IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 210689

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

PIN # 4685-95-0972

APPLICANT: NORMAN STRUBLE APPLICANT ADDRESS: 112 SIENNA PACE CT. - MVL, 28117

SITE ADDRESS: SAME PHONE: ALT. PHONE:

SITE DIRECTIONS: ALCOVE, TR TEMPLETON, TL CAMINO REAL, TL SIENNA PACE

SUBDIVISION: COPPER RIDGE SECTION: — LOT # 4 LOT AREA: 1.23 AC DESIGN FLOW: 720 L.T.A.R.: .3

Septic Tank EXISTING (gal) STB 477 Date 11-30-18

Pump Tank 1500 (gal) PT 477 Date 11-30-18

Pump Make LIBERTY Model 290HD Serial #

Nitrification Fields 1 # Lines 6C100' Linear Ft: 600'

Trench Width 36" Max. Trench Bottom Depth 33" Gravel Depth —

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

System Description: PM 25% REDUCTION

Repair System Description: LP PANEL BLOCK

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

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

No. Bedrooms 6 No. Persons No. Employees ☒ Crawl Space

☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions:

Checked drainlines & new PT
3/19/19 Checked supply line, pressure, elect & alarm.

INITIAL SITE SKETCH

SEE PLAN FROM SAME

AS BUILT SKETCH

Installed Quick 4

As drawn

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: Norman B Struble Date: 6/10/15 Installed by:

IMPROVEMENT PERMIT by: APPROVED Date: JUN 03 2015 OPERATION PERMIT by: Maria Dotson Date: 3/19/19

AUTHORIZATION TO CONSTRUCT by: APPROVED Date: JUN 03 2015 Existing System Inspected by: Date:

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

Lot 4 Copper Ridge Hand Auger Boring Locations

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

APPROVED JUN 0 3 2015
BA

Sheet 1 of 1
PROPERTY ID #:
COUNTY:

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

OWNER: Norman Struble
ADDRESS: 112 Sienna Place
PROPOSED FACILITY: 6 bdrm
LOCATION OF SITE: Lot 4 Copper Ridge
APPLICATION DATE: 5-11-15
DATE EVALUATED: 4-24-15
PROPOSED DESIGN FLOW (.1949): 720
PROPERTY SIZE: 1.23 ac
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	L 5-10%	0-9	wsbk scl	fr ss/sp	br				PS .3
		9-30	msbk c	fr s/p	red	f stn, f mica incl			
		30-48	wsbk cl	fr ss/sp	yell mtl/me c	stn/mica			
					(1)	(48)	(1)	(1)	
2	L 5-10%	0-4	wsbk scl	fr ss/sp	br				PS .3
		4-20	msbk/abk c	fr s/p	red f	scl, comp. to 2-12"			
		20-48	wsbk cl	fr ss/sp	red c	stn incl			
					(2)	(48)	(2)	(2)	
3	L 5-10%	0-4	wsbk scl	fr ss/sp	br				PS .3
		4-31	mfsbk c	fr s/p	red				
		31-48	wsbk cl	fr ss/sp	red	f-c stn incl			
					(1)	(48)	(1)	(1)	
4	L 5-10%	0-6	wsbk scl	fr ss/sp	br				PS .3
		6-24	mfsbk c	fr s/p	red				
		24-48	wsbk scl		br	c stn incl			
			mwsbk 4sl		almost gr	gr @ 45"			
					(1)	(48)	(1)	(1)	

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	2SJ	TFJ (2)
Site LTAR	.3	.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: PEP
OTHER(S) PRESENT: must be approved by ICHD

COMMENTS:

Norman Struble Lot 4 Copper Ridge Fast Track

11-May-15

Number of Bedrooms	**6**
Basement or Crawl	**Crawl**
Design Flow (gpd)	**720**
Primary System LTAR (gpd/ft2)	**0.3**
Primary System Type	**Pressure Manifold 25% Reduction**
No. Lines	6 @ 100 ft.
Total Linear Feet	600
Trench Width	3' min.
Trench Spacing	9 min.
Pump Required	Yes
Distribution Device	Pressure Manifold
Maintenance Agreement Required	No
Length and Diameter of Supply Pipe	~150' of 2" SCH 40 PVC
Flow Rate through the system	33 gpm
Elevation head	*Approx. 17'
Pressure head	2.0'
Friction head	Approx. 5'
20% Contingency	4.8'
Total Head	28.8'
Pump Requirements	33 gpm @ 29' of head*
Maximum Dosing Volume	300 gal - 2 doses/day @ design flow
Volume of water pumped per dose	Calculated to specific tank by measure or dealer engineering specifications (1 cubic ft. of water equals 7.48 gal.)
Pump Run per dose	approx. 9.1 min.
Check Valve	Yes
Siphon Break hole	No
Repair System	**LP T&J Panel**
Total Linear Feet	477' shown *(400' Required)*
Repair Loading Rate	0.3

Norman Struble Lot 4 Copper Ridge Fast Track
11-May-15

Table 1: Summary of Primary Drainfield Lines

Line No.	Use	Line Color	System Type	Line Length (Ft.)	Rod Reading (Ft.)
1	System	orange	PM 25%	100	8.8
2	System	blue	PM 25%	100	9.8
3	System	red	PM 25%	100	10.5
4	System	white	PM 25%	100	11.4
5	System	orange	PM 25%	100	12.0
6	System	blue	PM 25%	100	12.5
				Total System: 600'	

Septic Tank		Use Ex. 1000 gal ST and 1000 gal PT in series	*rod reading (ft)
Pump Tank		1500 gal.	17.5
House		sidewalk at FL Ex. Garage	16.9

Manifold Information	
Tap Size (In.)	1/2
Tap Material	SCH 80 PVC
No. Taps	6
Barrel Size (In.)	4
Barrel Material	SCH 80 PVC
Flow (gpm)/Tap	5.5

NOTES:
***Elevations must be verified by installer after setting new pump tank.**

May 11, 2015

Mr. Norman Struble
112 Sienna Pace Ct.
Mooresville, North Carolina 28117

Reference: **Technical Assistance with Fast Track Septic Permitting**
Lot 4 Copper Ridge Subdivision
Iredell County, North Carolina
S&ME, Inc. Project No. 4358-15-056

Dear Mr. Struble:

S&ME, Inc. (S&ME) has provided technical assistance to obtain a possible five bedroom septic Improvement Permit from the Iredell County Health Department (ICHD) for the above referenced lot. The technical assistance was performed in general accordance with S&ME Proposal No. 43-1500413 dated April 20, 2015.

Attached is the Application for the Septic Improvement Permit, the Zoning Permit, and the ICHD Fast Track requirements presented to the ICHD on your behalf. The lot was originally permitted by the ICHD for a 4 bedroom T&J Panel System. A new 1,000 gallon septic tank and 1,000 gallon pump tank were installed in 2011. You recently purchased the property and want to construct a detached garage over the existing drainfield and want to permit a new 6 bedroom drainfield on the lot.

We are proposing a 6 bedroom Pressure Manifold, 25 Percent Reduction Primary System with a 0.3 gallons per day per square foot (gpd/sqft) long term acceptance rate (LTAR) and a Low Pressure T&J Panel Repair. Once the septic area is permitted, it should be fenced off for protection during construction. Access to the lot should only be by the proposed drive. There shall not be cuts of 2 feet or greater within 15 feet of any part of the permitted septic system. We understand that you can utilize the existing 1,000 gallon septic tank and pump tank in series for the new 2,000 capacity septic tank. The outlet filter shall be added to the existing pump tank.

S&ME appreciates the opportunity to provide these services to you. The attached information is not an Improvement Permit or Authorization to Construct, and is only to assist you and the ICHD with the Fast Track site evaluation. The attached plan is not intended to be a Professional Engineer plan. The ICHD must approve each lot and only the ICHD can issue these permits. The ICHD should verify all soils and system specifications, required setbacks, and whether a professional engineer plan is required before permitting and/or septic system installation. The ICHD may make any changes

they deem necessary (tank locations, distribution device, etc.) to the proposed system on the Improvement Permit or the attached information /site plan. Soil evaluations and system layouts are done based on interpretations of the rules governing wastewater treatment and disposal systems and are not guarantees for site approval or future septic system performance.

If you have any questions or require additional information please contact us at your convenience.

Sincerely,

S&ME, Inc.

Paul G. Penninger, L.S.S.
Soil Scientist

Rob Willcox, L.S.S.
Senior Project Manager / Soil Scientist

Attachments:

1. ICHD Improvement Permit Application and Zoning Permit
2. Site Plan and System Specifications
3. Soil Profile Descriptions and 2011 ICHD Permit

Copy: ICHD

T:\Projects\2015\ENV\4358-15-056 Norman Struble\Struble Summary Letter.doc

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

Application for SEPTIC REPAIR PERMIT

(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)

1. APPLICATION FOR: X Improvement Permit X Authorization To Construct X BOTH Existing System
X Inspection

****

2. 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 check ( ) beside whichever is submitted if applicable ___Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. **Applicant Information:**

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Norman Stubb	112 Sienna Pace Ct. Mooresville, NC		814-594-2778
Owner Name	**Mailing Address**	**Home Phone #**	**Alternate Phone #**
SAME			

4. **Property Information:**

Street Address	Subdivision Name	Section/Phase and Lot Number
112 Sienna Pace Ct.	Copper Ridge	

Driving Directions: Alcove, Templeton, Camino Real, Sienna Pace

5. **RESIDENTIAL Site Development Information:** *(Check or Complete ALL that apply)*

X New, Single Family Residence → ADDING GARAGE
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
(X) Repair To Failing Septic System due to
X Other NEED NEW DRAINFIELD

Maximum Number of Bedrooms 6
Maximum Number of Occupants 12
If Expansion, Current Number of Bedrooms ___

X Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) Basement w/Plumbing?
( ) Basement w/out Plumbing?

IF Non-Residential Site Development: Type of Business
Square Footage of Building
Maximum Number of Employees
Maximum Number of Seats

6. **Proposed Water Supply:**

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

7. **Desired Septic System Type:** *(You may rank in order of preference, if any)* ( ) EXISTING SYSTEM installed ____ Year

( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other 2-57o

8. **Please Answer The Following** ( ) Yes (X) No Does the site contain any jurisdictional wetlands?
To The Best of Your Ability: ( ) Yes (X) No Is any non-domestic sewage (i.e. industry) 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.

9. **Signature:** _____ 5-11-15
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

AUTHORIZATION TO ACT AS AGENT FOR OWNER

Any application/document/permit requiring a signature must be signed by the property owner or their authorized agent. This form shall be provided by the owner to allow specified individuals to act as agents for the owner. This form allows the specified individuals to sign or receive any application/document/permit on behalf of the owner. This form allows the authorized agent to make decisions on behalf of the owner pertaining to modifications of permits in the field. It is the responsibility of the owner to assure that any/all permit conditions specified on permits issued by this Division are followed.

I, NORMAN D. STRUBLE, am the legal owner of the property located at 162 SIENNA PACE CT, identified as PIN(Parcel Identification Number)_____, located in Iredell County, North Carolina.

I do hereby authorize (print authorized agent/company name) PAUL PENNINGER _____, _____, _____, _____, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

1. Improvement Permit (IP)/ Authorization to Construct (AC).
2. Application for soil-site evaluation (new/repair).
3. Application/permit for water well/well abandonment.
4. Application for existing system.
5. Application for Improvement Permit (IP)/ Authorization to Construct (AC).

