BCW AP-318509

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP-318509

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

PIN # 3783433239

APPLICANT/OWNER: Michael Melicia | APPLICANT ADDRESS: 428 -B Main St (suite 632) Davidson NC 28036

SITE ADDRESS: 161 Pumice Dr. Statesville NC 28625 | PHONE: 704-953-4555 | ALT. PHONE N/A

SITE DIRECTIONS: I - 40 to Sharon School Rd to Walnut Tree Rd To Pumice Dr | SAP CONTROLLED: ☐ YES ■ NO

SUBDIVISION: River Rock | SECTION: P2 | 12 | LOT AREA: 0.87 ac | DESIGN FLOW: 360 | L.T.A.R.: 0.3

Septic Tank	1000 (gal)	STB	Date	■ 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			☐ Business	No. Persons 6
Pump Make		Model	Serial #	Repair System Description:	25% Reduction			☐ Other	No. Employees
# Nitrification Fields	1	# Lines 4	Linear Ft: 300'	Maintenance Agreement Required:	☐ YES	■ NO		☐ Slab	☐ Crawl Space
Trench Width	36"	Low-side Trench Bottom Depth	30"	Gravel Depth	N/A	■ GRAVITY	☐ PRESSURE	■ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☐ Private ■ Public ☐ Community

Comments / Conditions: Per plan By Soil & Forestry Services

INITIAL SITE SKETCH

This permit is issued pursuant to Section 11.(c) of SL 2018-114 using the signed and sealed LSS Evaluation attached here.

See plan by:Soil & Forestry Services

AS BUILT SKETCH

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inspector to confirm your time.

Installed as Shown

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: Michael Melicia | Date: 6/10/21 | Installed by: Lentz

IMPROVEMENT PERMIT by: [signature] | Date: 6/9/21 | OPERATION PERMIT by: Sydney Hallcard | Date: 11/9/25

AUTHORIZATION TO CONSTRUCT by: [signature] | Date: 6/9/21 | Existing System Inspected by: | Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.

SOIL & FORESTRY SERVICES
OF THE CAROLINAS, PA

www.soilandforestryservices.com

Project#: 21-0034
May 21st, 2021

MIKE MELICIA
Attn: *Mike Melicia*
Email: mjmelicia24@gmail.com

RE: Soil & Site Evaluation for a 3 Bedroom Residence at 161 Pumice Drive, Statesville NC 28625, PIN # (3783433239), Iredell County.

Mr. Melicia:

At your request Soil & Forestry Services of the Carolinas (S&FS) has performed soil/site evaluations on parcel noted above. The Lot size is noted on the attached survey map & soil evaluation form. The purpose of our work was to identify soil areas with potential to support subsurface wastewater disposal systems and provide design details for Session Law submittal to Iredell County Health Department.

Site Conditions
At the time of our evaluation land cover on the property was mostly open. Topography within the evaluated area was moderate slope near the house site and proposed drainfield area. Property corners were marked at the time of the evaluation. The Survey plat metes & bounds were utilized for our SitePlan. The proposed septic layout was located via measuring tape/GPS and used to produce the attached *Site Plan*. The house envelope was rough flagged by the client and GPS located. The Subdivision Plat from Don Allen & Associates is attached to our design.

Methodology
We evaluated soil areas through the use of hand augers. Soil morphological conditions including color, texture, structure, etc. were reviewed in the field with four boring locations on the property flagged and located via GPS. Three of the four soil borings are located in the proposed septic layout. Soil suitability was determined by referencing 15A NCAC 18A.1900 "Laws and Rules for Sewage Treatment and Disposal Systems". *Soil & Site Evaluation Forms* were utilized to record the soil morphological data for each boring. An on-ground layout of system and repair was performed using a laser level. Pin flag locations of the layout were also located by tape measure and GPS. Detailed system & repair information is summarized in the following paragraph for this Lot.

161 Pumice Drive (*See Attached Design*)
The septic layout for this lot (9' centers) yielded a total of 550 linear feet of line. The primary system is proposed as 300 linear feet of Accepted (25% Reduction) drainfield with gravity distribution. Trench depth is specified at 30 inches. The repair system is proposed as 300 linear feet of Accepted (25% Reduction) drainfield with gravity distribution. Trench depth is specified at 30 inches.

Session Law Requirements

An LSS Evaluation may be submitted in conjunction with a complete application to the LHD. The application shall include all information described in 15A NCAC 18A .1937(d) and be accompanied by a signed and dated statement from the applicant (owner or owner's legal representative) that reads as follows:

"The LSS Evaluation attached to this application is to be used to produce design and construction features for permitting in accordance with SL 2018-114 Section 11.(c).".

Owner Date

Print Name Susan Melicia
Signature Susan Melicia 5/04/2021

The LSS Evaluation shall include a statement bearing the LSS seal and signature that reads as follows:

"The LSS Evaluation is being submitted pursuant to and meets the requirements of SL 2018-114 Section 11.(c)."

Disclaimer
This report reflects the findings of S&FS, PA. *This LSS Evaluation is being submitted pursuant to and meets the requirements of SL 2018-114 Section 11.(c).* Any site modifications that impact the proposed septic areas at 161 Pumice Drive, Statesville, NC 28625 may nullify this design. System design requirements and site requirements shall be adhered to for installation and Operations Permits to be issued by the local Health Department. If you have questions regarding these requirements a Pre-Construction meeting should be scheduled to discuss. Please contact S&FS if you have any questions regarding this report or the attached information. S&FS also offers septic system inspection, wetland delineation and forestry services.

Sincerely,

LICENSED SOIL SCIENTIST
Samuel A. Rollans
1231
SOIL SCIENTIST
NORTH CAROLINA

S. Ashley Rollans, LSS
Attachment: *Septic Design*

SOIL & FORESTRY SERVICES
OF THE CAROLINAS, PA

www.soilandforestryservices.com

Attached is a proposed design for an Accepted Septic System with gravity dist. for a 3 bedroom single family residence at 161 Pumice Dr., Lot 12, River Rock Subdivision PIN#(3783433239) Statesville 28625, Iredell County, NC.

Contents: **Page**

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LICENSED SOIL SCIENTIST Samuel A. Pollard 1231 STATE OF NORTH CAROLINA

May 5, 2021
Project #: 21-0034
Design By: Soil & Forestry Services of the Carolinas, PA

INFORMATION FOR THE INSTALLER:

The permit should be read very carefully prior to bidding. The following are details that must be considered along with all other considerations.

- Tanks shall be approved by NC DHHS, and certification supplied by the manufacturer.
- Tanks shall be water tested prior to installation.
- The installer shall be responsible to the owner for placement of the tanks and to insure that final grades are returned to the original natural grade, with exception of added structural features.
- The supply trench shall be compacted to eliminate cavities left during initial fill placement.
- Installation of the system shall be during dry conditions in order to protect the soil structure.
- All fittings shall be pressure rated fittings.
- All joints shall be cleaned with PVC pipe cleaner and a heavy bodied glue applied to weld all joints.
- Where required by the county health department, post installation inspections by the designer must be scheduled 5 week days in advance.
- Trenches shall be carefully excavated so the bottom is within 2" from the highest to . the lowest points of elevation within the trench. If the bottom elevation needs adjusting after it has been trenched, it will be done by removing high points rather than filling low points. It is extremely important to insure that trenches are not over excavated during initial trenching. All fine grading within the trench will be hand done with a shovel. No loose material will be left in the trench
- All pipe openings in the tanks shall be properly grouted. This also applies to the joints around the riser.
- All tanks shall be properly back filled and compacted to prevent slump at a later date.
- Earth dams, constructed of relatively impervious material, shall be installed at the beginning and end of each lateral.
- No heavy equipment shall be used on the field during or after installation. The use of a small loader (i.e. Bobcat) or a trencher (i.e. Ditch Witch 2300/2310) may be used for installation.
- Elevations at pinflag locations should be checked by the installer prior to beginning trenches.
- Septic tank riser shall be a minimum of 6" above finished grade.
- System is specified as a gravity 25% reduction (Accepted) installation.
- Repair is specified as a gravity 25% reduction (Accepted) installation.

GRAVITY ACCEPTED SYSTEM
FOR WASTEWATER TREATMENT

Owner/Applicant:	Mike Melicia
Address:	428-B S. Main St. Suite 632 Davidson NC 28036
Phone:	704.953.4555
County:	Iredell
Location:	161 Pumice Dr. Statesville NC 28625
Source of Wastewater Flow:	3 Bedroom Single Family Residence
Estimated Gallons Per Day Flow:	360
System Flow:	N/A

Design Specifications

Drainfield Size:	300	
Loading Rate (gpd/ft.^{2}):	0.3	
Depth of Gravel in Trench:	N/A	
Gravel Size:	N/A	
Max.Trench Depth (LOW SIDE):	30 in.	Repair Trench Bottom 30 in.
Trench Width:	36 in.	
Septic Tank Size:	1000	
Estimated Supply Line Length:	18	
Supply Line Diameter:	4 in. SCH 40 PVC	
Supply Line Volume:	11.75	
Dosing Volume:	N/A	
Supply Manifold:	N/A	
Supply Manifold Length:	N/A	
Supply Manifold Volume:	N/A	
Recommended Float Controls:	N/A	
Recommended Control Panel:	N/A	
Pressure Head:	N/A	
Friction Head:	N/A	
Elevation Head:	N/A	
Total Dynamic Head:	N/A	
Threaded Union:	N/A	
Gate Valves:	N/A	
Check Valves:	N/A	
Anti-Siphon Hole:	N/A	
Additional Comments:	Soil suitability was performed by Soil & Forestry Services of the Carolinas, PA	

161 Pumice Dr.

ACCEPTED SYSTEM

DESIGN FLOW (gpd):	360
SOIL APPLICATION RATE (gpd/ft.^{2}):	0.3
TOTAL AREA TRENCH BOTTOM:	900
TOTAL LATERAL LENGTH:	300
NUMBER OF FIELDS:	1
LATERAL LENGTH REQUIRED PER FIELD:	300
SUPPLY LINE LENGTH:	18
TOTAL DYNAMIC HEAD:	N/A
MANIFOLD SIZE:	N/A
DOSING VOLUME:	N/A
PUMP TANK DRAW DOWN*:	N/A
SEPTIC TANK SIZE:	1000

Layout Specifications - 161 Pumice Dr.

