IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 226253

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

PIN # 4637-32-5178

APPLICANT/OWNER: Tim Peterson APPLICANT ADDRESS: 478 Oak Tree Road Mooresville, NC

SITE ADDRESS: 478 Oak Tree Road Mooresville, NC PHONE: 704-400-8539 ALT. PHONE

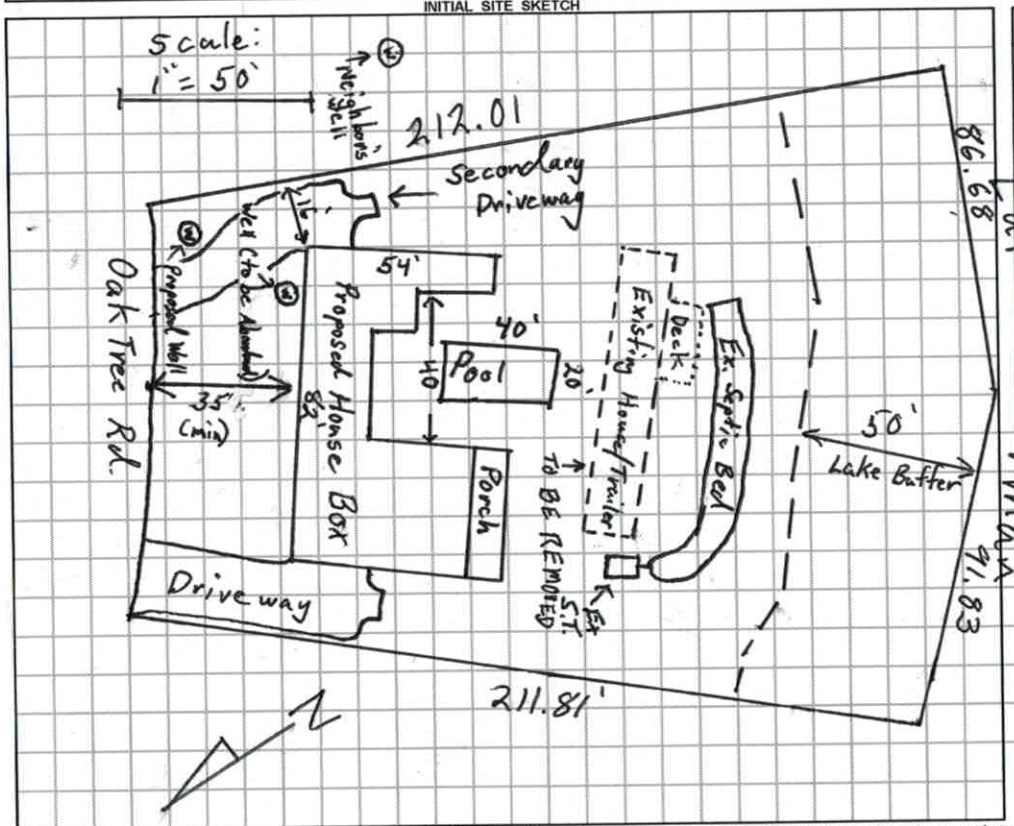
SITE DIRECTIONS: BSR towards Lake Norman → R on Oak Tree Road → House on Right SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: CL+T SECTION: 9 LOT # 217 LOT AREA: 0.7 acres DESIGN FLOW: 240 GPD L.T.A.R.:

Septic Tank	Existing	(gal)	STB	—	Date	—	☐ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI	☒ Residence	No. Bedrooms	2	Water Supply
Pump Tank	—	(gal)	PT	—	Date	—	System Description:	☐ Business	No. Persons	4	☒ Private
Pump Make	—	Model	—		Serial #	—	Repair System Description: Existing	☐ Other	No. Employees		☐ Public
# Nitrification Fields	Ex 1	# Lines	Ex		Linear Ft	Ex	Maintenance Agreement Required: ☐ YES ☒ NO	☒ Slab	☐ Crawl Space		☐ Community
Trench Width	Ex	Trench Bottom Depth(Low side)	Ex		Gravel Depth	Ex	☒ GRAVITY ☐ PRESSURE	☐ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions: Existing well must be abandoned prior to construction (due to setback conflicts with proposed house box) Permit required. Recommend pumping septic tank every 3-5 years.

INITIAL SITE SKETCH



AS BUILT SKETCH

Well abandonded 2/13/18

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: Tim Peterson Date: 1/29/18 Installed by:

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

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Tom Church Date: 7/31/2017

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

Sheet ___ of ___
PROPERTY ID #: _____
COUNTY: _____

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

OWNER: Tim Peterson — APPLICATION DATE _____
ADDRESS: _____ — DATE EVALUATED: 6/20/2017
PROPOSED FACILITY: 4 BR — PROPOSED DESIGN FLOW (.1949): 480 GPD — PROPERTY SIZE: _____
LOCATION OF SITE: 476 Oak Tree Road Mooresville, NC — PROPERTY RECORDED: Yes
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	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	LSS (graded) ??	0-8/10?	Fill	mixed loam + clay					P/F Needed
		8/10-24	clay MAT V.W. SBK	Firm, Sticky, Sp, Sap					
		24-35	clay some W. SBK Saprolite	Firm, Sticky, Sp, Sap					
		35-44	Sandy Saprolite MA - some/common clay intrusions	Friable+ moderately Drained					
2	LSS	0-9?	Fill	Mixed loam + Clay					P/F Needed
		9-30	clay V.W SBK	Firm, Sticky, Sp, Sap	Chroma 2 Redox @ 32-36"				
		30-36	clay V.W SBK	Firm, Sticky, Sp, Sap					
		36-48	clay W. SBK	Sl. Firm, Sticky, Sp, Sap					
3	LSS 7% 6/29/17	0-3	Fill	Mixed Loam + Clay	old Septic 12-16" ←		★		
		3-12	SCL M SBK/ABK	Sl. Firm, SS, Sp, Sap					
		12-32	Clay M-S ABK	Firm, Sticky, Sp, Sap	Chroma 2 Redox @ 40" in Root Channel				
		32-48	clay Loam W-M SBK some Saprolite	Sl. Friable, SS, Sp, Sap					
4	FS 7% 6/29/17	0-7	Fill	mixed Loam + Clay					0.275
		7-12	SCL (original T.S.) W-M SBK	Sl. Firm, SS, Sp, Sap					
		12-44	Clay M-S SBK/ABK	Firm, sticky, Sp, Sap					
		44-56	clay W. SBK	Sl. Firm, SS, Sp, Sap					

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

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

TP 3

0 8 Fill (clay + Loam)

8-20 SCL v.w. SBK — Sl. Firm, SS, Sp, Scrp

20-36" clay m-s SBK/ABK — Firm, Sticky, Sp, Scrp — Chroma 2 Greys @ 26" 10YR 6/2 + 6/3 — H_2O weeping @ 24"

36-50" Clay v.w SBK (some Saprolite)

0-18 Fill

US

TP 4

0-12 clay/Loam Fill + Material

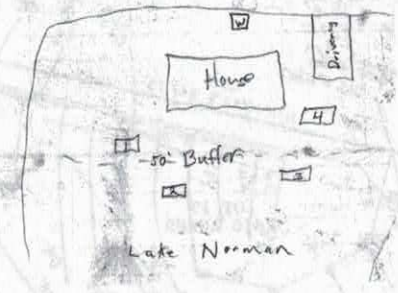
12-17 SCL v.w SBK + Pine needles — Sl. Firm, Sticky, Sp, Scrp

17-37" clay m-s SBK m. ABK — Firm, Sticky Sp, Scrp — 7.5 YR 7/2 + 6/3 @ 30"

37-58" clay Loam v. SBK some Saprol. — Sl. Firm — Free water weeping @ 44"

0-22 Fill chroma 2's @ 20"

Pond Opinion Requested



RECEIVED JUL 1 8 2017

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

(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)

#226253

1. APPLICATION FOR: ___Improvement Permit ___Authorization To Construct X Existing System Inspection

****

2. Page 2: *Site Plan Worksheet* Form MUST Accompany This Application
   The following optional attachments may also be submitted: X 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:

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Tim Peterson	478 Oaktree RD Mooresville, NC 28117	704-400-8539	
Owner Name	Mailing Address	Home Phone #	Alternate Phone #
Same	Same	Same	

****

4. Property Information:

478 Oaktree rd — Street Address
Subdivision Name
Section/Phase and Lot Number

Driving Directions: 77 South EXIT 35 take right, 2 miles right on Oaktree RD

****

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

(X) 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 2
Maximum Number of Occupants 2
If Expansion, Current Number of Bedrooms ___

( ) Crawl Space Foundation?
(X) 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:

(X) 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 1997 (Year)

( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other_____

8. Please Answer The Following ( ) Yes (X) No Does the site contain any jurisdictional wetlands?
   To The Best of Your Ability: ( ) Yes (X) No Is any non-domestic sewage (i.e. industry) 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.

9. Signature: _____ 7/18/2017
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

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:

X 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

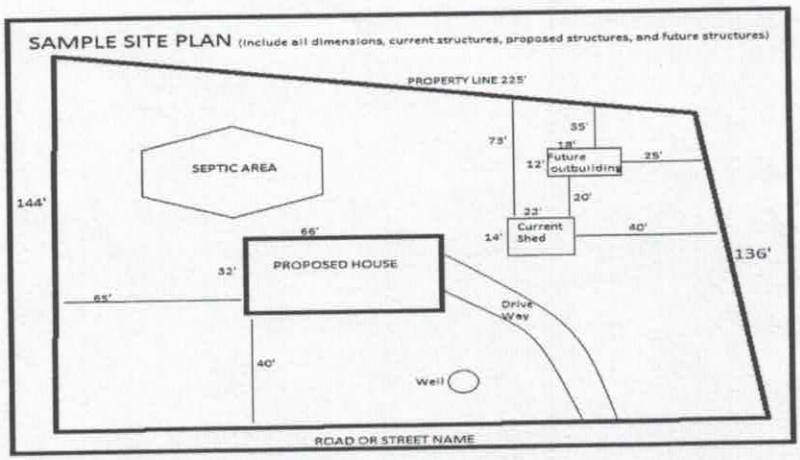
X Front and side setbacks from property line… **____ Preferred driveway location and configuration, preferred well location…**

X 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

See Atached

Signature: _____ 7/18/2017

REQUIRED **property owner or owner's legal representative signature.** **DATE**

I, JOEL H. PATTERSON III, 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 BOOK 14 ; 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 _____ 2018.

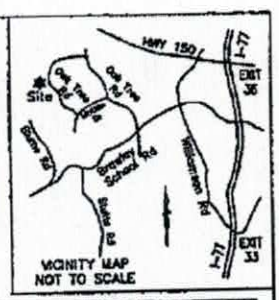
JOEL H. PATTERSON III, PLS
LICENSE NUMBER: L-3717

NORTH CAROLINA PROFESSIONAL SEAL L-3717 LAND SURVEYOR JOEL H. PATTERSON III

Plat Book 14 Page 110 Dated: 12/22/1978

LEGEND
R/W = Right-of-way
= Not to Scale
= Well
= Boring

FOR EXHIBIT PURPOSES ONLY



VICINITY MAP
NOT TO SCALE

CURVE TABLE				
CURVE	RADIUS	ARC	BEARING	CHORD
C1	478.45'	62.05'	S 35°07'01" E	62.01'
C2	314.79'	48.12'	S 42°42'44" E	48.07'

~ LAKE NORMAN ~

760 Contour Field Located 12/14/18

N29°39'15"W 86.65'
N29°11'32"W 91.83'
Found #5 Rebar
Found #5 Rebar
Found #5 Rebar (online)
N48°33'00"W 181.30' Tie Line
TS-I PRETREATED REPAIR 2990 SQFT
50' Buffer (from 760 Contour)
3 P 150'
Existing Septic System
2 O 40'
1 B 100'
Trailer Home
Ex. Elec. Box
New Elec. Box
Ex. Septic Tank
New Septic Tank
20'
16'
40'
26'
Porch
LOT 217
0.716 ACRES
HOUSE/POOL AREA
8700 SQFT
80'
DRIVEWAY
N56°14'00"E 211.91' Total
S35°28'00"W 212.01'
LOT 216
PLAT BOOK 14
PAGE 109
LOT 218
PLAT BOOK 14
PAGE 110
Neighbors Well
Proposed Well
Found #5 Rebar
Set #4 Rebar
C1
C2
R/W
OAK TREE ROAD
60' R/W
(PLAT BOOK 14 PAGE 110)

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

GRAPHIC SCALE
30 0 15 30
(IN FEET)
1 inch = 30 feet

EXHIBIT SURVEY
LOT 217
RECREATION LOTS, SECTION 9
PLAT BOOK 14 PAGE 110
478 OAK TREE ROAD
DAVIDSON TOWNSHIP, IREDELL COUNTY, NORTH CAROLINA
Prepared for/Owner:
EDWIN C. & JULIA E. LUDROCK
8179 HANGS WAY
CLEMMONS, NC 27012

PATTERSON LAND SURVEYING, P.A.
NC LICENSE #: C-3390
P.O. BOX 3310, MOORESVILLE, NC 28117
PHONE: 704-663-8140 EMAIL: pattersonlandsurveying@gmail.com

Drawn By: GHL	Checked By: JHP	Project Number: 16141
Tax PIN: 4637-32-5178		
Date: DECEMBER 19, 2018	Scale: 1" = 30'	Sheet Number: 1 of 1
File: 16141-ExhibitLwg		

SURVEYOR NOTES

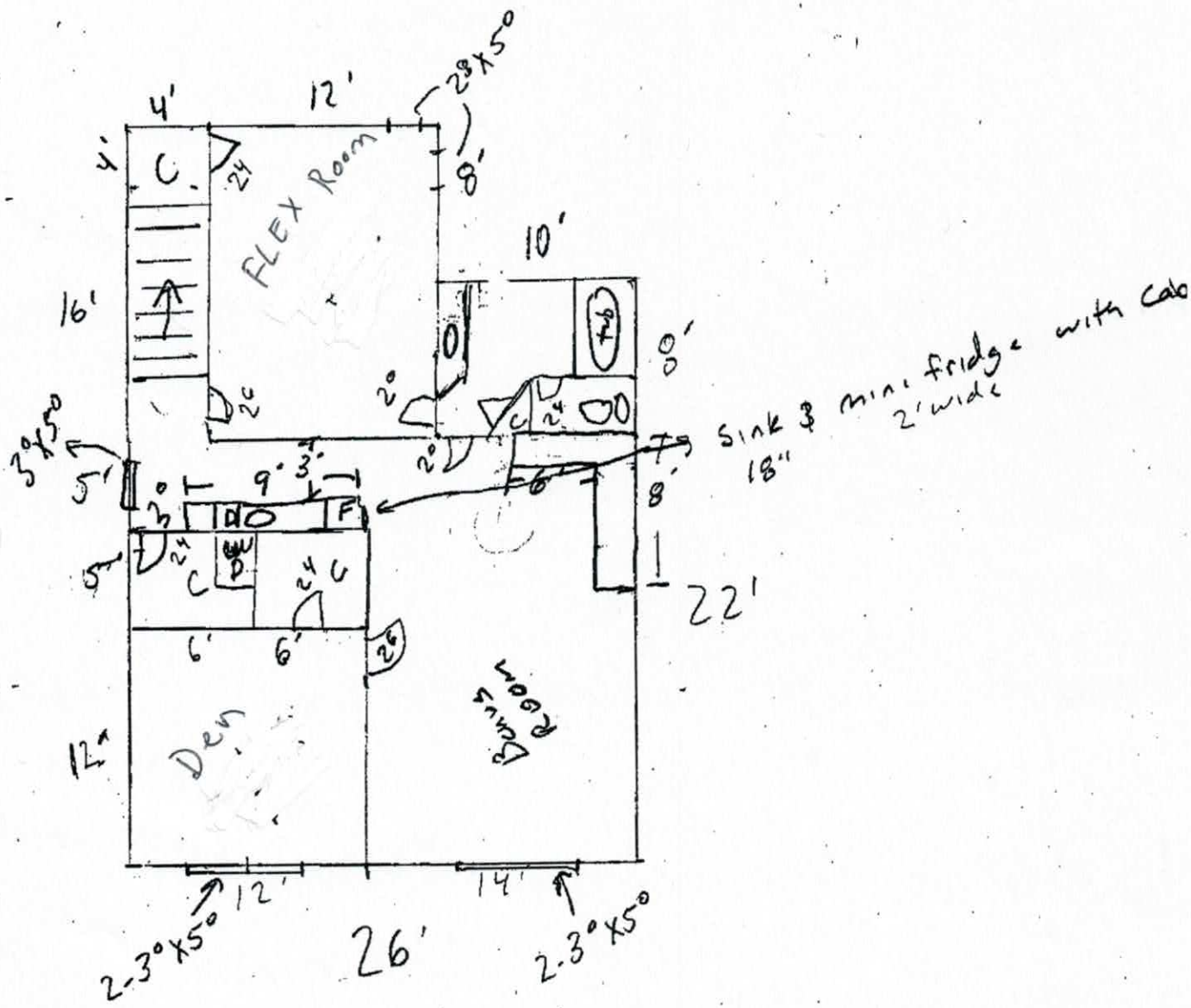
1) ALL DIMENSIONS SHOWN ARE IN US SURVEY FEET AND DECIMALS THEREOF AND ARE HORIZONTAL GROUND DISTANCES UNLESS OTHERWISE INDICATED. AREA BY COORDINATE METHOD.
2) THIS SURVEY IS BASED ON DEED BOOK 650 PAGE 329 AND PLAT BOOK 14 PAGE 110 AS RECORDED AT THE IREDELL COUNTY REGISTER OF DEEDS.
3) THIS SURVEY 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) BASES OF BEARINGS: PLAT BOOK 14 PAGE 110 - DATED: DECEMBER 22, 1978.
5) 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. PATTERSON LAND SURVEYING, P.A. CANNOT ASSUME RESPONSIBILITY FOR MISIDENTIFICATION OR OMISSION OF UNDERGROUND UTILITIES.
6) THIS SURVEY IS OF AN EXISTING PARCEL OR PARCELS OF LAND AND DOES NOT CREATE A NEW STREET OR CHANGE AN EXISTING STREET.
7) THIS PROPERTY LIES IN FLOOD ZONE "X" & "AE" AS SHOWN ON FEDERAL EMERGENCY MANAGEMENT AGENCY (FEMA) FLOOD INSURANCE RATE MAP (FIRM) COMMUNITY PANELS 3710463700J, WITH AN EFFECTIVE DATE OF MARCH 18, 2008.
8) POINTS NOT LABELED "FOUND" OR "SET" ARE COMPUTED POINTS ONLY. ALL POINTS LABELED "FOUND" OR "SET" ARE FLUSH WITH THE GROUND UNLESS OTHERWISE NOTED.
9) NO NGS OR USGS MONUMENTS FOUND WITHIN 2000' OF SUBJECT PARCEL.
10) A 30' VEGETATIVE BUFFER EXISTS ALONG LAKE NORMAN.
11) 760 CONTOUR BASED ON LAKE NORMAN LAKE LEVEL AS RECORDED BY DUKE ENERGY (1-800-829-LAKE) AS RECORDED ON DECEMBER 14, 2018 AT 9:19 AM WITH A LAKE LEVEL OF 754.01.

Acknowledgement of Plans Submittal ONLY!

