ICHD–ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 227852

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

PIN # 4626-21-1092

APPLICANT/OWNER: Craig Corks Builders Inc. | APPLICANT ADDRESS: 459 Yadkin Valley Rd. Advance, NC

SITE ADDRESS: 175 Barber Loop Mooresville, NC 28115 | PHONE: 336-345-3057 | ALT. PHONE

SITE DIRECTIONS: BSR → Chuckwood → Barber Loop → Lot on left | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: CL+T | SECTION: 7 | LOT # 157 | LOT AREA: 0.62 acres | DESIGN FLOW: 360 GPD | L.T.A.R.: 0.1

Septic Tank	See plan	(gal)	STB	347	Date	9-21	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	
Pump Tank	See plan	(gal)	PT	306	Date		System Description:	TSII Advanced Pretreatment Drip			
Pump Make	Orenco	Model	PF300511 ½HP		Serial #		Repair System Description:	TSII Advanced Pretreatment Drip			
# Nitrification Fields	1	# Lines	See plan	Linear Ft	See plan		Maintenance Agreement Required:	☒ YES	☐ NO		
Trench Width	Per Plan	Trench Bottom Depth(Low side)		Per Plan	Gravel Depth	—		☐ GRAVITY	☒ PRESSURE		

☒ Residence	No. Bedrooms	3	Water Supply
☐ Business	No. Persons	6	☒ Private
☐ Other	No. Employees		☐ Public
☐ Slab	☒ Crawl Space		☐ Community
☐ Basement w/plumbing			☐ Basement w/o plumbing

Comments / Conditions: AdvanTex AX20 RTUV-3 432653
As of 5/6/2020: House already built. Well already drilled.

INITIAL SITE SKETCH

See attached engineer design by Donald Munday dated 4/17/2020 from Piedmont Designs Associates.

This permit is issued pursuant to Section 11 . (C) of S.L. 2018-114 using the signed and sealed LSS Evaluation by:

Adrian Pruett

LSS # 1314 Dated 4/23/2020

AS BUILT SKETCH

5/8/2020
[165 (Blanked)
[228 (installed)

-Installed substantially as permitted (redrawn)
-The existing 165' of drip tubing in the ground that was not functioning properly has been blanked/turned off and not put into operation. EP

- Maintenance Agreement reviewed 5/18/2020 SP

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 Rec'd | Date: 5.6.2020 | Installed by: Water Management (Sid Gaskins)

IMPROVEMENT PERMIT by: Tom Shuck | Date: 5/6/2020 | OPERATION PERMIT by: Tom Shuck | Date: 5/18/2020

AUTHORIZATION TO CONSTRUCT by: Tom Shuck | Date: 5/6/2020 | 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.

IREDELL COUNTY HEALTH DEPARTMENT
JANE HINSON, RN BSN MS
HEALTH DIRECTOR

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

ACKNOWLEDGEMENT OF ACCEPTANCE OF PERMIT DESIGN AND CONDITIONS

Any permit requiring a signature must have this form signed by the property owner or their authorized agent. Once this form is signed and returned to Environmental Health an official copy of the permit will be emailed to the email that you provide.

I, Martin Craig Carter, am the legal owner or the agent of the property located at 175 Barbee Loop, identified as PIN(Parcel Identification Number) 4626-21-1092, located in Iredell County, North Carolina.
Permit # 227852.

I do hereby agree to the permit design and the conditions of this permit.

M C Carter 5-6-2020
Signature of Owner/Authorized Agent Date

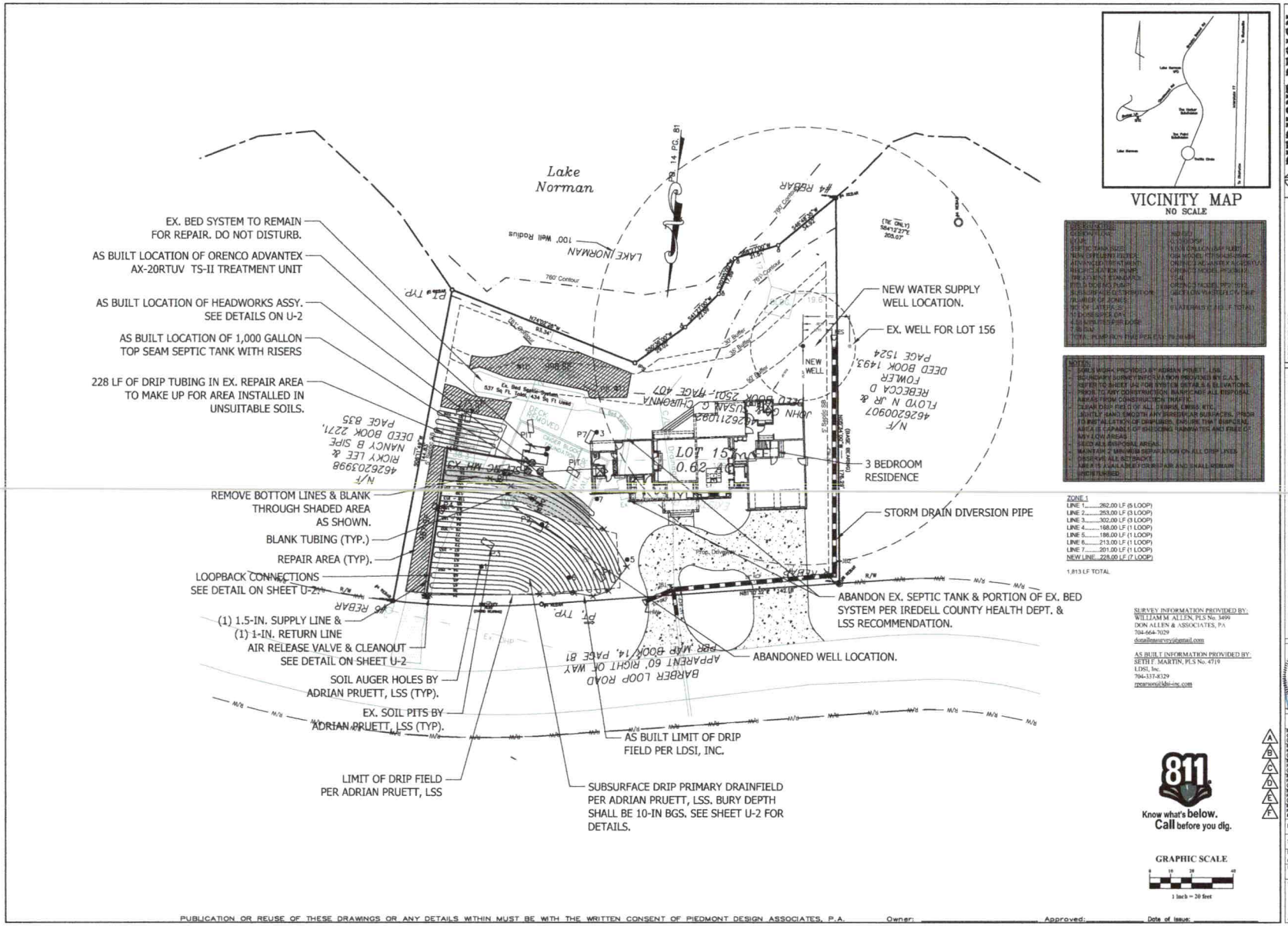
[signature] 5-6-2020
Signature of Witness Date

Martin Carter 1229@Gmail.com
email

Central Office (Health Dept.)
318 Turnersburg Hwy
Statesville, NC 28625
704 878-5300

Mooresville – Environmental Health
610 E. Center Avenue
Mooresville, NC 28115
704 660-3625

Statesville - Environmental Health
349 N. Center Street
Statesville, NC 28677
704 878-5305 x3456



VICINITY MAP
NO SCALE

SEPTIC SYSTEM DESIGNATION:	
NO. OF BEDROOMS:	3 BEDROOM
SEPTIC TANK SIZE:	1,000 GALLON (SEPTIC)
TANK EFFLUENT FILTER:	ORENCO MODEL FTF1648-RSMC
ADVANCED TREATMENT:	ORENCO ADVANTEX AX-20RTUV
RECIRCULATION PUMP:	ORENCO MODEL PF0407
TREATMENT STANDARD:	CLASS I
PIPE & BOX RECIRCULATION:	SCH 40 PVC
SUBSURFACE DISTRIBUTION:	GREEN LOW WATER FLOW DRIP
NUMBER OF ZONES:	7
NUMBER OF LATERALS:	1 LATERALS X 455 F. TOTAL
TOTAL DOSE LPD:	
4 DAILY PEAK FLOW:	
TOTAL PUMP RUN TIME PER DAY:	

NOTES:
- PUMP & MONITORING PROVIDED BY ADRIAN PRUETT, LSS.
- AS-BUILT SURVEY INFO FOR U-1 WORK PROVIDED BY D.A.S.
- REFER TO SHEET U-2 FOR SYSTEM DETAILS & ELEVATIONS.
- PRIOR TO ANY CONSTRUCTION, MANEUVER ALL EQUIPMENT AWAY FROM CONSTRUCTION TRAFFIC.
- CLEAN DRIP FIELD OF ALL DEBRIS, LIMBS, ETC.
- LIGHTLY RAKE SMOOTH ANY SIGNIFICANT RUTS OR PITS.
- PRIOR TO INSTALLATION OF DRIPLINES, ENSURE THAT SUBSOIL AREA IS CAPABLE OF SHEDDING RAINWATER AND FREE OF ANY LOW AREAS.
- SEED ALL DISTURBED AREAS.
- MAINTAIN 2' MINIMUM SEPARATION ON ALL DRIP LINES.
- INSPECT ALL NETBOXES.
- AREA IS AVAILABLE FOR REPAIR AND SHALL REMAIN UNDISTURBED.

ZONE 1
LINE 1.....262.00 LF (5 LOOP)
LINE 2.....253.00 LF (3 LOOP)
LINE 3.....302.00 LF (3 LOOP)
LINE 4.....168.00 LF (1 LOOP)
LINE 5.....186.00 LF (1 LOOP)
LINE 6.....213.00 LF (1 LOOP)
LINE 7.....201.00 LF (1 LOOP)
NEW LINE...228.00 LF (7 LOOP)

1,813 LF TOTAL

SURVEY INFORMATION PROVIDED BY:
WILLIAM M. ALLEN, PLS No. 3499
DON ALLEN & ASSOCIATES, PA
704-664-7029
donallensurvey@email.com

AS BUILT INFORMATION PROVIDED BY:
SETH T. MARTIN, PLS No. 4719
LDSI, Inc.
704-337-8329
rpearson@ldsi-inc.com

811 Know what's below. Call before you dig.

GRAPHIC SCALE
0 10 20 40
1 inch = 20 feet

PUBLICATION OR REUSE OF THESE DRAWINGS OR ANY DETAILS WITHIN MUST BE WITH THE WRITTEN CONSENT OF PIEDMONT DESIGN ASSOCIATES, P.A.

Owner: _____ Approved: _____ Date of Issue: _____

PIEDMONT DESIGN Associates, P.A.
Suite 160, Westfield Center, 173 Mid Rivers Drive
St. Peters, Missouri 63376 (314) 922-1717
Phone (704) 664-7029 (704) 664-7129 www.pdapa.com

PREPARED FOR:
JOHN CHIRONNA
107 WILLOW BEND COURT
MOORESVILLE, NC 28117
(203) 909-2185

SEPTIC SYSTEM SITE PLAN
3 BEDROOM RESIDENCE
175 BARBER LOOP
MOORESVILLE, IREDELL COUNTY, NORTH CAROLINA

REVISIONS	BY
A REV. PER COMMENT BY DENR (L. ANGEL) 01/16/18	DMD
B REV. PER COMMENT BY DENR (M. GRAHAM) 01/19/18	DMD
C REV. PER COMMENT PER CLIENT REQUEST 01/21/18	DMD
D REV. PER COMMENT PER CLIENT REQUEST 01/31/18	DMD
E REV. PER COMMENT PER CLIENT REQUEST 02/1/18	DMD
F REV. DRAWINGS STAMPED FOR AS BUILT BY LSS & INSTALLER (4/15/20)	DMD

Date: 2/8/18
Scale: 1" = 20 Ft
Drawn: DMD
Checked: DLM
Project: 2018-01-05-EC
Job: 2018-01-05-EC
Sheet: U-1
4/15/20
Sheets

I:\Engineering\1-Projects\2018\2018-01-05_Barber Lp Drfld\dwg\U-1 Rev 031720.dwg, 4/15/2020 10:24:26 AM, ddecaron

CAROLINA SOIL & SEPTIC CONSULTING, PLLC

P.O. BOX 1703, Mooresville, NC 28115
(704) 202-5791 adrianpruett@yahoo.com
NC Licensed Soil Scientist, SC Professional Soil Classifier,
Certified Septic System Operator, Licensed Septic Installer,
Certified Septic Inspector