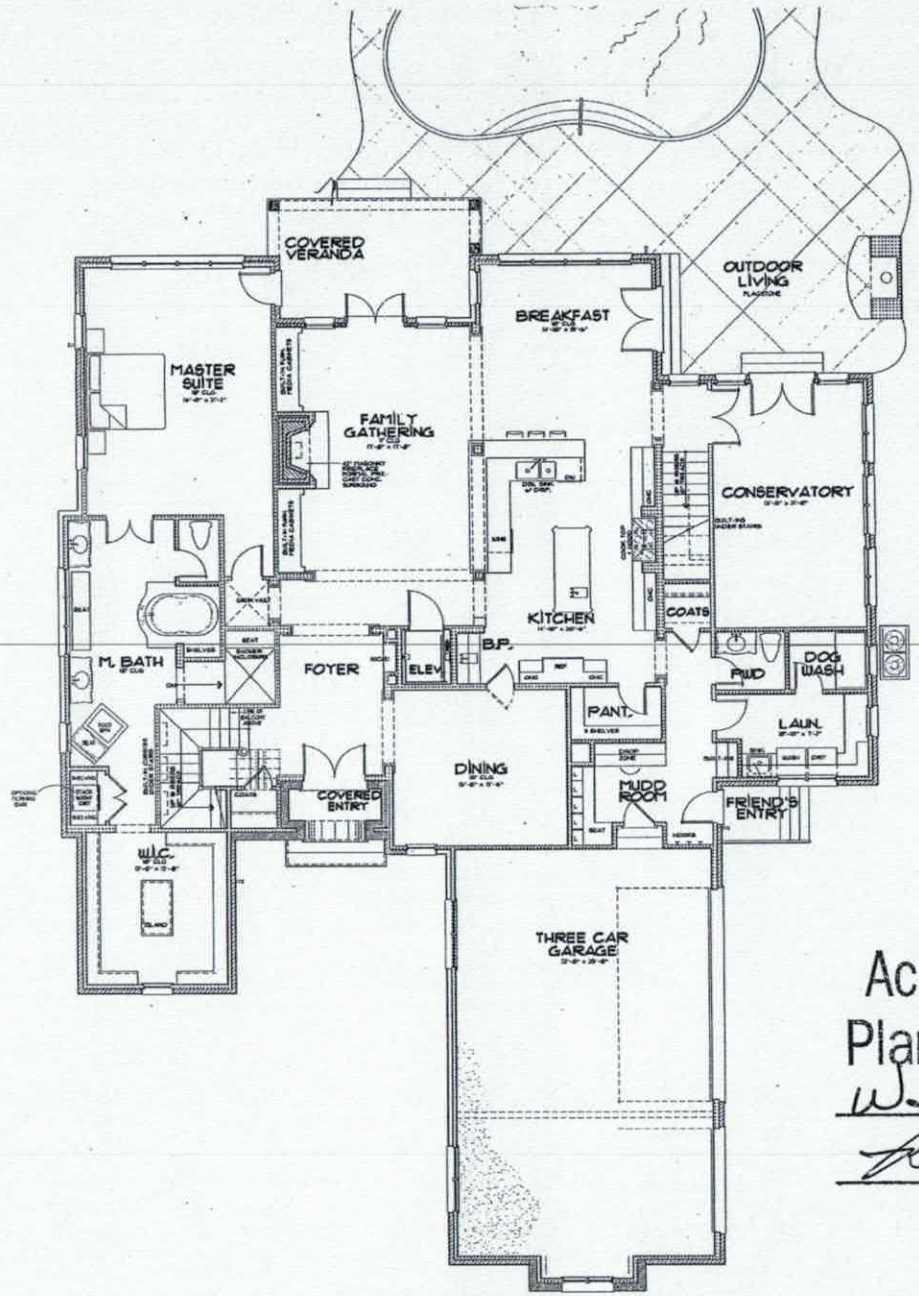
I agree to abide by any and all decisions and/or conditions between the agent acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division. This form must be fully executed before the individual's specified above will be recognized as the authorized agent.

