IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 21041 6

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

PIN # 4658-92-0856

APPLICANT: TOWN OF MOORESVILLE / Brosseau APPLICANT ADDRESS: PO BOX 878, Mooresville NC 28115

SITE ADDRESS: 6120 Clark Branch Rd PHONE: 704-799-4065 ALT. PHONE:

SITE DIRECTIONS: HWY 115 N, TL ON CLARK BRANCH JUST BEFORE MAZEPPA RD, LOT ON R

SUBDIVISION: SECTION: LOT # LOT AREA: 0.406 ac DESIGN FLOW: 360 gpd L.T.A.R.: 0.25

Septic Tank EX. (gal) STB Date
Pump Tank (gal) PT Date
Pump Make Model Serial #
Nitrification Fields 1 # Lines 6 Linear Ft: 360'
Trench Width 36" Max. Trench Bottom Depth * 36" * Gravel Depth N/A

☐ New System ☑ Repair ☐ Expansion System Type: I II ☑ III IV V VI
System Description:
Repair System Description: Gravity 25% Reduction
Maintenance Agreement Required: ☐ YES ☑ NO
☑ GRAVITY ☐ PRESSURE

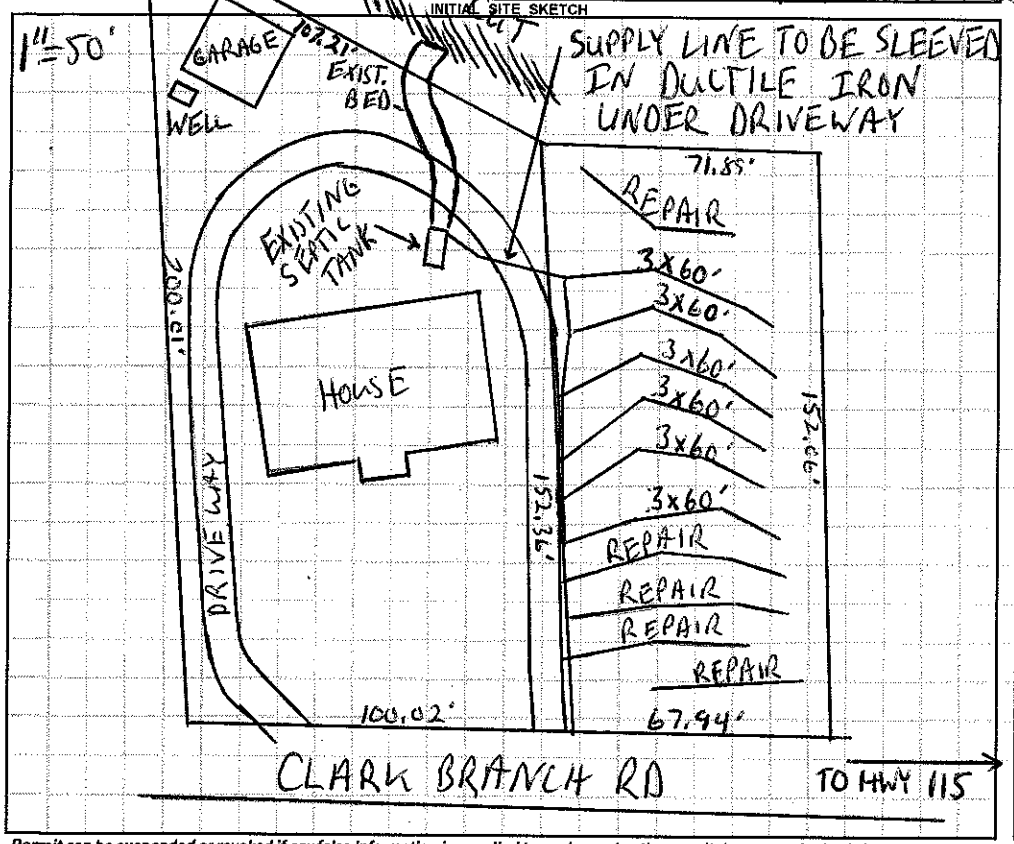
☑ Residence No. Bedrooms 3
☐ Business No. Persons 6
☐ Other No. Employees
☐ Slab ☑ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply
☑ Private EX.
☐ Public
☐ Community

Comments / Conditions: EXISTING BED SYSTEM TO BE ABANDONED. INSTALL NEW TRENCHES 36" DEEP. IF EXISTING TANK IS DAMAGED OR IN POOR CONDITION IT WILL NEED TO BE REPLACED.

4th line down slightly shorter.
~~A~~ Kept existing ST

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed as Drawn
Used Quick 4

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: Date: 6/17/15 Installed by: Richard Abernathy

IMPROVEMENT PERMIT by: Date: 8-14-15 OPERATION PERMIT by: Marian Dotson RS Date: 1/29/16

AUTHORIZATION TO CONSTRUCT by: Date: 8-14-15 Existing System Inspected by: Date:

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