IREDELL COUNTY HEALTH DEPARTMENT

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

PERMIT # 244295

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

PIN # 4627822020 ✓

APPLICANT/OWNER: JIMMY D. BRADLEY — APPLICANT ADDRESS: 200 COVECREEK LOOP, MOORESVILLE, NC, 28117

SITE ADDRESS: 616 BEATEN PATH ROAD, MOORESVILLE, NC, 28117 ✓ — PHONE: 704-201-2291 — ALT. PHONE 843-509-2904

SITE DIRECTIONS: ① ON 77 ② ON BRAWLEY SCHOOL ③ ON BLUME, ④ ON BEATEN PATH, LOT ON (R) — SAP CONTROLLED: ☐ YES ☑ NO

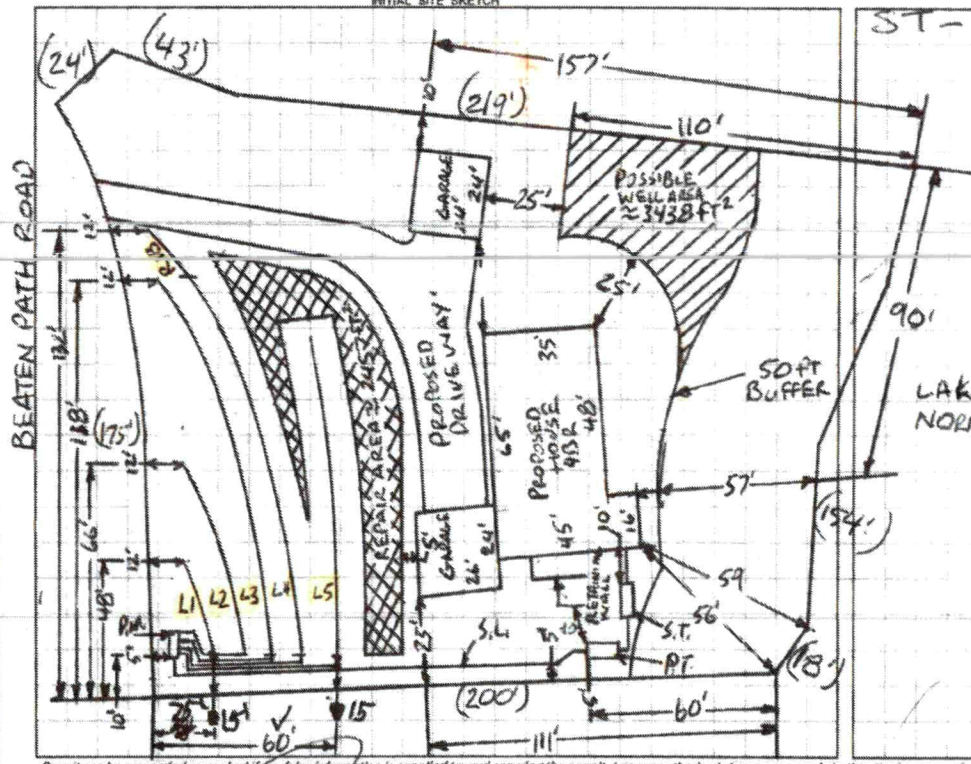
SUBDIVISION: CL+T ✓ — SECTION: 59 ✓ LOT # 48 ✓ — LOT AREA: 0.86 AC — DESIGN FLOW: 480 GPD — L.T.A.R.: 0.3

Septic Tank	1000 (gal)	STB	Infiltrator	Date		☑ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI	☑ Residence	No. Bedrooms	4	Water Supply
Pump Tank	1000 (gal)	PT	Plastic	Date		System Description:	25% REDUCTION - P.N.	☐ Business	No. Persons	8	☑ Private
Pump Make	Zoeller	Model	1/2HPWE05	Serial #		Repair System Description:	50% REDUCTION - LPP	☐ Other	No. Employees	—	☐ Public
# Nitrification Fields	1	# Lines	5	Linear Ft	400 FT	Maintenance Agreement Required:	☐ YES ☑ NO	☐ Slab	☐ Crawl Space		☐ Community
Trench Width	36 IN	Trench Bottom Depth(Low side)	30 IN	Gravel Depth	—		☐ GRAVITY ☑ PRESSURE	☑ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions: INSTALL ON CONTOUR, INSTALL ON 9FT CENTERS, UTILIZE PRESSURE MANIFOLD DISTRIBUTION, TANKS MUST BE INSTALLED UNDER FONDATION DRAINS AND MAINTAIN 10FT HORIZONTAL SET BACK TO DRAIN. Filter installed

50FT BUFFER MUST BE MARKED AT TIME OF FINAL INSPECTION, IF TANKS EXCEED 36IN OF COVER TRAFFIC RATED TANKS MUST BE USED

INITIAL SITE SKETCH



AS BUILT SKETCH

ST - 10ft off house 9-10ft off PL

L1 = 30FT
L2 = 58FT
L3 = 110FT
L4 = 114FT
L5 = 90FT

TAPS
L1+L2 = 1/2 SCH80
L3 = 1/2 SCH40
L4 = 1/2 SCH40
L6 = 1/2 SCH80

188 GAL DOSE VOLUME
25.18 GPM
7.5 MIN RUN TIME
9 IN DRAW DOWN

1 IN = 50FT
S.T. = SEPTIC TANK
S.L. = SUPPLY LINE
P.T. = PUMP TANK
BR. = BEDROOM
R = REPAIR

6/30/2020: Drainlines and PM box were checked and all good a temp power pole has been installed between the lines and needs to be removed. measurements to drainlines on original 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: _____ Date: 11-04-19 Installed by: C Wayne Orbinson

IMPROVEMENT PERMIT by: Burkett C. White Date: 10-29-2019 OPERATION PERMIT by: Burkett C White Date: 8-18-2020

AUTHORIZATION TO CONSTRUCT by: Burkett C. White Date: 10-29-2019 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.

	Date	Initials
Drain Lines Checked	6/30/2020	PJB
Tanks Checked	7/2/20	MD
Pressure Manifold or Valve Box Checked	6/30/2020	PJB
Pressure Head Set	7/2/20	MD
Electrical Checked	8-18-2020	BCW
Floats Set	7/2/20	MD
Alarm Checked	8-18-2020	BCW
Maintenance Contract Y / (N)	8-18-2020	BCW
Comments:		

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

Sheet 1 of 2
PROPERTY ID #: 4627822020
COUNTY: IREDELL

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

OWNER: JIMMY D. BRADLEY
APPLICATION DATE 4-30-19
ADDRESS: 200 COVE CREEK LOOP, MOORESVILLE, NC. 28117
DATE EVALUATED: 5-9-2019
PROPOSED FACILITY: 4 BR
PROPOSED DESIGN FLOW (.1949): 480 GPD
PROPERTY SIZE: 0.86 AC
LOCATION OF SITE: 616 BEATEN PATH ROAD, MOORESVILLE, NC 28117
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	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	FOOT 8%	0-48	C, SBK	FR, S, P, SEXP	10YR 7/3 STARTING @ 40" 10YR 5/2 @ 46" MANG CONC	48"+	NA	NA	PS .285 ABOVE 40"
2	LINEAR SIDE 10%	0-12	SCL, SBK	FR, SS, SP, SEXP	SAP INC MICA INCL	55"+	NA	NA	PS .3
		12-30	C, SBK	FR, S, P, SEXP					
		30-55	CL, WSBK	FI, SS, SP, SEXP					
3	LINEAR SIDE 5%	0-30	C, SBK	FR, S, P, SEXP	SAP INC MICA INCL	57"+	NA	NA	PS .3
		30-57	CL, WSBK	FI, SS, SP, SEXP					
4	LINEAR SIDE 10%	0-12	SCL, SBK	FR, SS, SP, SEXP	SAP INC MICA INCL	52"+	NA	NA	PS .3
		12-35	C, SBK	FR, S, P, SEXP					
		35-52	CL, WSBK	FI, SS, SP, SEXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	25%	50%
Site LTAR	0.3	0.3

OTHER FACTORS (.1946): PS
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Burnett C. Wilson
OTHER(S) PRESENT:

COMMENTS:

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

PROPERTY ID #: 4627822920
COUNTY: IREDELL

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

OWNER: SEE PAGE1 APPLICATION DATE 4-30-19
ADDRESS: DATE EVALUATED: 8-26-19
PROPOSED FACILITY: PROPOSED DESIGN FLOW (.1949): PROPERTY SIZE:
LOCATION OF SITE: 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) .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	LINEAR SIDE 10%	0-10	SCL, SBK	FR, SS, SP, SEXP	O.M IN A HOR	52"+	NA	NA	PS 1.3
		10-29	C / ABK	FR, S, P, SEXP	FE IN X/B				
		29-52	CL / WABK	FI, SS, SP, SEXP	IN C SAP, INC THRU				
2									
3									
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:

#244295
Pd. $500.00
5-2-19

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) Septic Improvement Permit (X) 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: Jimmy D. Bradley **Address:** 800 Cove Creek Loop Mooresville NC **Zip:** 28117
Applicant Email: Bradley5.jim@GMAIL **Phone:** 704-201-2291 **Alt. Phone:** N/A
Owner Name: Floyd Ray Swagerty JR **Address:** 2836 S. Moss Oak Lane Charleston SC **Zip:** 29414
Owner Email: FAYswagerty@comcast.NET **Phone:** 843-509-2904 **Alt. Phone:** N/A

Property Information:

Street Address: 616 Beaten Path Road Mooresville NC 28117

Subdivision Name: Crescent Land And Timber Corp **Section/Phase:** 9 **Lot Number:** 48

Driving Directions: I77 North Exit 35 LT Brawley School RD 3.4 miles RT on Blume Rd. .9mi. LT Beaten Path .7mi LT Cicero LN 381' LT Shavender DR .3mi RT Beaten Path .5mi House/Lot on LEFT

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

CHECK FOUNDATION TYPE

(X) New Single Family Residence — Maximum Number of Bedrooms: 4 — (X) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: 8 — ( ) 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: _____

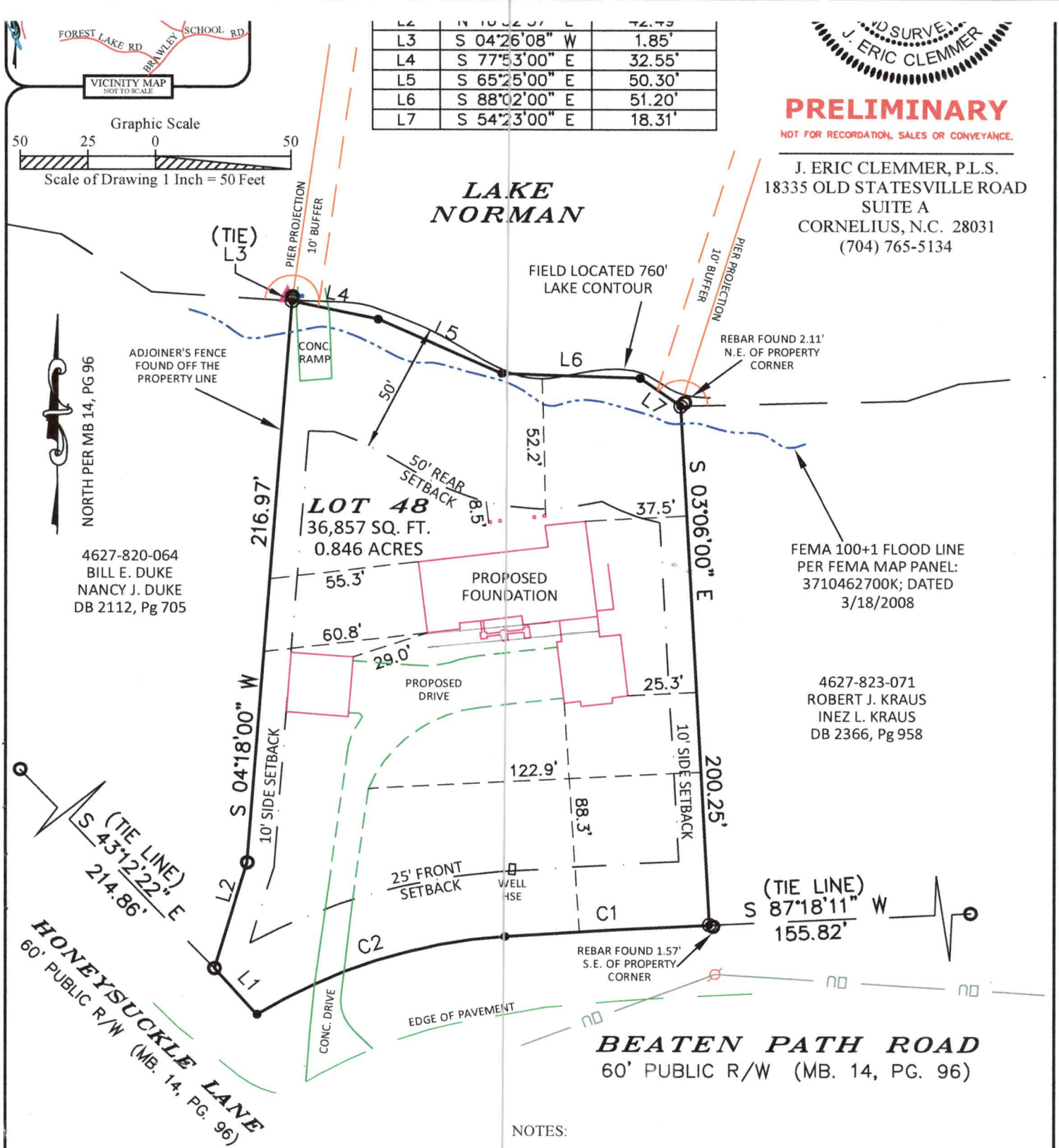
Water Supply: ( ) Replacement Well – Reason: _____
( ) Multi-connection Well Number of Houses: _____ Number of Persons: _____
( ) New Well (X) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: _____
( ) No Preference ( ) Alternative (X) 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: _____ 04-30-19
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE



LEGEND:

- #4 REBAR FOUND
- #4 REBAR SET
- COMPUTED POINT
- UTILITY POLE
- SUBJECT PROPERTY LINE
- ADJOINER PROPERTY LINE
- BUILDING SETBACK
- OVERHEAD UTILITIES
- FENCE LINE

NOTES:

1. NO NCGS MONUMENT FOUND WITHIN 2000'.
2. PROPERTY MAY BE SUBJECT TO OTHER COVENANTS, RESTRICTIONS, EASEMENTS OR RIGHTS-OF-WAY THAT MAY BE OF RECORD.
3. THE SETBACKS SHOWN ARE PER MB. 14, PG. 96.
4. CONSULT WITH GOVERNING AGENCY FOR PREVAILING LAND DEVELOPMENT AND ZONING REQUIREMENTS PRIOR TO DESIGN OR CONSTRUCTION OF ANY IMPROVEMENTS.

Site Plan of Lot 48 of Crescent Land & Timber Corp Recreation Lots, Section 9

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)* N/A

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, Floyd Raymond Swaggerty JR, am the legal owner(s) of the property located at 616 Beaten Path Road, Mooresville NC 28117, identified as

PIN (Parcel Identification Number) 4627822020.000, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) Jimmy D. Bradley, 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.

Signature of Owner(s) — Date: Mar 6, 2019

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
244295
Issue Date: 05/02/2019

ZONING PERMIT
Residential

Parcel Number	Street Address	Jurisdiction
4627822020.000	616 BEATEN PATH ROAD, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: SWAGERTY DORA B	Applicant: JIMMY D & DEBRA BRADLE
Address: 2836 SOUTH MOSS OAK LANE	Address: 129
CHARLESTON, SC 29414	IREDELL CO, NC 28625
Phone:	Phone:

Use Requested	Zone Code
SFD - EXISTING HOME MUST BE DEMOED PRIOR TO ISSUANCE OF CO OF NEW HOME. PER WA 5.2.19 SL	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone	
.860	35.00	50.00	15.00	15.00	CACL		AE

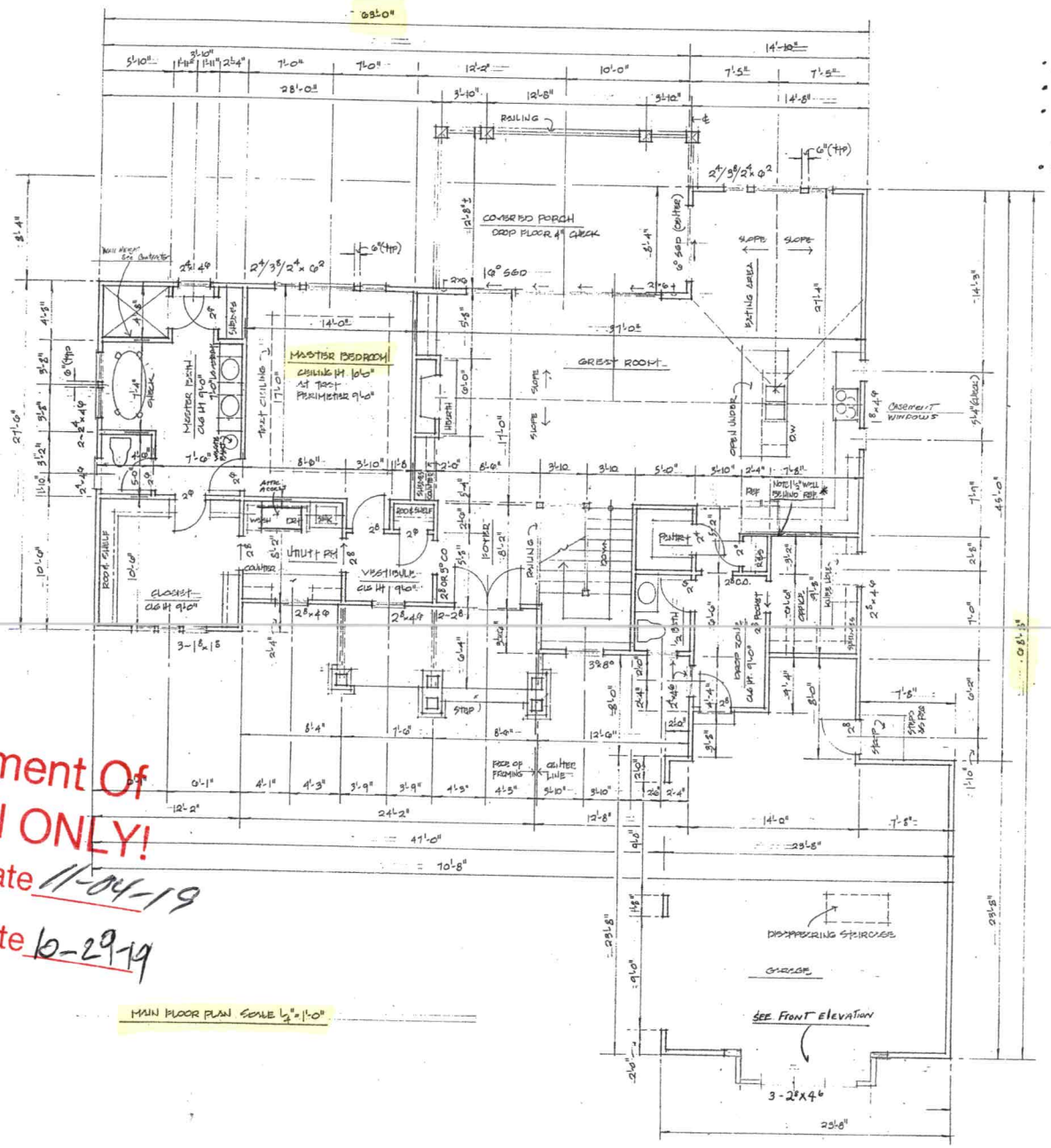
Remarks:

Must meet both the 50-foot setback from the 760 AE contour line and the 35-foot setback from the rear property line for any structure.

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	175931	TOTAL FEES:	$ 79.50



MAIN FLOOR PLAN SCALE 1/4"=1'-0"

FRAMING NOTES

- Ceiling Heights 9' (Except Trays/Vaults)
- All Header Heights 99½" RO
- Raise Roof Approx 6" To Allow For extra HH Clearance / Roof overhang Clearance
  - Consider 9' ceilings w/ 8' doors -
- Great Room/Kitchen Vault 6/12 Pitch

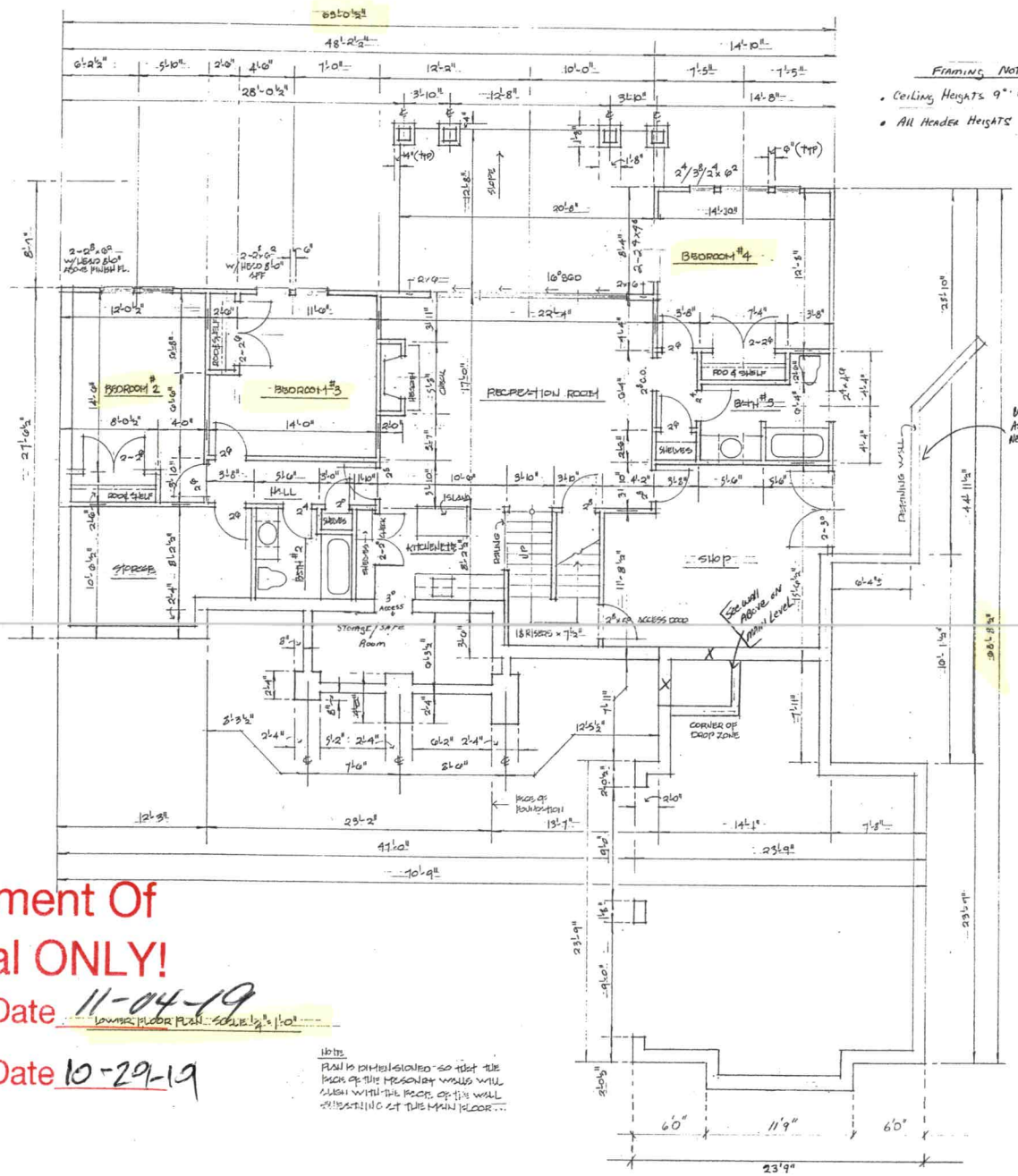
Acknowledgement Of Plans Submittal ONLY!

Date 11-04-19

Date 10-29-19

- Contractor -
Jim Bradley
704-201-2291

RESIDENCE FOR MR & MRS. JIM BRADLEY · LAKE NORMAN, NORTH CAROLINA · DRAWN BY THOMAS FISHER · OCTOBER 2019



cknowledgement Of
ans Submittal ONLY!
Date 11-04-19
Date 10-29-19

LOWER FLOOR PLAN SCALE: 1/4" = 1'-0"

DESIGNED FOR HEATED JIM BOARDUP LAKE NORMAN, NORTH CAROLINA DRAWN BY THOMAS PITCHER OCTOBER 2019