MD 3:00

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 217650

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

PIN # 4627-30-4025 ✓

APPLICANT: Rebecca Barnes APPLICANT ADDRESS: 138 Ardmore Place Mooresville, NC 28117

✓ SITE ADDRESS: 138 Ardmore Place Mooresville, NC 28117 PHONE: 704-252-1894 ALT. PHONE:

SITE DIRECTIONS: BSR towards Lake Norman → Rt on McKendree → Rt on Ardmore Place → House on Right

✓ SUBDIVISION: CL+T SECTION: 8 LOT # 354 LOT AREA: 0.72 DESIGN FLOW: 480 gal/day L.T.A.R.: N/A 0.4 Ex.

Septic Tank 1000 Ereplace (gal) STB 1060 Date Water
Pump Tank — (gal) PT — Date —
Pump Make — Model — Serial # —
Nitrification Fields 2 Ex # Lines 4 Ex +2 Ex Linear Ft: 240 Ex + 120 Ex
Trench Width 36" Ex Max. Trench Bottom Depth 24" Ex Gravel Depth 14"

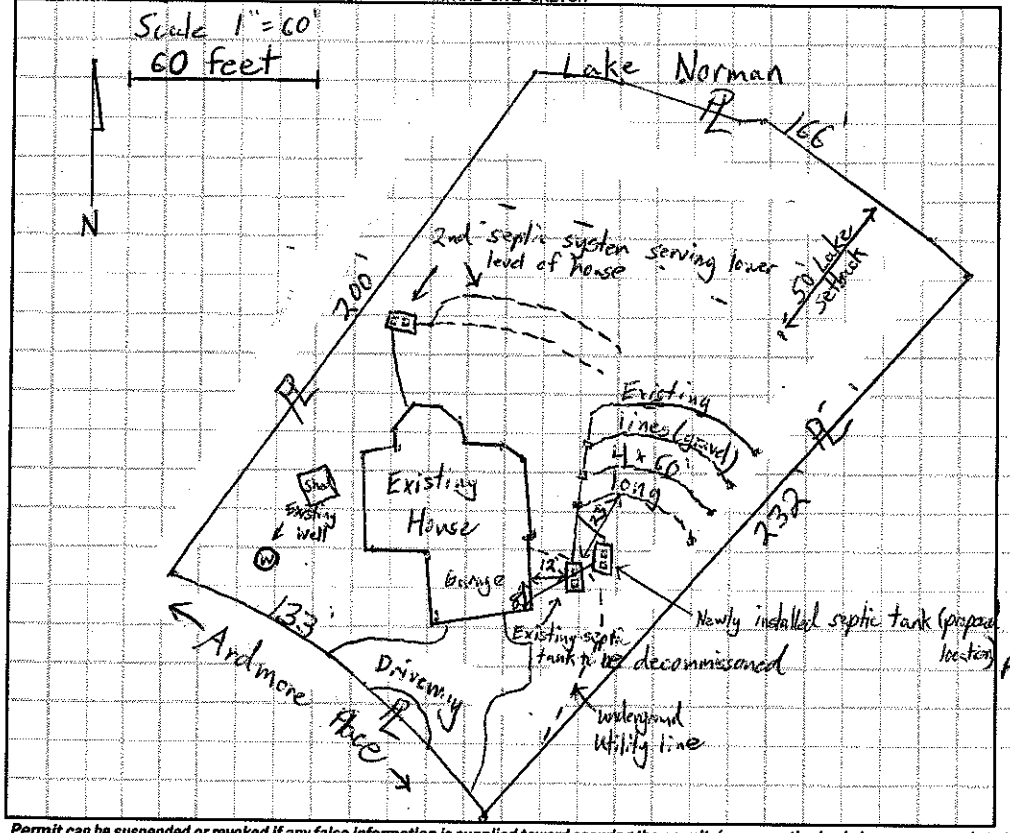
☐ New System ☒ Repair ☐ Expansion System Type: I (II) III IV V VI
System Description: Existing
Repair System Description: Replace Septic Tank w/ new tank
Maintenance Agreement Required: ☐ YES ☒ NO
☒ GRAVITY ☐ PRESSURE

☒ 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: Permit issued at request of owner to replace crumbling septic tank. Owner has choice of emptying/pumping existing crumbling septic tank and 1. leave tank in place and completely fill with an essentially self-leveling inert material (flowable-fill, sand or concrete) OR 2. Crush in place (top + at least one sidewall collapsed and resulting void filled with clean soil material, compacted in place. In both cases, use hydrated lime to coat exposed sewage surfaces of tank's sidewalls. Recommend tank for lower/basement system be uncovered, pumped + inspected. Strongly recommend both tanks be pumped every 3-5 years

INITIAL SITE SKETCH



AS BUILT SKETCH

Used Plastic ST

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: [signature] Date: 4-13-16 Installed by: Larry Frankle

IMPROVEMENT PERMIT by: S Thomas Shuck Date: 4-12-16 OPERATION PERMIT by: Mandy Dotson RS Date: 4/18/16

AUTHORIZATION TO CONSTRUCT by: S Thomas Shuck Date: 4-12-16 Existing System Inspected by: Date:

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