IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 212234

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

PIN # 4645278298

APPLICANT: David & Mary Rachui APPLICANT ADDRESS: 131 Queens Cove Rd Mooresville, NC

SITE ADDRESS: 131 Queens Cove Rd Mooresville NC 28117 PHONE: ALT. PHONE: 704 677-3790

SITE DIRECTIONS: Alcove Rd TR Templeton TL Camino Real TL Queens Cove Rd 1st house on left

SUBDIVISION: Queen's Cove SECTION: 3 LOT # 19 LOT AREA: DESIGN FLOW: 480gpd L.T.A.R.: ~.4

Existing
Septic Tank 1000 (gal) STB Date
Pump Tank (gal) PT Date
Pump Make Model Serial #
Nitrification Fields 1 # Lines 3 Linear Ft: 400+
Existing
Trench Width 36" Max. Trench Bottom Depth Gravel Depth 12"

☐ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI
System Description: Existing Gravity Conventional
Repair System Description: Modified Conventional
Maintenance Agreement Required: ☐ YES ☐ NO
☐ GRAVITY ☐ PRESSURE

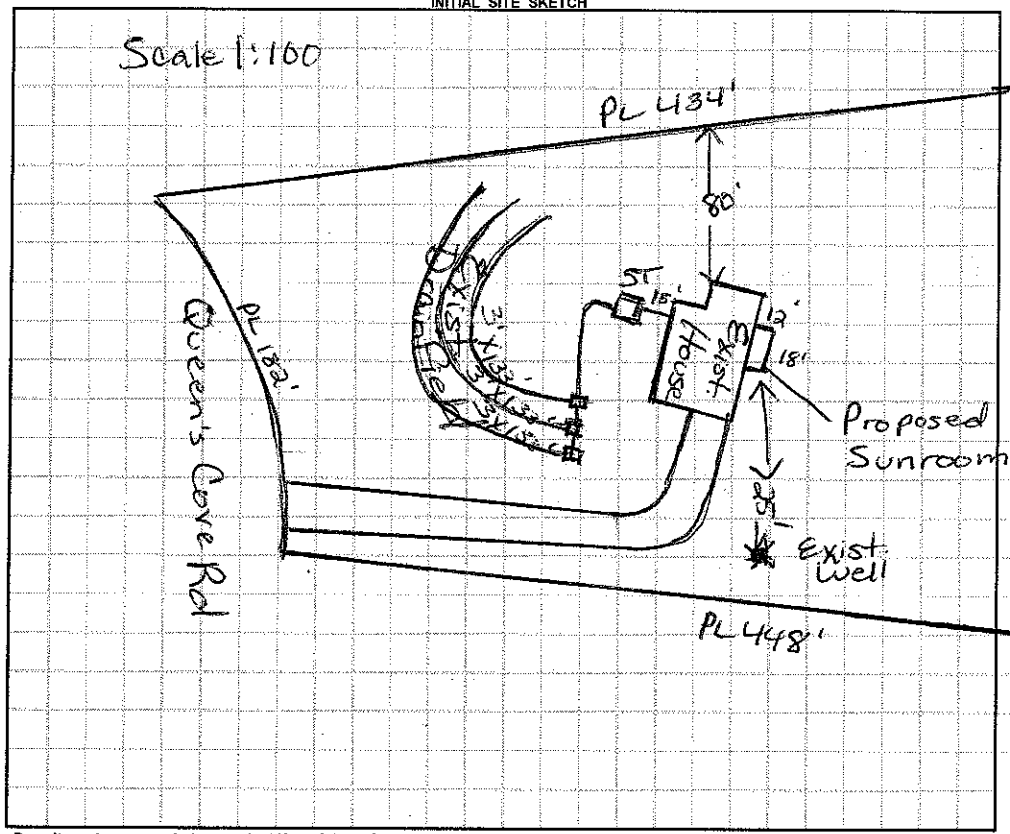
☒ Residence No. Bedrooms 4
☐ Business No. Persons 8
☐ Other No. Employees
☐ Slab ☒ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply
☒ Private
☐ Public
☐ Community

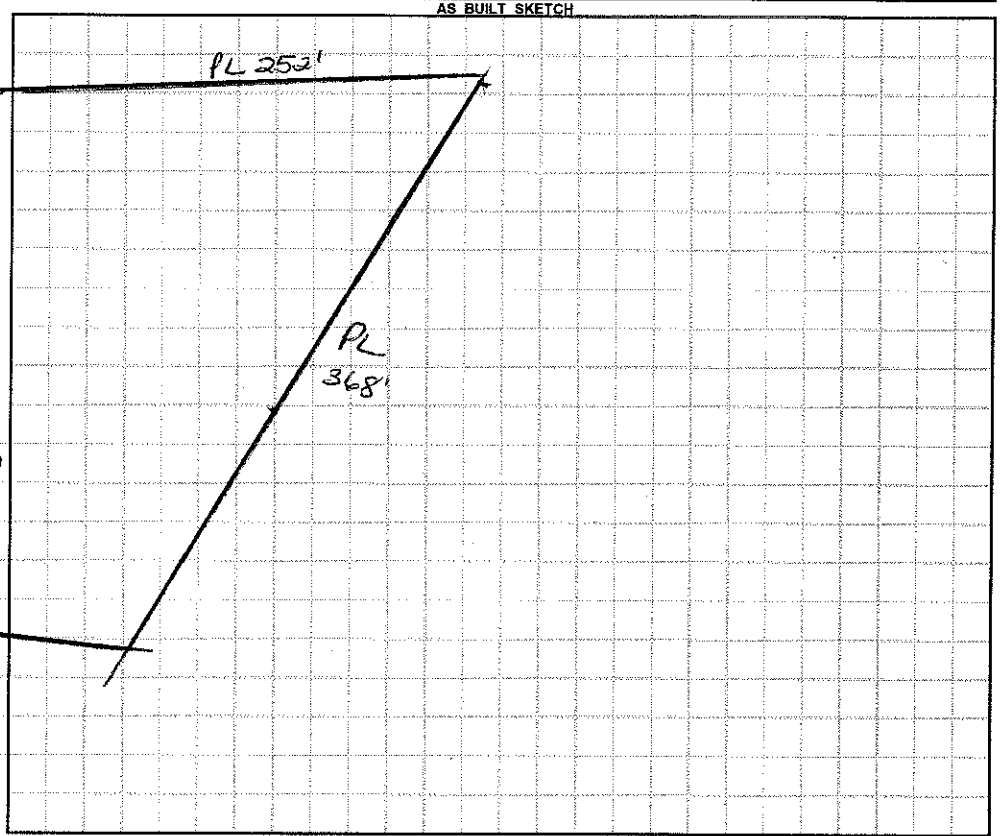
Comments / Conditions:

The proposed addition does not appear to impact the existing Septic System. It meets setbacks to well & septic.

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: Mary L Rachui Date: 9/2/15 Installed by:

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

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Marie Holt Dotson RS Date: 8/28/15

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