IREDELL COUNTY HEALTH DEPARTMENT

KW

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

PERMIT # 233757

PIN # 4626-53-7412

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

APPLICANT/OWNER: BOSS | Garrison Davis | APPLICANT ADDRESS: 127 Misty Arbor Lane Mooresville, NC 28117

SITE ADDRESS: 152 Ragsdale Trail, Mooresville, NC 28117 | PHONE: 704-363-2845 | ALT. PHONE

SITE DIRECTIONS: BSR towards Lake Norman → R on Southfork → L on Freshwater → R on Ragsdale | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: The Farms | SECTION: 2 | LOT # 211 | LOT AREA: 0.848 acres | DESIGN FLOW: 480 GPD | L.T.A.R.: 0.30

Septic Tank 1000 (gal)	STB 338	Date 10/13/18	☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI		☒ Residence	No. Bedrooms 4	Water Supply
Pump Tank — (gal)	PT —	Date	System Description: 25% Reduction		☐ Business	No. Persons 8	☐ Private
Pump Make —	Model —	Serial # —	Repair System Description: 50% Reduction		☐ Other	No. Employees	☐ Public
# Nitrification Fields 1	# Lines 4	Linear Ft. 400	Maintenance Agreement Required: ☐ YES ☒ NO		☐ Slab	☒ Crawl Space	☒ Community
Trench Width 36"	Trench Bottom Depth(Low side) 30"-32"	Gravel Depth —	☒ GRAVITY ☐ PRESSURE		☐ Basement w/ plumbing	☐ Basement w/o plumbing	

Comments / Conditions: Recommend pumping septic tank every 3-5 years

1500 gallon tank installed

INITIAL SITE SKETCH

See attached drawing from

Benfield Outdoor Services + Solutions

Approved 3/22/18

AS BUILT SKETCH

L1 - 90'
L2 - 94'
L3 - 106'
L4 - 110'
} 400' (see attached drawing)

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: 3/22/18

IMPROVEMENT PERMIT by: Tom Shuck Date: 3/22/18

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 4-27-18

Installed by: Wastewater Solutions (Russell Williams)

OPERATION PERMIT by: Carlen C. Cave Date: 11/21/18

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 inspector to confirm your inspection time.

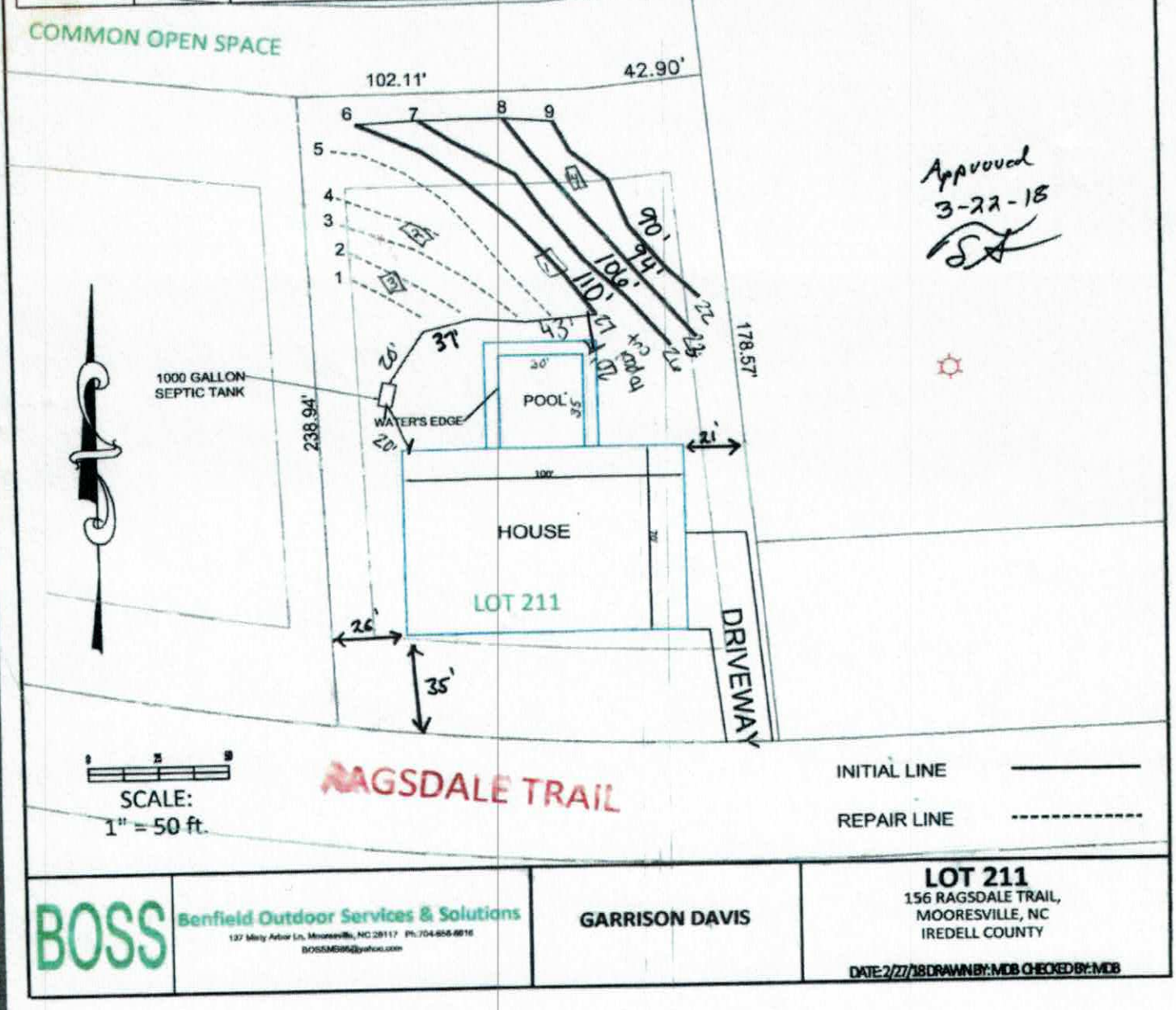
LINE SCHEDULE				
LINE NUMBER	COLOR	FIELD ELEVATION	LENGTH (FT)	DESIGN LENGTH (FT)
1	RED	0.6	25	25
2	ORANGE	1.6	41	41
3	PINK	1.9	72	72
4	BLUE	2.2	39	39
5	GREEN	2.7	103	103
6	ORANGE	3.9	113	112
7	WHITE	4.7	127	124
8	YELLOW	5.6	108	108
9	RED	6.3	84	84
			TOTAL	TOTAL
			712	708

152 RAGSDALE TRAIL, THE FARMS LOT 211

4-BEDROOM ACCEPTED GRAVITY SYSTEM
LINES 6-9 TOTAL 428 LINEAR FT (USE 400')
LTAR 0.3
25% REDUCTION 9' OC
36" TRENCH BOTTOM

4-BEDROOM LOW PRESSURE LPPSB REPAIR SYSTEM
TOTAL 280 LINEAR FEET
LTAR 0.3
50% REDUCTION 8' OC
36" TRENCH BOTTOM

FOR GENERAL USE NOT A SURVEY
PRELIMINARY NOT FOR CONSTRUCTION



Approved
3-22-18

BOSS
Benfield Outdoor Services & Solutions
137 Misty Arbor Ln, Mooresville, NC 28117 Ph.704-658-8816
BOSSMB86@yahoo.com

GARRISON DAVIS

LOT 211
156 RAGSDALE TRAIL,
MOORESVILLE, NC
IREDELL COUNTY

DATE:2/27/18 DRAWN BY: MDB CHECKED BY: MDB

LINE SCHEDULE				
LINE NUMBER	COLOR	FIELD ELEVATION	LENGTH (FT)	DESIGN LENGTH (FT)
1	RED	0.6	25	25
2	ORANGE	1.6	41	41
3	PINK	1.9	72	72
4	BLUE	2.2	39	39
5	GREEN	2.7	103	103
6	ORANGE	3.9	113	112
7	WHITE	4.7	127	124
8	YELLOW	5.6	108	108
9	RED	6.3	84	84
			TOTAL	TOTAL
			712	708

152 RAGSDALE TRAIL, THE FARMS LOT 211

4-BEDROOM ACCEPTED GRAVITY SYSTEM
LINES 6-9 TOTAL 428 LINEAR FT (USE 400')
LTAR 0.3
25% REDUCTION 9' OC
36" TRENCH BOTTOM

4-BEDROOM LOW PRESSURE LPPSB REPAIR SYSTEM
TOTAL 280 LINEAR FEET
LTAR 0.3
50% REDUCTION 8' OC
36" TRENCH BOTTOM

FOR GENERAL USE NOT A SURVEY
PRELIMINARY NOT FOR CONSTRUCTION

COMMON OPEN SPACE



Approved
3-22-18
SA

SCALE:
1" = 50 ft.

