IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 240212

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

PIN # 4626574529

APPLICANT/OWNER: Calvin Poole | APPLICANT ADDRESS: 132 Cherry Tree Dr. Mooresville, NC

SITE ADDRESS: 132 Cherry Tree Dr. Mooresville, NC 28117 | PHONE: 704-999-9069 | ALT. PHONE 515-999-0990

SITE DIRECTIONS: Brawley School Rd → R on McKendree → R on Grasshopper → R on Cherry Tree → lot on R | SAP CONTROLLED: ☐ YES ☐ NO

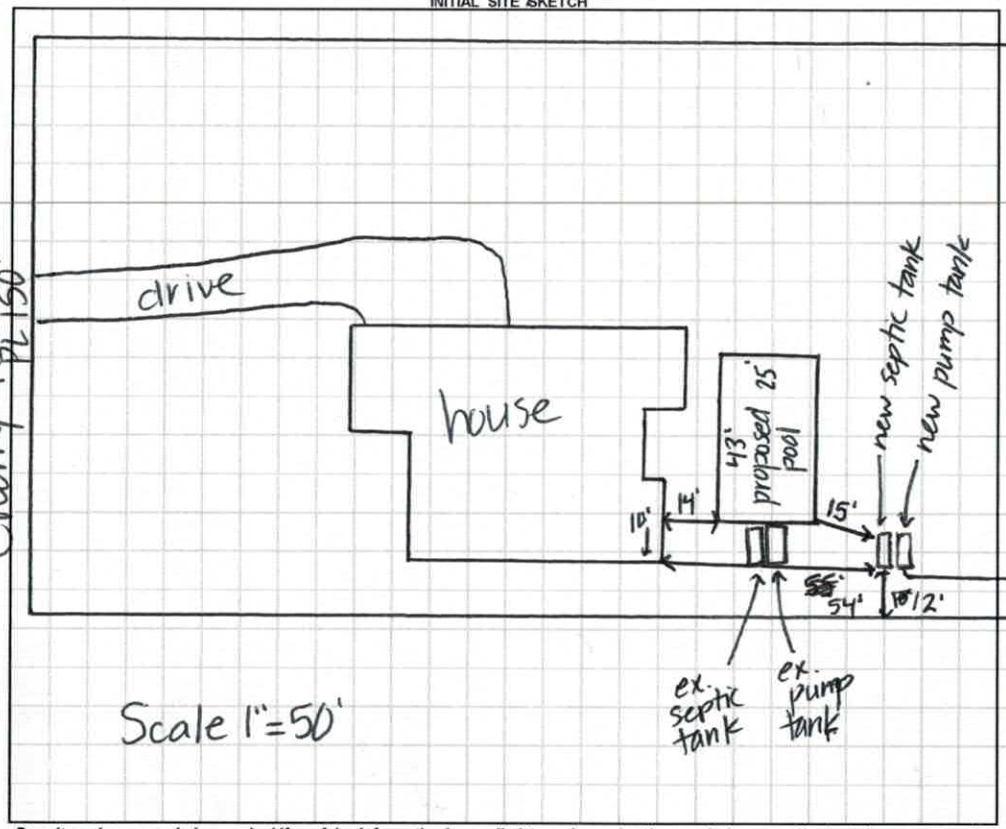
SUBDIVISION: The Farms | SECTION: 5 | LOT # 569 | LOT AREA: 1.234 ac | DESIGN FLOW: 480gpd | L.T.A.R.: existing

* Septic Tank	~~1000~~ 1500 (gal)	STB 338	Date 9-7-08	☑ New System ☐ Repair ☐ Expansion	System Type: I II III (IV) V VI	☑ Residence	No. Bedrooms 4
* Pump Tank	1000 (gal)	PT 283	Date 5-26-08	System Description: septic & pump tank		☐ Business	No. Persons 8
Pump Make		Model	Serial #	Repair System Description:		☐ Other	No. Employees
# Nitrification Fields	#Lines		Linear Ft	Maintenance Agreement Required: ☑ YES ☐ NO		☐ Slab	☑ Crawl Space
Trench Width	Trench Bottom Depth(Low side) EXISTING		Gravel Depth —	☐ GRAVITY ☑ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing

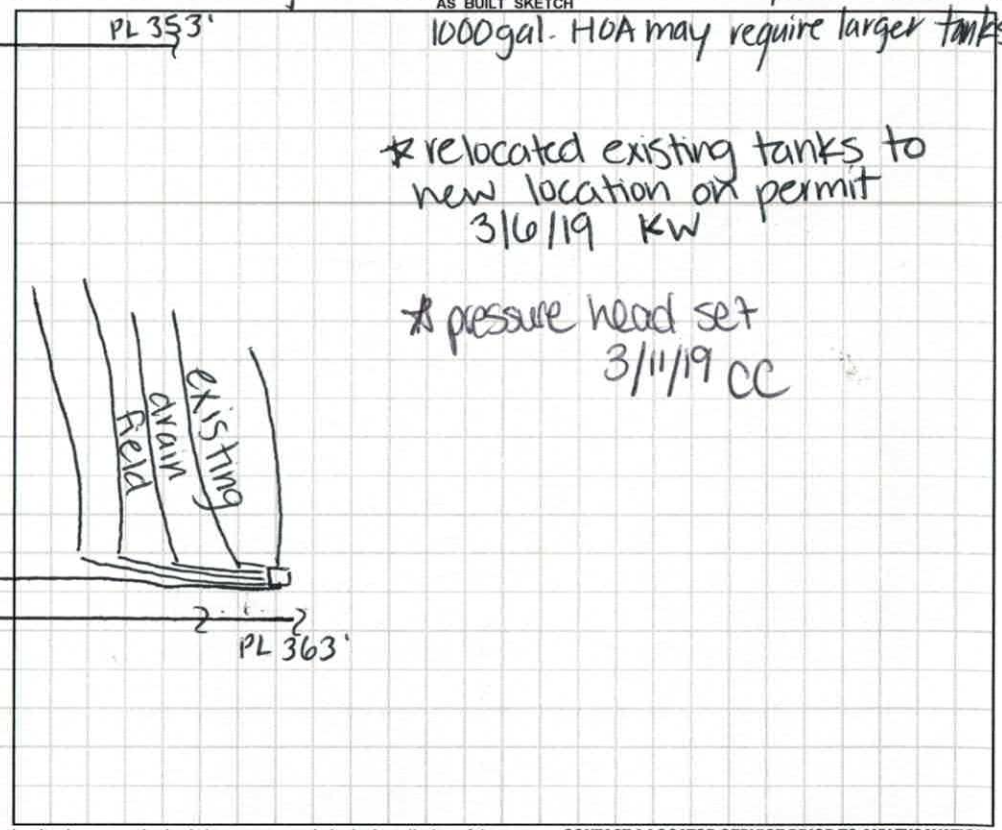
Water Supply: ☐ Private ☐ Public ☑ Community

Comments / Conditions: The purpose of this permit is to relocate the septic and pump tank in order to meet setbacks for a pool. Tanks must maintain 15' from pool. Pool must be staked out during time of install. Pump, crush, & fill existing septic and pump tank. Property line must be marked during time of inspection (was marked during site visit). * Minimum tank requirement is 1000gal. HOA may require larger tanks.

INITIAL SITE SKETCH



AS BUILT SKETCH



* relocated existing tanks to new location on permit 3/6/19 KW

* pressure head set 3/11/19 CC

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**

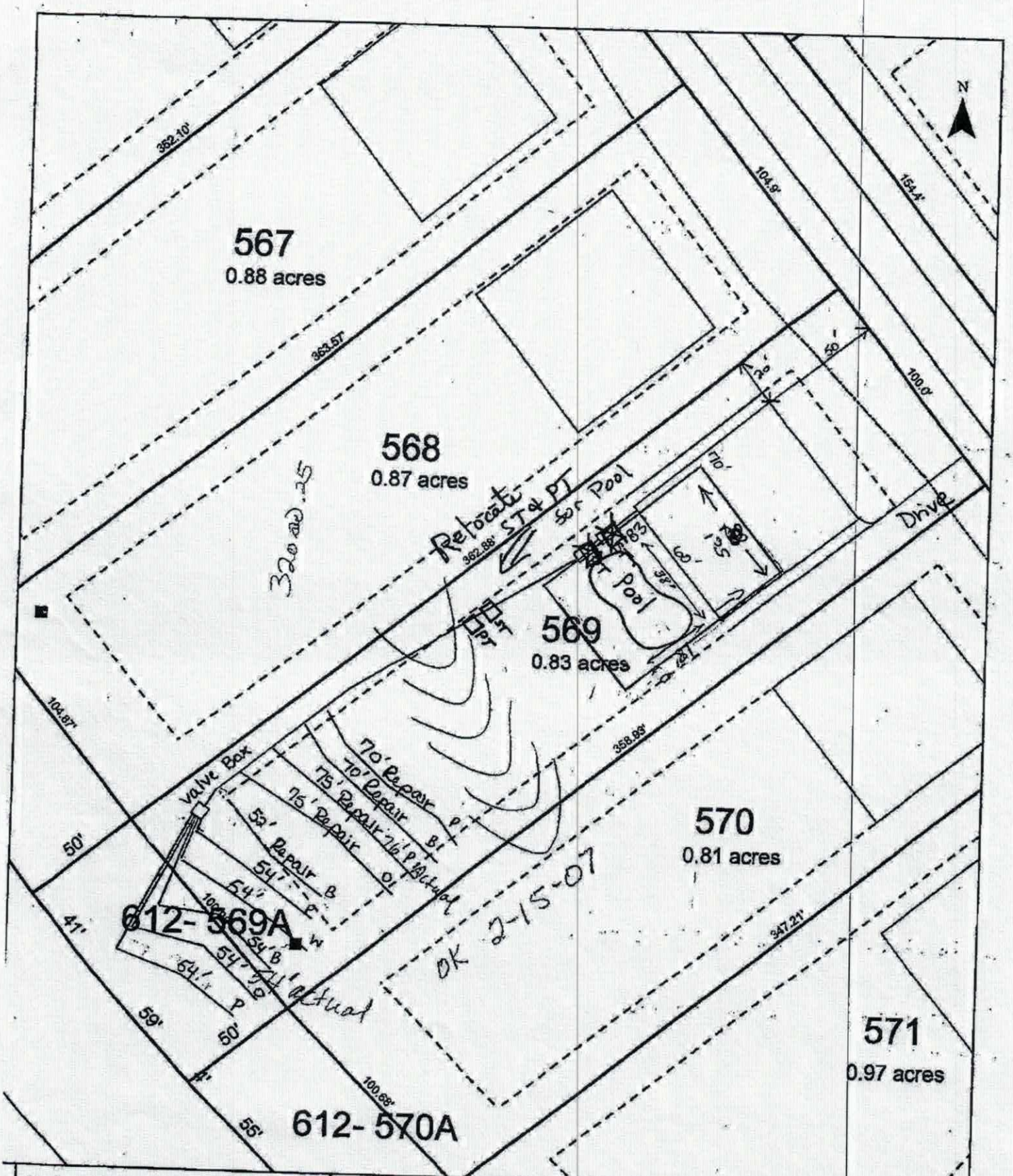
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☑ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☑ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: [signature] Date: 11-16-18 | Installed by: Stanley Environmental

IMPROVEMENT PERMIT by: Kayla Watson Date: 11-15-18 | OPERATION PERMIT by: Carla C. Cave Date: 3/11/19

AUTHORIZATION TO CONSTRUCT by: Kayla Watson Date: 11-15-18 | 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 inpsector to confirm your inspection time.



Scale: 1 inch equals 50 feet	S&ME	The Farms - Phase V	FIGURE
Drawn by: JBP		Lot 569	1
Reviewed by: KS	ENVIRONMENTAL SERVICES · ENGINEERING · TESTING	Iredell County, NC	
Date: February, 2007		S&ME Project #1588-05-070	

240212

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) Septic Improvement Permit ( ) Authorization to Construct (X) 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: (PRINT CLEARLY)

Applicant Name: Calvin Poole Address: 132 Cherry Tree Dr Mooresville NC Zip: 28117

Applicant Email: calvinepoole@gmail.com Phone: 704 999 9069 Alt. Phone: 515 999 0990

Owner Name: Same Address: _____ Zip: _____

Owner Email: Same Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 132 Cherry Tree Dr Mooresville, NC 28117

Subdivision Name: The Farms Section/Phase: 5 Lot Number: 569

Driving Directions: Brawley to Mckendree to Grasshopper Loop to Cherry Tree Dr

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

( ) 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: 4
Maximum Number of Occupants: 8
(X) Swimming Pool
( ) Other Addition/Structure: _____

CHECK FOUNDATION TYPE

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

Non-Residential Site Development: Type of Business: _____
Square Footage of Building: _____ Max. Number of Employees: _____ Max. Number of Seats/Beds/Other: _____

Water Supply: ( ) Replacement Well – Reason: _____
( ) Multi-connection Well Number of Houses: _____ Number of Persons: _____

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

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: 2008
(X) No Preference ( ) Alternative ( ) Conventional ( ) 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: _____ 10-23-2018
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

11801

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

(Check and sign only ONE of the options below)

1. *** APPLICANT AND OWNER ARE THE SAME. *** *(Sign here)* _____

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.

2. I, Calvin E Poole, am the legal owner(s) of the property located at 132 Cherry Tree Dr Mooresville, NC 28117, identified as

PIN (Parcel Identification Number) 4626574529, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Calvin Poole, Self; 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.

_____ 11/4/2018
Signature of Owner(s) Date

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

IREDELL COUNTY

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

APPLICATION NUMBER
240212
Issue Date: 11/09/2018

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4626574529.000	132 CHERRY TREE DRIVE, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: POOLE CALVIN E+HELENA	Applicant: POOLE CALVIN E+HELENA
Address: 132 CHERRY TREE DR	Address: 132 CHERRY TREE DR
MOORESVILLE, NC 28117	MOORESVILLE, NC 28117
Phone:	Phone:

Use Requested	Zone Code
SWIMMING POOL	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
1.234	35.00	35.00	10.00	10.00	CACL	X

Remarks:

Must meet requirement R22 of the LDC. Pools shall be located to comply with minimum setbacks for accessory structures- located behind front building line of house, 10 Æ from side & rear property line. Lake lots must meet the 50 Æ setback from the 760 contour line AND the 35 Æ setback from the rear property line. Pools that are not an integral part of the principal building shall be located at least the minimum distance from the principal building necessary to comply with N.C. Building Code. Setback from house could be +/-10 Æ. Fenced with a minimum 4 Æ in height, and equipped with self-closing and positive self-latching gate provided with hardware for permanent locking. Fence not required for above ground pools if they are at least 4 Æ in height, the ladder removed, or when NOT in use have a gate to the ladder as described above.

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. The 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 responsibility of the affected parties.

Applicant: _____ Date: _____

Permit Number	158577	TOTAL FEES:	$ 77.25