IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 214827

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

PIN # 4679511826

APPLICANT: Otis Garrigan | APPLICANT ADDRESS: P.O. Box 1763 Mooresville, NC 28115

SITE ADDRESS: 189 Wiggins Rd. Mooresville, NC 28115 | PHONE: 704 902 7046 | ALT. PHONE: 704 661-5894

SITE DIRECTIONS: Main St. North TL 801 N TR Wiggins Rd lot on left

SUBDIVISION: — | SECTION: — LOT # — | LOT AREA: 3.13 Acre | DESIGN FLOW: 360gpd | L.T.A.R.: .35

Septic Tank	1000 min (gal)	STB	762	Date	12/1/15		
Pump Tank	(gal)	PT		Date			
Pump Make		Model		Serial #			
# Nitrification Fields	1	# Lines	1	Linear Ft:	114 ft		
Trench Width	36"	Max. Trench Bottom Depth	26"	Gravel Depth	12"		

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

System Description: Gravity-Conventional (Gravel)

Repair System Description: Same

Maintenance Agreement Required: ☐ YES ☒ NO ☐ GRAVITY ☐ PRESSURE

☒ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing

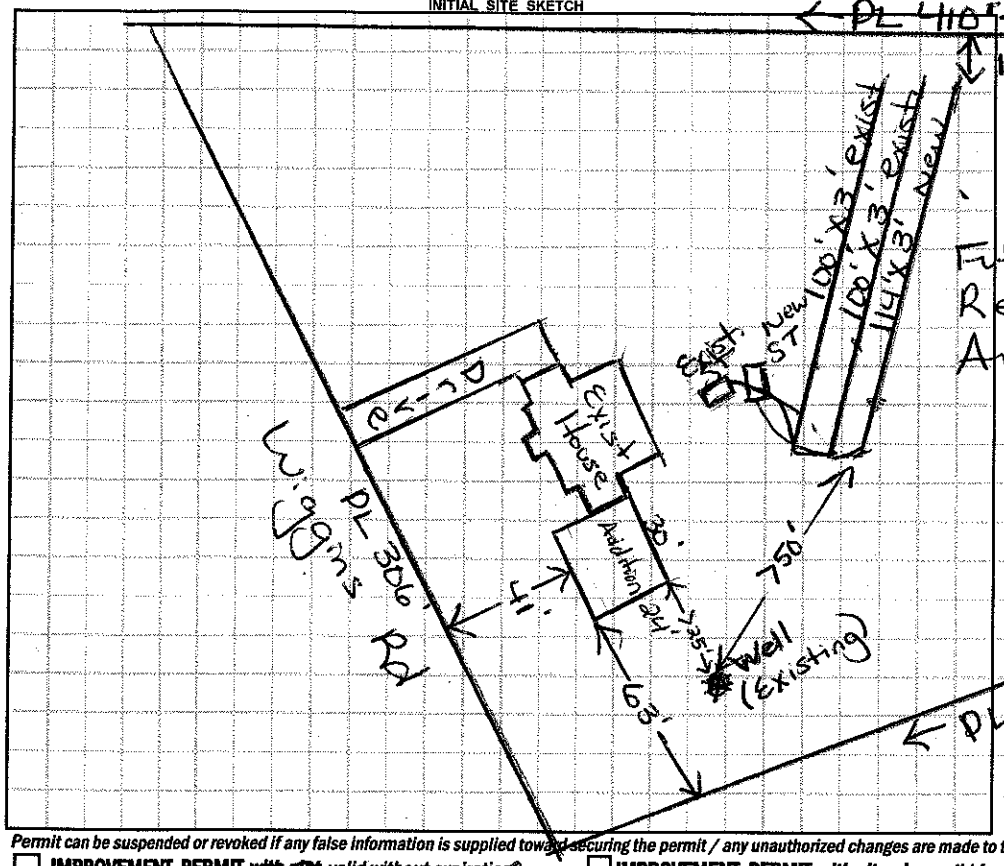
No. Bedrooms 3 | No. Persons 6 | No. Employees — | ☒ Crawl Space | ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☐ Community

Comments / Conditions: Expansion - Upgrading from 2 Bedrooms to 3 Bedrooms
Install new ST & 1 line 3'x 114' Gravity - Conventional

* 25% Reduction "Accepted" may be used = 86ft

INITIAL SITE SKETCH



AS BUILT SKETCH

Scale 1:60

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: Otis G. Garrigan Date: 12/30/15 Installed by: Self installed

IMPROVEMENT PERMIT by: Maria H. Dotson RS Date: 12/23/15 OPERATION PERMIT by: W. Sparks Date: 11/28/16

AUTHORIZATION TO CONSTRUCT by: Maria H. Dotson RS Date: 12/30/15 Existing System Inspected by: — Date: —

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