IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 19499

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

PIN # 4770352634

APPLICANT: GINGER SPARKS APPLICANT ADDRESS: 106 SAWHORSE DR. Mooresville, NC 28115

SITE ADDRESS: 1319 TRIPLETT RD. CLEVELAND, NC 27013 PHONE: 704-450-7801 ALT. PHONE:

SITE DIRECTIONS: HWY 115 N, TR MAZEPPA RD, TL TRIPLETT, N 2.5 MILES ON RIGHT JUST PAST FOREST VIEW & BEFORE #1134 Hidden

SUBDIVISION: SECTION: — LOT # — LOT AREA: 3.93 ACRE DESIGN FLOW: 480 GPD L.T.A.R.: .3

Septic Tank	1000 (gal)	STB	825-1000	Date	5-26-14		
Pump Tank	(gal)	PT		Date			
Pump Make		Model		Serial #			
# Nitrification Fields	1	# Lines	4 @ 100'	Linear Ft:	400		
Trench Width	36"	Max. Trench Bottom Depth	33"	Gravel Depth	N/A		

☑ New System ☐ Repair ☐ Expansion System Type: I II ☒ III IV V VI

System Description: 25% REDUCTION / - GRAVITY

Repair System Description: SAME

Maintenance Agreement Required: ☐ YES ☑ NO

☑ GRAVITY ☐ PRESSURE

☑ Residence No. Bedrooms 4

☐ Business No. Persons 8

☐ Other No. Employees

☐ Slab ☑ Crawl Space

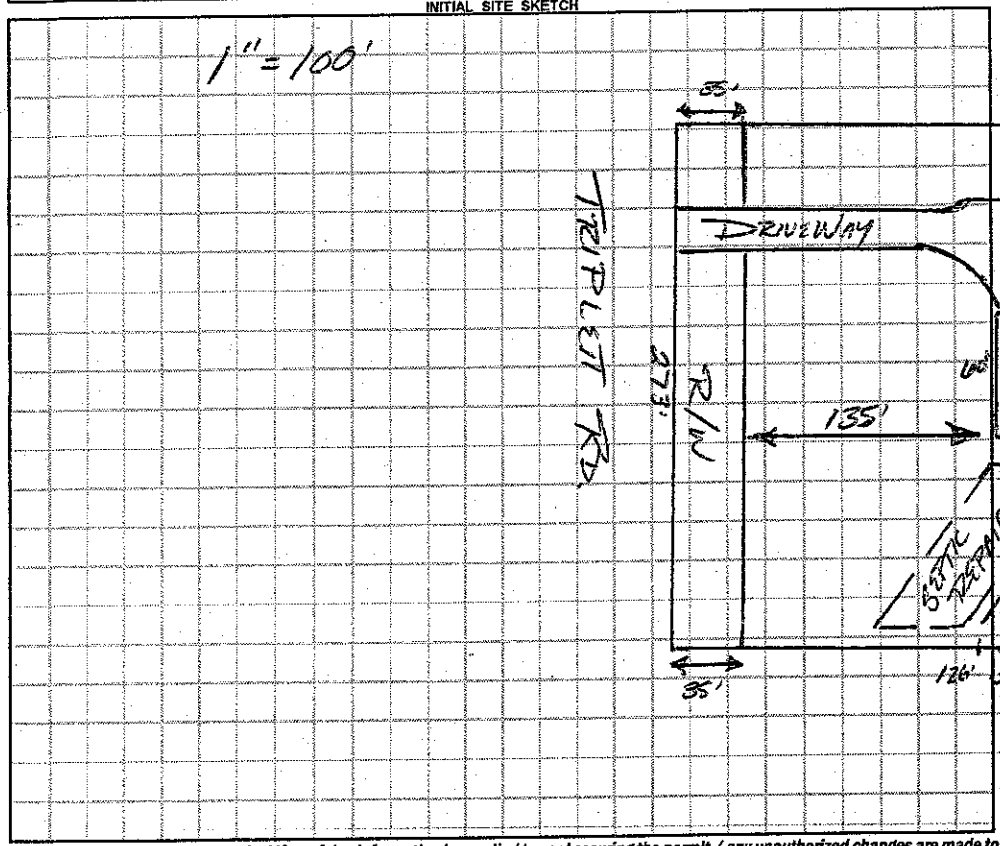
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☑ Private ☐ Public ☐ Community

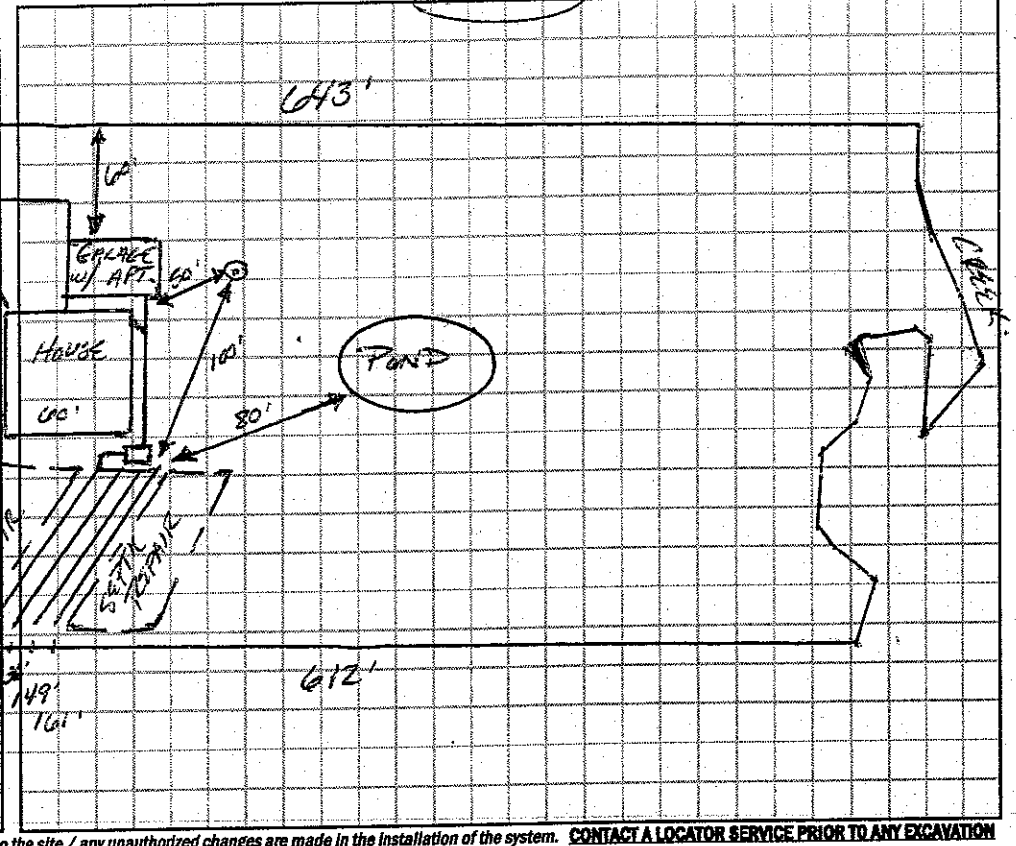
Comments / Conditions: MUST KEEP SEPTIC SYSTEM AT LEAST 10' FROM PL, 5' FROM HOUSE & 100' FROM WELL. IF REPAIR IS UTILIZED IT MUST REMAIN 50' FROM POND.

* 3 BR IN MAIN HOUSE PLUS ADDITIONAL BR OVER GARAGE. (TIE PLUMBING FROM GARAGE TO MAIN HOUSE SEPTIC SYSTEM.)

