IREDELL COUNTY HEALTH DEPARTMENT

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

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

PIN # 4637324711

APPLICANT: Charles Raines APPLICANT ADDRESS: 456 Oak Tree Rd Mooresville NC 28117

SITE ADDRESS: 456 Oak Tree Rd Mooresville NC 28117 PHONE: 704-799-2696 ALT. PHONE: 704-564-1369

SITE DIRECTIONS: Brawley School Rd, Rt on Oak Tree Rd, Approx. 3 miles on Rt

SUBDIVISION: CL&T SECTION: 9 LOT # 221 LOT AREA: 0.74 ac DESIGN FLOW: 360 L.T.A.R.:

Septic Tank 1000 + (gal) STB 794 Date 9-3-13
Pump Tank (gal) PT Date
Pump Make Model Serial #
Nitrification Fields # Lines Linear Ft:
Trench Width Max. Trench Bottom Depth Gravel Depth

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

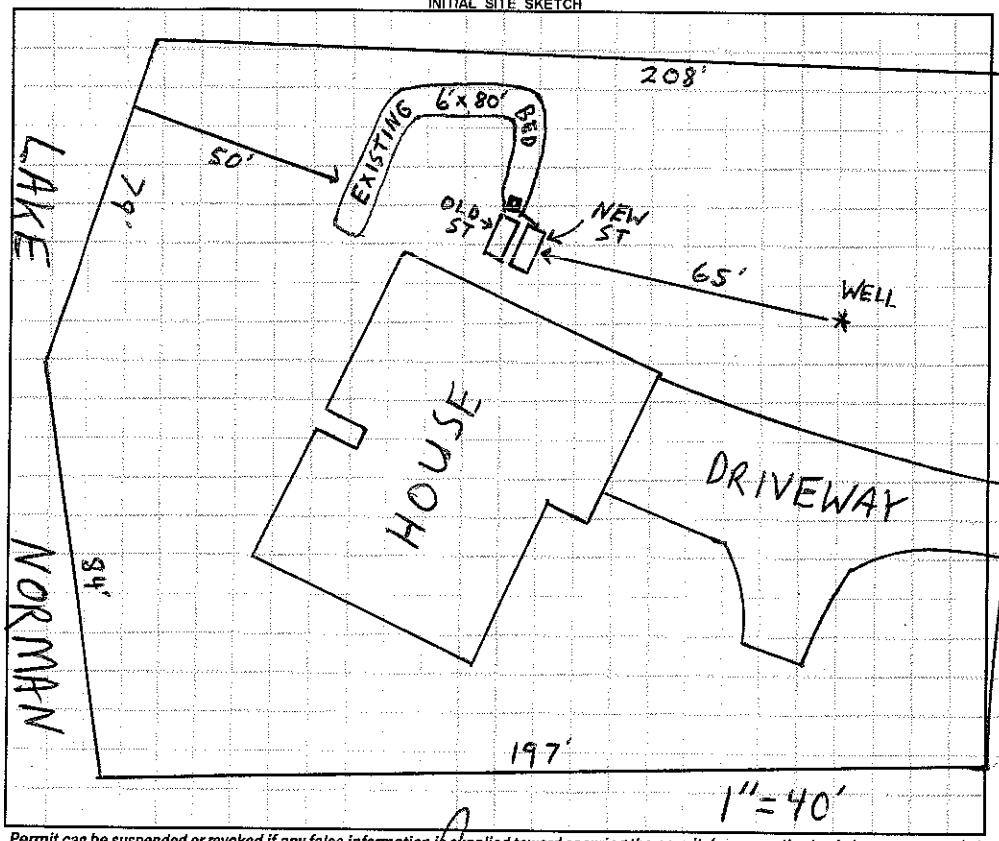
☒ Residence No. Bedrooms 3
☐ Business No. Persons 6
☐ Other No. Employees
☐ Slab ☐ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

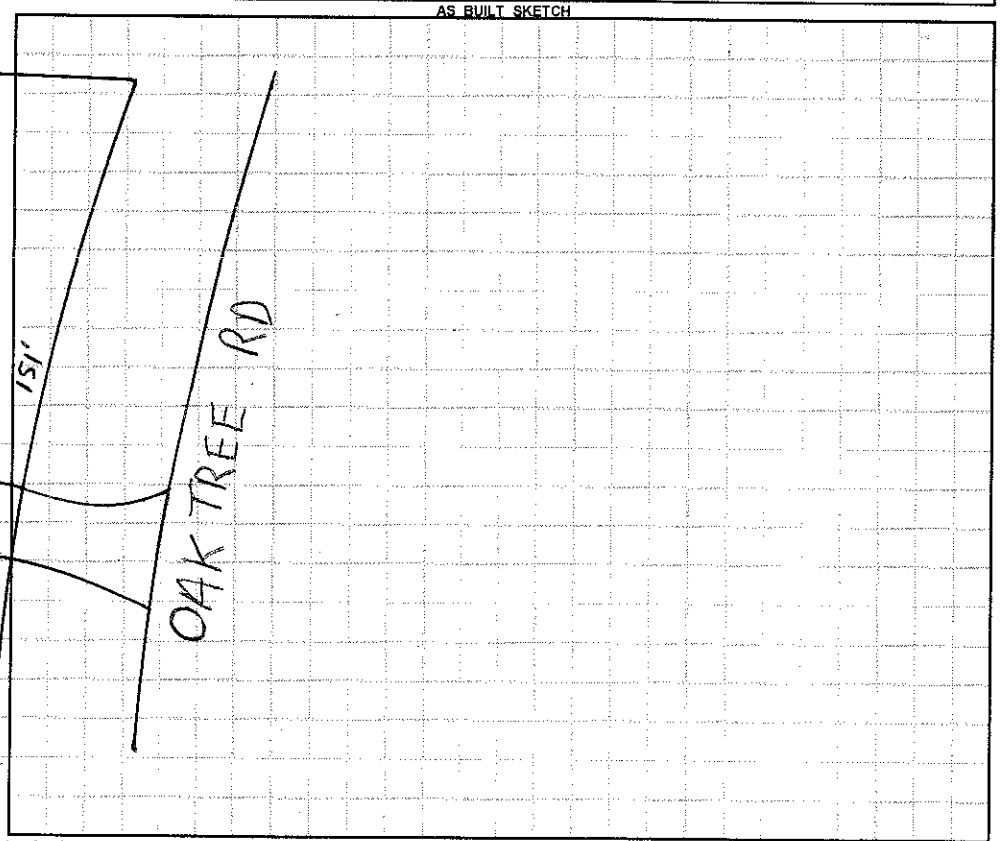
Comments / Conditions: Existing Septic Tank must be removed or pumped, crushed and backfilled.

1000 gal tank installed

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: Charles Raines Date: 10-1-13 Installed by: Maiden Grading and Septic Tank

IMPROVEMENT PERMIT by: Odie L. Pruett Date: 10-1-13 OPERATION PERMIT by: Odie L. Pruett Date: 10-8-13

AUTHORIZATION TO CONSTRUCT by: Odie L. Pruett Date: 10-1-13 Existing System Inspected by: Date:

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