Over & Redraw

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 143256 PIN# 4740886396.000

OWNER OR APPLICANT Dennis Lauffenburger PHONE: Business 704 528-2000 Home 704 663-4408 DATE 6/30/08

ADDRESS 410 Normandy Rd. Mooresville NC

LOCATION 115 N TR Oswalt Amity, 148 Oswalt Amity

SUBDIVISION N/A BLOCK / SECTION ____ LOT ____ LOT AREA 8.2 ac SITE CLASS. P5 DESIGN FLOW 375 L.T.A.R. .25

Septic Tank: 1000 Gallons; STB 312 Date 2/3/08

Pump Tank: 1000 Gallons; PT 27 .4 HP Date Dellinger

Pump Make: Zoeller Model RN152-13 Serial No. ____

Nitrification Field: No Fields 1 Square Feet 1,125 Linear Feet 375

No Lines 5 @ 75' Trench Width 26 Max Trench Bottom Depth 38

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

System Description: Pump to 25% Reduction

Repair System Description: Same

Maintenance Agreement Required: ☐ Yes ☑ No

Gravel Depth N/A ☐ Gravity ☑ Pressure ☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

☑ House/Mod. Home No. Bedrooms ____

☐ Mobile Home No. Persons ____

☑ Business No. Employees 15

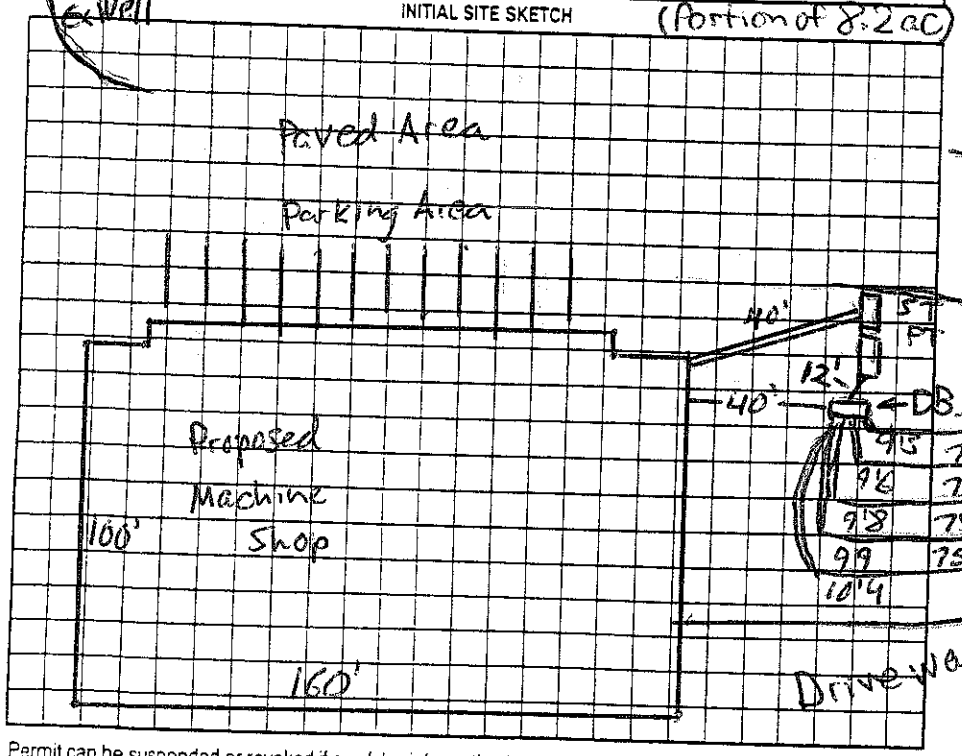
☑ Other Machine Shop

Water Supply: ☐ Individual ☑ Public Well ☐ Community

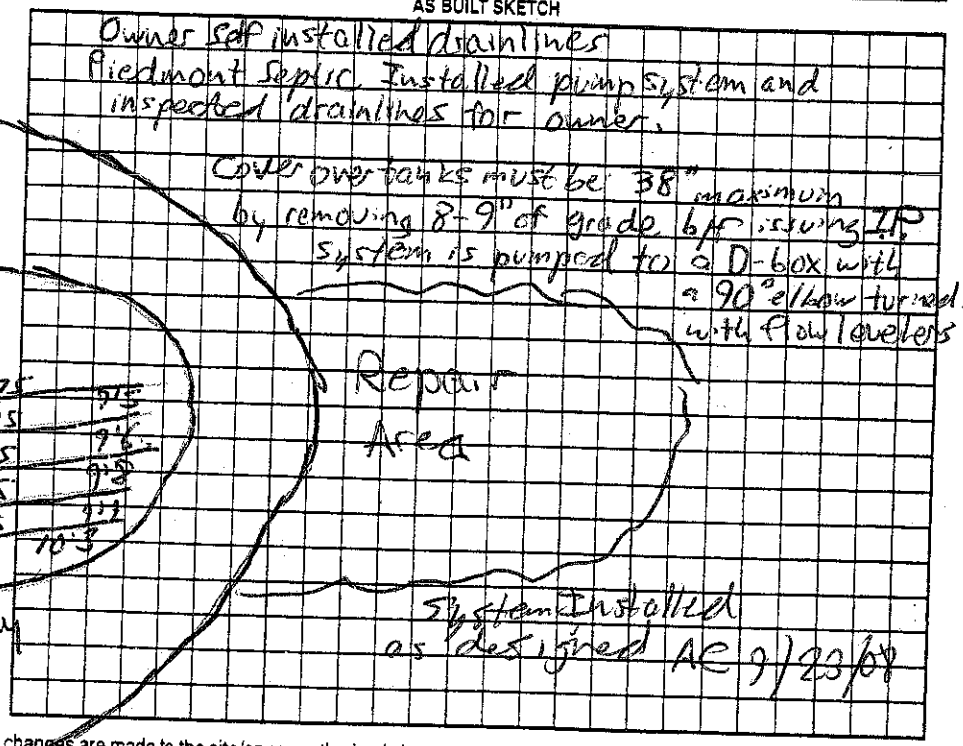
Comments:/Conditions: 1"=50' Exis shop Bldg. Maintain min 100' well separation from system & repair

Comments:/Conditions: place drainfield min 40' from p. building to avoid unsuitable rock/soil area.

INITIAL SITE SKETCH (Portion of 8.2 ac)



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 Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Permit with plat valid without expiration ☐ Improvement Permit with site plan valid for sixty months ☑

Signed: RC Lauffenburger date 9-23-08

Improvement Permit by: Anthony Coker J. date 8/30/08

Authorization to Construct by: Anthony Coker J. date 6/30/08

Installed by: Owner installed Drainlines Piedmont Septic Installed Pump

Operation Permit by: Anthony Coker J. RS date 9/23/08

Existing System Inspection by: ____ date ____

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