# IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PERMIT# 16836 PIN# 4733414759 Erika Mullins DATE 6-15-07

OWNER OR APPLICANT ROBERT DOOLEY PHONE: Business 704-662-6492 Home 704-819-7256

ADDRESS PO BOX 4979 MOORESVILLE NC 28117

LOCATION 21 SOUTH @ Hill Haven ⓛ Dorom LAST HOUSE ON LEFT BY VFW

SUBDIVISION / BLOCK / SECTION / LOT / LOT AREA .9 SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .35

Septic Tank: EXISTING Gallons; STB 744 Date 6-31-93
Pump Tank: 1000 ↑ Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1035 Linear Feet 345'
No Lines 7 Trench Width 36" Max Trench Bottom Depth 18-30" Gravel Depth 12" ☒ Gravity ☐ Pressure

☐ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI
System Description: Initial System Installed
Repair System Description: LP 50%
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Persons
☐ Business No. Employees
☐ Other

Water Supply: ☒ Individual ☐ Public ☐ Community

☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments/Conditions: ① SEE Installed System Permit for Initial SYSTEM ② This permit is issued for a new repair area to be at the back right of the property and A new well site proposed behind the house in

Comments/Conditions: the old repair area

INITIAL SITE SKETCH

SEE ATTACHED Installed Permit # NEW REPAIR DESIGN

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. Improvement Permit with plat valid without expiration. ☐ Improvement Permit with site plan valid for sixty months ☒ Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: [signature] date 6/15/07

Improvement Permit by: date

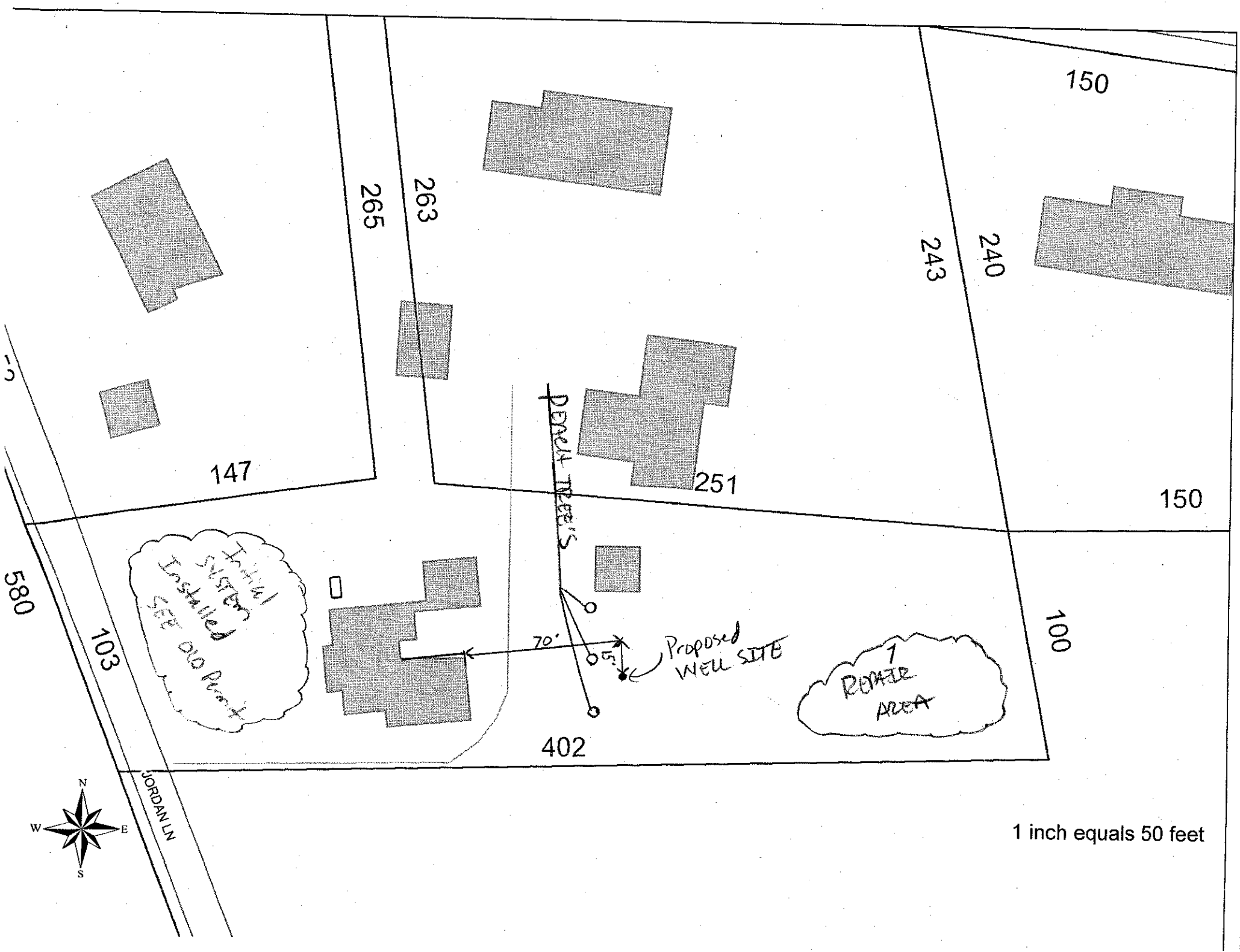
Authorization to Construct by: date

Installed by: Mike Ingle

Operation Permit by: [redacted] date 6-15-07

Existing System Inspection by: date

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK


150
265
263
243
240
147
251
150
PERCH TEE'S
Initial System Installed See Old Print
580
103
70'
5'
Proposed WELL SITE
1 REPAIR AREA
100
402
JORDAN LN
N
W
E
S
1 inch equals 50 feet