ICHD–ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # AP 307257

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

PIN # 4626 13 7066

APPLICANT/OWNER: Kingswood Custom Homes/Phil Duncan APPLICANT ADDRESS: 115 College St Pineville, NC 28134

SITE ADDRESS: 105 Indian Trail Mooresville, NC 28117 PHONE: 704 889-1600 ALT. PHONE Keith 704 226-6766

SITE DIRECTIONS: Brawley School Rd TR Chuckwood take to end straight at stop sign

SUBDIVISION: Lisa T SECTION: 7 LOT # 59 LOT AREA: 1.19 Ac SAP CONTROLLED: N/A ☐ YES ☐ NO

DESIGN FLOW: L.T.A.R.:

Septic Tank	1000 (gal)	STB 760	Date 2/3/2021	☒ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms 3	Water Supply
Pump Tank	(gal)	PT	Date	System Description: New ST to exist. gravel bed		☐ Business	No. Persons 6	☒ Private Exist
Pump Make		Model	Serial #	Repair System Description: Exempt lot existed in 1977		☐ Other	No. Employees	☐ Public
# Nitrification Fields	1	# Lines Existing	Linear Ft	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☒ Crawl Space	☐ Community
Trench Width	10'x65' Bed	Trench Bottom Depth(Low side)	Gravel Depth	☒ GRAVITY	☐ PRESSURE	☒ Basement w/plumbing		☐ Basement w/o plumbing

Comments / Conditions: Note: Builder wants to use grinder pump for basement plumbing. Must use 10ft of 4inch pipe to discharge to ST.

Note: Installed new ST, must have fall from proposed house to existing Septic
New ST a minimum of 50' from well

INITIAL SITE SKETCH

Divert storm/surface water away from Septic
Must keep house a minimum of 10' from drain if Septic is down slope, 15ft sideslope & 25ft upslope.

Drive

← To Indian Trail

57.8

Exist Garage

13.8

4/13/21: As-built measurements not to scale. Tank was checked and good

PL 403.06 →

AS BUILT SKETCH

Scale: 40

← PL 403.51 →

Well

50

51'

New ST

37'

Replace Exist. ST

Exist Drainfield

10'

15'

10'x65' 4 lines

Replace Trench

10

Proposed House

49'

43.85

53

21'

Lake Normal

PL 219

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: Acceptance of Permit Card Date: 6-9-2020 Installed by: Specialty septic

IMPROVEMENT PERMIT by: Maria Adkison Date: 6/8/2020 OPERATION PERMIT by: Patrick J Boyle II Date: 4/13/2021

AUTHORIZATION TO CONSTRUCT by: Maria Adkison Date: 6/8/2020 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.

RECEIVED MAY 1 1 2020 AP-307257 $250.00

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
( ) 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: Kingswood Custom Homes Address: 115 College St., Pineville, NC Zip: 28134
Applicant Email: Tammy@kingswoodhomes.com Phone: 704-889-1600 Alt. Phone: _____
Owner Name: Phil Duncan Address: 105 Indian Trail, Mooresville, NC Zip: 28117
Owner Email: philduncanjr@gmail.com Phone: 704-819-6262 Alt. Phone: _____

Property Information:

Street Address: 105 Indian Trail, Mooresville, NC 28117
Subdivision Name: _____ Section/Phase: _____ Lot Number: _____
Driving Directions: Brawley School, Right on Chuckwood Rd, Straight at Stop Sign

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

(✓) New Single Family Residence Maximum Number of Bedrooms: 2
( ) New Multi-Family Residence Maximum Number of Occupants: 2
( ) Accessory Building ( ) Swimming Pool
( ) Bedroom(s) Addition ( ) Other Addition/Structure: _____
( ) 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: _____

CHECK FOUNDATION TYPE

(✓) Crawl Space Foundation
( ) Concrete Slab Foundation
(✓) Basement with Plumbing
( ) Basement without Plumbing

Water Supply: ( ) Replacement Well – Reason: _____
( ) Multi-connection Well Number of Houses: _____ Number of Persons: _____

( ) 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 ( ) 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: _____, Kingswood Custom Homes, Inc. 5.6.2020
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

Grinder pump for basement new ST

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

(Check and sign only ONE of the options below)

☐ **1. * APPLICANT AND OWNER ARE THE SAME. *** (*Sign here*) _____

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.

☑ **2.** I, Phil Duncan, am the legal owner(s) of the property located at 105 Indian Trail, identified as PIN (Parcel Identification Number)_____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Kingswood Custom Homes, Inc. _____, 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.

Phil Duncan
Signature of Owner(s)

5/6/2020
Date

Mooresville - Environmental Health

Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

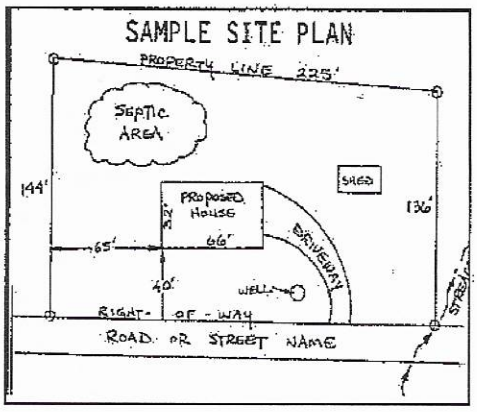
Statesville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

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:

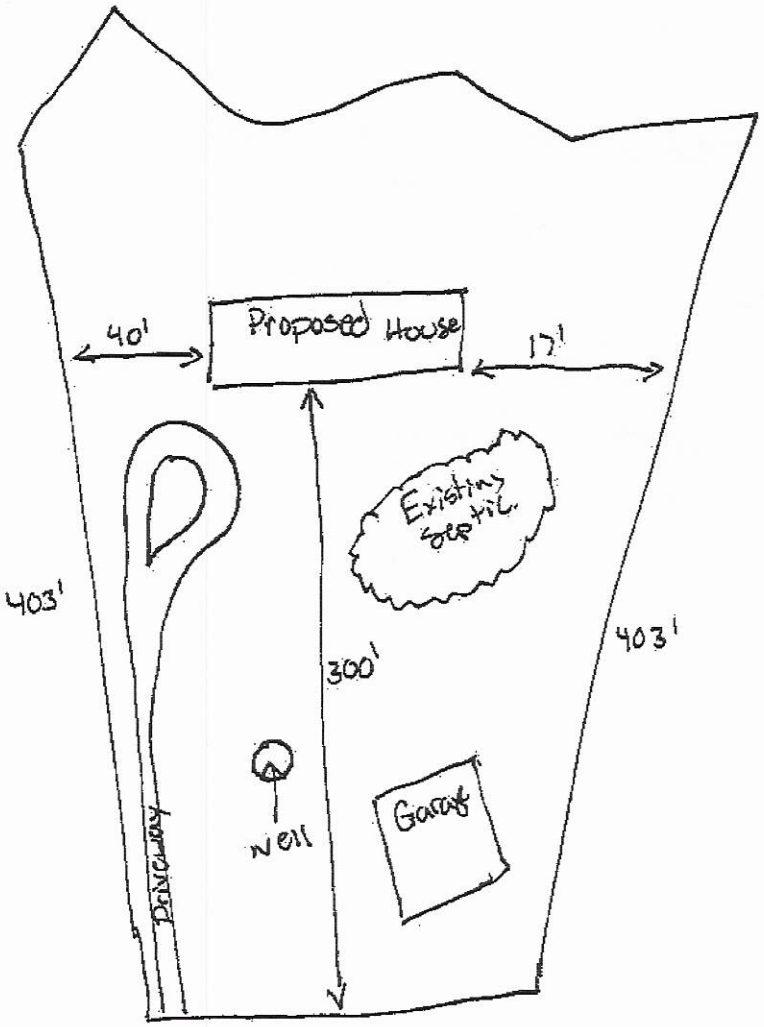
( ) Property Line measurements are clearly identified
( ) All proposed structures are indicated
( ) Front and side setbacks from property line
( ) Preferred driveway location and well location
( ) Area you prefer your septic system to be placed
( ) North arrow, or other sufficient indicator of direction

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: BK, Kingswood Custom Homes, Inc.
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

6.6.2020
DATE

NOTE: SEDIMENT CONTROL REQUIRED ON ALL SIDES @ PROPERTY LINE. MAXIMUM 20'-0" ACCESS POINT ALLOWED ALONG STREET.

NOTE: SEE LANDSCAPE PLANS FOR FINAL DRAINAGE REQUIREMENTS.

NOTE: TREE PROTECTION REQUIRED AT ALL PROTECTED TREES. INSTALL PER CITY OF MOORESVILLE GUIDELINES.

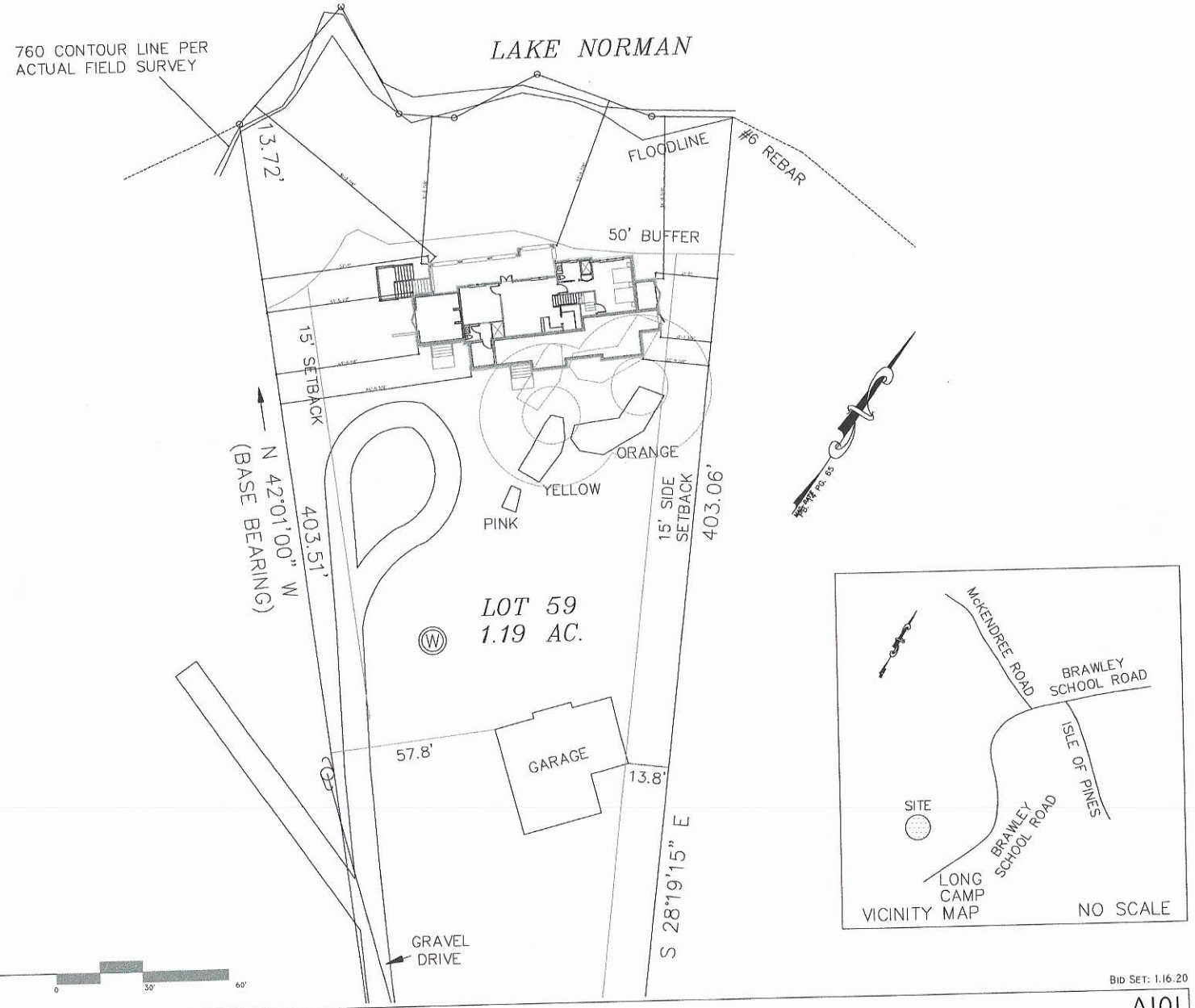
NOTE: WETLAND AND SILT FENCE BARRIER. CLARKE DESIGN GROUP, LLC IS NOT RESPONSIBLE FOR THE UPKEEP OF SILT FENCE, TREE PROTECTION OR WETLAND BARRIERS. GENERAL CONTRACTOR IS TASKED WITH THE DUTY OF MANAGING ALL SITE CONDITIONS INCLUDING THE ABOVE BUT NOT LIMITED TO MATERIAL STORAGE, CONTAINMENT OF TRASH AND WIND BLOWN DEBRIS.

NOTE: FINAL GRADING AND DRAINAGE SHALL NOT IMPACT ADJACENT PROPERTIES

CODE APPLICABILITY (SEE STRUCTURAL SHEETS)

1) ALL WORK TO BE IN ACCORDANCE WITH CURRENT APPLICABLE CODES & STANDARDS

2) EXTERIOR OPENINGS ARE REQUIRED TO MEET IRC 2015 GUIDELINES FOR DESIGN PRESSURE & IMPACT RESISTANCE.



SITE PLAN

SCALE 1/16" = 1'-0"

0 30' 60'

BID SET: 1.16.20

CLARKE DESIGN GROUP

DUNCAN RESIDENCE - 105 INDIAN TRAIL - MOORESVILLE, NC

CLARKE DESIGN GROUP 1000 JOHNNIE DODDS BLVD. STE. 103-194 MT. PLEASANT, SC 29464 843-329-0667

A101

SITE PLAN

DRAWINGS AND SPECIFICATIONS ARE THE PROPERTY OF CLARKE DESIGN GROUP, LLC AND SHALL NOT BE COPIED, RE-USED, OR MODIFIED WITHOUT WRITTEN CONSENT

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR U.G. Richards DATE 5-10-07 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1100 TR on 1170 at end

S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 59 SECTION OR BLOCK NO. 12

House ( ) Mobile Home ( ) Business ( ) Other Double wide mobile Home

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes ( ) No (✓)

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area _____

Character & Porosity of Soil Sandy clay loam fair treatment

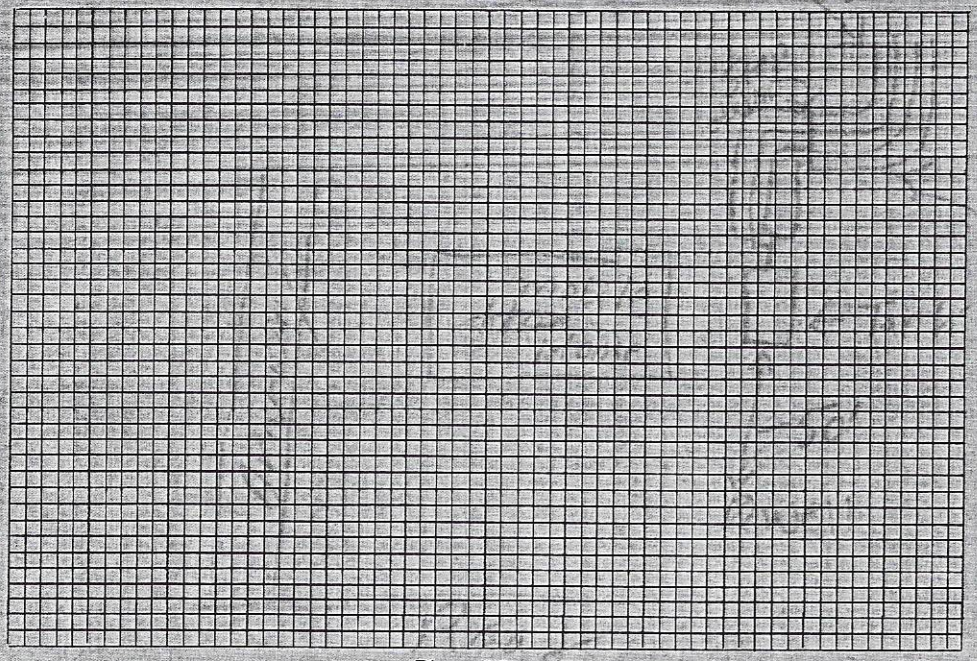
Percolation Rate Soil borings

Topography Lot to gently slope

Depth to Water Table 24" to 48" in the rear of lot

Rock or other impervious formations Rock on the left side of lot

Lake Norman 20' from area of system



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. 600 Linear Ft. 260

Depth of Stone in Lines 24"

Water Supply: Individual (✓)

Public ( )