Norman D Struble — Signature of Owner — 5/21/15 — Date

_____ — Signature of Witness — 5/21/15 — 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
or
Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677



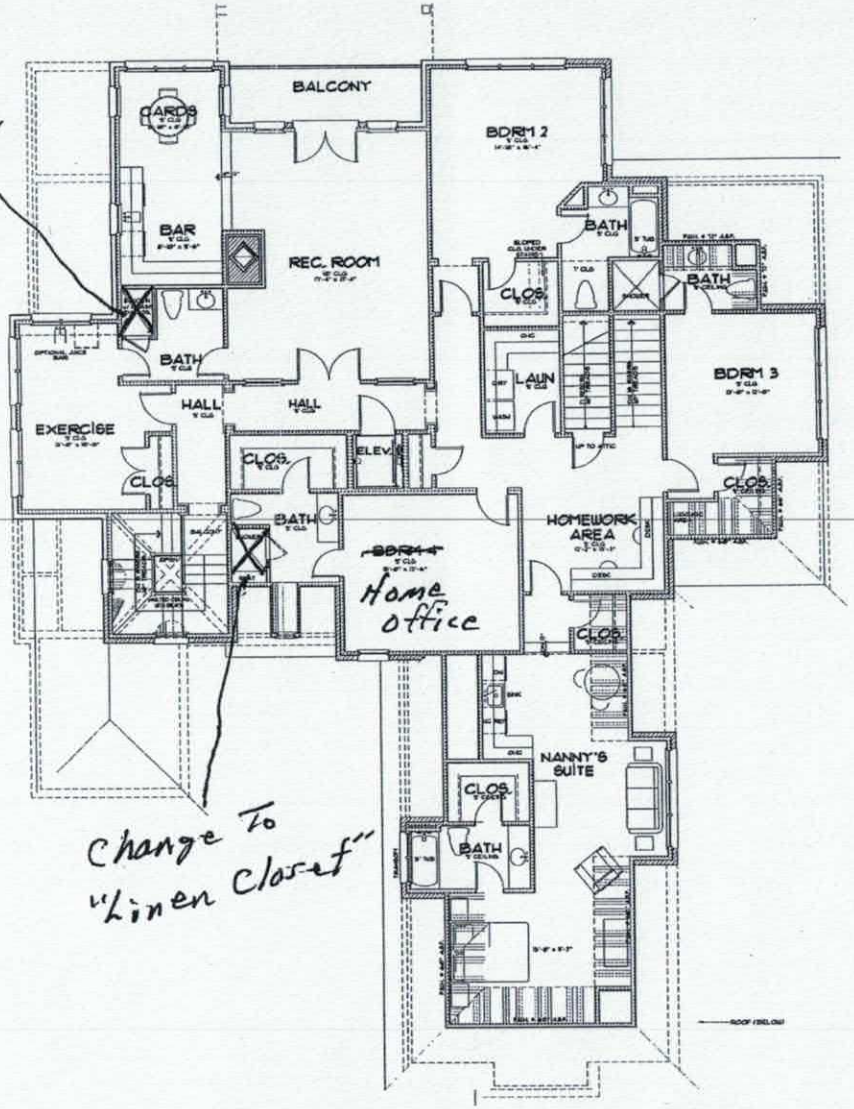
4BDRm.

Acknowledgement Of
Plans Submittal ONLY!

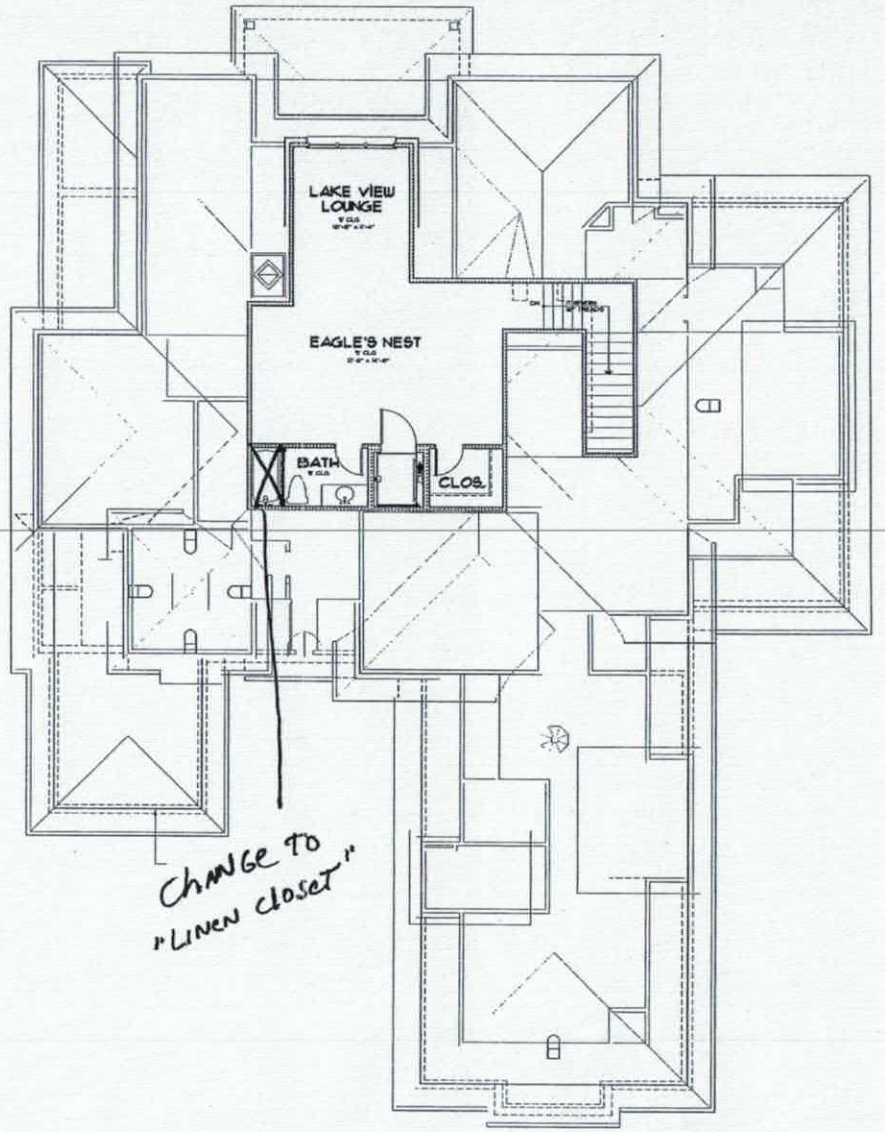
W. Sparks rs. Date 4/3/07

Date 4/3/07

Lot 4 Copper Ridge
112 Sienna Ct.
Mooresville, N.C.



Lot 4 Copper Ridge
112 Sienna Ct.
Mooresville, N.C.



Lot 4 Copper Ridge
112 Sienna Ct.
Mooresville, N.C.

IREDELL COUNTY

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

APPLICATION NUMBER
210689
Issue Date: 05/21/2015

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4635950972.000	112 SIENNA PACE COURT, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: STRUBLE, NORMAN	Applicant: STRUBLE, NORMAN
Address: 112 SIENNA PACE COURT MOORESVILLE, NC 28117	Address: 112 SIENNA PACE COURT MOORESVILLE, NC 28117
Phone: 814-594-2778	Phone: 814-594-2778

Use Requested	Zone Code
ATTACHED GARAGE- FAST TRACK	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
1.230	35.00	50.00	15.00	15.00	CACL	AE

Remarks:

$ PAID

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: *See Attached* Date: _____

Permit Number	38927	TOTAL FEES:	$ 77.25