Project #: 21-0034

LAYOUT FOR 3 BEDROOM HOME — May 5, 2021

LINE #	FLAG COLOR	BS	HI	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM							
INSTR. 1							
1	***RED***					***78***	***75***
2	***ORANGE***					***78***	***75***
3	***YELLOW***					***78***	***75***
4	***PINK***					***78***	***75***
5	BLUE					78	75
6	RED					78	75
7	ORANGE					82	75
8	YELLOW					84	75
					Total	550	525

	LINE LENGTH	LTAR GPD/FT2	SYSTEM TYPE	SOIL LTAR GPD/FT2	TRENCH SYSTEM	DISTRIBUTION	TRENCH DEPTH
****System***	***300***	***0.300***	***ACCEPT.***	***0.300***	***25% RED***	***GRAVITY***	30"
Repair	300	0.300	ACCEPT.	0.300	25% RED	GRAVITY	30"

Notes: **All measures in feet

**Nitrification lines are demonstrated on contour via colored pin flags

**Property lines, corners were located by Professional Land Surveyor.

PUMICE DRIVE
100.00'
DRIVEWAY
45'
70'
15'
MAX
HOUSE
ENVELOPE
98'
380.99'
DRIVEWAY (10' WIDTH)
15'
4'
POOL
B2
1 R 75'
2 D 75'
3 Y 75'
4 P 75'
5 B 75'
6 R 75'
7 D 75'
8 Y 75'
78
74
74
74
B1
B3
B4
380.89'
100.00'
1''=40'

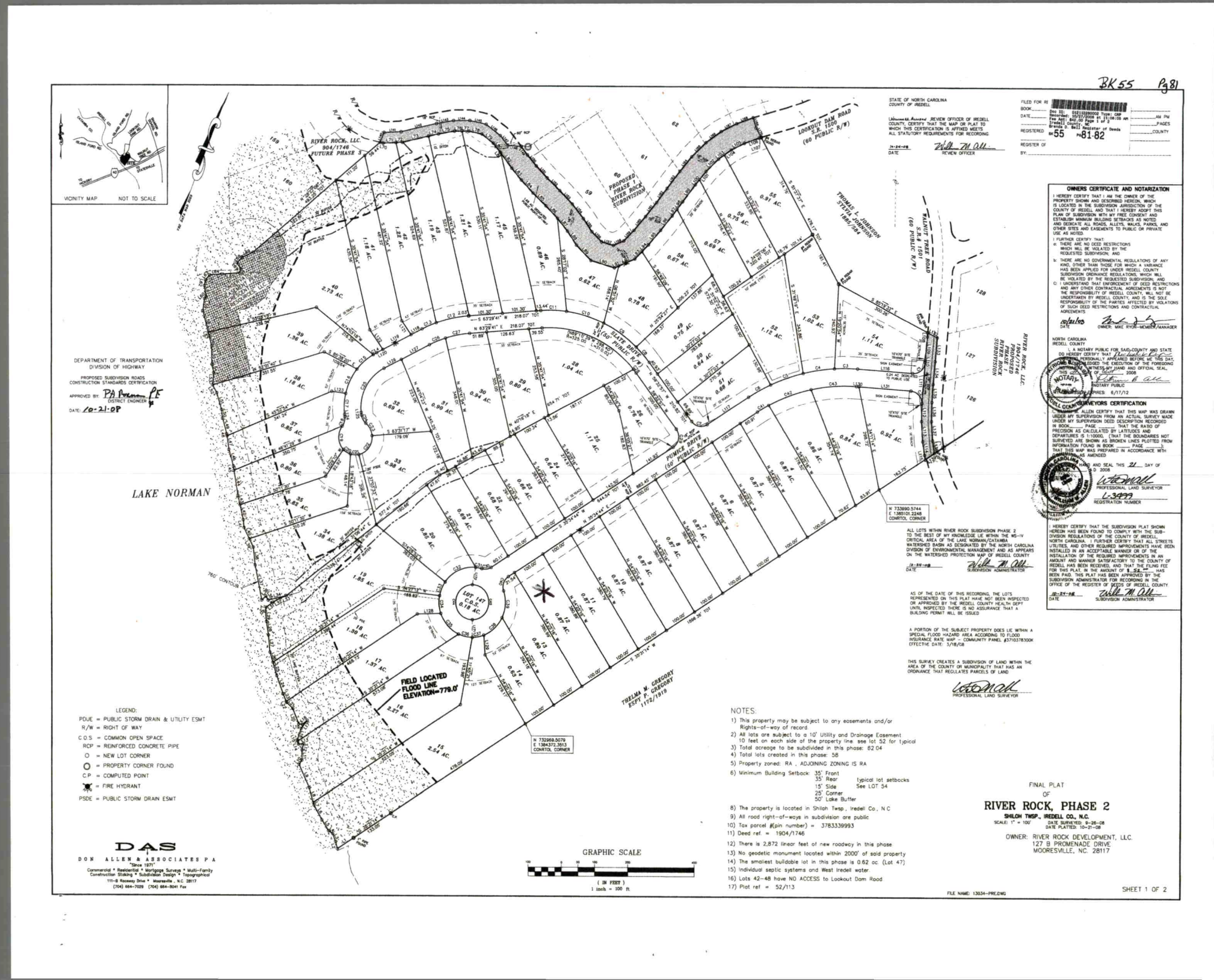
CALCULATIONS

Location	161 Pumice Dr. Statesville, NC 28625	
Project Number	21-0034	
Lot No:	12	
No. of Bedrooms	3	
Design Flow	360	$^{gal}/_{day}$
LTAR	0.300	$^{gal}/_{ft^2\,day}$
PPBPS? (YES OR NO)	NO	
Supply Line Length	18	ft.
Supply Line Volume	11.754	gal.
Required Feet of Line	300	ft.
Amount of Line from Layout	300	ft.
Gallons per Minute	N/A	$^{gal}/_{min}$
Required Septic Tank Capacity	1000	gal.
Septic Tank Size	1000	gal.
Panel Volume	N/A	gal.
# of Panels	N/A	
Dosing Volume	N/A	gal.
Tank Draw Down	N/A	
Pump Run Time		
Elevation Head	N/A	ft.
Pressure Head	N/A	ft.
Friction Factor	N/A	ft./100 ft. *(From the interpolater.)*
Friction Head	N/A	ft.
Total Dynamic Head (+15%)	N/A	ft.

