ICHD–ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP303473

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

PIN # 4624369559

APPLICANT/OWNER: Bluefield Builders | APPLICANT ADDRESS: 127 Promenade Dr Mooresville NC 28117

SITE ADDRESS: 169 Gainswood Dr Mooresville NC 28117 | PHONE: 704-746-3536 | ALT. PHONE

SITE DIRECTIONS: E Wilson Ave to Son Brawley School Rd, Lon Gainswood Dr, Lot on L | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: CL and T | SECTION: 6 | LOT # 508 | LOT AREA: 0.73 acres | DESIGN FLOW: 480GPD | L.T.A.R.: .3

Septic Tank	1000 (gal)	STB	760	Date	10-10-2020
Pump Tank	1000 (gal)	PT	363	Date	9-21-2020
Pump Make		Model		Serial #	
# Nitrification Fields	1	# Lines	4	Linear Ft	267'
Trench Width	24	Trench Bottom Depth(Low side)	32"	Gravel Depth	—

☒ New System ☐ Repair ☐ Expansion System Type: I II III ☒ V VI

System Description: LPPPBPS

Repair System Description: TS2 Drip Pretreated

Maintenance Agreement Required: ☒ YES ☐ NO ☐ GRAVITY ☒ PRESSURE

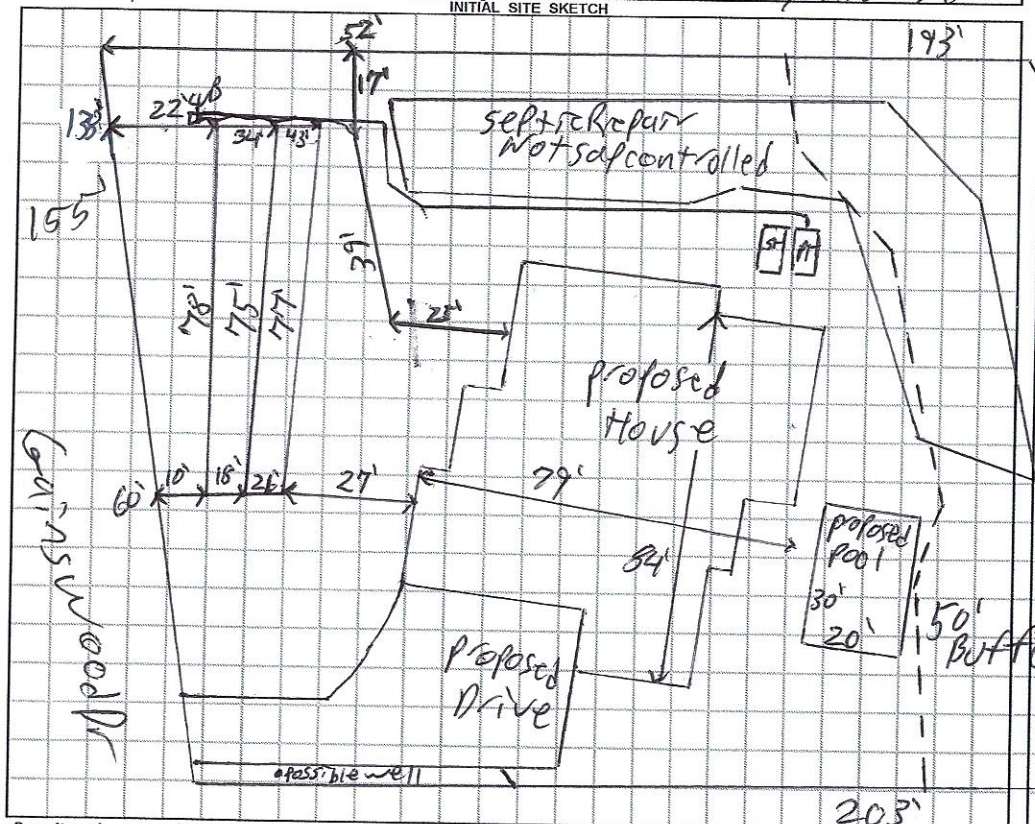
☒ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing

No. Bedrooms 4 | No. Persons 8 | No. Employees | ☒ Crawl Space | ☐ Basement w/o plumbing

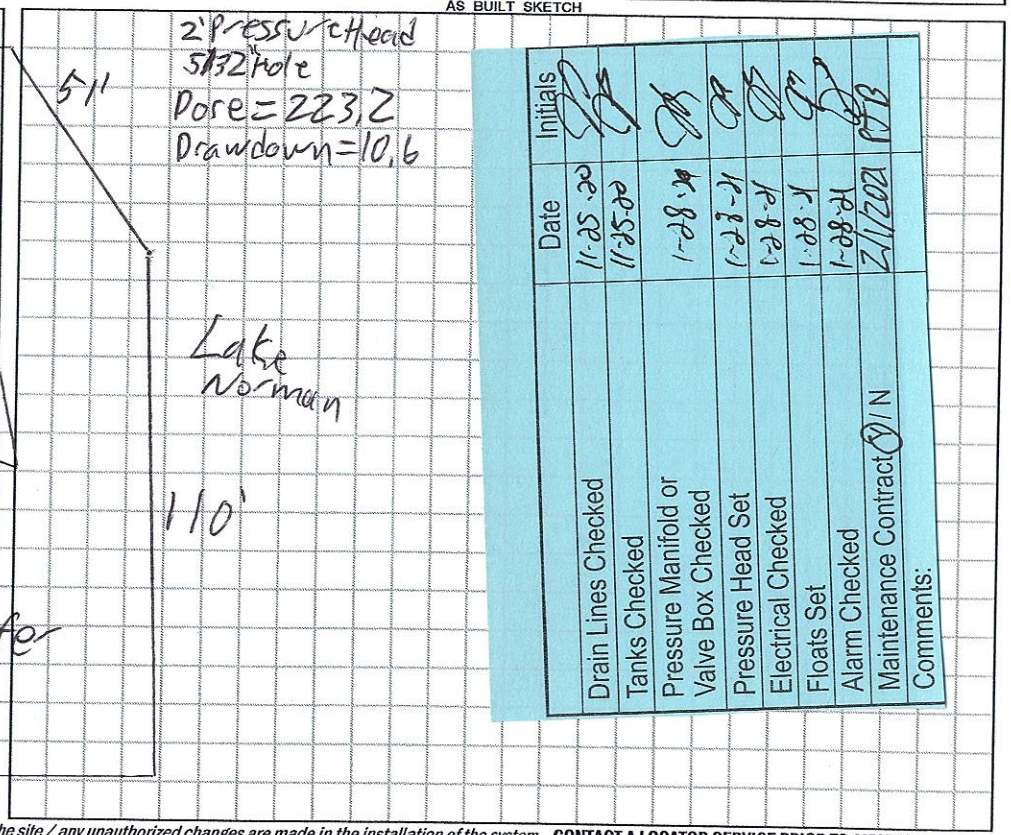
Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Install Lines on contour. Existing tank and drain Lines must be properly abandoned. All Property Lines, Property corners and 50' Buffer must be marked by a licensed surveyor during time of installation and Inspection

INITIAL SITE SKETCH



AS BUILT SKETCH



	Date	Initials
Drain Lines Checked	11-25-20	
Tanks Checked	11-25-20	
Pressure Manifold or Valve Box Checked	1-28-21	
Pressure Head Set	1-28-21	
Electrical Checked	1-28-21	
Floats Set	1-28-21	
Alarm Checked	1-28-21	
Maintenance Contract Y / N	2/1/2021	
Comments:		

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**

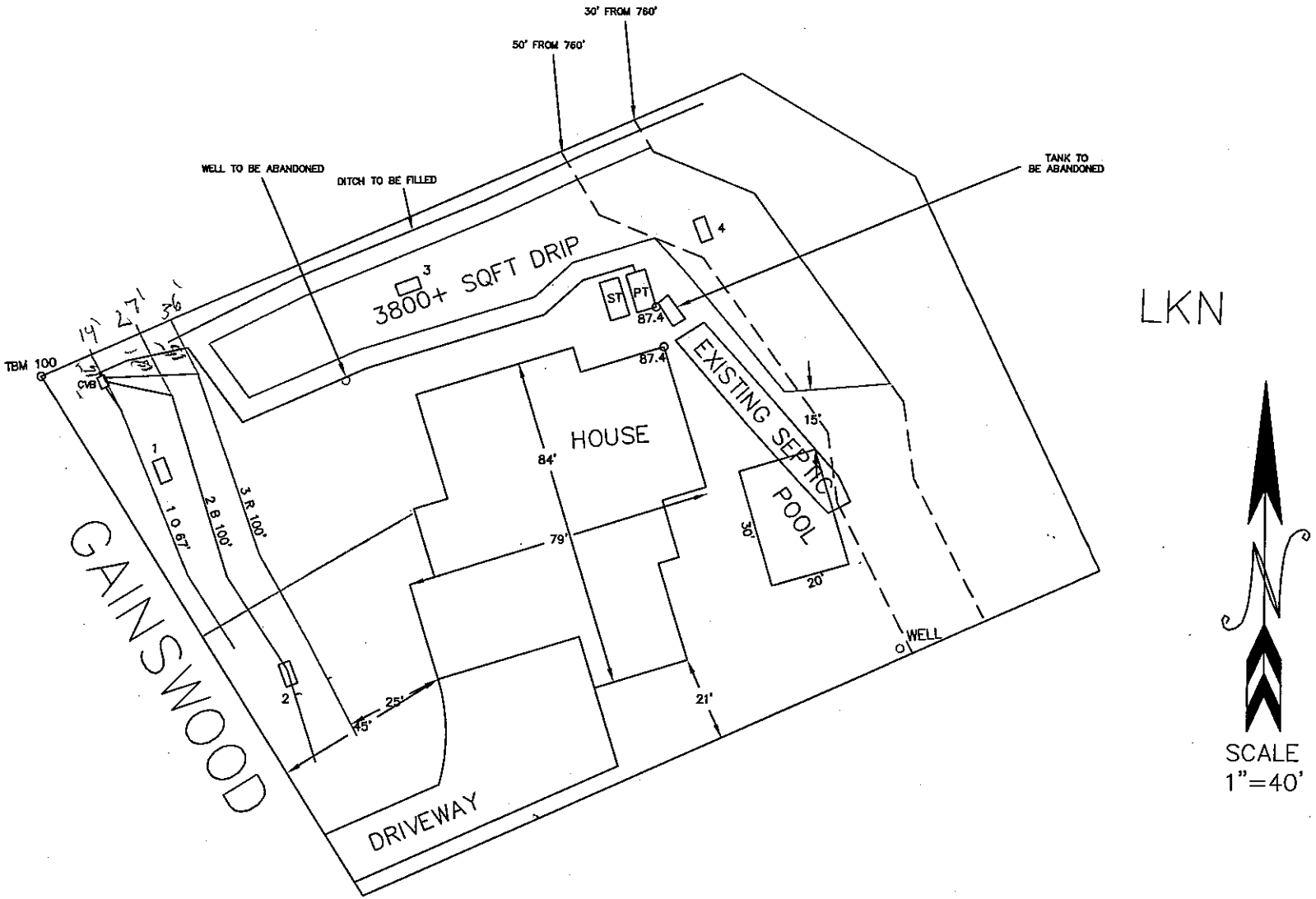
☐ IMPROVEMENT PERMIT *with plat valid without expiration.* ☒ IMPROVEMENT PERMIT *with site plan valid for 60 mos.* ☒ AUTHORIZATION TO CONSTRUCT *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: DHarden | Date: 9-15-20 | Installed by: Richard Abernathy Co LLC

IMPROVEMENT PERMIT by: Patrick Boyle III | Date: 9/14/2020 | OPERATION PERMIT by: Patrick Boyle III | Date: 2-15-2021

AUTHORIZATION TO CONSTRUCT by: Patrick Boyle III | Date: 9/14/2020 | Existing System Inspected by: | Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inpsector to confirm your inspection time.


30' FROM 760'
50' FROM 760'
WELL TO BE ABANDONED
DITCH TO BE FILLED
TANK TO BE ABANDONED
3800+ SQFT DRIP
ST
PT
87.4
87.4
TBM 100
CVB
EXISTING SEPTIC
HOUSE
84'
15'
POOL
30'
20'
79'
21'
WELL
1
1.0.67'
2.8.100'
3.R.100'
2
25'
75'
GAINSWOOD
DRIVEWAY
LKN
SCALE
1"=40'

Carolina Soil & Septic Consulting, PLLC

P.O. Box 1703, Mooresville, NC 28115

Phone: (704) 202-5791 Email: adrianpruett@yahoo.com

NC Licensed Soil Scientist, SC Professional Soil Classifier,
Certified Septic System Operator, Licensed Septic Installer,
Certified Septic Inspector

Design proposal for a PPBPS Septic System with low pressure distribution for a 4 bedroom single family residence on 169 Gainswood Rd.., Lot 508 CL&T, Section 6, Iredell County, North Carolina.

Contents: **Page**

Installer Information---------- 1

Design Information
- Install Specifications---------- 2
- Field Layout Specifications---------- 3
- System Tapsheet---------- 4

Site Plan/System Plan---------- 5

Dosing Calculations---------- 6

Soil Profile Descriptions---------- 7

APPROVED FEB 27 2020

PJB

December 10, 2019
Job Number: 19199
Design By: Ben Aldridge, REHS



INSTALLER INFORMATION:

- The permit should be read very carefully prior to submitting bid. 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.
- All tanks shall be properly back filled and compacted to prevent slump at a later date.
- The installer is responsible for final grades and returning that grade to original, with exception of added structural features.
- The supply trench shall be compacted to eliminate any 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 has no more than 1/4"fall in 10 feet with no high or low areas within. If high or low areas do exist after trench excavation, high areas should be removed rather than filling in low areas. Do not over excavate trenches! Any fine grading should be completed by hand with a rake and shovel, leaving no loose material.
- All pipe openings in the tanks shall be properly grouted. This also applies to the joints around the riser.
- Earth dams, constructed of relatively impervious material, shall be installed at the beginning and end of each lateral to prevent unwanted lateral water movement.
- Elevations at pin flag locations should be checked by the installer prior to beginning trenches to insure accuracy.
- Pump tank riser should be 6" above grade, control panel should be 12" above grade.
- If septic tank risers are used they should be a minimum of 6" above finished grade or within 6" of final grade if buried.
- **Design precludes use of foundation drains on the residence.**
- Backfill minimum of 6" of material (County Approved) over panels, rake trench walls, lime side walls, install trenches 36" wide.
- **System is specified as a PPBPS with Low Pressure Distribution.**
- **Repair is specified as a TS-2 DRIP IRRIGATION SYSTEM.**
- **If grading for a slab occures, do not create a greater than 2 ft. cut within 15 ft. of any septic component. Do not back fill over any septic component.**

APPROVED FEB 27 2020

PJB

LOW PRESSURE PPBPS SYSTEM
INSTALL SPECIFICATIONS

Owner/Applicant Information

Owner:	Alan Sica
Address:	147 Torrence Chapel Rd. Mooresville, NC 28117
Client:	Alan Sica
Phone Number:	215-595-8034

Location:	CL&T-6-508
County:	IREDELL

Source of Wastewater Flow:	4 Bedroom Single Family Residence
Estimated Gallons Per Day Flow:	480
System Flow:	25.01

Design Specifications

APPROVED FEB 27 2020

PJB

Drainfield Size:	267
Required Drainfield Size:	266.6666667
Loading Rate (gpd/ft.^{2}):	0.3
Depth of Gravel in Trench:	NA (PPBPS)
Gravel Size:	NA (PPBPS)
Trench Depth:	32 in.
Trench Width:	24 in.
Septic Tank Size:	1000
Pump Tank Size:	1000
Repair Trench Spacing:	24 in.
Repair Trench Depth:	6 in.
Estimated Supply Line Length:	162
Supply Line Diameter:	2 in. SCH 40 PVC
Supply Line Volume:	27.84
Dosing Volume:	219.60
Recommended Dosing Controls:	Float Control Switches as Required for Control Panel or County Approved Equivalents
Recommended Control Panel:	NEMA 4X Control Panel or County Approved Control Panel.
Pressure Head:	2 ft.
Friction Head:	2.85
Elevation Head:	17.00
Total Dynamic Head:	26.22
Threaded Union:	In Tank
Gate Valves:	1 in Tank 1 per lateral
Check Valves:	In Tank
Anti-Siphon Hole:	**NO**
Additional Comments:	Soil suitability performed by Carolina Soil & Septic Consulting, PLLC

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

CL&T-6-508
FIELD LAYOUT SPECIFICATIONS

LAYOUT FOR 4 BEDROOM HOME

December 10, 2019

LINE #	FLAG COLOR	IH	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM			3.90	100.00		
INSTR. 1		103.90				
HOUSE CNR			16.50	87.40		
P. TANK			16.50	87.40		
1	*ORANGE*		*5.10*	*98.80*	*74*	*67*
2	*BLUE*		*6.50*	*97.40*	*115*	*100*
3	*RED*		*8.00*	*95.90*	*114*	*100*
5	PINK				3800 SQFT	3800 SQFT
				Total	**303**	**267**

	LINE LENGTH	SYSTEM TYPE	SOIL LTAR GPD/FT2	TRENCH SYSTEM	DISTRIBUTION
** System*	*267*	*MOD.*	*0.300*	*PPBPS*	*LOW PRESSURE*
Repair	3800+ SQFT	INNOV.	0.150	TS-2 DRIP	LOW PRESSURE

Notes:
** TBM located top of ground at EIP at corner of lot (see site plan)
**All measures in feet
**Nitrification lines are demonstrated on contour via colored pin flags
**IH, and FS indicate rod readings

Comments: **Small ditch along left property line to be filled**

APPROVED FEB 27 2020
PJB

LOW PRESSURE PPBPS TAPSHEET
CL&T-6-508
SYSTEM

Line #	Color	Elevation	Length	Hole Size	Flow/hole	Trench Area	Number of Panels
1	*ORANGE*	*98.30*	*67*	0.156	**0.41**	201	15
2	*BLUE*	*97.80*	*100*	0.156	**0.41**	300	23
3	*RED*	*97.50*	*100*	0.156	**0.41**	300	23
							61 TOTAL
	total	**feet =**	**267**	**gal/min =**	**25.01**		
			Des. Flow	**480**			
			Pump Run=	**8.78**			
			soil LTAR	**0.3**			

.156 equals 5/32 inch hole

APPROVED FEB 27 2020

RJB

DOSING CALCULATIONS

Location CL&T-6
Lot No: 508

APPROVED FEB 27 2020
PJB

No. of Bedrooms	4	
Design Flow	480	$^{gal}/_{day}$
LTAR	0.300	$^{gal}/_{ft^2\,day}$
PPBPS? (YES OR NO)	YES	
Supply Line Length	160	ft.
Supply Line Volume	27.84	gal.
Required Feet of Line	266.6667	ft.
Amount of Line from Layout	267	ft.
Gallons per Minute	25.01	$^{gal}/_{min}$
Required Septic Tank Capacity	1000	gal.
Minimum Standard Tank Size	1000	
Panel Volume	3.6	gal.
# of Panels	61	
Dosing Volume	219.60	gal.

Note: Dosing Volume based on 100% of # of panels times 3.6 gal/panel

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

Tank Draw Down	10.5	*Generic Draw Down of 21 gal.per in.*
Pump Run Time	8.78	minutes
Elevation Head	17	ft.
Pressure Head	2	ft.
Friction Factor	1.78	ft./100 ft. *(From the interpolater.)*
Friction Head	2.85	ft.
Total Dynamic Head (+20%)	26.22	ft.

APPROVED FEB 2 7 2020
PJB

Sheet 1 OF 1
PROP. ID #: 4624369559
COUNTY: IREDELL

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

OWNER: LISA M PIERCE
ADDRESS: 3051 2ND ST NW HICKORY, N.C. 28601
PROPOSED FACILITY: SFR PROPOSED DESIGN FLOW (.1949): 480 GPD
LOCATION OF SITE: 169 GAINSWOOD DR.
WATER SUPPLY: PRIVATE PUBLIC X WELL SPRING OTHER:
EVAL. METHOD: A. BORING X PIT CUT **WASTEWATER TYPE** X SEWAGE INDUSTRIAL PROCESS MIXED

APPLICATION DATE:
DATE EVALUATED: 11/14/2019
PROPERTY SIZE: 0.73
PROPERTY RECORDED: YES

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/C OLOR	.1943 SOIL DEPTH	.1956 SAPROLITE CLASS	.1944 RESTR HORIZON	
P1	LS 10%	0-15	BR SCL WSBK	VFR SS SP SEXP	N/A	56"	N/A	N/A	0.3
		15-49	R C MSBK	FI S SP SEXP					
		49-56	R CL WSBK	FR SS SP SEXP					
P2	LS 10%	0-10	BR SCL WSBK	VFR SS SP SEXP	N/A	60"	FEW 51-60"	N/A	0.3
		10-51	R C MSBK	FI S SP SEXP					
		51-60	R CL WSBK	FR S SP SEXP					
P3	LS 10%	0-43	R C MABK	FI S SP SEXP	N/A	43"	FEW INC 21-43"	43"	0.15
		43-55	VAR CL/CL SAP	FR SS SP SEXP					
P4	LS 7%	0-58	R C M/WABK	FI S P SEXP	CHR2 29-58"	58"	N/A	29"	0.15

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM	OTHER FACTORS (.1946): N/A
AVAILABLE SPACE (.1945)	PS	PS	SITE CLASSIFICATION (.1948): PS
SYSTEM TYPE(S)	LP PPBPS	DRIP IRRIGATION	EVALUATED BY: BEN ALDRIDGE
SITE LTAR	0.3	0.15	OTHER(S) PRESENT: JACOB CONRAD, DAVID BEANE
COMMENTS			

LICENSED SOIL SCIENTIST ADRIAN L. PRATT 1314 STATE OF NORTH CAROLINA

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

Sheet 1 of 1
PROPERTY ID #: 7624369539
COUNTY: Iredell

SOIL/SITE EVALUATION
***for* ON-SITE WASTEWATER SYSTEM** 2pMto
(Complete all fields in full)

OWNER: Alan Sica
ADDRESS: 147 Torrence Chapel Rd Mooresville NC 28117
PROPOSED FACILITY: New single fam PROPOSED DESIGN FLOW (.1949): 480GPD
LOCATION OF SITE: 169 Gainswood Dr. Mooresville NC 28117

APPLICATION DATE 1/31/202
DATE EVALUATED: 2/18/2020
PROPERTY SIZE: 0.43 acres
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)		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	SS	0-14	SCL sbk	Fr ss sp soxp	few YB mottles	54"	few Litho inclusions	—	PS, 3
		14-48	C sbk	Fr ss sp soxp					
		48-57	CL sbk	Fr ss sp soxp					
2	SS	0-8	SCL sbk	Fr ss sp soxp	—	58"	few Litho inclusions	—	PS, 3
		8-50	C sbk	Fr ss sp soxp					
		50-58	CL sbk	Fr ss sp soxp					
3	SS	0-43	CL abk	Fr ss sp soxp	YB mott. scattered throughout	43"	CL sap at 43"	CL sap at 43" manganese common	Drip 15 at 43"
		43-57	CL sap	VFr					
4	SS	0-57	C sbk/abk	Fr ss sp soxp	Chroma 2 sap at 29" 54.8%	57"	—	Chroma 2 sap at 29"	PS, 15 Drip tou at 29

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	267'	3200
System Type(s)	LPP BPS	TSE Drip
Site LTAR	.3	.15 Drip

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: Pat Cole
OTHER(S) PRESENT: Bena

COMMENTS: Slowly pits had been open for awhile

Septic Redraw

RECEIVED JUL 2 1 2020

AP-303473
$320.00

12040

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
(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: Bluefield Builders Address: 127 Promenade Dr. Zip: 28117
Applicant Email: dhardy@arhomes.com Phone: 704-7463536 Alt. Phone: _____
Owner Name: Alan Sica Address: 147 Torrence Chapel Rd Zip: 28117
Owner Email: Sca4707@gmail.com Phone: 215-595-8031 Alt. Phone: _____

Property Information:

Street Address: 169 Gainswood dr Mooresville NC 28117
Subdivision Name: Crescent Land + Timber Section/Phase: 1e Lot Number: 508
Driving Directions: Brawley School Rd → left on Gainswood → 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

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

Describe Problem: _____

CHECK FOUNDATION TYPE
(X) 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: _____

(X) 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 (X) 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: _____ 7/21/20
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) 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, Alan Sica, am the legal owner(s) of the property located at 169 Grainwood Dr. Mooresville NC 28117, identified as PIN (Parcel Identification Number) 4662436955 9.000, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) Bluefield Builders Tom Arndt | Dawn Hardy 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.

Alan P Sica 2/28/20 — Signature of Owner(s) — Date

D Hardy 2/28/20 — 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

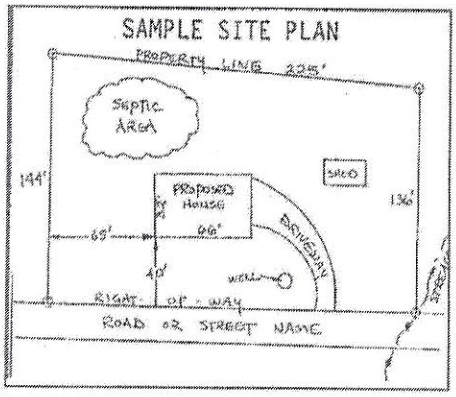
Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

IREDELL COUNTY HEALTH DEPARTMENT

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:

- (X) Property Line measurements are clearly identified
- (X) All proposed structures are indicated
- (X) Front and side setbacks from property line
- (X) Preferred driveway location and well location
- (X) Area you prefer your septic system to be placed
- (X) 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

