112688

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 225 MRSUL PIN# ~~4645-59-2250~~ 4645-48-9937 DATE Dec. 4, 01

OWNER OR CONTRACTOR Dienst Enterprises Inc / St Lawrence Homes PHONE: Business _____ Home _____

ADDRESS 125 Easton Dr. Mooresville NC 28117

LOCATION 215 TL Alcove TR Templeton TR Templeton Bay TL Greenfield Way on Right

SUBDIVISION Templeton Bay BLOCK / SECTION _____ LOT 17 LOT AREA 24,000 ft² SITE CLASS. RS for 1956 DESIGN FLOW 480 gpd L.T.A.R. 1.3 (front yard)

Septic Tank: 1000 Gallons; STB 312 Date 3-8-03
Pump Tank: 1000 Gallons; PT 283 Date 8-11-03
Pump Make: Myers Model ME50 Serial No. _____
Nitrification Field: No Fields 1 Square Feet 540/810 Linear Feet 270
No Lines 3 @ 90' Trench Width 24" min 8'oc Max Trench Bottom Depth 36" Gravel Depth NA

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: LP PPBPS
Repair System Description: Same
Maintenance Agreement Required: ☑ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 4
☐ Business No. Employees _____
☐ Other _____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

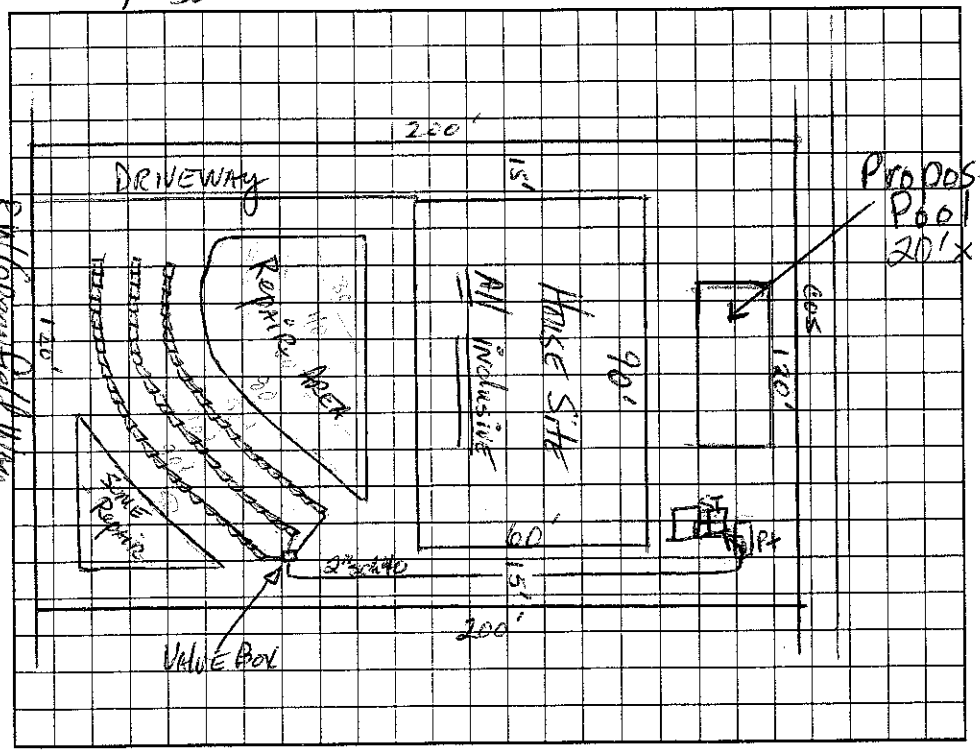
Water Supply: ☐ Individual ☑ Public ☑ Community

Comments:/Conditions: OR 36" MAX 9'oc
Do not cut house site. Backfill only against foundation to provide positive drainage

Comments:/Conditions: Reviewed site plans building plans 4/23/03; essentially in compliance with original permit. MD
Checked tanks & 1 line 9/18/03 Checked other 2 lines

1"=50'

INITIAL SITE SKETCH



AS BUILT SKETCH

The location of the proposed Pool addition does not appear to impact the existing septic system.
**NOTE: Shall be min 15' from Tanks
Andy Melville REHS
Date: 8-22-12
ICHD-Environmental Health Division

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: Robert B. Dienst date 1/16/02
Improvement Permit by: [signature] RS date 12-4-01
Authorization to Construct by: [signature] RS date 4/23/03
Installed by: R & H Inc RS
Operation Permit by: [signature] date 9/24/03
Existing System Inspection by: _____ date _____

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