IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 209964

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

PIN # 4646-86-8092.000

APPLICANT: Troy Smith APPLICANT ADDRESS: 174 Regal Circle Mooresville NC

SITE ADDRESS: 174 Regal Circle Mooresville NC PHONE: 704-929-6729 ALT. PHONE:

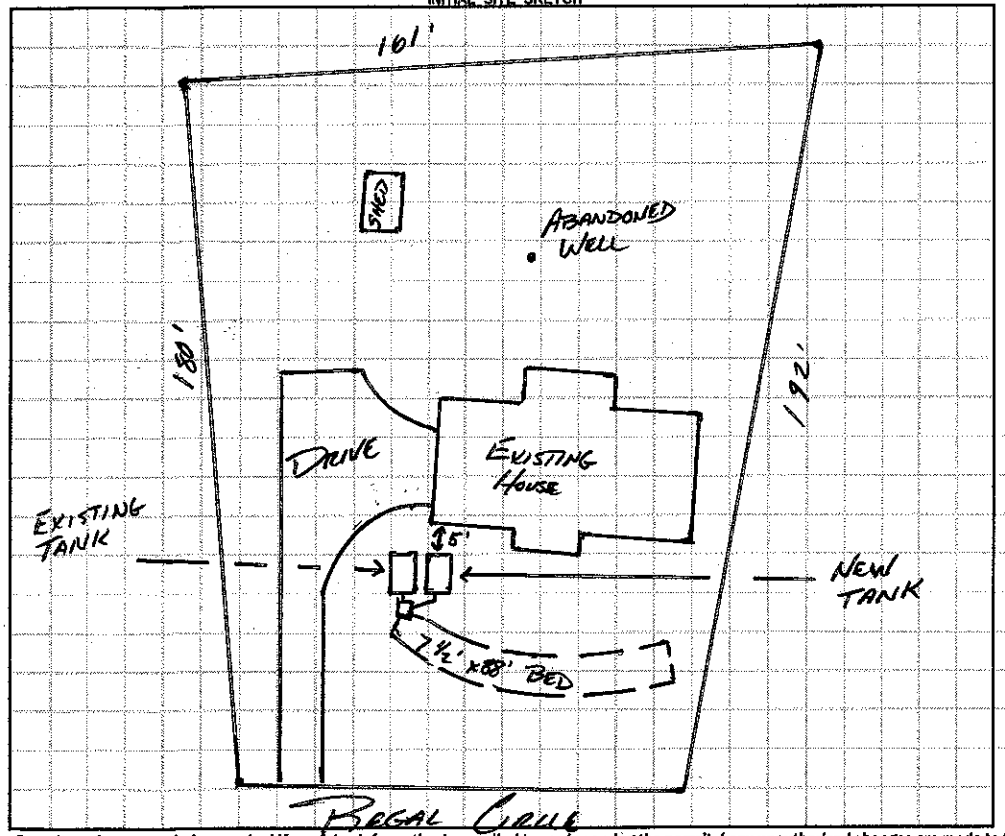
SITE DIRECTIONS: Hwy 21 to Waterlynn to Regal Cir.

SUBDIVISION: Regal Oaks SECTION: LOT # 9 LOT AREA: DESIGN FLOW: Existing L.T.A.R.: Existing

Septic Tank 1000 (gal)	STB 760	Date 10/20/15	☐ New System ☒ Repair ☐ Expansion	System Type: I (II) III IV V VI	☒ Residence	No. Bedrooms Ex. 2	Water Supply
Pump Tank (gal)	PT	Date	System Description: Conventional (Existing)		☐ Business	No. Persons Ex	☐ Private
Pump Make	Model	Serial #	Repair System Description: Existing		☐ Other	No. Employees	☐ Public
# Nitrification Fields Ex.	# Lines Ex	Linear Ft: Ex	Maintenance Agreement Required: ☐ YES ☒ NO		☐ Slab	☒ Crawl Space	☒ Community
Trench Width Ex	Max. Trench Bottom Depth Ex.	Gravel Depth Ex.	☒ GRAVITY ☐ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing	

Comments / Conditions: Existing Tank Has Caved In. Drainfield Appears To Be Functioning. Crush And Fill Existing Tank And Set New Tank At Least 5' From House. Hook Back Into Existing Bed.

INITIAL SITE SKETCH



AS BUILT SKETCH

1" = 50

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: Troy L Smith Date: 4-30-15 Installed by: Lantz Septic

IMPROVEMENT PERMIT by: APPROVED APR 30 2015 Date:

AUTHORIZATION TO CONSTRUCT by: APPROVED APR 30 2015 Date:

OPERATION PERMIT by: Date: 5/11/15

Existing System Inspected by: Date:

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