IREDELL COUNTY HEALTH DEPARTMENT

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

AW

Old #133697

PERMIT # 208741

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

PIN # 4636-13-5889.000

APPLICANT: True Hughes | APPLICANT ADDRESS: 2649 Brookridge Central Dr. Mooresville NC

SITE ADDRESS: 153 Farm Knoll Way Mooresville NC | PHONE: | ALT. PHONE:

SITE DIRECTIONS: 150 S, TL Isle of Pines, TR Rockridge Point, TR Farm Knoll Way

SUBDIVISION: Rockridge Point | SECTION: — | LOT # 31 | LOT AREA: | DESIGN FLOW: 480 GPD | L.T.A.R.: .3 Initial / .25-.3 Repair

Septic Tank 1500 (gal)	STB 338	Date 11-23-15	☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI	☒ Residence	No. Bedrooms 4	Water Supply
Pump Tank 1500 (gal)	PT 427	Date 12-18-15	System Description: LP PRBDS	☐ Business	No. Persons 8	☐ Private
Pump Make Gaulds	Model PE31	Serial #	Repair System Description: LP PRBDS	☐ Other	No. Employees	☐ Public
# Nitrification Fields 1	# Lines 5	Linear Ft: 275'	Maintenance Agreement Required: ☒ YES ☐ NO	☐ Slab	☒ Crawl Space	☒ Community
Trench Width 24"	Max. Trench Bottom Depth 36"	Gravel Depth N/A	☐ GRAVITY ☒ PRESSURE	☐ Basement w/plumbing	☐ Basement w/o plumbing	

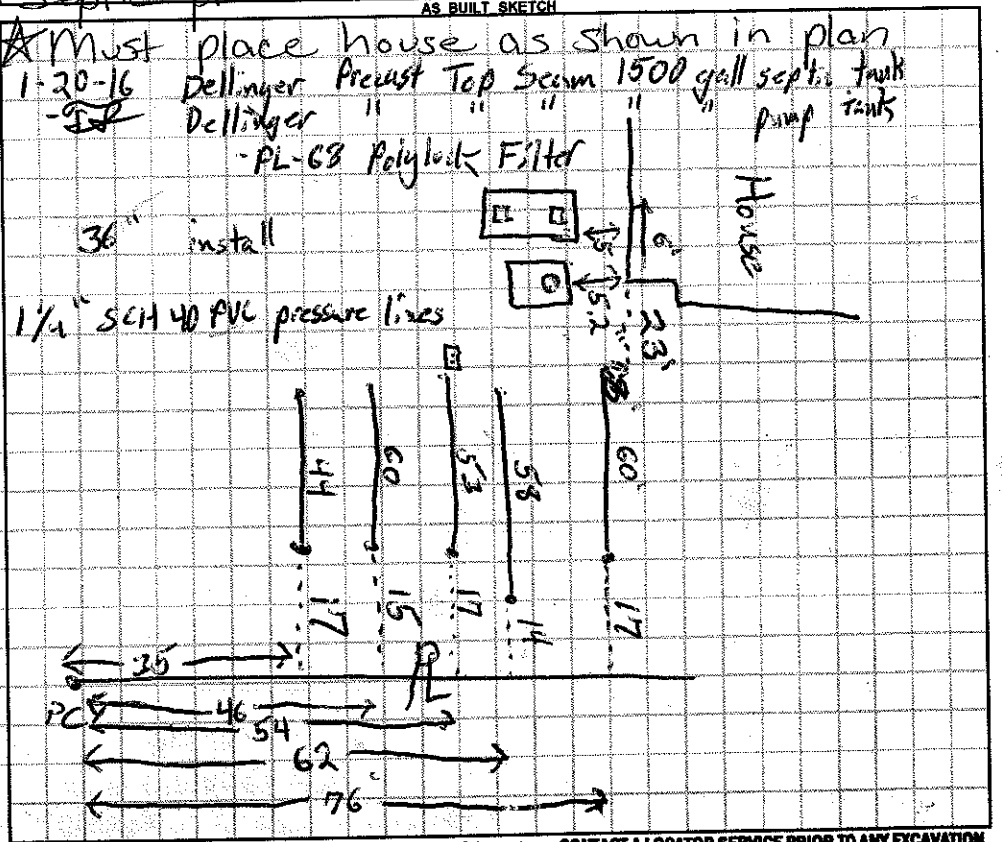
Comments / Conditions:
- 1500 Gal Tanks Per Designer
- Follow All Septic Rules.
- Install At 36" Trench Bottom For Better Soils Recommended.
- Shave off any old Rooms In Septic Area.
- 267' Linear Feet Drainfield Required.
- 10/5/15 Renewed Floor plans, in Compliance with Septic plan

INITIAL SITE SKETCH

See Attached Approved Design By Septic Environmental Solutions

Date: APPROVED MAR 20 2015

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: | Date: 4-6-15 | Installed by: Powell Sid Gaskins

IMPROVEMENT PERMIT by: APPROVED MAR 20 2015 | Date: | OPERATION PERMIT by: | Date: 1/28/16

AUTHORIZATION TO CONSTRUCT by: RS | Date: 10/5/15 | Existing System Inspected by: | Date:

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

	Date	Initials
Drain Lines Checked	1-20-16	[illegible]
Tanks Checked	1-20-16	[illegible]
Pressure Manifold or Valve Box Checked	1-27-16	MD
Pressure Head Set		
Electrical Checked		
Floats Set		
Alarm Checked	MD	1/28/16
Maintenance Contract Y / N		

As of 1/27/16 just needs Maint. Agreement

Rock Ridge 31

5:00

Sid Gaskins

60 5' even OK
58 5' 2.5" even OK
53 6' 1" even OK
50 5' 11" OK
44 6' 3" OK

ROCKRIDGE POINT SUBDIVISION

