IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 213004

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

PIN # 4730215821 ✓

APPLICANT: David Franklin APPLICANT ADDRESS: 121 Town Loop #105 Mooresville

SITE ADDRESS: 126 Spring Oaks Dr. PHONE: 980-444-0491 ALT. PHONE: N/A

SITE DIRECTIONS: State Park Rd to Lockhard Cir. TR Spring Oaks Dr. Property on Right

SUBDIVISION: Spring Oaks SECTION: N/A LOT # 2 LOT AREA: 2.18 acres DESIGN FLOW: 480 gpd L.T.A.R.: 0.25

Septic Tank 1600 (gal) STB 760-1600 Date 10-25
Pump Tank (gal) PT Date
Pump Make Model Serial #
Nitrification Fields 1 # Lines 6 Linear Ft: 480
Trench Width 36" Max. Trench Bottom Depth 35" Gravel Depth N/A

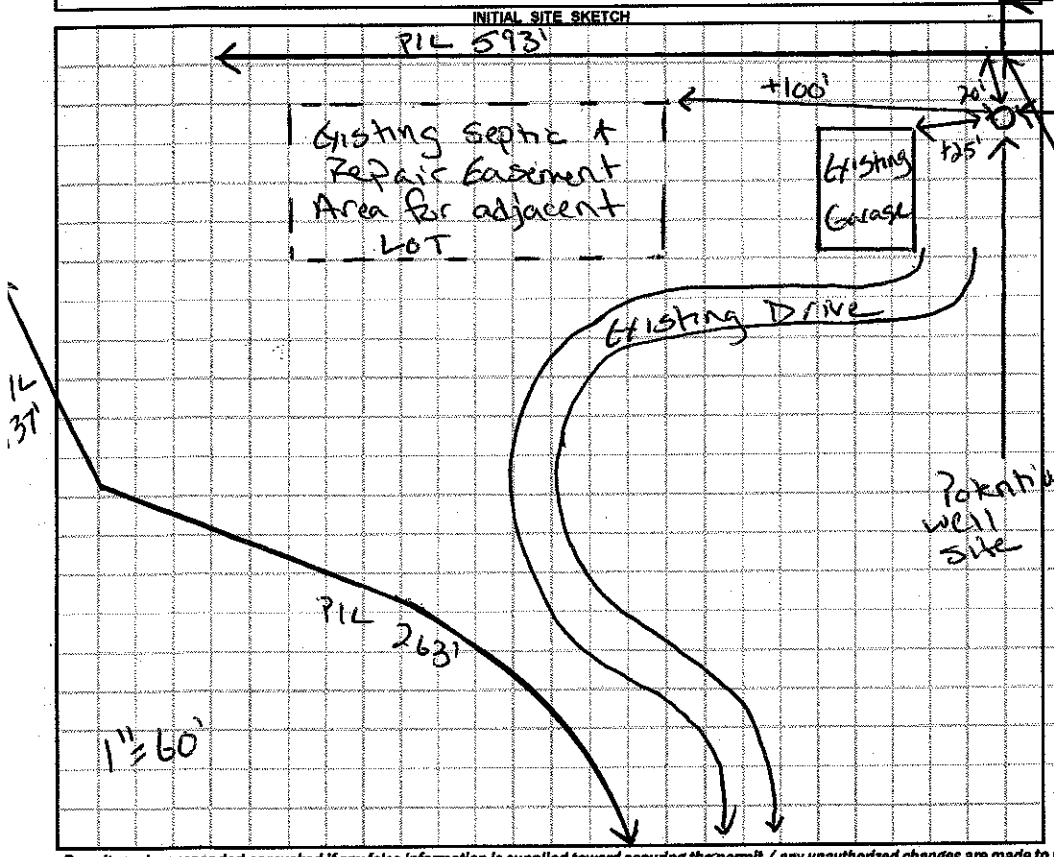
☐ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI
System Description: 25% Reduction
Repair System Description: DRIP
Maintenance Agreement Required: ☐ YES ☑ NO
☐ GRAVITY ☐ PRESSURE

☑ Residence No. Bedrooms 4
☐ Business No. Persons 8
☐ Other No. Employees
☐ Slab ☑ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

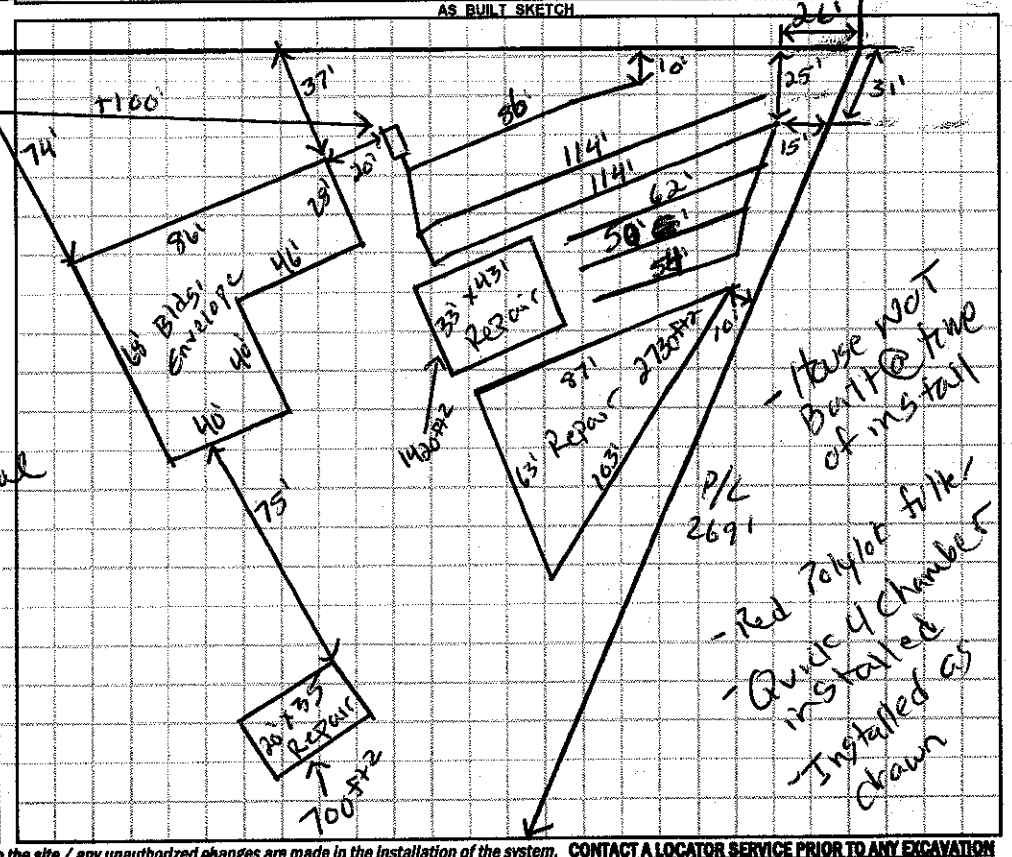
Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions: Install a 25% Reduction system on contour with serial distribution. Install trench bottoms @ 35" high side ~~N/A~~

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: David Franklin Date:
Installed by: Groundbreakers
IMPROVEMENT PERMIT by: Justin Henderson Date: 12-14-15
OPERATION PERMIT by: Justin Henderson Date: 2-19-16
AUTHORIZATION TO CONSTRUCT by: Justin Henderson Date: 12-14-15
Existing System Inspected by: Date:

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