FRICTION FACTOR INTERPOLATER
2" SCH 40 PVC

GPM	*f*
20	0.84
	-0.88
25	1.27
	-1.28
30	1.78
	-1.76
35	2.37
	-2.25
40	3.03
43.07	3.48
45	3.77
48.14	4.28
50	4.58
57.11	5.89
60	6.42

BK55 Pg81



STATE OF NORTH CAROLINA
COUNTY OF IREDELL

I, Unknown As Assured, REVIEW OFFICER OF IREDELL COUNTY, CERTIFY THAT THE MAP OR PLAT TO WHICH THIS CERTIFICATION IS AFFIXED MEETS ALL STATUTORY REQUIREMENTS FOR RECORDING.

10-24-08 DATE

REVIEW OFFICER

FILED FOR RE
BOOK
DATE
REGISTERED
REGISTER OF
BY:

Doc ID: 015122880002 Type: CRP
Recorded: 10/27/2008 11:08:06 AM
Fee Amt: $42.00 Page 1 of 2
Iredell County, NC
Brenda D. Bell Register of Deeds
BK55 PG81-82

AM PM
PAGES
COUNTY

OWNERS CERTIFICATE AND NOTARIZATION

I HEREBY CERTIFY THAT I AM THE OWNER OF THE PROPERTY SHOWN AND DESCRIBED HEREON, WHICH IS LOCATED IN THE SUBDIVISION JURISDICTION OF THE COUNTY OF IREDELL AND THAT I HEREBY ADOPT THIS PLAN OF SUBDIVISION WITH MY FREE CONSENT AND ESTABLISH MINIMUM BUILDING SETBACKS AS NOTED AND DEDICATE ALL ROADS, ALLEYS, WALKS, PARKS, AND OTHER SITES AND EASEMENTS TO PUBLIC OR PRIVATE USE AS NOTED.

I FURTHER CERTIFY THAT:
a. THERE ARE NO DEED RESTRICTIONS WHICH WILL BE VIOLATED BY THE REQUESTED SUBDIVISION; AND
b. THERE ARE NO GOVERNMENTAL REGULATIONS OF ANY KIND, OTHER THAN THOSE FOR WHICH A VARIANCE HAS BEEN APPLIED FOR UNDER IREDELL COUNTY SUBDIVISION ORDINANCE REGULATIONS, WHICH WILL BE VIOLATED BY THE REQUESTED SUBDIVISION; AND
c. I UNDERSTAND THAT ENFORCEMENT OF DEED RESTRICTIONS AND ANY OTHER CONTRACTUAL AGREEMENTS IS NOT THE RESPONSIBILITY OF IREDELL COUNTY, WILL NOT BE UNDERTAKEN BY IREDELL COUNTY, AND IS THE SOLE RESPONSIBILITY OF THE PARTIES AFFECTED BY VIOLATIONS OF SUCH DEED RESTRICTIONS AND CONTRACTUAL AGREEMENTS.

10/24/08 DATE

OWNER: MIKE RYOR-MEMBER/MANAGER

NORTH CAROLINA
IREDELL COUNTY

I, A NOTARY PUBLIC FOR SAID COUNTY AND STATE DO HEREBY CERTIFY THAT Rachel C. Allen PERSONALLY APPEARED BEFORE ME THIS DAY, ACKNOWLEDGED THE EXECUTION OF THE FOREGOING INSTRUMENT. WITNESS MY HAND AND OFFICIAL SEAL, THIS 24th DAY OF October 2008

NOTARY PUBLIC

MY COMMISSION EXPIRES: 6/17/12

SURVEYORS CERTIFICATION

I, DON ALLEN CERTIFY THAT THIS MAP WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION DEED DESCRIPTION RECORDED IN BOOK ____ PAGE ____; THAT THE RATIO OF PRECISION AS CALCULATED BY LATITUDES AND DEPARTURES IS 1:10000. (THAT THE BOUNDARIES NOT SURVEYED ARE SHOWN AS BROKEN LINES PLOTTED FROM INFORMATION FOUND IN BOOK ____ PAGE ____); THAT THIS MAP WAS PREPARED IN ACCORDANCE WITH G.S. 47-30 AS AMENDED.

WITNESS MY HAND AND SEAL THIS 21 DAY OF October, 2008

PROFESSIONAL LAND SURVEYOR

L-3999
REGISTRATION NUMBER

I HEREBY CERTIFY THAT THE SUBDIVISION PLAT SHOWN HEREON HAS BEEN FOUND TO COMPLY WITH THE SUBDIVISION REGULATIONS OF THE COUNTY OF IREDELL, NORTH CAROLINA. I FURTHER CERTIFY THAT ALL STREETS UTILITIES, AND OTHER REQUIRED IMPROVEMENTS HAVE BEEN INSTALLED IN AN ACCEPTABLE MANNER OR OF THE INSTALLATION OF THE REQUIRED IMPROVEMENTS IN AN AMOUNT AND MANNER SATISFACTORY TO THE COUNTY OF IREDELL HAS BEEN RECEIVED, AND THAT THE FILING FEE FOR THIS PLAT, IN THE AMOUNT OF $ 58.00 HAS BEEN PAID. THIS PLAT HAS BEEN APPROVED BY THE SUBDIVISION ADMINISTRATOR FOR RECORDING IN THE OFFICE OF THE REGISTER OF DEEDS OF IREDELL COUNTY.

10-24-08 DATE

SUBDIVISION ADMINISTRATOR

ALL LOTS WITHIN RIVER ROCK SUBDIVISION PHASE 2 TO THE BEST OF MY KNOWLEDGE LIE WITHIN THE WS-IV CRITICAL AREA OF THE LAKE NORMAN/CATAWBA WATERSHED BASIN AS DESIGNATED BY THE NORTH CAROLINA DIVISION OF ENVIRONMENTAL MANAGEMENT AND AS APPEARS ON THE WATERSHED PROTECTION MAP OF IREDELL COUNTY.

10-24-08 DATE

SUBDIVISION ADMINISTRATOR

AS OF THE DATE OF THIS RECORDING, THE LOTS REPRESENTED ON THIS PLAT HAVE NOT BEEN INSPECTED OR APPROVED BY THE IREDELL COUNTY HEALTH DEPT UNTIL INSPECTED THERE IS NO ASSURANCE THAT A BUILDING PERMIT WILL BE ISSUED

A PORTION OF THE SUBJECT PROPERTY DOES LIE WITHIN A SPECIAL FLOOD HAZARD AREA ACCORDING TO FLOOD INSURANCE RATE MAP – COMMUNITY PANEL #3710378300K EFFECTIVE DATE: 3/18/08

THIS SURVEY CREATES A SUBDIVISION OF LAND WITHIN THE AREA OF THE COUNTY OR MUNICIPALITY THAT HAS AN ORDINANCE THAT REGULATES PARCELS OF LAND

PROFESSIONAL LAND SURVEYOR

NOTES:
1) This property may be subject to any easements and/or Rights-of-way of record
2) All lots are subject to a 10' Utility and Drainage Easement 10 feet on each side of the property line see lot 52 for typical
3) Total acreage to be subdivided in this phase: 62.04
4) Total lots created in this phase: 58
5) Property zoned: RA , ADJOINING ZONING IS RA
6) Minimum Building Setback: 35' Front
35' Rear typical lot setbacks
15' Side See LOT 54
25' Corner
50' Lake Buffer
8) The property is located in Shiloh Twsp., Iredell Co., N.C.
9) All road right-of-ways in subdivision are public
10) Tax parcel #(pin number) = 3783339993
11) Deed ref. = 1904/1746
12) There is 2,872 linear feet of new roadway in this phase.
13) No geodetic monument located within 2000' of said property
14) The smallest buildable lot in this phase is 0.62 ac. (Lot 47)
15) Individual septic systems and West Iredell water.
16) Lots 42–48 have NO ACCESS to Lookout Dam Road
17) Plat ref. = 52/113

DAS
DON ALLEN & ASSOCIATES P.A.
"Since 1971"
Commercial * Residential * Mortgage Surveys * Multi-Family
Construction Staking * Subdivision Design * Topographical
111-B Raceway Drive * Mooresville, N.C. 28117
(704) 664-7029 (704) 664-8041 Fax

FINAL PLAT
OF
RIVER ROCK, PHASE 2
SHILOH TWSP., IREDELL CO., N.C.
SCALE: 1" = 100' DATE SURVEYED: 9-26-08 DATE PLATTED: 10-21-08

OWNER: RIVER ROCK DEVELOPMENT, LLC.
127 B PROMENADE DRIVE
MOORESVILLE, NC. 28117

FILE NAME: 13034-PRE.DWG

SHEET 1 OF 2

RECEIVED JUN 8 - 2021

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Paid $500.00

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) Septic Improvement Permit ( ) 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 AP-318509

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 (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

****

Applicant Information: **(PRINT CLEARLY)**

Applicant Name: Michael Melicia **Address:** 428-B S. Main St (Suite 682) Davidson NC **Zip:** 28036

Applicant Email: mjmelicia24@gmail.com **Phone:** 704-953-4555 **Alt. Phone:**

Owner Name: Same **Address:** Same **Zip:** Same

Owner Email: Same **Phone:** Same **Alt. Phone:**

****

Property Information:

Street Address: 161 Pumice Dr. Statesville NC 28625

Subdivision Name: River Rock **Section/Phase:** **Lot Number:** 12

Driving Directions: I-40, Sharon School Rd, Walnut Tree Rd, Pumice Dr.

****

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

CHECK FOUNDATION TYPE

(✓) New Single Family Residence — Maximum Number of Bedrooms: 3 — ( ) 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: — ( ) Basement without Plumbing
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem:

Non-Residential Site Development: Type of Business:
Square Footage of Building: Max. Number of Employees: Max. Number of Seats/Beds/Other:

****

Water Supply: ( ) Replacement Well – Reason:
( ) Multi-connection Well Number of Houses: Number of Persons:

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

****

Desired Septic System Type: ***(you may rank in order of preference)*** Year existing system installed:
( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional (✓) Other: Accepted

****

Please answer the following to the best of your ability:

( ) Yes (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (✓) 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: _____ 5/5/21

Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

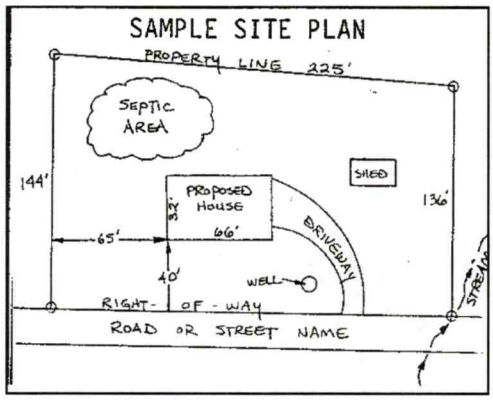
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

SITE PLAN WORKSHEET

SEE THE "SAMPLE SITE PLAN" BELOW. *INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM OR WELL PERMIT*!!!

Place an (X) beside each item as you complete the site plan:

- (X) **Property Line measurements are clearly identified**
- (X) **All proposed structures are indicated**
- (X) **Front and side setbacks from property line**
- (X) **Preferred driveway location**
- (X) **Preferred well location**
- (X) **Preferred septic system location**
- (X) **North arrow, or other sufficient indicator of direction**



Circle N/A on the following if appropriate:

Location of septic systems and wells within 100' of your property N/A
Location of easements and rights of ways on your property N/A
Location of any designated wetlands on the property N/A

USE THIS SPACE TO DRAW YOUR SITE PLAN

Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site

See Attached

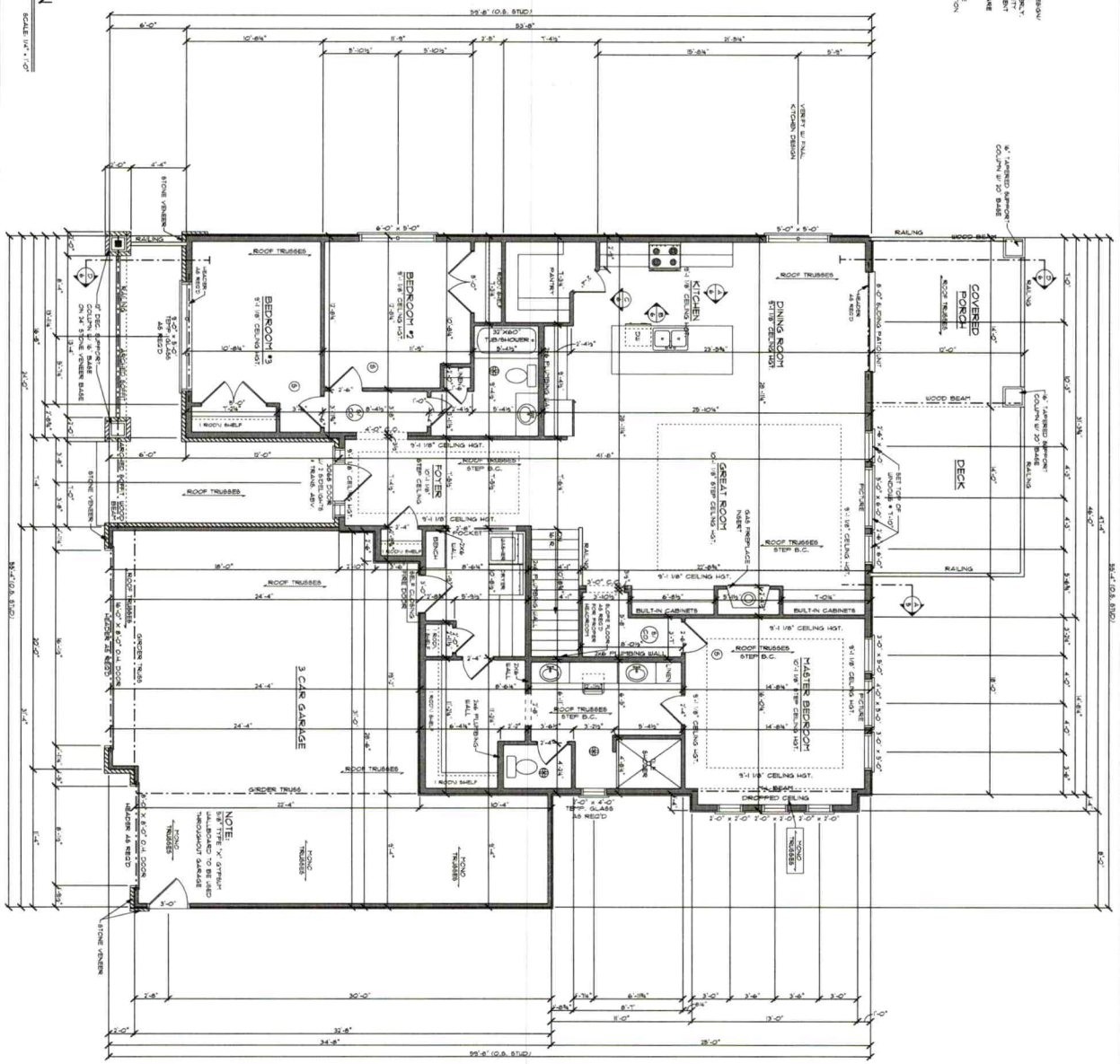
Signature: _____ 5/5/21

Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**

Acknowledgement Of
Plans Submittal ONLY!
Date 6/8/21
Date 6/9/21

MAIN FLOOR PLAN

SCALE: 1/4" = 1'-0"



55'-4"

59'-8"

GENERAL NOTES:

1. DOUBLE HUNG WINDOW / UNLESS NOTED
2. IT IS THE RESPONSIBILITY OF THE GENERAL CONTRACTOR TO INSURE THAT ALL PRODUCTS AND MATERIALS ARE INSTALLED AND USED IN ACCORDANCE WITH MANUFACTURER'S SPECIFICATIONS.
3. IT IS THE RESPONSIBILITY OF THE PLUMBING, ELECTRICAL AND HVAC SUB-CONTRACTORS TO DESIGN SYSTEMS AND MAKE SUB-CONTRACTORS RESPONSIBILITY.
4. IT IS THE OWNER OR CONTRACTOR'S RESPONSIBILITY TO PROTECT ALL MATERIALS FROM THE ELEMENTS AGAINST THE BUILD-UP OF MOISTURE OR MOLD.
5. CONSTRUCTION MATERIALS REFERENCED HEREIN ARE SUGGESTIONS ONLY. IT IS THE CONTRACTOR'S RESPONSIBILITY TO COMPLY WITH YOUR LOCAL ZONING OR SAFETY REGULATIONS. OWNER OR CONTRACTOR SHALL BE RESPONSIBLE FOR ALL MATERIALS AND SELECTION OF ALL CONSTRUCTION MATERIALS.
6. SMOKE DETECTOR (S)
7. SMOKE DETECTOR/CARBON MONOXIDE DETECTOR (S/CO)
8. INTERIOR WALL DIMENSIONS ARE TO FACE OF STUD.
9. EXTERIOR WALL DIMENSIONS ARE TO OUTSIDE OF STUD.

FRAMING NOTES:

1. 9'-1 1/8" WALL HEIGHT UNLESS NOTED
2. ROOF TRUSS TO BE ENGINEERED TRUSSPOR OR ARCH TOPS
3. ROOF TRUSSES TO BE DESIGNED, LICENSED IN THE STATE OR REGION OF CONSTRUCTION FOR ALL DEAD & LIVE LOADS.
4. ALL EXTERIOR WALLS 2"x6" @ 16" O.C.
5. ALL INTERIOR WALLS 2"x4" @ 16" O.C.
6. "MONOLIGHT" BEAM + EXTERIOR HEADER SIZES TO BE VERIFIED BY SUPPLIER
7. PER PLUMBING CALLS AS REQ

NOTE: ACCORDING TO THE 2006 IRC ROOF SPACES THAT NEED TO BE ADJUSTED TO MEET SECTION R-313 REQUIREMENTS. VERIFY W LOCAL BUILDING DEPARTMENT.

MAIN FLOOR:
2005 SQ. FT.

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TRADITIONS & TRENDS
AD 65518

WWW.AHMANNDESIGN.COM

AHMANN DESIGN INC.
(319) 395-7900

3 OF SEVEN

JOB NO. AD 65518
REVISIONS
FINAL RELEASE 10/8/18
DRAWN BY: CA
CHECKED BY: JL

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

Sheet 1 of 1
PROPERTY ID #: 3783433739
COUNTY: Iredell

SOIL/SITE EVALUATION
***for* ON-SITE WASTEWATER SYSTEM**
(Complete all fields in full)

OWNER: Mike Melicia (Buyer) APPLICATION DATE
ADDRESS: 7403 Saddle Trail Ln, Charlotte NC 28269 DATE EVALUATED: 04/15/21
PROPOSED FACILITY: 3 BR PROPOSED DESIGN FLOW (.1949): 360 gpd PROPERTY SIZE: 0.87 AC
LOCATION OF SITE: 161 Pumice Dr. Statesville NC 28625 PROPERTY RECORDED: Yes
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
B 1	L/8-10%	0-16	BCL wfsbk	Fr SS SP SEXP		50	—	—	PS .3
		16-50	DABC wfsbk	Fr SS P					
B 2	L/5-7%	0-7	BCL wfsbk	Fr SS SP SEXP		50	—	—	PS .3
		7-28	RBC wfsbk	Fr SS P					
		28-50	BRC wmsblk	Fr SS P					
B 3	L/4-6%	0-10	BL Gr	Fr SS SP SEXP		50	—	—	PS .3
		10-19	BCL wfsbk	Fr SS SP					
		19-50	RBC wfsbk	Fr SS P					
B 4	L/3%	0-7	BL Gr	Fr SS SP		50	—	—	PS .5
		7-13	BCL wfsbk	Fr SS SP					
		13-30	RBC wfsbk	Fr SS P					
		30-50	BRC wmsbk	Fr SS P	Few Mags.				

LICENSED SOIL SCIENTIST Samuel A. Rollans 1231

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	Accepted 25%	Accepted 25%
Site LTAR	0.3	0.5

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS

EVALUATED BY: S. Ashley Rollans
OTHER(S) PRESENT: Chad Wagner

COMMENTS:

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

Applications for permits require the "signature of the owner or owner's legal representative" (15A NCAC 18A .1937). If the owner does not sign the application himself or herself, they can submit any one of the following documents to designate their legal representative:

Power of Attorney; Real Estate Contract; Estate executor; Bankruptcy trustee; Court ordered guardianship

In the absence of the above documentation, the property owner may provide the local health department with documentation that designates a legal representative. A property owner may:

Complete this form to document his or her legal representative, or provide his or her own form that contains the information in this form.

If there are multiple property owners, then all property owners must sign the form that designates a legal representative.

