# ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # AP 312499

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

PIN # 4637-01-5519

APPLICANT/OWNER: Bacon Development | APPLICANT ADDRESS: 200 Beaten Path Rd Mooresville NC 28117

SITE ADDRESS: 200 Beaten Path Rd Mooresville NC 28117 | PHONE: 423-782-7633 | ALT. PHONE

SITE DIRECTIONS: Brawley School Rd to R on Blume Rd, L on Beaten Path Rd, Lot on R | SAP CONTROLLED: [X] YES [ ] NO

SUBDIVISION: | SECTION: — | LOT # — | LOT AREA: 0.563 acres | DESIGN FLOW: Existing | L.T.A.R.: Existing

| | | | | | |
|---|---|---|---|---|---|
| Septic Tank | (gal) | STE | Date | | |
| Pump Tank | (gal) | PT | Date | | |
| Pump Make | | Model | Serial # | | |
| # Nitrification Fields | | # Lines | Linear Ft: | | |
| Trench Width | | Trench Bottom Depth(Low side) | | Gravel Depth | Existing |

EXISTING

[ ] New System [ ] Repair [ ] Expansion System Type: I II III IV V VI

System Description: PM PPBPS

Repair System Description: Repair exempt

Maintenance Agreement Required: [ ] YES [X] NO

[ ] GRAVITY [X] PRESSURE

[X] Residence | No. Bedrooms 3 | Water Supply

[ ] Business | No. Persons 6 | [X] Private

[ ] Other | No. Employees | [ ] Public

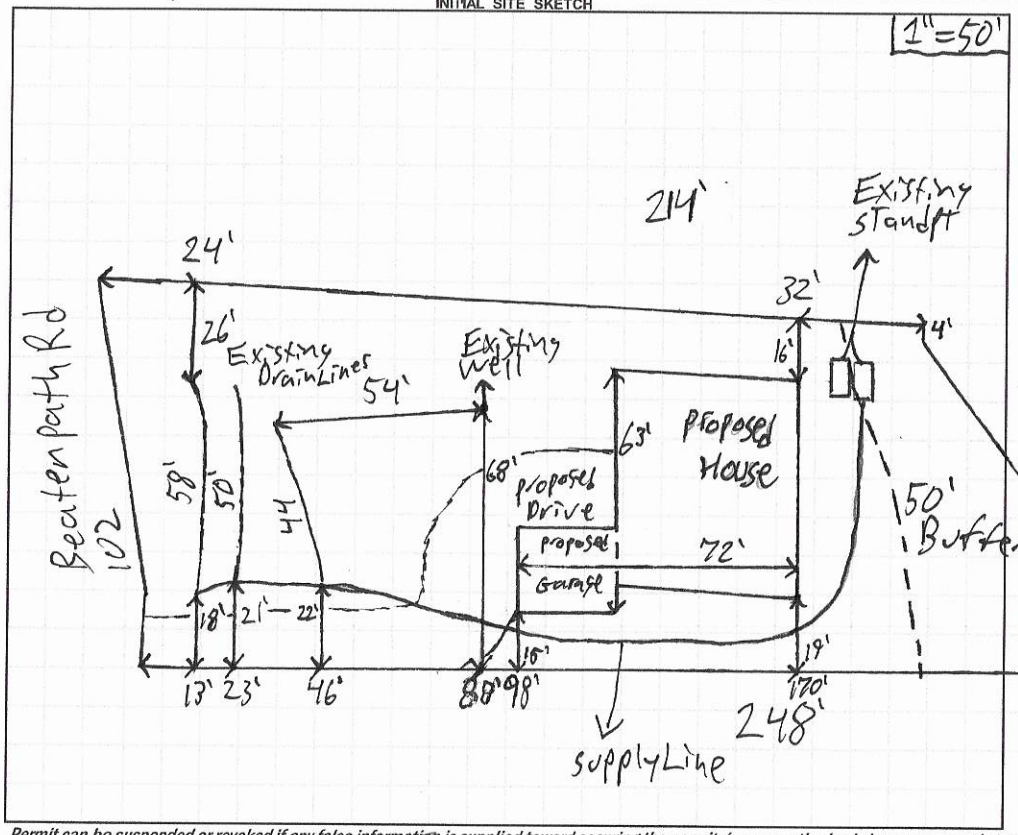
[ ] Slab | [ ] Crawl Space | [ ] Community

[X] Basement w/plumbing | [ ] Basement w/o plumbing

Comments / Conditions: DO NOT drive on, store material or manipulate drainfield in any way. Any part of supply line that is under drive way must be 30" deep or sleeves in ductile Iron.

Basement must be daylighted or tanks will have to move.

INITIAL SITE SKETCH




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.

*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: 12-31-20 | Installed by:

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

AUTHORIZATION TO CONSTRUCT by: | Date: | Existing System Inspected by: Patrice J Byrd III | Date: 12/22/2020

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

RECEIVED NOV 1 0 2020

# APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED

AP-312499
$250.00

## Iredell County Health Department – Environmental Health Division

PAGE 1: *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 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: ( ) 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: Bacon Development Address: 200 Beaten Path RD Zip: 28117
Applicant Email: chad@crescentcdesign.com Phone: 423-782-7633 Alt. Phone: _____
Owner Name: Matt Hurley Address: 200 Beaten Path RD Zip: 28117
Owner Email: mhurley08@yahoo.com Phone: 703-731-5325 Alt. Phone: _____

**Property Information:**

Street Address: 200 Beaten Path RD
Subdivision Name: — Section/Phase: _____ Lot Number: _____
Driving Directions: Blume to Beaten Path Road Property on Right

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

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____

Maximum Number of Bedrooms: _____
Maximum Number of Occupants: _____
( ) Swimming Pool
( ) Other Addition/Structure: _____

**CHECK FOUNDATION TYPE**
( ) Crawl Space Foundation
( ) Concrete Slab Foundation
(✓) Basement with Plumbing
( ) Basement without Plumbing

**Non-Residential Site Development:** Type of Business: _____
Square Footage of Building: 3100 sqft Max. Number of Employees: _____ Max. Number of Seats/Beds/Other: 3 bed

**Water Supply:** ( ) Replacement Well – Reason: _____
( ) Multi-connection Well Number of Houses: 1 Number of Persons: 2

( ) 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: 1989
( ) 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 labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.*

**Signature:** _____ 10-28-20
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

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, Matt Hurley, am the legal owner(s) of the property located at 200 Beaten Path RD, identified as PIN (Parcel Identification Number) 4637015519.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Bacon Development LLC Chad Bacon, 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.

_____ 10/28/20
Signature of Owner(s) Date

**Mooresville - Environmental Health**
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

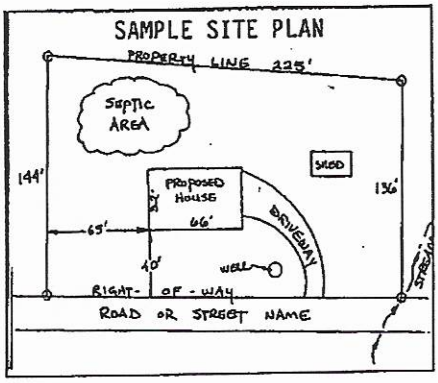
**Statesville - Environmental Health**
ronda.hart@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

# 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*

Attached

**Signature:** _____

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

10-28-20

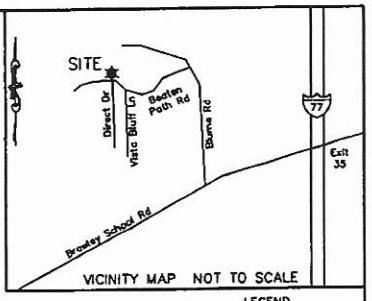
DATE

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 _____, 2020.

**PRELIMINARY**

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

**PRELIMINARY PLAN**
**NOT FOR RECORDATION**
**CONVEYANCES AND/OR SALES**



VICINITY MAP NOT TO SCALE

LAKE NORMAN

760 Contour per Field Location 6/24/20 See Note #10

LEGEND
R/W = Right-of-Way
EOP = Edge of Pavement
Ⓢ = Septic Access

Found #5 Rebar
Found ¾" Iron Rod
L2
N55°41'35"E 71.80'
N04°43'31"E 38.33' Tie
Found #5 Rebar
N81°41'57"W 85.12' Tie Line
Found #5 Rebar
L1
50' Lake Buffer
Proposed Screened Porch
Proposed Wood Deck
18.2'
17.2'
25.9'
7.3'
16.0'
8.7'
8.7'
17.5'
17.0'
7.3'
14.6'
1.2'
17.5'
3.0'
22.2'
15.4'
8.6'
Proposed House
1.2'
15.3'
7.0'
21.7'
6.9'
1.2'
4.3'
3.1'
17.8'
15.9'
8.2'
8.1'
Deed Book 2632 Page 238 Dated: 7/18/2019
TAX ID: 4637-01-4508
PHILLIP J OSBORNE
DB: 962 PG: 622
N04°43'48"E 244.50' Total
213.84'
15' Side Setback
S01°40'00"W 280.40' Total
26.7'de Setback
247.53'
26.5'
15.3'
22.0'
Proposed Concrete Drive
Private Well
TAX ID: 4637-01-6611
JAMES R & LINDA A RAY
DB: 958 PG: 409
102.0'
35' Front Setback
Approximate Location of Existing Septic Field
Found #4 Rebar
R/W
Found 1" Pipe (Bent)
30.66'
32.87'
N88°02'17"E 100.66' Tie Line
Found #5 Rebar (Bent)
S83°26'43"W 86.50'
EOP
BEATEN PATH ROAD
60' PUBLIC R/W
EOP
R/W

| LINE TABLE | | |
|---|---|---|
| LINE | BEARING | DISTANCE |
| L1 | S81°41'57"E | 3.90' |
| L2 | N82°31'43"E | 29.30' |

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 2632 PAGE 238 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) NO NCGS MONUMENTS WERE FOUND WITHIN 2000 FEET OF THIS PROPERTY.

5) BASIS OF BEARINGS: DEED BOOK 2632 PAGE 238, DATED: 7/18/2019.

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 HERON 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 ZONES "X" AND "AE" AS SHOWN ON FEDERAL EMERGENCY MANAGEMENT AGENCY (FEMA) FLOOD INSURANCE RATE MAP (FIRM) COMMUNITY PANEL 3710463700J WITH AN EFFECTIVE DATE OF MARCH 18, 2008.

10) 760 CONTOUR BASED ON DUKE ENERGY LAKE NEIGHBOR INFORMATION (1-800-829-5253). ELEVATION 97.57 (757.57) ON 6/24/2020 AT 4:01 PM.

PLOT PLAN
# MATTHEW & LEIGH HURLEY PROPERTY
## DEED BOOK 2632 PAGE 238
200 BEATEN PATH ROAD
DAVIDSON TOWNSHIP, IREDELL COUNTY, NC

Prepared For (Owner):
MATTHEW & LEIGH HURLEY
200 BEATEN PATH RD
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: STR | Checked By: JNF | Scale 1" = 40' | Project No. 20054 |
| Tax Parcel: 4637-01-5519 | | | |
| Date: November 9, 2020 | | | Sheet No. 1 of 1 |
| File: 20054-Beaten-Path-Road-Hurley-Rev5.dwg | | | |

200 Beaten Path
4637-01-5519

# IREDELL COUNTY HEALTH DEPARTMENT

## (SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR William Evans DATE Aug 16, 89 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1100 SR 1178 (Blume) SR 1443 (Beaten Path) ~½ mile on Right S. R. No. _____

SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

House (✓) Mobile Home ( ) Business ( ) Other Repair

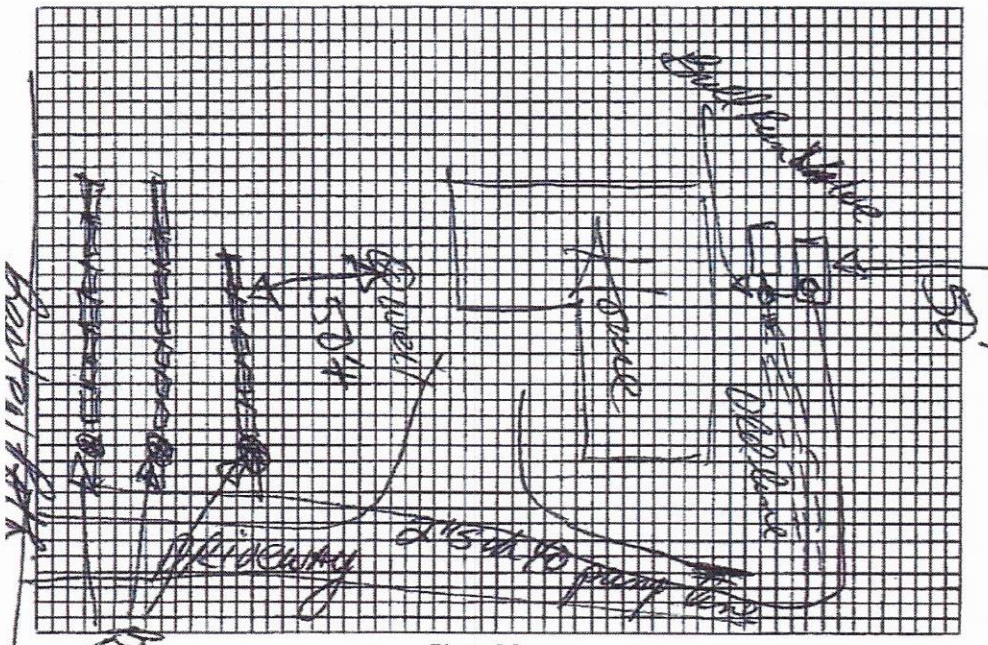
No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable ~~AS~~ Yes (✓) No ( )

Character & Porosity of Soil clay
Percolation Rate 2@3-04
Topography S-10%
Depth to Water Table 44
Rock or other impervious formations none obs.

Lot Area Existing

✓ Basement with Plumbing ____ Basement without Plumbing ____ No Basement




Plot of System

1000 g.t.
Size of Tank Existing Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. _____ Linear Ft. 150' @ 16" trench
Depth of Stone in Lines _____

Water Supply: Individual (✓) panels pressure-dosed
Public ( )

Installed by Sigmon

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 8-16-89

EXISTING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

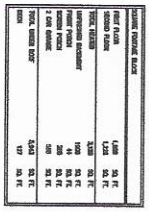
it is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making ements Permit.

