IREDELL COUNTY HEALTH DEPARTMENT

KV

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 240281

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

PIN # 3793918039

APPLICANT/OWNER: Belk and Belk Construction APPLICANT ADDRESS: 152 Ideal Dr Mooresville

SITE ADDRESS: 3771 Hickory Hwy Statesville NC 28677 PHONE: 704 634-9348 ALT. PHONE 704 663-3868

SITE DIRECTIONS: Hwy 70 West about 3 miles past old MTN Rd Lot on Left SAP CONTROLLED: ☐ YES ☒ NO

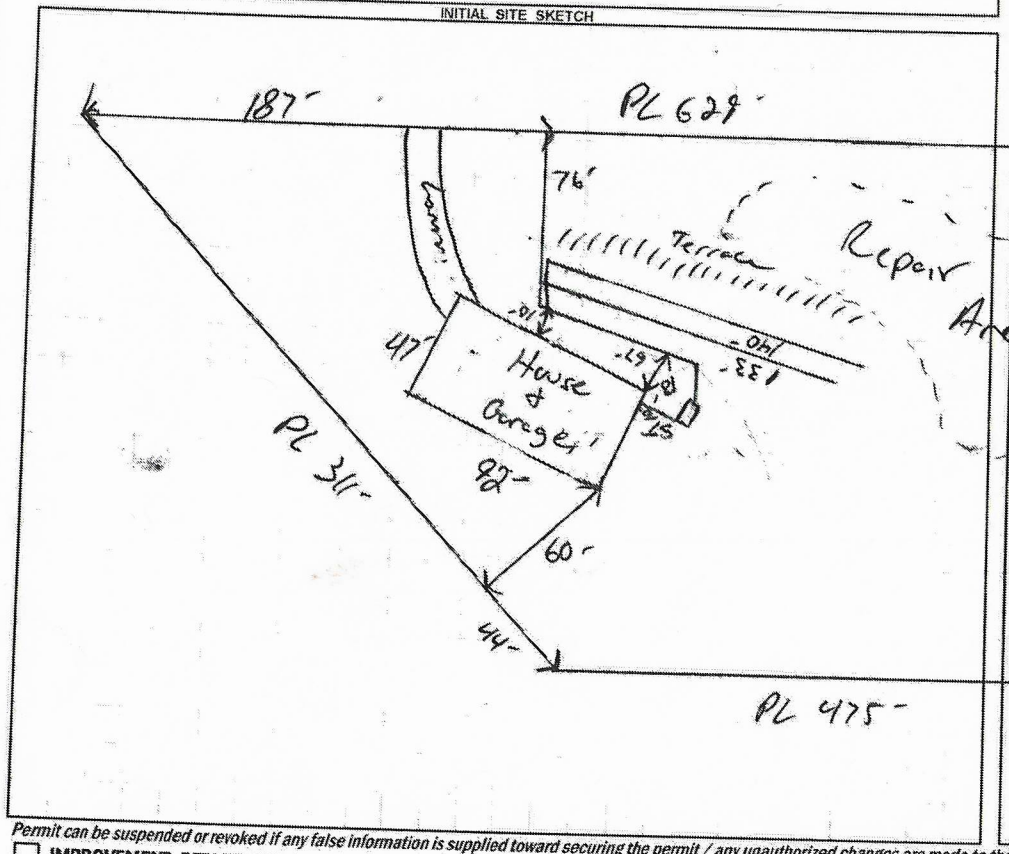
SUBDIVISION: Harry J Cogar SECTION: - LOT # 1 LOT AREA: 3.5 acre DESIGN FLOW: 360 gpd L.T.A.R.: .275

Septic Tank	1000 (gal)	STB	760	Date	8/4/19	☒ New System	☐ Repair	☐ Expansion	System Type: I II ◉ IV V VI
Pump Tank	(gal)	PT		Date		System Description:	25% Reduction		
Pump Make		Model		Serial #		Repair System Description:	25% Reduction		
# Nitrification Fields	1	# Lines	3	Linear Ft	327'	Maintenance Agreement Required:	☐ YES	☒ NO	
Trench Width	36"	Trench Bottom Depth(Low side)	32"	Gravel Depth	←	☒ GRAVITY	☐ PRESSURE		

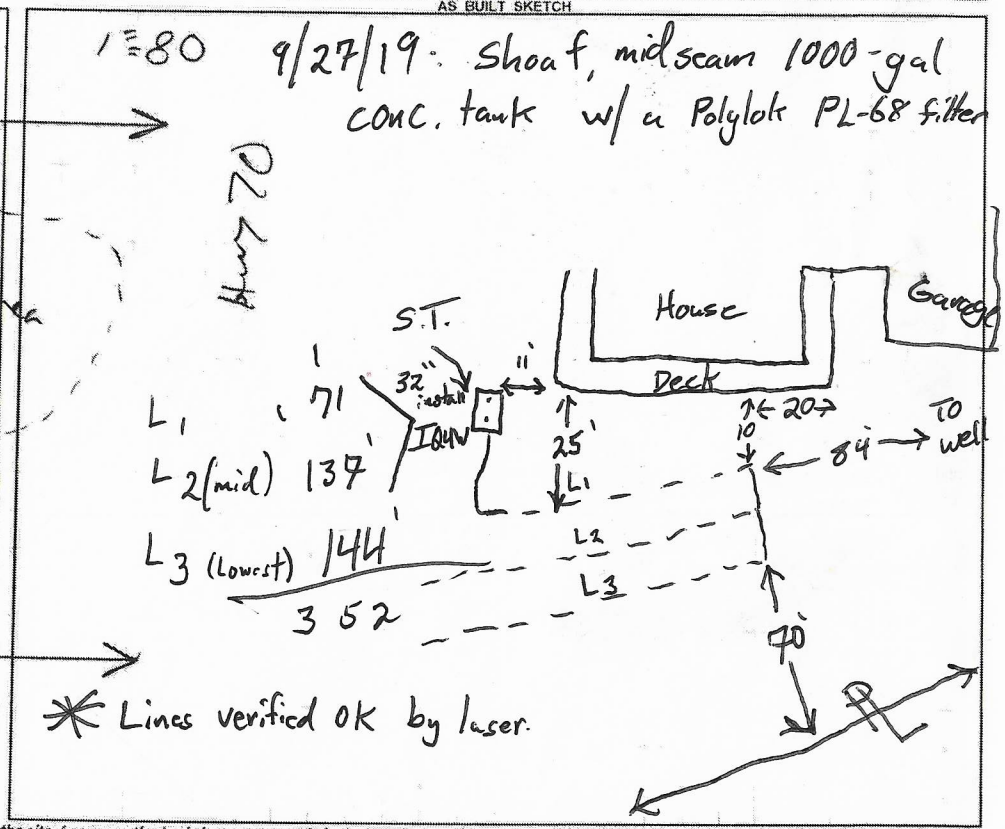
☒ Residence	No. Bedrooms	3	Water Supply
☐ Business	No. Persons	6	☐ Private
☐ Other	No. Employees		☒ Public
☐ Slab	☒ Crawl Space		☐ Community
☐ Basement w/plumbing			☐ Basement w/o plumbing

Comments / Conditions: Install drainlines on Contour of land and use Serial distribution. Do not Grade, pave or bury utilities in drainfield area.

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: Allen Belk Date: 12/13/18 Installed by: Wayne Orbison (Kevin)

IMPROVEMENT PERMIT by: Date: 12-12-18 OPERATION PERMIT by: Date: 9/27/19

AUTHORIZATION TO CONSTRUCT by: Date: 12-12-18 Existing System Inspected by: Date:

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

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

Sheet 1 of 1
PROPERTY ID #: 3795913039
COUNTY: Iredell

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

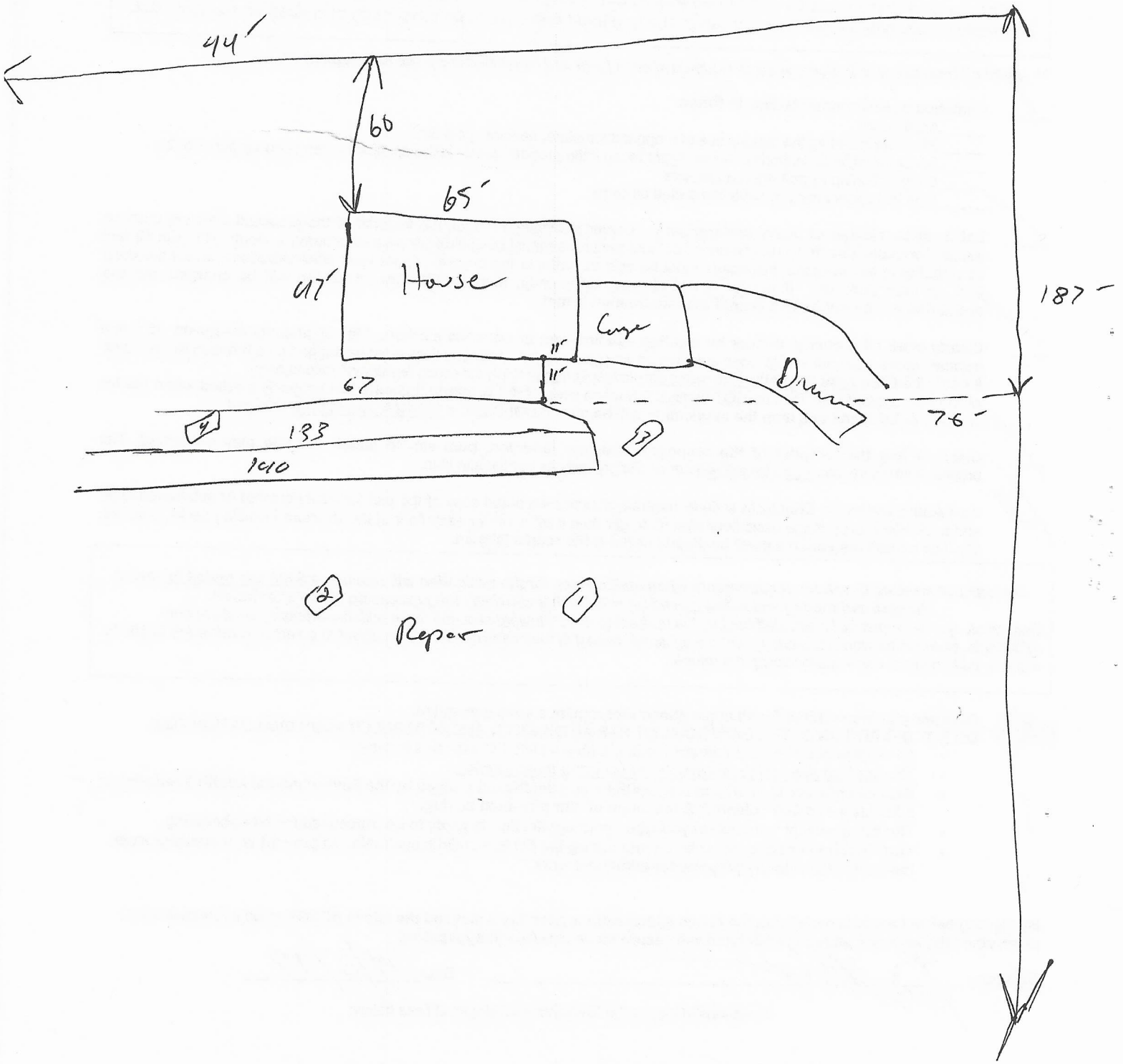
OWNER: Eugene Martin / David Belk
ADDRESS: 132 Ided Dr Mooresville NC
APPLICATION DATE 11/13/18
PROPOSED FACILITY: House
PROPOSED DESIGN FLOW (.1949):
DATE EVALUATED: 11/30/18
LOCATION OF SITE: 3771 Hickory Hwy
PROPERTY SIZE: 3.5 acres
WATER SUPPLY: ☐ Private ☑ Public ☐ Well ☐ Spring ☐ Other
PROPERTY RECORDED: Yes
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	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	2-3%	0-14	ABk SCL	SS SP Fr Serp	10yr 7/6 @ 30"	48"	N/A	N/A	PS .25 Repair
		14-31	ABk C	Fr SS SP Serp					
		31-48	SBk CL	Fr SS SP Serp					
2	2-3%	0-12	SBk SCL	Fr SP SS Serp	PS	48"	N/A	N/A	PS .25 Repair
		12-30	ABk C	Fr SP SS Serp					
		30-48	SBk CL	Fr SP SS Serp					
3	10%	0-10	SBk SCL	Fr SS SP Serp	PS	48"	N/A	N/A	PS .275 Initial
		10-22	SBk/ABk C	Fr SS SP Serp					
		22-48	SBk CL	Fr SS SP Serp					
4	4-5%	0-10	SBk SCL	Fr SS SP Serp	PS	48"	N/A	N/A	PS .275 Initial
		10-46	SBk C	Fr SS SP Serp					
		40-48	SBk CL	Fr SS SP Serp					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	327"	360"
System Type(s)	25%	25%
Site LTAR	.275	.25

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

COMMENTS:


44'
60
65'
House
117'
Carport
11'
11'
67
187'
Drive
76'
133
140
4
3
2
1
Repor

RECEIVED NOV 1 4 2018

Paid $500.00 # 240291

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Application For: (✓) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) Septic Improvement Permit (✓) Authorization to Construct ( ) Existing System Inspection ( ) Septic System Repair
NEW SEPTIC SYSTEM

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: (X) 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: (PRINT CLEARLY)

Applicant Name: Belk and Belk Constr. Inc Address: 132 Ideal Dr. Mooresville NC Zip: 28115
Applicant Email: dallenbelk@windstream.net Phone: 704 634 9348 Alt. Phone: 704 663 3868
Owner Name: Eugene C + Linda Martin Address: 288 Marietta Rd Mooresville NC Zip: 28117
Owner Email: _____ Phone: 704-528-2274 Alt. Phone: 704-677-5167

Property Information:

Street Address: 3771 Hickory Highway Statesville NC 28677
Subdivision Name: _____ Section/Phase: _____ Lot Number: 1
Driving Directions: TAKE Highway 70 WEST OUT OF STATESVILLE AND APPROXIMATELY 3 miles past Old Mountain Road Property will be on left

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

(✓) New Single Family Residence
( ) New Multi-Family Residence
(✓) Accessory Building shed
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____
Maximum Number of Bedrooms: 3
Maximum Number of Occupants: 2
( ) Swimming Pool
( ) Other Addition/Structure: _____
Non-Residential Site Development: Type of Business: _____
Square Footage of Building: 2912 Max. Number of Employees: ____ Max. Number of Seats/Beds/Other: ____

CHECK FOUNDATION TYPE
(✓) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

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 County water

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

Please answer the following to the best of your ability:
( ) Yes (✓) No Does the site contain any jurisdictional wetlands?
( ) Yes (✓) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (✓) 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: Daniel Allen Belk 11/13/2018
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

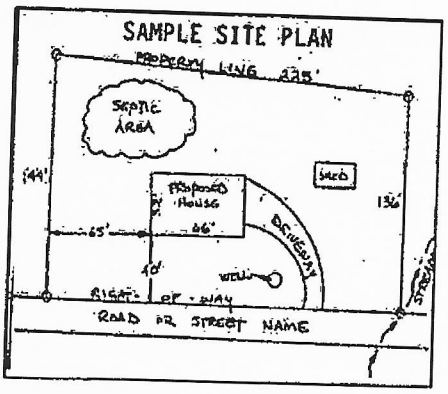
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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

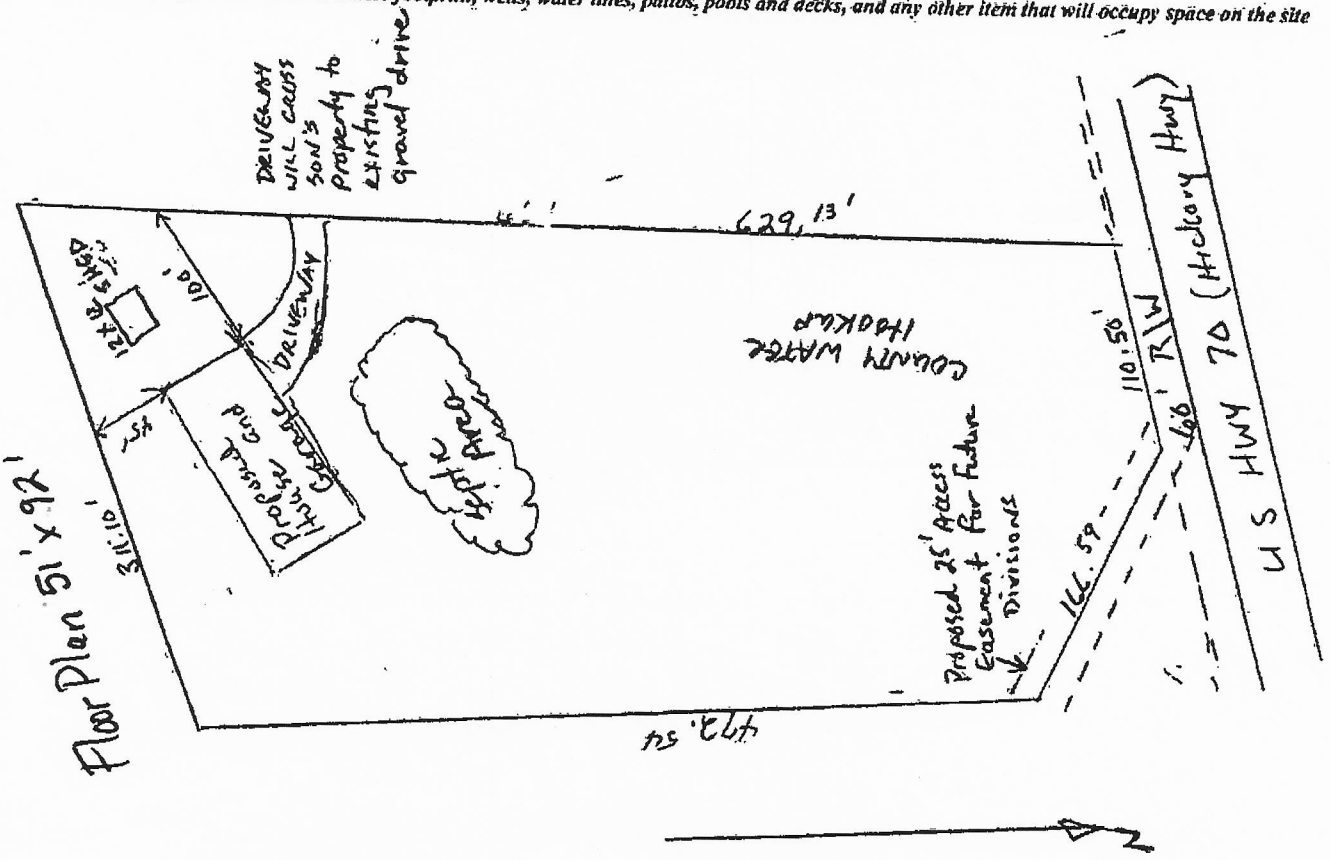


Circle N/A on the following if appropriate:

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



Signature: David Allen Bell
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

DATE 11/13/2018

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

(Check and sign only ONE of the options below)

1. *** APPLICANT AND OWNER ARE THE SAME. *** *(Sign here)* _____

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.

2. I, Eugene C Martin, am the legal owner(s) of the property located at 3771 Hickory Highway, Statesville NC 28677 identified as

X Location ID 7437
PIN (Parcel Identification Number) 3793913039 000, located in Iredell County, North Carolina.

I do hereby authorize **(print legal representative/company name)** Belk and Belk Constr. Inc DAVID Allen Belk / President, 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.

Eugene C. Martin
X _____ 11/13/2018
Signature of Owner(s) Date

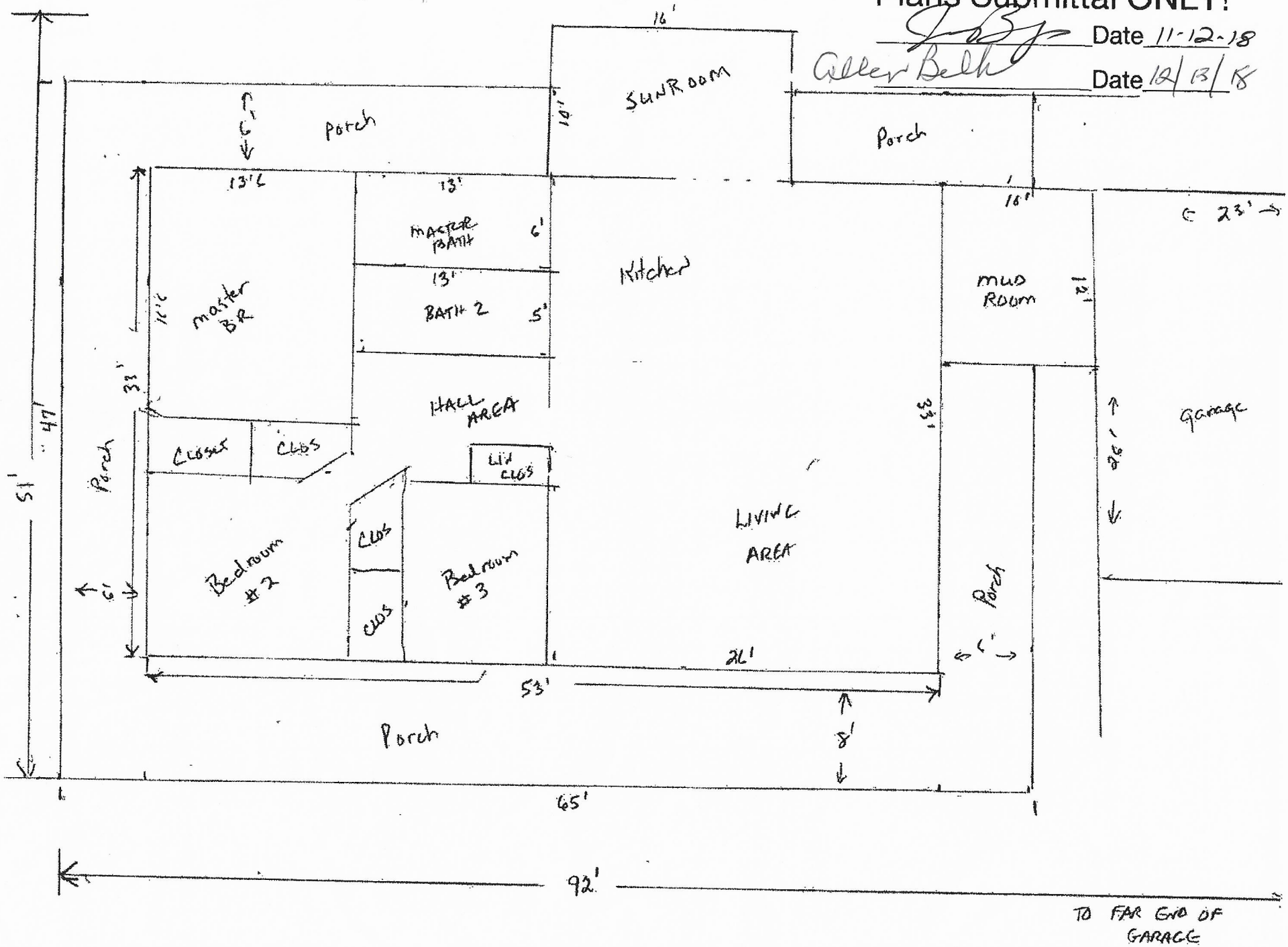
Mooresville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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

Acknowledgement Of
Plans Submittal ONLY!

Date 11-12-18

Date 12/13/18



IREDELL COUNTY

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

APPLICATION NUMBER
240291
Issue Date: 11/14/2018

ZONING PERMIT
Residential

Parcel Number	Street Address	Jurisdiction
3793913039.000	3771 HICKORY HIGHWAY, STATESVILLE, NC 28677	

Owner Information		Applicant Information	
Owner:	MARTIN EUGENE C+LINDA G	Applicant:	BELK & BELK CONSTRUCTI
Address:	288 MARIETTA RD MOORESVILLE, NC 28117	Address:	132 IDEAL DRIVE UNKNOWN MOORESVILLE, NC 28115
Phone:		Phone:	704-663-3868

Use Requested	Zone Code
SFD	

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
3.500	35.00	35.00	15.00	15.00	PACL	X

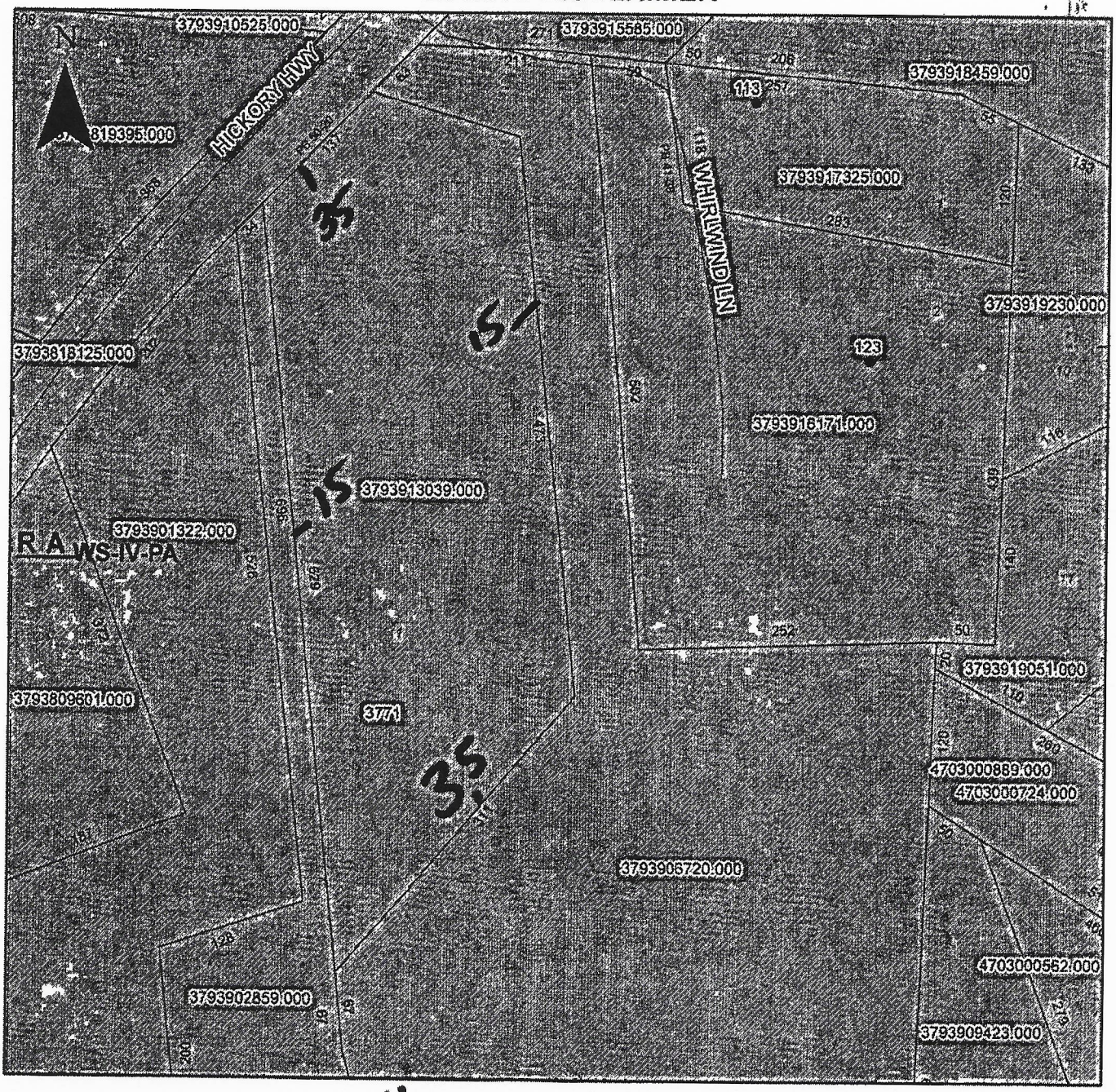
Remarks:

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: _____

Permit Number	158849	TOTAL FEES:	$ 77.25

ZONING DISCLAIMER



Property Address 3771 Hickory Hwy

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. Applicant further acknowledges that the 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.

David Allen Belk
Applicant

11/14/2018
Date