IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 2096650

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

PIN # 4624241716

APPLICANT: Teal Shultz APPLICANT ADDRESS: 110 Whitehorse Dr Mooresville

SITE ADDRESS: 105 Thrasher Ln Mooresville, NC 28117 PHONE: ALT. PHONE: 704 578-4951 Kathleen

SITE DIRECTIONS: Brawley School Rd TR Yellow Jacket TR Thrasher on Corner

SUBDIVISION: CATY SECTION: 6 LOT # 412 LOT AREA: .8 Acre DESIGN FLOW: 480gpd L.T.A.R.: .3

Septic Tank 1000 (gal) STB 794 Date 6-28
Pump Tank 1000 (gal) PT 27 Date 6-28
Pump Make LIBERTY Model 290 Serial #
Nitrification Fields 1 # Lines 3 Linear Ft: 200ft
Trench Width min. 24" Max. Trench Bottom Depth 30" Gravel Depth N/A

☒ New System ☐ Repair ☐ Expansion System Type: I II III (IV) V VI
System Description: LP Panel Block
Repair System Description: Same
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: Well abandoned 9/23/15.

This permit replaces the previous permit issued 5/8/15.

INITIAL SITE SKETCH

See attached/ approved plan by Kathleen Saunders (dated 9/25/15)

AS BUILT SKETCH

CHECKED TANKS, LINES, 8-2-16 BA
SET 2' PH 8-4-16 BA
CHECKED CVB
CHECKED ELEC & ALARM 9-1-16 BA
MAN. CONT. BA 9-9-16

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**

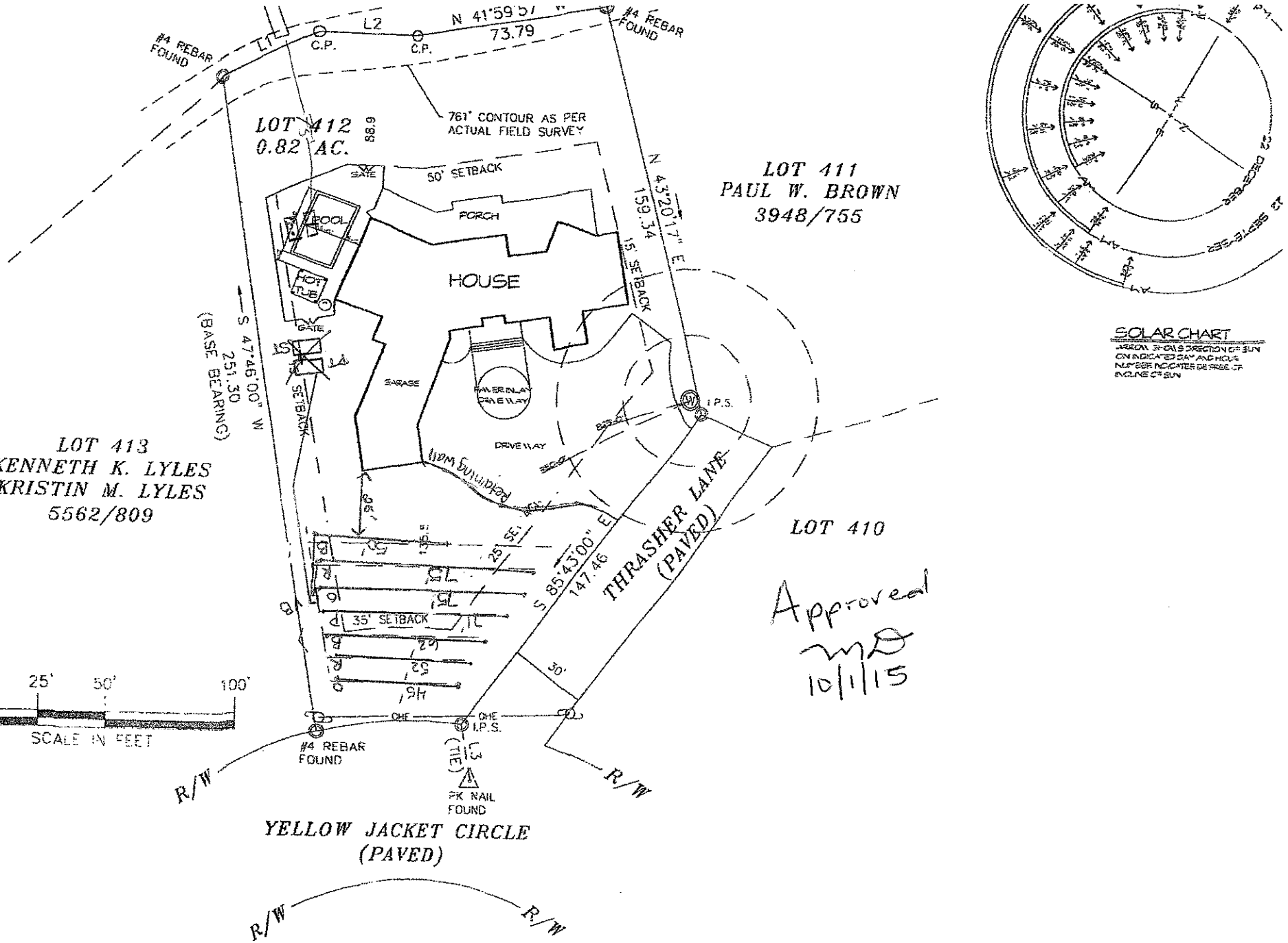
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☐ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Charles Shultz Date: 10/7/15 Installed by: ABERNATHY

IMPROVEMENT PERMIT by: RS Date: 10/1/15 OPERATION PERMIT by: BA Date: 9-9-16

AUTHORIZATION TO CONSTRUCT by: RS Date: 10/1/15 Existing System Inspected by: Date:

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



SOLAR CHART

AREAS SHOWS DIRECTION OF SUN ON INDICATED DAY AND HOUR. NUMBER INDICATES DEGREES OF ENCLINE OF SUN

Approved
MD
10/1/15

PROPOSED SITE PLAN

SCALE 1" = 25'-0"