IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625

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

PERMIT # 181709

APPLICANT: DAN GOETZ PIN # 4635052580

SITE ADDRESS: 150 CHATHAM RD MOORESVILLE NC 28117 APPLICANT ADDRESS: 1458 BRANLEY SCHOOL RD MOORESVILLE 28117

SITE DIRECTIONS: BSR - TL CHATHAM - ON RT PHONE: ALT. PHONE: 704 576 3887

SUBDIVISION: POINT SECTION: 13 LOT # 3 LOT AREA: 1.29 AC DESIGN FLOW: 600 L.T.A.R.: 3

Septic Tank 1500 (gal) STB Date

Pump Tank 1500 (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines 4 Linear Ft: 335

Trench Width @ 36" Max. Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: LPPBPS

Repair System Description: SAME

Maintenance Agreement Required: ☑ YES ☐ NO ☐ GRAVITY ☑ PRESSURE

☑ Residence ☐ Business ☐ Other ☐ Slab ☑ Basement w/plumbing

No. Bedrooms 5 No. Persons 10 No. Employees Crawl Space

Water Supply: ☐ Private ☐ Public ☑ Community ☐ Basement w/o plumbing

Comments / Conditions:

INITIAL SITE SKETCH

SEE MICHAEL ATHANAS & ASSOCIATES PLAN.

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. 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: Dan E. McHan Date: 5/08/2014 Installed by:

IMPROVEMENT PERMIT by: C. Bailey Trimble Date: 11/6/13 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: C. Bailey Date: 12/16/13 Existing System Inspected by: Date:

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

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # [illegible]

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

PIN # [illegible]

APPLICANT: DAN FONTZ APPLICANT ADDRESS: [illegible] PHONE: [illegible] ALT. PHONE: [illegible]

SITE ADDRESS: [illegible] CHAPMAN RD MOORESVILLE NC 2811?

SITE DIRECTIONS: [illegible] TL CHAPMAN ON RT

SUBDIVISION: [illegible] SECTION: 12 LOT # 3 LOT AREA: [illegible] DESIGN FLOW: 600 L.T.A.R.: [illegible]

Septic Tank 1500 (gal) STB Date

Pump Tank 1000 (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines 4 Linear Ft: 125

Trench Width 2' 36" Max. Trench Bottom Depth 6" Gravel Depth N/A

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

System Description: LPP MDPS

Repair System Description: SAME

Maintenance Agreement Required: ☐ YES ☐ NO

☐ GRAVITY ☑ PRESSURE

☑ Residence ☐ Business ☐ Other ☐ Slab ☑ Basement w/ plumbing ☐ Basement w/o plumbing

No. Bedrooms 5 No. Persons 10 No. Employees

☐ Crawl Space

Water Supply

☐ Private ☐ Public ☑ Community

Comments / Conditions:

INITIAL SITE SKETCH

SEE MICHAEL THOMAS & ASSOCIATES PLAN.

AS BUILT SKETCH

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☐ **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: 5/08/2014 Installed by: Date:

IMPROVEMENT PERMIT by: [signature] Date: 5/6/14 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 5/10/14 Existing System Inspected by:

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