Ditch 10'x65' 4 lines

Installed by E. J. Eyrich

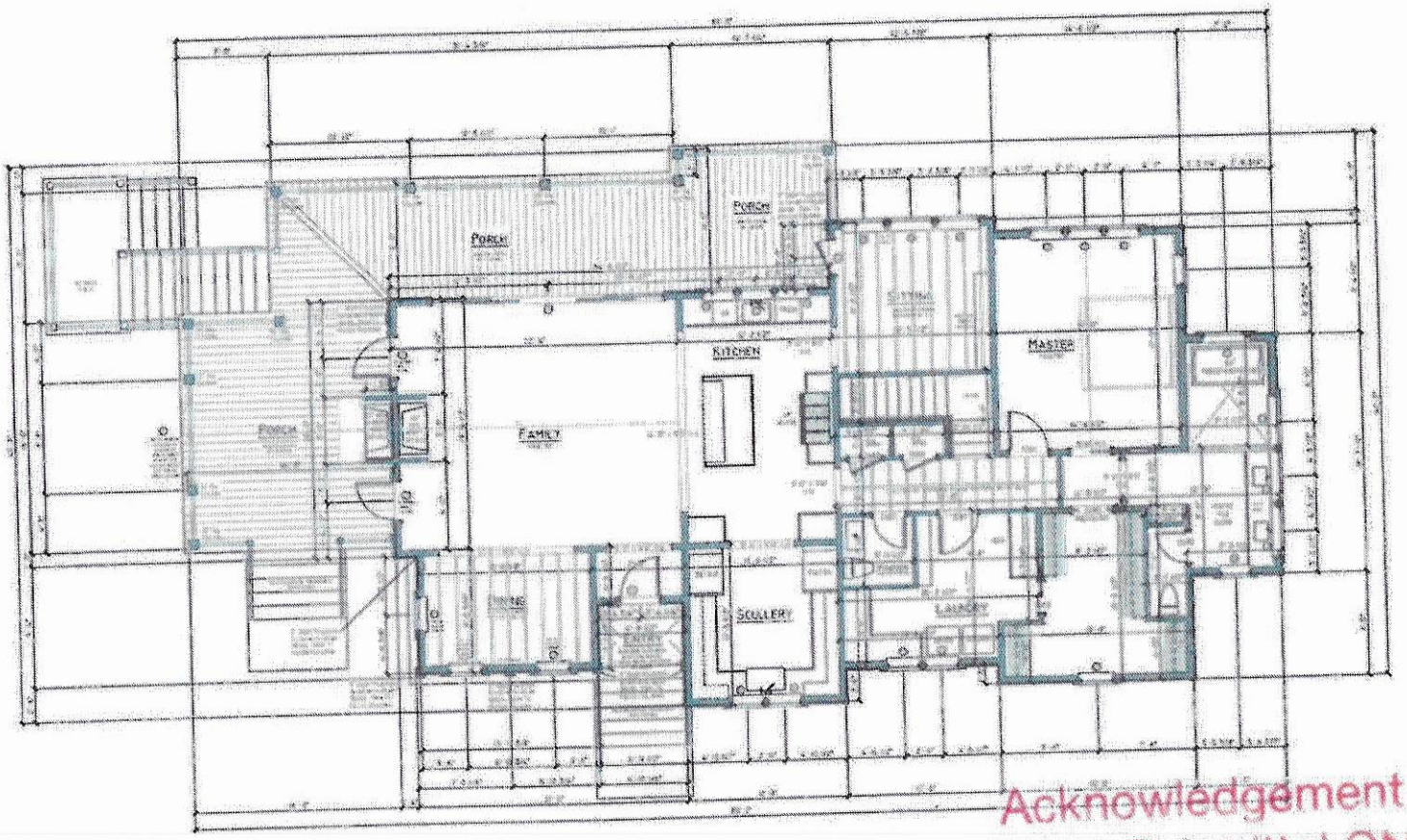
IMPROVEMENTS PERMIT BY L. C. Moore

COMMENTS: System was installed in an area other than was laid out due to rock

CERTIFICATE OF COMPLETION BY L. C. Moore DATE 5-10-07

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold



Acknowledgement of
Plans Submittal ONLY!

