ICHD–ENVIRONMENTAL HEALTH DIVISION

KW

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

PERMIT # AP-303469

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

PIN # 4627-76-7928 ✓

APPLICANT/OWNER: Joe Bagley | APPLICANT ADDRESS: 303 Greenbay Rd. Mooresville

SITE ADDRESS: 303 Greenbay Rd. Mooresville, NC 28117 ✓ | PHONE: — | ALT. PHONE Bryan 704-634-4041

SITE DIRECTIONS: Rt 150 West → L on Paradise Peninsula → L on Greenbay Rd → House on left | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Greenbay Forest ✓ | SECTION: SHT 2 | LOT # 19 ✓ | LOT AREA: 1.11 acres | DESIGN FLOW: 480 GPD | L.T.A.R.: 0.25

Septic Tank	1000 (existing) (gal)	STB	—	Date	—	☐ New System ☐ Repair ☒ Expansion	System Type: I II (III) IV V VI
Pump Tank	— (gal)	PT	—	Date	—	System Description:	Existing (EZ Flow) + PPBPS (New - 50% Reduction)
Pump Make	—	Model	—	Serial #	—	Repair System Description:	Drip
# Nitrification Fields	1	# Lines	Existing + 3 New	Linear Ft	80	Maintenance Agreement Required:	☐ YES ☒ NO
Trench Width	24"	Trench Bottom Depth(Low side)	34"	Gravel Depth	—	☒ GRAVITY	☐ PRESSURE

☒ Residence | No. Bedrooms: 4
☐ Business | No. Persons: 8
☐ Other | No. Employees:
☐ Slab | ☒ Crawl Space
☐ Basement w/plumbing | ☐ Basement w/o plumbing

Water Supply: ☒ Private Existing ☐ Public ☐ Community

Comments / Conditions: Utilize distribution box as shown on attached plan.

INITIAL SITE SKETCH

See attached design plans from

Michael Athanas + Associates

Michael Athanas LSS# 1252

Plans Dated: 12/13/19

Plans Received: 12/16/19

AS BUILT SKETCH

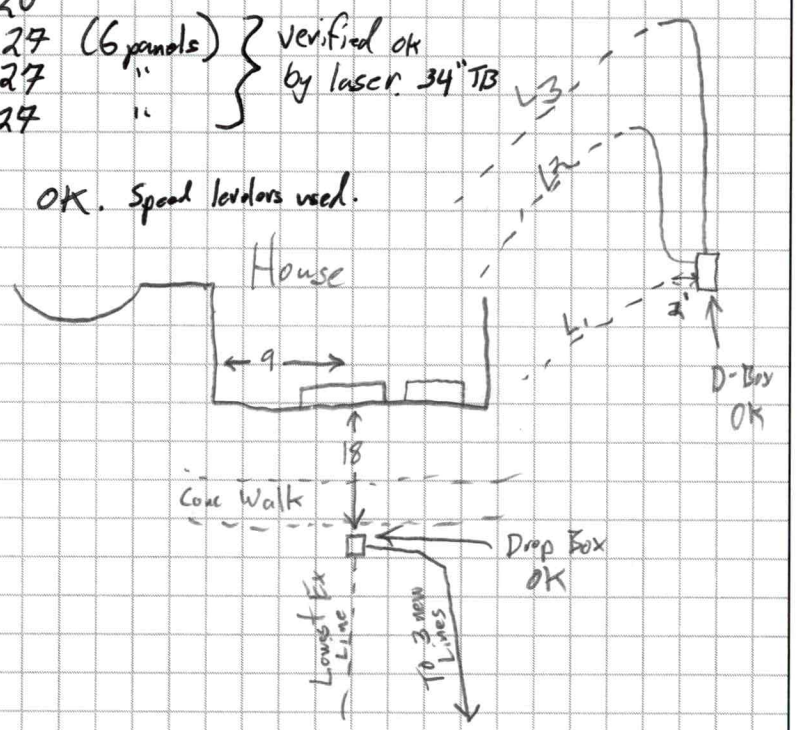
3/9/2020

L1 27 (6 panels) } verified ok by laser. 34" TB

L2 27 "

L3 27 "

D-Box OK. Spool levelers used.



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**

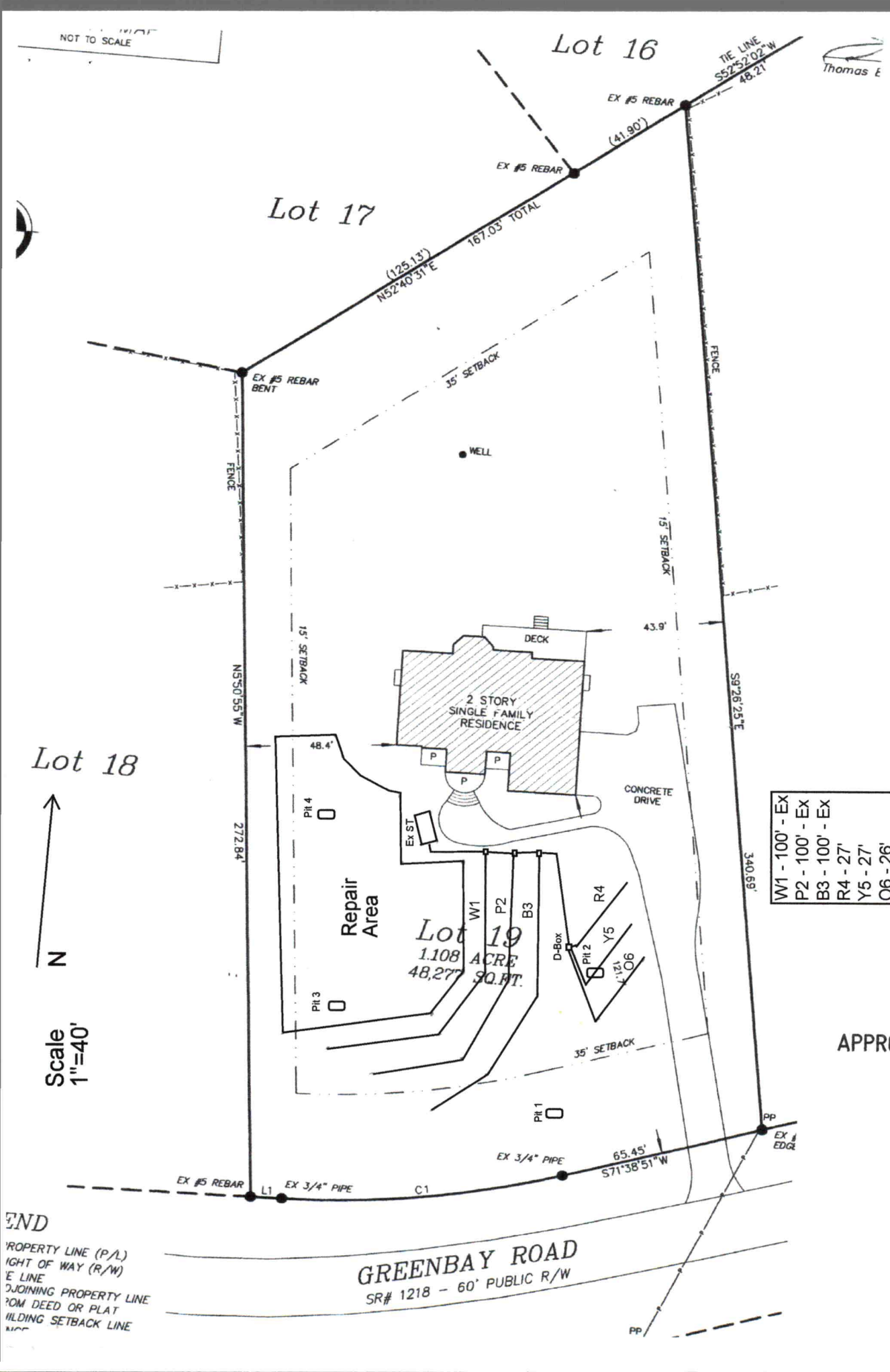
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Joe Bagley | Date: 1/14/2020 | Installed by: FJ Irvin

IMPROVEMENT PERMIT by: Thomas Shuck | Date: 1/7/2020 | OPERATION PERMIT by: Tom Shuck | Date: 3/9/2020

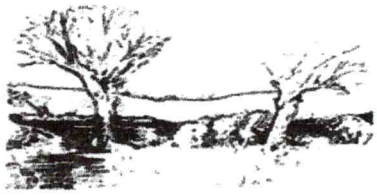
AUTHORIZATION TO CONSTRUCT by: Thomas Shuck | Date: 1/14/2020 | Existing System Inspected by: | Date:

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.



