IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 223646

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

PIN # 4637356672

APPLICANT: Connie & Patrick Hughes APPLICANT ADDRESS: 128 Woodthrush Ln Mooresville, NC 28117

SITE ADDRESS: 128 Woodthrush Mooresville, NC PHONE: ALT. PHONE: 704 622-2515

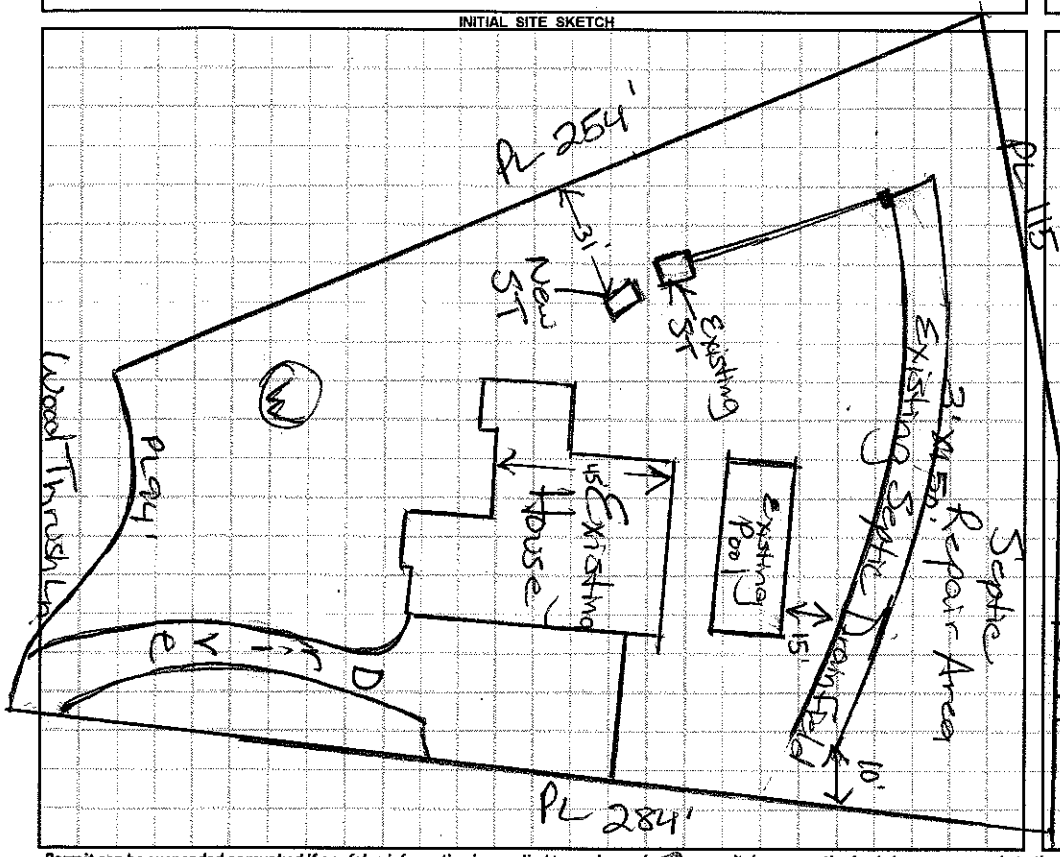
SITE DIRECTIONS: Hwy 150 W TL Doolie Rd TR Whippoorwill Rd TR Kingfisher TL Woodthrush on right

SUBDIVISION: Whippoorwill Woods SECTION: 1 LOT # 216 LOT AREA: .893 DESIGN FLOW: 360gpd L.T.A.R.:

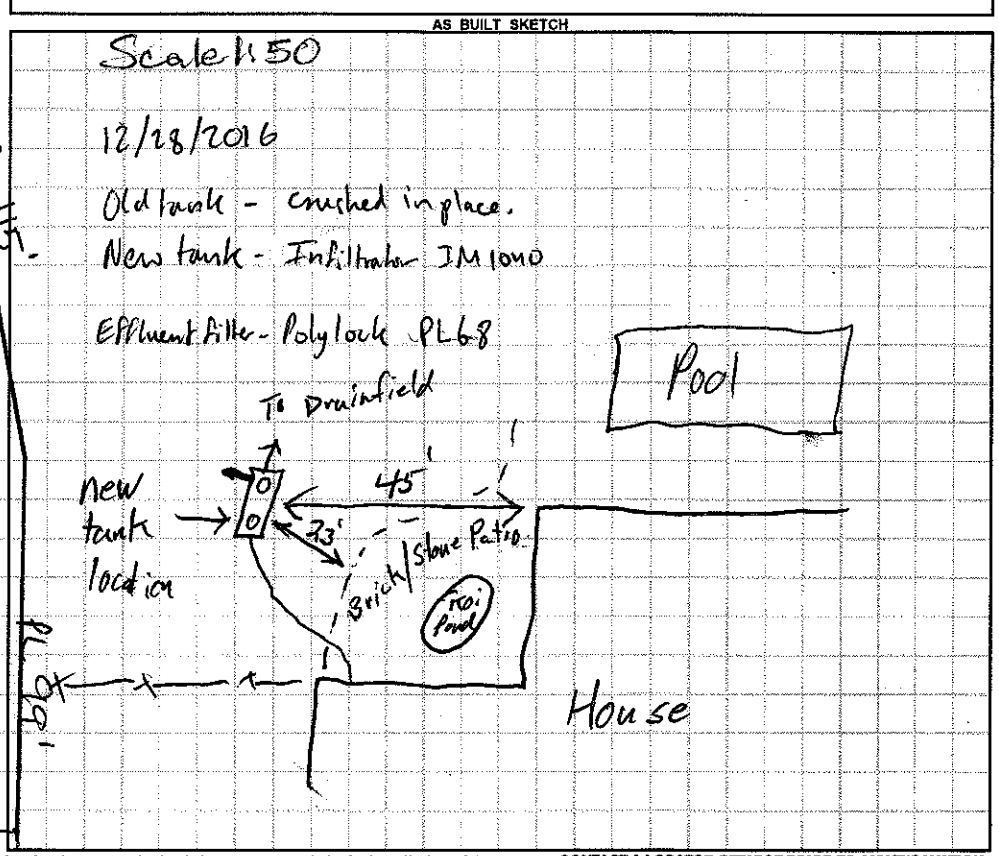
Septic Tank	1000	(gal)	STB IM 1040	Date	—	☐ New System	☒ Repair	☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms	3	Water Supply		
Pump Tank		(gal)	PT	Date		System Description:	ST Only			☐ Business	No. Persons	6	☐ Private		
Pump Make		Model		Serial #		Repair System Description:	Modified Conventional			☐ Other	No. Employees		☐ Public		
# Nitrification Fields		# Lines		Linear Ft:		Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☐ Crawl Space		☐ Community		
Trench Width		Max. Trench Bottom Depth	Existing	Gravel Depth			☒ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing			☐ Basement w/o plumbing		

Comments / Conditions: Lid of existing Septic tank (ST) Collapsed in, needs new ST.

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: Connie Hughes Date: 12/19/16 Installed by: Russell Williams

IMPROVEMENT PERMIT by: Maria Dotson Date: 12/19/16 OPERATION PERMIT by: Tom Shuck Date: 12-28-16

AUTHORIZATION TO CONSTRUCT by: Maria Dotson Date: 12/19/16 Existing System Inspected by: Date:

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