IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 21|370

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

PIN # 4636084963

APPLICANT: Blue Haven Pools/Andrew Bardsley APPLICANT ADDRESS: 10020 Industrial Dr. Pineville, NC 28134

SITE ADDRESS: 132 Chestnut Bay Ln Mooresville, NC 28117 PHONE: ALT. PHONE:

SITE DIRECTIONS: Brawley School Rd TR Blume TL Beechtree Rd ~¼ mile TR Chestnut Bay Ln at end on right

SUBDIVISION: Beechtree Bay SECTION: LOT # 10/10A LOT AREA: .69+ DESIGN FLOW: 480gpd L.T.A.R.: .3

Existing

Septic Tank 1000 (gal) STB Date
Pump Tank 1000 (gal) PT Date
Pump Make Model Serial #
Nitrification Fields 1 # Lines 3@133' Linear Ft: 400ft
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: W/ Pump - 25% Reduction
Repair System Description: LP PPBPS
Maintenance Agreement Required: ☐ YES ☒ NO
☐ GRAVITY ☒ PRESSURE

☒ Residence No. Bedrooms 4
☐ Business No. Persons 8
☒ Other Pool No. Employees
☐ Slab ☒ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

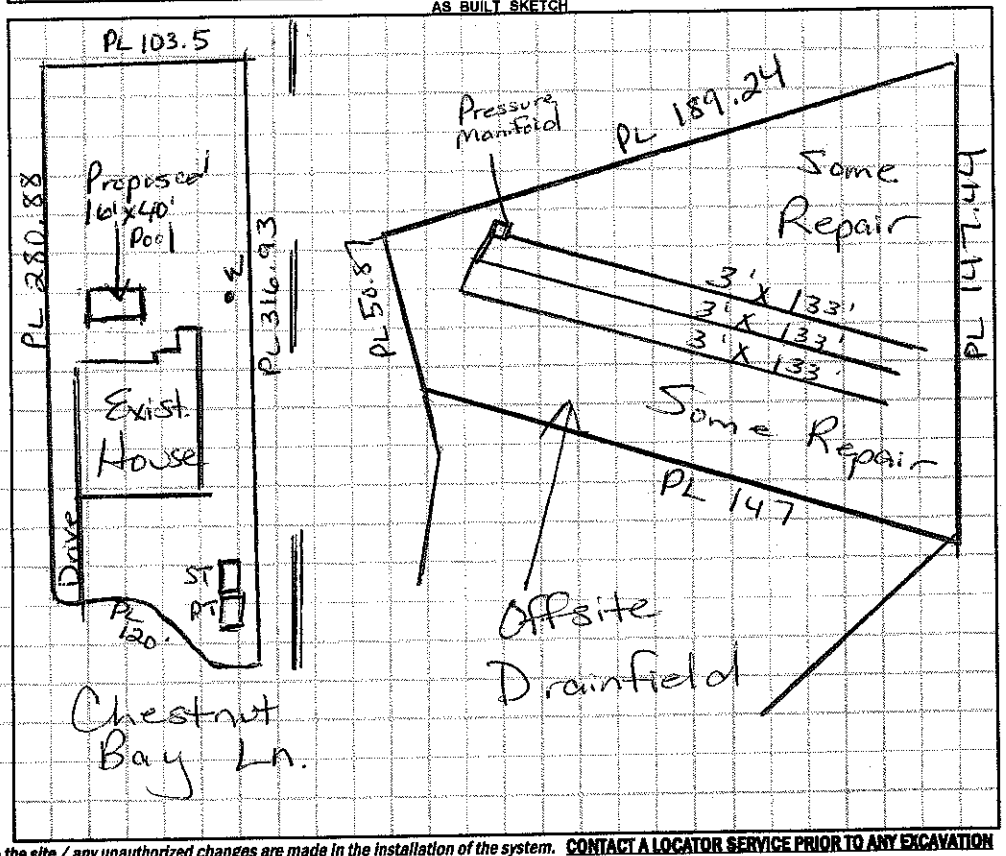
Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: The proposed in ground swimming pool does not appear to impact the existing Septic System. It meets setbacks for well & septic.

INITIAL SITE SKETCH

Scale 1:100

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: Lisa Aylward Date: 7-21-15 Installed by:

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Maria Gibson RS Date: 7/10/15

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