IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # REPAIR

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

PIN # 4657594297

APPLICANT: WALLACE ENDERS APPLICANT ADDRESS: 259 RED DOG DR MOORESVILLE

SITE ADDRESS: 259 RED DOG DR. PHONE: ALT. PHONE:

SITE DIRECTIONS: RHINEHART RD FROM 21N- TR RED DOG- ON LT NEAR END

SUBDIVISION: — SECTION: — LOT # — LOT AREA: ~8AC DESIGN FLOW: EXIST DT.A.R.V G-

Septic Tank 1000 (gal) STB 760 Date 1-21
Pump Tank (gal) PT Date
Pump Make Model Serial #
Nitrification Fields # Lines EXISTING Linear Ft:
Trench Width Max. Trench Bottom Depth Gravel Depth

☐ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI
System Description: REPLACE TANK-
Repair System Description:
Maintenance Agreement Required: ☐ YES ☑ NO ☐ GRAVITY ☐ PRESSURE

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

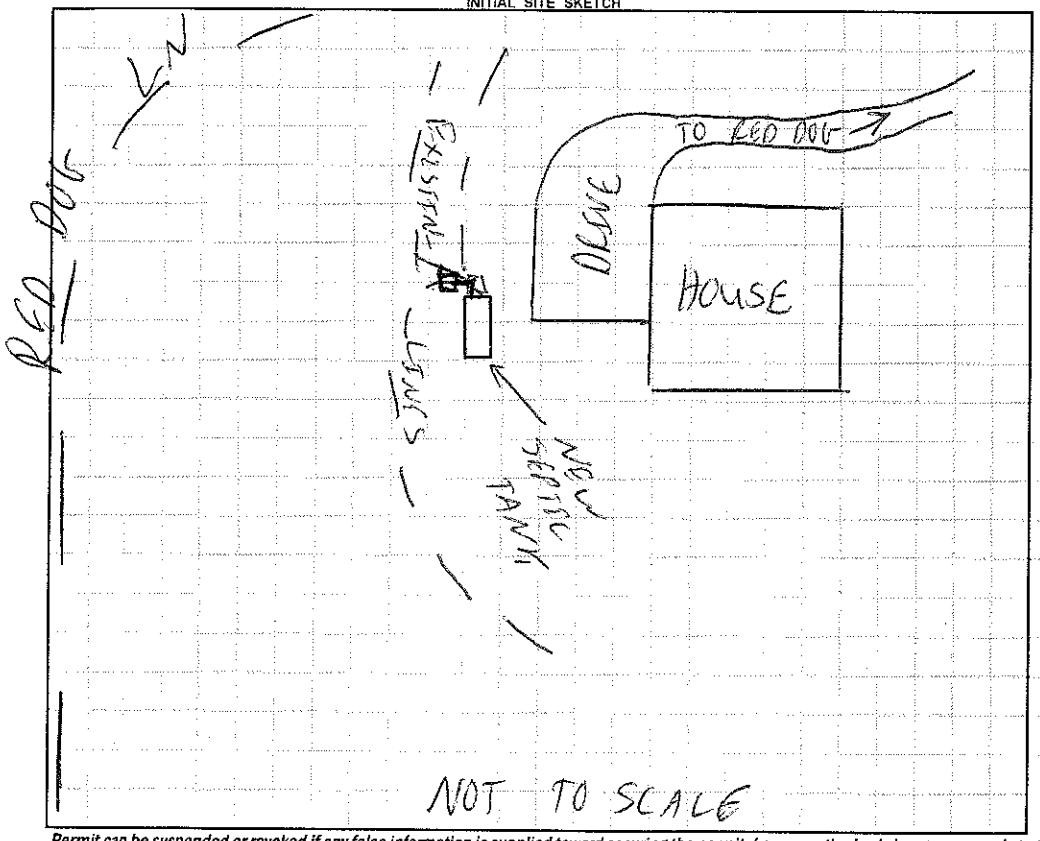
Water Supply
☐ Private
☐ Public
☐ Community

Comments / Conditions:

*OLD TANK CAVED IN *

RED DOG LN

INITIAL SITE SKETCH



NOT TO SCALE

AS BUILT SKETCH

INSTALLED AS SHOWN

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: Wallace Enders Date: 7/9/13 Installed by: A-1 BACKHOE

IMPROVEMENT PERMIT by: Date: 7/8/13 OPERATION PERMIT by: Date: 7-9-13

AUTHORIZATION TO CONSTRUCT by: Date: 7/8/13 Existing System Inspected by: Date:

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