1130 ALP Old #123699

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 208742 V

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

PIN # 4636-13-6957.000

APPLICANT: True Homes APPLICANT ADDRESS: 2649 Breckenridge Center Dr. Monroe NC

SITE ADDRESS: 155 Farm Knoll Way Mooresville NC PHONE: ALT. PHONE:

SITE DIRECTIONS: BSR / TR Isle of Pines, TR Rockridge Point, TR Farm Knoll Way

SUBDIVISION: Rockridge Point SECTION: LOT # 32 LOT AREA: .69 acre DESIGN FLOW: 480 GPD L.T.A.R.: .3

Septic Tank	1500	(gal)	STB	336	Date	10/17/16	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms	4	Water Supply	
Pump Tank	1500	(gal)	PT	477	Date	10/17/16	System Description:	LP PDRDS			☐ Business	No. Persons	8	☐ Private	
Pump Make	Zoellner	Model	1/3 HP		Serial #	5-69	Repair System Description:	LP PDRDS			☐ Other	No. Employees		☐ Public	
# Nitrification Fields	1	# Lines	4		Linear Ft:	296'	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: -267' Linear Feet Required Drainfield.
-1500 Gal Tanks Per Designer

8/22/16 Reviewed floor plans, in Compliance with Septic plan
12/21/16 Checked pressure & alarm

INITIAL SITE SKETCH

See Attached Approved Design By Septic Environmental Solutions

Dated APPROVED MAR 20 2015

AS BUILT SKETCH

1130

		Date	Initials
Drain Lines Checked		11/16	WS
Tanks Checked		11/16	
Pressure Manifold or Valve Box Checked		11/16	
Pressure Head Set	?	12/21/16	MD
Electrical Checked		12/28/16	SG
Floats Set	?	12/21/16	MD
Alarm Checked	?	12/21/16	MD
Maintenance Contract (Y) N			
Comments: Back PL needs to be clearly marked			

12-28-16: Electrical ok, with seperate breakers used for pump / alarm. -SG

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: Water Management / Mike Powell / Sid Gaskins

IMPROVEMENT PERMIT by: APPROVED MAR 20 2015 Date: OPERATION PERMIT by: Date: 12/29/16

AUTHORIZATION TO CONSTRUCT by: Date: 8/22/16 Existing System Inspected by: Date:

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

ROCKRIDGE POINT SUBDIVISION

