IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 174378

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

PIN # 4646-12-6568

APPLICANT: GRANDA BUILDERS INC. APPLICANT ADDRESS: PO BOX 1221 CORNELIUS 28031

SITE ADDRESS: MALIBU RD PHONE: 704-363-9197 ALT. PHONE:

SITE DIRECTIONS: ALCOVE, TR CATALINA, MALIBU, C END ON R

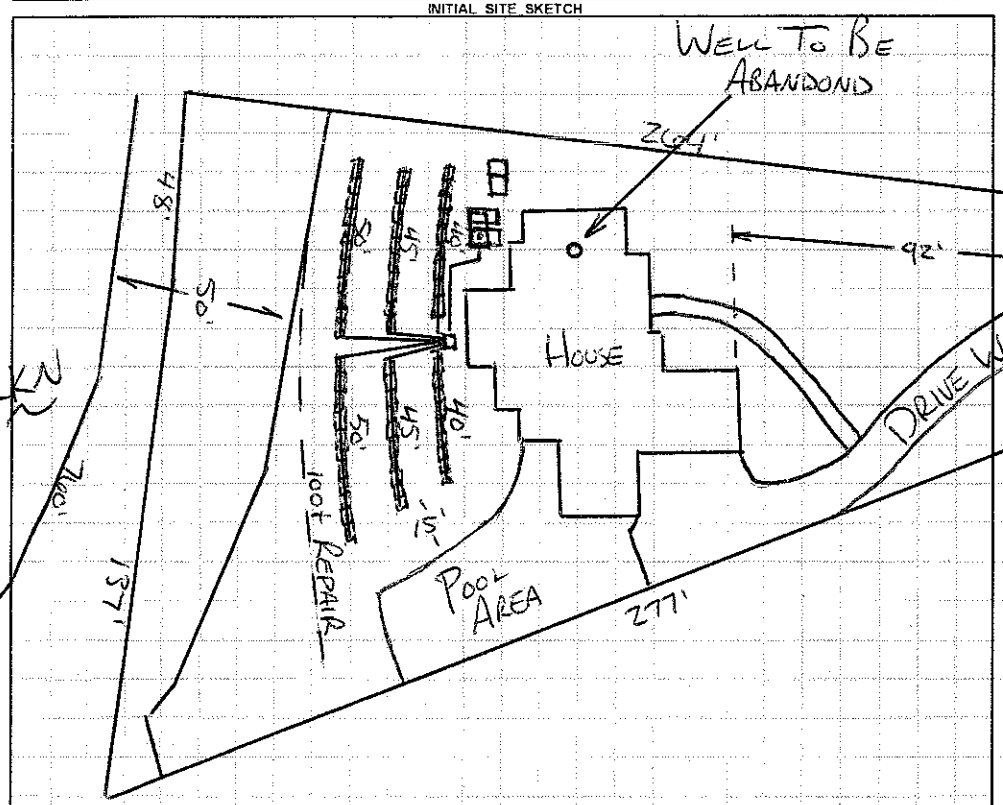
SUBDIVISION: BACK FORTY SECTION: LOT # 20 LOT AREA: .627AC DESIGN FLOW: 480 L.T.A.R.: .3

Septic Tank	1000	(gal)	STB	794	Date	11-14-13	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms	4	Water Supply
Pump Tank	1000	(gal)	PT	27	Date	10-18-13	System Description:	LP - PANEL BLACK			☐ Business	No. Persons		☒ Private
Pump Make	GOULDS	Model	WE0512		Serial #		Repair System Description:	NOT REQUIRED			☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	6		Linear Ft:	270'	Maintenance Agreement Required:	☒ YES	☐ NO		☐ Slab	☐ Crawl Space		☐ Community
Trench Width	24"	Max. Trench Bottom Depth	36"		Gravel Depth	—		☐ GRAVITY	☒ PRESSURE		☒ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions:

3/11/14 Set 2ft pressure
3/16" hole drilled
Checked float & alarm

INITIAL SITE SKETCH



AS BUILT SKETCH

WELL MUST BE ABANDOND BEFORE AC WILL BE ISSUED

WELL ABANDOND 4-24-13

CHECKED TANKS & LINES 12-20-13

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: Date: Installed by: R & H

IMPROVEMENT PERMIT by: Date: 4-15-13 OPERATION PERMIT by: APPROVED MAR 19 2014 Date:

AUTHORIZATION TO CONSTRUCT by: Date: 4-25-13 Existing System Inspected by: Date:

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