RAGSDALE TRAIL

INITIAL LINE ———

REPAIR LINE - - - - - - - - - -

BOSS
Benfield Outdoor Services & Solutions
137 Misty Arbor Ln, Mooresville, NC 28117 Ph:704-658-8616
BOSSMB86@yahoo.com

GARRISON DAVIS

LOT 211
156 RAGSDALE TRAIL,
MOORESVILLE, NC
IREDELL COUNTY

DATE:2/27/18 DRAWN BY: MDB CHECKED BY: MDB

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

Sheet ___ of ___
PROPERTY ID #: 4626-53-7412
COUNTY: Iredell

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

OWNER: BOSS (Garrison Davis) APPLICATION DATE 2/27/18
ADDRESS: 127 Misty Arbor Lane Mooresville, NC DATE EVALUATED: 3/14/18
PROPOSED FACILITY: 4 BR SFR PROPOSED DESIGN FLOW (.1949): 480 GPD PROPERTY SIZE: 0.848 acres
LOCATION OF SITE: 152 Ragsdale The Farm Lot 211 PROPERTY RECORDED: Yes
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) .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
1	LSS Header Upper Primary	0-5	SCL V.W. SBK	Sl. Friable, SS, SP, Sexp	–	48	–	–	0.30 PS
		5-14	clay W. SBK/ABK	Sl. Firm, Sticky, Sp, Sexp					
		14-48	clay loam W. SBK	Sl. Friable, SS, Sp, Sexp					
2	LSS middle Lower Repair	0-9	SCL V.W. SBK	Sl. Friable, SS, Sp, Sexp	–	55	–	–	0.30 PS
		9-55	clay W. SBK/ABK	Firm, Sticky, Sp, Sexp					
3	Old Pit [dig out] Distal Upper	0-5	SCL V.W. SBK	Sl. Friable, SS, Sp, Sexp	–	52	–	–	0.30 PS
		5-28	clay M SBK/ABK	Firm, Sticky, Sp, Sexp					
		28-52	clay some mica W. SBK	Sl. Firm, Sticky, Sp, Sexp					
4	Primary mid-lower	0-4	SCL V.W. SBK	Sl. Friable, SS, Sp, Sexp	–	53	–	–	0.30
		4-28	clay W-M SBK/ABK	Firm, Sticky, Sp, Sexp					
		28-53	clay loam W. SBK	Sl. Friable, SS, Sp, Sexp					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	400+	300+
System Type(s)	25% Red	50% Red
Site LTAR	0.3	0.3

OTHER FACTORS (.1946): ____
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Tom Shuck
OTHER(S) PRESENT: ____

RECEIVED MAR 1 2018

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

(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)

Paid $320.00

1. APPLICATION FOR: ✓ Improvement Permit ___ Authorization To Construct ___ Existing System Inspection

#233757

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

3. Applicant Information:

BOSS	127 Misty Arbor Ln Mooresville, NC 28117		704-658-8618
Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Garrison Davis	~~152 Ragsdale Trail Mooresville, NC~~	garrisondavis@ymail.com	7043632845
Owner Name	Mailing Address	Home Phone #	Alternate Phone #

4. Property Information:

152 Ragsdale Trail, Mooresville, NC	The Farms	#211
Street Address	Subdivision Name	Section/Phase and Lot Number

Driving Directions: Bravely school Rd, R onto Fork Rd L onto Freshwater Ln, R onto Ragsdale 8 Lot on R

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

(X) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
Repair To Failing Septic System due to _____
( ) Other _____

Maximum Number of Bedrooms 4
Maximum Number of Occupants 8
If Expansion, Current Number of Bedrooms ___

(X) 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 (X) Community Well ( ) City Water ( ) Other Public Water

7. Desired Septic System Type: *(You may rank in order of preference, if any)* ( ) EXISTING SYSTEM installed _____ *Year*

( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional (X) Other _____

8. Please Answer The Following ( ) Yes (X) No Does the site contain any jurisdictional wetlands?
   To The Best of Your Ability: ( ) Yes (X) No Is any non-domestic sewage (i.e. industry) 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.

9. Signature: _____ Feb 27, 2018
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

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, David M. Gandy, am the legal owner(s) of the property located at 152 Ragsdale Trail Mooresville, NC 28117 identified as PIN (Parcel Identification Number) 4626537412, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Michael Benfield, Benfield Outdoor Services & Solutions 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.

2.28.18
Signature of Owner(s) Date

Signature of Witness 2/28/18
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

1ST FLOOR PLAN 2437 SF

SCALE 3/16" = 1'-0"

1ST FLOOR PLAN

SCALE 3/16" = 1'-0"

Acknowledgement of
Plans Submittal ONLY!

Date 4/12/18

Date 4-27-18

SHEET NO. 3	DAVIS RESIDENCE	COPYRIGHT STATEMENT		**MAMARO** Residential Design, LLC Design | Interior Design | Construction 704-661-2623 | www.mamaroresidentialdesign.com

2ND FLOOR PLANS

1/4 2ND FLOOR PLAN 1866 SF

SCALE 3/16" = 1'-0"

SCALE 3/16" = 1'-0"

wledgement of
Submittal ONLY!

Date 4-17-18

Date 4-17-18

SHEET NO.									
4								DAVIS RESIDENCE	

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