IREDELL COUNTY HEALTH DEPARTMENT - *ENVIRONMENTAL HEALTH* ☐ STATESVILLE OFFICE 704-878-5305 ☐ MOORESVILLE OFFICE 704-664-5281

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

PERMIT # 13240 PIN # 4626073336 DATE 1-11-2012

OWNER Tom Palmer Homes APPLICANT: Joey Davis PHONE: Home/Cell # 704 905 7558 Business #

SITE ADDRESS 119 Cider Mill Mville OWNER / APPLICANT ADDRESS 28 Brookridge Ln Mooresville

SITE DIRECTIONS Brawley School Rd TR McKendree, TR Spear's Creek Dr. TL Cider Mill Pl at end on left

SUBDIVISION The Farms BLOCK / SECTION 4 LOT # 403 LOT AREA .98 Ac. DESIGN FLOW 480 gpd L.T.A.R. .25

Septic Tank 1500 Gallons: STB 338 Date 11-15-11 ☑ New System ☐ Repair ☐ Expansion System Type I II III IV V VI ☒ Residence No. Bedrooms 4 Water Supply

Pump Tank ____ Gallons: P T ____ Date ____ System Description: Gravity -25% Reduction ☐ Business No. Persons ____ ☐ Private

Pump Make ____ Model ____ Serial # ____ Repair System Description: LPPPBPS ☐ Other No. Employees ____ ☒ Public

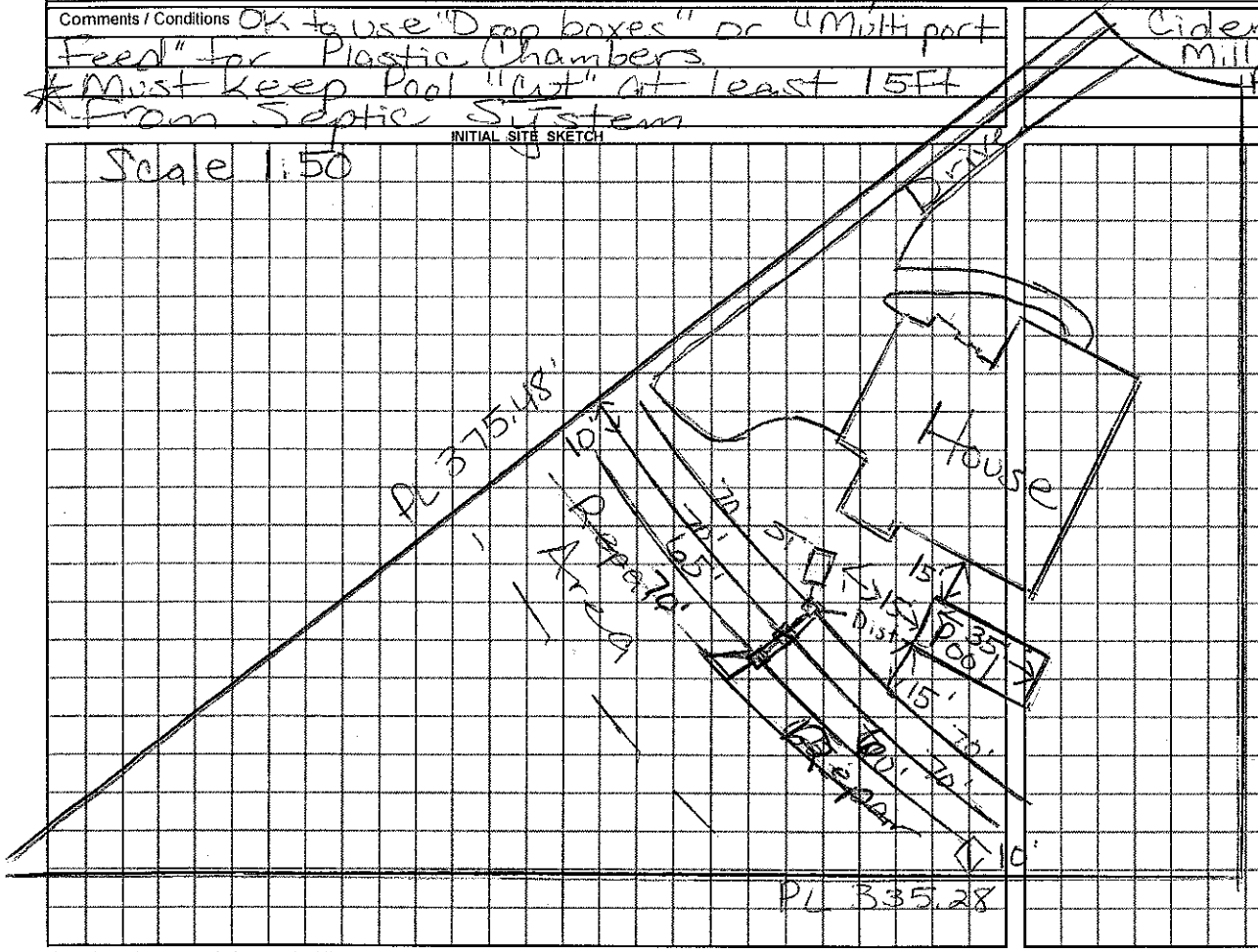
No. Nitrification Fields: 1 No. Lines 4-7 Linear Feet 480 Maintenance Agreement Required ☐ YES ☒ NO Not initially ☐ Slab ☒ Crawl Space ☒ Community

Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A ☐ GRAVITY ☐ PRESSURE ☐ Basement w/plumbing ☐ Basement w/o plumbing

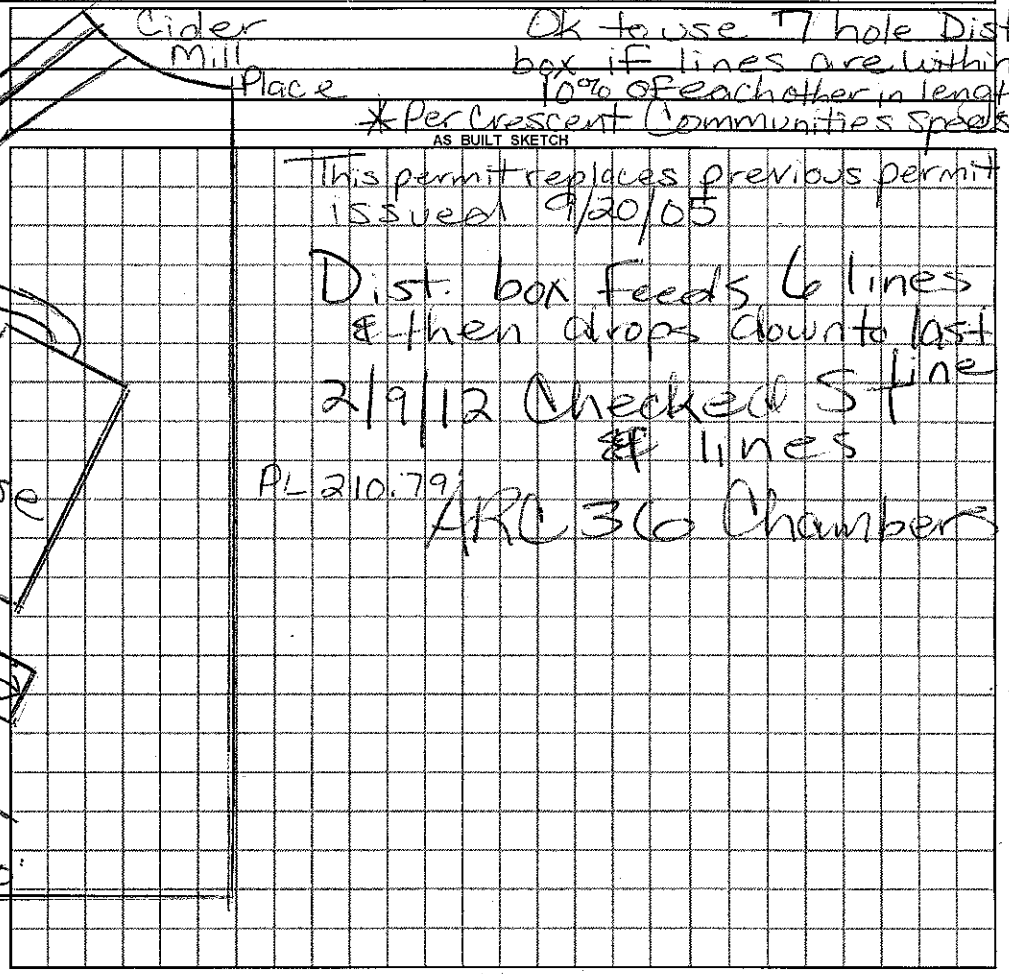
Comments / Conditions OK to use "Drop boxes" or "Multi port Feed" for Plastic Chambers.
*Must keep Pool "cut" at least 15Ft From Septic System

OK to use 7 hole Dist. box if lines are within 10% of each other in length
*Per Crescent Communities Specs

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.

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

Owner / Applicant Signature: ____ Date ____ Installed by: Kevin Hallman

IMPROVEMENT PERMIT by: Maria Hall Cotton REHS Date 1/11/2012 OPERATION PERMIT by: Maria Hall Cotton REHS Date 2/10/2012

AUTHORIZATION TO CONSTRUCT by: Maria Hall Cotton REHS Date 1/11/2012 Existing System Inspected by: ____ REHS Date ____

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

White Copy -- Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant