# IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 227729

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

PIN # 4625198271

APPLICANT/OWNER: Kenneth Bealer Homes APPLICANT ADDRESS: 1454 Brawley School Rd Mooresville, NC

SITE ADDRESS: 141 Cedar Bluff Ln Mooresville, NC 28117 PHONE: 7046622-6400 ALT. PHONE 7046229728

SITE DIRECTIONS: Brawley School Rd TR Bay Harbour TR Shipyard Pt TL Cedar Bluff to end SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: The Harbour SECTION: 6 LOT # 37 LOT AREA: 1 Ac. DESIGN FLOW: 600 gpd L.T.A.R.: .3

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1500 | (gal) | STB | 964 | Date | 5-24-20 | ☒ New System | ☐ Repair | ☐ Expansion | System Type: I II III (IV) V VI | |
| Pump Tank | 1500 | (gal) | PT | 389 | Date | 11-2-19 | System Description: | | | LPPBPS | |
| Pump Make | Goulds | | Model | WE10J24 | Serial # | | Repair System Description: | | | TSII LPPBPS | |
| # Nitrification Fields | 1 | | # Lines | 6 | Linear Ft: | 334 | Maintenance Agreement Required: | ☒ YES | ☐ NO | | |
| Trench Width | min. 24" | | Trench Bottom Depth(Low side) | 34" | Gravel Depth | N/A | | ☐ GRAVITY | ☒ PRESSURE | | |

☒ Residence No. Bedrooms 5
☐ Business No. Persons 10
☐ Other No. Employees
☐ Slab ☐ Crawl Space
☒ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☒ Community

Comments / Conditions: Divert storm/max surface water away from Septic System. TSII pretreatment for repair therefore setback to drain is 15ft.

Note: Run water line & other utilities under driveway on Opposite Side of Septic Supply line. * Preconstruction meeting required.

INITIAL SITE SKETCH

See attached, approved Septic Site plan drawing by Paul Penninger.

AS BUILT SKETCH

Dose 200gal 00 once, drill 5/32" hole
6/30/2020 Meeting with Installer & Builder MS

7/1/2020: Tanks have been installed but were covered to prevent floating. No filter in st or pump in Pt. First 4 Lines checked and were all good. CVB was not set up or any drainlines/tanks connected to anything measurements taken are on original drawing but are not to scale.
7/2/20 Supply line 7ft off corner of house, 5ft off PL

*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: KBH Date: 3/11/19 Installed by: Gunter Grading

IMPROVEMENT PERMIT by: Maria Dotson RS Date: 3/8/19 OPERATION PERMIT by: Maria Dotson Date: 7/17/2020

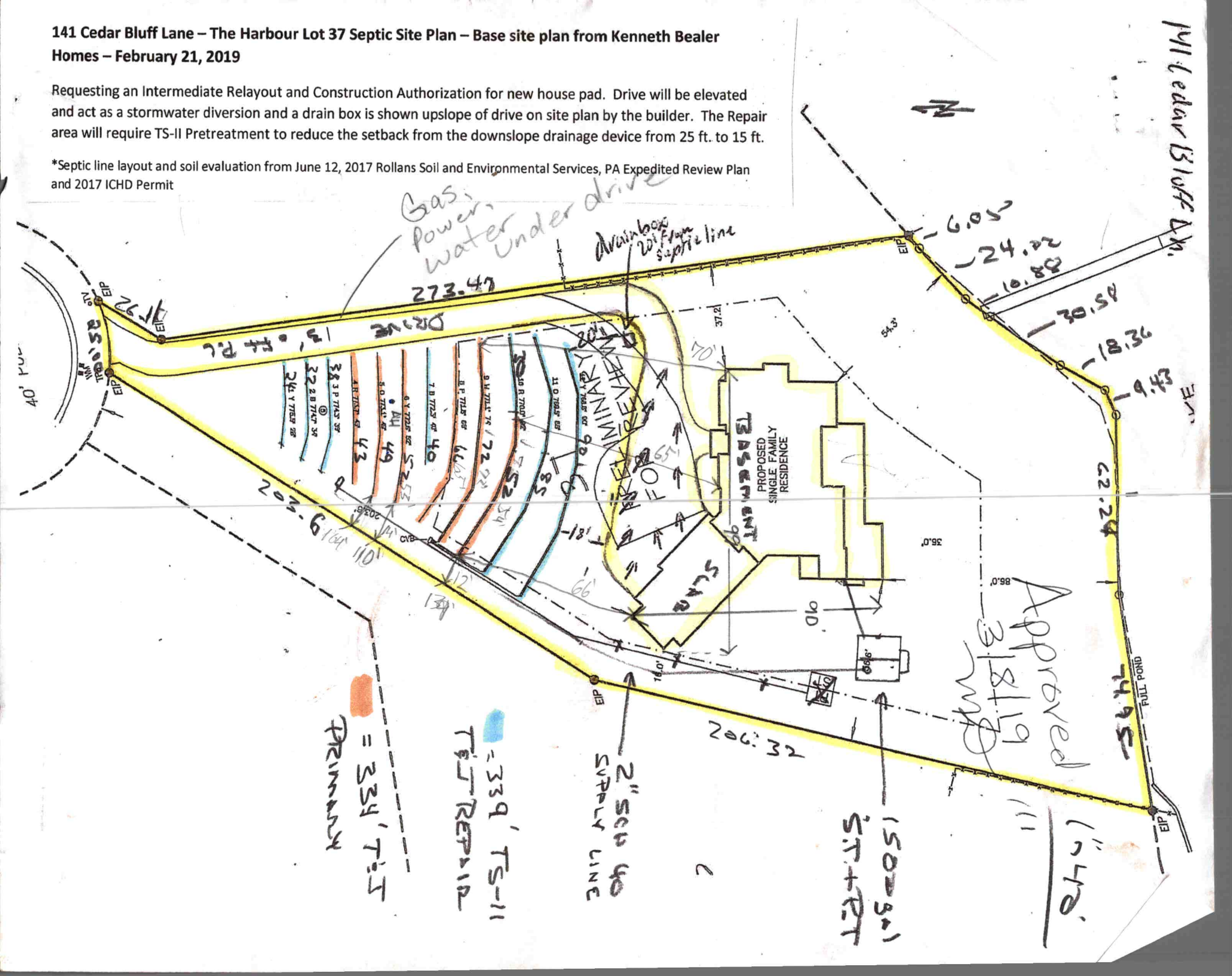
AUTHORIZATION TO CONSTRUCT by: Maria Dotson RS Date: 3/8/19 Existing System Inspected by: Date:

**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.**

**141 Cedar Bluff Lane – The Harbour Lot 37 Septic Site Plan – Base site plan from Kenneth Bealer Homes – February 21, 2019**

Requesting an Intermediate Relayout and Construction Authorization for new house pad. Drive will be elevated and act as a stormwater diversion and a drain box is shown upslope of drive on site plan by the builder. The Repair area will require TS-II Pretreatment to reduce the setback from the downslope drainage device from 25 ft. to 15 ft.

*Septic line layout and soil evaluation from June 12, 2017 Rollans Soil and Environmental Services, PA Expedited Review Plan and 2017 ICHD Permit



| | Date | Initials |
|---|---|---|
| Drain Lines Checked 1-4 5 & 6 | 7/1 | PJB |
| Tanks Checked | 7/2 | MD |
| Pressure Manifold or Valve Box Checked | 7/2 | MD |
| Pressure Head Set | 7/14/20 | MD |
| Electrical Checked | | |
| Floats Set | | |
| Alarm Checked | | |
| Maintenance Contract Y / N | 7/17/20 | MD |
| Comments: Supplyline | 7/2 | MD |

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

Sheet ___ of ___
PROPERTY ID #: 4625198271
COUNTY: Iredell

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

OWNER: Kurt Dieck
ADDRESS: 7037 Lake Trail Dr
PROPOSED FACILITY: House
LOCATION OF SITE: 141 Cedar Bluff M'ville
APPLICATION DATE: 1/22/19
DATE EVALUATED: 3/4/19
PROPOSED DESIGN FLOW (.1949): 600gpd
PROPERTY SIZE: 1 Ac
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 | 5% | 0-7" | Compacted Fill A/B | SCL, Fi, SS, SP, SExP | | | | | PS .3 |
| | | 7-24" | RC m-fSBK | FR, SS, SP, SExP | | | | | |
| | | 24-68 | RCL w-fSBK | SS, SP, SExP w/few to many SAP Inclus. | | | | | |
| | | 68-73 | C/B Horizon | Loam | | | | | |
| 2 | | | | | | | | | |
| 3 | | | | | | | | | |
| 4 | | | | | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | PS | PS |
| System Type(s) | 1 PPBPS | "IS" I PPBPS |
| Site LTAR | .3 | .3 |

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: Maria Dotson/Paul Penninger
OTHER(S) PRESENT: _____

COMMENTS:

[redacted]

PN # 4625 198271.000

Sheet 1 of 1

# SOIL/SITE EVALUATION
## for ON-SITE WASTEWATER SYSTEM

PROPERTY ID #: 4625198271
COUNTY: Iredell

Approved
6/20/17 MK

OWNER: Moore Sue D
ADDRESS: 2701 Foxfire Rd Charlotte NC 28270
PROPOSED FACILITY: SR House
LOCATION OF SITE: 141 Cedar Bluff Lane (Lot 37)
WATER SUPPLY: ☐ Private ☑ Public ☑ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut
PROPOSED DESIGN FLOW (.1949): 600gpd
APPLICATION DATE: 6/1/17
DATE EVALUATED: 5/22/17
PROPERTY SIZE: 1.00 AC
PROPERTY RECORDED: Yes
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 |
|---|---|---|---|---|---|---|---|---|---|
| B 1 | 4/6% | 0-36 | RC wm SBK | FR SS SP | f. SAP | 48 | — | — | PS.3 |
| | | 36-48 | RCL WF SBK | " " " | | | | | |
| B 2 | 4/5% | 0-2 | BCL wm SBK | FR SS SP | F. SAP | 48 | — | — | PS.3 |
| | | 2-36 | RC mm SBK | " " " | | | | | |
| | | 36-48 | BRCL WF SBK | " " " | | | | | |
| B 3 | 4/6% | 0-8 | BRCL WF SBK | FR SS SP | | 48 | — | — | PS.3 |
| | | 8-48 | RC mm SBK | " " " | | | | | |
| B 4 | 4/6% | 0-11 | RBCL WF SBK | FR SS SP | F. SAP | 48 | — | — | PS.3 |
| | | 11-20 | BRC mm SBK | " " " | | | | | |
| | | 20-40 | RC mm SBK | " " " | F. SAP | | | | |
| | | 40-48 | BRCL WF SBK | " " " | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | PS | PS |
| System Type(s) | PPBPS | PPBPS |
| Site LTAR | 0.3 | 0.3 |

COMMENTS:

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

# SOIL/SITE EVALUATION

*(Continuation Sheet-Complete all field in full)*



PROPERTY ID #: 4625198271
DATE OF EVALUATION: 5/22/17
COUNTY: Iredell

Approved 6/20/17 MD

| 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 |
|---|---|---|---|---|---|---|---|---|---|
| B5 | 4/7% | 0-2 | Bsl gr | Fr SS SP SE AP | | | | | PS |
| | | 2-6 | BRCl w msbk | " " " " | | | – | – | |
| | | 6-36 | RC w msbk | " " " " | | 4% | | | 0.3 |
| | | 36-48 | BRCl w msbk | " " " " | -fsap | | | | |
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COMMENTS:

Intermediate REPAIR

CALL KARL KENNICUTT FOR SITE VISIT. MAPS ISSUED 1/8 & HAVE DISCUSSED NEW LAYOUT W/ PAM

# IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

*APPLICATION FORM*

22729

704-996-6330

**Application For:**
( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) Septic Improvement Permit (X) 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:
*Place an (X) beside whichever is submitted if applicable*
( ) Survey Plat, scaled no more than 1 inch = 60 feet
(X) Custom Site Plan, scaled no more than 1 inch = 60 feet

**Applicant Information:** (PRINT CLEARLY)

Applicant Name: Kenneth Bealer Homes Address: 1454 Brawley School Rd Zip: 28117
Applicant Email: Kim@KBHLakeNorman.com Phone: 704-660-6408 Alt. Phone: _____
Owner Name: Kurt Dieck Address: 7037 Lake Trail Dr. Westerville OH Zip: 43082
Owner Email: _____ Phone: 614-296-7076 Alt. Phone: _____

**Property Information:**

Street Address: 141 Cedar Bluff Lane Mooresville, NC 28117
Subdivision Name: The Harbour Section/Phase: _____ Lot Number: 37
Driving Directions: West on Brawley School Rd. Right on Bay Harbour, Rt. on Shipyard, Left on Cedar Bluff

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

**CHECK FOUNDATION TYPE**

(X) 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: 5
Maximum Number of Occupants: _____
( ) Swimming Pool
( ) Other Addition/Structure: _____
( ) Crawl Space Foundation
( ) Concrete Slab Foundation
(X) 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 (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 (X) 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:** Kim Bealer 1-22-19
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

34-36" TB

E-MAILED 1-22-19 ABB

# 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, Kurt Dieck, am the legal owner(s) of the property located at 141 Cedar Bluff Lane, Mooresville, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Kenneth Beaver Homes, 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.

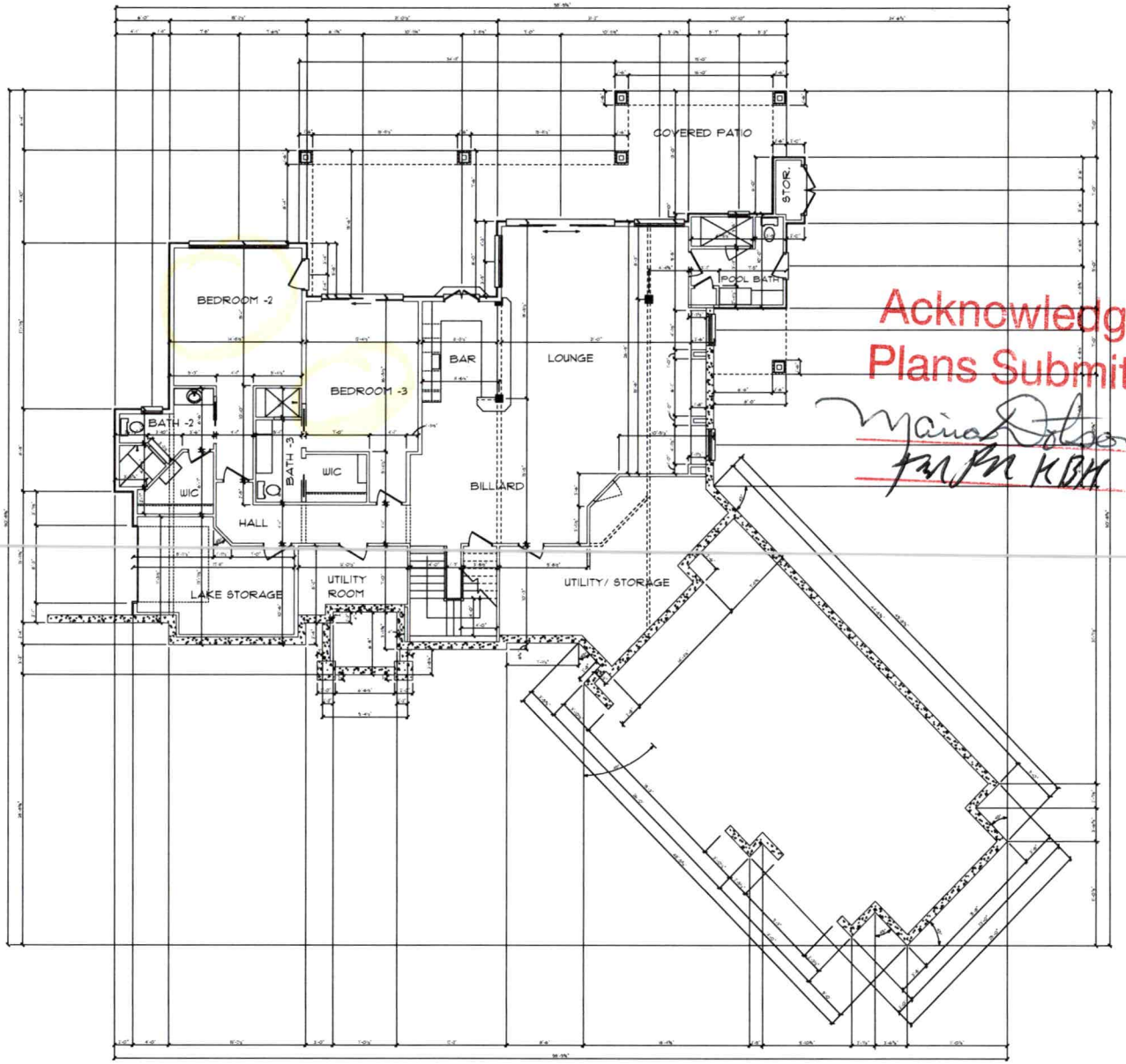
Kurt Dieck 1-14-19
Signature of Owner(s) Date

[signature] 1-14-19
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




LAKE LEVEL PLAN
SCALE: 1/4"=1'-0"

Acknowledgement of Plans Submittal ONLY!

Date 3/8/19

Date 3/11/19

Proposed Residence for
The Dieck Family
141 Cedar Bluff Lane Mooresville, North Carolina

NOTE

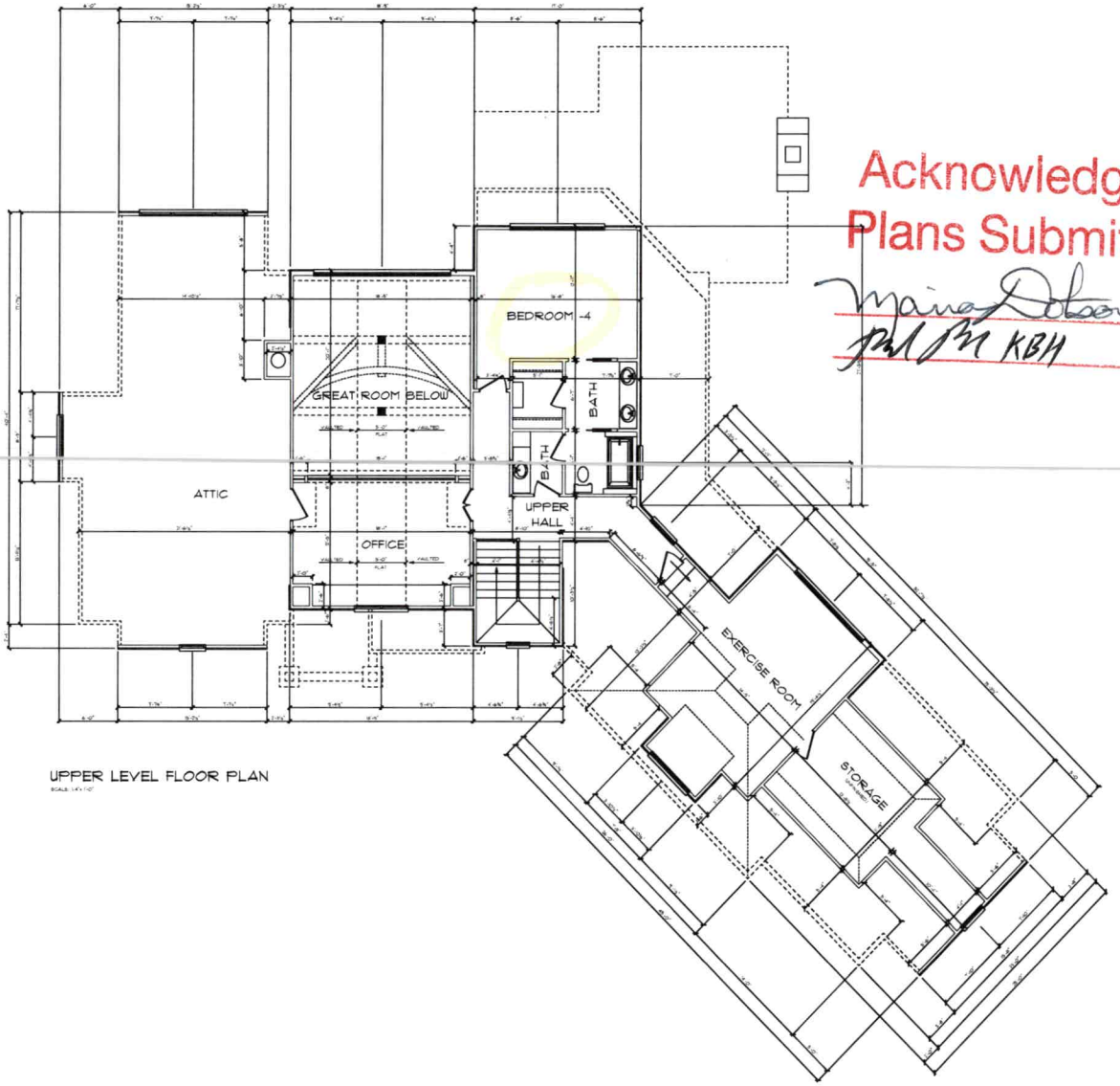
© COPYRIGHT 2019 OF HOUSE PLANS SERVICE

HOUSE PLANS SERVICE

DATE: September 2019
DRAWN BY: Richard Dieck
JOB NAME: Dieck
SHEET NO: 6

## GENERAL NOTES:

1. 9'-1 1/2" CEILING HEIGHT UNLESS SPECIFIED OTHERWISE. SEE ELEVATION SHEETS FOR WINDOW HEIGHTS.
2. 2 x 4 STUDS @ 16" O.C. UNLESS NOTED OTHERWISE.
3. ROOF SHEATHING: 7/16" OSB W/ 15# FELT
   WALL SHEATHING: 7/16" OSB
   FLOOR SHEATHING: 3/4" T & G PLYWOOD
   INTERIOR FINISH: 1/2" SHEETROCK UNLESS SPECIFIED OTHERWISE.
4. VERIFY ALL MATERIALS, DIMENSIONS ETC. PRIOR TO CONSTRUCTION.
5. REFER TO ENGINEERING SEALED DRAWINGS FOR ANY STRUCTURAL INFORMATION PERTAINING TO THIS SHEET.
6. ALL CLOSET SHELVING SIZES, LAYOUT, ETC. PER OWNER/BUILDER.




UPPER LEVEL FLOOR PLAN

Acknowledgement of Plans Submittal ONLY!