April 23, 2020
Project Name: 17058

Iredell County Environmental Health Dept.
Att.: Heath Snow
610 E. Center Ave.
Mooresville, NC 28115

Re: The LSS Evaluation is being submitted pursuant to and meets the requirements of SL 2018-114 Section 11.(c) for 175 Barber Loop, Mooresville, NC 28117

Dear Mr. Snow:

Carolina Soil & Septic Consulting, PLLC (CS&SC) evaluated the soil on the subject property June 1, 2017 and submitted soil descriptions under SL 2018-114 Section 11.(c) for the original engineered septic system design by Piedmont Design Associates of Mooresville, NC on February 12, 2019. A redraw and relocation of installed drip irrigation lines is required do to installation outside of the originally approved soil area, partial installation of the initial drip system into designated repair area and shortening of lines within areas that were intended to be used as initial system area but will now be used as repair. Installation of the system was performed by Water Management of North Carolina, LLC or Lenoir, NC. A revised engineered septic system design has been submitted by Piedmont Design Associates of Mooresville that falls within the originally evaluated initial and repair system soil area by CS&SC along with utilizing evaluated soil application rates of 0.1 gpd/sqft.

Sincerely,

Adrian L. Pruett



CAROLINA SOIL & SEPTIC CONSULTING, PLLC

P.O. BOX 1703, Mooresville, NC 28115
(704) 202-5791 adrianpruett@yahoo.com
NC Licensed Soil Scientist, SC Professional Soil Classifier,
Certified Septic System Operator, Licensed Septic Installer,
Certified Septic Inspector

April 27, 2020
Project Name: 17058

SESSION LAW 2018-114, SECTION 11.(c)/ HOUSE BILL 374, SECTION 11.(c) AUTHORIZATION FORM

Carolina Soil & Septic Consulting has been contracted to evaluate soil and submit a septic system proposal to Iredell (county) on behalf of John Chironna (owner/applicant) for the property located at 175 Barber Lp., Mooresville, 28117 / 4626211092 (address/PIN).

The Licensed Soil Scientist (LSS) Evaluation attached to this application is to be used to produce design and construction features for permitting in accordance with SL 2018-114 Section 11.(c).

By completing this form, signing and dating it you agree that the permit issued by Iredell (county) will fall under the above referenced law.

Owner/Owners Legal Representative: John Chironna
Mailing Address: 107 Willow Bend Ct Mooresville NC 28117
Telephone Number: 203 919 2185
Email Address: johnnyjets22@yahoo.com

John Chironna
Signature of Owner/Owners Legal Rep.

4/27/20
Date

The LSS Evaluation is being submitted pursuant to and meets the requirements of SL 2018-114 Section 11.(c)

PROPERTY ID #: 4626211092
COUNTY: Iredell

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

OWNER: John and Susan Chironna
ADDRESS: 107 Willow Bend Ct., Mooresville, NC 28117
PROPOSED FACILITY: Res. PROPOSED DESIGN FLOW (.1949): 360 gpd
LOCATION OF SITE: 175 Barber Lp., Mooresville, NC 28117
APPLICATION DATE
DATE EVALUATED: 6-1-17
PROPERTY SIZE: 0.62 ac
PROPERTY RECORDED: Yes
WATER SUPPLY: X Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: X Auger Boring X Pit ☐ Cut
TYPE OF WASTEWATER: X 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	
P 1	LSS 5%	0-5	DB CL WFSBK	FR SS SP SEXP	-COM YB, FEW CHR 2 32"-39" -FEW YB -FEW YB MINERALS	60"	N/A	N/A	PS 0 25 GPD/SQFT TO 32"
		5-8	RB C COMP	VFI S P SEXP					
		8-39	R C MMABK	FI S P SEXP					
		39-49	R C MMABK	FI S P SEXP					
		49-60	R C WFSBK	FI S P SEXP					
P 2	LSS 7%	0-7	B SCL GR	FR SS SP SEXP	-FEW MN -COM MN, FEW YB VERTICAL VEINS, FEW CHR 2 >32" IN VERTICAL VEINS -FEW MN, FEW CHR 2 & YB VERTICAL VEINS -FEW YB & CHR 2 VERTICAL VEINS	55"	N/A	N/A	PS 0 25 GPD/SQFT TO 32"
		7-28	BR C WFABK/SBK	FI S P SEXP					
		28-33	BR C WFABK	FI S P SEXP					
		33-46	R C MFABK	FI S P SEXP					
		46-55	R C MMABK	FI S P SEXP					
P 3	LSS 5%	0-10	COMP		-FEW MN -COM MN, FEW YB -COM MN, FEW YB -FEW MN, FEW YB	53"	N/A	N/A	PS 0 25 GPD/SQFT
		10-19	R C MFABK	FI S P SEXP					
		19-28	R C MFABK	FI S P SEXP					
		28-44	BR C WFSBK	FR S P SEXP					
		44-53	R C MFABK	FI S P SEXP					
P 4	LSS 6%	0-8	GRAVEL		-FEW COM MN, FEW YB, WATER BEDDING IN # 27 -COM MN, FEW YB, FEW CHR 2 AROUND ROOTS 35	58"	N/A	N/A	PS 0 25 GPD/SQFT TO 35"
		8-12	R C COMP						
		12-22	R C MFABK	FI S P SEXP					
		22-33	R C MFABK	FI S P SEXP					
		33-58	BR C WFSBK	FI S P SEXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	TS-I DRIP	TS-II DRIP & OLD BED MIX
Site LTAR	0.1	0.1

