IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 213227

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

PIN # 4628-62-7448.000

APPLICANT: Nicholas Spignesi APPLICANT ADDRESS: 196 Pinnacle Shores Dr.

SITE ADDRESS: 196 Pinnacle Shores Dr. Mooresville NC PHONE: 540-498-6108 ALT. PHONE:

SITE DIRECTIONS: Hwy 150 toward Catawba, Tr Pinnacle Shores, Site on R

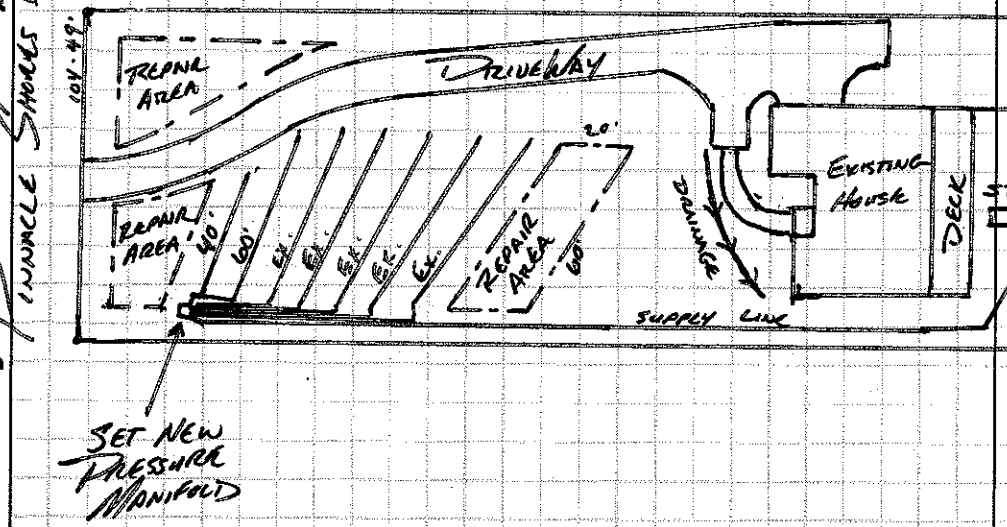
SUBDIVISION: Pinnacle Shores SECTION: 1 LOT # 34 LOT AREA: 1.16 Acre DESIGN FLOW: 480 GPD L.T.A.R.: .3

Septic Tank Existing (gal)	STB	Date	☐ New System ☐ Repair ☒ Expansion System Type: I II (III) IV V VI			☒ Residence	No. Bedrooms 4	Water Supply
Pump Tank Existing (gal)	PT	Date	System Description: 25% Reduction - Pump			☐ Business	No. Persons 8	☐ Private
Pump Make Existing Model Ex.		Serial # Ex.	Repair System Description: LP-PPBR / Drip			☐ Other	No. Employees	☐ Public
# Nitrification Fields 1 # Lines 2 (40+60)		Linear Ft: 100'	Maintenance Agreement Required: ☐ YES ☒ NO			☐ Slab	☐ Crawl Space	☒ Community
Trench Width 36" Max. Trench Bottom Depth "32 - 36"		Gravel Depth N/A	☐ GRAVITY ☒ PRESSURE			☒ Basement w/plumbing		☐ Basement w/o plumbing

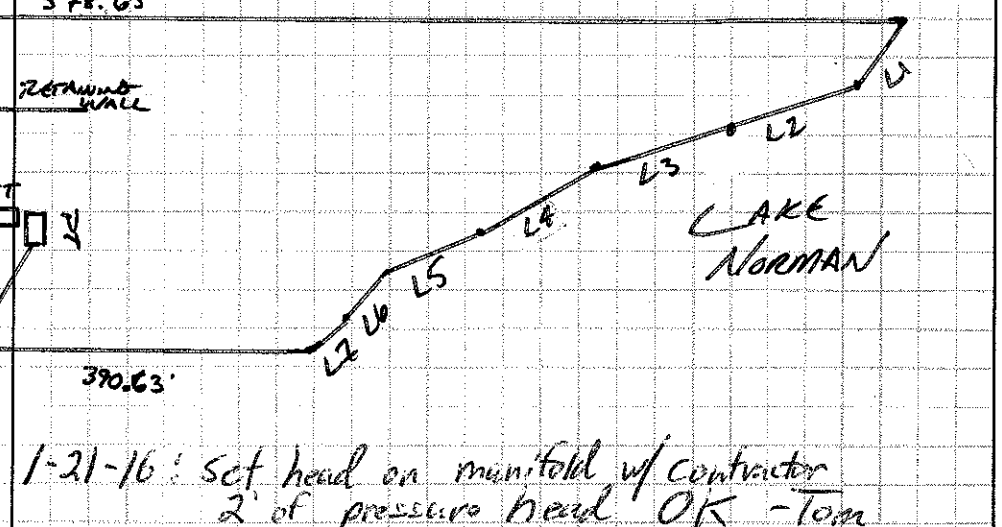
Comments / Conditions: Install 100' of 25% Reduction with 40' and 60' lines. Feed these 2 lines with a single 3/4" Sch. 80 TAP. Use 1/2" Sch. 80 TAP for existing 5 (3'x60') lines. Set 2' head.

Install @ 32"-36" Trench Bottom for .3 LTAR.
12/16/15 Checked 2 lines. MS

INITIAL SITE SKETCH



AS BUILT SKETCH



1-21-16: set head on manifold w/ contractor 2' of pressure head OK -Tom

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: 11/18/2015 Installed by: Russell Williams

IMPROVEMENT PERMIT by: APPROVED NOV 06 2015 OPERATION PERMIT by: Tom Shuck Date: 1-21-16

AUTHORIZATION TO CONSTRUCT by: Date: APPROVED NOV 06 2015 Existing System Inspected by: Date:

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