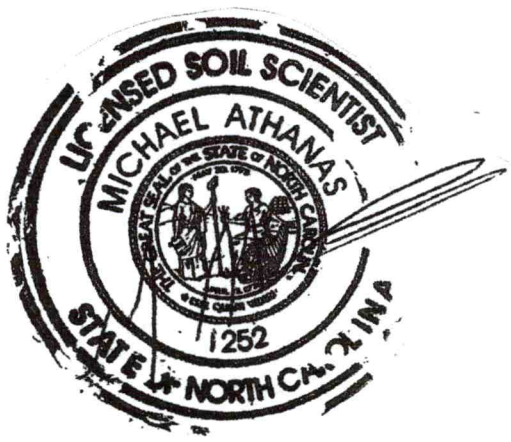
END

PROPERTY LINE (P/L)
RIGHT OF WAY (R/W)
E LINE
OJOINING PROPERTY LINE
ROM DEED OR PLAT
UILDING SETBACK LINE



MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887
00/00/00

Reference: Data Sheet for 303 Greenbay Rd, Greenbay Forest Lot 49
House Footprint: See attached plan
Building Setbacks: 35' front/rear, 15' side
Water Source: Existing Private Well
Number of Bedrooms/Daily Flow: 4/480 GPD
Proposed LTAR: 0.25 GPD/FT^2 Addition
Proposed System Type: EZ Flow (existing) + PPBPS (Addition)
Proposed Repair System Type: Drip Irrigation
Distribution: Gravity-Drop Boxes/Distribution box
Septic Tank Size: 1000 gallons (existing)
Proposed Trench Bottom: 36" maximum



Line	Design Length	Actual Length
White 1 Ex	100'	100'
Pink 2 Ex	100'	100'
Blue 3 Ex	100'	100'
Red 4	27' (6 panels)	28'
Yellow 5	27' (6 panels)	27'
Orange 6	26' (6 panels)	26'

Initial System: 300' existing + 80' addition **Repair System:** 3840 + FT^2

Comments:
There is an existing 3 bedroom system. MA&A propose to add 80' of PPBPS to increase the system to 4 bedrooms. The existing system is fed by drop boxes. We propose to distribute the addition by a distribution box.

APPROVED JAN 17 2020

PROPERTY ID #: 4627767928
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Joe Bagley APPLICATION DATE
ADDRESS: 303 Greenbay Rd, Mooresville, NC 28117 DATE EVALUATED: 12/2019
PROPOSED FACILITY: 4 BDRM PROPOSED DESIGN FLOW (.1949): 480 GPD PROPERTY SIZE: 1.11 AC
LOCATION OF SITE: 303 Greenbay Rd, Greenbay Forest Lot 19 PROPERTY RECORDED:
WATER SUPPLY: X Private ☐ Public X Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring X Pit ☐ Cut TYPE OF WASTEWATER: X Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LS 6%	0-13	Br SCL WSBK	FR SS SP SXP	YB CHR 2 @ 27"	27"	N/A	N/A	PS 0.25
		13-27	R C SBK/ABK	FR SS SP SXP					
2 ✓	LS 6%	0-4	Br CL WSBK	FR SS SP SXP	Few YB	48"	N/A	N/A	PS 0.25
		4-36	R C SBK/ABK	FR SS SP SXP					
		36-48	R CL WSBK	FR SS SP SXP	No YB				
3 ✓	LS 4%	0-15	Br SCL WSBK	FR SS SP SXP	N/A	32"	N/A	N/A	PS 0.3
		15-32	R C SBK	FR SS SP SXP					
		32	ROCK						
4 ✓	LS 6%	0-8	Br SCL WSBK	FR SS SP SXP	YB No YB	52"	N/A	N/A	PS 0.25
		8-36	R C SBK	FR SS SP SXP					
		36-52	R CL WSBK	FR SS SP SXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	240 FT^2 ADD	3840 FT^2
System Type(s)	PPBPS	DRIP
Site LTAR	0.25	0.125

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: MA&A
OTHER(S) PRESENT: Tom Shuck (12/30/19) Pits 2, 3, 4

COMMENTS:

$350.00 12-16-19

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM Expansion. AP-303469

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: (PRINT CLEARLY)

Applicant Name: Joe Bagley **Address:** 303 Greenbay Rd, Mooresville, NC **Zip:** 28117

Applicant Email: _____ **Phone:** Bryan 704-634-4041 **Alt. Phone:** _____

Owner Name: Same **Address:** _____ **Zip:** _____

Owner Email: _____ **Phone:** _____ **Alt. Phone:** _____

Property Information:

Street Address: 303 Greenbay Rd

Subdivision Name: Greenbay Forest **Section/Phase:** _____ **Lot Number:** 19

Driving Directions: _____

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

CHECK FOUNDATION TYPE

( ) New Single Family Residence — Maximum Number of Bedrooms: 4 — (✓) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: _____ — ( ) Concrete Slab Foundation
( ) Accessory Building — ( ) Swimming Pool — ( ) Basement with Plumbing
(✓) Bedroom(s) Addition — ( ) Other Addition/Structure: _____ — ( ) Basement without Plumbing
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____
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 ( ) 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: _____ 12/13/2019
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, _____Joseph Bagley_____, am the legal owner(s) of the property located at_____303 Greenbay Rd. Mooresville NC, 28117_____, identified as PIN (Parcel Identification Number) _____ 4627767928.000 _____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Michael Athanas & Associates_, _____, 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.

_____ 12/6/19 _____ 12/6/19

Signature of Owner(s) Date Signature of Witness 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