IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 211935

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

PIN # 4722168737

APPLICANT: Fawn Combs APPLICANT ADDRESS: 124 Feimster St.

SITE ADDRESS: 129 Poppy Ln. PHONE: 704-880-2555 ALT. PHONE: N/A

SITE DIRECTIONS: Hwy 70 W TL Old Mtn Rd TR Buffalo Shoals TL Poppy Ln

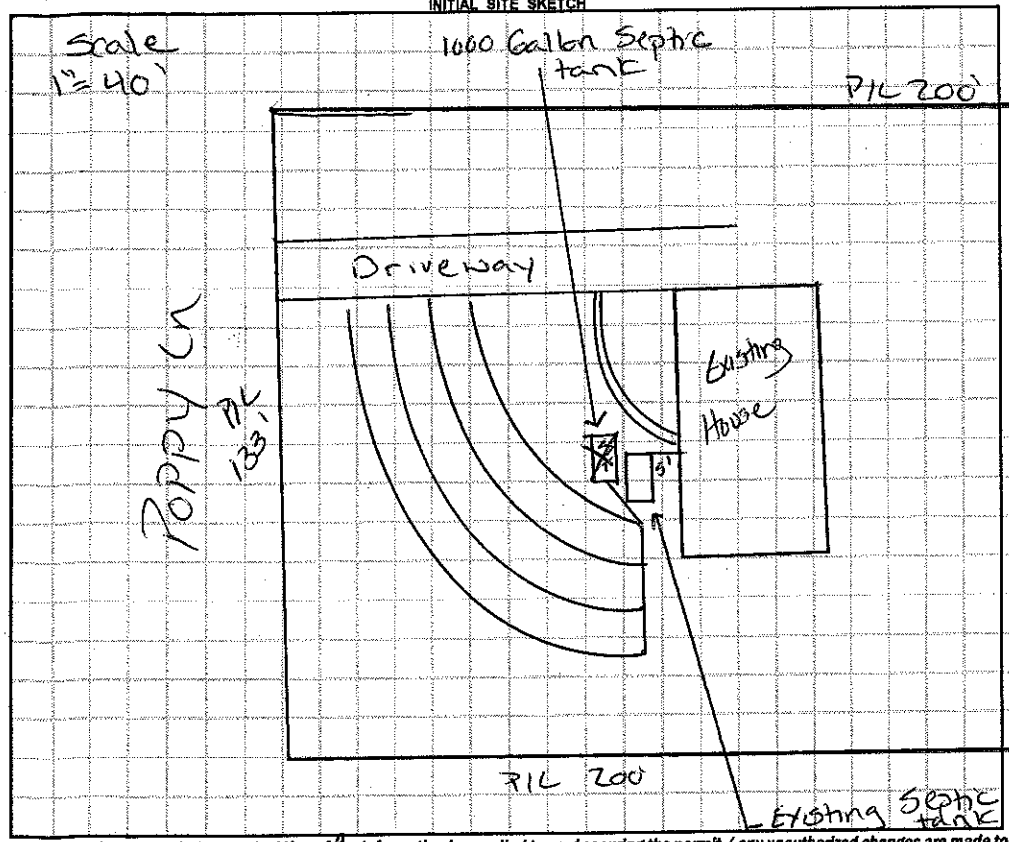
SUBDIVISION: A F Troutman Estate SECTION: N/A LOT # PT 106 LOT AREA: 0.62 acres DESIGN FLOW: 240 gpd L.T.A.R.: Existing

Septic Tank	1000 (gal)	STB	160-1000	Date	5-26-15	☐ New System	☑ Repair	☐ Expansion	System Type: I (II) III IV V VI
Pump Tank	(gal)	PT		Date		System Description:			
Pump Make		Model		Serial #		Repair System Description:	TANK		
# Nitrification Fields	Ex	# Lines	Ex	Linear Ft:	Ex	Maintenance Agreement Required:	☐ YES	☑ NO	
Trench Width	Ex	Max. Trench Bottom Depth	Ex	Gravel Depth	Ex		☑ GRAVITY	☐ PRESSURE	

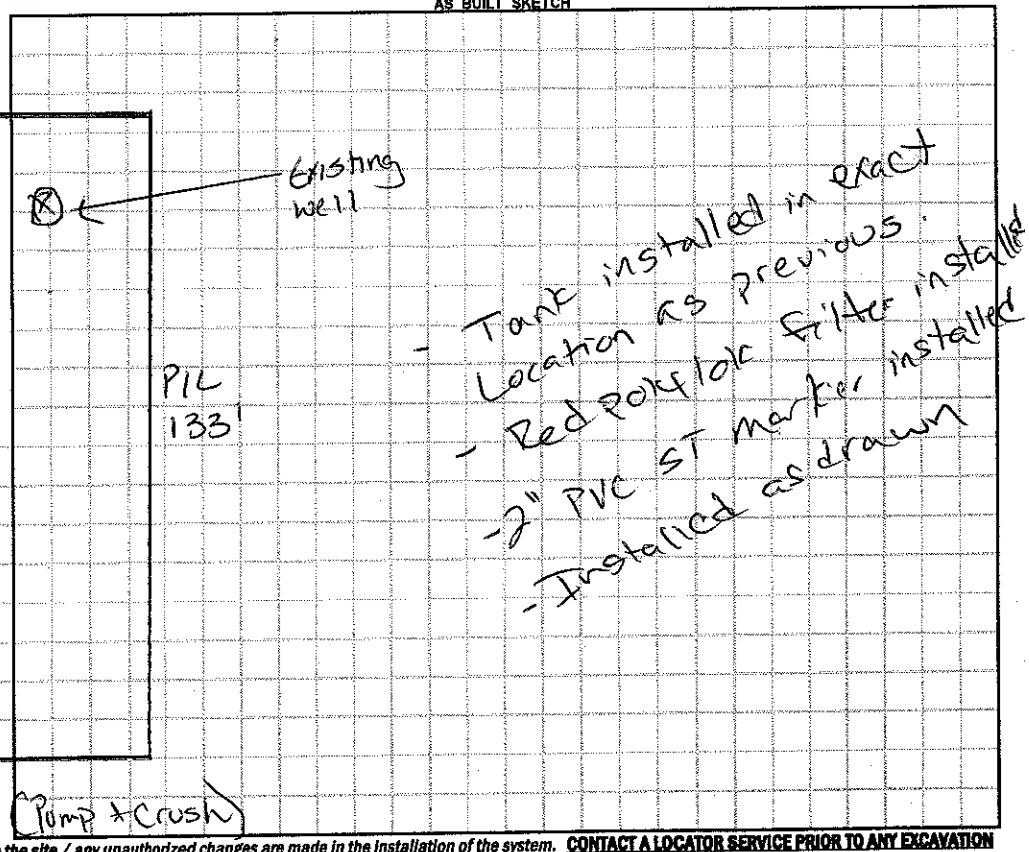
☑ Residence	No. Bedrooms	2	Water Supply
☐ Business	No. Persons	4	☑ Private
☐ Other	No. Employees		☐ Public
☐ Slab	☑ Crawl Space		☐ Community
☐ Basement w/plumbing	☐ Basement w/o plumbing		

Comments / Conditions: Pump & crush existing Septic tank. Set new Septic tank @ location shown below & connect to existing Drainfield.

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 plan 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: Fawn Combs Date: 7/14/15 Installed by: K & M Grading

IMPROVEMENT PERMIT by: Justin Henderson Date: 7-14-15 OPERATION PERMIT by: Justin Henderson Date: 7-17-15

AUTHORIZATION TO CONSTRUCT by: Justin Henderson Date: 7-14-15 Existing System Inspected by: Date:

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