IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 218653

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

PIN # 4626-42-5449

APPLICANT: Nicole Kale APPLICANT ADDRESS: 170 Lakeland Road Mooresville NC 28117

SITE ADDRESS: 170 Lakeland Road Mooresville, NC 28117 PHONE: 336-692-1747 ALT. PHONE: 704-775-6909

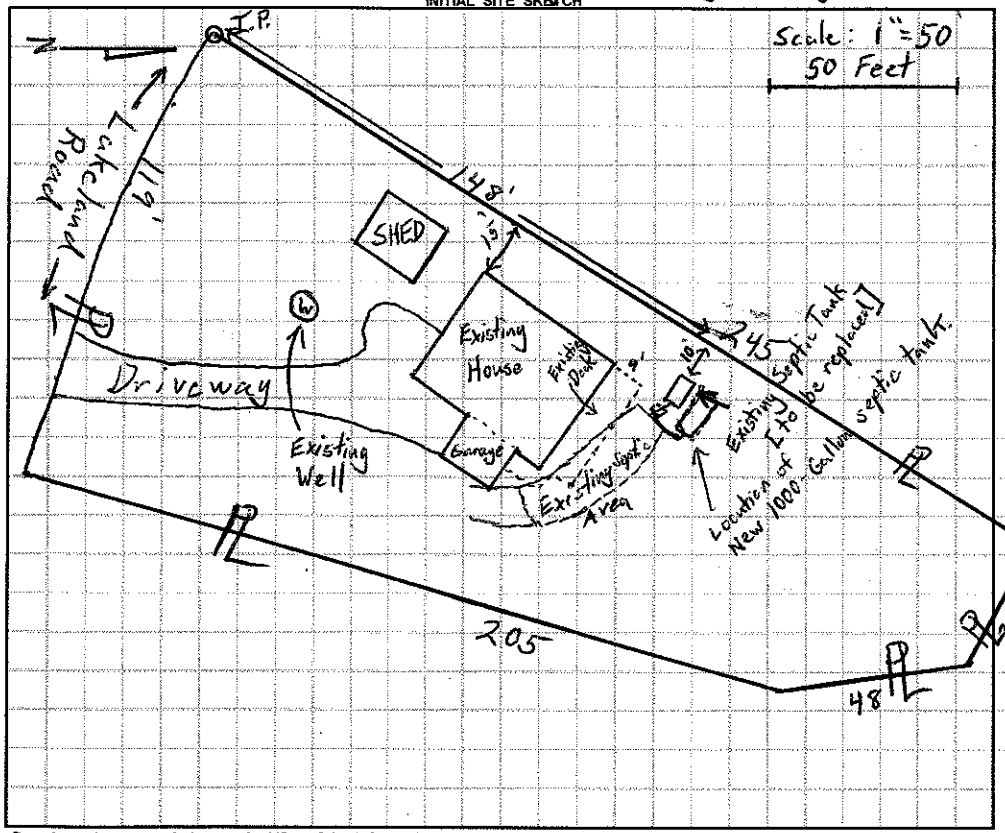
SITE DIRECTIONS: BSR toward Lake Norman → TR on Chuckwood Rd → TR on Seagrove Rd → TL on Lakeland Rd → House on Right.

SUBDIVISION: Holiday Harbor SECTION: LOT # 33 LOT AREA: 1 DESIGN FLOW: 360 gal/day L.T.A.R.: Existing

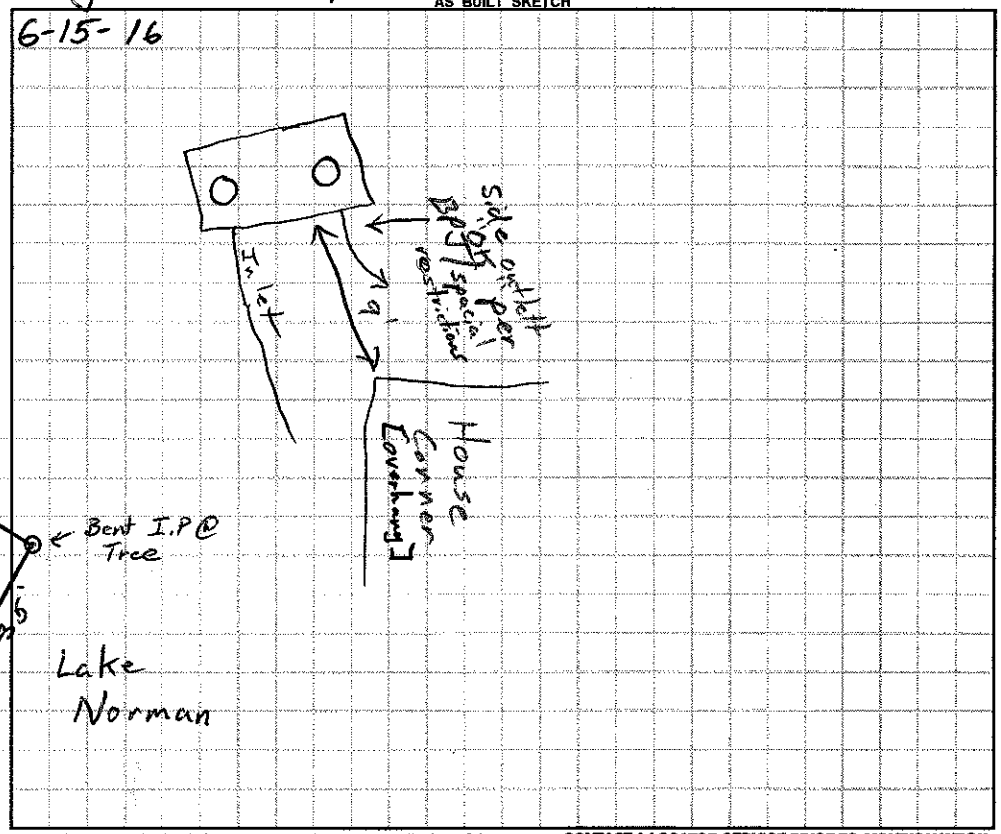
Septic Tank	1000	(gal)	STB Infiltrator-IM1060	Date		☐ New System	☒ Repair	☐ Expansion	System Type: I (II) III IV V VI	☒ Residence	No. Bedrooms	3	Water Supply
Pump Tank	—	(gal)	PT —	Date	—	System Description:	Tank Replacement - Existing Conventional			☐ Business	No. Persons	6	☒ Private
Pump Make	—	Model	—	Serial #	—	Repair System Description:	Pre - 1983			☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	Existing	Linear Ft:	Existing	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☐ Crawl Space		☐ Community
Trench Width	Existing	Max. Trench Bottom Depth	Existing	Gravel Depth	Existing		☒ GRAVITY	☐ PRESSURE		☒ Basement w/plumbing	with elev.	☐ Basement w/o plumbing	

Comments / Conditions: Difficulty accessing tank location may require use of polyethylene/plastic septic tank. A portion of the septic area appears to be encroached upon by previous improvements to the residence. Recommend removing all non-grass vegetation + objects within 5' of all sewage disposal system components. Old septic tank is to be pumped and then either: 1. Crushed in place 2. Filled with clean, flowable/self leveling fill. 3 Hauled away [Follow all disposal requirements].

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**

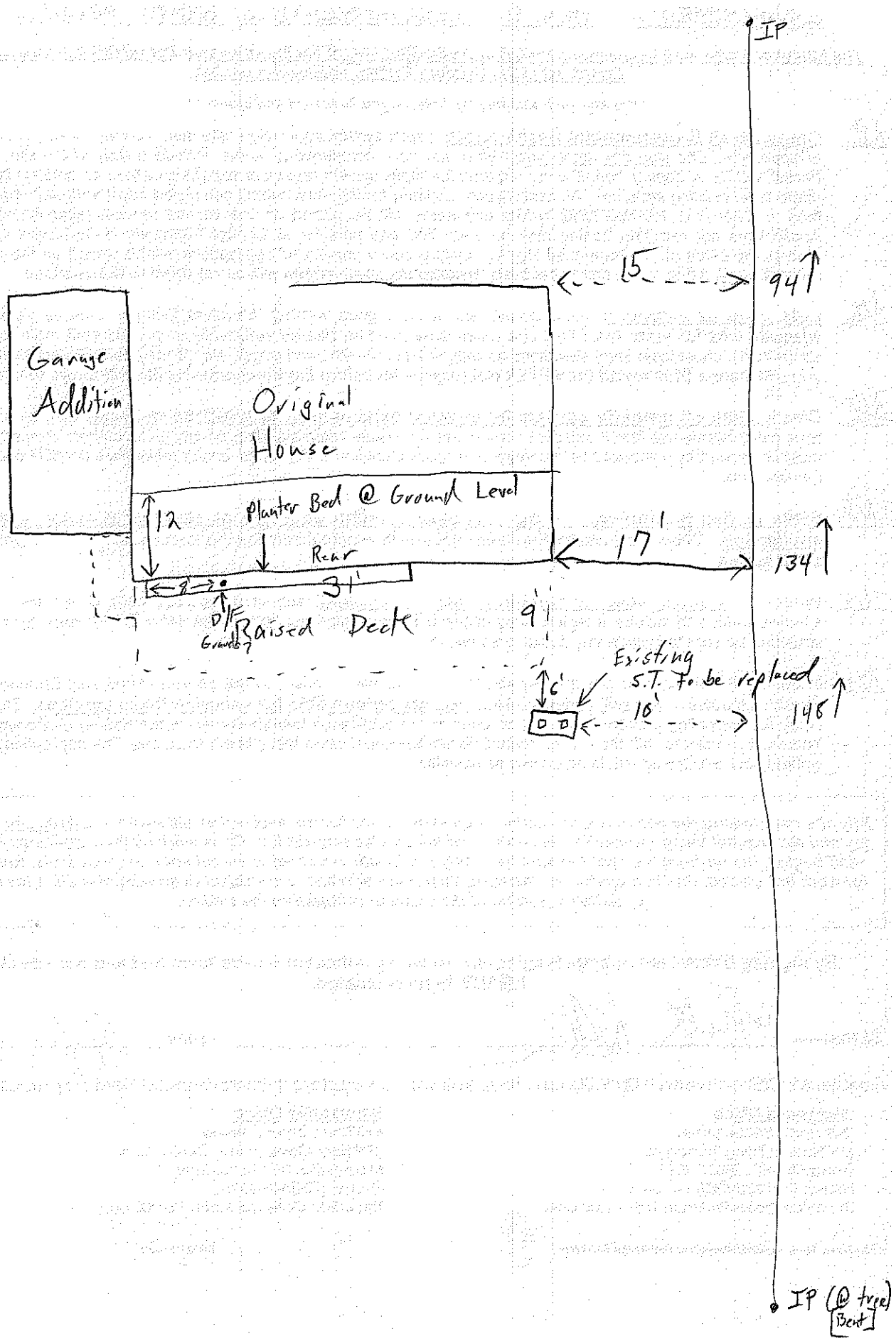
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Nicole Kale Date: 5/24/16 Installed by: Kevin Bowles

IMPROVEMENT PERMIT by: Tom Shuck Date: 5-23-16 OPERATION PERMIT by: Tom Shuck Date: 6-15-16

AUTHORIZATION TO CONSTRUCT by: Tom Shuck Date: 5-23-16 Existing System Inspected by: Date:

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


IP
15'
94'
Garage Addition
Original House
Planter Bed @ Ground Level
12'
Rear
17'
134'
3'
2'
D/F Ground
Raised Deck
9'
Existing S.T. to be replaced
6'
10'
148'
IP (@ tree)
Bent