IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 216647

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

PIN # 4760-15-4424

APPLICANT: Sherry King APPLICANT ADDRESS: 121 Astor Road Mooresville, NC

SITE ADDRESS: 107 Howard Lane Troutman, NC PHONE: 704-658-1480 ALT. PHONE:

SITE DIRECTIONS: Rt 21 N from Mooresville → Right on Shinnville Rd → Left on Weathers Creek Rd → Left onto Howard Lane → On Left

SUBDIVISION: Countryview Estates SECTION: 2 LOT # 13 LOT AREA: 0.67 acres DESIGN FLOW: 240 gal/day L.T.A.R.: —

Septic Tank 1000 (gal) STB Date

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields EXISTING # Lines Linear Ft:

Trench Width Max. Trench Bottom Depth Gravel Depth

☐ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI

System Description: EXISTING

Repair System Description:

Maintenance Agreement Required: ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 3

☐ Business No. Persons 3

☐ Other No. Employees

☐ Slab ☒ Crawl Space

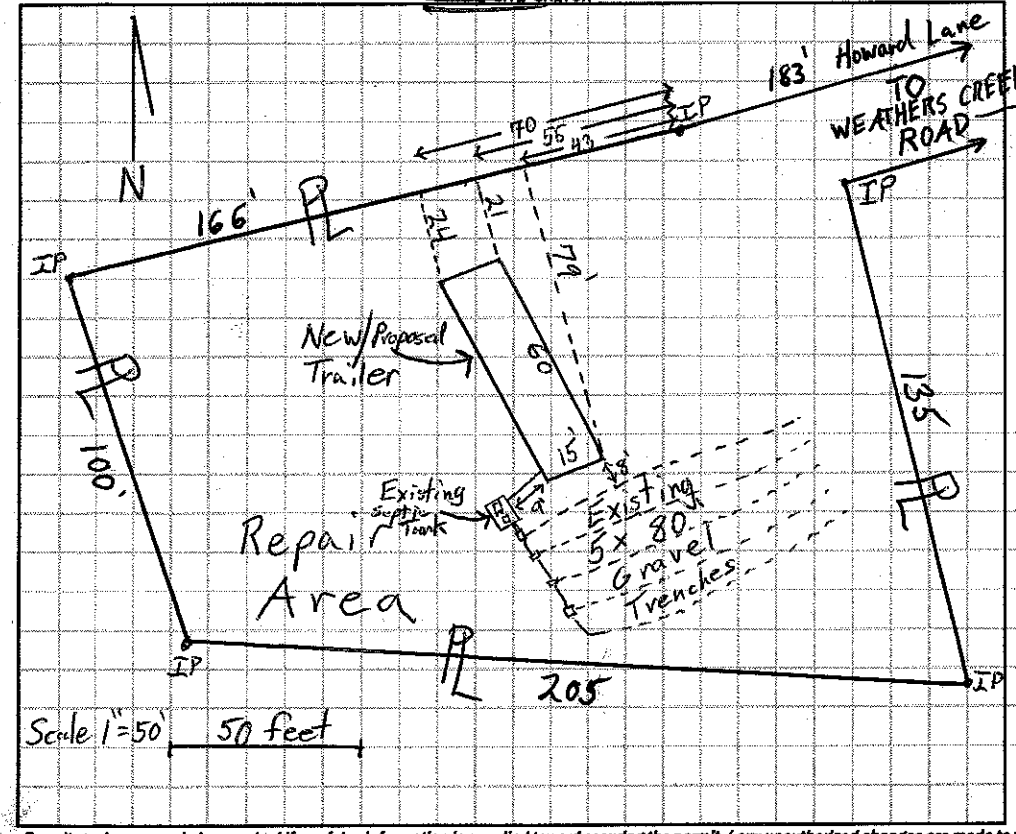
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☒ Community

Comments / Conditions: Recommend pumping tank @ time of connection w/ new residence and every 3-5 years thereafter. Divert all surface drainage + downspout drainage away from drainfield + septic tank. Structure must be placed where indicated.

Applicant appears to have applied for a 2 bedroom existing system however original permit was for 3 bedrooms.

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**

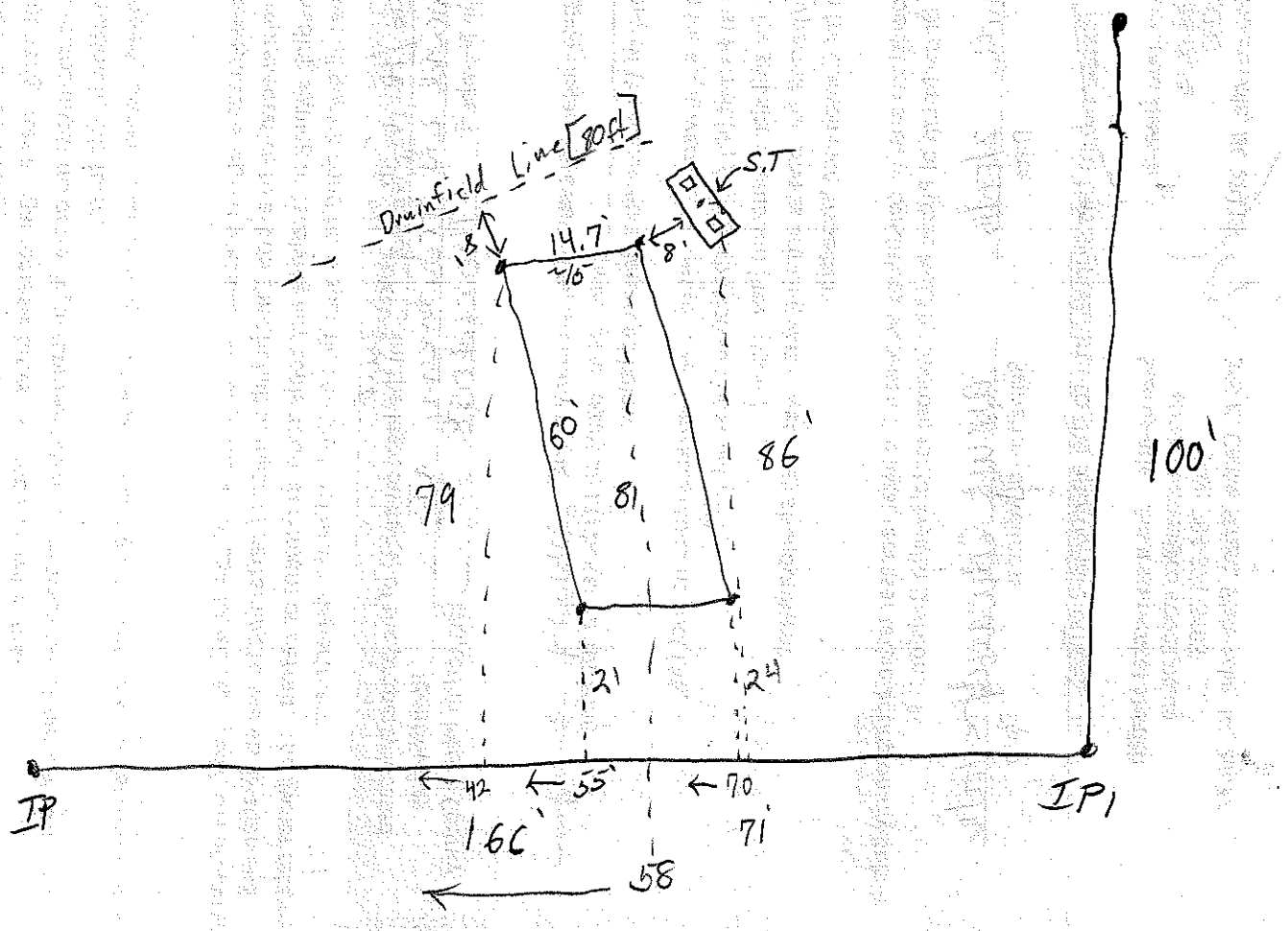
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☐ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Sherry King Date: 2-26-16 Installed by:

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

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Tom Shuck Date: 2-25-16

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


Drainfield Line [80ft]
S.T
3'
14.7'
8'
60'
86'
79'
81'
100'
21'
24'
42'
55'
70'
IP
IP1
166'
71'
58'