IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 220823

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

PIN # 4646 28 9378

APPLICANT: Betsy & Phillip Shrigley | APPLICANT ADDRESS: 147 Corona Circle Mooresville, NC 28117

SITE ADDRESS: 147 Corona Circle Mooresville, NC 28117 | PHONE: 847 385-8995 | ALT. PHONE:

SITE DIRECTIONS: Williamson Rd TR Sundown Rd TR Sundown Cove on left

SUBDIVISION: Estates @ Sundown Cove | SECTION: -/- | LOT # 1 | LOT AREA: | DESIGN FLOW: 480 gpd | L.T.A.R.: .25

Existing

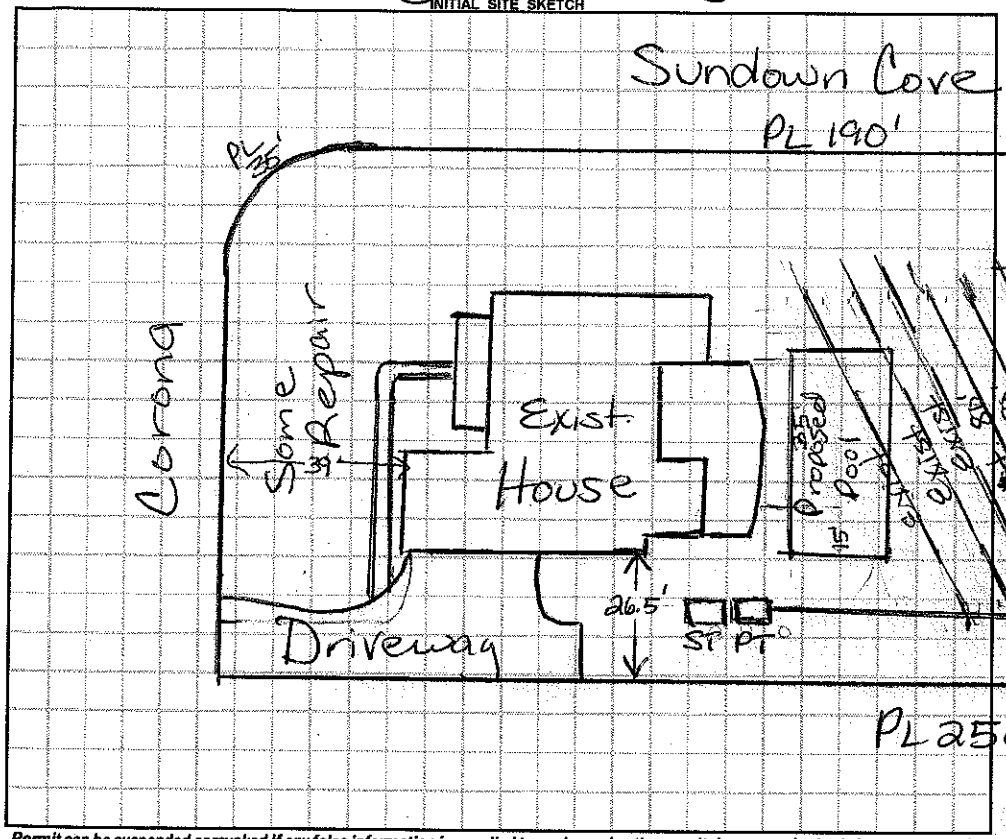
Septic Tank	1000 (gal)	STB		Date		[X] New System	[ ] Repair	[ ] Expansion	System Type: I II III (IV) V VI
Pump Tank	1000 (gal)	PT		Date		System Description:	LP Panel Block		
Pump Make		Model #		Serial #		Repair System Description:	Same		
# Nitrification Fields	1	# Lines	Add 3	Linear Ft:	240'	Maintenance Agreement Required:	[X] YES	[ ] NO	
Trench Width	24"	Max. Trench Bottom Depth	36"	Gravel Depth	N/A		[ ] GRAVITY	[X] PRESSURE	

[X] Residence | No. Bedrooms 4
[ ] Business | No. Persons 8
[ ] Other | No. Employees
[ ] Slab | [X] Crawl Space
[ ] Basement w/ plumbing | [ ] Basement w/o plumbing

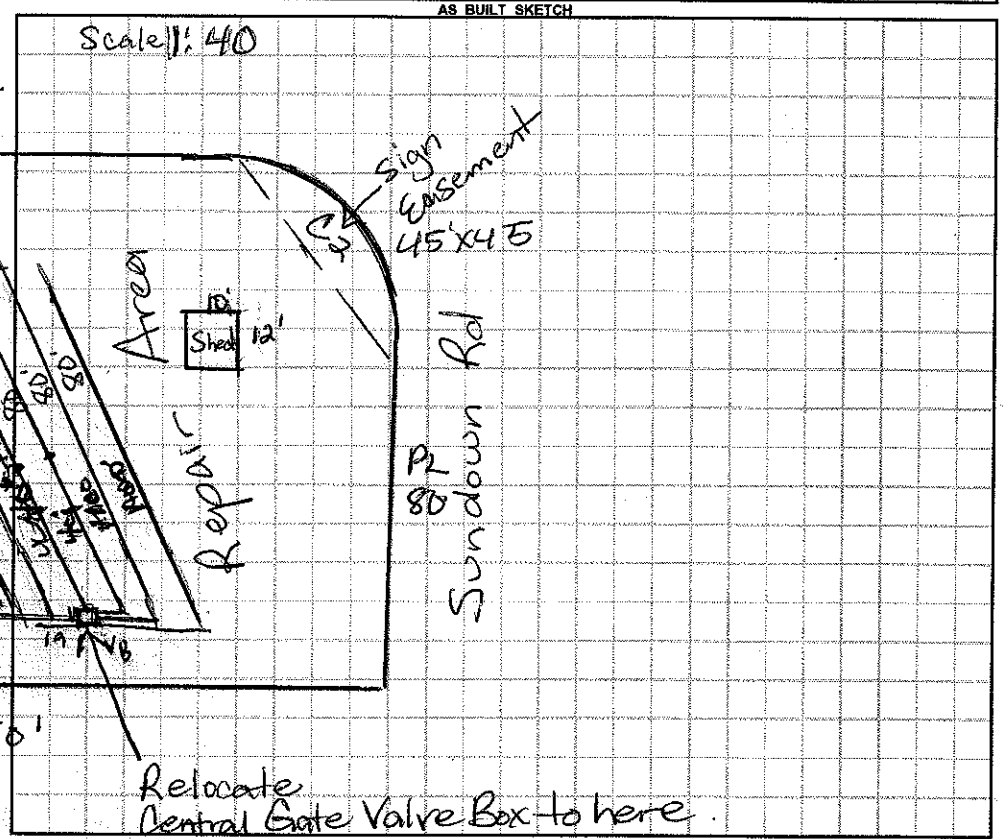
Water Supply: [ ] Private [ ] Public [X] Community

Comments / Conditions: Abandon upper 3 drainlines (any part within 15ft of pool) Install 3 new lines at 80ft ea. May have to upgrade pump also.

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: Betsy A Shrigley Date: 9/27/16 Installed by:

IMPROVEMENT PERMIT by: Maria Dolan RS Date: 9/21/16 OPERATION PERMIT by: W Sparks Date: 10/25/16

AUTHORIZATION TO CONSTRUCT by: Maria Dolan RS Date: 9/21/16 Existing System Inspected by: Date:

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