IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 223586

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

APPLICANT: Frank Tinnelli | APPLICANT ADDRESS: 162 Hopkinton Drive Mooresville, NC 28117 | PIN # 4624-47-8027

SITE ADDRESS: 186 Greyfriars Rd Mooresville, NC 28117 | PHONE: 516-859-8006 | ALT. PHONE:

SITE DIRECTIONS: BSR towards Lake Norman → L on Torrence Chapel Rd → R on Greyfriars → Site on R (Lake front lot)

SUBDIVISION: CL+T | SECTION: 6 | LOT # 531 | LOT AREA: 0.81 acres | DESIGN FLOW: 480 GPD | L.T.A.R.: 0.30

Septic Tank	1000 (gal)	STB	794	Date	1-29-18
Pump Tank	1000 (gal)	PT	27	Date	2-22-18
Pump Make	Liberty	Model	290 HV 314 HP	Serial #	
# Nitrification Fields	1	# Lines	4	Linear Ft:	267'
Trench Width	24"	Max. Trench Bottom Depth	36" [high side]	Gravel Depth	—

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

System Description: 50% Reduction ~ LP PPBFS

Repair System Description: 50% Reduction + TS II Drip (partial)

Maintenance Agreement Required: ☒ YES ☐ NO

☐ GRAVITY ☒ PRESSURE

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

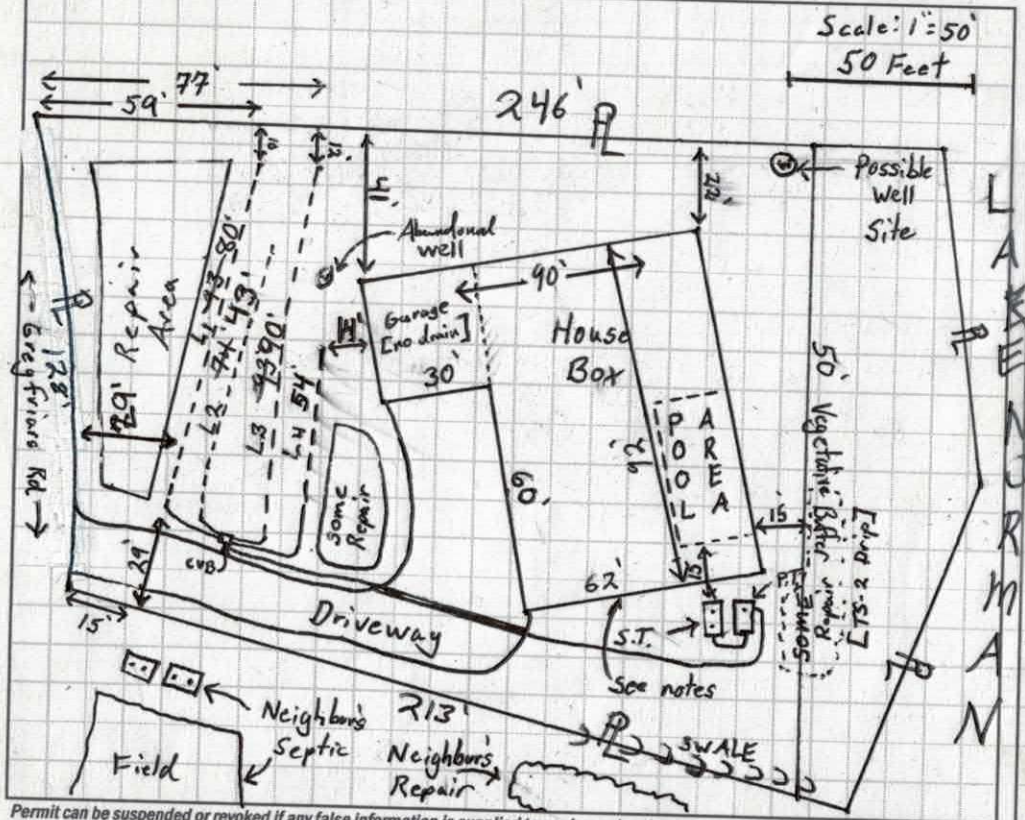
No. Bedrooms: 4 | No. Persons: 8 | No. Employees:

Water Supply: ☒ Private ☐ Public ☐ Community

☐ Basement w/o plumbing

Comments / Conditions: Though 314 lf of line was laid out, only 267 lf need be installed. The remainder of the area shall be designated as repair. Septic + Pump tanks must be 15' from the foundation of the house if foundation drains are installed (due to side slope). If the driveway can be shifted towards the R and the drainfield lines L1, L2 + L3 lengthened to achieve 267 l.f., then only 3 lines need be installed. Remainder set aside as repair.

INITIAL SITE SKETCH



AS BUILT SKETCH

5132 hole used

	Date	Initials
Drain Lines Checked	4-6-18	KW
Tanks Checked	4-6-18	KW
Pressure Manifold or Valve Box Checked	4-6-18	KW
Pressure Head Set		
Electrical Checked		
Floats Set		
Alarm Checked		
Maintenance Contract (Y) N		
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: [signature] Date: 3/10/17

IMPROVEMENT PERMIT by: Tom Shuck Date: 3-9-17

AUTHORIZATION TO CONSTRUCT by: Tom Shuck Date: 3-9-17

Installed by: R+H

OPERATION PERMIT by: Maria Dotson RS Date: 5/4/18

Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Permit) - PINK

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

Sheet ___ of ___
PROPERTY ID #: _____
COUNTY: _____

* have not marked
* Lot not marked
* well abandoned

* Needs to Mark 50' Ag Setback 760'

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

(Complete all fields in full)

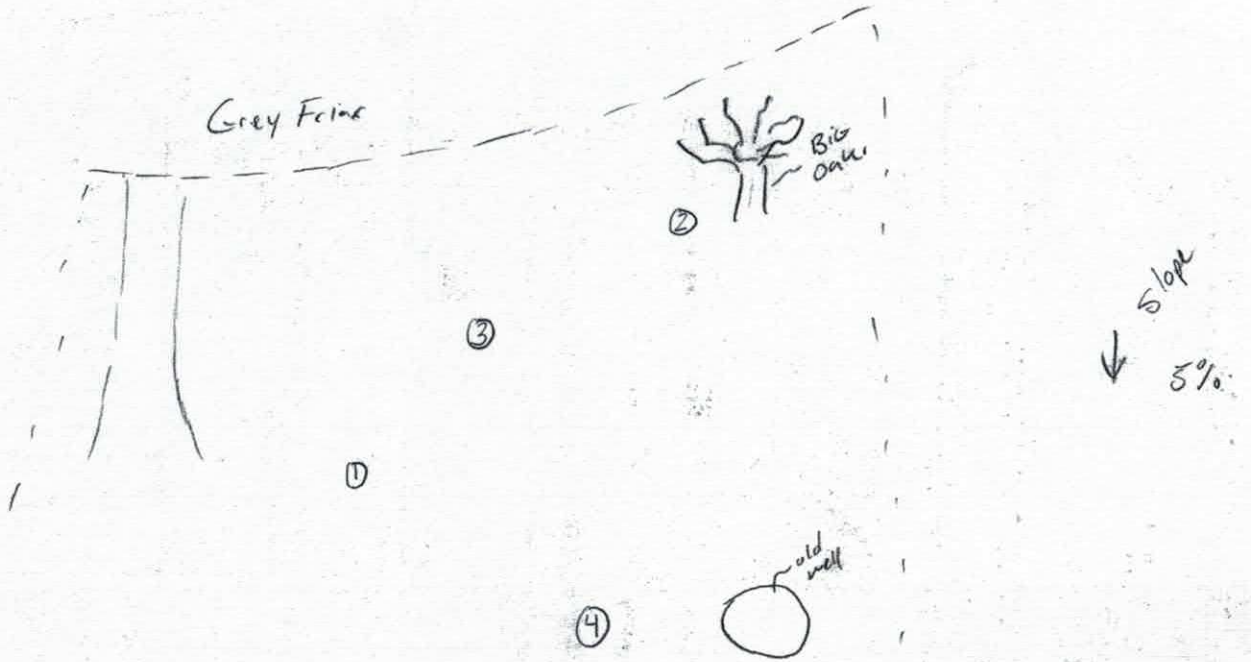
OWNER: _____ APPLICATION DATE _____
ADDRESS: _____ DATE EVALUATED: _____
PROPOSED FACILITY: House PROPOSED DESIGN FLOW (.1949): 480' PROPERTY SIZE: _____
LOCATION OF SITE: 186 Grey Foine Rd Mocksville PROPERTY RECORDED: _____
WATER SUPPLY: ☑ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .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	S/P Side	0-15	SCL WSBK	SSSp FR SEXP	2.5YR3/4	48	6&P Inch	Mica Schist	P.S. -3 LTAR
		15-42	C SBK	SSSp FI	2.5YR4/6				
		42-48	CL B to C WSBK	SSSP FI	2.5YR 4/8				
2	S/P Side	0-22	SCL WSBK	SS Sp FR SEXP	2.5YR5/4	Clay at 37. 48	10YR6/6 Sap.	10YR 5/4 @ 42.	.25 PS. LTAR possible Sap. Hard Use observed to be Redox Mixed
		22-34	C SBK	SS Sp FI	2.5YR4/8				
		34-48	C MSBK	SS Sp FI	2.5YR4/5				
3	S/P Side	0-14	SCL WSBK	SS Sp FR SEXP	2.5YR3/4	49	Sap Mix	Root @ 20 2.5YR 4/6 10YR6/6 Sap Root @ 46 2.5YR4/6	.25 PS LTAR
		14-34	C SBK	SS SP FI	2.5YR4/6				
		34-44	C SBK	SS Sp FI	2.5YR4/6				
		44-49	CL B to C WSBK						
4	S. dr. S/P	0-8	SCL WSBK	SS Sp FR SEXP		48	—	—	PS .3 LTAP
		8-40	C SBK	SS Sp FI					
		40-48	CL B to C WSBK	SS Sp FI					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: _____
OTHER(S) PRESENT: _____

COMMENTS: _____


Grey Feine
Big Oak
2
slope
5%
3
1
old well
4

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

Sheet ___ of ___
PROPERTY ID #: ___
COUNTY: Iredell

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

OWNER: Frank Tinelli
ADDRESS: 162 Hopkinton Dr. Mooresville
PROPOSED FACILITY: Church PROPOSED DESIGN FLOW (.1949): ___
LOCATION OF SITE: 186 Grey Friars Rd
APPLICATION DATE: 12-6-16
DATE EVALUATED: 2-22-17
PROPERTY SIZE: 0.81 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) .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	4% LSS Prim	0-18	SCL V.W. SBK	Sl. Firm, SS, Sp, Scap	–	48	–	–	0.3 PS
		18-32	clay W. SBK	Sl. Firm, SS, Sp, Scap					
		32-48	clay Loam some Cgp W. SBK	Sl. Friable, SS, Sp, Scap					
2	7% LSS Prim	0-13	SCL V.W. SBK	Sl. Firm, SS, Sp, Scap	–	48	–	–	0.3 PS
		13-25	clay W. SBK some mica	Sl. Firm, SS, Sp, Scap					
		25-48	clay Loam Abundant Saprolite w/SBK	Friable, SS, Sp, Scap					
3	6% Toe Slope Repair Lower (Near buffer)	0-18	SCL V.W. SBK	Sl. Firm, SS, Sp, Scap	–	48	–	–	0.3 PS
		18-30	clay W. SBK	Sl. Firm, SS, Sp, Scap					
		30-48	clay Loam W. SBK	Friable, SS, Sp, Scap					
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	267+	200 + Drip
System Type(s)	PPBPS	PPBPS + Drip
Site LTAR	0.3	0.3

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Tom Shuck
OTHER(S) PRESENT: ___

COMMENTS: ___

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	SEXP (Slightly Expansive)	G (Single Grain)
CV (Convex Slope)		LS (Loamy Sand)			EXP (Expansive)	M (Massive)
D (Drainage Way)						CR (Crumb)
DS (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
FP (Flood Plain)		L (Loam)				SBK (Subangular Blocky)
FS (Foot Slope)						ABK (Angular Blocky)
H (Head Slope)	III	Si (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
L (Linear Slope)		SiCL (Silty Clay Loam)				PR (Prismatic)
N (Nose Slope)		CL (Clay Loam)				
R (Ridge)		SCL (Sandy Clay Loam)			MOIST	WET
S (Shoulder Slope)		SiL (Silt Loam)				
T (Terrace)					VFR (Very Friable)	NS (Non-sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FR (Friable)	SS (Slightly Sticky)
		SiC (Silty Clay)			FI (Firm)	S (Sticky)
		C (Clay)			VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
		O (Organic)	None	None	EFI (Extremely Firm)	NP (Non-plastic)
						SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

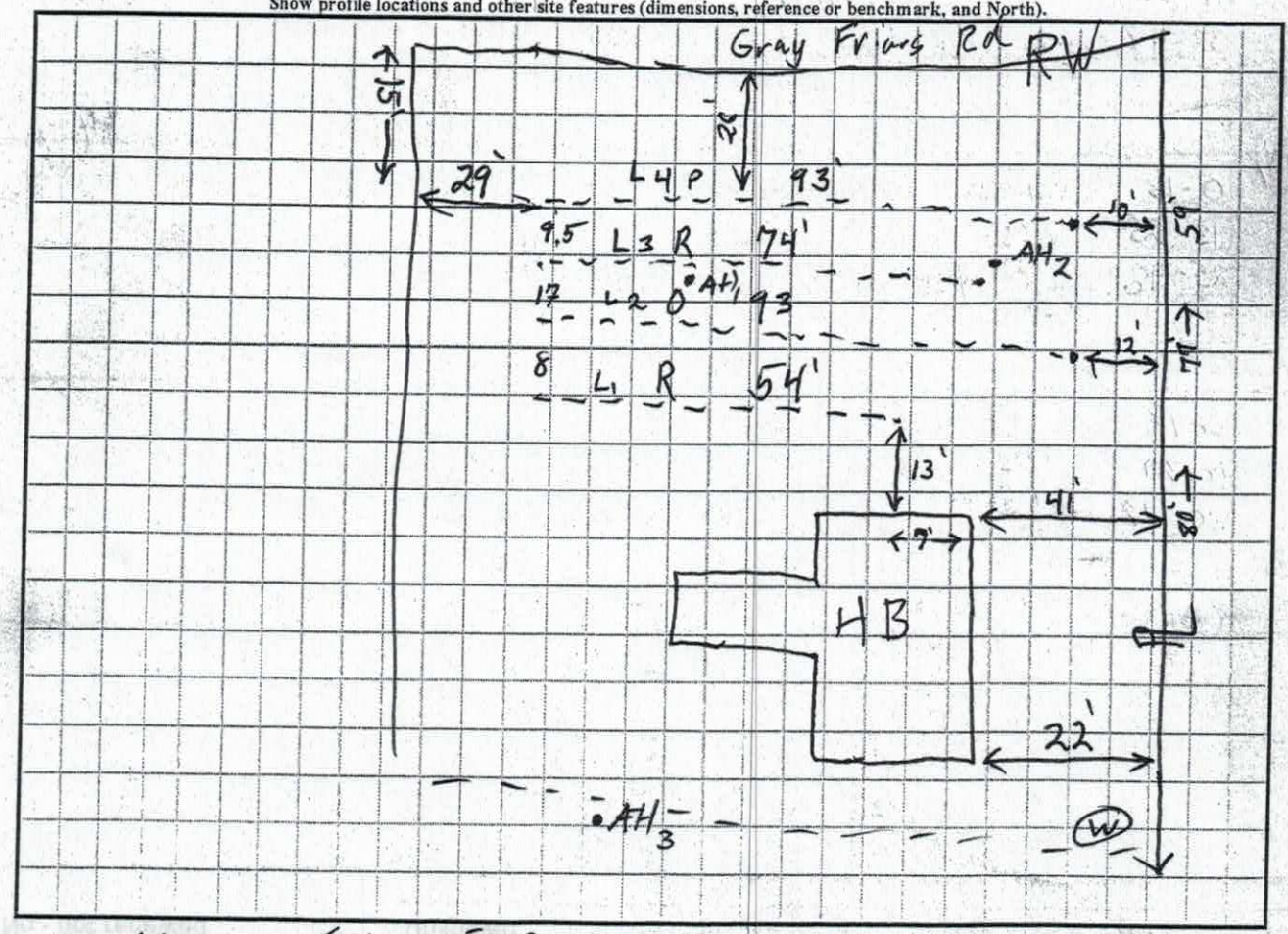
NOTES

HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
CLASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.

Long-term Acceptance Rate (LTAR): gal/day/ft^2

Show profile locations and other site features (dimensions, reference or benchmark, and North).



L1 8.1 R Top L4 5.89 P

L2 7.89 O

L3 6.69 R

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

(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)

1. APPLICATION FOR: ___ Improvement Permit (X) Authorization To Construct ___ Existing System Inspection

