IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 210124

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

PIN # 4636-57-8436-000 7581

APPLICANT: 1ST CHOICE HOUSING INC. APPLICANT ADDRESS: 119 BEECHNUT LN. STATESVILLE NC

SITE ADDRESS: 10297 BRAWLEY SCHOOL RD. MOORESVILLE NC PHONE: 704-883-8229 ALT. PHONE:

SITE DIRECTIONS: BSR TOWARDS THE POINT. SITE ON L JUST BEFORE ESQUIRE.

SUBDIVISION: — SECTION: — LOT # — LOT AREA: 2.250 ACRE DESIGN FLOW: 360 GPD L.T.A.R.: .25

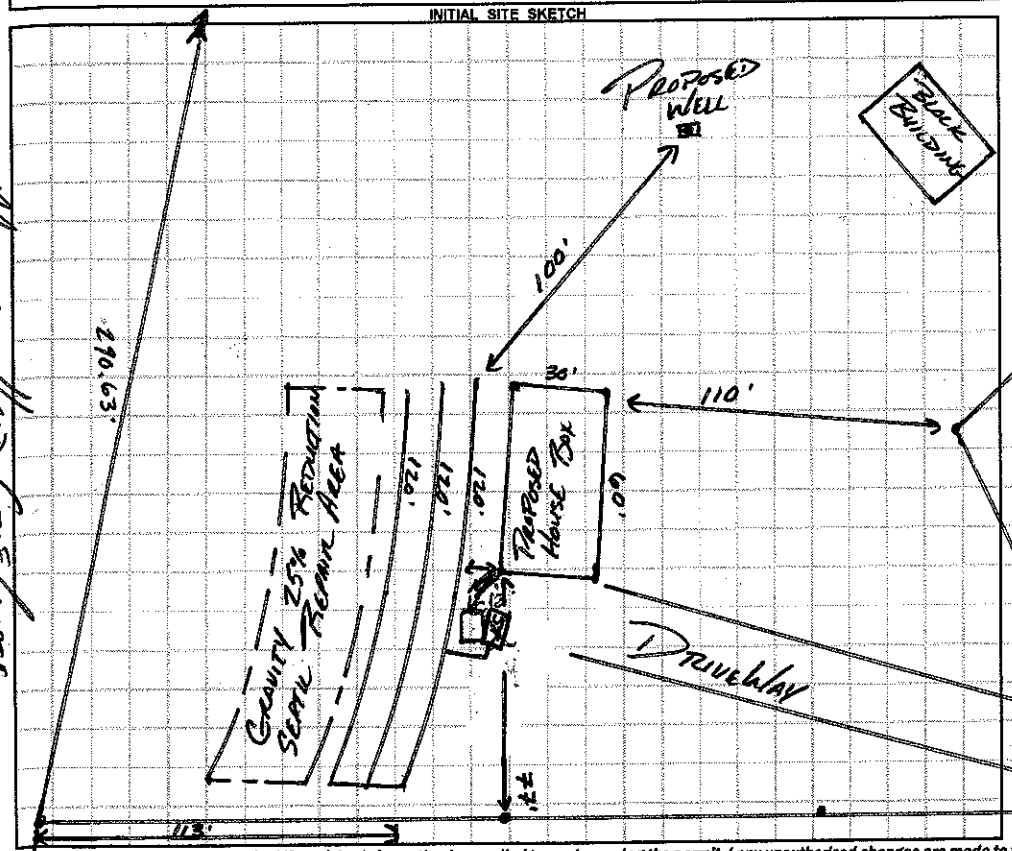
Septic Tank	1000	(gal)	STB	194	Date	2-3-15	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	
Pump Tank		(gal)	PT		Date		System Description:	25% REDUCTION - GRAVITY			
Pump Make			Model		Serial #		Repair System Description:	SAME			
# Nitrification Fields	1		# Lines	3@120'	Linear Ft:	360'	Maintenance Agreement Required:	☐ YES	☒ NO		
Trench Width	36"		Max. Trench Bottom Depth	* 36" *	Gravel Depth	N/A	☒ GRAVITY	☐ PRESSURE			

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

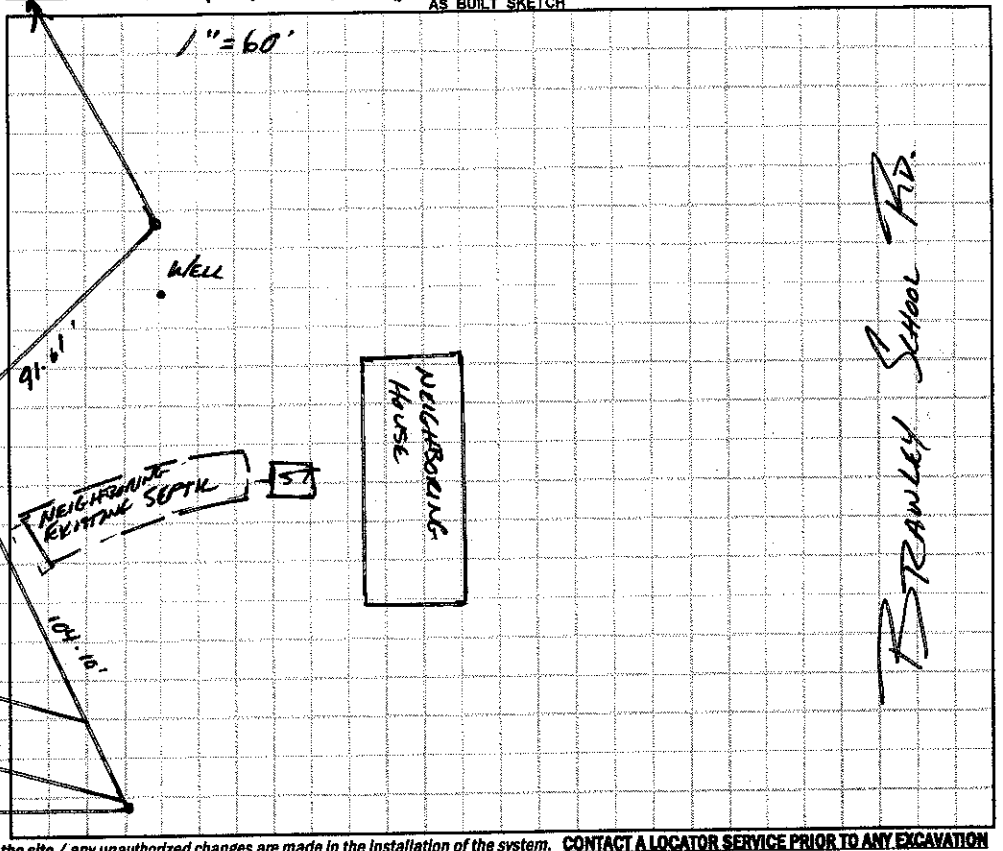
Comments / Conditions: FOLLOW ALL SEPTIC RULES.
* NEW PLAT MUST BE RECORDED BEFORE ISSUANCE OF AC.

- INSTALL SYSTEM AT 36" TRENCH BOTTOM.
USED QUICK 4, ST 34 OFF CORNER OF HOUSE.
INSTALLED AS DRAWN.

INITIAL SITE SKETCH



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: [signature] Date: 6-2-15 Installed by: A-1 Backhoe

IMPROVEMENT PERMIT by: [signature] APPROVED Date: JUN 08 2015 OPERATION PERMIT by: Marie H. Dotson RS Date: 7/23/15

AUTHORIZATION TO CONSTRUCT by: [signature] APPROVED Date: JUL 01 2015 Existing System Inspected by: Date:

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