12:30

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 313236

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

PIN # 4639 -06 - 8960

APPLICANT/OWNER: Mac Rollins APPLICANT ADDRESS: 150 Honey Dew Circle Troutman NC 28166

SITE ADDRESS: 150 Honey Dew Circle Troutman NC 28166 PHONE: ALT. PHONE

SITE DIRECTIONS: State Pen to Morrison Farm @ Shiloette Oaks Honey Dew SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: C&T SECTION: 18 LOT # 32 LOT AREA: .7 Acres DESIGN FLOW: 450 L.T.A.R.: .5 .325

Septic Tank	1000	(gal)	STB	760	Date	3/1	☒ New System	☐ Repair	☐ Expansion	System Type: I II III (IV) V VI	☒ Residence	No. Bedrooms	4	Water Supply
Pump Tank	1000	(gal)	PT	363	Date	4/5	System Description:	LPP-PBD - Solo Elevation			☐ Business	No. Persons	5	☒ Private
Pump Make		Model			Serial #		Repair System Description:	T3-11 PRBD + Bubbler			☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	7		Linear Ft	260	Maintenance Agreement Required:	☒ YES	☐ NO		☐ Slab	☐ Crawl Space		☐ Community
Trench Width	24	Trench Bottom Depth(Low side)	30		Gravel Depth	—		☐ GRAVITY	☒ PRESSURE		☒ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions: Abandon well Prior to A/C
Well Abandoned 2-12-21
5/32 hole drilled

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:

Soil + Forestry Services of the Carolinas

LSS # 1231 Dated Jan 30th PA 2021

Supply lines 8.4ft to act bldg.

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.

5/11/2021: checked Tanks and they were good ST had filter but no pump in pt. checked bottom 4 drain lines and they were all good. used probe to find edge of drain pipe and they were all 15' off. As built means on site sketch not to scale

	Date	Initials
Drain Lines Checked	5/14/21	MD
Tanks Checked	5/11/2021	PSB
Pressure Manifold or Valve Box Checked	5-21	
Pressure Head Set	5-21	
Electrical Checked	5-21	
Floats Set	5-21	
Alarm Checked	5-21	
Maintenance Contract (Y) N	7-1-2021	

Supply lines 5/14/21 MD

Checked upper 3 lines installed as drawn

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

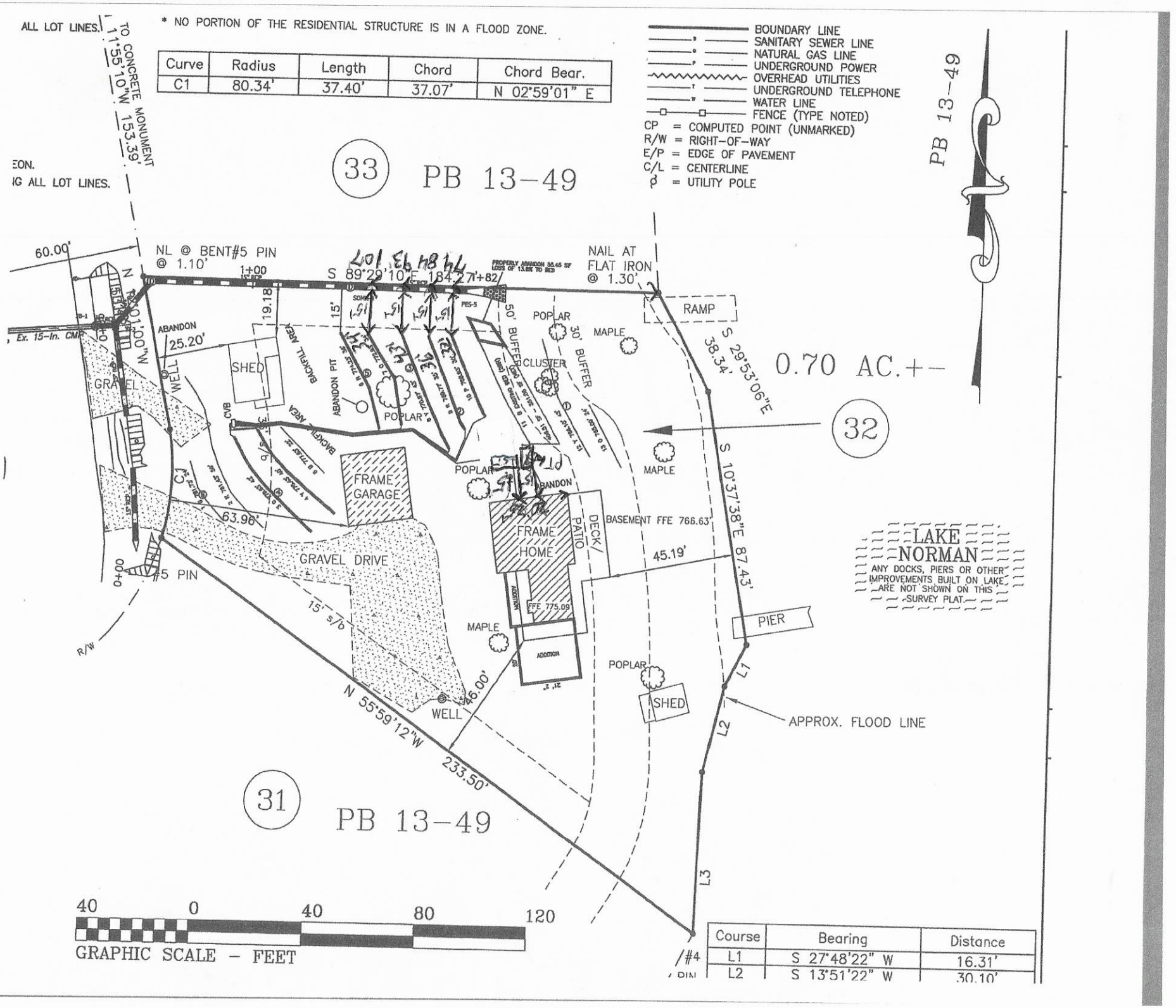
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Date: 2/9/2021 Installed by: Richard Abernathy

IMPROVEMENT PERMIT by: Date: 2/5/2021 OPERATION PERMIT by: Date: 7-1-2021

AUTHORIZATION TO CONSTRUCT by: Date: 2-22-2021 Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.


* NO PORTION OF THE RESIDENTIAL STRUCTURE IS IN A FLOOD ZONE.
ALL LOT LINES.
TO CONCRETE MONUMENT
N 11°55'10"W 153.39'
EON.
IG ALL LOT LINES.
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
33
PB 13-49
PB 13-49
60.00'
NL @ BENT#5 PIN
@ 1.10'
1+00
S 89°29'10"E 184.71'+82
NAIL AT
FLAT IRON
@ 1.30'
N 11°01'00"W
Ex. 15-In. CMP
ABANDON
25.20'
SHED
GRAVEL
WELL
19.18
15'
BACKFILL AREA
ABANDON PIT
POPLAR
50' BUFFER
30' BUFFER
CLUSTER
MAPLE
RAMP
S 29°53'06"E
38.34'
0.70 AC.+-
32
S 10°37'38"E 87.43'
FRAME
GARAGE
63.96'
GRAVEL DRIVE
#5 PIN
R/W
15' s/b
FRAME
HOME
DECK/
PATIO
BASEMENT FFE 766.63'
45.19'
FFE 775.09
ADDITION
LAKE
NORMAN
ANY DOCKS, PIERS OR OTHER
IMPROVEMENTS BUILT ON LAKE
ARE NOT SHOWN ON THIS
SURVEY PLAT.
PIER
L1
L2
L3
APPROX. FLOOD LINE
N 55°59'12"W
233.50'
46.00'
WELL
31
PB 13-49
40 0 40 80 120
GRAPHIC SCALE - FEET
Curve | Radius | Length | Chord | Chord Bear.
C1 | 80.34' | 37.40' | 37.07' | N 02°59'01" E
Course | Bearing | Distance
L1 | S 27°48'22" W | 16.31'
L2 | S 13°51'22" W | 30.10'

SOIL & FORESTRY SERVICES
OF THE CAROLINAS, PA

www.soilandforestryservices.com

Project#: 20-0099
January 30th, 2020

MARC ROLLINS
Attn: *Marc Rollins*
Email: marcmrollins@gmail.com

RE: Soil & Site Evaluation for a 4 Bedroom Residence at 180 Honeydew Circle (CL&T LOT 32), Troutman, NC 28166, PIN # (4639068960), Iredell County.

Mr. Rollins:

At your request Soil & Forestry Services of the Carolinas (S&FS) has performed soil/site evaluations on parcel noted above. The Lot size is noted on the attached survey map & soil evaluation form. The purpose of our work was to identify soil areas with potential to support subsurface wastewater disposal systems and provide design details for Session Law submittal to Iredell County Health Department.

Site Conditions

At the time of our evaluation land cover on the property was mostly wooded with scattered trees. Topography within the evaluated area was a gentle to moderate slope near the existing house and proposed drainfield area. Property lines and corners were marked at the time of the evaluation by Dedmon Survyeors. The 50' Lake Buffer was also staked by survey. The Surveyor provided an Autocad File of the survey as a basemap. Lines 7 – 13 of the the proposed septic layout were located via survey and lines 1 – 6 were located via measuring tape. Line 11 is the existing 2 bedroom conventional bed system. The autocad file with this information was used to produce the attached *Site Plan*. The proposed house plan (includes addition) is attached to our design. There is also an existing garage (slab foundation) and accessory building (on piers) onsite. There are two wells onsite. The well located near Honeydew Circle must be properly abandoned. There is also a pit with stones above line 5 that must be abandoned. We also noted a couple areas that needed to be backfilled. These features are all illustrated on the attached *Site Plan*. Since the original design was submitted a proposed drainage plan has been performed to pipe stormwater down the northern property line. This plan was provided to me by Piedmont Design Associates, PA and incorporated into the revised Site Plan and field adjustments made to the septic layout to meet proper setbacks.

Methodology

We evaluated soil areas through the use of hand augers. Soil morphological conditions including color, texture, structure, etc. were reviewed in the field with five boring locations on the property flagged and

located via survey or tape measure. All five of the soil borings are located in the proposed septic layout. Soil suitability was determined by referencing 15A NCAC 18A.1900 "Laws and Rules for Sewage Treatment and Disposal Systems". *Soil & Site Evaluation Forms* were utilized to record the soil morphological data for each boring. The house envelope was located via survey. An on-ground layout of system and repair was performed using a laser level. Pin flag locations of the layout were also located by tape measure and survey. The existing septic tank (to be abandoned) and drainfield were located via tile probe. Detailed system & repair information is summarized in the following paragraph for this Lot.

180 Honeydew Circle (*See Attached Design*)
The septic layout for this lot (8' centers) yielded a total of 437 linear feet of line. The primary system is proposed as 260 linear feet of PPBPS drainfield with low pressure distribution. Trench depth is specified at 30 inches. The repair system is proposed as 177 linear feet of PPBPS drainfield and the existing 2 bedroom conventional bed with TS-II Pretreatment Required. Trench depth is specified at 30 inches.

Session Law Requirements

An LSS Evaluation may be submitted in conjunction with a complete application to the LHD. The application shall include all information described in 15A NCAC 18A .1937(d) and be accompanied by a signed and dated statement from the applicant (owner or owner's legal representative) that reads as follows:

"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).".

Owner Date

Print Name Marc Rollins
Signature _____ 1-31-21

The LSS Evaluation shall include a statement bearing the LSS seal and signature that reads as follows:

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

Disclaimer
This report reflects the findings of S&FS, PA. *This LSS Evaluation is being submitted pursuant to and meets the requirements of SL 2018-114 Section 11.(c).* Any site modifications that impact the proposed septic areas at 180 Honeydew Circle, Troutman, NC may nullify this design. System design requirements and site requirements shall be adhered to for installation and Operations Permits to be issued by the local Health Department. If you have questions regarding these requirements a Pre-Construction meeting should be scheduled to discuss. Please contact S&FS if you have any questions regarding this report or the attached information. S&FS also offers septic system inspection, wetland delineation and forestry services.

Sincerely,

S. Ashley Rollans, LSS
Attachment: *Septic Design*

SOIL & FORESTRY SERVICES
OF THE CAROLINAS, PA

www.soilandforestryservices.com

Attached is a proposed design for a PPBPS Septic System w/Low Pressure distribution for a 4 bedroom single family residence on 180 Honeydew Circle CL&T Lot # 32, (PIN# 4639068960), Troutman NC, 28166.

Contents:

	Page
Information for the Installer	1
Design Information	
Design Specifications	2-3
Layout Specifications	4
System Tapsheet	5
Site Plan/System Plan	6
Calculations	7
Profile Descriptions	SUBMITTED
Septic Application	SUBMITTED
Zoning Permit & Receipt	SUBMITTED
Agent Authorization	SUBMITTED
Operations Permit	SUBMITTED
Green Sheet	SUBMITTED

January 30, 2021
Project #: 20-0099
Design By: Soil & Forestry Services of the Carolinas, PA

INFORMATION FOR THE INSTALLER:

The permit should be read very carefully prior to bidding. The following are details that must be considered along with all other considerations.

- Tanks shall be approved by NC DHHS, and certification supplied by the manufacturer.
- Tanks shall be water tested prior to installation.
- The installer shall be responsible to the owner for placement of the tanks and to insure that final grades are returned to the original natural grade, with exception of added structural features.
- The supply trench shall be compacted to eliminate cavities left during fill placement.
- Installation of the system shall be during dry conditions to protect the soil structure.
- All fittings shall be pressure rated fittings.
- All joints shall be cleaned with PVC pipe cleaner and a heavy bodied glue applied to weld all joints.
- Where required by the county health department, post installation inspections by the designer must be scheduled 5 week days in advance.
- Trenches shall be carefully excavated so the bottom is within 2" from the highest to . the lowest points of elevation within the trench. If the bottom elevation needs adjusting after it has been trenched, it will be done by removing high points rather than filling low points. It is extremely important to insure that trenches are not over excavated during initial trenching. All fine grading within the trench will be hand done with a shovel. No loose material will be left in the trench
- All pipe openings in the tanks shall be properly grouted. This also applies to the joints around the riser.
- All tanks shall be properly back filled and compacted to prevent slump at a later date.
- Earth dams, constructed of relatively impervious material, shall be installed at the beginning and end of each lateral.
- No heavy equipment shall be used on the field during or after installation. The use of a small loader (i.e. Bobcat) or a trencher (i.e. Ditch Witch 2300/2310) may be used for installation.
- Elevations at pinflag locations should be checked by the installer prior to beginning trenches.
- Pumptank riser should be 6" above grade, control panel should be 12" above grade.
- Septic tank riser shall be a minimum of 6" above finished grade.
- System is specified as a PPBPS installation with low pressure distribution.
- Repair is specified as a PPBPS/Existing Bed installation with TS-II Pretreatment.
- Backfill 4 - 6" of material (County Approved) over panels, rake trench walls, lime side-walls, install trenches 24" wide and have no more than 1/4" fall in 10 feet.
- **Existing Well & Tank must be properly abandoned (see Site Plan)**
- **Low areas/ditches on Site Plan must be filled in and graded for sheet flow.**
- **Portion of Existing Bed must be properly abandoned (see Site Plan)**
- **Must maintain 15' from proposed drainage pipe (see Site Plan)**

LP PPBPS SYSTEM
FOR WASTEWATER TREATMENT

Owner/Applicant:	Marc Rollins
Current Address:	180 Honeydew Circle Troutman, NC 28166
Phone:	302.275.5515
County:	Iredell
Location:	CL&T-Lot 32

Source of Wastewater Flow:	4 Bedroom Single Family Residence
Estimated Gallons Per Day Flow:	480 gpd
System Flow:	24.6 gpm

Design Specifications

Drainfield Size:	260
Loading Rate (gpd/ft.^{2}):	0.325
Depth of Gravel in Trench:	NA (PPBPS)
Gravel Size:	NA (PPBPS)
Max Trench Depth (LOW SIDE):	30 in., Repair 30 in. Trench Depth
Trench Width:	24 in.
Septic Tank Size:	1000
Pump Tank Size:	1000

Estimated Supply Line Length:	96
Supply Line Diameter:	2 in. SCH 40 PVC
Supply Line Volume:	16.70
Dosing Volume:	216.00
Supply Manifold:	N/A
Supply Manifold Length:	N/A
Supply Manifold Volume:	N/A

Recommended Float Controls:	SJE Sensor Float Control Switches as Required for Control Panel or County Approved Equivalents
Recommended Control Panel:	SJE-Rhombus Model 112 (NEMA 4x) Control Panel or County Approved Control Panel.

Pressure Head:	2 ft.
Friction Head:	1.22
Elevation Head:	15.50
Total Dynamic Head:	21.53

Threaded Union:	In Tank
Gate Valves:	1 in Tank 1 per lateral
Check Valves:	In Tank
Anti-Siphon Hole:	NA
Additional Comments:	Soil suitability was performed by Soil & Forestry Services of the Carolinas, PA

CL&T-Lot 32
LP PPBPS

DESIGN FLOW (gpd):	480
SOIL APPLICATION RATE (gpd/ft.^{2}):	0.325
TOTAL AREA TRENCH BOTTOM:	520
TOTAL LATERAL LENGTH:	260
NUMBER OF FIELDS:	1
LATERAL LENGTH REQUIRED PER FIELD:	246.1538462
SUPPLY LINE LENGTH:	96
TOTAL DYNAMIC HEAD:	21.53
MANIFOLD SIZE:	N/A
DOSING VOLUME:	216.00
PUMP TANK DRAW DOWN*:	10.3
SEPTIC TANK SIZE:	1000
PUMP TANK SIZE:	1000

**Pump tank draw down based on a volume basis of 21 gallons per inch. Draw down may vary among pump tank manufacturers.*

180 Honeydew Circle (CL&T LOT 32)

Project #: 20-0099

LAYOUT FOR 4 BEDROOM HOME

January 30, 2021

LINE #	FLAG COLOR	BS	HI	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM							
INSTR. 1							
HOUSE CNR	(LEFT FRONT)				771.00		
P. TANK					769.20		
1	BLUE				781.73	24	24
2	RED				781.43	59	59
3	***ORANGE***				***779.63***	***42***	***42***
4	***YELLOW***				***778.43***	***40***	***40***
5	BLUE				777.63	22	22
6	***RED***				***774.23***	***37***	***36***
7	***ORANGE***				***772.93***	***39***	***34***
8	***YELLOW***				***770.97***	***52***	***43***
9	***RED***				***769.77***	***45***	***35***
10	***PINK***				***768.93***	***40***	***30***
11	BLUE	EXISTING BED (2BR)			768.93	406.51 SF	351.06 SF
12	YELLOW				766.10	48	48
13	ORANGE				765.09	24	24
					Total	**472**	**437**

	LINE LENGTH	LTAR GPD/FT²	SYSTEM TYPE	SOIL LTAR GPD/FT²	TRENCH SYSTEM	DISTRIBUTION
**** System***	***260***	***0.325***	***MOD. CONV.***	***0.325***	***PPBPS***	**LOW PRESSURE**
Repair (HYBRID)	***177***	***0.325***	***MOD. CONV. EXISTING BED***	***0.325***	***PPBPS/EXISTING***	**LOW PRESSURE**

TS-II PRETREATMENT

Notes:

****Septic lines 6-12 and borings 1-3 located via Survey**
****All other septic lines & boring located via tape measure**
**All measures in feet
**Nitrification lines are demonstrated on contour via colored pin flags