2. 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 check ( ) beside whichever is submitted if applicable ___ Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. Applicant Information: 162 Hopkinton Dr

Frank Tinell	~~186 Grey Farms Rd~~	516-851-8006	
Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
	Mooresville NC 28117		
Owner Name	Mailing Address	Home Phone #	Alternate Phone #

4. Property Information:

186 Grey Farms Rd		
Street Address	Subdivision Name	Section/Phase and Lot Number

Mooresville NC 28117

Driving Directions: _____

5. RESIDENTIAL Site Development Information: *(Check or Complete ALL that apply)*

(X) New, Single Family Residence — Maximum Number of Bedrooms 4 — ( ) Crawl Space Foundation?
( ) New, Multi-Family Residence — Maximum Number of Occupants ___ — (X) Concrete Slab Foundation?
( ) Expansion of Existing Septic System — If Expansion, Current Number of Bedrooms ___ — ( ) Basement w/Plumbing?
(X) Repair To Failing Septic System due to _____ — ( ) Basement w/out Plumbing?
( ) Other _____

IF Non-Residential Site Development: Type of Business _____
Square Footage of Building _____
Maximum Number of Employees _____
Maximum Number of Seats _____

6. Proposed Water Supply:

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

7. Desired Septic System Type: *(You may rank in order of preference, if any)* ( ) EXISTING SYSTEM installed _____ *Year*

( ) Alternative (X) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other _____

8. Please Answer The Following ( ) Yes (X) No Does the site contain any jurisdictional wetlands?
   To The Best of Your Ability: ( ) Yes (X) No Is any non-domestic sewage (i.e. industry) 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.

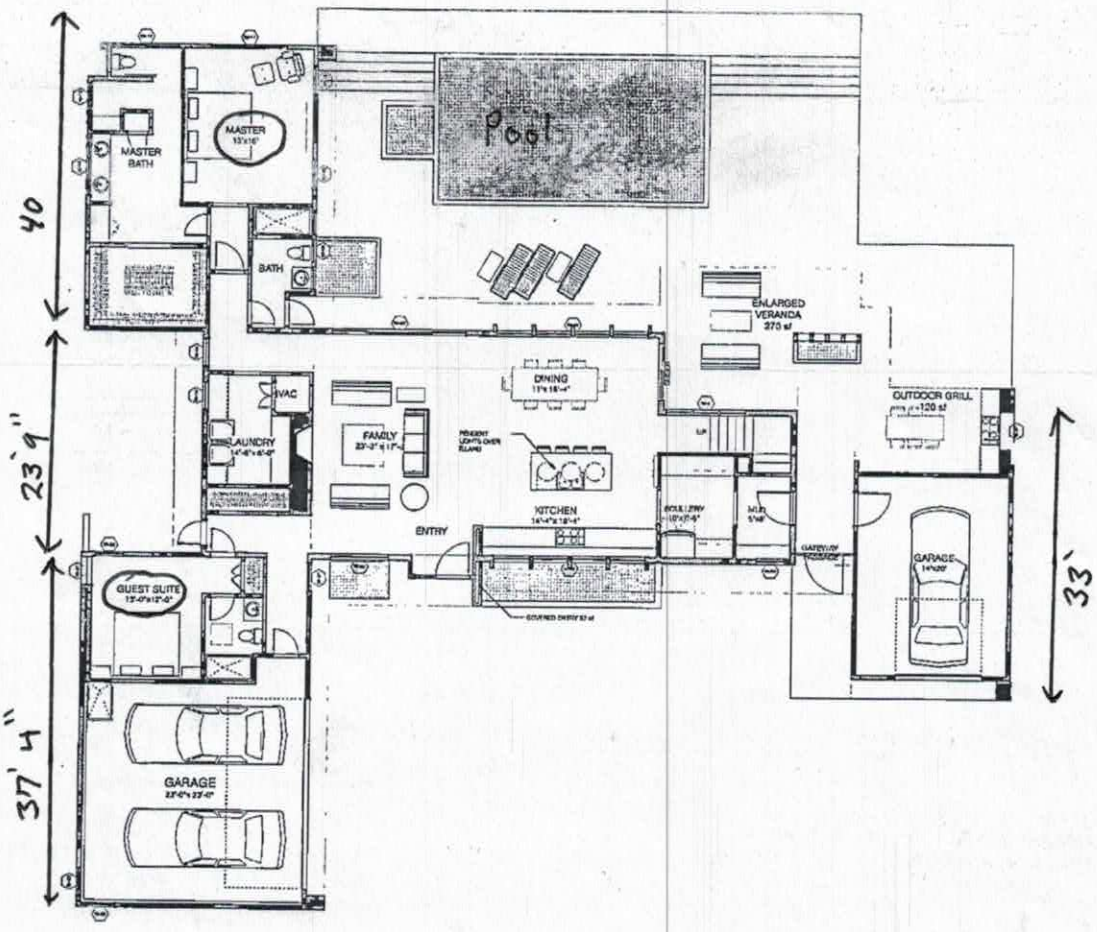
9. Signature: F P Tinell — 12/6/16

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

186GREYFRIARSROAD

Acknowledgement
Plans Submittal ONLY!
Date 3-9-17
Date 3/6/16

PROPOSED AREAS	
Heated	
Main Level	2426
Upper Level	1314
Proposed Heated Total	**3739**
Unheated	
Two Car Garage	583
Single Car Garage	370
Over Look Balcony	261
Proposed Unheated Total	**1214**



Proposed 1st Floor Plan

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186 Greyfriars Rd
Mooresville, NC 28117

Project #: 15_115

Date: 11.16.2016	Revised Plan
Date: 11.18.2016	Revised Plan
Date: 11.29.2016	Revised Plan
Date: 12.02.2016	Septic Application

