IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 213228

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

PIN # 4624183437

APPLICANT/OWNER: Rollans Soil + Environmental Services APPLICANT ADDRESS: PO Box 832 Mooresville, NC

SITE ADDRESS: 126 Mount Joy Ln. Mooresville, NC 28117 PHONE: 704-746-5046 ALT. PHONE —

SITE DIRECTIONS: Brawley School Rd → R on Stonemarker → L on Blarney → R on Mount Joy → lot a head SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: CL+T SECTION: 6 LOT # 181 LOT AREA: .95ac DESIGN FLOW: 480gpd L.T.A.R.: .3(repair .1)

Septic Tank	1000	(gal)	STB	760	Date	~~8-29-17~~	☑ New System	☐ Repair	☐ Expansion	System Type: I II III (IV) V VI	☑ Residence	No. Bedrooms	4	Water Supply
Pump Tank	1000	(gal)	PT	363	Date	1-12-19	System Description: LP PPBPS				☐ Business	No. Persons	8	☑ Private
Pump Make	GOULD	Model	~~WE0323~~		Serial #	6FL4N18	Repair System Description: drip				☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	6 WE0323		Linear Ft	260'	Maintenance Agreement Required:	☑ YES	☐ NO		☐ Slab	☑ Crawl Space		☐ Community
Trench Width	24"	Trench Bottom Depth(Low side)	31|36"	higher	Gravel Depth	—		☐ GRAVITY	☑ PRESSURE		☐ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions: Pump + crush existing septic tank. If well is found during installation, contact health department.
10 inches of fill must be removed in initial septic area prior to install of system.

If repair is ever needed, fill will need to be removed

TANKS + 4 UPPER LINES + HEADER DITCH CHECK 2-7-2019 BCW TANKS ON SOFT BUTTER

INITIAL SITE SKETCH

See attached site plan by Rollans Soil + Environmental Services

AS BUILT SKETCH

	Date	Initials
Drain Lines Checked	2-4-19	MD
Tanks Checked	2-1-19	BCW
Pressure Manifold or Valve Box Checked	2-4-19	MD
Pressure Head Set	2-4-19	MD
Electrical Checked	3-13-19	BCW
Floats Set	3-13-19	BCW
Alarm Checked	3-13-19	BCW
Maintenance Contract (Y) / N	3-13-19	KW

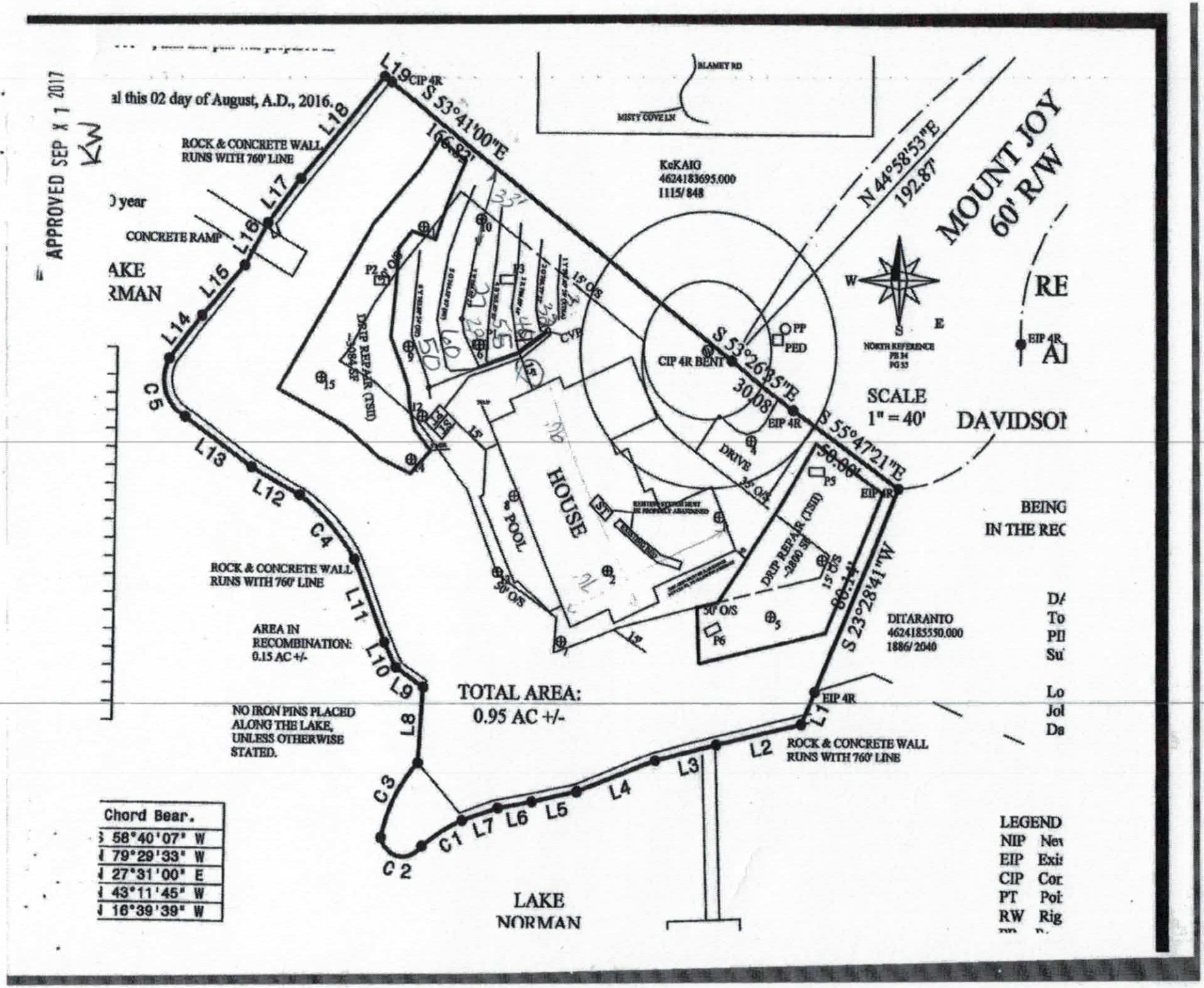
Permit can be suspended or revoked if any false information is supplied toward securing the permit / any unauthorized changes are made to the site / any unauthorized changes are made in the installation of the system. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

☐ **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: Lentz Wastewater

IMPROVEMENT PERMIT by: Krupla Watson Date: 9-1-17 OPERATION PERMIT by: Bethany Cuthbertson Date: 3-13-19

AUTHORIZATION TO CONSTRUCT by: Krupla Watson Date: 9-6-17 Existing System Inspected by: _____ Date: _____


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KW
al this 02 day of August, A.D., 2016.
) year
BLAMEY RD
MISTY COVE LN
KeKAIG
4624183695.000
1115/ 848
MOUNT JOY
60' R/W
N 44°58'53"E
192.87'
S 53°41'00"E
166.82'
S 53°26'35"E
30.08'
S 55°47'21"E
58.06'
S 23°28'41"W
80.14'
CIP 4R
EIP 4R
CIP 4R BENT
PP
PED
CONCRETE RAMP
ROCK & CONCRETE WALL
RUNS WITH 760' LINE
HOUSE
POOL
DRIVE
DRIP REPAIR (TSD)
-2800 SF
15' O/S
30' O/S
35' O/S
SCALE
1" = 40'
DAVIDSON
BEING
IN THE REC
DITARANTO
4624185550.000
1886/ 2040
AREA IN
RECOMBINATION:
0.15 AC +/-
TOTAL AREA:
0.95 AC +/-
NO IRON PINS PLACED
ALONG THE LAKE,
UNLESS OTHERWISE
STATED.
LAKE
NORMAN
LEGEND
NIP New
EIP Exis
CIP Cor
PT Poi
RW Rig
Chord Bear.
S 58°40'07" W
S 79°29'33" W
S 27°31'00" E
S 43°11'45" W
S 16°39'39" W

LP PPBPS SYSTEM
FOR WASTEWATER TREATMENT

Owner/Applicant: ALEX & MEGHAN CHASNIS

Current Address: 186 Atlantic Way
Mooresville, NC 28117
Phone: 704.277.1439
County: Iredell
Location: CRESCENT LAND & TIMBER CORP. LOT # 181
126 MT. JOY LANE, MOORESVILLE, NC 28117
Source of Wastewater Flow: 4 Bedroom Single Family Residence
Estimated Gallons Per Day Flow: 480
System Flow: 25.42

Design Specifications

Drainfield Size: 268
Loading Rate (gpd/ft.^{2}): 0.3
Depth of Gravel in Trench: NA (PPBPS)
Gravel Size: NA (PPBPS)
Trench Depth: 30 in.
Trench Width: 24 in.
Septic Tank Size: 1000
Pump Tank Size: 1000

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KW

Estimated Supply Line Length: 52
Supply Line Diameter: 2 in. SCH 40 PVC
Supply Line Volume: 9.05
Dosing Volume: 149.54
Supply Manifold: N/A
Supply Manifold Length: N/A
Supply Manifold Volume: N/A

Recommended Float Controls: SJE Sensor Float Control Switches as Required for Control Panel or County Approved Equivalents
Recommended Control Panel: SJE-Rhombus Model 112 (NEMA 4x) Control Panel or County Approved Control Panel.

Pressure Head: 2 ft.
Friction Head: 0.93
Elevation Head: 8.02
Total Dynamic Head: 12.59

Threaded Union: In Tank
Gate Valves: 1 in Tank
1 per lateral
Check Valves: In Tank
Anti-Siphon Hole: NA
Additional Comments: Soil suitability was performed by Rollans Soil & Environmental Services

CRESCENT LAND & TIMBER CORP. LOT # 181
LP PPBPS

DESIGN FLOW (gpd):	480
SOIL APPLICATION RATE (gpd/ft.^{2}):	0.3
TOTAL AREA TRENCH BOTTOM:	536
TOTAL LATERAL LENGTH:	268
NUMBER OF FIELDS:	1
LATERAL LENGTH REQUIRED PER FIELD:	266.6666667
SUPPLY LINE LENGTH:	52
TOTAL DYNAMIC HEAD:	12.59
MANIFOLD SIZE:	N/A
DOSING VOLUME:	149.54
PUMP TANK DRAW DOWN*:	7.1
SEPTIC TANK SIZE:	1000
PUMP TANK SIZE:	1000

**Pump tank draw down based on a volume basis of 21 gallons per inch. Draw down may very among pump tank manufacturers.*

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CRESCENT LAND & TIMBER CORP. LOT # 181

Project #: 01-3050

LAYOUT FOR 4 BEDROOM HOME

August 23, 2017

LINE #	FLAG COLOR	BS	HI	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM							
INSTR. 1							
HOUSE CNR					765.00		
P. TANK					763.98		
1	YELLOW	EXTRA			767.40	26	26
2	***ORANGE***				*766.77*	*32*	*32*
3	***RED***				*766.00*	*44*	*44*
4	***BLUE***				*765.50*	*55*	*55*
5	***YELLOW***				*764.80*	*27*	*27*
6	***ORANGE***				*764.55*	*67*	*60*
7	***YELLOW***				*763.98*	*54*	*50*
	DRIP				N/A	5884 SF	5884 SF
					Total	**305**	**294**

	LINE LENGTH	LTAR GPD/FT2	SYSTEM TYPE	SOIL LTAR GPD/FT2	TRENCH SYSTEM	DISTRIBUTION
** System*	*268*	*0.300*	*MOD.*	*0.300*	***PPBPS***	***LOW PRESSURE***
Repair	5884 SF	0.100	INNOV.	0.100	DRIP IRRIGATION W_TS-II PRETR.	LOW PRESSURE

Notes:
** All septic lines, soil borings and house envelope located via survey
**All measures in feet
**Nitrification lines are demonstrated on contour via colored pin flags
**POOL must be installed at least 15' from the System Area.

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LP PPBPS TAPSHEET -CRESCENT LAND & TIMBER CORP. LOT# 181

SYSTEM

Line #	Color	Elevation	Length	Hole Size	Flow/hole	Trench Area	Number of Panels
2	ORANGE	766.77	32	0.156	0.41	96	7
3	RED	766.00	44	0.156	0.41	132	10
4	BLUE	765.50	55	0.156	0.41	165	13
5	YELLOW	764.80	27	0.156	0.41	81	6
6	ORANGE	764.55	60	0.156	0.41	180	14
7	YELLOW	763.98	50	0.156	0.41	150	12
	total	feet =	268	gal/min =	25.42		62
			Des. Flow	480			
			Pump Run=	5.88			
			soil LTAR	0.3			
			LTAR +5%	0.315			
			LTAR with mod.	0.6			
			LTAR with mod.. + 5%	0.63			

.156 equals 5/32 inch hole

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Supply Line Volume	9.048	gal.
Required Feet of Line	266.6667	ft.
Amount of Line from Layout	268	ft.
Gallons per Minute	25.42	$^{gal}/_{min}$
Required Septic Tank Capacity	1000	gal.
Pump Tank Capacity	1000	gal.
Panel Volume	3.6	gal.
# of Panels	62	
Dosing Volume	149.54	gal.

Note: Dosing Volume based on 67% of # of panels times 3.6 gal/panel

Tank Draw Down	7.1	*Generic Draw Down of 21 gal.per in.*
Pump Run Time	5.88	minutes
Elevation Head	8.02	ft.
Pressure Head	2	ft.
Friction Factor	1.78	ft./100 ft. *(From the interpolater.)*
Friction Head	0.93	ft.
Total Dynamic Head (+15%)	12.59	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

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

Sheet 1 of 1
PROPERTY ID #:
COUNTY: Iredell

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

OWNER: Alex Chasnis
ADDRESS: 126 Maunt Jay Ln
PROPOSED FACILITY: SFR
PROPOSED DESIGN FLOW (.1949): 480gpd
LOCATION OF SITE: BSR → Ron Stonemarker → Lon Blarney → Ron Maunt Jay
APPLICATION DATE 8-23-17
DATE EVALUATED: 8-30-17
PROPERTY SIZE: .95ac
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
1 Pit1	10% LS	0-12	fill	—	—	60	33-60" few SAP inc		PS .3
		12-33	ABK C	Fr-Fi, SS,SP,SEXP					
		33-60	WSBK CL	Fi, SS,SP,SEXP					
2 Pit3	10% LS	0-4	gravel	—	—	60	3-60" few SAP inc.		PS .3
		4-9	fill	—					
		9-31	ABK C	Fr-Fi, SS,SP,SEXP					
		31-60	WSBK CL	Fr, SS,SP,SEXP					
3 Pit5	8% LS	0-3	fill/gravel	—	chroma 2@ 24" many yellow brown mottles 11-48	24	—		(drip) .1 .1
		3-7	Gr SL	Fr, NS, NP, SEXP					
		7-15	WSBK SCL	Fi, SS, SP, SEXP					
		15-48	ABK C	Fi, S, P, SEXP					
4 Pit6	8% LS	0-7	fill	—	chroma 2@ 26 7-56 many yellow brown mottles	26	—		(drip) .1
		7-26	ABK C	Fi, SS, SP					
		26-50	ABK C	Fi-VFi, massive					
		50-56	ABK C	VFi, VS, P, EXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	IV	V
Site LTAR	.3	.1 (drip)

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

COMMENTS:

DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Rollins Soil.

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Sheet 1 of 2
PROPERTY ID #: 4634183434
COUNTY: Iredell

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

OWNER: Wesley Jones Applicant: Alexander Chagnis
ADDRESS: 2434 Forest Dr. Charlotte, NC 28211 See Design.
APPLICATION DATE 8/31/15
PROPOSED FACILITY: 4 BR PROPOSED DESIGN FLOW (.1949): 480 PGD
DATE EVALUATED: July/Aug. 2
LOCATION OF SITE: 126 Mount Joy Ln, Mocresville NC
PROPERTY SIZE: .78 AC
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	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
SB 1	4/10%	0-6	B SL Gr	Fr SS SP					PS .25
		6-12	Br SCL wmsbk	Fr SS SP					
		12-20	RB SCL wmsbk	Fr SS SP	Few Fe Depl.				
		20-32	RC wmsbk/Mtk	Fr SS SP	Few Fe Depl.				
		32-48	RC wmsbk	Fr SS SP	Few Fe Depl. dk brown				
B 2	4/10%	0-6	B SL Gr	Fr SS SP					PS .225-.25
		6-18	Br SCL wmsbk	Fr SS SP					
		18-31	RC wmsbk	Fr SS SP	Few Fe Depl. Ch. R 2's @ 27"				
B 3	4/10%	0-10	B SL Gr	Fr SS SP					PS .25
		10-18	Br SCL wmsbk	Fr SS SP					
		18-43	RC wmsbk	Fr SS SP	F/C Fe Depl @ 27"				
					Ch. R 2's @ 35"				
B 4	4/10%	0-8	B SL Gr	Fr SS SP					PS .25
		8-15	Br CL/SCL wmsbk	Fr SS SP					
		15-36	RC wmsbk	Fr SS SP	Few Fe Depl. >27"				
		36-AR							

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	PPBPS	Drip w/TS II
Site LTAR	0.3	0.1

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: S. Ashley Rollins, J Wendell Overby
OTHER(S) PRESENT:

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

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

Sheet 2 of 5

PROPERTY ID #: 4624183437
DATE OF EVALUATION: July/Aug 2017
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	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
B5	L/8%	0-6	B SL Gr	Fr SS SP	Chr Rdx @ 21"				PS-21" 0.1
		6-24	Y B C wmsbk	Fr SS SP					
		24-AR							
B6	L/10%	0-10	Fill		Few SAP Inclu.				PS .3
		10-34	RC wmsbk	Fr SS SP					
		34-48	RCL wmsbk	Fr SS SP					
B7	L/9%	0-5	BSL Gr	Fr SS SP	Fe Depl Few Fe Depl Few SAP Inclu.				PS .25
		5-10	BRSCL wsbk	Fr SS SP					
		10-30	RBC wmsbk/Absk	Fr SS SP					
		30-38	RC wmsbk/Absk	Fr SS SP					
		38-48	RCl wfsbk	Fr SS SP					
B8	L/10%	0-10	Fill		Few Fe Depl 23"-32" Few SAP Inclu.				PS .25
		10-15	BSL Gr	Fr SS SP					
		15-19	BRSCL wsbk	Fr SS SP					
		19-36	RC wmAbk/sbk	Fr SS SP					
		36-48	RC wmsbk	Fr SS SP					
B9	L/9%	0-5	BSL Gr	Fr SS SP	Few SAP Inclu.				PS .3
		5-30	RC wmsbk	Fr SS SP					
		30-48	RYCL wfsbk	Fr SS SP					

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

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

PROPERTY ID #: 4624183437
DATE OF EVALUATION: July/Aug. 2015
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	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
B		0-5	Bsl Gr	Fr SSSP					
10	L/10%	5-13	BRC/wfsbk	Fr SS SP					PS .3
		13-42	RC mmsbk	Fr SS SP					
		42-48	RCL wfsbk	Fr SS SP	Few SAP Inclu.				
B		0-6	BSL Gr	Fr SSSP					
11	L/10%	6-12	BRCL wfsbk	Fr SS SP					PS .1-.15
		12-22	RC wmsbk	Fr SSSP					
		22-AR	Floater						
B		0-10	BRC wmsbk	Fr SS SP					
R	L/10%	10-24	RC mmsbk/Abk	Fr SS SP					PS .1-.15
		24-30	RCL wfsbk	Fr SS SP	Few SAP Inclu.				
B		0-10	BSL Gr	Fr SSSP					
13	L/8%	10-20	BRCL wfsbk	Fr SS SP					PS .25-.275
		20-35	RBC wmsbk/Abk	Fr SS SP	Few Fe. Dep				
[redacted]		0-11	Fill						
P	L/10%	11-13	BL/SL Gr	VFr2 NS NP					PS .3
1		13-34	RC mmAbk	F SS SP					
		34-60	RCL wmsbk	Fr SS SP					

COMMENTS:

DEPARTMENT OF ENVIRONMENT
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

SOIL/SITE EVALUATION
(Continuation Sheet)

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PROPERTY ID #: 4624183437
DATE OF EVALUATION: July/Aug 20[illegible]
COUNTY: Iredell

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
P 2	L/90%	0-6	RC S/M C/M Abk	Fi/VFi SS SP	Compacted				PS .3
		6-22	RC mmAbk	Fi SS SP					
		22-34	RC wmsbk	Fr SS SP					
		34-48	RCL wmsbk	Fr SS SP	Few Fe Depl.				
		48-60	YR L wmsbk	Fr SS SP	Few Fe Depl. Ch R @'s @ 54"				
P 3	L/100%	0-4	DB SL/Gravel	Drive					PS .3
		4-6	L+B SL Gr	Fr SS SP					
		6-18	RC wmAbk	Fr SS SP					
		18-33	RC mmsbk	Fr SS SP					
		33-48	RC wmsbk	Fr SS SP					
		48-60	RB CL wfsbk	Fr SS SP	Ch. R 25@ 60" Few Y Depl				
P 4	L/100%	0-12	SL/Gravel Drive/Fill						PS .3
		12-53	RC mfAbk	Fr SS SP					
		53-60	RCL wmAbk	Fr SS SP	Few Fe Depl.				
P 5	L/100%	~~0-14~~	~~Fill/Gravel~~	Removed					PS ~~.275~~ .1 Amp
		14-18	L+B SL Gr	Fr SS SP					
		18-25	RB SCL wmsbk	Fi SS SP					
		25-50	R SC mmAbk	Fr SS SP	Few Fe Depl				
		50-60	RB SCL wmAbk	Fr SS SP	C. Fe Depl. Ch.r 25@54"				

COMMENTS:

SOIL/SITE EVALUATION (Continuation Sheet-Complete all field in full)

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Sheet 5 of 5

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

PROPERTY ID #: 1624183437
DATE OF EVALUATION: July/Aug 2015
COUNTY: Iredell

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
P6	L/8%	0-6	LtB SL Gr	Fr SS SP		50	—	—	PS .1
		6-12	YB SL wfsbk	Fr SS SP					
		12-24	YR SCL wmasbk	Fi SS SP					
		24-50	YR C MASS/wmsbk	VF SP	-C. SAP -C. Fe Depl Ch. R 2's @ 39"				
B14	L/5%	0-3	BCl wfsbk	Fr SSSP SExP		37	—	—	PS 0.1
		3-23	RCl wmsbk	" " "					
		23-37	RCl wfsbk	" " "	-fscsap				
B15	L/3%	0-8	Fill			36	—	—	PS 0.1 Remove FH ~20TB
		8-15	RBC wmsbk/sbk	FSSSP SExP	-comp.				
		15-26	RC wmsbk	Fr SSSP SExP					
		26-44	RBCl wmsbk	" " "	-fr csap				

COMMENTS:

ROLLANS ***Soil & Environmental Services, PA.***
P.O. Box 832, Mooresville, NC 28115 Phone: (704) 746-5046 Fax: (704) 278-0989

Ashley Rollans, NC Licensed Soil Scientist
Mobile: (704) 746-5046
Email: rollans.ashley@yahoo.com

Attached is a proposed design for a PPBPS Septic System with low pressure distribution for a 4 bedroom single family residence on 126 Mt. Joy Lane, Lot # 181 Crescent Land & Timber Corp., Iredell County, North Carolina.

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Voluntary Relinquishment Form	17
Green Sheet	18



August 23, 2017
Project #: 01-3050
Design By: Rollans Soil & Environmental Services, 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.
- Pumptank riser should be 6" above grade, control panel should be 12" above grade.
- Septic tank riser shall be a minimum of 6" above finished grade.
- System is specified as a PPBPS installation w/Low Pressure Distribution.
- Repair is specified as an Innovative Drip Irrigation with TS-II Pretreatment installation.
- Backfill 4 - 6" of material (County Approved) over panels, rake trench walls, lime side-walls, install trenches 24" wide and have no more than 1/4" fall in 10 feet.
- **Proposed pool must be installed with water's edge a minimum of 15' from any septic.**
- **Existing system must be abandoned per Iredell County Health Dept.**

RECEIVED AUG 2 9 2017

IREDELL COUNTY HEALTH DEPARTMENT

Paid $850.00

#213228

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

Application For:

(✓) Septic Improvement Permit ( ) New Well Permit ( ) Authorization to Construct ( ) Well Repair Permit ( ) Existing System Inspection ( ) Well Abandonment ( ) Septic System Repai

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:

Applicant Name: Rollans Soil & Environmental Services, PA **Address:** P.O. Box 632, Mooresville NC 28115 **Phone:** 704-746-5

Owner Name: Alex Chasnis / Imegan **Address:** 186 Atlantic Way, Mooresville, NC 28117 **Phone:** 704-277-14

Property Information:

Street Address: N/o Mount Joy Ln, Mooresville NC 28117

Subdivision Name: Crescent Land + Timber Corp. **Section/Phase:** 5e **Lot Number:** 181

Driving Directions: From Brawley turn right on Stonemarker Rd, then turn left on Blarney R then right on Mount Joy Ln. Lot is at the end of cul de sac.

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

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 8
( ) Swimming Pool
( ) Other Addition/Structure:

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

Non-Residential Site Development:

Type of Business:
Square Footage of Building:
Maximum Number of Employee:
Maximum Number of Seats/Beds/Other:

Water Supply:

(✓) 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 (X) 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: _____ 8/23/17

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

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, Alexander Walter Chasnis, am the legal owner(s) of the property located at 126 Mount Joy Lane, identified as PIN (Parcel Identification Number) 4624183437, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) Samuel Ashley Rollans, Rollans Soil & Environmental Services, 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.

Alex W. Chasnis / Megan Chasnis 8/23/17

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

RECEIVED AUG 3 1 2015

Paid $850.00

213228

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

Application For:
(✓) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(✓) 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

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:

Applicant Name: Alex Chasnis/Megan **Address:** 186 Atlantic Way, Mooresville, NC 28117 **Phone:** (704)274-1439

Owner Name: Wesley Jones **Address:** 2434 Forest Dr. Charlotte, NC 28211 **Phone:** N/A

Property Information:

Street Address: 126 Mount Joy Ln, Mooresville NC 28117

Subdivision Name: Crescent Land + Timber Corp. **Section/Phase:** 5b **Lot Number:** 181

Driving Directions: From Brawley turn right on Stonemarker Rd, then turn left on Blarney Rd, then right on Mount Joy Ln. Lot is at the end of cul de sac.

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

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 8
( ) Swimming Pool
( ) Other Addition/Structure:

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

Non-Residential Site Development:
Type of Business:
Square Footage of Building:
Maximum Number of Employee:
Maximum Number of Seats/Beds/Other:

Water Supply:

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

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

Year existing system installed:

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

8/31/14
DATE

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

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, Alexander and Megan Chasnis am the legal owner(s) of the property located at 126 Mt. Joy Lane Mooresvill, NC 28117, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Brent Zande, State Building Group, 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.

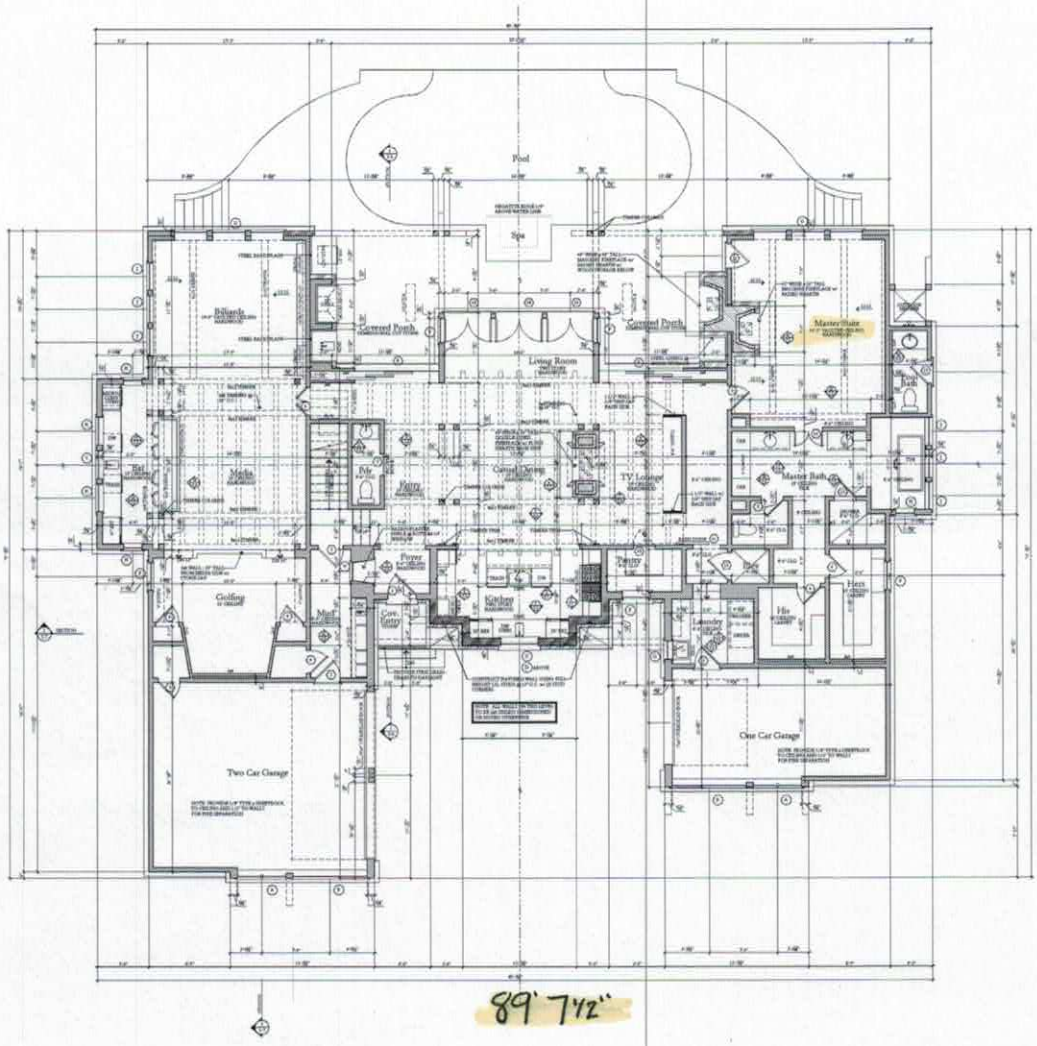
Signature of Owner(s)	Date	Signature of Witness	Date
	9/7/17		9/7/17

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

Acknowledgement Of
Plans Submittal ONLY!
Date 9-6-17
Date 9-7-17



Square Footage

Main Level Heated	3,290	Sq.Ft.
Upper Level Heated	2,531	Sq.Ft.
Total Heated	5,821	Sq.Ft.
Two Car Garage	521	Sq.Ft.
One Car Garage	304	Sq.Ft.
Covered Entry	30	Sq.Ft.
Covered Porches	572	Sq.Ft.
Total Under Roof	7,248	Sq.Ft.

SEE SHEET A-6 FOR DOOR & WINDOW SCHEDULE

NOTICE TO BUILDER

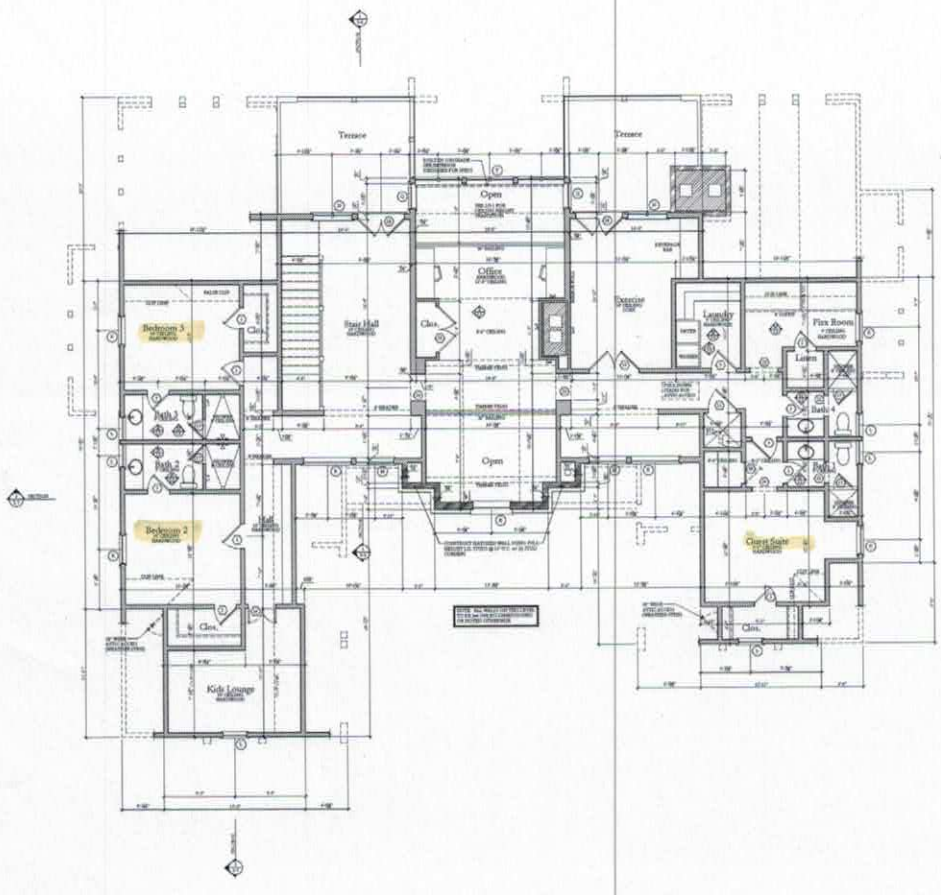
JIM PHELPS COLLECTION, LLC

GRAHAM RESIDENCE

A-2

MAIN LEVEL FLOOR PLAN

Acknowledgement Of
Plans Submittal ONLY!
Date 9-6-17
Date 9-7-17



SEE SHEET A-8 FOR DOOR & WINDOW SCHEDULES

NOTICE TO BUILDER

JIM PHELPS COLLECTION, LLC

CHASSEL RESIDENCE

A-3

UPPER LEVEL FLOOR PLAN

IREDELL COUNTY

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

APPLICATION NUMBER
213228
Issue Date: 08/31/2015

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4624183437.000	126 MOUNT JOY LANE, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: JONES WESLEY+RUTH M	Applicant: CHASNIS ALEXANDER W+ME
Address: 2434 FOREST DR MOORESVILLE, NC 28211	Address: 186 ATLANTIC WAY MOORESVILLE, NC 28117
Phone:	Phone:

Use Requested	Zone Code
NEW SFD	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.780	35.00	50.00	15.00	15.00	CACL	AE

Remarks:

SEE SETBACKS ON SURVEY.

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: Megan Annis Date: 8/31/15

Permit Number	48043	TOTAL FEES:	$ 77.25

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

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

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

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I, Wesley & Ruth Mary Jones, am the legal owner(s) of the property located at 126 Mt. Joy Lane, Mooresville, NC 28117, identified as PIN (Parcel Identification Number) 4634-18-3937.000, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) (Buyers & Soil Scientist) Megan Chasnis, Alex Chasnis, Ashley Rollins, 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.

Ruth Mary Jones 8/27/15 — Signature of Owner(s) — Date

Mary Matteson 8-27-15 — 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

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

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I, Wesley & Ruth Mary Jones, am the legal owner(s) of the property located at 126 Mt. Joy Lane, Mooresville NC 28117, identified as PIN (Parcel Identification Number) 4624-18-3437.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Mary Matheson, KW Realty, 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.

Signature of Owner(s)	9-24-15 Date	Ruth Mary Jones Signature of Witness	9-24-15 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