IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 2218416

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

PIN # 4853451643

APPLICANT: Tileatha Lynn APPLICANT ADDRESS: 1107 Union Grove Rd. Harmony, NC 28634

SITE ADDRESS: 1113 Union Grove Rd Union Grove, NC PHONE: ALT. PHONE: 980 439 - 4440

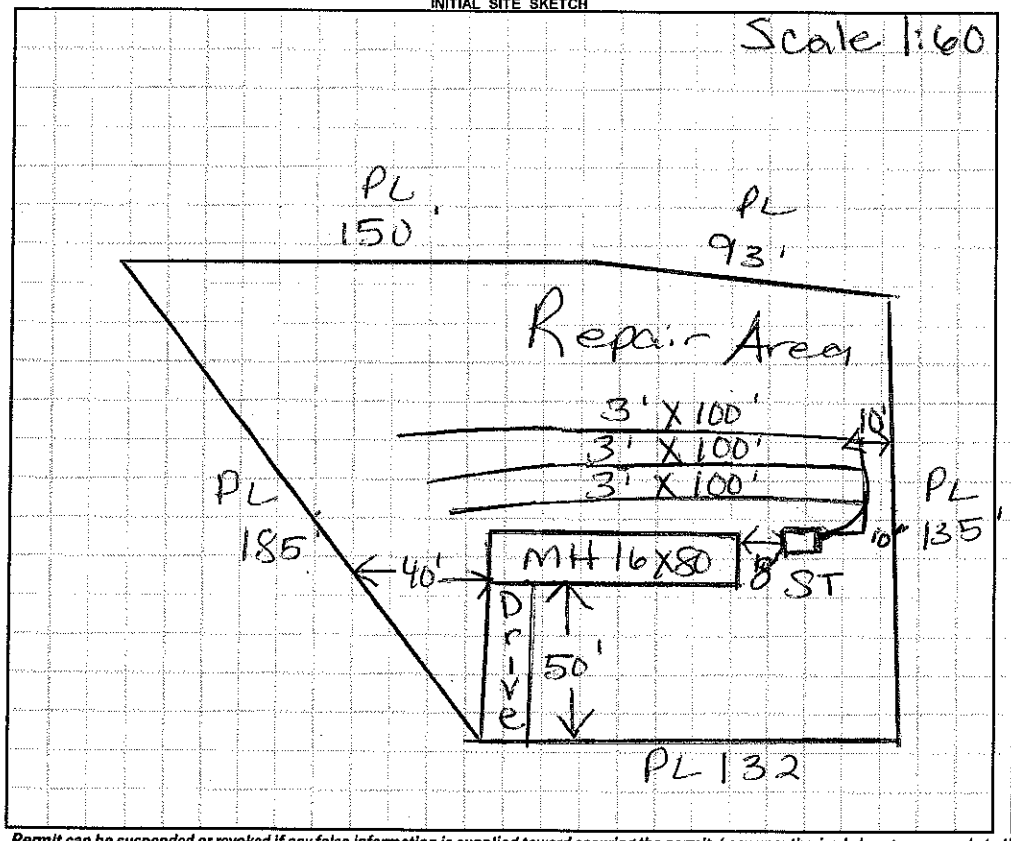
SITE DIRECTIONS: I-77 N exit 65 TL go 2miles TR Union Grove Rd property is 1mile on right

SUBDIVISION: SECTION: LOT # LOT AREA: DESIGN FLOW: 360gpd L.T.A.R.: .3

Septic Tank	1000	(gal)	STB	620	Date	8/7/16	☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms	3	Water Supply
Pump Tank		(gal)	PT		Date		System Description:	Gravity - 25% Reduction			☐ Business	No. Persons		☐ Private
Pump Make			Model		Serial #		Repair System Description:	Gravity - 25%-50% Reduction			☐ Other	No. Employees		☒ Public
# Nitrification Fields	1		# Lines	3	Linear Ft:	300'	Maintenance Agreement Required:	☐ YES	☐ NO		☐ Slab	☒ Crawl Space		☐ Community
Trench Width	36"		Max. Trench Bottom Depth	34"	Gravel Depth	N/A	☒ GRAVITY	☐ PRESSURE			☐ Basement w/ plumbing	☐ Basement w/o plumbing		

Comments / Conditions: Divert surface water away from Septic Area.

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: Tileatha Lynn Date: 10-27-16 Installed by: Brent Sapp

IMPROVEMENT PERMIT by: Marian Dotson RS Date: 10/20/16 OPERATION PERMIT by: W Sparks Date: 11/18/16

AUTHORIZATION TO CONSTRUCT by: Marian Dotson RS Date: 10/20/16 Existing System Inspected by: Date:

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