IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# NA PIN# 2F 12 A 53 4625-58-5705 DATE 10/8/99

OWNER OR CONTRACTOR Don Kuckeler PHONE: Business Home 663-1671

ADDRESS 184 Lake Mist Dr. Mooresville, NC. 28117

LOCATION Brawley Sch TR Bay Harbour TL Lake Mist Rd 3RD lot on (R) before Cypress Cove

SUBDIVISION HARBOUR BLOCK / SECTION 2 LOT 53 LOT AREA SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: EXISTING Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 210 Linear Feet 70

No Lines 1(7) Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth SAND.

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

System Description: GRAV - CH. PLASTIC

Repair System Description: GRAV - CH PLASTIC

Maintenance Agreement Required: ☐ Yes ☐ No

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees

☐ Other

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

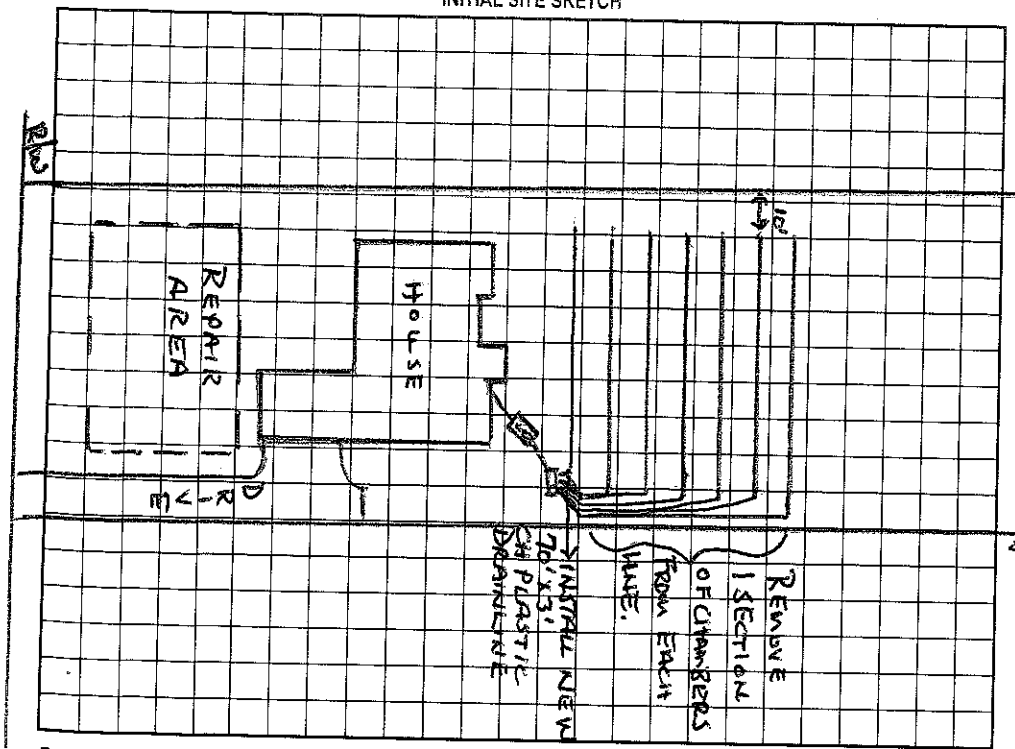
Water Supply: ☐ Individual ☐ Public ☒ Community

Comments:/Conditions: MOVE DIST BOX UPSLOPE TO POSITION SHOWN HERE,

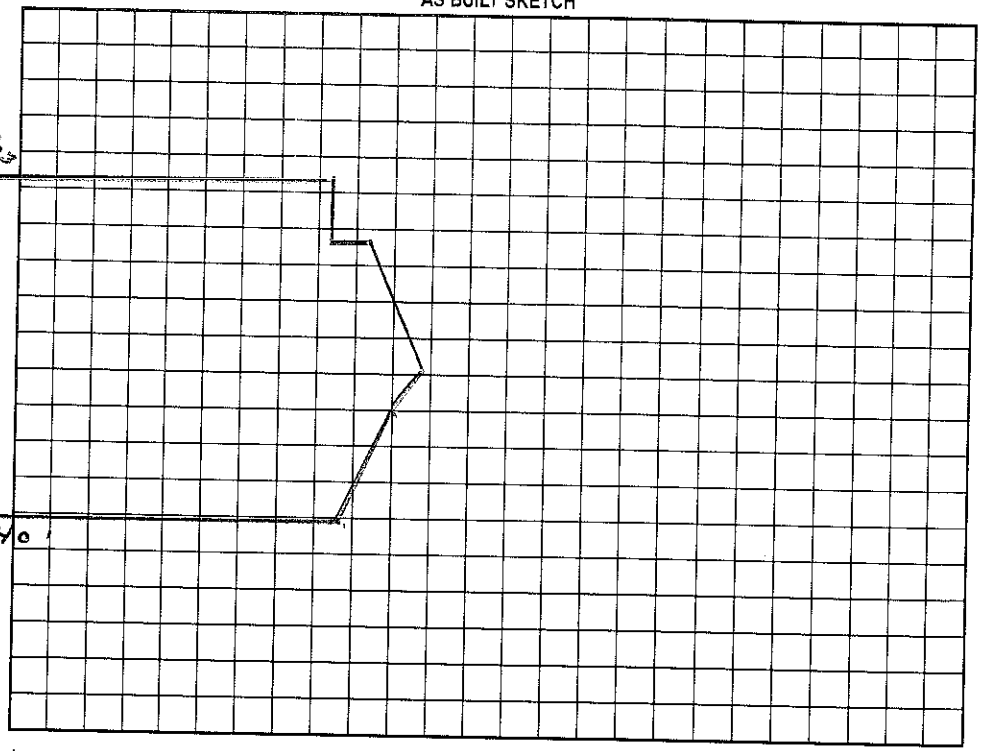
Comments:/Conditions:

REMOVED ONE SECTION FROM EACH LINE INSTALLED NEW LINE AND NEW D/B WITH SPEED LEVELERS IN ALL LINES

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 date

Improvement Permit by: Wesley Sparks R.S. date 10/8/99

Authorization to Construct by: Wesley Sparks R.S. date 10/8/99

Installed by: Macleod Const.

Operation Permit by: Wesley Sparks R.S. date 10/21/99

Existing System Inspection by: date

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