IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625

PERMIT # 205260

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

PIN # 4626-66-0787.000

APPLICANT: HERMAN KRUEGER

APPLICANT ADDRESS: 1302 BRANLEY SCHOOL RD. MOORESVILLE NC

SITE ADDRESS: 109 FULTON FARMS LN. MOORESVILLE NC 28117

PHONE: 704-664-3682 ALT. PHONE:

SITE DIRECTIONS: BSR, TR MCKENDREE, TR FULTON FARMS, LOT ON CORNER

SUBDIVISION: BROOKRIDGE SHORES

SECTION: 1 LOT # 1 LOT AREA:

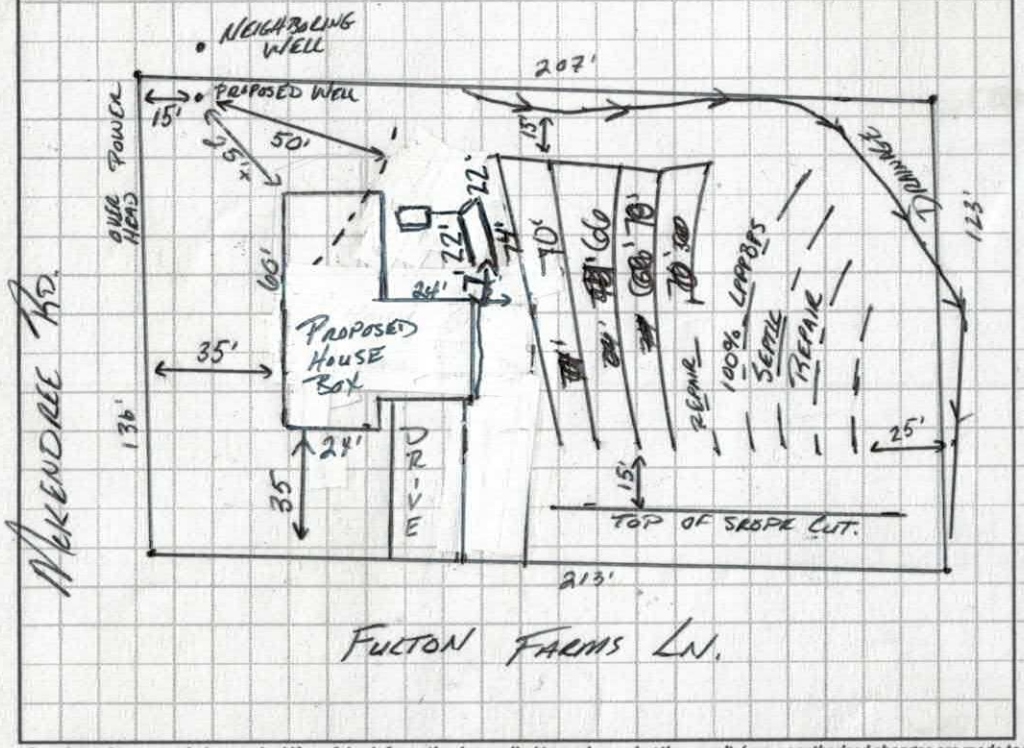
DESIGN FLOW: 360 GPD L.T.A.R.: .275

Septic Tank	1000	(gal)	STB 794	Date	6-14-19	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms 3
Pump Tank		(gal)	PT	Date		System Description:	25% REDUCTION - GRAVITY			☐ Business	No. Persons 6
Pump Make		Model		Serial #		Repair System Description:	LPPPBTS			☐ Other	No. Employees
# Nitrification Fields	1	# Lines	7 or 6	Linear Ft:	328'	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☒ Crawl Space
Trench Width	36"	Max. Trench Bottom Depth	36"	Gravel Depth	N/A		☒ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

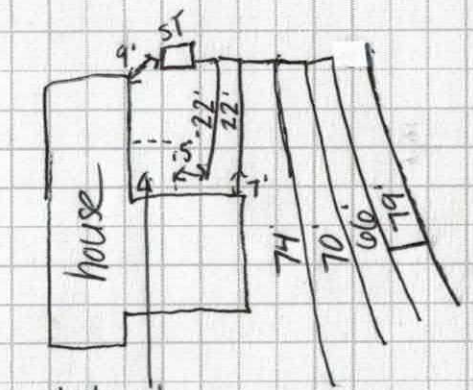
Comments / Conditions: FOLLOW ALL SEPTIC RULES. MAINTAIN AT LEAST 15' FROM DRAINAGE AND 50' FROM ANY WELL.

