ICHD - ENVIRONMENTAL HEALTH DIVISION

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

BLDR-2023-14769 PERMIT # AP OSWP 2022-7475

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

PIN # 3783 -- 44 -- 1128

APPLICANT/OWNER: Clayton Homes #72 APPLICANT ADDRESS: 2026 Northside Dr. Statesville NC 28677

SITE ADDRESS: 124 Slate Dr. Statesville NC 28625 PHONE: 704 929 1552 ALT. PHONE –

SITE DIRECTIONS: I 40 W (R) Sharon School Rd, (L) on Walnut Tree Rd, (L) on Pumice Dr, (R) on Slate Dr SAP CONTROLLED: ☐ YES ☒ NO

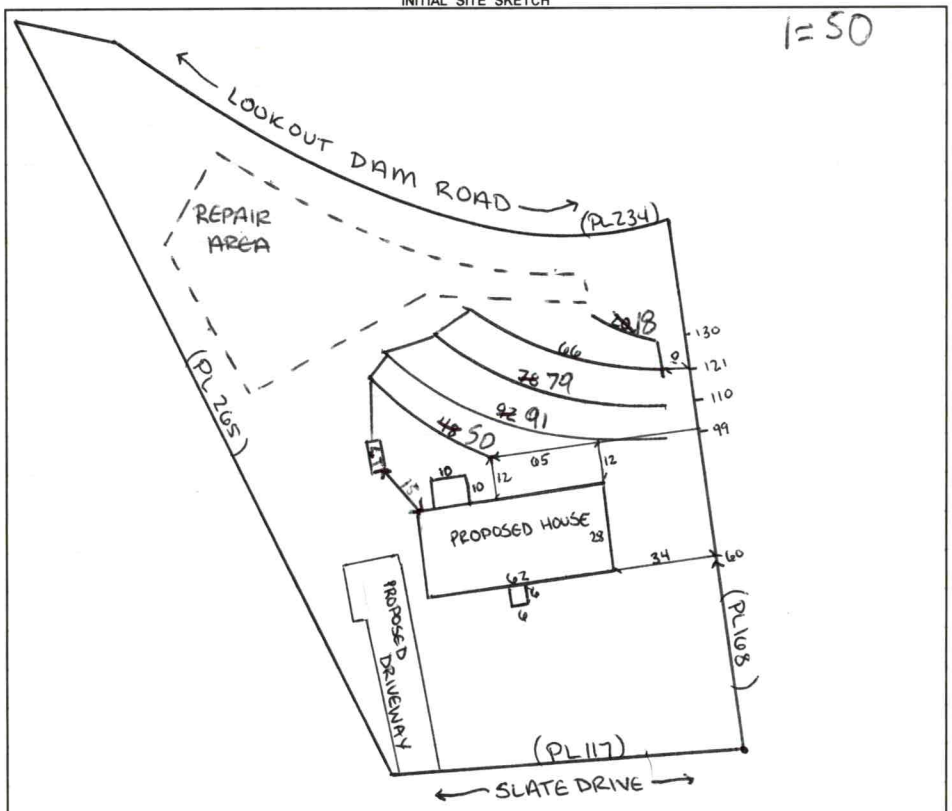
SUBDIVISION: River Rock SECTION: – LOT # 47 LOT AREA: 0.62 AC DESIGN FLOW: 300 L.T.A.R.: 0.3

Septic Tank	1000	(gal)	STB	160	Date	10-24-2022	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	
Pump Tank		(gal)	PT		Date		System Description:	Gravity 25% Reduction			
Pump Make			Model		Serial #		Repair System Description:	25% Reduction PM			
# Nitrification Fields	1	# Lines	5		Linear Ft	300	Maintenance Agreement Required:	☐ YES	☒ NO		
Trench Width	36 in	Trench Bottom Depth	Max	36 in	Gravel Depth	N/A		☒ GRAVITY	☐ PRESSURE		

☒ Residence	No. Bedrooms	3	**Water Supply**
☐ Business	No. Persons	6 max	☐ Private
☐ Other	No. Employees		☒ Public
☐ Slab	☒ Crawl Space		☐ Community
☐ Basement w/plumbing			☐ Basement w/o plumbing

Comments / Conditions: Install on contour 9ft centers. Do not park, drive, or construct on septic area. Stay 10ft off house.

