ICHD–ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # AP303708

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

PIN # 4629631400

APPLICANT/OWNER: Johnny Guthrie | APPLICANT ADDRESS: 122 Windwood Ln Troutman NC 28166

SITE ADDRESS: 122 Windwood Ln Troutman NC 28166 | PHONE: 704-575-3387 | ALT. PHONE 704-597-9449

SITE DIRECTIONS: NC 115 N to Lon Connector Rd, S on Lorneltius Rd, Ron Jurdas Rd, Ron Perth Rd, Lon State Park Rd, Lon Morrison Farm Rd, Ron April Rd, Lon Windward

SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Hawks Bay | SECTION: — | LOT # 38 | LOT AREA: 2.412 acres | DESIGN FLOW: 600 GPD | L.T.A.R.: .275

Septic Tank	1500 (gal)	STB		Date	
Pump Tank	1500 (gal)	PT		Date	
Pump Make		Model		Serial #	
# Nitrification Fields	1	# Lines	4	Linear Ft	546
Trench Width	36"	Trench Bottom Depth(Low side)	28"/33" high side	Gravel Depth	—

☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI

System Description: PM 25% reduction

Repair System Description: LPPPBPS

Maintenance Agreement Required: ☐ YES ☒ NO ☐ GRAVITY ☒ PRESSURE

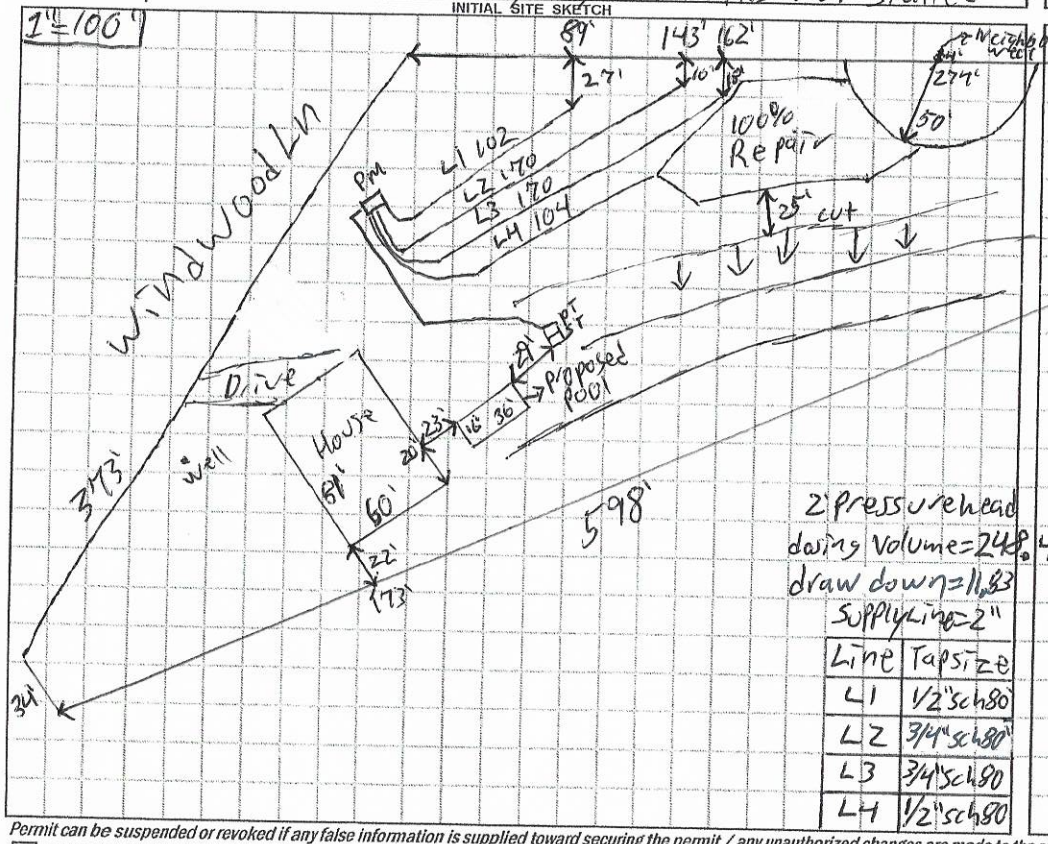
☒ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing ☐ Crawl Space ☐ Basement w/o plumbing

No. Bedrooms 5 | No. Persons 10 | No. Employees

Water Supply: ☒ Private ☐ Public ☐ Community

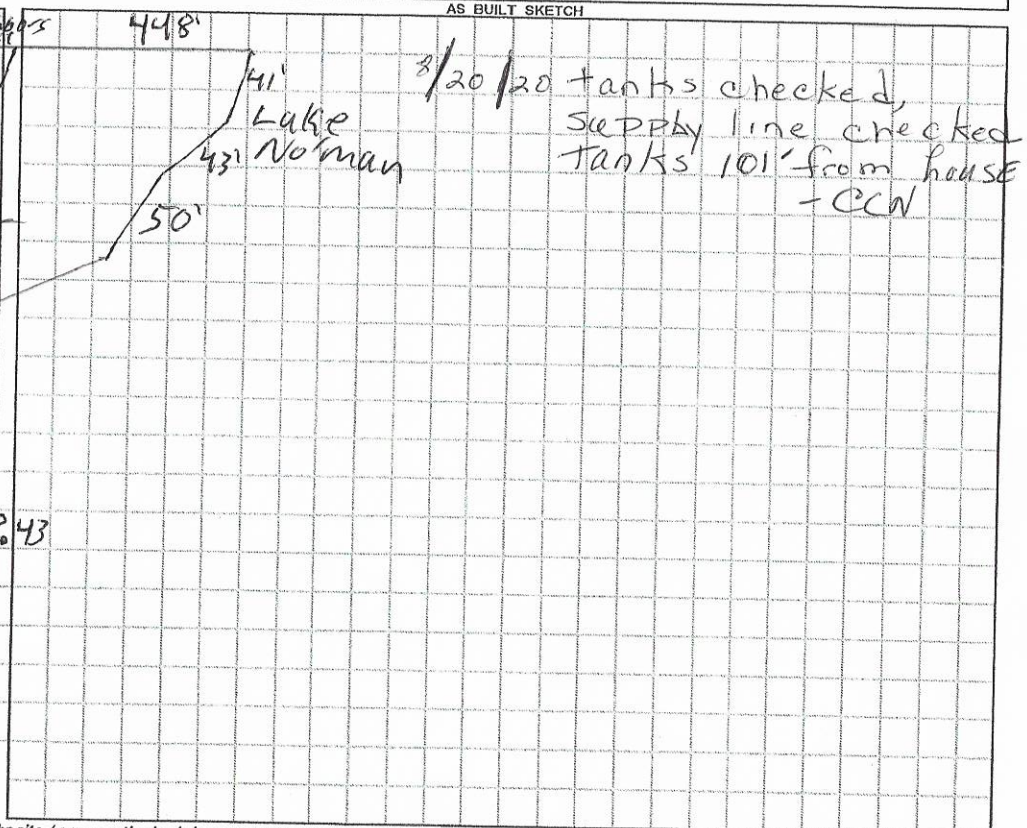
Comments / Conditions: DO NOT exceed max trench depth of 33". OK to cheat contour up to 5". Do NOT drive on, store material, or manipulate drainfield in any way. If tanks are installed deeper than 3' they must be traffic grade. house already built using floor plans from previous permit

INITIAL SITE SKETCH



Line	Tap Size
L1	1/2" sch80
L2	3/4" sch80
L3	3/4" sch80
L4	1/2" sch80

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: Johnny Guthrie Date: 8-18-20 Installed by: Bass Grading

IMPROVEMENT PERMIT by: Patrick J Byrne III Date: 8/14/2020 OPERATION PERMIT by: James Boggs @ Date: 8-27-2020

AUTHORIZATION TO CONSTRUCT by: Patrick J Byrne III Date: 8/14/2020 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.

	Date	Initials
Drain Lines Checked	8/24	BB
Tanks Checked		CC
Pressure Manifold or Valve Box Checked	8/24	DB
Pressure Head Set	8-27	
Electrical Checked	8-27	
Floats Set	8-27	
Alarm Checked	8-27	
Maintenance Contract Y (N)		
Comments:		

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

Sheet 1 of 1
PROPERTY ID #: 4629631400
COUNTY: Iredell

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

OWNER: Johnny Guthrie
ADDRESS: 122 Windwood Ln.
PROPOSED FACILITY: SFR
PROPOSED DESIGN FLOW (.1949): 600gpd
LOCATION OF SITE: State Park → L on Morrison Farm → R on April → L on Windwood → lot on R

APPLICATION DATE: 12-27-19
DATE EVALUATED: 2-3-20
PROPERTY SIZE: 2.412ac
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	11%	0-13	WSBK SCL	Fr, SS, SP, SE	13-32 few YB mottles	51	32-51 few SAP inc.		PS
		13-32	SBK C	Fr, SS, SP, SE					
		32-51	WSBK CL	Fr, SS, SP, SE					
I	LS								.275
2	12%	0-10	WSBK SCL	Fr, SS, SP, SE	—	46	27-46 com- many SAP inc.		PS
		10-27	SBK C	Fr, SS, SP, SE					
		27-46	WSBK CL	Fr, SS, SP, SE					
		46-52	L SAP mass	Fr, NS, NP					.3
R	LS								
3	13%	0-16	GR SL	VFr, NS, NP, SE	0-16 YB	48	43-48 few SAP inc.		PS
		16-21	WSBK SCL	Fr, SS, SP, SE					
		21-43	SBK C	Fr, S, P, SE					
		43-48	WSBK CL	Fr, SS, SP, SE					.275
R	LS								
4	13%	0-10	WSBK SCL	Fr, SS, SP, SE	0-10 YB	45	29-45 com- many SAP inc.		PS
		10-29	SBK C	Fr, S, P, SE					
		29-45	WSBK CL	Fr, SS, SP, SE					
		45-53	L SAP mass	Fr, NS, NP					.275
I	LS								

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	III	IV
Site LTAR	.275	.275

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

COMMENTS:


road
204'
old road bed
27'
102'
10'
18'
204'
56'
20'
188'
106'
46'
9'
19'
29'
32'
13'
repair
repair
2
3
steep gullies
22'
81'
house
56'
55'
81'
3'
53'
pool

RECEIVED JUL 1 - 2020

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED

Paid $320.00

QJB

Iredell County Health Department – Environmental Health Division

AP-303708

PAGE 1: *APPLICATION FORM*

Int. Relayout

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 (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: Johnny Guthrie Address: 122 Windwood Ln Zip: 28166
Applicant Email: guthriejp@aol.com Phone: 704-575-3387 Alt. Phone: 704-597-9449
Owner Name: Johnny Guthrie Address: 122 Windwood Ln Zip: _____
Owner Email: guthriejp@aol.com Phone: 704-575-3387 Alt. Phone: 704-597-9449

Property Information:

Street Address: 122 Windwood Ln Troutman NC 28166
Subdivision Name: Hawks Bay Section/Phase: _____ Lot Number: 38
Driving Directions: _____

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

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
(3) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____

Maximum Number of Bedrooms: 5
Maximum Number of Occupants: 2
(✓) Swimming Pool
( ) Other Addition/Structure: _____

CHECK FOUNDATION TYPE
( ) 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 ( ) 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.

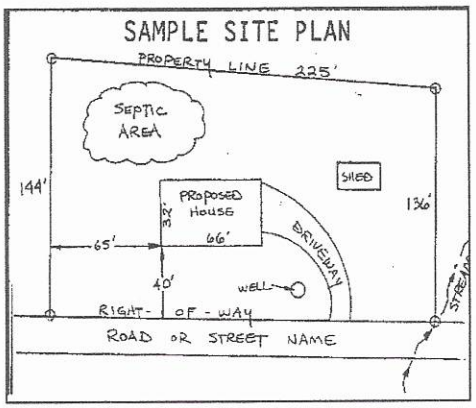
Signature: Johnny Guthrie 7-1-20
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 2: ***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 PERMIT!!!***



Place an (X) beside each item as you complete the site plan:

- ( ) Property Line measurements are clearly identified
- ( ) All proposed structures are indicated
- ( ) Front and side setbacks from property line
- ( ) Preferred driveway location and well location
- ( ) Area you prefer your septic system to be placed
- ( ) 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 attachment

Signature: Johnny Guthrie

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

7-1-20

DATE

ICHD–ENVIRONMENTAL HEALTH DIVISION (KJB)

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP-303708

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

PIN # 4629631400

APPLICANT/OWNER: Johnny Guthrie APPLICANT ADDRESS: 5306 Poplar Springs Dr. Charlotte, NC

SITE ADDRESS: 122 Windwood Ln. Troutman, NC PHONE: 704-575-3387 ALT. PHONE 704-597-9449

SITE DIRECTIONS: State Park Rd → L on Morrison Farm → R on April → L on Windwood → lot on R SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: Hawkes Bay SECTION: — LOT # 38 LOT AREA: 2.412ac DESIGN FLOW: 600gpd L.T.A.R.: .275

Septic Tank	1500	(gal)	STB		Date						
Pump Tank	1500	(gal)	PT		Date						
Pump Make		Model			Serial #						
# Nitrification Fields	1	# Lines	4		Linear Ft:	546'					
Trench Width	36"	Trench Bottom Depth(Low side)	28"	33" highside	Gravel Depth	—					

☑ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI

System Description: PM 25% reduction

Repair System Description: LP PPBPS

Maintenance Agreement Required: ☐ YES ☑ NO

☐ GRAVITY ☑ PRESSURE

☑ Residence ☐ Business ☐ Other ☐ Slab ☑ Basement w/plumbing

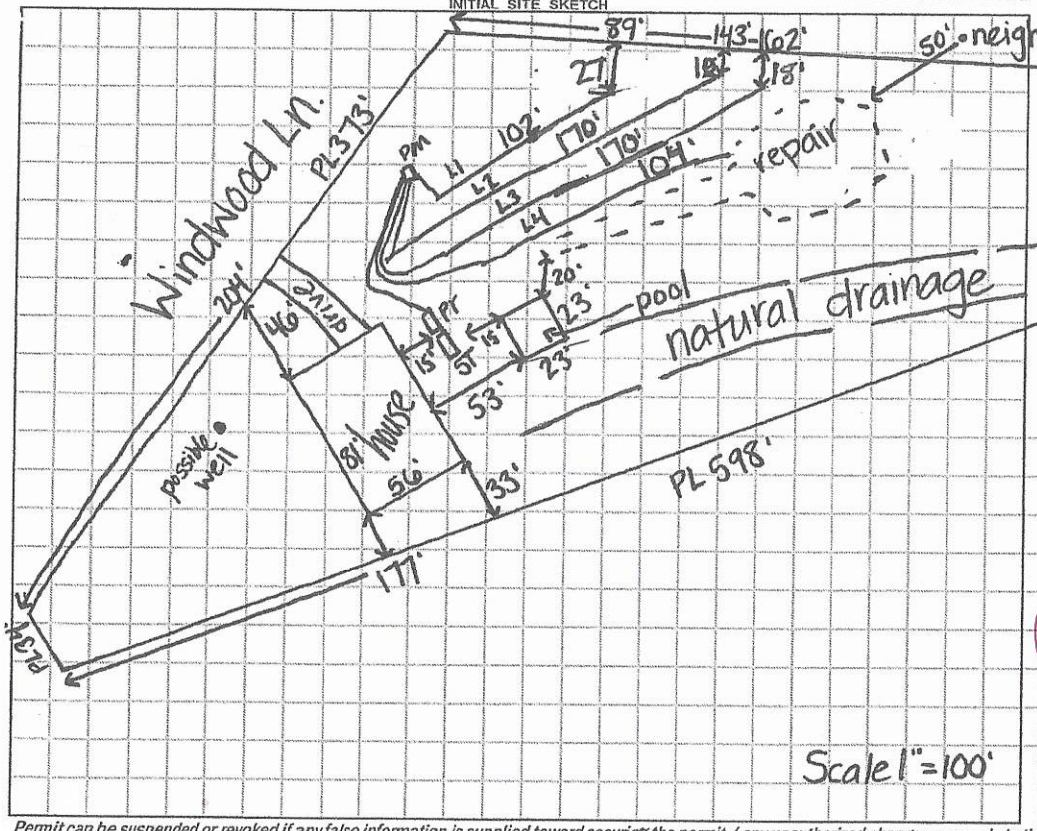
No. Bedrooms 5 No. Persons 10 No. Employees — ☐ Crawl Space ☐ Basement w/o plumbing

Water Supply: ☑ Private ☐ Public ☐ Community

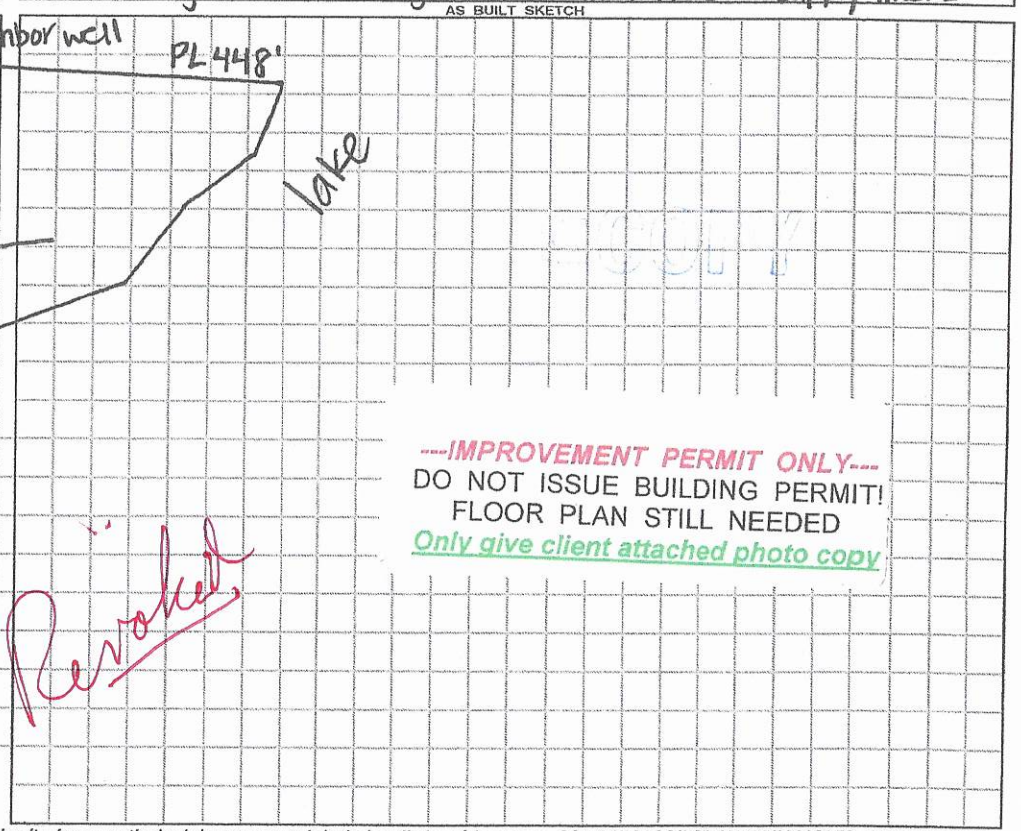
Comments / Conditions: *Do not exceed max trench depth of 33".
Ok to cheat contour up to 5".

tap size: L1 (102'): 1½ sch 80 L2 & L3 (170'): 3/4 sch 80
(4 taps total) L4 (104'): 1½ sch 80 pressure head: 2'
dosing volume: 248.43 gal draw down: 11.83 supply line: 2"

INITIAL SITE SKETCH



AS BUILT SKETCH



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☐ 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: Installed by:

IMPROVEMENT PERMIT by: Kayla Watson Date: 2-6-20 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: 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.

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

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*) Johnny Guthrie

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, Johnny Guthrie, am the legal owner(s) of the property located at 122 Windwood Ln Troutman NC 28166, identified as PIN (Parcel Identification Number)_____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) N/A, N/A, 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.

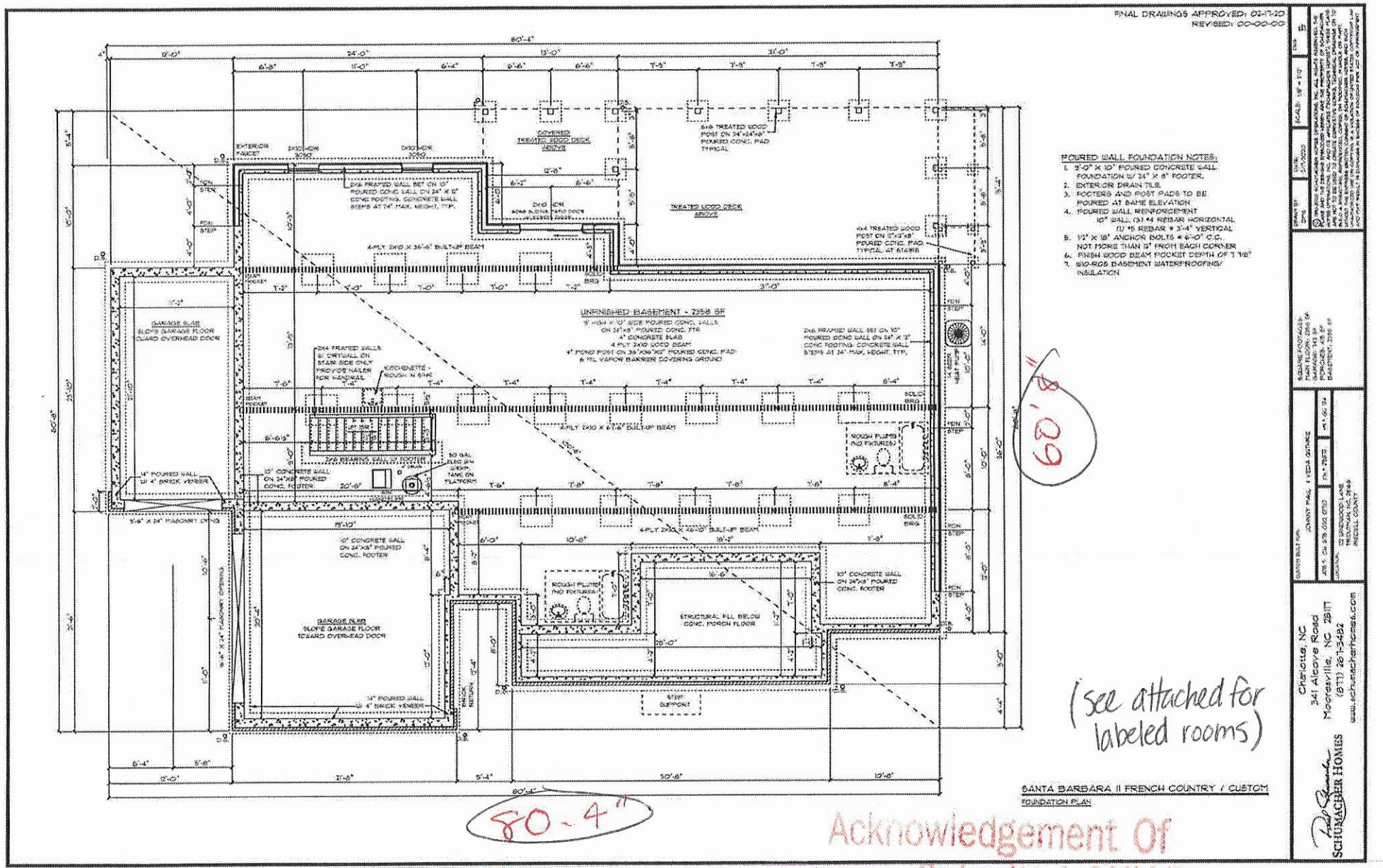
Johnny Guthrie
Signature of Owner(s)

7-1-20
Date

Mooresville - Environmental Health

Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677



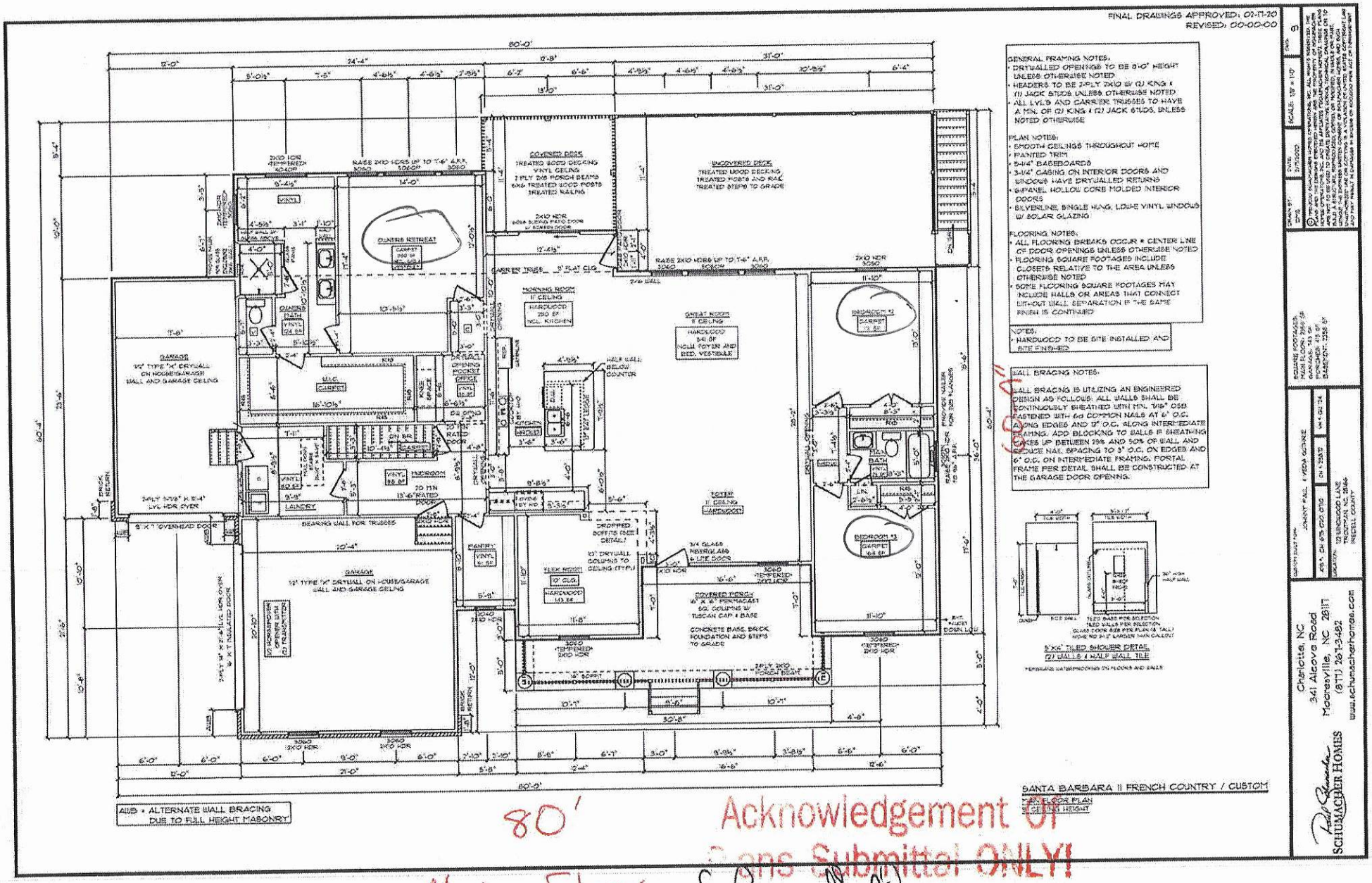
(see attached for labeled rooms)

Basement

Acknowledgement Of Plans Submittal ONLY!

Johnny Guthrie Date 2-18-20

Kayla Watson Date 2-20-20



80'

Main Floor

Acknowledgement Of
Plans Submittal ONLY!

Johnny Paul Date 2-18-20

Vera Date 2-20-20

FINAL DRAWINGS APPROVED: 02-11-20
REVISED: 00-00-00

SANTA BARBARA II FRENCH COUNTRY / CUSTOM
FOUNDATION PLAN

WIRE DEDICATED CIRCUIT FOR WELL

GENERAL ELECTRICAL NOTES:

- (1) EXISTING SWITCH UPGRADED TO ALLOW ONE (1) COACH LIGHT WIRED TO A STANDARD SWITCH ARE INCLUDED WHEN A GARAGE SERVICE DOOR IS PURCHASED
- (1) COACH LIGHT (1) SWITCH AND 20 SF OUTLET ARE INCLUDED WHEN ANY ADDITIONAL DOOR IS PURCHASED EXCLUDING THE GARAGE SERVICE DOOR
- ALL SMOKE DETECTORS TO BE INTERCONNECTED WITH BATTERY BACKUP
- (230.2) ARC-FAULT CIRCUIT-INTERRUPTER PROTECTION ALL BRANCH CIRCUITS THAT SUPPLY 120-VOLT SINGLE-PHASE, 15- AND 20-AMPERE OUTLETS INSTALLED IN FAMILY ROOMS, DINING ROOMS, LIVING ROOMS, PARLORS, LIBRARIES, BEDS, BEDROOMS, CLOSETS, HALLWAYS AND SIMILAR ROOMS OR AREAS SHALL BE PROTECTED BY A COMBINATION TYPE ARC-FAULT CIRCUIT INTERRUPTER LOCATED TO PROVIDE PROTECTION OF THE BRANCH CIRCUIT.
- GARAGE DOOR LOW VOLTAGE WIRING BY ELECTRICIAN
- (210.8) SEPARATE KITCHEN GENERAL RECEPTACLE REQUIRED IN KITCHEN
- ALL OUTLETS INSTALLED IN BATHROOMS GARAGES, UNFINISHED BASEMENTS SHALL HAVE GFCI PROTECTIONS ALONG WITH OUTLETS LOCATED WITHIN 6'-0" OF ALL SINK BASINS AND 4'-0" OF COUNTERTOPS SERVING KITCHEN COUNTERTOP SURFACES
- ALL OUTLETS TO BE PLACED PER CODE

Charlotte, NC
341 Alcove Road
Mooresville, NC 28117
(877) 267-3482
www.schumacherhomes.com

CUSTOM BUILT FOR: JOHNNY PAUL & VERA GUTHRIE

JOB #: CH 675 020 0710 | CH #: 29872 | VN #: GU 124

LOCATION: 122 LINDWOOD LANE TROUTMAN, NC, 28166 IREDELL COUNTY

SQUARE FOOTAGES:
MAIN FLOOR: 2360 SF
GARAGE: 543 SF
PORCHES: 413 SF
BASEMENT: 2356 SF

DRAWN BY: DMB | DATE: 2/17/2020 | SCALE: 1/8" = 1'-0" | SHEET: 6

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IREDELL COUNTY · NC

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

APPLICATION NUMBER

303708
Issue Date: 12/27/2019

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4629631400.000	122 WINDWOOD LN	Iredell County

Owner Information	Applicant Information
Name: GUTHRIE JOHNNY P+VEDA S	Name: GUTHRIE JOHNNY P+VEDA S
Address:	Address:
Phone:	Phone:

Use Requested	Zone Code
Single Family Dwelling	R-20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0	35	50	15	15	WSIV-CA Catawba/Lake Norman	YES

Remarks

SFD

Lake Lots: Must meet both the 50-foot setback from the 760' 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.

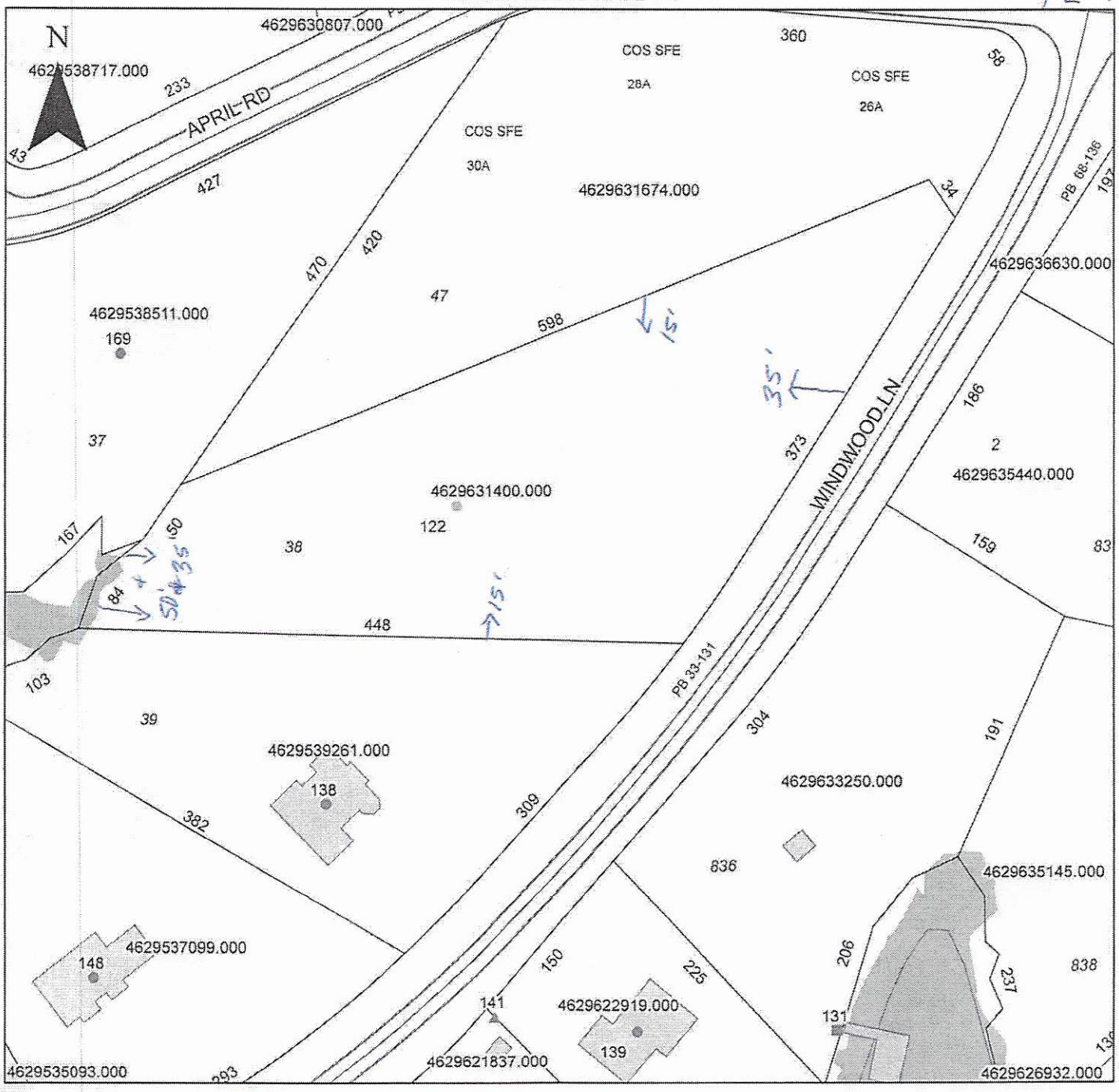
Date: 12/27/2019

Signature of Owner/Contractor

Permit Number	303708	TOTAL FEES:	$77.25

R-20 2.412AC
WS IV CA C/LN
FL-Yes

ZONING DISCLAIMER



Property Address 122 Windwood Ln.

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.

Johnny Hutchins
Applicant

12-27-19
Date