Maina Dobson Date 3/8/19

KBH Date 3/11/19

AIBD member of American Institute of Building Design

Proposed Residence for
The Dieck Family
141 Cedar Bluff Lane Mooresville, North Carolina

NOTE:

© COPYRIGHT OFFICE PLAN SERVICE

OFFICE PLAN SERVICE
A RESIDENTIAL DESIGN FIRM

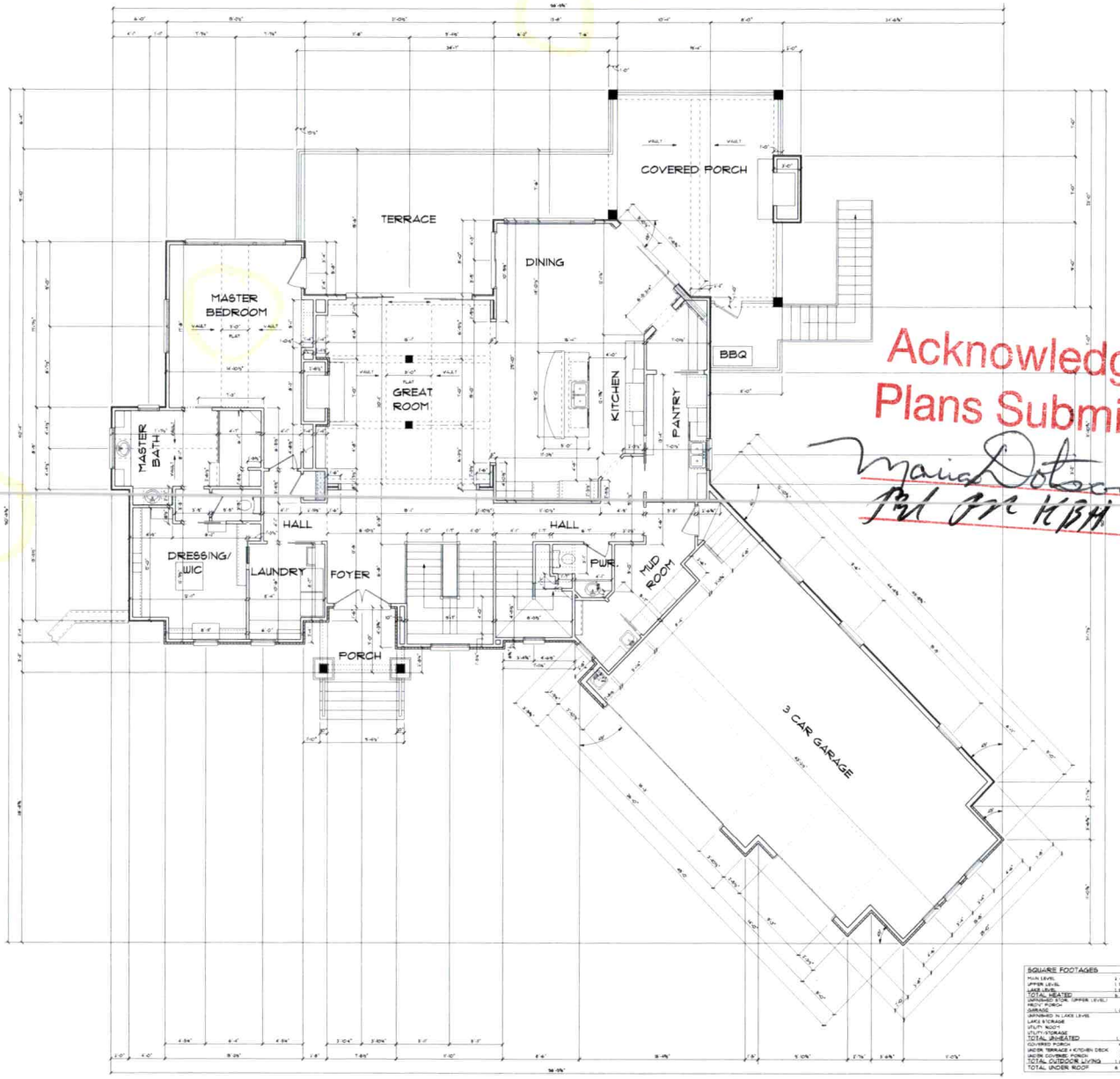
DATE: September 2018
DRAWN BY: Mikell Dobson
JOB NAME: Dieck
SHEET NO: 6

