IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 216239

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

PIN # 4666-07-0548

APPLICANT: Les Charnock APPLICANT ADDRESS: 4113 Old Hickory Blvd Old Hickory, TN 37138

SITE ADDRESS: 425 Valleydale St. Mooresville, NC PHONE: ALT. PHONE: 615 585 5158

SITE DIRECTIONS: Church St S TL Wilson TR Harris St TL College TL E. Mills Ave TL Valleydale on right

SUBDIVISION: SECTION: LOT # LOT AREA: DESIGN FLOW: LT.A.R.:

Septic Tank Exist 1000 (gal) STB Date
Pump Tank (gal) PT Date
Pump Make Model Serial #
Nitrification Fields # Lines Linear Ft: 50'
Trench Width 3ft Max. Trench Bottom Depth Gravel Depth

☐ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI
System Description: Gravity Conventional
Repair System Description:
Maintenance Agreement Required: ☐ YES ☒ NO
☒ GRAVITY ☐ PRESSURE

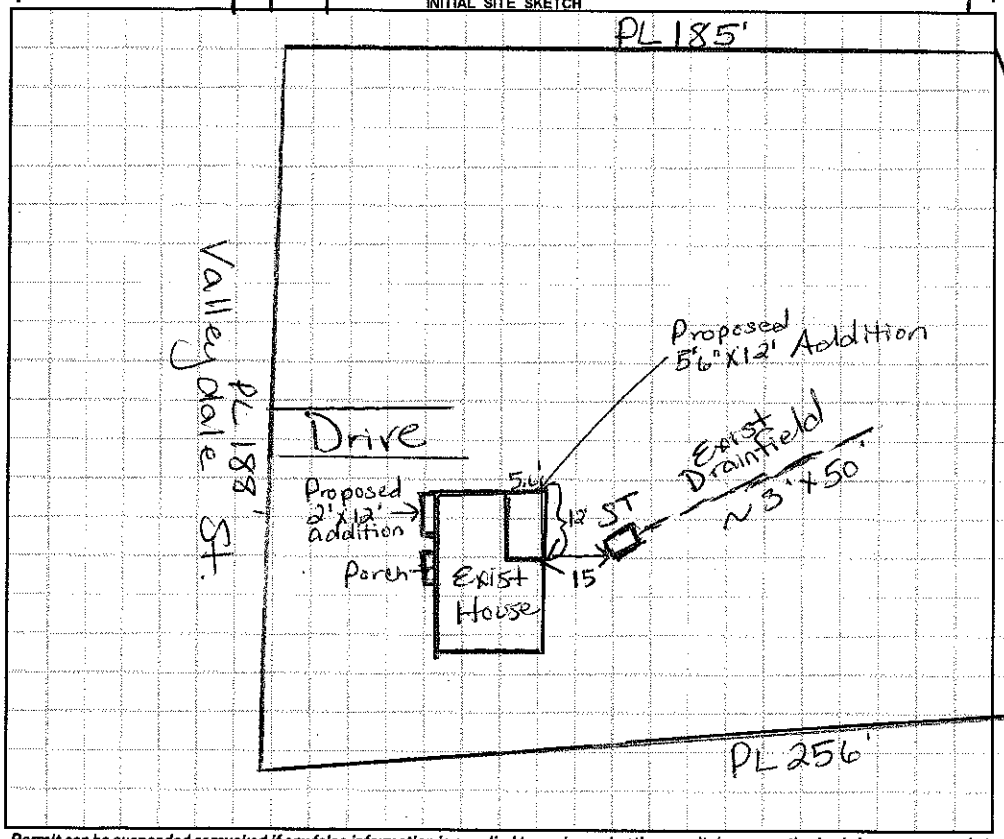
☒ Residence No. Bedrooms 2
☐ Business No. Persons
☐ Other No. Employees
☐ Slab ☒ Crawl Space
☐ Basement w/plumbing ☒ Basement w/o plumbing

Water Supply: ☐ Private ☒ Public ☐ Community

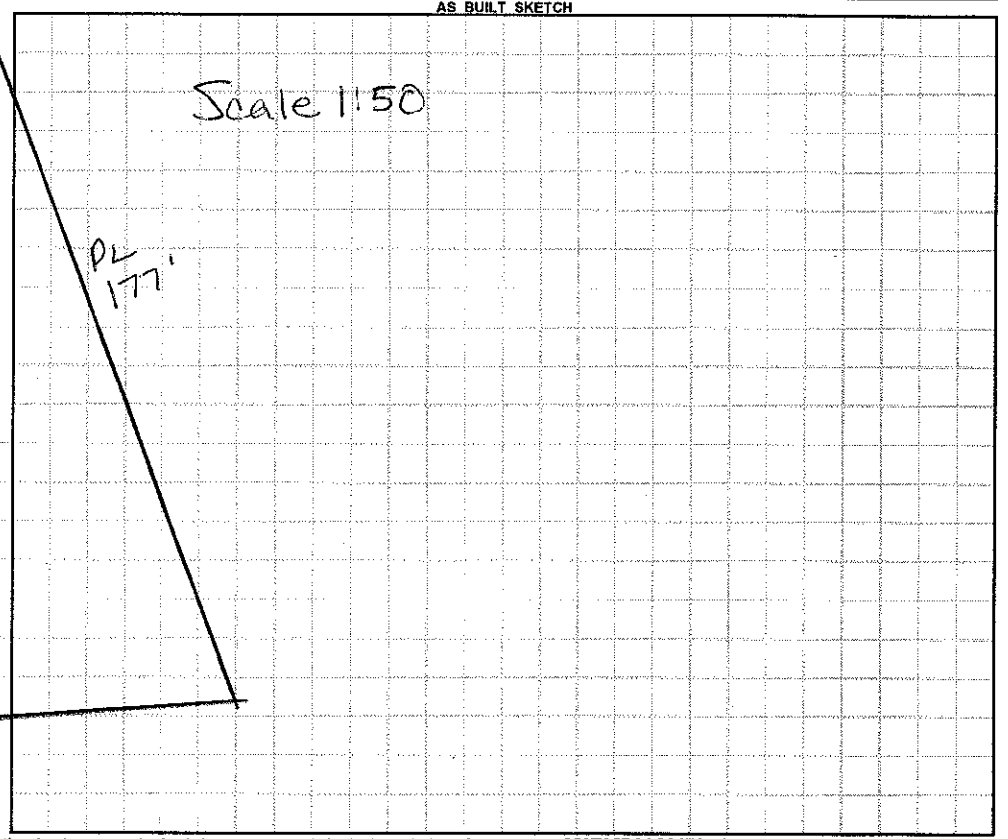
Comments / Conditions: The location(s) of the proposed addition(s) does not appear to impact the existing onsite septic system.
*Must keep proposed additions at least 5ft from Septic.

Note: House built ~1910, NO Septic permit on file. Exist Structure

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: Date: 2/22/16 Installed by:

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Maria H. Dotson RS Date: 2/20/16

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