IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 ☑ MOORESVILLE 704-664-5281

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

PERMIT # Repair PIN # 4655-07-6012 DATE 9-25-12

OWNER or APPLICANT Jack Donaldson PHONE: Business 704-363-4423 Home:

OWNER or APPLICANT ADDRESS PO Box 111 Mooresville

LOCATION / DIRECTIONS 115 next to Mt. Mourne Post Office

SUBDIVISION BLOCK / SECTION LOT # LOT AREA .89Ac DESIGN FLOW 480 L.T.A.R. .35

Septic Tank 1000 Gallons: STB Date

Pump Tank Gallons: P T Date

Pump Make Model Serial #

Nitrification Field No Fields 1 No Lines 4 Linear Feet 350'

Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth — ☑ GRAVITY ☐ PRESSURE

☑ New System ☑ Repair ☐ Expansion System Type I II III IV V VI

System Description:

Repair System Description: 25% Reduction

Maintenance Agreement Required ☐ YES ☑ NO

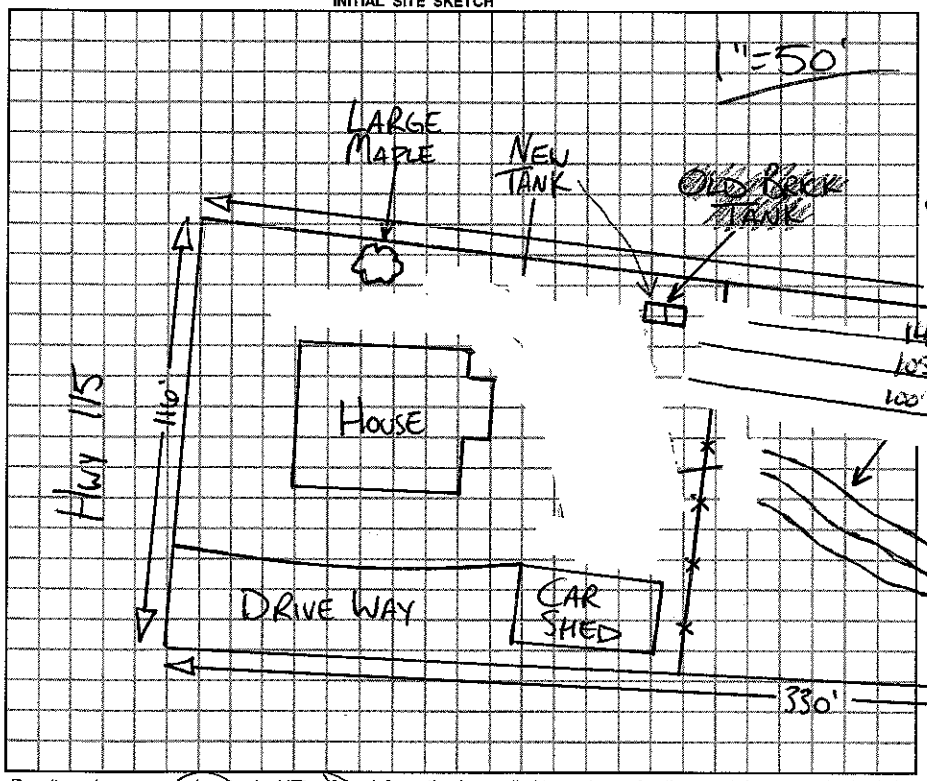
☑ Residence No. Bedrooms 4 ☐ Business No. Persons ☐ Other No. Employees ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☑ Private ☐ Public ☐ Community

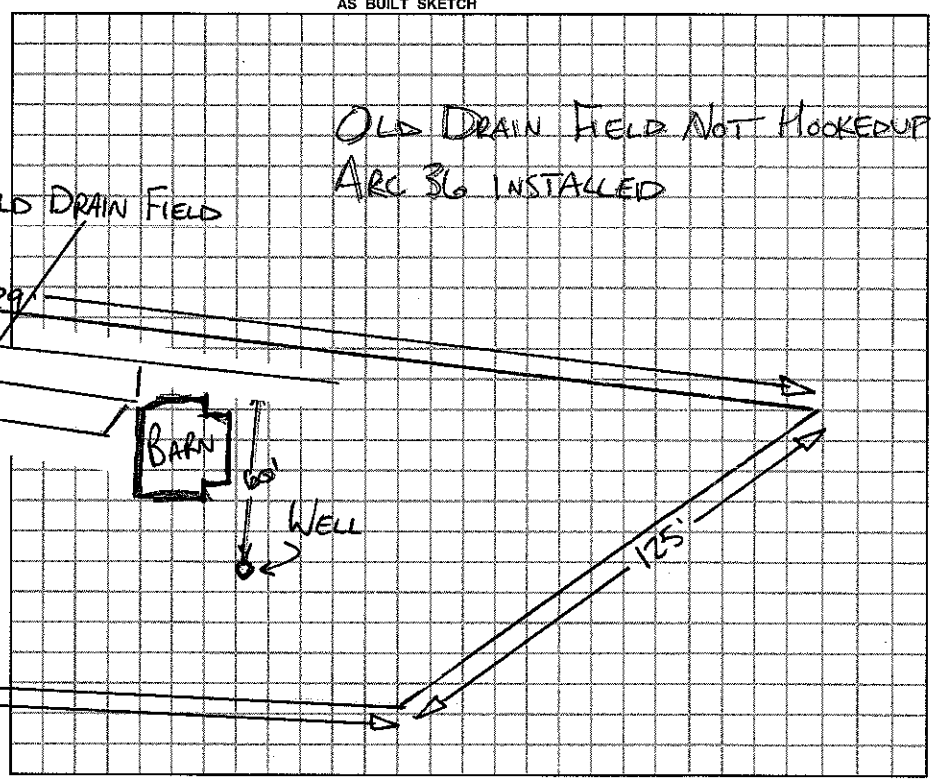
Comments / Conditions ① Recomend Pump, Crush & Fill old Tank
② If possible, feed old system from the end of last 45' line

Comments / Conditions ☆ OK to install 3C114' Crossing perpendicular w/ fence / or start on other side of fence & install 4C 86'

INITIAL SITE SKETCH



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

Owner / Applicant Signature: RA Date 9/26/12

Improvement Permit by: RA REHS Date 9-25-12

Authorzation to Construct by: RA REHS Date 9-25-12

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

Installed by: Richard Abernathy

Operation Permit by: RA Date: 11-5-12

Existing System Inspected by: Date:

WHITE COPY Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant