IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 234780

SEPTIC IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT (EXISTING SYSTEM) PIN # 4637-12-6942

APPLICANT/OWNER: Joe Navarro APPLICANT ADDRESS: 335 Blume Rd. Mooresville, NC 28117

SITE ADDRESS: 335 Blume Rd. PHONE: 704-746-5046 ALT. PHONE —

SITE DIRECTIONS: BSR towards Lake Norman → R on Blume Rd → House on left SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Edgewater Park SECTION: LOT # 17 LOT AREA: 0.99 acres DESIGN FLOW: 600 GPD L.T.A.R.:

Septic Tank (gal) STB 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

☐ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI
System Description: EXISTING
Repair System Description:
Maintenance Agreement Required: ☐ YES ☒ NO
☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 5
☐ Business No. Persons 10
☐ Other No. Employees
☐ Slab ☒ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Recommend pumping both septic tanks every 3-5 years. Also recommend relocating septic out from under existing deck (permit required) or removing any deck pier/ footings within 5' of septic tank/ system components. Pool must be constructed in area shown on approved drawings. Do not operate equipment nor stockpile materials on septic or repair areas.

INITIAL SITE SKETCH

See attached plans from Ashley Rollins LSS # 1231

Dated: 4/12/18

Modified 5/1/2018

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**

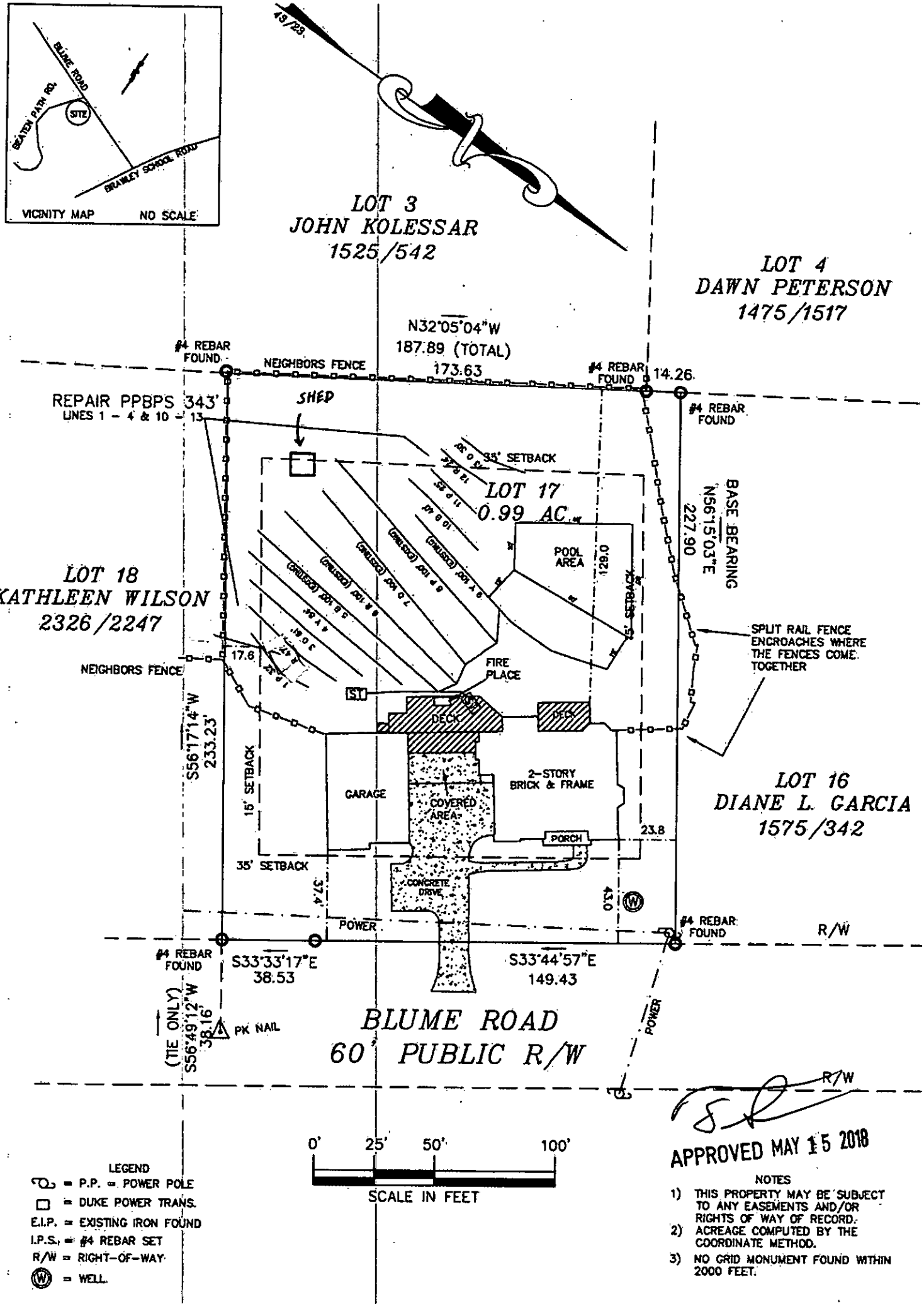
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☐ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Date: 5/15/18 Installed by:

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

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Tom Shuck Date: 5/15/2018

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.


VICINITY MAP NO SCALE
BLUME ROAD
BEATEN PATH RD.
SITE
BRAMLEY SCHOOL ROAD
43/29
LOT 3
JOHN KOLESSAR
1525/542
LOT 4
DAWN PETERSON
1475/1517
N32°05'04"W
187.89 (TOTAL)
173.63
#4 REBAR FOUND
NEIGHBORS FENCE
#4 REBAR FOUND
14.26
#4 REBAR FOUND
REPAIR PPBPS 343'
LINES 1 - 4 & 10 - 13
SHED
35' SETBACK
LOT 17
0.99 AC.±
BASE BEARING
N56°15'03"E
227.90
POOL AREA
128.0
15' SETBACK
LOT 18
KATHLEEN WILSON
2326/2247
SPLIT RAIL FENCE ENCROACHES WHERE THE FENCES COME TOGETHER
NEIGHBORS FENCE
17.6
FIRE PLACE
ST
DECK
DECK
S56°17'14"W
233.23'
15' SETBACK
GARAGE
COVERED AREA
2-STORY BRICK & FRAME
LOT 16
DIANE L. GARCIA
1575/342
PORCH
23.8
35' SETBACK
CONCRETE DRIVE
37.4'
43.0
POWER
#4 REBAR FOUND
R/W
#4 REBAR FOUND
S33°33'17"E
38.53
S33°44'57"E
149.43
(TIE ONLY)
S56°49'12"W
38.16'
PK NAIL
BLUME ROAD
60' PUBLIC R/W
POWER
R/W
0'
25'
50'
100'
SCALE IN FEET
APPROVED MAY 15 2018
LEGEND
P.P. = POWER POLE
= DUKE POWER TRANS.
E.I.P. = EXISTING IRON FOUND
I.P.S. = #4 REBAR SET
R/W = RIGHT-OF-WAY
= WELL.
NOTES
1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENTS AND/OR RIGHTS OF WAY OF RECORD.
2) ACREAGE COMPUTED BY THE COORDINATE METHOD.
3) NO GRID MONUMENT FOUND WITHIN 2000 FEET.

RECEIVED APR 12 2018

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM Paid $350.00 (Refund due)

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 Existing Sys. # 234780

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: Joe Navarro **Address:** 335 Blume Road Mooresville NC **Zip:** 28117
Applicant Email: josephnavarro@gmail.com **Phone:** 704 746 5046 **Alt. Phone:**
Owner Name: Same **Address:** **Zip:**
Owner Email: **Phone:** **Alt. Phone:**

Property Information:

Street Address: 335 Blume Road Mooresville NC 28117
Subdivision Name: Edgewater Park **Section/Phase:** **Lot Number:** 17
Driving Directions: Brawley, R on Blume, Lot on Left

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: 5
Maximum Number of Occupants: 10
(✓) Swimming Pool = Existing System
( ) 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: Max. Number of Employees: Max. Number of Seats/Beds/Other:

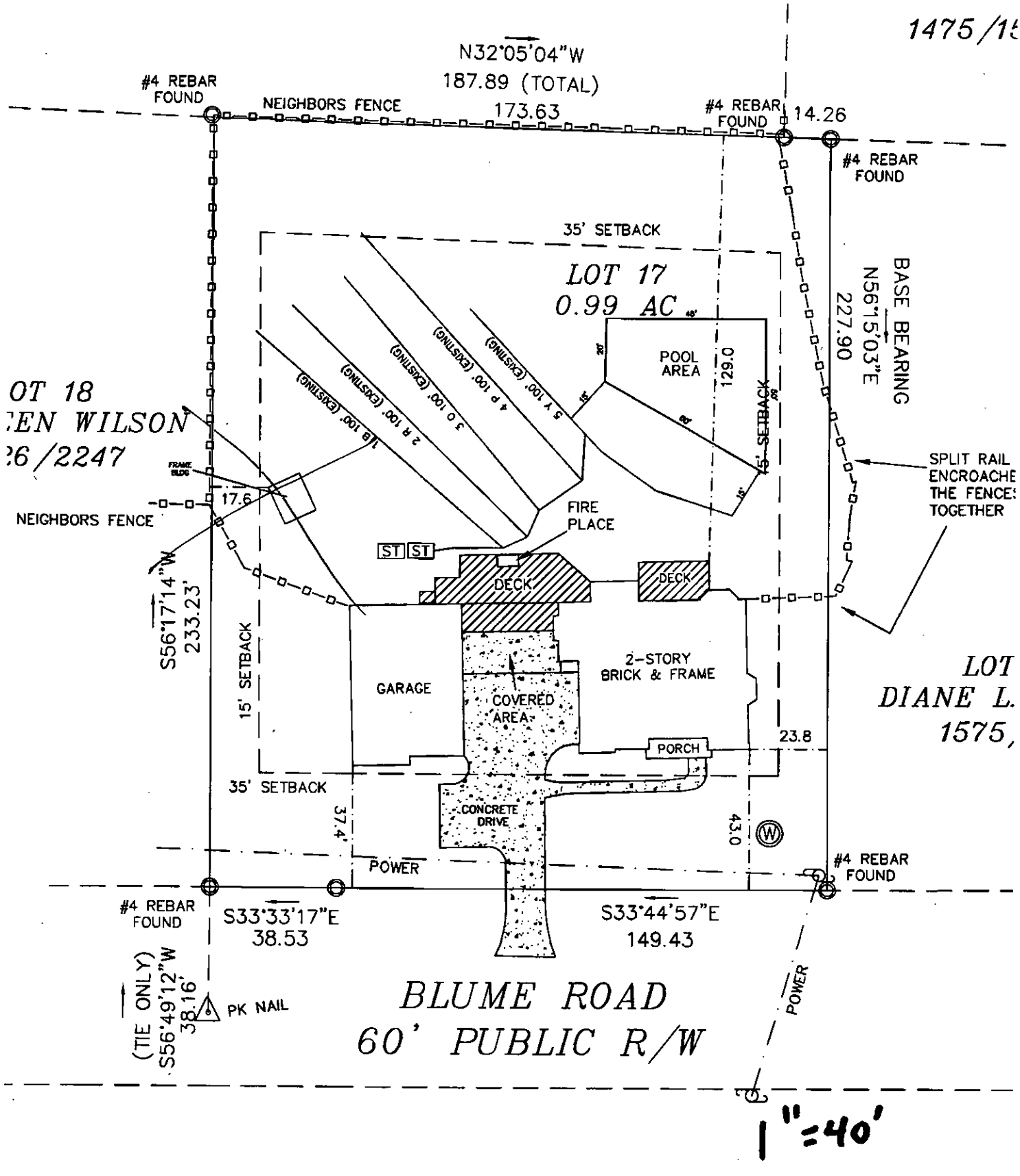
Water Supply: ( ) Replacement Well – Reason:
( ) Multi-connection Well Number of Houses: Number of Persons:
( ) New Well (✓) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

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

Signature: Joseph A Navarro 4/11/18
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE


1475/1
N32°05'04"W
187.89 (TOTAL)
#4 REBAR FOUND
NEIGHBORS FENCE
173.63
#4 REBAR FOUND
14.26
#4 REBAR FOUND
35' SETBACK
LOT 17
0.99 AC
POOL AREA
129.0
15' SETBACK
BASE BEARING
N56°15'03"E
227.90
OT 18
EN WILSON
6/2247
SPLIT RAIL ENCROACHE THE FENCE: TOGETHER
FRAME BLDG
17.6
NEIGHBORS FENCE
FIRE PLACE
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DECK
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S56°17'14"W
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GARAGE
COVERED AREA
2-STORY BRICK & FRAME
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37.4'
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POWER
#4 REBAR FOUND
#4 REBAR FOUND
S33°33'17"E
38.53
S33°44'57"E
149.43
(TIE ONLY)
S56°49'12"W
38.16'
PK NAIL
BLUME ROAD
60' PUBLIC R/W
POWER
1"=40'

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, Joe Navarro, am the legal owner(s) of the property located at 335 Blume Rd, Mooresville NC 28117, identified as PIN (Parcel Identification Number) 4637126942, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) Samuel Ashley Rollans Rollans Soil & Environmental Services, 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) 4/11/18 Date

Signature of Witness 4/11/18 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

IREDELL COUNTY

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

APPLICATION NUMBER
234780
Issue Date: 04/11/2018

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4637126942.000	335 BLUME ROAD, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: NAVARRO JOSEPH+MARIAM	Applicant: NAVARRO JOSEPH+MARIAM
Address: 335 BLUME RD	Address: 335 BLUME RD
MOORESVILLE, NC 28117	MOORESVILLE, NC 28117
Phone:	Phone:

Use Requested	Zone Code
SWIMMING POOL	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.995		10.00	10.00	10.00	CACL	X

Remarks:

Must meet requirement R22 of the LDC. Pools shall be located to comply with minimum setbacks for accessory structures- located behind front building line of house, 10 Æ from side & rear property line. Lake lots must meet the 50 Æ setback from the 760 contour line AND the 35 Æ setback from the rear property line. Pools that 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. Setback from house could be +/-10 Æ. Fenced with a minimum 4 Æ in height, and equipped with self-closing and positive self-latching gate provided with hardware for permanent locking. Fence not required for above ground pools if they are at least 4 Æ in height, the ladder 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: 4/11/18

Permit Number	135155	TOTAL FEES:	$ 77.25