IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 / 100.00 Paid / MOORESVILLE 704-664-5281

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

PERMIT# 124855 PIN# 4628523484 DATE 4-18-06

OWNER OR APPLICANT Doug Testa PHONE: Business 400-6420 Home 892-2995

ADDRESS 153 Plantation Dr. Mooresville, NC 28117

LOCATION Hwy 150 W TR Pinnacle Shores, L Plantation on left

SUBDIVISION Pinnacle Shores BLOCK / SECTION I LOT 80 LOT AREA .87 Acre SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 312 Date 4/5/06

Pump Tank: 1000 Gallons; PT 283 Date 3/27/06

Pump Make: Gouldas Model WE-.7-12-NA Serial No. 12-1-165

Nitrification Field: No Fields 1 Square Feet 810 Linear Feet 270'

No Lines 6 @ 45' Trench Width 24"-36" Max Trench Bottom Depth ____ Gravel Depth N/A

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

System Description: Pump-it-Panel Block

Repair System Description: Same

Maintenance Agreement Required: ☒ Yes ☐ No

☒ Gravity ☒ Pressure ☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Persons ____

☐ Business No. Employees ____

☐ Other ____

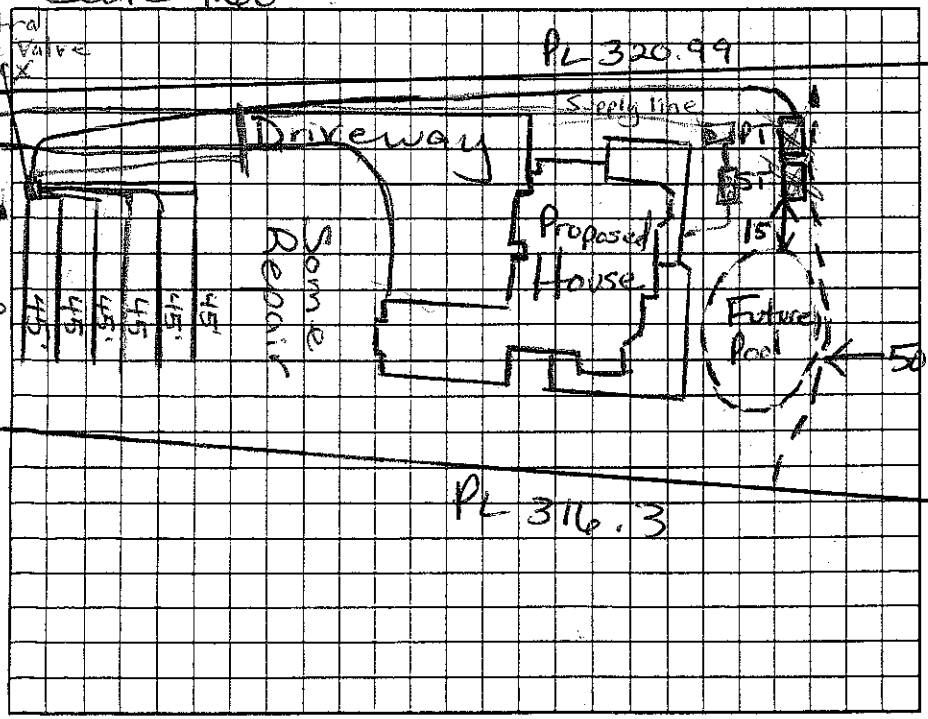
Water Supply: ☐ Individual ☒ Public ☒ Community

Comments:/Conditions: Keep Septic System at least 10' to PL, 50' to lake & 15' to future pool Supply line can be 5ft from PL.

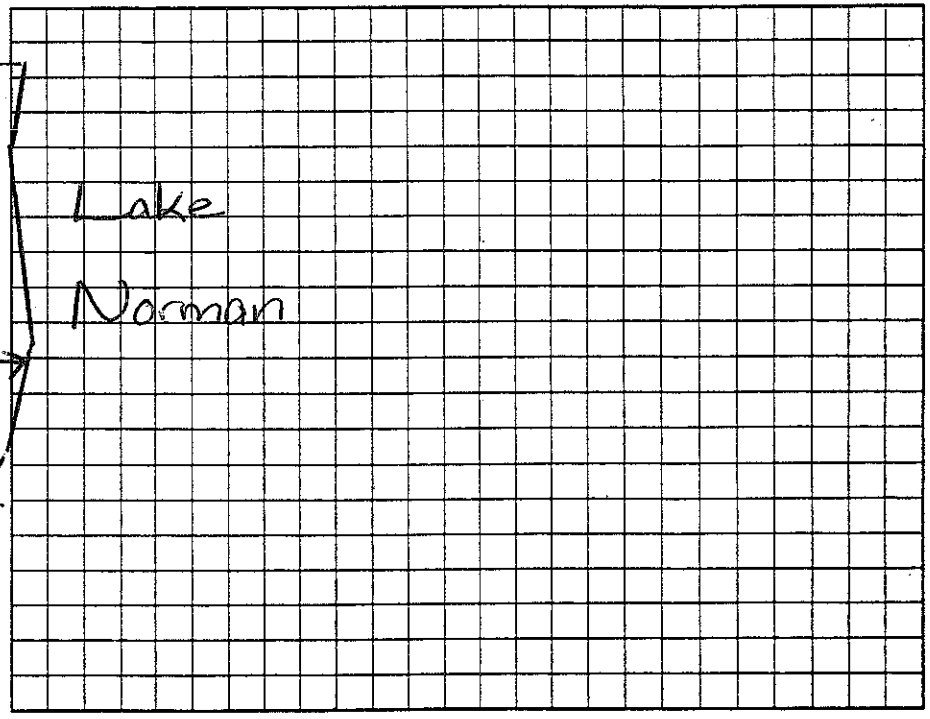
Comments:/Conditions: Drainlines checked 5/9/06 AWS Tanks 5/10/06 AWS & pressure Elect & Alarm 5/23/06 MD

Scale 1:60'

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. Improvement Permit with plat valid without expiration. ☐ Improvement Permit with site plan valid for sixty months ☐ Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: [signature] date 4-24-06 Installed by: Orbison

Improvement Permit by: Maria H. Dotson RS date 4/18/06 Operation Permit by: Maria H. Dotson RS date 5/24/06

Authorization to Construct by: Maria H. Dotson RS date 4/18/06 Existing System Inspection by: ____ date ____

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK