PJB

ICHD–ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # AP-303825

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

PIN # 4626-79-1583

APPLICANT/OWNER: Lawrence Harkness | APPLICANT ADDRESS: 242 Templeton Rd. Mooresville, NC 28115

SITE ADDRESS: 410 Due West Dr. Mooresville, NC 28117 | PHONE: 704-622-3074 | ALT. PHONE

SITE DIRECTIONS: BSR towards Lake Norman → Blume → Beech Tree → Kings Cross → Due West → Lot @ end | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: CL+T | SECTION: 8 | LOT # 506 | LOT AREA: 1.10 acres | DESIGN FLOW: 360 GPD | L.T.A.R.: Existing

Septic Tank ____ (gal) STB ____ Date ____	☐ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI	☒ Residence	No. Bedrooms 3
Pump Tank ____ (gal) PT ____ Date ____	System Description:	☐ Business	No. Persons 6
Pump Make ____ Model Existing Serial # ____	Repair System Description: Existing	☐ Other	No. Employees ____
# Nitrification Fields ____ # Lines ____ Linear Ft ____	Maintenance Agreement Required: ☐ YES ☒ NO	☐ Slab	☐ Crawl Space
Trench Width ____ Trench Bottom Depth(Low side) ____	Gravel Depth Existing ☒ GRAVITY ☐ PRESSURE	☐ Basement w/plumbing	☒ Basement w/o plumbing

Water Supply: ☒ Private Ex. ☐ Public ☐ Community

Comments / Conditions: Septic system appeared to be functioning normally at time of site visit. Recommend that septic tank is pumped every 3-5 years.

INITIAL SITE SKETCH

See attached 40-scale plan (dated 1-2-2020) for septic location.

* No business operations to occur within 26'x40' shop without prior health department approval *
- No bedrooms/kitchen(s) within shop.

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**

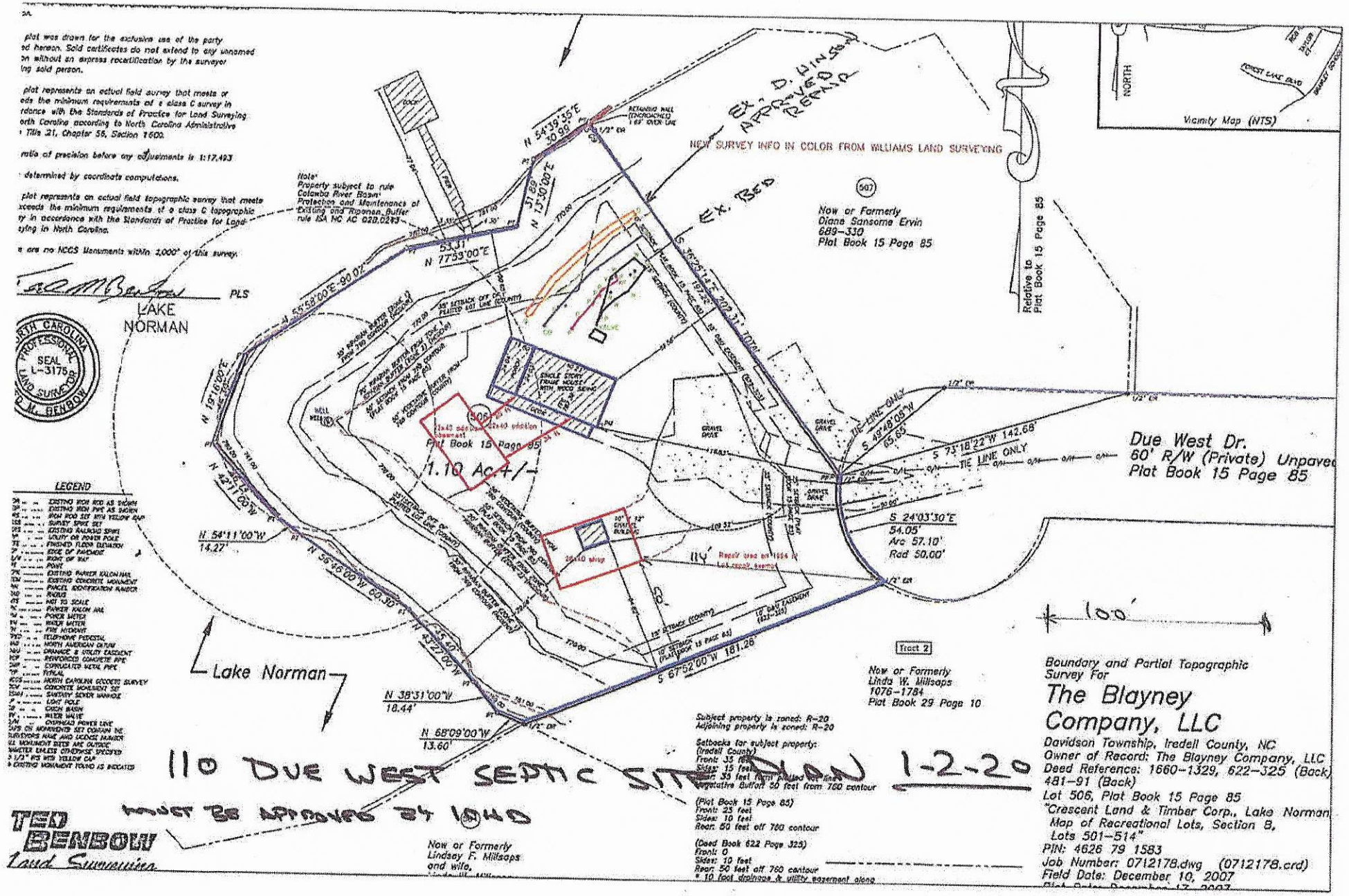
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration* ☐ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: [signature] Date: 01/16/20XX Installed by: ____

IMPROVEMENT PERMIT by: ____ Date: ____ OPERATION PERMIT by: ____ Date: ____

AUTHORIZATION TO CONSTRUCT by: ____ Date: ____ Existing System Inspected by: Tom Shuck Date: 1/13/2020

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.


plat was drawn for the exclusive use of the party
ed hereon. Said certificates do not extend to any unnamed
on without an express recertification by the surveyor
ing said person.
plat represents an actual field survey that meets or
eds the minimum requirements of a class C survey in
rdance with the Standards of Practice for Land Surveying
orth Carolina according to North Carolina Administrative
Title 21, Chapter 56, Section 1600.
ratio of precision before any adjustments is 1:17,493
determined by coordinate computations.
plat represents an actual field topographic survey that meets
exceeds the minimum requirements of a class C topographic
ey in accordance with the Standards of Practice for Land
eying in North Carolina.
e are no NCGS Monuments within 2,000' of this survey.
PLS
LAKE
NORMAN
SEAL
L-3175
LEGEND
Note:
Property subject to rule
Catawba River Basin:
Protection and Maintenance of
Existing and Riparian Buffer
rule 15A NC AC 02B.0243
NEW SURVEY INFO IN COLOR FROM WILLIAMS LAND SURVEYING
EX. D. LINE
APPROVED
REMOVED
EX. BED
Now or Formerly
Diane Sansome Ervin
689-330
Plat Book 15 Page 85
Relative to
Plat Book 15 Page 85
Vicinity Map (NTS)
NORTH
FOREST LAKE BLVD
BRADLEY SCHOOL
N 54°39'35"E
50.99'
N 15°30'00"E
51.89
N 77°53'00"E
53.11
S 36°25'14"E
202.31' (TOTAL)
N 55°58'00"E 90.02'
N 19°16'00"E
N 42°11'00"W
14.27'
N 54°11'00"W
N 36°46'00"W 60.30'
N 42°27'00"W
N 38°31'00"W
18.44'
N 68°09'00"W
13.60'
1.10 Ac +/-
Plat Book 15 Page 85
Lake Norman
S 73°18'22"W 142.68'
S 49°48'05"W
65.65'
TIE LINE ONLY
Due West Dr.
60' R/W (Private) Unpaved
Plat Book 15 Page 85
S 24°03'30"E
54.05'
Arc 57.10'
Rad 50.00'
S 67°52'00"W 181.26
Tract 2
Now or Formerly
Linda W. Millsaps
1076-1784
Plat Book 29 Page 10
100'
Boundary and Partial Topographic
Survey For
The Blayney
Company, LLC
Davidson Township, Iredell County, NC
Owner of Record: The Blayney Company, LLC
Deed Reference: 1660-1329, 622-325 (Back)
481-91 (Back)
Lot 506, Plat Book 15 Page 85
"Crescent Land & Timber Corp., Lake Norman
Map of Recreational Lots, Section B,
Lots 501-514"
PIN: 4626 79 1583
Job Number: 0712178.dwg (0712178.crd)
Field Date: December 10, 2007
110 DUE WEST SEPTIC SITE PLAN 1-2-20
MUST BE APPROVED BY LHD
TED BENBOW
Land Surveying
Now or Formerly
Lindsey F. Millsaps
and wife,
Subject property is zoned: R-20
Adjoining property is zoned: R-20
Setbacks for subject property:
(Iredell County)
Front: 35 feet
Sides: 15 feet
Rear: 35 feet from normal pool elevation
Vegetative Buffer 50 feet from 760 contour
(Plat Book 15 Page 85)
Front: 25 feet
Sides: 10 feet
Rear: 50 feet off 760 contour
(Deed Book 622 Page 325)
Front: 0
Sides: 10 feet
Rear: 50 feet off 760 contour
* 10 foot drainage & utility easement along