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: Date: Installed by: BOWMAN SEPTIC

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date: 8/6/14

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Date:

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

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 179999

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

PIN # 4770352634

APPLICANT: Ginger Sparks APPLICANT ADDRESS: 106 Saw horse Dr. Mooresville, NC 28115

SITE ADDRESS: Triplett Rd Cleveland, NC 27013 PHONE: 704 450 780 ALT. PHONE:

SITE DIRECTIONS: Hwy 115 N. TR Mazeppa Rd TL Triplett ~2.5 miles or right just past Forest view B4 Hidden Creek

SUBDIVISION: SECTION: — LOT # 1 LOT AREA: 3.93 Acres DESIGN FLOW: 480 gpd L.T.A.R.: .3

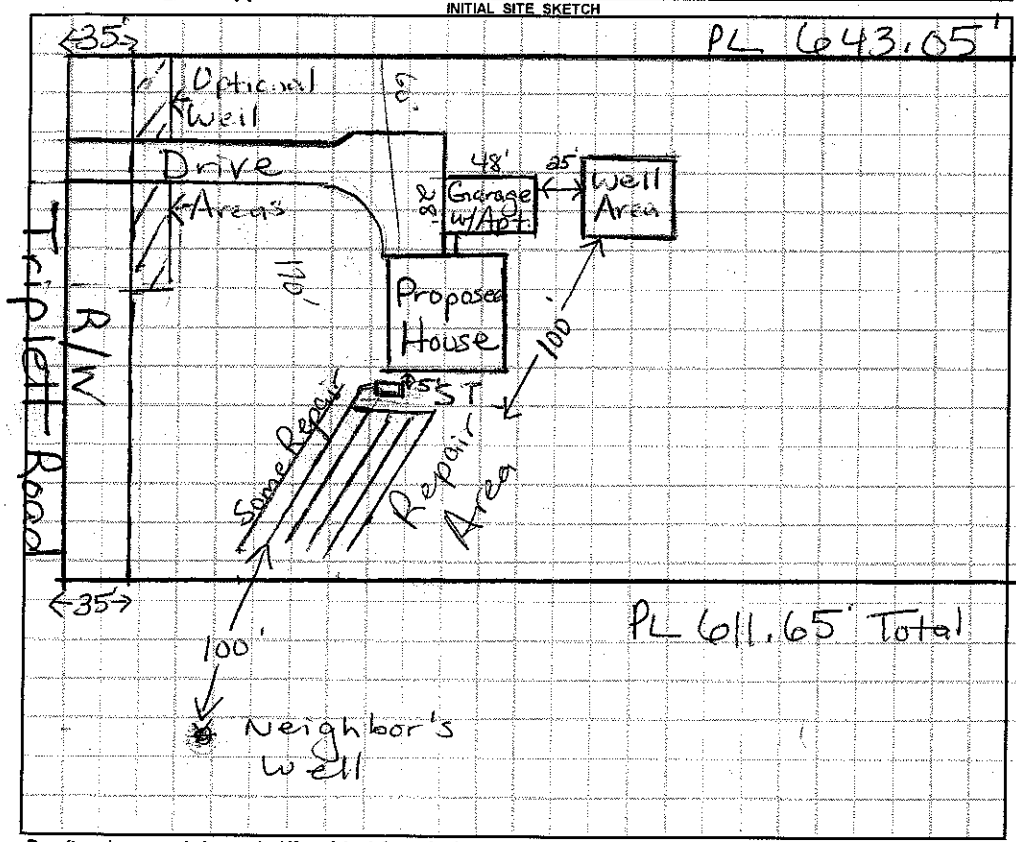
Septic Tank 1000 (gal)	STB	Date	☒ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 4	Water Supply
Pump Tank (gal)	PT	Date	System Description: Gravity – 25% Reduction		☐ Business	No. Persons	☒ Private
Pump Make	Model	Serial #	Repair System Description: Same		☐ Other	No. Employees	☐ Public
# Nitrification Fields 1	# Lines 5 @ 80ft ea	Linear Ft: 400 ft	Maintenance Agreement Required: ☐ YES	☒ NO	☐ Slab	☑ Crawl Space	☐ Community
Trench Width 36"	Max. Trench Bottom Depth 33"	Gravel Depth N/A	☒ GRAVITY	☐ PRESSURE	☐ Basement w/plumbing	☐ Basement w/o plumbing	

Comments / Conditions: Must keep Septic System at least 10ft from PL, 5ft from house & 100ft from well.

