ICHD–ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP 308589

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

PIN # 4626176535

APPLICANT/OWNER: Paul Taylor | APPLICANT ADDRESS: 187 Gannett Rd Mooresville NC 28117

SITE ADDRESS: 657 Kemp Rd Mooresville NC 28117 | PHONE: 704-605-1287 | ALT. PHONE 704-947-6985

SITE DIRECTIONS: Brawley School Rd to R on McKendree Rd, L on Kirkwall PL, L on Kemp Rd, L to on R | SAP CONTROLLED: ☐ YES ☒ NO

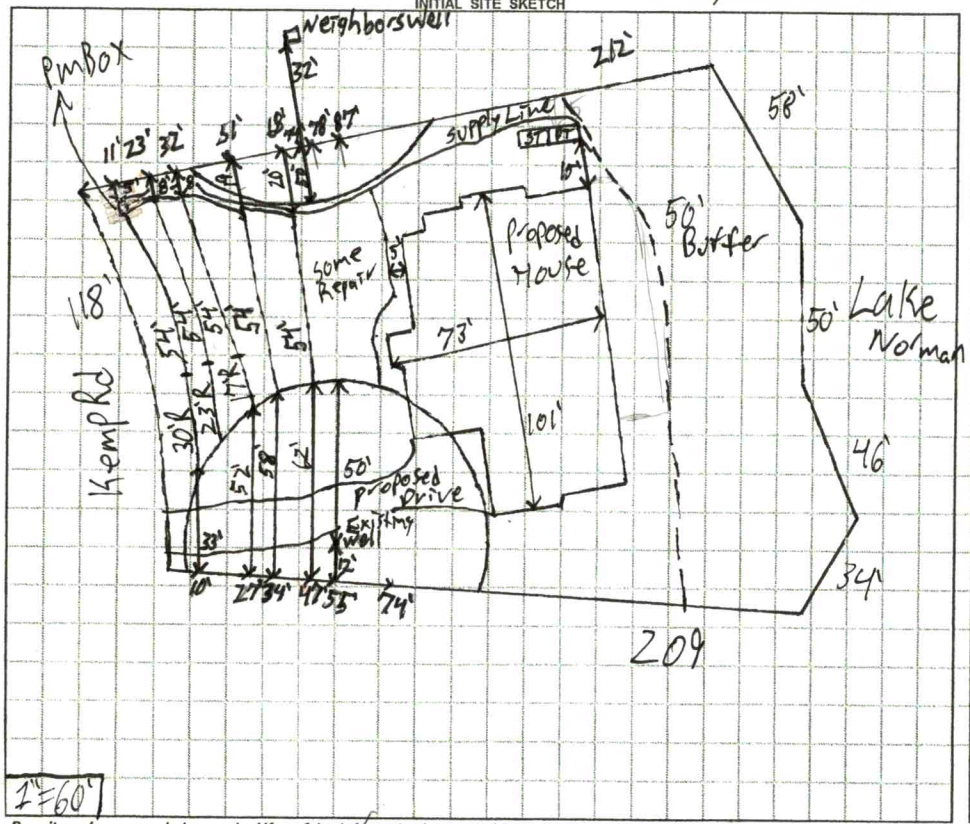
SUBDIVISION: CL and T | SECTION: 58 | LOT # 163 | LOT AREA: 0.73acres | DESIGN FLOW: 480GPD | L.T.A.R.: .3125Repair

Septic Tank	1000 (gal)	STB SHOAF 7610	Date 5/23	☒ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms 4
Pump Tank	1000 (gal)	PT SHOAF 3103	Date 9/24	System Description: PM PP BS		☐ Business	No. Persons 8
Pump Make	GOULD	Model WS511HH1U	Serial #	Repair System Description:	Repair exempt	☐ Other	No. Employees
# Nitrification Fields	1	# Lines 5	Linear Ft: 270'	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☒ Crawl Space
Trench Width	24"	Trench Bottom Depth(~~Low side~~)	30" max	Gravel Depth	☐ GRAVITY ☒ PRESSURE	☐ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Install lines on contour. DO NOT drive on, store material or manipulate drainfield in any way. All property lines, corners and 50' buffer must be marked during time of installation and inspection. All storm and surface water must be diverted away from system. NO Foundation drains can be installed on house. Drainlines must be 15' off power lines.

INITIAL SITE SKETCH



AS BUILT SKETCH

Keep Septic minimum of ~~5FT~~ to PL

Electrical ✓ 11/19/21 cw

As Built Attached

Lot NOT repair exempt - See attached for complete repair.

Line	Tap size	2' pressure head
L 1	1/2 Sch 80	Dosing volume = 234'
L 2	1/2 Sch 80	Drawdown = 11.1
L 3	1/2 Sch 80	Flowrate = 27.4
L 4	1/2 Sch 80	Runtime = 8.5
L 5	1/2 Sch 80	

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.*

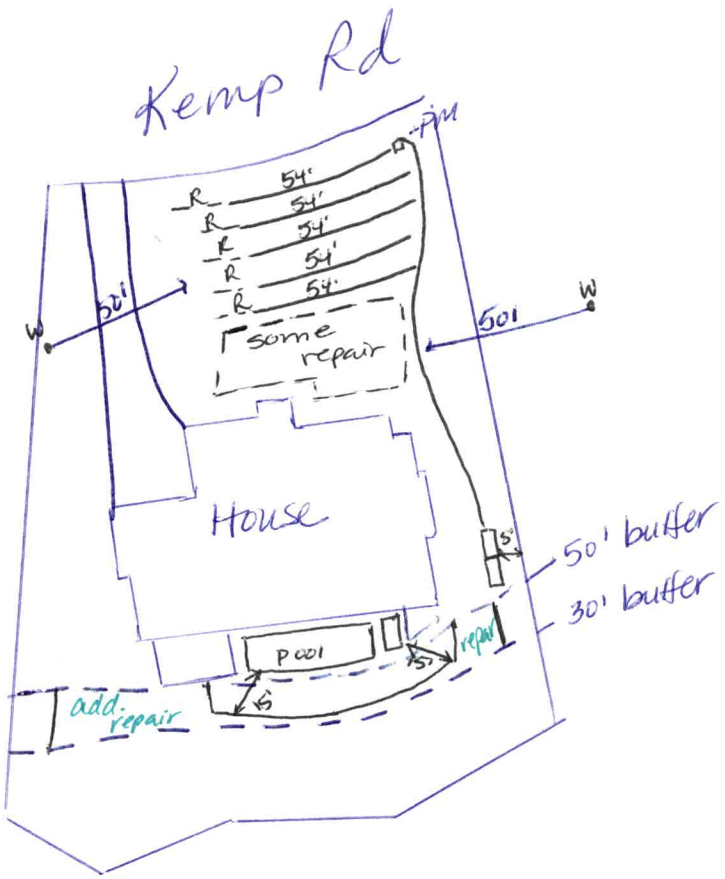
Owner / Applicant Signature: [signature] Date: 12/3/2020 Installed by: Lentz Wastewater

IMPROVEMENT PERMIT by: Patrick J Bagett III Date: 12/30/2020 OPERATION PERMIT by: [signature] D. Wiebers Date: 11/22/21

AUTHORIZATION TO CONSTRUCT by: Patrick J Bagett III Date: 12/30/2020 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.

1" = 50'



* Additional Drip Repair in Buffer.
15' from waters edge
Approximately 1000' sq ft of drip repair

As Built
657 Kemp
4626-17-6535

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

Sheet ___ of
PROPERTY ID #: 4626174535
COUNTY: Iredell

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

OWNER: Paul Taylor
ADDRESS: 657 Kemp Mooresville NC 28117
PROPOSED FACILITY: 4BR
PROPOSED DESIGN FLOW (.1949): 480
LOCATION OF SITE: 657 Kemp, Mooresville NC 28117
APPLICATION DATE
DATE EVALUATED: 11/10/21
PROPERTY SIZE: 0.73
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)		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	LS 5%	0-6 6-48	CL - SBK C - ABK, tending to PL	SSSP - FR SSKP SSSP - FR/FI	VB 12-18 Bleyl 1 7/N 18" gleys, chroma 2 greys & VB continue 18"+	(48")	N/A	N/A	PS 0.1
2									
3									
4									

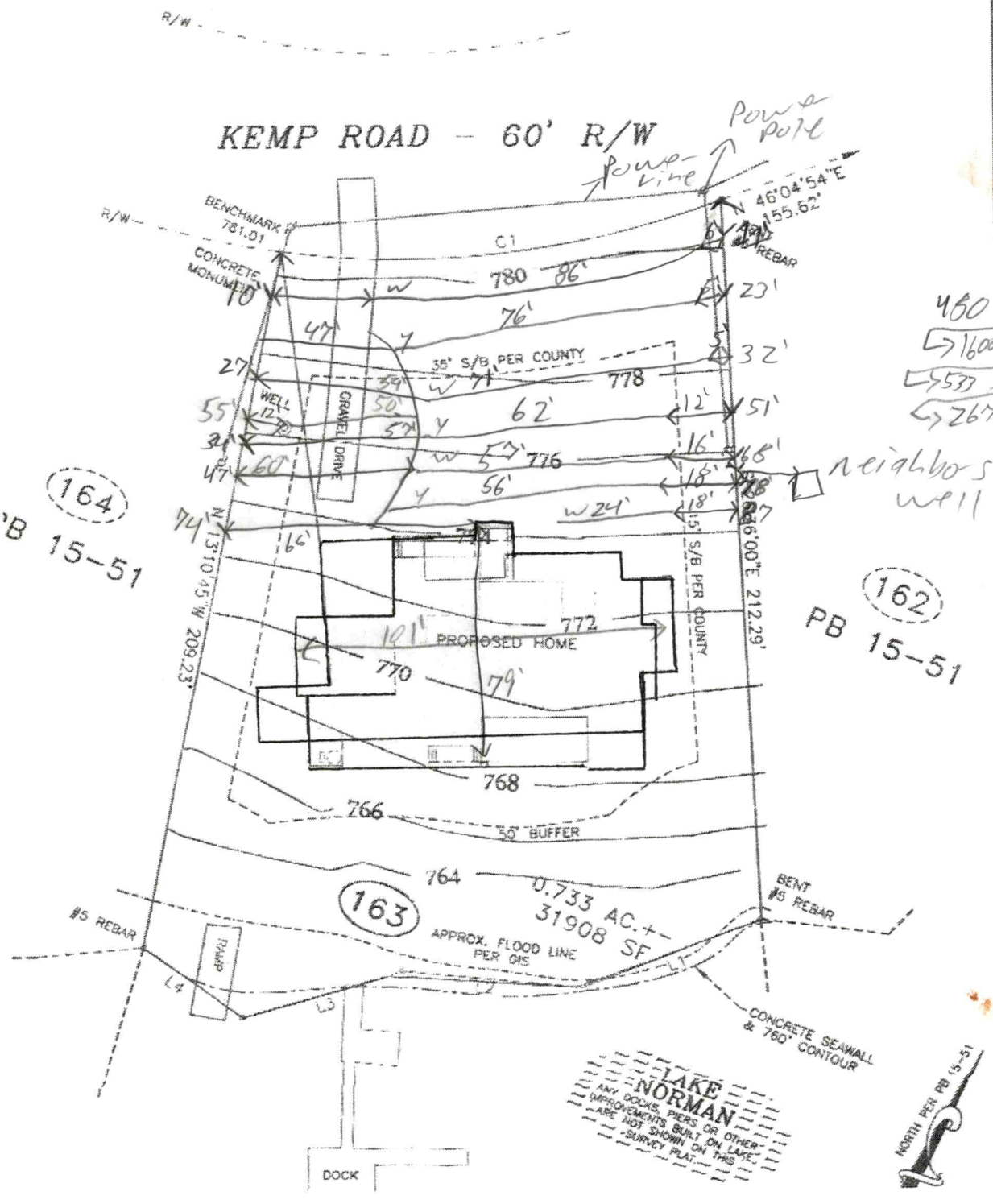
DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		1000'+ PPBPS
System Type(s)		drip & PPBPS
Site LTAR		0.15

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: D. Wiebert
OTHER(S) PRESENT:

COMMENTS:

Taylor Family Kemp Road, Mooresville NC	SEAL:	DRAWING November 1, 2024	ISSUED FOR For Permit	DRAWING SITE PLAN	SCALE 1"=40'-0"	PAGE 02

NOTE:
GC TO VERIFY FINAL LOCATION OF HOUSE AND GRADE CONDITIONS PRIOR TO POURING PADS TO POURING WALLS



need 587 total

480 ÷ 3 → 160 ÷ 3 → 53 X 5 → 267'

480 ÷ 25 → 1920 ÷ 3 → 640 X 5 → 320'

neighbors well 74' down from Front PL and 32' off PL

RECEIVED DEC 0 2 2020

Permit # 308589

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED

AP-308589

$320.00

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM*

intermediate

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

Applicant Information: (PRINT CLEARLY)

Applicant Name: Paul Taylor Address: 187 Gannett Rd. Zip: 28117
Applicant Email: taylormade.customhomes@yahoo.com Phone: 704-605-1287 Alt. Phone: 704-947-0485
Owner Name: Paul Taylor Address: 187 Gannett Rd Mooresville Zip: 28117
Owner Email: Same as above Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 1057 Kemp Rd. Mooresville 28117
Subdivision Name: CL&T Section/Phase: 8 Lot Number: 1103
Driving Directions: Brawleyschool - right McKendree Left (2nd Kemp) left on Kemp

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

(✓) 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: _____
Non-Residential Site Development: Type of Business: _____
Square Footage of Building: _____ Max. Number of Employees: ____ Max. Number of Seats/Beds/Other: ____

CHECK FOUNDATION TYPE
(X) 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 (X) 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: Pump PPBPS

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: _____ 11-10-20
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

(Check and sign only ONE of the options below)

X 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, _____, am the legal owner(s) of the property located at _____, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) _____, _____, 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

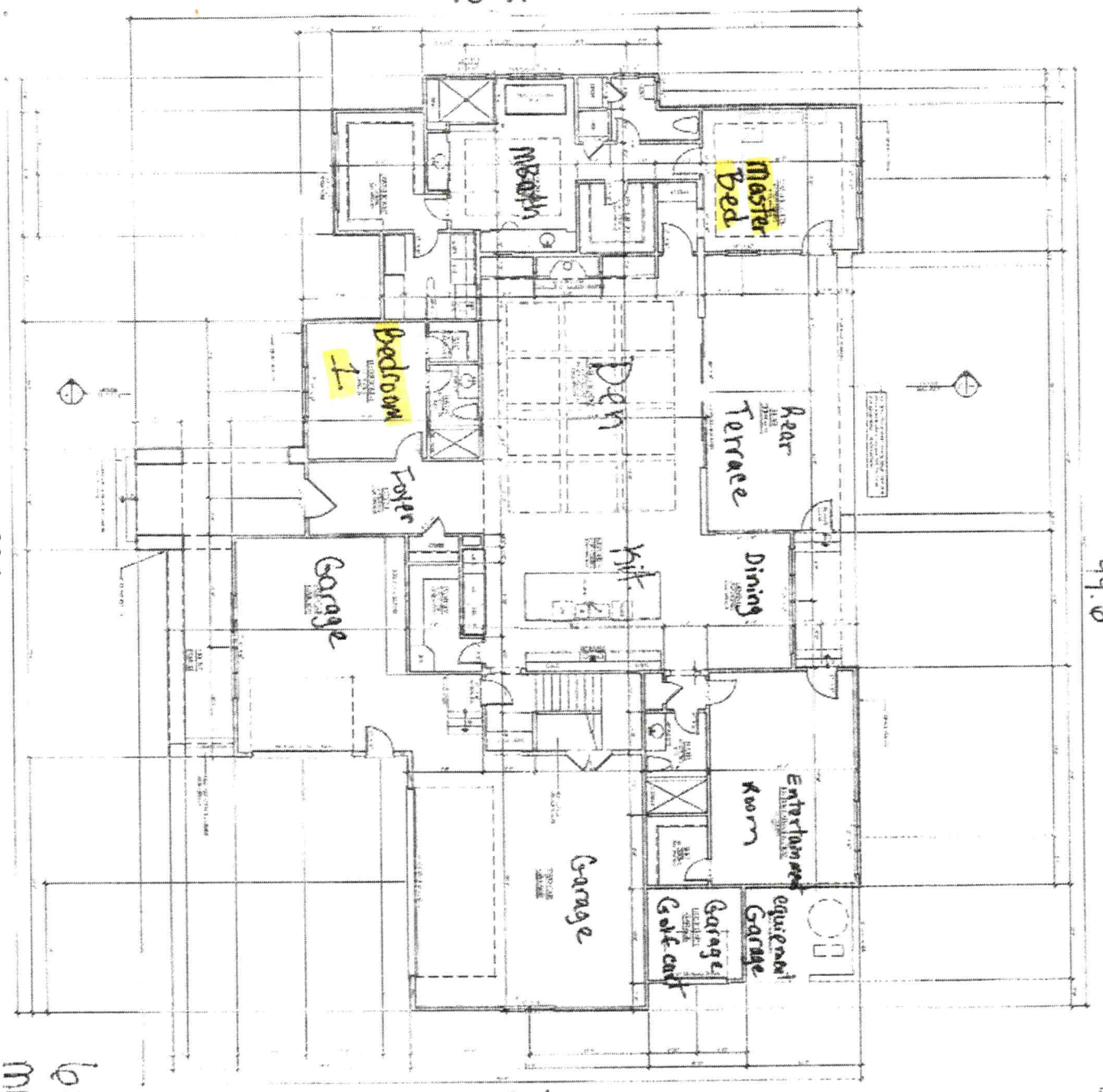
I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

_____ 11-10-20
Signature of Owner(s) Date

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

Statesville - Environmental Health
ronda.hart@[illegible]redell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

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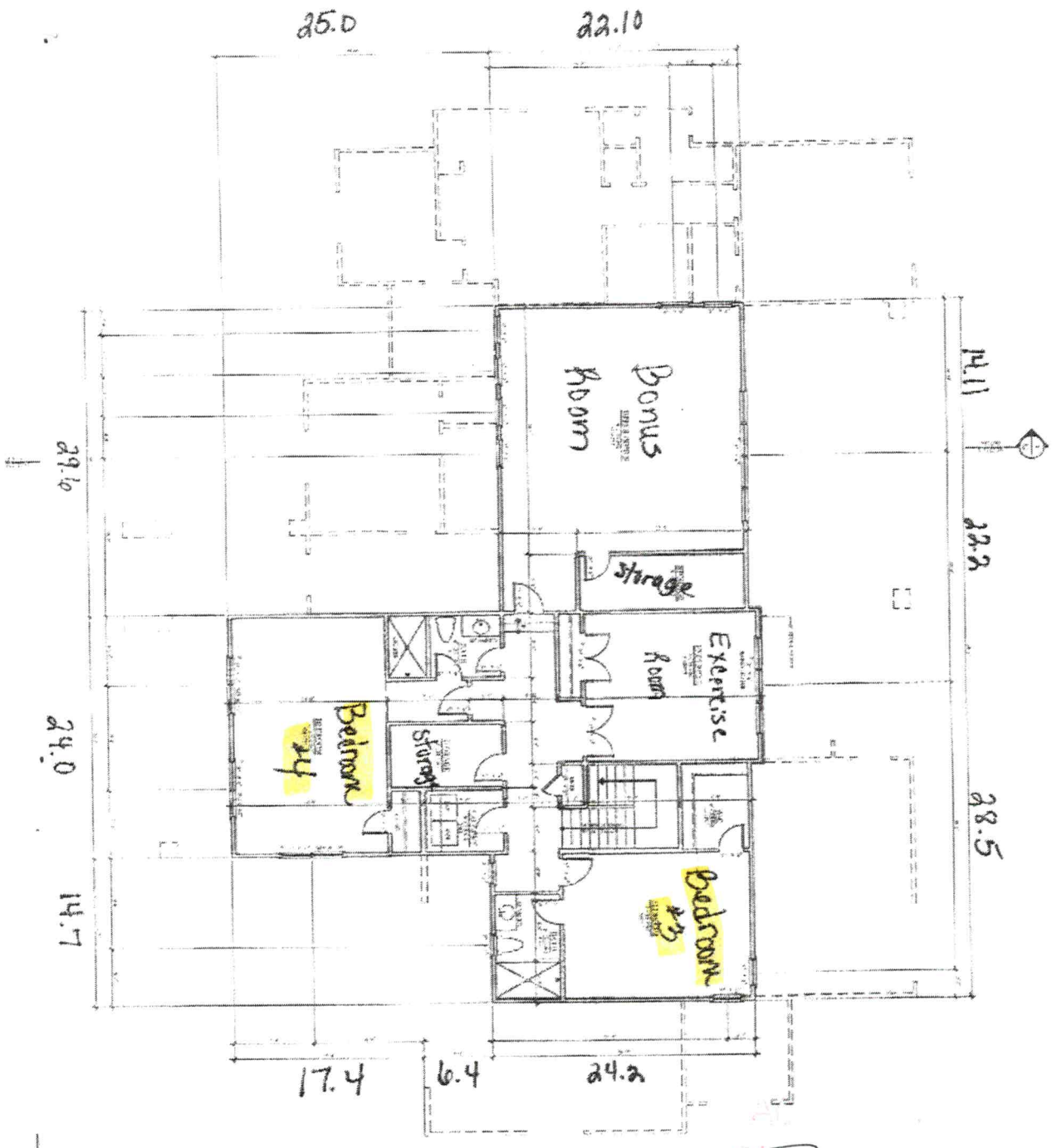


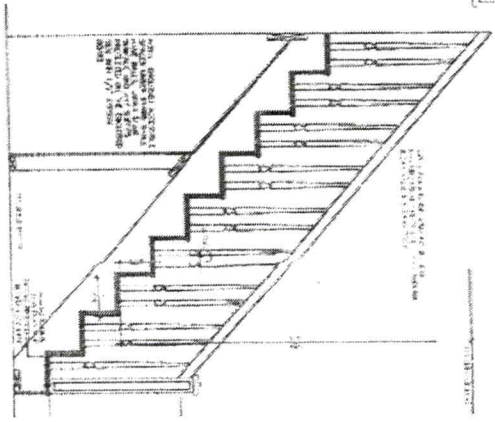
72.2

Taylor Family
657 Kemp Rd.
main Floor

Plans
Date 12/31/2020
Patrick J Bylett Date 12/30/2020

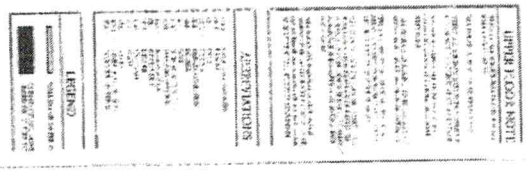
Taylor Family





Taylor family
1057 Main Rd.
Upper floor

Plan Of
ONL
Date 12/3/2020
Patrick J Ryan III Date 12/30/2020



IREDELL COUNTY · NC

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

APPLICATION NUMBER
308589 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4626176535.000	657 KEMP RD	Iredell County

Owner Information	Applicant Information
Name: AMBRON TREVOR L+GINGER L	Name: PAUL TAYLOR
Address:	Address: 202 GANNETT RD MOORESVILLE, NC 28117
Phone:	Phone: (704)605-1287

Use Requested	Zone Code
Single Family Dwelling	RR

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

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: 06/26/2020

Signature of Owner/Contractor

Permit Number	308589	TOTAL FEES:	$77.25