IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 214689

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

PIN # 4746558746

APPLICANT: Bruce Porter APPLICANT ADDRESS: 2143 Mocksville Hwy

SITE ADDRESS: 671 Turnersburg Hwy PHONE: 704-878-9314 ALT. PHONE: N/A

SITE DIRECTIONS: Hwy 21N Property on Left ~ 1/2 mile Past Food Lion

SUBDIVISION: Iredell Heights SECTION: N/A LOT # 574-577 LOT AREA: 0.56 acres DESIGN FLOW: Existing L.T.A.R.: Existing

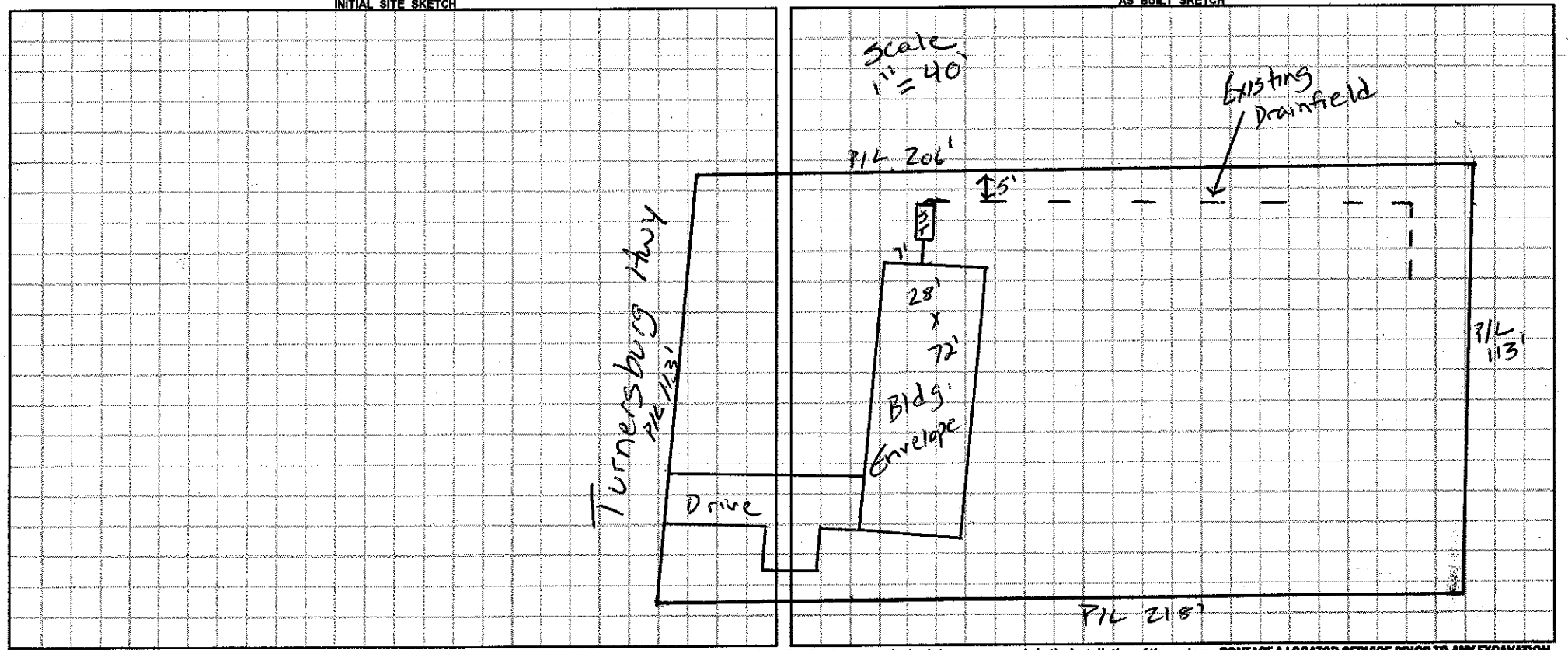
Septic Tank	Existing (gal)	STB	Date	☐ New System ☐ Repair ☐ Expansion System Type: ☑ II ☐ III ☐ IV ☐ V ☐ VI	☑ Residence	No. Bedrooms	Ex	Water Supply
Pump Tank	(gal)	PT	Date	System Description: Existing	☐ Business	No. Persons	Ex	☐ Private
Pump Make	Model		Serial #	Repair System Description:	☐ Other	No. Employees		☑ Public
# Nitrification Fields	Ex # Lines Ex		Linear Ft: Ex	Maintenance Agreement Required: ☐ YES ☑ NO	☐ Slab	☑ Crawl Space		☐ Community
Trench Width	Ex Max. Trench Bottom Depth	Ex	Gravel Depth Ex	☑ GRAVITY ☐ PRESSURE	☐ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions:

- Maintain a minimum of 5' between septic system & Building Foundation. House to be rebuilt in exact footprint of previous home that burned.

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: Bruce Alan Porter Date: 11-12-15 Installed by:

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Justin D Henderson Date: 11-12-15

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