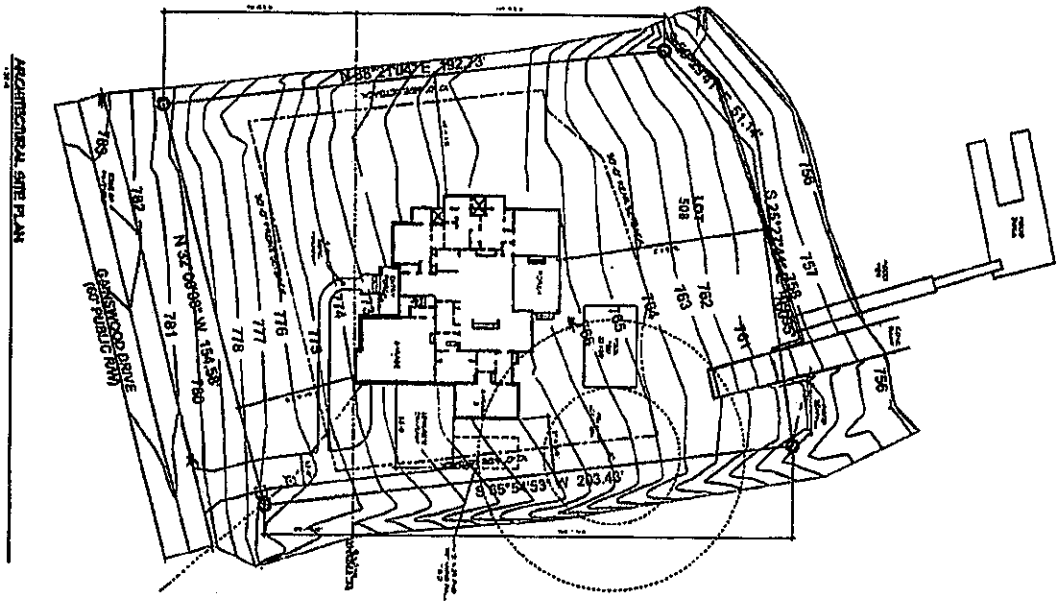
USE THIS SPACE TO DRAW YOUR SITE PLAN

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

Signature: _____ _____

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



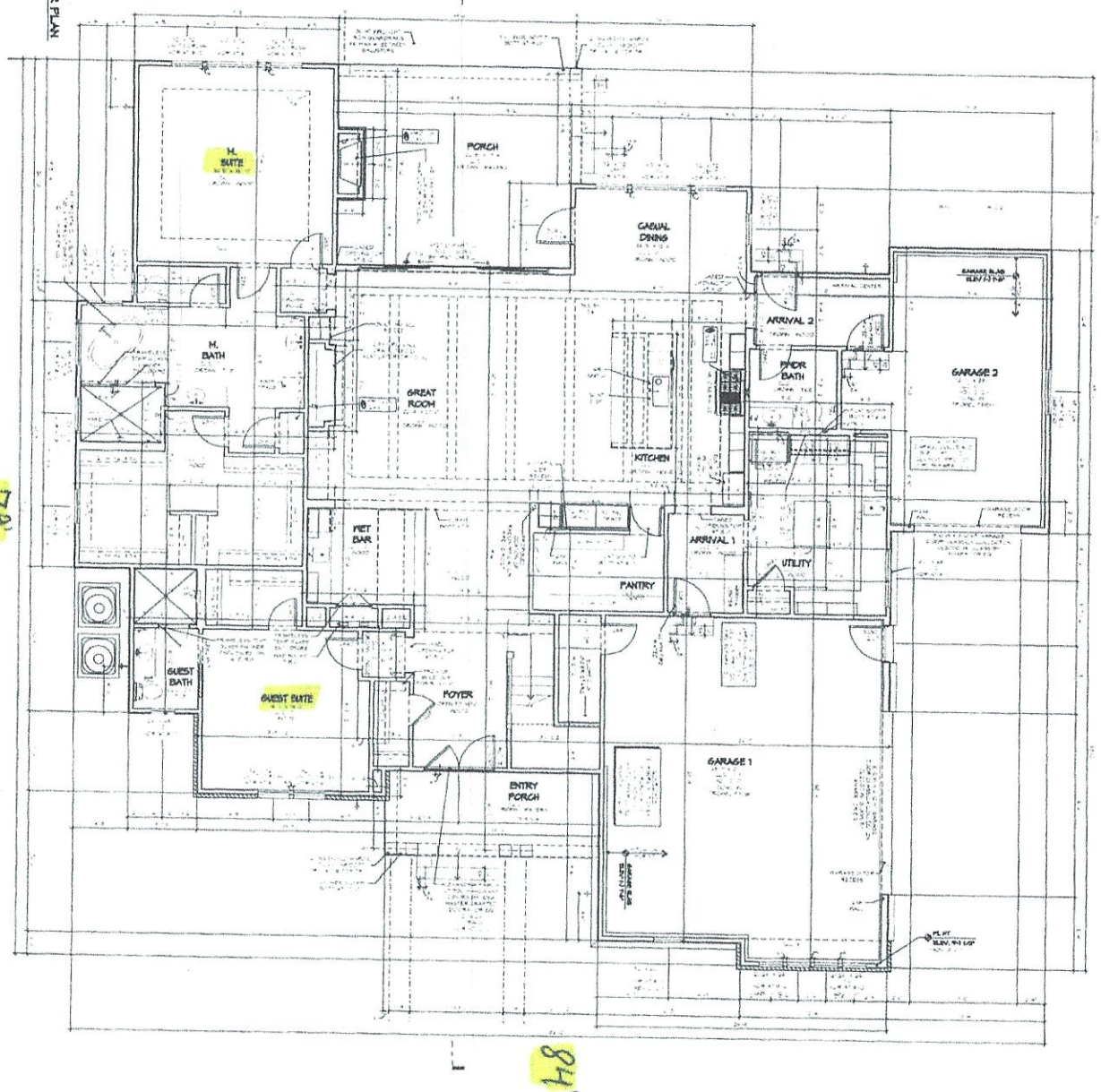




	SITE PLAN	A Custom Plan for The Sica Residence			RHOMES
	FINAL SET	10 Deerfield Builders, LLC	Lot 508, Garnwood Drive Mooresville, NC		

Acknowledgement Of
Plans Submittal ONL
Patrick J Boyle III Date 3/19/2020
Alan P. Sica Date 3/19/2020

MAIN LEVEL FLOOR PLAN



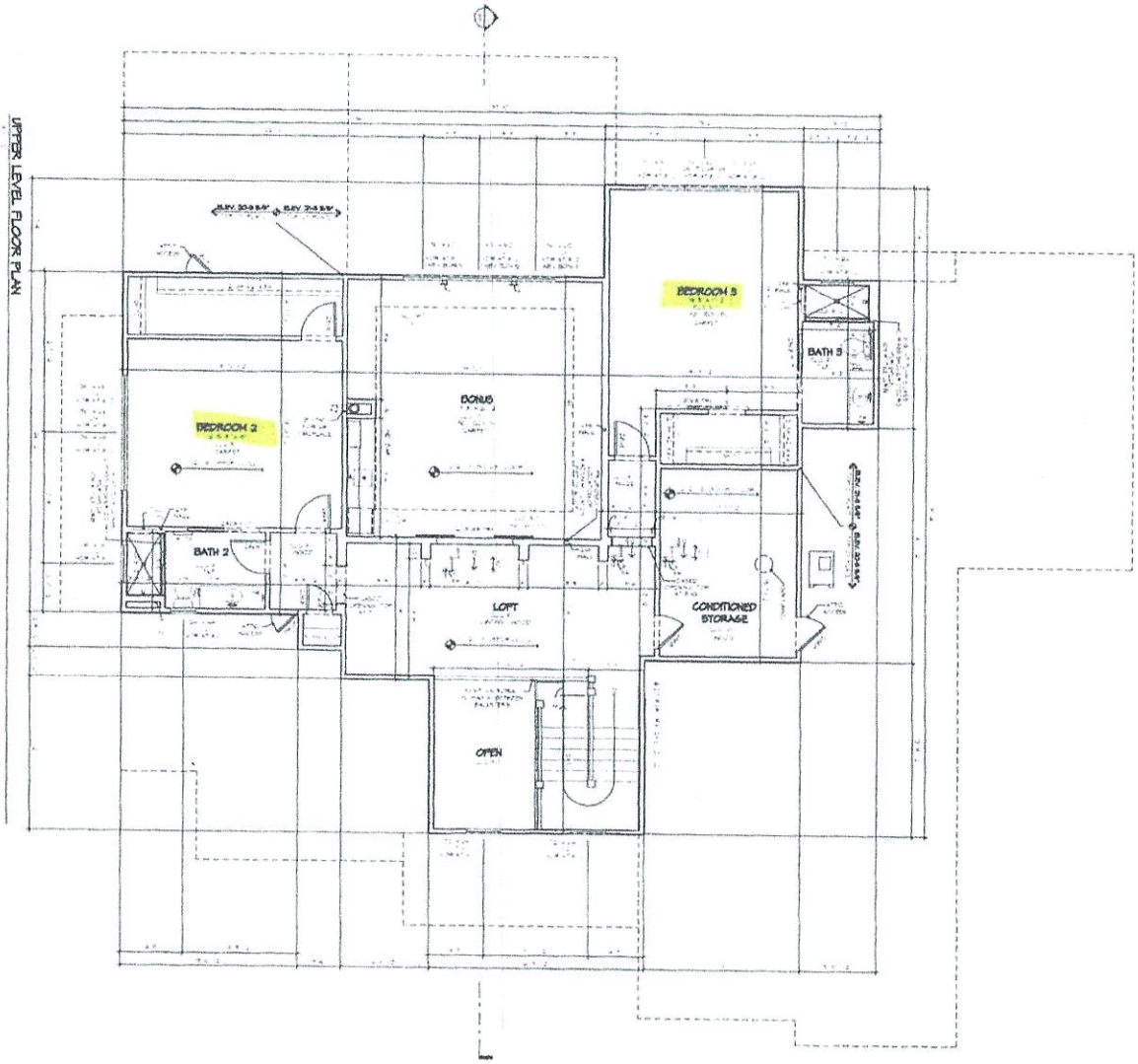
79

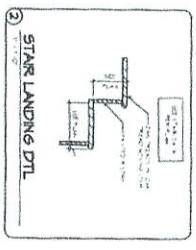
48

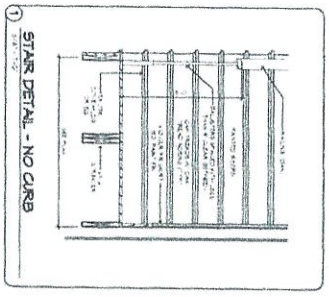
MAIN LEVEL FLOOR PLAN	A Custom Plan For The Sica Residence	RHOMES
FINAL SET	40 Bluefield Builders, LLC — Lot 508 Glenwood Drive, Mooresville, NC	

Acknowledgment Of
Plans Submittal ONL
Patricia Bglett Date 3/19/2020
Alan L Sica Date 3/19/20

UPPER LEVEL FLOOR PLAN













G5	UPPER LEVEL FLOOR PLAN FINAL SET	A Custom Plan for The Sica Residence			RHOMES

IREDELL COUNTY · NC

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

APPLICATION NUMBER
303473 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4624369559.000	169 GAINSWOOD DR	Iredell County

Owner Information	Applicant Information
Name: SICA ALAN P+RENEE	Name: CAROLINA SOIL SEPTIC CONSULTING, PLLC
Address:	Address: 162 WEST B ST KANNAPOLIS, NC 28081
Phone:	Phone: (704)202-5791

Use Requested	Zone Code
Single Family Dwelling	R-20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.73	35	50	15	15	WSIV-CA Catawba/Lake Norman	YES

Remarks

SFD

Lake Lots: Must meet both the 50-foot setback from the 760' contour line and the 35-foot setback from the rear property line for any structure.

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.

Date: 12/17/2019

Signature of Owner/Contractor

Permit Number	303473	TOTAL FEES:	$77.25