BCW

# ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 246070

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

PIN # ~~4743-70-5777~~ 4624-26-6871

APPLICANT/OWNER: Helen Odomirecke APPLICANT ADDRESS: 124 Bunker Way Mooresville NC 28117

SITE ADDRESS: 124 Bunkerway Mooresville NC 28117 PHONE: - ALT. PHONE 704-451-7567

SITE DIRECTIONS: Brawley School Rd to Bunker Way SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: The Point SECTION: 10 LOT # 1004 LOT AREA: .77 Ac DESIGN FLOW: 480 L.T.A.R.: .30

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 | (gal) | STB | 444 | Date | 4-12-2021 | ☐ New System ☐ Repair ☐ Expansion | System Type: I II (III) IV V VI | ☒ Residence | No. Bedrooms | 4 | Water Supply |
| Pump Tank | - | (gal) | PT | - | Date | - | System Description: | Relocation - 50% Reduction | ☐ Business | No. Persons | 8 | ☐ Private |
| Pump Make | - | Model | - | | Serial # | - | Repair System Description: | PPBPS - 50% Reduction | ☐ Other | No. Employees | | ☐ Public |
| # Nitrification Fields | 1 | # Lines | 1 | | Linear Ft | 47 | Maintenance Agreement Required: | ☐ YES ☒ NO | ☐ Slab | ☒ Crawl Space | | ☒ Community |
| Trench Width | 24 | Trench Bottom Depth ~~(Correct)~~ | | | 36 in | | Gravel Depth | ☒ GRAVITY ☐ PRESSURE | ☐ Basement w/plumbing | | ☐ Basement w/o plumbing | |

Comments / Conditions:

INITIAL SITE SKETCH

This permit is issued pursuant to Section 11 . (C) of S.L. 2018-114 using the signed and sealed LSS Evaluation by:

Michael Adkinsas + Associates Inc.

LSS # 1252.

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**

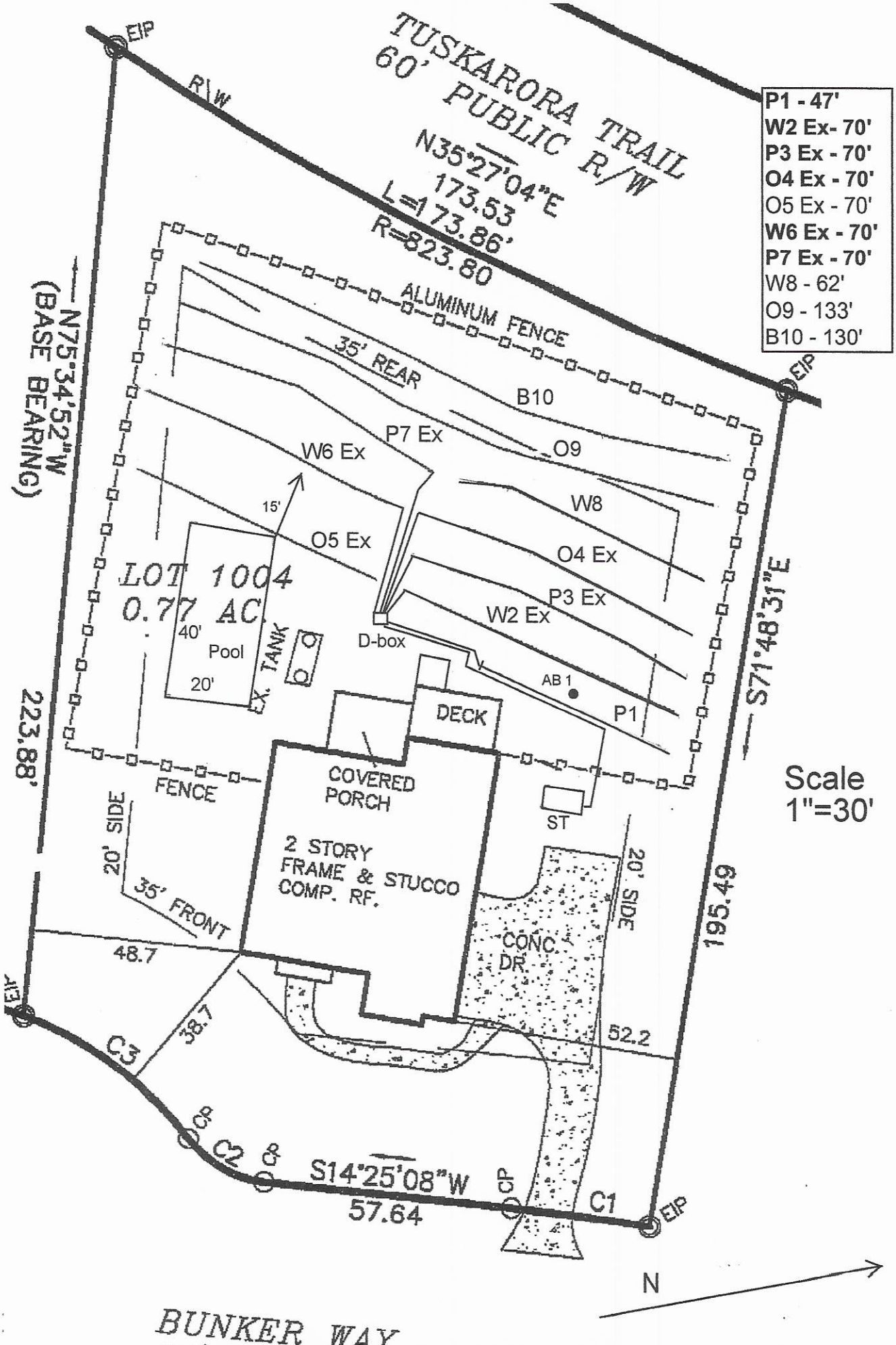
☐ **IMPROVEMENT PERMIT** *with plan valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Helen Mary Odomirecke Date: 10/30/2020 Installed by: Lenta Woskencker

IMPROVEMENT PERMIT by: Benjamin A. Batten Date: 10/13/2020 OPERATION PERMIT by: Date: 5-19-2021

AUTHORIZATION TO CONSTRUCT by: Benjamin A. Batten Date: 10/13/2020 Existing System Inspected by: Date:

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


TUSKARORA TRAIL
60' PUBLIC R/W
R\W
N35°27'04"E
173.53
L=173.86'
R=823.80
EIP
P1 - 47'
W2 Ex- 70'
P3 Ex - 70'
O4 Ex - 70'
O5 Ex - 70'
W6 Ex - 70'
P7 Ex - 70'
W8 - 62'
O9 - 133'
B10 - 130'
ALUMINUM FENCE
35' REAR
B10
P7 Ex
W6 Ex
O9
W8
15'
O5 Ex
O4 Ex
P3 Ex
W2 Ex
LOT 1004
0.77 AC.
40'
Pool
20'
EX. TANK
D-box
AB 1
P1
DECK
COVERED PORCH
FENCE
ST
2 STORY FRAME & STUCCO COMP. RF.
20' SIDE
35' FRONT
CONC. DR.
20' SIDE
N75°34'52"W
(BASE BEARING)
223.88'
S71°48'31"E
195.49
48.7
38.7
52.2
C3
CP
C2
C1
S14°25'08"W
57.64
Scale
1"=30'
N
BUNKER WAY
94' PRIVATE R/W




# MICHAEL ATHANAS & ASSOCIATES, INC.
## LICENSED SOIL SCIENTIST

**561 Ennis Road**
**Weddington, NC 28173**
**704-576-3887 (Mobile)**


## Session Law

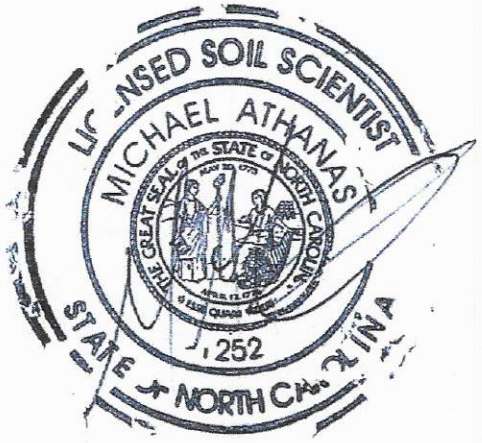
**Property:**

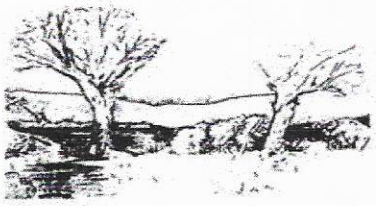
124 Bunker Way
Mooresville, NC 28117
The Point Lot 1004
PIN 4624266871

**Prepared for:**

Helen Mary Odomirek

9/29/2020





**MICHAEL ATHANAS & ASSOCIATES**
**LICENSED SOIL SCIENTIST**
**561 Ennis Rd.**
**Weddington, NC 28173**
**(704) 576-3887**
**9/18/2020**

**Reference: Data Sheet for 124 Bunker Way, The Point Lot 1004**
**House Footprint:** See attached plan
**Building Setbacks:** 35' front/rear, 15' side
**Water Source:** Community well
**Number of Bedrooms/Daily Flow:** 4/480 GPD
**Proposed LTAR:** 0.3 GPD/FT$^2$
**Proposed System Type:** Existing 25% Reduction + PPBPS
**Proposed Repair System Type:** PPBPS
**Distribution:** Distribution box
**Septic Tank Size:** 1500 gallons
**Proposed Trench Bottom:** 36"

| Line | Design Length | Actual Length |
|---|---|---|
| **Pink 1** | **47'** | **47'** |
| **White 2 Ex** | **70'** | **70'** |
| **Pink 3 Ex** | **70'** | **70'** |
| **Orange 4 Ex** | **70'** | **70'** |
| Orange 5 Ex | | 70' Abandon |
| **White 6 Ex** | **70'** | **70'** |
| **Pink 7 Ex** | **70'** | **70'** |
| White 8 | | 62' |
| Orange 9 | | 133' |
| Blue 10 | | 130' |




**Initial System:** 350' Existing 25% Reduction + 47' New PPBPS
**Repair System:** 325'

**Comments:**
MA&A propose to abandon one existing 25% Reduction septic line to make room for a pool and replacing it with PPBPS. The existing septic tank must be abandoned and replaced.
**Please note that the septic area should be completely fenced off from any traffic, at no time should any construction activity, grading, compaction ect. be inside of the septic area. If any of the septic area is compromised or altered, it will result in the voiding of this permit.**
*The LSS Evaluation is being submitted pursuant to and meets the requirements of SL 2018-114 Section 11.(c).*

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


PROPERTY ID #: 4624266871_
COUNTY: Iredell__

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

LICENSED SOIL SCIENTIST MICHAEL A. STATE OF NORTH CAROLINA

OWNER: Helen Stonell_____ APPLICATION DATE_____
ADDRESS: 124 Bunker Way, Mooresville, NC 28117_____ DATE EVALUATED: _____
PROPOSED FACILITY: _4 bdrm_____PROPOSED DESIGN FLOW (.1949): _480 GPD_____ PROPERTY SIZE: _0.77 AC_____
LOCATION OF SITE: 124 Bunker Way, The Point Lot 1004_____ PROPERTY RECORDED: _____
WATER SUPPLY: ☐ Private ☰ Public ☰ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☰ Auger Boring ☐ Pit ☐ Cut TYPE OF WASTEWATER: ☰ Sewage ☐ Industrial Process ☐ Mixed

| PROFILE # | .1940 LANDSCAPE POSITION/ SLOPE % | HORIZON DEPTH (IN.) | SOIL MORPHOLOGY (.1941) | | OTHER PROFILE FACTORS | | | | PROFILE CLASS & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| | | | .1941 STRUCTURE/ TEXTURE | .1941 CONSISTENCE/ MINERALOGY | .1942 SOIL WETNESS/ COLOR | .1943 SOIL DEPTH | .1956 SAPRO CLASS | .1944 RESTR HORIZ | |
| 1 | LS 5% | 0-6 | FILL | | N/A | 48" | N/A | N/A | PS 0.3 |
| | | 6-28 | R C SBK | FR SS SP | | | | | |
| | | 28-48 | R CL WSBK | FR SS SP | | | | | |
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| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | 94 FT2 NEW | 650 FT2 |
| System Type(s) | PPBPS | PPBPS |
| Site LTAR | 0.3 | 0.3 |

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____PS_____
EVALUATED BY: _____MA & A_____
OTHER(S) PRESENT: _____

_: *The LSS Evaluation is being submitted pursuant to and meets the requirements of SL 2018-114 Section 11.(c).*_____

RECEIVED OCT 0 2 2020

# IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

***APPLICATION FORM***

SL AP-246070 $500.00

**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:** (PRINT CLEARLY)

**Applicant Name:** Helen Odomirek **Address:** 124 Bunker Way, Mooresville, NC **Zip:** 28117

**Applicant Email:** _____ **Phone:** 704-451-7567 **Alt. Phone:** _____

**Owner Name:** Same **Address:** _____ **Zip:** _____

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

**Property Information:**

**Street Address:** 124 Bunker Way

**Subdivision Name:** The Point **Section/Phase:** _____ **Lot Number:** 1004

**Driving Directions:** _____

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

**CHECK FOUNDATION TYPE**

( ) 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: 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: _____ 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 ( ) Other Public Water

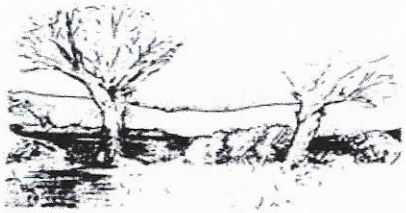
**Desired Septic System Type:** *(you may rank in order of preference)* Year existing system installed: _____
( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative (✓) Modified Conventional (✓) Other: Accepted

**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:** _____ 9/29/2020
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE




# MICHAEL ATHANAS & ASSOCIATES

**NC LICENSED SOIL SCIENTIST**
**SC PROFESSIONAL SOIL CLASSIFIER**
**561 Ennis Rd Weddington, NC 28173**
**MIKE@MICHAELATHANAS.COM**
**WWW.MICHAELATHANAS.COM**
**(704) 576-3887**


Date: 9/22/2020

Project Name

SESSION LAW 218-114, SECTION 11. (C) /HOUSE BILL 374, SECTION 11. (C)
AUTHORIZATION FORM

Michael Athanas & Associates (MA&A) has been contracted to evaluate soil, design and submit a septic system proposal to Iredell (County) on behalf of Helen Stonell (Owner/Applicant for the property located at -
124 Bunker Way, Mooresville, NC 28117, The Point Lot 1004, PIN 4624266871 (address/PIN)

The Licensed Soil Scientist (LSS) Evaluation attached to this application is to be used to produce design and construction features for permitting in accordance with SL 2018-114 section 11 . (c)

By completing this form, sign and dating you agree that the permit issued by Iredell (county) will fall under the above referenced law.

Owner/Owners Legal Representative Helen ~~Stonell~~ Mary Odomirok
Mailing address 124 Bunker Way, Mooresville, NC 28117
Telephone Number 704-451-7567
Email Address helenstonell@me.com

Helen Mary Odomirok

Signature of Owner/ Owner Legal Rep.

9/22/2020

Date

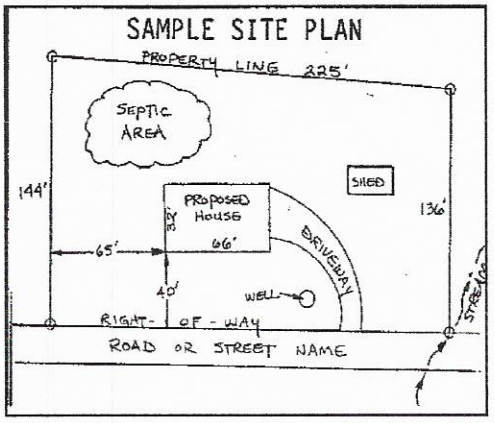
# IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

***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:**

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




**Circle N/A on the following if appropriate:**

| | |
|---|---|
| **Location of septic systems and wells within 100' of your property** | **N/A** |
| **Location of easements and rights of ways on your property** | **N/A** |
| **Location of any designated wetlands on the property** | **N/A** |

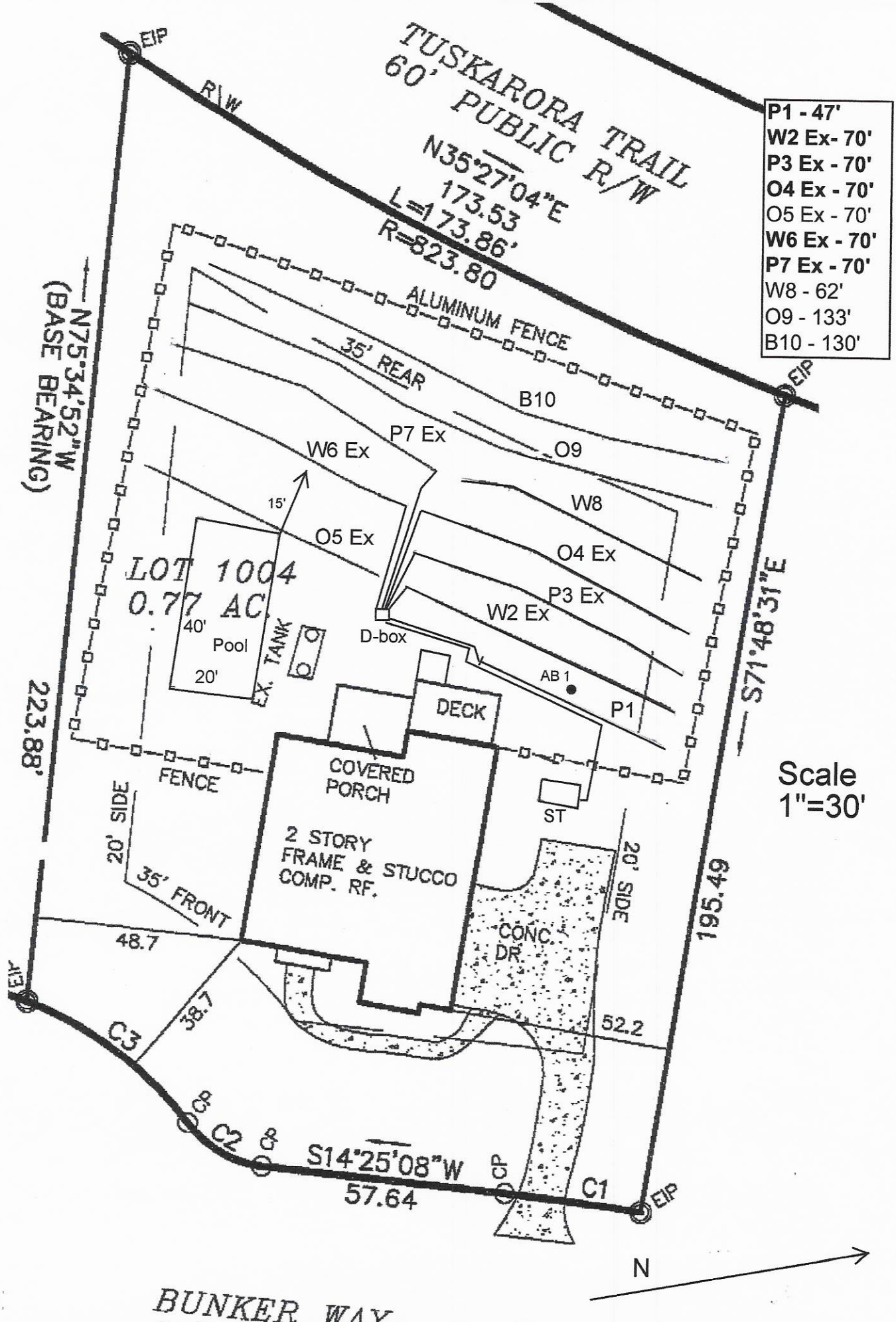
## USE THIS SPACE TO DRAW YOUR SITE PLAN

*Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site*

See attached plan

**Signature:** _____ 9/29/2020

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


TUSKARORA TRAIL
60' PUBLIC R/W
R/W
EIP
N35°27'04"E
173.53
L=173.86'
R=823.80
ALUMINUM FENCE
35' REAR
B10
P7 Ex
W6 Ex
O9
W8
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O5 Ex
O4 Ex
P3 Ex
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D-box
AB 1
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0.77 AC.
40'
Pool
20'
EX. TANK
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(BASE BEARING)
BUNKER WAY
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