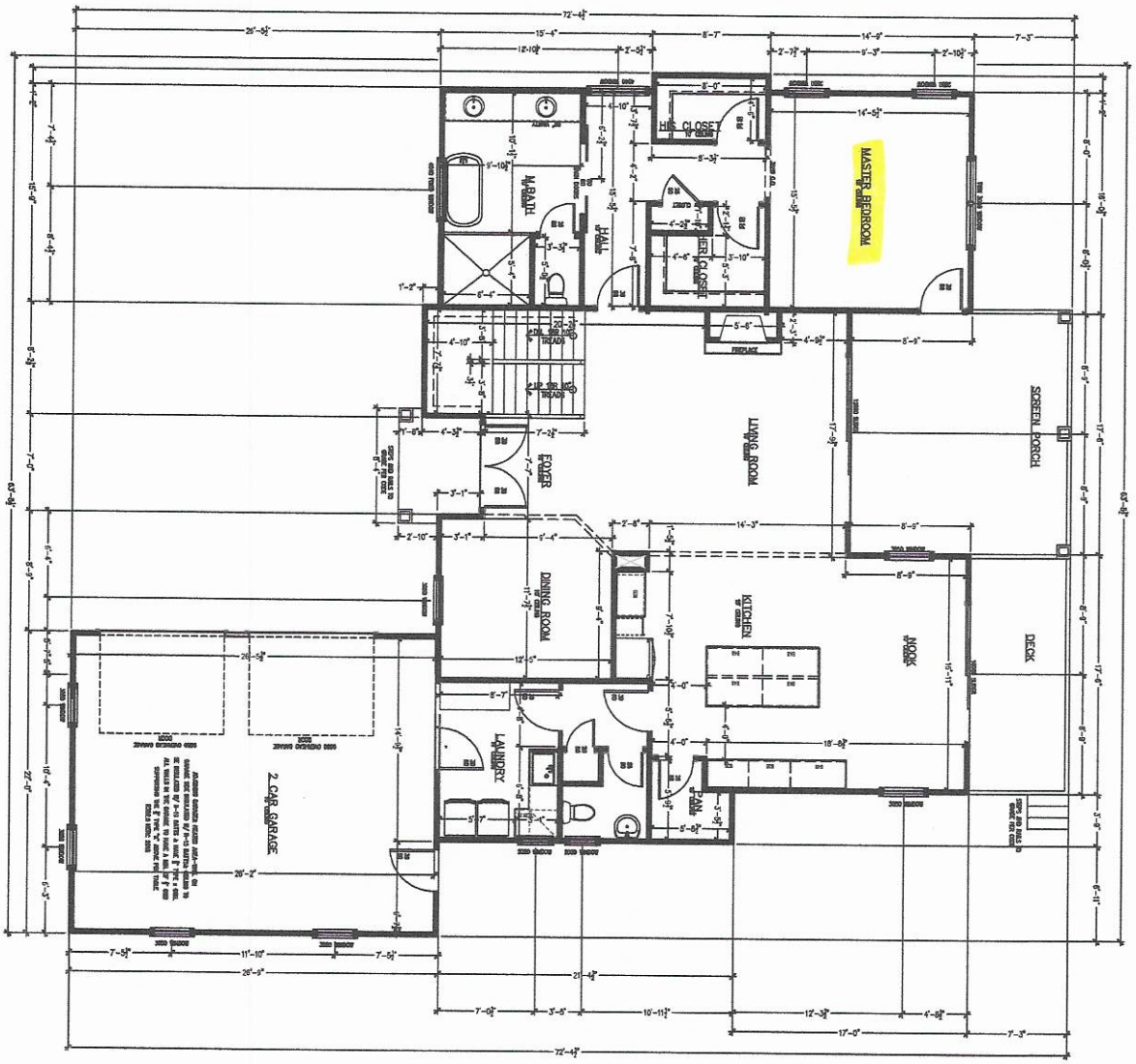
Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold

Residential Designer will not be responsible for structure. Details & Notes are provided for reference only. Consult with a licensed structural engineer to verify all construction details, footing sizes, point loads, joist size and direction, etc.

Date 12-31-20

Patrick J Bagley III Date 12/29/2020




FIRST FLOOR PLAN
SCALE: 1/4" = 1'-0"

| SHEET NO. | NOTE | REVISIONS | COMM. NO. | JOB NO. | DRAWN BY: | CHECKED BY: |
|---|---|---|---|---|---|---|
| 2.0 | 4.29.20 | | | 2020-31 | MWH | CAD |

# The Hurley Plan

200 Beaten Path Road
Mooresville, NC

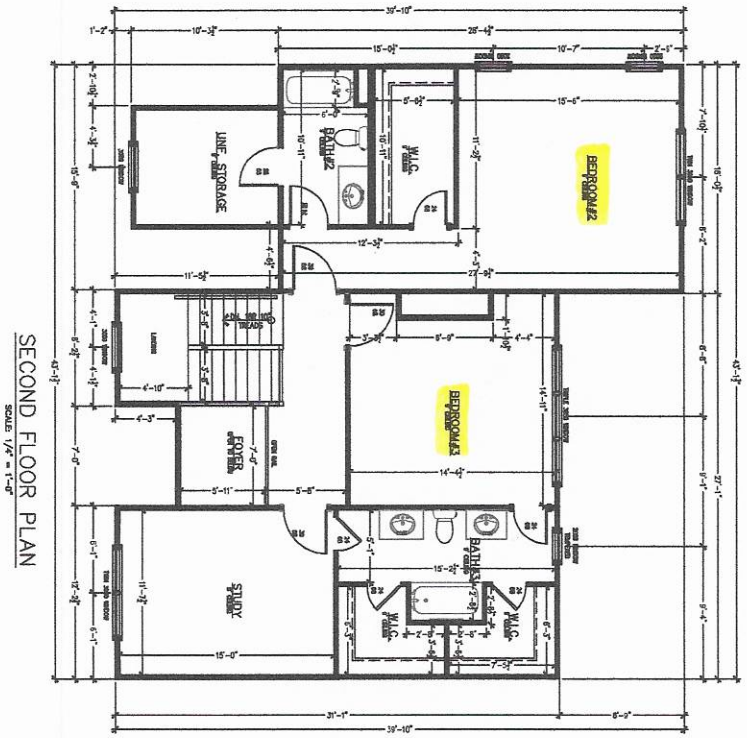
CRESENT
Construction & Design Solutions Inc.

BACON
CUSTOM HOMES

DESIGNTIME RESIDENTIAL
PROFESSIONAL HOME DESIGN
CHARLOTTE - NORTH CAROLINA 704-877-3543
www.dthomeplans.com

Date 12-31-20

Patrick J Boyle III Date 12/29/2020




SECOND FLOOR PLAN

SCALE: 1/4" = 1'-0"

Residential Designer will not be responsible for structure. Details & Notes are provided for reference only. Consult with a licensed structural engineer to verify all construction details, footing sizes, point loads, joist size and direction, etc.

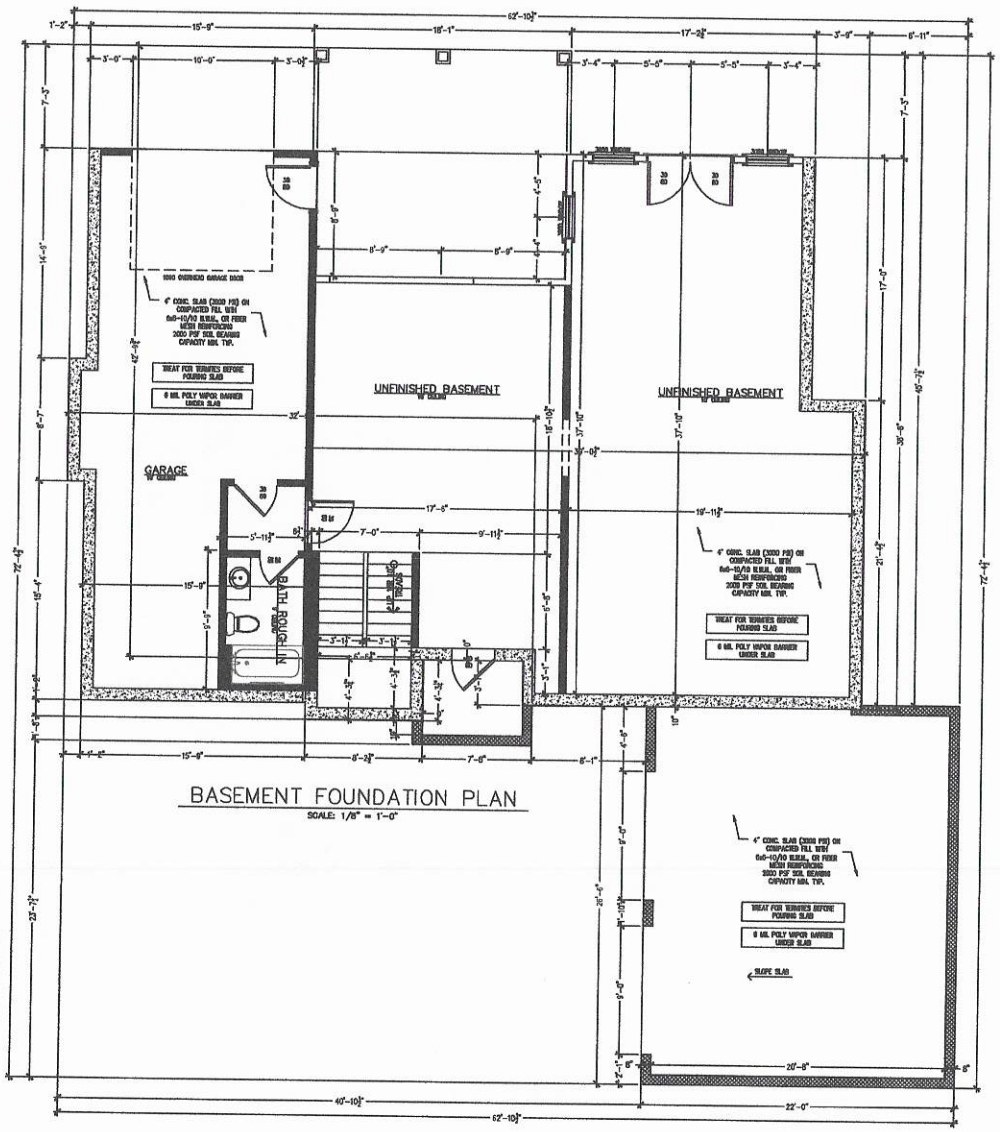
| | | |
|---|---|---|
| SHEET NO. | 3.0 | |
| DATE: | 4.29.20 | |
| REVISIONS | | |
| COMM. NO. | | |
| JOB NO. | 2020-31 | |
| DRAWN BY: | MWH | |
| CHECKED BY: | CAD | |

The Hurley Plan
200 Beaten Path Road
Mooresville, NC

PRESENT Construction & Design Solutions Inc.

BEACON CUSTOM HOMES

DESIGNTIME RESIDENTIAL PROFESSIONAL HOME DESIGN
CHARLOTTE - NORTH CAROLINA 704-877-3643
www.dthomeplans.com




BASEMENT FOUNDATION PLAN

SCALE: 1/8" = 1'-0"

Residential Designer will not be responsible for structure. Details & Notes are provided for reference only. Consult with a licensed structural engineer to verify all construction details, footing sizes, point loads, joist size and direction, etc.


DESIGNATIVE RESIDENTIAL
PROFESSIONAL HOME DESIGNS
CHARLOTTE - NORTH CAROLINA 704-879-5841
www.dfcompanies.com

BACON CUSTOM HOMES
421-7262-7633

CRESENT
Construction & Design Solutions, Inc.


# The Hurley Plan

200 Beaten Path Road
Mooresville, NC

| | |
|---|---|
| CODE NO. | |
| JOB NO. | 2020-31 |
| DRAWN BY: | MWH |
| CHECKED BY: | CAD |
| REVISIONS: | |
| DATE: | 4.29.20 |

SHEET NO.

S1

IREDELL COUNTY · NC

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

| APPLICATION NUMBER |
|---|
| 312499<br>Issue Date: |

**Permit Type: ZONING**

| Parcel Number | Street Address | Jurisdiction |
|---|---|---|
| 4637015519.000 | 200 BEATEN PATH RD | Iredell County |

| Owner Information | Applicant Information |
|---|---|
| Name: HURLEY MATTHEW+LEIGH | Name: BACON DEVELOPMENT LLC |
| Address: | Address: 2004 BROOKSIDE LN |
| , | KINGSPORT, TN 37660 |
| Phone: | Phone: (423)782-7633 |

| Use Requested | Zone Code |
|---|---|
| Single Family Dwelling | R20 |

| Lot Acreage | F Setback | B Setback | L Setback | R Setback | Watershed | Flood Zone |
|---|---|---|---|---|---|---|
| 0.563 | 35 | 50 | 15 | 15 | WSIV-CA Catawba/Lake Norman | YES |

| Remarks |
|---|
| SFD need discl, lien and w/c |

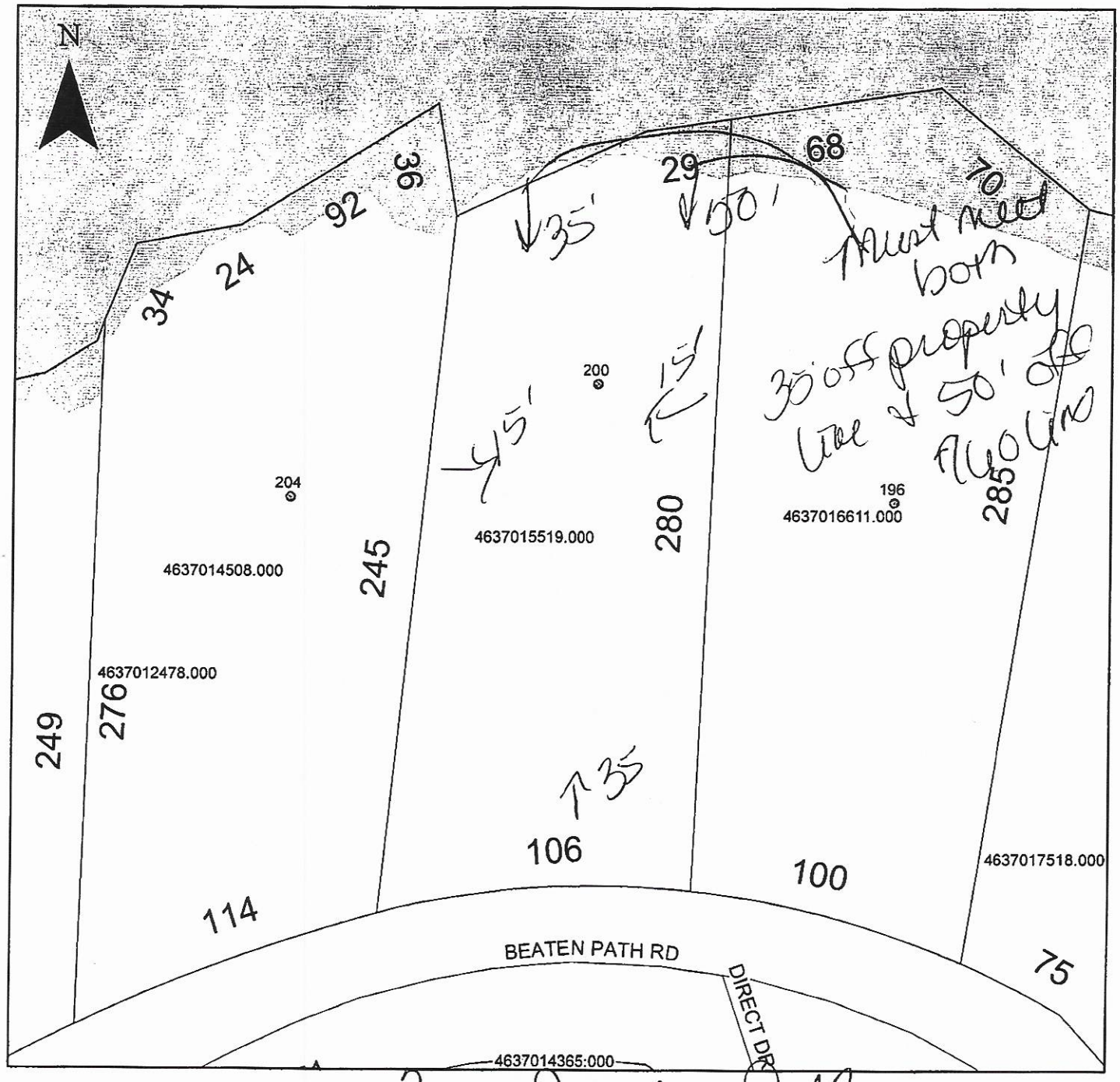
The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions, plat conditions and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

**Date:** 11/10/2020

Signature of Owner/Contractor

| Permit Number | 312499 | TOTAL FEES: | $77.25 |
|---|---|---|---|

# ZONING DISCLAIMER




Property Address 200 Beaten Path

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. Applicant further acknowledges that the 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 _____