IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 216510

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

PIN # 4638-33-1419 ✓ Pool

APPLICANT: Joseph Torres | APPLICANT ADDRESS: 657 Normandy Rd Mooresville, NC

✓SITE ADDRESS: 657 Normandy Rd. Mooresville, NC | PHONE: 704-604-4388 | ALT. PHONE: 576-356-7012

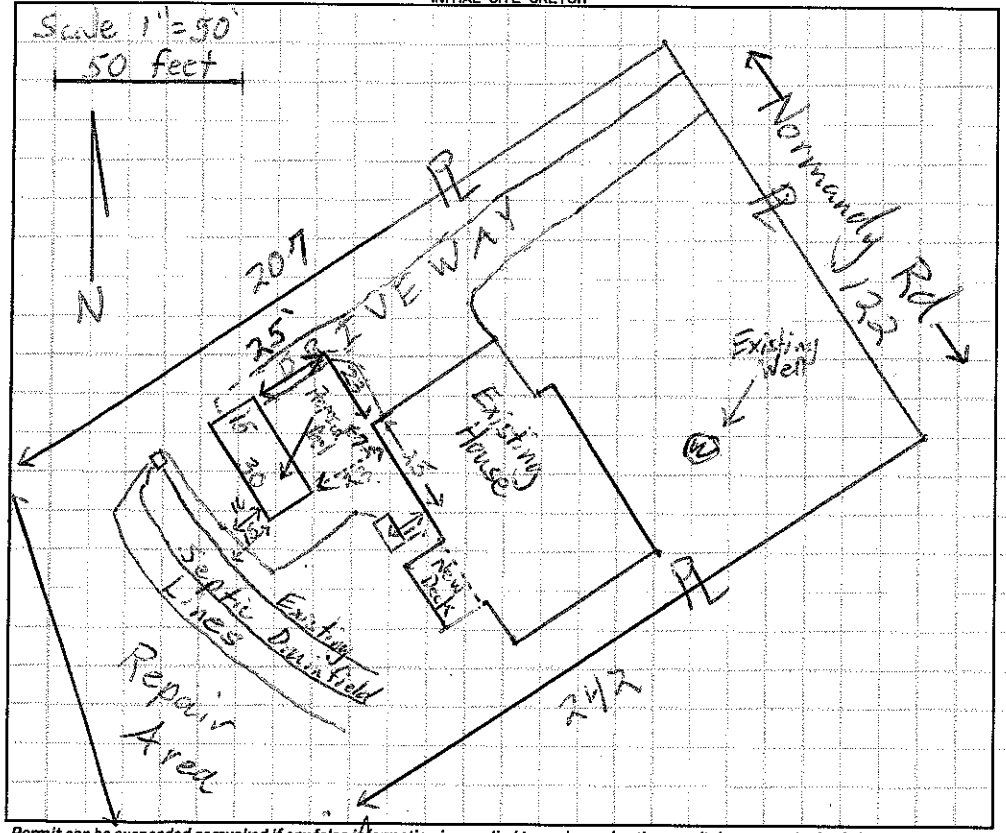
SITE DIRECTIONS: 150 West to Perth Rd North → Left on Normandy Rd → House on left

✓SUBDIVISION: Normandy Hill | SECTION: — | LOT # 6 | LOT AREA: 0.63 acres | DESIGN FLOW: 360 gal/day | L.T.A.R.: Existing

Septic Tank	Existing	(gal)	STB	—	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:		☐ Business	No. Persons	6	☒ Private
Pump Make	—	Model	—	Serial #	—		Repair System Description:	Existing	☐ Other	No. Employees	—	☐ Public
# Nitrification Fields	Ex	# Lines	Ex	Linear Ft:	Ex		Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☒ Crawl Space		☐ Community
Trench Width	Ex	Max. Trench Bottom Depth	Ex	Gravel Depth	Ex		☒ GRAVITY	☐ PRESSURE	☐ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions: 30' x 15' inground pool must be constructed in location detailed below. Recommend pumping septic tank every 3-5 years.

