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:

Applicant Name: J S TESTA Address: 19905 W. CATAWBA AV. CORNELIUS 704 Phone: 892-2995

Owner Name: J S TESTA Address: 19905 W. CATAWBA AV. CORNELIUS 704 Phone: 892-2995

Property Information:

Street Address: SILVER LAKE TRAIL MOORESVILLE

Subdivision Name: THE FARMS Section/Phase: 5 Lot Number: 553

Driving Directions: BRAWLEY SCHOOL RD RIGHT ON MECKENDREE
RIGHT ON DIGH
RIGHT ON SILVER LAKE

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: 4
( ) 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)*

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: Joseph A Testa
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

3/13/14
DATE

IREDELL COUNTY HEALTH DEPARTMENT

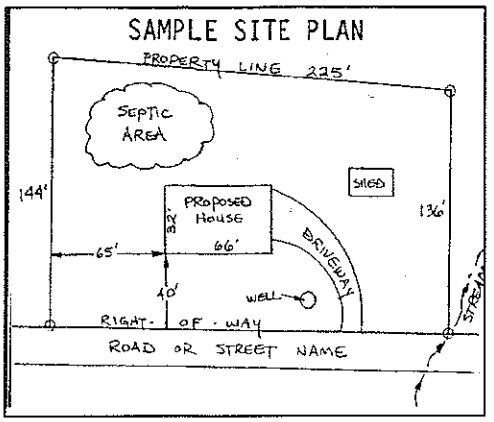
ENVIRONMENTAL HEALTH DIVISION

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:

- (X) Property Line measurements are clearly identified
- (X) All proposed structures are indicated
- (X) Front and side setbacks from property line
- (X) Preferred driveway location and well location
- (X) Area you prefer your septic system to be placed
- (X) 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

SEE ATTACHED

Signature: Dwight R Todd

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

3/13/14

DATE

IREDELL COUNTY

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

APPLICATION NUMBER

202191

Issue Date: 03/13/2014

Permit Type: AUTHORIZATION CONSTRUCT

Parcel Number	Street Address	Jurisdiction
4626486801.000	128 SILVER LAKE TRAIL	MOORESVILLE

Owner Information	Applicant Information	Contractor Information
Owner: J S TESTA LLC	Applicant: JS TESTA LLC	Contractor: JS TESTA LLC
Address: ,	Address: PO BOX 2573 19905 W.CATAWBA AVE., STE 202 CORNELIUS, NC 28031	Address: PO BOX 2573 19905 W.CATAWBA AVE., STE 202 CORNELIUS, NC 28031
Phone:	Phone: 704-892-2995	Phone: 704-400-6420 License Type: BLDG License Number: 56055-U

Project Description

NEW SINGLE FAMILY - IREDELL

Scope of Work

NEW SFD; REPLACES EXPIRED PERMIT #139645 FROM 12-4-2006;
ON SITE SEPTIC BUT WATER FROM COMMUNITY WELL

Permit Details:

AC issued 3-13-14; IP issued 3-12-07	AUTHORIZATION CONSTRUCT	Amount: Amount: Amount: Amount: Amount: Amount: Amount:	.00

I hereby certify that all information in this application is correct and all work will comply with the state code and all other applicable state and local laws, ordinances and regulations. The respective department will be notified of any changes in the approved plans, a change of contractor, and/or specifications for the project permitted herein. This application becomes a permit only when validated and approved.

Signature of Owner/Contractor

Date: 03/13/2014

Fees Paid w/ IP

ANY PERMIT ISSUED EXPIRES SIX (6) MONTHS AFTER ISSUANCE IF NO INSPECTIONS HAVE BEEN MADE. ANY PERMIT ISSUED SHALL EXPIRE TWELVE (12) MONTHS AFTER LAST INSPECTION IF THE WORK IS DISCONTINUED.

Permit Number	7901	TOTAL FEES:	$

Lot 553 The Farms Fast Track Septic System Information

Number of Bedrooms	4
Basement or Crawl	**Crawl Space**
Design Flow (gpd)	480
LTAR (gpd/ft2)	0.25
Primary System Type	**LP PPBPS**
No. Lines	4 (See Table)
Total Linear Feet	320
Trench Width	2' min.
Trench Spacing	8' min.
Pump Required	Yes
Distribution Device	Gate Valve Box w/ LPP Distribution
Maintenance Agreement Required	Yes
Length and Diameter of Supply Pipe	165' of 2" SCH 40 PVC
Size of laterals	1 1/4" SCH 40 PVC
Flow Rate through the system	35.5 gpm
Elevation head	Approx. 10.3'
Pressure head	3.0'
Friction head	3.5'
20% Contingency	3.4'
Total Head	20.2'
Pump Requirements	35.5 gpm @ 20.2' of head; use Goulds WE05H pump or equivelent with compatible electrical
Maximum Dosing Volume	255.6 gal -1.9 doses/day @ design flow*
Volume of water pumped per dose	Calculated to specific tank by measure or dealer engineering specifications (1 cubic ft. of water equals 7.48 gal.)
Pump Run per dose	approx. 7.2 min.
Check Valve	Yes
Siphon Break hole	No
Repair System	**LP PPBPS**
Total Linear Feet	363

***Before placement of cap block, one panel on each line near the center of the field should be observed filling to make certain that it does not overflow top chamber into air chambers of panel. If overflow occurs, reduce floats by 25 gallons and reset until no overflow is observed.**

Table 1: Summary of Primary and Repair Nitrification Line Specifications

Line No.	Use	Line Color	System Type	Line Length (Ft.)	Rod Reading Elev. (Ft.)	Panels	Holes	Hole Spacing	Hole Size (In.)
1	Repair	Pink	LPPPBPS	36	3.3				
2	System	White	LPPPBPS	55 endfed		12	12	1 per panel	5/32"
3	System	Blue	LPPPBPS	80 centerfed		18	18	1 per panel	5/32"
4	System	White	LPPPBPS	95 centerfed		21	21	1 per panel	5/32"
5	System	Red	LPPPBPS	90 centerfed		20	20	1 per panel	5/32"
6	Repair	Orange	LPPPBPS	140					
7	Repair	Blue	LPPPBPS	137	6.6				
8	Repair		LPPPBPS	50					
						Total: 71	Total: 71 (1 in each panel turned up)		
				Total System: 320'					
				Total Repair: 363'					

Tank	Red	1500 gal (2 compartment)	7.6
Pump Tank	Red	1500 gal.	7.6
House	Blue		7.1

Note: Fill all minor gullies.

GOULDS PUMPS



Submersible Effluent Pump

MODEL 3885

WE Series

PROSURANCE AVAILABLE FOR RESIDENTIAL APPLICATIONS.

APPLICATIONS

Specifically designed for the following uses:

- Homes
- Farms
- Trailer courts
- Motels
- Schools
- Hospitals
- Industry
- Effluent systems

SPECIFICATIONS

Pump

- Solids handling capabilities: ¾" maximum.
- Discharge size: 2" NPT.
- Capacities: up to 140 GPM.
- Total heads: up to 128 feet TDH.
- Temperature: 104°F (40°C) continuous 140°F (60°C) intermittent.
- See order numbers on reverse side for specific HP, voltage, phase and RPM's available.

FEATURES

■ **Impeller:** Cast iron, semi-open, non-clog with pump-out vanes for mechanical seal protection. Balanced for smooth operation. Silicon bronze impeller available as an option.

■ **Casing:** Cast iron volute type for maximum efficiency. 2" NPT discharge.

■ **Mechanical Seal: SILICON CARBIDE VS. SILICON CARBIDE** sealing faces. Stainless steel metal parts, BUNA-N elastomers.

■ **Shaft:** Corrosion-resistant, stainless steel. Threaded design. Locknut on all models to guard against component damage on accidental reverse rotation.

■ **Fasteners:** 300 series stainless steel.

■ Capable of running dry without damage to components.

■ Designed for continuous operation when fully submerged.

MOTORS

■ Fully submerged in high-grade turbine oil for lubrication and efficient heat transfer.

■ Class B insulation on ⅓-1½ HP models.
■ Class F insulation on 2 HP models.

Single phase (60 Hz):

- Capacitor start motors for maximum starting torque.
- Built-in overload with automatic reset.
- SJTOW or STOW severe duty oil and water resistant power cords.
- ⅓ and ½ HP models have NEMA three prong grounding plugs.
- ¾ HP and larger units have bare lead cord ends.

Three phase (60 Hz):

- Class 10 overload protection must be provided in separately ordered starter unit.
- STOW power cords all have bare lead cord ends.

■ **Designed for Continuous Operation:** Pump ratings are within the motor manufacturer's recommended working limits, can be operated continuously without damage when fully submerged.

■ **Bearings:** Upper and lower heavy duty ball bearing construction.

