IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 158822

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

PIN # 4638-07-0290

APPLICANT: Robert Melvin APPLICANT ADDRESS: 1277 Fern Hill Rd Mooresville NC 28117

SITE ADDRESS: 1277 Fern Hill Rd Mooresville NC 28117 PHONE: 704-818-7481 ALT. PHONE:

SITE DIRECTIONS: Perth Rd N, TL on Fern Hill Rd, Lot on L

SUBDIVISION: CL&T SECTION: 15 LOT # 1 LOT AREA: 0.586 ac DESIGN FLOW: 360 gpd L.T.A.R.: 0.3

Septic Tank EXISTING (gal) STB Date
Pump Tank EXISTING (gal) PT Date
Pump Make Model Serial #
Nitrification Fields 1 # Lines 4 Linear Ft: 207
Trench Width Max. Trench Bottom Depth Gravel Depth

☑ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI
System Description: EXISTING LP PPBPS
Repair System Description: LP PPBPS
Maintenance Agreement Required: ☑ YES ☐ NO
☐ GRAVITY ☑ PRESSURE

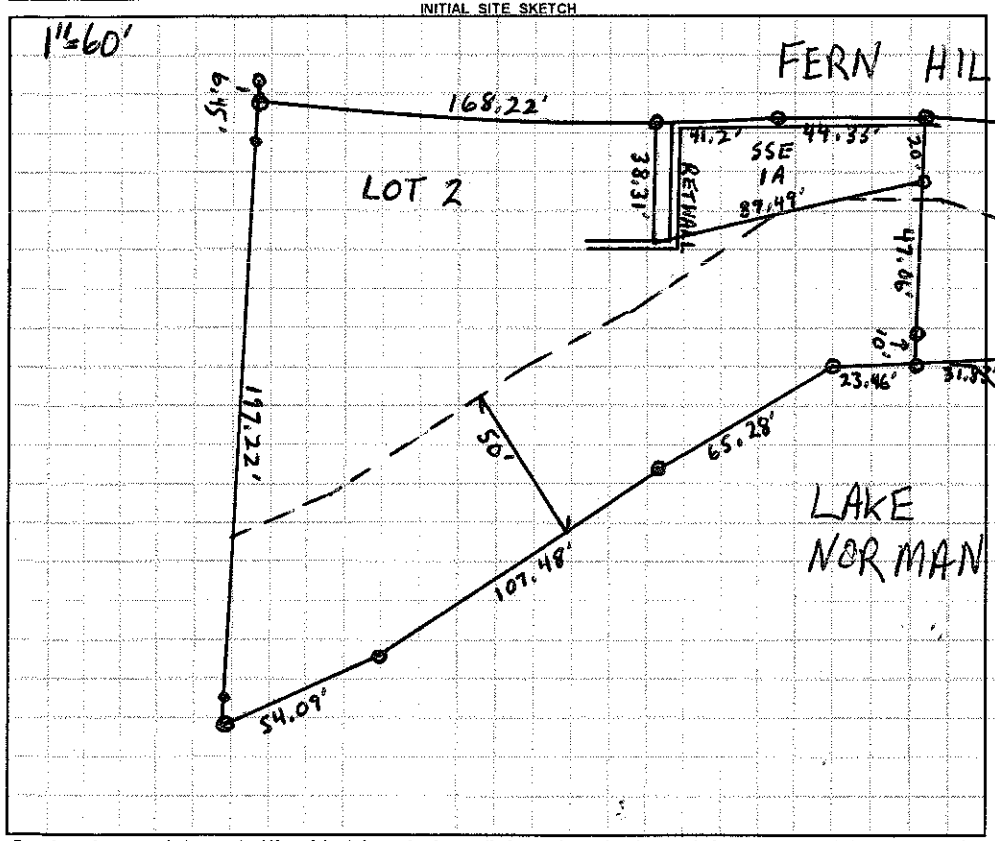
☑ Residence No. Bedrooms 3
☐ Business No. Persons 6
☐ Other No. Employees
☐ Slab ☐ Crawl Space
☑ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☑ Private ☐ Public ☐ Community

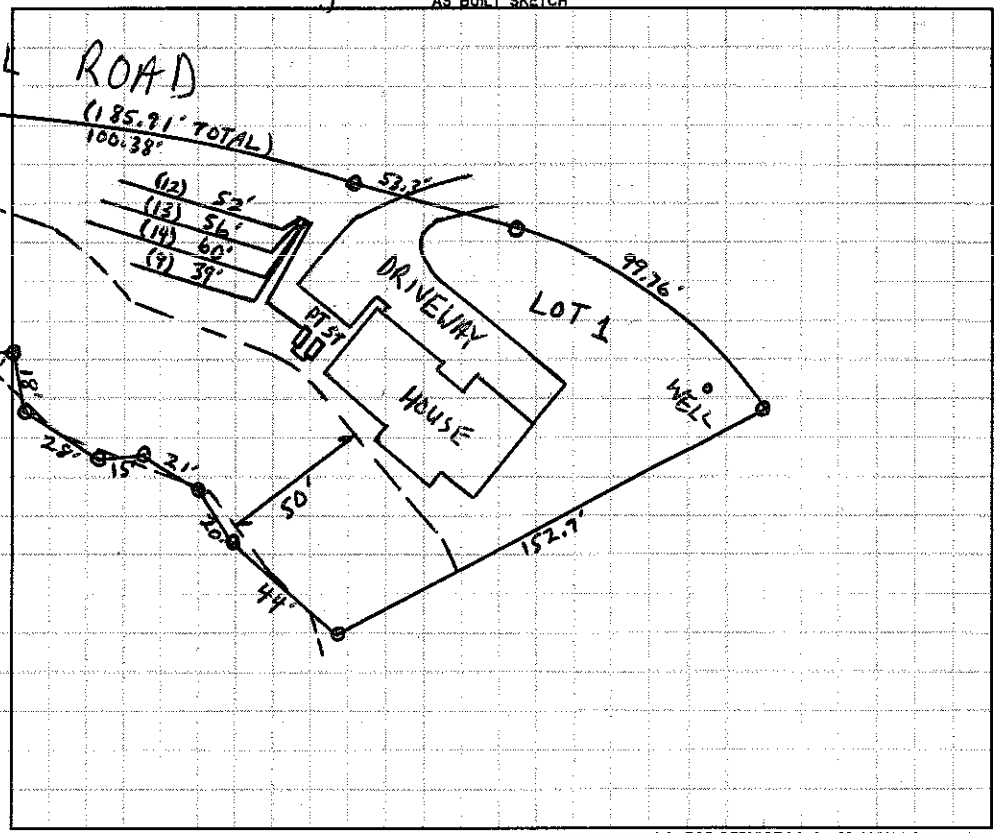
Comments / Conditions: *Repair area #1 is located in SSE 1A and recorded w/ Iredell County Register of Deeds, SSE 1A is located on Lot 2 (Book: 2277 Page: 560)

*Installed System Checked 5-27-10, Repair Essement added to lot 2, original repair no longer valid.
*Maintenance Agreement Received

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: Date: Installed by: Tucker Grading

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date: 12-4-13

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Date:

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