IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PERMIT# 141691 PIN# 473 010 9262.670 DATE 6-20-07

OWNER OR APPLICANT Falls Cove Dev. LLC PHONE: Business _____ Home _____

ADDRESS 2215 Brawley School Rd Mooresville NC 28115

LOCATION State Park Rd TL Morrison Farm TL Park Crest at end in cul-de-sac

SUBDIVISION Parkwood @ Falls Cove BLOCK / SECTION 6 LOT 670 LOT AREA 50135.62 SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .3gpd/ft²

Septic Tank: 1500 # Gallons: STB 526 Date 10-25-17

Pump Tank: 1500 # Gallons: PT 485 Date 10-27-17

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet _____ Linear Feet 270

No Lines 3@90' Trench Width 36"* Max Trench Bottom Depth 36" Gravel Depth NA ☐ Gravity ☒ Pressure

☒ New System ☐ Repair ☐ Expansion System Type: I II III (IV) V VI

System Description: LP PPBPS

Repair System Description: LP PPBPS

Maintenance Agreement Required: ☒ Yes ☐ No

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Persons 8

☐ Business No. Employees _____

☐ Other _____

Water Supply: ☐ Individual ☒ Public ☐ Community

☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions: * Per plan specs

Comments:/Conditions:

INITIAL SITE SKETCH

See plan from SAME

AS BUILT SKETCH

	Date	Initials
Drain Lines Checked	11-12-14	JH
Tanks Checked	9-2	JS
Pressure Manifold or Valve Box Checked	11-12-14	JH
Pressure Head Set	12-17-14	JH
Electrical Checked	12-17-14	JH
Floats Set	12-17-14	JH
Alarm Checked	12-17-14	EO
Maintenance Contract Y / N	12-12-14	Y

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. Improvement Permit with plat valid without expiration ☐ Improvement Permit with site plan valid for sixty months ☒ Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: _____ date 06/26/07 Installed by: Piedmont Backhoe

Improvement Permit by: Judy Melville date 6-20-07 Operation Permit by: _____ date 12-17-14

Authorization to Construct by: R. STEVE HAVRICK date 3-20-13 Existing System Inspection by: _____ date _____

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK