IREDELL COUNTY HEALTH DEPARTMENT / Authorization to Construct

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / ~~CERTIFICATE OF COMPLETION~~ / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 21300 DATE 4/24/96 TAX MAP NO. part of 2NA20 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR Rob Rupinski PHONE: Business 4628619132 Home 8968838 WS4-CA

ADDRESS 169 South Haven Dr. Mooresville, NC 28115

LOCATION 150 W - TR Pinnacle Shores - TR first cul-de-sac (Signed Lane) at end on Rt.

SUBDIVISION Pinnacle Shores BLOCK / SECTION I LOT 4 LOT AREA 21,780ft² + SITE CLASS. PS-1956 DESIGN FLOW 480gpd L.T.A.R. .3 gal/ft²

Septic Tank: 1000 Gallons; STB 744 Dellinger Date 8-5-96

Pump Tank: 1000 Gallons; PT 27 Dellinger Date 6-19-96

Pump Make: Doulas Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200 900 Linear Feet 400 300

No Lines 5@80' Trench Width 36" Max Trench Bottom Depth 36"

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: Pressure Chambered

Repair System Description: Pressure Chambered

Maintenance Agreement Required: ☐ Yes ☑ No

Gravel Depth N/A

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees ____

☐ Other ____

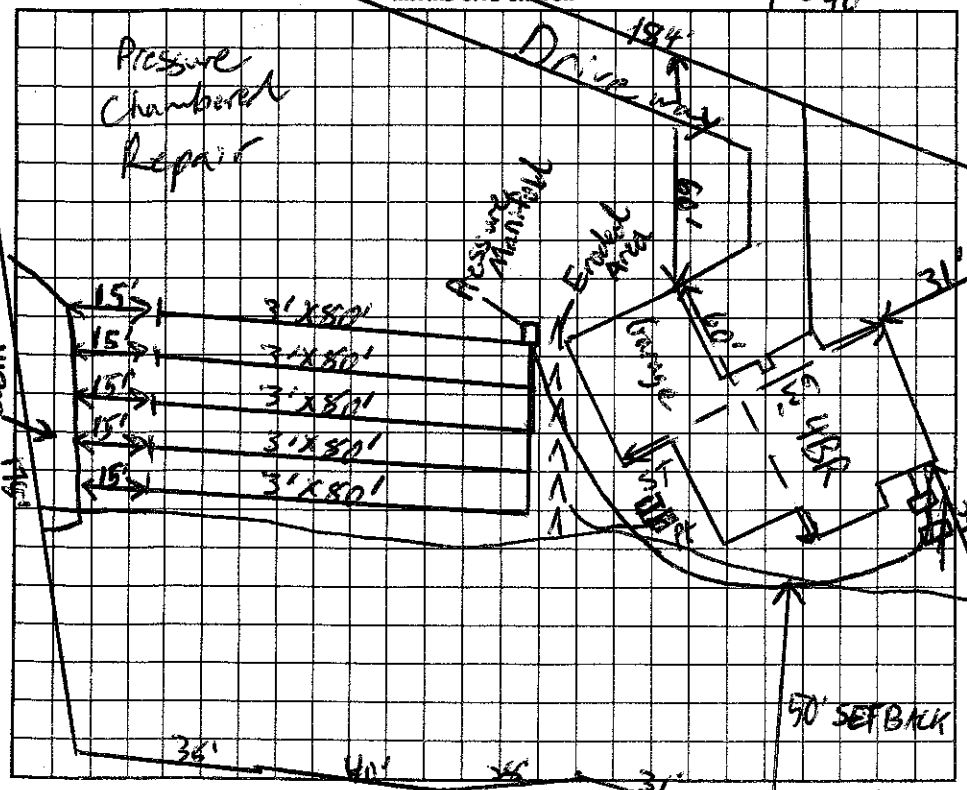
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Community ☐ Public

Comments: 4@75' (CHANGED TO (3BR) 4 @ 75' CHAMBERED) Brady Freeman 10/16/96

Comments: Tanks & Laterals installed 10-17-96 DKH

INITIAL SITE SKETCH



AS BUILT SKETCH

I understand that this 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.

Signed: L. H. Gaskin Jake Nelson

Installed by: Russell Const.

Improvement Permit by: C. Brady Freeman EHS date 4/24/96

Authorization to Construct / ~~Existing System Inspection~~ by: C. Brady Freeman EHS date 4/24/96

Certificate of Completion by: _____ date _____

Operation Permit by: Wesley Sparks RS. date 11/13/96

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

Authorization to Construct is valid for 60 months from date of issue.