IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 177238

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

PIN # 4627214988

APPLICANT: RJ MELVILLE APPLICANT ADDRESS:

SITE ADDRESS: 109 GOAT HILL RD MOORESVILLE NC 28117 PHONE: ALT. PHONE:

SITE DIRECTIONS: BRAWLEY SCHOOL - TR McKENDREE - TR LAKEVIEW SHORES - TR GOAT HILL - ON LT

SUBDIVISION: CL & T SECTION: 8 LOT # 315 LOT AREA: .93 AC DESIGN FLOW: 480 L.T.A.R.: .3

Septic Tank EXISTING (gal) STB Date

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines 5 Linear Ft: 404

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

☐ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI

System Description: GRAVITY 25% REDUCTION

Repair System Description: LP PPBPS

Maintenance Agreement Required: ☐ YES ☒ NO

☑ GRAVITY ☐ PRESSURE

☑ Residence No. Bedrooms 4

☐ Business No. Persons 8

☐ Other No. Employees

☐ Slab ☑ Crawl Space

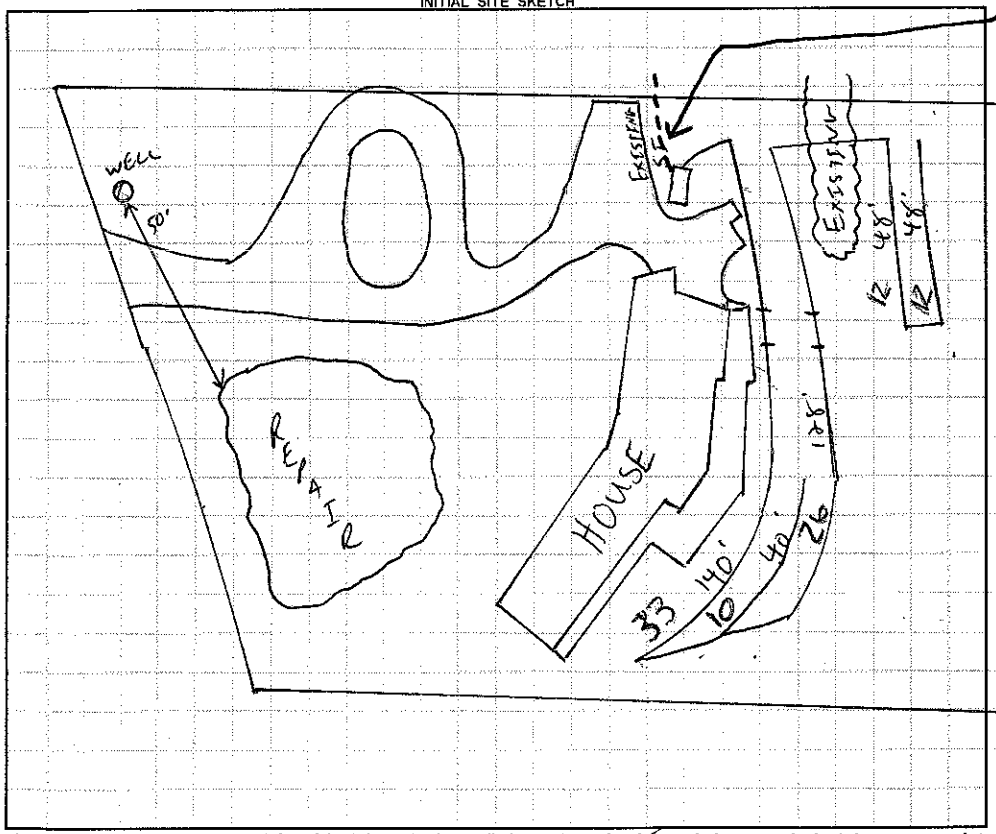
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☑ Private ☐ Public ☐ Community

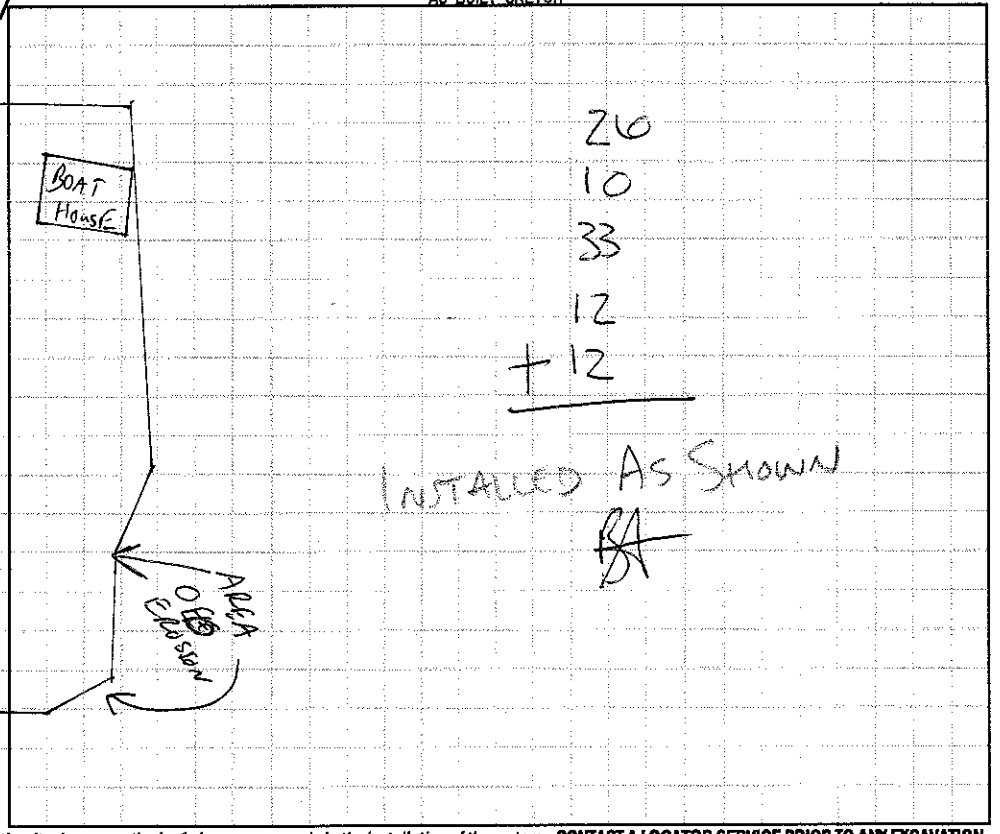
Comments / Conditions: RAIN ERODED BANK AFTER ORIGINAL PERMIT 7/10/13 WAS ISSUED. CHANGE OF SYSTEM LOCATION NEEDED.

LINE TO OLD BED SYSTEM UNHOOKED & PLUGGED WITH HYDROLIC CEMENT

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: Installed by: ORBISON

IMPROVEMENT PERMIT by: Date: 10/3/13 OPERATION PERMIT by: RA Date: 10-11-13

AUTHORIZATION TO CONSTRUCT by: Date: 10/3/13 Existing System Inspected by: Date:

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