IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # ~~21543~~ 21552

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

PIN # 4637-61-3523.000

APPLICANT: Rowland Dev. Corp. | APPLICANT ADDRESS: 2231 Hwy 152 E. China Grove NC 28023

SITE ADDRESS: 250 Oak Tree Rd. Mooresville NC 28117 | PHONE: 704-506-0556 | ALT. PHONE: * 704-202-1176 *

SITE DIRECTIONS: BSR, TR Oak Tree, Site on R

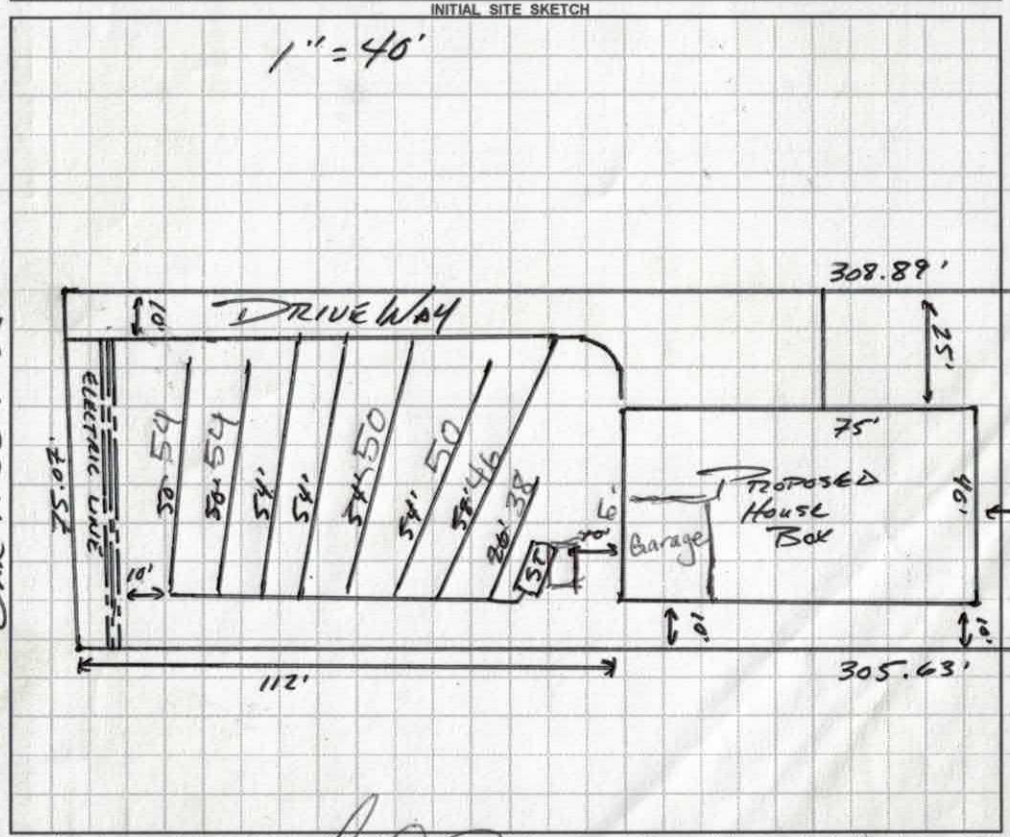
SUBDIVISION: Grand Oaks | SECTION: — | LOT # 4 | LOT AREA: .53 Acre | DESIGN FLOW: 480 GPD. | L.T.A.R.: .3 I / .275

Septic Tank 1000	(gal)	STB 825	Date 10-1-17	[X] New System [ ] Repair [ ] Expansion	System Type: I II III IV V VI	[X] Residence	No. Bedrooms 4	Water Supply
Pump Tank	(gal)	PT	Date	System Description: 25% Reduction - Gravity		[ ] Business	No. Persons 8	[ ] Private
Pump Make	Model		Serial #	Repair System Description: LP-PPBPS		[ ] Other	No. Employees	[X] Public
# Nitrification Fields 1	# Lines 8		Linear Ft: 400'	Maintenance Agreement Required:	[ ] YES [X] NO	[ ] Slab	[X] Crawl Space	[ ] Community
Trench Width 36"	Max. Trench Bottom Depth * 33"-34" * Contour		Gravel Depth N/A	[X] GRAVITY	[ ] PRESSURE	[ ] Basement w/plumbing		[ ] Basement w/o plumbing

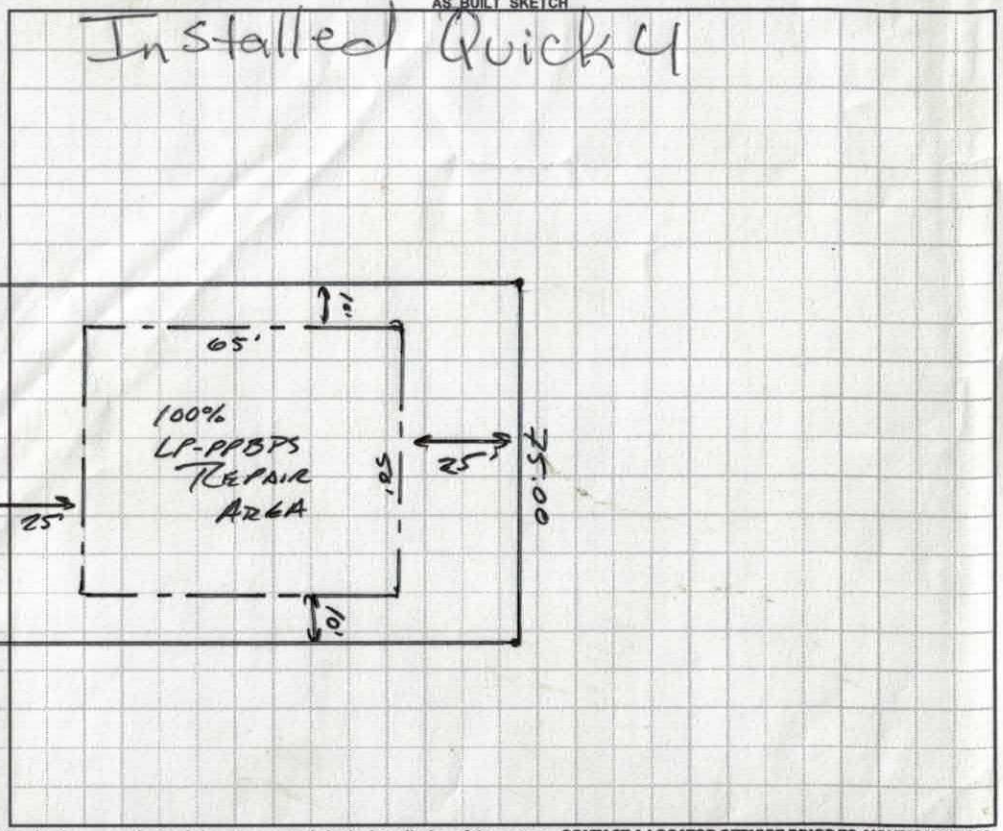
Comments / Conditions: Follow All Septic Rules.
* Must build house in position shown on permit

7/17/17 Renewed Floor plans in Compliance With I.P. (house slightly bigger but still should fit)

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* [X] **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: [signature] Date: 4/27/16 Installed by: Rowan Septic

IMPROVEMENT PERMIT by: [signature] APPROVED Date: APR 21 2016 OPERATION PERMIT by: Maria Dotson Date: 11/6/17

AUTHORIZATION TO CONSTRUCT by: Maria Dotson Date: 7/17/17 Existing System Inspected by: Date:

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

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

Sheet 1 of 3
PROPERTY ID #: 3523
COUNTY: IREDELL

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

OWNER: Rowland Dev. Corp. APPLICATION DATE 3/18/16
ADDRESS: China Grove LOT 4 DATE EVALUATED: 4/18/16
PROPOSED FACILITY: SFR PROPOSED DESIGN FLOW (.1949): 480 GPD. PROPERTY SIZE: .53 ACRE
LOCATION OF SITE: 250 OAK TREE RD. 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) STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
P 1	LL 5%	0-20	RL, WSBK	Fi, S, P	/	48"	F-C-M SAP INCL 18"-48"	/	.25-.275 0-20 .3 20"-48"
		20-48	RCL, WSBK	FR, SS, SP					
P 2	LL 5%	0-21	RC, WSBK/ABK	Fi, S, P	/	48"	C-M SAP INCL 15"-48"	/	.25-.275 0-21" .3 21"-48"
		21-48	RCL, WSBK	FR, SS, SP					
P 3	LL 5%	0-6	BSCL, WSBK	FR, SS, SP	/	48"	F-C SAP INCL 18"-48"	/	.3
		6-25	RC, SBK	FR/FIRM Fi, SS, SP					
		25-48	RCL, SBK/WSBK	FR, SS, SP					
P 4	LL 2%	0-29	RL, ABK	Fi, S, P	/	48"	F SAP INCL.	/	.275
		29-39	RCL, SBK	FR, SS, SP					
		39-48	RCL, WSBK	" " "					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	APPROVED	APPROVED
Site LTAR	.3	.275

OTHER FACTORS (.1946): —
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: SL
OTHER(S) PRESENT: JAMES ROWLAND

COMMENTS: PITS BARRED IN SAND. 2 WEEKS.

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
C (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	SEXP (Slightly Expansive)	G (Single Grain)
V (Convex Slope)		LS (Loamy Sand)			EXP (Expansive)	M (Massive)
(Drainage Way)						CR (Crumb)
S (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
P (Flood Plain)		L (Loam)				SBK (Subangular Blocky)
S (Foot Slope)						ABK (Angular Blocky)
I (Head Slope)	III	Si (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
(Linear Slope)		SiCL (Silty Clay Loam)				PR (Prismatic)
N (Nose Slope)		CL (Clay Loam)				
R (Ridge)		SCL (Sandy Clay Loam)			MOIST	WET
S (Shoulder Slope)		SiL (Silt Loam)			VFR (Very Friable)	NS (Non-sticky)
T (Terrace)					FR (Friable)	SS (Slightly Sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FI (Firm)	S (Sticky)
		SiC (Silty Clay)			VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
		C (Clay)	None	None	EFI (Extremely Firm)	NP (Non-plastic)
		O (Organic)				SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

*Adjust LTAR dug to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

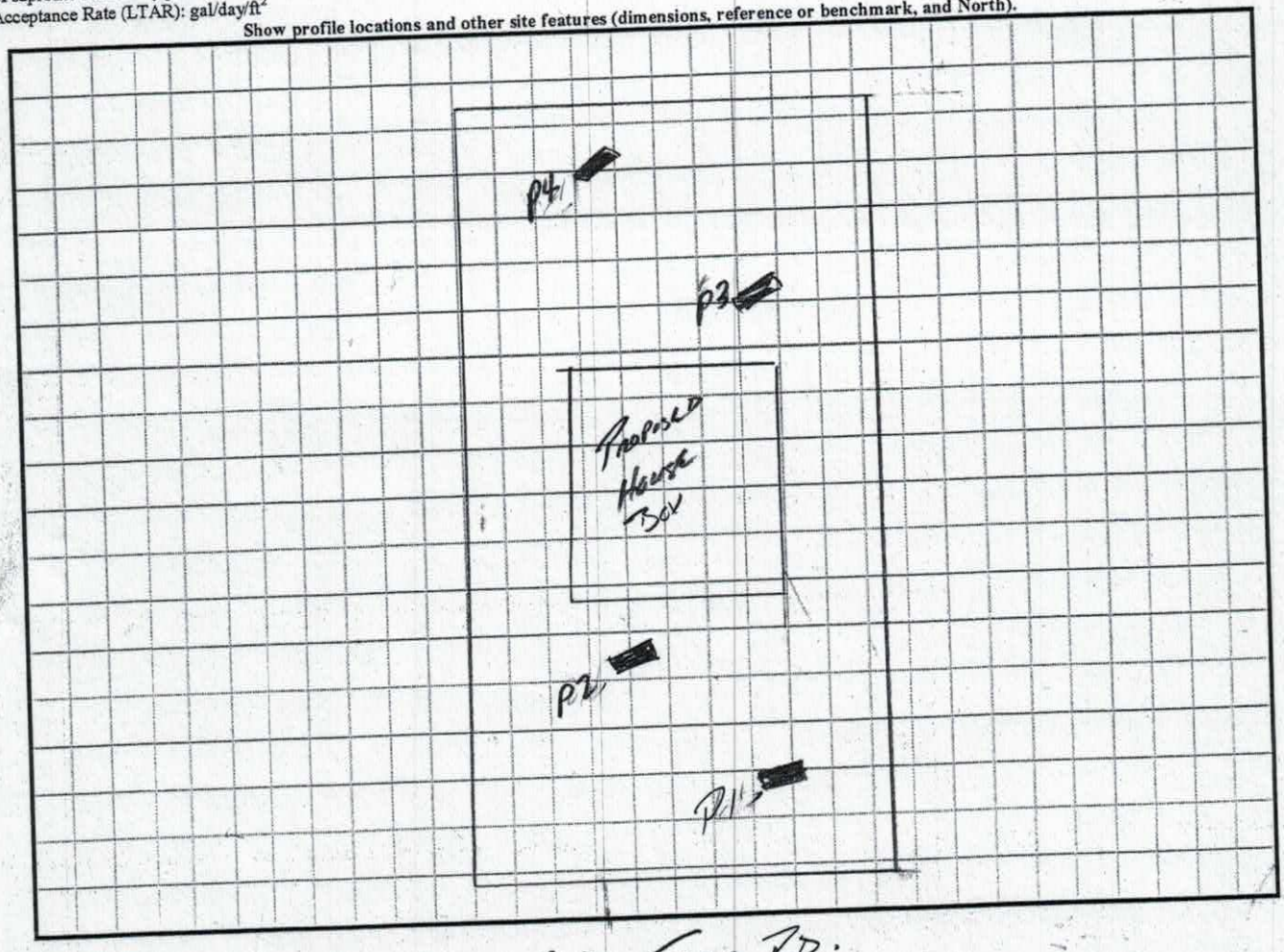
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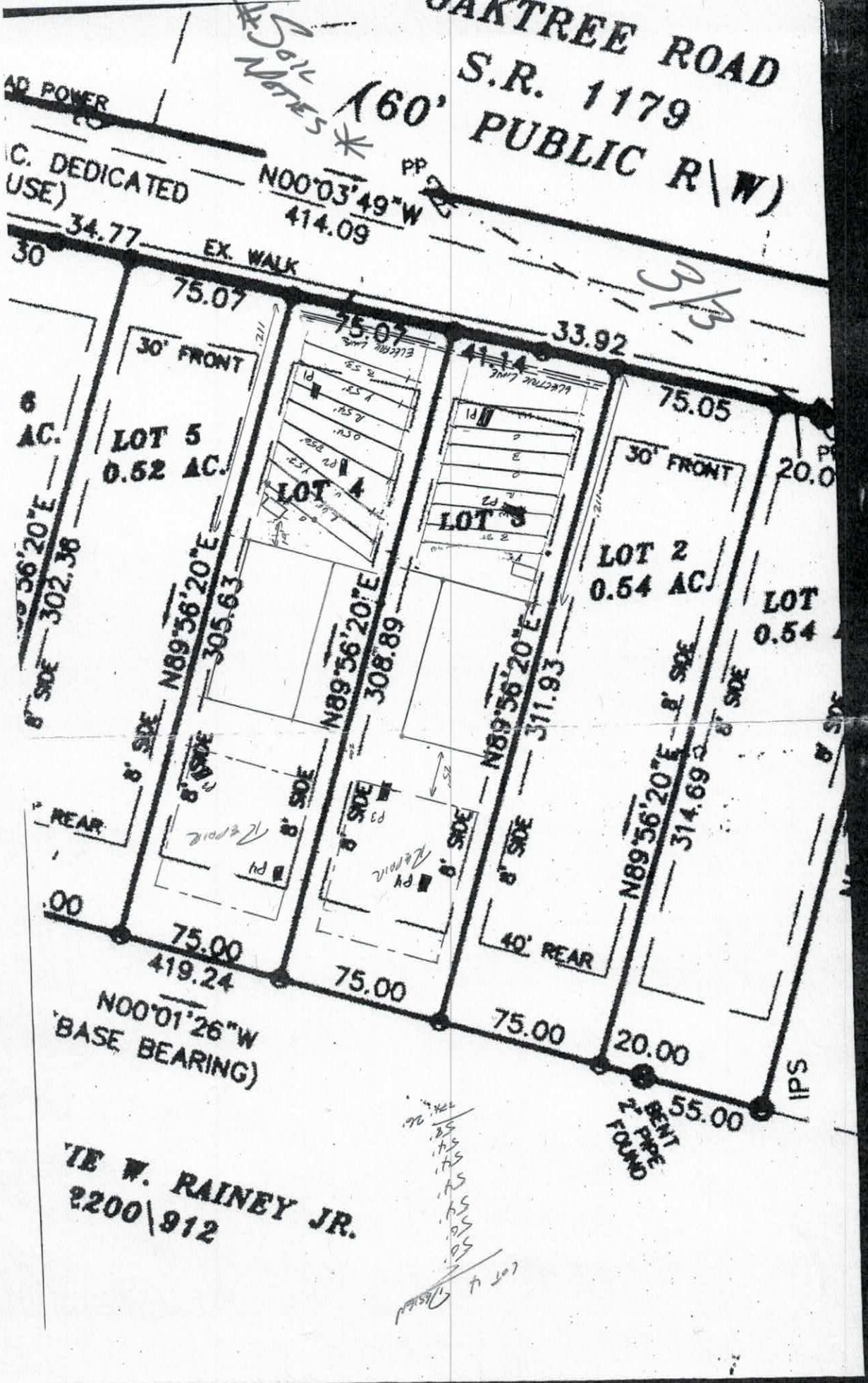
HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
CLASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.

Long-term Acceptance Rate (LTAR): gal/day/ft^2

Show profile locations and other site features (dimensions, reference or benchmark, and North).




OAKTREE ROAD
S.R. 1179
(60' PUBLIC R\W)
AD POWER
C. DEDICATED
USE)
N00°03'49"W
414.09
PP
34.77
EX. WALK
30
75.07
75.07
33.92
75.05
30' FRONT
30' FRONT
LOT 5
0.52 AC.
LOT 4
LOT 3
LOT 2
0.54 AC
LOT
0.54
6
AC.
N89°36'20"E
302.36
305.63
308.89
311.93
314.69
8' SIDE
REAR
40' REAR
75.00
419.24
75.00
75.00
20.00
55.00
N00°01'26"W
BASE BEARING)
IE W. RAINEY JR.
2200\912
IPS

RECEIVED JUL 17 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)

1. APPLICATION FOR: ___Improvement Permit __X__Authorization To Construct ___ Existing System Inspection

2. 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 check ( ) beside whichever is submitted if applicable __X__Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. Applicant Information:

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Rowland Development Corp	2231 Hwy 152 E Olive Grove	704-202-1176	—
Owner Name	Mailing Address	Home Phone #	Alternate Phone #
Gabe Barnhardt	18426 Peninsula Club Dr Cornelius NC	704-506-8556	

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
250 Oak Tree Rd	Grand Oaks	#4

Driving Directions: West on Brawley Sch. Rd, Rt on Oak Tree Rd Lot on Rt.

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

(✓) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
(X) Repair To Failing Septic System due to _____
( ) Other _____

Maximum Number of Bedrooms 4
Maximum Number of Occupants 6
If Expansion, Current Number of Bedrooms ___

(✓) Crawl Space Foundation?
( ) 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:

( ) 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 _____ *Year*

( ) Alternative (✓) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other _____

8. 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. industry) 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.

9. Signature: _____ 7/17/17
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

RECEIVED MAR 1 8 2016

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

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Paid $500.00

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

215543

2. 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 check ( ) beside whichever is submitted if applicable X Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. Applicant Information:

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Rowland Dev. Corp.	2231 Hwy 152 E. China Grove NC 28023	704-506-0556	704-202-1176
Same as above			
Owner Name	Mailing Address	Home Phone #	Alternate Phone #

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
250 Oak Tree Rd, Mooresville	Grand Oaks of IKN (Subdivision)	#4

Driving Directions: 77 to Exit #35, west on Brawley, rt. on Oak Tree, Lot on the Rt

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 4
Maximum Number of Occupants 5
If Expansion, Current Number of Bedrooms ___

X Crawl Space Foundation?
( ) 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:

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

7. Desired Septic System Type: *(You may rank in order of preference, if any)* ( ) EXISTING SYSTEM installed _____ (Year)

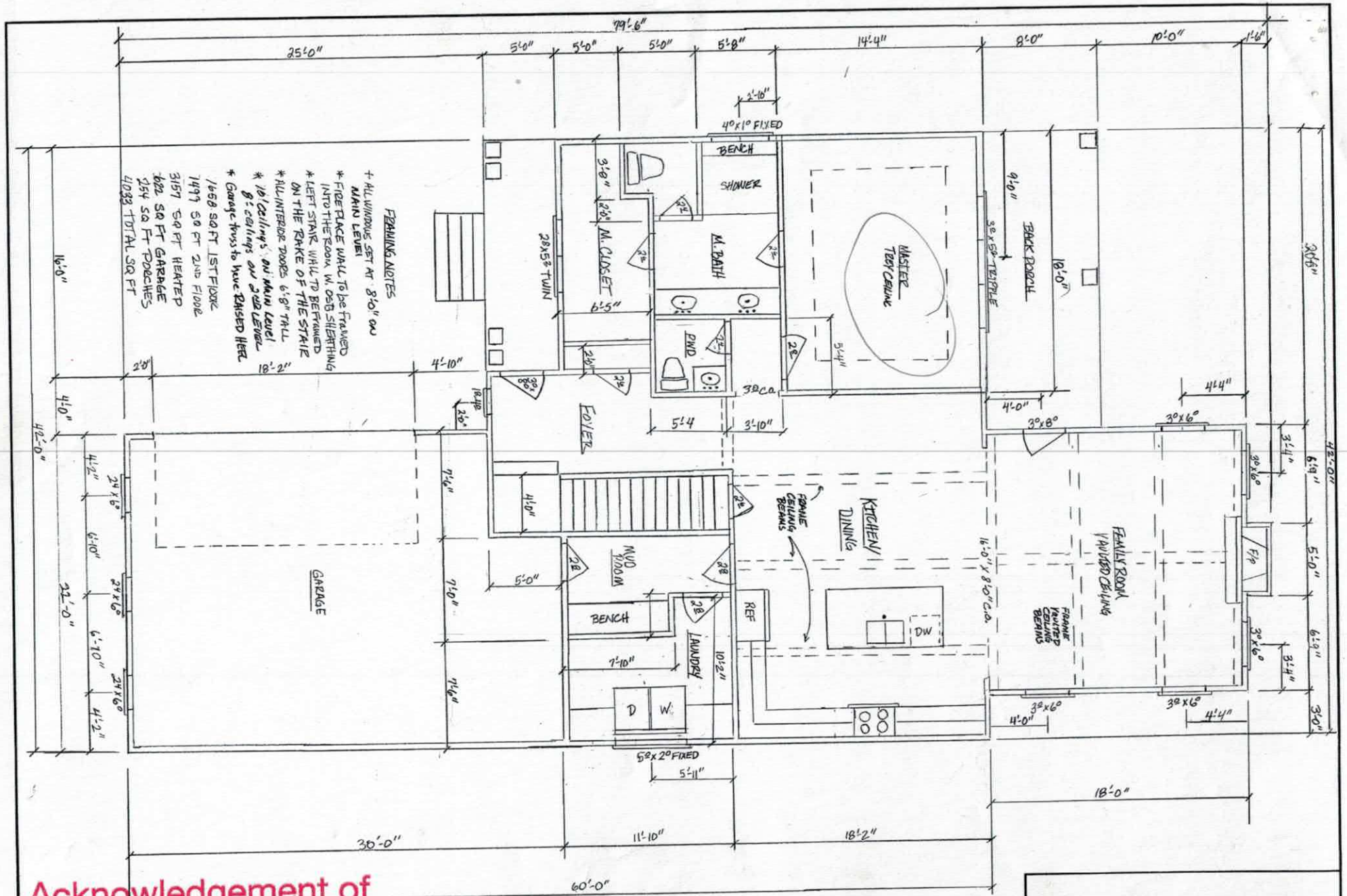
( ) Alternative X Conventional ( ) Innovative ( ) Modified Conventional ( ) Other _____

8. 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. 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: _____ 3/17/16

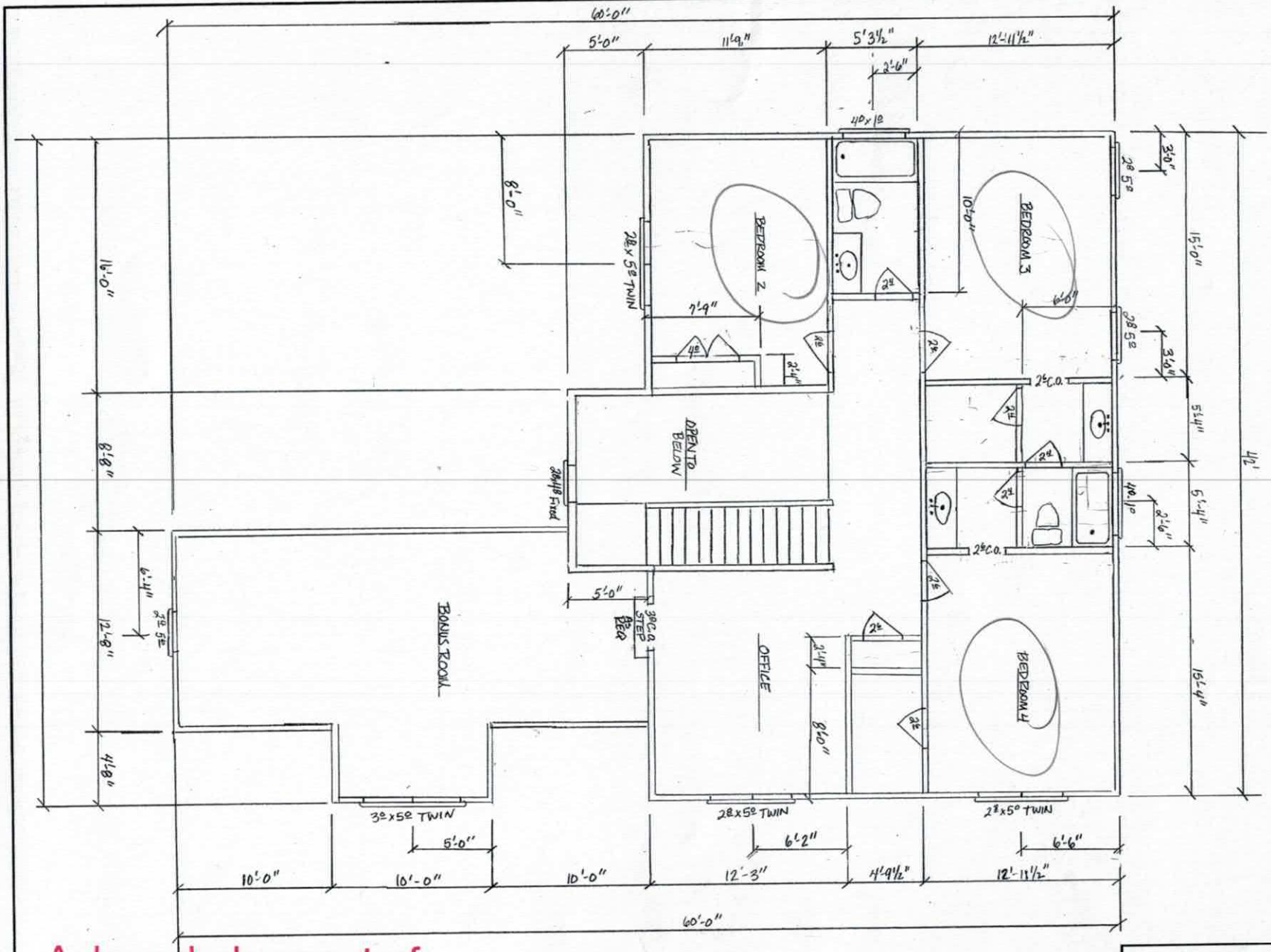
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE



Acknowledgement of Plans Submittal ONLY!

Date 7/7/17

Date 7/7/17



Acknowledgement of Plans Submittal ONLY!

Date 7/17/17

Date 7/17/17

2ND FLOOR PLAN

SCALE:	APPROVED BY:	DRAWN BY
DATE:		REVISED

Lot #4 Oaktree

DRAWING NUMBER

Town of Mooresville Jurisdiction

ZONING APPROVAL

For building permit applications

Development Services 413 North Main St. Mooresville, NC 28115 Phone 704-662-7040

Number: 215543 Subdivision: GRAND OAKS

Proposed Use: PERT TEST FOR SINGLE FAMILY HOME

Location: 250 OAK TREE ROAD

Tax PIN: 4637613523.000 Zoning: R2 Lot: 4 Size: 0.530

Owner/Applicant: ROWLAND DEVELOPMENT CORPORATION
Address: 2231 HWY 152 EAST
CHINA GROVE NC 280230652

I certify that all statements made in this application and any attached documents are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that false information may be grounds for rejection of this application. Authorized Health Department and Inspection Department Representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

_____ Date _____
Signature of Owner or Authorized Agent

If permitted, the following minimum zoning requirements must be met, unless Health Department requires more land area or other qualifications are indicated in the remarks.

Lot Area: Front Yard Depth: 30.00 Side Yard Depth: 8.00
Rear Yard Depth: 40.00 Corner Yard Depth:

$ PAID 150.00 98

Remarks: APPROVAL FOR PERT TEST
NOT FOR CONSTRUCTION - MUST OBTAIN ALL IREDELL COUNTY PERMITS AND INSPECTIONS.

HP
Approved By:

12/18/2015
Date

$50
Application Fee