IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 177120

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

PIN # 4648 57 5699

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

SITE ADDRESS: ~~114 Pinto Road~~, Mooresville 114 Twin Sisters LN PHONE: ALT. PHONE:

SITE DIRECTIONS: From Mooresville, US 21 North, TL Cornelius Rd, TL Pinto Road on Right

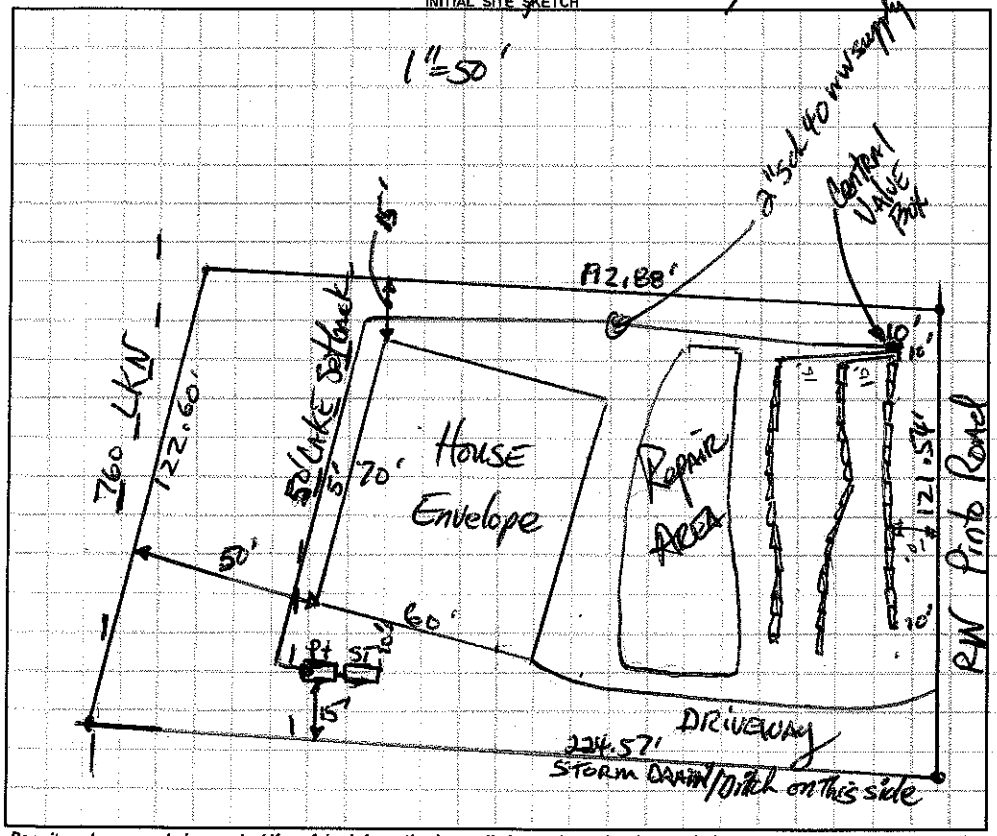
SUBDIVISION: Sister's Cove SECTION: 3 LOT # 53 LOT AREA: .579ac DESIGN FLOW: 360 gpd L.T.A.R.: .03

Septic Tank	1000 (gal)	STB	794	Date	8-8-16	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms 3	Water Supply
Pump Tank	1000 (gal)	PT	283	Date	9-13-16	System Description: LPPBBS				☐ Business	No. Persons	☐ Private
Pump Make	Liberty	Model	12 HP	Serial #		Repair System Description: LPPBBS				☐ Other	No. Employees	☐ Public
# Nitrification Fields	1	# Lines	3	Linear Ft:	200	Maintenance Agreement Required:	☒ YES	☐ NO		☐ Slab	☒ Crawl Space	☒ Community
Trench Width	24", 8' o.c.	Max. Trench Bottom Depth	36"	Gravel Depth	N/A		☐ GRAVITY	☒ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing	

Comments / Conditions: Improvement Permit may be suspended or Revoked if buried materials are encountered which compromise the initial or Repair Area designated for septic system use. Community Water Line to be Installed within the 50' Lake setback according to the site engineer. Water & Sewer lines to be installed in accordance with 15A NCAC 18A .1950

ONE 5/32" hole per panel; 46 panels total

INITIAL SITE SKETCH



AS BUILT SKETCH

* A/C Reversed; House Slightly Longer than original Layout & Slightly Different orientation. Should Be OK. Maintain Proper Setbacks. SE

12/29/16 Set 2ft pressure, elect. alarm & Maint.

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: [signature] Date: 8/16/13 Installed by: R+H

IMPROVEMENT PERMIT by: [signature], REHS Date: 8-12-13 OPERATION PERMIT by: Marion Dotson Date: 12/29/16

AUTHORIZATION TO CONSTRUCT by: [signature] APPROVED APR 2 2 2016 Existing System Inspected by: Date:

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