IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 181588

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

PIN # 4639955462

APPLICANT: MERITAGE HOMES APPLICANT ADDRESS: 11605 COMMUNITY RD ST 250 CHARLOTTE NC 28277

SITE ADDRESS: 119 LEANING TOWER LN MOORESVILLE NC PHONE: 7043096577 ALT. PHONE: 704658-8616

SITE DIRECTIONS: I-50 W (E) PERTH RD (L) BELLS CROSSING (1ST) RIGHT (L) ON LEANING TOWER 4TH ON (L)

SUBDIVISION: BELLS CROSSING SECTION: 2 LOT # 46 LOT AREA: 33,518 SqFT DESIGN FLOW: 480 GPD L.T.A.R.: 0.3

Septic Tank 1200 (gal) STB Date

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines 7 Linear Ft: 436'

Trench Width 3' Max. Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: 25% REDUCTION GRAVITY

Repair System Description: LAPPED PPBPS

Maintenance Agreement Required: ☐ YES ☑ NO

☑ GRAVITY ☐ PRESSURE

☑ Residence No. Bedrooms 4

☐ Business No. Persons 8

☐ Other No. Employees

☑ Slab ☐ Crawl Space

☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☑ Community Well

Comments / Conditions: INSTALL SYSTEM LINES ON CONTOUR DIVERT ALL SURFACE WATER OFF SYSTEM AREA

8/8/14 Review floor plans, in compliance with Septic plan House footprint including decks & porches can not exceed footprint in plan.

INITIAL SITE SKETCH

See DESIGN BY:
BATEMAN CIVIL SURVEY COMPANY approved 7-23-14

AS BUILT SKETCH

see "as built sketch on back of "inspection checklist" sheet

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: [signature] Date: 8-6-14 Installed by: Carolina Pipe Cleaning

IMPROVEMENT PERMIT by: Dave Gray REHS Date: 7-23-14 OPERATION PERMIT by: Richard Farres Date: 11/17/14

AUTHORIZATION TO CONSTRUCT by: Melissa Hix Dotson RS Date: 8/8/14 Existing System Inspected by: Date:

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