IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 211123

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

PIN # 4751-70-3733.000

APPLICANT: Miranda Frye APPLICANT ADDRESS: 274 S. Church St. Mooresville NC 28115

SITE ADDRESS: 143 Overlash Rd. Troutman NC 28166 PHONE: 704-658-0235 ALT. PHONE: 704-634-4721

SITE DIRECTIONS: Ostwalt Amity, Jr. Overlash, Site on L

SUBDIVISION: Walter J. Harmon SECTION: LOT # 1 LOT AREA: 1.169 Acre DESIGN FLOW: 240 GPD L.T.A.R.: .25 I / .225 R

Septic Tank 1000 (gal) STB 1012 Date 3-27-15 ☒ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI

Pump Tank ____ (gal) PT ____ Date ____ System Description: 25% Reduction - Gravity

Pump Make ____ Model ____ Serial # ____ Repair System Description: LP-PTOPS

Nitrification Fields 1 # Lines 3 @ 80' Linear Ft: 240' Maintenance Agreement Required: ☐ YES ☒ NO

Trench Width 36" Max. Trench Bottom Depth *27" * Gravel Depth N/A ☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 2 **Water Supply**

☐ Business No. Persons 4 ☐ Private

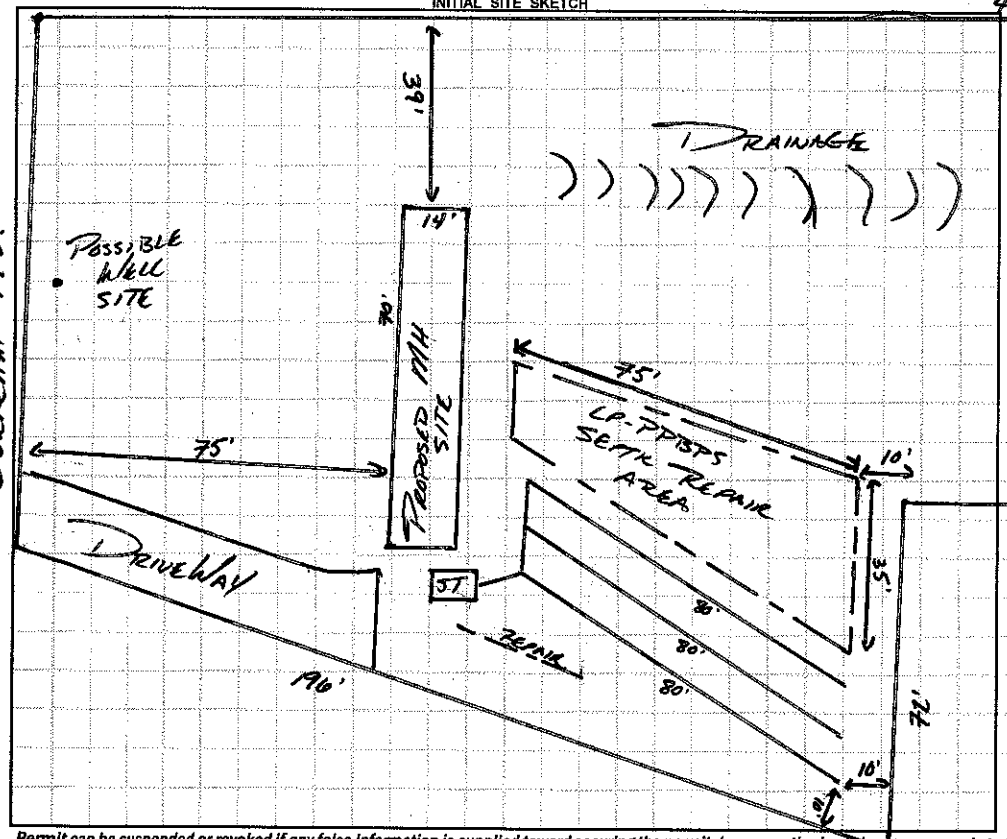
☐ Other No. Employees ____ ☐ Public

☐ Slab ☒ Crawl Space ☒ Community

☐ Basement w/plumbing ☐ Basement w/o plumbing

Comments / Conditions: Maintain 5' Separation From Home With Septic System. Install @ 27" Trench Bottom. - Deeper Soils In Repair Area, But Lower LTAR.

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed 1" = 40'
Quick 4 Drainfield
essentially as Drawn

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: Walter Z Date: 8-6-15 Installed by: Tommy Frye

IMPROVEMENT PERMIT by: ~~E-MAILED~~ Date: AUG 04 2015 OPERATION PERMIT by: Date: 9/16/15

AUTHORIZATION TO CONSTRUCT by: ~~E-MAILED~~ Date: AUG 04 2015 Existing System Inspected by: Date:

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