IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 226681

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

PIN # 4638-05-2085

APPLICANT: Ted Burk APPLICANT ADDRESS: 4534 Burris Rd. Denver, NC 28037

SITE ADDRESS: 123 Pleasant Way Lane Mooresville, NC 28117 PHONE: 704-560-0095 ALT. PHONE:

SITE DIRECTIONS: Highway 150 W → R on Robinson Rd → L on Pleasant Way Lane → Lot @ end of Rd

SUBDIVISION: CL+T SECTION: 11 LOT # 191 LOT AREA: 0.720 acres DESIGN FLOW: 480 GPD L.T.A.R.: 0.30

Septic Tank	1000	(gal)	STB	2071-[illegible] PLASTIC	☐ New System	☐ Repair	☒ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms	4	Water Supply					
Pump Tank	—	(gal)	PT	—	Date	—	System Description:	Existing Bed + 25% Reduction / Septic Tank	☐ Business	No. Persons	8	☒ Private (existing)					
Pump Make	—	Model	—	Serial #	—	Repair System Description:	(1 Bedroom) TS II Drip (1998 org permit)	☐ Other	No. Employees		☐ Public						
# Nitrification Fields	1	# Lines	3 New	Linear Ft:	100	Maintenance Agreement Required:	☐ YES	☒ NO	☐ Slab	☒ Crawl Space		☐ Community					
Trench Width	36"	Trench Bottom Depth	24"-36" [illegible]	Gravel Depth	—		☒ GRAVITY	☐ PRESSURE	☐ Basement w/plumbing			☐ Basement w/o plumbing					

Comments / Conditions: Original permit dated 3-31-1978 for 3-Bedrooms. Original tank to be pumped, limed + crushed in place. Original septic Bed to remain as originally installed. Recommend pumping the septic tank every 3-5 years.

TANK & LINES CHECKED, NEEDS FOUNDATION DRAIN OUTLETS REROUTED, NEED PROPERTY LINES & 50FT BUFFER MARKED TO VERIFY LOCATION

INITIAL SITE SKETCH

See attached plans from Michael Athanas Associates.

Dated/Received: 4/27/2017 Michael Athanas LSS # 1252

AS BUILT SKETCH

	Date	Initials
Drain Lines Checked	12-6-18	BW
Tanks Checked	12-6-18	BW
Pressure Manifold or Valve Box Checked		
Pressure Head Set		
Electrical Checked		
Floats Set		
Alarm Checked		
Maintenance Contract Y / N		

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

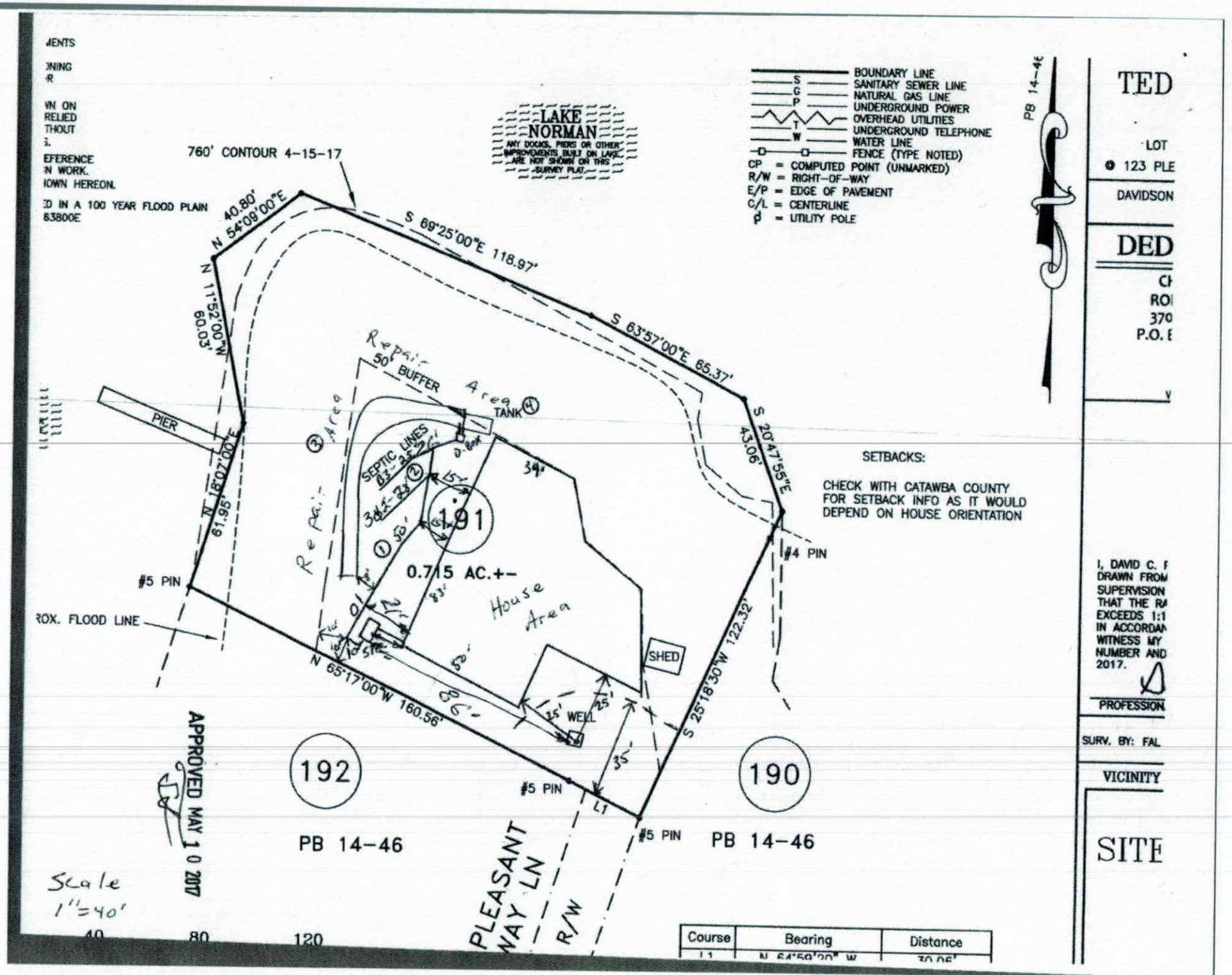
☐ IMPROVEMENT PERMIT with plat valid without expiration. ☒ IMPROVEMENT PERMIT with site plan valid for 60 mos. ☒ AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: Christel Z Byrd Date: 5/15/17 Installed by: RICHARD ABERNATHEY

IMPROVEMENT PERMIT by: Tom Shuck Date: 5/10/2017 OPERATION PERMIT by: Bryant C. White (ad) Date: 4-16-19

AUTHORIZATION TO CONSTRUCT by: Tom Shuck Date: 4/5/2018 Existing System Inspected by: Date:

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


LAKE NORMAN
ANY DOCKS, PIERS OR OTHER IMPROVEMENTS BUILT ON LAKE ARE NOT SHOWN ON THIS SURVEY PLAT.
BOUNDARY LINE
SANITARY SEWER LINE
NATURAL GAS LINE
UNDERGROUND POWER
OVERHEAD UTILITIES
UNDERGROUND TELEPHONE
WATER LINE
FENCE (TYPE NOTED)
CP = COMPUTED POINT (UNMARKED)
R/W = RIGHT-OF-WAY
E/P = EDGE OF PAVEMENT
C/L = CENTERLINE
= UTILITY POLE
760' CONTOUR 4-15-17
40.80'
N 54°09'00"E
N 11°52'00"W
60.03'
S 69°25'00"E 118.97'
S 63°57'00"E 65.37'
S 20°47'55"E
43.06'
N 18°07'00"E
61.95'
PIER
50' BUFFER
Repair Area
TANK
SEPTIC LINES
Repair Area
House Area
SHED
WELL
191
0.715 AC.+-
#5 PIN
#4 PIN
#5 PIN
#5 PIN
N 65°17'00"W 160.56'
S 25°18'30"W 122.32'
192
190
PB 14-46
PB 14-46
PLEASANT WAY LN R/W
SETBACKS:
CHECK WITH CATAWBA COUNTY FOR SETBACK INFO AS IT WOULD DEPEND ON HOUSE ORIENTATION
Course
Bearing
Distance
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N 64°59'20" W
30.06'
Scale 1"=40'
40
80
120
APPROVED MAY 10 2017
PB 14-46
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SURV. BY: FAL
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SITE



MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887

Reference: Data Sheet for 123 Pleasant Way Ln, CL&T Sec 11, Lot 191
House Footprint: See attached plan
Building Setbacks: 35' front, 15' side, 50' lake
Water Source: Private Well
Number of Bedrooms: 4/480 GPD
Proposed LTAR: 0.3 GPD/FT2 (initial), 0.1 GPD/FT2 (repair)
Proposed System Type: Existing system + 25% Reduction
Proposed Repair System Type: Pretreatment Drip irrigation
Distribution: Gravity-End cap/Drop boxes-Distribution box
Septic Tank Size: 1000 gallons
Proposed Trench Bottom: 24-36"

Line	Design Length	Actual Length
Orange 1	50'	50'
Yellow 2	28'	32'
Blue 3	25'	25'
White-Existing System		



Initial System: 103' + Ex sys **Repair Sysfem:** 1200+ft2

Comments:
The existing system is a three bedroom bed. A very small corner of the bed (approximately 10 FT2) crosses into the 50' setback. ~~MA&A are proposing to remove the portion of the bed and add to the new lines.~~ We are proposing to add 100' of 25% reduction system to increase to a four bedroom system. The existing septic tank will be abandoned and a new tank installed. The house area is marked in pink and white flags.

Leave existing septic bed as originally installed
5/10/17

APPROVED MAY 10 2017

PROPERTY ID #: 4638052085
COUNTY: Iredell

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

OWNER: Stephen Barger
ADDRESS: 4804 South Island Ct, N Myrtle Beach, SC 29582
PROPOSED FACILITY: 4 bdrm
PROPOSED DESIGN FLOW (.1949): 480 GPD
LOCATION OF SITE: 123 Pleasant Way Ln, CL&T Sec 11, Lot 191
APPLICATION DATE
DATE EVALUATED:
PROPERTY SIZE: 0.715 AC
PROPERTY RECORDED: 9/7/1976

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)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
1	LS 5%	0-28	R C SBK	FR SS SP SEXP	N/A	48"	N/A	N/A	PS 0.3
		28-48	R CL WSBK	FR SS SP SEXP					
2 ✓	LS 5%	0-8	Br SCL WSBK	FR SS SP SEXP	N/A	48"	N/A	N/A	PS 0.3
		8-30	R C SBK	FR SS SP SEXP					
		30-48	R CL WSBK	FR SS SP SEXP					
3	LS 5%	0-30	R C SBK	FR SS SP SEXP	N/A	48"	N/A	N/A	PS 0.3
		30-48	R CL WSBK	FR SS SP SEXP					
4 ✓	LS 5%	0-24	R C SBK	FR SS SP SEXP	N/A	48"	N/A	N/A	PS 0.3
		24-48	R CL WSBK	FR SS SP SEXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	300 FT2 + BED	1200+FT2
System Type(s)	25% Reduction	DRIP
Site LTAR	0.3	0.1

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: MA&A
OTHER(S) PRESENT: Tom Shuck 5/8/17 (Holes 2+4)

COMMENTS:

APPROVED MAY 10 2017

RECEIVED MAR 2 9 2018

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:

Applicant Name: Chad Goodin Signature **Address:** Home 915 River Hwy Mooresville **Phone:** 704-363-7302

Owner Name: Burk, Ted + Crystal **Address:** 4534 Burris Rd. Denver **Phone:** 704-560-0095

Property Information:

Street Address: 123 Pleasant Way Ln. Mooresville, 28117

Subdivision Name: CL+T **Section/Phase:** 11 **Lot Number:** 191

Driving Directions: 150 to Robinson to Pleasant Way

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

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 4
( ) Swimming Pool
( ) Other Addition/Structure:

(✓) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

Non-Residential Site Development:
Type of Business:
Square Footage of Building:
Maximum Number of Employee:
Maximum Number of Seats/Beds/Other:

Water Supply:

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

3/27/18
DATE

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, Theodore Burk, am the legal owner(s) of the property located at 123 Pleasant Way Mooresville 28117, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Chad Gooden Signature Homes Inc., 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.

Theodore A Burk — 03/27/18
Signature of Owner(s) — Date

Signature of Witness — 3/27/18
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

RECEIVED APR 2 7 2017

IREDELL COUNTY HEALTH DEPARTMENT

Paid $350.00

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM* Expansion #226681

Application For:

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

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Page 2: *Site Plan Worksheet* form MUST accompany this application

The following optional attachments may also be submitted:

Place an (X) beside whichever is submitted if applicable

(X) Survey Plat, scaled no more than 1 inch = 60 feet

( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information:

Applicant Name: Ted Burk Address: 4534 Burris Rd, Denver, NC 28037 Phone: 704-560-0095

Owner Name: Stephen Barger Address: 4804 South Island Ct, N. Myrtle Beach, SC 29582 Phone:

Property Information:

Street Address: 123 Pleasant Way Ln

Subdivision Name: CL&T Section/Phase: 11 Lot Number: 191

Driving Directions: Hwy 150W, TR Robinson, TL Pleasant Way Ln, at end

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

(X) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 4
Maximum Number of Occupants:
( ) Swimming Pool
( ) Other Addition/Structure:

(X) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

Non-Residential Site Development:

Type of Business:
Square Footage of Building:
Maximum Number of Employee:
Maximum Number of Seats/Beds/Other:

Water Supply:

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

Desired Septic System Type: *(you may rank in order of preference)*

( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional (X) Other: Accepted

Year existing system installed: 1978

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: _____ 4/27/2017

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

DigiSign: DDFFD9B0-24C9-4C01-8EF1-8746C99B4774

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

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

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

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

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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, Stephen L Barger & Frances Charlotte F Barger, am the legal owner(s) of the property located at 123 Pleasant Way Lane, Mooresville, NC 28117, identified as PIN (Parcel Identification Number) 4638-05-2085, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Michael Athanas, Michael Athanas & Associates, 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.

Stephen L. Barger Charlotte F. Barger 04-22-2017 — Paul Tyson — 04-22-2017 10:20 AM EDT

Signature of Owner(s) | Date | Signature of Witness | 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

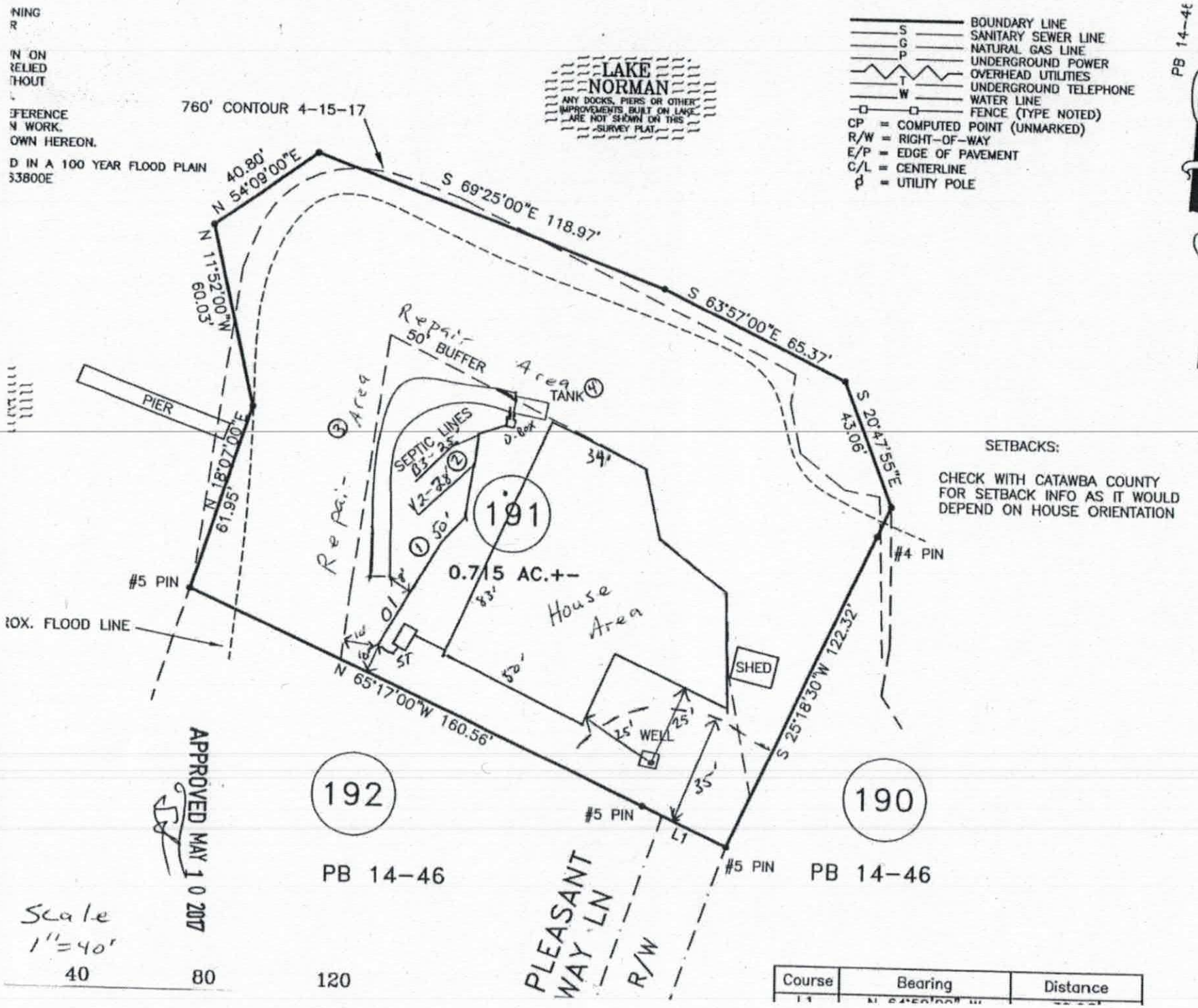
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SETBACKS:

CHECK WITH CATAWBA COUNTY FOR SETBACK INFO AS IT WOULD DEPEND ON HOUSE ORIENTATION

APPROVED MAY 10 2017

Scale
1"=40'
40 80 120

Course	Bearing	Distance
L1	N 64°50'00" W	

PB 14-46

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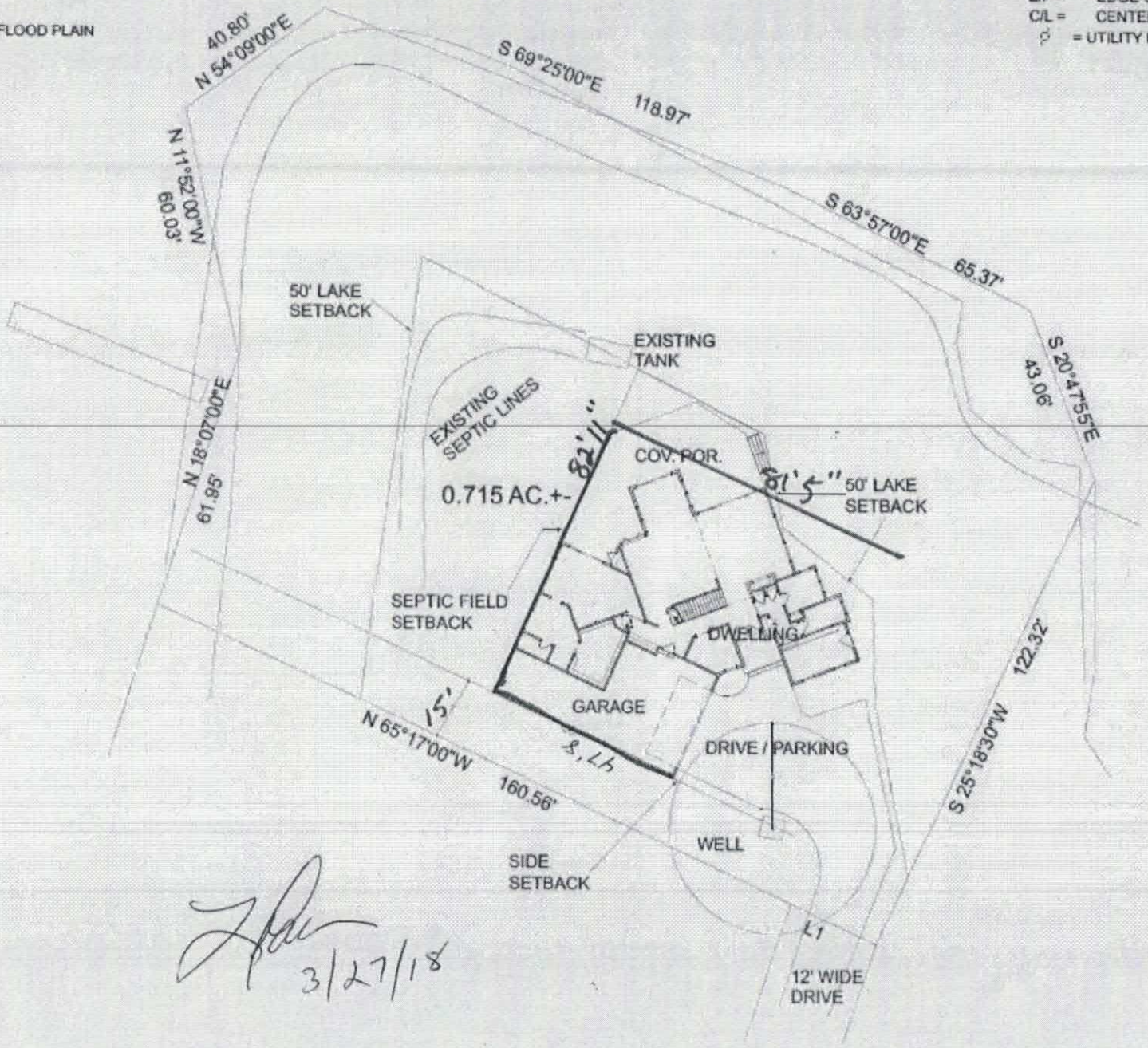
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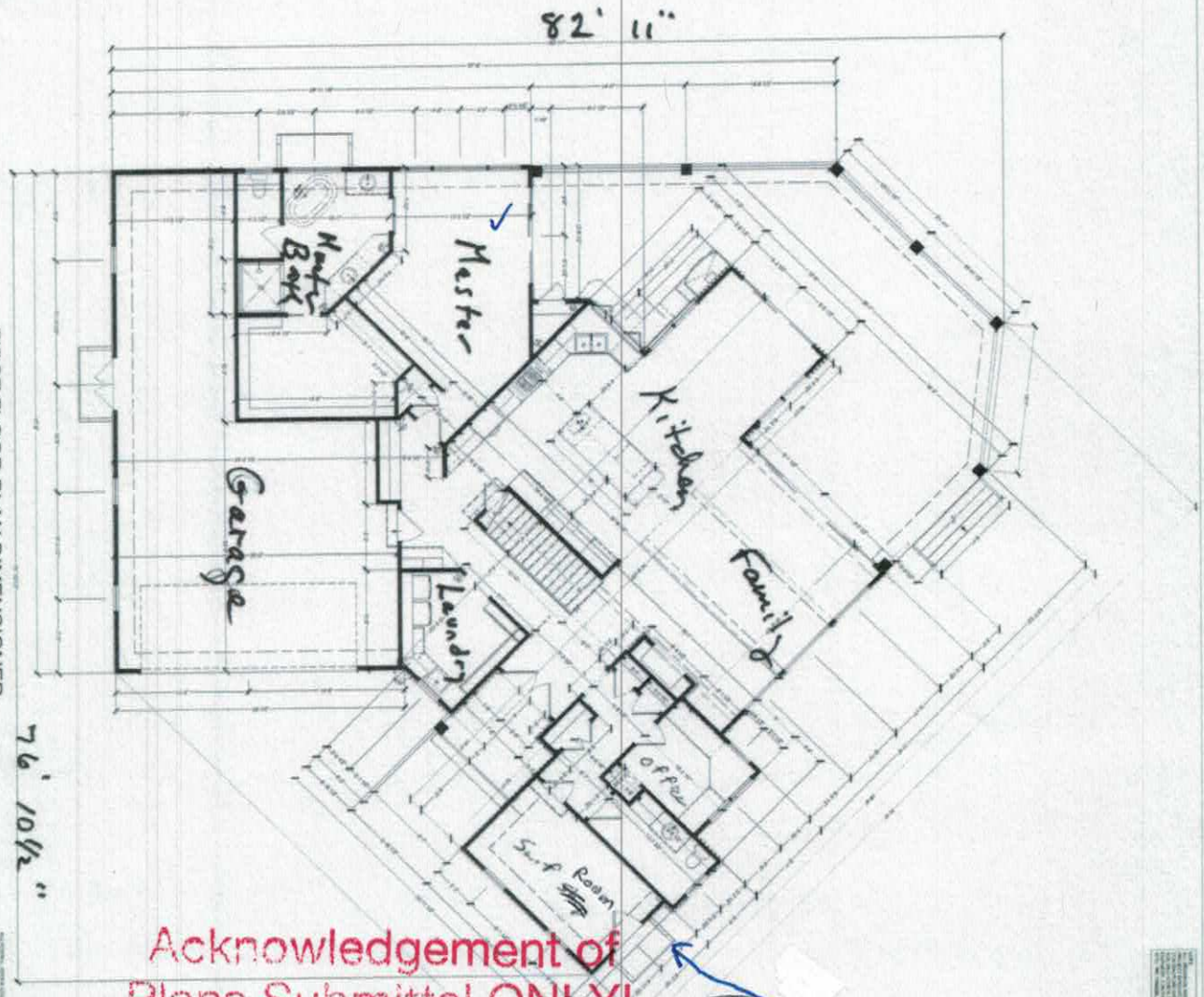
LAKE
NORMAN
ANY DOCKS, PIERS OR OTHER
IMPROVEMENTS BUILT ON LAKE
ARE NOT SHOWN ON THIS
SURVEY PLAT.

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R/W = RIGHT-OF-WAY
E/P = EDGE OF PAVE
C/L = CENTERLINE
= UTILITY POLE

IAN
OR OTHER
LT ON LAKE
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AT.



3/27/18



FIRST FLOOR PLAN DIMENSIONED

Acknowledgement of
Plans Submittal ONLY!

Date 4/5/18

Date

3/28/17

A NEW CUSTOM HOME DESIGN FOR:
TED & CHRYSTAL BURK
123 PLEASANT WAY LANE
MOORESVILLE, NC 28117, IREDELL COUNTY

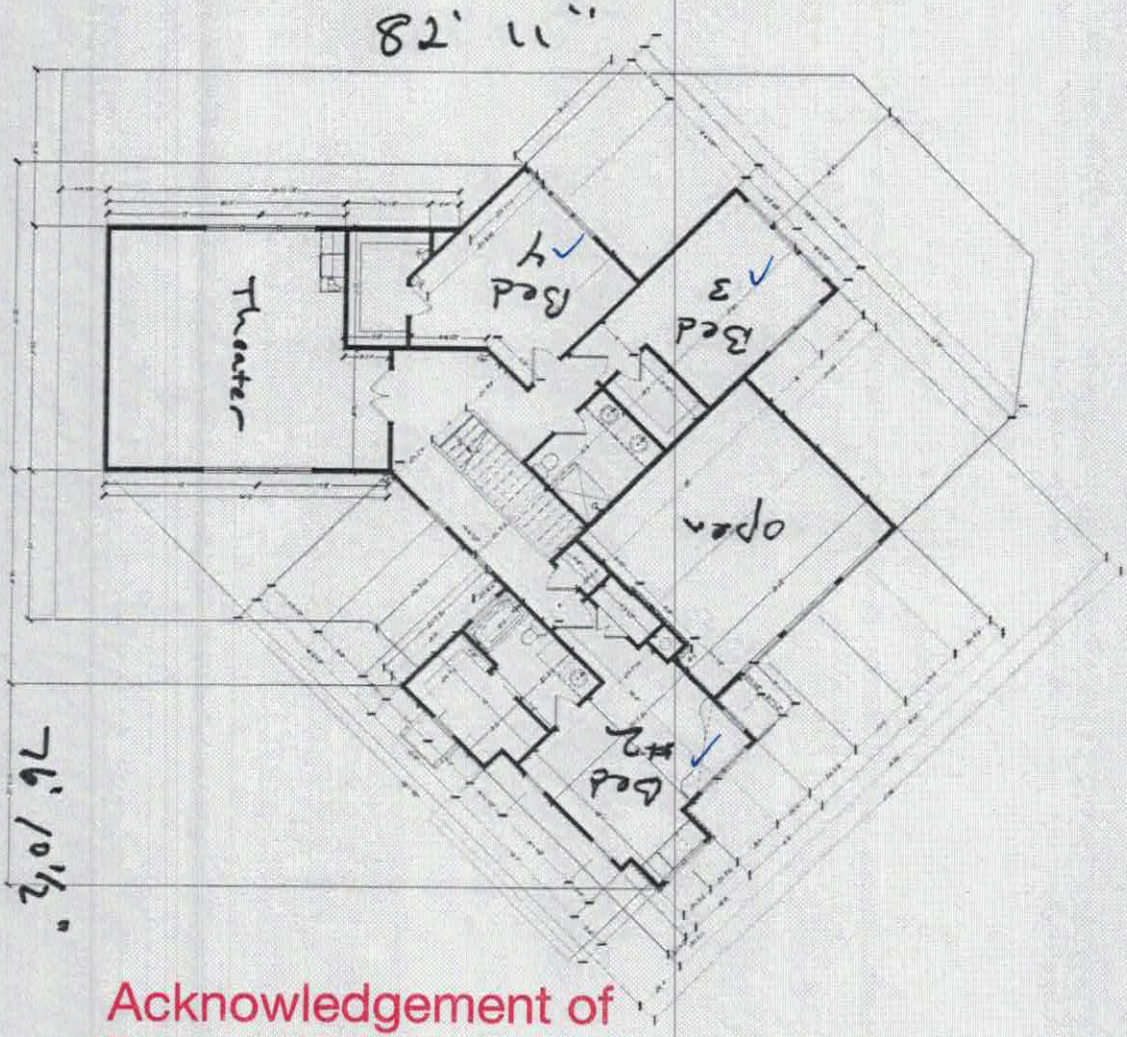
Creating where people live

AIBD FELLOW MEMBER AMERICAN INSTITUTE OF BUILDING DESIGN

N.C.B.D.C

PIPPIN HOME DESIGNS INC.

DATE:	SCALE:	SHEET:
11/28/17	1/4" = 1'0"	A-4



SECOND FLOOR PLAN DIMENSIONED

Acknowledgement of
Plans Submittal ONLY!

Tom Burk Date 4/5/18

Date

3/24/17

A NEW CUSTOM HOME DESIGN FOR:
TED & CHRYSTAL BURK
123 PLEASANT WAY LANE
MOORESVILLE, NC 28117, IREDELL COUNTY

Creating where people live

PIPPIN HOME DESIGNS INC.

DATE:	SHEET:	SCALE:	
11/28/17	A-6	1/4" = 1'0"	

IREDELL COUNTY

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

APPLICATION NUMBER
226681
Issue Date: 04/27/2017

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4638052085.000	123 PLEASANT WAY LANE, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: BARGER STEPHEN LYNN+FRANCES C F	Applicant: MICHAEL ATHANAS & ASSO
Address: 4804 SOUTH ISLAND CT N MYRTLE BEACH, SC 29582	Address: 561 ENNIS RD WEDDINGTON, NC 28173
Phone:	Phone: 704-576-3887

Use Requested	Zone Code
SFD	RR

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.720	35.00	50.00	15.00	50.00	CACL	AE

Remarks:

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	100972	TOTAL FEES:	$ 77.25