ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # OSWP-2023-14704

PIN # 4626-37-9716

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

APPLICANT / OWNER: BENEFIELD OUTDOOR SERVICES & SOLUTIONS APPLICANT ADDRESS: 939 Brawley School Rd, Mooresville, NC 28117

SITE ADDRESS: 110 ALDER SPRINGS LN, MOORESVILLE, NC 28117 PHONE: 7043600376 ALT. PHONE:

SITE DIRECTIONS: BSR to Mecanbree to Camp to Alder Springs SAP CONTROLLED: YES ☐ NO ☒

SUBDIVISION: The Farms SECTION: 3 LOT #: 407 LOT AREA: 1.013 DESIGN FLOW: 480 L.T.A.R.: .30

Septic Tank: (gal) Existing	STB: —	Date: —	☒ New System ☐ Repair ☐ Expansion	System Type: III	☒ Residence	No. Bedrooms: 4	Water Supply: Community Well
Pump Tank: (gal)	PT:	Date:	System Description: Relocate - 25% Reduction		☐ Business	No. Persons: 8	
Pump Make:	Model:	Serial #:	Repair System Description: LP-PPBPS - 50% Reduction		☐ Other	No. Employees:	
# Nitrification Fields: 1	# Lines: 1	Linear Ft.: 55	Maintenance Agreement Required: ☐ YES ☒ NO		☐ Slab	☒ Crawl Space	
Trench Width: 36in	Trench Bottom Depth: ~~Max 30inch~~ 28in		Gravel Depth: —	☒ GRAVITY ☐ PRESSURE	☐ Basement w/ Plumbing	☐ Basement w/o Plumbing	

Comments / Conditions: Existing System - Relocate Due to Pool - Maintain 15ft from any Septic Component with Pool Cut

INITIAL SITE SKETCH

This permit is issued pursuant to G.S. 130A-335 (a2), (a3)(4a4) using the signed + Sealed LOS/LG Evaluation attached here from:

Benefield Outdoor Services + Solutions

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: Date:

IMPROVEMENT PERMIT by: Benjamin A. Boss Date: 2-27-2023

AUTHORIZATION TO CONSTRUCT by: Benjamin A. Boss Date: 2-27-2023

Installed By: BOSS

OPERATION PERMIT by: Benjamin C. White Date: 3-24-2023

Existing System Inspected By: Date:

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 BETWEEN 8am-9am the day the inspection is needed.

ICHD - ENVIRONMENTAL HEALTH DIVISION

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PERMIT # OSWP-2023-14704

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SITE ADDRESS: 110 ALDER SPRINGS LN, MOORESVILLE, NC 28117 PHONE: 7043600376 ALT. PHONE:

SITE DIRECTIONS: BSR to Mecumbree to Ramp to Alder Springs SAP CONTROLLED: YES ☐ NO ☒

SUBDIVISION: The Farms SECTION: 3 LOT #: 407 LOT AREA: 1.013 DESIGN FLOW: 480 L.T.A.R.: .30

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# Nitrification Fields: 1	# Lines: 1	Linear Ft.: 55	Maintenance Agreement Required: ☐ YES ☑ NO		☐ Slab	☑ Crawl Space	
Trench Width: 36 in	Trench Bottom Depth ~~(from Grade):~~ max: 28 in		Gravel Depth: ~	☑ GRAVITY ☐ PRESSURE	☐ Basement w/ Plumbing	☐ Basement w/o Plumbing	

Comments / Conditions: Existing System - Relocate Due to Pool - Maintain 15ft from any Septic Component with Pool Cut

INITIAL SITE SKETCH

This permit is issued pursuant to G.S. 130A-335 (a2), (a3)(4a4) using the signed + Sealed LOS/LE Evaluation attached here from:

Benefield Outdoor Services + Solutions

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: Michael Benfield Date:

IMPROVEMENT PERMIT by: Benjamin A. Bolton Date: 2-27-2023

AUTHORIZATION TO CONSTRUCT by: Benjamin A. Bolton Date: 2-27-2023

Installed By:

OPERATION PERMIT by: Date:

Existing System Inspected By: Date:

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 BETWEEN 8am-9am the day the inspection is needed.

County: Iredell.

This Section for Local Health Department Use Only

Initial submittal received: 2-20-2023 (Date) by BB (Initials)

Permit Number: OSWP. 2023-14704.

G.S. 130A-335(a4) states the following: *'If a local health department fails to act on an application for an improvement permit submitted pursuant to subsection (a3) of the section within 10 business days of receipt of a complete application, the local health department shall issue the improvement permit.'*

In accordance with G.S. 130A-335(a3) the improvement permit application is:

☐ Incomplete (If box is checked, information in this section is required.)

The following items are missing:

_____

_____

Copies of this were sent to the LSS and the Owner on _____ (Date)

State Authorized Agent: _____ Date: _____

☐ Denied (See attached report.)

Copies of this were sent to the LSS and the Owner on _____ (Date)

State Authorized Agent: _____ Date: _____

☑ Complete

State Authorized Agent: Benjamin A. Butler Date of Issuance: 2-27-2023

This Improvement Permit is issued pursuant to G.S. 130A-335 (a2), (a3), and (a4) using the signed and sealed LSS/LG evaluation(s) attached here. The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This site is subject to revocation if the site plan, plat, or the intended use changes, or if information submitted in the application was falsified, inaccurate or misleading. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit. The location and identification of all property lines, easements, water lines, and other appropriate utilities shall be the responsibility of the owner.

The Department, the Department's authorized agents, and the local health departments shall be discharged and released from any liabilities, duties, and responsibilities imposed by statute or in common law from any claim arising out of or attributed to evaluations, submittals, or actions from a licensed soil scientist or licensed geologist pursuant to GS 130A-335(a2).

Improvement Permit Expiration Date: 2-27-2028

See attached site sketch

County: Iredell

IMPROVEMENT PERMIT FOR G.S. 130A-335(a2)/SL2022-11

PIN/Lot Identifier: 4626379716.000

Issued To: Edward and Sonya Forrai

Property Location: 110 Alder Springs Ln

Subdivision: The Farms Lot #: 407 Block: - Section: -

LSS Report Provided: Yes ☑ No ☐

If yes, name and license number of LSS: Miranda Stamper

New ☐ Repair ☐ Expansion ☐ System Relocation ☑

Proposed Structure: Pool

Proposed Wastewater System Type: 25% Reduction chamber (Initial) 50% PPBPS-horizontal (Repair)

Fill System: ☐ Yes ☑ No If yes, specify: ☐ New ☐ Existing (when adding more than 6 inches of fill to system area please provide a fill plan)

Proposed Design Daily Flow: 480 GPD Proposed LTAR (Initial): 0.3 Proposed LTAR (Repair): 0.3

Design Wastewater Strength: ☑ domestic ☐ high strength ☐ industrial process

Number of bedrooms: 4 Number of Occupants: 8 max Other:

Pump Required: ☐ Yes ☑ No ☐ May be required based upon final location and elevations of facilities

Artificial Drainage Required: ☐ Yes ☑ No If yes, please specify details:

Type of Water Supply: ☐ Private well ☑ Public well ☐ Municipal Supply ☐ Spring ☐ Other:

Drainfield location meets requirements of Rule .1945: Yes ☑ No ☐

Drainfield location meets requirements of Rule .1950: Yes ☑ No ☐

Permit valid for: ☑ Five years [site plan submitted pursuant to GS 130A-334(13a)] ☐ No expiration [plat submitted pursuant to GS 130A-334(7a)]

Permit conditions:

Licensed Soil Scientist Print Name: Miranda Stamper

Licensed Soil Scientist Signature: Miranda Stamper Date: 1/25/23

The LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2).

See attached site sketch

County: Iredell

CONSTRUCTION AUTHORIZATION FOR G.S. 130A-335(a2)/SL2022-11

PIN/Lot Identifier: 4626379716.000

Issued To: Edward and Sonya Forrai

Property Location: 110 Alder Springs Ln

AOWE/PE Plans/Evaluations Provided: Yes ☐ No ☑ If yes, name and license number of AOWE/PE: _____

Facility Type: 4 bedroom residence - adding a pool

☐ New ☐ Expansion ☐ Repair ☑ System Relocation

Basement? ☐ Yes ☐ No Basement Fixtures? ☐ Yes ☐ No

Type of Wastewater System** 25% Reduction Chamber (Initial) LP PPBPS (Repair)

Design Daily Flow: 480 GPD Wastewater Strength: ☑ domestic ☐ high strength ☐ industrial process

Session Law 2014-120 Section 53, Engineering Design Utilizing Low-flow Fixtures and Low-flow Technologies? ☐ Yes ☐ No

Installation Requirements/Conditions

Septic Tank Size: 1500 gallons Total Trench/Bed Length: 403 feet Trench/Bed Spacing: 9 feet on center

Drainfield square footage: 1209 Trench/Bed Width: 36 inches LTAR: 0.3 gpd/ft²

Soil Cover: 6 inches Slope Adjusted Maximum Trench/Bed Depth: _____ inches

Aggregate Depth: NA inches above pipe NA inches below pipe NA inches total

Pump Tank Size (if applicable): NA gallons Requires more than 1 pump? ☐ Yes ☑ No

Pump Requirements: NA ft. TDH vs. NA GPM Grease Trap Size (if applicable): NA gallons

Distribution Method: ☑ Serial ☐ D-Box or Parallel ☐ Pressure Manifold(s) ☐ LPP ☐ Other: _____

Artificial Drainage Required: Yes ☐ No ☑ If yes, please specify details: _____

Legal Agreements *(If the answer is "Yes" to any type of legal agreements, please attach a copy of the agreement.)*

Multi-party Agreement Required [.1937(h)]: ☐ Yes ☑ No

Easement, Right-of-Way, or Encroachment Agreement Required [.1938(j)]: ☐ Yes ☑ No

Declaration of Restrictive Covenants: ☐ Yes ☑ No

****If applicable:**

I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit.

Owner/Legal Representative Print Name: _____

Owner/Legal Representative Signature: _____ Date: _____

Pre-Construction Conference Required: Yes ☐ No ☐

Conditions: _____

The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .1959 are incorporated by reference into this permit and shall be met. Systems shall be installed in accordance with the attached system layout.

AOWE/PE Print Name: _____

AOWE/PE Signature: _____ Date: _____

This AOWE/PE submittal is pursuant to and meets the requirements of G.S. 130A-335(a2) and (a5).

See attached site sketch

BENFIELD OUTDOOR SERVICES & SOLUTIONS

Benfield Outdoor Services & Solutions
Phone: (704) 360-0376
939 Brawley School Rd.
Mooresville, North Carolina 28117
Info@yardsbyboss.com
LLS: Miranda Stamper #1258

Iredell County Environmental Health Department
610 East Center Avenue
Mooresville, NC 28115
Phone: 704-664-5281
Fax: 704-664-9737

November 9, 2022

Recommended Wastewater Disposal System
Owner: Edward & Sonya Forrai
PIN: 4626379716.000

To whom it may concern,

You will find attached a copy of the wastewater disposal system proposed for the owners Edward & Sonya Forrai. The lot of 407, PIN #4626379716.000 on Alder Springs in Iredell County. Also attached are the sealed soil notes, site plan and design for an onsite wastewater disposal system. The LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2). Please review the attached proposal and contact me if you have any questions or concerns.

The LSS evaluation attached to this application is to be used to produce design and construction features for permitting in accordance with G.S. 130A-335(a2)."

Owner: EDWARD & SONYA FORRAI

Signature: E Forrai

Signature: Sonya Forrai

The LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2).

Miranda Stamper, LSS

Signature: Miranda Stamper 1/7/23

110 ALDER SPRINGS DR, MOORESVILLE NC.
SECTION 3, LOT 407 THE FARMS SUBDIVISION

4-BEDROOM GRAVITY ACCEPTED SYSTEM
EXISTING LINES 2-5 EZ-FLOW
ADD LINES 6A (Q4 CHAMBER)
TOTAL 403 LINEAR FT
LTAR 0.3
25% REDUCTION 9' OC
36" MAX TRENCH BOTTOM

4-BEDROOM HORIZONTAL LP PPBPS SYSTEM
LINES 1, 6B-9 TOTAL 286 LINEAR FEET
LTAR 0.3
28" TRENCH BOTTOM

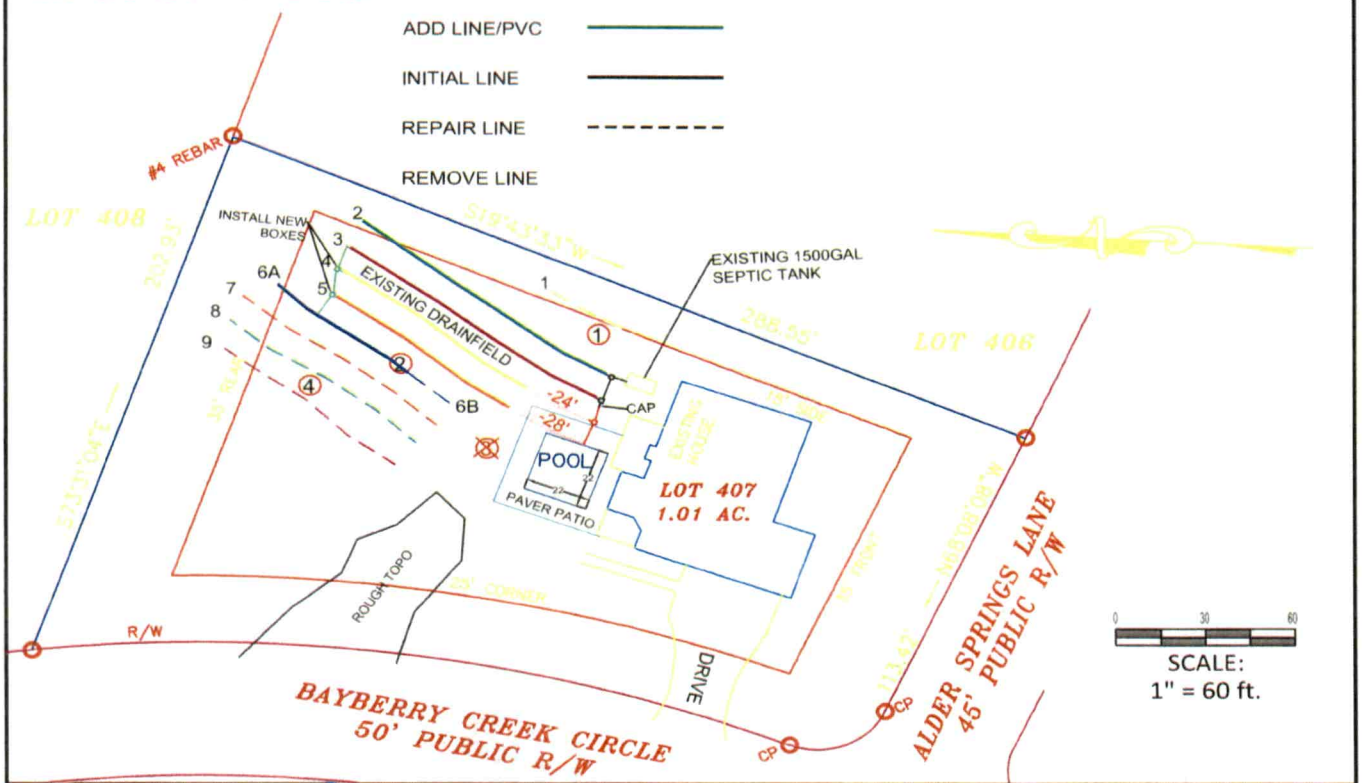
FOR GENERAL USE NOT A SURVEY
PRELIMINARY NOT FOR CONSTRUCTION

Notes: SOIL INFORMATION PROVIDED BY MIRANDA STAMPER LSS

INSTALLER NOTES: REDUCE LINES 4 & 5 TO MEET POOL SETBACKS
INSTALL NEW DROPBOXES ON LINES 4 & 5 & CENTER FEED TO LINE 6A WITH END CAP

LINE SCHEDULE				
LINE NUMBER	COLOR	FIELD ELEVATION	LENGTH (FT)	DESIGN LENGTH (FT)
1	YELLOW	1.5	37	0
2	EXISTING G	2.5	100	100
3	EXISTING P	3.1	100	100
4	EXISTING Y	4.0	100	76
5	EXISTING O	4.8	100	72
6	BLUE	5.5	73	55
7	RED	6.5	81	0
8	GREEN	7.0	78	0
9	PINK	7.9	72	0
			TOTAL	TOTAL
			741	403

CONDITIONS: MUST BE INSTALLED BY A LICENSED SEPTIC INSTALLER. DRAINFIELD AREA MUST MAINTAIN NATURAL CONTOURS & SLOPE. IMPROPER OR EXCESSIVE GRADING, & EXCEEDING THE PROPOSED WATER'S EDGE WILL VOID THIS DESIGN AND BOSS IS NOT LIABLE.



BOSS

Benfield Outdoor Services & Solutions, LLC
939 Brawley School Rd, Mooresville, NC 28117 Ph:704-360-0378
Info@yardsbyboss.com

ED FORRAI

LOT 407
THE FARMS SUBDIVISION
MOORESVILLE, NC
IREDELL COUNTY

DATE: 1/19/23 DRAWN BY: MDB CHECKED BY: MES

Sheet 1 of 1
PROPERTY ID #: 4626379716.000
COUNTY: Iredell

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

OWNER: Ed Forrai Lot # 407, The Farms, Phase 3 APPLICATION DATE:
ADDRESS: 110 Alder Springs Lane DATE EVALUATED: 1/5/23
PROPOSED FACILITY: 4 BR PROPOSED DESIGN FLOW (.1949): 480 PROPERTY SIZE: 1.01 acres
LOCATION OF SITE: on corner of Alder Springs Ln and Bayberry Creek Circle PROPERTY RECORDED:
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				
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
B1	L 2-3%	0-10	SBK CL NEXP	S SP FI	NO <2 CHROMA FREE WATER @41"	48"	-	41"	0.3
		10-27	SBK C SEXP	S P FI					
		27-48	SBK CL NEXP	S SP FI					
B2	L 3-4%	0-9	SBK CL NEXP	SS SP FI	-	48"	-	-	0.3
		9-31	SBK C SEXP	S P FI					
		31-48	SBK CL NEXP	SS SP FI					
B3	L 3-4%	0-10	SBK CL NEXP	SS SP FI	NO <2 CHROMA FREE WATER@ 22"	22"	-	22"	0.3
		10-22	SBK C	S P FI					
B4	L 2-3%	0-10	SBK CL NEXP	SS SP FI	NO <2 CHROMA MOISTURE@44"	48"	-	44"	0.3
		10-29	SBK C SEXP	S P FI					
		29-48	SBK CL NEXP	S SP FI					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	25% Reduction Chamber	50% Reduction PPBPS
Site LTAR	0.3	0.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Miranda Stamper
OTHER(S) PRESENT: Carlton Jones

LICENSED SOIL SCIENTIST STATE OF NORTH CAROLINA
MStamper 1/25/23

COMMENTS: B3 is located close to the head of a small drainageway serving the backyard.