4646521452

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 43942 PIN# 4646520298 DATE 7/10/07

OWNER OR APPLICANT Frances Hager PHONE: Business _____ Home 704-664-0256

ADDRESS 110 Knox Haven Ct Mooresville 28117

LOCATION Hwy 21 S, (L) on Alcove, Quick right on Catalina, drive on right, House number 152 - 1st before Catalina Ridge

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA ~1 Acre SITE CLASS. P.S DESIGN FLOW 360 L.T.A.R. .50

Septic Tank: 1000 Gallons; STB 786 Date 5/15/07
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 308'
No Lines 3@100 Trench Width 36 inch Max Trench Bottom Depth 36 inch Gravel Depth N/A ☒ Gravity ☐ Pressure

☒ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI
System Description: 25% Reduction
Repair System Description: SAME
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Persons ____
☐ Business No. Employees ____
☐ Other _____

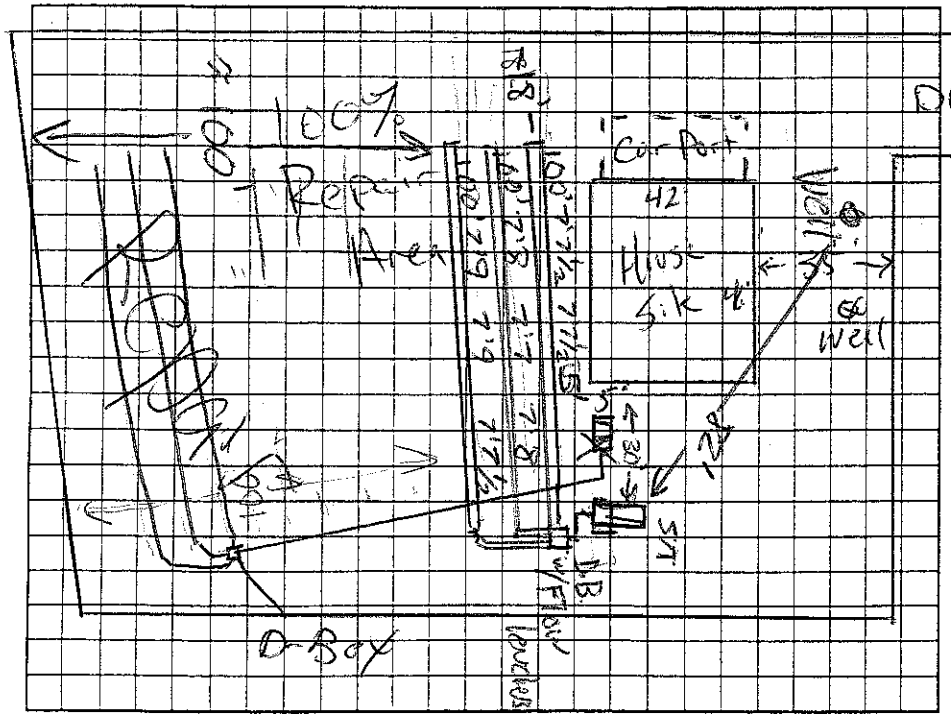
Water Supply: ☒ Individual ☐ Public ☐ Community

☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions: Well to be 50' plus from septic tank & lines

Comments:/Conditions:

INITIAL SITE SKETCH



AS BUILT SKETCH

ER Flow 1203 4 Installed
Repair + Initial switched from original permit.
9/7/07

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: Frances Blanche Hager date 7/10/07 Installed by: Hopst Septic

Improvement Permit by: Joh E Culp date 07-10-07 Operation Permit by: Anthony Cohen Jr date 9/7/07

Authorization to Construct by: Joh E Culp date 7-10-07 Existing System Inspection by: _____ date _____

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