IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 218203

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM 218203

PIN # 4636859523

APPLICANT: Finola & Paul Johnson APPLICANT ADDRESS: 105 Broadbill Drive Mooresville, NC

SITE ADDRESS: 105 Broadbill Dr Mooresville, NC 28117 PHONE: 704 360 7041 ALT. PHONE:

SITE DIRECTIONS: Brawley School Rd TL Canvasback TL Broadbill (3rd left after barn)

SUBDIVISION: Woodland Hills 6 SECTION: 10 LOT # 42 LOT AREA: .481 Acre DESIGN FLOW: 360gpd L.T.A.R.:

Septic Tank	Exist.	(gal)	STB		Date				
Pump Tank		(gal)	PT		Date				
Pump Make			Model		Serial #				
# Nitrification Fields	1	# Lines	2 @ 150' eq	Linear Ft:	300'				
Trench Width	36"	Max. Trench Bottom Depth	Exist.	Gravel Depth	12"				

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

System Description: Existing Gravity Conventional

Repair System Description: Exempt

Maintenance Agreement Required: ☐ YES ☒ NO

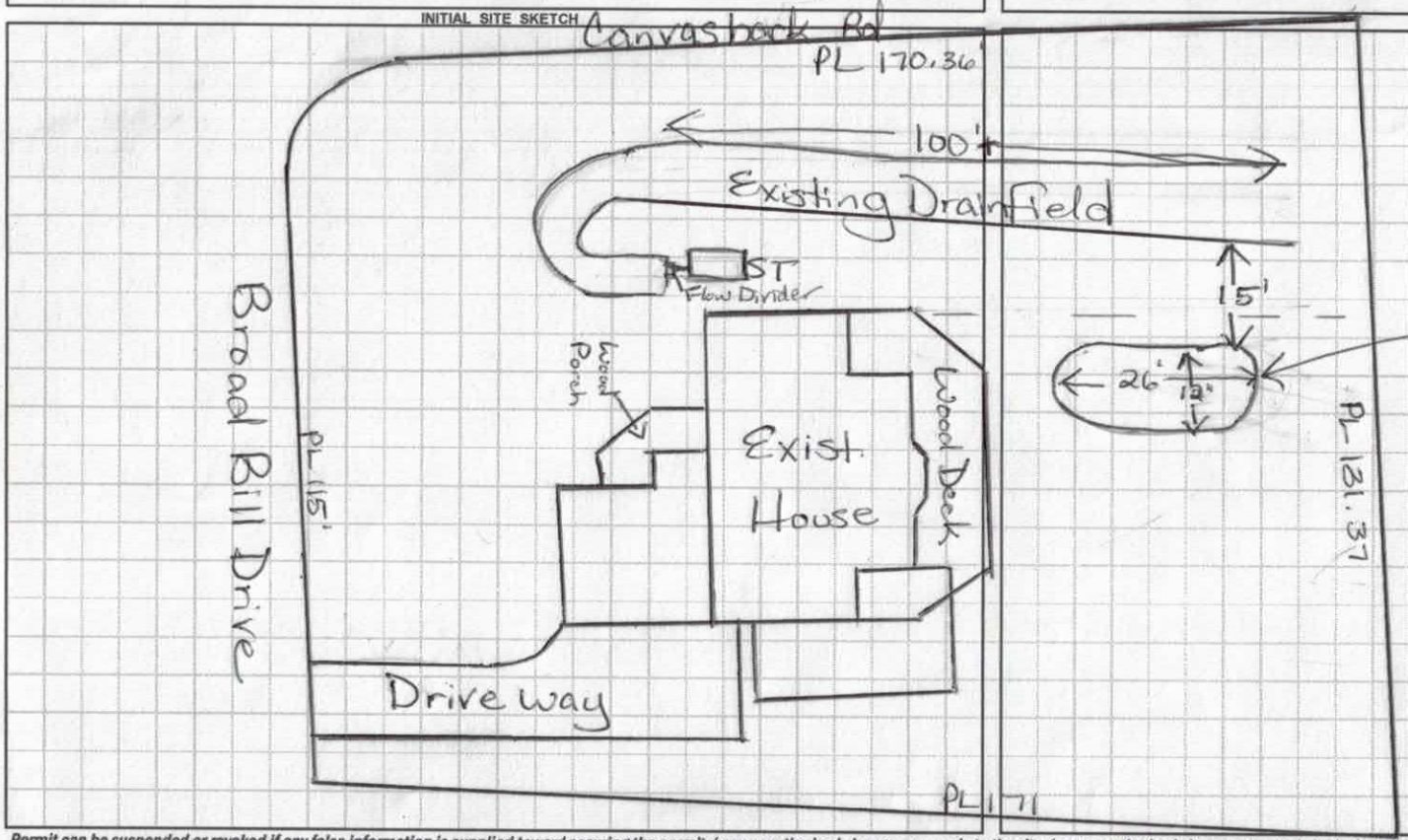
☒ GRAVITY ☐ PRESSURE

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

Water Supply: ☐ Private ☐ Public ☐ Community

Comments / Conditions: Must keep pool "cut" at least 15ft from Septic System

INITIAL SITE SKETCH



AS BUILT SKETCH

Scale 1:30

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: 6-10-16 Installed by:

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

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: RS Date: 6/6/16

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

RECEIVED APR 2 1 2016

ENTERED
DEBBIE W.

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM* Paid $250.00 # 218203

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:
Place an (X) beside whichever is submitted if applicable
( ) Survey Plat, scaled no more than 1 inch = 60 feet
( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information:

Applicant Name: Finola Johnson **Address:** 105 Broadbill Drive, Mooresville **Phone:** 704-360-7041

Owner Name: Paul + Finola Johnson **Address:** 105 Broadbill Drive, Mooresville 28117 **Phone:** 704-360-7041

Property Information:

Street Address: 105 Broadbill Drive, Mooresville NC 28117

Subdivision Name: Woodlands Hill **Section/Phase:** 1a **Lot Number:** 42

Driving Directions: turn left off Brawley School Rd. on to Canvasback Rd. ~~Turn~~ Take 3rd left after the barn onto Broadbill Drive. House is on the corner, on left.

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

( ) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 5
(X) 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:
Maximum Number of Employee:
Maximum Number of Seats/Beds/Other:

Water Supply:

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

Desired Septic System Type: ***(you may rank in order of preference)***
( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other:

X Year existing system installed:

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

04/14/16
DATE

216A12

IREDELL COUNTY HEALTH DEPARTMENT

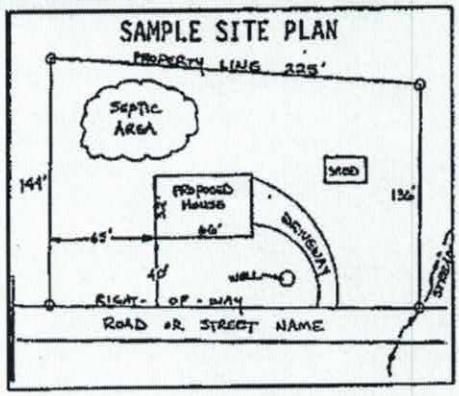
ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *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
( ) Front and side setbacks from property line
( ) Preferred driveway location and well location
( ) Area you prefer your septic system to be placed
( ) North arrow, or other sufficient indicator of direction

