IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 200978

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

PIN # 4752900672

APPLICANT: Bonnie Moore APPLICANT ADDRESS: 224 Jimmy Dr Statesville NC 28677

SITE ADDRESS: 230 Jimmy Dr Statesville NC 28677 PHONE: 704-872-1385 ALT. PHONE: N/A

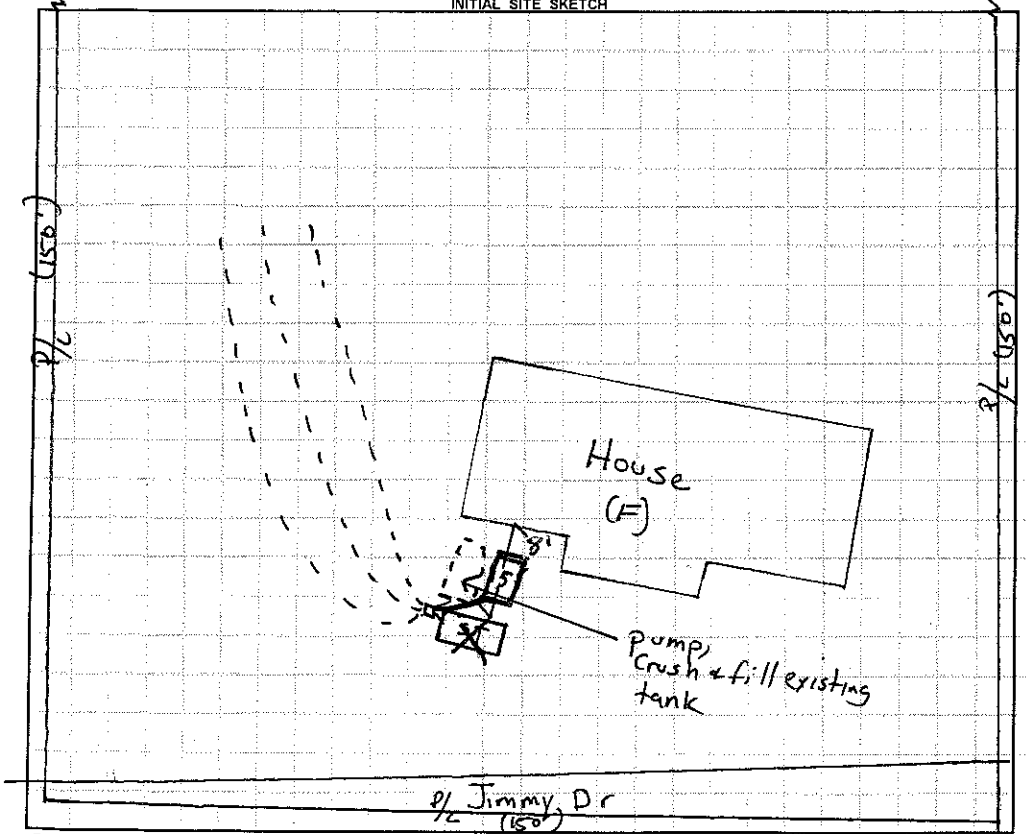
SITE DIRECTIONS: Salisbury Hwy to Shiloh Church to Jimmy Dr.

SUBDIVISION: N/A SECTION: N/A LOT # N/A LOT AREA: .5 DESIGN FLOW: 240 L.T.A.R.: N/A

Septic Tank	1000 (gal)	STB	160-1000	Date	4-28-14	☐ New System	☒ Repair	☐ Expansion	System Type: I (II) III IV V VI	☐ Residence	No. Bedrooms	2	Water Supply
Pump Tank	N/A (gal)	PT		Date		System Description:	Tank Replacement			☐ Business	No. Persons	4	☒ Private
Pump Make	N/A	Model		Serial #		Repair System Description:	N/A			☐ Other	No. Employees		☐ Public
# Nitrification Fields	EX-N/A	# Lines	EX-N/A	Linear Ft:	EX-N/A	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☒ Crawl Space		☐ Community
Trench Width	EX-N/A	Max. Trench Bottom Depth	EX-N/A	Gravel Depth	EX-N/A	☒ GRAVITY	☐ PRESSURE			☐ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions: Equal feed existing lines with d box and speed levels. maintain 6" of cover over new tank. pump, crush and fill existing tank

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: Bonnie A Moore Date: 1-31-14 Installed by: K & M Grading

IMPROVEMENT PERMIT by: Robert H. Lee Date: 01/29/14 OPERATION PERMIT by: Justin Henderson Date: 7-11-14

AUTHORIZATION TO CONSTRUCT by: Robert H. Lee Date: 01/29/14 Existing System Inspected by: Date:

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