IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 Paid 125.00 CT MOORESVILLE 704-664-5281

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

PERMIT# 091476 PIN# 4655052356 4655-05-2164 DATE 9/11/2000

OWNER OR CONTRACTOR Tommy Bradley PHONE: Business _____ Home 892-8545

ADDRESS 126 Mt. Mourne Loop Mooresville, NC 28117

LOCATION Hwy 115 S TR Langtree TL Mt Mourne Loop TL Hancock at end on Rt

SUBDIVISION Green Pastures BLOCK / SECTION N/A LOT 111 LOT AREA .49 Acre SITE CLASS. _____ DESIGN FLOW _____ L.T.A.R. _____

Septic Tank: 1000 Gallons; STB 312 Date 7/9/00
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields _____ Square Feet _____ Linear Feet _____
No Lines _____ Trench Width 18" Max Trench Bottom Depth _____ Gravel Depth _____

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Existing Gravity-Conventional
Repair System Description: _____
Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home No. Bedrooms 3
☒ Mobile Home No. Bathrooms 2
☐ Business No. Employees _____
☐ Other _____

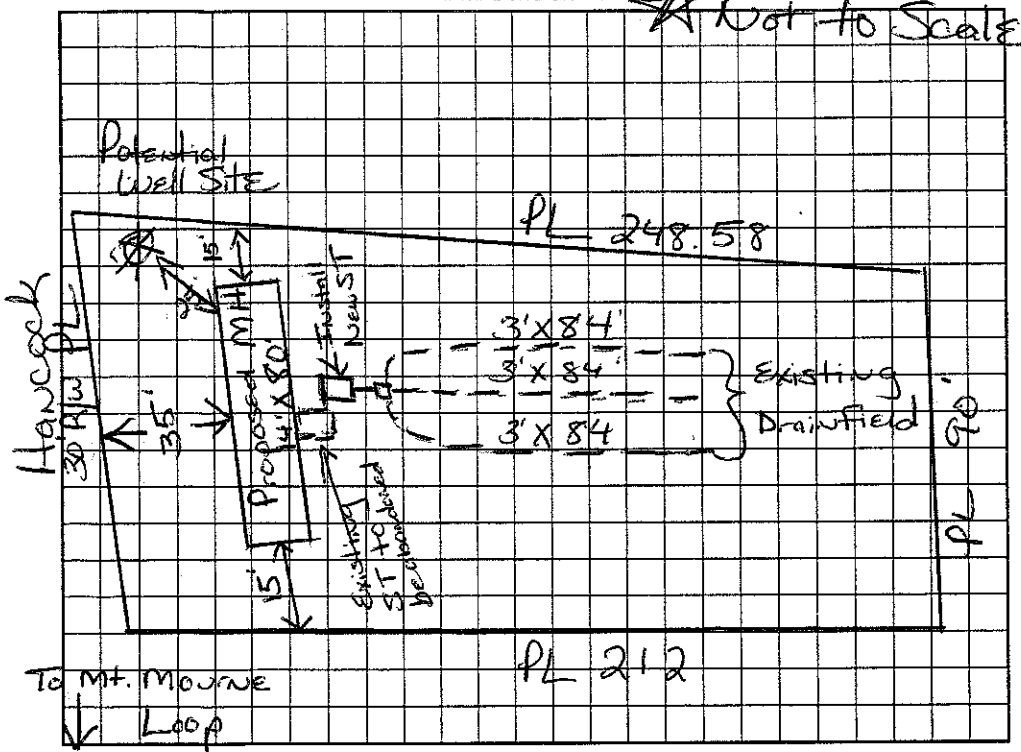
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual To be installed ☐ Public ☐ Community

Comments:/Conditions: Abandon Existing Septic Tank (ST) in accordance with Iredell Co. Inspection Dept rules. Install New ST at least 5' from MH

Comments:/Conditions: Existing drainfield approved for 3 Bedroom home, okay to use existing Drainfield with New ST. (original Septic System installed 6/10/80.

INITIAL SITE SKETCH ☆ Not to Scale



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. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: Tommy L Bradley date 9/12/00 Installed by: Curt Dunning

Improvement Permit by: Marie H Dotson RS date 9/11/00 Operation Permit by: Wesley Sparks R.S. date 10/12/00

Authorization to Construct by: Marie H Dotson RS date 9/11/00 Existing System Inspection by: _____ date _____

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK