ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 301264

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

PIN # 4638011872000

APPLICANT/OWNER: Erica Blankship | APPLICANT ADDRESS: 17936 W Hatcher Rd Arizona 85355

SITE ADDRESS: 114 Sherbrook Ln Mooresville NC 28117 | PHONE: — | ALT. PHONE 704-578-4951 (LSS)

SITE DIRECTIONS: 150 W, Waddell, Hermance, Sherbrook | SAP CONTROLLED: [X] YES [ ] NO

SUBDIVISION: Fisherman Cove | SECTION: — | LOT # 3 | LOT AREA: .574 AC | DESIGN FLOW: 360 gpd | L.T.A.R.: .30

Septic Tank	1000	(gal)	STB 794	Date	4/29/2020	[X] New System [ ] Repair [ ] Expansion	System Type: I II III IV V VI	[X] Residence	No. Bedrooms 3
Pump Tank	—	(gal)	PT —	Date	—	System Description:	Gravity - PPBPS	[ ] Business	No. Persons 6
Pump Make	—	Model	—	Serial #	—	Repair System Description:	LP - PPBPS -	[ ] Other	No. Employees —
# Nitrification Fields	1	# Lines	5	Linear Ft	200	Maintenance Agreement Required:	[ ] YES [X] NO	[ ] Slab	[ ] Crawl Space
Trench Width	24 in	Trench Bottom Depth(Low side)	30	Gravel Depth	—	[X] GRAVITY	[ ] PRESSURE	[X] Basement w/plumbing	[ ] Basement w/o plumbing

Water Supply: [ ] Private [ ] Public [ ] Community

Comments / Conditions: See New Proposal from March 17, 2020 using Floorplan on File from 11/18/19.

INITIAL SITE SKETCH

This permit is issued pursuant to Section 11 . (C) of S.L. 2018-114 using the signed and sealed LSS Evaluation by:

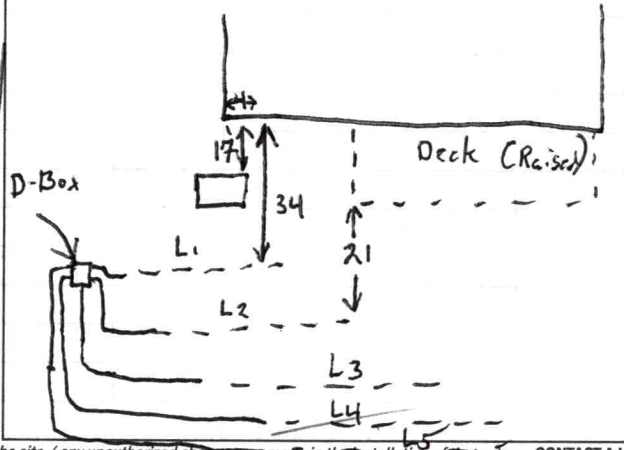
The Oaks Group, PA

LSS # 1313

AS BUILT SKETCH

6/12/2020: Dellinger Mid-seam 1000-gallon conc tank w/ Polylok PL-68 effluent filter.

	Length	# Panels	
L1	40	9	verified ok by laser, 30" TB
L2	40	9	
L3	40	9	
L4	40*	9	Already covered 30" (OK)
L5	40*	9	



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.* [X] **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Acknowledgment of Acceptance Received | Date: 4/1/2020 | Installed by: Abernathy Grading + Septic

IMPROVEMENT PERMIT by: Benjamin A Botts | Date: 4/1/2020 | OPERATION PERMIT by: Tom Struck | Date: 6/12/2020

AUTHORIZATION TO CONSTRUCT by: Benjamin A Botts | Date: 4/1/2020 | Existing System Inspected by: | Date:

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.

IREDELL COUNTY HEALTH DEPARTMENT
JANE HINSON, RN BSN MS
HEALTH DIRECTOR

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

ACKNOWLEDGEMENT OF ACCEPTANCE OF PERMIT DESIGN AND CONDITIONS

Any permit requiring a signature must have this form signed by the property owner or their authorized agent. Once this form is signed and returned to Environmental Health an official copy of the permit will be emailed to the email that you provide.

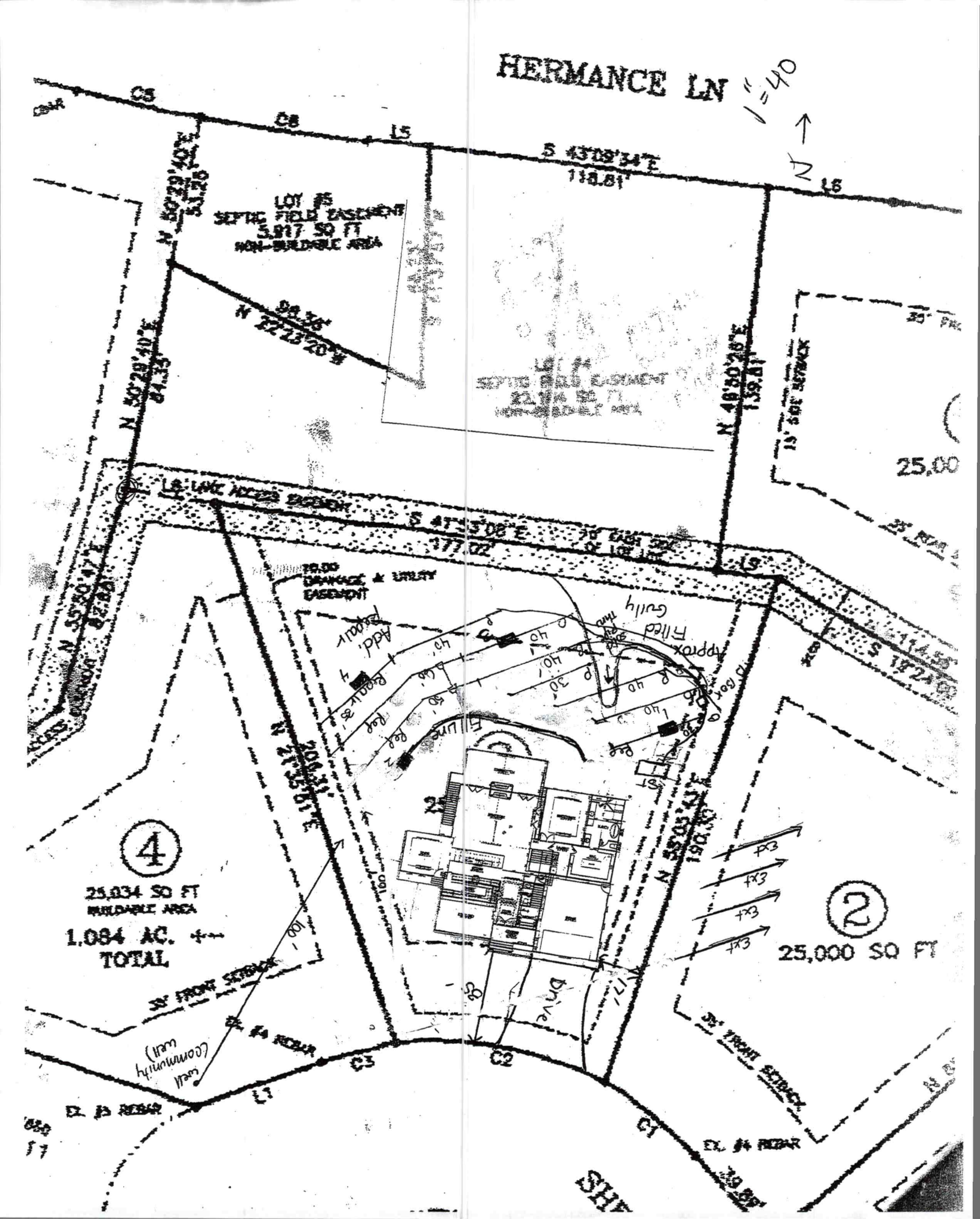
I, Kathleen Saunders, am the legal owner or the agent of the property located at 114 Sherbrook LN, identified as PIN(Parcel Identification Number) 4638 01 1872, located in Iredell County, North Carolina.
Permit # 301264.

I do hereby agree to the permit design and the conditions of this permit.

Kathleen Saunders 4-1-2020
Signature of Owner/Agent Date

4-1-2020
Signature of Witness Date

KathleenMSaunders@gmail.com
email


HERMANCE LN
1"=40'
N
C3
C8
L5
S 43°08'34"E
118.81'
L6
LOT #5
SEPTIC FIELD EASEMENT
3,817 SQ FT
NON-BUILDABLE AREA
N 50°28'40"E
84.33'
N 22°23'20"W
88.36'
LOT #4
SEPTIC FIELD EASEMENT
N 48°30'26"E
139.81'
25.00
LA LAKE ACCESS EASEMENT
S 47°33'08"E
177.02'
L9
S 15°24'
114.55'
10.00
DRAINAGE & UTILITY
EASEMENT
Addl. Reqd.
Approx Filled Gully
Reqd. 35'
Fill Line
Rear
Box
Fill Line
N 21°55'01"E
204.31'
N 55°03'47"E
190.80'
4
25,034 SQ FT
BUILDABLE AREA
1.084 AC. +/-
TOTAL
2
25,000 SQ FT
100'
30' FRONT SETBACK
EX. #4 REBAR
Community well
C3
C2
C1
L7
Drive
EX. #3 REBAR
EX. #4 REBAR
30' FRONT SETBACK
SHE

THE OAKS GROUP, PA

To: Iredell County Environmental Health Department (ICHD)

From: Kathleen Saunders, LSS

RE: 114 Sherbrook Lane

Date: March 17, 2020

Attached is the septic specification information required to permit 114 Sherbrook Lane for an Improvement Permit and/or Construction Authorization Permit in Iredell County via the Session Law 14 permitting process.

The attached information is not an Improvement Permit or an Authorization to Construct, and is only to assist the Iredell with permitting. The ICHD has to approve each lot and only the ICHD can issue these permits. The system should be installed according to the ICHD permits, policies, and NC Rules, which these specifications are in accordance with. If the ICHD wishes to change tank locations, distribution devices, etc they may do so at their discretion.

All information and specifications have been prepared in conjunction with ICHD permitting guidelines for the current lot owners to acquire an Improvement Permit and/or Authorization to Construct on this lot. It is ultimately the ICHD's responsibility to verify all specifications, **excluding** soil descriptions, before permitting and/or septic system installation. The site contains highly variable soils; there may be soil features present that were not encountered during the evaluation.

The LSS Evaluation attached to this application is to be used to produce design and construction features for permitting in accordance with SL 2018-114 Section 11.(c). The LSS Evaluation is being submitted pursuant to and meets the requirements of SL 2018-114 11.(c). The LSS Evaluation contains sufficient information to produce design and construction features for an IP/CA, and the LSS contains the proper insurance with the proper coverage.

Kathleen Saunders

LICENSED SOIL SCIENTIST
KATHLEEN M. SAUNDERS
THE GREAT SEAL OF THE STATE OF NORTH CAROLINA
1313
STATE OF NORTH CAROLINA

Fishermans Cove Lot 3 Septic System Information

Number of Bedrooms	3
Basement or Crawl	**Concrete Slab**
Design Flow (gpd)	360
LTAR (gpd/ft2)	0.3
Primary System Type	**PPBPS**
No. Lines	5 (See Table)
Total Linear Feet	200
Trench Width	2' min.
Trench Spacing	8' min.
Trench Depth Low Side	~~18~~ 30" KMS
Pump Required	No
Distribution Device	Distribution Box
Maintenance Agreement Required	No
Length and Diameter of Supply Pipe	30 ft of 2" SCH 40 PVC
Repair System	**LP PPBPS**
Total Linear Feet	205
Repair LTAR	0.3

Table 1: Summary of Primary and Repair Nitrification Line Specifications

Line No.	Use	Line Color	System Type	Line Length (Ft.)	Panels
1	Repair	Blue	LP PPBPS	30	
2	System	Orange	PPBPS	40 endfed	9
3	System	Red	PPBPS	40 endfed	9
4	Repair	Pink	LP PPBPS	30	
5	System	Blue	PPBPS	40 endfed	9
6	Repair	Blue	LP PPBPS	50	
7	System	Orange	PPBPS	40 endfed	9
8	Repair	Orange	LP PPBPS	60	
9	System	Pink	PPBPS	40 endfed	9
10	Repair	Pink	LP PPBPS	35	
					Total: 45
				Total System:	200'
				Total Repair:	205'

Tank	Red	1000
Pump Tank	Red	
House	Blue	

Note: Place tank to achieve gravity flow to uppermost line

The LSS evaluation attached is being submitted pursuant to and meets the requirements of SL 2018-114 Section 11.(c).

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

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

OWNER: Erika Blankenship
ADDRESS: 114 Sherbrook
PROPOSED FACILITY: SFR
PROPOSED DESIGN FLOW (.1949): 360
LOCATION OF SITE: Fishermans Cove Lot 3
APPLICATION DATE ___
DATE EVALUATED: 9/4/19
PROPERTY SIZE: 0.57
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	L 15-18%	0-33	Mo SBK C	FR SS/SP	R R;C sap	54+	N/A	N/A	0.3
		33-54	WK SBK C	↓					
2	L 22-25%	0-35	Mo SBK C	FR SS/SP	R R;C sap	56+	N/A	N/A	0.3
		35-56	WK SBK CL	↓					
3	L 20-25%	0-28	Mo SBK C	FR SS/SP	R R;C sap Multi	38"	PS	N/A	0.3
		28-38	WK SBK C	↓					
		38-60	MA L sap	↓					
4	L 20-25%	0-37	Mo SBK C	FR SS/SP	R R;C sap Multi	49"	PS	N/A	0.3
		37-49	WK SBK CL	↓					
		49-58	MA SL sap	↓					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	IIIg	IV H
Site LTAR	0.3	0.3

OTHER FACTORS (.1946): PS
SITE CLASSIFICATION (.1948): ___
EVALUATED BY: KMS
OTHER(S) PRESENT: ___

LICENSED SOIL SCIENTIST
KATHLEEN M. SAUNDERS
1313
STATE OF NORTH CAROLINA

COMMENTS: ___

Kathleen Saunders

Updated February 2014

RECEIVED MAR 27 8 2020 Paid $500 Session Law

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

AP-301264

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) Septic Improvement Permit (X) Authorization to Construct ( ) Existing System Inspection ( ) Septic System Repair

Same FP as already on file

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: Erika Blankenship Address: 17936 W Hatcher Rd AZ Zip: 85355

Applicant Email: _____ Phone: _____ Alt. Phone: _____

Owner Name: Same Address: _____ Zip: _____

Owner Email: _____ Phone: _____ Alt. Phone: 704-578-4951 (LSS)

Property Information:

Street Address: 114 Sherbrook LN 28117

Subdivision Name: Fishermans Cove Section/Phase: _____ Lot Number: 3

Driving Directions: 150 W, Waddell, Hermance, Sherbrook

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

(X) 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: 3
Maximum Number of Occupants: 6
( ) Swimming Pool
( ) Other Addition/Structure: _____

CHECK FOUNDATION TYPE
( ) Crawl Space Foundation
( ) Concrete Slab Foundation
(X) 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 (X) 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 (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industrial) 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.

Signature: Kathleen Saunders 3-18-2020
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

RF

RECEIVED MAR 2 7 2020

AUTHORIZATION TO ACT AS AGENT FOR OWNER

Any application/document/permit requiring a signature must be signed by the property owner or their authorized agent. This form shall be provided by the owner to allow specified individuals to act as agents for the owner. This form allows the specified individuals to sign or receive any application/document/permit on behalf of the owner. This form allows the authorized agent to make decisions on behalf of the owner pertaining to modifications of permits in the field. It is the responsibility of the owner to assure that any/all permit conditions specified on permits issued by this Division are followed.

I, Erika Blankenship, am the legal owner of the property located at 114 Sherbrook LN 28117, identified as PIN(Parcel Identification Number)_____, located in Iredell County, North Carolina.

I do hereby authorize (print authorized agent/company name) The Oaks Group, Blake Haugland, _____, _____, _____, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

1. Improvement Permit (IP)/ Authorization to Construct (AC).
2. Application for soil-site evaluation (new/repair).
3. Application/permit for water well/well abandonment.
4. Application for existing system.
5. Application for Improvement Permit (IP)/ Authorization to Construct (AC).

I agree to abide by any and all decisions and/or conditions between the agent acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division. This form must be fully executed before the individual's specified above will be recognized as the authorized agent.

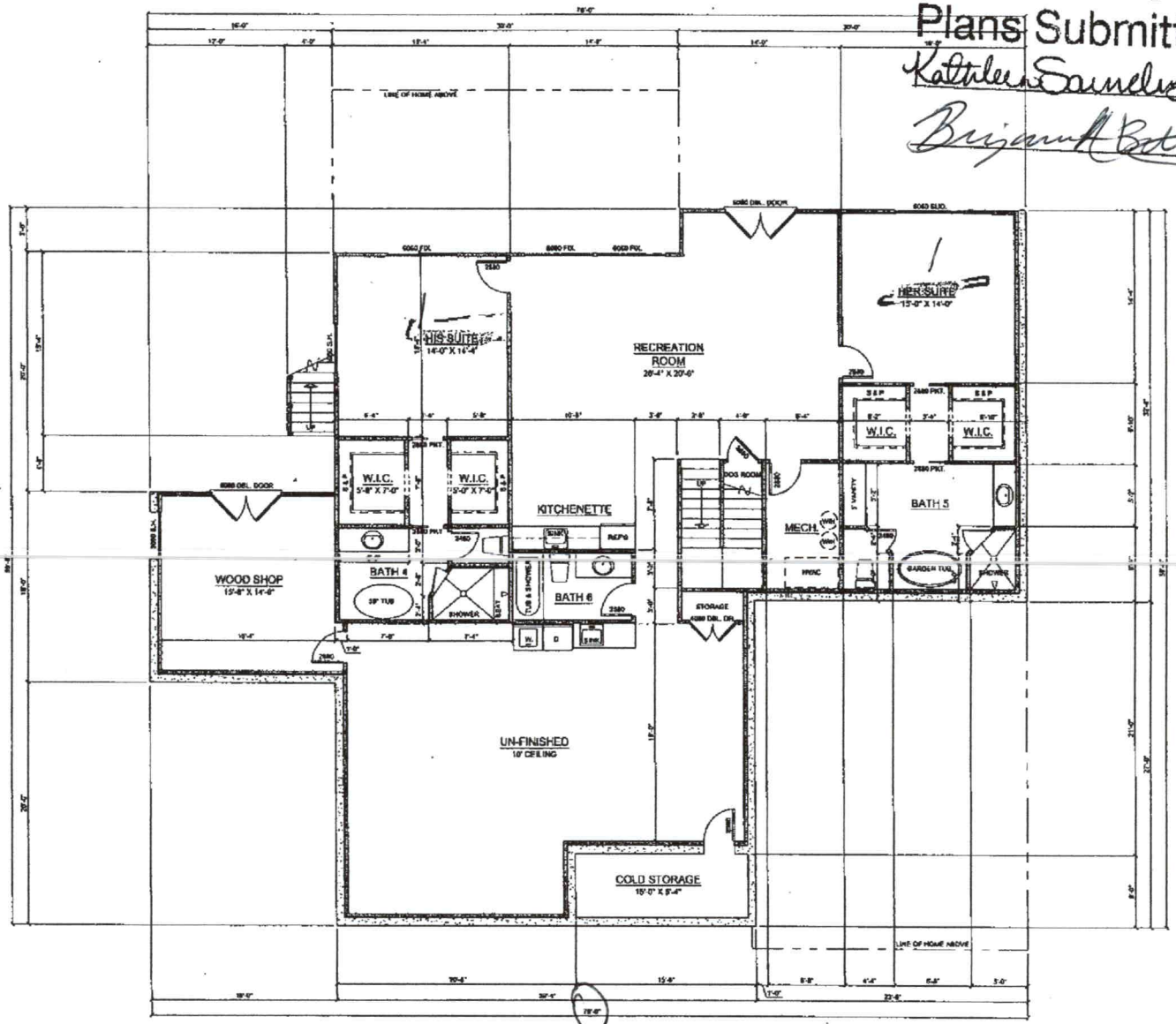
Michael Blankenship — 3/25/20

Signature of Owner — Date

_____ — _____

Signature of Witness — Date

Acknowledgement Of
Plans Submittal ONLY
Kathleen Sanneby Date 9-27-19
Brijamin A Bat Date 11/18/19



BASEMENT FLOOR PLAN SCALE 1/4" = 1'-0"
3,087 SQ. FT. (LIVING)

FINAL DRAFT CUSTOM HOME DESIGN
THOMAS WARD
Phone: (435) 467-4046
E-mail: finalcraft05@hotmail.com
www.facebook.com/finalcraftplans/

PLANS PREPARED FOR:
ERIKA BLANKENSHIP
(602)931-0418

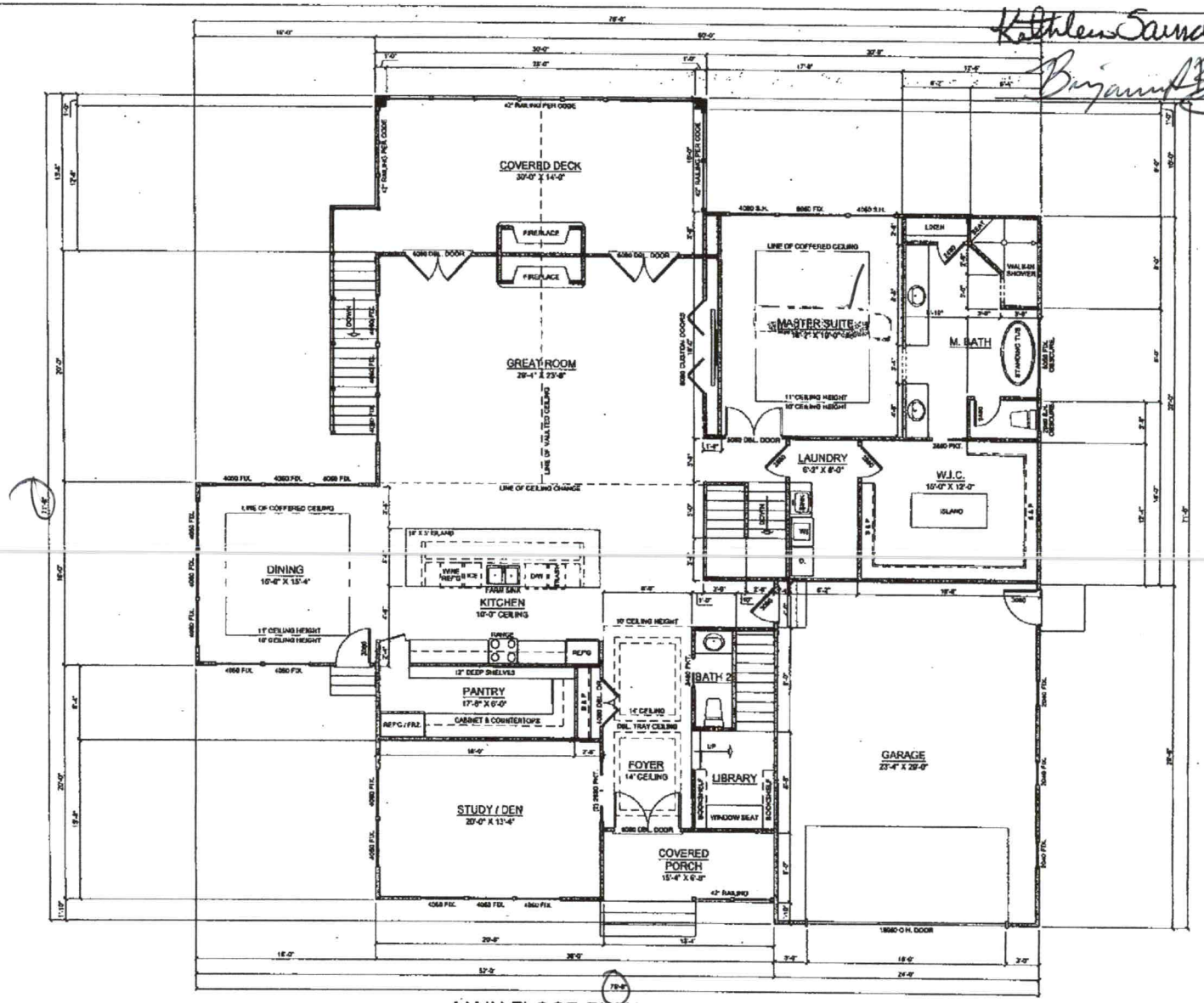
GENERAL CONTRACTOR:

TOM
8/30/2019
NOTED
CUSTOM HOME
A-4
13

Acknowledgement Of
Plans Submittal ONLY!

Kathleen Saunders Date 9-27-19

Benjamin Bates Date 10-9-19



MAIN FLOOR PLAN

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

2,992 SQ. FT. (LIVING)

FINAL DRAFT CUSTOM HOME DESIGN

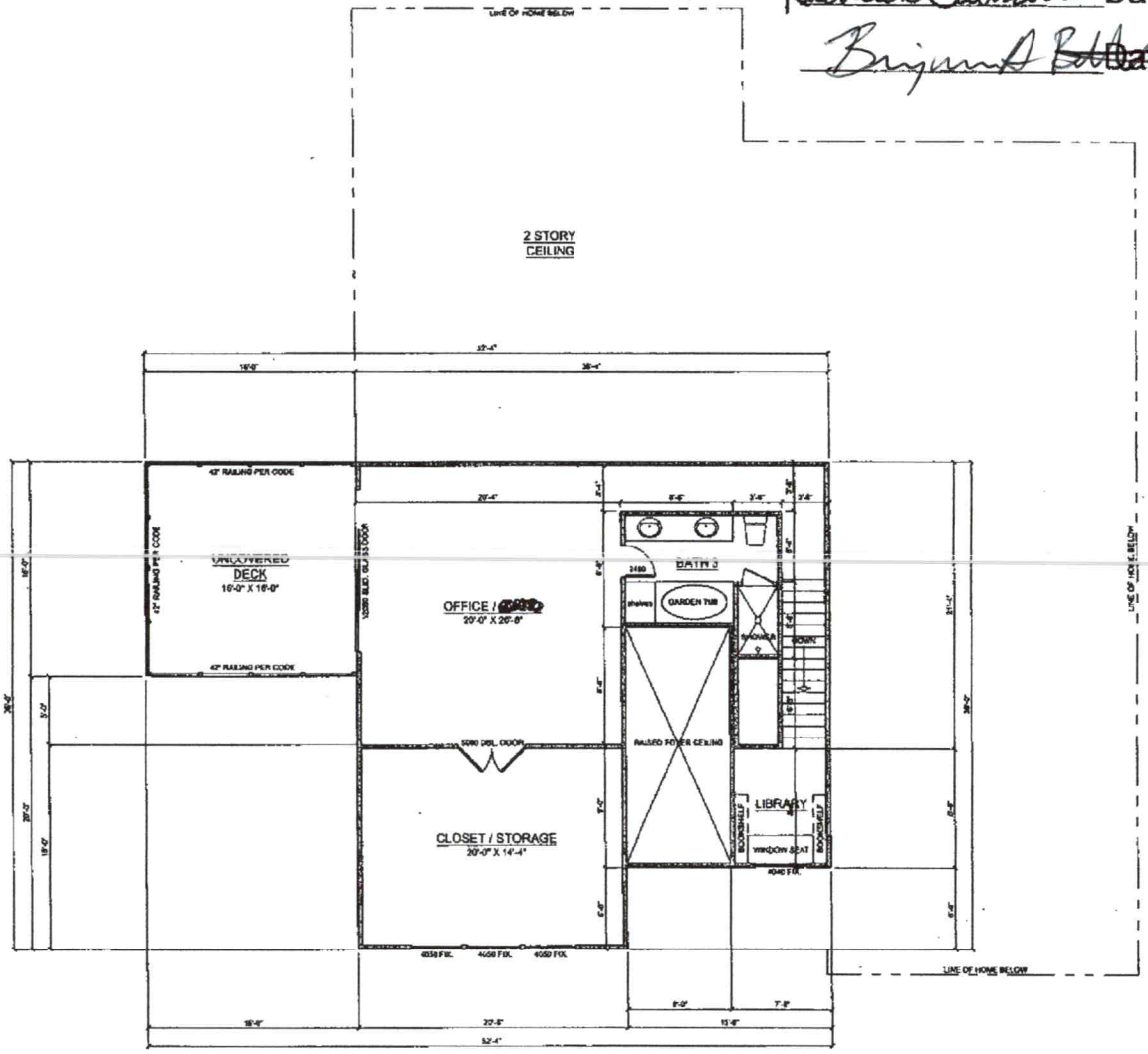
THOMAS WARD E-mail: finaldraft05@gmail.com
Phone: (435) 467-4046 www.facebook.com/finaldraftplans/