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

COMMENTS

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

PROPERTY ID #: 4626211092
DATE OF EVALUATION: 6-1-17
COUNTY: IREDELL

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
P 5	LSS 10%	0-10	GRAVEL		-COM MN, FEW YB, FEW CHR 2 AROUND ROOTS >48"	53"	N/A	N/A	PS 0.25 GPD/SQFT TO 48"
		10-27	R C MMABK	FI S P SEXP					
		27-53	BR C WFABK/SBK	FI S P SEXP					
P 6	LSS 5%	0-12	RB CL WFSBK	FR SS SP SEXP	-FEW MN, FEW YB, COM YB/B AROUND ROOTS -FEW MN, FEW YB, FEW CHR 2 >39", WATER RUNNING IN HOLE @ 30"	44"	N/A	N/A	PS 0.225 GPD/SQFT TO 39"
		12-21	R C MFABK	FI S P SEXP					
		21-44	R C MMABK	FI S P SEXP					
P 7	LSS 8%	0-13	B CL WFSBK	FR SS SP SEXP	-FEW QUARTZ, FEW YB, YB AROUND ROOTS -FEW SAP	51"	N/A	N/A	PS 0.25 GPD/SQFT
		13-34	R C MFABK	FI S P SEXP					
		34-44	R C MFABK	FI S P SEXP					
		44-51	R C WFABK	FI S P SEXP					
B 1	LSS 2%	0-4	B SCL GR	FR SS SP SEXP	-FEW Y, COM YB, FEW MN, FEW CHR 3&4 -COM MN, COM YB, FEW CHR 3&4 -COM YB, FEW CHR 3&4, CHR 2 >56"	60"	N/A	N/A	PS 0.225 GPD/SQFT TO 56"
		4-30	R C MFSBK/ABK	FI S P SEXP					
		30-44	R C WFSBK/ABK	FI S P SEXP					
		44-60	R C WFABK	FI S P SEXP					
B 2	LSS 8%	0-6	B SCL GR	FR SS SP SEXP	-FEW MN -FEW YB, FEW MN -FEW SAP, FEW YB, FEW CHR 2 >60	61"	N/A	N/A	PS 0.25 GPD/SQFT TO 60"
		6-24	R C MFSBK	FI S P SEXP					
		24-36	R C MFSBK	FI S P SEXP					
		36-61	R C MFABK	FI S P SEXP					

COMMENTS:



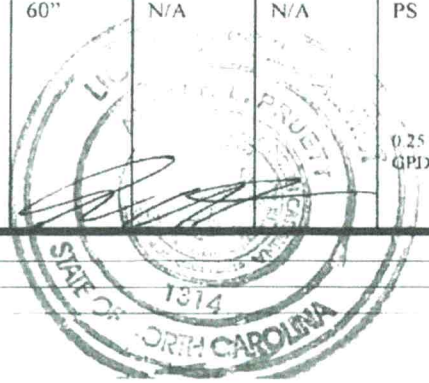
SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

PROPERTY ID #: 4626211092
DATE OF EVALUATION: 6-1-17
COUNTY: IREDELL

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
B 3	LSS 8%	0-12	FILL		N/A	48"	N/A	N/A	PS
		12-16	RB C WFSBK	FR SS SP SEXP					
		16-36	R C WFABK/SBK	FI S P SEXP					
		36-48	R C WFSBK/ABK	FI S P SEXP	-FEW SAP				0.3 GPD/SQFT
B 4	LSS 2% NEXT TO HOUSE	0-6	FILL		N/A -FEW MN	48"	N/A	N/A	PS
		6-15	R C WFSBK	FI S P SEXP					
		15-30	R C WFABK	FI S P SEXP	-FEW/COM YB, FEW CHR 3&4, FEW MN				
		30-48	R C WFABK	FI S P SEXP	-FEW YB, FEW MN				0.225 GPD/SQFT
B 5	LSS 10%	0-4	B CL WFSBK	FR SS SP SEXP	N/A	60"	N/A	N/A	PS
		4-10	RB CL WFSBK	FR SS SP SEXP					
		10-26	R C MFABK	FI S P SEXP	-QUARTZ VEIN -COM YB, FEW CHR 3&4				
		26-34	R C MFABK	FI S P SEXP					0.25-0.225 GPD/SQFT
		34-40	R C MFABK	FI S P SEXP	-FEW SAP				
		40-48	R C WFSBK/ABK	FI S P SEXP	-FEW SAP				
		48-60	R CL WFSBK	FI S P SEXP	-COM SAP				
B 6	LSS 6%	0-10	FILL		N/A	62"	N/A	N/A	PS
		10-22	R C WFSBK	FI S P SEXP					
		22-36	R C MFABK	FI S P SEXP	-FEW SAP, FEW YB				
		36-47	R C MMABK	FI S P SEXP	-FEW YB 2.5Y 6/3 ONE CHR 2 # 45 FEW SAP				0.25 GPD/SQFT TO 45"
		47-52	R C MFABK	FI S P SEXP	-FEW MICA FEW SAP				
		52-62	R CL WFSBK	FR SS SP SEXP	-FEW MICA FEW SAP				
B 7	LSS 5%	0-4	FILL		N/A	60"	N/A	N/A	PS
		4-8	B SCL GR	FR SS SP SEXP					
		8-20	R C WFSBK	FI S P SEXP					
		20-32	R C MFABK	FI S P SEXP	-FEW YB				0.25 GPD/SQFT
		32-60	R C MF/WFABK/SBK	FI S P SEXP	-FEW/COM SAP FEW MICA				

COMMENTS:



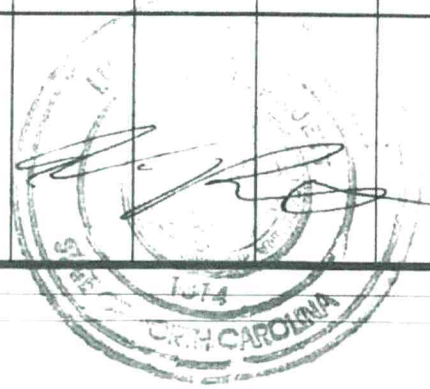
SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

PROPERTY ID #: 4626211092
DATE OF EVALUATION: 6-1-17
COUNTY: IREDELL

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
B 8	LSS 8%	0-10	GRAVEL		N/A	62"	N/A	N/A	PS
		10-25	R C WFSBK	FI S P SEXP	-FEW MN, 2" COMP.				
		25-54	R C WFSBK	FI SS SP SEXP	-COM MN, FEW FEW YB				
		54-62	R C MFABK	FI S P SEXP	-FEW YB				0.25 GPD/SQFT
B 9	LSS 12%	0-7	GRAVEL		N/A	61"	N/A	N/A	PS
		7-15	R C MFABK	FI S P SEXP	-COM MN				
		15-30	R C WFSBK	FR SS SP SEXP					
		30-57	RB C WFSBK	FR SS SP SEXP	-MANY MN, FEW YB @ 57"				0.25 GPD/SQFT
		57-61	R C MFABK	FI S P SEXP	-FEW YB, FEW SAP				
B 10	LSS 9%	0-12	R C MFSBK	FI S P SEXP	N/A	48"	N/A	N/A	PS
		12-30	RB C WFSBK	FR SS SP SEXP	-COM MN				
		30-48	R C MFSBK	FI S P SEXP	-FEW YB				
									0.25 GPD/SQFT
B 11	LSS 10%	0-9	FILL		FEW MN	50"	N/A	N/A	PS
		9-16	B SCL/CL WFSBK	FR SS SP SEXP					
		16-22	R C WFSBK	FR SS SP SEXP	-FEW MN, FEW YB				
		22-35	R C MFABK	FI S P SEXP	-COM YB				0.225 GPD/SQFT
		35-43	R C MMABK	FI S P SEXP	-COM YB, FEW CHR 2, FEW SAP				
		43-50	R CL WFSBK	FR SS SP SEXP	-COM SAP				

COMMENTS:



DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH

ROY COOPER
GOVERNOR

MANDY COHEN, MD, MPH
SECRETARY

DANIEL STALEY
DIRECTOR

February 19, 2018

Mr. Heath Snow
Iredell County Health Department
610 E Center Ave
Mooresville, NC 28115

Subject: Approval of 175 Barber Loop Wastewater System Plans and Specifications
Mooresville, Iredell County, NC

Dear Mr. Snow:

We have reviewed plans and specifications for the wastewater system proposed to serve 175 Barber Loop, Mooresville, Iredell County received from Donald Munday, PE, Piedmont Design Associates, PA.

The approved plans and specifications are for the following facilities and system components:

Facilities: Three bedroom house

System: 1-1,000 gallon septic tank, 1-AX20 RTUV, drip irrigation headworks and hydraulic control unit; 1-subsurface drip irrigation field (1,814 linear feet total into one zone)

Design Flow: 360 gallons per day

Drainfield Loading Rate: 0.10 gpd/sq ft

Treatment Standard: TS-II (CBOD < 10 mg/L, TSS < 10 mg/L, Total Ammonia Nitrogen < 10 mg/L, Total Nitrogen < 20 mg/L or greater than 60% removal, and fecal coliforms < 1,000 colonies/100 mL)

System classification: Va, requiring quarterly ORC inspections for the first year and semi-annually thereafter with annual inspection reports submitted to the local health department and at least yearly inspection by your department

Prior to issuing the improvement permit, the following items must be addressed:

1. The site grading must be completed and approved by the local health department.

WWW.NCDHHS.GOV
TEL 919-707-5874 • FAX 919-845-3972
LOCATION: 5605 SIX FORKS RD • RALEIGH, NC 27609
MAILING ADDRESS: 1642 MAIL SERVICE CENTER • RALEIGH, NC 27699-1642
AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

2. The approved layout on the plans is based on the current contours on the site. These contours will likely changes with the grading and the drainfield will need to be laid out on contour again to confirm that there is sufficient area for the proposed field.
3. The horizontal setbacks on the plans do not reflect the use of a foundation drain around the house/basement. If a foundation drain is utilized, the setbacks will need to be increased and could impact the area for the wastewater system.
4. The setback of the supply line from the property line must be at least five feet in accordance with Rule .1950(e)(6).

The operation permit must include, as conditions, the O&M procedures attached to the approved specifications. It shall also include the necessary information regarding the proposed management entity and certified operator as well as any additional concerns deemed appropriate by the health department for the O&M of this system.

The installation must be approved by the health department and designer prior to the issuance of an operation permit.

Please contact us if you have any questions pertaining to this letter or if we may be of further assistance with this project. I can be contacted at 919-707-5878 or by email at trish.angoli@dhhs.nc.gov.

Sincerely,

Tricia Angoli, PE
On-Site Wastewater Engineering

cc: Donald Munday, PE, Piedmont Design Associates, PA

RECEIVED APR 2 0 2020

AP-227852
$320.00

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
(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) martincarter1229@gmail.com.

Applicant Name: Craig Corbe Builders Inc Address: 459 Youth Valley Rd Advance NC Zip: 27006
Applicant Email: Martincorbe1229@Gmail.com Phone: 336-345-3057 Alt. Phone: _____
Owner Name: John and Sue Chirenna Address: 175 Barber Loop Mocksville Zip: 28115
Owner Email: _____ Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 175 Barber Loop Mocksville NC ~~27006~~ 28115
Subdivision Name: Lake Norman Rec. Lots Section/Phase: PB14 P81 Lot Number: 157
Driving Directions: _____

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: 3
Maximum Number of Occupants: 2
( ) 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: _____

(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 ( ) Alternative ( ) Conventional (X) 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: _____ Apr. 1 , 2020
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE