IREDELL COUNTY HEALTH DEPARTMENT

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

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

PIN # 4740628438

APPLICANT: BETTY LAWSON APPLICANT ADDRESS:

SITE ADDRESS: 336 FLOWER HOUSE LOOP PHONE: ALT. PHONE: 704 500 9629

SITE DIRECTIONS: 21/115 N / - TL 1ST FLOWER HOUSE LOOP - CORNER OF HAWKS LANDING

SUBDIVISION: HAWKS LANDING SECTION: -- LOT # 1 LOT AREA: .885 DESIGN FLOW: 360 L.T.A.R.: EXISTING

Septic Tank EXISTING (gal) STB Date

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines 4 Linear Ft: SEE ABOVE

Trench Width 36" Max. Trench Bottom Depth EXISTING Gravel Depth —

☑ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI

System Description: CONVENTIONAL + 25% REDUCTION

Repair System Description: LP PBPS

Maintenance Agreement Required: ☐ YES ☑ NO

☑ GRAVITY ☐ PRESSURE

☑ Residence ☐ Business ☐ Other ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement w/o plumbing

No. Bedrooms 3 No. Persons 6 No. Employees

Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions:

ADD 30' TO UPPER LINE - 18' TO LINE 2 - 16' TO LINE 3 - 14' TO LINE 4 = 68'

INITIAL SITE SKETCH

- EQUIVALENT TO 400' OF CONVENTIONAL

SEE ROLLANS SOIL & ENVIRONMENTAL SERVICES.

AS BUILT SKETCH

ADDED 76' FEET INSTALLED AS SHOWN ON PLAN BA

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: 4/30/13 Installed by: ORDISSON

IMPROVEMENT PERMIT by: Date: 4/25/13 OPERATION PERMIT by: Date: 5-13-13

AUTHORIZATION TO CONSTRUCT by: Date: 4/25/13 Existing System Inspected by: Date:

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