PLANS PREPARED FOR:
ERIKA BLANKENSHIP
(602)931-0418

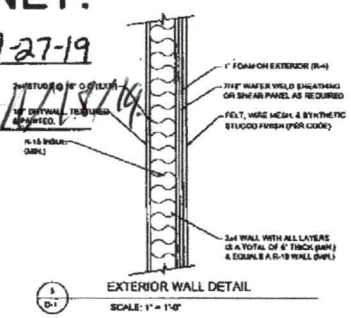
GENERAL CONTRACTOR:

TOM	
8/30/2019	
NOTED	
CUSTOM HOME	
A-3	

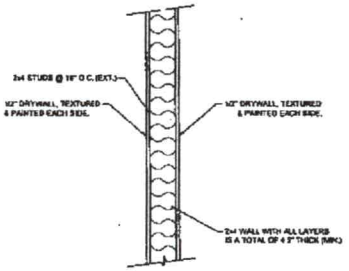
Acknowledgement Of
Plans Submittal ONLY!
Kathleen Saunders Date 9-27-19
Brigham Baldate 9/28/19



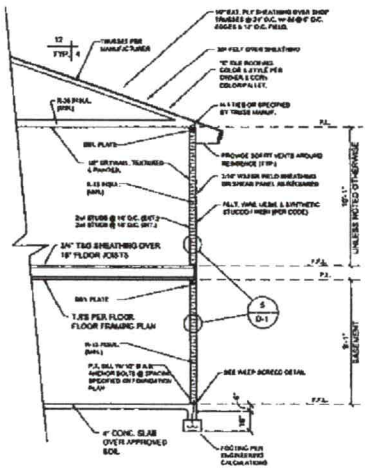
UPPER FLOOR PLAN
934 SQ. FT. (LIVING)
SCALE: 1/4" = 1'-0"



EXTERIOR WALL DETAIL
SCALE: 1" = 1'-0"



INTERIOR WALL DETAIL
SCALE: 1" = 1'-0"



SECTION "B"
TYPICAL 2-STORY WALL SECTION
SCALE: 1/4" = 1'-0"

FINAL DRAFT CUSTOM HOME DESIGN
THOMAS WARD E-mail: finaldraft05@hotmail.com
Phone: (435) 467-4046 www.facebook.com/finaldraftplans/

PLANS PREPARED FOR:
ERIKA BLANKENSHIP
(602)931-0418

GENERAL CONTRACTOR:

DESIGN	TOM
DATE	8/30/2019
SCALE	NOTED
TYPE	CUSTOM HOME
SHEET	A-5

IREDELL COUNTY · NC

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

APPLICATION NUMBER
301264 Issue Date: 09/27/2019

Permit Type: ZONING RESIDENTIAL

Parcel Number	Street Address	Jurisdiction
4638011872.000	114 SHERBROOK LN	IREDELL COUNTY

Owner Information	Applicant Information
Name: Michael + Erika Blackenship	Name: THE OAKS GROUP
Address:	Address: 121 HOLT LN MOORESVILLE, NC 28117
Phone:	Phone: (704)578-4951

Use Requested	Zone Code
Single Family Dwelling	RR

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.574	35	35	15	15	WSIV-CA Catawba/Lake Norman	NO

Remarks
SFD

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.

Signature of Owner/Contractor

Date: 09/27/2019

Permit Number	000420	TOTAL FEES:	$77.25