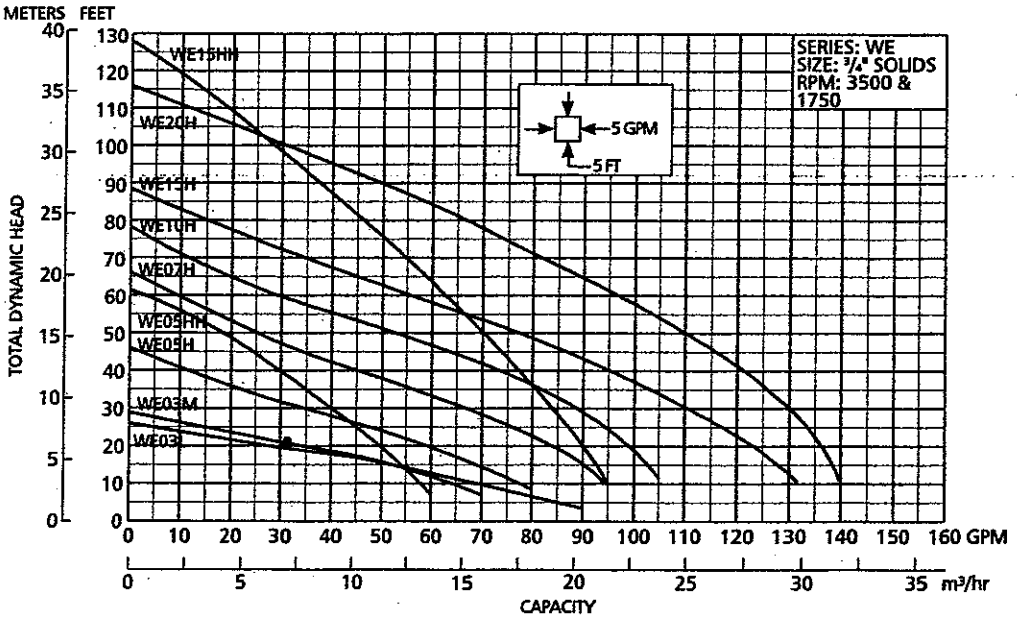
■ **Power Cable:** Severe duty rated, oil and water resistant. Epoxy seal on motor end provides secondary moisture barrier in case of outer jacket damage and to prevent oil wicking. Standard cord is 20'. Optional lengths are available.

■ **O-ring:** Assures positive sealing against contaminants and oil leakage.

AGENCY LISTINGS

C SA US — Tested to UL 778 and CSA 22.2 108 Standards By Canadian Standards Association File #LR38549

Goulds Pumps is ISO 9001 Registered.



Goulds Pumps

ITT Industries

© 2003 Goulds Pumps
Effective July, 2003

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

Zoning Permit

Permit Number: 139645ZO

Printed: 12/4/2006

Master #: 139645

Associated Permits:
139645ZO Zoning

Applicant

Name: S&ME INC. ENGINEERING (Toney Jacob **Phone:** 704-662-8625
Address: 105D DENVER BUSINESS PARK DR
Mooresville, NC 28115

Parcel

Parcel Number: 4626581913.553
Address: 000 MCKENDREE RD
MOORESVILLE, NC 28117
Subdivision: The Farms Phase 5
Zoning: RR
Township: 1700
Area: .93
Lot(s): 553
Directions to Parcel: BRAWLEY SCHOOL, RIGHT MCKENDREE, PROPERTY ON RIGHT

Owners

Name: CRESCENT RESOURCES INC
Address: P O BOX 1003
CHARLOTTE, NC 282011003

DEVELOPER PERMIT

Contractors

Contractor Type: Enviromental Services
Name: S&ME INC. ENGINEERING (Toney Jacobs) **Phone:** 704-662-8625
Address: 105D DENVER BUSINESS PARK DR
Mooresville, NC 28115

Fees and Receipts:

Number	Description	Amount
FEE-140835-06	Zoning - Permit / Inspection	$45.00
FEE-140836-06	Environmental Health - Type I or II Fast Track	$200.00
	Total Fees:	**$245.00**

No Building permit shall be issued for a residential dwelling or a nonresidential principal structure until a grading permit has been issued. No land shall be graded for the purpose of construction of a residential dwelling or a nonresidential principal structure, until a grading permit has been issued by the County. The County shall collect such fees for the issuance of grading permits as are authorized by the fee schedule adopted by the Board of Commissioners.

In addition to obtaining the permit; the owner, building contractor, or other responsible party shall:

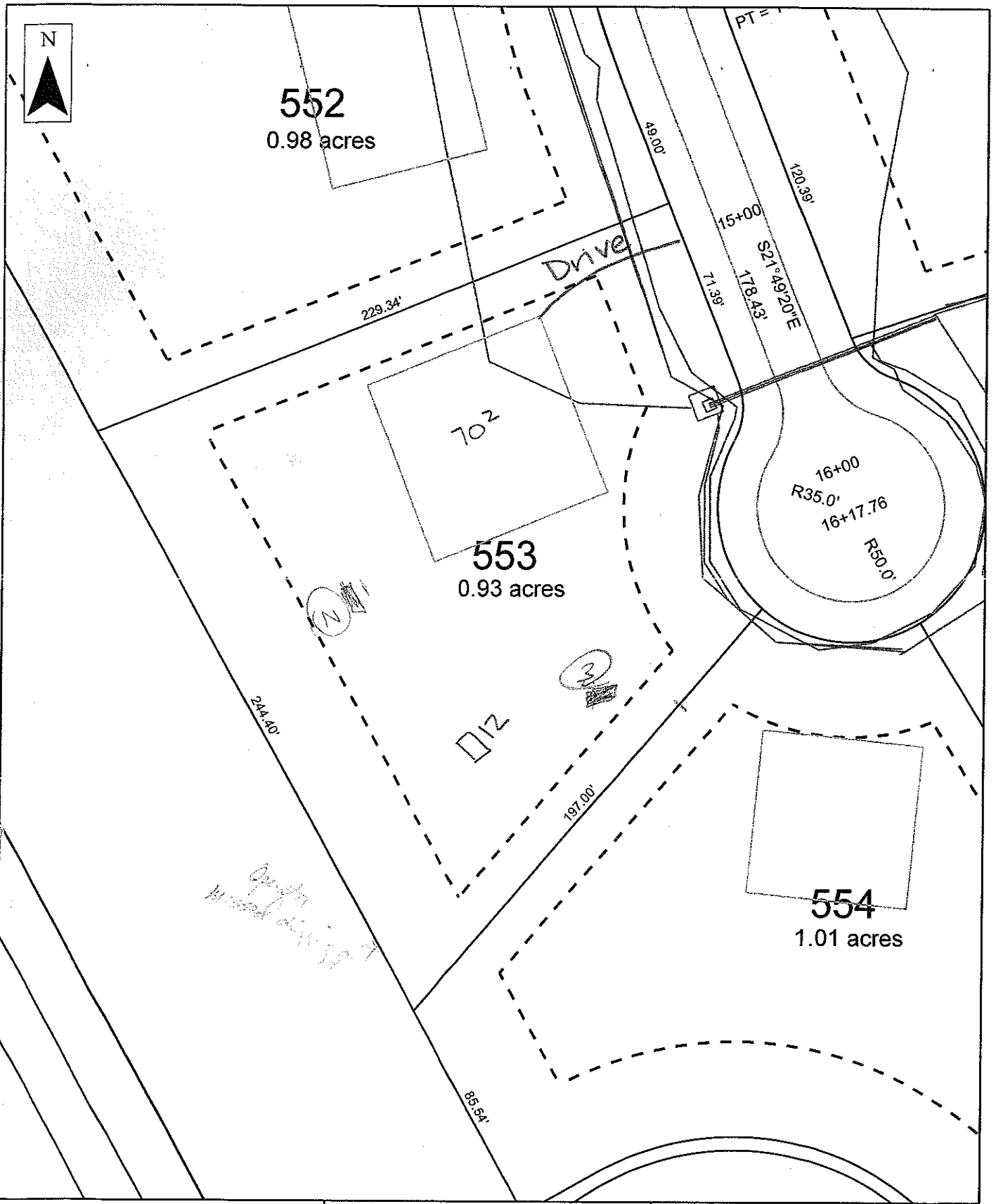
A. Control run-off as to not damage or adversely impact adjoining properties by providing silt fencing and stabilization or utilizing Low Impact Design (drainage swales, functional landscaping, etc.); and
B. Refrain from altering the general direction of the natural drainage flow.

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. 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 responsibilty of the affected parties.

Applicant: Kathleen Saunders Date 12/6/06

A non-refundable fee of $45.00 is charged on all permit applications

Permit Number: 139645ZO



Scale: 1 inch equals 50 feet	S&ME	The Farms - Phase V	FIGURE
Drawn by: SDM		Lot 553	1
Reviewed by: JP		Iredell, North Carolina	
Date: November 2006	ENVIRONMENTAL SERVICES • ENGINEERING • TESTING	Job No. 1588-05-070	

DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet ___ of ___
PROPERTY ID #: _____
COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Farms V — APPLICATION DATE _____
ADDRESS: _____ DATE EVALUATED: _____
PROPOSED FACILITY: House — PROPOSED DESIGN FLOW (.1949): 480 — PROPERTY SIZE: _____
LOCATION OF SITE: Lot 553 — 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				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1946 REDOX HORIZ	
1	L	0-4	MoGR L/SL	FR SS/SP	DK Br				0.3
		4-27	WK ABK C	FR S/P	Red		F sap		
		27-55	Mo/WK SBK CL	FR S/P	Red		C sap		0.25
			* Rock vein towards stairs 18"+						
2		0-19	MSSL wk cl SBK	SSP					.25-.3
		19-26	brn MSSL 2[illegible] wk SBK	SP					
		26-55	MSSL red	cl/cl FR SSP	sap				
3	5%	0-3	gr brn SL	FR					.25-.3
		3-32	SBK red	C FR SSP	SAP				
		32-49	WK MSSL cl	FR SSP					
4									

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

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: _____
OTHER(S) PRESENT: _____

COMMENTS: _____