IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 207432

AWP

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

PIN # 4679-51-3133

APPLICANT: Junior Sparrow / Joe Sala APPLICANT ADDRESS: 4858 Sierra Dr. Maiden NC.

SITE ADDRESS: 221 Wiggins Rd. Mooresville, NC PHONE: 704-634-7231 ALT. PHONE:

SITE DIRECTIONS: 801 N, TR Wiggins Rd., Site on L

SUBDIVISION: — SECTION: — LOT # — LOT AREA: 1.35 Acre DESIGN FLOW: 360 GPD L.T.A.R.: Existing (.3)

Septic Tank Existing (1000 gal) STB Date

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines Existing (4@75') Linear Ft: 300' Ex.

Trench Width Existing Max. Trench Bottom Depth Existing Gravel Depth N/A

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

System Description: Existing Chambers 25% Reduction Egiv.

Repair System Description: 25% Reduction

Maintenance Agreement Required: ☐ YES ☑ NO

☑ GRAVITY ☐ PRESSURE

☑ Residence No. Bedrooms 3

☐ Business No. Persons 6

☐ Other No. Employees

☐ Slab ☑ Crawl Space

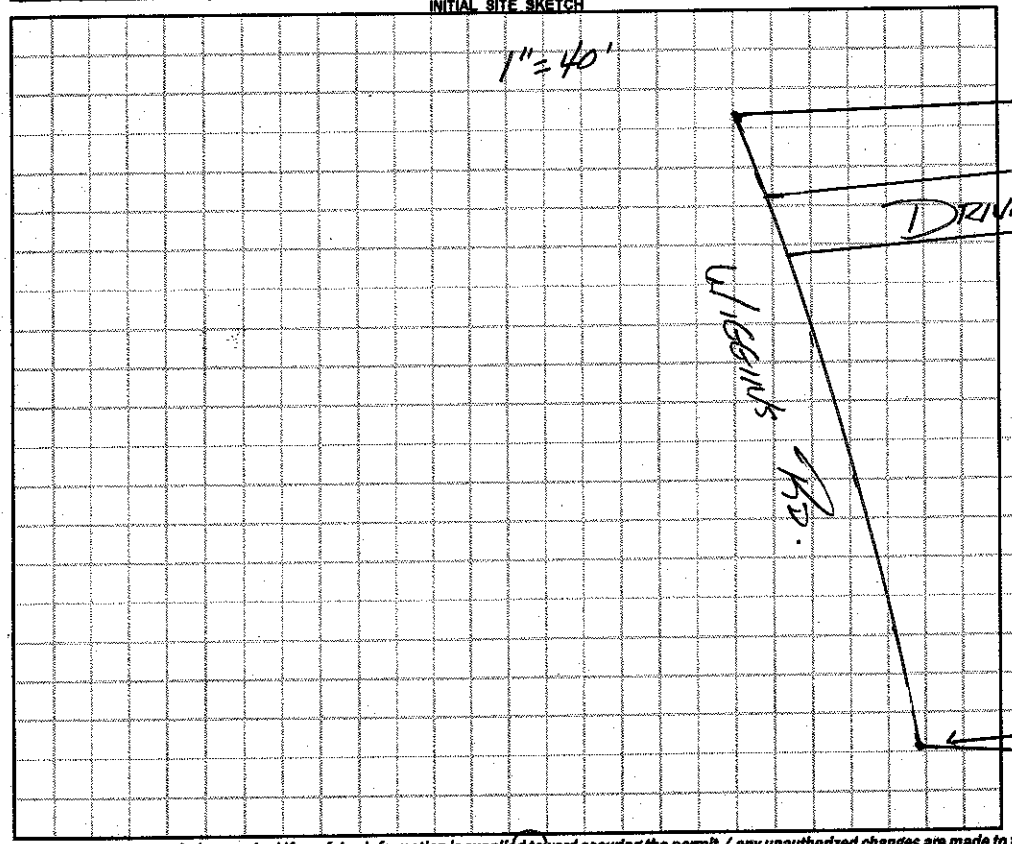
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☑ Private ☐ Public ☐ Community

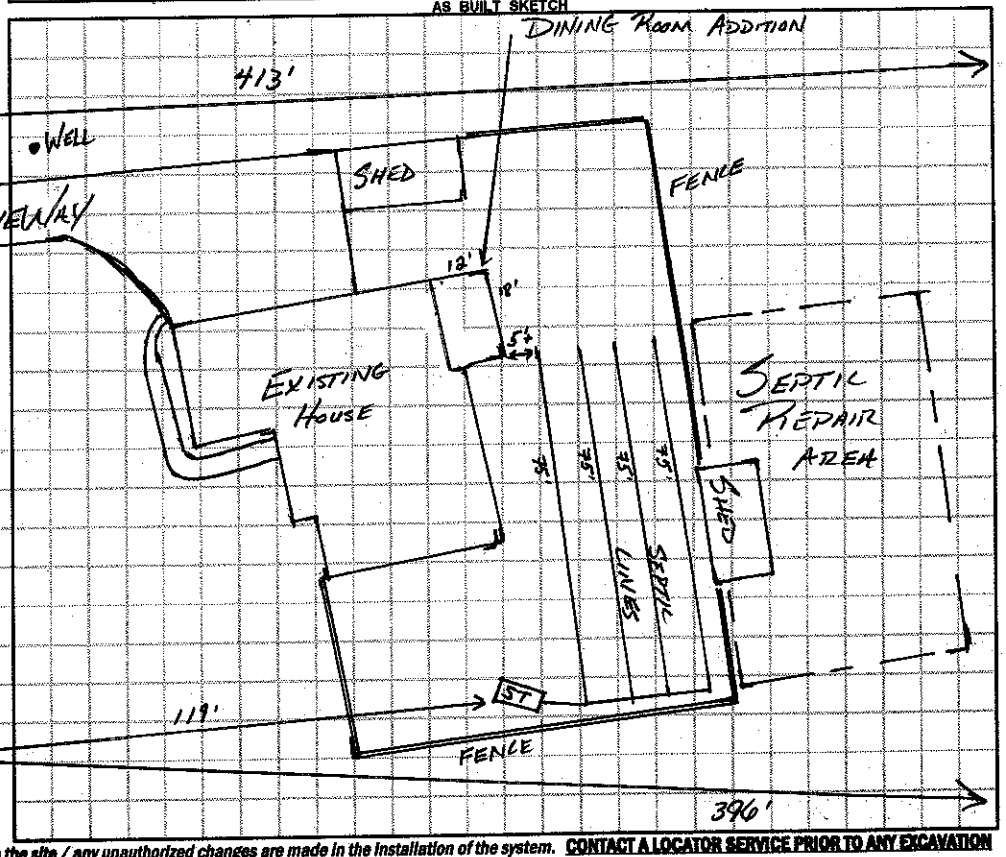
Comments / Conditions: This Permit is for the addition for a 12' x 18' Dining Room Extension. A shed was placed in repair area, but system appeared to be functioning at time of inspection.

Approval for Dining Room Addition ONLY.

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: Junior Sparrow Date: 1-2-15 Installed by:

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Date: DEC 31 2014

APPROVED

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