By signing a form that designates a legal representative for purposes of 15A NCAC 18A .1937, the property owner authorizes that representative to act on their behalf in matters pertaining to the application and permitting process, including signing or receiving any application, document or permit. The owner retains full responsibility to meet all permit conditions specified by the local health department.

I, Susan Melicia, am the legal owner(s) of the property located at 161 Pumice Dr. Statesville NC 28625, identified as PIN (Parcel Identification Number) 3783433239, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) SFS / Ashley Rollans, _____, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

- Application for Improvement Permit (IP) / Authorization to Construct (AC)
- Improvement Permit (IP) / Authorization to Construct (AC)
- Application for soil-site evaluation (new/repair)
- Application/permit for private drinking water well/well abandonment
- Application for Compliance Inspection

I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

Susan Melicia 5/24/2024 _____ _____

Signature of Owner(s) Date Signature of Witness Date

Please return this signed form to the appropriate office:

Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

ENVIRONMENTAL HEALTH REQUIREMENTS for SEPTIC and WELL PERMITS

The following items must be completed *PRIOR* to the *SUBMITTAL* of any Environmental Health Application. Incomplete applications will be returned to the applicant and cannot be processed or placed on the work list.

*** Initial all lines below to indicate you have submitted each form and completed every site requirement ****

S.A.R. **Complete all Environmental Health forms**:
- S.A.R. Application
- S.A.R. Site Plan with dimensions of proposed structure, addition, pool etc.
- S.A.R. Documentation to Authorize Owner Agent (if the property owner is not the applicant)
- S.A.R. Copy of Zoning Permit when applicable
- S.A.R. Sign this sheet after you have completed all items

S.A.R. **Lot must be cleared of heavy undergrowth.** In order to evaluate the lot, the footprint of the proposed structure must be visible. Adequate area for the septic drain field and repair area must be sufficiently cleared of heavy undergrowth, with **50 feet of visibility** in all directions. Inspectors must be able to evaluate the property, shoot laser level elevations, layout the drain field, do soils work, etc. **If the lot is not cleared sufficiently, then a $100 site revisit fee will be charged and the evaluation will be put on HOLD until the requirement is met.**

S.A.R. **Clearly mark all property corners by locating existing iron or concrete markers**. Flag all property lines every 25 feet if adjacent corners are not visible when standing on any given corner. Property lines must be flagged by a licensed NC surveyor & easily identified **prior to application submittal** (exception may apply for septic repair evaluations only).
'Mow lines' and/or fence lines do NOT constitute marked lines. **If the property lines are not properly marked when the lot is ready to be evaluated, then the application will be put on HOLD and a $100 site re-visit fee charged**.

S.A.R. **Stake or flag the footprint of the proposed structure, addition, pool etc. to match the site plan submitted.** The proposed structure, etc. **must be staked** out on the property as per the site plan.

S.A.R. If an **Authorization to Construct (AC) is desired**, submit a recorded copy of the plat for newly created or subdivided lot(s) and a LEGIBLE copy of the basic floor plan no larger than 8 ½" x 14" for each floor of the structure including decks, porches, etc. **The overall dimensions must be clearly noted & the rooms labeled.**

Any site not meeting the above requirements when staff arrives for the evaluation will result in a $100 site revisit fee being charged and the request being placed on HOLD. This will delay the processing of the application.
Once work by Environmental Health staff begins, the up-front fees paid toward securing any health department permit are non-refundable. Refunds for work not started, due to a customer changing their mind or plans, are subject to an administrative fee of $50 to defray a portion of the costs of processing the refund.

Backhoe pits are required for all applications that require a soils evaluation.
DO NOT DIG PITS UNTIL THE EH SPECIALIST HAS AUTHORIZED AND SCHEDULED YOUR EVALUATION TIME.
- **All utilities shall be marked before pits are dug. Call NC 811 for this service.**
- **The applicant/agent is responsible for securing these services**
- **Backhoe pits are to be dug at the locations and depths determined by the Environmental Health Specialist or a NC Licensed Soil Scientist. A minimum of four pits must be dug.**
- **The EH specialist will contact you when your application is ready to be processed for pit scheduling.**
- **Your backhoe operator must be on site during the EH Specialist's evaluation to prevent your operator from having to return to the property for additional work.**

By signing below I am acknowledging the above specifications have been met and the site is READY to be evaluated AND I understand the backhoe pit requirement and will secure these services (if applicable).

Signature _____ **Date** 5/5/21

Questions? Contact the Environmental Health Offices below:

Statesville Office
349 North Center Street (2nd Floor Building Standards)
Statesville, NC 28677-4063
Phone: (704)878-5305 ext. 3456

Mooresville Office
610 East Center Avenue (2nd Floor Govt. Center South)
Mooresville, NC 28115-2548
Phone: (704)660-3625

IREDELL COUNTY · NC

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

APPLICATION NUMBER
318509 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
3783433239.000	161 PUMICE DR	Iredell County

Owner Information	Applicant Information
Name: 161 PUMICE DRIVE LAND TR	Name: ROLLANS SOIL & ENVIRONMENTAL SERVICES
Address:	Address: 470 NORTH BROAD STREET SUITE D MOORESVILLE, NC 28115
Phone:	Phone: (704)658-1723

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.87	35	35	15	15	WSIV-CA Catawba/Lake Norman	NO

Remarks
SFD BRINGING IN APPS

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.

Signature of Owner/Contractor

Date: 06/08/2021

Permit Number	318509	TOTAL FEES:	$77.25