# IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# (1905)03277 PIN# 4657380955 / 4657299437 DATE 10/11/2001

OWNER OR CONTRACTOR Joshua Brantley PHONE: Business Home 663-2600

ADDRESS 2406 Charlotte Hwy Mooresville, NC 28117

LOCATION Hwy 21 N past over Hwy 150 TL Oates on left

SUBDIVISION BLOCK / SECTION LOT LOT AREA 6.8 Acre SITE CLASS. PS DESIGN FLOW 360gpd T.A.R. .4 Saprolite

Septic Tank: 1000 Gallons; STB 1007 Date 9/20/02

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 900' Linear Feet 300'

No Lines 3@100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: Gravity Conventional

Repair System Description: Modified

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms 4 No. Employees

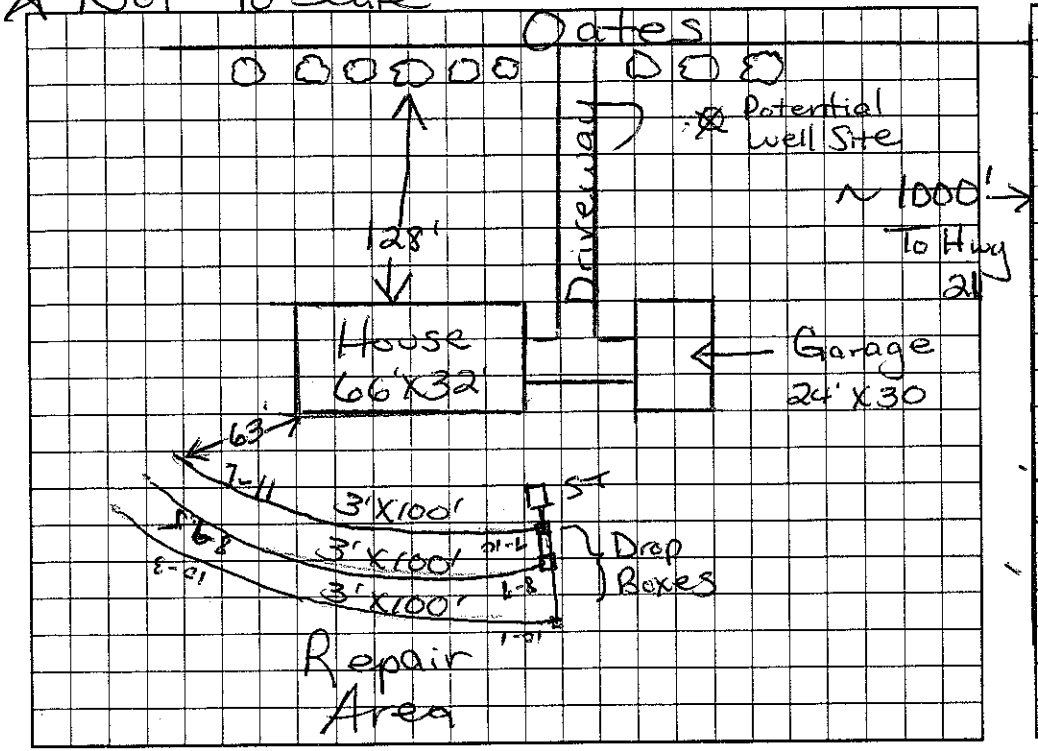
☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

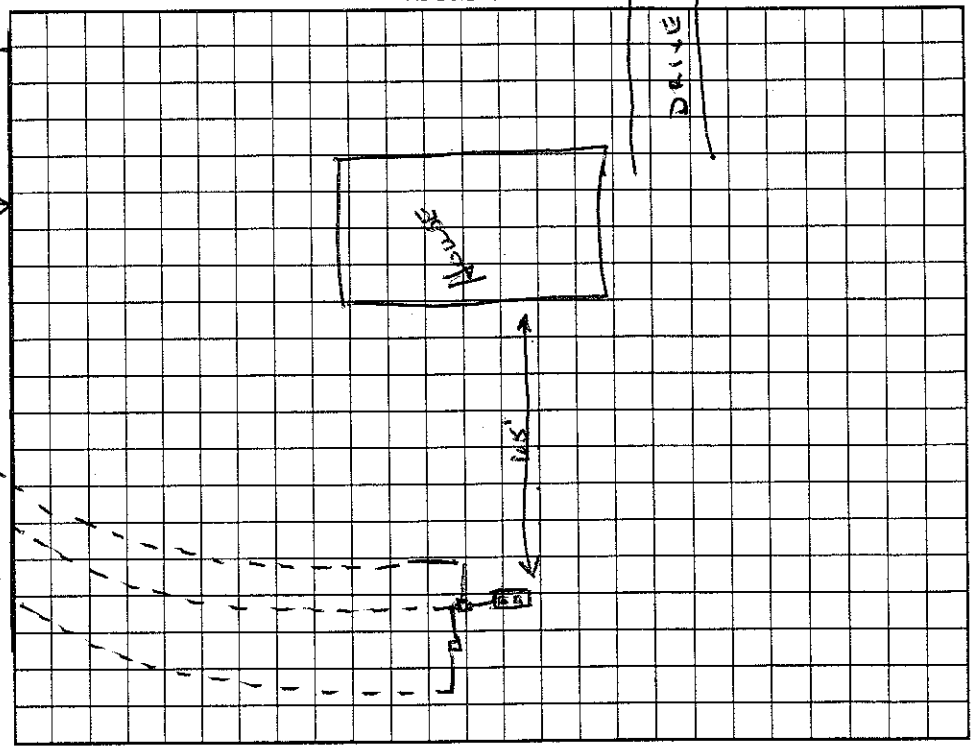
Comments:/Conditions: Keep Septic System at least 100' from well.

Comments:/Conditions: Do Not grade basement below Septic area to keep gravity flow to Septic tank.

☆ Not to Scale 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: John Brantley date Installed by: Wayne Clontz

Improvement Permit by: Maria H. Dotson RS date 10/11/2001 Operation Permit by: Wesley Sparks RS date 12/23/02

Authorization to Construct by: Maria H. Dotson RS date 10/11/2001 Existing System Inspection by: date

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