ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP 305534

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

PIN # 4636-05-2730

APPLICANT/OWNER: Ronnie L. Smith | APPLICANT ADDRESS: 491 E. Monbo Rd Statesville, NC. 28677

SITE ADDRESS: 120 Pine Meadows Ln Mooresville, NC 28117 | PHONE: 704 363-8888 | ALT. PHONE 7044663-7223

SITE DIRECTIONS: Brawley School Rd TR Pine Meadows on right | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Brawley Flats | SECTION: — | LOT # 3 | LOT AREA: .69 Acre | DESIGN FLOW: 240 gpd | L.T.A.R.: .25

Septic Tank 1000 (gal) STB 794 Date
Pump Tank (gal) PT Date
Pump Make Model Serial #
Nitrification Fields 1 # Lines 305534 Linear Ft 165Ft
Trench Width min. 24" Trench Bottom Depth(Low side) 48" * Gravel Depth N/A

☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI
System Description: Gravity-Dist.box PPBPS
Repair System Description: Drip Dispersal
Maintenance Agreement Required: ☐ YES ☒ NO
☒ GRAVITY ☐ PRESSURE

☒ Residence ☐ Business ☐ Other ☒ Slab ☐ Basement w/plumbing ☐ Basement w/o plumbing
No. Bedrooms 2 | No. Persons 4 | No. Employees | ☐ Crawl Space

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: * Use Air vents per manufacturer's Specifications due to the depth of the installation

* Need ST info.

INITIAL SITE SKETCH

See attached, approved

Septic Plan by Michael Athanas & Assoc. (dated 9/14/21)

AS BUILT SKETCH

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 time.

Installed as Shown

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 plan 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: Ronnie L. Smith | Date: 10/6/21 | Installed by: Richard Abernathy

IMPROVEMENT PERMIT by: Maria Dotson | Date: 10/4/21 | OPERATION PERMIT by: | Date: 12-29-2021

AUTHORIZATION TO CONSTRUCT by: Maria Dotson | Date: 10/4/21 | Existing System Inspected by: | Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.



MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887
9/14/2021

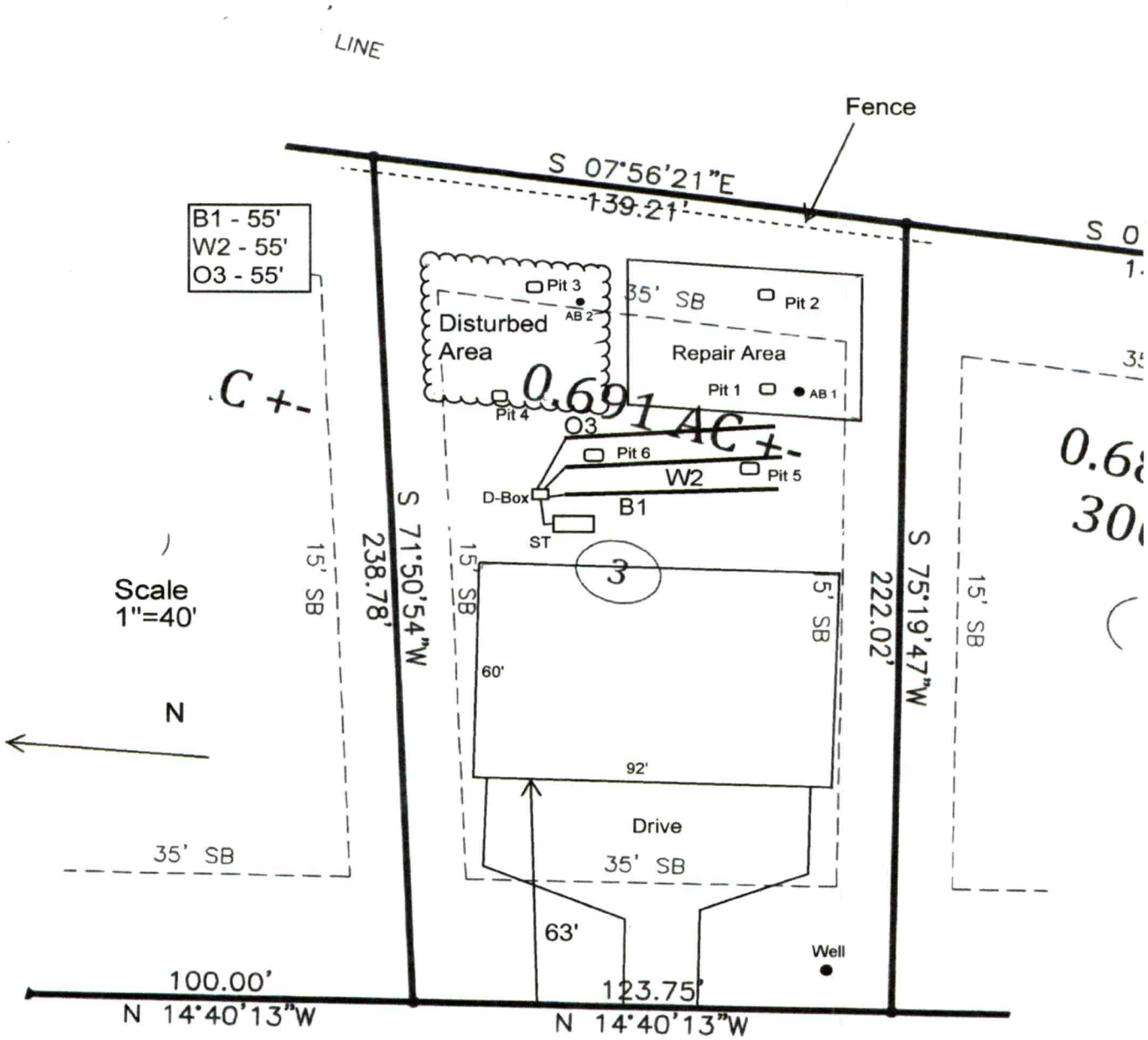
Reference: Data Sheet for 120 Pine Meadows Ln, Brawley Flats Lot 3
House Footprint: 60' x 92' (existing building)
Building Setbacks: 35' front/rear, 15' side
Water Source: Private Well
Number of Bedrooms/Daily Flow: 2/240 GPD
Proposed LTAR: 0.25 GPD/FT^2 (initial), 0.125 GPD/FT^2 (repair)
Proposed System Type: PPBPS
Proposed Repair System Type: Drip Dispersal
Distribution: Gravity-Distribution Box
Septic Tank Size: 1000 gallons (installed)
Proposed Trench Bottom: 48"

Line	Design Length	Actual Length
Blue 1	55'	55'
White 2	55'	55'
Orange 3	55'	55'

Initial System: 165' **Repair System:** 2400 FT^2

Comments:
The initial area has changed locations due to a mistake in the installation (disturbed area on site plan). MA&A evaluated new pits and designed a new initial system area. The repair area will remain the same.
Air vents must be used to the manufacturer's specifications due to the depth of the installation.




LINE
Fence
S 07°56'21"E
139.21'
B1 - 55'
W2 - 55'
O3 - 55'
Pit 3
AB 2
35' SB
Pit 2
Disturbed
Area
Repair Area
Pit 1
AB 1
Pit 4
0.691 AC +-
O3
Pit 6
Pit 5
W2
D-Box
B1
ST
3
15' SB
238.78'
S 71°50'54"W
5' SB
222.02'
S 75°19'47"W
60'
92'
Drive
35' SB
63'
Well
100.00'
N 14°40'13"W
123.75'
N 14°40'13"W
Scale
1"=40'
N
35' SB
NE (SR 2997) - EXISTING 45' PRIVA

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Morrison Suites LLC_____ APPLICATION DATE_____
ADDRESS: _____ DATE EVALUATED: __9/2021_____
PROPOSED FACILITY: _2 BDRM_____ PROPOSED DESIGN FLOW (.1949): _240 GPD__ PROPERTY SIZE: __0.691 AC_____
LOCATION OF SITE: _120 Pine Meadows Ln, Brawley Flats Lot 3_____ PROPERTY RECORDED: __2020_____
WATER SUPPLY: X Private ☐ Public X Well ☐ Spring ☐ Other _____
EVALUATION METHOD: X Auger Boring X Pit ☐ Cut TYPE OF WASTEWATER: X Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
AB 1	LS 5%	0-6	Br CL WSBK	FR SS SP SXP	Few YB	48"	N/A	N/A	PS 0.275
		6-28	R C SBK	FR SS SP SXP					
		28-48	R CL WSBK	FR SS SP SXP					
AB 2	LS 5%	0-6	Br CL WSBK	FR SS SP SXP	Mn	48"	N/A	N/A	PS 0.275
		6-30	R C SBK	FR SS SP SXP					
		30-48	R CL WSBK	FR SS SP SXP					
PIT 1	LS 4%	0-10	Br SCL WSBK	FR SS SP SXP	Com YB @ 18" CHR 2 @ 36" No Mottles >36"	64"	N/A	N/A	DRIP 0.125
		10-36	R C ABK	FR SS SP SXP					
		36-64	R CL WSBK	FR SS SP SXP					
PIT 2	LS 4%	0-9	Br SCL WSBK	FR SS SP SXP	Com YB 22-36"	61"	N/A	N/A	DRIP 0.125
		9-22	R C SBK	FR SS SP SXP					
		22-36	R C ABK	FR SS SP SXP					
		36-61	R CL WSBK	FR SS SP SXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	330 FT^2	2400 FT^2
System Type(s)	Horz PPBPS	DRIP
Site LTAR	0.25	0.125

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): ___PS_____
EVALUATED BY: _____MA&A_____
OTHER(S) PRESENT: ____ICHD_____

COMMENTS:_____

SOIL/SITE EVALUATION

(Continuation Sheet)

PROPERTY ID #: 4636052557____
DATE OF EVALUATION: _____
COUNTY: __IREDELL___

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
PIT 3	LS 4%	0-8	Br SCL WSBK	FR SS SP SXP	Few YB	56”	N/A	N/A	PS 0.25
		8-32	R C SBK	FR SS SP SXP					
		32-56	R CL WSBK	FR SS SP SXP					
PIT 4	LS 4%	0-8	Br SCL WSBK	FR SS SP SXP	F-C YB @ 32”	62”	N/A	N/A	PS 0.25
		8-32	R C SBK	FR SS SP SXP					
		32-46	R C ABK	FR SS SP SXP					
		46-62	R CL WSBK	FR SS SP SXP					
PIT 5	LS 3% NEW PIT	0-12	FILL		Few YB T0 45”	65”	N/A	N/A	PS 0.25
		12-45	R C ABK	FR SS SP SXP					
		45-65	R CL WSBK	FR SS SP SXP					
PIT 6	LS 3% NEW PIT	0-7	RBr SCL WSBK	FR SS SP SXP	F-C YB TO 38”	70”	N/A	N/A	PS 0.25
		7-38	R C SBK	FR SS SP SXP					
		38-70	R CL WSBK	FR SS SP SXP					

COMMENTS: _____

RECEIVED SEP 2 2 2021

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM ER Comprehensive Relayout Paid $350.00

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 AP-305534

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) Please contact Gary McNeely (704-310-1832) prior to evalution

Applicant Name: Ronnie L Smith Address: 491 Emondo Rd. Statesville N.C. Zip: 28677

Applicant Email: rsmith4674@aol.com Phone: 704-363-8886 Alt. Phone: 704-663-7223

Owner Name: Same As Above Address: _____ Zip: _____

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

****

Property Information:

Street Address: 120 Pine Meadows Ln. Mooresville N.C. 28117

Subdivision Name: Brawley Flats Section/Phase: 1 Lot Number: 3

Driving Directions: Brawley School Rd. West To Right on Pine Meadows 300' on Right

****

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

CHECK FOUNDATION TYPE

(✓) New Single Family Residence — Maximum Number of Bedrooms: 2 — ( ) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: 4 — (✓) 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 (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: _____ 9/14/21
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

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, [signature], am the legal owner(s) of the property located at 120 Pine Meadows Ln. Mooresville N.C. 28117 identified as PIN (Parcel Identification Number) 4636052730, 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

