IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 224063

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

PIN # 4646-22-1463

APPLICANT: Phillip M. Kidd APPLICANT ADDRESS: 442 Sundown Road Mooresville, NC

SITE ADDRESS: 160 Malibu Rd. Mooresville, NC 28117 PHONE: 704-634-9885 ALT. PHONE:

SITE DIRECTIONS: Williamson Rd South → R on N Cardigan Way → R on Catalina Dr → R on Malibu Rd → Lot on Right

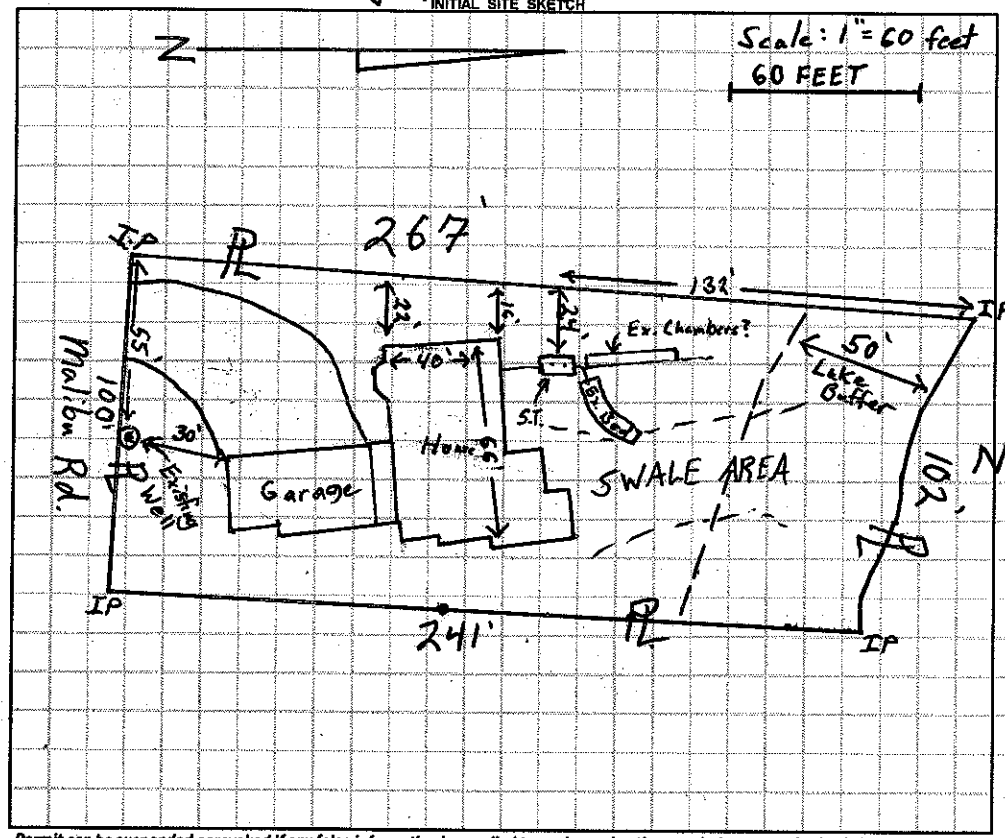
SUBDIVISION: The Back Forty SECTION: LOT # 15 LOT AREA: 0.57 acres DESIGN FLOW: 240 GPD L.T.A.R.:

Septic Tank Ex (gal)	STB Ex	Date Ex	☐ New System ☐ Repair ☐ Expansion	System Type: I (II) III IV V VI	☒ Residence No. Bedrooms 2
Pump Tank — (gal)	PT —	Date —	System Description: Existing System		☐ Business No. Persons 4
Pump Make —	Model —	Serial # —	Repair System Description:		☐ Other No. Employees
# Nitrification Fields 1	# Lines Ex	Linear Ft: Ex	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab ☐ Crawl Space
Trench Width Ex	Max. Trench Bottom Depth Ex	Gravel Depth Ex	☒ GRAVITY	☐ PRESSURE	☒ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private Ex. ☐ Public ☐ Community

Comments / Conditions: Strongly recommend pumping septic tank every 3 years and conservative water use. System is of unknown age and likewise is not assured to function for any specified period of time.

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: Phillip M Kidd Date: 2-15-17 Installed by:

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

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Tom Shuck Date: 2-13-17

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