# IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 139356

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

PIN # 4626 59 9324

APPLICANT: True Homes APPLICANT ADDRESS: 2649 Brookonridge Centre Dr Suite 104 Monroe NC 28110

SITE ADDRESS: 186 Grasshopper Circle Mooresville 28117 PHONE: 704-238-1229 ALT. PHONE:

SITE DIRECTIONS: Brawley School Rd TR McKendrie TR Grasshopper stay left at loop on right

SUBDIVISION: The Farms SECTION: 5 LOT # 594 LOT AREA: .87 Ac. DESIGN FLOW: 480gpd L.T.A.R.: .3gpd/ft², 25

Septic Tank 1500 * (gal) STB 833 Date 4-3-13
Pump Tank 1500 * (gal) PT 477 Date 4-16-13
Pump Make LIBERTY Model FL51M Serial #
# Nitrification Fields 1 # Lines 6 Linear Ft: 270
Trench Width 24" Max. Trench Bottom Depth 36" Gravel Depth NA

☒ New System ☐ Repair ☐ Expansion System Type: I II III (IV) V VI
System Description: LP PPBPS
Repair System Description: LP PPBPS
Maintenance Agreement Required: ☒ YES ☐ NO
☐ GRAVITY ☒ PRESSURE

☒ Residence No. Bedrooms 4
☐ Business No. Persons
☐ Other No. Employees
☐ Slab ☒ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply Repair
☐ Private
☐ Public
☒ Community

Comments / Conditions: * per plan specs
In-line pump filter required

INITIAL SITE SKETCH

See Plan with Specifications
from Thompson Environmental
Consulting
Larry Thompson, LSS
Approved by ICHD

AS BUILT SKETCH

CHECKED LINES, TANKS
CHECK VALVE INSTALLED
BETWEEN 1ST & 2ND PANEL
OF LINE 3 BECAUSE 1ST
PANEL WAS A LITTLE LOW (4")
RAN PUMP BUT WOULD NOT MAKE
2' OF HEAD. REPLACING PUMP
SET 2' PH

The proposed / existing Pool
addition does not appear to impact the existing septic system.
**NOTE: shall be min. 15' from septic tanks
Andy Melville R.S.
Date: 01-02-14
ICHD-Environmental Health Division

*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: 1/18/13 Installed by: STEVENS

IMPROVEMENT PERMIT by: Andy Melville Date: 2-15-13 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Andy Melville Date: 2-15-13 Existing System Inspected by: Date:

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