LP PPBPS TAPSHEET -CL&T Lot 32

SYSTEM

Line #	Color	Elevation	Length	Hole Size	Flow/hole	Trench Area	Number of Panels
3	*ORANGE*	*779.63*	*42*	*0.156*	*0.41*	*84*	*10*
4	*YELLOW*	*778.43*	*40*	*0.156*	*0.41*	*80*	*9*
6	*RED*	*774.23*	*36*	*0.156*	*0.41*	*72*	*8*
7	*ORANGE*	*772.93*	*34*	*0.156*	*0.41*	*68*	*8*
8	*YELLOW*	*770.97*	*43*	*0.156*	*0.41*	*86*	*10*
9	*RED*	*769.77*	*35*	*0.156*	*0.41*	*70*	*8*
10	*PINK*	*768.93*	*30*	*0.156*	*0.41*	*60*	*7*
	total	feet =	260	gal/min =	24.6		60

Des. Flow	480
Pump Run=	8.78
soil LTAR	0.325
LTAR +5%	0.34125
LTAR with mod.	0.65
LTAR with mod.. + 5%	0.6825

.156 equals 5/32 inch hole

CALCULATIONS

Location	180 Honeydew Circle	
Project Number	20-0099	
Lot No:	CL&T LOT 32	
No. of Bedrooms	4	
Design Flow	480	$^{gal}/_{day}$
LTAR	0.325	$^{gal}/_{ft^2\,day}$
PPBPS? (YES OR NO)	YES	
Supply Line Length	96	ft.
Supply Line Volume	16.704	gal.
Required Feet of Line	246.1538	ft.
Amount of Line from Layout	260	ft.
Gallons per Minute	24.6	$^{gal}/_{min}$
Required Septic Tank Capacity	1000	gal.
Pump Tank Capacity	1000	gal.
Panel Volume	3.6	gal.
# of Panels	60	
Dosing Volume	216.00	gal.

Note: Dosing Volume based on 100% of # of panels times 3.6 gal/panel

FRICTION FACTOR INTERPOLATER
2" SCH 40 PVC

GPM	*f*
20	0.84
	-0.88
25	1.27
	-1.28
30	1.78
	-1.76
35	2.37
	-2.25
40	3.03
43.07	3.48
45	3.77
48.14	4.28
50	4.58
57.11	5.89
60	6.42

Tank Draw Down	10.3	*Generic Draw Down of 21 gal.per in.*
Pump Run Time	8.78	minutes
Elevation Head	15.5	ft.
Pressure Head	2	ft.
Friction Factor	1.27	ft./100 ft. *(From the interpolater.)*
Friction Head	1.22	ft.
Total Dynamic Head (+15%)	21.53	ft.

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

Sheet 1 of 2
PROPERTY ID #: 4639060960
COUNTY: Iredell

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

OWNER: Marc Rollins
ADDRESS: 180 Honey Dew Circle, Troutman NC 28166
PROPOSED FACILITY: 4BR
PROPOSED DESIGN FLOW (.1949): 480 gpd
LOCATION OF SITE: 180 Honey Dew Circle, Troutman NC 28166
APPLICATION DATE
DATE EVALUATED: 9/15/20
PROPERTY SIZE: 0.70 AC
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
B 1	4/10%	0-13	RBscl wfsbk	Fr SS SP SExP	Fr SS SP Few Prom	48	—	—	PS .325
		13-27	BRc/cl wfsbk	Fr SS SP					
		27-48	RBcl wfsbk	Fr SS SP					
B 2	4/11-13%	0-8	RBCL wfsbk	Fr SS SP SExP	Common SAP Inclus.	48	—	—	PS .325
		8-18	BRC/CL wfsbk	Fr SS SP					
		18-48	RBCL wfsbk	Fr SS SP					
B 3	4/14%	0-5	BSL Gr	Fr SS SP SExP	Few SAP	47	—	—	PS .325
		5-26	RC wmsbk	Fr SS SP					
		26-47	RBCL wfsbk	Fr SS SP					
		47-49	VAR SL mass	Fr SS SP					
B 4	4/13%	0-3	BL Gr	Fr SS SP SCnP		50			PS .325
		3-25	RC wmsbk	Fr SS SP					
		25-50	RBCL wfsbk	Fr SS SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	PPBPS	Hybrid (Existing 2 BR Bed (PPBPS w/ 15" II
Site LTAR	0.325	0.325

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: S. Ashley Rollins
OTHER(S) PRESENT: Chad Wagner

COMMENTS:

Updated February 2014

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

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

PROPERTY ID #: 4639068960
DATE OF EVALUATION: 9/15/20
COUNTY: Iredell

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
B5	L/15%	0-6	Fill			50	-	-	PS 0.325
		6-12	BSL wfsbk	Fr SS SP SLEXP					
		12-40	RC wfsbk	Fr SS SP					
		40-50	RBCL wfsbk	Fr SS SP					
B6	L/12%	0-8	RBCL wfsbk	Fr SS SP SLEXP		50	-	-	PS .325
		8-34	BRC wmsbk	Fr SS SP SEX					
		34-50	RBCL wfsbk	Fr SS SP	FewSAP				

COMMENTS:

RECEIVED DEC 09 2020

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

AP-313236 $500.00

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: (PRINT CLEARLY)

Applicant Name: Marc Rollins Address: 180 Honey Dew Circle, Troutman NC Zip: 28166
Applicant Email: marcmrollins@gmail.com Phone: 302-275-5515 Alt. Phone:
Owner Name: Marc Rollins Address: 180 Honey Dew Circle, Troutman NC Zip: 28166
Owner Email: marcmrollins@gmail.com Phone: 302-275-5515 Alt. Phone:

Property Information:

Street Address: 180 Honey Dew Circle, Troutman NC 28166
Subdivision Name: CLT Section/Phase: Lot Number: 32
Driving Directions: State Park Rd to Morrison Farm Rd. Left on Stillwater Rd, Left on Honey Dew Circle. 180 Honey Dew Circle

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

( ) 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: 4
Maximum Number of Occupants: 8
( ) Swimming Pool
( ) Other Addition/Structure:

CHECK FOUNDATION TYPE
( ) Crawl Space Foundation
( ) Concrete Slab Foundation
(✓) 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 ( ) Community Well ( ) City Water ( ) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: 1967
( ) 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: Marc A Rollins 11/30/20
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) 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, Marc Rollins, am the legal owner(s) of the property located at 180 Honey Dew Circle, Troutman NC 28166, identified as PIN (Parcel Identification Number) 4639068960, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) SFS Ashley Rollins & Pat Burke, 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.

Signature of Owner(s) — Date: 12-7-20

Signature of Witness — Date: 12-7-20

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

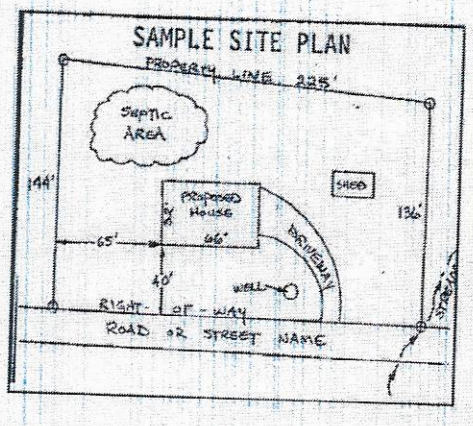
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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 OR WELL PERMIT!!!*

Place an (X) beside each item as you complete the site plan:

(X) Property Line measurements are clearly identified
(X) All proposed structures are indicated
(X) Front and side setbacks from property line
(X) Preferred driveway location
(X) Preferred well location
(X) Preferred septic system location
(X) 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)

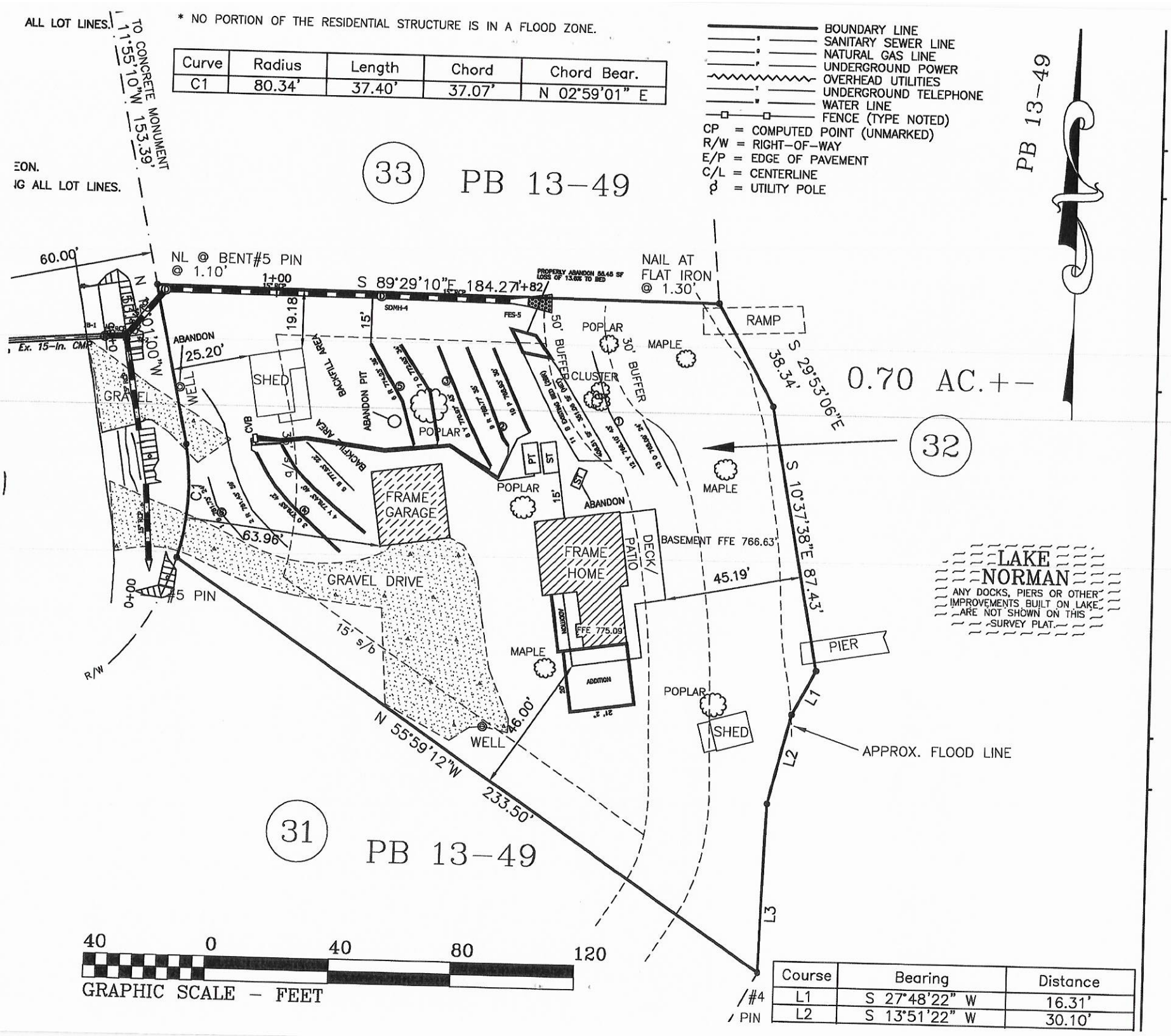
USE THIS SPACE TO DRAW YOUR SITE PLAN

Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site

See Attached

Signature: _____
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

11/30/20
DATE



Curve	Radius	Length	Chord	Chord Bear.
C1	80.34'	37.40'	37.07'	N 02°59'01" E

Course	Bearing	Distance
L1	S 27°48'22" W	16.31'
L2	S 13°51'22" W	30.10'

LAKE NORMAN

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

PB 13-49

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Phone IR 3-7271 — Mooresville Phone NO 3-1271

PERMIT TO INSTALL SEPTIC TANK

Permit NO. _____ Permit Date July 11 19 66

Owner J. C. Dotson Address 1316 Knox - City

Installed By C Hoke Address E7

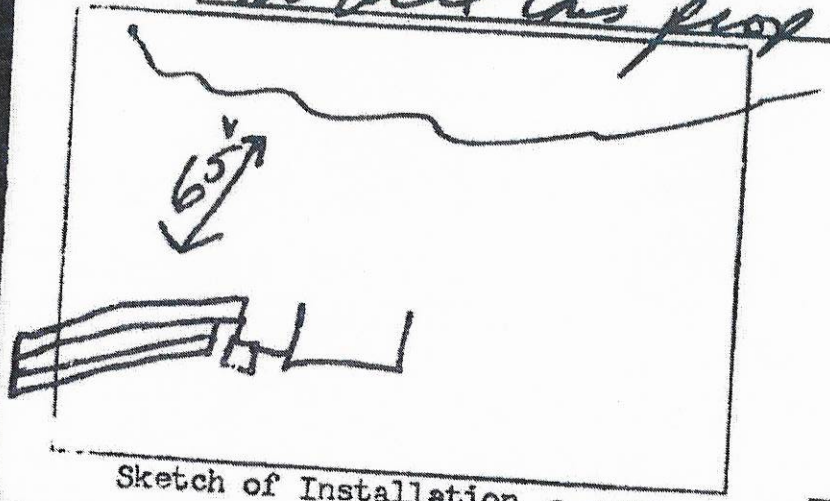
Location of Property Lot #32 - Section B - Left paved Rd type State Park - left 2 story house left at Y - hold R - on R

Tank		Capacity		Length of Lines		Fixtures	
Block	( )	1000	( )	225'	( )	No. of Baths	(1)
Precast	( )	1250	( )	250'	( )	Dishwasher	( )
		1500	( )	Other		Garbage Grdr.	( )
		Other				Other	

NOTIFY HEALTH DEPARTMENT AT LEAST EIGHT HOURS BEFORE TANK IS TO BE INSPECTED.