Maria Dotson Date 6/8/2020

B.L. Kingswood Custom Homes Date 6.9.2020

SIGN HERE

FIRST FLOOR PLAN

CLARKE

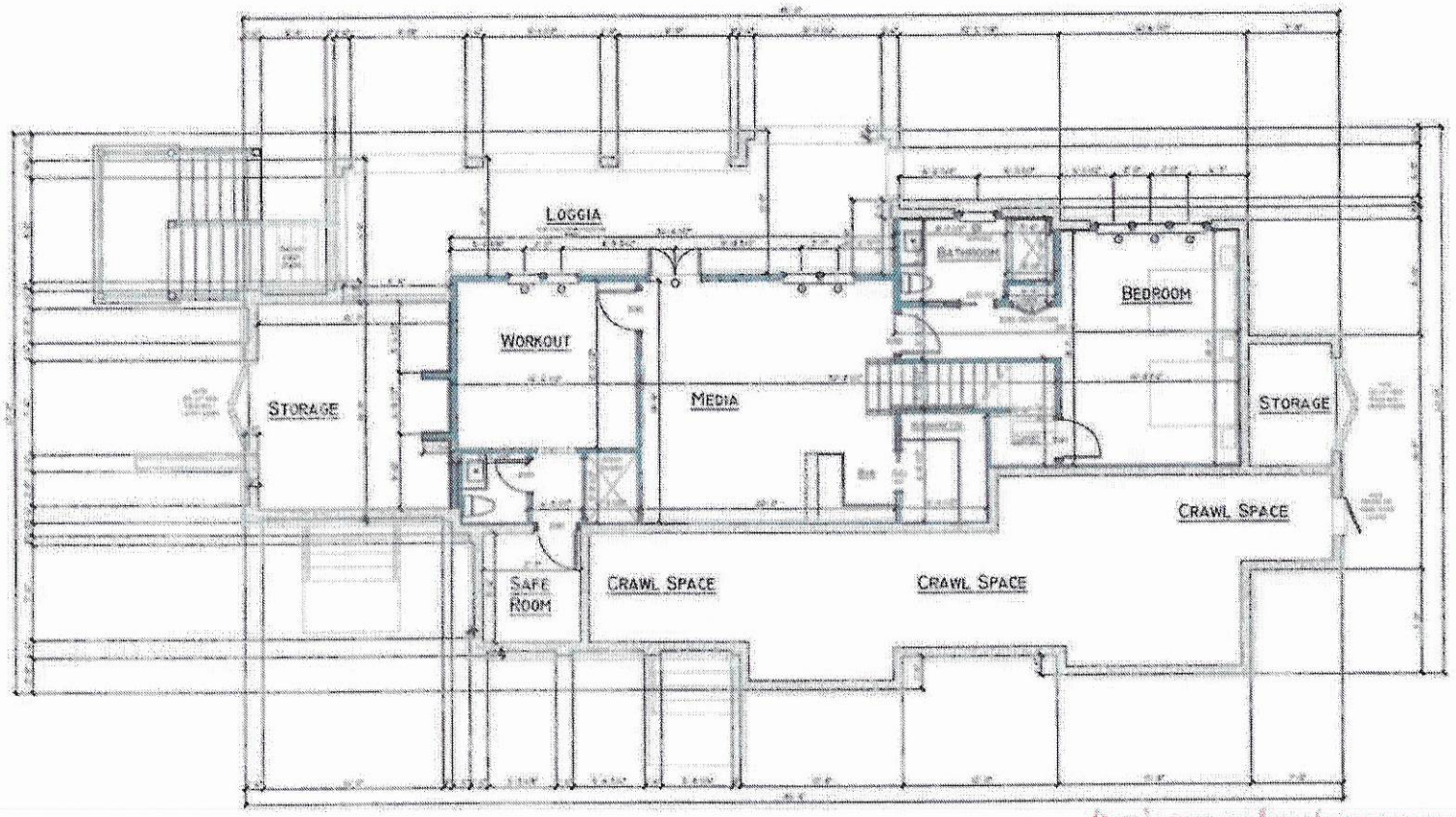
DUNCAN RESIDENCE - 105 INDIAN TRAIL - MOORESVILLE, NC

CLARKE DESIGN GROUP 1000 JOHNNIE DODDS BLVD. STE. 103-194 MT. PLEASANT, SC 29464 843 329-9647

Bid Set: 1.16.20

A103

First Floor Plan



GROUND FLOOR PLAN

Acknowledgement
Plans Submittal ON
Date 6/8/2020
Kingswood Custom Homes, Date 6.9.2020

SIGN HERE

CLARKE

DUNCAN RESIDENCE - 105 INDIAN TRAIL - MOORESVILLE, NC

CLARKE DESIGN GROUP 1000 JOHNNIE DODDS BLVD. STE. 105 MT. PLEASANT, SC 29466 843 329-0667

SET: 06.20

A102

GROUND FLOOR PLAN