IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 23|015

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

PIN # 4638382386

APPLICANT/OWNER: Bryan Clodfelter | George Stallings APPLICANT ADDRESS: 1824 Triplett Rd.

SITE ADDRESS: 583 Kenway Loop Mooresville, NC PHONE: 704-634-2500 ALT. PHONE 704-578-1135

SITE DIRECTIONS: Perth Rd → L on Fern Hill Rd → L on Kenway Loop → lot on R SAP CONTROLLED: ☐ YES ☐ NO

SUBDIVISION: CL+T SECTION: 15 LOT # 47 LOT AREA: .84 ac DESIGN FLOW: 240gpd L.T.A.R.: —

Septic Tank existing (gal) STB Date

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields EXISTING # Lines Linear Ft

Trench Width Trench Bottom Depth(Low side) Gravel Depth

☐ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI

System Description: EXISTING

Repair System Description:

Maintenance Agreement Required: ☐ YES ☑ NO

☑ GRAVITY ☐ PRESSURE

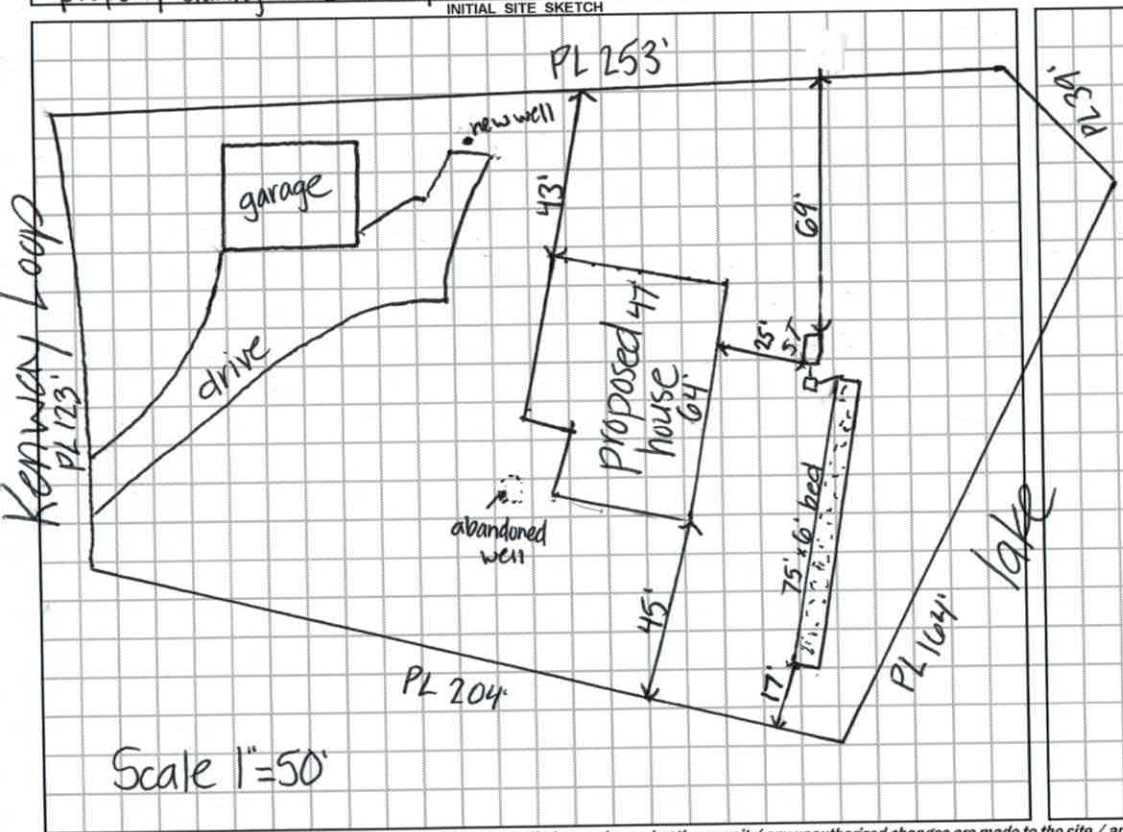
☑ Residence ☐ Business ☐ Other ☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement w/o plumbing

No. Bedrooms 2 No. Persons 4 No. Employees

Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions: New house must maintain a minimum of 15' away from any part of septic, and 25' away from any well. Septic system functioning properly during time of inspection.

INITIAL SITE SKETCH



AS BUILT SKETCH

Well abandonded 12/13/17

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**

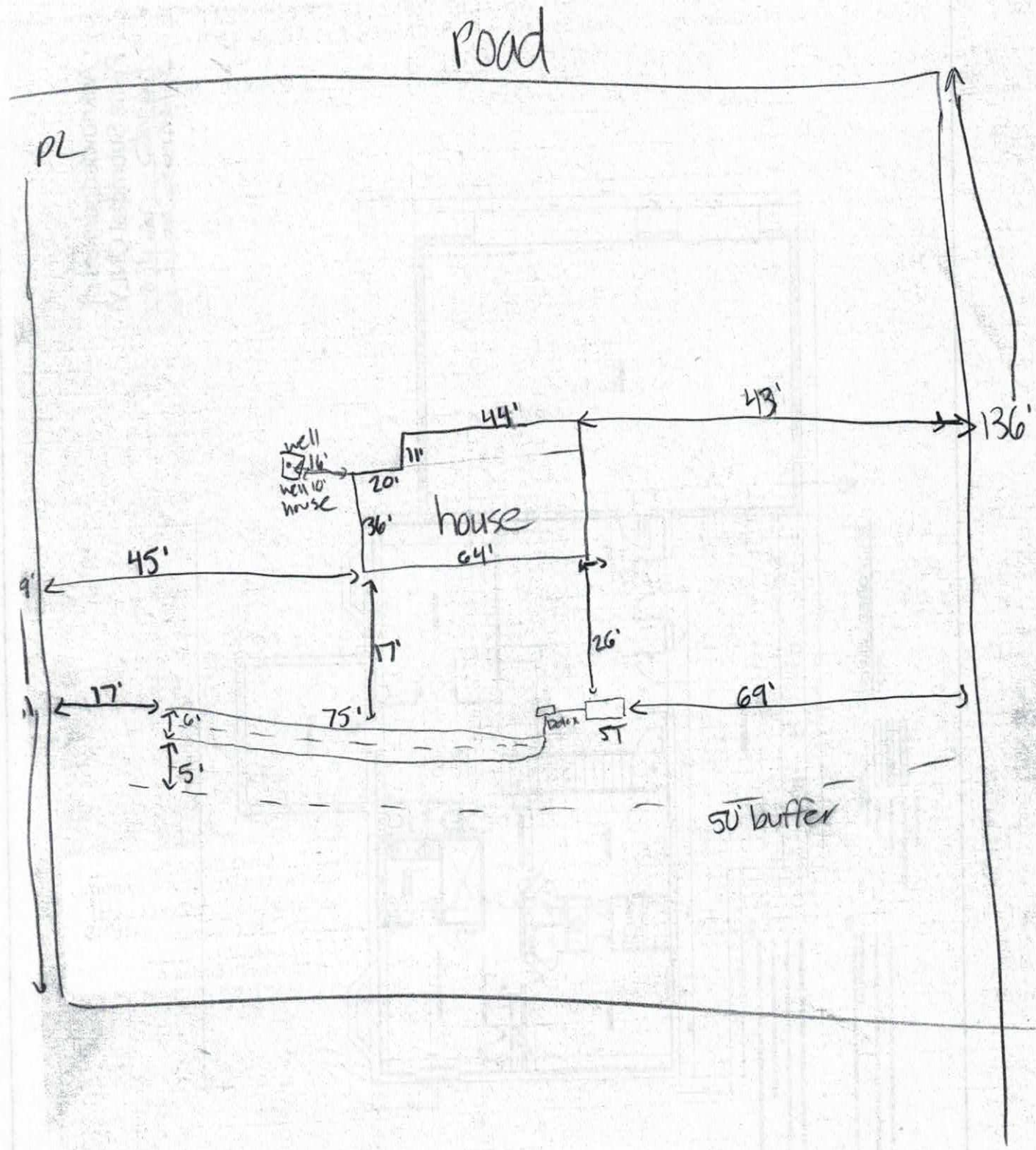
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☐ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Bryan K Clodfelter Date: 12/21/17 Installed by:

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

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Kayla Watson Date: 12-21-17

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.


road
PL
well
16'
well 10'
house
20'
11'
44'
43'
136'
36'
house
64'
45'
9'
17'
26'
17'
75'
69'
6'
5'
5T
50' buffer

23105

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 ___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 ___Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. Applicant Information:

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Bryan Chadfelter	1808 triplett rd. Mtylk,NC 28125	704-663-4041	704 634-2500
George Stallings	12006 eastfield R. Huntersville NC 28074	704-578 1135	704-578-1135

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
583 Kenway lp. Mooresville NC 28115	CLT 515	Lot #47

Driving Directions: Hwy 150 west r onto Pearth L onto Fernhil
L onto Kenway lp. 1.2 miles.

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 check existing system make sure it will work

Maximum Number of Bedrooms 2
Maximum Number of Occupants 2
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: Bryan Chadfelter
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

12/20/17
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, Phyllis H. Stallings, G Ronald Stallings, am the legal owner(s) of the property located at 583 Kenway Loop, Mooresville, NC 28117, identified as PIN (Parcel Identification Number) 4638382386.000, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) Bryan Clodfelter, Bryan Clodfelter Construction Corp 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.

Phyllis H. Stallings G Ronald Stallings — 10/12/17
Signature of Owner(s) — Date

Bryan Clodfelter — 10-17-17
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

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:

✓ 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

✓ Front and side setbacks from property line...

✓ Area you prefer your septic system to be placed...

✓ Preferred driveway location and configuration, preferred well location...

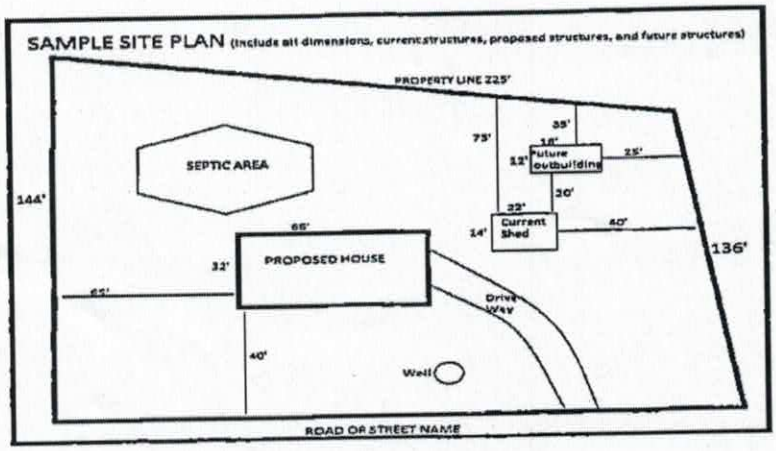
✓ North arrow, or other sufficient indicator of direction...

Circle N/A on the following if appropriate:

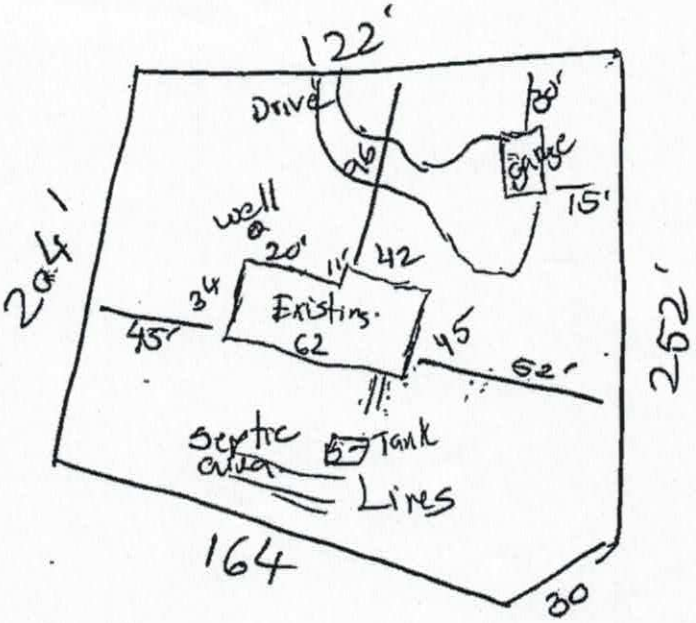
____ Location of septic systems and wells within 100' of your property... N/A

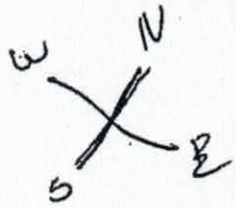
____ Location of easements and rights of ways on your property... N/A

____ Location of any designated wetlands on the property... N/A



USE THIS SPACE TO DRAW YOUR SITE PLAN

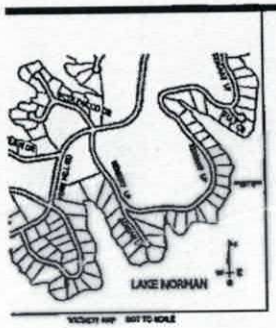




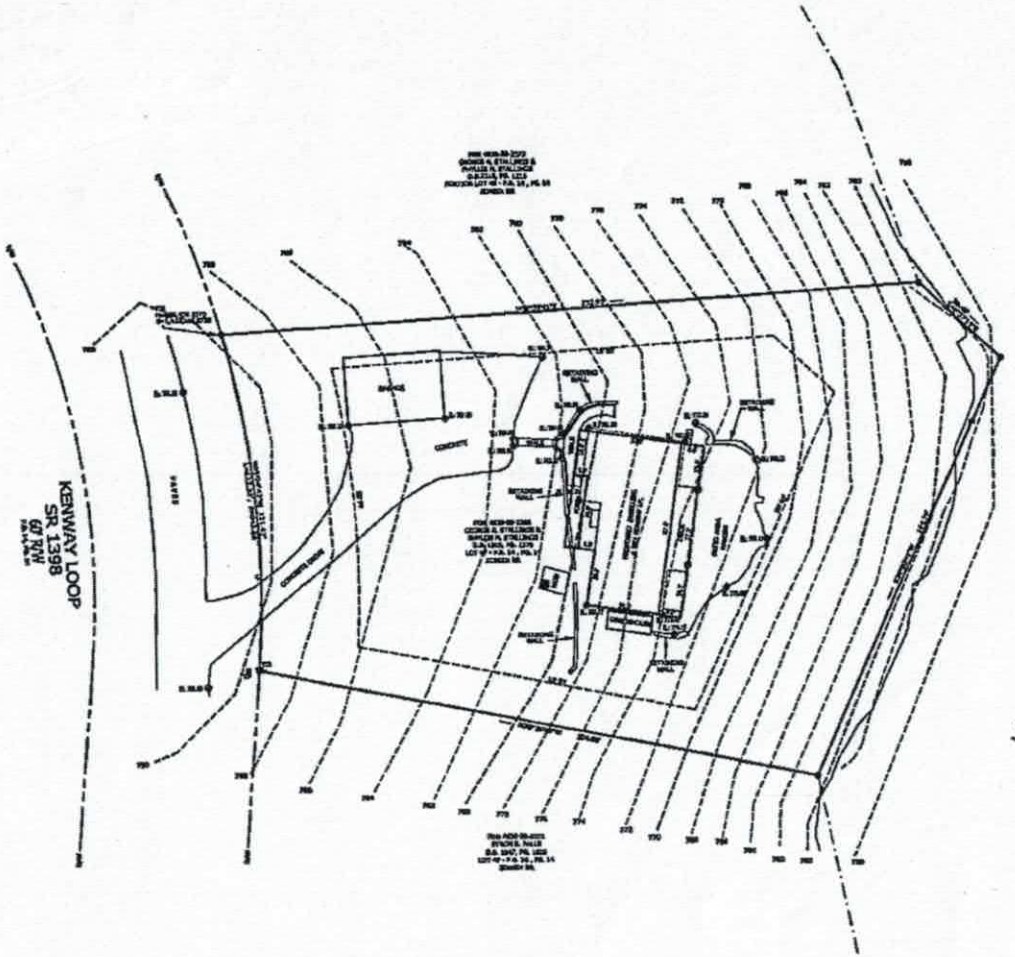
Signature: Lake Norman _____

REQUIRED property owner or owner's legal representative signature.

10/20/17
DATE



VICINITY MAP NOT TO SCALE



TOTAL AREA: 0.84 ACRE

GRAPHIC SCALE

ZONE	DATE	DESCRIPTION	BY
	10-18-2017	ADDED PROPOSED SEWER FAMILY DWELLING	

GERALD V. GRANT & ASSOCIATES
2351 SIMONTON ROAD
STATESVILLE, NC 28687
PHONE (704) 872-3136
gerald@gvgrant.com

GEORGE R. STALLINGS & PHYLLIS H. STALLINGS

NORTH CAROLINA REGISTERED LAND SURVEYOR L-3136 GERALD V. GRANT
Gerald V. Grant 10-18-2017

DRAWN	
CHECK	
DATE	10-18-2017
SCALE	1"=30'
FIELD BK.	

SHEET C-1

4638 38 2386

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR H. Hughs / Heritage Bld. DATE 8-20-76 PERMIT NO. _____

PHONE: Business _____ Home 528-4367

LOCATION 1303 N T on 1300 3/4 mi. Rt. on Kennedy Drive 1/2 mi. on left S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 47 SECTION OR BLOCK NO. 15

House ( ) Mobile Home ( ) Business ( ) Other Adding to existing house

No. Bedrooms _____ No. Bathrooms _____

Garbage Disposal Unit Yes ( ) No ( )

Auto. Dishwasher Yes ( ) No ( )

Auto. Wash. Machine Yes ( ) No ( )

Site Suitable Yes ( ) No ( )

Lot Area 1/4 acre

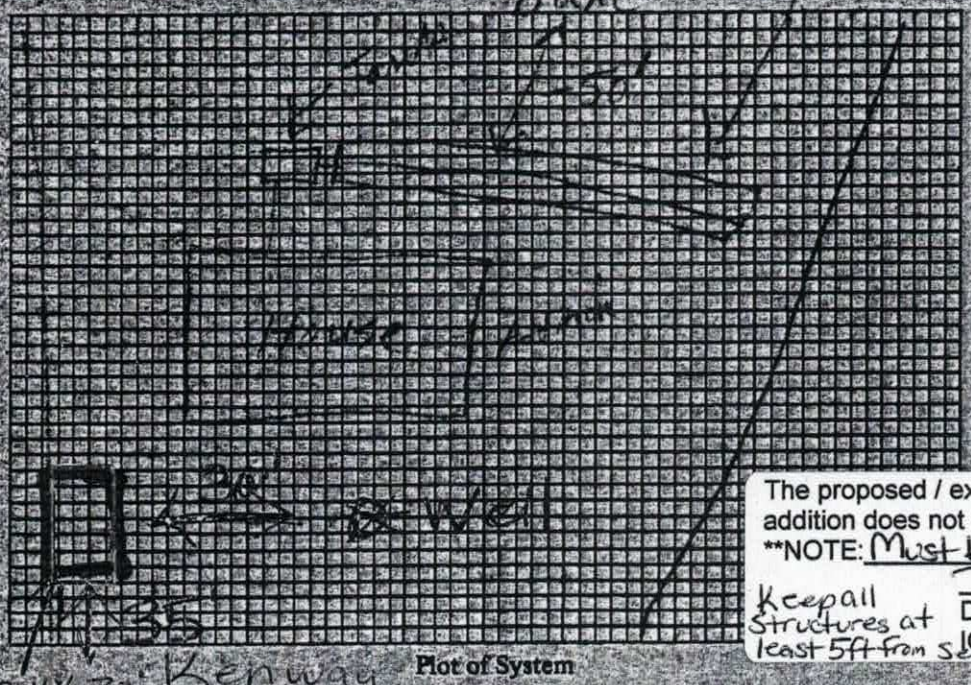
Character & Porosity of Soil _____

Percolation Rate _____

Topography existing

Depth to Water Table _____

Rock or other impervious formations system



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 562.5 Linear Ft. 225

Depth of Stone in Lines 10"

Water Supply: Individual (X)

Public ( )

Installed by Sanitary

1968

The proposed / existing 24'x34' Garage addition does not appear to impact the existing septic system.

**NOTE: Must keep at least 25Ft from well

Keep all Structures at least 5ft from septic

Maiya Dotson REHS

Date: 12/17/2010

ICHD-Environmental Health Division

IMPROVEMENTS PERMIT BY _____

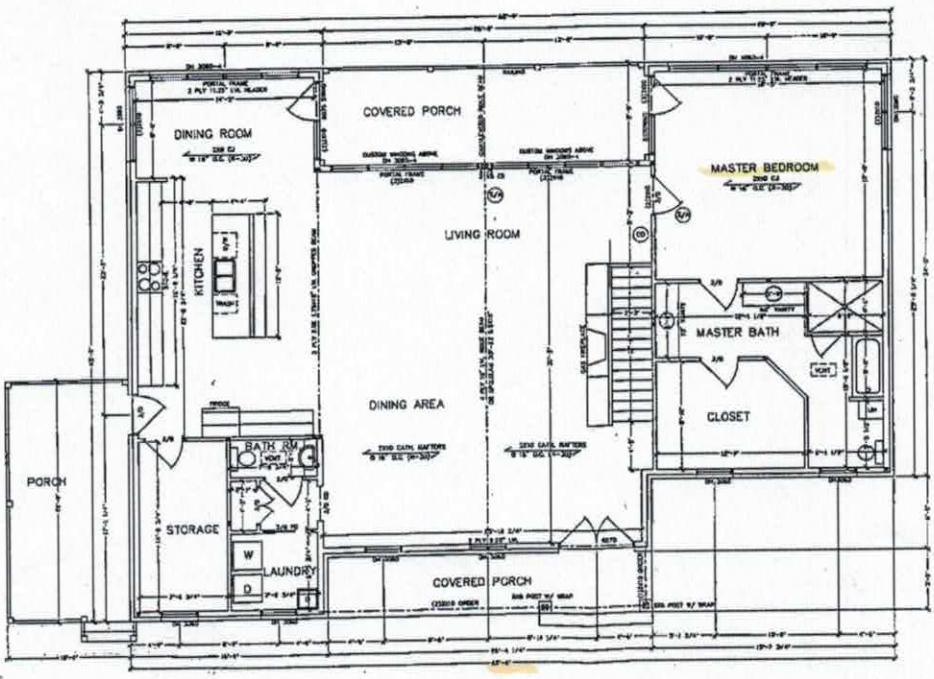
COMMENTS: system is adequate for addition

CERTIFICATE OF COMPLETION BY D C Moore DATE 8-21-9

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

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

Acknowledgement Of
Plans Submittal ONLY!
Date 12/12/17
Date 12-27-17

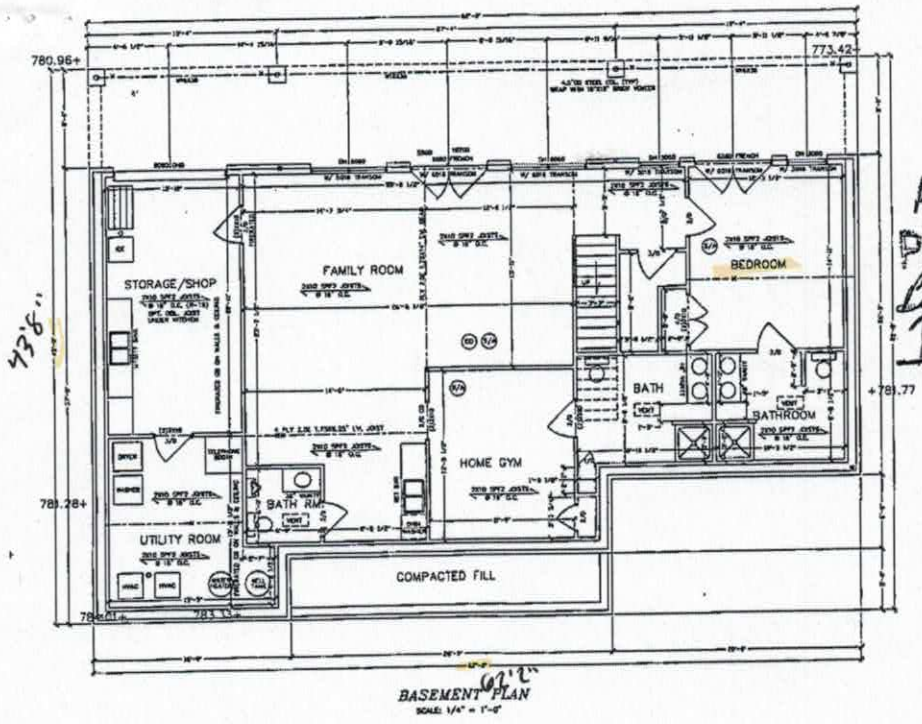


FIRST FLOOR PLAN
SCALE: 1/4" = 1'-0"

PROPOSED HOUSE PLAN
MOORESVILLE, NORTH CAROLINA

PRELIMINARY - DO NOT USE FOR CONSTRUCTION

774.17-



BASEMENT FLOOR PLAN
SCALE: 1/4" = 1'-0"

Acknowledgement Of
Plans Submittal ONLY!
By [signature] Date 12-21-17
Kayla Watson Date 12-21-17

PROPOSED HOUSE PLAN
MOORESVILLE, NORTH CAROLINA

PRELIMINARY – DO NOT USE FOR CONSTRUCTION

IREDELL COUNTY

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

APPLICATION NUMBER
231015
Issue Date: 10/20/2017

ZONING PERMIT

FILE COPY

Parcel Number	Street Address	Jurisdiction
4638382386.000	583 KENWAY LOOP, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: STALLINGS PHYLLIS H+GEORGE R	Applicant: CLODFELTER BRYAN
Address: 12006 EASTFIELD RD HUNTERSVILLE, NC 28078	Address: 1824 TRIPLETT RD MT ULLA, NC 28125
Phone:	Phone:

Use Requested	Zone Code
SFD	RR

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.840	35.00	50.00	15.00	15.00	CACL	AE

Remarks:

PAID
Cash
10/20

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: See Attached Date: _____

Permit Number	118379	TOTAL FEES:	$ 77.25