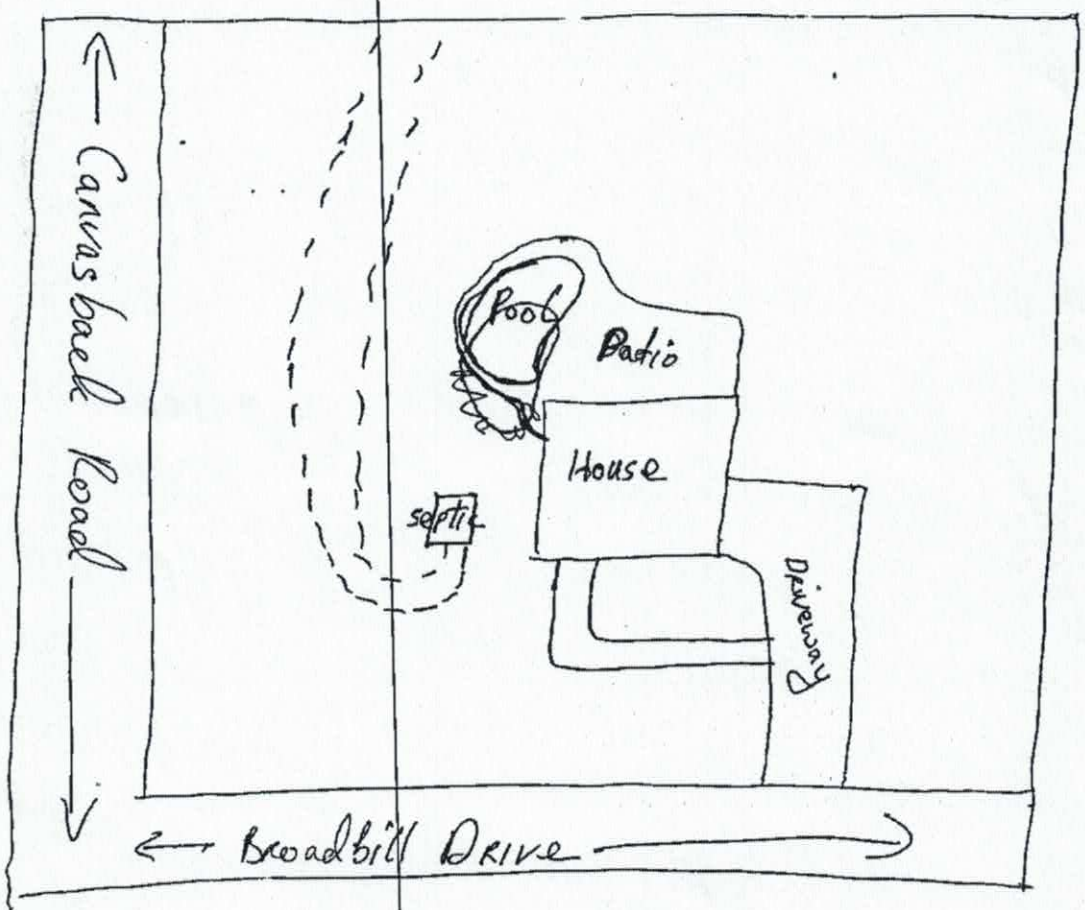


Circle N/A on the following if appropriate:

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

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

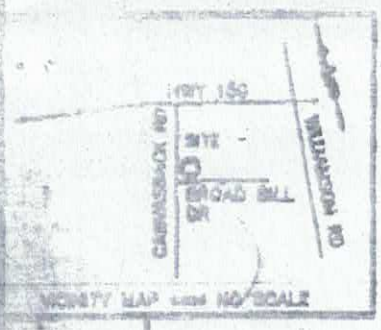


Signature: _____
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

04/14/16
DATE

...my hand and seal on the 12 day of APRIL A.D. 19 84

WILLIAM M. ALLEN
REGIS
SEA
L-349
LAND SURV
WILLIAM M.





S 78°02'40" E 131.37'

E.I.P. ON LINE 0.35'

E.I.P.

S.R.F.

LOT 42
0.46 ACRES

N 13°27'02" E 170.36'

SIDE SETBACK LINE

FLAT

32.1'
WOOD DECK
18.6'
11.5'
7.0'
9.6'
2.8'
10.0'
10.8'
10.0'
8.0'
1 1/2 STORY FRAME
COMP ROOF
23.6'
26.6'
42.5'
WOOD PORCH
11.5'
8.2'
23.6'
22.1'
40' BLDG LINE

CANVASBACK ROAD
(PAVED) 60' R/W

50.00'

R/W

LOT 43
S.R. REAL ESTATE
P.../506

S 78°56'40" W
(BASE BEARING)

extend slab

R/W

E.I.P.

N 76°06'20" W 100.00'

(TIE ONLY)
S 62°18'45" W
41.13'

E.I.P.

POWER

R=398.59'
AL= 15.00'
CL=15.00'
CB= N 78°18'33" W

BROAD BILL DRIVE
(PAVED) 60' R/W

60.00'

R/W

NOTES
1) THIS PROPERTY MAY BE SUBJECT TO RIGHTS OF WAY OF RECORD.
2) ACREAGE COMPUTED BY THE

PHYSICAL SURVEY

LEGEND
P.P. = POWER POLE
= OVER POWER TRANS.
E.I.P. = EXISTING IRON REBAR
I.P.S. = IRON REBAR SET
R/W = RIGHT-OF-WAY

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 4636 [redacted] 704 664 5281

IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 19940 DATE 12/22/94 TAX MAP NO. 26-19-A-42 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR Robert DeLonis PHONE: Business _____ Home 664-2948

ADDRESS 105 Broadbill Dr. Mooresville NC 28115

LOCATION 1100 TL on Conrad Lake TL Broadbill (Woodland Hills entrance) 1st house on L

SUBDIVISION Woodland Hills BLOCK / SECTION D LOT B 42 LOT AREA ~.7Ac SITE CLASS. P DESIGN FLOW _____ L.T.A.R. _____

Septic Tank: 1250 Gallons; STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields ___ Square Feet 900 Linear Feet 300

No Lines 2 Trench Width 36" Max Trench Bottom Depth _____ Gravel Depth _____

☐ New System ☐ Repair System Type: I, (II), III, IV, V, VI

System Description: Existing System

Repair System Description: _____

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2.5

☐ Business No. Employees ___

☐ Other _____

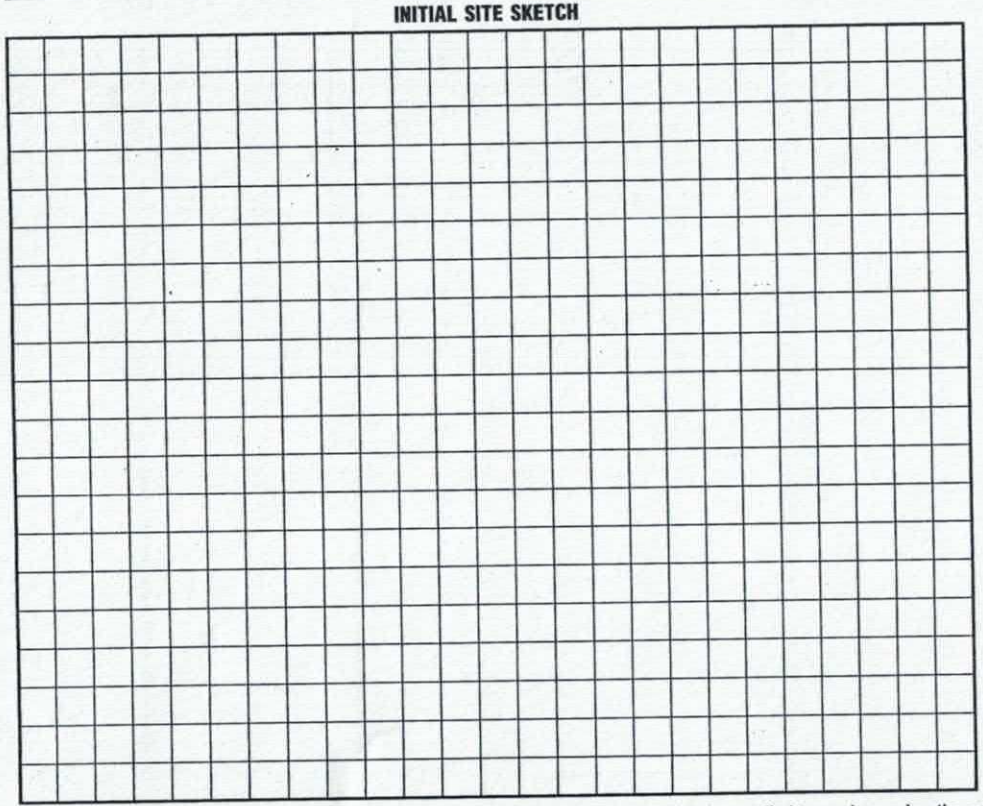
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply:
☐ Individual
☑ Community
☐ Public

