IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 216145

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

PIN # 4844405637

APPLICANT: Optimistic Investments APPLICANT ADDRESS: 1101 South Blvd Charlotte NC 28203

SITE ADDRESS: 455 Mitch Rd Union Grove NC 28689 PHONE: 704-885-0488 ALT. PHONE: N/A

SITE DIRECTIONS: 77N T/L 901 T/R Warren Bridge T/R Mitch Rd Lot on right

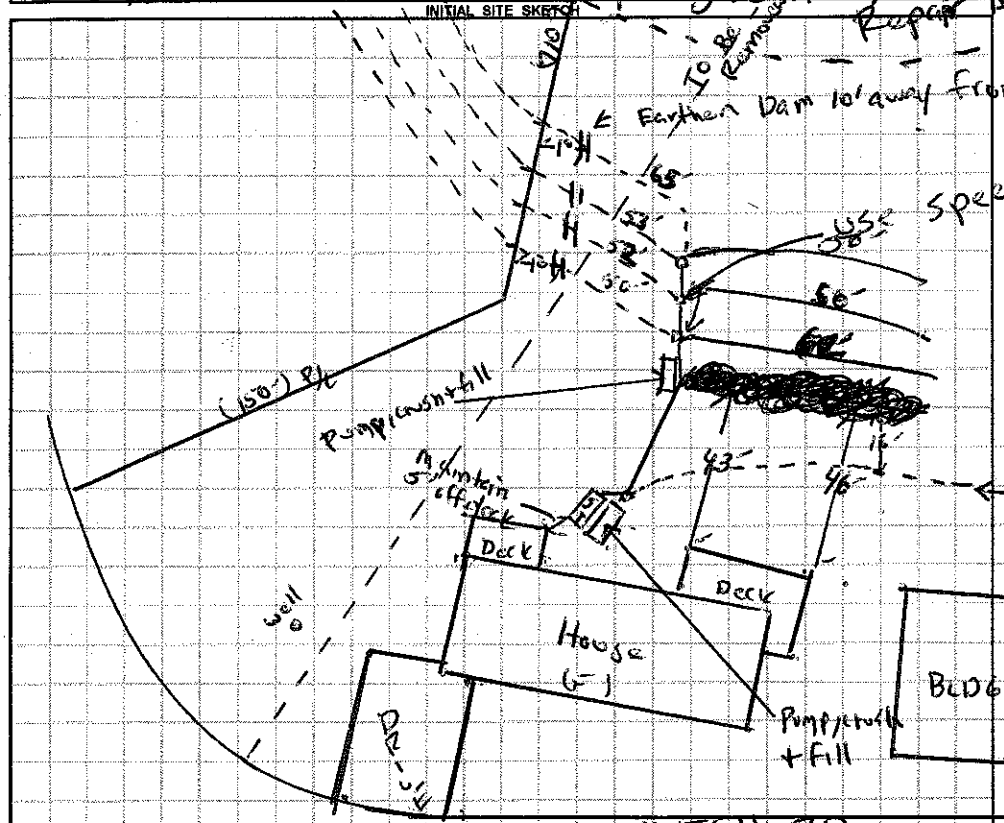
SUBDIVISION: N/A SECTION: N/A LOT # N/A LOT AREA: 6.66ac DESIGN FLOW: 480 L.T.A.R.: 0.3

Septic Tank	1000 (gal)	STB	160	Date	2-11-16	[X] New System [ ] Repair [ ] Expansion	System Type: I II [III] IV V VI	[X] Residence	No. Bedrooms	4	Water Supply
Pump Tank	N/A (gal)	PT	N/A	Date	N/A	System Description:	25% Reduction	[ ] Business	No. Persons	8	[X] Private
Pump Make	N/A	Model	Poly/Tec	Serial #	PL-65	Repair System Description:	25% Reduction	[ ] Other	No. Employees		[ ] Public
# Nitrification Fields	1	# Lines	3	Linear Ft:	162'	Maintenance Agreement Required:	[ ] YES [X] NO	[ ] Slab	[X] Crawl Space		[ ] Community
Trench Width	36"	Max. Trench Bottom Depth	36"	Gravel Depth	N/A		[X] GRAVITY [ ] PRESSURE	[ ] Basement w/plumbing			[ ] Basement w/o plumbing

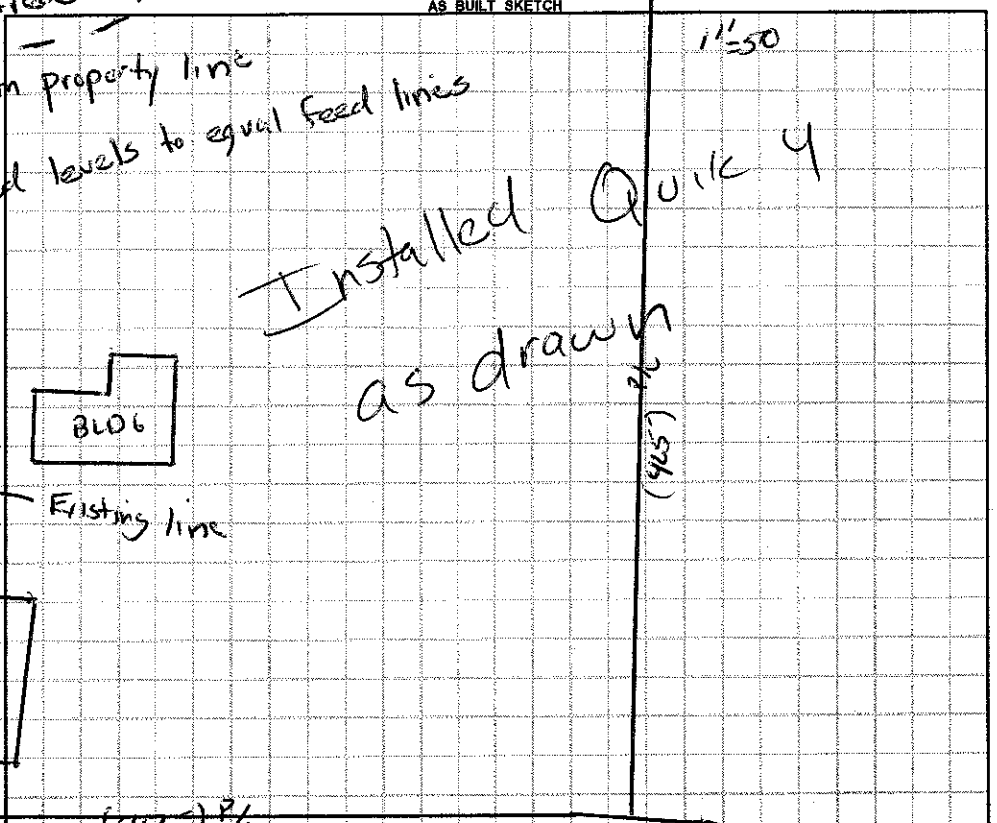
Comments / Conditions: Install 25% reduction on contour. Pump, Crush & fill two existing trenches maintain 5' off Deck + 50' off well. Use speed levels on existing D boxes. * Maintain 36" TD on high side. *

The purpose of this permit is to relocate lines crossing property line and to change to 4 bedroom.

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: Michelle Long Date: 3-8-16 Installed by: Leatherman Septic

IMPROVEMENT PERMIT by: David A. Lowe Date: 02/18/16 OPERATION PERMIT by: David A. Lowe Date: 04/13/16

AUTHORIZATION TO CONSTRUCT by: David A. Lowe Date: 03/07/16 Existing System Inspected by: Date:

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