IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 212064

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

PIN # 4801819647

APPLICANT: Tammy Tevepaugh APPLICANT ADDRESS: 929 Brookhaven Rd.

SITE ADDRESS: 929 Brookhaven Rd. PHONE: 704-450-1109 ALT. PHONE: N/A

SITE DIRECTIONS: Hwy 115 N TL Mountain View Rd TL Brookhaven Rd.

SUBDIVISION: N/A SECTION: N/A LOT # N/A LOT AREA: 0.914 acres DESIGN FLOW: 480 gpd L.T.A.R.: Existing

Septic Tank	Existing	(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:	Existing			☐ Business	No. Persons	8	☑ Private	
Pump Make		Model			Serial #		Repair System Description:				☐ Other	No. Employees		☐ Public	
# Nitrification Fields	Ex	# Lines	Ex		Linear Ft:	Ex	Maintenance Agreement Required:	☐ YES	☑ NO		☐ Slab	☑ Crawl Space		☐ Community	
Trench Width	Ex	Max. Trench Bottom Depth	Ex		Gravel Depth	Ex		☑ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing		☐ Basement w/o plumbing		

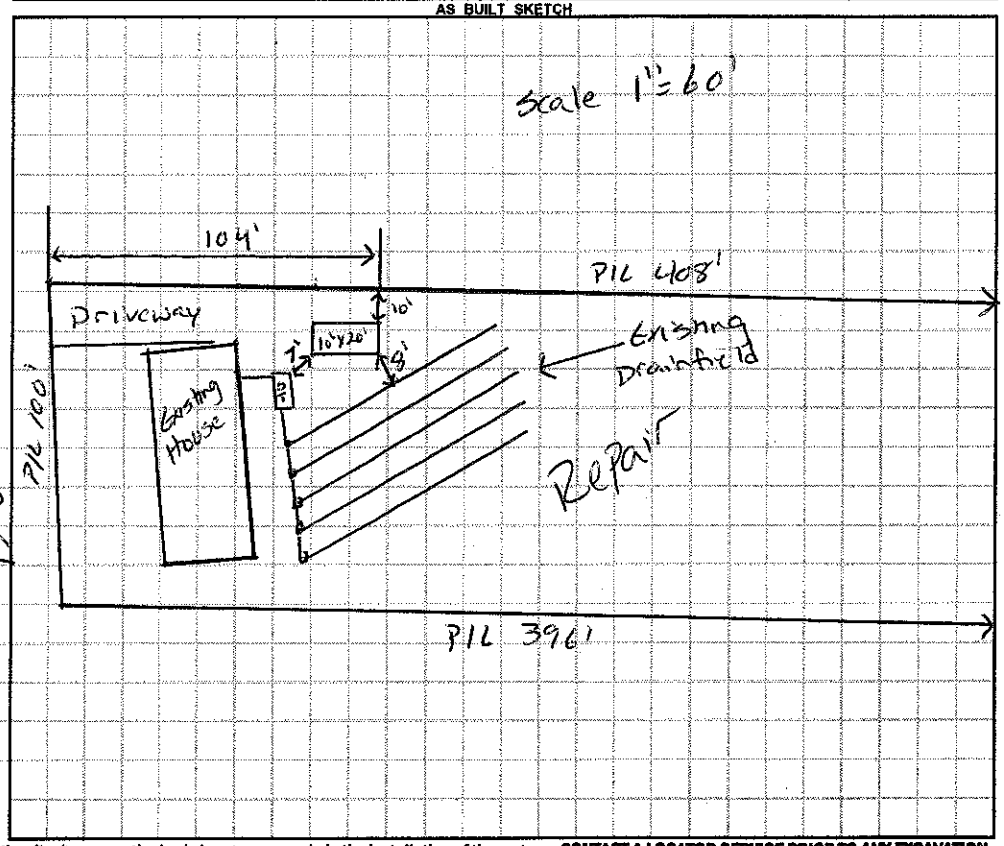
Comments / Conditions:

- Maintain a minimum of 5' between proposed 10'x20' out-building foundation & all components of septic system & repair area.

INITIAL SITE SKETCH

Brookhaven Rd.

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: Tammy Tevepaugh Date: 7/31/15 Installed by:

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

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Justin Rendleman Date: 7/30/15

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