INITIAL SITE SKETCH



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: Online Signature Date: Installed by: ABEE LANDSCAPING

IMPROVEMENT PERMIT by: Matt Wi Date: 12/1/22 OPERATION PERMIT by: Burnett E. White Date: 2-22-2023

AUTHORIZATION TO CONSTRUCT by: Matt Wi Date: 12/1/22 Existing System Inspected by: Date:

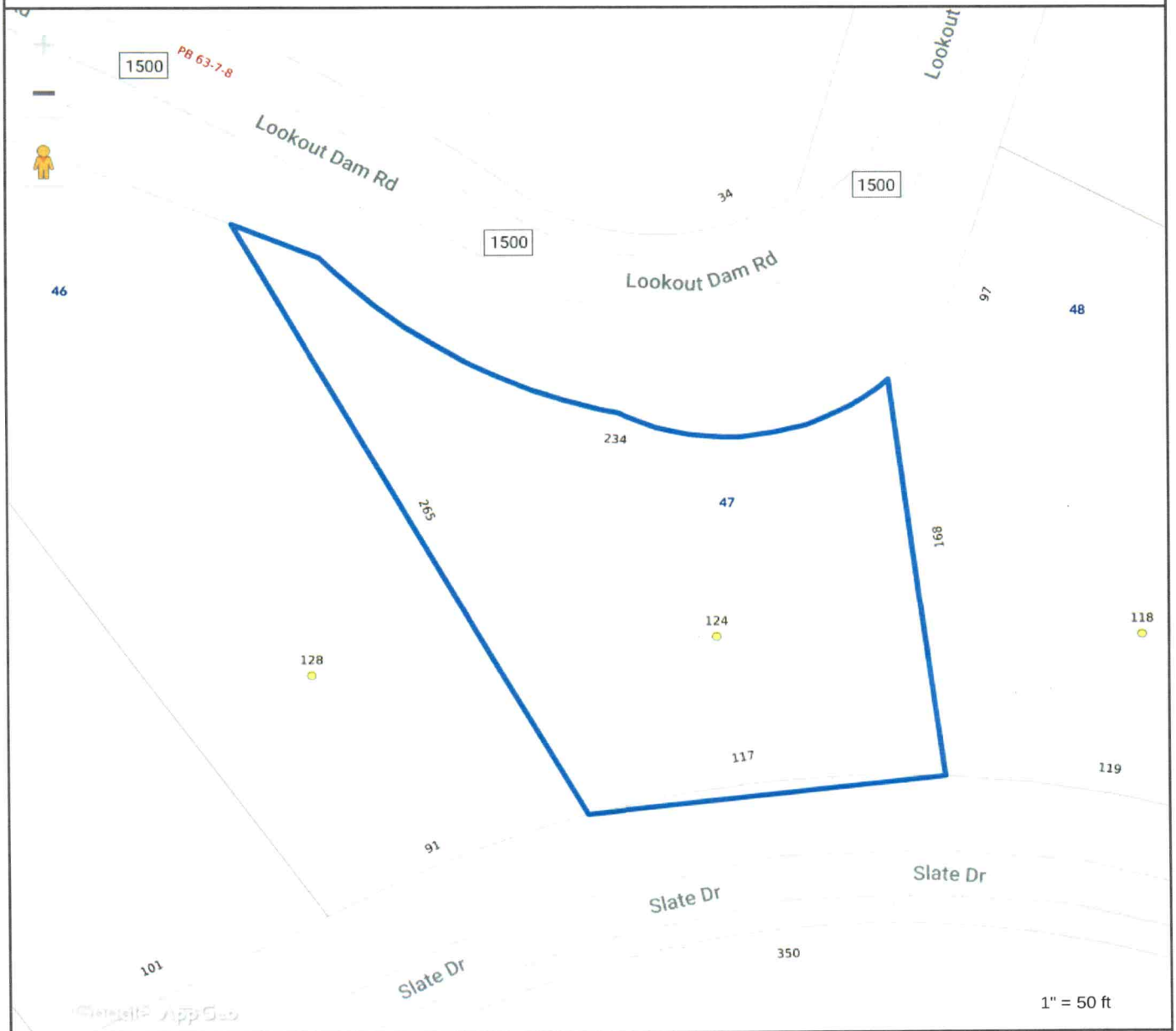
FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.

Item	Date	Initials
Drain Lines Checked		
Tanks Checked		
Pressure Manifold or Valve Box Checked		
Pressure Head Set		
Electrical Checked		
Floats Set		
Alarm Checked		
Maintenance Contract Needed? Y / N		
Comments:		

Repairs Only	
	State Code
Failing System Code	
Type of Distribution	G or P
Type of Failure/Malfunction	
Primary Cause of Failure/Malfunction	
Age of System? _____	
Initial or Repair? _____	

Iredell County, North Carolina

November 30, 2022



Tax Map Information

• PIN	3783441128.000
• Address	124 SLATE DR
• Account #	Acct 80023758
• Tax Owner	HERNANDEZ MARDUQUEO SILVANO
• Mailing Address	2940 SHADY REACH LN
•	CHARLOTTE, NC 28214
• GIS Owner	HERNANDEZ MARDUQUEO S+TERRI L
• Deed Info	2351 / 1765 - WD - 20150417
• Tax Acres	0.62 AC
• Lot #	47
• Description	RIVER ROCK P2 PB55-81
• Zoning	RA
• Old Parcel #	
• Bldg Value	$0
• OBXF Value	$0
• Land Value	$18,500
• Total Value	$18,500
• Defer Value	$0
• Tax Districts	-ALLCNTY FIRE- -

IREDELL COUNTY NC

MAP FOR REFERENCE ONLY
NOT A LEGAL DOCUMENT

Iredell County, North Carolina makes no claims and no warranties, expressed or implied, concerning the validity or accuracy of the GIS data presented on this map.

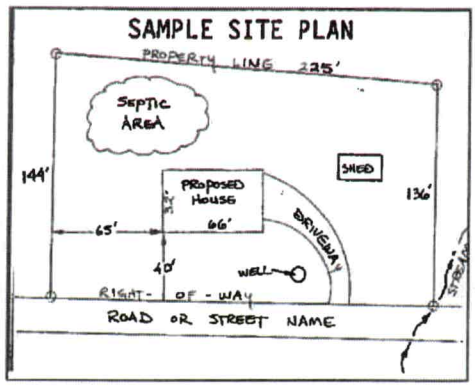
Print map scale is approximate. Critical layout or measurement activities should not be done using this resource.

124 Slate Dr

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:

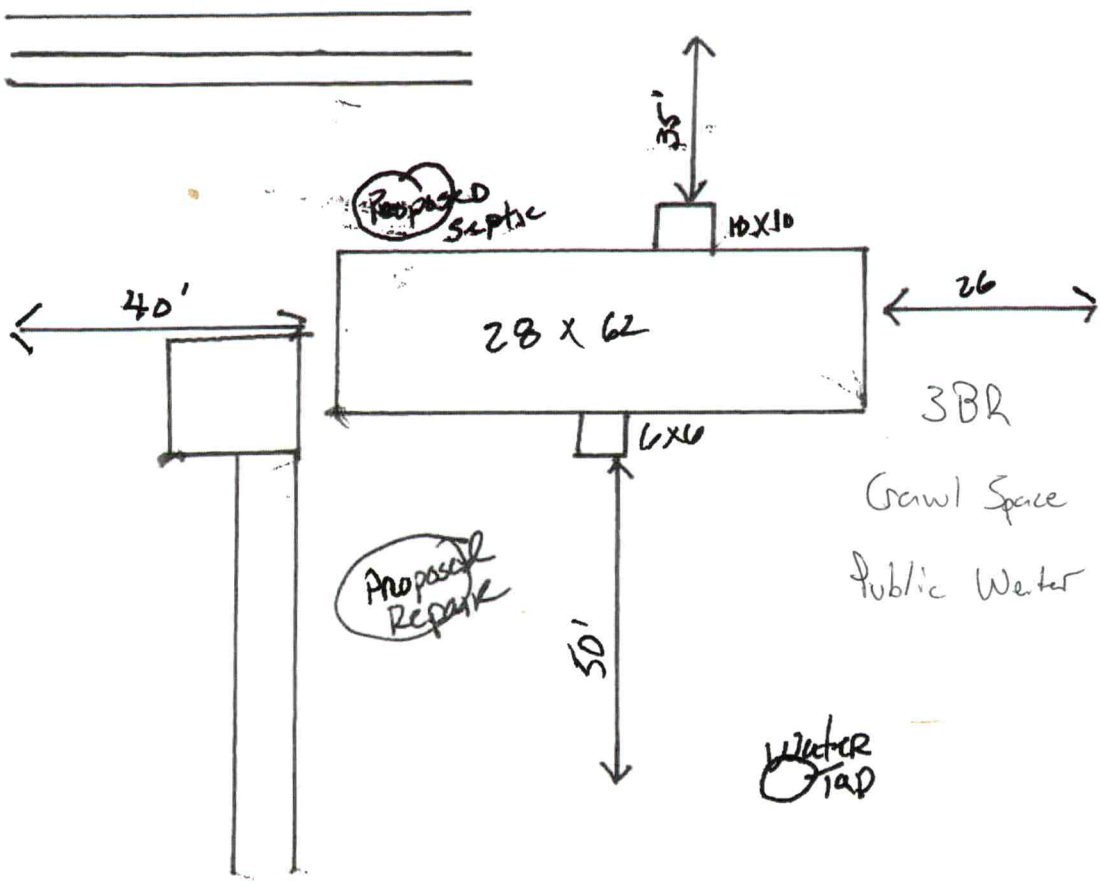
- ( ) **Property Line measurements are clearly identified**
- ( ) **All proposed structures are indicated**
- ( ) **Front and side setbacks from property line**
- ( ) **Preferred driveway location**
- ( ) **Preferred well location**
- ( ) **Preferred septic system location**
- ( ) **North arrow, or other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



Signature: _____ _____

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

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	SEXP (Slightly Expansive)	G (Single Grain)
CV (Convex Slope)		LS (Loamy Sand)			EXP (Expansive)	M (Massive)
D (Drainage Way)						CR (Crumb)
DS (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
FP (Flood Plain)		L (Loam)				SBK (Subangular Blocky)
FS (Foot Slope)						ABK (Angular Blocky)
H (Head Slope)	III	Si (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
L (Linear Slope)		SiCL (Silty Clay Loam)				PR (Prismatic)
N (Nose Slope)		CL (Clay Loam)				
R (Ridge)		SCL (Sandy Clay Loam)			**MOIST**	**WET**
S (Shoulder Slope)		SiL (Silt Loam)				
T (Terrace)					VFR (Very Friable)	NS (Non-sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FR (Friable)	SS (Slightly Sticky)
		SiC (Silty Clay)			FI (Firm)	S (Sticky)
		C (Clay)			VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
		O (Organic)	None	None	EFI (Extremely Firm)	NP (Non-plastic)
						SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

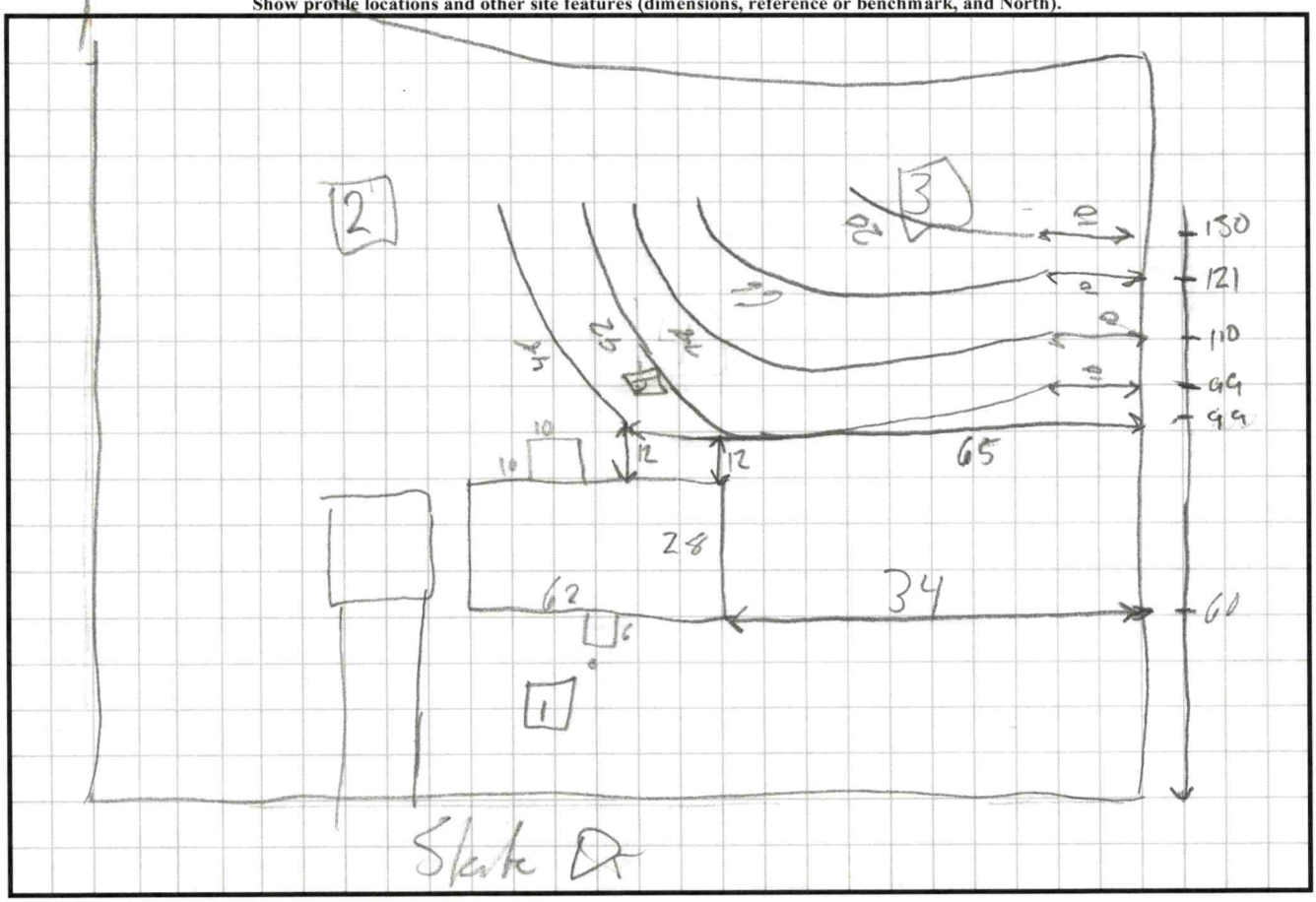
NOTES

HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
CLASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.

Long-term Acceptance Rate (LTAR): gal/day/ft^2

Show profile locations and other site features (dimensions, reference or benchmark, and North).



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

Sheet ____ *of* ____
PROPERTY ID #: _____
COUNTY: _____

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

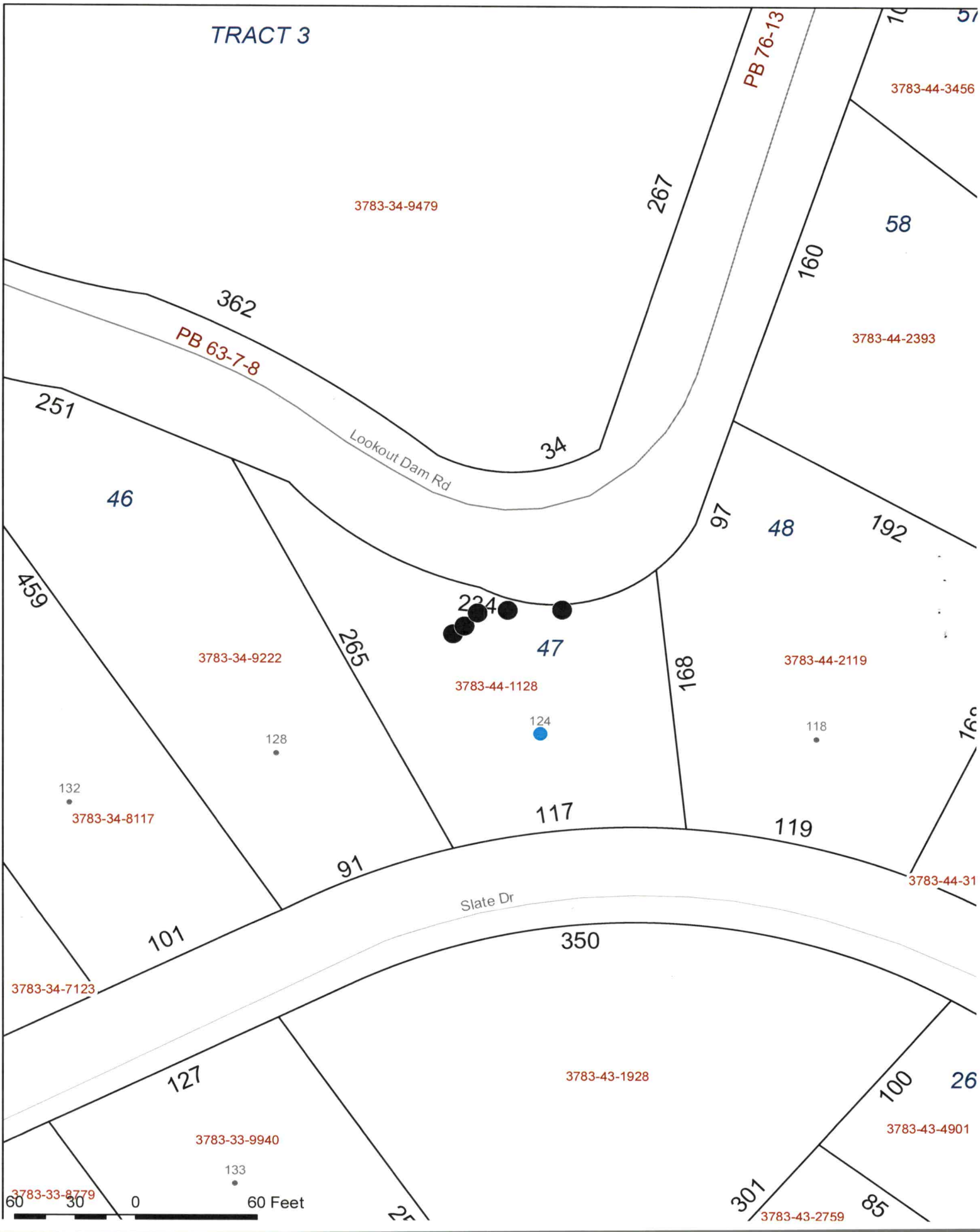
OWNER: _____ APPLICATION DATE _____
ADDRESS: _____ DATE EVALUATED: 11/17/22
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
LOCATION OF SITE: 124 State Dr PROPERTY RECORDED: _____
WATER SUPPLY: Private Public Well Spring Other _____
EVALUATION METHOD: Auger Boring Pit Cut TYPE OF WASTEWATER: Sewage Industrial Process Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
1	LS 10%	0-12	SL/SBK	SO SP FR SS	-	48	-	-	PS .3
		12-48	C/SBK	SO SP FR SS					
2	LS 11%	0-12	SL/GR	SO SP FR SS	-	51	-	Rock Throughout CL	PS .3
		12-40	C/SBK	SO SP FR SS					
		40-51	CL/SBK	SO SP FR SS					
3	LS 9%	0-6	SL/GR	" " "	>	61	-	-	PS .3
		6-36	C/SBK	↓					
		36-61	CL/SBK	↓					
4	LS 8%	0-6	↓	↓	-	51	-	-	PS .3
		6-35	↓	↓					
		35-51	↓	↓					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	360	360
System Type(s)	25%	25% PM
Site LTAR	.3	.3

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Matthew Wilkinson
OTHER(S) PRESENT: _____

COMMENTS: _____


TRACT 3
PB 76-13
3783-44-3456
3783-34-9479
267
58
160
362
PB 63-7-8
3783-44-2393
251
Lookout Dam Rd
34
46
97
48
192
459
224
265
47
168
3783-34-9222
3783-44-2119
3783-44-1128
124
118
128
132
3783-34-8117
117
119
91
3783-44-31
Slate Dr
101
350
3783-34-7123
127
3783-43-1928
100
26
3783-33-9940
3783-43-4901
133
3783-33-8779
301
85
3783-43-2759
60 30 0 60 Feet

PERMIT SNAPSHOT REPORT OSWP-2022-7475
FOR IREDELL COUNTY

Permit Type: Environmental Health OSWP
Work Class: EH Septic Improvement Permit
Status: In Progress
Valuation: $0.00
Description: 3 BR 25% Reduction System

Project:
District: Iredell County
Square Feet: 0.00
Assigned To: Wilkinson, Matthew

App Date: 10/20/2022
Exp Date: NOT AVAILABLE
Completed: NOT COMPLETED
Approval Expire Date:

Parcel: 3783441128.000 Main

Address: 124 Slate Dr Main
Statesville, NC 28625

Zone: RA(Residential Agricultural District)

Applicant/Authorized Agent
CLAYTON HOMES #72
2026 NORTHSIDE 2026
NORTHSIDE DR
STATESVILLE, NC 28677
Mobile: (704) 929-1552

Property Owner
CLAYTON HOMES #72
2026 NORTHSIDE 2026
NORTHSIDE DR
STATESVILLE, NC 28677
Mobile: (704) 929-1552

Permit Custom Fields

How is your site plan being submitted	Custom Site Plan	Does the site contain any jurisdictional wetlands	No	Non-domestic Sewage Generated	No
Other Public Agency	No	All proposed structure dimensions	28x62 Off Frame 3 BR 2 BTH Modular Home Front 6x6 front Porch, rear 10x10 deck. Paved Concrete Driveway	What are the proposed structures	New Single Family Residence
If other Addition/Structure, please explain		Maximum Number of Bedrooms	3	Number of Occupants	1
Foundation Type	Crawl Space Foundation	Water Supply	Other Public Water	Desired Septic System Type	Other
If other septic system type, please explain	3 BR 25% Reduction System	Has this project been approved by TRC	No	Lot Acreage	0.62
Front Setback	35	Back Setback	35	Left Setback	15
Right Setback	15	Is the structure or development in the floodplain	No	Is the property in a local historic district?	No
Is the property located downtown?	No	Zoning Notes/Addendums	REQUIREMENTS FOR ALL MULTI -SECTIONAL MOBILE HOMES Must meet requirement R9 of the LDC. Minimum size of main body is at least 22 feet by 40 feet; Must have standard residential shingles; Minimum of 3/12 roof pitch; Must have continuous masonry underpinning; Must have minimum roof eave and raker projections of 6 inches; Must have a 36 square foot deck or porch at all front entrances; Exterior siding must consist of vinyl or aluminum lap siding, wood, or hardboard, comparable in composition, appearance and durability to residential siding; Must remove towing apparatus; Must face front property line and be no more than 20 degrees from parallel to the front property line. Original mobile home		must be removed before Certificate of Occupancy can be approved.

PERMIT SNAPSHOT REPORT (OSWP-2022-7475)

Additional Unique Setbacks Apply	No	Watershed	WSIV CA CATAWBA/LAKE NORMAN

Attachment File Name	Added On	Added By	Attachment Group	Notes
Signature_ADAM_CASSTEVENS_10/20/2022.jpg	10/20/2022 11:22	CASSTEVENS, ADAM		Uploaded via CSS
Jones Authorization_v1.pdf	10/21/2022 16:54	Nebel, Barbara	Available Online	Authorize to Act as Agent
Jones Floorplan_v1.pdf	10/21/2022 16:54	Nebel, Barbara	Available Online	Floor Plan(s)
Jones Site Plan_v1.pdf	10/21/2022 16:54	Nebel, Barbara	Available Online	Site Plan
Shikita Jones Septic Information_v1.pdf	10/21/2022 16:54	Nebel, Barbara	Available Online	Additional Supporting Information

Inspection Number	Status	Inspection Type	Request Date	Scheduled Start Date	Scheduled End Date	Actual Start Date	Actual End Date
2022-32341	Passed - Permit	OSWP Septic/Well Preliminary Site Visit	11/03/2022			11/03/2022 14:09	11/03/2022 14:09

Inspectors: Kobuck, Teanna (Primary)

Checklist Item	Description	Passed	Comments
General Comments	Checklist item used to track general comments, not specific to any other checklist item	No	

Invoice No.	Fee	Fee Amount	Amount Paid
INV-00004089	New Gravity System	$500.00	$500.00
	Total for Invoice INV-00004089	$500.00	$500.00
INV-00004199	Iredell Zoning Permit Fee	$75.00	$75.00
	Iredell Zoning Tech Fee	$2.25	$2.25
	Total for Invoice INV-00004199	$77.25	$77.25
	Grand Total for Permit	**$577.25**	**$577.25**

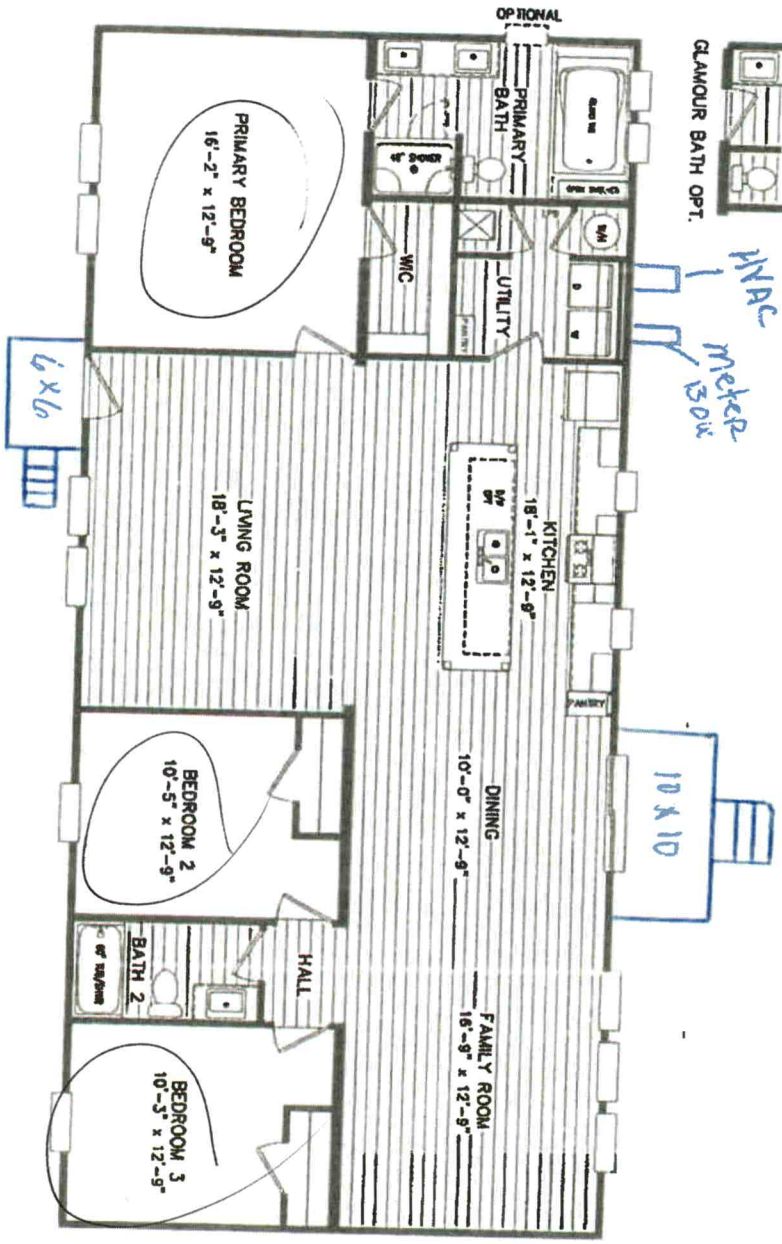
Workflow Step / Action Name	Action Type	Start Date	End Date
Application Completeness Check v.1		10/21/2022 0:00	10/21/2022 16:55
Confirm application complete v.1	Generic Action		10/21/2022 16:55
Fees v.1		10/21/2022 0:00	10/26/2022 12:15
Issue Invoice v.1	Generic Action		10/21/2022 16:56
Fees Paid v.1	Generic Action		10/26/2022 12:15
Zoning Review v.1		10/21/2022 0:00	10/26/2022 12:15
Iredell County Zoning Approval v.1	Task	10/21/2022 0:00	10/26/2022 12:15
Issue Invoice v.1	Generic Action		10/25/2022 10:13
Fees Paid v.1	Generic Action		10/26/2022 12:15
Lot Readiness Verification v.1		11/03/2022 0:00	
OSWP Septic Preliminary Site Visit v.1	Inspection	11/03/2022 0:00	11/03/2022 14:09
OSWP Site Evaluation v.1	Inspection		
Issue Improvement Permit v.1			
Issue Invoice v.1	Generic Action		
Fees Paid v.1	Generic Action		
Issue Permit v.1	Generic Action		
Permit Completion Process v.1			
Authorization to Construct Permit v.1	Create Sub Permit		
Issue Authorization to Construct v.1	Generic Action		

DocuSign Envelope ID: 96754C0F-3FAC-4575-8DA5-DCA175DF6DF1

Exhibit "F"

DocuSigned by:
shakitia sharelle jones
1935125A0D74411...

8/11/2022



Carolinian M5010 | Clayton Homes

Acknowledgement Of Plans Submittal ONLY!

Date 12/1/22

Date