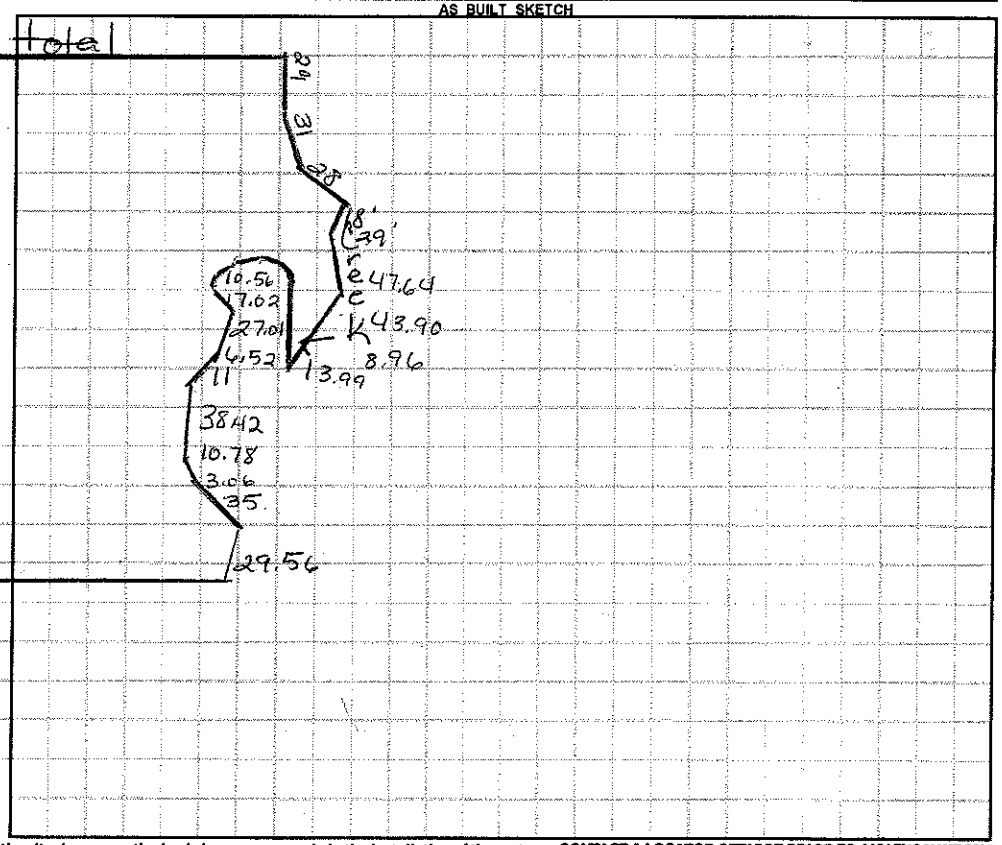
Scale 1:100

*3 Bedrooms in Main house plus additional Bedroom over the Garage. (Tie in plumbing from Garage to Main house Septic system.)

INITIAL SITE SKETCH



AS BUILT SKETCH



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Owner / Applicant Signature: Ginger Sparks Date: 11-4-13 Installed by:

IMPROVEMENT PERMIT by: Maria H. Tolson RS Date: 10/30/13 OPERATION PERMIT by: See As Built. Date: 8/6/14

AUTHORIZATION TO CONSTRUCT by: Maria H. Tolson RS Date: 11/1/13 Existing System Inspected by: Date:

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