## GENERAL NOTES:

1. 10'-1 0" CEILING HEIGHT UNLESS SPECIFIED OTHERWISE SEE ELEVATION SHEETS FOR WINDOW HEIGHTS.
2. 2 X 6 EXTERIOR WALLS @ 16" O.C. UNLESS NOTED OTHERWISE.
3. ROOF SHEATHING: 7/16" OSB W/ 15# FELT
   WALL SHEATHING: 1/2" OSB
   FLOOR SHEATHING: 3/4" T & G PLYWOOD
   INTERIOR FINISH: 1/2" SHEETROCK UNLESS SPECD. OTHERWISE
4. VERIFY ALL MATERIALS DIMENSIONS ETC. PRIOR TO CONSTRUCTION.
5. REFER TO ENGINEERING SEALED DRAWINGS FOR ANY STRUCTURAL INFORMATION PERTAINING TO THIS SHEET.
6. ALL CLOSET SHELVING SIZES, LAYOUTS ETC. PER OWNER/BUILDER.

98' 9 3/4"

90' 8 7/8"




MAIN FLOOR PLAN
SCALE: 1/4"=1'-0"

Acknowledgement of Plans Submittal ONLY!

Maria Dotson Date 3/8/19

Bd Of KBH Date 3/11/19

| SQUARE FOOTAGES | |
|---|---|
| MAIN LEVEL | 1,455 |
| UPPER LEVEL | 133 |
| LAKE LEVEL | 1,301 |
| TOTAL HEATED | 2,889 |
| UNFINISHED STOR. (UPPER LEVEL) | 1,018 |
| MAIN PORCH | 211 |
| GARAGE | 1,037 |
| UNFINISHED IN LAKE LEVEL | |
| LAKE STORAGE | 610 |
| UTILITY ROOM | 99 |
| UTILITY STORAGE | 109 |
| TOTAL UNHEATED | 1,906 |
| COVERED PORCH | 429 |
| UNDER TERRACE + KITCHEN DECK | 430 |
| UNDER COVERED PORCH | 254 |
| TOTAL OUTDOOR LIVING | 1,092 |
| TOTAL UNDER ROOF | 6,999 |

Proposed Residence for
The Dieck Family
141 Cedar Bluff Lane Mooresville, North Carolina

NOTE:

HOUSE PRACTICE
A Residential Design Firm
Mooresville, North Carolina 28115

DATE: September 2018
DRAWN BY: Richard Dotson
JOB NAME: Dieck
SHEET NO: 6

# IREDELL COUNTY

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

| APPLICATION NUMBER |
|---|
| 227729 |
| Issue Date: 06/06/2017 |

## ZONING PERMIT

Open Space

| Parcel Number | Street Address | Jurisdiction |
|---|---|---|
| 4625198271.000 | 141 CEDAR BLUFF LANE, MOORESVILLE, NC | IREDELL COUNTY |

| Owner Information | | Applicant Information | |
|---|---|---|---|
| Owner: | MOORE SUE D | Applicant: | ROLLANS SOIL & ENVIRON |
| Address: | 2701 FOXFIRE RD<br>CHARLOTTE, NC 28270 | Address: | 470 NORTH BROAD STREET SUITE D<br>MOORESVILLE, NC 28115 |
| Phone: | | Phone: | 704-658-1723 |

*Kurt Dieck
7037 Lake Trail Dr.
Westerville OH 43082
614 296 7076

| Use Requested | Zone Code |
|---|---|
| | R20 |

| Lot Acreage | F Setback | B Setback | L Setback | R Setback | Watershed | Flood Zone |
|---|---|---|---|---|---|---|
| 1.000 | 126.00 | 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: 6/12/17

| Permit Number | 105114 | TOTAL FEES: | $ 77.25 |
|---|---|---|---|