ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 x3456 | Mooresville Office (704) 660-3625

SW

PERMIT : OSWP 2024-45103

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

PIN # 4638 - 23 - 8871

APPLICANT/OWNER: William Tully | APPLICANT ADDRESS: 157 Broadview Cir, Mooresville

SITE ADDRESS: 674 Normandy Rd, Mooresville 28117 | PHONE: 336-682-0502 | ALT. PHONE: -

SITE DIRECTIONS: Perth - Normandy | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: CL&T | SECTION: 11 | LOT # 148 | LOT AREA: 0.92 | DESIGN FLOW: 480 gpd | L.T.A.R.(Initial): 0.3 | L.T.A.R (Repair): 0.3

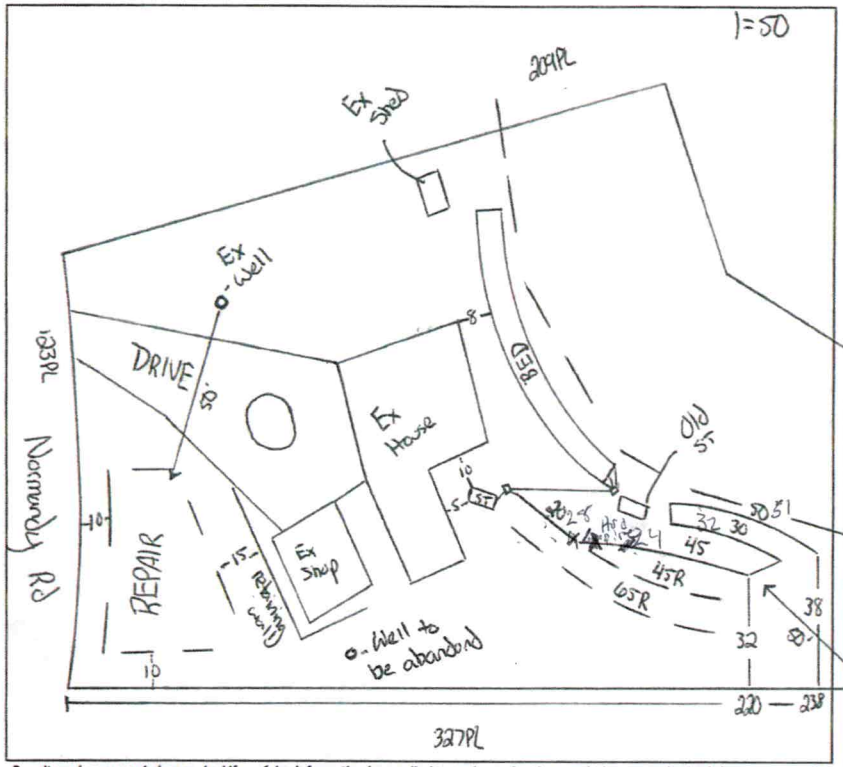
Septic Tank	1000 (gal)	STB	Infi Trator	Date		☐ New System ☐ Repair ☒ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 4	Water Supply
Pump Tank	(gal)	PT		Date		System Description: VPPBPS		☐ Business	No. Persons 8	☒ Private
Pump Make		Model		Serial #		Repair System Description: LP- PPBPS		☐ Other	No. Employees	☐ Public
# Nitrification Fields	1	# Lines	4	Linear Ft	135	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☐ Crawl Space	☐ Community
Trench Width	24 in	*Max. Trench Depth(Initial)	30 in	*Max. Trench Depth(Repair)	30 in	Gravel Depth -	☒ GRAVITY ☐ PRESSURE	☒ Basement w/plumbing	☐ Basement w/o plumbing	

* Measured on the downhill side of the trench | Effluent Standard: ☒ DSE ☐ HSE ☐ TS-I ☐ TS-II ☐ RCW ☐ NSF/ANSI 40 | Usable Depth to LC (Initial): 48 in | Usable Depth to LC (Repair): 48 in | *Limiting Condition*

Comments / Conditions: Install on contour with the land. Feed new lines and ex bed equally. Pump, crush, & fill old tank. Keep 2' seperation from old tank hole and new lines.

Follow T&J rules for serial feeding lines.

INITIAL SITE SKETCH



AS BUILT SKETCH

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inspector to confirm your time.

Well abandond 1/15/24

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: Online Signature | Date: | Installed by: Lentz Wastewater

IMPROVEMENT PERMIT by: Cory Hill | Date: 2/7/24 | OPERATION PERMIT by: Matt Wi | Date: 3/12/24

AUTHORIZATION TO CONSTRUCT by: Cory Hill | Date: 2/14/24 | Existing System Inspected by: | Date:

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 x3456 | Mooresville Office (704) 660-3625

SW

PERMIT : OSWP 2024-45103

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

PIN # 4638 - 23 - 8871

APPLICANT/OWNER: William Tully | APPLICANT ADDRESS: 157 Broadview Cir, Mooresville

SITE ADDRESS: 674 Normandy Rd, Mooresville 28117 | PHONE: 336-682-0502 | ALT. PHONE -

SITE DIRECTIONS: Perth - Normandy | SAP CONTROLLED: ☐ YES ☒ NO

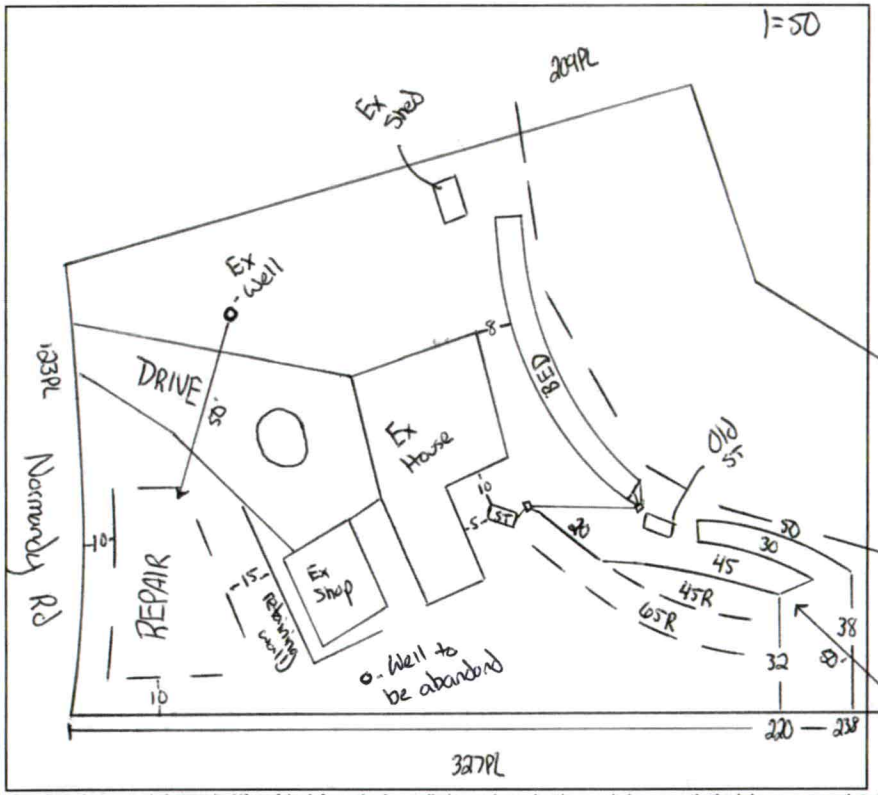
SUBDIVISION: CL&T | SECTION: 11 | LOT # 148 | LOT AREA: 0.92 | DESIGN FLOW: 480 gpd | L.T.A.R.(Initial): 0.3 | L.T.A.R (Repair): 0.3

Septic Tank 1000 (gal)	STB	Date	☐ 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: VPPBPS		☐ Business	No. Persons 8	☒ Private
Pump Make	Model	Serial #	Repair System Description: LP- PPBPS		☐ Other	No. Employees	☐ Public
# Nitrification Fields 1	# Lines 4	Linear Ft 135	Maintenance Agreement Required: ☐ YES ☒ NO		☐ Slab	☐ Crawl Space	☐ Community
Trench Width 24 in	*Max. Trench Depth(Initial) 30 in	*Max. Trench Depth(Repair) 30 in	Gravel Depth -	☒ GRAVITY ☐ PRESSURE	☒ Basement w/plumbing	☐ Basement w/o plumbing	
* Measured on the downhill side of the trench	Effluent Standard: ☒ DSE ☐ HSE ☐ TS-I ☐ TS-II ☐ RCW ☐ NSF/ANSI 40		Usable Depth to LC (Initial): 48 in		Usable Depth to LC (Repair): 48 in		*Limiting Condition*

Comments / Conditions: Install on contour with the land. Feed new lines and ex bed equally. Pump, crush, & fill old tank. Keep 2' seperation from old tank hole and new lines.

Follow T&J rules for serial feeding lines.

INITIAL SITE SKETCH



AS BUILT SKETCH

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inspector to confirm your time.

Well abandand 1/15/24

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: Online Signature | Date: | Installed by:

IMPROVEMENT PERMIT by: Cory Hill | Date: 2/7/24 | OPERATION PERMIT by: | Date:

AUTHORIZATION TO CONSTRUCT by: Cory Hill | Date: 2/14/24 | Existing System Inspected by: | Date:

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

Sheet 1 of 1
PROPERTY ID #: 4638238871
COUNTY: Iredell

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

OWNER: William Tully — APPLICATION DATE 11/16/23
ADDRESS: 157 Broadview Cir — DATE EVALUATED: 12/21/23
PROPOSED FACILITY: 4 bd/r home — PROPOSED DESIGN FLOW (.1949): 480 gpd — PROPERTY SIZE: 0.92 acres
LOCATION OF SITE: 674 Normandy Rd, Mooresville — PROPERTY RECORDED: yes
WATER SUPPLY: Private Public X Well Spring Other
EVALUATION METHOD: Auger Boring X Pit Cut — TYPE OF WASTEWATER: X 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	Linear 14%	0 - 38	Fill		-	60	-	-	US
		38 - 60	C SBK	SS SP FR SE					
2	Linear 16%	0 - 8	SCL SBK	SS SP FR SE	-	49	Heavy SAP in CL layer		.3 PS
		8 - 23	C SBK	SS SP FR SE					
		23 - 49	CL SBK	SS SP FR SE					
3	Linear 18%	0 - 7	SCL SBK	SS SP FR SE	-	57	Heavy SAP and Rock at 39"		.3 PS
		7 - 28	C ABK	SS SP FR SE					
		28 - 57	CL SBK	SS SP FR SE					
4	Linear 16%	0 - 7	SCL SBK	SS SP FR SE	-	52	SAP inc in CL layer		.3 PS
		7 - 30	C SBK	SS SP FR SE					
		30 - 52	CL SBK	SS SP FR SE					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	50%	50%
Site LTAR	.3	.3

OTHER FACTORS (.1946): PS
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Cory Whicker
OTHER(S) PRESENT:

COMMENTS: Cold

PERMIT SNAPSHOT REPORT OSWP-2023-41365 FOR IREDELL COUNTY

Permit Type	Environmental Health OSWP	**Project:**		**App Date:**	11/16/2023
Work Class:	EH Septic Permit	**District:**	Iredell County	**Exp Date:**	NOT AVAILABLE
Status:	In Progress	**Square Feet:**	0.00	**Completed:**	NOT COMPLETED
Valuation:	$0.00	**Assigned To:**	Whicker, Cory	**Approval Expire Date:**	

