IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 215125

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

PIN # 4756791099

APPLICANT: Roxanna LeVan APPLICANT ADDRESS: 1602 Davie Ave.

SITE ADDRESS: 404 Baymount Drive PHONE: 704-437-0209 ALT. PHONE: N/A

SITE DIRECTIONS: Hwy 21 N TR Jane Sowers TL Baymount to Racquet

SUBDIVISION: N/A SECTION: N/A LOT # N/A LOT AREA: 1.03 acres DESIGN FLOW: 480 gpd L.T.A.R.: Existing

Septic Tank	1000 (gal)	STB	1160	Date	10-19-15	☐ New System	☑ Repair	☐ Expansion	System Type: I II III IV V VI
Pump Tank	N/A (gal)	PT	N/A	Date	N/A	System Description:			
Pump Make	N/A	Model	Model U	Serial #	PL-68	Repair System Description:	TANK		
# Nitrification Fields	Ex	# Lines	Ex	Linear Ft:	Ex	Maintenance Agreement Required:	☐ YES	☑ NO	
Trench Width	Ex	Max. Trench Bottom Depth	Ex	Gravel Depth	Ex		☑ GRAVITY	☐ PRESSURE	

☑ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing

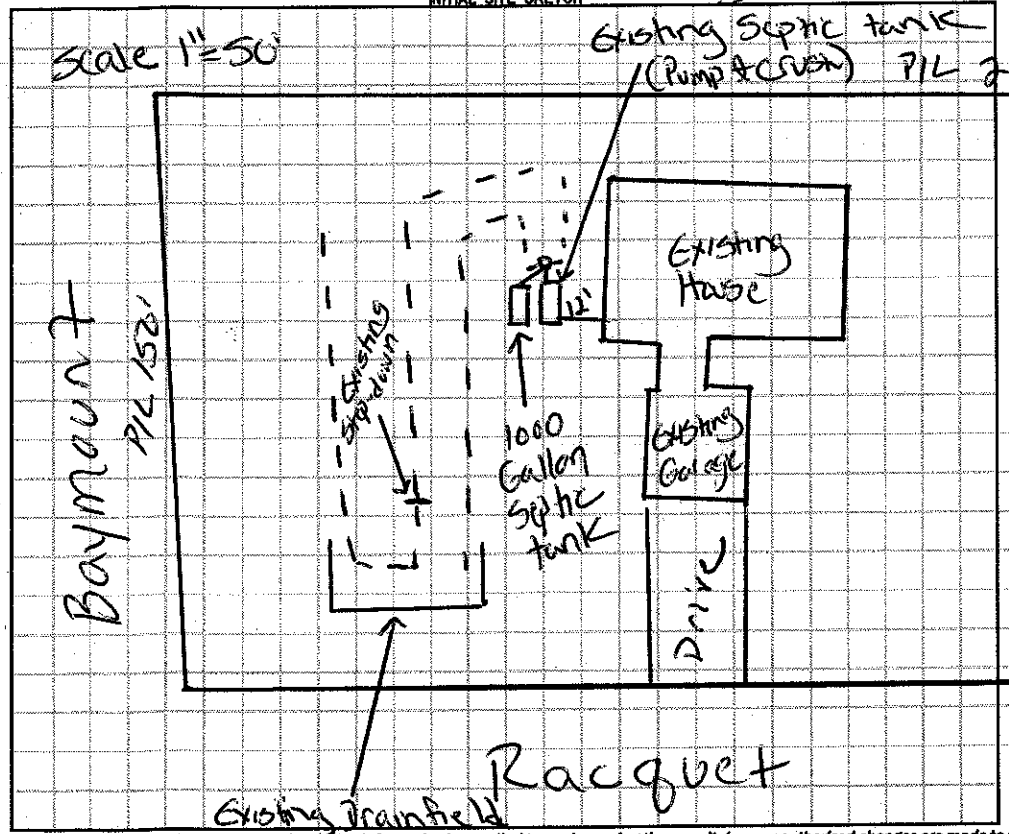
No. Bedrooms 4 No. Persons 8 No. Employees ☑ Crawl Space

Water Supply: ☐ Private ☑ Public ☐ Community

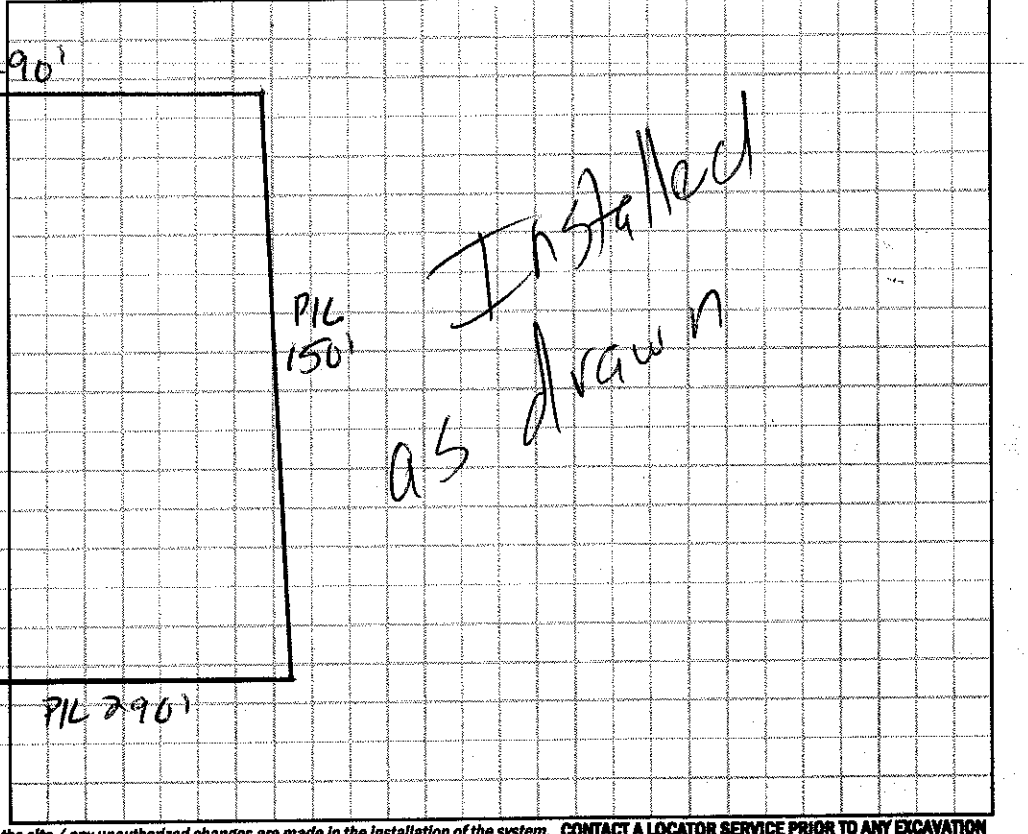
☐ Basement w/o plumbing

Comments / Conditions: Pump & crush existing septic tank. Set new septic tank @ location shown below & connect to existing drainfield. Replace existing D-box if needed.

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: RLeVan Date: 2-1-16 Installed by: K+M Grading

IMPROVEMENT PERMIT by: Justin Henderson Date: 11-30-15 OPERATION PERMIT by: [signature] Date: 02/12/15

AUTHORIZATION TO CONSTRUCT by: Justin Henderson Date: 11-30-15 Existing System Inspected by: Date:

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