IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 215143

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

PIN # 4646-28-1654

APPLICANT: ROBERT NANCE APPLICANT ADDRESS: 142 SUNDOWN COVE DR MOORESVILLE

SITE ADDRESS: SAME PHONE: 704-658-7397 ALT. PHONE:

SITE DIRECTIONS: WILLIAMSON, TR SUNDOWN, TR SUNDOWN COVE, ON R

SUBDIVISION: ESTATES OF SUNDOWN COVE SECTION: 2 LOT # 72 LOT AREA: .57 AC DESIGN FLOW: 480 L.T.A.R.: .3

Septic Tank ____ (gal) STB ____ Date ____
Pump Tank ____ (gal) PT ____ Date ____
Pump Make ____ Model ____ Serial # ____
Nitrification Fields ____ # Lines ____ Linear Ft: ____
Trench Width ____ Max. Trench Bottom Depth ____ Gravel Depth ____

☐ New System ☐ Repair ☐ Expansion System Type: I II III ☒IV V VI
System Description: LP PANEL BLOCK
Repair System Description: SAME
Maintenance Agreement Required: ☒ YES ☐ NO
☐ GRAVITY ☒ PRESSURE

☐ Residence ☒ Other ☐ Slab ☐ Basement w/plumbing
No. Bedrooms 4 No. Persons ____ No. Employees ____ ☒ Crawl Space
Water Supply: ☐ Private ☐ Public ☒ Community ☐ Basement w/o plumbing

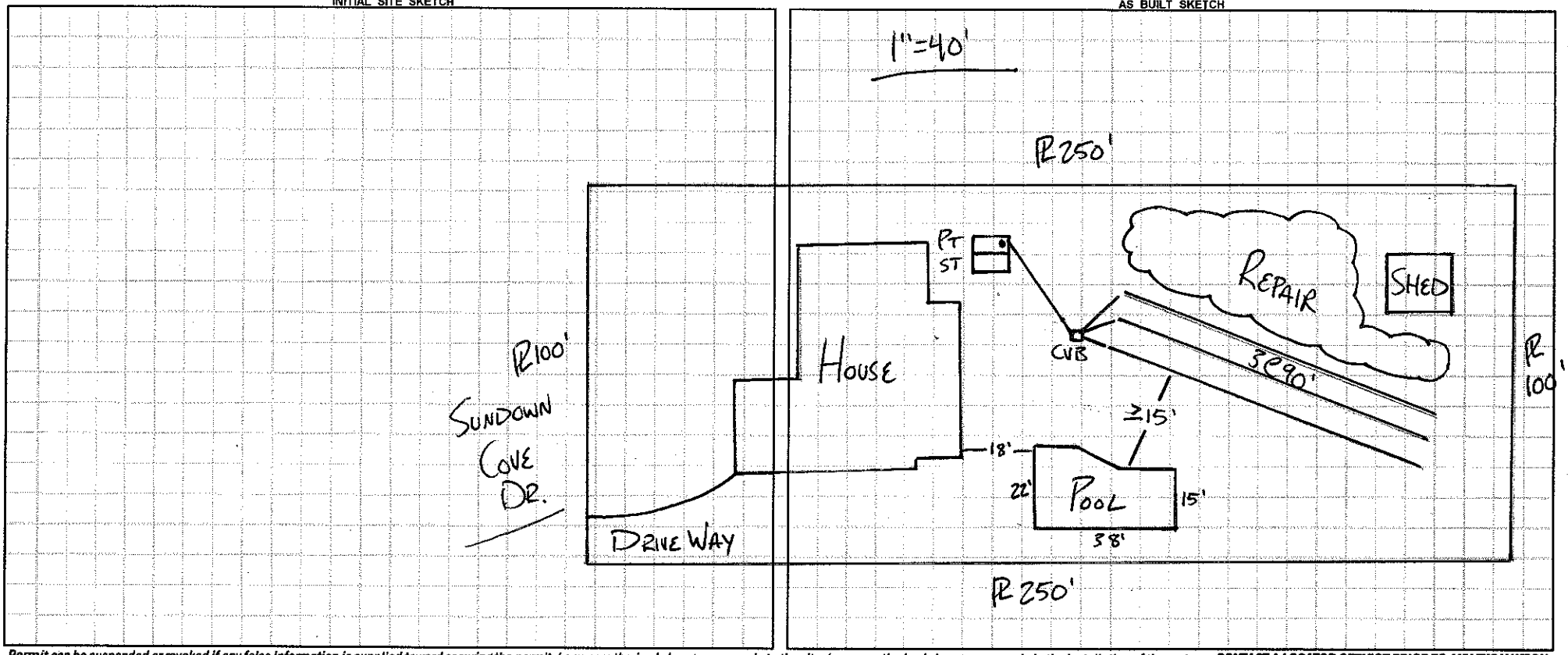
EXISTING

Comments / Conditions:

POOL

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: _____ Date: 3-3-16 Installed by: _____

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

AUTHORIZATION TO CONSTRUCT by: _____ Date: _____ Existing System Inspected by: _____ Date: 3-2-16

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