IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 21739

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

✓ PIN # 4676635406

APPLICANT: William Jones / Chris Shaw APPLICANT ADDRESS: P.O. Box 143 Mooresville, NC 28115

✓ SITE ADDRESS: 151 Walden Drive - Mooresville, NC PHONE: 7046625134 ALT. PHONE: Chris 704902-0086

SITE DIRECTIONS: Hwy 3 TL Williford TR at end TL Tester Rd TR Walden Ridge on left

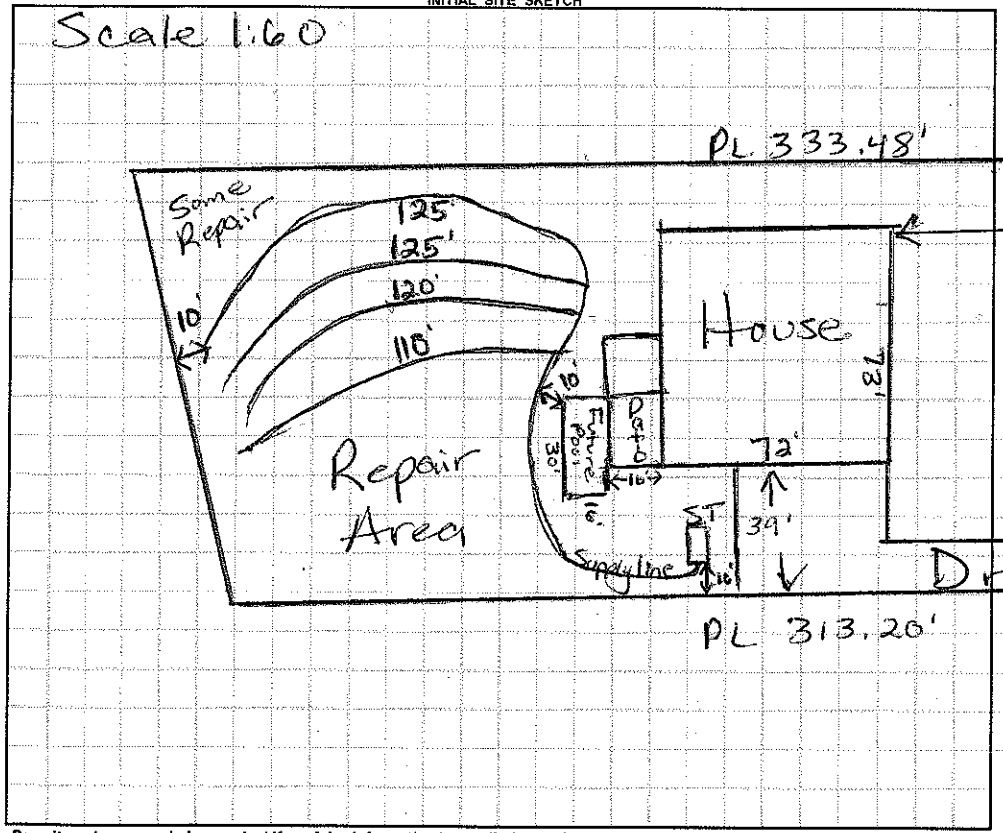
✓ SUBDIVISION: Walden Ridge SECTION: — LOT # 61 LOT AREA: 1 Ac DESIGN FLOW: 480 gpd L.T.A.R.: .25I / .3R

Septic Tank	1000 (gal)	STB	784	Date	9-20-16	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms 4	Water Supply
Pump Tank	— (gal)	PT	—	Date	—	System Description:	Gravity - 25% Reduction			☐ Business	No. Persons 8	☒ Private
Pump Make	—	Model	—	Serial #	—	Repair System Description:	KP - PBBPS			☐ Other	No. Employees	☐ Public
# Nitrification Fields	1	# Lines	4	Linear Ft:	480'	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☒ Crawl Space	☐ Community
Trench Width	36"	Max. Trench Bottom Depth	18"-20"	Gravel Depth	N/A		☒ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing	

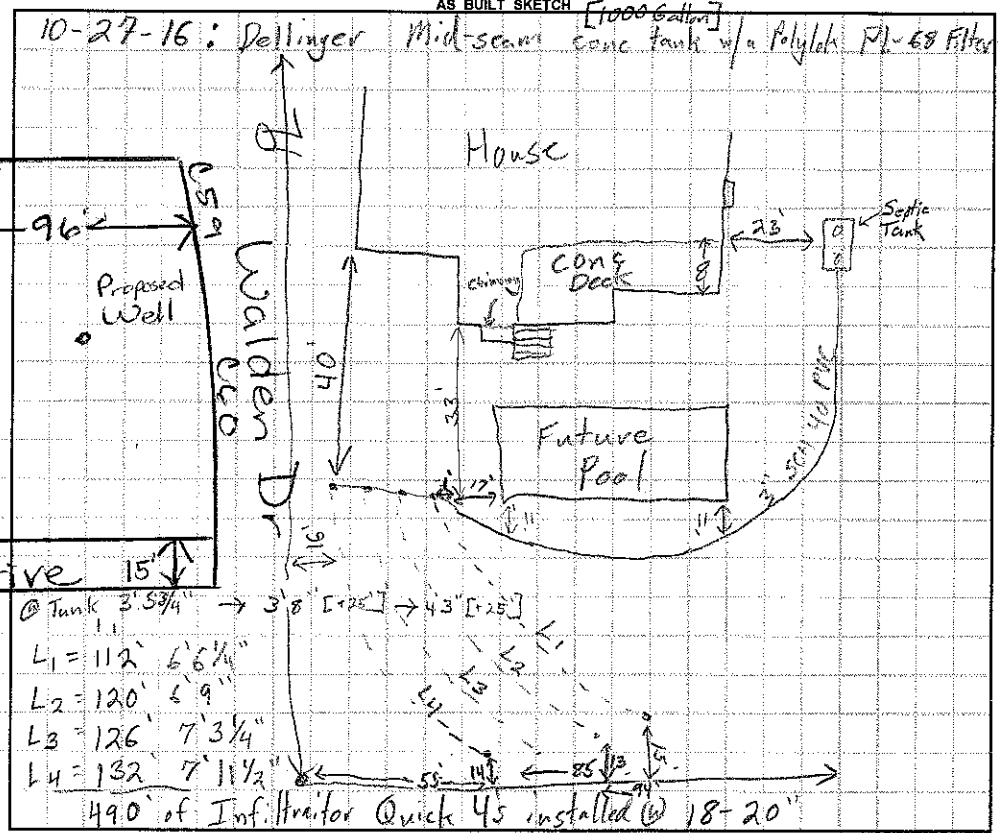
Comments / Conditions:

Must keep future pool "cut" at least 15' from septic system & 10ft from supply line.

INITIAL SITE SKETCH



AS BUILT SKETCH [1000 Gallon]



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: [signature] Date: 9/8/16 Installed by: Cory Abernathy (Abernathy Septic)

IMPROVEMENT PERMIT by: Maria Lotson RS Date: 9/7/16 OPERATION PERMIT by: Scott Shuck Date: 10/27/16

AUTHORIZATION TO CONSTRUCT by: Maria Lotson RS Date: 9/7/16 Existing System Inspected by: Date:

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