IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 228916

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

PIN # 4624-26-9338

APPLICANT/OWNER: JOHN WHITLEY | APPLICANT ADDRESS: 127 HUNTERS PTE. LN. MOORESVILLE 28117

SITE ADDRESS: 131 RUNKER WAY MOORESVILLE | PHONE: 704-361-9880 | ALT. PHONE

SITE DIRECTIONS: RSR, TR RUNKER, C END | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: THE POINT | SECTION: 10 | LOT # 1007 | LOT AREA: 1.861 AC | DESIGN FLOW: 600 | L.T.A.R.: .275 (-3R)

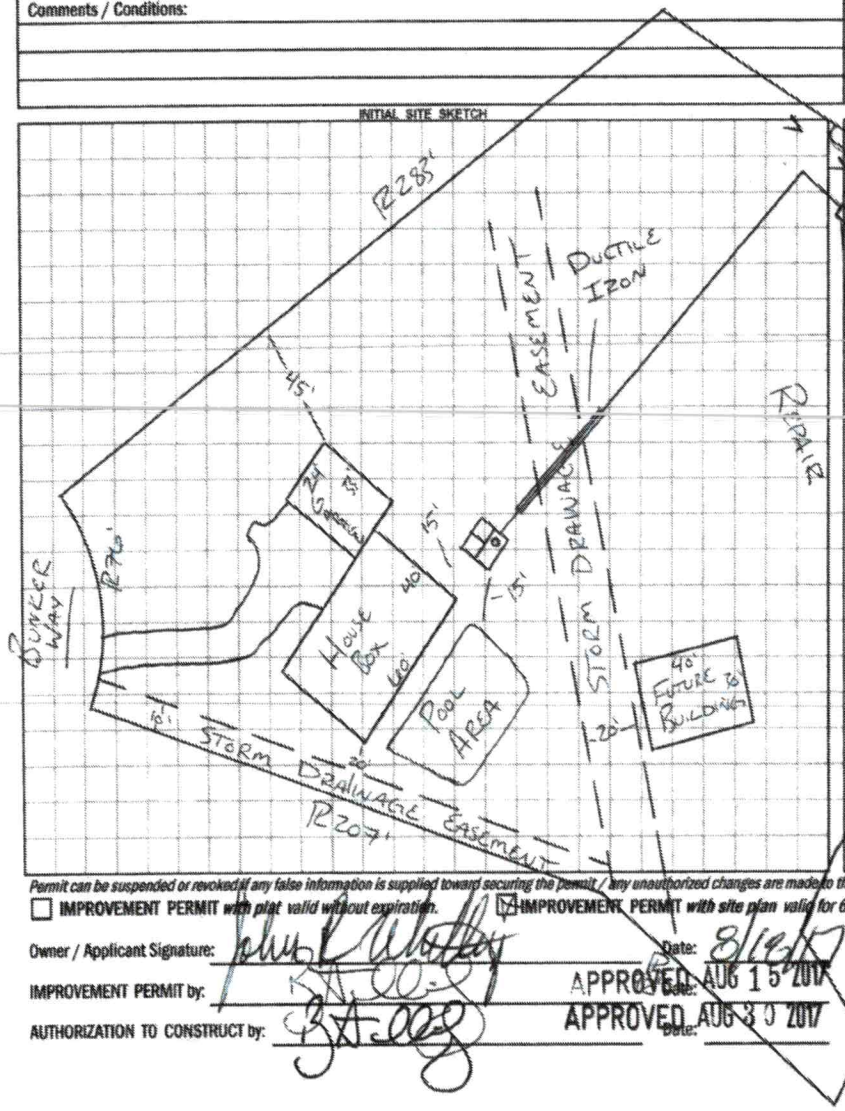
Septic Tank	1500 (gal)	STB	338	Date	4-13-20	☒ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms 5
Pump Tank	1500 (gal)	PT	477	Date	3-30-20	System Description:	PM - 25%	☐ Business	No. Persons 16
Pump Make		Model		Serial #		Repair System Description:	50%	☐ Other	No. Employees
# Nitrification Fields	1	# Lines	5	Linear Ft	545	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☐ Crawl Space
Trench Width	36"	Trench Bottom Depth(Low side)	24"	Gravel Depth			☐ GRAVITY ☒ PRESSURE	☒ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☒ Community

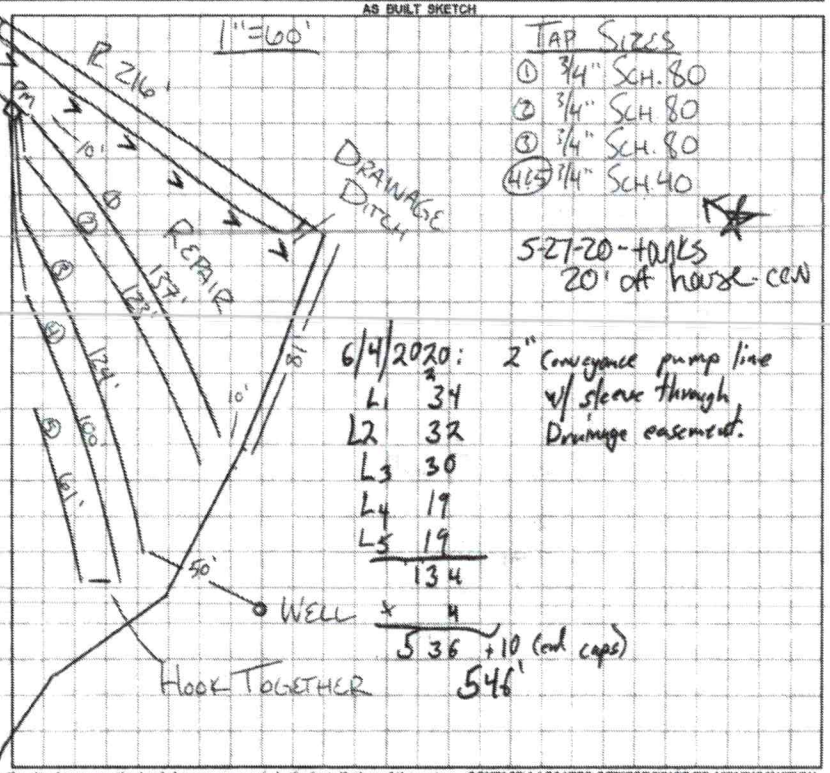
Comments / Conditions:

SUPPLY LINE MUST BE DUCTILE IRON 10' ON BOTH SIDES OF EASEMENT. RECORDED AGREEMENT TO CROSS STORM DRAINAGE EASEMENT REQUIRED BEFORE AC.

INITIAL SITE SKETCH



AS BUILT SKETCH



TAP SIZES
① 3/4" SCH. 80
② 3/4" SCH 80
③ 3/4" SCH. 80
4&5 3/4" SCH. 40

5-27-20 - tanks 20' off house - CON

6/4/2020: 2" conveyance pump line w/ sleeve through Drainage easement.

L1	34
L2	32
L3	30
L4	19
L5	19
	134
x	4
	536 +10 (end caps)
	546'

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: John L Whitley | Date: 8/14/17 | Installed by: Alan Hinkle

IMPROVEMENT PERMIT by: RT-CO | Date: APPROVED AUG 15 2017 | OPERATION PERMIT by: Carla C Nicks | Date: 8-12-20

AUTHORIZATION TO CONSTRUCT by: RT-CO | Date: APPROVED AUG 30 2017 | Existing System Inspected by: | Date:

	Date	Initials
Drain Lines Checked *compressor line	6-1-2020	GS
Tanks Checked	5-29-20	CCN
Pressure Manifold or Valve Box Checked	8-12-20	CCN
Pressure Head Set		CCN
Electrical Checked		CCN
Floats Set		CCN
Alarm Checked		CCN
Maintenance Contract Y / (N)		

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

Sheet 1 of 1
PROPERTY ID #: 4624-26-9338
COUNTY: IREDELL

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

OWNER: JOHN WHITLEY — APPLICATION DATE 7-24-17
ADDRESS: — DATE EVALUATED:
PROPOSED FACILITY: SFR — PROPOSED DESIGN FLOW (.1949): 600 — PROPERTY SIZE: 1.861 AC
LOCATION OF SITE: THE POINT - LOT 1007 — PROPERTY RECORDED: Y
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	L 3%	0-6	SCLWSBK	SS		54"	COMM. SAP 36-54"	54+	.3
		6-36	RCMSBK	S					
		36-54	RCLMSBK	SS					
2	L 2%	0-19	SCLWSBK	SS		58"	FEW SAP 40-58"	58+	.3
		19-40	RCMSBK	S					
		40-58	RCLMSBK	SS					
3	L 5%	0-6	SCLWSBK	SS	LOW CH MOTTLES 32-36"	58"	—	58+	.275
		6-50	RCMSBK	S					
		50-58	RCLMSBK	SS					
4	L 10%	0-21	RCMSBK	S		60"	MANY SAP 38-60"	60+	.3
		21-38	RCLMSBK	SS					
		38-60	RCLWSBK	SS					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	PM 25%	LP 50%
Site LTAR	.275	.3

OTHER FACTORS (.1946): —
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: SA
OTHER(S) PRESENT: JOHN WHITLEY

COMMENTS:

RECEIVED JUL 2 5 2017

Paid $500.00
#228916

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

PAGE 1: *APPLICATION FORM*

Application For: ( )New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) 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: John R. Whitley Address: 127 Hunters Pte. Ln., Mrsvl Zip: 28117
Applicant Email: jcwhitley@att.net Phone: 704-658-9251 Alt. Phone: 704-361-9880
Owner Name: JW Living Trust Address: 4373 Old Shelby Rd., Hickory Zip: 28602
Owner Email: nancyhenline@nancyhenline.com Samuel S. Metcalf Phone: 828-323-7799 Alt. Phone: _____

Property Information:

Street Address: 131 Bunker Way, Mooresville, NC 28117
Subdivision Name: The Point Section/Phase: 10 Lot Number: L100
Driving Directions: Brawley School Road past Trump Nat'l Entrace, apprx. 1 mile down on right – gated

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

CHECK FOUNDATION TYPE

(X) New Single Family Residence — Maximum Number of Bedrooms: 4 5 SRW — ( ) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: 3 — ( ) Concrete Slab Foundation
( ) Accessory Building — (X) Swimming Pool — (X) Basement with Plumbing
( ) Bedroom(s) Addition — ( ) Other Addition/Structure: _____ — ( ) Basement without Plumbing
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____
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 (X) 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: _____

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: John R Whitley 7-24-2017
property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

DAS DON ALLEN & ASSOCIATES, P.A.
"Since 1971"
Commercial * Residential * Mortgage Surveys * Multi-Family
Construction Staking * Subdivision Design * Topographical
131 Crosslake Park Drive – Suite 102 * Mooresville * NC * 28117
(704) 664-7029 (704) 664-8041 Fax

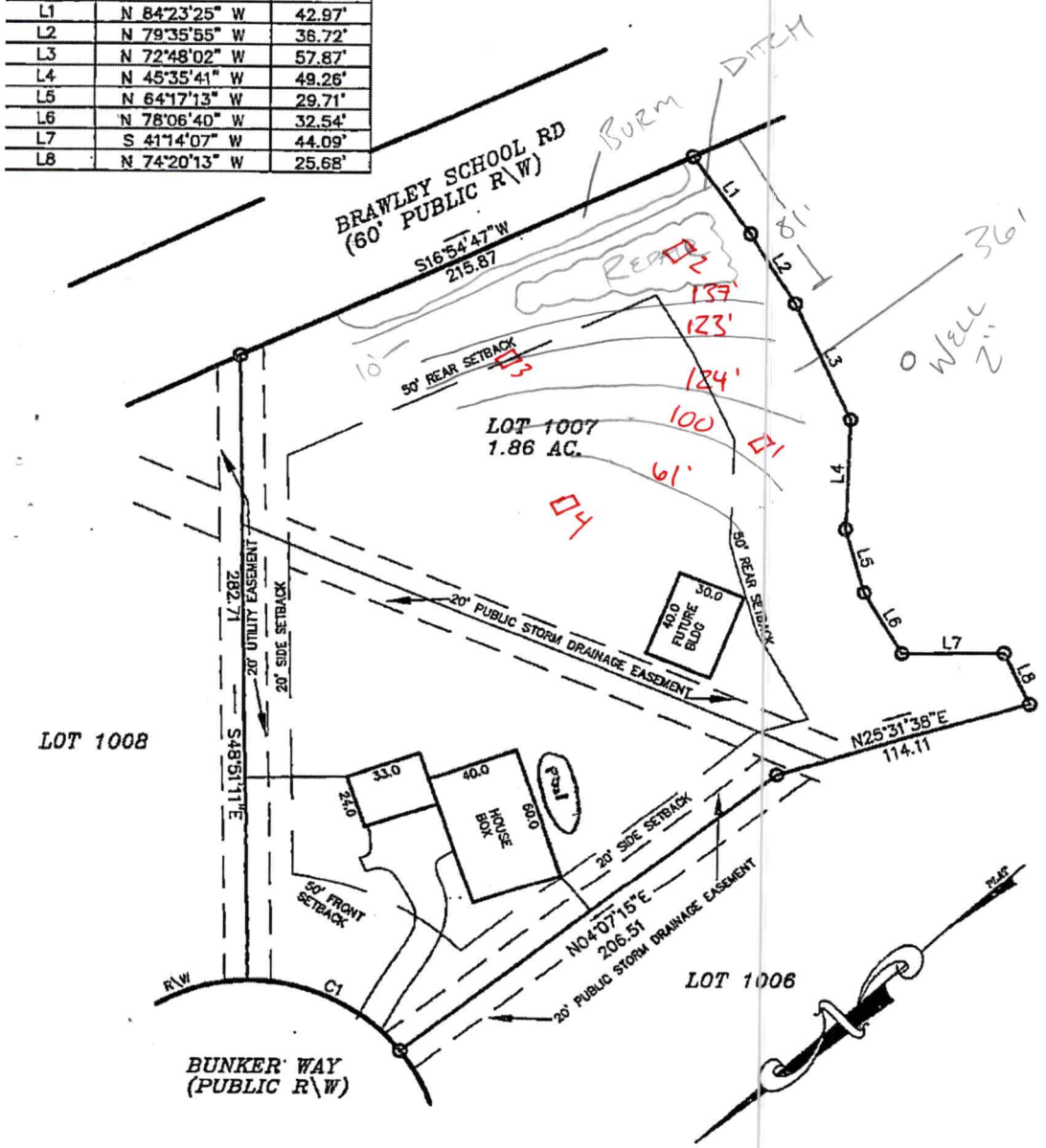
I, certify that this map was drawn under my supervision from an actual survey made under my supervision recorded in deed book_____, page_____, and/or plat book_____, page_____, that the ratio of precision is 1':10,000, that this map was prepared in accordance with the General Statutes of North Carolina Chapter 89C. my hand and seal on the 21, day of JULY, A.D. 20 17.

WILLIAM M. ALLEN, PLS

INITIAL
NEED 545' C.275

CURVE TABLE				
CURVE	RADIUS	LENGTH	BEARING	CHORD
C1	82.00'	75.82'	N 67°38'32" E	73.15'

LINE TABLE		
LINE	BEARING	LENGTH
L1	N 84°23'25" W	42.97'
L2	N 79°35'55" W	36.72'
L3	N 72°48'02" W	57.87'
L4	N 45°35'41" W	49.26'
L5	N 64°17'13" W	29.71'
L6	N 78°06'40" W	32.54'
L7	S 41°14'07" W	44.09'
L8	N 74°20'13" W	25.68'



0' 30' 60' 100'
SCALE IN FEET

PLOT PLAN SURVEY
OF
LOT 1007 THE POINT PHASE 10

SCALE 1" = 60'
ACQUIRED BY: JOHN WHITLEY
DAVIDSON TWSP., IREDELL CO., N.C.

FIELD BOOK:
FILE: POINT 1007
DC FILE:
TAX MAP NO:

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, Samuel S Metcalf, am the legal owner(s) of the property located at 131 Bunker Way Lot 1007, identified as PIN (Parcel Identification Number) 4624269338, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) John Whitley & Whitley Construction, 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.

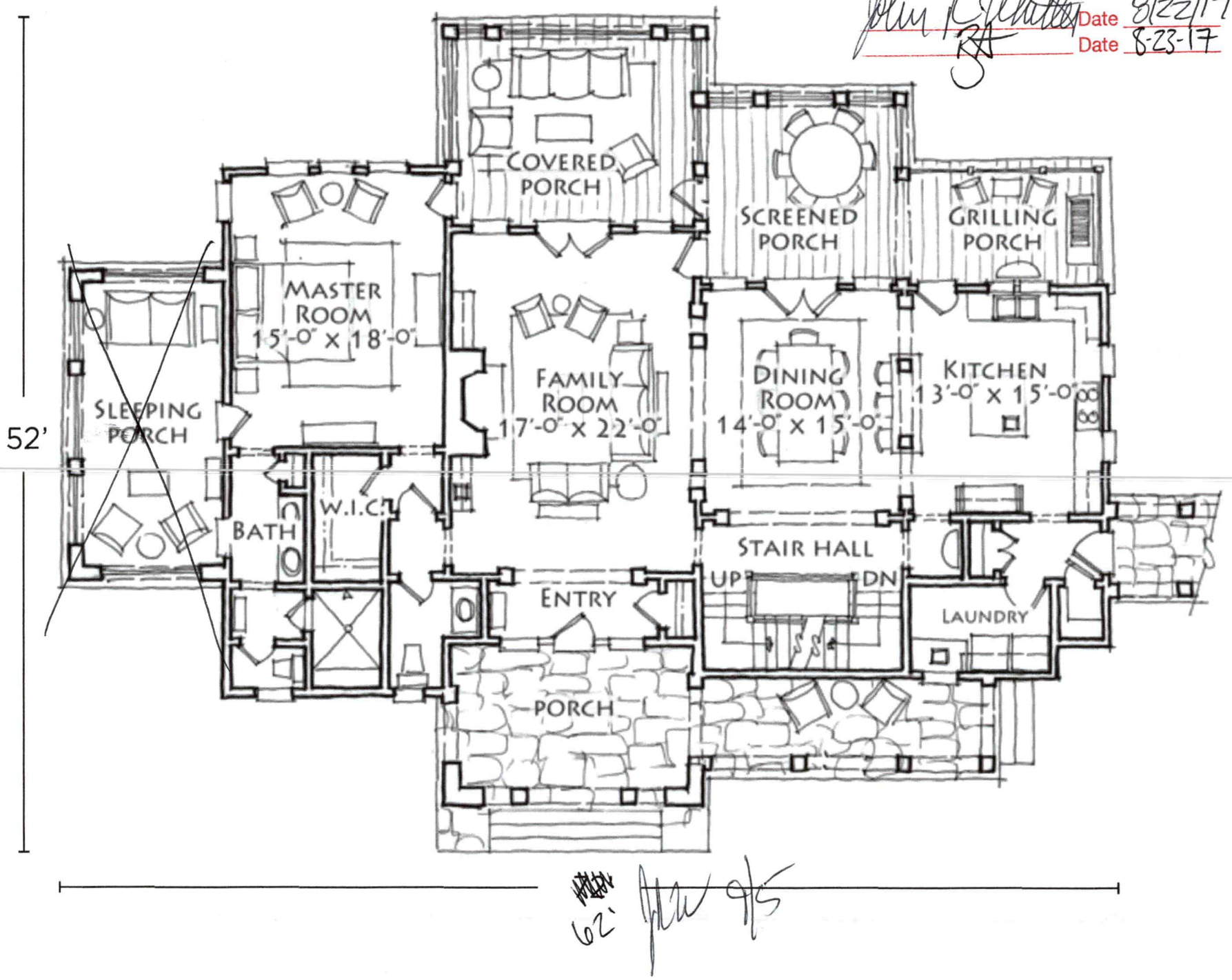
Signature of Owner(s)	Date	Signature of Witness	Date
S S M	7-18-17	[illegible]	7/18/17

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

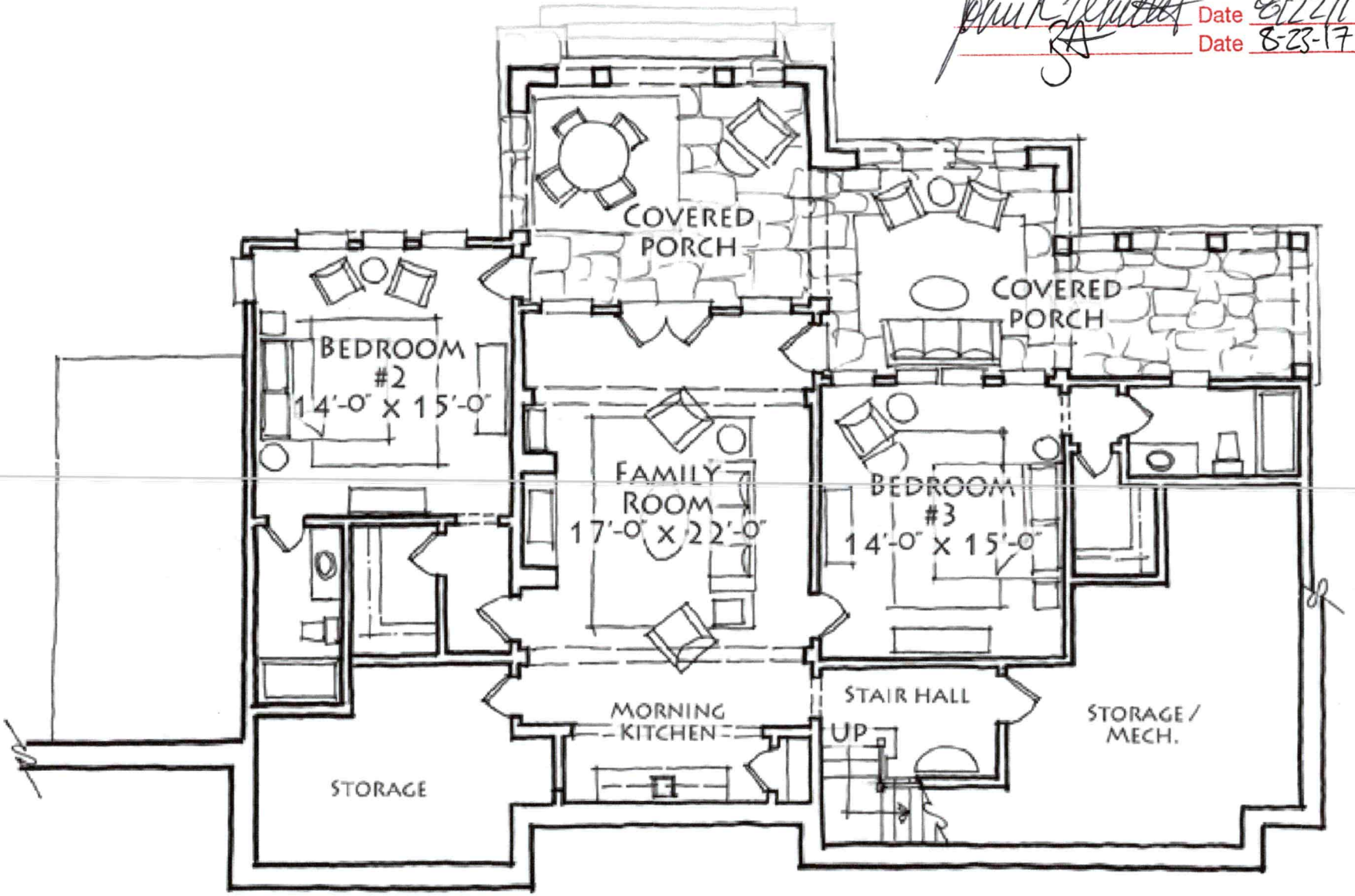
Acknowledgement of
Plans Submittal ONLY!
Date 8/22/17
Date 8-23-17



Acknowledgement of
Plans Submittal ONLY!

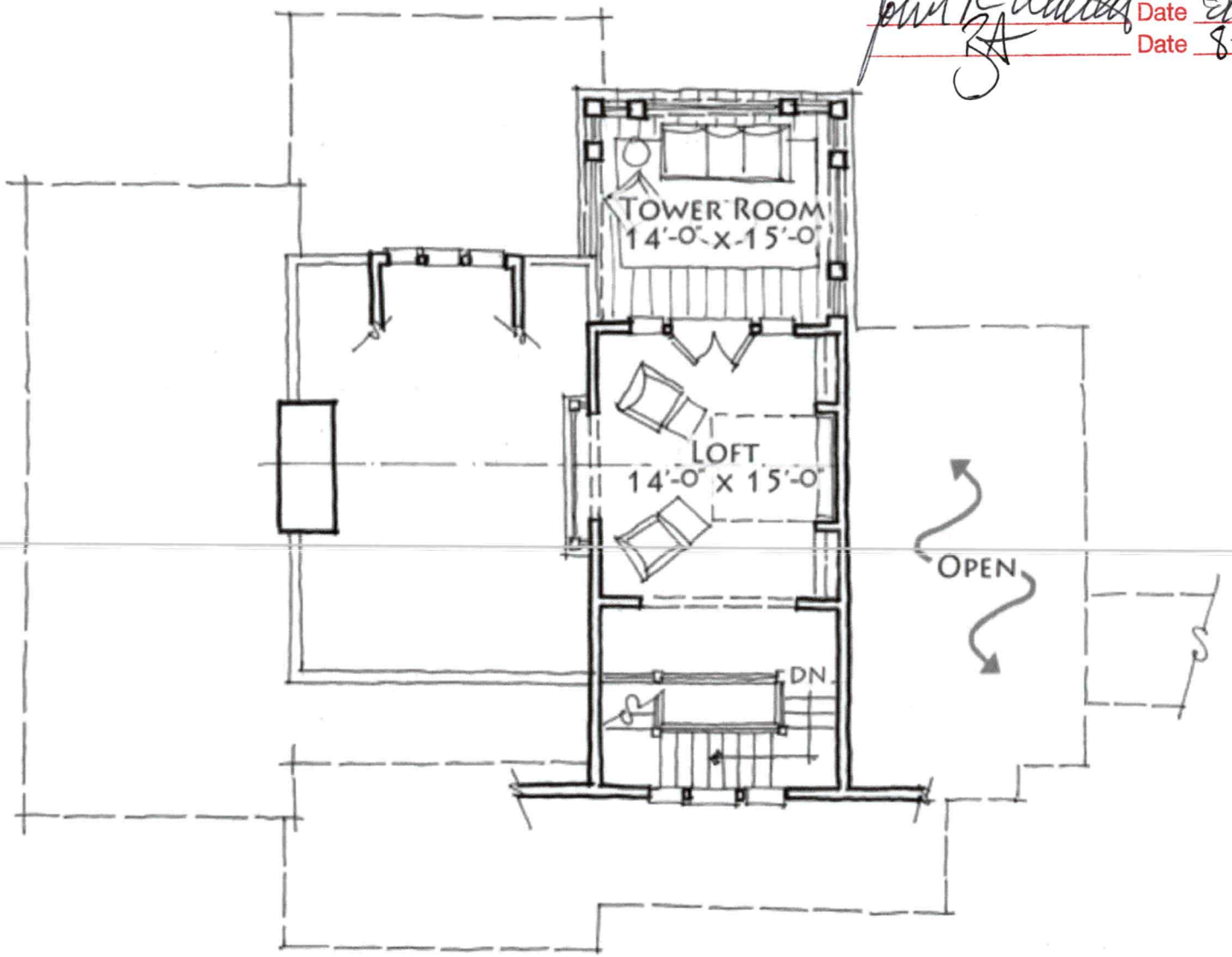
Date 8/22/17

Date 8-23-17



Acknowledgement of
Plans Submittal ONLY!

John C. Whitley Date 8/22/17
BA
Date 8-23-17



IREDELL COUNTY

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

APPLICATION NUMBER
228916
Issue Date: 07/25/2017

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4624269338.000	131 BUNKER WAY, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: JQ REVOC LIVING TR	Applicant: WHITLEY CONSTRUCTION L
Address: 4373 OLD SHELBY RD MOORESVILLE, NC 28602	Address: 127 HUNTERS POINTE LANE MOORESVILLE, NC 28117
Phone:	Phone: 704-658-9251

Use Requested	Zone Code
SFD REPLACING PERMIT 125053	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
1.861	35.00	35.00	15.00	15.00	CACL	AE

Remarks:

STAY 50 FT FROM LAKE

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	110075	TOTAL FEES:	$ 77.25