IREDELL COUNTY HEALTH DEPARTMENT

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

per Central permit 174883 PERMIT # ~~H9079~~

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

PIN # 4639223689

APPLICANT: Elaine & Ron Dunn APPLICANT ADDRESS: 182 Honeysuckle Creek Lp Mooresville, NC 28117

SITE ADDRESS: 128 Wolf Hill Dr. Mooresville, NC 28117 PHONE: 631 827 4776 ALT. PHONE:

SITE DIRECTIONS: Perth Rd N. TL Fern Hill Rd TR Wolf Hill Drive 3rd lot on Right

SUBDIVISION: Beacon Point SECTION: 4 LOT # 16 LOT AREA: 1.759 Acres DESIGN FLOW: 480 gpd L.T.A.R.: .25

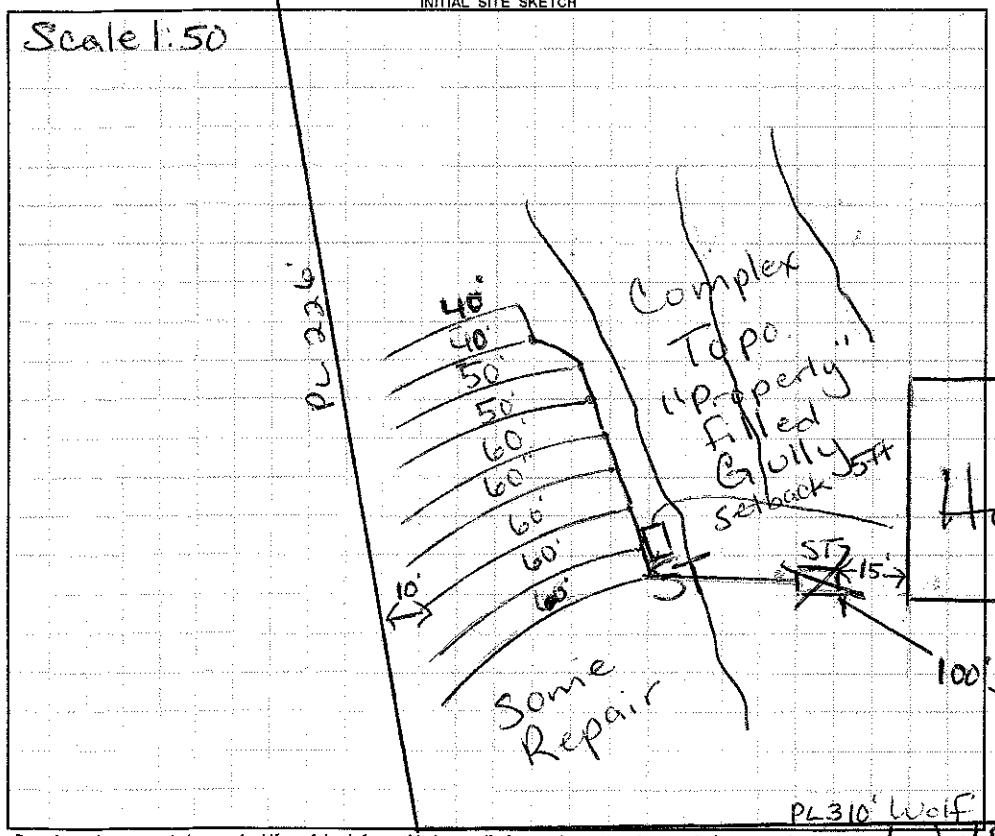
Septic Tank	1000	(gal)	STB 794	Date 7-13-12	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms 4	Water Supply
Pump Tank		(gal)	PT	Date	System Description: Gravity – 25% Reduction				☐ Business	No. Persons	☒ Private
Pump Make		Model		Serial #	Repair System Description: LPPPBPS				☐ Other	No. Employees	☐ Public
# Nitrification Fields	1	# Lines	8-9	Linear Ft: 480'	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☐ Crawl Space	☐ Community
Trench Width	36"	Max. Trench Bottom Depth		Gravel Depth N/A		☒ GRAVITY	☐ PRESSURE		☒ Basement w/plumbing		☐ Basement w/o plumbing

Comments / Conditions:

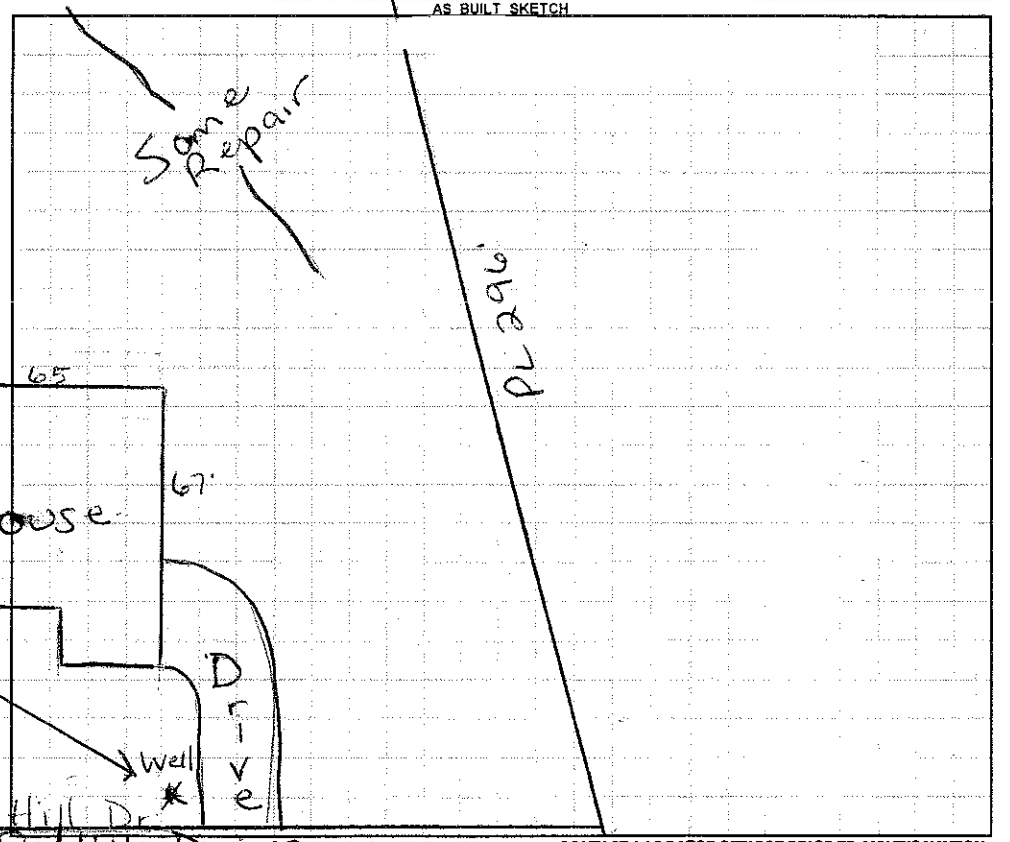
PL 285

This replaces previous permit dated 5-1-2009
Use Serial distribution

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: 2/6/13 Installed by: Richard Abernathy

IMPROVEMENT PERMIT by: Maria H. Dolson RS Date: 2/4/13 OPERATION PERMIT by: Maria H. Dolson RS Date: 3'

IZATION TO CONSTRUCT by: Maria H. Dolson RS Date: 2/4/13 Existing System Inspected by: Date:

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