# IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 — Mooresville Office (704) 660-3625 — PERMIT # 217421

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

PIN # 4636978427

APPLICANT: Stephen Beno — APPLICANT ADDRESS: 162 Woodduck Lp Mooresville, NC 28117

SITE ADDRESS: 162 Wood Duck Lp Mooresville, NC — PHONE: — ALT. PHONE:

SITE DIRECTIONS: Brawley School Rd TL Canvasback TL Woodduck Lp on right

SUBDIVISION: Lakeside Farms — SECTION: — LOT # 22 — LOT AREA: .41 Ac — DESIGN FLOW: 360gpd — L.T.A.R.: .3

Existing

| | | | | | |
|---|---|---|---|---|---|
| Septic Tank | 1000 (gal) | STB | | Date | |
| Pump Tank | (gal) | PT | | Date | |
| Pump Make | | Model | | Serial # | |
| # Nitrification Fields | 1 | # Lines | 4 | Linear Ft: | 200 |
| Trench Width | Existing | Max. Trench Bottom Depth | | Gravel Depth | |

☐ New System ☐ Repair ☐ Expansion — System Type: I II (III) IV V VI

Existing

System Description: Gravity - Pane/ Block

Repair System Description: Pump/ Panel Block

Maintenance Agreement Required: ☐ YES ☐ NO — ☐ GRAVITY ☐ PRESSURE

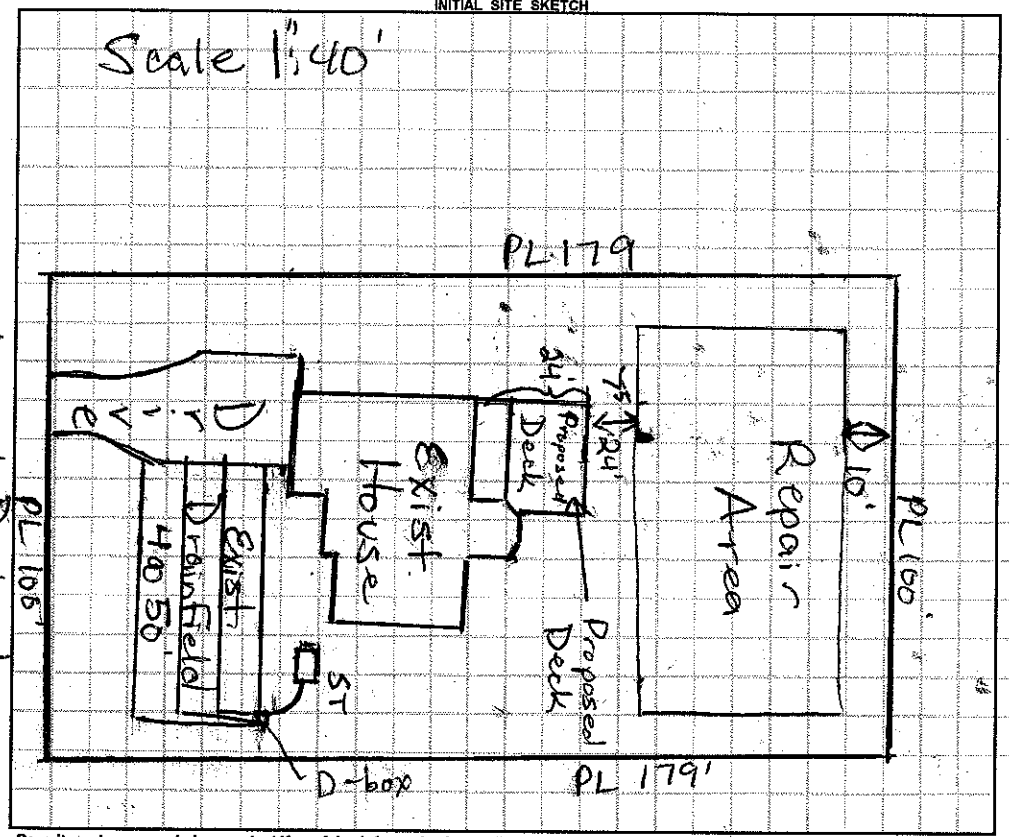
☐ Residence — No. Bedrooms
☐ Business — No. Persons
☐ Other — No. Employees
☐ Slab ☐ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☐ Community

Comments / Conditions:

Proposed Deck addition meets setbacks to Septic System.

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: 4/25/16 — Installed by:

IMPROVEMENT PERMIT by: — Date: — OPERATION PERMIT by: — Date:

AUTHORIZATION TO CONSTRUCT by: — Date: — Existing System Inspected by: [signature] REHS — Date: 4/22/16

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