IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 122180 PIN# 4639615556.072 4639-71-6898 DATE 2-22-06

OWNER OR APPLICANT Cliff Whittlesey PHONE: Business 704-779-2499 Home 704-895-2926

ADDRESS 153 South Haven Dr Mooresville 28117

LOCATION Hwy 21 N TL Cornelius Rd Cross Perth Rd to Liva Ln TR Bay Crossing TR Tea Olive Ln

SUBDIVISION Bay Crossing BLOCK / SECTION 1 LOT 72 LOT AREA .666 Ac SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .3 gpd/ft²

Septic Tank: 1000 Gallons; STB 338 Date 9-2-06
Pump Tank: 1000 Gallons; PT 283 Date 8-19-06
Pump Make: Goulds Model WE0312M Serial No. S654917779
Nitrification Field: No Fields 1 Square Feet 11000 Linear Feet 270
No Lines 3 Trench Width 24" 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 Panel Block
Repair System Description: LP Panel Block
Maintenance Agreement Required: ☒ Yes ☐ No

☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Persons ___
☐ Business No. Employees ___
☐ Other ___

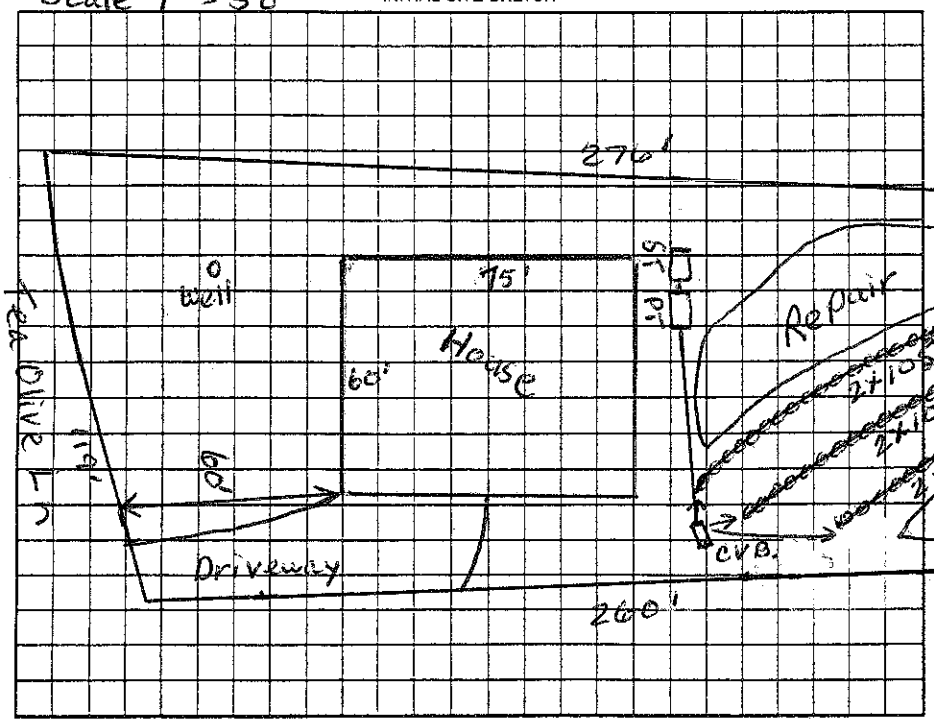
Water Supply: ☒ Individual ☐ Public ☐ Community

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

Comments:/Conditions: 63 panels

Comments:/Conditions: 10/11/06 Checked tanks & line
10/12/06 Checked rest of lines
10/13/06 Pressure Checked

Scale 1" = 50' 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. 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: Cliff Whittlesey date 2-22-06 Installed by: Richard Abernathy

Improvement Permit by: Judy Melville date 2-22-06 Operation Permit by: Maria H. Dolan date 11/8/07

Authorization to Construct by: Judy Melville date 2-22-06 Existing System Inspection by: ___ date ___

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