IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 20413

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

PIN # 4645-72-8080

APPLICANT: Langtree Plantation / Rick Howard APPLICANT ADDRESS: 554 Langtree Rd Mooresville NC 28117

SITE ADDRESS: 554 Langtree Rd, Mooresville PHONE: 704-746-3252 ALT. PHONE:

SITE DIRECTIONS: Hwy 115, T L on Alcove, TR on Langtree, Property on R

SUBDIVISION: SECTION: LOT # LOT AREA: 7.934 ac DESIGN FLOW: Flow EQ 532 T.A.R.: 0.3

Septic Tank 3000 (gal) STB 7 Date 2-2-15
Pump Tank 7000 (gal) PT 2031 Date 1-14-15
Pump Make Model Serial #
Nitrification Fields 1 # Lines 7 Linear Ft: 450
Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair ☐ Expansion System Type: I II III IV (V) VI
System Description: Flow EQ 25% Reduction
Repair System Description: Flow EQ 25% Reduction
Maintenance Agreement Required: ☑ YES ☐ NO ☐ GRAVITY ☑ PRESSURE

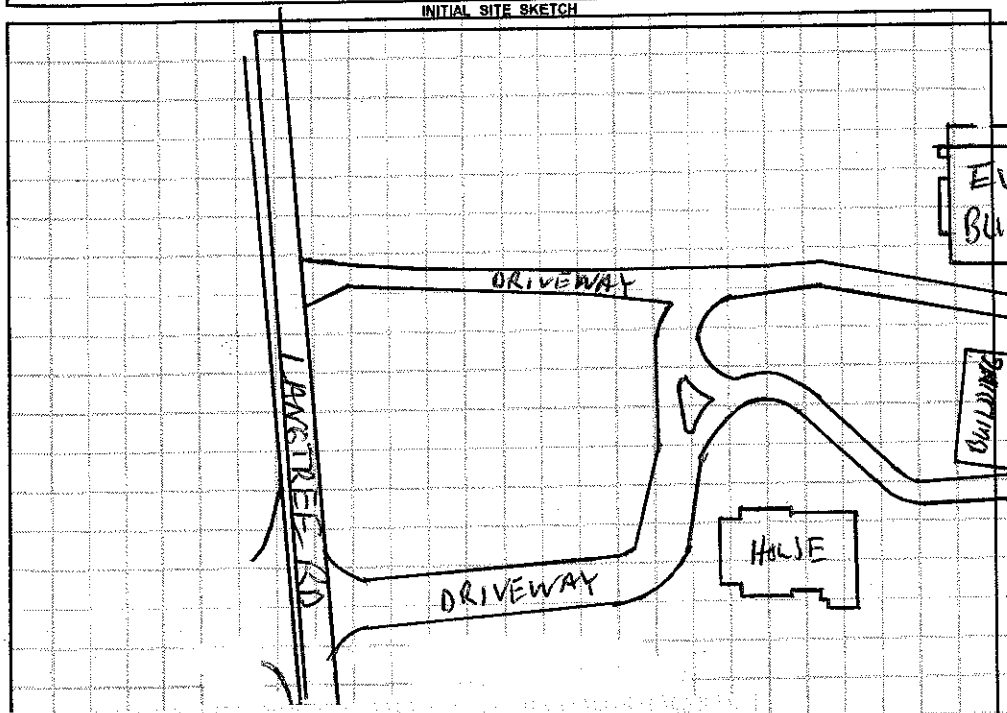
☐ Residence ☐ Business ☑ Other ☐ Slab ☐ Basement w/plumbing
No. Bedrooms No. Persons 372 No. Employees Crawl Space ☐ Basement w/o plumbing

Water Supply: ☐ Private ☑ Public ☐ Community

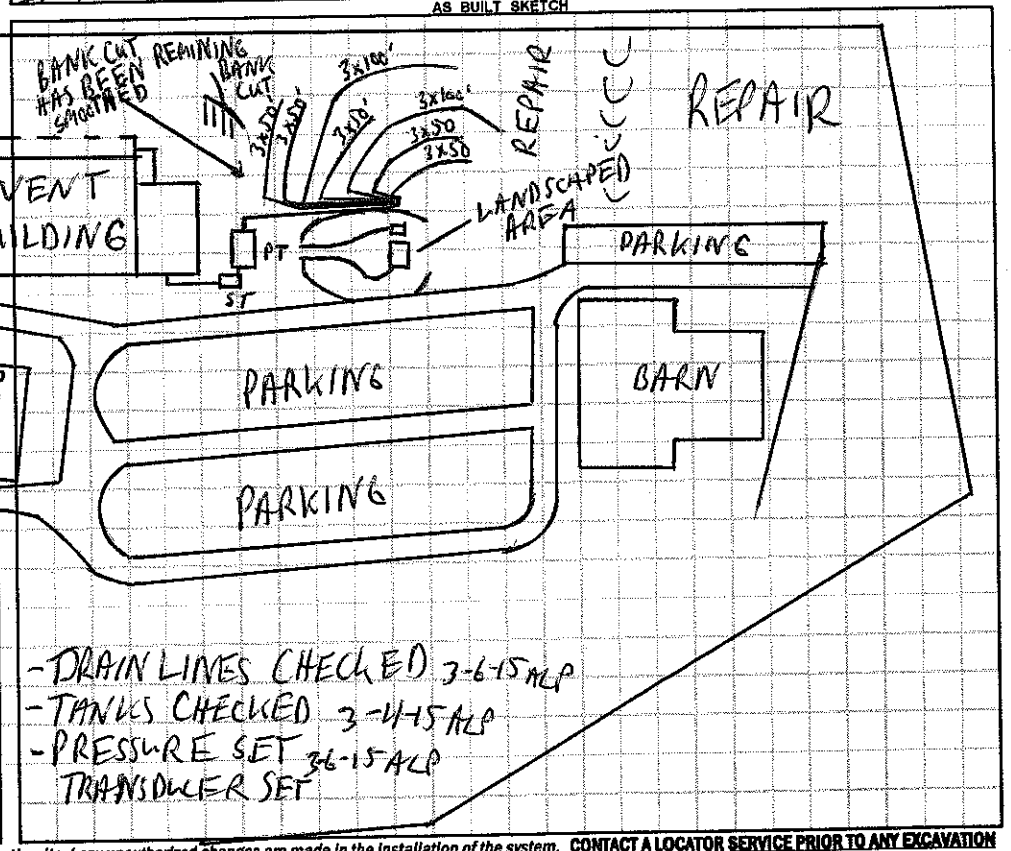
Comments / Conditions:

Event Center
-IQ4W INSTALLED 30" ALARM LEVEL, 17" TO TRANSDUCER, AQUAWORX IPC SLB02 SIMPLEX CONTROLLER INSTALLED

INITIAL SITE SKETCH



AS BUILT SKETCH



	Date	Initials
Drain Lines Checked	3-6-15	ALP
Tanks Checked	3-4-15	ALP
Pressure Manifold or Valve Box Checked	3-6-15	ALP
Pressure Head Set	3-6-15	ALP
Electrical Checked		
Floats Set	3-6-15	ALP
Alarm Checked	3-6-15	ALP
Maintenance Contract (Y) / N	7-18-16	MD

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**

PERMIT *with site plan* valid for 60 mos. ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Date: Installed by: FS Ervin

Date: OPERATION PERMIT by: Maria Dotson Date: 7/18/16

Date: Existing System Inspected by: Date:

- WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 20143

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

PIN # 4645-12-8080

APPLICANT: Langtree Plantation / Rick Howard APPLICANT ADDRESS: 554 Langtree Rd Mooresville NC 28117

SITE ADDRESS: 554 Langtree Rd PHONE: 704-746-3252 ALT. PHONE:

SITE DIRECTIONS: Hwy 21 S, T Lon Alcove, T Ron Langtree, Property on R

SUBDIVISION: SECTION: LOT # LOT AREA: 7.934 ac DESIGN FLOW: Flow EQ 532 L.T.A.R.: 0.3

Septic Tank 3000 (gal) STB 1 Date 2-2-15
Pump Tank (Pre) 6800 (gal) PT 2031 Date 1-14-15
Pump Make Goulds Model WE0512HH Serial #
Nitrification Fields 1 # Lines 7 Linear Ft: 450
Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair ☐ Expansion System Type: I II III IV Ⓥ VI
System Description: Flow EQ 25% Reduction
Repair System Description: Flow EQ 25% Reduction
Maintenance Agreement Required: ☑ YES ☐ NO
☐ GRAVITY ☑ PRESSURE

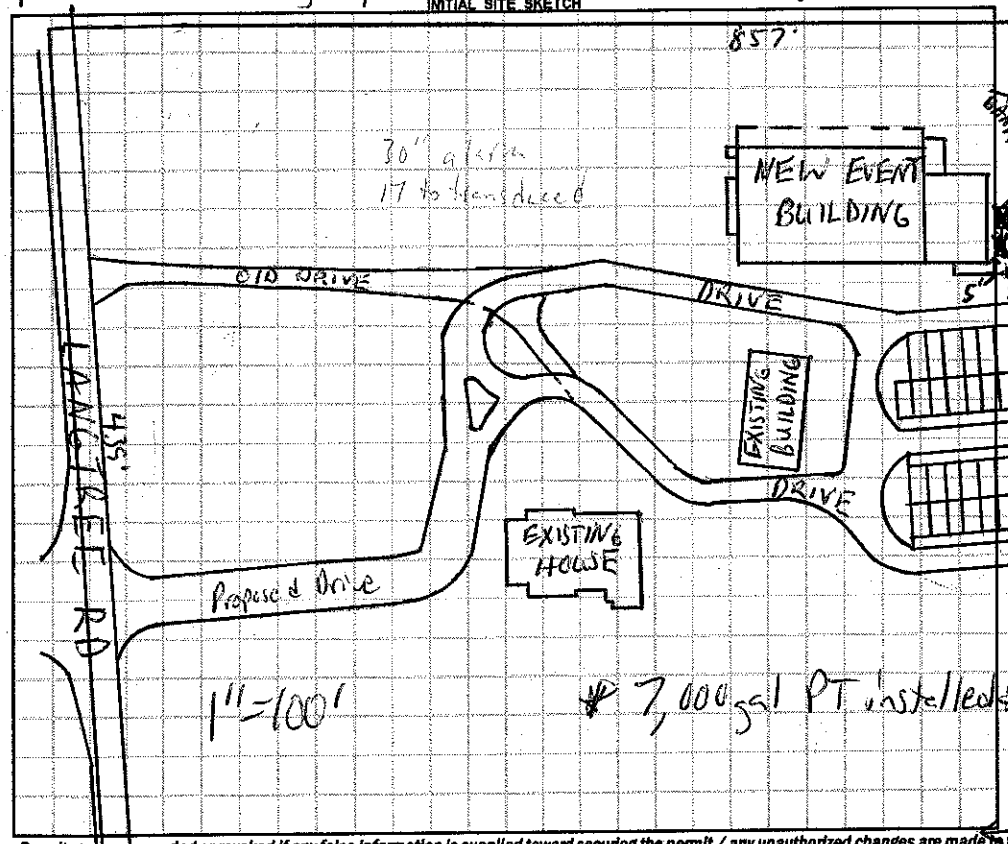
☐ Residence No. Bedrooms
☐ Business No. Persons
☑ Other Event Center No. Employees 322
☐ Slab ☐ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☑ Public ☐ Community

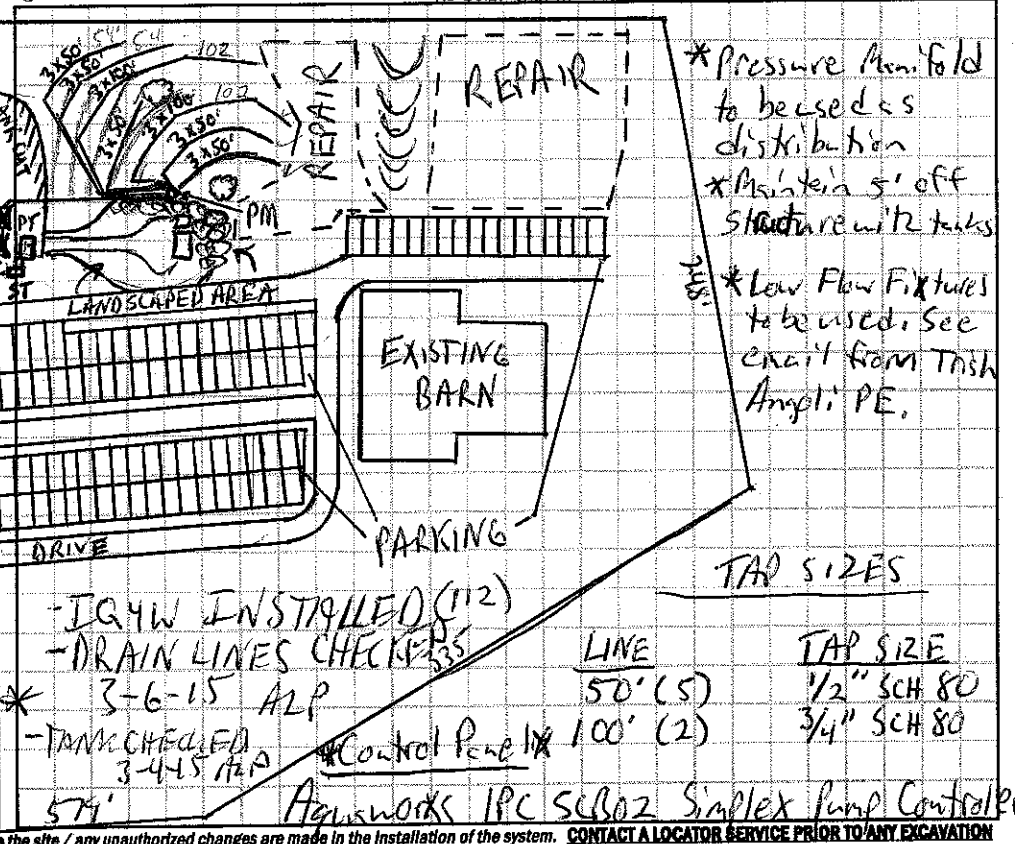
Comments / Conditions: This permit is for the Construction of an Event Center using Flow Equalization. Design flow before EQ is 1860gpd, Center to be open only on Saturdays and Sundays per client. Dosing Capacity should be between 116gallons and 232gallons. *

- An approved Flow EQ panel can only be used to properly distribute daily dose.
- No kitchen or food to be prepared on site

INITIAL SITE SKETCH



AS BUILT SKETCH



* Pressure Manifold to be used as distribution
* Maintain 5' off structure w/ 2 tanks
* Low Flow Fixtures to be used. See email from Trish Angli PE.

TAP SIZES

LINE	TAP SIZE
50' (5)	1/2" SCH 80
100' (2)	3/4" SCH 80

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: 1-14-15 Installed by: FJ Ervin

IMPROVEMENT PERMIT by: [signature] Date: 1-14-15 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 1-14-15 Existing System Inspected by: Date:

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