IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 2014164

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

PIN # 4627-11-5704

APPLICANT: CHARLES WEBER APPLICANT ADDRESS: 344 LAKEVIEW SHORES LOOP

SITE ADDRESS: SAME PHONE: ALT. PHONE:

SITE DIRECTIONS: BSR, TR MCKENDREE, TR LAKE VIEW SHORES, ON R

SUBDIVISION: CL&T SECTION: 8 LOT # 29'9 LOT AREA: ~.7 AC DESIGN FLOW: 360 L.T.A.R.: .375

Septic Tank	Ex. 1250 (gal)	STB		Date		☐ New System ☒ Repair ☐ Expansion	System Type: I II (III)B IV V VI	☒ Residence	No. Bedrooms	3	Water Supply
Pump Tank	1000 (gal)	PT	27	Date	2-2-14	System Description:		☐ Business	No. Persons	6	☒ Private
Pump Make	Zoeller	Model	WE512MU	Serial #		Repair System Description:	PM - 25% REDUCTION	☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	6	Linear Ft:	248'	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☐ Crawl Space		☐ Community
Trench Width	36"	Max. Trench Bottom Depth	36"	Gravel Depth			☐ GRAVITY ☒ PRESSURE	☒ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions: CHECKED LINES & TANK ELEC & ALARM SET 2' PH

NEIGHBORS WELL

INITIAL SITE SKETCH

* SHOP HAS IT'S OWN SYSTEM. COULD NOT VERIFY LOCATION. IF THIS SYSTEM IS FOUND DURING INSTALL, CREATE 2' DAM BETWEEN THE 2 SYSTEMS & PLUMB SHOP INTO EXISTING TANK.

* KEEP DRAIN FIELD 15' FROM BASEMENT & PLUMBING 10'

OLD BED STILL PLUGGED TO TANK

760'

50'

OLD BED

AS BUILT SKETCH

189'

SHOP

PM

WELLS

LAKE VIEW SHORES LOOP

TAP SIZES
30' - 1/2" SCH 80
45'-48' - 1/2" SCH 40

TAP SIZES
30, 40, 30 - 1/2 80
3@50' - 1/2 40

HOUSE

52'

EXISTING ST

NEW PT

290'

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: 2/28/14 Installed by: STANLEY

IMPROVEMENT PERMIT by: APPROVED Date: FEB 27 2014 OPERATION PERMIT by: Date: 5-9-14

AUTHORIZATION TO CONSTRUCT by: APPROVED Date: FEB 27 2014 Existing System Inspected by: Date:

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