IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 20717

ALP

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

PIN # 4639216850

APPLICANT: Lakeshore Holdings APPLICANT ADDRESS: 295 Lake Mist Dr Mooresville, NC 28117

SITE ADDRESS: 126 Trent Pines Dr Mooresville, NC PHONE: 9193894500 ALT. PHONE: 704881-1288 Bobby

SITE DIRECTIONS: Hwy 150 W TR Perth Rd TL Fern Hill TL Trent Pines on right

SUBDIVISION: Woodleaf SECTION: 2 LOT # 77 LOT AREA: 1.326 Ac. DESIGN FLOW: 480 gpd L.T.A.R.: .25

Septic Tank 1000 (gal) STB 760 Date 3-8
Pump Tank 1000 (gal) PT Date 2-10
Pump Make Model Serial #
Nitrification Fields 1 # Lines 6 Linear Ft: 482 ft
Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A

[X] New System [ ] Repair [ ] Expansion System Type: I II [III] IV V VI
System Description: Pump-PM-25% Reduction
Repair System Description: Pump LP PPBPS
Maintenance Agreement Required: [ ] YES [X] NO [ ] GRAVITY [X] PRESSURE

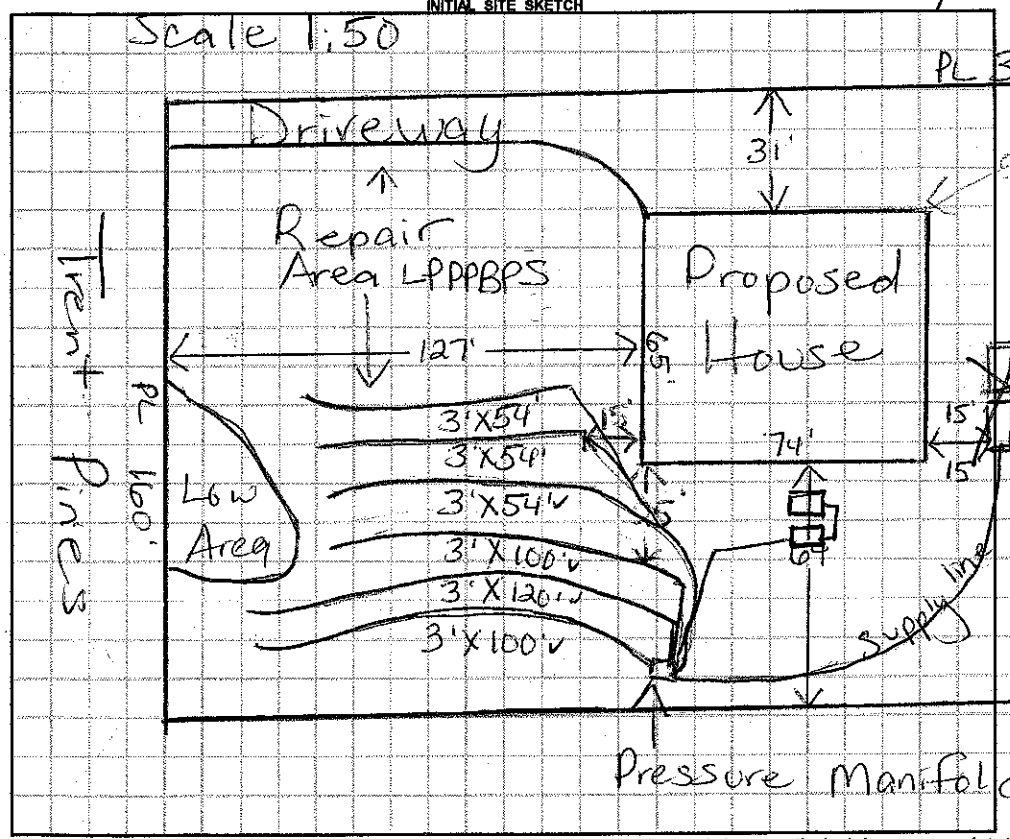
[X] Residence No. Bedrooms 4
[ ] Business No. Persons 8
[ ] Other No. Employees
[ ] Slab [X] Crawl Space
[ ] Basement w/plumbing [ ] Basement w/o plumbing

Water Supply: [X] Private [ ] Public [ ] Community

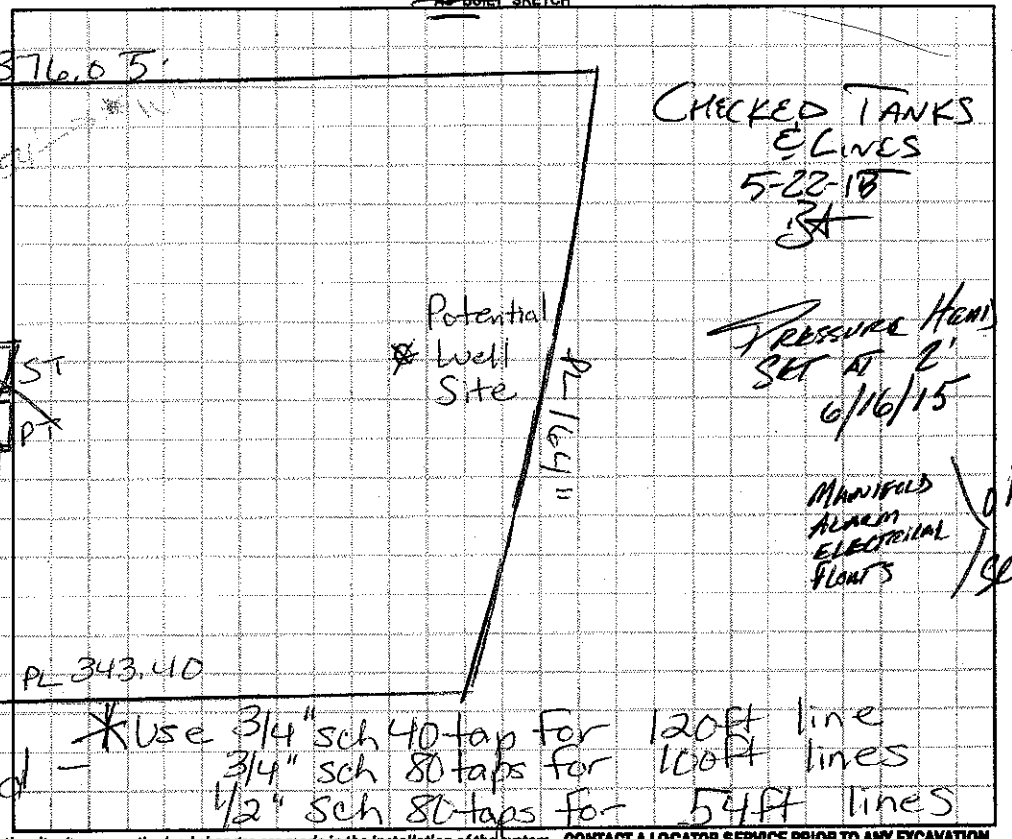
Comments / Conditions: * 480 ft required
* Pressure Manifold use varying taps as listed below
Keep Drainfield 25ft upslope from foundation drain & 15ft sideslope. (Tanks & Drainfield)

This permit replaces previous permit issued 5/29/07 by Judy Melville
4/13/15 OK to move tanks to side of house maintain [redacted] off House drain.

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.* [X] **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Date: 1/28/15 Installed by: Hunter's Grading

IMPROVEMENT PERMIT by: RS Date: 1/27/15 OPERATION PERMIT by: APPROVED Date: JUN 16 2015

AUTHORIZATION TO CONSTRUCT by: RS Date: 1/27/15 Existing System Inspected by: Date:

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