BLDR-2023-36725

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625

PERMIT # OSWP-2023-36826

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

PIN # 4637-01-4160

APPLICANT / OWNER: Bacon Development APPLICANT ADDRESS: 109 Magnolia Park Drive Mooresville NC 28117

SITE ADDRESS: 118 DIRECT DR, MOORESVILLE, NC 28117 PHONE: 423-782-7633 ALT. PHONE:

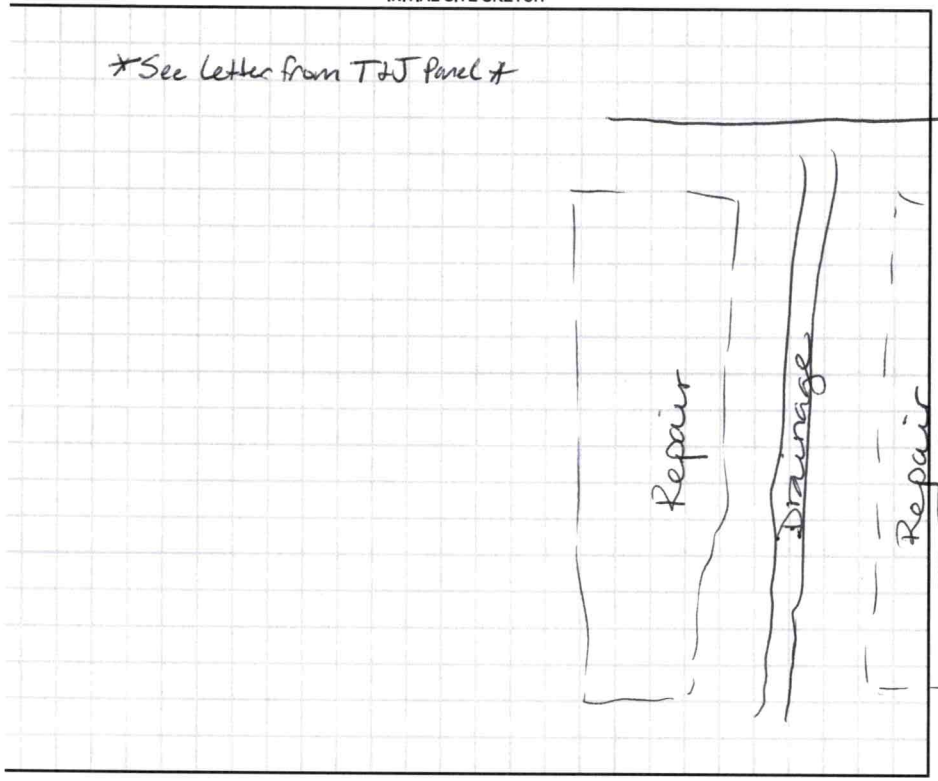
SITE DIRECTIONS: SAP CONTROLLED: YES ☐ NO ☑

SUBDIVISION: Lakeview Haven SECTION: LOT #: 3 LOT AREA: 0.69 DESIGN FLOW: 480 L.T.A.R.: 0.25

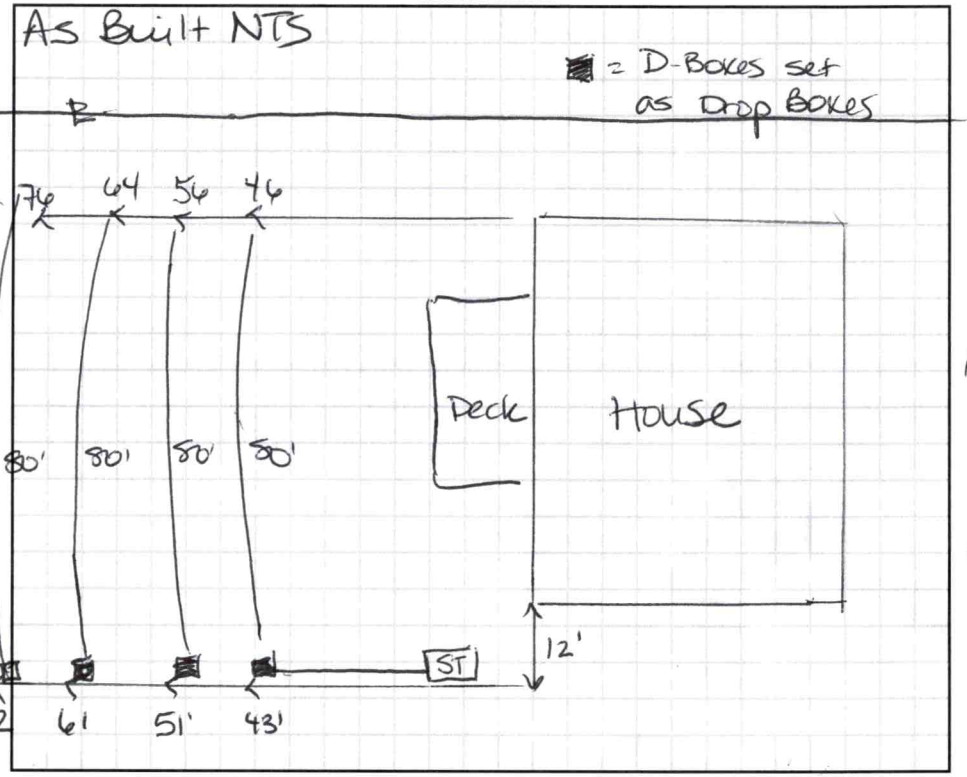
Septic Tank: 1000 (gal)	STB: 7600	Date:	☒ New System ☐ Repair ☐ Expansion	System Type: III	☑ Residence	No. Bedrooms: 4	Water Supply: New Well
Pump Tank: (gal)	PT:	Date:	System Description: Gravity-Serial fed PPBPS 50% reduction-vertical		☐ Business	No. Persons: 8	
Pump Make:	Model:	Serial #:	Repair System Description: PPBPS 50% reduction-vertical		☐ Other	No. Employees:	
Nitrification Fields: 1	# Lines: 4	Linear Ft.: 320	Maintenance Agreement Required: ☐ YES ☑ NO		☐ Slab	☑ Crawl Space	
Trench Width: 24	Trench Bottom Depth (Low side): 31		Gravel Depth:	☑ GRAVITY ☐ PRESSURE	☐ Basement w/ Plumbing	☐ Basement w/o Plumbing	

Comments / Conditions: This Improvement Permit is issued pursuant to G.S. 130A-335 (a2) and (a3) using the signed and sealed LSS/LG evaluation(s) attached here. This Construction Authorization is issued pursuant to G.S. 130A-335(a2) and (a5) using the signed and sealed plans or evaluations attached here.

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: Installed By: JE Williams Grading

IMPROVEMENT PERMIT by: Benjamin A Bottin Date: 9/27/2023 OPERATION PERMIT by: DWebber Date: 1/23/24

AUTHORIZATION TO CONSTRUCT by: Ben Botkins Date: 9/27/23 Existing System Inspected By: Date:

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

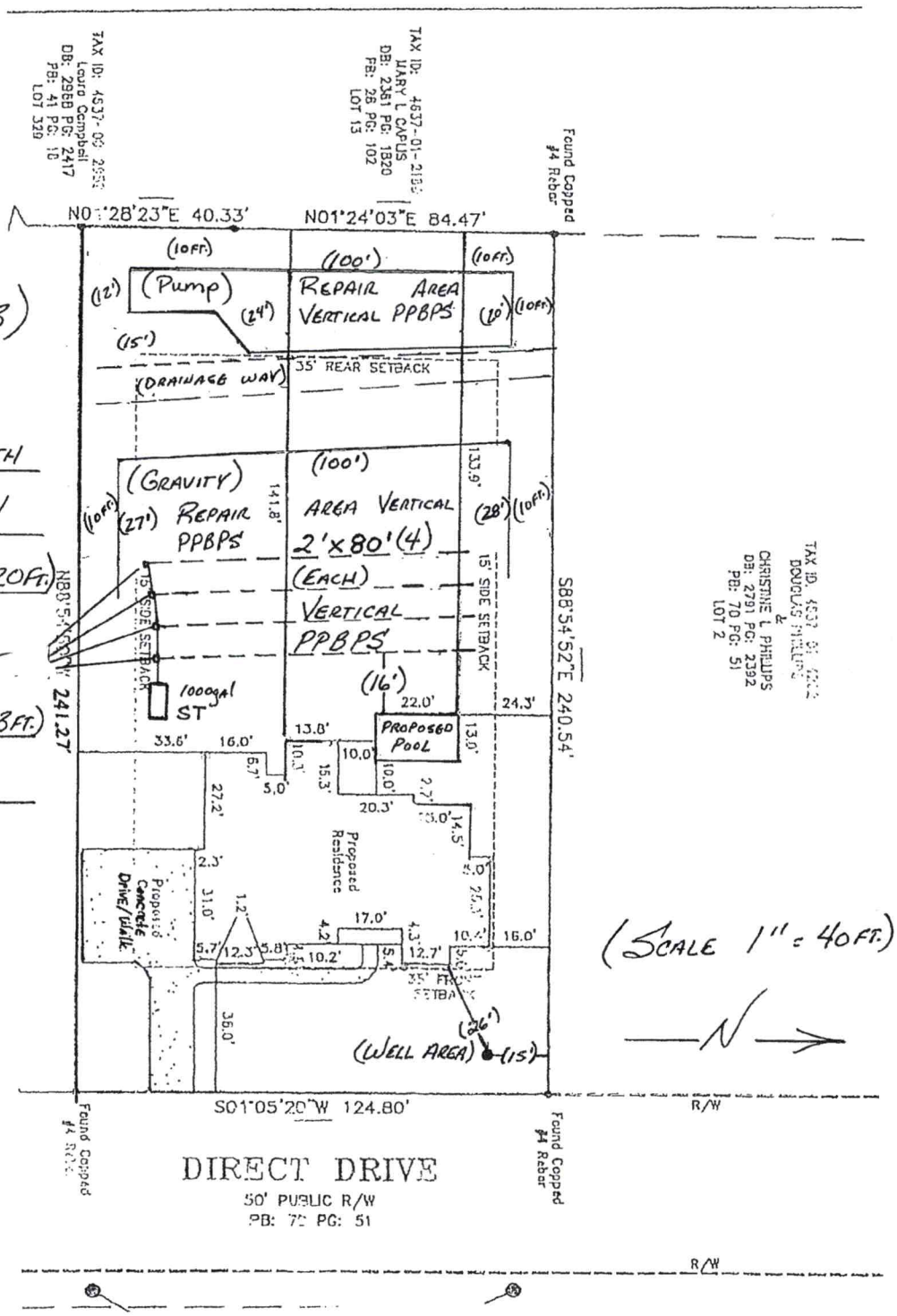
(LAKEVIEW HAVEN LOT #3)

*NIT. LINES: TRENCH DEPTH 31 INCHES MAX. INITIAL AND REPAIR AREAS (320Ft.)

See T+J Letter

*(1000gal) SEPTIC TANK (13Ft.) OFF CORNER OF HOUSE

(LTAR .25)



(SCALE 1" = 40Ft.)

N

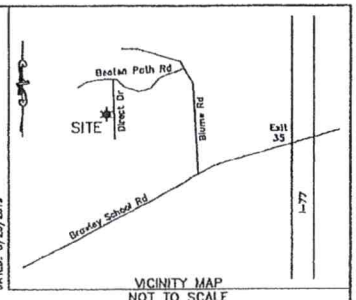
I, JIMMY N. FAIRES, CERTIFY THAT THIS PLAT WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION; DEED DESCRIPTION AND/OR MAP BOOK SEE, PAGE NOTE #2; THAT THE BOUNDARIES NOT SURVEYED ARE CLEARLY INDICATED AS DRAWN FROM INFORMATION FOUND IN BOOK N/A, PAGE N/A; THAT THE RATIO OF PRECISION AS CALCULATED IS 1:10,000+; THAT THIS PLAT WAS PREPARED IN ACCORDANCE WITH THE STANDARDS OF PRACTICE FOR LAND SURVEYING IN NORTH CAROLINA (21 NCAC 56.1600). WITNESS MY ORIGINAL SIGNATURE, REGISTRATION NUMBER AND SEAL THIS _____ DAY OF _____, 2023.

PRELIMINARY

JIMMY N. FAIRES, PLS
LICENSE NUMBER: L-4311

PRELIMINARY PLAN
NOT FOR RECORDATION
CONVEYANCES
AND/OR SALES

PLAT BOOK: 70
PAGE: 51
DATED: 6/25/2019



VICINITY MAP
NOT TO SCALE

TAX ID: 4637-01-4262
DOUGLAS PHILLIPS
&
CHRISTINE L PHILLIPS
DB: 2791 PG: 2392
PB: 70 PG: 51
LOT 2

TAX ID: 4637-01-2189
MARY L CAPUS
DB: 2361 PG: 1820
PB: 28 PG: 102
LOT 13

TAX ID: 4637-00-2952
Laura Campbell
DB: 2958 PG: 2417
PB: 41 PG: 18
LOT 329

TAX ID: 4637-00-4957
Jonathan Dubbault &
Andrea Dubbault
DB: 2769 PG: 1083
PB: 70 PG: 51
LOT 4

TAX ID: 4637-00-6921
BANDG PROPERTIES LLC
DB: 2579 PG: 1881
PB: 70 PG: 51
OOS

Found Copped #4 Rebar

S88°54'52"E 240.54'

N88°54'50"W 241.27'

N01°24'03"E 84.47'

N01°28'23"E 40.33'

S01°28'23"W 126.00'

S01°05'20"W 124.80'

S01°05'20"W 126.00'

LOT 3
30065 SF
0.690 ACRES

15' SIDE SETBACK

35' REAR SETBACK

35' FRONT SETBACK

133.9'

141.8'

Proposed Pool

Proposed Screened Porch

Proposed Residence

Proposed Concrete Drive/Walk

Concrete Monument Found

DIRECT DRIVE
50' PUBLIC R/W
PB: 70 PG: 51

R/W

36.0'

GRAPHIC SCALE

40 0 20 40

(IN FEET)
1 inch = 40 feet

SURVEYOR NOTES

1) ALL DIMENSIONS SHOWN ARE IN US SURVEY FEET AND DECIMALS THEREOF AND ARE HORIZONTAL GROUND DISTANCES UNLESS OTHERWISE INDICATED. AREA BY COORDINATE METHOD.
2) THIS SURVEY IS BASED ON DEED BOOK 2886 PAGE 2054 AND PLAT BOOK 70 PAGE 51 AS RECORDED AT THE IREDELL COUNTY REGISTER OF DEEDS.
3) THIS SURVEY WAS PREPARED WITHOUT THE BENEFIT OF A TITLE EXAMINATION BY AN ATTORNEY. THE PROPERTY MAY BE SUBJECT TO RECORDED OR UNRECORDED RIGHTS-OF-WAY, EASEMENTS, RESTRICTIVE COVENANTS OR CONDITIONS NOT OBSERVED OR SHOWN HEREON.
4) SUBJECT PARCEL LIES WITHIN A SUBDIVISION PREVIOUSLY TIED TO NC GRID.
5) BASIS OF BEARINGS: PLAT BOOK: 70, PAGE: 51 -- DATED: JUNE 25, 2019.
6) ALL CORNERS "FOUND" or "SET" ARE FLUSH WITH THE GROUND, UNLESS OTHERWISE NOTED. POINTS NOT LABELED "FOUND" OR "SET" ARE COMPUTED POINTS.
7) THE LOCATION OF UTILITIES AS SHOWN HEREON, WHETHER PUBLIC OR PRIVATE, ARE BASED ON THE LOCATION OF VISIBLE ABOVE GROUND APPURTENANCES ONLY. OTHER UTILITIES WHICH WERE NOT OBSERVED AND NOT SHOWN HEREON MAY EXIST. IT IS THE OWNERS/TENANTS RESPONSIBILITY TO VERIFY THE LOCATION PRIOR TO COMMENCEMENT OF ANY CONSTRUCTION. GEOMATIC CONCEPTS, PLLC CANNOT ASSUME RESPONSIBILITY FOR MISIDENTIFICATION OR OMISSION OF UNDERGROUND UTILITIES.
8) THIS SURVEY IS OF AN EXISTING PARCEL OR PARCELS OF LAND AND DOES NOT CREATE A NEW STREET OR CHANGE AN EXISTING STREET.
9) THIS PROPERTY LIES IN FLOOD ZONE "X" AS SHOWN ON FEDERAL EMERGENCY MANAGEMENT AGENCY (FEMA) FLOOD INSURANCE RATE MAP (FIRM) COMMUNITY PANEL 3710463700J, WITH AN EFFECTIVE DATE OF MARCH 18, 2008.

PLOT PLAN

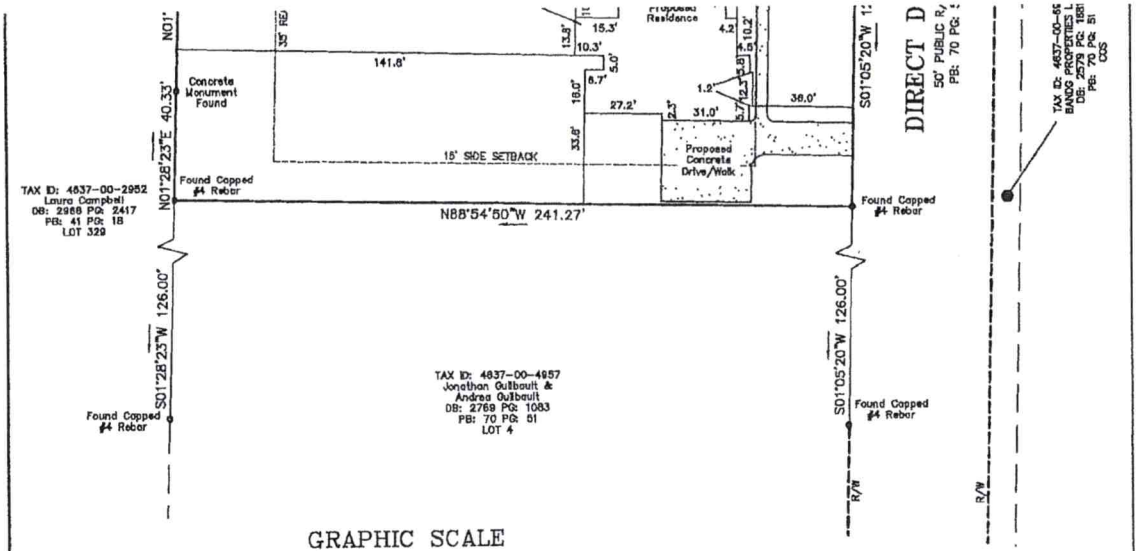
LOT 3 - LAKEVIEW HAVEN
PLAT BOOK: 70 PAGE: 51

118 DIRECT DRIVE
DAVIDSON TOWNSHIP, IREDELL COUNTY, NC

Owner:	Prepared For:
WILLIAM M. & LINDSEY B. ANDREOTTA 4425 TURNBERRY PLACE NICEVILLE, FL 32578	BANDG PROPERTIES LLC 124-C FERNWOOD LANE MOORESVILLE, NC 28117

GEOMATIC CONCEPTS, PLLC
NC LICENSE #: P-1031
470 NORTH BROAD STREET, SUITE A, MOORESVILLE, NC 28115
PHONE: 704-664-1994 EMAIL: JIMMY.FAIRES@GEOMATICCONCEPTS.COM

Drawn By: JGB	Checked By: JNF	Scale: 1" = 40'	Project No.: 23004
Tax Parcel: 4637-01-4160			Sheet No.: 1 of 1
Date: August 14, 2023			
File: 23004-Lot-3-Lakeview-Haven			



GRAPHIC SCALE

40 0 20 40

(IN FEET)

1 inch = 40 feet

SURVEYOR NOTES

1) ALL DIMENSIONS SHOWN ARE IN US SURVEY FEET AND DECIMALS THEREOF AND ARE HORIZONTAL GROUND DISTANCES UNLESS OTHERWISE INDICATED. AREA BY COORDINATE METHOD.
2) THIS SURVEY IS BASED ON DEED BOOK 2986 PAGE 2034 AND PLAT BOOK 70 PAGE 51 AS RECORDED AT THE IREDELL COUNTY REGISTER OF DEEDS.
3) THIS SURVEY WAS PREPARED WITHOUT THE BENEFIT OF A TITLE EXAMINATION BY AN ATTORNEY. THE PROPERTY MAY BE SUBJECT TO RECORDED OR UNRECORDED RIGHTS-OF-WAY, EASEMENTS, RESTRICTIVE COVENANTS OR CONDITIONS NOT OBSERVED OR SHOWN HEREON.
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9) THIS PROPERTY LIES IN FLOOD ZONE "X" AS SHOWN ON FEDERAL EMERGENCY MANAGEMENT AGENCY (FEMA) FLOOD INSURANCE RATE MAP (FIRM) COMMUNITY PANEL 3710463700J, WITH AN EFFECTIVE DATE OF MARCH 18, 2008.

PLOT PLAN

LOT 3 - LAKEVIEW HAVEN
PLAT BOOK: 70 PAGE: 51

118 DIRECT DRIVE
DAVIDSON TOWNSHIP, IREDELL COUNTY, NC

Owner:	Prepared For:
WILLIAM M. & LINDSEY B. ANDREOTTA 4425 TURNBERRY PLACE NICEVILLE, FL 32578	BANDG PROPERTIES LLC 124-C FERNWOOD LANE MOORESVILLE, NC 28117

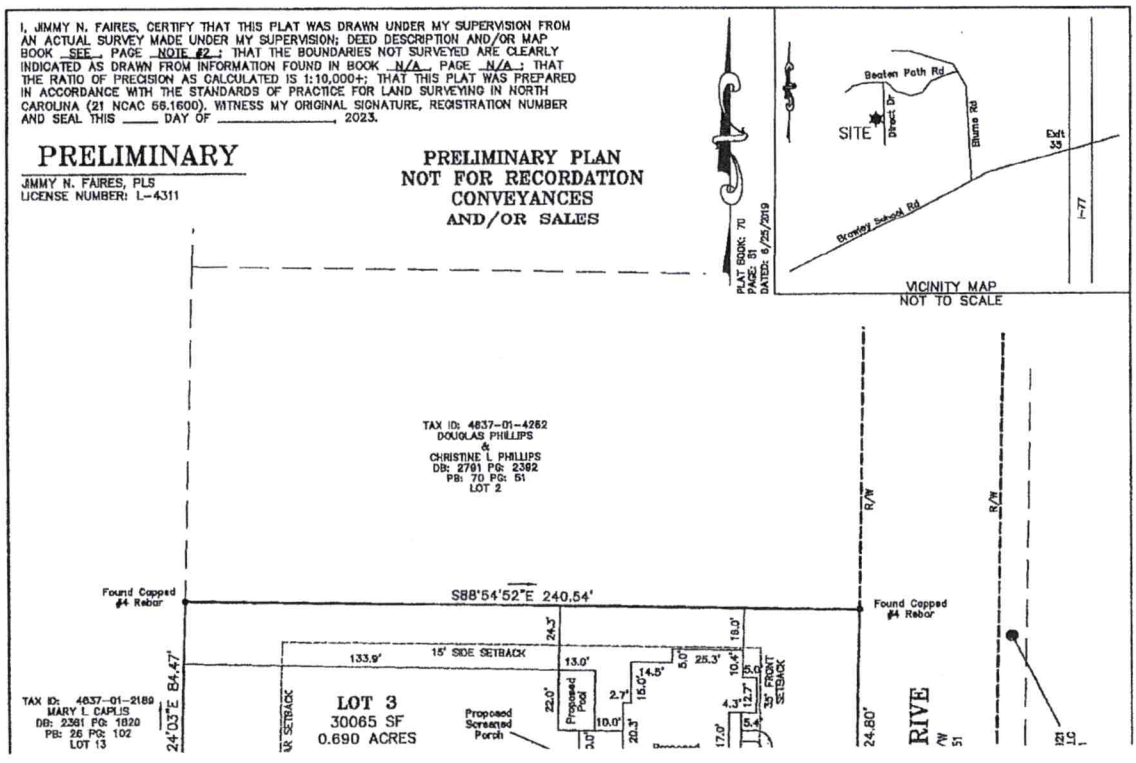
GEOMATIC CONCEPTS, PLLC
NC LICENSE #: P-1031
470 NORTH BROAD STREET, SUITE A, MOORESVILLE, NC 28115
PHONE: 704-664-1994 EMAIL: JIMMY.FAIRES@GEOMATICCONCEPTS.COM

Drawn By: JGB	Checked By: JNF	Scale: 1" = 40'	Project No.: 23004
Tax Parcel: 4837-01-4160			
Date: August 14, 2023			Sheet No.: 1 of 1
File: 23004-Lot-3-Lakeview-Haven			

From: Chad Bacon chad@bacondevelopment.com
Date: Aug 31, 2023 at 9:01:35 AM
To: garyleysoils@icloud.com, Jeff Link jl82663@gmail.com
Cc: Jim Watson jim@bacondevelopment.com

Lot 3 layout.
120 Direct Dr.

Chad Bacon
134 Autry Ave.
Mooresville, NC 28117
Cell = 423-782-7633
Office = 704-360-8131
chad@bacondevelopment.com



Sheet ____ of ____
PROPERTY ID #: 4637-01-4160
COUNTY: IREDELL

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

OWNER: CHAD BACON (BACON CUSTOM HOMES) APPLICATION DATE 9/14/21

ADDRESS: 118 DIRECT DRIVE MOORESVILLE N.C. DATE EVALUATED: 5/30/23

PROPOSED FACILITY: 4BR/HOUSE PROPOSED DESIGN FLOW (.1949): 480 PROPERTY SIZE: .69 ACRES

LOCATION OF SITE: 118 DIRECT DRIVE MOORESVILLE N.C. LOT #3 LAKEVIEW HAVEN PROPERTY RECORDED: ____

WATER SUPPLY: . Private . Public . (Well) . Spring . Other ____

EVALUATION METHOD: . Auger Boring (Pit) TYPE OF WASTEWATER: . (Sewage) . Industrial Process . Mixed

	1	2	3	4						
Landscape Position (1940)	L	L	L	L						
Slpoe%	25%	25%	25%	25%						
H 1 Depth (1943)	0-16	0-12	0-10	0-12						
H1 texture 1941	cl	cl	cl	cl						
H1 Structure 1941	Blky	Blky	Blky	Blky						
H1 Consistance 1941	FRSP	FRSP	FRSP	FRSP						
H1 Mineralogy 1941	SEXP	SEXP	SEXP	SEXP						
H 2 Depth (1943)	16-54	12-54	10-44	12-50						
H2 texture 1941	C	C	C	C						
H2 Structure 1941	Blky	Blky	Blky	Blky						
H2 Consistance 1941	FSP	FSP	FISP	FSP						
H2 Mineralogy 1941	SEXP	SEXP	SEXP	SEXP						
H 3 Depth (1943)			44-56	50-58						
H3 texture 1941			C/BC	C/BC						
H3 Structure 1941			Blky	Blky						
H3 Consistance 1941			FISP	FSP						
H3 Mineralogy 1941			SEXP	SEXP						
H 4 Depth (1943)										
H4 texture 1941										
H4 Structure 1941										
H4 Consistance 1941										
H4 Mineralogy 1941										
LTAR	.25	.25	.25	.25						

Description	Initial System	Repair	Other Factors 1946
System Type	VERTICAL PPBPS	VERTICAL PPBPS	Site Classification PS
LTAR	.25	.25	

LICENSED SOIL SCIENTIST GARY L. EASTER 1073 STATE OF NORTH CAROLINA

Evaluated by GENE YOUNG GARY EASTER JEFF LINK 1073

NCDHHS

Permit #: OSWP-2023-36826

This Section for Local Health Department Use Only

Initial submittal received: 9/19/2023 (*Date*) by BB (*Initials*)

G.S. 130A-335(a3) states the following:

When an applicant for an Improvement Permit submits to a local health department an Improvement Permit application, the permit fee charged by the local health department, the common form developed by the Department, and a soil evaluation pursuant to subsection (a2) of this section, the local health department shall, within five business days of receiving the application, conduct a completeness review of the submittal. A determination of completeness means that the Improvement Permit includes all of the required components. If the local health department determines that the Improvement Permit is incomplete, the local health department shall notify the applicant of the components needed to complete the Improvement Permit. The applicant may submit additional information to the local health department to cure the deficiencies in the Improvement Permit. The local health department shall make a final determination as to whether the Improvement Permit is complete within five business days after the local health department receives the additional information from the applicant. If the local health department fails to act within any period set out in this subsection, the applicant may treat the failure to act as a determination of completeness. The Department shall develop a common form for use as the Improvement Permit.

The review for completeness of this Improvement Permit was conducted in accordance with G.S. 130A-335(a3). This Improvement Permit is determined to be:

☐ Incomplete (If box is checked, information in this section is required.)

The following items are missing:

_____

_____

Copies of this were sent to the LSS and the Applicant on _____ (*Date*)

State Authorized Agent: _____ Date: _____

☑ Complete

State Authorized Agent: Benjamin A Botkins Date: 9/27/2023

This Improvement Permit is issued pursuant to G.S. 130A-335 (a2) and (a3) using the signed and sealed LSS/LG evaluation(s) attached here. The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This permit is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.

The Department, the Department's authorized agents, and the local health departments shall be discharged and released from any liabilities, duties, and responsibilities imposed by statute or in common law from any claim arising out of or attributed to evaluations, submittals, or actions from a licensed soil scientist or licensed geologist pursuant to GS 130A-335(a2).

Improvement Permit Expiration Date: 9/27/2028

See attached site sketch

Permit #: OSWP 2023-36826

This Section for Local Health Department Use Only

Initial submittal received: 9/19/2023 (Date) by BB (Initials)

G.S. 130A-335(a5) states the following:

When an applicant for a Construction Authorization, or an Improvement Permit and Construction Authorization together, submits a Construction Authorization, or an Improvement Permit and Construction Authorization application together, the permit fee charged by the local health department, the common form developed by the Department, and any necessary signed and sealed plans or evaluations conducted by a person licensed pursuant to Chapter 89C of the General Statutes as a licensed engineer or a person certified pursuant to Article 5 of Chapter 90A of the General Statutes as an Authorized On-Site Wastewater Evaluator, the local health department shall, within five business days of receiving the application, conduct a completeness review of the submittal. A determination of completeness means that the Construction Authorization or Improvement Permit and Construction Authorization includes all of the required components. If the local health department determines that the Construction Authorization or Improvement Permit and Construction Authorization is incomplete, the local health department shall notify the applicant of the components needed to complete the Construction Authorization or Improvement Permit and Construction Authorization. The applicant may submit additional information to the local health department to cure the deficiencies in the Construction Authorization or Improvement Permit and Construction Authorization. The local health department shall make a final determination as to whether the Construction Authorization or Improvement Permit and Construction Authorization is complete within five business days after the local health department receives the additional information from the applicant. If the local health department fails to act within any period set out in this subsection, the applicant may treat the failure to act as a determination of completeness. The applicant may apply for the building permit for the project upon the decision of completeness of the Construction Authorization or Improvement Permit and Construction Authorization by the local health department or if the local health department fails to act within five business days. The Authorized On-Site Wastewater Evaluator or licensed engineer submitting the evaluation pursuant to this subsection may request that the local health department revoke or suspend the Construction Authorization or Improvement Permit and Construction Authorization for cause. Upon written request of the Authorized On-Site Wastewater Evaluator or licensed engineer, the local health department shall suspend or revoke the Construction Authorization or Improvement Permit and Construction Authorization pursuant to G.S. 130A-23. The Department shall develop a common form for use as the Construction Authorization.

The review for completeness of this Construction Authorization was conducted in accordance with G.S. 130A-335(a5). This Construction Authorization is determined to be:

☐ Incomplete (If box is checked, information in this section is required.)

The following items are missing: _____

_____

Copies of this were sent to the AOWE/PE and the Applicant on _____ (Date)

State Authorized Agent: _____ Date: _____

☑ Complete

State Authorized Agent: Benjamin A. Bates Date of Issuance: 9/27/2023

This Construction Authorization is issued pursuant to G.S. 130A-335(a2) and (a5) using the signed and sealed plans or evaluations attached here. This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be affected by a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.

The Department, the Department's authorized agents, and the local health departments shall be discharged and released from any liabilities, duties, and responsibilities imposed by statute or in common law from any claim arising out of or attributed to plans, evaluations, preconstruction conference findings, submittals, or actions from a person licensed pursuant to Chapter 89C of the General Statutes as a licensed engineer or a person certified pursuant to Article 5 of Chapter 90A of the General Statutes as an Authorized On-Site Wastewater Evaluator in GS 130A-335(a2), (a5), and (a7). The Department, the Department's authorized agents, and the local health departments shall be responsible and bear liability for their actions and evaluations and other obligations under State law or rule, including the issuance of the operations permit pursuant to GS 130A-337.

Construction Authorization Expiration Date: 9/27/2028

See attached site sketch

Permit #: _____

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

ROY COOPER • Governor
KODY H. KINSLEY • Secretary
MARK BENTON • Deputy Secretary for Health
SUSAN KANSAGRA • Assistant Secretary for Public Health
Division of Public Health

Submittal Includes: ☑ (a2) Improvement Permit ☑ (a2) Construction Authorization ☐ Fee $_____

IMPROVEMENT PERMIT FOR G.S. 130A-335(a2)

County: Iredell
PIN/Lot Identifier: 4637-01-4160
Issued To: Chad Bacon Bacon Custom Homes
Property Location: 118 Direct Drive, Mooresville
Subdivision (if applicable) Lakeview Haven Lot #: 3 Block: _____ Section: _____
LSS Report Provided: Yes ☑ No ☐
If yes, name and license number of LSS: Gary L Easter 1073
New ☑ Expansion ☐ System Relocation ☐ Change of Use ☐
Proposed Structure: single family residence
Number of bedrooms: 4 Number of Occupants: 8 MAX Other: _____
Design Wastewater Strength: ☑ domestic ☐ high strength ☐ industrial process
Proposed Design Daily Flow: 480 GPD Proposed LTAR (Initial): .25 Proposed LTAR (Repair): .25
Proposed Wastewater System Type*: PPBPS 50% vertical (Initial) Pump Required: ☐ Yes ☑ No ☐ May be required
Proposed Wastewater System Type*: PPBS 50% vertical (Repair) Pump Required: ☑ Yes No ☐ May be required
Please include system classification for proposed wastewater system types in accordance with 15A NCAC 18A .1961 Table V(a)
Saprolite System (initial): ☐ Yes ☑ No Saprolite System (repair): ☐ Yes ☑ No
Fill System (Initial): ☐ Yes ☑ No If yes, specify: ☐ New ☐ Existing (when adding more than 6 inches of fill to system area provide a fill plan)
Fill System (repair): ☐ Yes ☑ No If yes, specify: ☐ New ☐ Existing (when adding more than 6 inches of fill to system area provide a fill plan)
Usable Soil Depth (Initial): 50" Usable Soil Depth (Repair): 50"
Max. Trench Depth (Initial)†: 31" Max. Trench Depth (Repair)†: 31" *† Measured on the downhill side of the trench*
Artificial Drainage Required: ☐ Yes ☑ No If yes, please specify details: _____
Type of Water Supply: ☑ Private well ☐ Public well ☐ Shared well ☐ Municipal Supply ☐ Spring ☐ Other: _____
Drainfield location meets requirements of Rule .1945: Yes ☑ No ☐ Drainfield location meets requirements of Rule .1950: Yes ☑ No ☐
Permit valid for: ☑ Five years [site plan submitted pursuant to GS 130A-334(13a)] ☐ No expiration [plat submitted pursuant to GS 130A-334(7a)]

Permit conditions: see attached installer information sheet

Licensed Soil Scientist Print Name: Gary L Easter 1073
Licensed Soil Scientist Signature: _____ Date: 9-7-2023

The LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2).

See attached site sketch

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES - DIVISION OF PUBLIC HEALTH

LOCATION: 5605 Six Forks Road, Building 3, Raleigh, NC 27609
MAILING ADDRESS: 1632 Mail Service Center, Raleigh, NC 27699-1632
www.ncdhhs.gov • TEL: 919-707-5854 • FAX: 919-845-3972

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

Permit #: _____

CONSTRUCTION AUTHORIZATION FOR G.S. 130A-335(a2)

County: Iredell

PIN/Lot Identifier: 4637-01-4160

Issued To: Chad Bacon Bacon Custom Homes

Property Location: 118 Direct Dr Mooresville

AOWE/PE Plans/Evaluations Provided: Yes ☑ No ☐ If yes, name and license number of AOWE/PE: Gary L Easter 10014E

Facility Type: single family residence

☑ New ☐ Expansion ☐ Repair ☐ System Relocation ☐ Change of Use

Basement? ☐ Yes ☑ No Basement Fixtures? ☐ Yes ☐ No

Type of Wastewater System* PPBPS 50% vertical (Initial) 50% PPBPS vertical (Repair)

**Please include system classification for proposed wastewater system types in accordance with 15A NCAC 18A .1961 Table V(a)*

Design Daily Flow: 480 GPD Wastewater Strength: ☑ domestic ☐ high strength ☐ industrial process

Session Law 2014-120 Section 53, Engineering Design Utilizing Low-flow Fixtures and Low-flow Technologies? ☐ Yes ☑ No
(if yes, please provide engineering documentation)

Installation Requirements/Conditions

Septic Tank Size: 1000 gallons Total Trench/Bed Length: 320 feet Trench/Bed Spacing: 2 feet on center

Trench/Bed Width: 24 inches LTAR: .125 gpd/ft²

Soil Cover: 9 inches Slope Corrected Maximum Trench/Bed Depth‡: 31" inches ‡ ***Measured on the downhill side of the trench***

Aggregate Depth: _____inches above pipe _____inches below pipe _____inches total

Pump Tank Size (if applicable): _____ gallons Requires more than 1 pump? ☐ Yes ☐ No

Pump Requirements: _____ ft. TDH vs. _____ GPM Grease Trap Size (if applicable): _____ gallons

Distribution Method: ☑ Serial ☐ D-Box or Parallel ☐ Pressure Manifold(s) ☐ LPP ☐ Other: _____

Artificial Drainage Required: Yes ☐ No ☑ If yes, please specify details: _____

Legal Agreements *(If the answer is "Yes" to any type of legal agreements, please attach a copy of the agreement.)*

Multi-party Agreement Required [.1937(h)]: ☐ Yes ☑ No

Easement, Right-of-Way, or Encroachment Agreement Required [.1938(j)]: ☐ Yes ☑ No

Declaration of Restrictive Covenants: ☐ Yes ☑ No

Pre-Construction Conference Required: Yes ☑ No ☐

Conditions: see Attached- installer information sheet

The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .1959 are incorporated by reference into this permit and shall be met. Systems shall be installed in accordance with the attached system layout.

AOWE/PE Print Name: Gary L Easter Expiration Date: 9-7-2028

AOWE/PE Signature: _____ Date: 9-7-2023

This AOWE/PE submittal is pursuant to and meets the requirements of G.S. 130A-335(a2) and (a5).

See attached site sketch

ON-SITE WASTEWATER EVALUATOR Certification Number 10014E

I understand that the documentation and fees, as required in G.S. 130A-335(a2), (a3), (a5), and (a6), attached to this application are to be used to issue an Improvement Permit and/or Construction Authorization pursuant to G.S. 130A-335(a2),(a3), and (a5). I understand that authorized county and state officials are granted right of entry to the property indicated on this application to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that if the information in the application for an Improvements Permit and/or Construction Authorization is falsified, changed, or the site is altered, then the Improvement Permit and Construction Authorization shall become invalid.

Applicant Signature: * _____ Date: 9/14/23

Owner's Signature: * _____ Date: 09/14/23

T & J Panels Inc.
269 Marble Rd, Statesville NC

When using parallel distribution via gravity flow, T&J Panels' best engineering practice is to utilize lines up to 67 feet from the point of introduction. This practice does not apply when serial distribution is utilized as the system itself acts as one line that receives the entire volume of effluent.

Please feel free to contact our office with any questions or concerns.
704-924-8600

T&J Panels Inc.