IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 220836

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

PIN # 4624-09-8261

APPLICANT: JEFF TIBBITS APPLICANT ADDRESS: 664 STONEMARKER RD.

SITE ADDRESS: SAME 664 Stonemarker Rd PHONE: 704-282-7917 ALT. PHONE:

SITE DIRECTIONS: FSR, TR STONEMARKER, TL BLARNEY, TR STONEMARKER, ON LT

SUBDIVISION: CLET SECTION: 6 LOT # 172 LOT AREA: .7AC DESIGN FLOW: 480 L.T.A.R.: .3 (.275R)

Septic Tank	1000	(gal)	STB		Date		☐ New System	☐ Repair	☑ Expansion	System Type: I II (III) IV V VI	
Pump Tank		(gal)	PT		Date		System Description:		25% REDUCTION + RED		
Pump Make			Model		Serial #		Repair System Description:		EXEMPT (ZTO AVAILABLE)		
# Nitrification Fields	1	# Lines	4	Linear Ft:	200'		Maintenance Agreement Required:		☐ YES	☑ NO	
Trench Width	36"	Max. Trench Bottom Depth	* 18" *	Gravel Depth	—		☑ GRAVITY		☐ PRESSURE		

☑ Residence	No. Bedrooms	4	Water Supply	
☐ Business	No. Persons	8	☑ Private	
☐ Other	No. Employees		☐ Public	
☐ Slab	☑ Crawl Space		☐ Community	
☐ Basement w/plumbing	☐ Basement w/o plumbing			

Comments / Conditions: WELL MUST BE ABANDONED BEFORE AC

INITIAL SITE SKETCH

SEE PLAN FROM MICHAEL ATHANAS & ASSOCIATES

AS BUILT SKETCH

10/22/2020 - Final Inspection - system installed to dep needs to talk w/ Athanas.

12/4/2020 - Complaint Request paid

12/18/2020 - Pits dug & System installed

Needs buffer marked before OP is to be signed off on.

Ip/AC Reissued due to Install encroachment 12/18/2020.

Owner/Applicant TIBBITS

EHS BA

Amount Owed $ 0

Irrigation capped } SH
No lines in buffer } 3/20/24

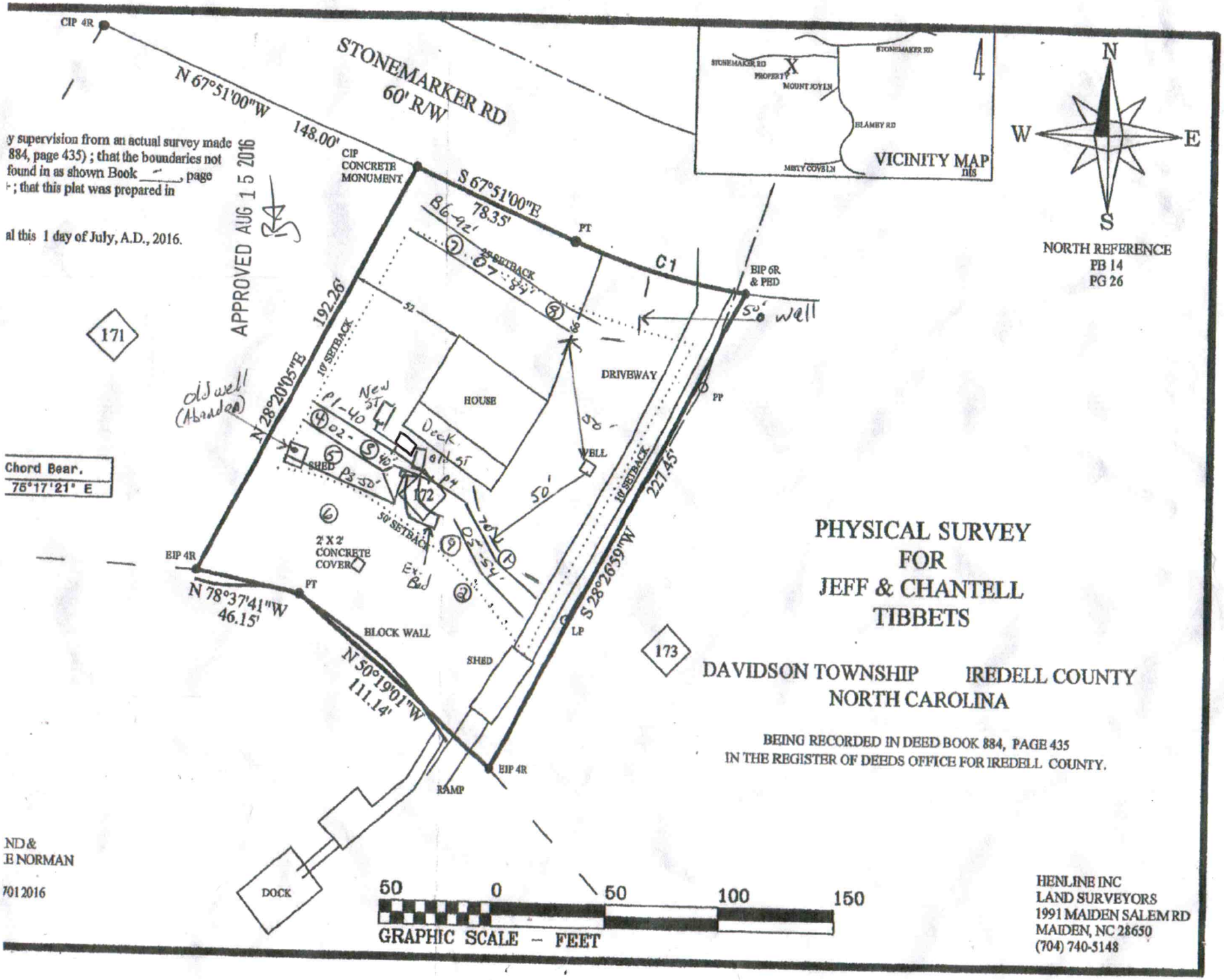
Permit can be suspended or revoked if any false information is supplied toward securing the permit / any unauthorized changes are made to the site / any unauthorized changes are made in the installation of the system. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

☐ **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: Wes Thompson

IMPROVEMENT PERMIT by: Brianna Bates Date: 12/18/2020 OPERATION PERMIT by: Sydney Hallman Date: 3/20/24

AUTHORIZATION TO CONSTRUCT by: Brianna Bates Date: 12/18/2020 Existing System Inspected by: Date:



y supervision from an actual survey made
884, page 435) ; that the boundaries not
found in as shown Book ____, page
; that this plat was prepared in

al this 1 day of July, A.D., 2016.

PHYSICAL SURVEY FOR JEFF & CHANTELL TIBBETS

DAVIDSON TOWNSHIP IREDELL COUNTY
NORTH CAROLINA

BEING RECORDED IN DEED BOOK 884, PAGE 435
IN THE REGISTER OF DEEDS OFFICE FOR IREDELL COUNTY.

ND &
E NORMAN

7012016

HENLINE INC
LAND SURVEYORS
1991 MAIDEN SALEM RD
MAIDEN, NC 28650
(704) 740-5148



APPROVED AUG 15 2016

BA

MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887

Reference: Data Sheet for 664 Stonemarker Rd., CL&T Sec 6, Lot 172
House Footprint: See attached plan
Building Setbacks: 35' front, 15' side, 50' lake
Water Source: Private well
Number of Bedrooms: 4/480 GPD
Proposed LTAR: 0.3 GPD/FT2 (initial), 0.275 GPD/FT2 (repair)
Proposed System Type: 25% Reduction + Existing Bed
Proposed Repair System Type: Limited 25% Reduction
Distribution: Gravity-Drop boxes/End caps
Septic Tank Size: 1000 gallons
Proposed Trench Bottom: 18"

Line	Design Length	Actual Length
Pink 1	**40'**	**42'**
Orange 2	**40'**	**42'**
Pink 3	**50'**	**51'**
Pink 4	**70'**	**71'**
Orange 5		54'
Blue 6		92'
Orange 7		84'



Initial System: 200' + Bed **Repair System:** 230'

Comments:
The purpose of this evaluation is to expand the current two bedroom system to a four bedroom system. MA&A are proposing to relocate a new tank and add 25% reduction lines to the existing bed. The old well must be abandoned and the shed removed. The old septic tank should be pumped and abandoned and a new tank installed. The original plat deed date is 6/15/1976 (BK 14, PG 26); therefore the lot is repair exempt and the system could be installed to 5' of the property line if needed.
The lines should be fed P1, P3, O2, the bed, then P4. The exact distribution method must be determined at the time of installation due to the depth of the new lines and the depth of the existing system.

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

PROPERTY ID #: 4624098261
COUNTY: _Iredell____

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

BA
APPROVED AUG 15 2016

OWNER: Price Family Trust
ADDRESS: 2417 Mount Vernon Ch Rd, Raleigh, NC 27614
APPLICATION DATE
DATE EVALUATED:
PROPOSED FACILITY: _4 bdrm_____ PROPOSED DESIGN FLOW (.1949): _480 GPD____
PROPERTY SIZE: _0.7 AC
LOCATION OF SITE: 664 Stonemarker Rd, CL&T Sec 6, Lot 172
PROPERTY RECORDED: _6/15/1976____
WATER SUPPLY: Ξ Private ☐ Public Ξ Well ☐ Spring ☐ Other
EVALUATION METHOD: Ξ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: Ξ 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 5%	0-32	R C SBK	FR SS SP SEXP	N/A	48"	N/A	N/A	PS 0.3
		32-48	R CL WSBK	FR SS SP SEXP					
2	LS 5%	0-6	Br SCL WSBK	FR SS SP SEXP	N/A	48"	N/A	N/A	PS 0.3
		6-46	R C SBK	FR SS SP SEXP					
		46-48	R CL WSBK	FR SS SP SEXP					
3	LS 5%	0-12	Br SCL WSBK	FR SS SP SEXP	N/A	36"	N/A	N/A	PS 0.3
		12-36	R C SBK	FR SS SP SEXP					
		36	AR-ROCK						
4	LS 5%	0-8	Br SCL WSBK	FR SS SP SEXP	N/A	32"	N/A	N/A	PS 0.3
		8-32	R C SBK	FR SS SP SEXP					
		32	AR-ROCK						

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	600 FT2	690 FT2
System Type(s)	25% Reduction	25% Reduction
Site LTAR	0.3	0.275

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): ____PS
EVALUATED BY: _____MA&A
OTHER(S) PRESENT:

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

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

BA
APPROVED AUG 15 2016

PROPERTY ID #: 4624098261
DATE OF EVALUATION:
COUNTY: IREDELL

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
5	LS 5%	0-8	Br SCLWSBK	FR SS SP SEXP	N/A	32"	N/A	N/A	PS 0.3
		8-32	R C SBK	FR SS SP SEXP					
		32	AR-ROCK						
6	LS 5%	0-10	Br SCL WSBK	FR SS SP SEXP	N/A	36"	N/A	N/A	PS 0.3
		10-36	R C SBK	FR SS SP SEXP					
		36	AR-ROCK						
7	LS 8%	0-36	R C SBK	FR SS SP SEXP	N/A	36"	PS	N/A	PS 0.3
		36-48	SL SAP M	VFR SS SP SEXP					
8	LS 8%	0-5	Br SCL WSBK	FR SS SP SEXP	Few YB	48"	N/A	N/A	PS 0.275
		5-40	R C SBK	FR SS SP SEXP					
		40-48	R CL WSBK	FR SS SP SEXP	No YB				
9	LS 5%	0-3	Br CL WSBK	FR SS SP SEXP	N/A	48"	N/A	N/A	PS 0.3
		3-6	R SCL WSBK	FR SS SP SEXP					
		6-48	R C SBK	FR SS SP SEXP					

COMMENTS: