IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 209318

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

PIN # 4761-12-0267.000

APPLICANT: RAYMOND BELLER APPLICANT ADDRESS: 133 ROSEWOOD LN. MOORESVILLE NC 28117

SITE ADDRESS: 125 FALLEN ACORN DR. TROUTMAN NC PHONE: 262-515-6791 ALT. PHONE:

SITE DIRECTIONS: OSTWALT AMITY, TR WEATHERS CREEK, R FALLEN ACORN DR, SITE ON L

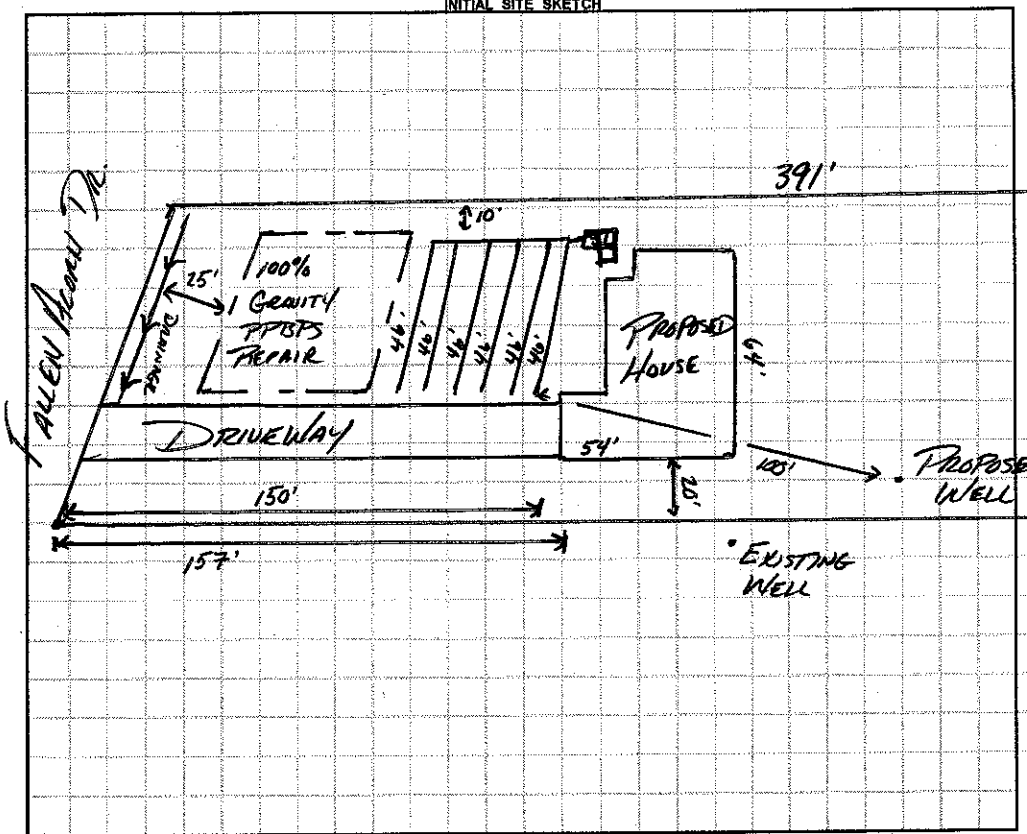
SUBDIVISION: OAK RIDGE SECTION: 2 LOT # 40 LOT AREA: .944 ACRE DESIGN FLOW: 360 GPD L.T.A.R.: .330

Septic Tank	1000 (gal)	STB	794	Date	7-20-15	☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI
Pump Tank	(gal)	PT		Date		System Description:	25% REDUCTION - GRAVITY		
Pump Make		Model		Serial #		Repair System Description:	PPBPS		
# Nitrification Fields	1	# Lines	6 @ 46'	Linear Ft:	276'	Maintenance Agreement Required:	☐ YES	☒ NO	
Trench Width	36"	Max. Trench Bottom Depth	36"	Gravel Depth	N/A		☒ GRAVITY	☐ PRESSURE	

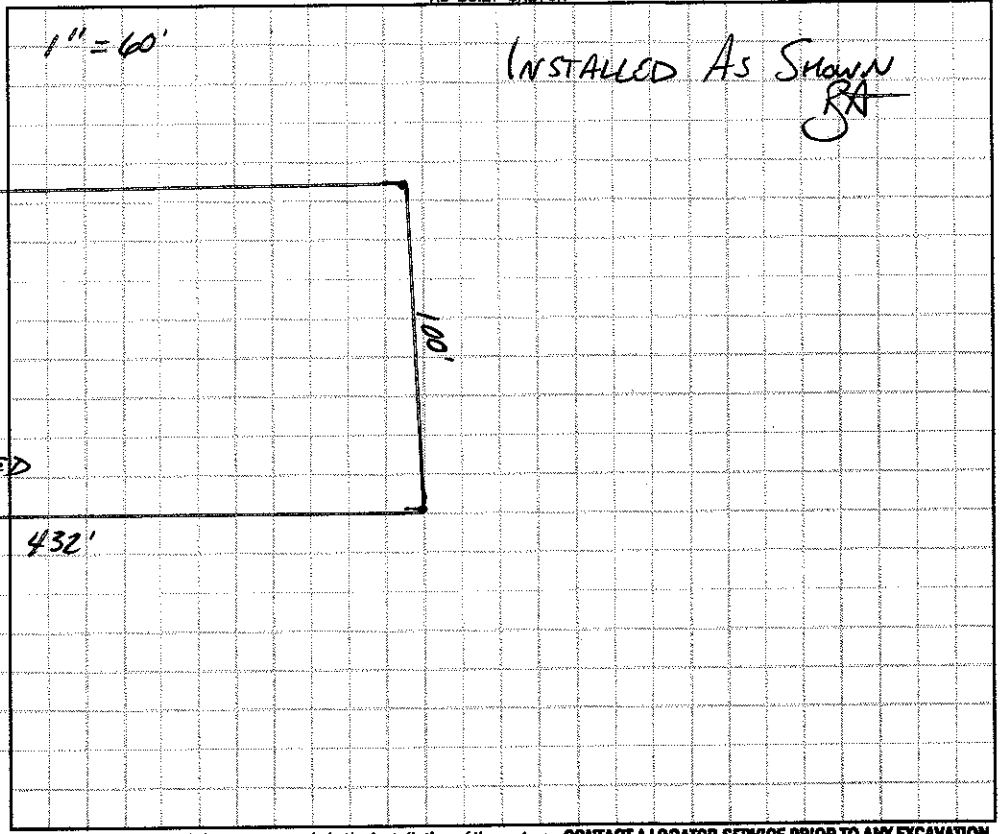
☒ Residence	No. Bedrooms	3	Water Supply		
☐ Business	No. Persons	6	☒ Private		
☐ Other	No. Employees		☐ Public		
☐ Slab	☒ Crawl Space		☐ Community		
☐ Basement w/plumbing			☐ Basement w/o plumbing		

Comments / Conditions: FOLLOW ALL SEPTIC RULES. MAINTAIN MINIMUM 50' FROM ANY WELL. USE END CAP DISTRIBUTION.

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: Amy Beller Date: 4-13-15

IMPROVEMENT PERMIT by: APPROVED Date: APR 15 2015

AUTHORIZATION TO CONSTRUCT by: APPROVED Date: APR 16 2015

Installed by: BASS GRADING

OPERATION PERMIT by: APPROVED Date: SEP 11 2015

Existing System Inspected by: Date:

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