Final Inspection _____ 19__ Approved ( ) Disapproved ( )

Remarks No well this prop.



Sketch of Installation 250.

Sanitarian

NOTE: THE CONTRACTOR SHALL CHECK AND VERIFY THE CONSTRUCTION DOCUMENTS WITH FIELD CONDITIONS, CONFIRMING THAT ALL WORK IS BUILDABLE AS SHOWN, PRIOR TO PROCEEDING WITH THE WORK. THE CONTRACTOR SHALL NOTIFY THE ARCHITECT, IN WRITING, IMMEDIATELY, IF ANY DISCREPANCIES EXIST, PRIOR TO COMMENCEMENT OF WORK, OR AS SOON AS POSSIBLE, THEREAFTER. STRUCTURAL ENGINEERING BY OTHERS.

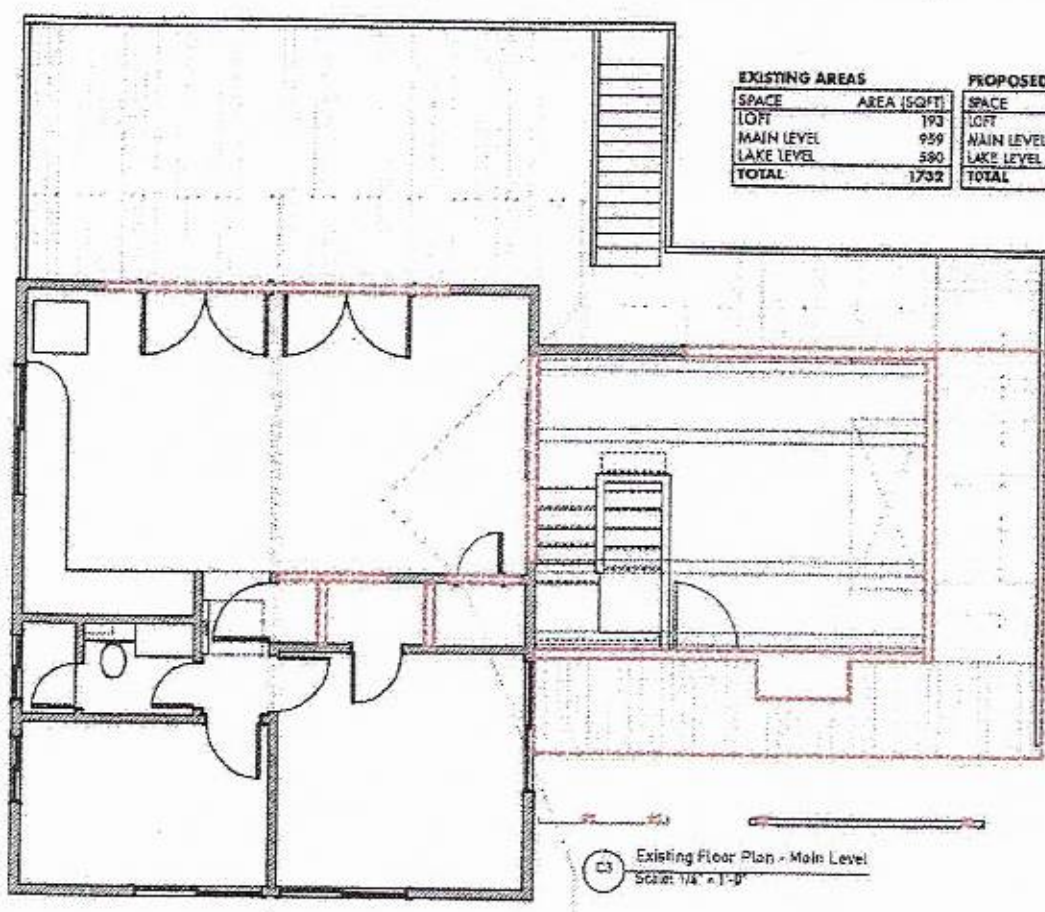
EXISTING

EXISTING AREAS

SPACE	AREA (SQFT)
LOFT	193
MAIN LEVEL	959
LAKE LEVEL	580
TOTAL	1732

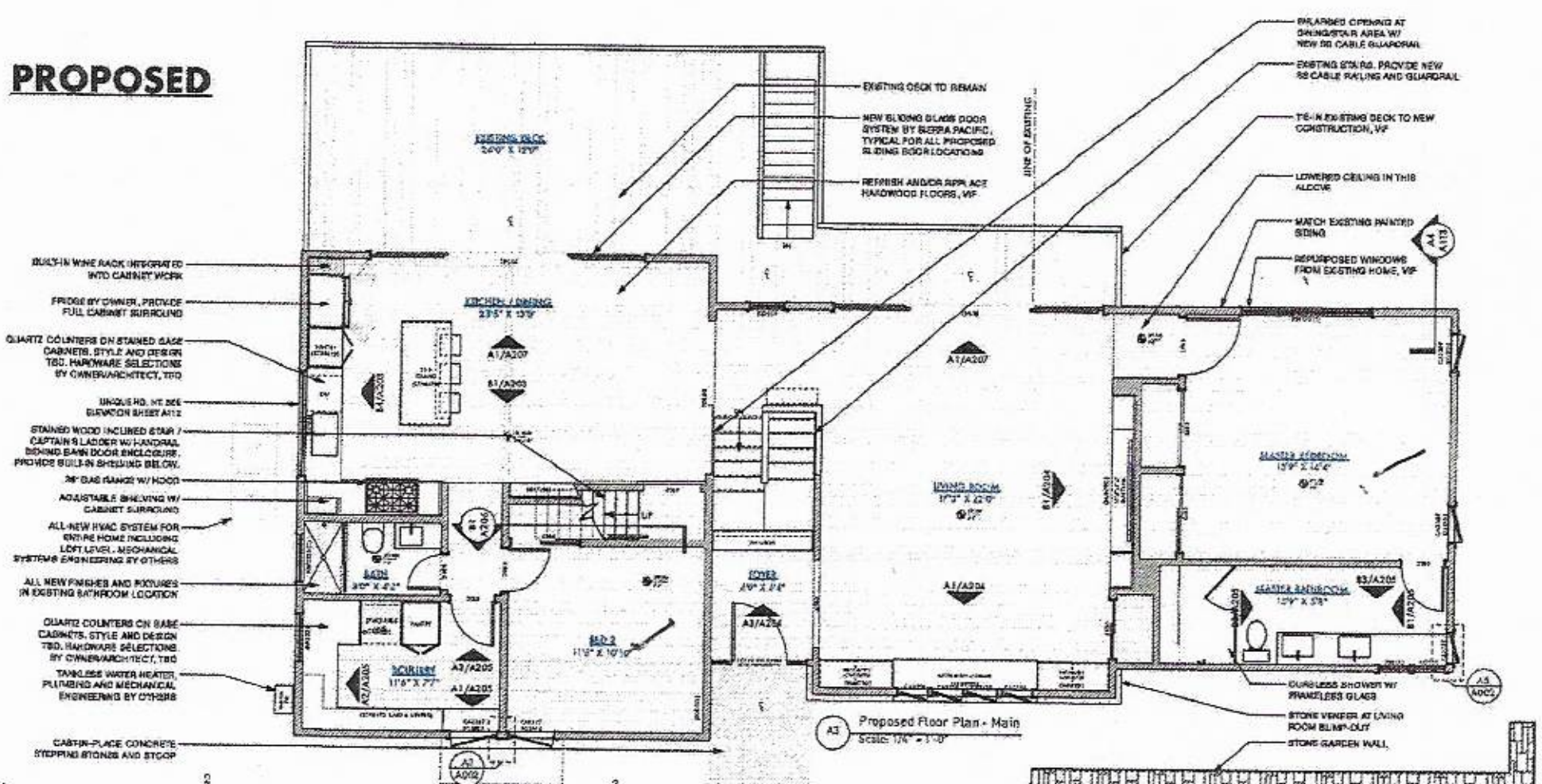
PROPOSED AREAS

SPACE	AREA (SQFT)
LOFT	184
MAIN LEVEL	1648
LAKE LEVEL	952
TOTAL	2784



C3 Existing Floor Plan - Main Level
Scale: 1/4" = 1'-0"

PROPOSED



A3 Proposed Floor Plan - Main
Scale: 1/4" = 1'-0"

NOTE: THE CONTRACTOR SHALL CHECK AND VERIFY THE CONSTRUCTION DOCUMENTS WITH FIELD CONDITIONS, CONFIRMING THAT ALL WORK IS BUILDABLE AS SHOWN, PRIOR TO PROCEEDING WITH THE WORK. THE CONTRACTOR SHALL NOTIFY THE ARCHITECT, IN WRITING, IMMEDIATELY, IF ANY DISCREPANCIES EXIST, PRIOR TO COMMENCEMENT OF WORK, OR AS SOON AS POSSIBLE, THEREAFTER. STRUCTURAL ENGINEERING BY OTHERS.

alter ARCHITECTS
The Alter Architect's Studio, PLLC
1821 Logie Avenue
Charlotte, NC 28205
alterarchitects.com
ph. 704.577.3632

11/09/20

180 Honeydew Circle
Home Remodel & Addition
Prepared for: Marc & Ashlee Rollins

Project name/#: 180 Honeydew Circle / 20010
CAD File Name: 180HoneydewCircle.vwx

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- DO NOT SCALE DRAWINGS -

Mark	Date	Description
08	11/24/2020	95% CDs - House
09	12/09/2020	FOR CONSTRUCTION

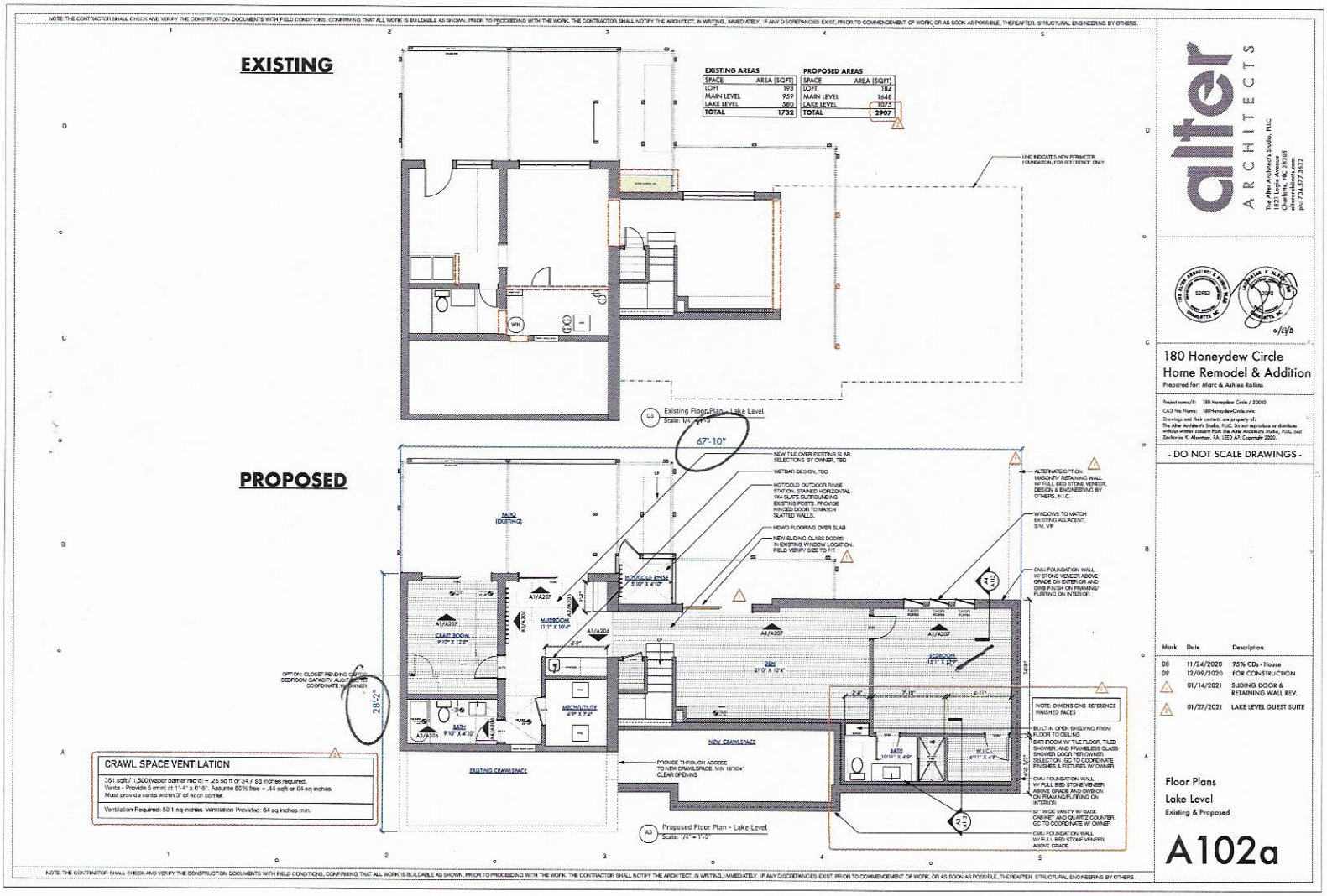
Floor Plans
Main Level
Existing & Proposed

A101a

Acknowledgement Of Plans Submittal ONLY!

Date 2-22-21

Date 2-23-21



alter ARCHITECTS
The Alter Architect's Studio, PLLC
1821 Logis Avenue
Charlotte, NC 28203
alterarchitects.com
ph: 704.577.3632

01/21/21

180 Honeydew Circle
Home Remodel & Addition
Prepared for: Marc & Ashlee Rollins

Project name/#: 180 Honeydew Circle / 20010
CAD File Name: 180HoneydewCircle.vwx

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- DO NOT SCALE DRAWINGS -

Mark	Date	Description
08	11/24/2020	95% CDs - House
09	12/09/2020	FOR CONSTRUCTION
1	01/14/2021	SLIDING DOOR & RETAINING WALL REV.
2	01/27/2021	LAKE LEVEL GUEST SUITE

Floor Plans
Lake Level
Existing & Proposed

A102a

Acknowledgement Of Plans Submittal ONLY!

Date 2-22-21

Date 2-23-21

IREDELL COUNTY · NC

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

APPLICATION NUMBER
313236
Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4639068960.000	180 HONEYDEW CIR	Iredell County

Owner Information	Applicant Information
Name: ROLLINS MARC+ASHLEE N	Name: BURKE DEVELOPER INC
Address: 180 Honeydew Cir	Address: PO BOX 3481
Troutman, NC 28166	MOORESVILLE, NC 28115
Phone: (302)275-5515	Phone: (704)361-0047

Use Requested	Zone Code
Addition	RR

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.7	35	50	15	15	WSIV-CA Catawba/Lake Norman	YES

Remarks
addition/relocate septic

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: 12/09/2020

Permit Number	313236

TOTAL FEES:	$77.25

CLT S18 Lot 32

WELL ABANDONMENT RECORD

North Carolina Department of Environment and Natural Resources- Division of Water Quality

WELL CONTRACTOR CERTIFICATION # 2297-A

1. WELL CONTRACTOR:

S. Vernon Lassiter
Well Contractor (Individual) Name

Lassiter Well Company
Well Contractor Company Name

1600 Rhyne Rd
Street Address

Charlotte NC 28214
City or Town State Zip Code

(704) 392-5704
Area code Phone number

2. WELL INFORMATION:

SITE WELL ID # (if applicable)

STATE WELL PERMIT # (if applicable)

COUNTY WELL PERMIT # (if applicable) 312948

DWQ or OTHER PERMIT # (if applicable)

WELL USE (Check applicable use): ☐ Monitoring ☑ Residential

☐ Municipal/Public ☐ Industrial/Commercial ☐ Agricultural

☐ Recovery ☐ Injection ☐ Irrigation

☐ Other (list use)

3. WELL LOCATION:

COUNTY Iredell QUADRANGLE NAME

NEAREST TOWN: Troutman

PIN 4639 06 8960

(Street/Road Name, Number, Community, Subdivision, Lot No., Parcel, Zip Code)

TOPOGRAPHIC / LAND SETTING:

☐ Slope ☐ Valley ☑ Flat ☐ Ridge ☐ Other

(Check appropriate setting)

LATITUDE 36 ° ' " DMS OR 3X.XXXXXXXXDD

LONGITUDE 75 ° ' " DMS OR 7X.XXXXXXXXDD

Latitude/longitude source: ☐GPS ☐Topographic map

(location of well must be shown on a USGS topo map andattached to this form if not using GPS)

4a. FACILITY - The name of the business where the well is located. Complete 4a : (If a residential well, skip 4a; complete 4b, well owner information only.)

FACILITY ID # (if applicable)

NAME OF FACILITY

STREET ADDRESS

City or Town State Zip Code

4b. CONTACT PERSON/WELL OWNER:

NAME Burke Developer Inc

STREET ADDRESS 180 Honeydew circle

5. WELL DETAILS:

a. Total Depth 150 ft. Diameter: 6 in.

b. Water Level (Below Measuring Point): 30 ft.

Measuring point is 1 ft. above land surface.

6. CASING:

	Length	Diameter
a. Casing Depth (if known):	60 ft.	6 in.
b. Casing Removed:	3 ft.	6 in.

7. DISINFECTION: 8 ounces

(Amount of 65%75% calcium hypochlorite used)

8. SEALING MATERIAL:

Neat Cement

Cement _____ lb.
Water _____ gal.

Sand Cement

Cement _____ lb.
Water _____ gal.

Bentonite

Bentonite lb. 41 bags

Type: ☐ Slurry ☑ Pellets

Water 30 gal.

Other

Type material

Amount

9. EXPLAIN METHOD OF EMPLACEMENT OF MATERIAL:

poured bentonite pellets to fill from top to bottom - complete grout

10. WELL DIAGRAM : Draw a detailed sketch of the well on the back of this form showing total depth, depth and diameter of screens (if any) remaining in the well, gravel interval, intervals of casing perforations, and depths and types of fill materials used

11. DATE WELL ABANDONED 2-16-21

I DO HEREBY CERTIFY THAT THIS WELL WAS ABANDONED IN ACCORDANCE WITH 15A NCAC 2C, WELL CONSTRUCTION STANDARDS, AND THAT A COPY OF THIS RECORD HAS BEEN PROVIDED TO THE WELL OWNER.

S V Lassiter 2-17-21

SIGNATURE OF CERTIFIED WELL CONTRACTOR DATE

SIGNATURE OF PRIVATE WELL OWNER ABANDONING THE WELL DATE

(The private well owner must be an individual who personally abandons his/her residential well in accordance with 15A NCAC 2C .0113.)

S Vernon Lassiter

PRINTED NAME OF PERSON ABANDONING THE WELL

Submit a copy to the owner and the original to: Division of Water Quality - Information Processing, 1617 Mail Service Center, Raleigh, NC 27699-1617, Phone : (919) 807-6300

Form GW-30
Rev. 5/10