IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 209556

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

PIN # 4625938851

APPLICANT: Mike Brachetti/Superior Pools APPLICANT ADDRESS: 20315 Knox Rd Cornelius, NC

SITE ADDRESS: 116 Mystic Lake Ln Mooresville, NC PHONE: 704896-7665 ALT. PHONE: 918 848-0577

SITE DIRECTIONS: Brawley School TL The Pointe Dr Meeting House

SUBDIVISION: The Pointe on Norman SECTION: A LOT # 60 LOT AREA: .86 Acre DESIGN FLOW: 480gpd L.T.A.R.: .25

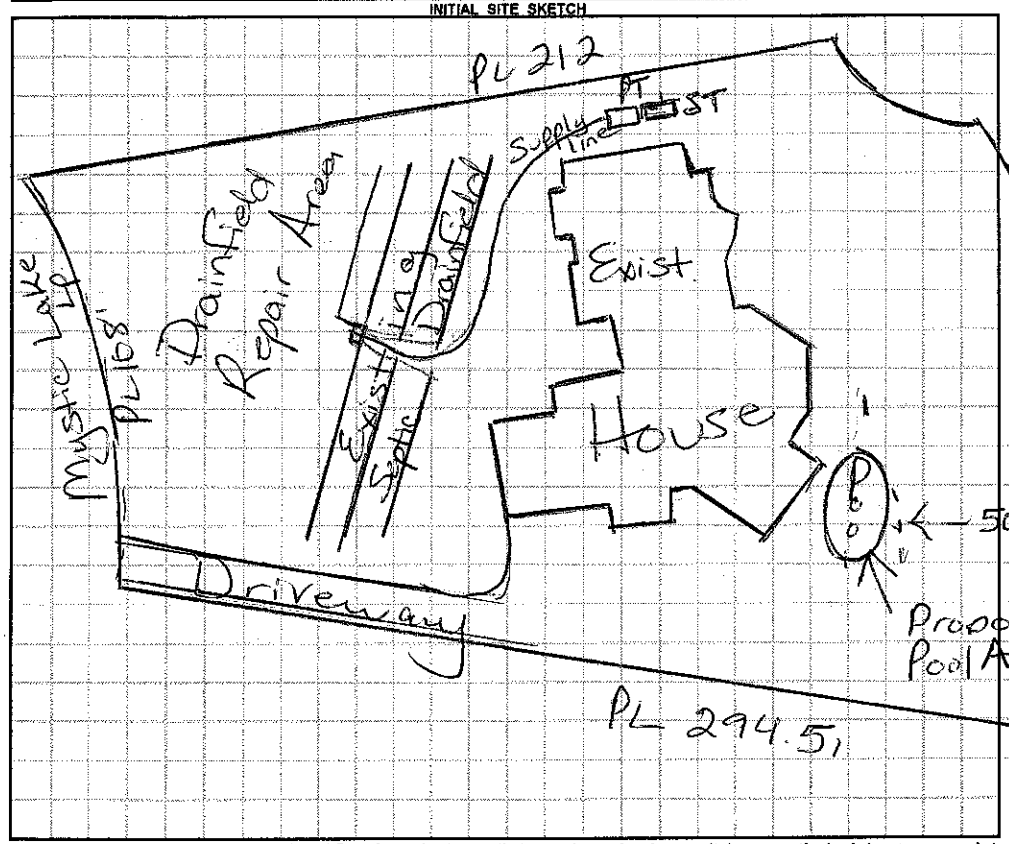
Existing

Septic Tank	1500 (gal)	STB		Date		☐ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms	4	Water Supply
Pump Tank	1000 (gal)	PT		Date		System Description: Existing Pump-LP-Panel Block		☐ Business	No. Persons	8	☐ Private
Pump Make		Model		Serial #		Repair System Description: Same		☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	7	Linear Ft:	320	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

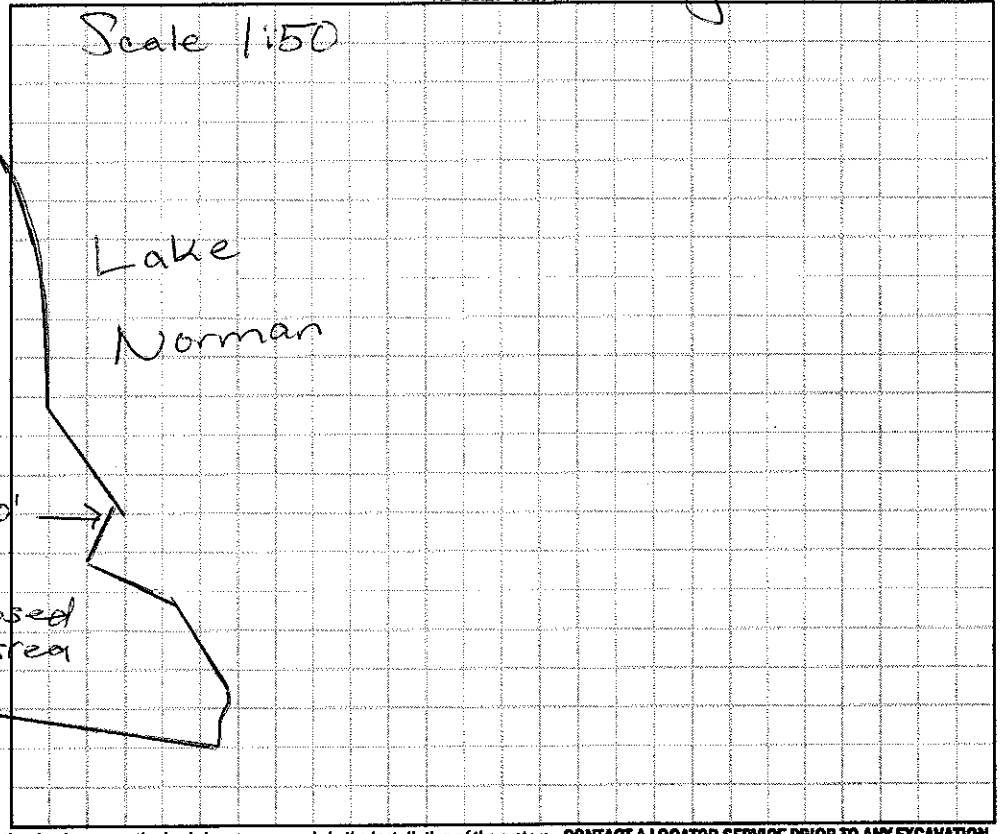
Comments / Conditions: Existing Septic System Appears to be Functioning okay at time of inspection.

The location of the proposed inground swimming pool addition does not appear to impact the existing on site septic System

INITIAL SITE SKETCH



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: Date: 5-11-15 Installed by:

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

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Maria H Dotson RS Date: 5/11/15

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