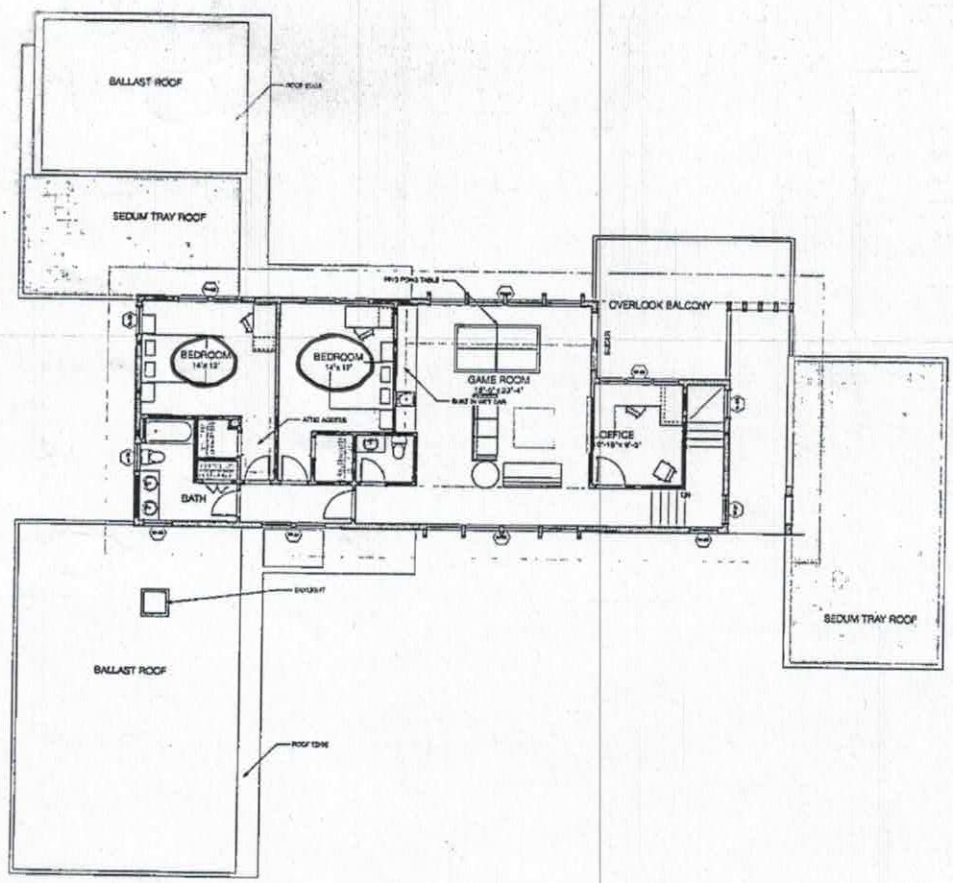
1523 Brandon Ave, Suite 120
Charlotte NC 28204
704 408.8990
www.cluckdesign.com

cluck
DESIGN COLLABORATIVE

186GREYFRIARSROAD

Acknowledgement
Plans Submittal ONLY!
Sam Shue Date 3/9/17
Date 12/6/16

PROPOSED AREAS	
Heated	
Main Level	2425
Upper Level	1314
Proposed Heated Total	**3739**
Unheated	
Two Car Garage	553
Single Car Garage	379
Over Look Balcony	281
Proposed Unheated Total	**1214**



Proposed 2nd Floor Plan

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186 Greyfriars Rd
Mooresville, NC 28117

Project #: 15_115

Date: 11.16.2016	Revised Plan
Date: 11.18.2016	Revised Plan
Date: 11.29.2016	Revised Plan
Date: 12.02.2016	Septic Application

1523 Elizabeth Ave, Suite 120
Charlotte NC 28204
704 405-5060
www.cluckdesign.com

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DESIGN COLLABORATIVE

IREDELL COUNTY

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

APPLICATION NUMBER
223586
Issue Date: 12/06/2016

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4624478027.000	186 GREYFRIARS ROAD, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: TINELLI FRANK	Applicant: TINELLI FRANK P
Address: 90 GARDINERS AVE LEVITTOWN, NY 11756	Address: 162 HOPKINTON DR MOORESVILLE, NC 28117
Phone:	Phone:

Use Requested	Zone Code
	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.810	35.00	50.00	15.00	15.00	CACL	AE

Remarks:

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	87447	TOTAL FEES:	$ 77.25