IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 201982

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

PIN # 4716046029

APPLICANT: OBrien Builders Inc. APPLICANT ADDRESS: 310 Treebark Rd.

SITE ADDRESS: 176 Robert Dr. PHONE: 704-871-1536 ALT. PHONE: 704-902-4310

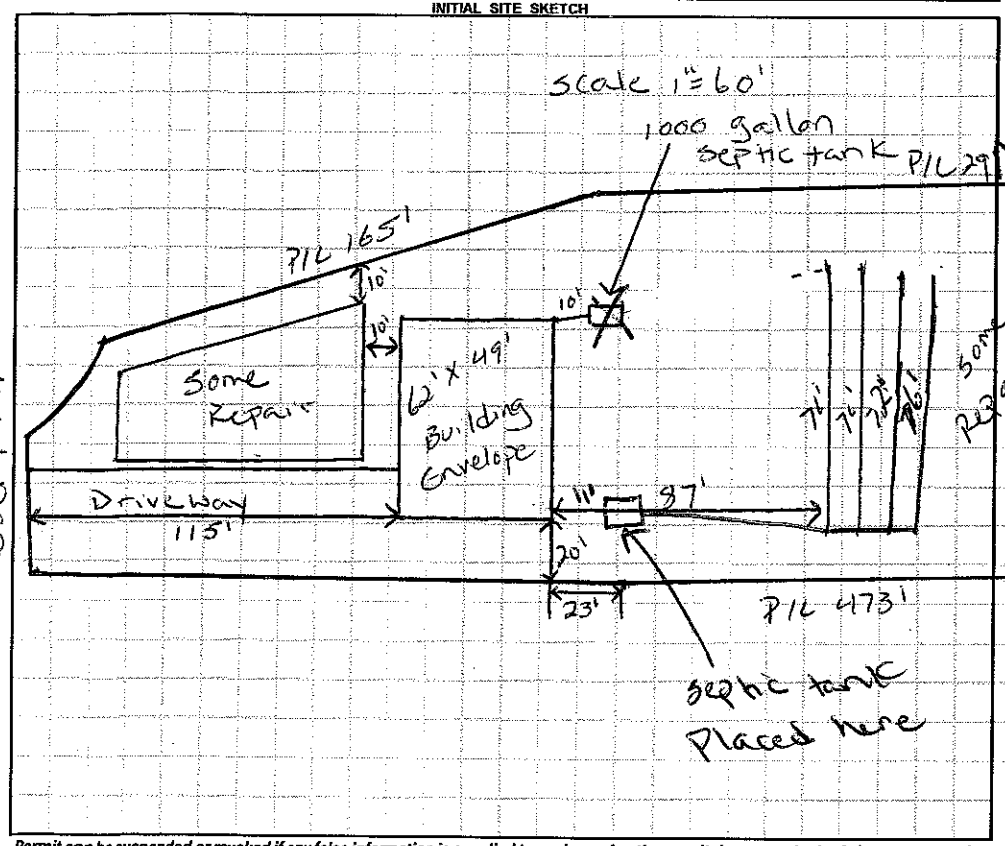
SITE DIRECTIONS: Hwy 115N TL Scotts Creek Rd TL Robert Dr.

SUBDIVISION: Larkin Sloan Estate SECTION: N/A LOT # 47 LOT AREA: 1.14 acres DESIGN FLOW: 360gpd L.T.A.R.: 0.3

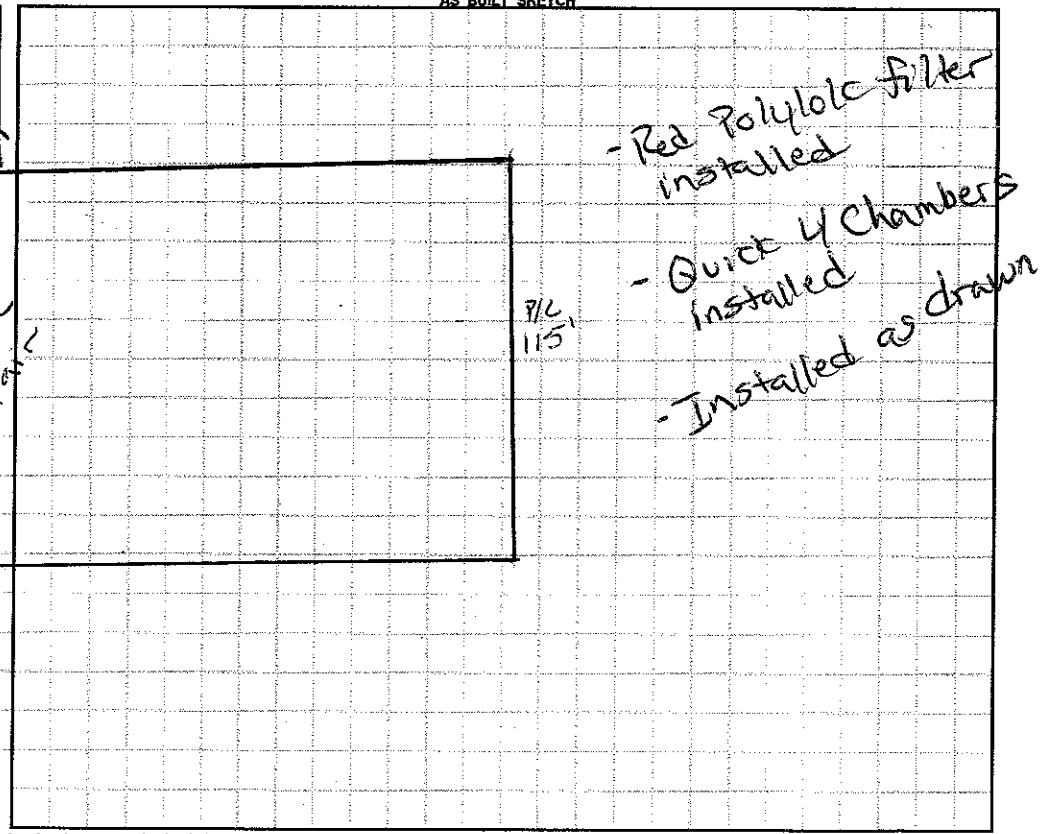
Septic Tank	1000 (gal)	STB	794-1000	Date	5-12-14	☑ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	☑ Residence	No. Bedrooms 3	Water Supply
Pump Tank	(gal)	PT		Date		System Description:	25% Reduction			☐ Business	No. Persons 6	☐ Private
Pump Make	Model			Serial #		Repair System Description:	25% Reduction			☐ Other	No. Employees	☑ Public
# Nitrification Fields	1 # Lines	4		Linear Ft:	300	Maintenance Agreement Required:	☐ YES	☑ NO		☐ Slab	☑ Crawl Space	☐ Community
Trench Width	36" Max. Trench Bottom Depth	36"		Gravel Depth	N/A		☑ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing		☐ Basement w/o plumbing

Comments / Conditions: Install a 25% Reduction System on contour with serial distribution.

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: Date: 3-20-14 Installed by: Kenny Madison

IMPROVEMENT PERMIT by: Justin Henderson Date: 3-18-14 OPERATION PERMIT by: Justin Henderson Date: 7-8-14

AUTHORIZATION TO CONSTRUCT by: Justin Henderson Date: 3-18-14 Existing System Inspected by: Date:

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