Auth. to Construct

4760 82 6478

1:00

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / ~~CERTIFICATE OF COMPLETION~~ / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 0606614 DATE 6/16/97 TAX MAP NO. ~~4760827407~~ 4760 82 6478 Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR Ronnie Kennerly PHONE: Business Pager 623-8209 Home 662-3672

ADDRESS 159 Elm St Mooresville, NC 28115

LOCATION Mooresville - 21 N TL Shinnville Rd on Right before Perry Park Ln. (1/4 Mile past Brawley Rd)

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 2.755 Acre SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. .3

Septic Tank: 1000g Gallons; STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines ~~4~~ Trench Width 36" Max Trench Bottom Depth 18"-24" Gravel Depth 12"

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

System Description Gravity - Conventional

Repair System Description: Grav/Pump-Conventional

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms 2 No. Employees ____

☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

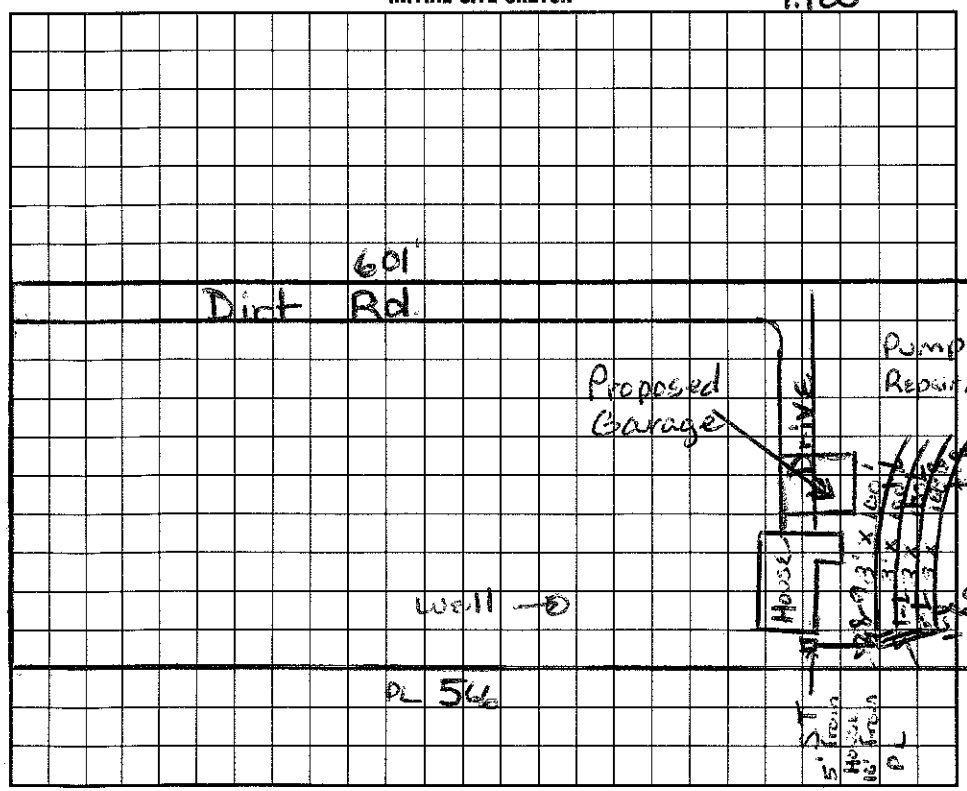
Water Supply: ☒ Individual ☐ Community ☐ Public

Comments: 5@80'x31

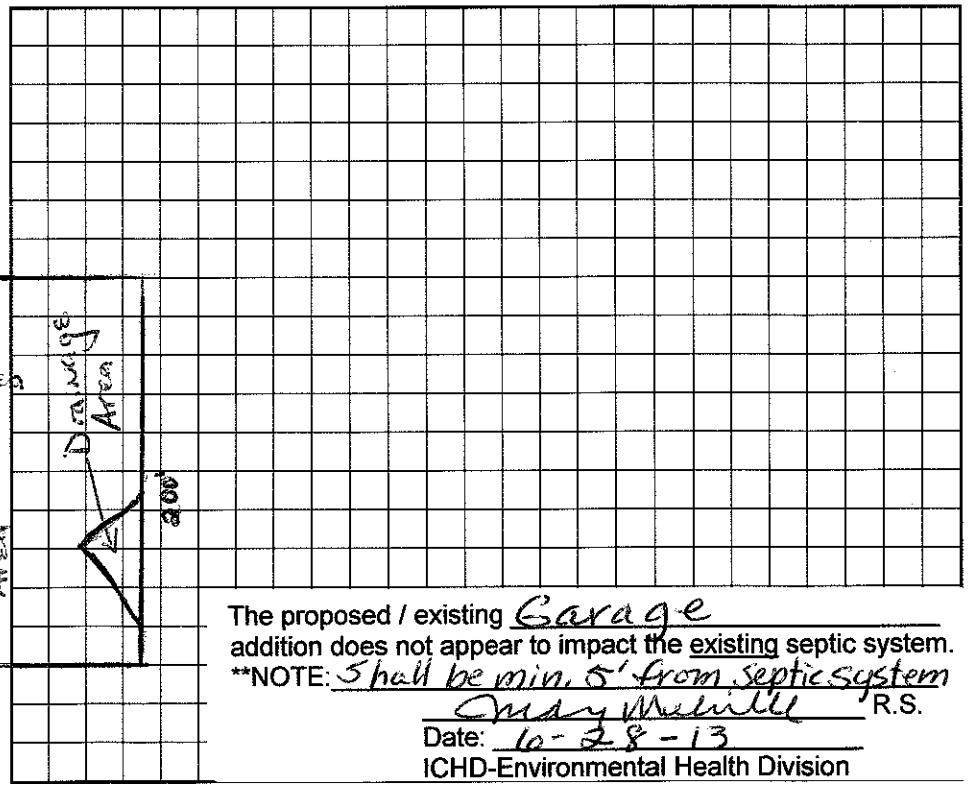
Comments:

INITIAL SITE SKETCH

1:100



AS BUILT SKETCH



The proposed / existing Garage addition does not appear to impact the existing septic system.

**NOTE: 5' shall be min. 5' from septic system

Mary Melville R.S.

Date: 6-28-13

ICHD-Environmental Health Division

I understand that this 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. Improvement Permit is valid for 60 months from date of issuance.

Signed: Ronnie Kennerly

Improvement Permit by: Marian H.H. Dotson date 6/16/97

~~Existing System~~ Inspection by: Marian H.H. Dotson date 6/16/97

Installed by: Leon Benton

Certificate of Completion by: Wesley Sparks RS. date 8/1/97

Operation Permit by: Wesley Sparks RS date 8/1/97

HEALTH DEPT. COPY: WHITE INSPECTION COPY (FINAL): GREEN OWNER COPY (FINAL): YELLOW INSPECTION COPY (INITIAL): PINK OWNER COPY (INITIAL): GOLD

Auth. to Construct