCH

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inspector to confirm your time.

1" = 50'

Tank 10' from house, 58' from well

5 lines to bed, jetted, new d-box set.

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: online | Date: — | Installed by: Lentz

IMPROVEMENT PERMIT by: Sydney Holland | Date: 3/18/24 | OPERATION PERMIT by: D. Meberg | Date: 4/23/24

AUTHORIZATION TO CONSTRUCT by: Sydney Holland | Date: 3/18/24 | Existing System Inspected by: — | Date: —

IREDELL COUNTY HEALTH DEPARTMENT STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PERMIT # 157334 PIN # 4614975334 DATE 7-13-09

OWNER or APPLICANT Jim Allen/Hands 4 Hire PHONE: Business Cassi Moore 704 962-2413 Home: 704 201-5842

OWNER or APPLICANT ADDRESS 20823 N. main Cornelius NC 28031

LOCATION / DIRECTIONS Brawley School Rd TR Tuskarora Tr. TR Balmoral on left 4th house from end #191

SUBDIVISION Meck Neck / Clat BLOCK / SECTION 6 LOT # 232 LOT AREA .5 Ac. DESIGN FLOW _____ L.T.A.R. _____

Septic Tank Exist Gallons: STB _____ Date _____

Pump Tank Exist Gallons: P T _____ Date _____

Pump Make _____ Model _____ Serial # _____

Nitrification Field No Fields ___ No Lines ___ Linear Feet _____

Trench Width _____ Max. Trench Bottom Depth Exist Gravel Depth _____

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

System Description: Exist. Grav. Conv.

Repair System Description: _____

Maintenance Agreement Required ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 3

☐ Business No. Persons ___

☐ Other No. Employees ___

☐ Slab ☐ Crawl Space

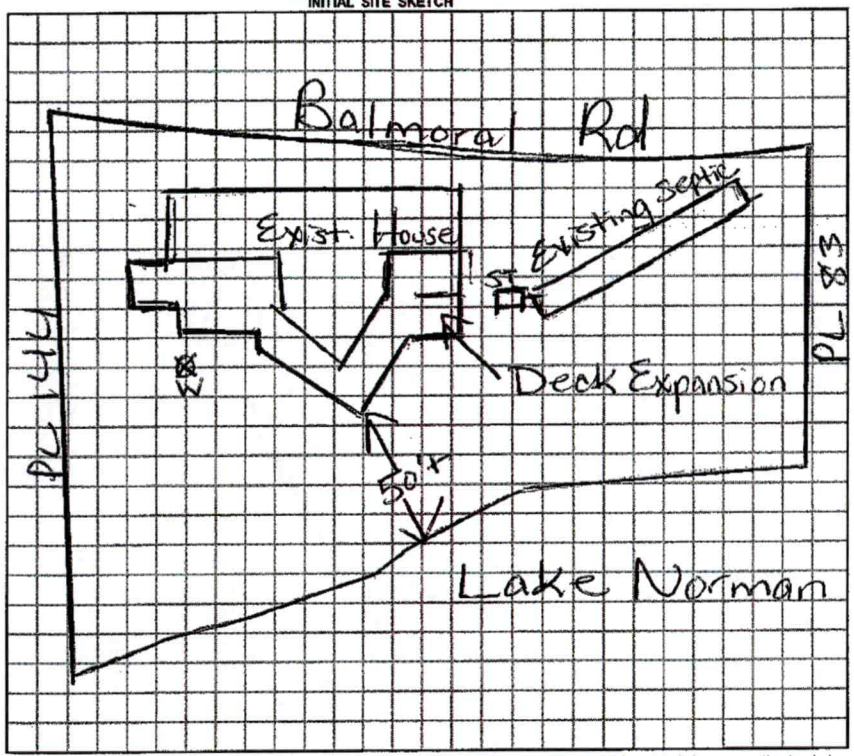
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply ☒ Private ☐ Public ☐ Community

Comments / Conditions Existing Septic. Appears to be Functioning Okay at time of inspection

Not to Scale

INITIAL SITE SKETCH



Comments / Conditions Keep deck addition at least 5FT from Septic. Deck should not impact existing Septic System.

AS BUILT SKETCH

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Owner / Applicant Signature: _____ Date 7/14/09

Improvement Permit by: _____ RS Date 7/13/09

Authorization to Construct by: _____ RS Date 7/13/09

Installed by: _____

Operation Permit by: _____ Date: _____

Existing System Inspected by: _____ RS Date: 7/13/09

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

WHITE COPY Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant