IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625

9:30

PERMIT # ~~17257~~ 202835

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

PIN # 4654883251

APPLICANT: DAVIDSON DOWNES INC. APPLICANT ADDRESS: 4643 MARINER LN DENVER NC 28037

SITE ADDRESS: 135 BUCKINGHAM PLACE DR. MOORESVILLE. PHONE: ALT. PHONE:

SITE DIRECTIONS: 115 S - TL PRESBYTERIAN - TR BUCKINGHAM - ON LT

SUBDIVISION: DAVIDSON DOWNES SECTION: LOT # 5 LOT AREA: .573 DESIGN FLOW: 480 GPD L.T.A.R.: .25

Septic Tank 1000 (gal) STB 1794 Date 9-2-14
Pump Tank 1000 (gal) PT 27 Date 8-18-14
Pump Make Goulds Model WE0512HH Serial #
Nitrification Fields 1 # Lines 7 Linear Ft. 490
Trench Width 36" Max. Trench Bottom Depth 24" Gravel Depth N/A

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

☐ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing
No. Bedrooms 4 No. Persons 8 No. Employees
☑ Crawl Space
Water Supply: ☑ Private ☐ Public ☐ Community
☐ Basement w/o plumbing

Comments / Conditions: 10/9/14 Checked tanks & lines. Quick 4. Lowest line 25FF from porch.

3/12/14 Reviewed Floor plans, in Compliance with original plan.
10/20/14 Set 2ft Upressure.

INITIAL SITE SKETCH

SEE MICHAEL ATHANAS
& ASSOCIATES PLAN.

AS BUILT SKETCH

FLOATS OK
ALARM OK
10/10/14 SC

10/14/14 TAP SIZES CHANGED TO SCH. 40 1½
- EMAIL FROM MIKE ATHANAS ATTACHED.
SC

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: 6-4-13 Installed by: FJ Ervin

IMPROVEMENT PERMIT by: RS Date: 5/29/13 OPERATION PERMIT by: Marian H. Dotson RS Date: 10/20/14

AUTHORIZATION TO CONSTRUCT by: Marian H. Dotson RS Date: 3/12/14 Existing System Inspected by: Date:

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