IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 218413

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

PIN # 4636-70-9090

APPLICANT: PHILIP TRIECE APPLICANT ADDRESS: 4913 CROSSWINDS DR. WILMINGTON

SITE ADDRESS: 211 COMMODORE LOOP, MOORESVILLE PHONE: 910-452-2004 ALT. PHONE:

SITE DIRECTIONS: BSR, TL STUTTS, TL COMMODORE, ON L

SUBDIVISION: COMMODORE PENNINSULA SECTION: — LOT # 46 LOT AREA: .3AC DESIGN FLOW: L.T.A.R.:

① Septic Tank 1000 (gal) STB 794 Date 5-6-16
② Pump Tank 1000 (gal) PT 794 Date 3-7-16
Pump Make Model Serial #
Nitrification Fields # Lines Linear Ft:
Trench Width Max. Trench Bottom Depth Gravel Depth

EXISTING

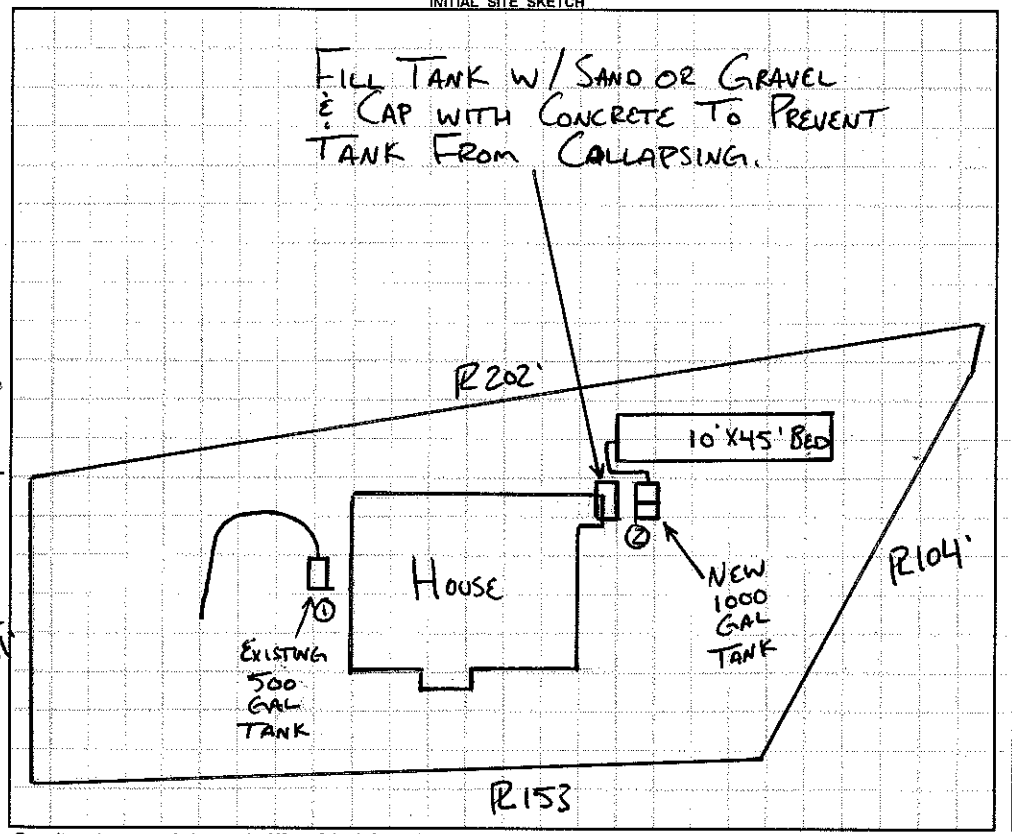
☐ New System ☑ Repair ☐ Expansion System Type: I (II) III IV V VI
System Description:
Repair System Description: TANK
Maintenance Agreement Required: ☐ YES ☑ NO
☑ GRAVITY ☐ PRESSURE

☑ Residence No. Bedrooms
☐ Business No. Persons
☐ Other No. Employees
☑ Slab ☐ Crawl Space
☑ Basement w/plumbing ☐ Basement w/o plumbing

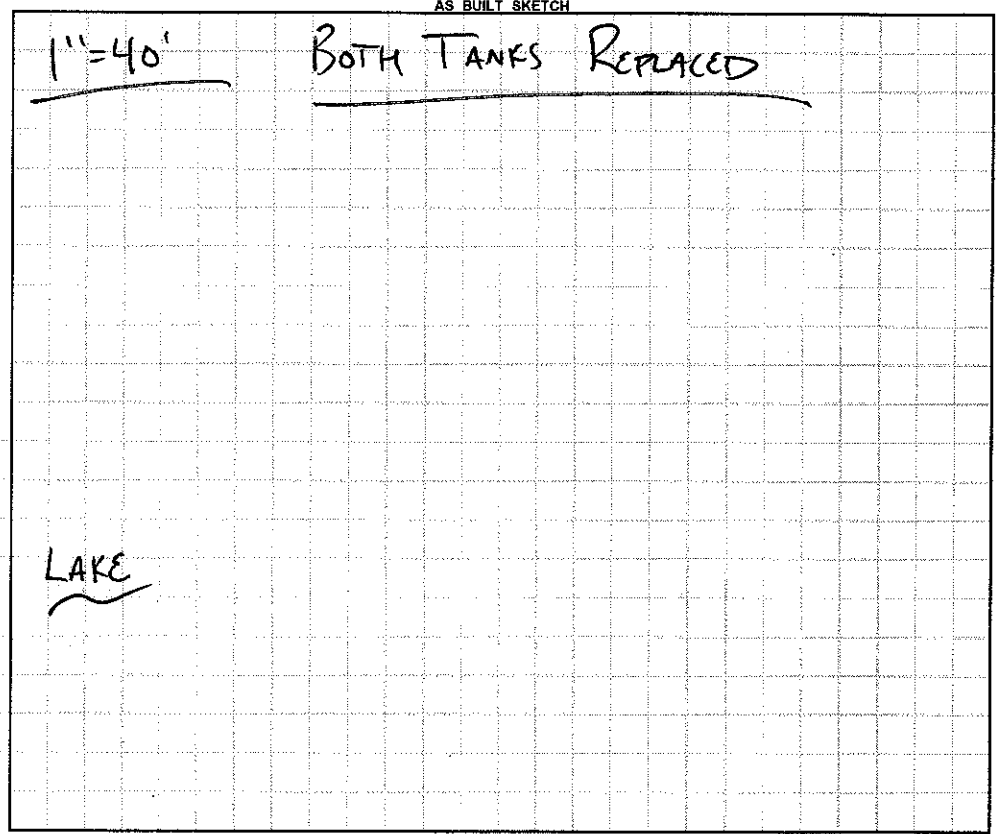
Water Supply
☐ Private
☐ Public
☑ Community

Comments / Conditions:

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: Philip R Triece Date: 5-5-16 Installed by: ABERNATHY

IMPROVEMENT PERMIT by: APPROVED MAY 04 2016 Date: OPERATION PERMIT by: Date: 6-24-16

AUTHORIZATION TO CONSTRUCT by: APPROVED Date: MAY 04 2016 Existing System Inspected by: Date:

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