ICHD–ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 243395.

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

PIN # 4636438449

APPLICANT/OWNER: Michael & Karen VanCleave APPLICANT ADDRESS: 123 Turbyfill Rd Mooresville, NC 28117

SITE ADDRESS: 123 Turbyfill Mooresville, NC PHONE: 6159484072 ALT. PHONE

SITE DIRECTIONS: Brawley School Rd TL Stutts Rd TR Turbyfill 1st on left SAP CONTROLLED: ☐ YES ☒ NO

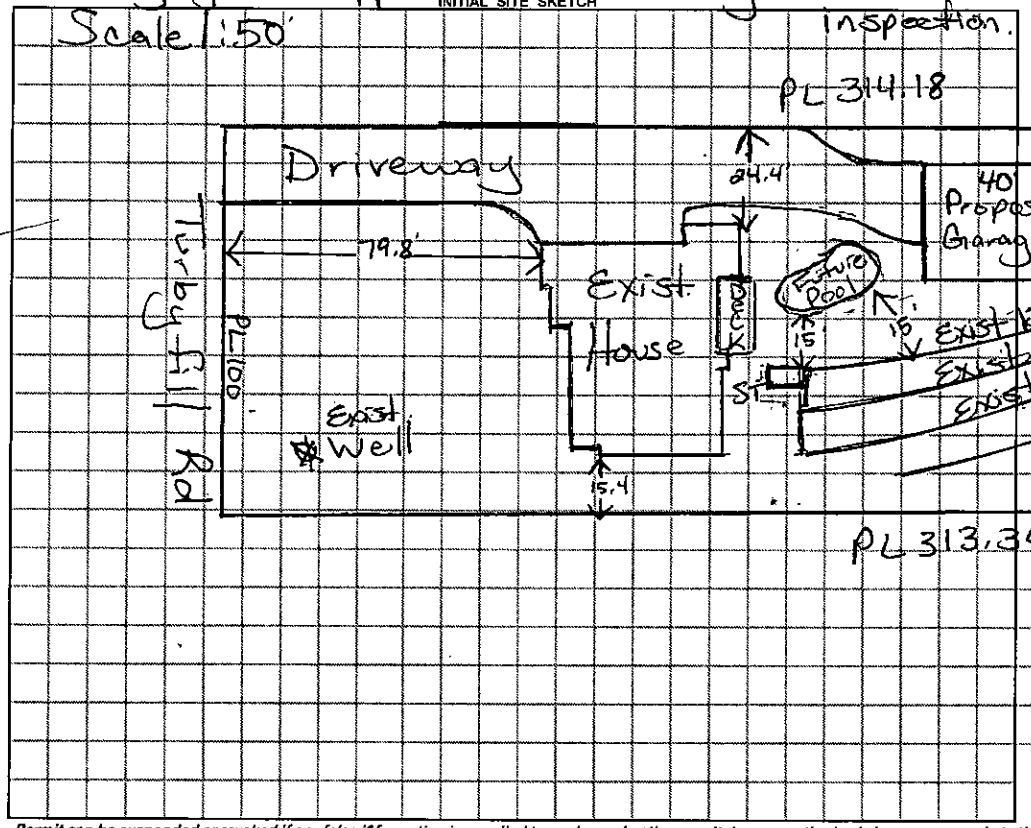
SUBDIVISION: Stutts Cove SECTION: LOT # 39 LOT AREA: .72 Acre DESIGN FLOW: 480gpd L.T.A.R.: .3

Septic Tank: Exist 1000 (gal)	STB	Date	☐ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms: 4	Water Supply: ☒ Private
Pump Tank (gal)	PT	Date	System Description: Existing Gravity-25% Red PPBPS		☐ Business	No. Persons: 8	☐ Public
Pump Make	Model	Serial #	Repair System Description:		☒ Other Garage	No. Employees	☐ Community
# Nitrification Fields: 1	# Lines: 3	Linear Ft: 400	Maintenance Agreement Required: ☐ YES ☒ NO		☐ Slab	☒ Crawl Space	
Trench Width: 36"	Trench Bottom Depth(Low side): Exist	Gravel Depth	☒ GRAVITY ☐ PRESSURE		☐ Basement w/ plumbing	☐ Basement w/o plumbing	

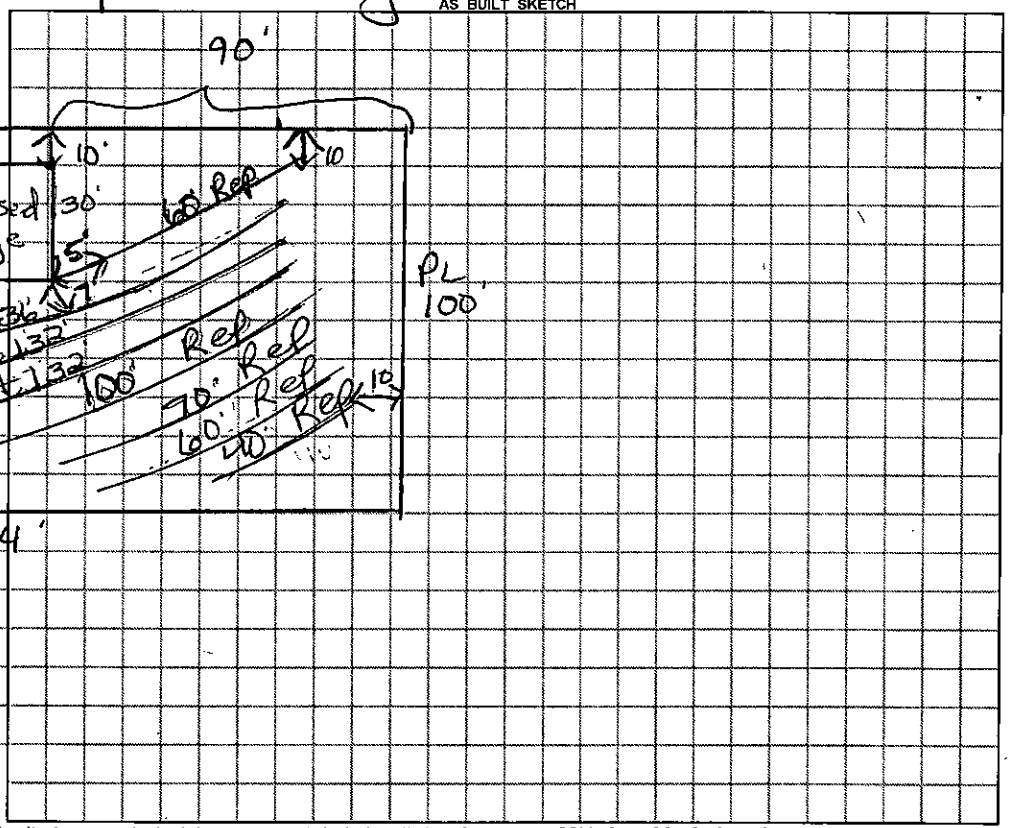
Comments / Conditions: Must Keep proposed garage a minimum of 5ft from Septic System. Existing System "appears" to be functioning ok at time of inspection.

Note: Any future pool must be a minimum of 15ft from Septic Repair was changed to PPBPS.

INITIAL SITE SKETCH



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: Date: 7/11/19 Installed by:

IMPROVEMENT PERMIT by: Maria Dotson Date: 7/10/19 OPERATION PERMIT by: Maria Dotson Date:

AUTHORIZATION TO CONSTRUCT by: Maria Dotson Date: 7/10/19 Existing System Inspected by:

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.

4M 6/21/19

#243395
$500.00
5-17-19

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

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 MAY 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, SEALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1955(g) 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: Michael VanCleave Address: _____ Zip: _____

Applicant Email: MVANCLEAVE@bellsouth.net Phone: (704) 929-4352 Alt. Phone: _____

Owner Name: E. VanCleave Address: 123 Derbyfill Dr. Mooresville Zip: 28117

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

Property Information:

Street Address: 123 Derbyfill Road Mooresville NC 28117

Subdivision Name: Stutts Cove Section Phase: _____ Lot Number: _____

Driving Directions: Brawley School Road Left on Stutts, Right onto Derbyfill Road.

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

CHECK FOUNDATION TYPE

( ) New Single Family Residence — Maximum Number of Bedrooms: _____ — ( ) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: _____ — ( ) Concrete Slab Foundation
(X) 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 ( ) 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 marking of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

Signature: Elizabeth Woodward 5/15/19
Property owner/owner's legal representative signature (SIGNATURE REQUIRED) DATE

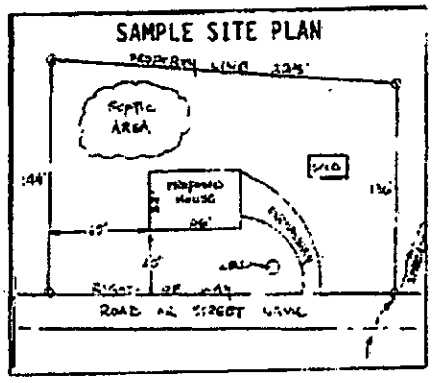
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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:

( ) Property line measurements are clearly identified
( ) All proposed structures are indicated
( ) Front and side setbacks from property line
( ) Preferred driveway location
( ) Preferred well location
( ) Preferred septic system location
( ) North arrow, or other sufficient indicator of direction

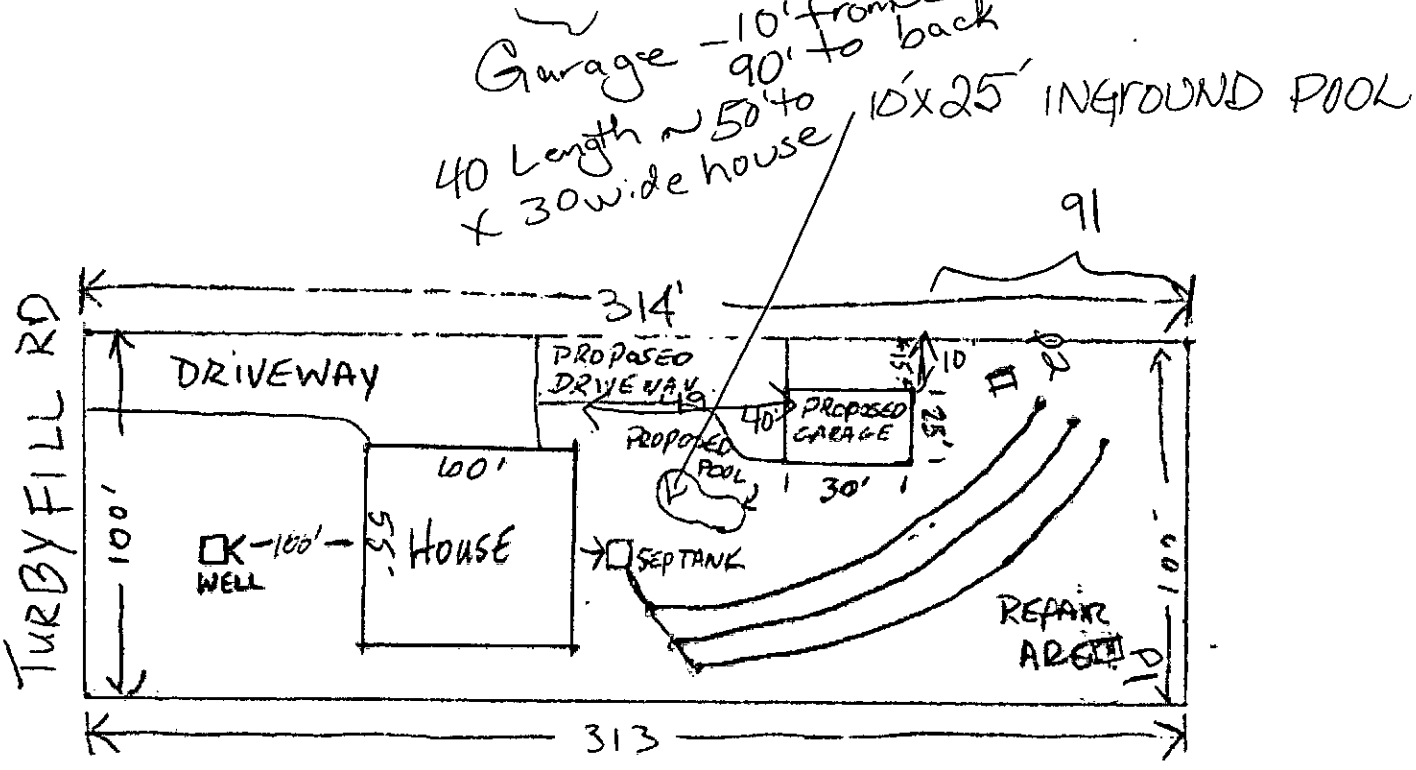


Circle N/A on the following if appropriate:

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

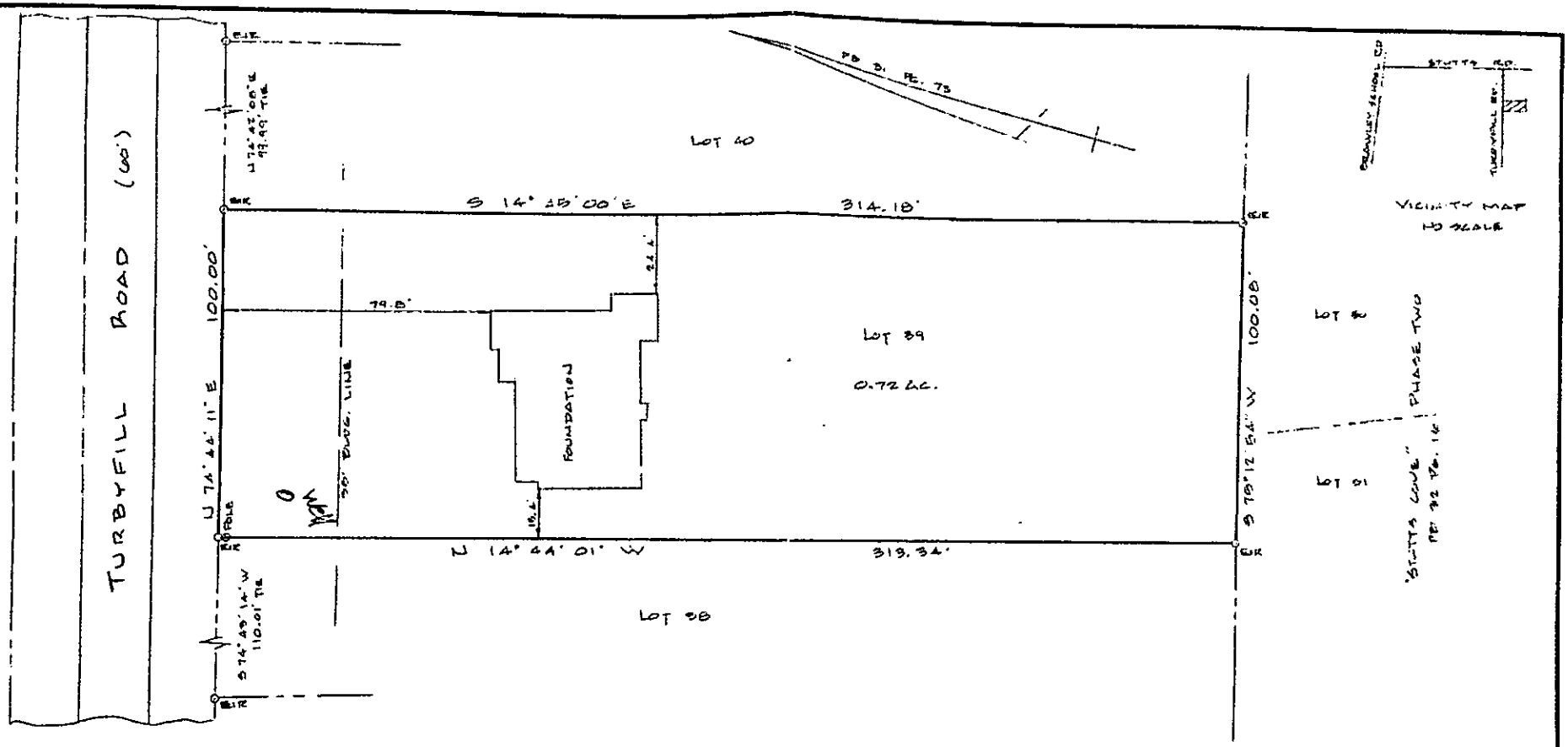
Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site



