IREDELL COUNTY HEALTH DEPARTMENT

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

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

PIN # 4665278131

APPLICANT: Lois Isenhour APPLICANT ADDRESS: 1196 Shearers Rd M'ville, NC 28115

SITE ADDRESS: 1196 Shearers Rd Mooresville, NC 28115 PHONE: 704 663-5015 ALT. PHONE: 704 223-0161 Lynn

SITE DIRECTIONS: Shearers Rd South on right just past Faith Rd. (Red Brick House). 1st driv past Faith

SUBDIVISION: N/A SECTION: LOT # LOT AREA: 1.6 AC DESIGN FLOW: 360gpd L.T.A.R.: .3

Septic Tank Existing (gal) STB Date

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines 4 Linear Ft: 300 Ft

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: Gravity - Conventional

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

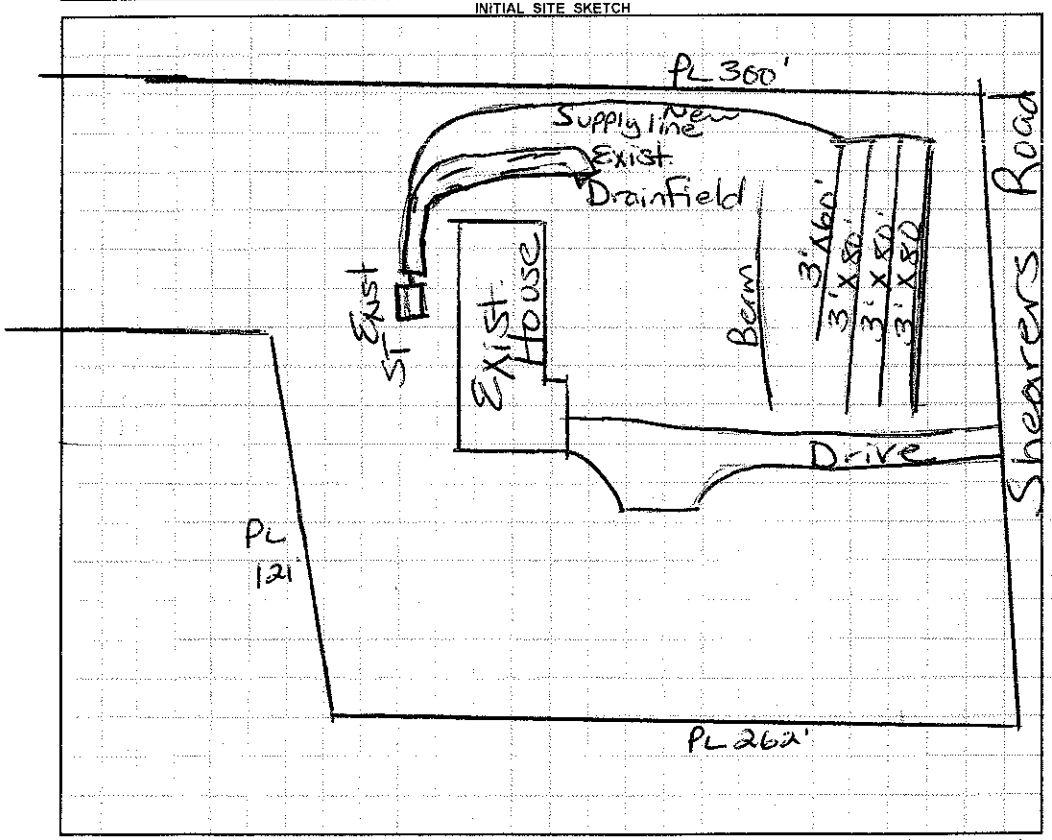
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Use existing Septic tank if still structurally sound, otherwise replace ST.

Install 300ft of 25% Reduction, use Serial distribution. Keep Septic System at least 10ft from PL, Supply line 5ft from PL.

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: Lois D Murphy Date: 9-23-13 Installed by: FJ ERWIN

IMPROVEMENT PERMIT by: Marie H Logan RS Date: 9/19/13 OPERATION PERMIT by: [signature] Date: 1-24-14

AUTHORIZATION TO CONSTRUCT by: Marie H Logan RS Date: 9/19/13 Existing System Inspected by: Date:

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