IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 225378

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

PIN # 4636447498

APPLICANT: 1st Choice Heating | APPLICANT ADDRESS: 119 Beechnut Lane Statesville NC

SITE ADDRESS: 242 Stutts Rd. Mocksville | PHONE: 704 902 7308 | ALT. PHONE: 704 902 7308

SITE DIRECTIONS: Brandy School Rd to Left on Stutts Rd L corner of Stutts & Fairway Drive

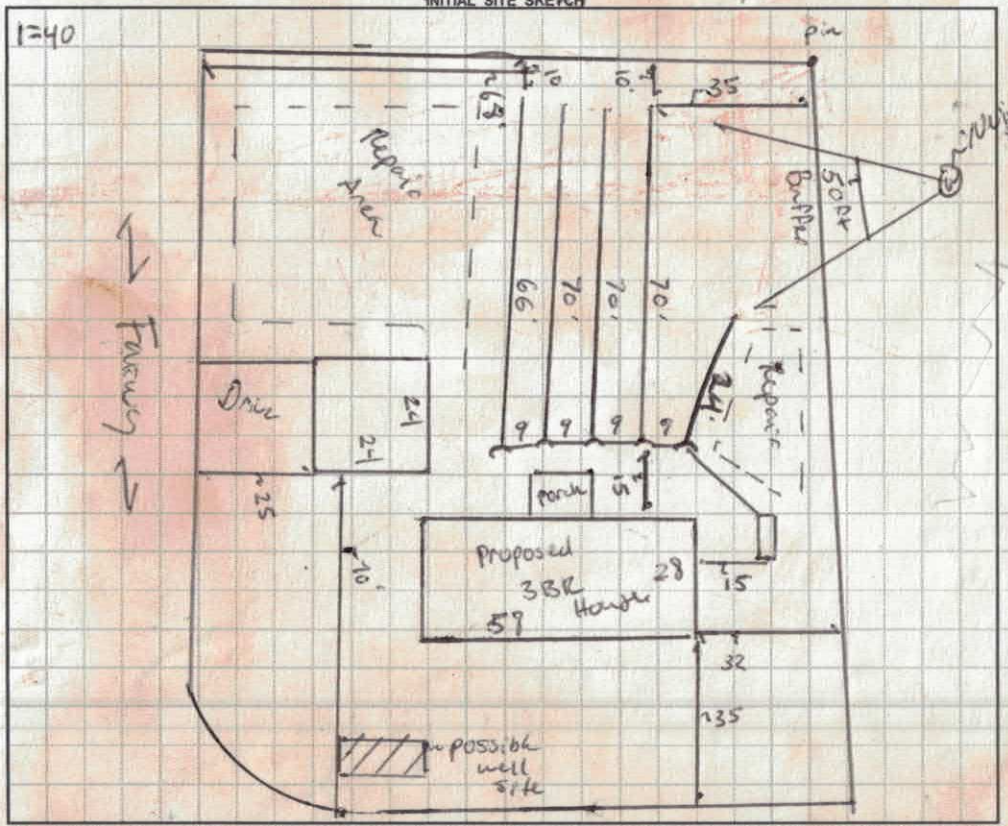
SUBDIVISION: Fairway Estates | SECTION: N/A | LOT # 236 | LOT AREA: .49ac | DESIGN FLOW: 360 | L.T.A.R.: .3

Septic Tank	1000 (gal)	STB	760	Date	3/10/2017	☑ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI
Pump Tank	(gal)	PT		Date		System Description:	25% reduction		
Pump Make		Model		Serial #		Repair System Description:	50% reduction		
# Nitrification Fields	1	# Lines	5	Linear Ft:	300	Maintenance Agreement Required:	☐ YES	☑ NO	
Trench Width	36	Max. Trench Bottom Depth	36 High	Gravel Depth	—		☑ GRAVITY	☐ PRESSURE	

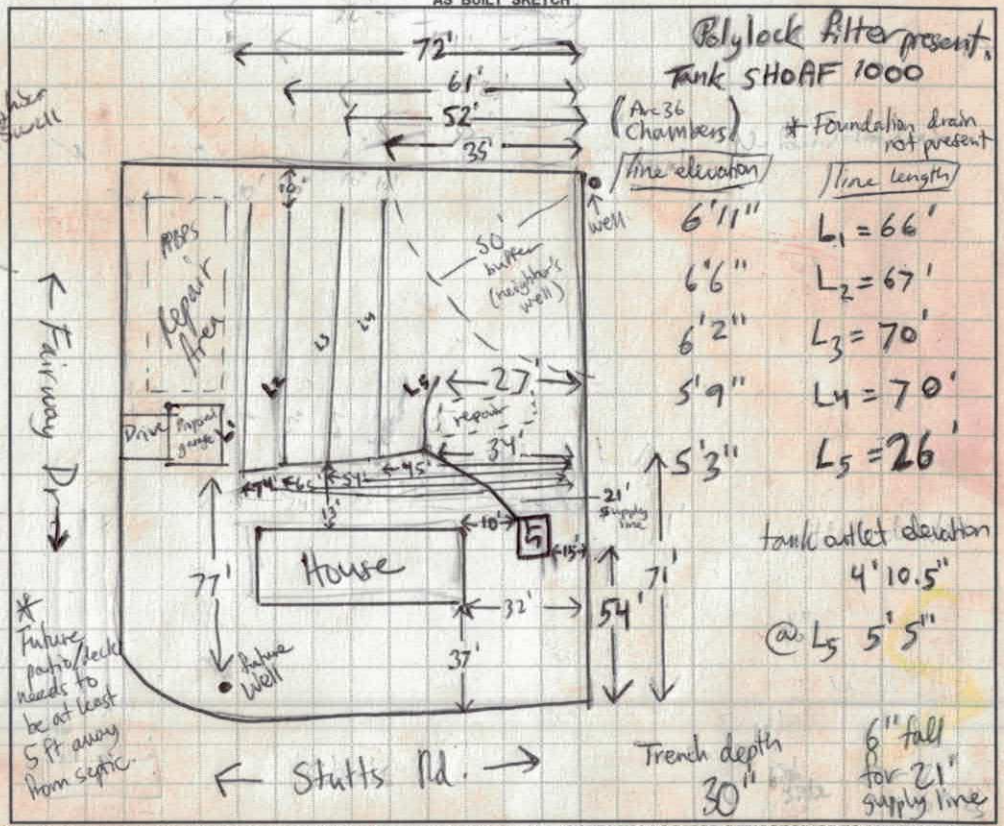
☑ Residence	No. Bedrooms	3	Water Supply
☐ Business	No. Persons	6	☑ Private
☐ Other	No. Employees		☐ Public
☐ Slab	☑ Crawl Space		☐ Community
☐ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions: Install System on the contour of the land to utilize Serial distribution. Do not exceed max depth of 36 inches. Site work & field observation included from Michael Athens & Associates LSS. Do not pave, pave, cradle, or bury utilities in the drain field area.

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**

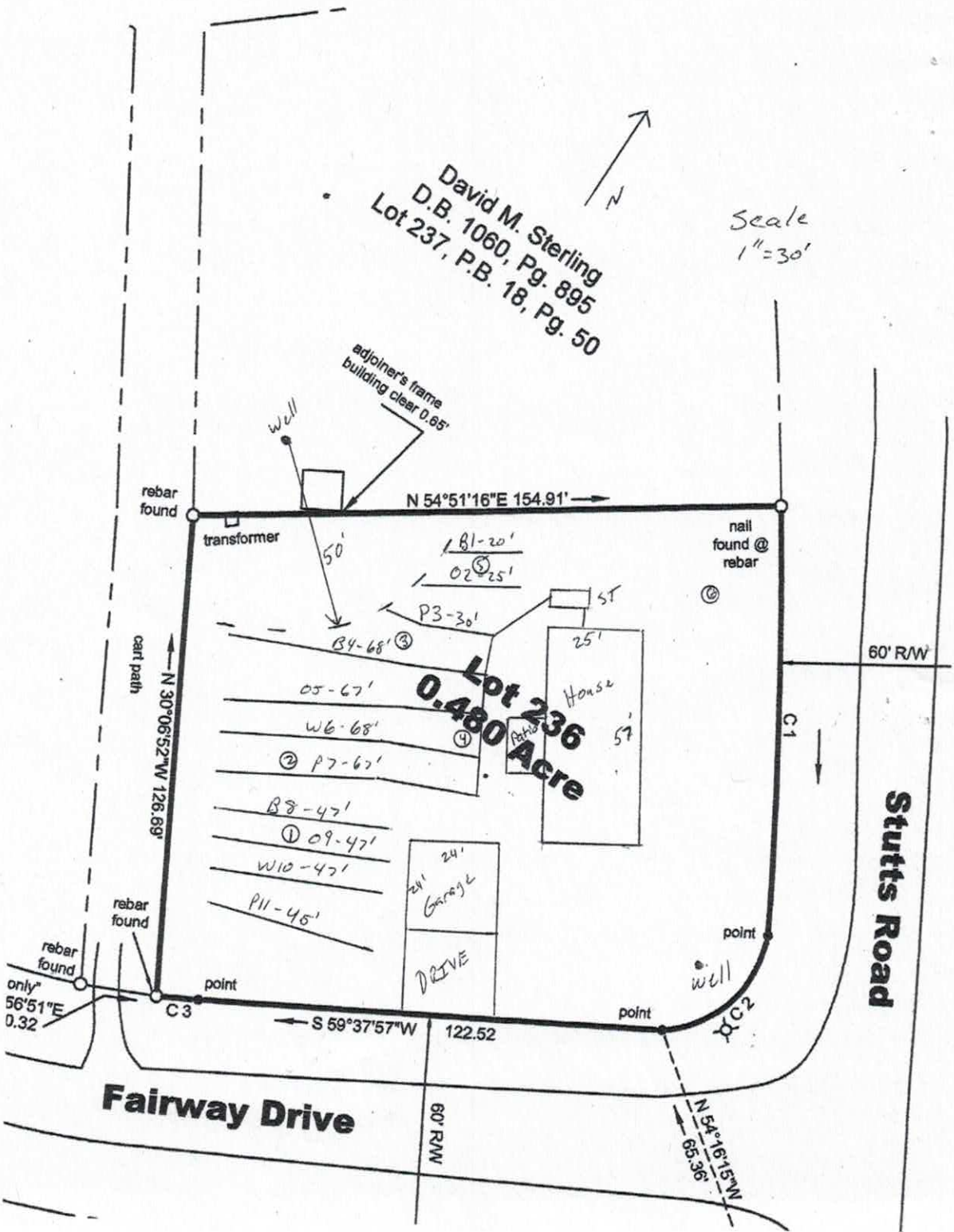
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: [signature] Date: 4-3-17 Installed by: Abee's Grading

IMPROVEMENT PERMIT by: B. Bottling Date: 3/29/2017 OPERATION PERMIT by: Mohamed Dumanieh/M Kevin Reid RS Date: 5/31/2017

AUTHORIZATION TO CONSTRUCT by: B. Bottling Date: 3/29/2017 Existing System Inspected by: Date:

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


David M. Sterling
D.B. 1060, Pg. 895
Lot 237, P.B. 18, Pg. 50
N
Scale
1"=30'
adjoiner's frame
building clear 0.65'
well
rebar
found
transformer
N 54°51'16"E 154.91'
nail
found @
rebar
50'
B1-20'
02 (5) 25'
P3-30'
ST
25'
House
57'
B4-68' (3)
05-67'
W6-68'
(2) P7-67'
B8-47'
(1) 09-47'
W10-47'
P11-45'
Lot 236
0.480 Acre
Patio
(9)
(6)
60' R/W
C1
cart path
N 30°06'52"W 126.69'
24'
24'
Garage
DRIVE
rebar
found
rebar
found
only"
56'51"E
0.32
point
C3
S 59°37'57"W
122.52
point
well
point
C2
Stutts Road
Fairway Drive
60' R/W
N 54°16'15"W
65.36'



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

Reference: Data Sheet for 242 Stutts Rd, Fairway Estates Lot 236
House Footprint: See attached
Building Setbacks: 35' front/rear, 15' side, 25' side street
Water Source: Private Well
Number of Bedrooms: 3/360 GPD
Proposed LTAR: 0.3 GPD/FT2 (initial), 0.275 GPD/FT2 (repair)
Proposed System Type: 25% Reduction
Proposed Repair System Type: PPBPS
Distribution: Gravity-End cap/ Drop boxes
Septic Tank Size: 1000 gallons
Proposed Trench Bottom: 24-36"

Line	Design Length	Actual Length
Blue 1		20'
Orange 2		25'
Pink 3	**30'**	**34'**
Blue 4	**68'**	**71'**
Orange 5	**67'**	**70'**
White 6	**68'**	**70'**
Pink 7	**67'**	**71'**
Blue 8		47'
Orange 9		47'
White 10		47'
Pink 11		45'



Initial System: 300' **Repair System:** 231'

Comments:
The garage will be built on a slab with no foundation drain. The septic tank will be installed deeper than the house foundation drain so it can be placed 5' from the house. The repair is laid out on 8' centers.

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

Sheet 1 of 1
PROPERTY ID #: C1636 C197
COUNTY: Iredell

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

2425 Stutts Rd.

OWNER: David Matthew Stutts
ADDRESS: 242 Stutts Rd Mid
PROPOSED FACILITY: Hom 3 Bd
LOCATION OF SITE: 242 Stutts Rd Mid
APPLICATION DATE: 3/2/2017
DATE EVALUATED: 3/16/17
PROPOSED DESIGN FLOW (.1949): 360
PROPERTY SIZE: 4.9
PROPERTY RECORDED: Yes
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other N/A
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	3% Cliw	0-11	xc wSBk	SS Sp FR SFP	2.5Y2.5/4	PS	Some Sap Inclus	N/A Mica	PS .3
		11-42	c SBk	SS Sp FM SFP					
		42-48	CL Bzc wSBk	SS Sp FR SFP					
2	5% Cliw	0-9	SCL wSBk	SS Sp FR	PS	PS	N/A	N/A M.ca	PS .3
		9-40	C SBk	SS Sp FM					
		40-48	CL wSBk	SS Sp FR					
3	5% Cliw	0-12	xc wSBk	SS Sp FR SFP	PS	PS	N/A	N/A Mica	PS 3
		12-40	C SBk	SS Sp FM SFP					
		40-48	CL wSBk	SS Sp FR SFP					
4	5% Cliw	0-5	SCL wSBk	SS Sp FR SFP	PS	PS	N/A	N/A Mica	PS .3
		5-36	C SBk	SS Sp FR SFP					
		36-48	CL wSBk	SS Sp FR SFP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	300	200
System Type(s)	25	80
Site LTAR	.3	.3

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

COMMENTS:

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

PROPERTY ID #: 4636447498_
COUNTY: _Iredell_

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

OWNER: David Matthew Sterling_____ APPLICATION DATE_____
ADDRESS: 3222 Deauville Pl, Statesville, NC 28625_____ DATE EVALUATED: _____
PROPOSED FACILITY: _3 bdrm_____ PROPOSED DESIGN FLOW (.1949): _360 GPD_____ PROPERTY SIZE: ___0.49 AC_____
LOCATION OF SITE: 242 Stutts Rd, Fairway Estates Lot 236_____ PROPERTY RECORDED: _6/5/1986_____
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)		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	
1	LS 5%	0-4	Br SCL WSBK	FR SS SP SEXP	Few YB TO 36"	48"	N/A	N/A	PS 0.275-0.25
		4-36	R C SBK	FR SS SP SEXP					
		36-48	R CL WSBK	FR SS SP SEXP					
2	LS 5%	0-4	Br SCL WSBK	FR SS SP SEXP	N/A	48"	N/A	N/A	PS 0.3
		4-36	R C SBK	FR SS SP SEXP					
		36-48	R CL WSBK	FR SS SP SEXP					
3	LS 5%	0-4	Br SCL WSBK	FR SS SP SEXP	N/A	48"	N/A	N/A	PS 0.3
		4-32	R C SBK	FR SS SP SEXP					
		32-48	R CL WSBK	FR SS SP SEXP					
4	LS 5%	0-3	Br SL GR	FR SS SP SEXP	N/A	48"	N/A	N/A	PS 0.3
		3-12	R SCL WSBK	FR SS SP SEXP					
		12-40	R C SBK	FR SS SP SEXP					
		40-48	R CL WSBK	FR SS SP SEXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	900 FT2	462 FT2
System Type(s)	25% Reduction	PPBPS
Site LTAR	0.3	0.275

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

COMMENTS:_____

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

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

PROPERTY ID #: 4636447498
DATE OF EVALUATION:
COUNTY: IREDELL

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	
5	LS 5%	0-3	Br SCL WSBK	FR SS SP SEXP	N/A	48"	N/A	N/A	PS 0.3
		3-30	R C SBK	FR SS SP SEXP					
		30-48	R CL WSBK	FR SS SP SEXP					
6	LS 5%	0-8	RBr SCL WSBK	FR SS SP SEXP	N/A	48"	N/A	N/A	PS 0.3
		8-36	R C SBK	FR SS SP SEXP					
		36-48	R CL WSBK	FR SS SP SEXP					

COMMENTS:

DHHS

ON-SITE WASTEWATER SECTION

Sheet ____ of ____
PROPERTY ID #: ____
COUNTY: ____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: ____ APPLICATION DATE ____
ADDRESS: ____ DATE EVALUATED: 3/6/2017
PROPOSED FACILITY: ____ PROPOSED DESIGN FLOW (.1949): ____ PROPERTY SIZE: ____
LOCATION OF SITE: 242 Stutts Rd. Mooresville, NC 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	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1		0-5	SCL					Rock @ 41"	0.3
		5-39	C						
		39-41	CL						
		41	Rock						
2		0-9	SCL				Sap inclusions @ 25"		0.3
		9-38	C						
		38-48	CL						
3		0-10	SCL						0.3
		10-36	C						
		36-48	CL						
4		0-10	SCL						0.3
		10-32	C						
		32-48	CL						

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): ____
SITE CLASSIFICATION (.1948): ____
EVALUATED BY: ____
OTHER(S) PRESENT: ____

COMMENTS: ____

RECEIVED MAR 2 - 2017

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

Paid $500.00

Application for IMPROVEMENT PERMIT, AUTHORIZATION TO CONSTRUCT, or EXISTING SYSTEM INSPECTION

(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: (✓) Improvement Permit (✓) Authorization To Construct ___ BOTH ___ Existing System Inspection

225378

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:

1st Choice Housing	119 Beechnut Lane	704-902-7308	
Applicant Name	Mailing Address Statesville, NC	Home Phone #	Alternate Phone #
David Mathew Steding	236 Stutts Rd Mooresville	704-902-7308	
Owner Name	Mailing Address	Home Phone #	Alternate Phone #

4. Property Information:

242 Stutts Rd Mooresville, NC	Fairway Estates	Lot 236
Street Address	Subdivision Name	4636-44-7498,000 Section/Phase and Lot Number

Driving Directions: _____

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

(✓) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
( ) Repair To Failing Septic System due to _____
( ) Other _____

Maximum Number of Bedrooms 3
Maximum Number of Occupants 2
If Expansion, Current Number of Bedrooms ___

(✓) 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 ( ) 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 in _____ *YEAR*

( ) Alternative (✓) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other _____ ( ) No Preference

8. 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. industry) 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.

9. Signature: _____ 3-1-2017

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

DocuSign Envelope ID: 08BE8CB9-AFAE-4B27-8F49-5C490B761B47

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL 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, David Matthew Sterling Stutts, am the legal owner(s) of the property located at 236 ~~Sturgis~~ Rd, Mooresville NC 28117, identified as PIN (Parcel Identification Number) 4636-44-7498.000, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) Janet Dimmette 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 3/1/17 — Ludmila Sterling Signature of Witness — Date 3/1/17

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

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*:

