IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 180718

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

PIN # 4636524202

APPLICANT: STUTTS COVE LLC APPLICANT ADDRESS: 156 B RACEWAY DR. MOORESVILLE 28117

SITE ADDRESS: 135 PALMETTO DR. MOORESVILLE PHONE: ALT. PHONE: 803 902 4402

SITE DIRECTIONS: BRAWLEY SCHOOL - TL STUTTS - TR POINSETTIA - TL PALMETTO - ON LT

SUBDIVISION: STUTTS COVE SECTION: LOT # 15 LOT AREA: .85 DESIGN FLOW: 480 L.T.A.R.: .4

Septic Tank	1000 (gal)	STB	794	Date	4-16-14	☑ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	☑ Residence	No. Bedrooms 4
Pump Tank	1000 (gal)	PT	283	Date	1-14-14	System Description:	PUMP 25% REDUCTION			☐ Business	No. Persons 8
Pump Make	Environ	Model		Serial #		Repair System Description:	CP PUMPS			☐ Other	No. Employees
# Nitrification Fields	1	# Lines	3	Linear Ft:	300	Maintenance Agreement Required:	☐ YES	☑ NO		☑ Slab	☐ Crawl Space
Trench Width	36"	Max. Trench Bottom Depth	36"	Gravel Depth	N/A		☐ GRAVITY	☑ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions:

Do Not cut for Slab

8/11/14 Set 24# pressure checked elect & alarm

INITIAL SITE SKETCH

SEE MICHAEL ATHANAS & ASSOCIATES PLAN.

AS BUILT SKETCH

CHECKED LINES & TANKS BA

The proposed / existing In ground Swimming Pool addition does not appear to impact the existing septic system.

**NOTE: Must Keep Pool at least 15Ft from Septic

Maria Dotson R.S.

Date: 8/18/14

ICHD Environmental Health Division

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: J Divine Date: 12/3/13 Installed by: ABERNATHY

IMPROVEMENT PERMIT by: C. [illegible] REHS Date: 8/29/13 OPERATION PERMIT by: Maria Dotson RS Date: 8/11/14

AUTHORIZATION TO CONSTRUCT by: Audrey Melville REHS Date: 12-3-13 Existing System Inspected by: Date:

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