IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 204670

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

PIN # 4716153147 ✓

APPLICANT: Johnny Morrison APPLICANT ADDRESS: 122 Fortunes Trail

SITE ADDRESS: 121 Fortunes Trail PHONE: 704-902-4552 ALT. PHONE: N/A

SITE DIRECTIONS: Hwy 115N TL Scotts Creek Rd TL Fortunes Trail

SUBDIVISION: Morrison Fields SECTION: N/A LOT # 5 LOT AREA: 0.428 acres DESIGN FLOW: 360gpd L.T.A.R.: 0.3

Septic Tank 1000 (gal) STB K12-1000 Date 2-2-16
Pump Tank (gal) PT Date
Pump Make Model Serial #
Nitrification Fields 1 # Lines 4 Linear Ft: 300
Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A

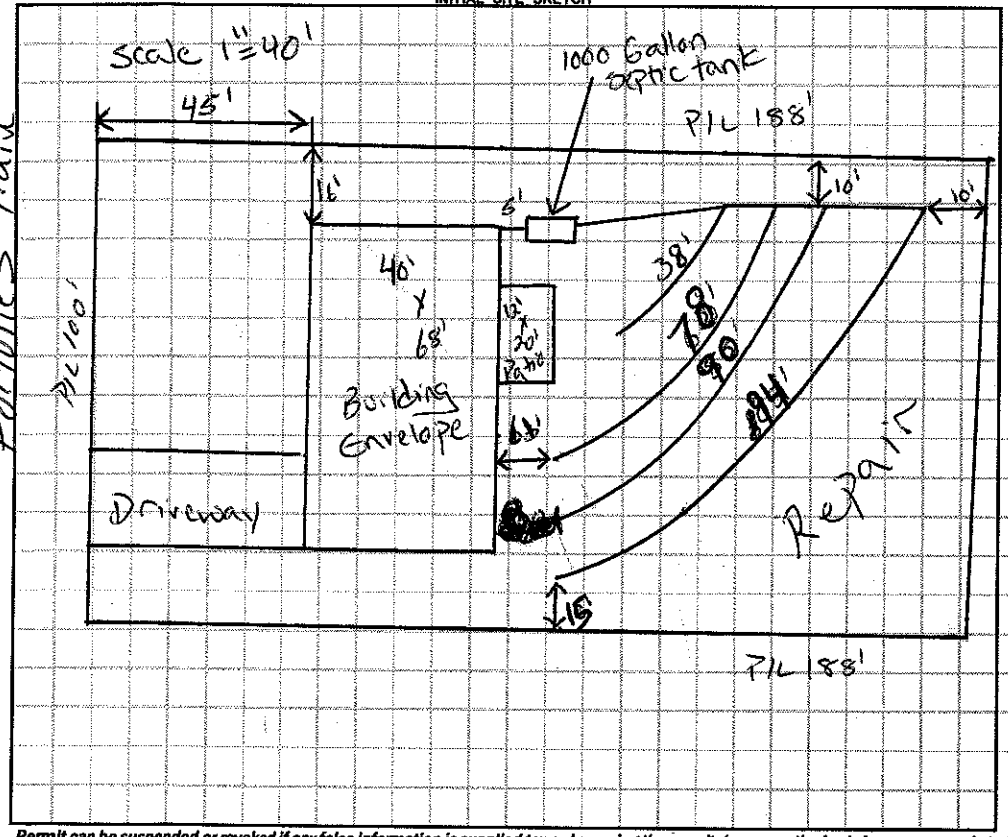
☐ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI
System Description: 25% Reduction
Repair System Description: 50% Reduction
Maintenance Agreement Required: ☐ YES ☑ NO
☑ GRAVITY ☐ PRESSURE

☑ Residence No. Bedrooms 3
☐ Business No. Persons 6
☐ Other No. Employees
☑ Slab ☑ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

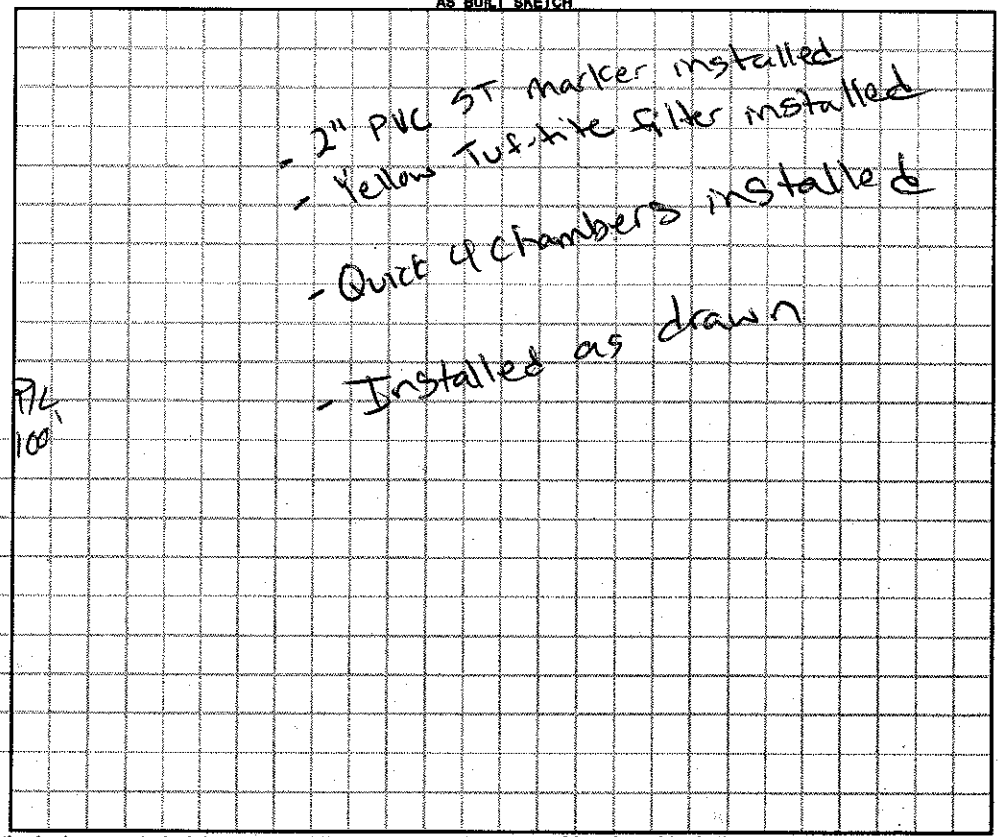
Water Supply: ☐ Private ☑ Public ☐ Community

Comments / Conditions: IMPROVEMENTS ONLY! Submit floor Plan prior to issuance of CA! 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: John Morrison Date: 8/20/14

IMPROVEMENT PERMIT by: Justin Henderson Date: 8-19-14

AUTHORIZATION TO CONSTRUCT by: Justin Henderson Date: 1-23-15

Installed by: Yountz Grading & Septic

OPERATION PERMIT by: Justin Henderson Date: 4-6-16

Existing System Inspected by: Date:

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