IREDELL COUNTY HEALTH DEPARTMENT

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

3:00

PERMIT # 216875

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

PIN # 4656-01-1664

APPLICANT: STANLEY Z. HOUSTON | APPLICANT ADDRESS: 248 REVELL RD.

SITE ADDRESS: 174 CROSSRAIL RD. - MOORESVILLE | PHONE: 540-720-0468 | ALT. PHONE:

SITE DIRECTIONS: 115 S, TR LESLIE LOOP, TR CROSSRAIL, ON R

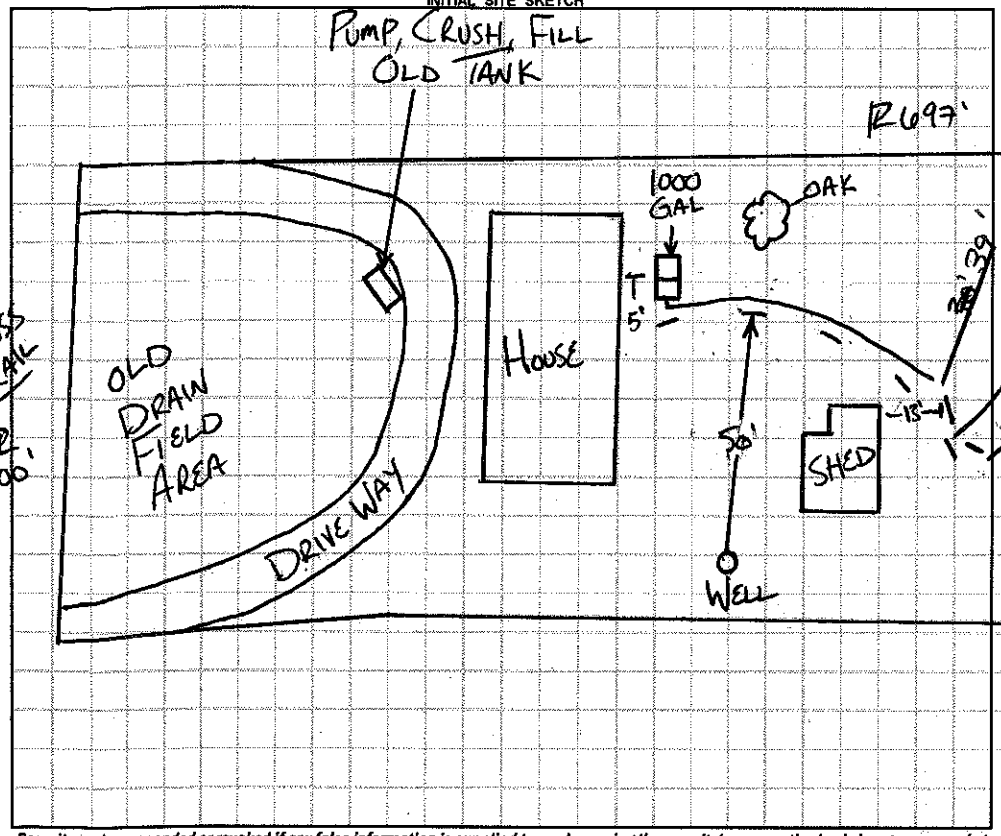
SUBDIVISION: ROYAL OAKS | SECTION: — | LOT # PT 98 | LOT AREA: 1.6AC | DESIGN FLOW: 360 | L.T.A.R.: .35

Septic Tank	1000 (gal)	STB	960	Date		☐ New System	☑ Repair	☐ Expansion	System Type: I II (III) IV V VI	☑ Residence	No. Bedrooms 3
Pump Tank	(gal)	PT		Date		System Description:				☐ Business	No. Persons
Pump Make		Model		Serial #		Repair System Description:	25% REDUCTION			☐ Other	No. Employees
# Nitrification Fields	1	# Lines	5	Linear Ft:	258'	Maintenance Agreement Required:	☐ YES	☑ NO		☐ Slab	☑ Crawl Space
Trench Width	36"	Max. Trench Bottom Depth	36"	Gravel Depth	—		☑ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing

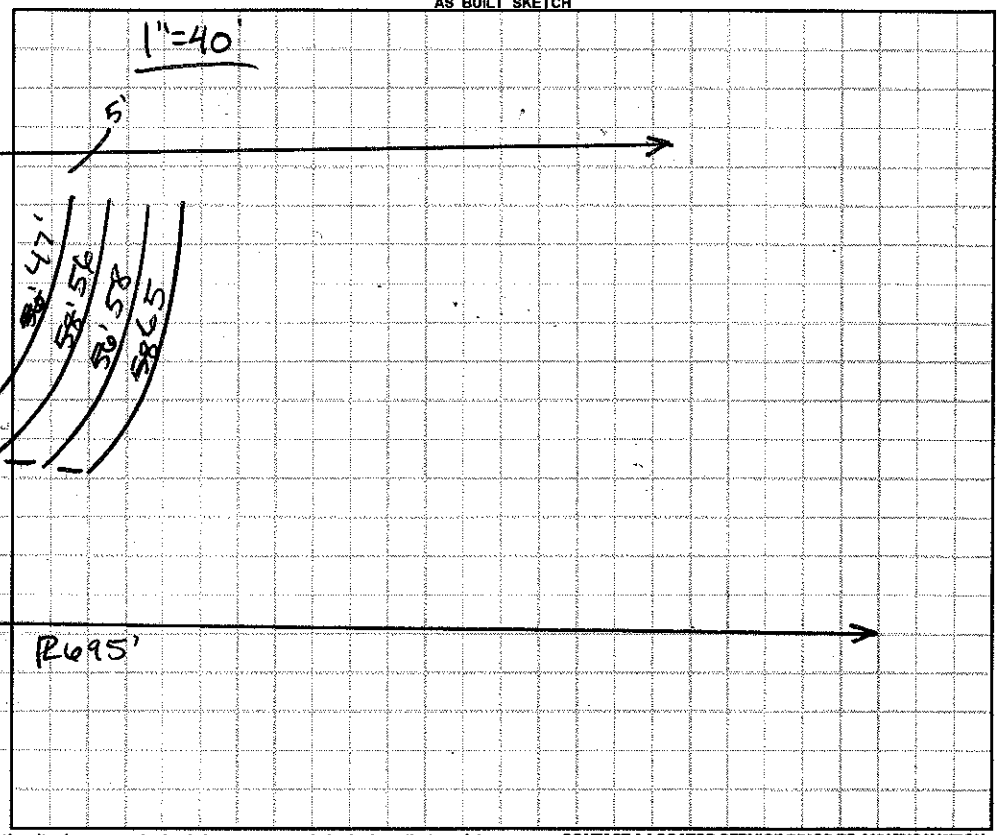
Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions: Used Quick 4, installed Drainfield as shown.

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. **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: Donna L Fortenberry Date: 3/10/2016

IMPROVEMENT PERMIT by: APPROVED MAR 10 2016 Date:

AUTHORIZATION TO CONSTRUCT by: APPROVED MAR 10 2016 Date:

Installed by: Jarrid Lentz Wastewater

OPERATION PERMIT by: Maina Dotson RS Date: 3/11/16

Existing System Inspected by: Date:

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