CAN PAUL PERMIT FOR 5TH VISIT AP-303825

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

1/2/20

APPLICATION FORM 704-996-6330 $250.00

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) 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 (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: LAWRENCE HARKNESS Address: 242 TEMPLETON RD MOORESVILLE Zip: 28115

Applicant Email: larry@harknessbuilders.com Phone: 704.622.3074 Alt. Phone:

Owner Name: SAME AS ABOVE Address: Zip:

Owner Email: Phone: Alt. Phone:

Property Information:

Street Address: 110 DUE WEST DR

Subdivision Name: CL&T Section/Phase: 8 Lot Number: 506

Driving Directions: BRAWLEY SCH RD, TR BLUME, TL BEECHTREE, TR KINGS CROSS, TL DUE WEST AT END

NOT ADDING BEDROOMS

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: 3
Maximum Number of Occupants: 6
( ) Swimming Pool
(X) Other Addition/Structure: +SHOP

CHECK FOUNDATION TYPE

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

Both

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

Desired Septic System Type: *(you may rank in order of preference)* EXISTING BED + CONV. TRENCHES 94'
Year existing system installed: ~~Abs~~?; repair ?
( ) 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: _____ 12/19/19
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

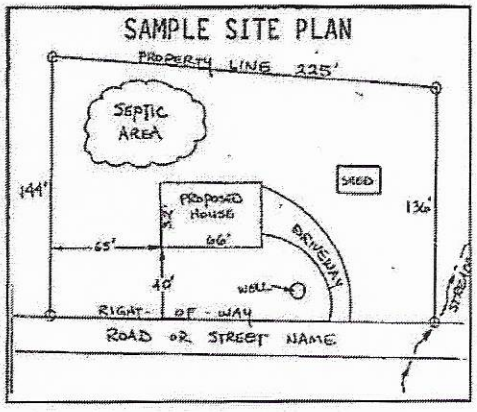
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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 OR WELL 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
- ( ) Preferred well location EX
- ( ) Preferred septic system location EX
- (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 site plan.

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

DATE 12/09/19

IREDELL COUNTY HEALTH DEPARTMENT

4626791583

IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

PROPERTY DESCRIPTION NO. ______

OWNER OR CONTRACTOR Richard Harkness DATE June 20, '94 TAX MAP NO. ______

ADDRESS 4508 Columbine Ct. Charlotte 28226 PHONE: Business ______ Home ______ Watershed: ☑ Yes ☐ No

LOCATION 150 TR 1178 (Edmonds) TL immediately onto Beechtree TL Kings X Lane TL 2nd gravel road, at end

SUBDIVISION Crescent Lan BLOCK / SECTION 8 LOT 506 LOT AREA ______ SITE CLASS. ______ DESIGN FLOW ______ L.T.A.R. ______

Septic Tank: Existing Gallons; STB ______ Date ______
Pump Tank: ______ Gallons; PT ______ Date ______
Pump Make: ______ Model ______ Serial No. ______
Nitrification Field: No Fields 1 Square Feet 600 Linear Feet ~~200~~ 160
No Lines 3 Trench Width 36" Max Trench Bottom Depth 24"

☐ New System ☑ Repair System Type: I, II, III, IV, V, VI
System Description: gravity bed
Repair System Description: gravel conv. trenching
Maintenance Agreement Required: ☐ Yes ☑ No
Gravel Depth 12"

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Bathrooms 1-2 No. Employees ______

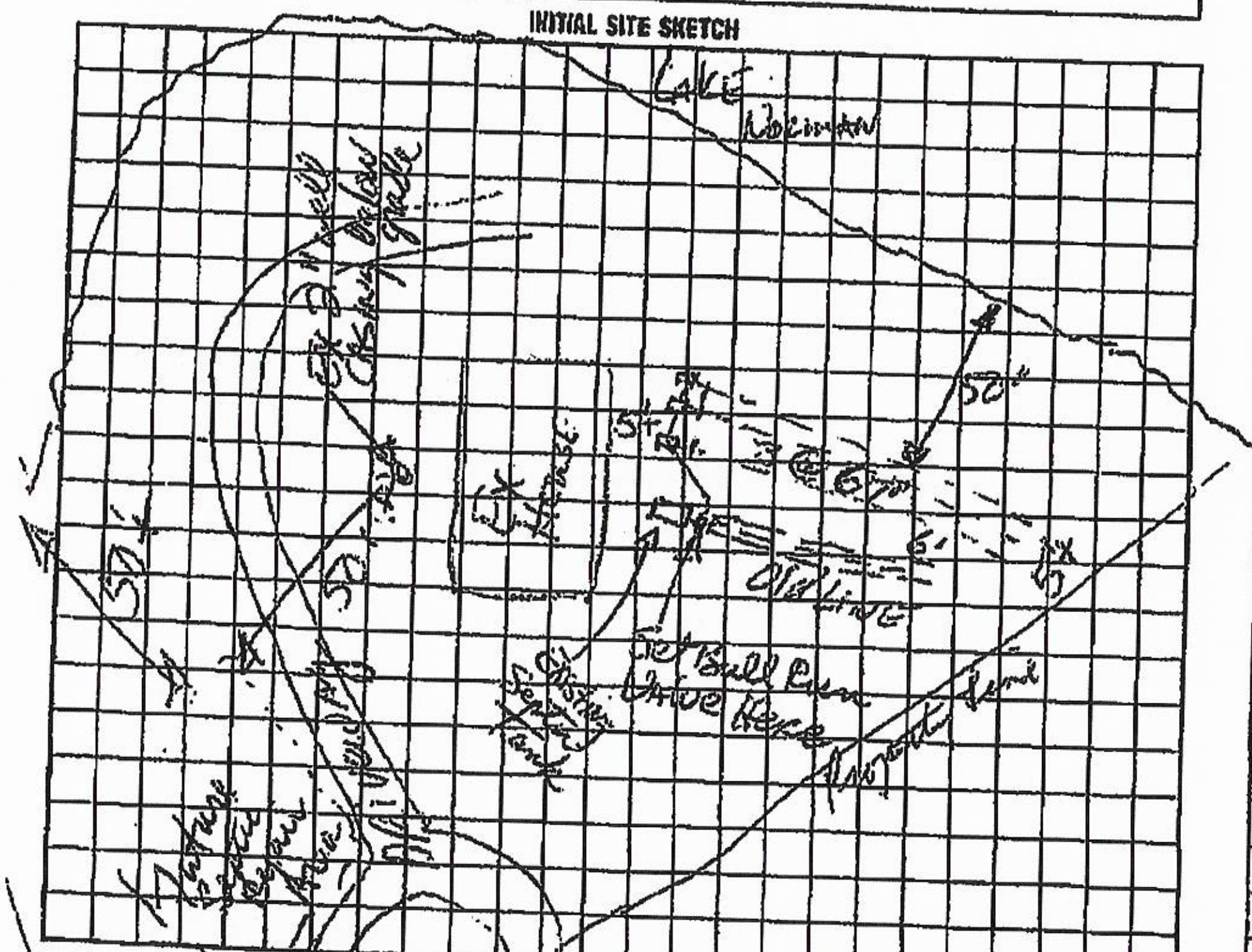
Water Supply: ☑ Individual ☐ Community ☐ Public

☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

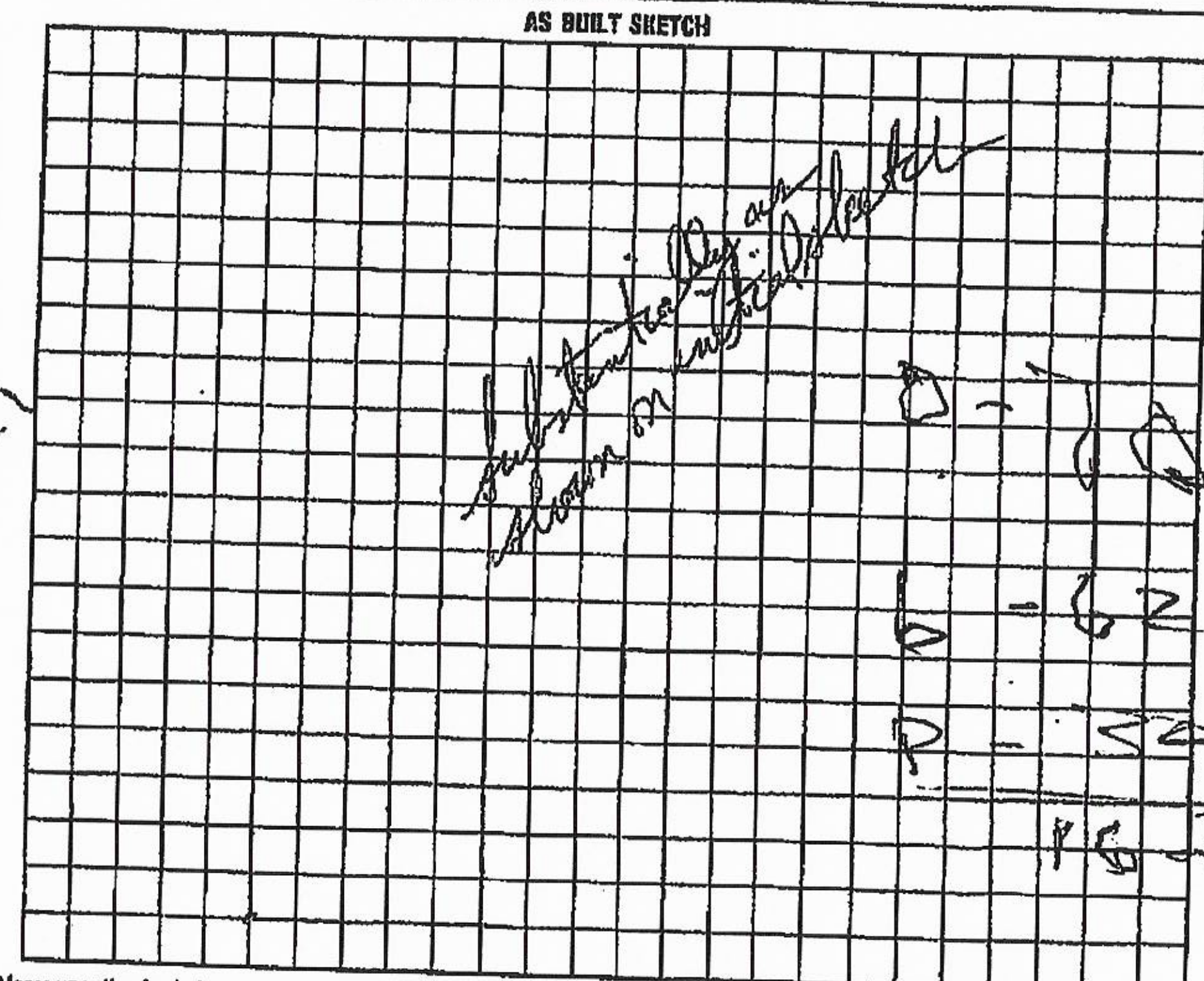
Comments:

Comments: upper line short approx. 40' due to existing drainfield location (hit old line & had to stop)

INITIAL SITE SKETCH



AS BUILT SKETCH



I understand that this 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. Improvement Permit is valid for 60 months from date of issuance.

Signed: ______

Improvement Permit by: [signature], RS date 6/20/94

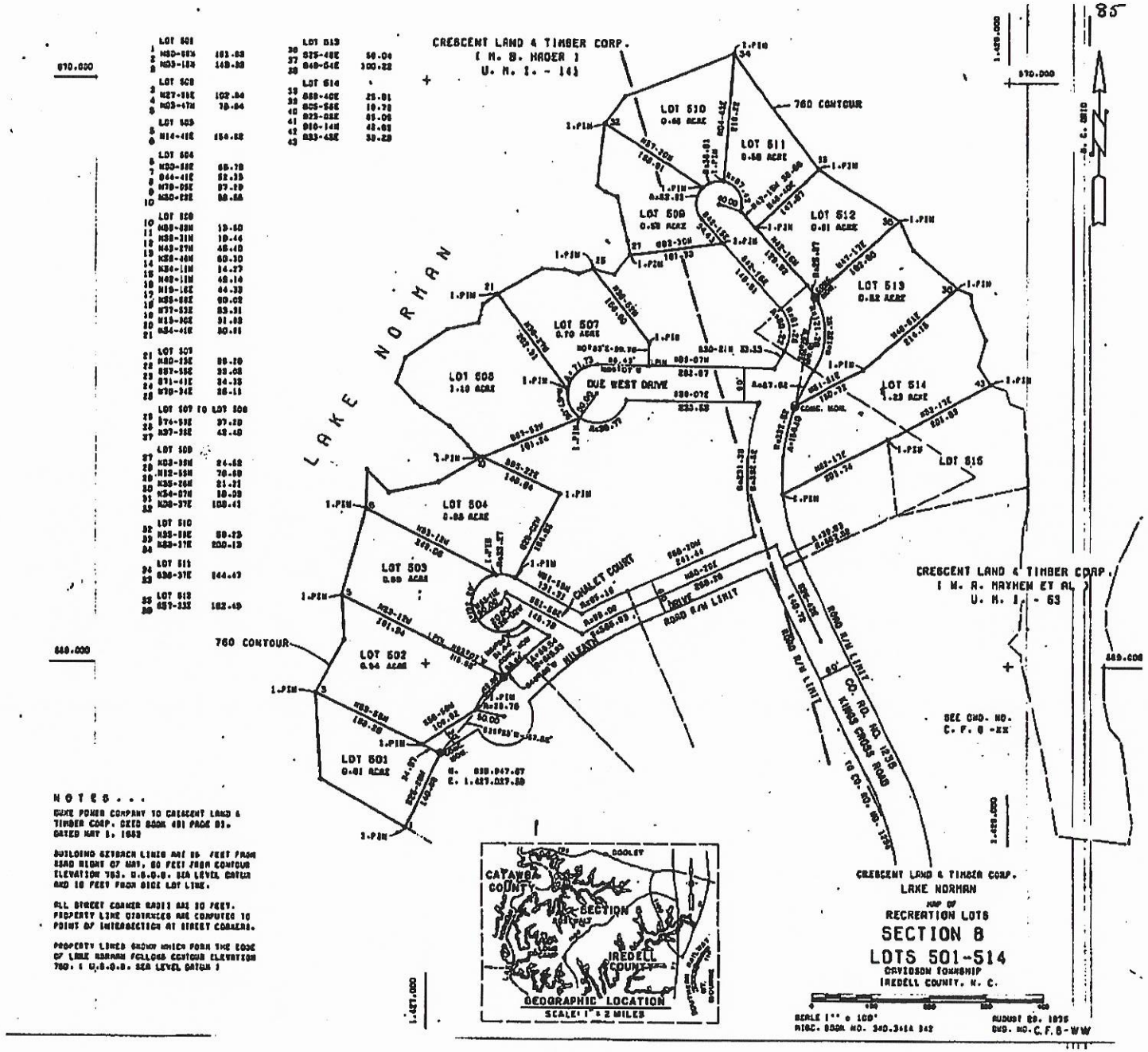
Existing System Inspection by: ______ date ______

Installed by: Tim Simmons

Certificate of Completion by: [signature], RS date 8/29/94

Operation Permit by: ______ date ______

HEALTH DEPT. COPY: WHITE INSPECTION COPY (FINAL): GREEN OWNER COPY (FINAL): YELLOW INSPECTION COPY (INITIAL): PINK OWNER COPY (INITIAL): GOLD



	LOT 501			LOT 513	
1	N30-08W	101.83	36	S75-48E	56.04
2	N33-18W	149.93	37	S48-54E	100.22
	LOT 502			LOT 514	
3	N27-19E	102.84	38	S88-40E	25.01
4	N03-47W	78.84	39	S05-56E	10.78
	LOT 503		40	S23-02E	61.06
5			41	S10-14W	43.61
6	N14-41E	154.82	42	S33-43E	39.29
	LOT 504				
7	N30-58E	65.78			
8	S44-41E	52.35			
9	N78-05E	97.29			
10	N30-23E	98.86			
	LOT 505				
10	N88-03W	19.60			
11	N38-31W	19.46			
12	N43-27W	45.48			
13	N38-46W	60.30			
14	N36-11W	14.27			
15	N48-11W	48.14			
16	N19-10E	44.33			
17	N35-59E	60.02			
18	N77-53E	53.31			
19	N15-36E	91.88			
20	N34-41E	50.81			
	LOT 507				
21	N80-13E	86.29			
22	S87-55E	33.08			
23	S71-41E	34.35			
24	S19-34E	26.15			
	LOT 507 TO LOT 508				
25	S74-59E	37.29			
26	N37-35E	42.45			
	LOT 508				
27	N53-09W	24.68			
28	N12-55W	76.69			
29	N35-26W	21.21			
30	N34-07W	18.39			
31	N38-37E	108.41			
	LOT 510				
32	N35-59E	89.23			
33	N53-31E	200.13			
	LOT 511				
34	S36-37E	144.43			
	LOT 512				
35	S57-33E	182.49			

NOTES . . .

DUKE POWER COMPANY TO CRESCENT LAND & TIMBER CORP. DEED BOOK 491 PAGE 81. DATED MAY 5, 1952

BUILDING SETBACK LINES ARE 50 FEET FROM ROAD RIGHT OF WAY, 50 FEET FROM CONTOUR ELEVATION 760. U.S.G.S. SEA LEVEL DATUM AND 10 FEET FROM SIDE LOT LINE.

ALL STREET CORNER RADII ARE 30 FEET. PROPERTY LINE DISTANCES ARE COMPUTED TO POINT OF INTERSECTION AT STREET CORNERS.

PROPERTY LINES SHOWN WHICH FORM THE EDGE OF LAKE NORMAN FOLLOWS CONTOUR ELEVATION 760.1 U.S.G.S. SEA LEVEL DATUM.

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, _____, am the legal owner(s) of the property located at _____, identified as

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

I do hereby authorize (**print legal representative/company name**) _____,

_____, 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.

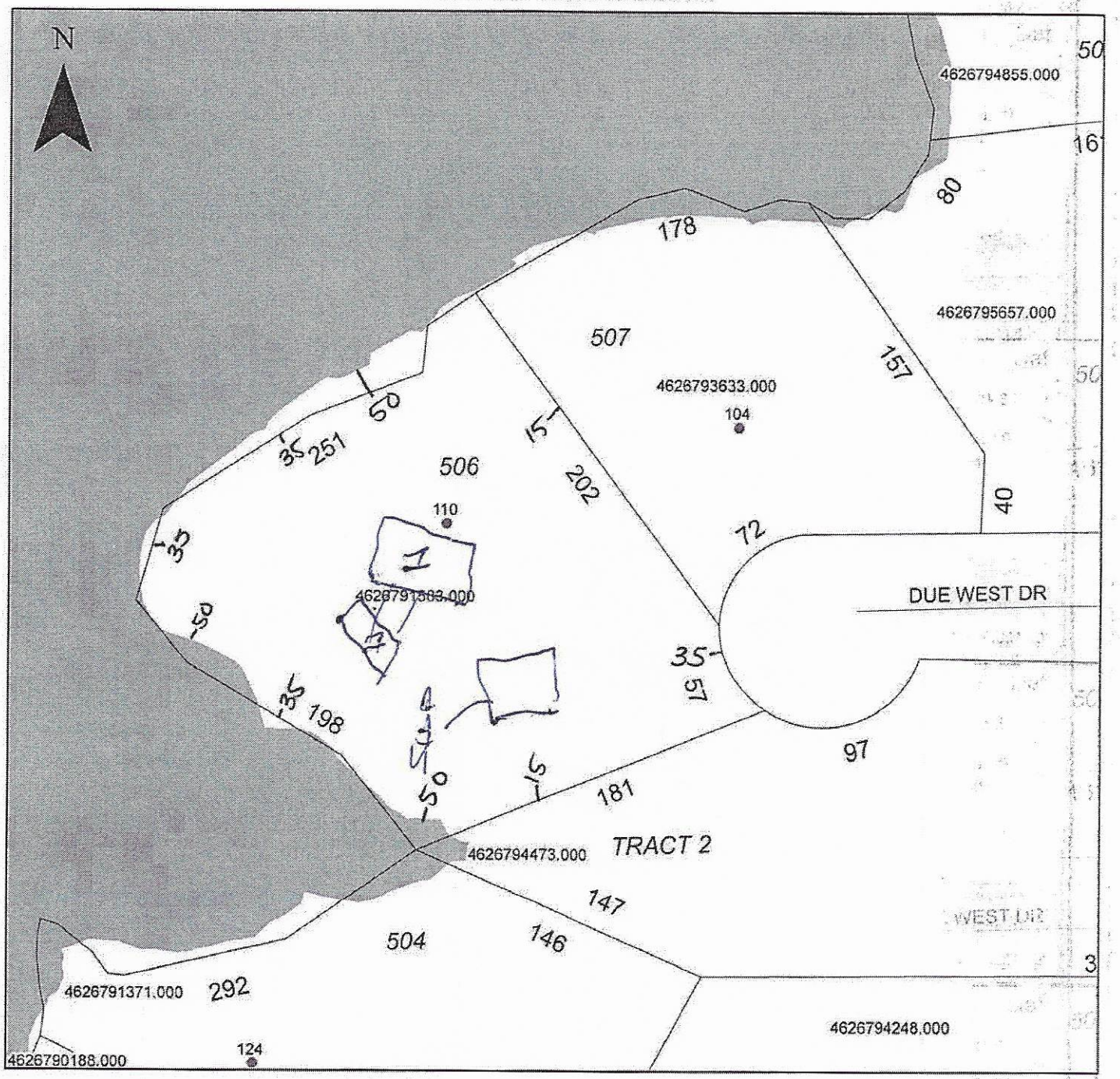
_____ 12/19/19

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

ZONING DISCLAIMER



Property Address 110 Due West

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 the 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

1-2-20

Date