INITIAL SITE SKETCH



AS BUILT SKETCH

1"=50'



duck not built during time of inspection

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: Date: 3/4/15

IMPROVEMENT PERMIT by: APPROVED Date: MAR 02 2015

AUTHORIZATION TO CONSTRUCT by: APPROVED Date: MAR 04 2015

Installed by: Kevin Hallman

OPERATION PERMIT by: Date: 7-18-19

Existing System Inspected by: Date:

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

DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet 1 of 2
PROPERTY ID #: 0757
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Herman Krueger
ADDRESS: 132 Brawley School Rd.
PROPOSED FACILITY: SFR
PROPOSED DESIGN FLOW (.1949): 360 GPD
LOCATION OF SITE: 109 Fulton Farms Ln
APPLICATION DATE
DATE EVALUATED: 1/22/15
PROPERTY SIZE:
PROPERTY RECORDED:
WATER SUPPLY: ☑ Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LL 15%	0-24	C, SBK	FR, SS, SP	N/A	48"	C-SAP INCL. 24-48"	N/A	.275 PS
		24-48	C, ABK	FR/FI, " , "					
2	LL 15%	0-24	C, SBK	FR, SS, SP	N/A	48"	C-SAP INCL. 36-48"	N/A	.275
		24-36	C, ABK	FI, SS, SP					
		36-48	C, ABK	FI, SS, SP					
3	LL 12%	0-36	C, SBK	FR, SS, SP	N/A	48"	C-SAP INCL 36"-48"	N/A	.3
		36-48	CL, SBK	FR, SS, SP					
4	LL 12%	0-34	C, SBK	FR, SS, SP	N/A	48"	C-SAP INCL. 34"-48"	N/A	.3
		34-48	CL, SBK	FR, SS, SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY:
OTHER(S) PRESENT:

COMMENTS:

RECEIVED AUG 13 2014

Paid $500. @ Statesville

Call Cell - 704-634-8417

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) Septic Improvement Permit (X) Authorization to Construct ( ) Existing System Inspection ( ) Septic System Repair

THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS.

Page 2: *Site Plan Worksheet* form MUST accompany this application

The following optional attachments may also be submitted: ( ) Survey Plat, scaled no more than 1 inch = 60 feet
Place an (X) beside whichever is submitted if applicable ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information:

Applicant Name: Herman Krueger Address: 1302 Brawley School Rd. Phone: 704 664 3682

Owner Name: Same Address: _____ Phone: _____

Property Information:

Street Address: 109 Fulton Farms Ln. Mooresville, NC. 28117

Subdivision Name: Brookridge Shores Section/Phase: 1 Lot Number: 1

Driving Directions: Brawley School Rd - McKendree - Fulton Farms on Rt

Site Development Information: *(check or complete ALL that apply)*

made 5 76

(X) New Single Family Residence 2800ft² Maximum Number of Bedrooms: 3 (X) Crawl Space Foundation
( ) New Multi-Family Residence Maximum Number of Occupants: 6 ( ) Concrete Slab Foundation
( ) Accessory Building ( ) Swimming Pool ( ) Basement with Plumbing
( ) Bedroom(s) Addition ( ) Other Addition/Structure: _____ (X) Basement without Plumbing

Non-Residential Site Development:
Type of Business: _____
Square Footage of Building: _____
Maximum Number of Employee: _____
Maximum Number of Seats/Beds/Other: _____

Water Supply:

(X) New Well ( ) Existing Well ( ) Community Well (X) City Water ( ) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: _____

(X) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other: _____

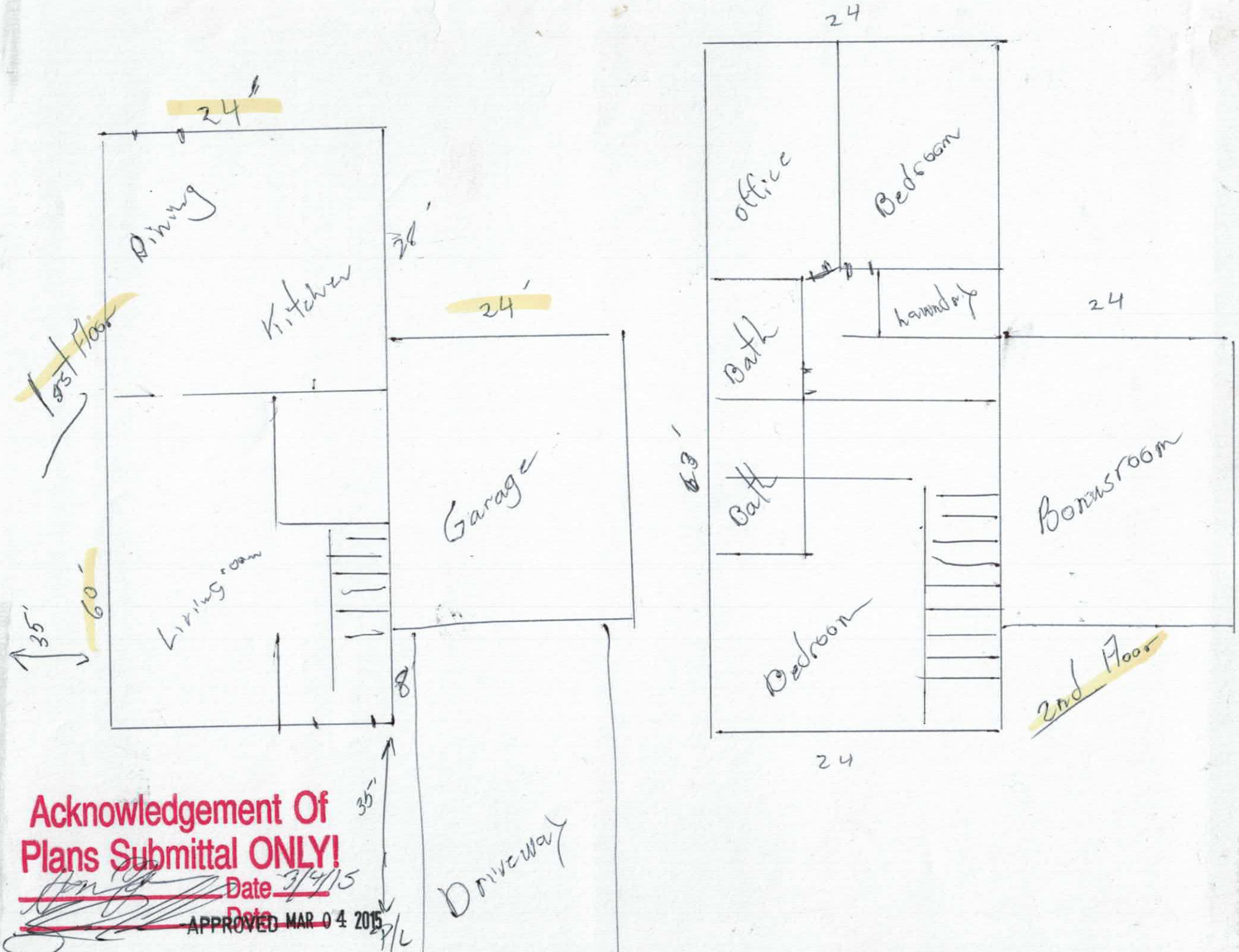
Please answer the following to the best of your ability:

( ) Yes (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (X) No Is the site subject to approval by any other public agency?

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

Signature: _____ 8/13/14
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

PAID
V2001 MH 8/13


24'
Dining
28'
1st Floor
Kitchen
24'
Garage
Living room
60'
35'
8'
35'
Driveway
P/L
24
office
Bedroom
laundry
Bath
Bath
63'
24
Bonusroom
Bedroom
2nd Floor
24
Acknowledgement Of
Plans Submittal ONLY!
Date 3/4/15
Date
APPROVED MAR 04 2015

IREDELL COUNTY

PO Box 788
349 North Center St.
Statesville, NC 28677

APPLICATION NUMBER
205260
Issue Date: 08/13/2014

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4626660787.000	109 FULTON FARMS LANE, MOORESVILLE, NC 28117	MOORESVILLE

Owner Information	Applicant Information
Owner: KRUGER HERMAN F+TINA L	Applicant: KRUGER, HERMAN
Address: 338 IREDELL CO, NC 28625	Address: 1302 BRAWLEY SCHOOL RD MOORESVILLE, NC 28117
Phone:	Phone: 704-634-8477

Use Requested	Zone Code
SFD	

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
	35.00	35.00	25.00	15.00	CA	X

Remarks:

PAID
#2001 MH
8/13

The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions, plat conditions and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

Applicant: _____ Date: 8/13/14

Permit Number	19183	TOTAL FEES:	$ 77.25