IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT # 119923

PIN # 4625811698

APPLICANT: RAY & CHRISTINA TOMASCO

APPLICANT ADDRESS: 172 WILLIAMSON RD MOORESVILLE

SITE ADDRESS: 139 YACHT RD MOORESVILLE

PHONE:

ALT. PHONE:

SITE DIRECTIONS: BRAWLEY SCHOOL RD - TL YACHT - TL MILFORD - TL ALTON - ON LT CORNER

SUBDIVISION: POINT

SECTION: 13 LOT # 1353 LOT AREA: .75AC DESIGN FLOW: 480GPD L.T.A.R.: ~.275

Septic Tank 1500 (gal) STB Date

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines 7 Linear Ft: 434

Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI

System Description: GRAVITY 25% REDUCTION

Repair System Description: LPPBPS

Maintenance Agreement Required: ☐ YES ☑ NO

☑ GRAVITY ☐ PRESSURE

☑ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing

No. Bedrooms 4 No. Persons 8 No. Employees

☑ Crawl Space ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☑ Community

Comments / Conditions:

INITIAL SITE SKETCH

SEE KATHLEEN SAUNDERS, LSS PLAN.

AS BUILT SKETCH

---IMPROVEMENT PERMIT ONLY---

DO NOT ISSUE BUILDING PERMIT!

FLOOR PLAN STILL NEEDED!

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: Kathleen Saunders Date: 5/23/13

IMPROVEMENT PERMIT by: C. Brady Thomas REHS Date: 5/23/13

AUTHORIZATION TO CONSTRUCT by: Date:

Installed by:

OPERATION PERMIT by: Date:

Existing System Inspected by: Date:

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