IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 205672

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

PIN # 4757366706

APPLICANT: Jesse Bragg APPLICANT ADDRESS: 115 Ridgeae Ln Statesville NC 28625

SITE ADDRESS: 150 Sandalwood Ln Statesville NC 28625 PHONE: 828-514-0378 ALT. PHONE: N/A

SITE DIRECTIONS: N 21 cross 77 T/L Maple Creek Dr T/L Ravencrest Dr T/L Sandalwood Ln

SUBDIVISION: The Highlands at Maple Creek SECTION: N/A LOT # 29 LOT AREA: 2.6476 ac DESIGN FLOW: 360 L.T.A.R.: 0.25

Septic Tank 1000 (gal) STB 1012 Date 10-4-14
Pump Tank 1000 (gal) PT 17 Date 12-3-15
Pump Make Goulds Model PE51M Serial # 4153302?
Nitrification Fields 1 # Lines 6 Linear Ft: 360
Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A

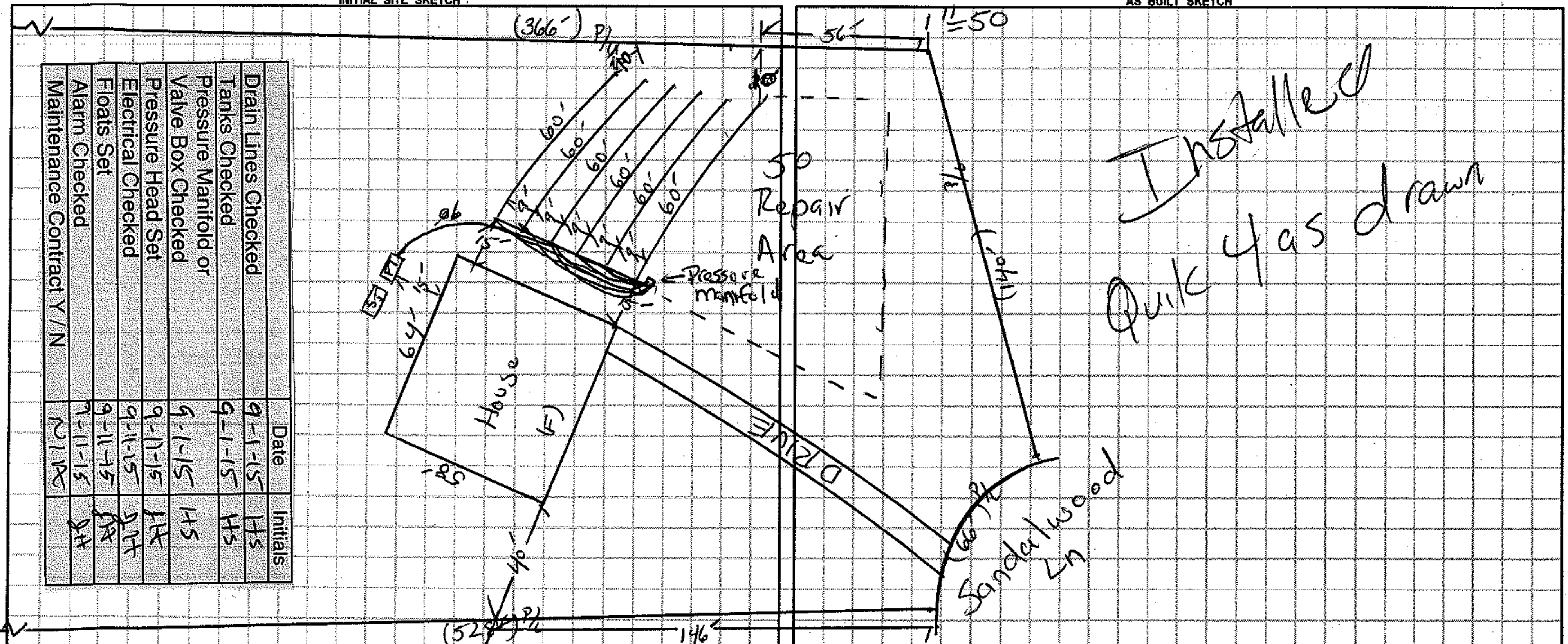
[X] New System [ ] Repair [ ] Expansion System Type: I II [III] IV V VI
System Description: 25% Reduction - Pump
Repair System Description: 50% Reduction
Maintenance Agreement Required: [ ] YES [X] NO
[ ] GRAVITY [X] PRESSURE

[X] Residence No. Bedrooms 3
[ ] Business No. Persons 6
[ ] Other No. Employees
[ ] Slab [ ] Crawl Space
[X] Basement w/plumbing [ ] Basement w/o plumbing

Water Supply: [ ] Private [X] Public [ ] Community

Comments / Conditions: Install 25% reduction on contour with pressure distribution.

INITIAL SITE SKETCH AS BUILT SKETCH



	Date	Initials
Drain Lines Checked	9-1-15	HS
Tanks Checked	9-1-15	HS
Pressure Manifold or Valve Box Checked	9-1-15	HS
Pressure Head Set	9-11-15	JH
Electrical Checked	9-11-15	JH
Floats Set	9-11-15	JH
Alarm Checked	9-11-15	JH
Maintenance Contract Y / N	N/A	

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.* [X] **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: Jesse Bragg Date: 4/21/15 Installed by: Tommy Frye

IMPROVEMENT PERMIT by: [signature] Date: 03/24/15 OPERATION PERMIT by: Justin Henderson Date: 9-11-15

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 03/24/15 Existing System Inspected by: Date:

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