IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 2100 177113

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

PIN # 4648 56 2637

APPLICANT: Magnolia Lakes Partners APPLICANT ADDRESS: P.O.Box 3965, Mooresville, NC, 28117

SITE ADDRESS: 164 Twin Sisters Ln, Mooresville PHONE: ALT. PHONE: Michael 704 43

SITE DIRECTIONS: From Mooresville, US Hwy 21 North. Turn left on Cornelius Rd. Turn left on Pinto Lane on Right near end

SUBDIVISION: Sisters Cove SECTION: 3 LOT # 63 LOT AREA: ~1/2 Ac DESIGN FLOW: 360gpd L.T.A.R.: .025

Septic Tank	1000 (gal)	STB	794	Date	5-25-16	☑ New System	☐ Repair	☐ Expansion	System Type: I II III (IV) V VI	☑ Residence	No. Bedrooms 3
Pump Tank	1000 (gal)	PT	27	Date	5-26-16	System Description:		LP PPBPS		☐ Business	No. Persons
Pump Make	Myers	Model	ME45	Serial #		Repair System Description:		LP PPBPS		☐ Other	No. Employees
# Nitrification Fields	1	# Lines	4	Linear Ft:	240	Maintenance Agreement Required:	☑ YES	☐ NO		☐ Slab	☒ Crawl Space
Trench Width	24"	B'oc	Max. Trench Bottom Depth	36"		Gravel Depth	NA	☐ GRAVITY	☑ PRESSURE	☐ Basement w/plumbing	☐ Basement w/o plumbing

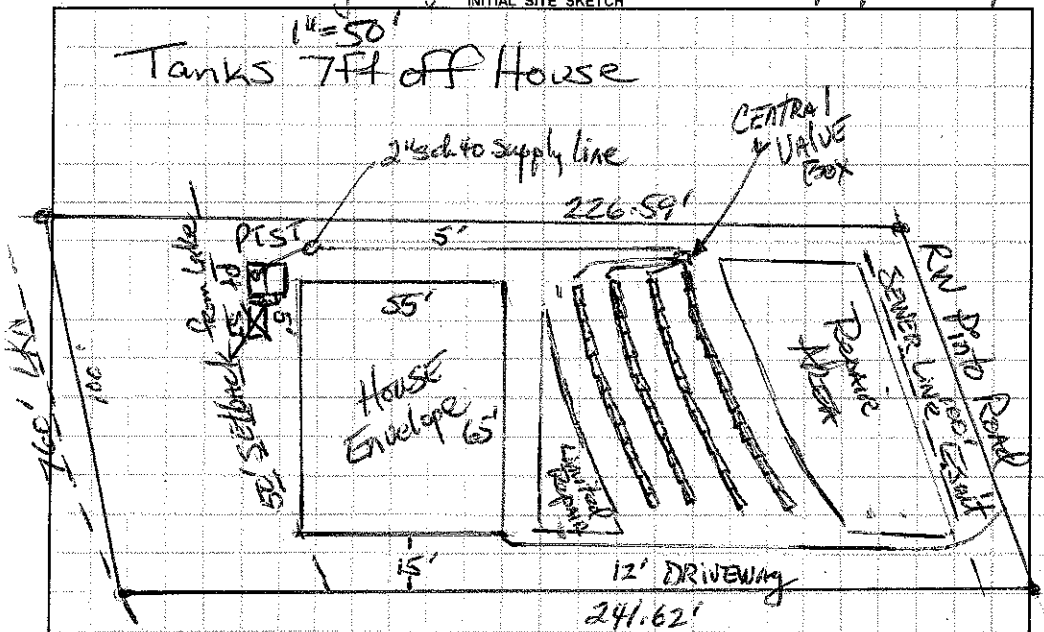
Water Supply: ☐ Private ☐ Public ☒ Community

Comments / Conditions: Permit may be suspended or Revoked if buried materials from prior usage are encountered which compromise Initial & Repair Area of Septic System. Community Water Line to Run within 50' Lake Setback According to Engineer. Use one 5/32" hole per panel, 55 panels total

11/6/16 Per floor plans # of bedrooms in Compliance with LP Per Survey by DAS dated 12/15/15 house test print will fit. MD

INITIAL SITE SKETCH

1" = 50'



AS BUILT SKETCH

Note: Could not install tanks exactly as shown due to setback to creek.

Twin Sisters Ln - Control

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: 9/16/13 Installed by: R&H

IMPROVEMENT PERMIT by: Date: 8-9-13 OPERATION PERMIT by: W Sparks Date: 9/13/16

AUTHORIZATION TO CONSTRUCT by: Date: 11/6/16 Existing System Inspected by: Date:

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