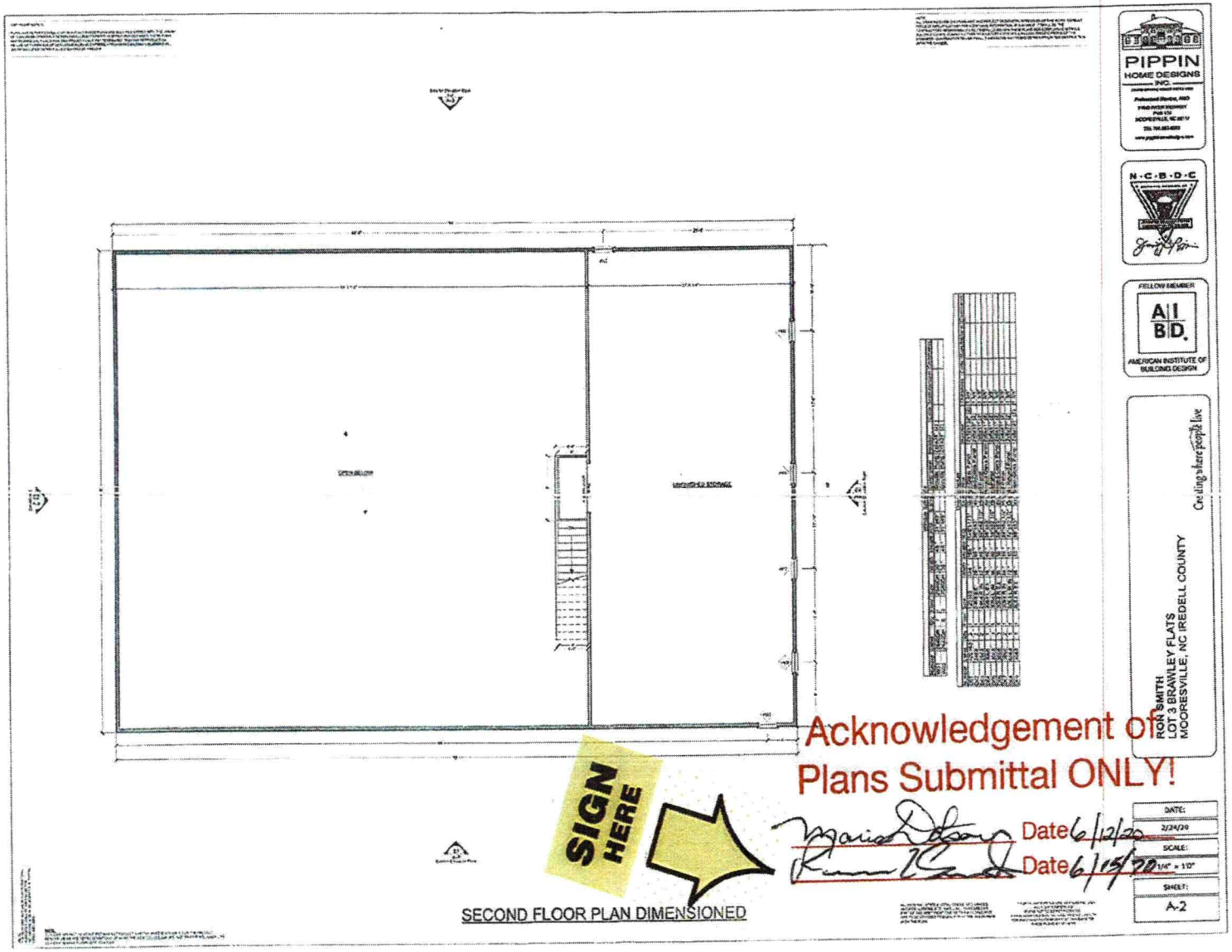
I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

Signature of Owner(s)	Date	Signature of Witness	Date
[signature]	9/14/21	[signature]	9/14/21

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



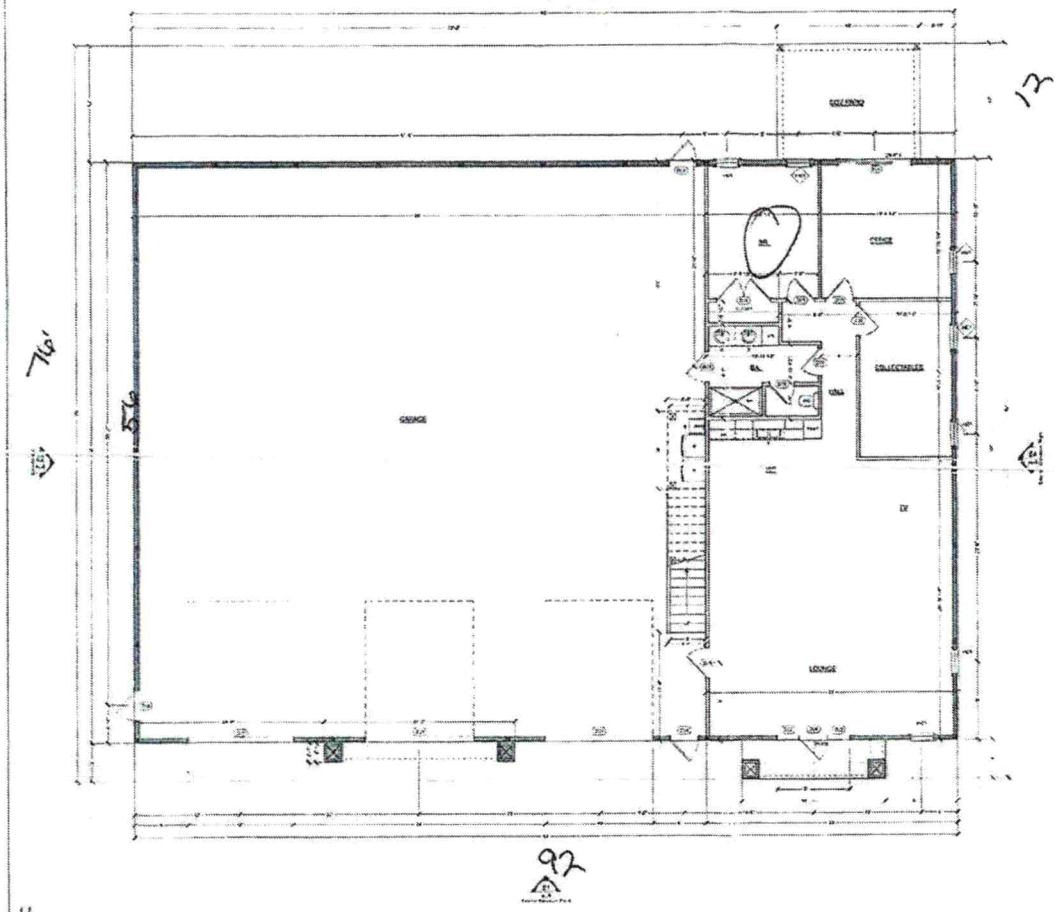
120 Pine Meadow Dr.

SIGN HERE

Acknowledgement of
Plans Submittal ONLY!

Date 4/12/20

Date 04/15/20



FIRST FLOOR PLAN DIMENSIONED

PIPPIN
HOME DESIGNS
INC.

N·C·B·D·C

FELLOW MEMBER
AIBD.
AMERICAN INSTITUTE OF BUILDING DESIGN

Creating where people live

RON SMITH
LOT 3 BRAWLEY FLATS
MOORESVILLE, NC IREDELL COUNTY

DATE:
2/24/20
SCALE:
1/4" = 1'0"
SHEET:
A-1

IREDELL COUNTY · NC

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

APPLICATION NUMBER
305534 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4636052730.000	120 PINE MEADOW LN	Iredell County

Owner Information	Applicant Information
Name: MORRISON SUITES LLC	Name: MICHAEL ATHANAS & ASSOCIATES
Address:	Address: 561 ENNIS RD
	WEDDINGTON, NC 28173
Phone:	Phone: (704)576-3887

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.691	35	35	15	15	WSIV-CA Catawba/Lake Norman	NO

Remarks
SFD

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: 03/03/2020

Signature of Owner/Contractor

Permit Number	305534	TOTAL FEES:	$77.25