KW

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 241653

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

PIN # 4635-49-6324 ✓

APPLICANT/OWNER: Stacy Dunn | APPLICANT ADDRESS: 160 Southwood Park Rd. Mooresville, NC

SITE ADDRESS: ✓160 Southwood Park Rd. Mooresville, NC 28117 | PHONE: 704-560-4271 | ALT. PHONE

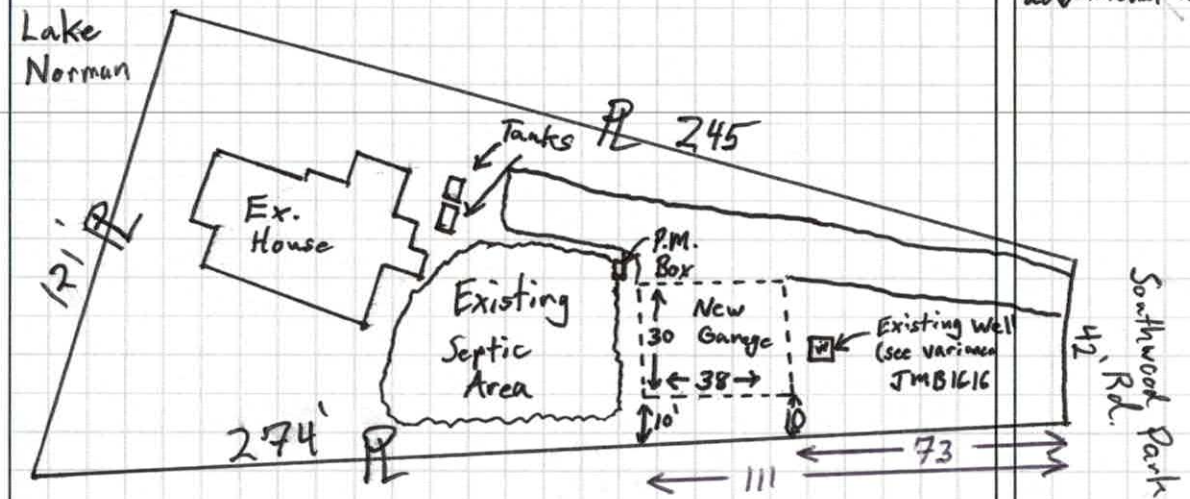
SITE DIRECTIONS: BSR towards LKN → L on Stutts Rd → R on Southwood Park Rd → House on left | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: ✓Marina Village | SECTION: — | LOT # 21 | LOT AREA: 0.47 acres | DESIGN FLOW: 360 GPD | L.T.A.R.: 0.30

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

Comments / Conditions: New garage may have bathroom however no business/commercial activities may be operated from garage without prior health department approval. Route any sewer or utility lines for garage AROUND existing septic system. Recommend septic tank be pumped every 3-5 years. New garage to be slab construction.

INITIAL SITE SKETCH



AS BUILT SKETCH

Direct any drainage away from septic area. No additional fill/cover to be placed atop septic area.

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: 4-18-19 | Installed by:

IMPROVEMENT PERMIT by: | Date: | OPERATION PERMIT by: | Date:

AUTHORIZATION TO CONSTRUCT by: | Date: | Existing System Inspected by: Tom Shuck | Date: 4/12/2019

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.

Jimmy Mayo Buffalo Shores

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

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

Applicant Information: **(PRINT CLEARLY)**

Applicant Name: Stacy Dunn **Address:** 3570 Weddington Oaks Drive Weddington, NC **Zip:** 28104-9548

Applicant Email: thefundunnse@hotmail.com **Phone:** (704) 560-4271 **Alt. Phone:**

Owner Name: Stacy & Kelly (woman) Dunn **Address:** 3570 Weddington Oaks Drive Weddington, NC **Zip:** 28104-9548

Owner Email: thefundunnse@hotmail.com **Phone:** (704) 560-4271 **Alt. Phone:**

Property Information:

Street Address: 1160 Southwood Park Rd., Mooresville, NC 28117

Subdivision Name: Marina Village **Section/Phase:** **Lot Number:** 21

Driving Directions: Brawley School Rd - turn left on Stutts, - turn right on Southwood Park Rd - house on left

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

CHECK FOUNDATION TYPE

( ) 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: 3
( ) Swimming Pool
( ) Other Addition/Structure:

( ) 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:** 2016
( ) 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: _____ 1/22/19
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

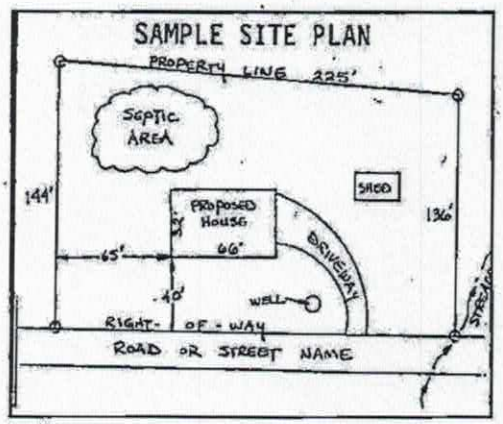
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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
- (X) Preferred well location
- (X) Preferred septic system location
- (X) North arrow, or other sufficient indicator of direction

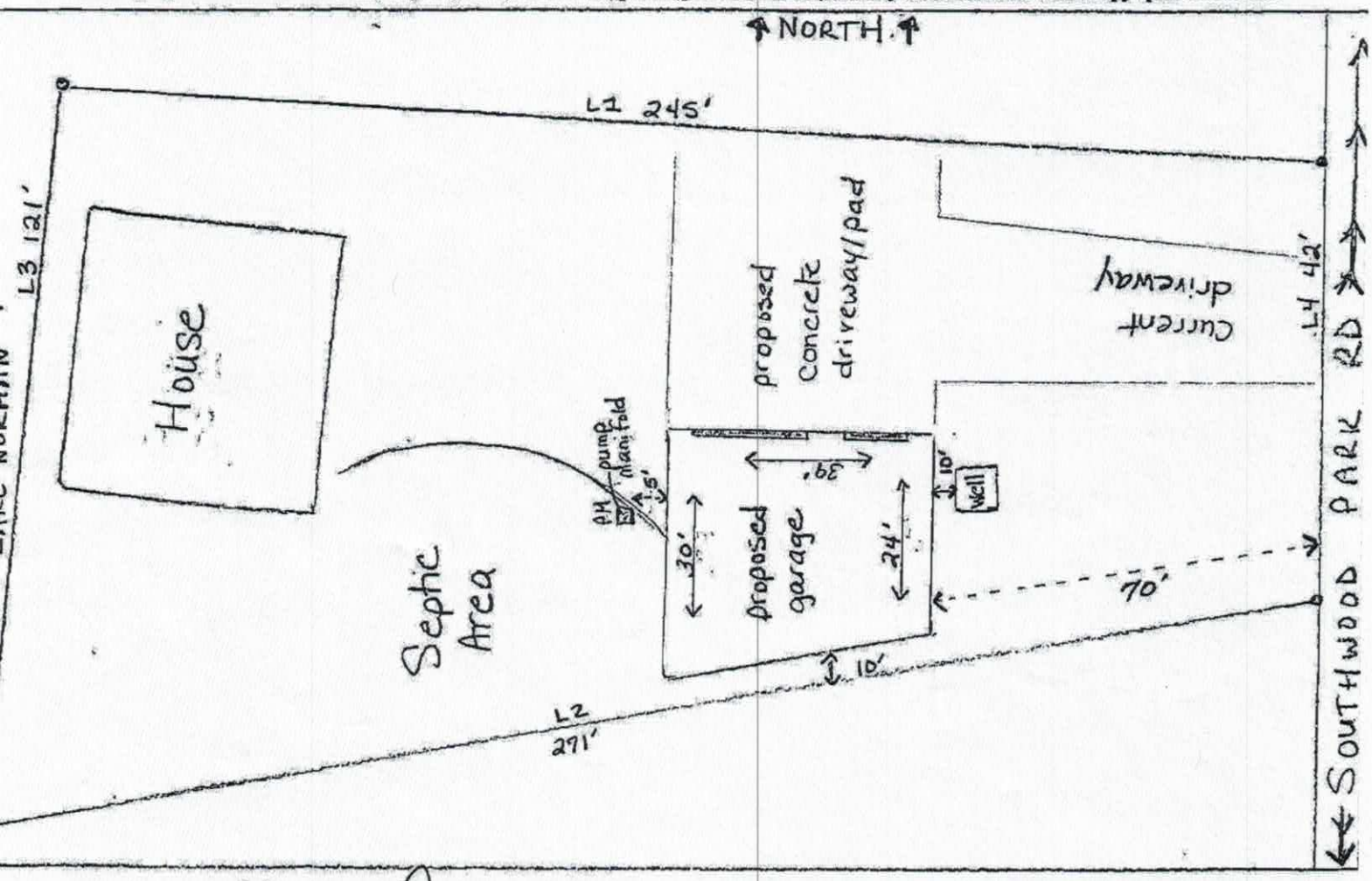


Circle N/A on the following if appropriate:

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



Signature: Steve H. Dunn

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

1/23/19

DATE

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.

_____ _____

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

NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
DANNY STALEY • Director, Division of Public Health

Onsite Water Protection Branch
February 20, 2019

Stacy Dunn
160 Southwood Park Rd
Mooresville, NC 28117

Re: Approval No. JMB1616
Private Well Located Less than 25' from Building Perimeter [Rule 15A NCAC 2C .0107(a)(2)(M)]

Property location:
160 Southwood Park Rd
Mooresville, NC 28117

Dear Mr. Dunn:

On February 18, 2019 the On-site Water Protection Branch received your request for a variance from the Well Construction standards, Title 15A North Carolina Administrative Code Subchapter 2C .0100. The request for the variance concerns a water supply well on the referenced property that serves a single family dwelling. A structure is proposed for the property that will be within twenty-five feet of the well.

Specifically, the variance request grants you permission to use a water supply well at a distance closer than the twenty five foot setback to a building perimeter. Achieving the twenty-five foot setback would be difficult given the challenges of the property.

Based upon information provided by you, the Iredell County Health Department, it is my finding that based upon current conditions as the site exist today (as well as the current proposal for use of the structure) you meet the conditions necessary for approval of a variance as specified by 15A NCAC .0118 (a) (1) and (2). On that basis and if the following conditions are met, the requested variance is approved:

1) The well/wellhead shall meet all current 2C. 0100 standards, including but not limited to being **properly grouted**, terminated at least 12" above land surface, properly sealed, having a thread-less sample tap etc.

2) The well shall be sampled for the same parameters required of a newly constructed well. If samples indicate contamination, further repairs or treatment will be necessary.
3) No potential sources of groundwater contamination shall be stored near the well-head.
4) No termite treatment shall be applied to the structure within twenty five feet of the well unless alternative methods are approved by the Iredell County Health Department

The granting of this variance is for the well location only. It in no way relieves the owner or agent from other requirements of the North Carolina Well Construction Standards including, but not limited to the requirements in 15A NCAC 2C .0113(b) to repair or to abandon any well which acts as a source or channel for the migration of contamination. This approval does not imply sufficient water quality. Further, the approval does not relieve your responsibility to comply with any other applicable Federal, State, or local laws or regulations.

If you have any questions regarding this variance, please contact me at (828) 713-3335.

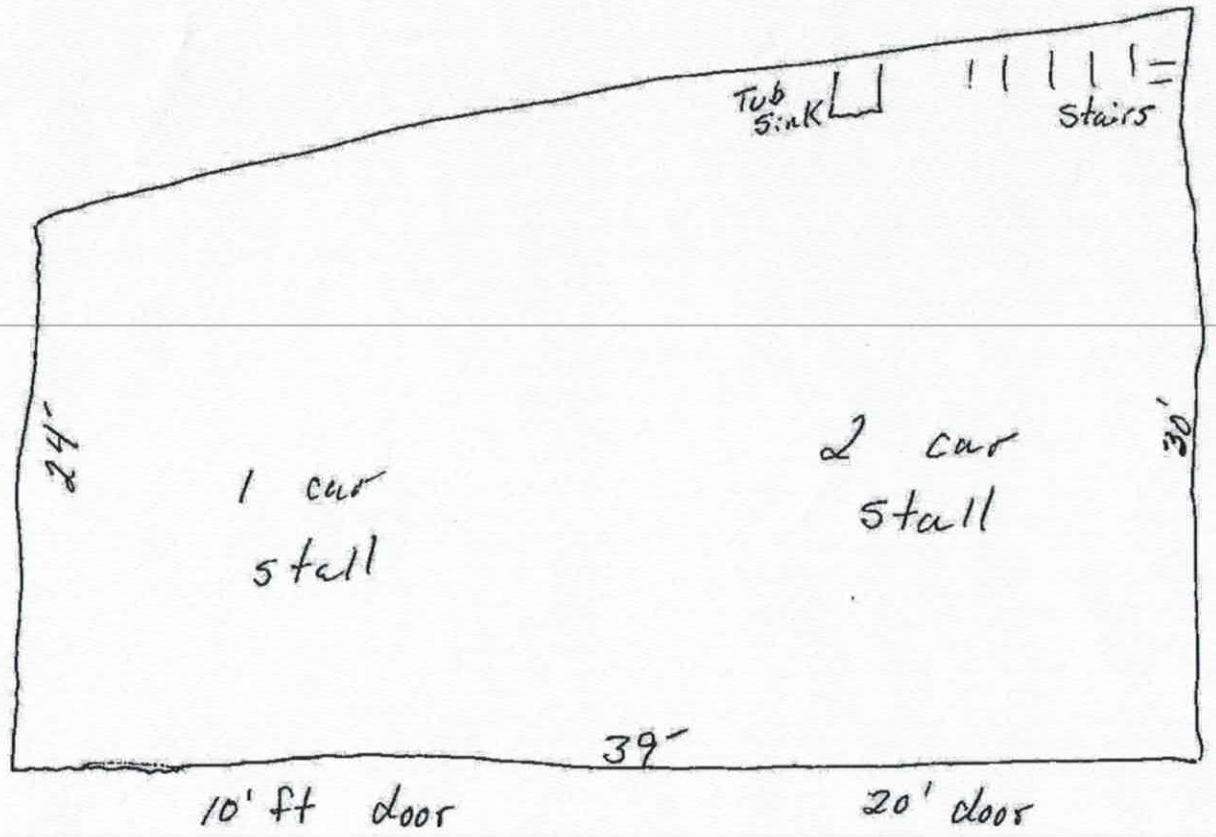
Sincerely,

John Brooks

John M. Brooks R.E.H.S, MS

Submittal ONLY!
Date 1-23-19
Date 4/17/19

1st Floor



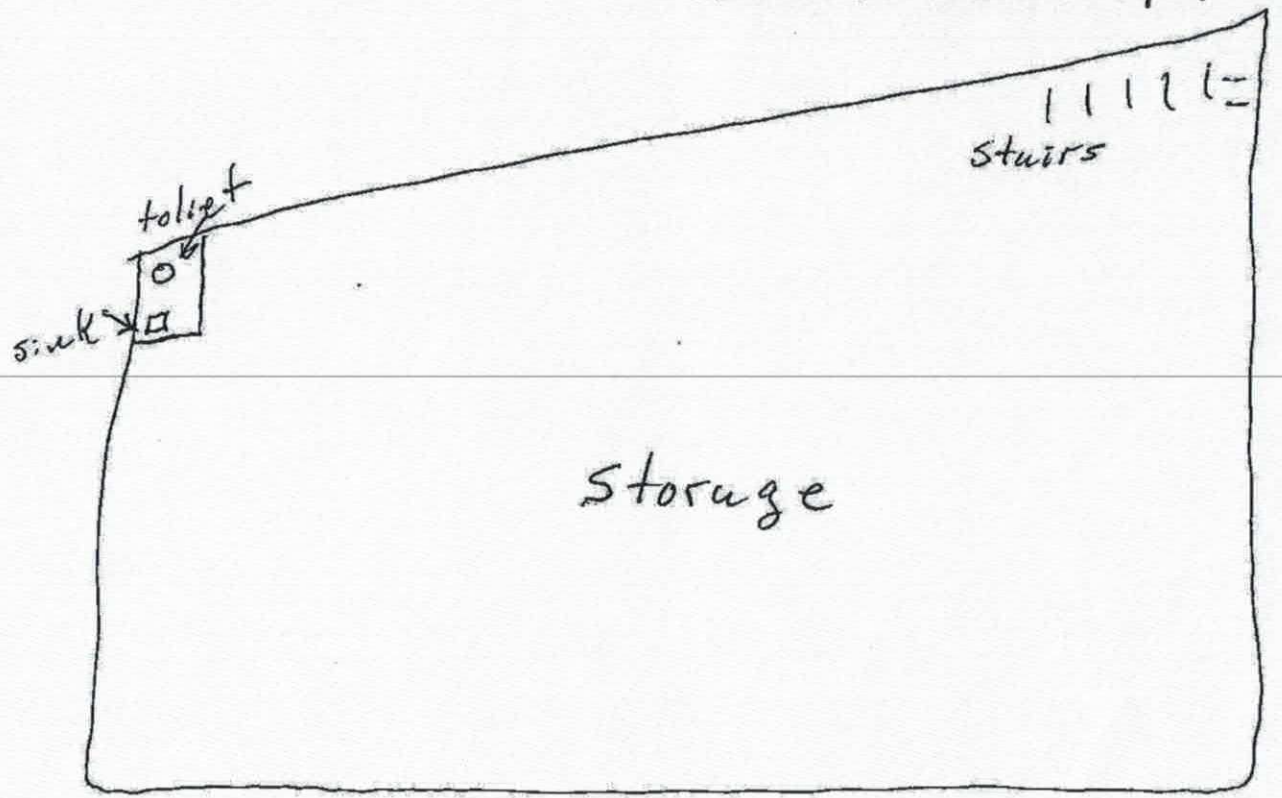
1-23-19

2nd flour

Submittal ONLY!

Date 1-23-19

Date 4/12/19



1-23-19

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 216306

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

PIN # 4635-49-6324

APPLICANT: Daniel Grindstaff APPLICANT ADDRESS: 113 La Salle St. Wilmington NC

SITE ADDRESS: 160 Southwood Park Rd PHONE: 910-686-0111 ALT. PHONE: 910-612-3301

SITE DIRECTIONS: Brawley Sch Rd, TL Stutts, TR Southwood Park, Lot on L

SUBDIVISION: Marina Village SECTION: LOT # 21 LOT AREA: ~0.48 ac DESIGN FLOW: 360 gpd L.T.A.R.: 0.3

Septic Tank 1000 (gal) STB 1-14 Date 1-21-16
Pump Tank 1000 (gal) PT 2-7 Date 1-21-16
Pump Make Zoeller Model A115, 1/2 Serial #
Nitrification Fields 1 # Lines 7 Linear Ft. 246'
Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A

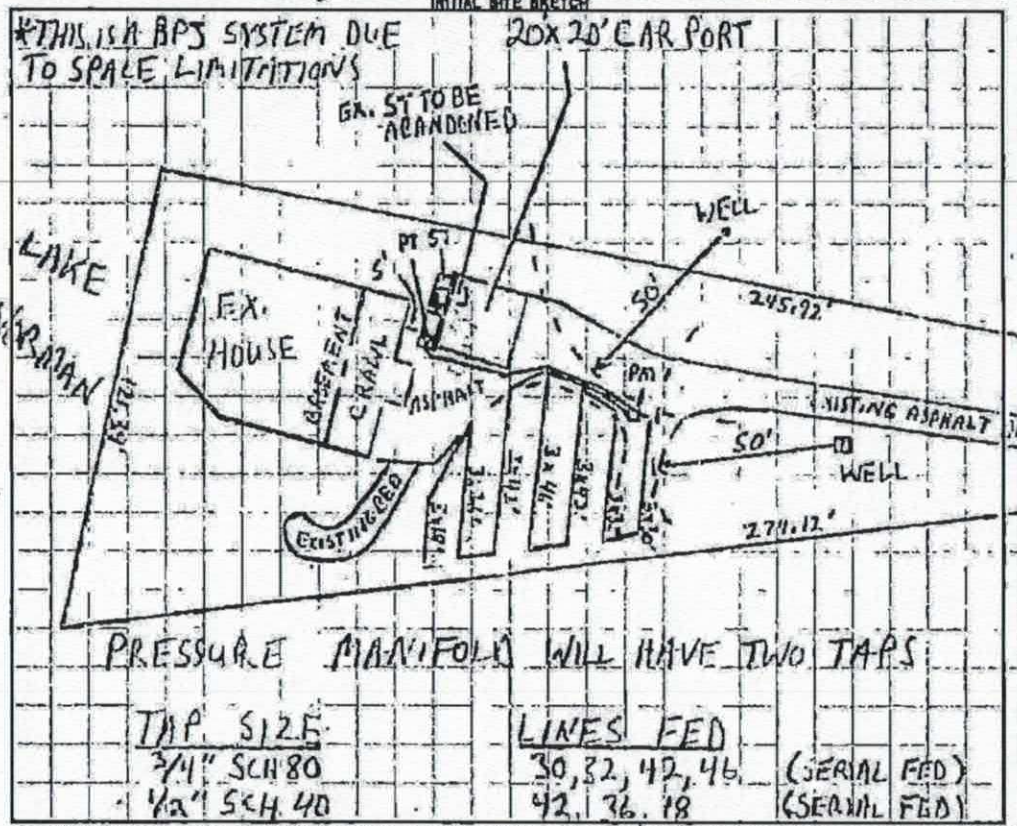
☐ New System ☑ Repair ☐ Expansion System Type: I II (III) IV V VI
System Description:
Repair System Description: PM 25% REDUCTION
Maintenance Agreement Required: ☐ YES ☑ NO
☐ GRAVITY ☑ PRESSURE

☑ Residence: 3 BR ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing
No. Bedrooms 3 No. Persons 6 No. Employees ☑ Crawl Space

Water Supply: ☑ Private FX ☐ Public ☐ Community ☑ Basement w/o plumbing

Comments / Conditions: EXISTING SEPTIC TANK MUST BE ABANDONED OR SLEEVED IN DUCTILE IRON. KEEP ALL NEW SEPTIC COMPONENTS GREATER THAN 50' TO ANY WELL, ASPHALT DRIVE/TURN AROUND TO BE REMOVED WHERE REQUIRED, INSTALL SUPPLY LINE MINIMUM 30" DEEP

INITIAL SITE SKETCH



PRESSURE MANIFOLD WILL HAVE TWO TAPS

TAP SIZE	LINES FED	
3/4" SCH 80	30, 32, 42, 46	(SERIAL FED)
1/2" SCH 40	42, 36, 18	(SERIAL FED)

AS BUILT SKETCH

~32" Trench depth
Clocked lines from top
2.5", 2", 4", 4"
Bk 3-9-16
Bk lines (1, 2, 3)
3/4" 42, 2, 1

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 to 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: 2-16-16 Installed by: Russell Williams

IMPROVEMENT PERMIT by: [signature] Date: 2-15-16 OPERATION PERMIT by: [signature] Date: 3/11/16

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 2-15-16 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK

IREDELL COUNTY

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

APPLICATION NUMBER
241653
Issue Date: 01/23/2019

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4635496324.000	160 SOUTHWOOD PARK ROAD, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: GRINDSTAFF DANIEL	Applicant: DUNN, STACY
Address: 175 CARRIAGE CLUB DR APT 6-106	Address: 160 SOUTHWOOD PARK RD.
MOORESVILLE, NC 28117	MOORESVILLE, NC 28117
Phone:	Phone:

Use Requested	Zone Code
2 STORY GARAGE	RR

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
	35.00	50.00	10.00	10.00	CACL	AE

Remarks:

Accessory Structures: Must meet requirement R1 of the LDC. Shall not be erected in front building line of the principal structure or within 25 Æ of a side street on a corner lot. Shall not be erected within 10 Æ of any line not a street line or within 10 Æ of any other building on the same lot. Shall not be erected within the 50 Æ buffer zone of lake lots. Shall not exceed the height limitation of the principal structure. Exceptions to the front building line location: 1.If the lot is 1 acre or greater and the location of the structure is at least 150 Æfrom the frontage street right of way line then the structure can be located in front of home or 2.Is a double frontage lake lot. Any accessory building or structure over 2000 sq/ft shall be setback a minimum of 30 Æ from any property line. Metal carports not exceeding 400 sq/ft are allowed in the front yard provided they meet the front setback requirement of the principal 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	165233	TOTAL FEES:	$ 77.25