IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 217537

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

PIN # 4645-00-2818

APPLICANT: Zia Construction APPLICANT ADDRESS: 120 Oakwood Meadow Dr. Mooresville, NC 28115

SITE ADDRESS: 647 Langtree Rd Mooresville, NC PHONE: 704-506-0499 ALT. PHONE:

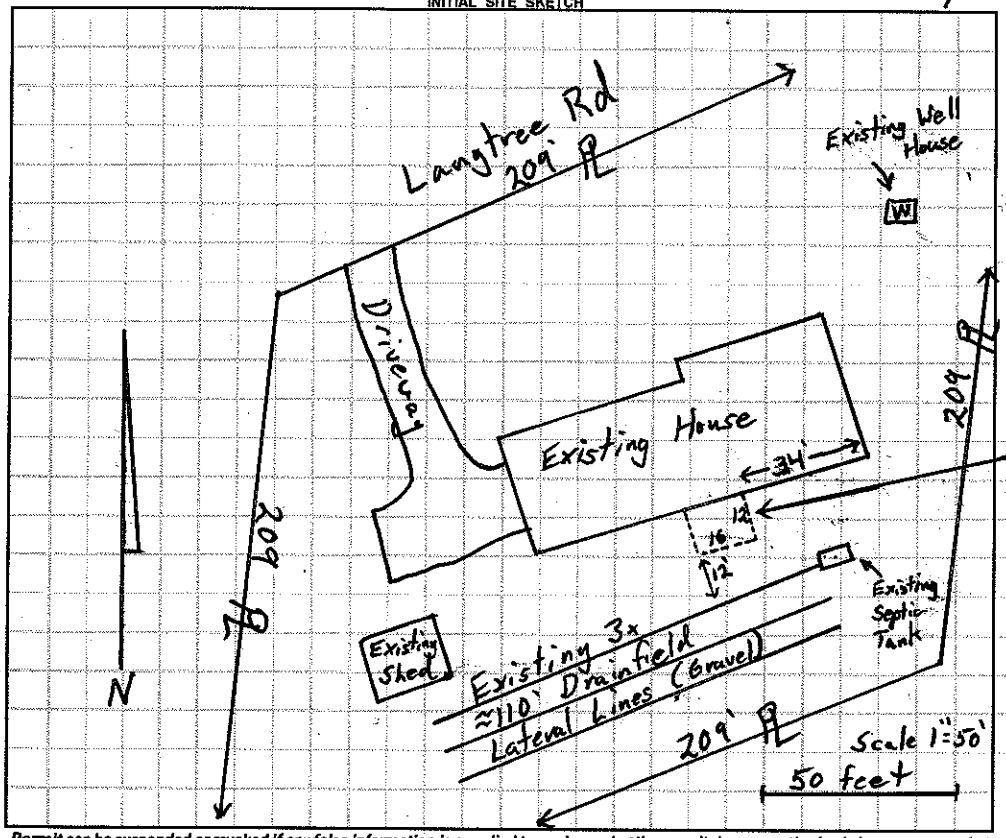
SITE DIRECTIONS: Rt 21/115 S from Mooresville → Right on Langtree Rd → Property on Left

SUBDIVISION: — SECTION: — LOT # — LOT AREA: 1.00 acres DESIGN FLOW: 240 gal/day L.T.A.R.: Existing

Septic Tank	1000 Ex	(gal)	STB		Date		☐ New System	☐ Repair	☐ Expansion	System Type: I	II	III IV V VI	☒ Residence	No. Bedrooms	3	Water Supply
Pump Tank	—	(gal)	PT		Date		System Description:	Existing - Gravel Lines					☐ Business	No. Persons	4	☒ Private
Pump Make	—	Model			Serial #		Repair System Description:	Existing					☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	3 Ex		Linear Ft:	330 Ex	Maintenance Agreement Required:	☐ YES	☒ NO				☐ Slab	☒ Crawl Space		☐ Community
Trench Width	36" Ex	Max. Trench Bottom Depth	36 Ex		Gravel Depth	12" Ex	☒ GRAVITY	☐ PRESSURE					☐ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions: Approval is for building a roof on the existing 12'x16' patio as shown on drawing. Recommend pumping septic tank every 3-5 years. No original permit found for property so a default 2-BR size of the septic has been determined. If owner/ applicant has older septic records/permit documents proving otherwise, they are encouraged to provide them to the department.

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: Mak Zia Date: 4-29-16 Installed by:

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Tom Shuck Date: 4-26-2016

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