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**

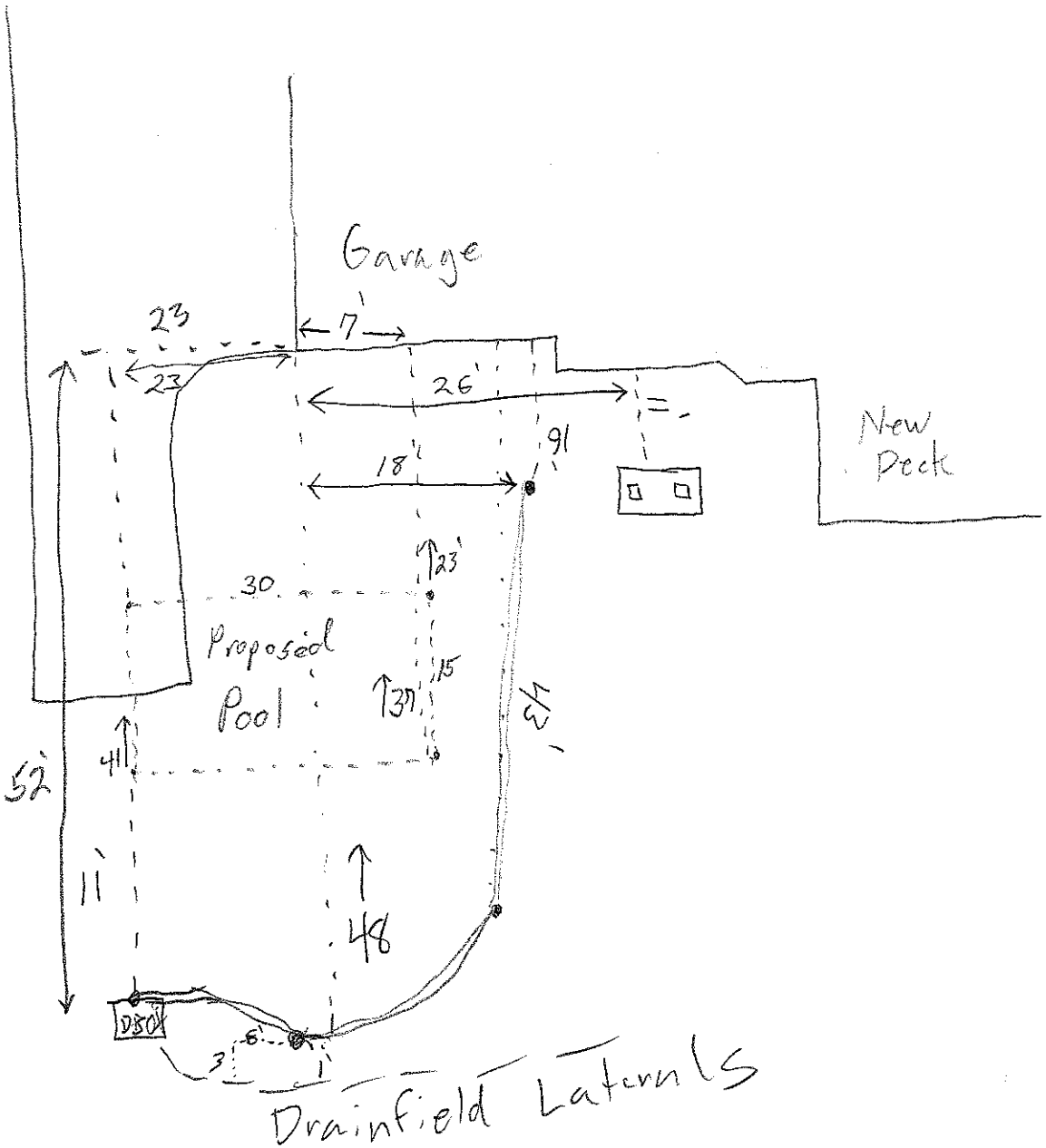
☐ **IMPROVEMENT PERMIT** *with plot valid without expiration.* ☐ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: [signature] Date: 3/8/16 | Installed by:

IMPROVEMENT PERMIT by: | Date: | OPERATION PERMIT by: | Date:

AUTHORIZATION TO CONSTRUCT by: | Date: | Existing System Inspected by: [signature] | Date: 3-4-16

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


Garage
23
23
7
26
91
18
New Deck
30
23
Proposed Pool
37
15
52
41
11
48
DSOL
6
3
Drainfield Laterals