✱TP 7/18/2017

Date 4/10/2017

Tom Shuck Date 7/31/2017



ABOVE GARAGE 2nd floor

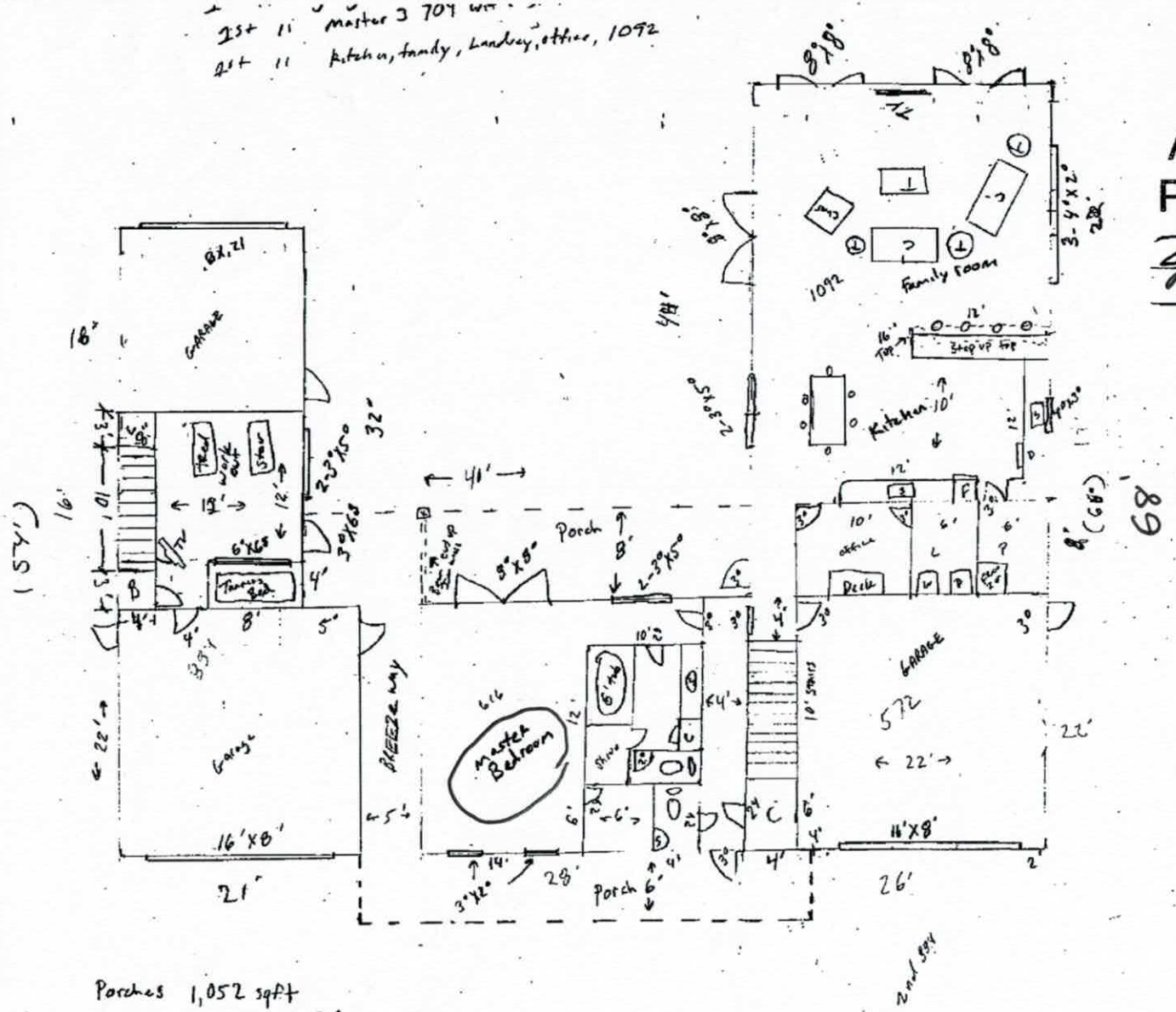
8' studs

1st 11 master 3 707 wi
2st 11 kitchen, family, Landry, office, 1092

478 OakTree

Acknowledgement of Plans Submittal ONLY!

Date 4/10/2017
Date 7/31/2017



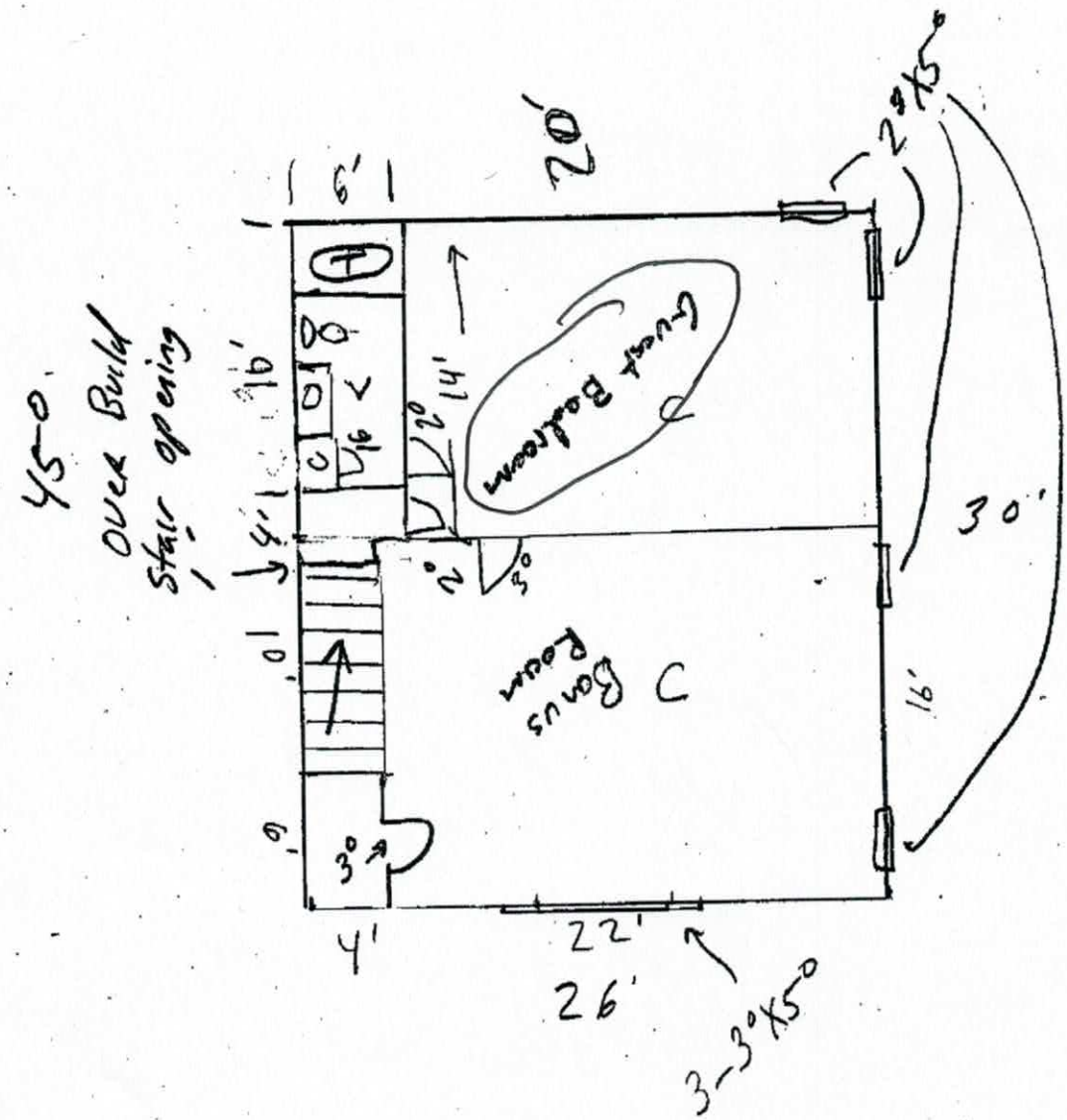
Porches 1,052 sqft
total 3,864 Ht sqft
GARAGES 1,180 sqft

6,096
under roof

Acknowledgement of
Plans Submittal ONLY!

Date 4/10/2017

Date 7/31/2017



2nd floor maine house

IREDELL COUNTY

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

APPLICATION NUMBER
226253
Issue Date: 01/26/2018

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4637325178.000	478 OAK TREE ROAD, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: LUDWICK EDWIN C+JULIA	Applicant: PETERSON, TIM
Address: 6179 HANES WAY CLEMMONS, NC 27012	Address: 478 OAK TREE ROAD MOORESVILLE, NC 28117
Phone:	Phone: 704-400-8539

Use Requested	Zone Code
SFD	RR

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.710	35.00	50.00	15.00	15.00	CACL	AE

Remarks:

THE EXISTING DWELLING NEEDS TO BE GONE FROM THE PROPERTY WITHIN 30 DAYS OF CO APPROVAL

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	126815	TOTAL FEES:	$ 77.25