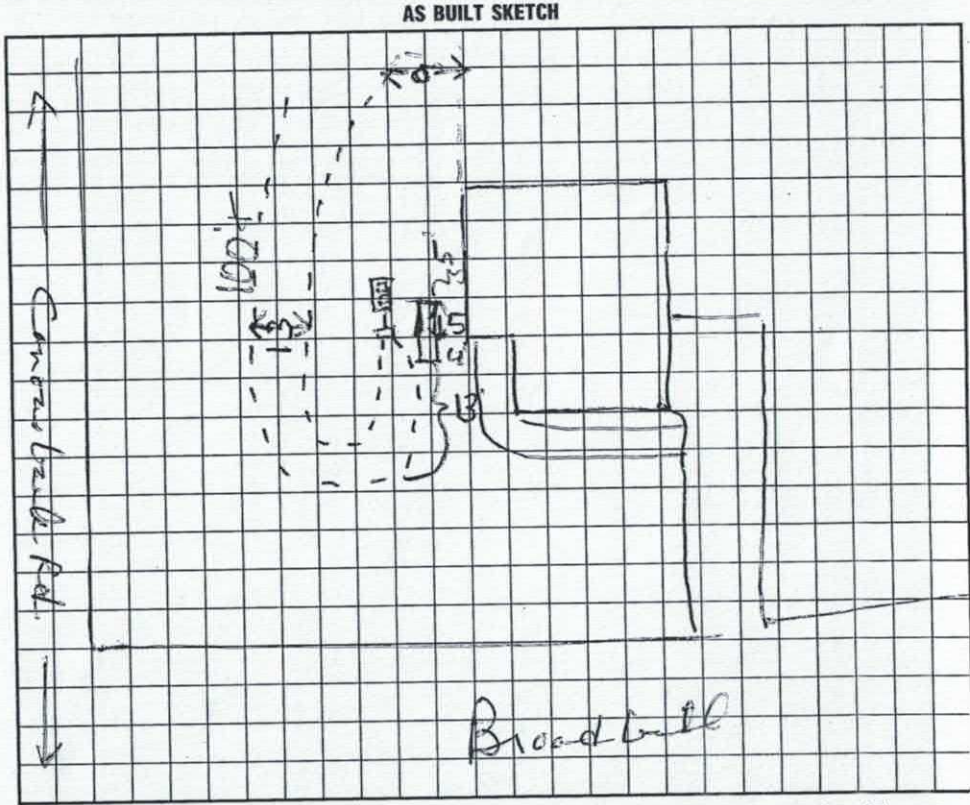
Comments:

Comments: Existing System - Not functioning under measured pressure

INITIAL SITE SKETCH



AS BUILT SKETCH



I understand that this 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. Improvement Permit is valid for 60 months from date of issuance.

Signed: _____

Improvement Permit by: _____ date _____

Existing System Inspection by: Wesley Sparks R.S. date 12/22/94

Installed by: _____

Certificate of Completion by: _____ date _____

Operation Permit by: _____ date _____

HEALTH DEPT. COPY: WHITE INSPECTION COPY (FINAL): GREEN OWNER COPY (FINAL): YELLOW INSPECTION COPY (INITIAL): PINK OWNER COPY (INITIAL): GOLD

IREDELL COUNTY

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

APPLICATION NUMBER
218203
Issue Date: 04/21/2016

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4636859523.000	105 BROADBILL DRIVE, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: JOHNSON PAUL JAMES+FINOLA	Applicant: JOHNSON PAUL JAMES+FIN
Address: 105 BROADBILL DR MOORESVILLE, NC 28117	Address: 105 BROADBILL DRIVE MOORESVILLE, NC 28117
Phone:	Phone:

Use Requested	Zone Code
INGROUND POOL	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.481		10.00	25.00	10.00	CACL	X

Remarks:

Pools shall be located to comply with minimum setbacks requirements for accessory buildings and structures of the district in which located. Pools which are not an integral part of the principal building shall be located at least the minimum distance from the principal building necessary to comply with N. C. Building Code requirements. Pools shall be protected by a fence of equal enclosure, a minimum of four feet in height, and equipped with self-closing and positive self-latching gate to provide with hardware for permanent locking. Fencing Is NOT required for above ground pools if they are at least four (4) in height, the ladder is removed, or when NOT in use have a gate to the ladder as described above.

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	66364	TOTAL FEES:	$ 77.25