MANF-2022-7733

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # ~~AP~~ 2022-2685

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

PIN # 3797 -53 -5906

APPLICANT/OWNER: Deena Abee APPLICANT ADDRESS: 2381 US HWY 64 W Mocksville NC 27028

SITE ADDRESS: 133 Calhoun Rd Stony Point NC 28678 PHONE: ALT. PHONE

SITE DIRECTIONS: Hwy 90 to Calhoun Rd SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Great White Properties SECTION: LOT # 2 LOT AREA: 0.76 Ac DESIGN FLOW: 600 L.T.A.R.: 0.30

Septic Tank	1500	(gal)	STB	964	Date	12/9/22	☒ 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:	PPBPS - 50% Reduction			
# Nitrification Fields	1		# Lines	5	Linear Ft	500	Maintenance Agreement Required:	☐ YES	☒ NO		
Trench Width	36 in		Trench Bottom Depth(Low side)	36 in MAX	Gravel Depth			☒ GRAVITY	☐ PRESSURE		

☒ Residence No. Bedrooms 5 — Water Supply: ☐ Private ☒ Public ☐ Community

☐ Business No. Persons 10

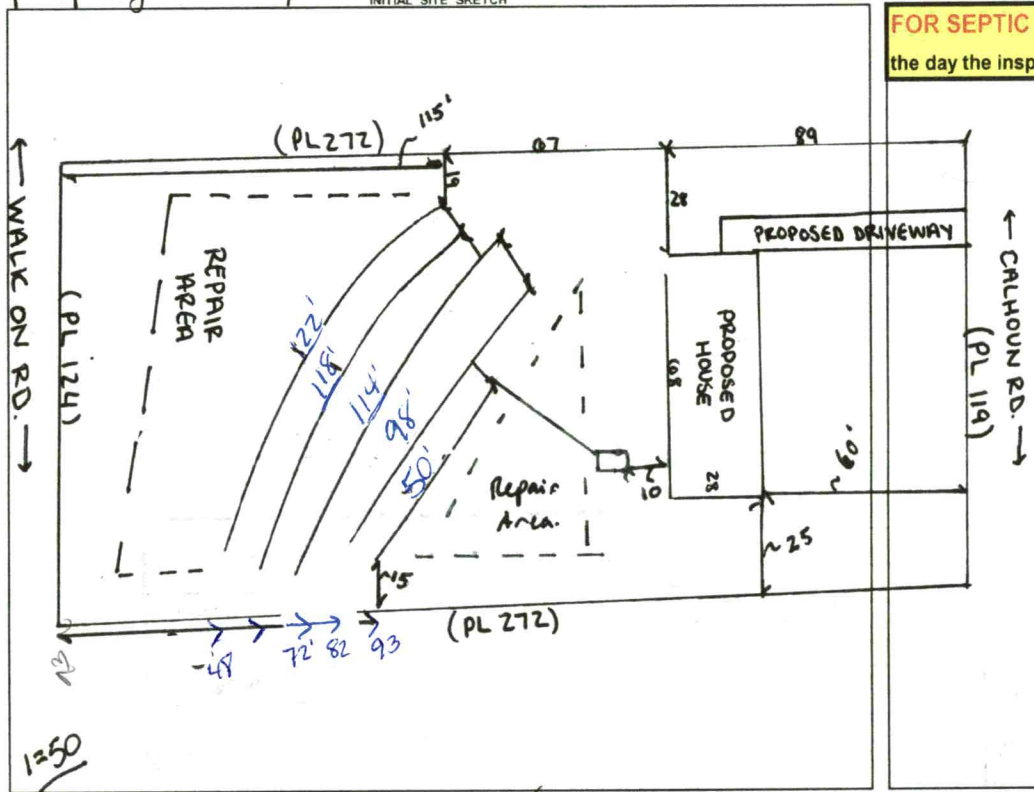
☐ Other No. Employees

☐ Slab ☒ Crawl Space

☐ Basement w/plumbing ☐ Basement w/o plumbing

Comments / Conditions: Install Septic Drainlines on the contour of the Land to Utilize Serial Distribution. Do not exceed max depth of 36 inches. Do not Drive park, pave, grade or bury utilities in Drain Field Area.

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.

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: Installed by: Abee's Grading D. Webber

IMPROVEMENT PERMIT by: Benjamin Bass Date: 10-7-2022 OPERATION PERMIT by: Date: 3/8/23

AUTHORIZATION TO CONSTRUCT by: Benjamin Bass Date: ~~10-7-2022~~ 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? _____	

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PERMIT # ~~AP~~ 2022-2685

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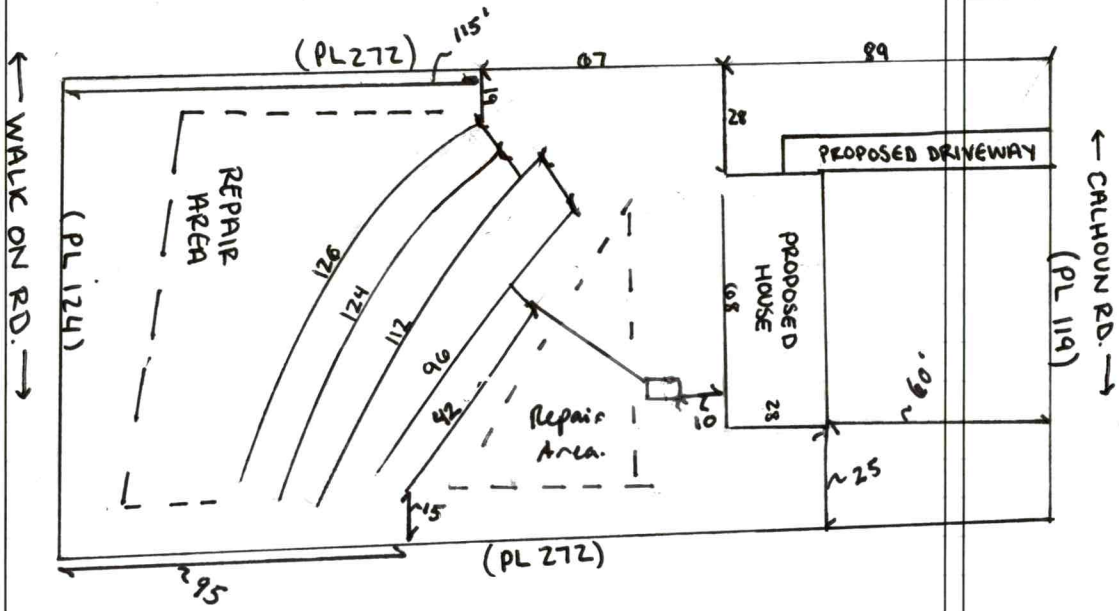
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SUBDIVISION: Great White Properties SECTION: LOT # 2 LOT AREA: 0.76 Ac DESIGN FLOW: 600 L.T.A.R.: 0.30

Septic Tank	1500	(gal)	STB		Date		☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms	5	Water Supply	
Pump Tank	–	(gal)	PT	–	Date	–	System Description:	Gravity 25% Reduction			☐ Business	No. Persons	10	☐ Private	
Pump Make	–	Model		–	Serial #	–	Repair System Description:	PPBPS - 50% Reduction			☐ Other	No. Employees		☐ Public	
# Nitrification Fields	1	# Lines	5		Linear Ft	500	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☒ Crawl Space		☐ Community	
Trench Width	36 in	Trench Bottom Depth(Low side)	36 in MAX		Gravel Depth		☒ GRAVITY	☐ PRESSURE			☐ Basement w/ plumbing			☐ Basement w/o plumbing	

Comments / Conditions: Install Septic Drainlines on the Contour of the Land & utilize Serial Distribution. Do not exceed max depth of 36 inches. Do not Drive park, pave, grade or bury utilities in Drain Field Area.

INITIAL SITE SKETCH



1=50

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.

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☐ **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: Signature on Line Date: Installed by:

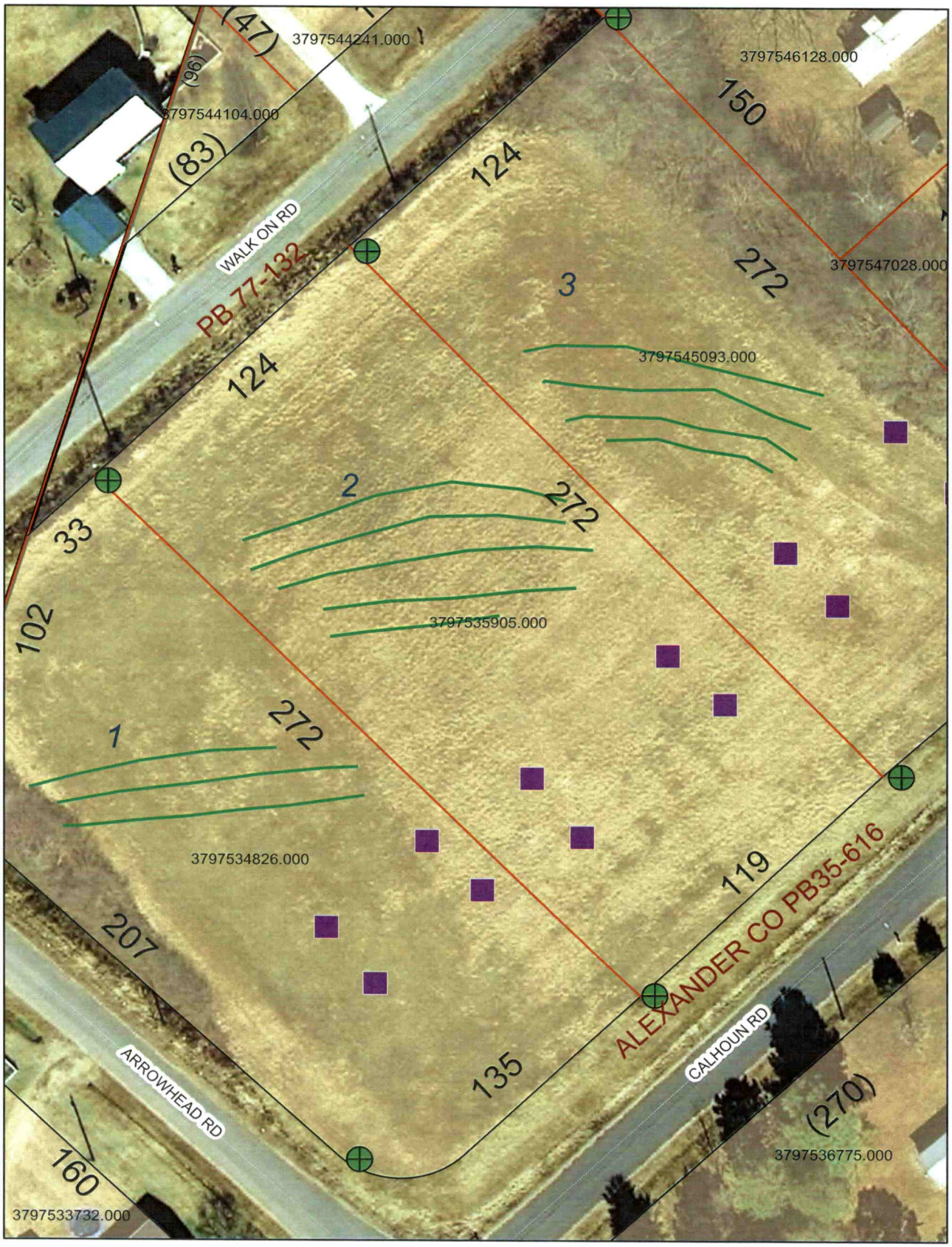
IMPROVEMENT PERMIT by: Benjamin Beck Date: 10-7-2022 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Benjamin Beck Date: 10-7-2022 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? _____	


(47)
3797544241.000
(96)
3797544104.000
(83)
WALK ON RD
PB 77-132
124
124
3797546128.000
150
272
3797547028.000
3
3797545093.000
2
272
33
102
3797535905.000
1
272
3797534826.000
119
ALEXANDER CO PB35-616
207
ARROWHEAD RD
135
CALHOUN RD
(270)
3797536775.000
160
3797533732.000

Lot 2

PERMIT SNAPSHOT REPORT OSWP-2022-2685 FOR IREDELL COUNTY

Permit Type: Environmental Health OSWP
Work Class: EH Septic Improvement Permit
Status: In Progress
Valuation: $0.00
Description: doublewide - IP / AC lot 2 133 Calhoun

Project:
District: Iredell County
Square Feet: 0.00
Assigned To: Botkins, Ben

App Date: 08/26/2022
Exp Date: NOT AVAILABLE
Completed: NOT COMPLETED
Approval Expire Date:

Parcel: 3797535905.000 Main

Address: 133 Calhoun Rd Main
Stony Point, NC 28678

Zone: RA(Residential Agricultural District)

Property Owner
BETTER PATH HOMES LLC
10935 Winds Crossing Dr
Suite 300
CHARLOTTE, NC 28273
Business: (704) 701-0418

Applicant/Authorized Agent
Deena Abee
2381 Us Highway 64 W
Mocksville, NC 27028

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	Yes	All proposed structure dimensions	New 28 x 68 double wide w/6 x 6 front deck and 10 x 10 back deck	What are the proposed structures	New Single Family Residence
If other Addition/Structure, please explain		Maximum Number of Bedrooms	5	Number of Occupants	6
Foundation Type	Crawl Space Foundation	Water Supply	Other Public Water	Desired Septic System Type	Conventional (most common)
If other septic system type, please explain		Has this project been approved by TRC	No	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 less than 20 degrees from parallel to the front property line. Original mobile home must be removed before Certificate of Occupancy		can be approved.	Additional Unique Setbacks Apply	No

PERMIT SNAPSHOT REPORT (OSWP-2022-2685)

Watershed	WSIV PA SOUTH YADKIN

Attachment File Name	Added On	Added By	Attachment Group	Notes
Signature_Deena_Abee_8/26/2022.jpg	08/26/2022 9:54	Abee, Deena		Uploaded via CSS
Authorization for Lot 2 - Calhoun Rd_v1.pdf	09/08/2022 16:24	Hart, Ronda	Available Online	Authorize to Act as Agent
Lot 2 - Calhoun Rd septic application_v1.pdf	09/08/2022 16:24	Hart, Ronda	Available Online	Additional Supporting Information
Site plan for Lot 2 - Calhoun Rd._v1.pdf	09/08/2022 16:24	Hart, Ronda	Available Online	Site Plan
2685 2687 correct lots.pdf	09/13/2022 11:20	Horton, Amanda		

Inspection Number	Status	Inspection Type	Request Date	Scheduled Start Date	Scheduled End Date	Actual Start Date	Actual End Date
2022-17332	Passed - Permit	OSWP Septic/Well Preliminary Site Visit	09/19/2022			09/19/2022 16:52	09/19/2022 16:52

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-00001836	New Gravity System		$500.00	$500.00
		Total for Invoice INV-00001836	$500.00	$500.00
INV-00002029	Iredell Zoning Tech Fee		$2.25	$2.25
	Iredell Zoning Permit Fee		$75.00	$75.00
		Total for Invoice INV-00002029	$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		09/08/2022 0:00	09/08/2022 16:24
Confirm application complete v.1	Generic Action		09/08/2022 16:24
Fees v.1		09/08/2022 0:00	09/14/2022 15:42
Issue Invoice v.1	Generic Action		09/08/2022 16:25
Fees Paid v.1	Generic Action		09/14/2022 15:42
Zoning Review v.1		09/08/2022 0:00	09/14/2022 15:42
Iredell County Zoning Approval v.1	Task	09/08/2022 0:00	09/14/2022 15:42
Issue Invoice v.1	Generic Action		09/13/2022 11:30
Fees Paid v.1	Generic Action		09/14/2022 15:42
Lot Readiness Verification v.1		09/19/2022 0:00	
OSWP Septic Preliminary Site Visit v.1	Inspection	09/19/2022 0:00	09/19/2022 16:52
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		

ENVIRONMENTAL HEALTH REQUIREMENTS for SEPTIC and WELL PERMITS LOT 2

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 ****

BG **Complete all Environmental Health forms:**

_____ Application
_____ Site Plan including the dimensions of proposed structure, addition, pool etc.
_____ Documentation to Authorize Owner Agent (even if the property owner is the applicant – complete section 1 or 2)
_____ Copy of Zoning Permit when applicable
_____ Sign this sheet after you have completed all items

BG **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.**

BG **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**.

BG **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.

BG **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 nonrefundable. 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 those services (if applicable).

Signature Bryce Gallihar **Date** 5.15.22

Questions? Contact the Environmental Health Offices below:

Statesville Office
349 North Center Street (1st 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

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Mooresville, NC 28115-2548
Phone: (704)660-3625

Lot 2

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM*

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) 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: (PRINT CLEARLY)

Applicant Name: Boyce Galliher **Address:** 165 Ashley Acres Rd. Statesville **Zip:** 28677

Applicant Email: boycegalliher@icloud.com **Phone:** 704 402 2795 **Alt. Phone:** _____

Owner Name: Wendy Sweet **Address:** 325 South Oakland Ave. Suite 21 Rock Hill SC **Zip:** 29730

Owner Email: _____ **Phone:** _____ **Alt. Phone:** _____

Property Information:

Street Address: Calhoun Rd. Stony Point N.C.

Subdivision Name: _____ **Section/Phase:** _____ **Lot Number:** 2

Driving Directions: Hwy 90 west - Rt on Calhoun Rd. - Lot on Left

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

(X) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____

Maximum Number of Bedrooms: 5
Maximum Number of Occupants: 6
( ) Swimming Pool
( ) Other Addition/Structure: _____

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

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 (X) Other Public Water

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

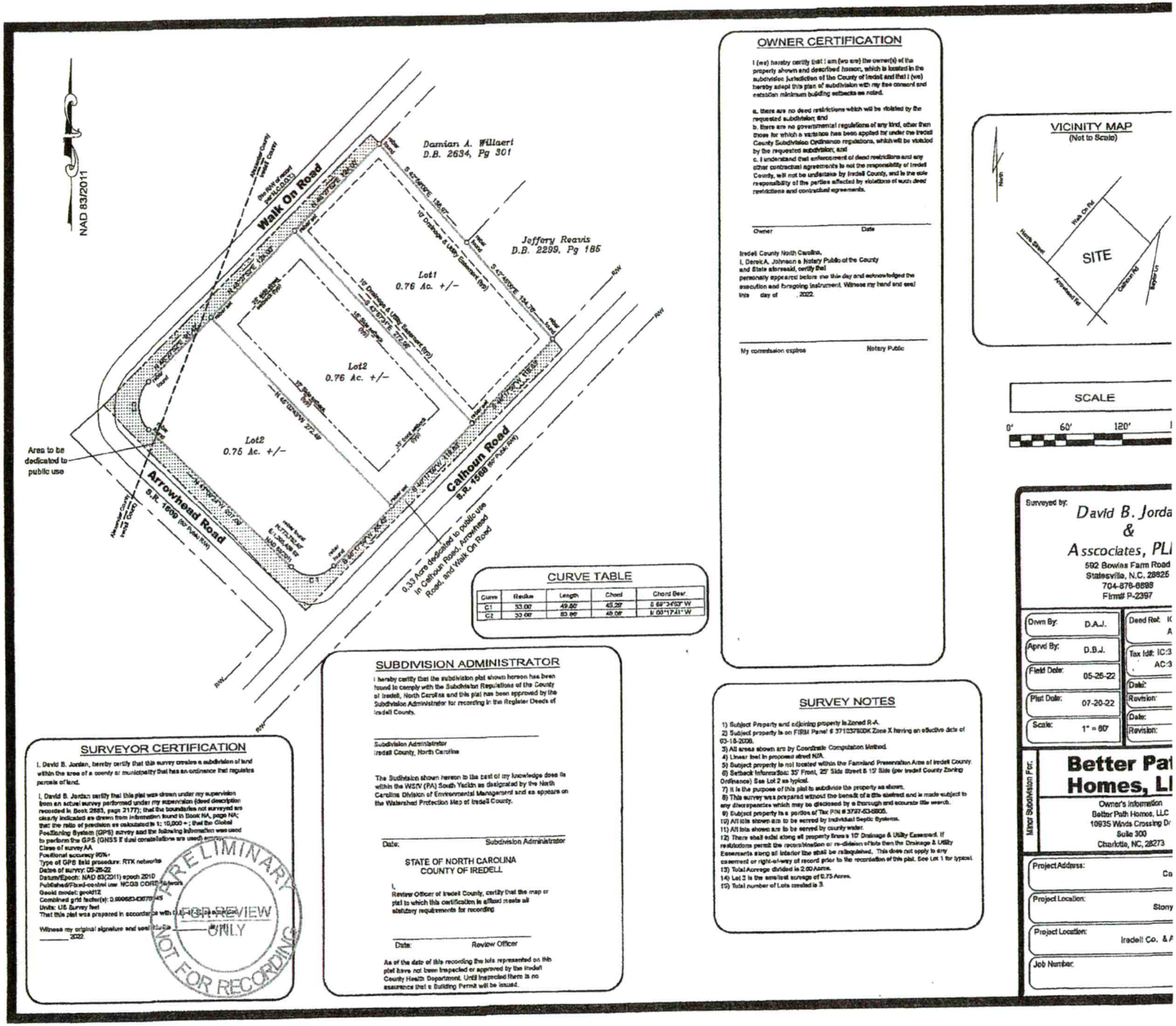
Please answer the following to the best of your ability:

( ) 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: Boyce Galliher 8-15-22
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

Lot 2



OWNER CERTIFICATION

I (we) hereby certify that I am (we are) the owner(s) of the property shown and described hereon, which is located in the subdivision jurisdiction of the County of Iredell and that I (we) hereby adopt this plan of subdivision with my free consent and establish minimum building setbacks as noted.

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 the 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.

Owner Date

Iredell County North Carolina.
I, Derek A. Johnson a Notary Public of the County and State aforesaid, certify that personally appeared before me this day and acknowledged the execution and foregoing instrument. Witness my hand and seal this day of , 2022.

My commission expires Notary Public

VICINITY MAP
(Not to Scale)

SCALE
0' 60' 120'

CURVE TABLE

Curve	Radius	Length	Chord	Chord Bear.
C1	33.00'	49.60'	45.29'	S 89°34'45" W
C2	33.00'	50.06'	45.09'	N 05°17'41" W

SUBDIVISION ADMINISTRATOR

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 and this plat has been approved by the Subdivision Administrator for recording in the Register Deeds of Iredell County.

Subdivision Administrator
Iredell County, North Carolina

The Subdivision shown hereon to the best of my knowledge does lie within the WSIV (PA) South Yadkin as designated by the North Carolina Division of Environmental Management and as appears on the Watershed Protection Map of Iredell County.

Date: Subdivision Administrator

STATE OF NORTH CAROLINA
COUNTY OF IREDELL

I, Review Officer of Iredell County, certify that the map or plat to which this certification is affixed meets all statutory requirements for recording

Date: Review Officer

As of the date of this recording the lots represented on this plat have not been inspected or approved by the Iredell County Health Department. Until inspected there is no assurance that a Building Permit will be issued.

SURVEYOR CERTIFICATION

I, David B. Jordan, hereby certify that this survey creates a subdivision of land within the area of a county or municipality that has an ordinance that regulates parcels of land.

I, David B. Jordan certify that this plat was drawn under my supervision from an actual survey performed under my supervision (deed description recorded in Book 2683, page 2177); that the boundaries not surveyed are clearly indicated as drawn from information found in Book NA, page NA; that the ratio of precision as calculated is 1: 10,000 + ; that the Global Positioning System (GPS) survey and the following information was used to perform the GPS (GNSS if dual constellations are used) survey:
Class of survey AA
Positional accuracy 80%+
Type of GPS field procedure: RTK networks
Dates of survey: 05-26-22
Datum/Epoch: NAD 83(2011) epoch 2010
Published/Fixed-control use: NCGS CORS Network
Geoid model: geoid12
Combined grid factor(s): 0.999823-0.9978745
Units: US Survey feet
That this plat was prepared in accordance with G.S. 47-30 as amended.

Witness my original signature and seal this ____ day of _____, 2022.

PRELIMINARY FOR REVIEW ONLY NOT FOR RECORDING

SURVEY NOTES

1) Subject Property and adjoining property is Zoned R-A.
2) Subject property is on FIRM Panel # 3710378DK Zone X having an effective date of 03-18-2008.
3) All areas shown are by Coordinate Computation Method.
4) Linear feet in proposed street N/A.
5) Subject property is not located within the Farmland Preservation Area of Iredell County.
6) Setback Information: 35' Front, 25' Side Street & 15' Side (per Iredell County Zoning Ordinance) See Lot 2 as typical.
7) It is the purpose of this plat to subdivide the property as shown.
8) This survey was prepared without the benefit of a title abstract and is made subject to any discrepancies which may be disclosed by a thorough and accurate title search.
9) Subject property is a portion of Tax PIN # 3797-63-6905.
10) All lots shown are to be served by individual Septic Systems.
11) All lots shown are to be served by county water.
12) There shall exist along all property lines a 10' Drainage & Utility Easement. If restrictions permit the recombination or re-division of lots then the Drainage & Utility Easements along all interior lots shall be relinquished. This does not apply to any easement or right-of-way of record prior to the recombination of this plat. See Lot 1 for typical.
13) Total Acreage divided is 2.60 Acres.
14) Lot 2 is the smallest acreage of 0.75 Acres.
15) Total number of Lots created is 3.

Surveyed by:
David B. Jorda
&
Asscociates, PL
592 Bowles Farm Road
Statesville, N.C. 28625
704-876-8898
Firm# P-2397

Drwn By:	D.A.J.
Aprvd By:	D.B.J.
Field Date:	05-26-22
Plat Date:	07-20-22
Scale:	1" = 60'

Deed Ref: I A
Tax Id#: IC:3 AC:3
Date:
Revision:
Date:
Revision:

Minor Subdivision Per.

Better Pat Homes, LI

Owner's Information
Better Path Homes, LLC
10935 Winds Crossing Dr
Suite 300
Charlotte, NC, 28273

Project Address: Ca
Project Location: Stony
Project Location: Iredell Co. & A
Job Number:

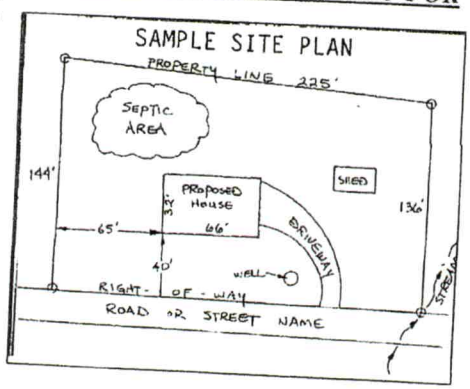
IREDELL COUNTY HEALTH DEPARTMENT

LOT 2

ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *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 PERMIT!!!*



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

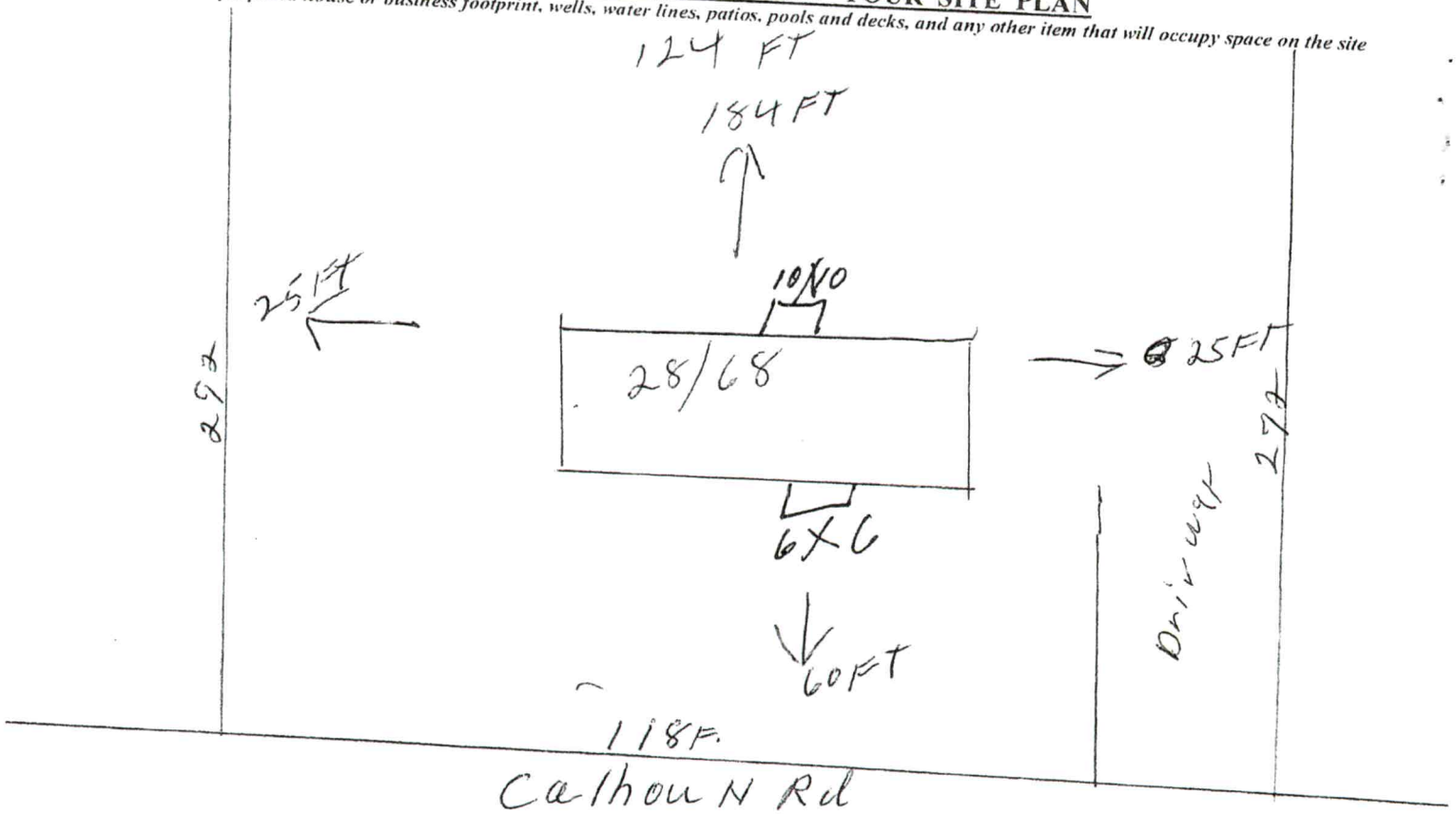
( ) Property Line measurements are clearly identified
( ) All proposed structures are indicated
( ) Front and side setbacks from property line
( ) Preferred driveway location and well location
( ) Area you prefer your septic system to be placed
( ) North arrow, or other sufficient indicator of direction

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: Bryan [illegible]

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

8-15-22

DATE

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

Lot 2.

(Complete all fields in full)

OWNER: _____ APPLICATION DATE _____
ADDRESS: _____ DATE EVALUATED: _____
PROPOSED FACILITY: ~~Lot~~ SFR PROPOSED DESIGN FLOW (.1949): 600. PROPERTY SIZE: _____
LOCATION OF SITE: 133 Calhoun Rd. 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	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1		0-10	Plow-C			54			PS .275
		10-44	C-ABK	SS SP FR SEH					
		44-54	CL-WABK	SS SP VFR					
2		0-9	Plow C			60			PS 0.3
		9-19	C MABK	SS SP FR					
		19-60	CL SBK/ABK	SS SP FR SE	Heavy micro incl some sap incl @ bottom				
3		0-9	Plow C			62			PS 0.3
		9-35	C SBK						
		35-62	CL WSBK		many to common sap incl				
4		0-8	Plow C			60			PS 0.25
		8-20	C WABK						
		20-60	CL ABK		Firm sap incl 20-40				
		~~30-60~~			few to common sap incl throughout				

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: _____

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.

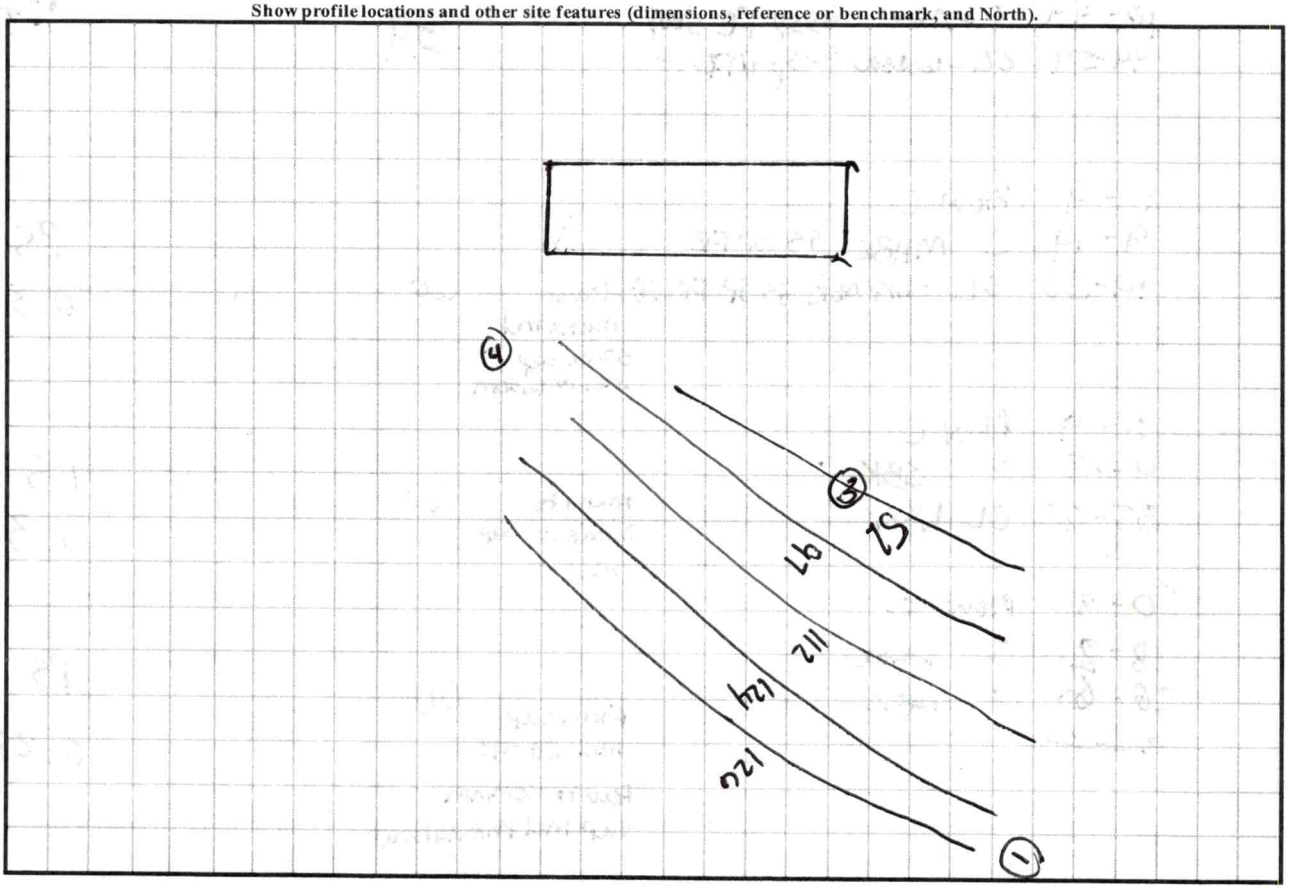
NOTES

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.

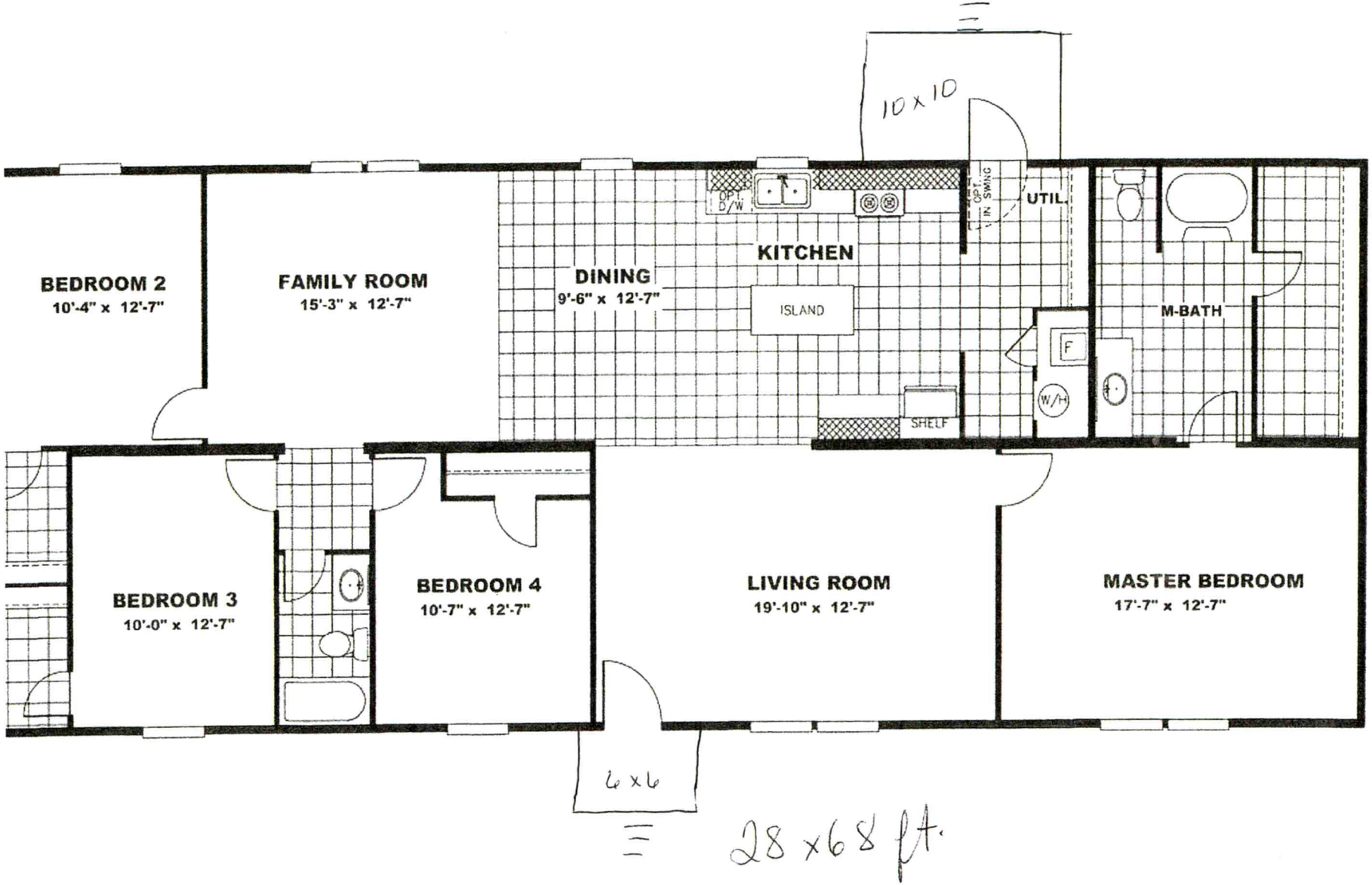
Long-term Acceptance Rate (LTAR): gal/day/ft^2

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



2

133 ~~133~~ ~~130~~
Lot 2



28 x 68 ft.