Signature: Shelby Woodson 5/15/19
Property owner / owner's legal representative signature (SIGNATURE REQUIRED) DATE

89
-40
49

B 2625 328 D 6/141
Michael & K



AREA COMPUTED BY COORDINATE METHOD

THIS SURVEY IS SUBJECT TO ANY FACTS THAT MAY BE DISCLOSED BY A FULL AND ACCURATE TITLE SEARCH

I, ALFRED P. WILLIAMS PROFESSIONAL LAND SURVEYOR CERTIFY THAT THIS MAP WAS DRAWN FROM AN ACTUAL FIELD SURVEY PERFORMED UNDER MY DIRECTION AND SUPERVISION. THE RATIO OF PRECISION IS 1: 10,000+. WITNESS MY HAND AND SEAL THIS 2 DAY OF March 2005.

PLS

NORTH CAROLINA PROFESSIONAL SEAL L-3445 LAND SURVEYOR ALFRED F. WILLIAMS

NOTE: LOT IS SUBJECT TO A 10' DRAINAGE & UTILITY EASEMENT ALONG ALL LOT LINES.

EIR - EXISTING IRON ROD

SURVEY FOR
MEDALLION PROPERTIES

SCALE 1" = 50'	TAX PARCEL 4686-45-8449	DEED 1013 - 784
DATE: 3-4-05		

BEING LOT 39 "STUTTS COVE, PHASE ONE" RECORDED IREDELL CO. REG. IN PB 51 PG. 75 DAVIDSON TOWNSHIP, IREDELL CO., N.C.

ALFRED F. WILLIAMS, PROFESSIONAL LAND SURVEYOR
133 SUMMERBROOK LANE, MOORESVILLE, NC 28117
704-277-6647

DRAWING NUMBER

"PTBLDWG POST 16AR-05 — 11 x 17

Type: CONSOLIDATED REAL PROPERTY
Recorded: 6/14/2019 12:43:52 PM
Fee Amt: $806.00 Page 1 of 2
Revenue Tax: $780.00
Iredell County, NC
Ronald N. Wyatt Register of Deeds

BK 2625 PG 328 - 329

GENERAL WARRANTY DEED

Excise Tax: **$780.00**

Tax Parcel ID No.: **4636-43-8449** _____ Verified by: Iredell_____ County

on the ____ day of_____, 20____ By:_____

Mail/Box to: **Grantee**

This instrument was prepared by: **Kevin C. Donaldson, Jones, Childers, Donaldson & Webb, PLLC, 149 Welton Way, Mooresville, NC 28117**

Brief description for the Index: **Lot 39 Stutts Cove**

THIS DEED, made this the 14th day of June, 2019, by and between

GRANTOR: Geoffrey Kelsey Woodworth, unmarried,
whose mailing address is 9170 Marasol Lane, Concord, NC 28027
(herein referred to collectively as **Grantor**) and

GRANTEE: Michael J. VanCleave and wife, Karen S. VanCleave
whose mailing address is 123 Turbyfill Road, Mooresville, NC 28117
(herein referred to collectively as **Grantee**) and

WITNESSETH:

For valuable consideration from Grantee to Grantor, the receipt and sufficiency of which is hereby acknowledged, Grantor hereby gives, grants, bargains, sells and conveys unto Grantee in fee simple, subject to the Exceptions and Reservations hereinafter provided, if any, the following described property located in the Township of Davidson, County of Iredell, State of North Carolina, more particularly described as follows:

BEING ALL OF LOT NO. 39 of Stutts Cove, Phase 1, as the same is platted, planned and recorded in Plat Book 31, at Page 73, in the Office of the Register of Deeds for Iredell County, North Carolina.

Said property having been previously conveyed to Grantor by instrument(s) recorded in Book 2116, Page 1121 and Book 1701, Page 2229, and being reflected on plat(s) recorded in Map/Plat Book 31, Page 73.

All or a portion of the property herein conveyed ✓ includes or ___ does not include the primary residence of a Grantor.

Revised

Submitted electronically by "Jones, Childers, Donaldson & Webb, PLLC"
in compliance with North Carolina statutes governing recordable documents
and the terms of the submitter agreement with the Iredell County Register of Deeds.

TO HAVE AND TO HOLD unto Grantee, together with all privileges and appurtenances thereunto belonging, in fee simple, subject to the Exceptions and Reservations hereinafter and hereinabove provided, if any.

And Grantor hereby warrants that Grantor is seized of the premises in fee and has the right to convey same in fee simple, that title is marketable and is free and clear of encumbrances other than as set forth herein, and that Grantor will forever warrant and defend the title against the lawful claims of all persons or entities whomsoever.

This conveyance is made subject to the following Exceptions and Reservations:

1. **ANY AND ALL EASEMENTS, RIGHTS OF WAY AND RESTRICTIONS OF RECORD.**
2. **ANY AND ALL ZONING AND PLANNING ORDINANCES.**

All references to Grantor and Grantee as used herein shall include the parties as well as their heirs, successors and assigns, and shall include the singular, plural, masculine, feminine or neuter as required by context.

IN WITNESS WHEREOF, the Grantor has duly executed the foregoing as of the day and year first above written.

Geoffrey Kelsey Woodworth (SEAL)
Geoffrey Kelsey Woodworth

State of North Carolina
County of Iredell

I certify that the following persons, who are known to me or proved to me on the basis of satisfactory evidence to be the persons described, personally appeared before me this day; acknowledging to me that he voluntarily signed the foregoing document for the purpose stated herein and in the capacity indicated herein: **Geoffrey Kelsey Woodworth.**

WITNESS my hand and official seal, this 14th day of June, 2019.

Amanda N. Bowers
Notary Public
Printed Name: Amanda N. Bowers
My Commission Expires: May 10, 2024

(Official/Notarial Seal)

AMANDA N. BOWERS NOTARY PUBLIC IREDELL COUNTY, NC

Revised December 17, 2009

Old

Public Health

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public Health

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, Geoffrey Woodworth, am the legal owner(s) of the property located at 123 Tuckyfill Rd. Mooresville, NC, 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.

Geoffrey Woodworth 5/15/19 — Signature of Owner(s) — Date

[illegible] 5/15/19 — Signature of Witness — 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

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

Deborah Fox
Notary Public
Iredell County
North Carolina
My Commission Expires 3/25/2024

bubbavan@comcast.net

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

Sheet ___ of ___
PROPERTY ID #: 7636384[illegible]
COUNTY: Iredell

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

OWNER: Michael & Karen Van Cleave
ADDRESS: 123 Turby Hill Mooresville, NC
PROPOSED FACILITY: House
LOCATION OF SITE: 123 Turby Hill
APPLICATION DATE: 5/15/19
DATE EVALUATED: 7/5/19
PROPOSED DESIGN FLOW (.1949): 480gpd
PROPERTY SIZE: .72Acre
PROPERTY RECORDED: Y
WATER SUPPLY: X Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring X Pit ☐ Cut
TYPE OF WASTEWATER: X Sewage ☐ Industrial Process ☐ Mixed

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
1	L 5%	0-7	Brw SCL	w SBK SS, SP, SE, FR					PS .3
		7-18	RCL m-w	SBK SS, SP, SE, FR					
		18-63	R to Md Red CL	w SBK SS, SP, SE, FR					
			w/ Few Fd	man. SAP Inclus		63"			
2	L 6%	0-10	Brw SCL	w SBK SS, SP, SE, FR					PS .3
		10-28	RCL m-w	SBK SS, SP, SE, FR					
		28-53	RCL w	SBK SS, SP, SE, FR					
			w/ SAP Inclus			53"			
		53-63	LSC	SAP massive FR					
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	25% Red	50% Red
Site LTAR	.3	.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: Maria Dotson
OTHER(S) PRESENT: David Bean, Michael & Karen Van Cleave

COMMENTS:

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, Karen VanCleave, am the legal owner(s) of the property located at 123 Turbyfill Road, identified as

PIN (Parcel Identification Number) 4636438449.000, located in Iredell County, North Carolina.
I do hereby authorize (**print legal representative/company name**) Chelsea VanCleave _____, 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.

_____ 7/9/19
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

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adrienne.shea@co.iredell.nc.us
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