Repair 1:00

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 # 4658240380 DATE 9-25-2012

OWNER or APPLICANT David Porter & Paulette PHONE: Business Home: 704663-1326

OWNER or APPLICANT ADDRESS 269 Cornelius Rd. Mooresville NC 28117

LOCATION / DIRECTIONS Hwy 21 N TL Cornelius Rd on left next to exit road for Cornelius Park #265

SUBDIVISION BLOCK / SECTION LOT # LOT AREA DESIGN FLOW L.T.A.R.

Septic Tank 1000 Gallons: STB 760 Date 4-22-12 ☐ New System ☒ Repair ☐ Expansion System Type I II III IV V VI

Pump Tank Gallons: PT Date

Pump Make Model Serial #

Nitrification Field No Fields 1 No Lines 3 Linear Feet ~225

Trench Width 7½' Bed Max. Trench Bottom Depth Gravel Depth 12" ?

System Description: Gravity Conventional

Repair System Description: ST Replacement

Maintenance Agreement Required ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

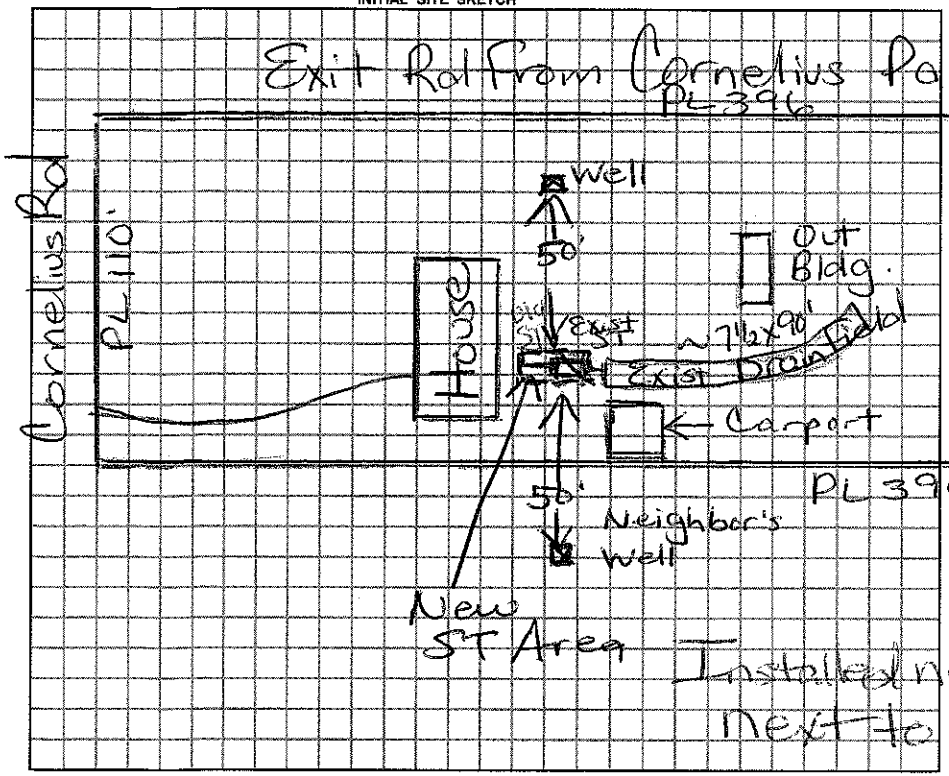
☒ Residence No. Bedrooms 2 ☐ Business No. Persons ☐ Other No. Employees ☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply ☐ Private ☐ Public ☐ Community

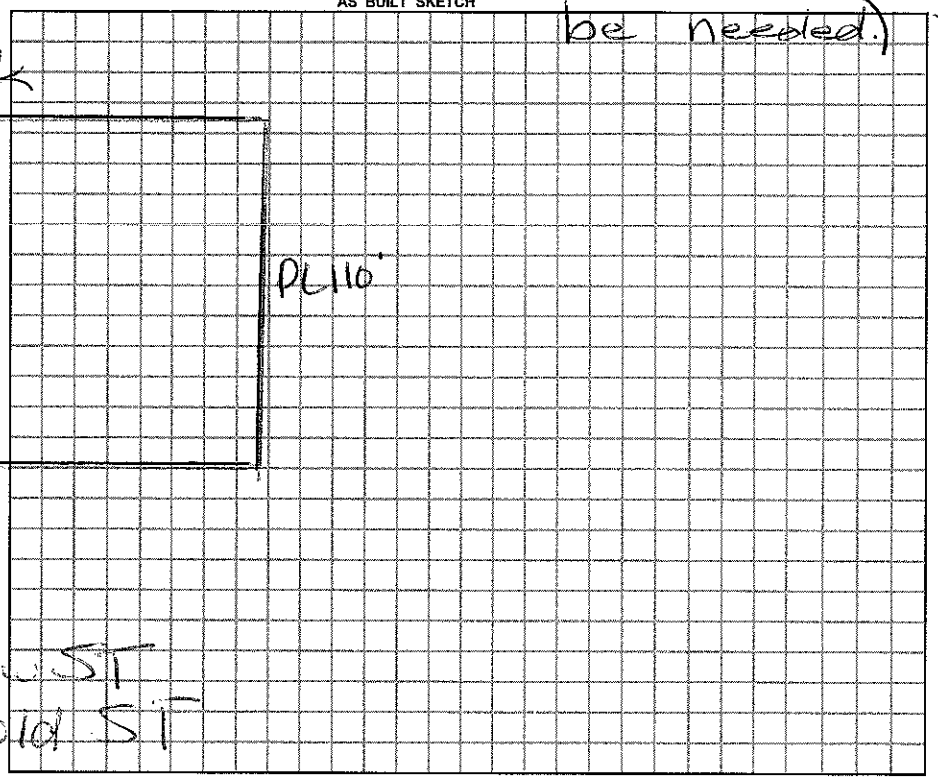
Comments / Conditions: Replace existing ST with new ST. Must be at least 50ft from any well & at least 5ft from house.)

Comments / Conditions: Must abandoned existing ST properly. Note: Drainfield was pretty wet need to conserve water use or new drainfield may be needed.)

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: David P Porter Date 9/25/12

Improvement Permit by: Maiana H Colson RS Date 9/25/12

Authorization to Construct by: Maiana H Colson RS Date 9/25/12

Installed by: Lentz Septic

Operation Permit by: Maiana H Colson RS Date: 9/28/12

Existing System Inspected by: Date:

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

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