Description: I WANT TO EXPAND THE CURRENT SEPTIC SYSTEM TO SUPPORT 4 BEDROOMS. NO CHANGI ORIGINAL FOOTPRINT OF HOME, JUST EXPANDING SYSTEM. 11/17 Sent email to address on file Marina responded surveyor will be out after holidays. She will contact me when ready GM 12/4 Site visit site ready GM

Parcel:	**Address:**	**Zone:**
4638238871.000 Main	674 Normandy Rd Main Mooresville, NC 28117	R-20(Suburban Residential District)

Applicant/Authorized Agent	Property Owner
marina tully	WILLIAM TULLY
151 BROADVIEW CIRCLE	Home: (336) 682-0502
MOORESVILLE, NC 28117	Business: (336) 682-0502
Mobile: (336) 682-0502	Mobile: (336) 682-0502

Permit Custom Fields

How is your site plan being submitted	Custom Site Plan	Septic Application/Permit Type	Expand septic to add bedrooms	Does the site contain any jurisdictional wetlands	No
Non-domestic Sewage Generated	No	Other Public Agency	No	All proposed structure dimensions	HOME IS EXISTING. WE ARE NOT EXPANDING IT. SEE ATTACHED DIMENSIONS FROM TAX DEPARTMENT.
What are the proposed structures	Bedroom(s) Addition	Maximum Number of Bedrooms	4	If other Addition/Structure, please explain	EXISTING AREAS WERE CONVERTED TO BEDROOMS.
Number of Occupants	8	Foundation Type	Basement with Plumbing	Residential/Business/Other	Residential
Water Supply	Existing Well	Desired Septic System Type	Conventional (most common)	Additional Unique Setbacks Apply	No

Attachment File Name	Added On	Added By	Attachment Group	Notes
Signature_marina_tully_11/16/2023.jpg	11/16/2023 13:30	tully, marina		Uploaded via CSS

Inspection Number	Status	Inspection Type	Request Date	Scheduled Start Date	Scheduled End Date	Actual Start Date	Actual End Date
2023-168931	Passed - Permit	OSWP Septic/Well Preliminary Site Visit	12/04/2023	12/04/2023 0:00	12/04/2023 0:00	12/04/2023 16:59	12/04/2023 16:59

Inspectors: McLeod, Grace (Primary)

Checklist Item	Description	Passed	Comments
General Comments	Checklist item used to track general comments, not specific to any other checklist item	No	

Note	Created By	Date and Time Created
1. 11/17 Sent email to addresses on file. Marina responded surveyor will be out after holidays. She will contact me when ready GM	Grace McLeod	11/17/2023 11:24
2. 12/4 Site ready GM	Grace McLeod	12/04/2023 16:58
3. Called 12/5 and left message	Cory Whicker	12/06/2023 7:31
4. Called again on 12/7	Cory Whicker	12/07/2023 8:30

PERMIT SNAPSHOT REPORT (OSWP-2023-41365)

Invoice No.	Fee		Fee Amount	Amount Paid
INV-00023408	New Gravity System		$500.00	$500.00
		Total for Invoice INV-00023408	$500.00	$500.00
		Grand Total for Permit	**$500.00**	**$500.00**

Workflow Step / Action Name	Action Type	Start Date	End Date
Application Completeness Check v.1		11/17/2023 8:04	11/17/2023 8:05
Confirm application complete v.1	Generic Action		11/17/2023 8:05
Fees v.1		11/17/2023 8:05	11/17/2023 8:05
Issue Invoice v.1	Generic Action		11/17/2023 8:05
Fees Paid v.1	Generic Action		11/17/2023 8:05
~~**Zoning Review v.1**~~			11/17/2023 8:05
~~Floodplain Admin Overview v.1~~	Task		11/17/2023 8:05
~~Issue Invoice v.1~~	Generic Action		11/17/2023 8:05
~~Fees Paid v.1~~	Generic Action		11/17/2023 8:05
Lot Readiness Verification v.1		12/04/2023 16:59	
OSWP Septic Preliminary Site Visit v.1	Inspection	12/04/2023 16:59	12/04/2023 16:59
OSWP Site Evaluation v.1	Inspection		
Issue Improvement Permit v.1			
Issue Invoice v.1	Generic Action		
Fees Paid v.1	Generic Action		
Issue Permit v.1	Generic Action		
Permit Completion Process v.1			
Authorization to Construct Permit v.1	Create Sub Permit		
Issue Authorization to Construct v.1	Generic Action		

674 Normandy

IREDELL COUNTY HEALTH DEPARTMENT 4638.23 8871

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Jim Richart DATE 10-7-83 PERMIT NO. 345

PHONE: Business _____ Home _____

LOCATION 150W TR 1303 TL 1428 2mile on R

S. R. No. _____

SUBDIVISION NAME LAKE NORMAN LOT NO. 148 SECTION OR BLOCK NO. 11

House (X) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 2

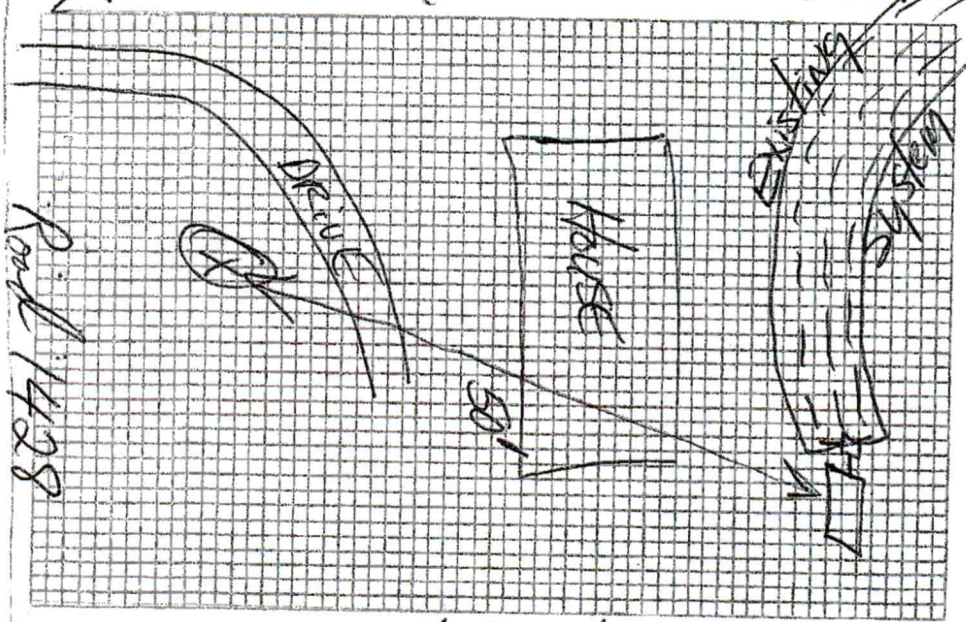
Garbage Disposal Unit	Yes ( )	No (X)
Auto. Dishwasher	Yes (X)	No ( )
Auto. Wash. Machine	Yes (X)	No ( )
Site Suitable	Yes (X)	No ( )

Lot Area ~3/4ACRE

Character & Porosity of Soil Clayloam
Percolation Rate _____
Topography _____
Depth to Water Table 104
Rock or other impervious formations some observed

EXISTING System

(X) Basement with Plumbing ( ) Basement without Plumbing (X) No Basement



Plot of System

EXISTING
Size of Tank 1000 Gals.
Nitrification Field: 3
No. of Lines
Sq. Ft. Linear Ft. 250
Depth of Stone in Lines 12"
Water Supply: Individual (X)
Public ( )

7-19-77

Installed by T. J. Erwin

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: _____

IMPROVEMENTS PERMIT BY John Houston

COMMENTS: Existing System working OK At date of inspection – REMOVE old Mobile Home And Room

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Fred Clemmer DATE 10-7-83

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.
Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Improvements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold