IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 219523

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

PIN # 4636009982

APPLICANT: Henry Batten APPLICANT ADDRESS: 105 North Shore Dr. Mooresville NC

SITE ADDRESS: 105 North Shore Dr - Mooresville, NC PHONE: 7041662 0199 ALT. PHONE: 704 201-6197

SITE DIRECTIONS: Brawley School Rd TL Isle of Pines TR 2nd Cove Creek TL Wynward TR Property

SUBDIVISION: North Shore TI SECTION: 2 LOT # 23 LOT AREA: .6 ac DESIGN FLOW: 360 L.T.A.R.: .35 @ interval

Septic Tank 1060 (gal) STB 2671 Date N/A
Pump Tank (gal) PT Date
Pump Make Model Serial #
Nitrification Fields 1 # Lines 3 Linear Ft: 258
Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A

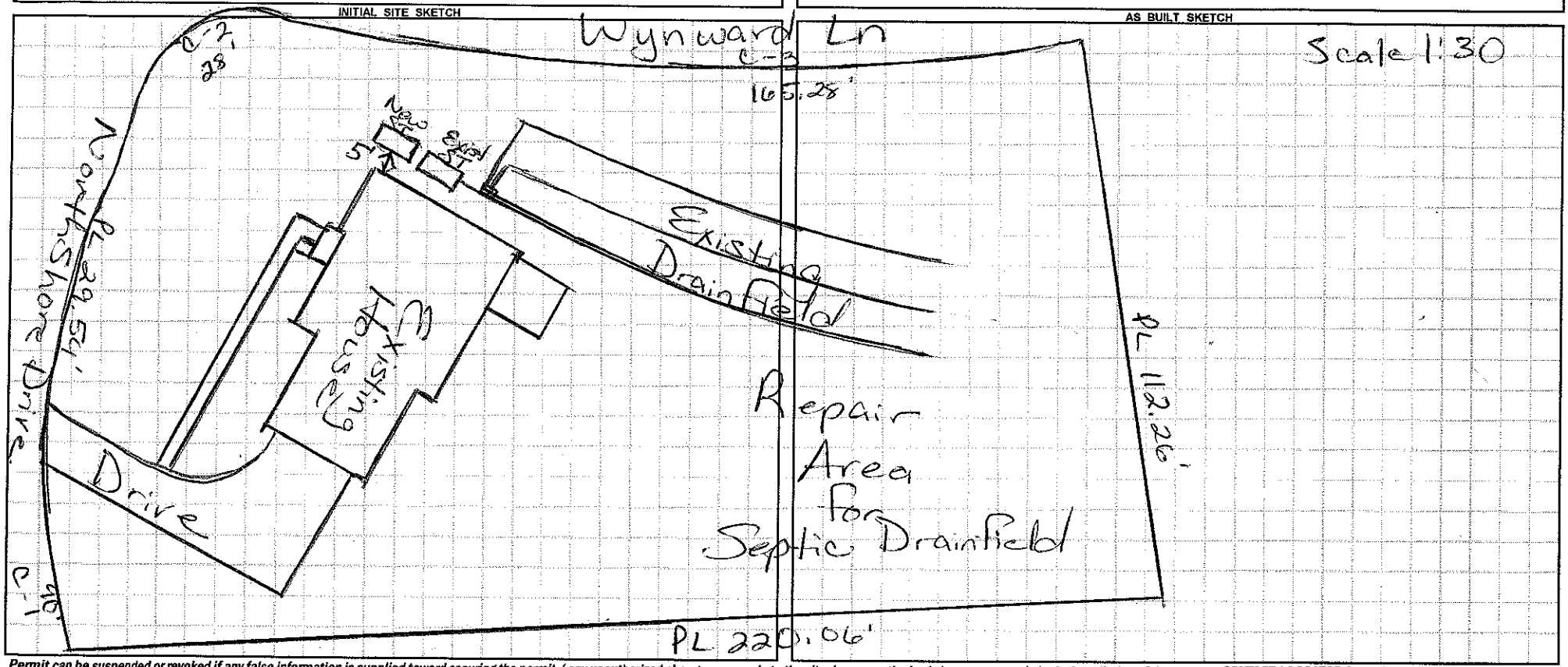
☐ New System ☒ Repair ☐ Expansion System Type: I II (III) IV V VI
System Description: ST Only
Repair System Description: PM - 25% Reduction
Maintenance Agreement Required: ☐ YES ☒ NO
☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 3
☐ Business No. Persons 6
☐ Other No. Employees
☐ Slab ☒ Crawl Space
☐ Basement w/ plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☒ Community (with North Shore)

Comments / Conditions: 1) Properly abandon existing ST. Install New ST adjacent to old ST

INITIAL SITE SKETCH



AS BUILT SKETCH

Scale 1:30

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: Installed by: Tim Ammons

IMPROVEMENT PERMIT by: Marian Cotton RS Date: 6/15/16 OPERATION PERMIT by: Wesley Parks Date: 6/23/16

AUTHORIZATION TO CONSTRUCT by: Marian Cotton RS Date: 6/15/16 Existing System Inspected by: Date:

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