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IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 218985 / 21595

AP 3:00

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

PIN # 4667-84-6933 .000

APPLICANT: Jeff Lavigne | APPLICANT ADDRESS: 3743 Mill Run, Terrell NC

SITE ADDRESS: 208 Kennedy Ave. Mooresville NC | PHONE: 828-478-1360 | ALT. PHONE: 704-796-5786

SITE DIRECTIONS: Main St. To TR Kennedy Ave., Site on L (Lots 67-69)

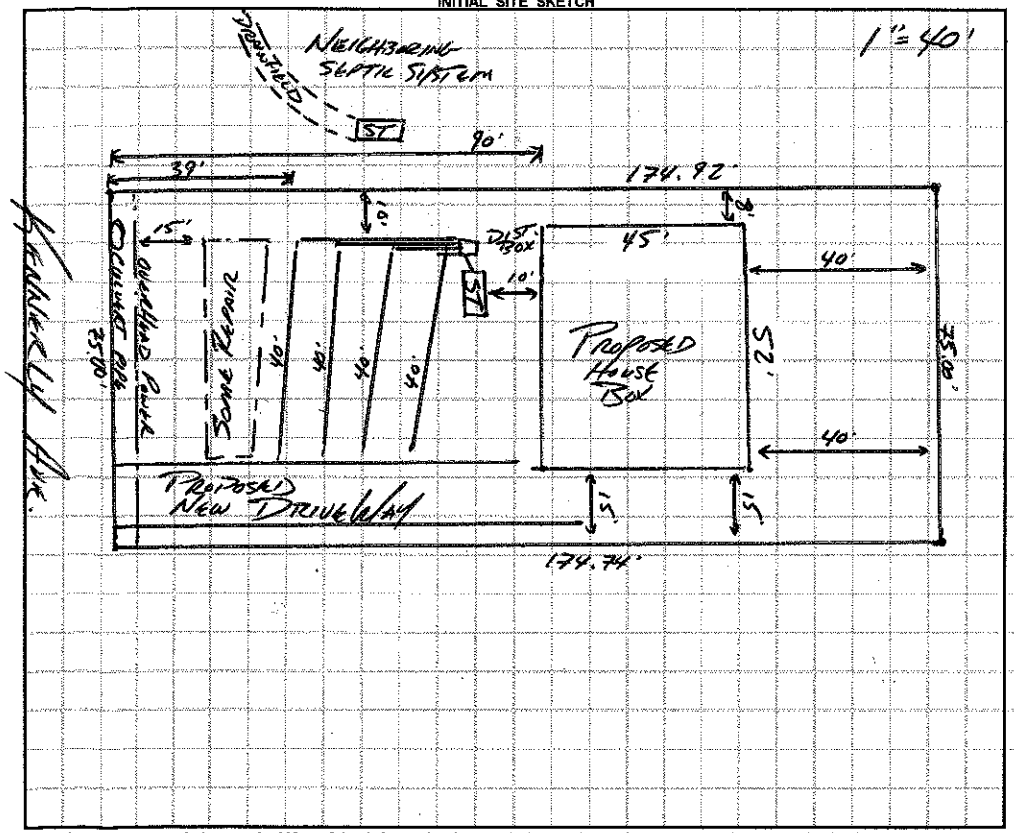
SUBDIVISION: J A Kennedy | SECTION: — | LOT # ~~Front~~ | LOT AREA: .3 Acre | DESIGN FLOW: 240 GPD | L.T.A.R.: .25

Septic Tank 1000 (gal)	STB 794	Date 5-27-14	☒ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 2	Water Supply
Pump Tank (gal)	PT	Date	System Description: PPBPS - Gravity		☐ Business	No. Persons 4	☐ Private
Pump Make	Model	Serial #	Repair System Description: Same (Exempt)		☐ Other	No. Employees	☒ Public
# Nitrification Fields 1	# Lines 4 @ 40'	Linear Ft: 160'	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☒ Crawl Space	☐ Community
Trench Width 24"	Max. Trench Bottom Depth *34"*	Gravel Depth N/A	☒ GRAVITY	☐ PRESSURE	☐ Basement w/plumbing		☐ Basement w/o plumbing

Comments / Conditions: Install 4 Lines @ 40' Each Using Parallel Distribution.
Maintain 25' From Neighboring System.
Follow All NC .1900 Rules.

* Remove Fill From Septic Area. *
- Driveway To Shift Outside Of Septic Area.
- Divert Any Drainage Around Septic Area.
- Install @ 34" Trench Bottom

INITIAL SITE SKETCH



AS BUILT SKETCH

3/4/16 Reviewed Floor plans, in Compliance With Improvement Permit.

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 plot 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: [signature] Date: 2-19-16 | Installed by: F.J Erkin

IMPROVEMENT PERMIT by: [signature] APPROVED FEB 15 2016 | OPERATION PERMIT by: Maria Dotson RS. Date: 7/20/16

AUTHORIZATION TO CONSTRUCT by: Maria Dotson RS Date: 3/4/16 | Existing System Inspected by: Date:

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