IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 208607 4.00

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

PIN # 4675-20-6064.000

APPLICANT: Amber Blackmon APPLICANT ADDRESS: 144 Louise Dr. Mooresville NC

SITE ADDRESS: 170 Louise Dr. Mooresville NC PHONE: 704-902-8930 ALT. PHONE: 704-650-0354

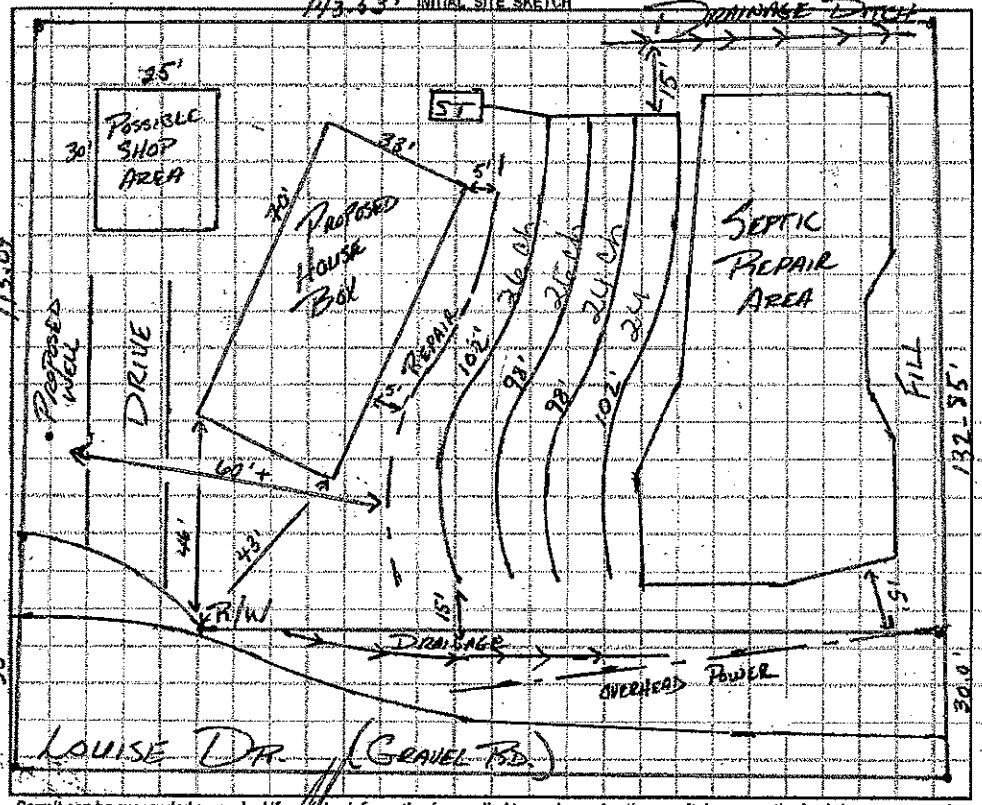
SITE DIRECTIONS: Hwy 3 to Johnson Dairy Rd Cornelius, Rt Louise Dr, Site At End on Rt.

SUBDIVISION: Carol Woods SECTION: LOT # 30 LOT AREA: .75 Acre DESIGN FLOW: 360 GPD L.T.A.R.: .225

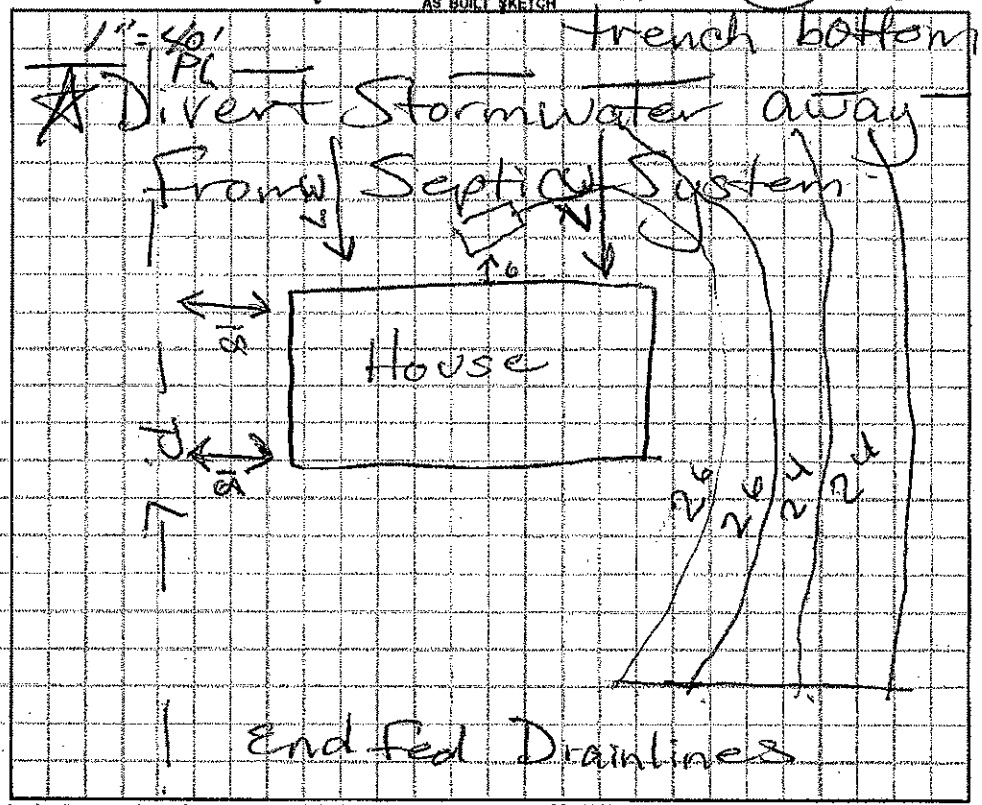
Septic Tank 1000 (gal)	STB 160	Date 4-14-15	☒ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 3	Water Supply
Pump Tank (gal)	PT	Date	System Description: 25% Reduction - Gravity	☐ Business	No. Persons 6	☒ Private
Pump Make	Model	Serial #	Repair System Description: Same	☐ Other	No. Employees	☐ Public
# Nitrification Fields 1	# Lines 4	Linear Ft: 400'	Maintenance Agreement Required: ☐ YES ☒ NO	☐ Slab	☒ Crawl Space	☐ Community
Trench Width 36"	Max. Trench Bottom Depth * 22" *	Gravel Depth N/A	☒ GRAVITY ☐ PRESSURE	☐ Basement w/plumbing	☐ Basement w/o plumbing	

Comments / Conditions: Follow All Septic Rules. If 6" Cover Cannot Be Achieved Approved Fill Will Have To Be Implanted Maintain At Least 50' From Proposed Well And At Least 15' From Any Drainage. If Repair Is Ever Utilized, Drainage Will Have To Be Filled. Use Enviro-Flo Distribution. Installed Quick & Verified (22") TB

143.53' 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: 4-13-15

Installed by: A-1 Backhoe RS

IMPROVEMENT PERMIT by: APPROVED Date: APR 10 2015

OPERATION PERMIT by: Maria Hill Dotson Date: 6/30/15

AUTHORIZATION TO CONSTRUCT by: APPROVED Date: JUN 18 2015

Existing System Inspected by: Date:

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