IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 144135 PIN# 4655599693 DATE 10-01-07

OWNER OR APPLICANT Gary Shelton PHONE: Business 704-799-5112 Home 704-799-5181

ADDRESS 175 Saddle Rd. Mooresville NC 28115

LOCATION 115 S TL Mackwood TR Saddle Rd on left 175 Saddle Rd

SUBDIVISION _____ BLOCK / SECTION _____ LOT 4 LOT AREA .768 Ac. SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. .3gpd/ft²

Septic Tank: Existing* Gallons: STB 794 Date 99
Pump Tank: or 1000 Gallons: PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines 4@75' Trench Width 36" Max Trench Bottom Depth 36"

☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI
System Description: 25% reduction gravity
Repair System Description: 25% reduction gravity
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Persons 6
☐ Business No. Employees _____
☐ Other _____

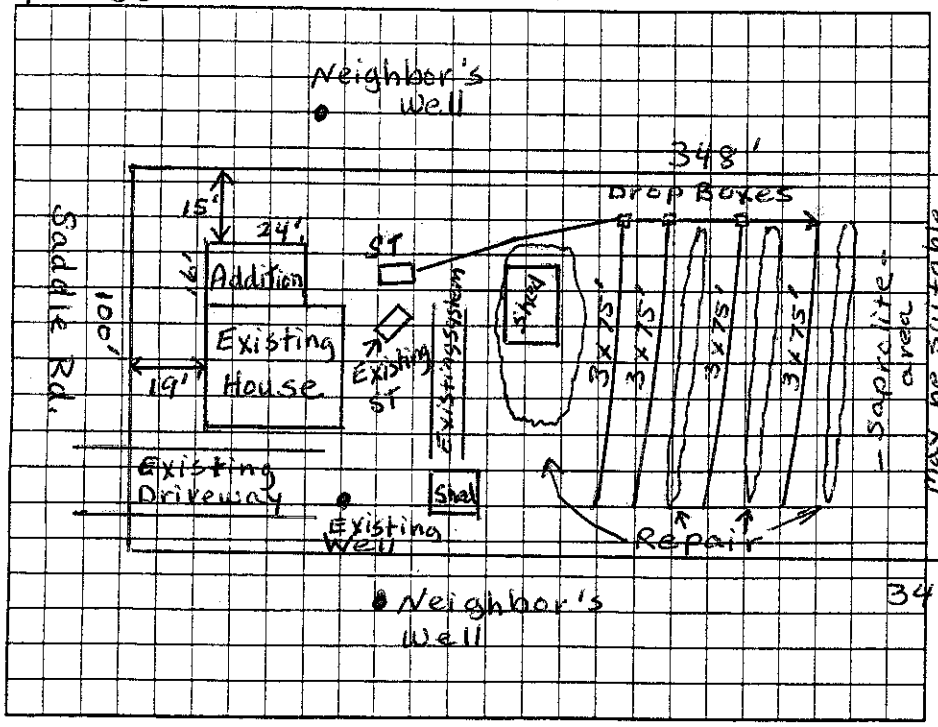
Water Supply: ☒ Individual ☐ Public ☐ Community

Gravel Depth NA ☒ Gravity ☐ Pressure ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

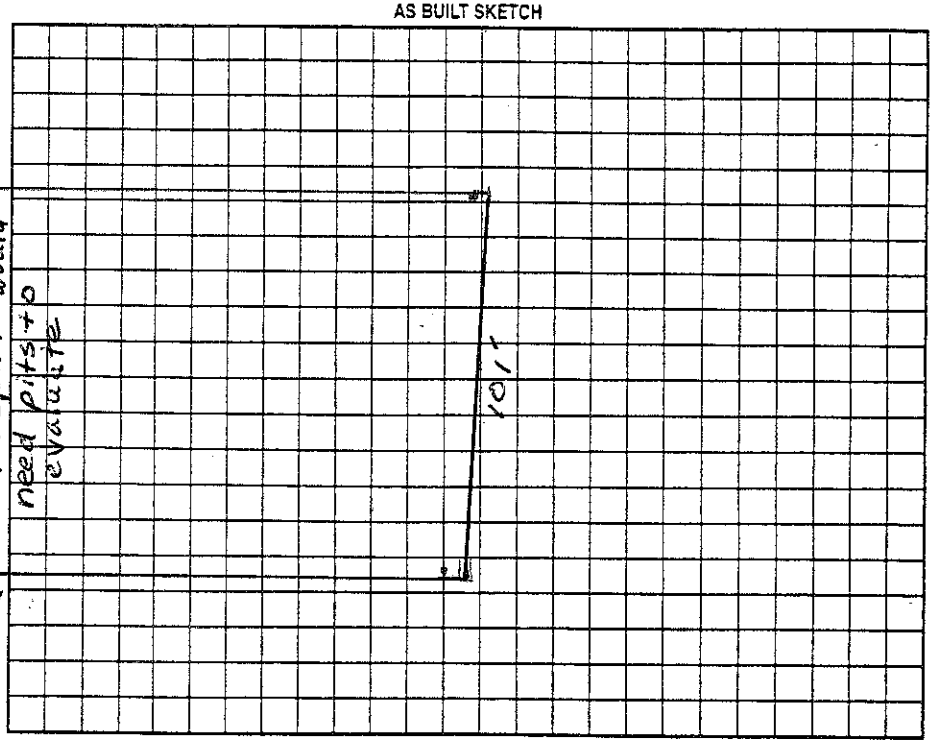
Comments:/Conditions: - Properly abandon existing system drainfield
*Relocate existing or install new septic tank 50'+ from well (fill Existing ST w/soil or stone if not moved)
- System shall be min. 50' from any well
- Per owner's request system lines designed around trees

1" = 50'

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 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: Gary J. Shelton date 10-10-07 Installed by: F J Erwin

Improvement Permit by: Judy Melvill date 10-1-07 Operation Permit by: Wesley Sparks R.S. date 2/24/09

Authorization to Construct by: Judy Melvill date 10-1-07 Existing System Inspection by: _____ date _____

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