IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 210276

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

PIN # 4624 45 5573

APPLICANT: PAUL OLSEN APPLICANT ADDRESS: 225 GAINSWOOD RD. MOORESVILLE, NC. 28117

SITE ADDRESS: SAME PHONE: 248-867-4616 ALT. PHONE:

SITE DIRECTIONS: BRAWLEY SCH RD. TL GAINSWOOD, LOT ON L

SUBDIVISION: CL+T SECTION: 6 LOT # 500 LOT AREA: .79 DESIGN FLOW: L.T.A.R.:

Septic Tank	(2) 1000 EA (gal)	STB	Date	☐ New System	☐ Repair	☐ Expansion	System Type: I (II) III IV V VI	☑ Residence	No. Bedrooms 3
Pump Tank	(gal)	PT	Date	System Description: EXISTING				☐ Business	No. Persons
Pump Make	Model		Serial #	Repair System Description:				☐ Other	No. Employees
# Nitrification Fields	# Lines		Linear Ft:	Maintenance Agreement Required:	☐ YES	☐ NO		☐ Slab	☐ Crawl Space
Trench Width	Max. Trench Bottom Depth		Gravel Depth		☐ GRAVITY	☐ PRESSURE		☐ Basement w/ plumbing	☐ Basement w/o plumbing

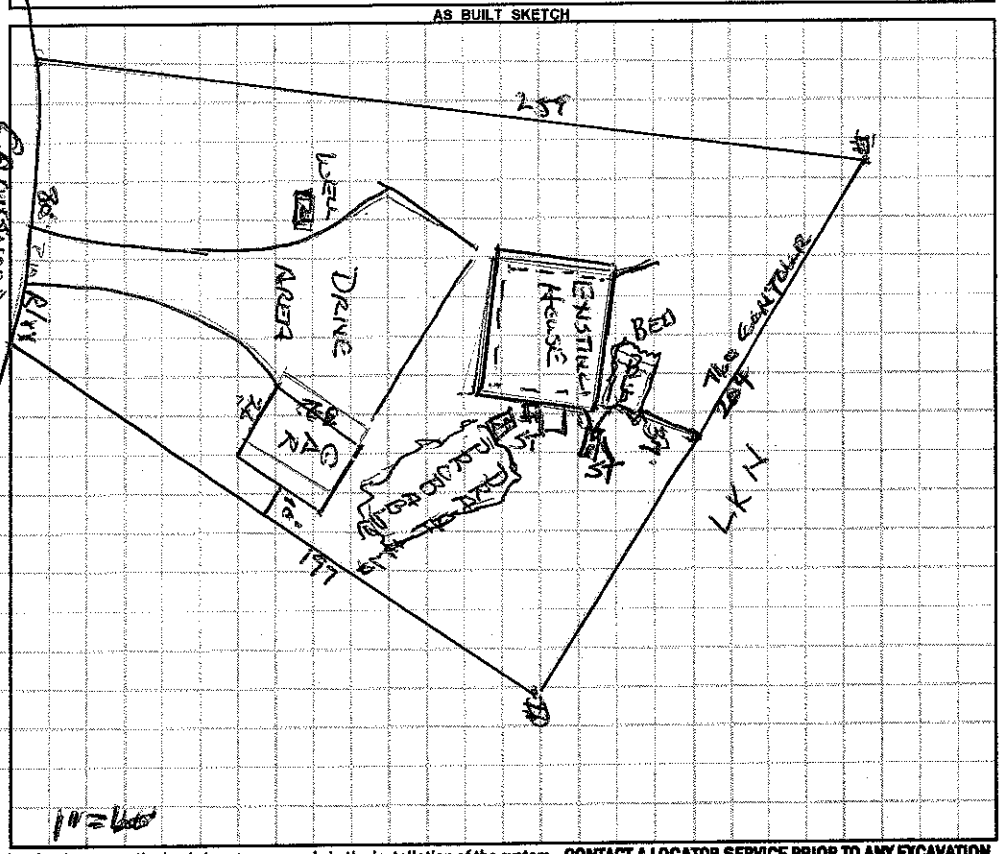
Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions: ADDING 26' X 32' GARAGE W/O PLUMBING. SEPTIC SYSTEM IS SPLIT SEE DRAWING. OWNER MADE AWARE OF 50' SETBACK FROM 760 CONTOUR - BED AND SEPTIC TANK FOR BASEMENT < 50' FROM 760.

INITIAL SITE SKETCH

* SYSTEM APPEARS TO BE FUNCTIONING PROPERLY.
* GROUND EXTREMELY HARD - UNABLE TO PROBE. BASED SEPTIC TANK LOCATION DRAINFIELD COULD NOT BE ANY FURTHER TOWARDS ROAD WITHOUT PUMP.

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: Paul Olsen Date: 6-10-15 Installed by:

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Wesley Sparks Date: 6/9/2015

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