IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 211990

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

PIN # 4649-87-0473

APPLICANT: EVELYN SPENCER APPLICANT ADDRESS: 139 CHUCKWOOD RD.

SITE ADDRESS: 105 COLT LN. - TROUTMAN PHONE: 704-230-7301 ALT. PHONE:

SITE DIRECTIONS: RANKIN HILL, TR PALAMINO, TL SORRELL, TL COLT, ON L

SUBDIVISION: PALAMINO PARK SECTION: 2 LOT # 55 LOT AREA: .69 AC DESIGN FLOW: 360 L.T.A.R.:

Septic Tank ____ (gal) STB ____ Date ____
Pump Tank ____ (gal) PT ____ Date ____
Pump Make ____ Model ____ Serial # ____
Nitrification Fields EXISTING # Lines ____ Linear Ft: ____
Trench Width ____ Max. Trench Bottom Depth ____ Gravel Depth ____

☐ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI
System Description: CONVENTIONAL
Repair System Description: 25% REDUCTION
Maintenance Agreement Required: ☐ YES ☒ NO
☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 3
☐ Business No. Persons ____
☐ Other No. Employees ____
☐ Slab ☒ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply
☒ Private
☐ Public
☐ Community

Comments / Conditions: SINGLE WIDE TO BE MOVED WHERE PREVIOUS ONE WAS LOCATED

INITIAL SITE SKETCH

SEE ATTACHED DRAWING BY ICHD

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**

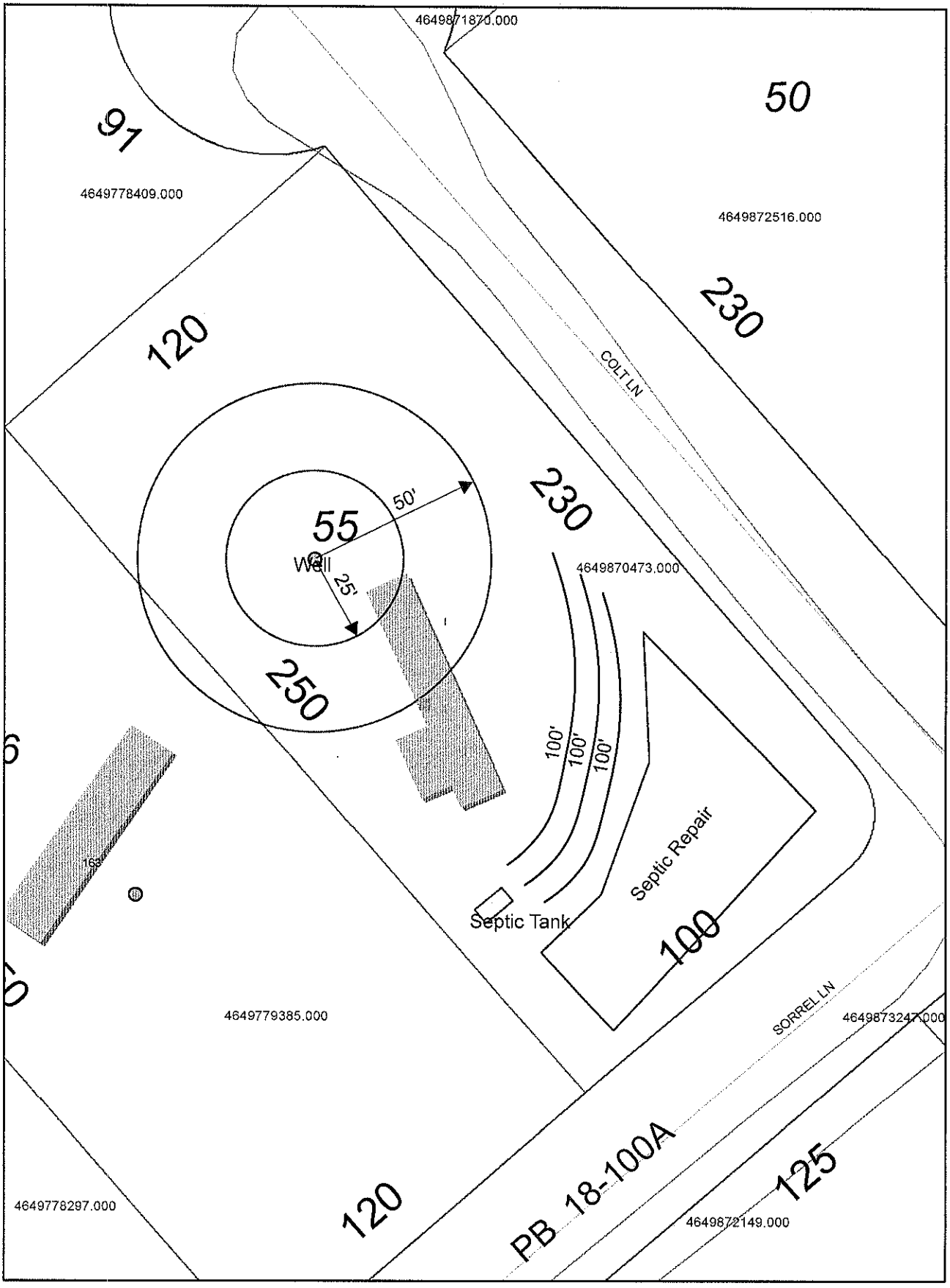
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☐ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: [signature] Date: 3/22/16 Installed by: ____

IMPROVEMENT PERMIT by: ____ Date: ____ OPERATION PERMIT by: ____ Date: ____

AUTHORIZATION TO CONSTRUCT by: ____ Date: ____ Existing System Inspected by: [signature] Date: APPROVED MAR 21 2016

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


4649871870.000
50
91
4649778409.000
4649872516.000
230
120
COLT LN
230
50'
55
Well
25'
4649870473.000
250
100'
100'
100'
Septic Repair
Septic Tank
100
4649779385.000
SORREL LN
4649873247.000
4649778297.000
120
PB 18-100A
125
4649872149.000

Z-8-16 BA

TRAILER Too Close To Septic Field