BELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT # 17992

APPLICANT: Douglas Addis

PIN # 4626207949

SITE ADDRESS: 151 Barber Loop, Mrsvl 28117

APPLICANT ADDRESS: 108 Deacon Ponds Ct.

SITE DIRECTIONS: Brawley School Rd. TR Chuckwood TL Barber Loop

PHONE: 704-660-9177 ALT. PHONE: N/A

SUBDIVISION: CL & T

SECTION: 7 LOT # 160 LOT AREA: 0.68acrs DESIGN FLOW: 480gpd L.T.A.R.: 0.3

Septic Tank	1000	(gal)	STB	444	Date	7-1-16	☑ New System	☐ Repair	☐ Expansion
Pump Tank	1000	(gal)	PT	283	Date	6-28-16	System Type: I II III IV V VI		
Pump Make	Gould	Model	WE0712HH		Serial #		System Description: Low Pressure PPBPS		
# Nitrification Fields	1	# Lines	3		Linear Ft:	270	Repair System Description: Low Pressure PPBPS		
Trench Width	24"	Max. Trench Bottom Depth	36"		Gravel Depth	N/A	Maintenance Agreement Required: ☑ YES ☐ NO		
							☐ GRAVITY ☑ PRESSURE		

☑ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing

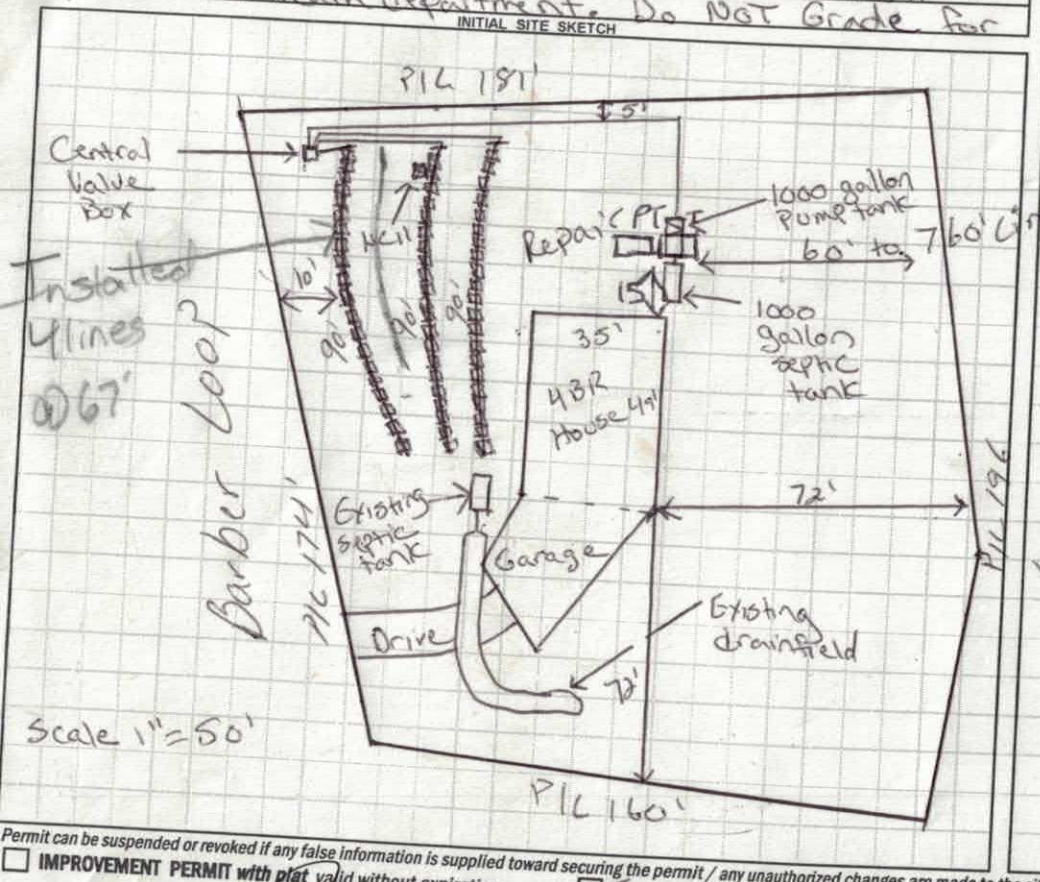
No. Bedrooms 4 No. Persons ____ No. Employees ____ ☑ Crawl Space

Water Supply: ☑ Private ☐ Public ☐ Community

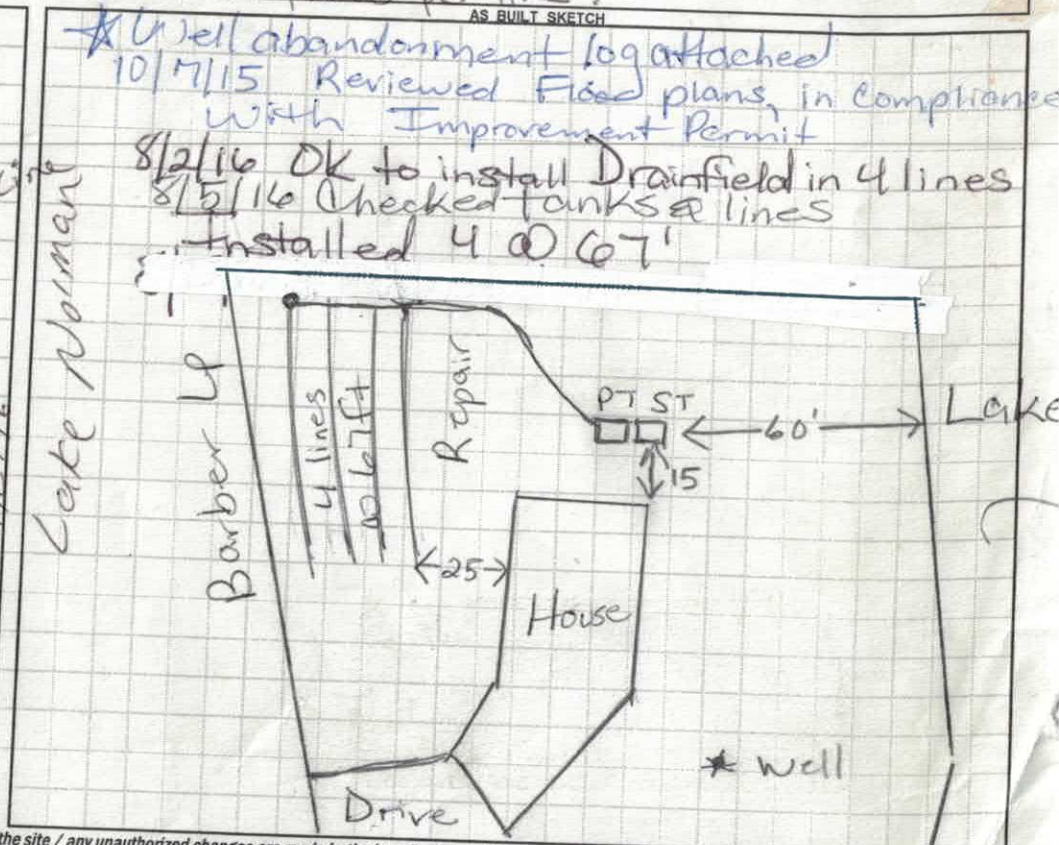
☐ Basement w/o plumbing

Comments / Conditions: IMPROVEMENTS ONLY! Submit floor plan & properly abandon existing well prior to issuance of CA. Apply for well abandonment permit @ health department. Do NOT Grade for house pad. Install a Low Pressure PPBPS system on contour with parallel distribution as shown below. Pump & crush existing septic tank. Instal 21 panels per line.

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: Rebecca L. Bean Doug Addis agent for Date: 3-14-13

IMPROVEMENT PERMIT by: Justin Henderson Date: 3-11-13

AUTHORIZATION TO CONSTRUCT by: Date: 10/7/15

Installed by: Kevin Hallman

OPERATION PERMIT by: Date: 2/16/17

Existing System Inspected by:

DENR/DEH

ON-SITE WASTEWATER SECTION

Sheet 1 of 1
PROPERTY ID #: 4626207949
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Douglas Addis
ADDRESS: 108 Deacon Ponds Ct.
PROPOSED FACILITY: 4BR SFD
PROPOSED DESIGN FLOW (.1949): 480gpd
LOCATION OF SITE: 153 Barber Loop
WATER SUPPLY: • Private • Public • Well • Spring • Other N/A
EVALUATION METHOD: • Auger Boring • Pit • Cut
TYPE OF WASTEWATER: • Sewage • Industrial Process • Mixed

APPLICATION DATE 2-6-13
DATE EVALUATED: 3-8-13
PROPERTY SIZE: 0.68 acres
PROPERTY RECORDED: Yes

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	9% slight HS	0-5	SC SBK	Fr SS/SP Mod SE	>48"	>48"	>48"	>48"	PS 0.3
		5-36	C SBK	Fi SS/SP Mod SE					
		36-48	CL WSBK	Fr Mod SE					
2	3% slight HS	0-15	SC SBK	Fr SS/SP Mod SE	>48"	>48"	>48"	>48"	PS 0.3
		15-42	C SBK	Fi SS/SP Mod SE					
		42-48	CL SBK	Fr Mod SE					
3	10% slight HS	0-12	SC SBK	Fr Mod SE	>48"	>48"	>48"	>48"	PS 0.3
		12-37	C SBK	Fi Mod SE					
		37-48	CL WSBK	Fr Mod SE					
4	10% slight HS	0-10	SC SBK	Fr Mod SE	>48"	>48"	>48"	>48"	PS 0.3
		10-36	C SBK	Fi Mod SE					
		36-48	CL SBK	Fr Mod SE					

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

OTHER FACTORS (.1946): N/A
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Justin Shendelson & David Hinson
OTHER(S) PRESENT: N/A

COMMENTS: N/A

LEGEND

use the following standard abbreviations

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

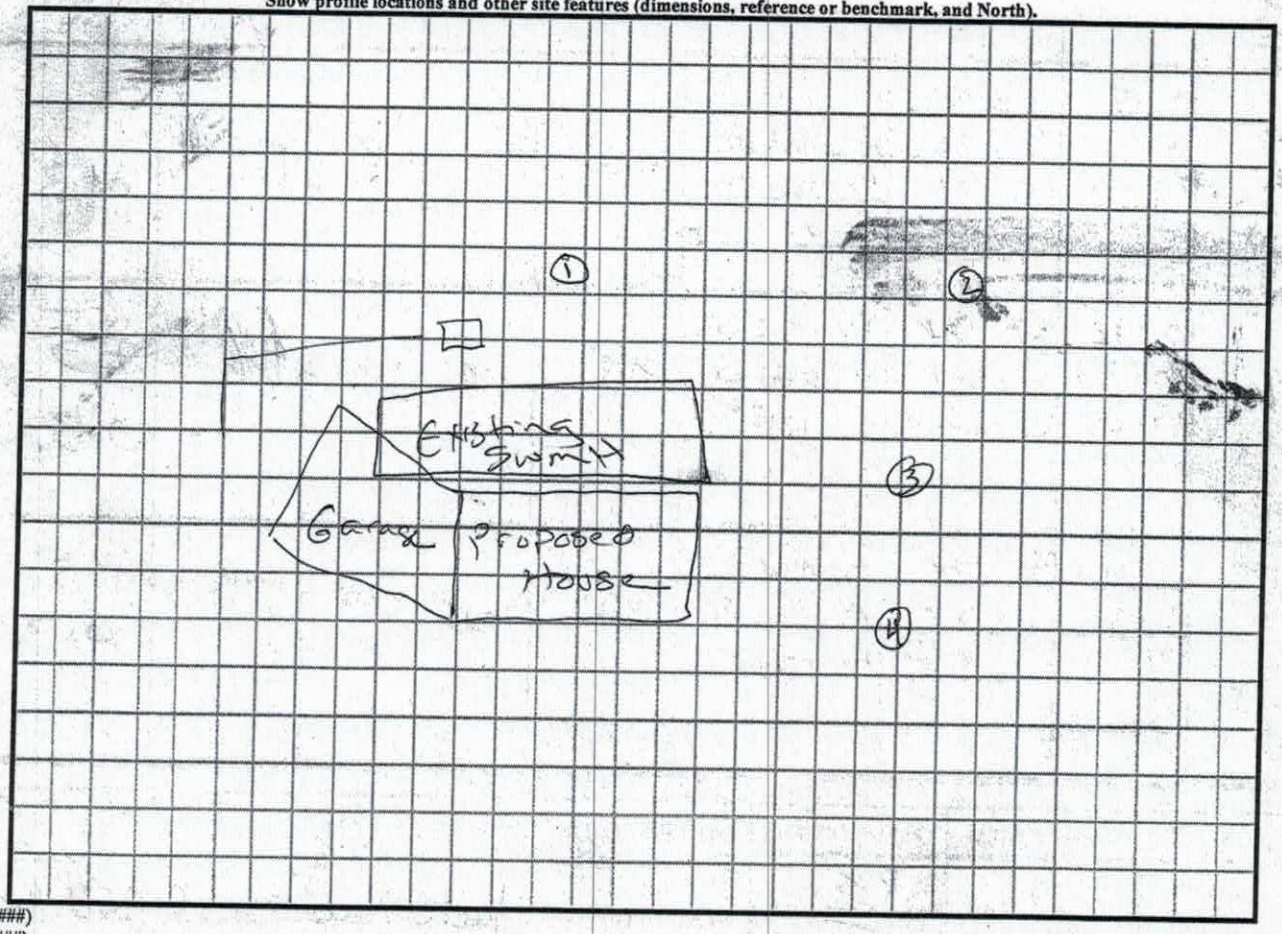
NOTES

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).



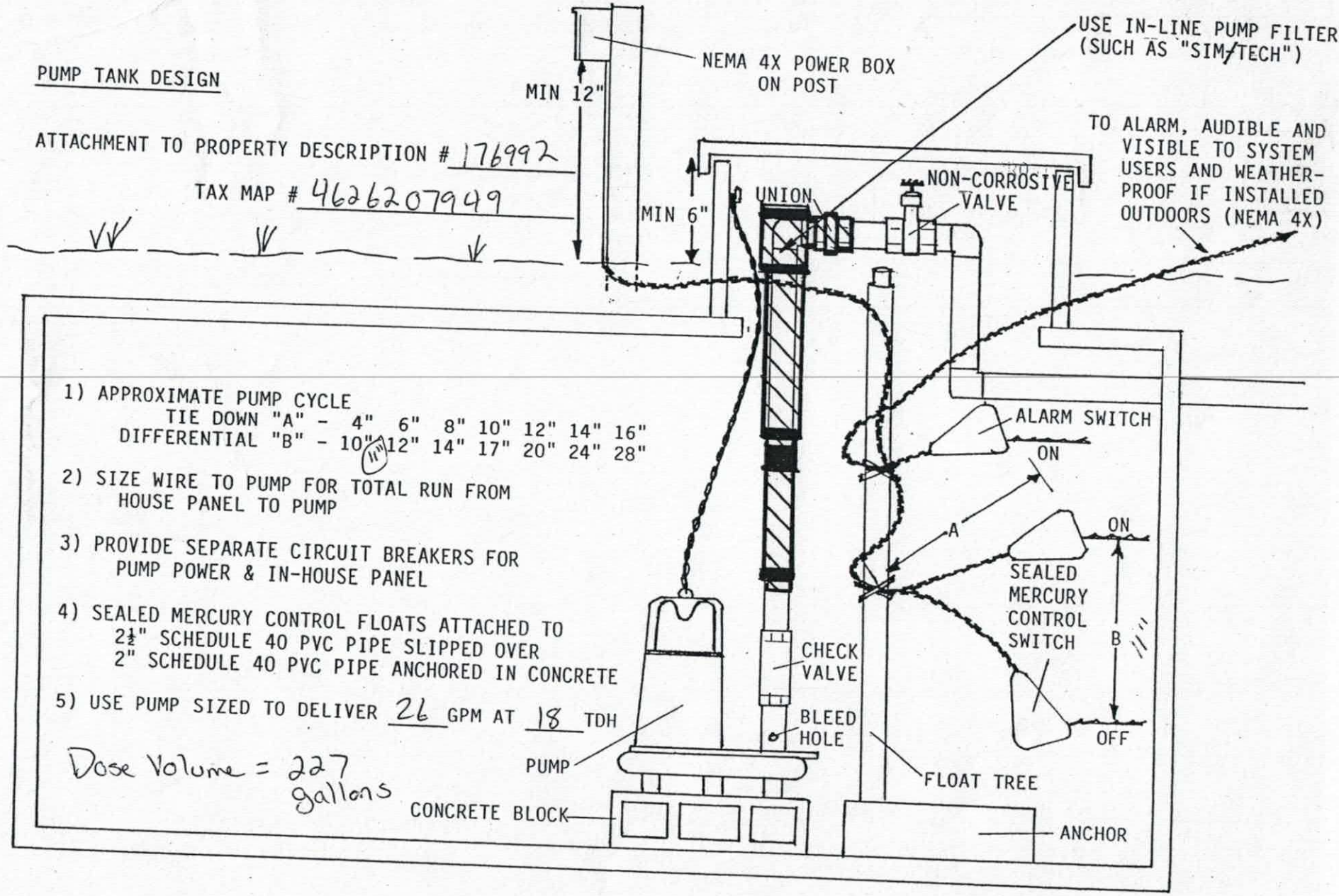
DENR (######)
Review (#####)

Supply line
Well
Elevation 6'

PUMP TANK DESIGN

ATTACHMENT TO PROPERTY DESCRIPTION # 176992

TAX MAP # 4626207949



1) APPROXIMATE PUMP CYCLE
   TIE DOWN "A" - 4" 6" 8" 10" 12" 14" 16"
   DIFFERENTIAL "B" - 10" 11" 12" 14" 17" 20" 24" 28"

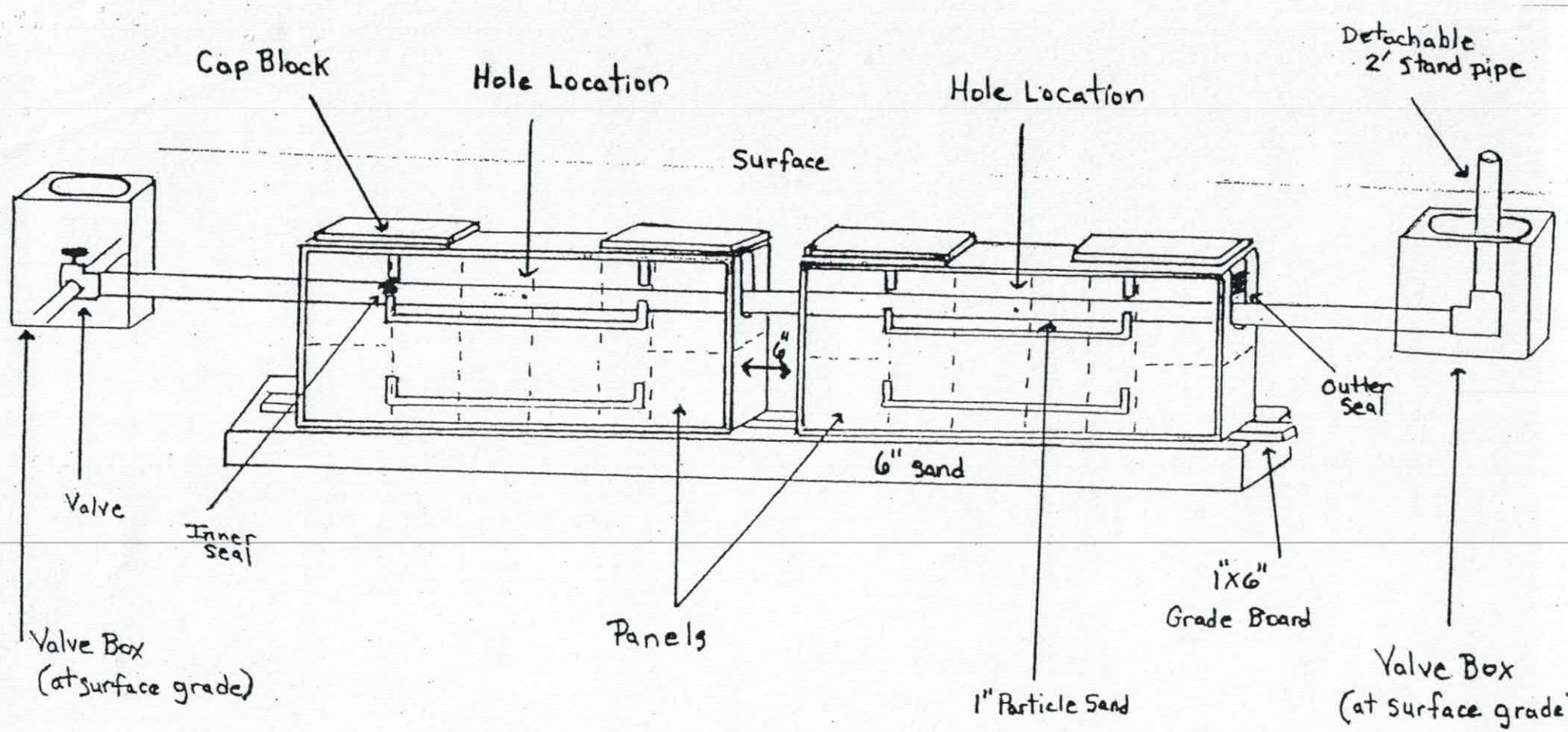
2) SIZE WIRE TO PUMP FOR TOTAL RUN FROM HOUSE PANEL TO PUMP

3) PROVIDE SEPARATE CIRCUIT BREAKERS FOR PUMP POWER & IN-HOUSE PANEL

4) SEALED MERCURY CONTROL FLOATS ATTACHED TO
   2½" SCHEDULE 40 PVC PIPE SLIPPED OVER
   2" SCHEDULE 40 PVC PIPE ANCHORED IN CONCRETE

5) USE PUMP SIZED TO DELIVER 26 GPM AT 18 TDH

Dose Volume = 227 gallons

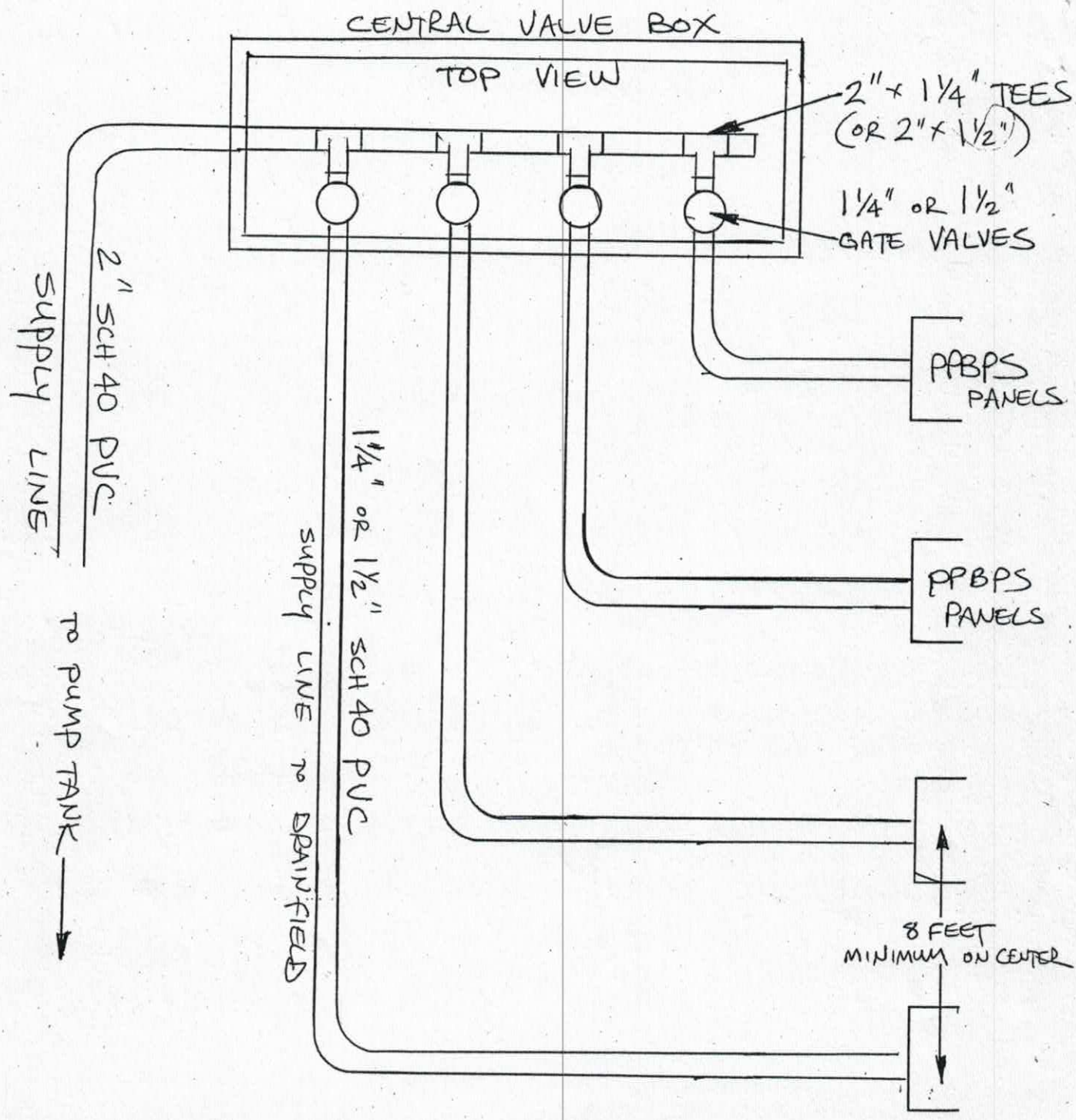


Pressure Dosed PPBPS

of panels 63.
Size holes 5/32". 1 hole per panel.
Approximate amount of sand needed 45 tons.
100lbs. of partical sand per 8 panels.
Sidewalls raked and limed.
GPM 26.
TDH 18.

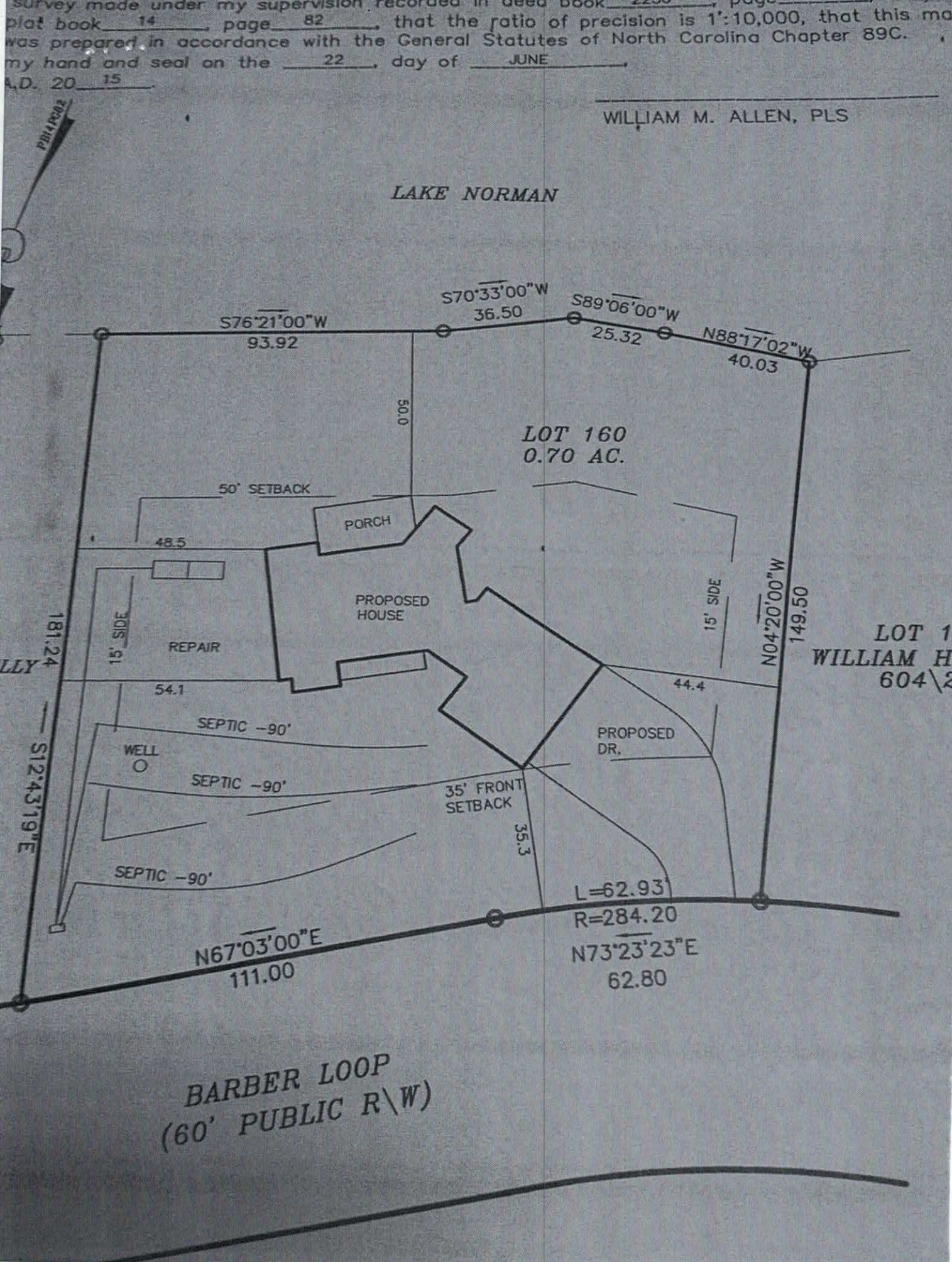
Comments

CENTRAL VALVE BOX EXAMPLE SKETCH



survey made under my supervision recorded in deed book ____, page ____, plat book 14, page 82, that the ratio of precision is 1':10,000, that this map was prepared in accordance with the General Statutes of North Carolina Chapter 89C. my hand and seal on the 22, day of JUNE, A.D. 20 15.

WILLIAM M. ALLEN, PLS



IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

Application For:

( ) Septic Improvement Permit ( ) New Well Permit (✓) Authorization to Construct ( ) Well Repair Permit ( ) Existing System Inspection ( ) Well Abandonment ( ) 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

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

Applicant Information:

Applicant Name: WHITLEY CONSTRUCTION Address: 127 HUNTERS POINTE 704 Phone: 658-9251

Owner Name: _____ Address: _____ Phone: _____

Property Information:

Street Address: 151 BARBEE LOOP

Subdivision Name: CL+T Section/Phase: 7 Lot Number: 160

Driving Directions: BRAWLEY SCHOOL Right on Chuckwood LEFT on BARBEE LOOP 5 lot on LEFT

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

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 6
( ) Swimming Pool
( ) Other Addition/Structure: _____

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

Non-Residential Site Development:

Type of Business: _____
Square Footage of Building: _____
Maximum Number of Employee: _____
Maximum Number of Seats/Beds/Other: _____

Water Supply:

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

Desired Septic System Type: *(you may rank in order of preference)*

( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other: _____

Year existing system installed: _____

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

10/3/15
DATE

02-06-13 $0.00 PD #5777.25 @ Steve M/S
$777.25 Spring

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
Application for IMPROVEMENT PERMIT , AUTHORIZATION TO CONSTRUCT, or EXISTING SYSTEM INSPECTION

(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 ___ Authorization To Construct ___ BOTH ___ 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

* In process – will bring to site to meet inspector

3. Applicant Information:

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Douglas W. Addis	108 Deacons Pond Ct. Mooresville, NC 28117	704.660.9177	704.388.7536
Owner Name	Mailing Address	Home Phone #	Alternate Phone #
Dwight McMasters	700 McNabb Ct, Matthews, NC 28105	704.847.3594	

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
147 Barber Loop, Mooresville, NC 28117	Clift Sec 7	Lot # 160

Driving Directions: Brawley School Rd., right on Chuckwood, left on Barber Loop, lot will be on left (Allen Tate sign & mobile home on property)

* There is a current septic system to use w/mobile; no permit can be located

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

(✓) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
( ) Repair To Failing Septic System
(✓) Other Client not ready to build yet, but we want to verify property will perc for a 4 bedroom home - client may look at options of putting a pool

Maximum Number of Bedrooms 4
Maximum Number of Occupants 4
If Expansion, Current Number of Bedrooms ___

(✓) Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) Basement w/Plumbing?
( ) Basement w/out Plumbing?

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

6. Proposed Water Supply:

(✓) 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)*

( ) Alternative (✓) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other ___ ( ) No Preference

8. 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. industry) 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.

9. Signature: Douglas W. Addis — 1.28.2013

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

TITLE REPORT

Dedmon Surveys
3704 NC Highway 16 North
Denver, NC 28037
704/483/4908

This is to certify that on February 9, 2013, I made or directly supervised an accurate survey on behalf of Douglas W. Addis & wife Lisa B. Addis, situated in Davidson Twsp , Iredell County, North Carolina, briefly described as Lot #160 of Plat Book 14 Page 82 and shown on the accompanying survey entitled: PHYSICAL SURVEY I made careful inspection of said premises and any improvements located thereon at the time of the survey. I further certify as to the existence or nonexistence of the following at the time of the survey:

1. Right of ways, old highways, abandoned roads, lane or driveways across said property:
   (X) none visible () shown on plat

2. Easements: drainage, utility, etc..., across said property
   () none visible () shown on plat
   (x) 10' drainage & utility easement along all property lines

3. Springs, streams, rivers, ponds or lakes located on, bordering on or running through said property:
   () none visible (X) shown on plat

4. Cemeteries or burial grounds located on said property:
   (X) none visible ( ) shown on plat

5. Utility poles or overhead lines located on said property:
   () none visible () shown on plat

6. Joint driveways, walkways, party walls, porches, steps, roofs or garages used in common:
   (x) none visible () shown on plat

7. Encroachments, overhanging projections or disputed boundaries:
   () none visible (x) shown on plat
   Explanation: Fence in road R/W as shown

8. Physical evidence of boundary lines:
   (X) corner markers found or set at corners as shown on plat
   ( ) other (explain) _____

9. Is subject property improved? (X) yes ( ) no

If yes,

Building Features:

() brick () vinyl () stone
( ) aluminum () wood () stucco
( ) cement fiber (X)Mobile home

(x) one story () two story
( ) split level () 1.5 story
() basement ( ) under construction
() other: 2.5 story

10. Indication of new construction, alterations or repairs?
(x) no () yes (explain)
( ) new home is 100%____ complete.
( ) home is under construction and foundation is 100% complete.

11. Changes or proposed changes in street lines:
(X) none visible ( ) shown on plat

13. Does property abut a dedicated public road or right-of-way?
(X) yes, see plat ( ) no ( ) unknown if road is public

14. Has the surveyor been provided a copy of any restrictive covenants that govern said property?
( ) yes (x) no
If yes, do the improvements use and occupancy comply with them?
( ) yes ( ) no

15. Is any portion of the property located in a special flood hazard area as determined by the National Flood Insurance Program (NFIP)?

(X) yes, see plat for details () no

Does the home or business structure lie within a 100 year flood plain?
( ) yes (x) no

Professional Land Surveyor: David C. Poovey PLS # 3762

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, Douglas W. Addis, am the legal owner(s) of the property located at 151 Barber Loop, Mooresville, NC 28117, identified as PIN (Parcel Identification Number) 4626207949, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) John Whitley, Whitley Construction, 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.

Douglas W. Addis 07.13.2015
Signature of Owner(s) Date

Jennifer C. Whitley 7-13-2015
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

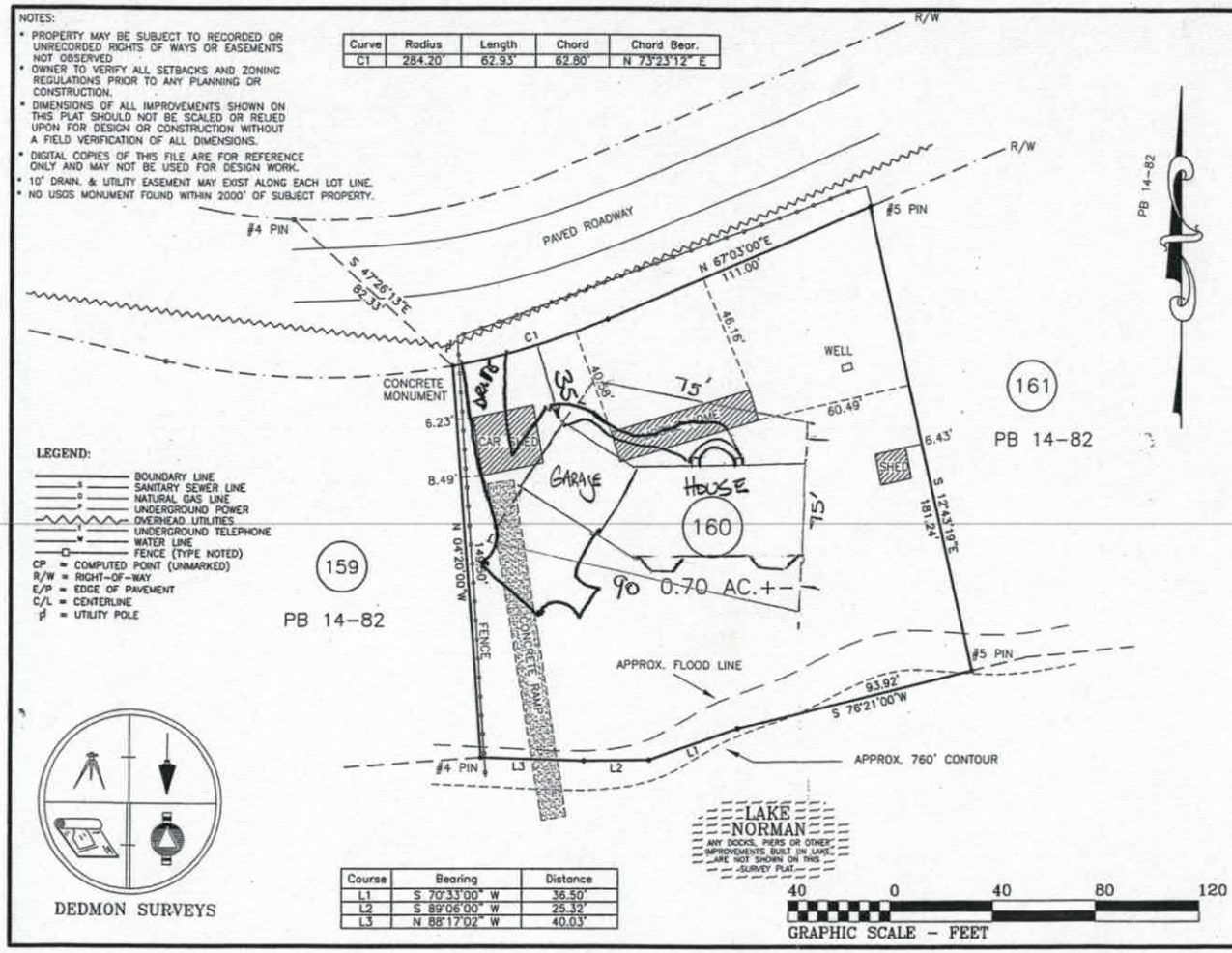
Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

ADDIS

NOTES:

- PROPERTY MAY BE SUBJECT TO RECORDED OR UNRECORDED RIGHTS OF WAYS OR EASEMENTS NOT OBSERVED.
- OWNER TO VERIFY ALL SETBACKS AND ZONING REGULATIONS PRIOR TO ANY PLANNING OR CONSTRUCTION.
- DIMENSIONS OF ALL IMPROVEMENTS SHOWN ON THIS PLAT SHOULD NOT BE SCALED OR RELIED UPON FOR DESIGN OR CONSTRUCTION WITHOUT A FIELD VERIFICATION OF ALL DIMENSIONS.
- DIGITAL COPIES OF THIS FILE ARE FOR REFERENCE ONLY AND MAY NOT BE USED FOR DESIGN WORK.
- 10' DRAIN. & UTILITY EASEMENT MAY EXIST ALONG EACH LOT LINE.
- NO USGS MONUMENT FOUND WITHIN 2000' OF SUBJECT PROPERTY.

Curve	Radius	Length	Chord	Chord Bear.
C1	284.20'	62.93'	62.80'	N 73°23'12" E



LEGEND:

- BOUNDARY LINE
- SANITARY SEWER LINE
- NATURAL GAS LINE
- UNDERGROUND POWER
- OVERHEAD UTILITIES
- UNDERGROUND TELEPHONE
- WATER LINE
- FENCE (TYPE NOTED)

CP = COMPUTED POINT (UNMARKED)
R/W = RIGHT-OF-WAY
E/P = EDGE OF PAVEMENT
C/L = CENTERLINE
= UTILITY POLE

Course	Bearing	Distance
L1	S 70°33'00" W	36.50'
L2	S 89°06'00" W	25.32'
L3	N 88°17'02" W	40.03'

40 0 40 80 120

GRAPHIC SCALE - FEET

DEDMON SURVEYS

PHYSICAL SURVEY
FOR

DOUGLAS W. ADDIS & WIFE LISA B. ADDIS

BEING LOT #160 IN SECT. 7 OF CRESCENT LAND & TIMBER
@ 153 BARBER LOOP, MOORESVILLE, NC

DATE: 2-19-13
SCALE: 1" = 40'

DB: 628 PG: 943
DB: PG:
PB: 14 PG: 82

DAVIDSON TOWNSHIP
IREDELL COUNTY, NC

DEDMON SURVEYS

CHUCK POOVEY, PLS #3762
ROBERT DEDMON, PLS #3899

3704 NC HIGHWAY #16 NORTH
P.O. BOX 494 - DENVER, NC 28037
PHONE: 704/483/4908
FAX: 704/483/2170

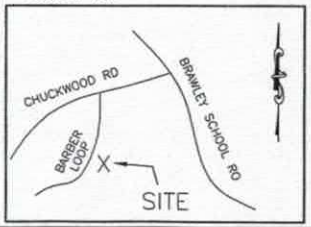
NORTH CAROLINA PROFESSIONAL SEAL L-3762 LAND SURVEYOR DAVID C. POOVEY

"I CERTIFY THIS PLAT WAS DRAWN FROM AN ACTUAL SURVEY AND IS CORRECT AND TRUE TO THE BEST OF MY KNOWLEDGE."

PROFESSIONAL LAND SURVEYOR — 3762 LICENSE NO.

SURV. BY: CP	DRAWN: CP	JOB# BARBER

VICINITY MAP

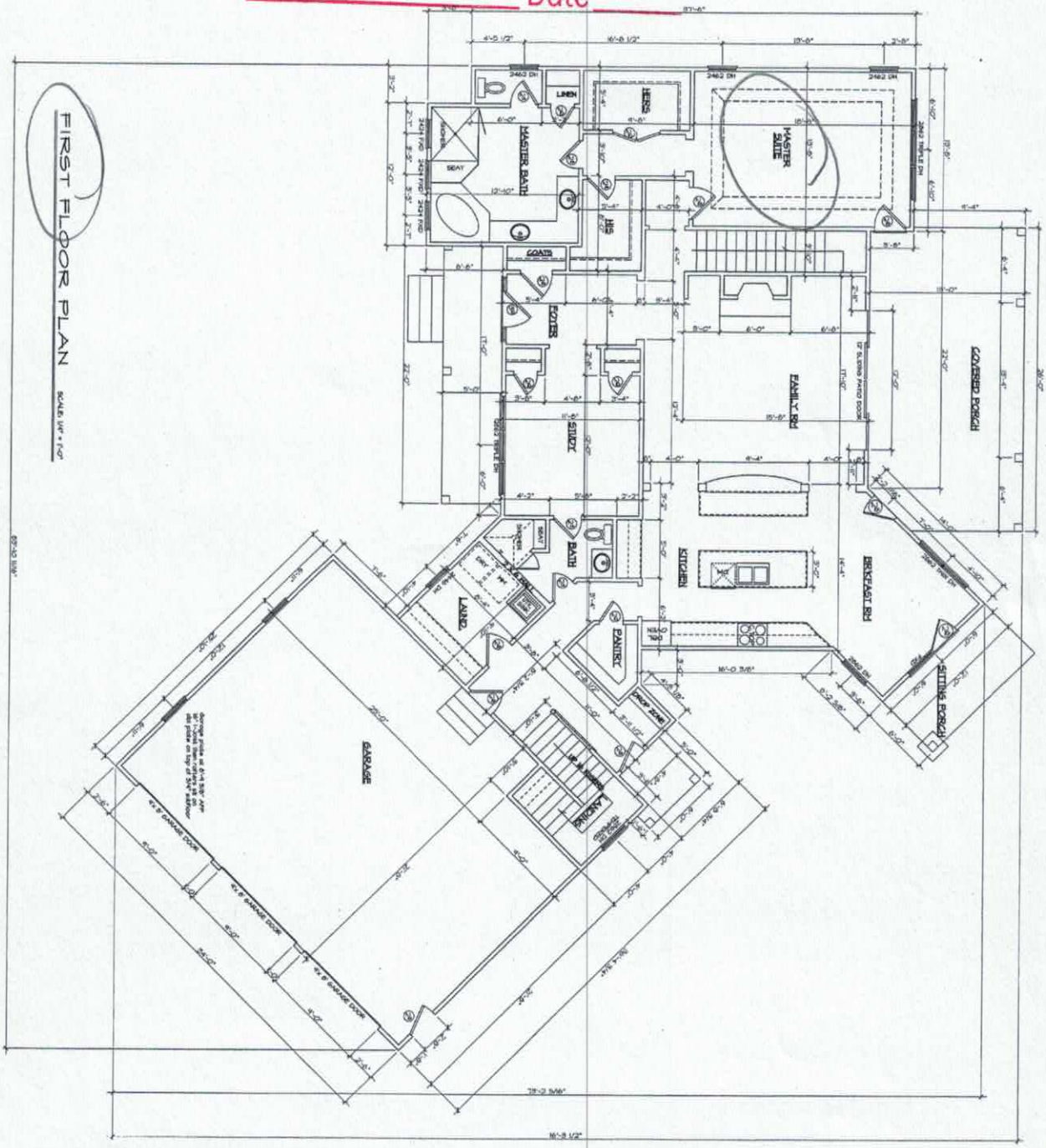


CHECKED BY: VPA	
DATE: 6/30/15	AREAS
1ST. FLOOR HEATED	2043
2ND. FLOOR HEATED	652
**TOTAL HEATED AREA	3686
GARAGE	624
BASEMENT	1200
***TOTAL AREA	3717

Acknowledgement Of Plans Submittal ONLY!

_____ Date _____

_____ Date _____



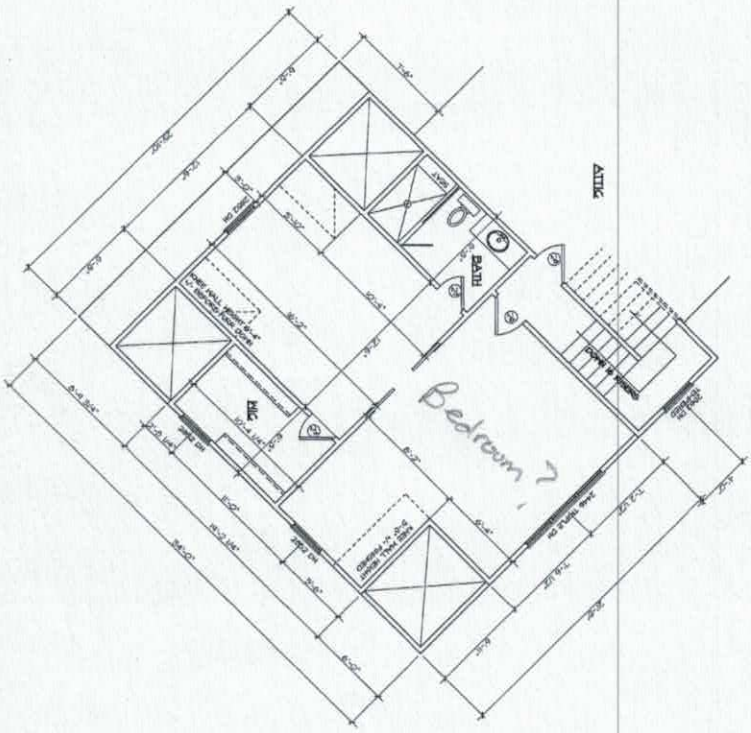
PLAN NUMBER : "THE_ADDIS" FIRST_FLOOR_PLAN	VPA DESIGN	WHITLEY & COMPANY HARRISBURG N.C. 28075

Sheet: 2 | Checked: *** | Drawn: VPA | Scale: 1/4" | Date: 2/22/15

Acknowledgement Of
Plans Submittal ONLY!

_____ Date_____

_____ Date_____



Sheet: 3	Checked: ***	Drawn: VPA	Scale: 1/4"=1'	Date: 2/22/15

PLAN NUMBER :
"THE_ADDIS"
SECOND_FLOOR_PLAN

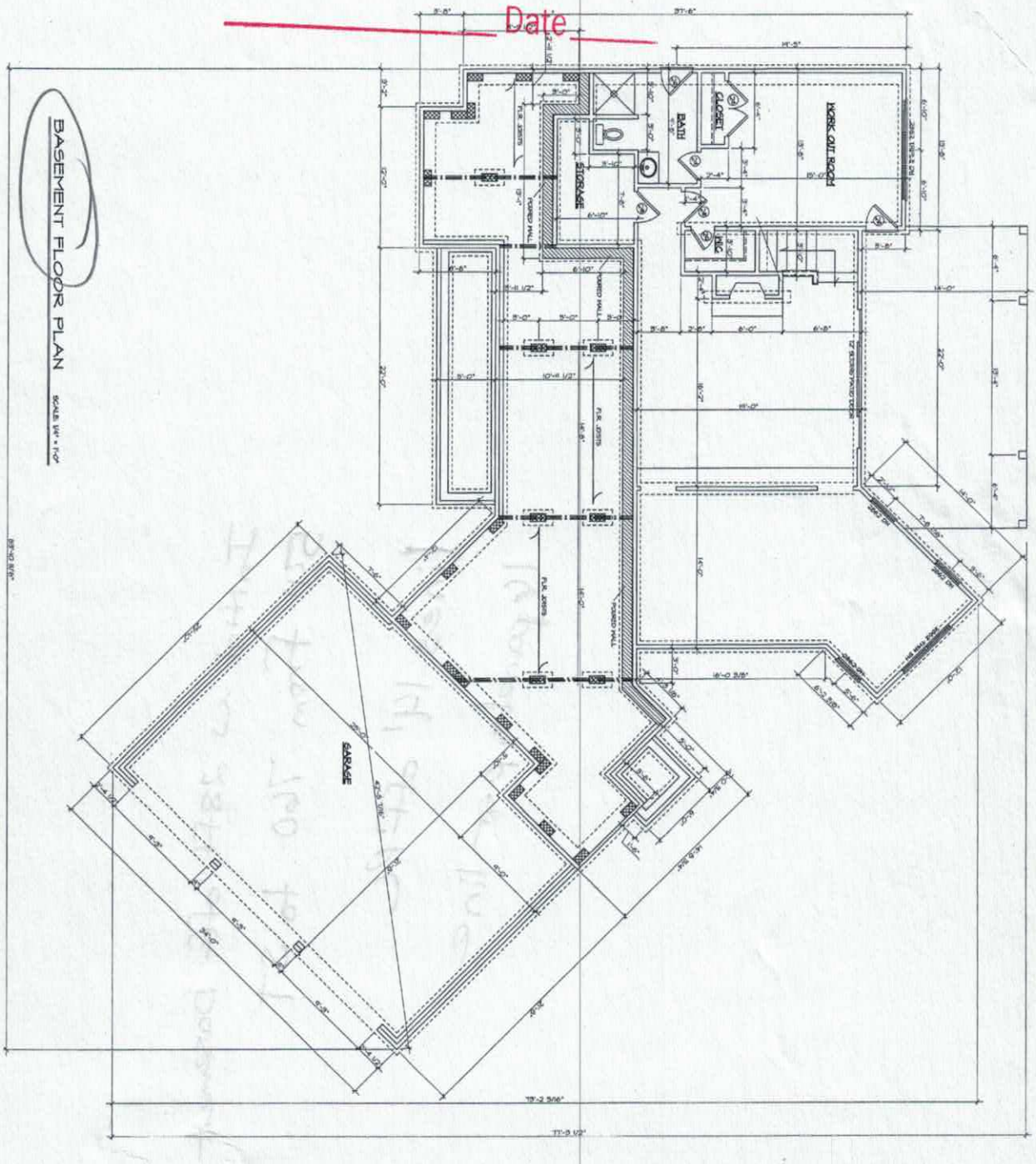
VPA DESIGN

WHITLEY & COMPANY
HARRISBURG N.C. 28075

Acknowledgement Of
Plans Submittal ONLY!

_____ Date _____

_____ Date _____



IB	Date: 2/22/15	PLAN NUMBER : "THE_ADDIS" BASEMENT_PLAN	VPA DESIGN	WHITLEY & COMPANY HARRISBURG N.C. 28075
	Scale: 1/4"=1'			
	Drawn: VPA			
	Checked: ***			
	Revised:			

CLT
57 Lot 160

1. Well Contractor Information:

Chris Morgan
Well Contractor Name (or well owner personally abandoning well on his/her property)

3572
NC Well Contractor Certification Number

Morgan Well & Pump, INC.
Company Name

2. Well Construction Permit #: 176992
List all applicable well permits (i.e. County, State, Variance, Injection, etc.) if known

3. Well use (check well use):

Water Supply Well:
- ☐ Agricultural
- ☐ Geothermal (Heating/Cooling Supply)
- ☐ Industrial/Commercial
- ☐ Irrigation
- ☐ Municipal/Public
- ☐ Residential Water Supply (single)
- ☑ Residential Water Supply (shared)

Non-Water Supply Well:
- ☐ Monitoring
- ☐ Recovery

Injection Well:
- ☐ Aquifer Recharge
- ☐ Aquifer Storage and Recovery
- ☐ Aquifer Test
- ☐ Experimental Technology
- ☐ Geothermal (Closed Loop)
- ☐ Geothermal (Heating/Cooling Return)
- ☐ Groundwater Remediation
- ☐ Salinity Barrier
- ☐ Stormwater Drainage
- ☐ Subsidence Control
- ☐ Tracer
- ☐ Other (explain under 7g)

4. Date well(s) abandoned: 9/25/15

5a. Well location:

Whitley Construction
Facility/Owner Name

Facility ID# (if applicable)

151 Barber Loop, Mooresville NC 28117
Physical Address, City, and Zip

Iredell
County

Parcel Identification No. (PIN)

5b. Latitude and longitude in degrees/minutes/seconds or decimal degrees:
(if well field, one lat/long is sufficient)

35.550921 N -80.941201 W

CONSTRUCTION DETAILS OF WELL(S) BEING ABANDONED
Attach well construction record(s) if available. For multiple injection or non-water supply wells ONLY with the same construction/abandonment, you can submit one form.

6a. Well ID#: _____

6b. Total well depth: 30 (ft.)

6c. Borehole diameter: 20 (in.)

6d. Water level below ground surface: 15 (ft.)

6e. Outer casing length (if known): 30 (ft.)

6f. Inner casing/tubing length (if known): N/A (ft.)

6g. Screen length (if known): N/A (ft.)

WELL ABANDONMENT DETAILS

7a. Number of wells being abandoned: 1
For multiple injection or non-water supply wells ONLY with the same construction/abandonment, you can submit one form.

7b. Approximate volume of water remaining in well(s): 75 (gal.)

FOR WATER SUPPLY WELLS ONLY:

7c. Type of disinfectant used: Granulated Chlorine

7d. Amount of disinfectant used: 302

7e. Sealing materials used (check all that apply):
- ☐ Neat Cement Grout
- ☐ Sand Cement Grout
- ☐ Concrete Grout
- ☐ Specialty Grout
- ☐ Bentonite Slurry
- ☐ Bentonite Chips or Pellets
- ☑ Dry Clay
- ☐ Drill Cuttings
- ☐ Gravel
- ☐ Other (explain under 7g)

7f. For each material selected above, provide amount of materials used:

1.5 yds.

7g. Provide a brief description of the abandonment procedure:

Removed top 3 feet of casing
Filled well with red Dry clay
from 30ft to 3ft below surface.
Pour loin of concrete on top.

8. Certification:

Chris Morgan
Signature of Certified Well Contractor or Well Owner

9/28/15
Date

By signing this form, I hereby certify that the well(s) was (were) abandoned in accordance with 15A NCAC 02C .0100 or 2C .0200 Well Construction Standards and that a copy of this record has been provided to the well owner.

9. Site diagram or additional well details:
You may use the back of this page to provide additional well site details or well abandonment details. You may also attach additional pages if necessary.

SUBMITTAL INSTRUCTIONS

10a. For All Wells: Submit this form within 30 days of completion of well abandonment to the following:

Division of Water Resources, Information Processing Unit,
1617 Mail Service Center, Raleigh, NC 27699-1617

10b. For Injection Wells: In addition to sending the form to the address in 10a above, also submit one copy of this form within 30 days of completion of well abandonment to the following:

Division of Water Resources, Underground Injection Control Program,
1636 Mail Service Center, Raleigh, NC 27699-1636

10c. For Water Supply & Injection Wells: In addition to sending the form to the address(es) above, also submit one copy of this form within 30 days of completion of well abandonment to the county health department of the county where abandoned.

Iredell County
Planning & Enforcement
349 N. Center St. PO Box 788
Statesville, NC 28687
704-878-3113

Zoning Permit

Permit Number: 176992ZO

Printed: 2/6/2013

Master #: 176992

Associated Permits:
176992ZO Zoning

Applicant

Name: DOUGLAS W & LISA B ADDIS
Address: 108 DEACON PONDS COURT
MOORESVILLE, NC 28117

Phone: 704-660-9177
7245-27952

Parcel

Parcel Number: 4626207949.000
Address: 153 BARBER LOOP
MOORESVILLE, NC 28117
Subdivision: CL&T
Directions to Parcel: BRAWLEY SCH RD; R ONTO CHUCKWOOD; L BARBER LP, LOT ON LEFT (SW MH ON SITE).

Zoning: RR
Township: 1700
Area:
Lot(s): 160

Owners

Name: DWIGHT E & BARBARA MCMASTERS
Address: 700 MCNABB COURT
MATTHEWS, NC 28105

Phone: 704-847-3594

Contractors

Contractor Type: Building
Name: Owner
Address:

Fees and Receipts:

Number	Description	Amount
FEE-275143-07	Zoning - Permit Application	$75.00
FEE-275144-07	Technology Fee - Planning	$2.25
FEE-275145-07	Environmental Health - Gravity System	$500.00

$ PAID
Ck# 2022 2-06-13

Total Fees:	**$577.25**
	$577.25
Total Receipts:	**$577.25**

REC-142425-07

Conditions

Date: **Status:** **Code:**

Condition Description:

Condition Comments:

Permit Information:

Max Built Upon Area:	
Watershed:	WSIV-CA
Flood Zone:	No
Set Backs:	LAKE SIDE=50' ROAD SIDE=35' LEFT=15' RIGHT=15'
Minimum Lot Size:	30000
Minimum Lot Width:	
Min # Parking Spaces:	
Land Use Permitted:	Yes
Community Sewer:	No
Site Plan Reviewed:	
Staff:	
Zoning Permit:	Yes
Septic Typet:	Existing System
Proposed Use:	Single Family
Property Recorded:	Yes
Community Water:	No
Provider:	
Provider:	
Date:	
# of Stories:	0
# of Bedrooms:	4
# of Units in Building	0

Site Plan Conditions:

Zoning Permit Comments: SW MH AND SEPTIC CURRENTLY ON SITE