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...**

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

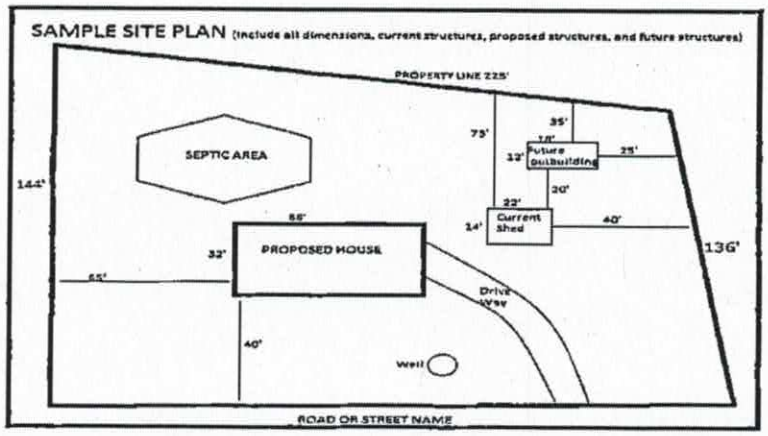
_____ Front and side setbacks from property line... **_____ Preferred driveway location and configuration, preferred well location...**

_____ Area you prefer your septic system to be placed... **_____ North arrow, or other sufficient indicator of direction...**

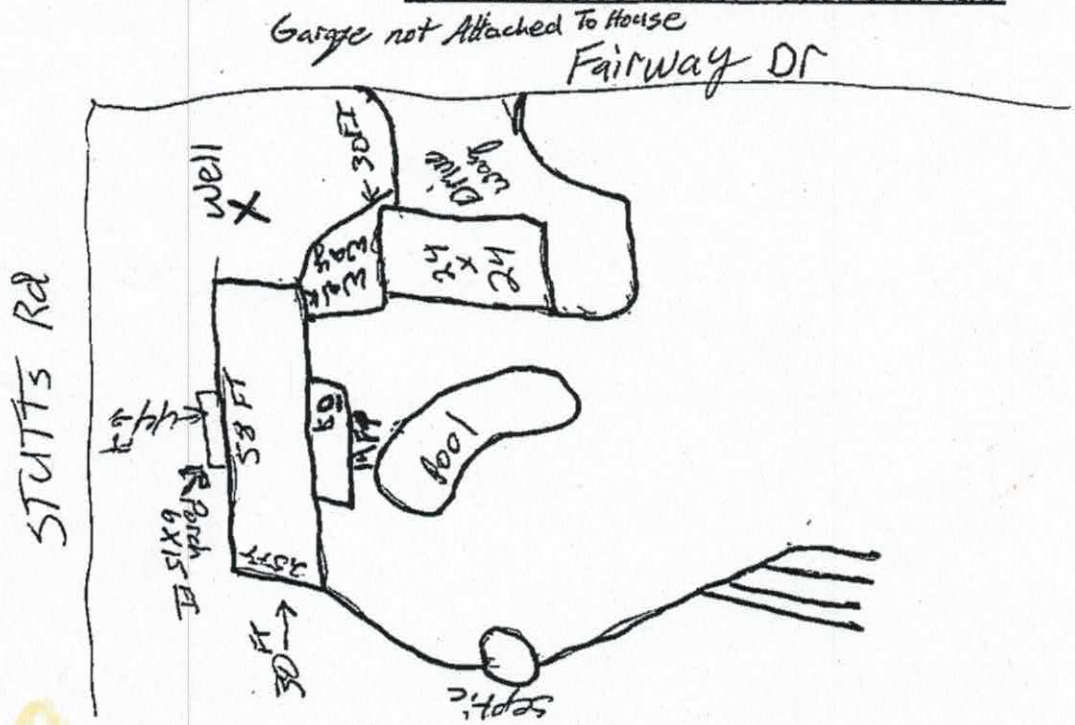
Circle N/A on the following if appropriate:

_____ 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



Signature: _____

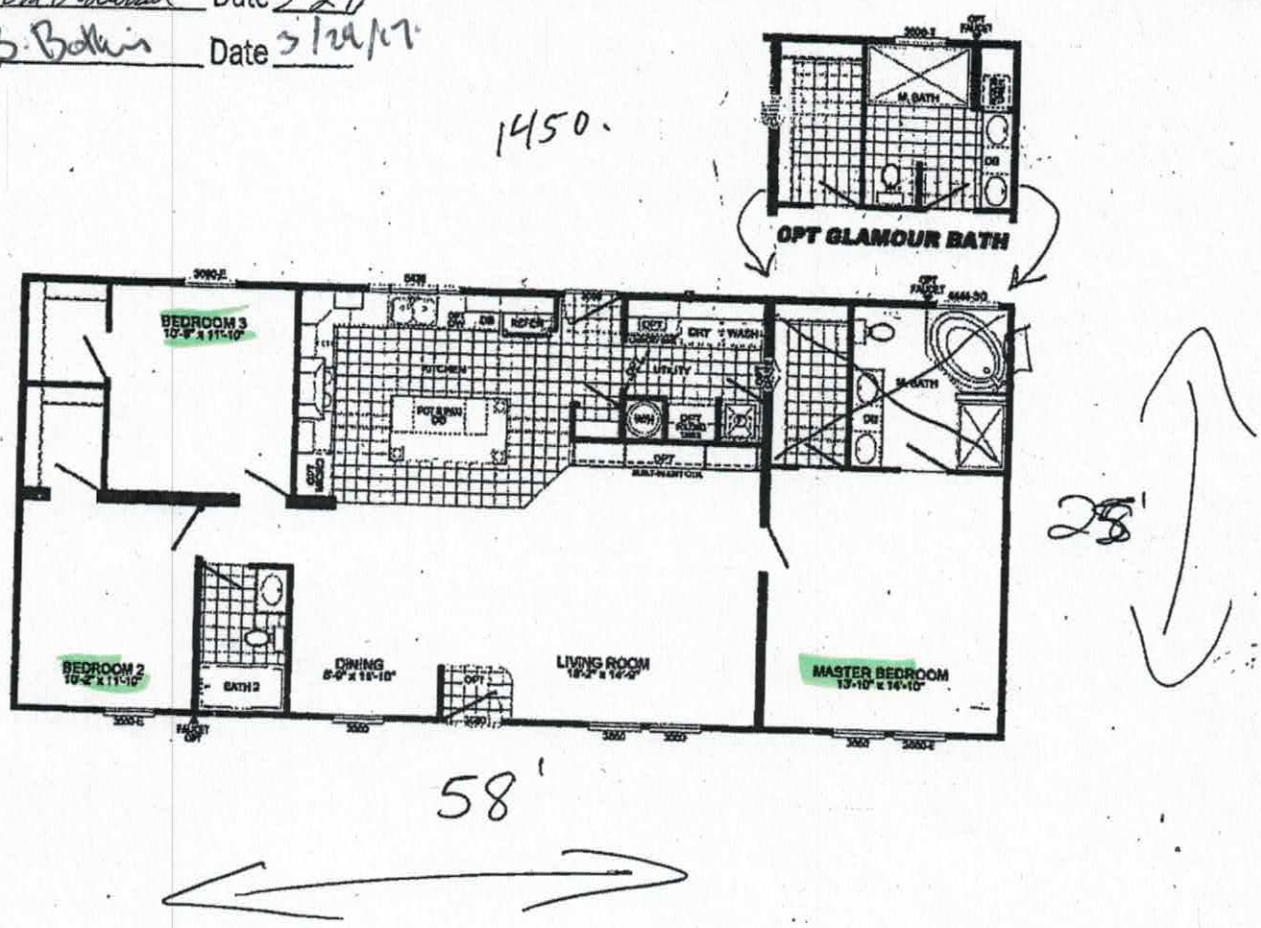
REQUIRED property owner or owner's legal representative signature.

3-1-17

DATE

Acknowledgement
Plans Submittal ONLY!
John McConnell Date 3-2-17
B. Botkin Date 3/24/17

1450.



IREDELL COUNTY

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

APPLICATION NUMBER
225378
Issue Date: 03/02/2017

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4636447498.000	242 STUTTS ROAD, MOORESVILLE, NC 28117	

Owner Information	Applicant Information
Owner: STERLING DAVID MATTHEW	Applicant: 1ST CHOICE HOUSING INC
Address: 0 IREDELL CO, NC 28625	Address: 119 BEECHNUT LANE STATESVILLE, NC 28625
Phone:	Phone:

Use Requested	Zone Code

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.490	35.00	35.00	25.00	15.00	CA	X

Remarks:

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	95143	TOTAL FEES:	$ 77.25