IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# _____ PIN# _____ DATE 6-17-99

OWNER OR CONTRACTOR Lake Norman Rentals PHONE: Business 663 6199 Home _____

ADDRESS 364 Williamson Road Mooresville, N.C. 28117

LOCATION NOE TR Bethesta Rd TR Reuben on left before Pavements ents

SUBDIVISION Beechwood Est. BLOCK / SECTION _____ LOT 11 LOT AREA 1/2 acre SITE CLASS PS DESIGN FLOW 240 L.T.A.R. .3

Septic Tank: EX Gallons; STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 800 Linear Feet 267

No Lines 3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth _____

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

System Description: _____

Repair System Description: conv. Gravity

Maintenance Agreement Required: ☐ Yes ☐ No

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

☐ House/Mod. Home No. Bedrooms 2

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

☐ Other _____

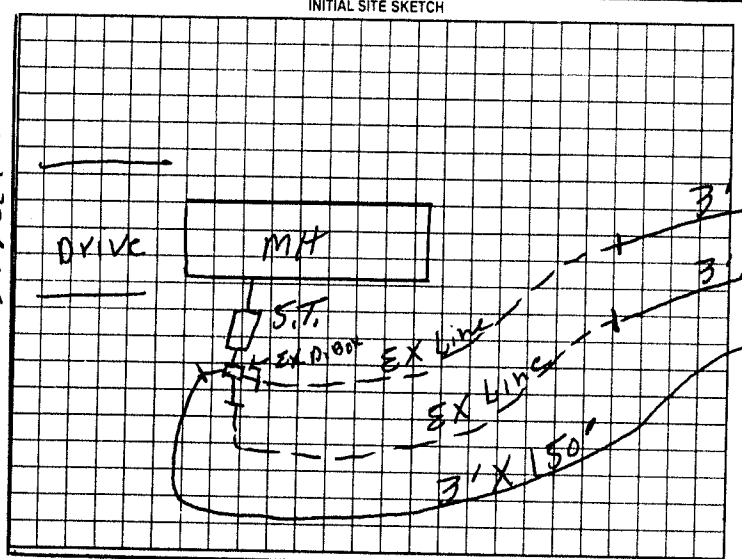
Water Supply: ☐ Individual ☐ Public ☑ Community

Comments/Conditions:

Check Sanitary Tee
Replace if necessary

Comments/Conditions

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. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: X Linda Rabbe date _____ Installed by: Esker Elder

Improvement Permit by: B. C. Moore date 6-7-99 Operation Permit by: Myrtle Cook IRS date 8-19-99

Authorization to Construct by: B. C. Moore date 6-7-99 Existing System Inspection by: _____ date _____

HEALTH DEPT. COPY WHITE OWNER COPY (FINAL) YELLOW OWNER COPY (INITIAL) PINK