IREDELL COUNTY HEALTH DEPARTMENT

KW

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 238758

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

PIN # 4625805062

APPLICANT: John Ryan/EFC APPLICANT ADDRESS: 67 Stringham Rd Poughkeepsie, NY 12603

SITE ADDRESS: 234 Yacht Rd Mooresville, NC 28117 PHONE: 917 282-8662 ALT. PHONE:

SITE DIRECTIONS: Brawley School Rd TL Yacht Rd just before Sterling Oak

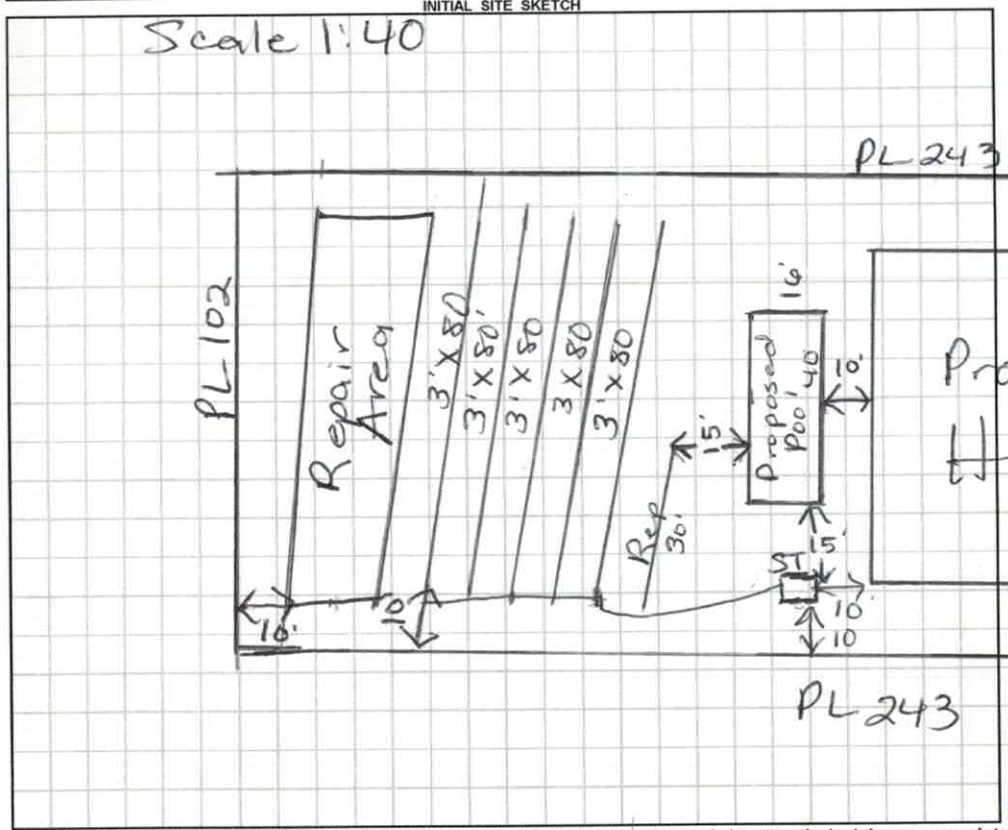
SUBDIVISION: Yacht Shores SECTION: 1 LOT # 4 LOT AREA: .57 Acre DESIGN FLOW: 480 gpd L.T.A.R.: .3

Septic Tank	1000 (gal)	STB 725	Date 10-11-19	☒ 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: Gravity-25% Reduction				☐ Business	No. Persons 8	☒ Private	
Pump Make	Model		Serial #	Repair System Description: LPPPBPS				☐ Other	No. Employees	☐ Public	
# Nitrification Fields 1	# Lines 5@80'		Linear Ft: 400	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☒ Crawl Space	☐ Community	
Trench Width 36"	Max. Trench Bottom Depth 36"		Gravel Depth N/A		☒ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing		

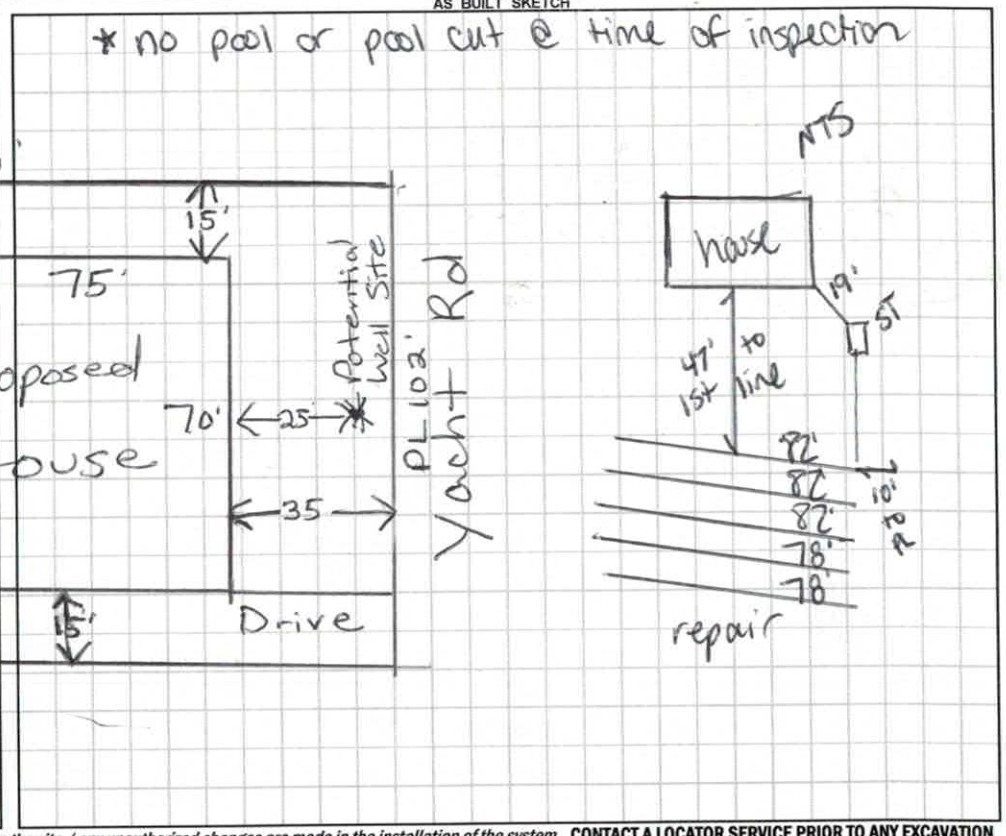
Comments / Conditions:

7/26/19 Renewed Floor plan, in Compliance with IP. Floor plans show 3 Bedrooms, Septic permit for 4 Bedrooms.

INITIAL SITE SKETCH



AS BUILT SKETCH



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 Ryan Date: 10/9/19 Installed by: Rowan Septic

IMPROVEMENT PERMIT by: Marie Dotson Date: 10/4/18 OPERATION PERMIT by: Carla C. Nicks Date: 11-2019

AUTHORIZATION TO CONSTRUCT by: Marie Dotson Date: 7/26/19 Existing System Inspected by: Date:

LICENSED SOIL SCIENTIST
ADRIAN L. PRUETT
1314
STATE OF NORTH CAROLINA
1" = 40'
S 77° 04' 55" W
243.00'
N 77° 04' 55" E
243.00'
24903.7 SQ. FT.
0.57 AC.
24001.5 SQ. FT.
0.55 AC.
184.96'
47.2'
L4
L5
L6
L7
L8
L10
L14
C4
C5
C9
C10
90'
30' R/W
50' TAPER
GRASS DITCH
DRIVEWAY
HOUSE
SEPTIC AREA
POOL
10' SIGHT △
10' X 70'
STERLING OAKS
Soil Pit Locations
234 Yacht Rd
YACHT ROAD
SIGHT-OF-WAY)
1101
ROAD

DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

PROPERTY ID #: 462580 5064
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: John Ryan
ADDRESS: 67 Stringham Rd Poughkeepsie, NY 12603
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____
LOCATION OF SITE: 234 Yacht Rd

APPLICATION DATE: 9/9/18
DATE EVALUATED: 9/28/18
PROPERTY SIZE: .57 Acre
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	LSS 5%	0-6	Brw SCL	w SBK SS, SP, SExp, FR					PS .3
		6-30	RCm	SBK SS, SP, SExp, FR					
		30-60"	RCL	w SBK SS, SP, SExp, FR		60"			
			w Few SAP Inclus & Common Mica flakes						
2	LSS 5%	0-12	Brw SCL	w SBK SS, SP, SExp, FR					PS .3
		12-37	RCm	SBK SS, SP, SExp, FR					
		37-56	RCL	w SBK SS, SP, SExp, FR		56"			
			w Few SAP Inclus						
3	LSS 6%	0-6	Brw SCL	w SBK SS, SP, SExp, FR					PS .3
		6-26"	RCm	SBK SS, SP, SExp, FR					
		26-57	Pd/Brw to Yel/Rd	CL w SBK SS, SP, SExp, FR		57"			
			w Few to Many SAP Inclus & Common Mica						
4	LSS 6%	0-7	Brw SCL	w SBK SS, SP, SExp, FR					PS .3
		7-29	RCm	SBK SS, SP, SExp, FR					
		29-59	R to Yel/R	w SBK SS, SP, SExp, FR		59"			

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	25% Red	PPBPS
LTAR	.3	.3

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: Maria Dotson
OTHER(S) PRESENT: David Bean

NTS: _____

PROPERTY ID #: 4625805062
COUNTY: Iredell

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

OWNER: Michael Agnello — APPLICATION DATE: _____
ADDRESS: 667 Meisten St., Washington, NJ 07676 — DATE EVALUATED: 4/7/17
PROPOSED FACILITY: Residential — PROPOSED DESIGN FLOW (.1949): _____ — PROPERTY SIZE: 0.57 ac
LOCATION OF SITE: 234 Yacht Rd. Mooresville, Yacht Shores Subdivision, Lot 4 — PROPERTY RECORDED: yes
WATER SUPPLY: X Private ☐ Public ☐ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: X Auger Boring ☐ Pit ☐ Cut — TYPE OF WASTEWATER: X 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	LSS 5%	0-8	RB SCL GR	FR SS SP SEXP	N/A	48"	N/A	N/A	PS
		8-24	R C MFSBK	FR SS SP SEXP					
		24-48	YR C/CL MFSBK	FR SS SP SEXP	-COM. SAP				0.3 GPD/SQFT
B 2	LSS 6%	0-8	B SCL GR	FR SS SP SEXP	N/A	48"	N/A	N/A	PS
		8-20	R C MFSBK	FR SS SP SEXP					
		20-25	R C MFSBK	FR SS SP SEXP	-FEW SAP				
		25-48	YR C/CL WFSBK	FR SS SP SEXP	-FEW/COM SAP				0.3 GPD/SQFT
3									
4									

LICENSED SOIL SCIENTIST ADRIAN L. PRUETT SEAL OF THE STATE OF NORTH CAROLINA 1314 STATE OF NORTH CAROLINA

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

OTHER FACTORS (.1946): NONE
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: ADRIAN L. PRUETT
OTHER(S) PRESENT: NONE

COMMENTS: _____

9/18/18 LM Rafts 238758

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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 (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: John Ryan **Address:** 67 Stringham Road Poughkeepsie N.Y. **Zip:** 12603
Applicant Email: tekjacket@aol.com **Phone:** 845-452-3640 **Alt. Phone:** 917-282-9664
Owner Name: Kevin Tarpey **Address:** 350 Yacht Road, Mooresville, NC **Zip:** 28117
Owner Email: Kjt62@yahoo.com **Phone:** 845-235-0732 **Alt. Phone:** _____

Property Information:

Street Address: 234 Yacht Road Mooresville N.C 28117
Subdivision Name: Yacht Shores **Section/Phase:** N/A **Lot Number:** 4
Driving Directions: Rt. 77 North, Exit 35 Brawley School Road West. Travel approx 7 miles Then turn left on Yacht Rd. Property is approx. 1/2 mile 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 Describe Problem: _____

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 8
(X) Swimming Pool
( ) Other Addition/Structure: _____

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 (X) Alternative ( ) Conventional ( ) 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: John Ryan 9/9/18
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, Kevin Tarpey, am the legal owner(s) of the property located at 234 Yacht Rd., Mooresville NC 28117, identified as PIN (Parcel Identification Number) 4625805062.00, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) John Ryan, CS&SC Adrian Pruett, 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.

Kevin Tarpey 9-7-18

Signature of Owner(s) Date

Signature of Witness Date

Please return this signed form to the appropriate office:

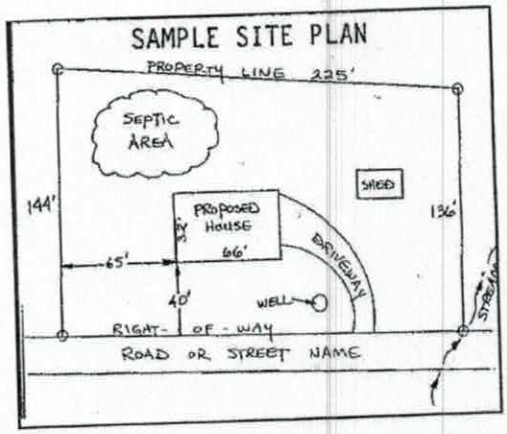
Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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

IREDELL COUNTY 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:

- (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
- (X) Preferred well location
- (X) Preferred septic system location
- (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

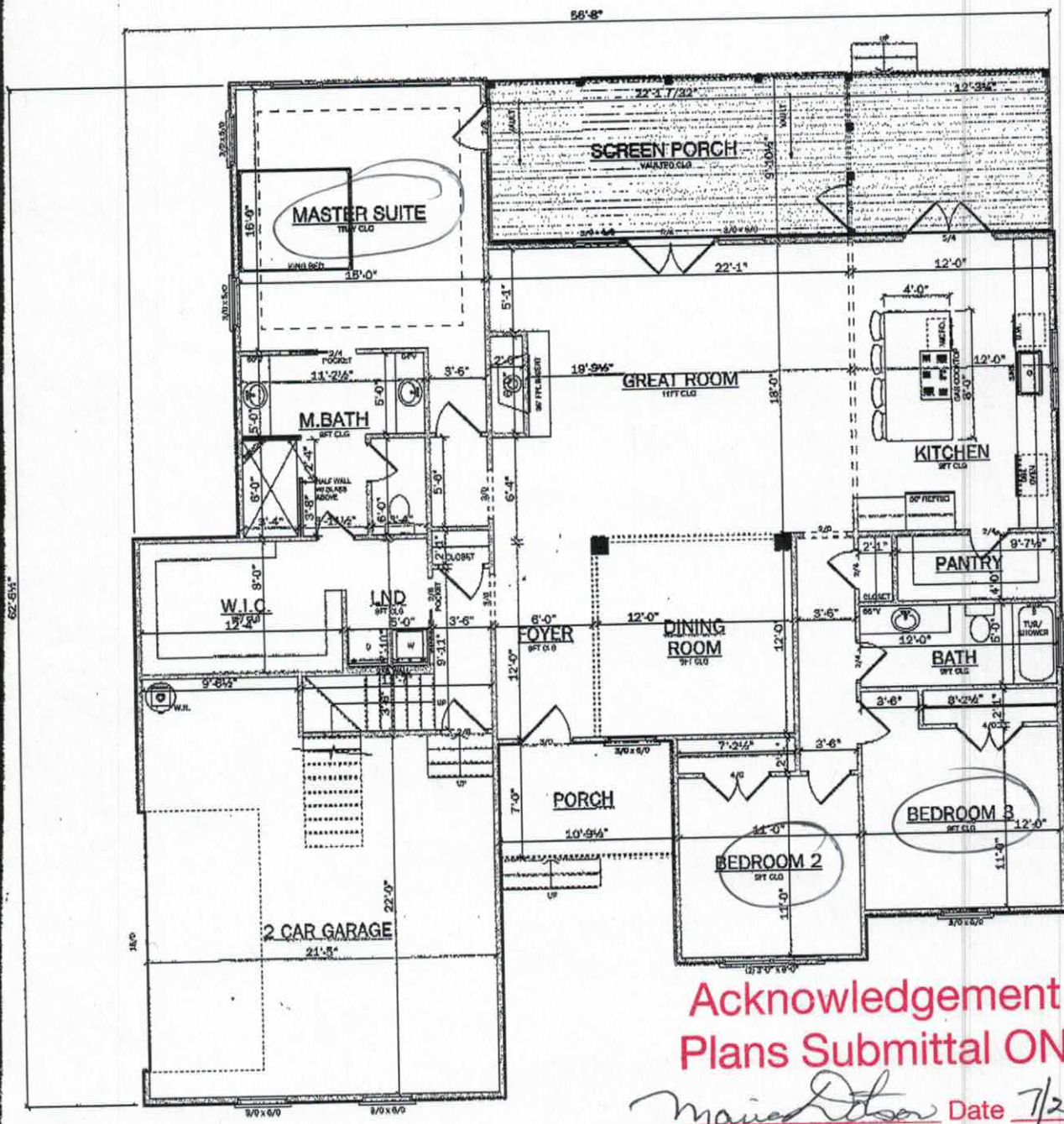
USE THIS SPACE TO DRAW YOUR SITE PLAN

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



Signature: _____ **DATE** 9/9/18

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



Acknowledgement of Plans Submittal ONLY!

Maria Dotson Date 7/26/19

Date

MAIN FLOOR 5-23-19
SCALE: 1/4" = 1'-0"

Jul.26.2019 02:46 PM EFC Associates Inc. dba EFC Builders 704 201 5953 #2759 P 1/ 1
RECEIVED 06/02/2019 02:30PM

IREDELL COUNTY

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

APPLICATION NUMBER
238758
Issue Date: 09/11/2018

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4625805062.000	234 YACHT ROAD, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: AGNELLO MICHAEL+DEBORAH	Applicant: RYAN, JOHN
Address: 667 MEISTEN ST	Address: 67 STRINGHAM RD
WASHINGTON, NJ 7676	POUGHKEEPSIE, NY 12603
Phone:	Phone: 917-282-8664

Use Requested	Zone Code
SFD	20CU

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.570	35.00	35.00	15.00	15.00	CACL	X

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	152099	TOTAL FEES:	$ 77.25