IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 212601

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

PIN # 4606-63-5828.000

APPLICANT: Charles Dinolfo APPLICANT ADDRESS: 121 Green Morris Ln. Mooresville NC

SITE ADDRESS: 121 Green Morris Ln. Mooresville NC PHONE: 704-975-5320 ALT. PHONE:

SITE DIRECTIONS: BSR, TR Southfork, TR Karp, TL Calicut, TL Green Morris, Site @ End

SUBDIVISION: The Farms SECTION: 1 LOT # 7 LOT AREA: .894 Acre DESIGN FLOW: 600 GPD L.T.A.R.: .25

Septic Tank Existing (gal) STB Date

Pump Tank Existing (gal) PT Date

Pump Make Existing Model Ex. Serial # Ex.

Nitrification Fields 1 # Lines 4 Linear Ft: 300'

Trench Width 24" Max. Trench Bottom Depth 36". Gravel Depth N/A

☐ 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 5

☐ Business No. Persons 10

☐ Other No. Employees

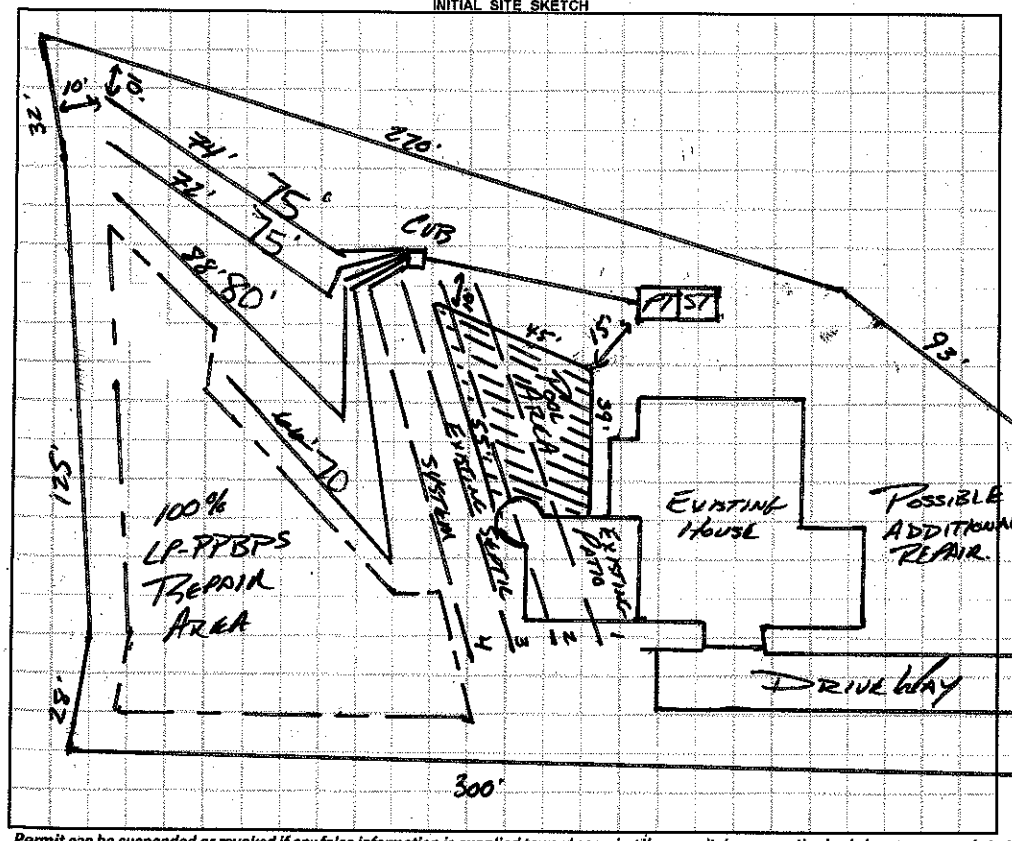
☐ Slab ☒ Crawl Space

☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☒ Community

Comments / Conditions: Replace Existing CUB And Disconnect Existing Lines 1, 2, And 3. Tie Line 4' Back In And Install 300' Of LP-PPBPS As Shown. Orifice In Existing Line 4 Must Be Determined And Matched In New Lines. Maintain 15' Separation From Pool Area With Tanks And Drainfield, And 10' With Supply Line.

INITIAL SITE SKETCH



AS BUILT SKETCH

1"=50' 3/24/16 Checked lines

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: 9/25/15 Installed by:

IMPROVEMENT PERMIT by: Date: APPROVED SEP 14 2015 OPERATION PERMIT by: Maria Dobson RS Date: 3/29/16

AUTHORIZATION TO CONSTRUCT by: Date: APPROVED SEP 14 2015 Existing System Inspected by: Date:

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