IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 205415

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

PIN # 4628965791

APPLICANT: Doug Gaus APPLICANT ADDRESS: 118 Point of View Dr Mooresville, NC 28117

SITE ADDRESS: 118 Point of View PHONE: ALT. PHONE:

SITE DIRECTIONS: Hwy 150 W TR Perth Rd TL Fern Hill Rd take to end becomes Pt. of View on righ

SUBDIVISION: Point of View SECTION: LOT # 16 LOT AREA: 1.0 Acre DESIGN FLOW: 480gpd L.T.A.R.: .3

Septic Tank 1000 (gal) STB 1012 Date 4-28-15
Pump Tank 1000 (gal) PT 17 Date 3-21-15
Pump Make Model Serial #
Nitrification Fields 1 # Lines 4 Linear Ft: 400'
Trench Width 36" Max. Trench Bottom Depth 30" Gravel Depth N/A

☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI
System Description: Pump-PM - 25% Reduction
Repair System Description: LPPPBPS
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: Must keep Septic at least 15ft from Cut (2ft or greater). Keep tanks at least 15ft (side) gradient from drain and basement

Any ~~Cut~~ Future pool "cut" must be at least 15ft from Septic.
This permit replaces previous permit dated 8/28/14.

INITIAL SITE SKETCH

See attached / approved plan by The Oaks Group PA dated 6/10/15

AS BUILT SKETCH

9/3/15 OK to turn tanks so they are parallel to property line. MD

1/2" SCH 40 TAPS
CHECKED LINES, TANKS & PM BA
CHECKED ELEC. & ALARM / SET PM
9-11-15 BA

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: Kathleen Saunders Date: 6-25-15 Installed by: Steve Jordan

IMPROVEMENT PERMIT by: Mairead H. Dotson RS Date: 6/18/15 OPERATION PERMIT by: BA Date: 9-11-15

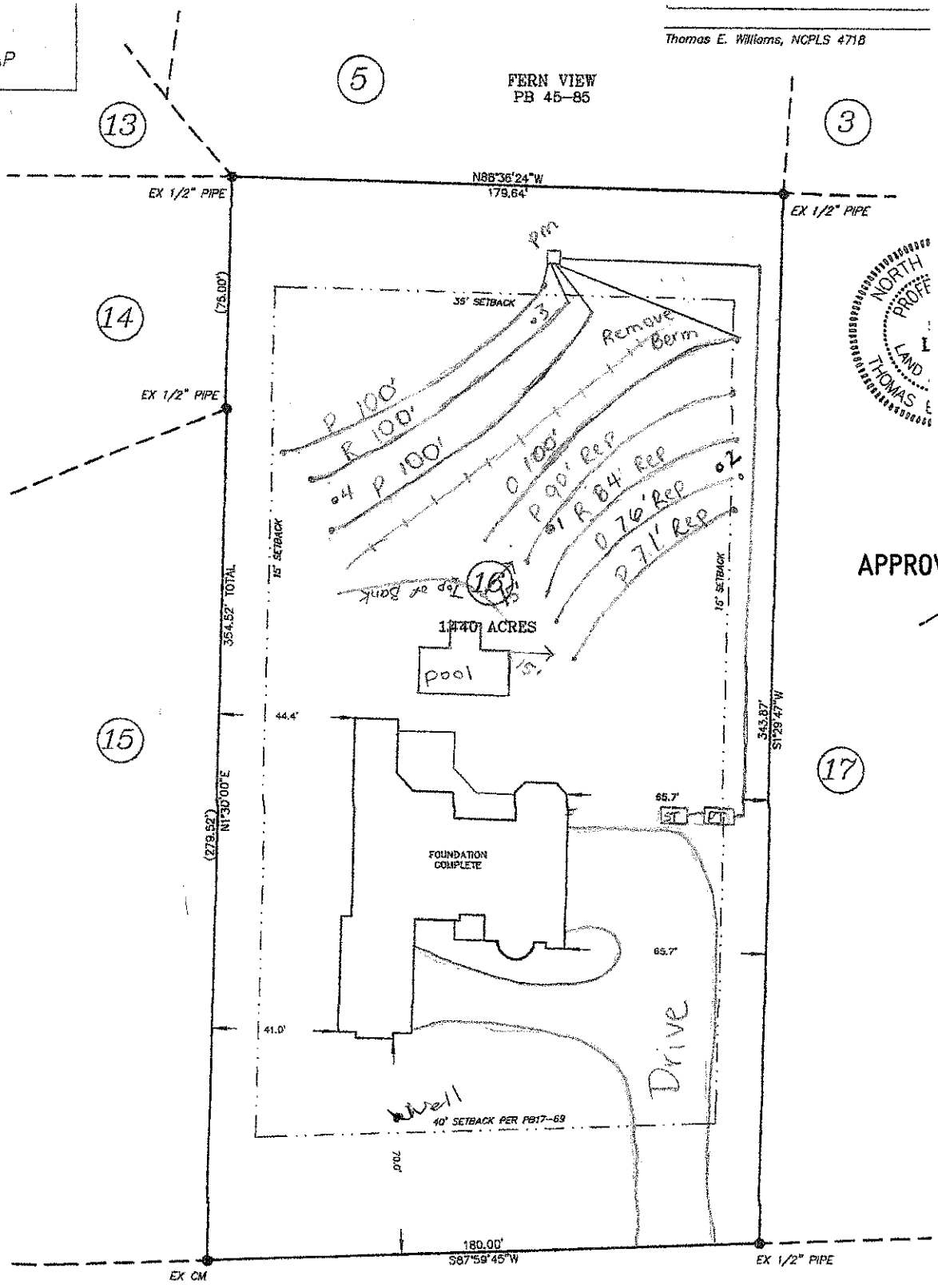
AUTHORIZATION TO CONSTRUCT by: Mairead H. Dotson RS Date: 6/18/15 Existing System Inspected by: Date:

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

VIEW DR

TY MAP
TO SCALE

Thomas E. Williams, NCPLS 4718



APPROVED JUN 17 2015

1" = 50'