IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 213971

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

PIN # 4676-17-~~7347~~ 7325

APPLICANT: DAVE DAVIS APPLICANT ADDRESS: 209 PLEASANT GROVE MOORESVILLE

SITE ADDRESS: 521 LINWOOD RD. PHONE: 980-329-7196 ALT. PHONE:

SITE DIRECTIONS: MAW ST, TR LINWOOD, ON L

SUBDIVISION: SECTION: LOT # LOT AREA: 1.05 AC DESIGN FLOW: 480 L.T.A.R.: .35

Septic Tank 1000 (gal) STB 794 Date 5-25
Pump Tank (gal) PT Date
Pump Make Model Serial #
Nitrification Fields 1 # Lines 3C115' Linear Ft: 345'
Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth —

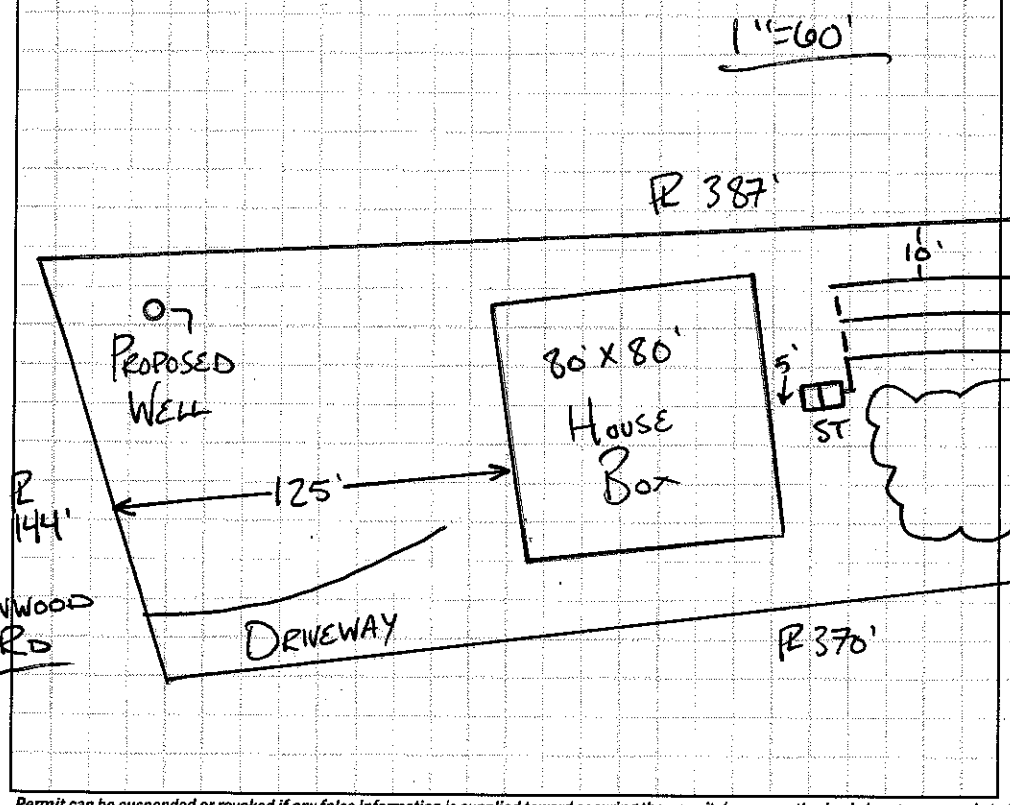
☒ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI
System Description: 25% REDUCTION
Repair System Description: PM 25% REDUCTION
Maintenance Agreement Required: ☐ YES ☒ NO
☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 4
☐ Business No. Persons
☐ Other No. Employees
☐ Slab ☒ ~~Crawl Space~~
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ ~~Private~~ ☐ Public ☐ Community

Comments / Conditions:

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: Dave Davis Date: 11/13/15 Installed by: ORBISON

IMPROVEMENT PERMIT by: APPROVED NOV 09 2015 Date: OPERATION PERMIT by: APPROVED JUL 17 2016 Date:

AUTHORIZATION TO CONSTRUCT by: APPROVED NOV 09 2015 Existing System Inspected by: Date:

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