IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PERMIT# Mooresville 1911 PIN# 4677-34-4297 4677345297 DATE 11/15/01

OWNER OR CONTRACTOR Phongpasith Insixiang may PHONE: Business _____ Home 665-6798

ADDRESS 284 Alexander Acres Rd Mooresville NC 28115

LOCATION 150' E, TR Alexander Acres Near end on Rt.

SUBDIVISION Caudle Est. BLOCK / SECTION _____ LOT 7 LOT AREA 1 Ac. SITE CLASS P3 DESIGN FLOW 360 L.T.A.R. 0.3

Septic Tank: 1000 Gallons; STB 794 Date 10/23/01

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 4 @ 100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☒ New System ☐ Repair System Type: I (II) III, IV, V, VI

System Description: Gravity Conventional

Repair System Description: 25% Reduction

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms 3 No. Employees ____

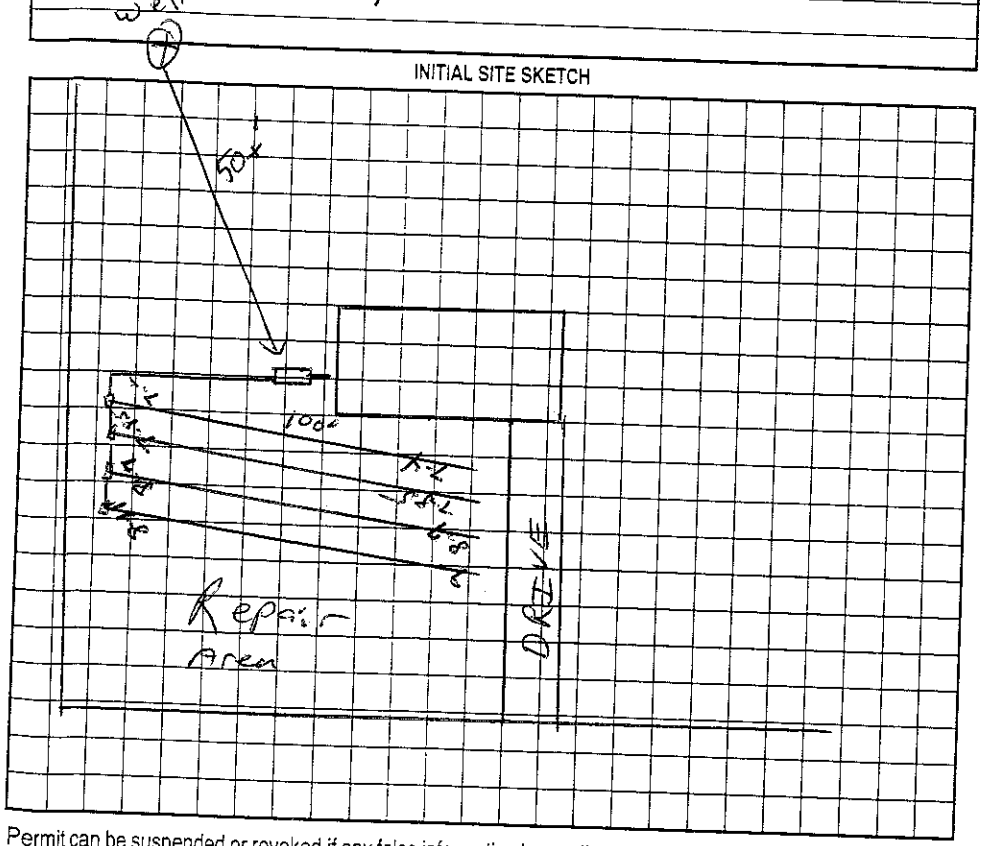
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions: Install drain Lines on Contour - Keep system 50+' from well

Comments:/Conditions:

INITIAL SITE SKETCH



AS BUILT SKETCH

The proposed / existing GARAGE addition does not appear to impact the existing septic system.

**NOTE: _____

RA 2008 R.S.

Date: 1-10-19

ICHD-Environmental Health Division

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. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: _____ date 11/16/01 Installed by: Marty Tucker

Improvement Permit by: _____ RSI date 11/15/01 Operation Permit by: Wesley Sparks R.S. date 2/13/02

Authorization to Construct by: _____ RSI date 11/15/01 Existing System Inspection by: _____ date _____

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK