ISHD–ENVIRONMENTAL HEALTH DIVISION KW (Statesville Office) (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 205519

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

PIN # 4639-07-1584

APPLICANT/OWNER: Gordon + Tara Arbitter
APPLICANT ADDRESS: 516 A River Highway # 307, Mooresville, NC 28117
SITE ADDRESS: 134 Honeydew Circle Troutman, NC 28166
PHONE: 704-402-7446 ALT. PHONE —
SITE DIRECTIONS: State Park Rd → Morrison Farm Rd → Stillwater → Honeydew → on Right
SAP CONTROLLED: ☐ YES ☒ NO
SUBDIVISION: CL+T
SECTION: 18 LOT # 889 LOT AREA: 1.29 acres
DESIGN FLOW: 360 GPD L.T.A.R.: 0.30

Septic Tank	1000	(gal)	STB	306	Date	9/20	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV ⓥ VI	
Pump Tank	1000	(gal)	PT	AXZORTUV	Date		System Description:	LP-PPBPS (50% Reduction) + TS II			
Pump Make	AdvanTex	Model			Serial #	436041	Repair System Description:	PPBPS + TS II Pretreatment		Pretreatment	
# Nitrification Fields	1	# Lines	4		Linear Ft	200	Maintenance Agreement Required:	☒ YES	☐ NO		
Trench Width	24"	Trench Bottom Depth(Low side)				29" (36" high)	Gravel Depth	—	☐ GRAVITY	☒ PRESSURE	

☒ Residence	No. Bedrooms	3	Water Supply		
☐ Business	No. Persons	6	☒ Private		
☐ Other	No. Employees		☐ Public		
☐ Slab	☐ Crawl Space		☐ Community		
☒ Basement w/plumbing			☐ Basement w/o plumbing		

Comments / Conditions: System components and functional parameters to be designed by a professional engineer. Proposal must be provided to the department and approved prior to AC issuance.

INITIAL SITE SKETCH

See attached proposal from Michael Athanas + Associates Dated: 10/21/19 and corresponding engineer design from Donald L. Munday dated 1-6-2020
Engineer Name + PE #

AS BUILT SKETCH

11/19/2020: Drainlines checked and were good all were 10' off property line and 15' off of house. As built on site sketch Not to scale

11/24/2020: Tanks, CVBand connections all checked and were good

↳ Landscape Final before OP
4-15-21* Pressure Head + Electrical checked
- Relocate waterline + need as built
- Remove Fandation Drain on Retaining wall close to Tank.

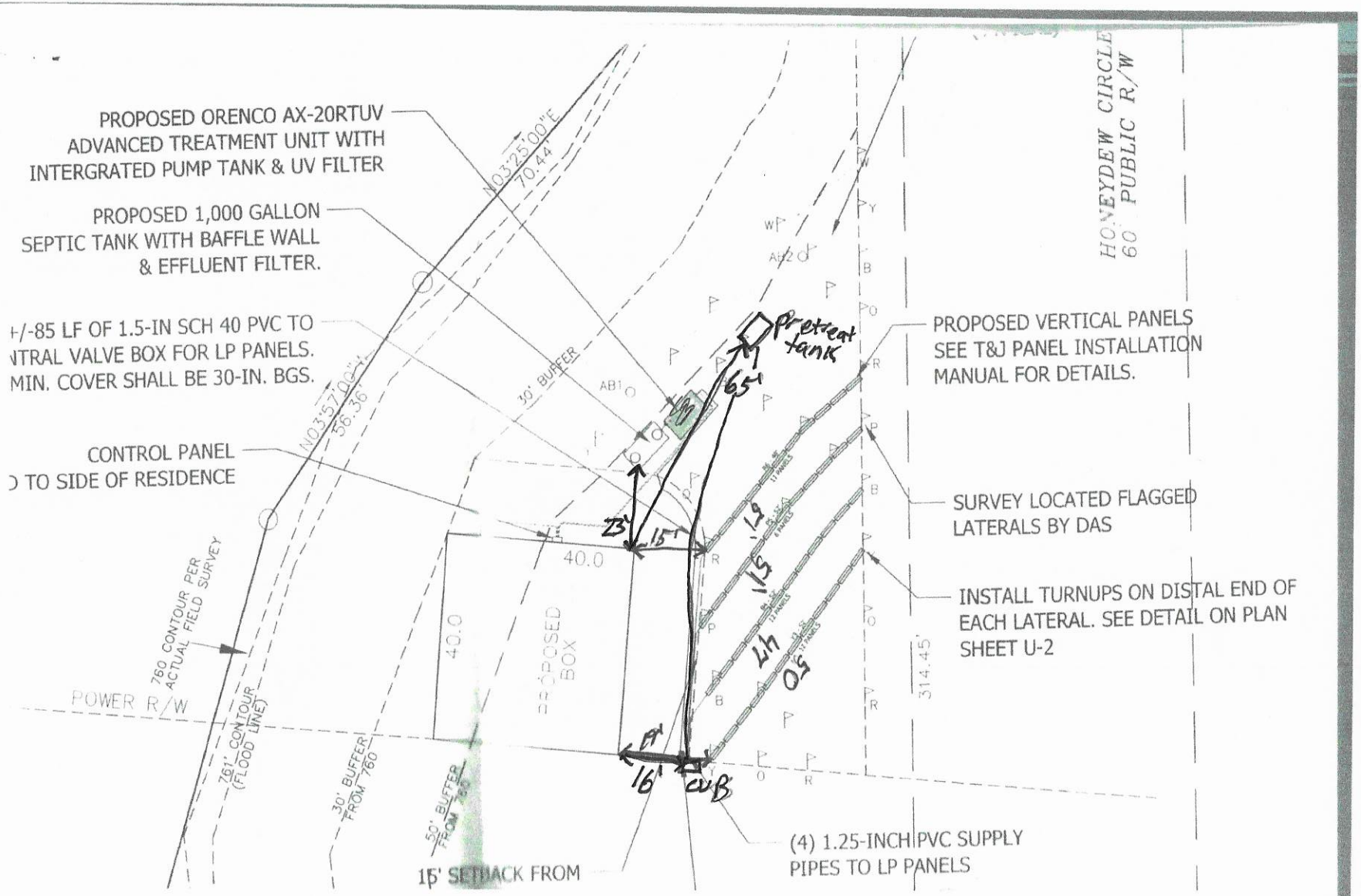
Permit can be suspended or revoked if any false information is supplied toward securing the permit / any unauthorized changes are made to the site / any unauthorized changes are made in the installation of the system. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

☐ **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: [signature] Date: 11-6-2019
IMPROVEMENT PERMIT by: [signature] Date: 10/30/2019
AUTHORIZATION TO CONSTRUCT by: [signature] Date: 3/30/2020

Installed by: Richard Abernathy Company
OPERATION PERMIT by: [signature] Date: 7/2/2021
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.


PROPOSED ORENCO AX-20RTUV ADVANCED TREATMENT UNIT WITH INTERGRATED PUMP TANK & UV FILTER
PROPOSED 1,000 GALLON SEPTIC TANK WITH BAFFLE WALL & EFFLUENT FILTER.
+/-85 LF OF 1.5-IN SCH 40 PVC TO NTRAL VALVE BOX FOR LP PANELS. MIN. COVER SHALL BE 30-IN. BGS.
CONTROL PANEL TO SIDE OF RESIDENCE
PROPOSED VERTICAL PANELS SEE T&J PANEL INSTALLATION MANUAL FOR DETAILS.
SURVEY LOCATED FLAGGED LATERALS BY DAS
INSTALL TURNUPS ON DISTAL END OF EACH LATERAL. SEE DETAIL ON PLAN SHEET U-2
(4) 1.25-INCH PVC SUPPLY PIPES TO LP PANELS
15' SETBACK FROM
HONEYDEW CIRCLE 60' PUBLIC R/W
POWER R/W
760 CONTOUR PER ACTUAL FIELD SURVEY
761' CONTOUR (FLOOD LINE)
30' BUFFER FROM 760
50' BUFFER FROM 760
30' BUFFER
PROPOSED BOX
40.0
40.0
314.45'
N03°25'00"E 70.44
N03°57'00"E 56.36'
Pretreat tank
65'
23'
15'
16'
15'
15'
17'
CUB

PIEDMONT DESIGN ASSOCIATES, P.A.
125 East Plaza Drive | Suite #101
Mooresville, NC 28115
Phone: 704-664-7888 | Fax: 704-664-1778
Email: dmunday@pdapa.com

Engineering
Surveying
Planning

June 29, 2021

Iredell County Environmental Health Department
610 East Center Avenue
Mooresville, NC 28115
Attn: Mr. Benjamin Botkins, REHS

RE: TS-II LP PPBPS Subsurface Effluent Disposal System
134 Honeydew Circle, Troutman, Iredell County, North Carolina

Dear Mr. Botkins:

ENGINEERS CERTIFICATION

I, **Donald L. Munday**, as a duly registered Professional Engineer in the State of North Carolina, having been authorized to observe periodically the construction of the referenced project, a TS-II low pressure PPBPS effluent disposal system; serving a new 3 bedroom residence, located at 134 Honeydew Circle, Troutman, Iredell County, NC, hereby state that, to the best of my abilities, due care and diligence was used in the observation of the construction such that the construction was observed to be built within substantial compliance and intent of the approved plans and specifications.

Additional requirements for use of repair area:
In the event of a system failure, the homeowner will be required to remove a portion of the retaining wall in the repair area prior to the installation of new laterals. The removal of the retaining wall, adjustment of grades in the area and installation of the laterals must be under the direct supervision of a Licensed Soil Scientist.

Sincerely,

PIEDMONT DESIGN ASSOCIATES, P.A.

Donald L. Munday, P.E.
N.C. Registration No. 17327



06/29/2021

Cc: Steve Barry, AQWA
Gordon & Tara Arbitter, Owner
L. Shaun Ogden, General Contractor

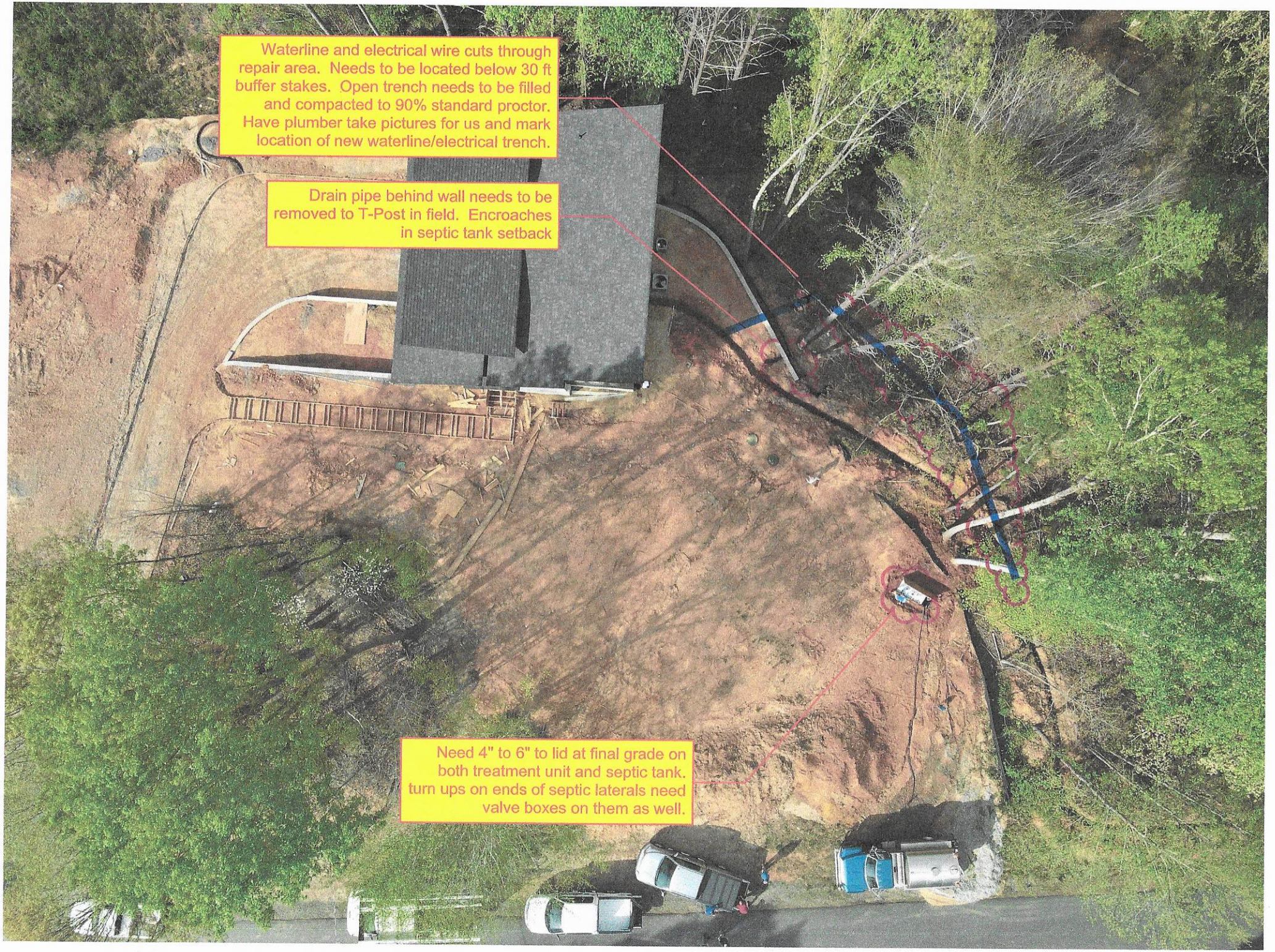
Benjamin Botkins

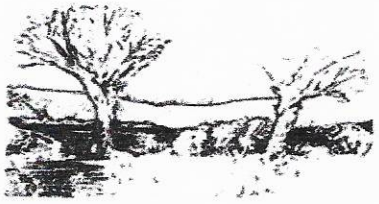
From: David DeCaron <ddecaron@pdapa.com>
Sent: Thursday, April 15, 2021 1:32 PM
To: Tara Larson Arbitter
Cc: Benjamin Botkins
Subject: Punch Items for Septic System on Honeydew
Attachments: Arbitter.pdf

Tara,
Nice meeting you today. I have attached an aerial image of revisions that need to take place prior to our final certification. I will need to visit the site again for verification on our end. Once I have completed our final trip to the site, we will invoice you for our final 15% plus time for site visit(s) today and one more, and certification on the system. I have cc'ed Ben at Iredell County on this as well. Please have your GC reach out to us if there are any questions or any clarifications needed.

David DeCaron
Piedmont Design Associates, P.A.
125 East Plaza Drive, Suite 101
Mooresville, NC 28115
Phone 704-664-7888
Fax 704-664-1778
Email: ddecaron@pdapa.com
NCBELS License No. C-1007

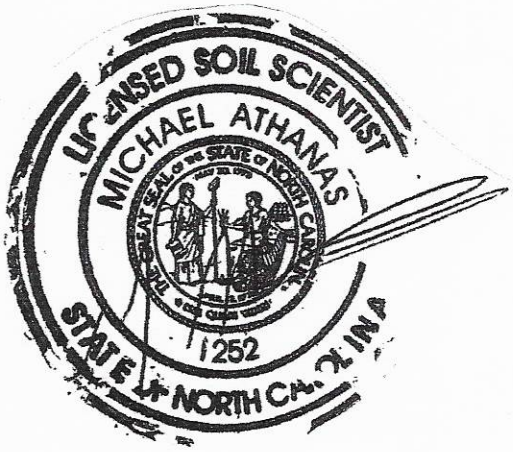
CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe. Report suspicious emails by clicking the "Report Phish" button.


Waterline and electrical wire cuts through repair area. Needs to be located below 30 ft buffer stakes. Open trench needs to be filled and compacted to 90% standard proctor. Have plumber take pictures for us and mark location of new waterline/electrical trench.
Drain pipe behind wall needs to be removed to T-Post in field. Encroaches in septic tank setback
Need 4" to 6" to lid at final grade on both treatment unit and septic tank. turn ups on ends of septic laterals need valve boxes on them as well.



MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887
10/16/2019

Reference: Data Sheet for 134 Honeydew Circle, CLT Lot 889 Sect., 18
House Footprint: 40 x 40
Building Setbacks: 35' front, 15' side, 30' lake **(Variance Granted-Attached)**
Water Source: Well
Number of Bedrooms: 3/360 GPD
Proposed LTAR: 0.3 GPD/FT2 (initial), 0.3 GPD/FT2 (repair)
Proposed System Type: TSII PPBPS - 8'Centers
Proposed Repair System Type: TSII PPBPS
Distribution: Low Pressure-CVB
Flow per Orifice: 0.41 GPM
Orifice Size: 5/32"
System Flow: 19.7 GPM (48 panels-12 panels/line)
Dosing Volume: 119 gallons (see comments)
Pump Run Time: 6.0 minutes
Elevation Head: 13'
Friction Head: 1.0'
Pressure Head: 2'
Total Dynamic Head: 14.2'
Supply Line Length: 115' of PVC
Septic/Pump Tank Size: 1000/1000 gallons
Proposed Trench Bottom: 36"
Proposed Trench Width: 2'



Line	Design Length	Actual Length	Elevation
Red 1		17'	13.0
Orange 2		33'	14.6
Yellow 3	**50'**	**51'**	**15.5**
Blue 4	**50'**	**50'**	**16.6**
Pink 5	**50'**	**50'**	**18.2**
Red 6	**50'**	**50'**	**19.2**
Orange 7		50'	21.3
Blue 8		36'	23.2
Yellow 9		(50' in buffer) 70'	25.2
White 10		(10' in buffer) 18'	26.7

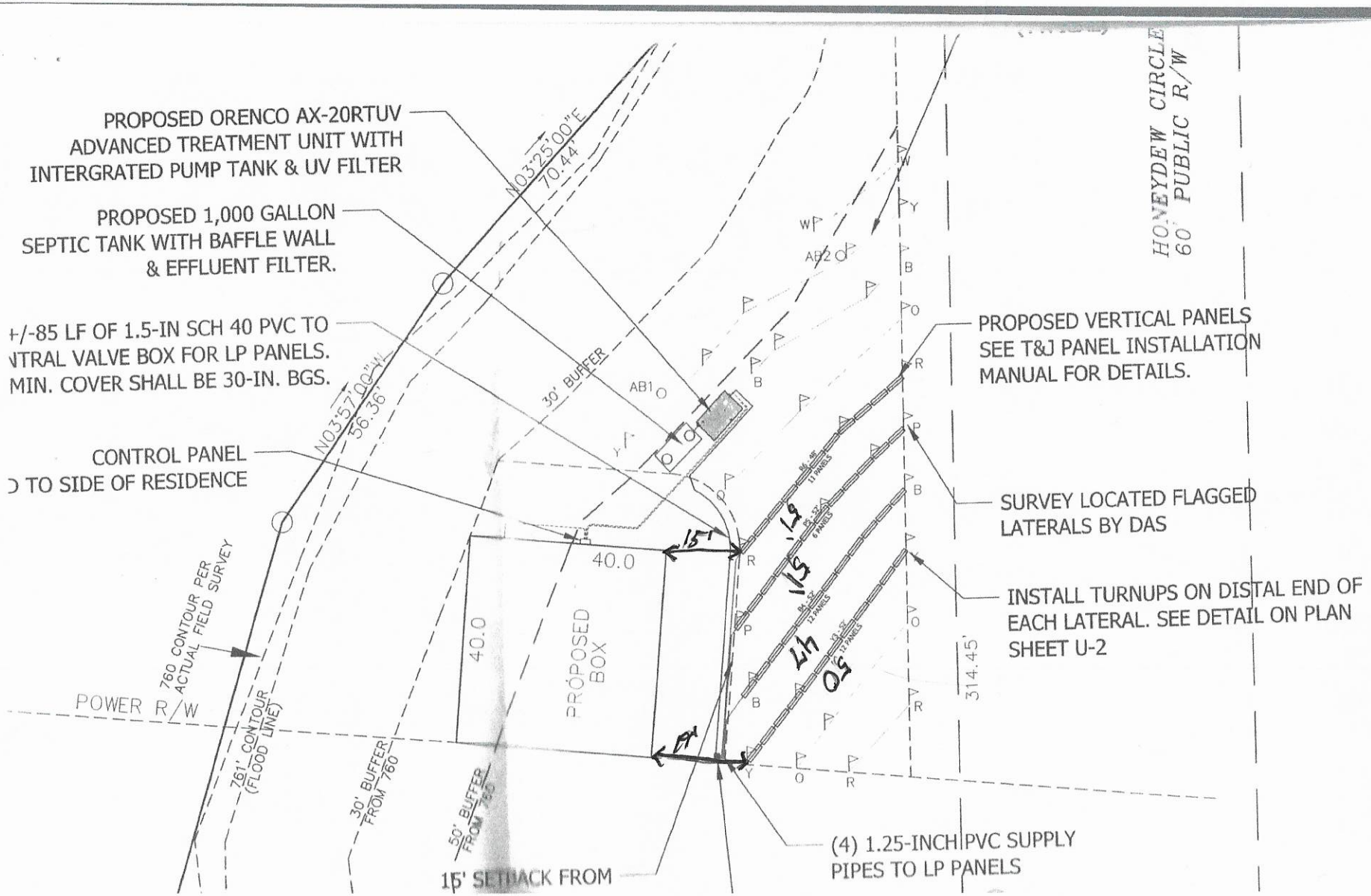
APPROVED OCT 30 2019

Initial System: 200' **Repair System:** 224' (218' required)
Pump Tank: 23.5' **House Corner:** 21.1' **Benchmark:** 1.0'

Comments:
MA&A was asked to increase this existing 2 bedroom panel block system/IP to a 3 bedroom IP. MA&A has previously met with Iredell County (Grace) and confirmed an increase from the original .275 LTAR to a .3 LTAR for this site due to few lithochromic colors present. Please note this site/septic system was surveyed by DAS to confirm the location of the septic laterals, which demonstrated additional space for additional septic laterals. All septic lines must be 25 from any basement/foundation drains (Refer to site plan). Please note for the repair there is 164 outside of the buffer, leaving 60 feet inside the buffer, therefore 200 feet minus 164'=36 x 2 (conv.)=72'x.75%=54 feet. . House is staked in orange flags and tanks are staked in white flags. Please feel free to call with any questions or concerns, happy to meet on site.

10/16/2019
MA&A are proposing to pretreat the initial system to reduce the setback from the basement foundation drain to 15'. The Pretreatment unit will be Orenco AdvanTex Ax20-RT. This unit replaces the pump tank. The maximum dosing volume, according to the approval, is 119 gallons. The original lay out will remain the same as previously approved.

APPROVED OCT 30 2019


PROPOSED ORENCO AX-20RTUV
ADVANCED TREATMENT UNIT WITH
INTERGRATED PUMP TANK & UV FILTER
PROPOSED 1,000 GALLON
SEPTIC TANK WITH BAFFLE WALL
& EFFLUENT FILTER.
+/-85 LF OF 1.5-IN SCH 40 PVC TO
NTRAL VALVE BOX FOR LP PANELS.
MIN. COVER SHALL BE 30-IN. BGS.
CONTROL PANEL
O TO SIDE OF RESIDENCE
760 CONTOUR PER
ACTUAL FIELD SURVEY
761' CONTOUR
(FLOOD LINE)
POWER R/W
30' BUFFER
FROM 760
50' BUFFER
FROM 760
15' SETBACK FROM
N03°25'00"E
70.44'
N03°57'00"W
56.36'
30' BUFFER
AB1
AB2
40.0
40.0
PROPOSED
BOX
15'
15'
15'
HONEYDEW CIRCLE
60' PUBLIC R/W
314.45'
PROPOSED VERTICAL PANELS
SEE T&J PANEL INSTALLATION
MANUAL FOR DETAILS.
SURVEY LOCATED FLAGGED
LATERALS BY DAS
INSTALL TURNUPS ON DISTAL END OF
EACH LATERAL. SEE DETAIL ON PLAN
SHEET U-2
(4) 1.25-INCH PVC SUPPLY
PIPES TO LP PANELS

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM*

Application For:
( ) Septic Improvement Permit (✓) New Well Permit ( ) Authorization to Construct ( ) Well Repair Permit ( ) Existing System Inspection ( ) Well Abandonment ( ) 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: Ogden Const. LLC Address: P.O. Box 1281 Davidson N.C. [redacted] Zip: 28036
Applicant Email: ogdendevelopment@msn.com Phone: 704-309-6810 Alt. Phone: Same
Owner Name: Tara + Gordon Arbitter Address: 516A River Hwy #309 Mooresville NC Zip: 28117
Owner Email: tara.arbitter@gmail.com Phone: 704-402-7446 Alt. Phone: NA

Property Information:

Street Address: 134 Honeydew Circle
Subdivision Name: NA Section/Phase: _____ Lot Number: 889
Driving Directions: State Park Rd Lt Mooresville From Lt Statesville LF Honeydew Lot on Right

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: 3
Maximum Number of Occupants: 6
( ) Swimming Pool
( ) Other Addition/Structure: _____
Non-Residential Site Development: Type of Business: _____
Square Footage of Building: _____ Max. Number of Employees: _____ Max. Number of Seats/Beds/Other: _____

CHECK FOUNDATION TYPE

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

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: _____
( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional (✓) Other: See Drawing

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: _____ 3-30-20
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

(Check and sign only ONE of the options below)

☐ 1. *** APPLICANT AND OWNER ARE THE SAME. *** *(Sign here)* _____

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.

☒ 2. I, Tara & Gordon Arbitter, am the legal owner(s) of the property located at 134 Honeydew Circle, identified as PIN (Parcel Identification Number) 4639071584.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Shaun Ogden, _____, 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.

Tara Arbitter
Gordon Arbitter
Signature of Owner(s)

3-30-2020
Date

Mooresville - Environmental Health
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

RECEIVED OCT 2 1 2019

#205519

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Ltd Relayout - Paid $75.00

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: Gordon & Tara Arbitter **Address:** 516A River HWY #307, Mooresville, NC **Zip:** 28117

Applicant Email: _____ **Phone:** 704-402-7446 **Alt. Phone:** _____

Owner Name: Same **Address:** _____ **Zip:** _____

Owner Email: _____ **Phone:** _____ **Alt. Phone:** _____

Property Information:

Street Address: 134 Honeydew Circle

Subdivision Name: CL&T **Section/Phase:** 18 **Lot Number:** 889

Driving Directions: _____

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: 3
Maximum Number of Occupants: _____
( ) 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: _____
( ) 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: _____ 10/21/2019
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.

We, Gordon & Tara Arbitter, are the legal owner(s) of the property located at 134 Honeydew Circle, identified as PIN (Parcel Identification Number) 4639071584.000, located in Iredell County, North Carolina.

I do hereby authorize **(print legal representative/company name)** 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.

Signature of Owner(s) — Date 10-10-19

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

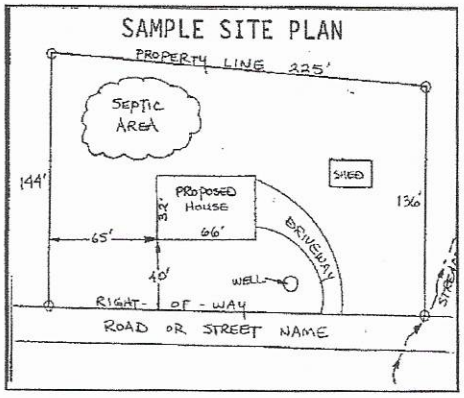
Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *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:

(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 and well location**
(X) **Area you prefer your septic system to be placed**
(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

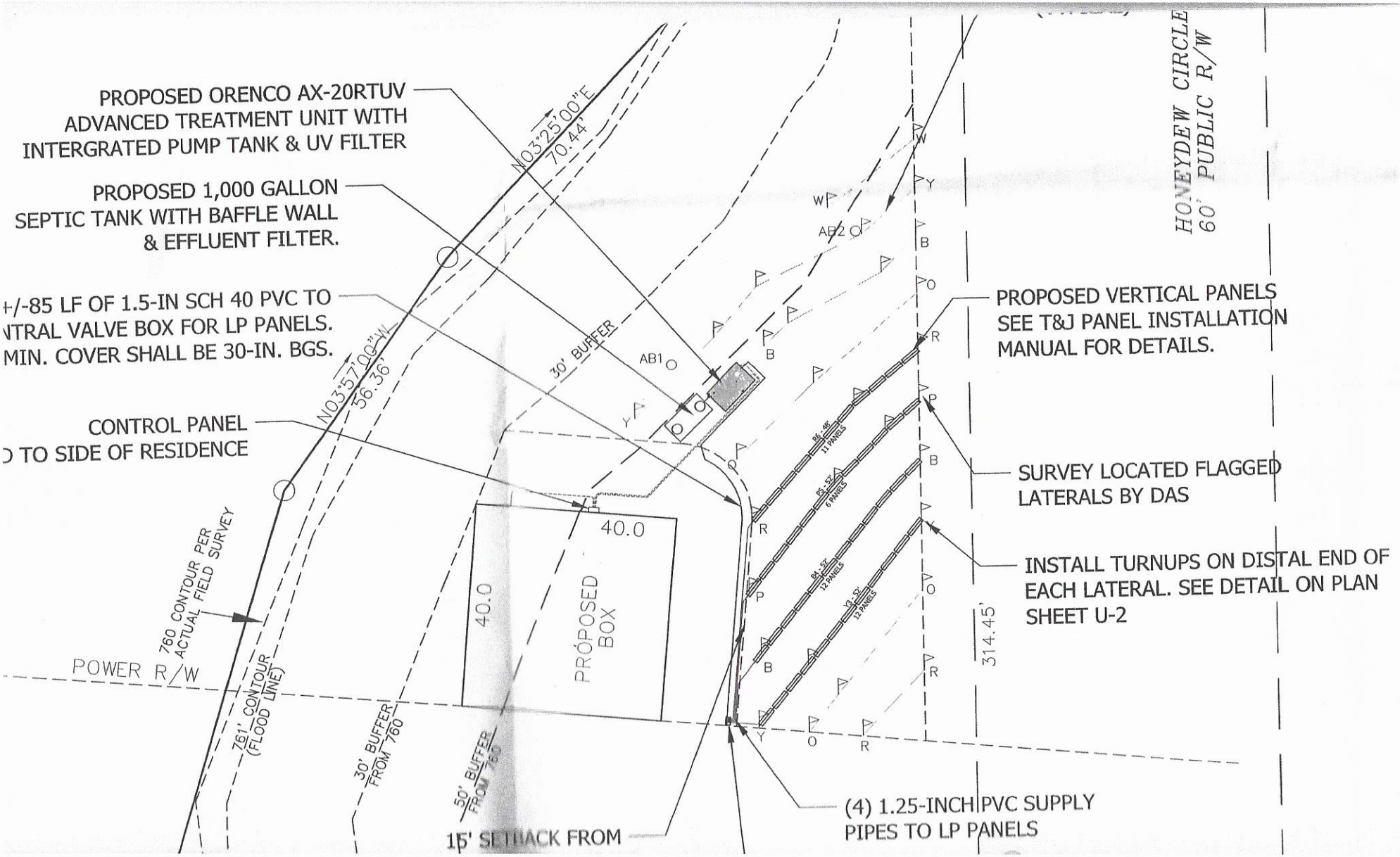
SGG Attached Drawing

Signature: _____

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

3-30-20

DATE


PROPOSED ORENCO AX-20RTUV
ADVANCED TREATMENT UNIT WITH
INTERGRATED PUMP TANK & UV FILTER
PROPOSED 1,000 GALLON
SEPTIC TANK WITH BAFFLE WALL
& EFFLUENT FILTER.
+/-85 LF OF 1.5-IN SCH 40 PVC TO
NTRAL VALVE BOX FOR LP PANELS.
MIN. COVER SHALL BE 30-IN. BGS.
CONTROL PANEL
O TO SIDE OF RESIDENCE
N03°25'00"E
70.44'
N03°57'00"W
36.36'
30' BUFFER
AB1
AB2
PROPOSED VERTICAL PANELS
SEE T&J PANEL INSTALLATION
MANUAL FOR DETAILS.
SURVEY LOCATED FLAGGED
LATERALS BY DAS
INSTALL TURNUPS ON DISTAL END OF
EACH LATERAL. SEE DETAIL ON PLAN
SHEET U-2
314.45'
40.0
40.0
PROPOSED
BOX
760 CONTOUR PER
ACTUAL FIELD SURVEY
761' CONTOUR
(FLOOD LINE)
POWER R/W
30' BUFFER
FROM 760
50' BUFFER
FROM 760
15' SETBACK FROM
(4) 1.25-INCH PVC SUPPLY
PIPES TO LP PANELS
HONEYDEW CIRCLE
60' PUBLIC R/W

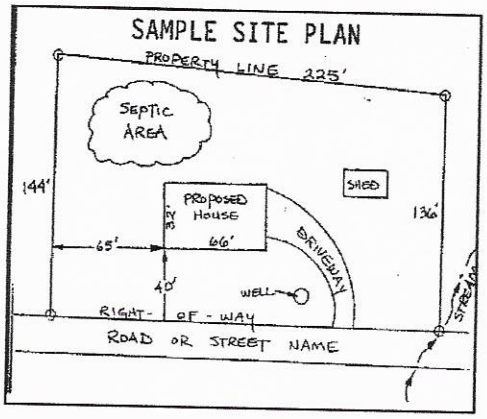
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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:

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

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 plan

Signature: _____

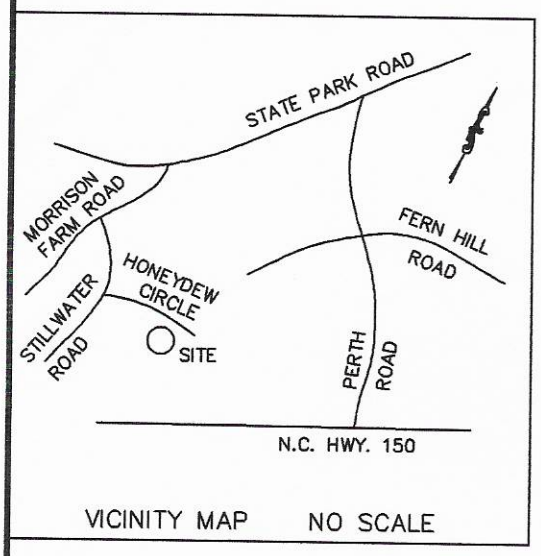
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

10/21/2019

DATE

survey made under my supervision recorded in deed book_____, page_____, and/or plat book 17, page 58, that the ratio of precision is 1':10,000, that this map was prepared in accordance with the General Statutes of North Carolina Chapter 89C. my hand and seal on the 27, day of SEPTEMBER, A.D. 20 19.

WILLIAM M. ALLEN, PLS



VICINITY MAP NO SCALE

R/W

#4 REBAR FOUND

R=155.33
A=87.54'
N63°09'57"E
86.39'

#4 REBAR FOUND

N79°23'08"E
84.68'

#4 REBAR FOUND

R=68.50
A=72.08'
S70°27'28"E
68.80'

#4 REBAR

HONEYDEW CIRCLE
60' PUBLIC R/W

N53°50'20"W
99.95'

35' FRONT SETBACK
50' SETBACK
30' BUFFER
Well

#4 REBAR FOUND

LOT 888
PATRICK TRYSON
TERESA J. TRYSON
1406/588

S81°37'16"W
52.04'

S56°36'00"W
39.97'

S83°36'00"W
37.17'

N03°25'00"E
70.44'

N03°57'00"W
56.36'

LAKE NORMAN

760 CONTOUR PER ACTUAL FIELD SURVEY

30' BUFFER

32.5'
30.0'

R1-17'-13.0'
O2-33'-14.6'
Y3-50'-15.5'
B4-50'-16.6'
P5-50'-18.2'
R6-50'-19.2'
O7-50'-21.3'
B8-36'-23.2'
Y9-70'-25.2'
W10-18'-26.7'
PT - 23.5'
HC - 21.1'
BM - 1.0'

pb. 17 pg. 58

POWER R/W

W
W10
Y9
AB2
B
O
AB1
TANKS
B8
Y
19.3'
HC
O7
15'
R6
40.0
40.0
PROPOSED BOX
15.5'
P5
19.8'
B4
19.5'
Y3
O2
R1
CVB
10'
R
314.45'
BM

Drive

50' BUFFER FROM 766' CONTOUR (FLOOD LINE)

35' FRONT SETBACK

S40°07'00"E
(BASE BEARING)

N22°25'00"W
179.20'

LOT 889
1.29 AC.

#4 REBAR SET

S55°23'00"W
191.09'

PK NAIL
(TIE ONLY)
S22°54'39"W
36.22'

#5 REBAR FOUND

270' R/W

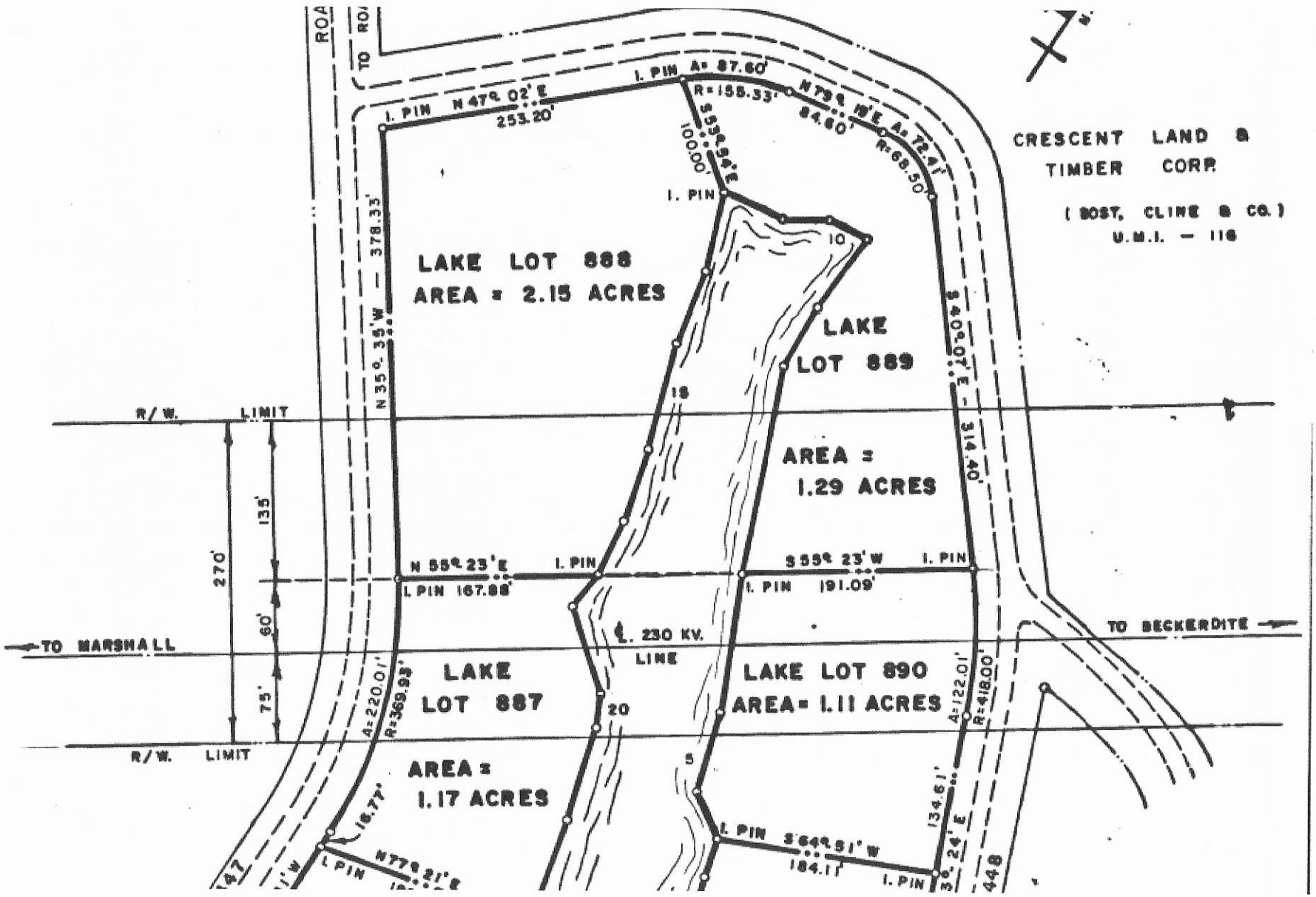
LOT 890
BENNIE T. BABB, III
WANDA N. BABB
1352/1571

APPROVED OCT 30 2019

0' 30' 60' 100'
SCALE IN FEET

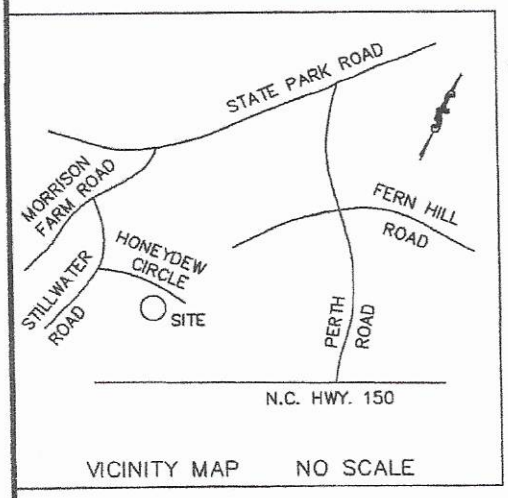
NOTES
1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENT AND/OR RIGHTS-OF-WAY OF RECORD.
2) AREA COMPUTED BY THE COORDINATE METHOD.
3) EXISTING 760' & 761' CONTOUR ELEVATION BASED ON LAKE NORMAN LAKE LEVEL AT COWAN'S FORD DAM (READING ON 11/21/14) ELEVATION: 757.1'

LEGEND
P.P. = POWER POLE
POWER TRANS.
E.I.P. = EXISTING IRON FOUND
I.P.S. = #4 REBAR SET


CRESCENT LAND & TIMBER CORP
(BOST, CLINE & CO.)
U.M.I. — 116
LAKE LOT 888
AREA = 2.15 ACRES
LAKE LOT 889
AREA = 1.29 ACRES
LAKE LOT 887
AREA = 1.17 ACRES
LAKE LOT 890
AREA = 1.11 ACRES
I. PIN N 47° 02' E 253.20'
I. PIN A = 87.60' R = 155.33'
N 78° 18' E A = 72.41' R = 68.50'
S 55° 54' E 100.00'
I. PIN
N 35° 35' W — 378.33'
S 46° 07' E — 314.40'
R/W LIMIT
270'
135'
60'
75'
N 55° 23' E I. PIN
I. PIN 167.88'
S 55° 23' W I. PIN
I. PIN 191.09'
TO MARSHALL
TO BECKERDITE
℄ 230 KV. LINE
A = 220.01' R = 369.93'
A = 122.01' R = 418.00'
134.61'
I. PIN S 64° 51' W 184.11'
I. PIN
10
18
20
5

survey made under my supervision recorded in deed book _____, page _____, and/or plat book 17, page 58, that the ratio of precision is 1':10,000, that this map was prepared in accordance with the General Statutes of North Carolina Chapter 89C. my hand and seal on the 27, day of SEPTEMBER, A.D. 20 19.

WILLIAM M. ALLEN, PLS



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30' BUFFER
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W10-18'-26.7'
PT - 23.5'
HC - 21.1'
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LAKE NORMAL

760 CONTOUR PER ACTUAL FIELD SURVEY

pb. 17 pg. 58

30' BUFFER

TANKS

W
Y9
W10
AB2
B
AB1
B8
Y
O7
HC
R6
P5
B4
R
CVB
BM
R1
O2
Y3

32.5'
30.0'
19.3'
15'
40.0
40.0
15.5'
19.8'
19.5'
PROPOSED BOX

POWER R/W

314.45'

Drive

50' BUFFER FROM 760

761' CONTOUR (FLOOD LINE)

35' FRONT SETBACK

N22°25'00"W
179.20'

S40°07'00"E
(BASE BEARING)

LOT 889
1.29 AC.

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S55°23'00"W
191.09'

PK NAIL

(TIE ONLY)
S22°54'39"W
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270' R/W

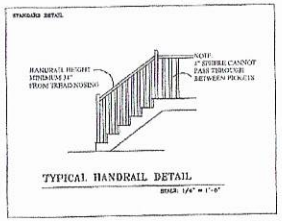
APPROVED OCT 30 2019

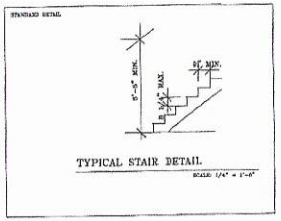
0' 30' 60' 100'
SCALE IN FEET

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LOT 890
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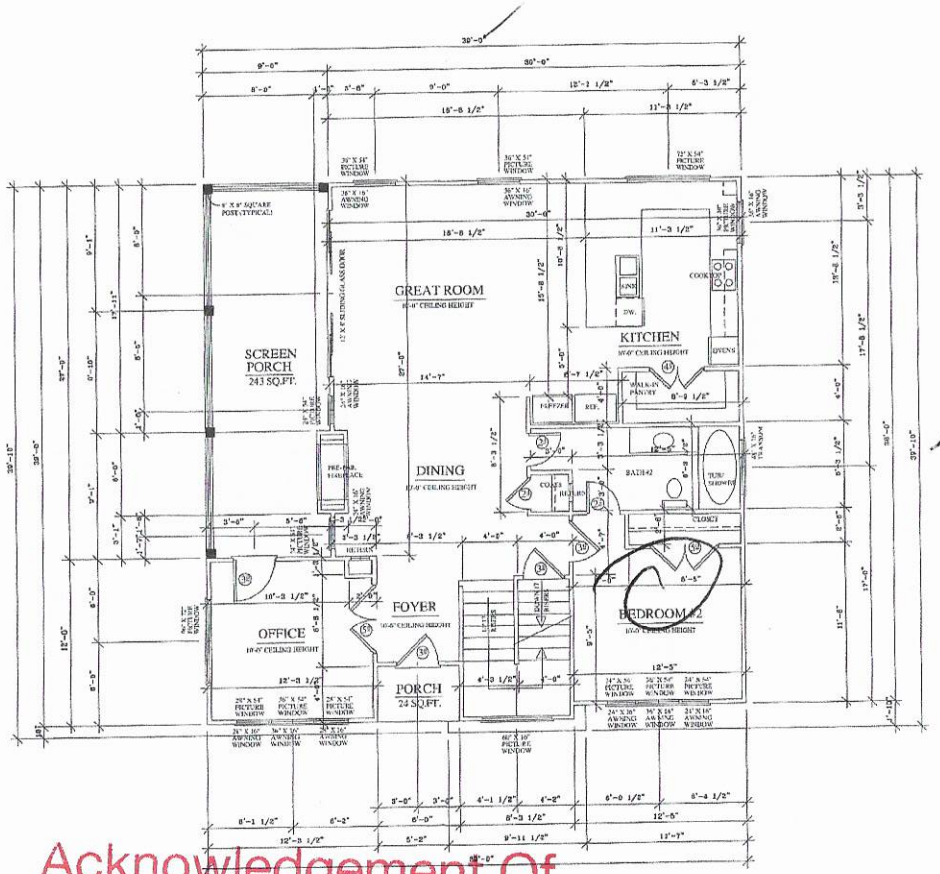
LEGEND
= P.P. = POWER POLE
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NOTES:

ALL WINDOW AND DOOR HEADERS SHALL BE 2- 2" X 10" MIN. SYP #2 UNLESS NOTED ON PLAN
ALL FLOOR JOISTS SHALL BE 2" X 10" @ 16" O.C. MIN. SYP #2 UNLESS NOTED
ALL CEILING JOISTS SHALL BE 2" X 8" @ 16" O.C. MIN. SYP #2 UNLESS NOTED
SHEATHING 1/2" MIN. GYPSUM BOARD
INSULATION R-19 FLOOR, R-11 EXTERIOR WALLS, R-30 CEILING



Acknowledgement Of
Plans Submittal ONLY!

FIRST FLOOR PLAN
1242 SQ.FT.
SCALE: 1/4" = 1'-0"

L. [illegible] Date 4-1-2020

3-30-20 Date

Gray Design

CONTRACTOR SHALL CHECK AND VERIFY ALL DIMENSIONS BEFORE BEGINNING CONSTRUCTION AND COORDINATE ANY CORRECTIONS OR REVISIONS WITH THE OWNER AND DESIGNER. JEFFERY D. GRAY WILL ASSUME NO LIABILITY FOR ANY ERRORS ONCE CONSTRUCTION BEGINS.

PROJECT: Arbitter Residence

DATE: DEC 12 19

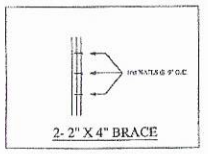
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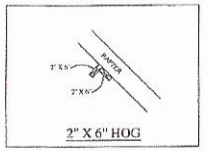
FILE NUMBER 2019-ARBITTER

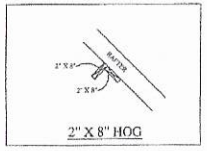
SHEET: 3 OF: 4

ROOF CONSTRUCTION

1. RAFTERS TO BE 2" X 6" @ 16" O.C. FOR SHINGLES UNLESS OTHERWISE NOTED. CUT INTO HIPS, RIDGES, ETC. UNLESS OTHERWISE NOTED. RAFTERS FOR TILE, SLATE AND OTHER ROOF COVERINGS TO BE 2" X 8" @ 16" O.C. UNLESS OTHERWISE NOTED.
2. COLLAR TIES TO BE 2"X 4" @ 44" O/C AT ALL RIDGES.
3. 1 COLLOR TIES MINIMUM AT ALL RIDGES, EVERY 3RD TIE MUST BE INSTALLED ON 1 RAFTER SET.
4. 8"-0" IN CIRCLE INDICATES LOCATION OF 8'-0" LONG BRACE AT RAFTER LEVEL.
5. 2'-0" IN CIRCLE WITH ARROW AWAY FROM BRACE INDICATES DIRECTION OF BRACE TO PARTITION ON BEAM BELOW.
6. 10'-0" IN CIRCLE WITH ARROW INTO BRACE INDICATES A VERTICAL OR ALMOST VERTICAL BRACE.
7. ALL BRACES ARE 2"-2" X 4" NAILED WITH 10D NAIL AT 9" O.C. VERTICALLY, FROM TOP TO BOTTOM. BRACES LONGER THAN 10'-0" TO BE BRACED HORIZONTALLY.
8. ALL JOISTS AND RIDGES TO BE A SIZE LARGER THAN RAFTERS, UNLESS OTHERWISE NOTED.
9. ALL FLOOR OR CEILING JOISTS OR RAFTERS ARE 2" X 6" @ 16" O.C. UNLESS OTHERWISE NOTED.
10. MAXIMUM SPACING OF RAFTER BRACES (RAFTERS TO BE SPLICED OVER HOGS WITH 2-2" X 4" BRACES)
   - 2" X 6" HOG - 4'-0" O.C.
   - 2" X 8" HOGS - 5'-0" O.C.
11. MANUFACTURED ROOF TRUSSES TO BE INSTALLED AND BRACED PER MANUFACTURER'S RECOMMENDATIONS.
12. FOR NO ROOF PLAN:
   USE 2" X 6" @ 16" O.C. RAFTERS, STP #2 UNLESS OTHERWISE NOTED.
   MAXIMUM ALLOWED F.B SPAN OF 13'-0" HORIZONTAL. USE 1- 2" X 6" HOGS AT RAFTER WITH 2- 2" X 4" BRACES @ 6'-0" MAXIMUM.
   CHECK ALL RAFTERS USING HOGES, VALLEYS, ETC. ONE SIZE LARGER THAN RAFTER SIZE.
   ALL BRACING LOADS MUST BE CARRIED TO FOUNDATION WITH A MINIMUM OF 1-2" X 4" STUDS.

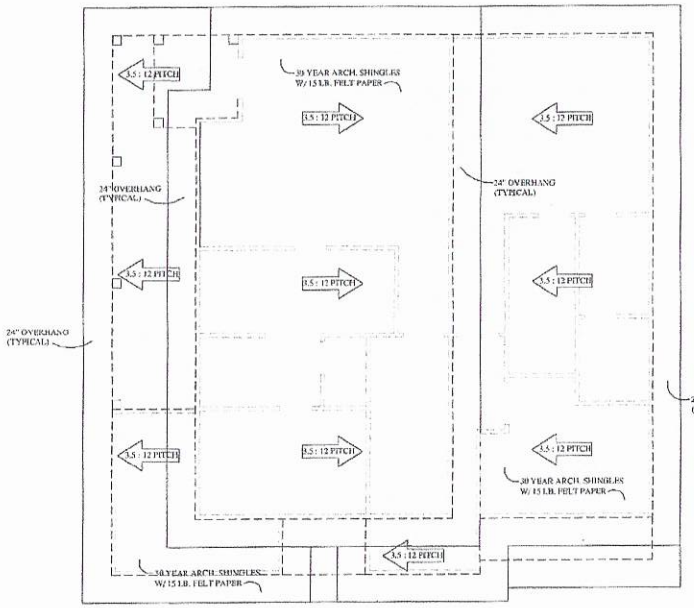






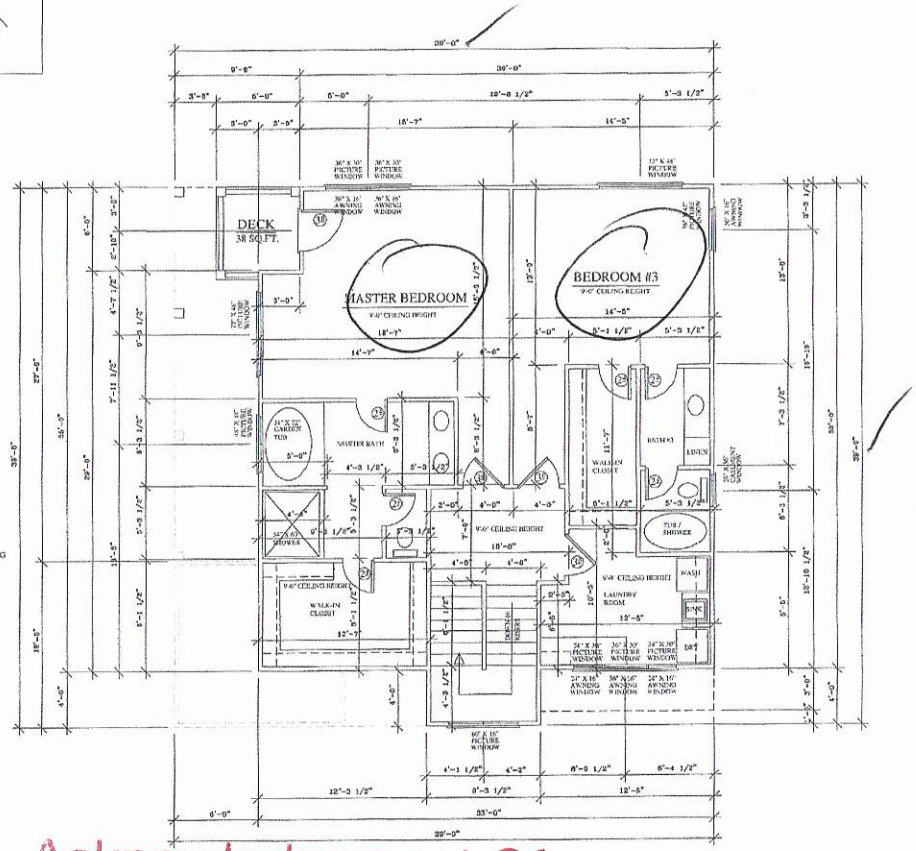
PLAN NOTES:

1. VERIFY ALL LOCAL CODES, ENERGY TYPES, AND SITE CONDITIONS PRIOR TO CONSTRUCTION.
2. REVIEW SELECTED MECHANICAL SYSTEMS WITH OWNER PRIOR TO CONSTRUCTION.
   RECOMMENDED LOCATIONS ARE AS FOLLOWS:
   THE H.V.A.C. HEATER MAY TYPICALLY BE PLACED IN THE CRAWL SPACE OR IN THE GARAGE.
   H.V.A.C. CONDENSING UNIT MAY TYPICALLY BE PLACED IN THE CRAWL SPACE OR IN THE ATTIC FOR ONE STORY HOUSES, IN SIDE CRAWL SPACE FOR THE FIRST FLOOR AND IN ATTIC OR THE SECOND FLOOR IN TWO STORY HOUSES.
   H.V.A.C. EQUIPMENT IN ATTIC SPACE SHALL BE ACCESSIBLE BY AN OPENING AS LARGE AS THE LARGEST PIECE OF EQUIPMENT AND IN NO CASE LESS THAN 22"X30".
3. SEE STRUCTURAL DRAWINGS FOR ADDITIONAL INFORMATION.
4. INSULATE AROUND ALL BATHS AND UTILITY ROOM.
5. TYPICAL WALL 2X6 @ 16" O.C. UNLESS OTHERWISE DIMENSIONED.
6. PROVIDE SMOKE DETECTORS AS REQUIRED BY CODE.
7. PROVIDE DOOR BELLS, TRANSFORMER, AND CHIME.
8. ALL JOISTS SHALL BE 16" TO 20" SPACED AT 16" ON CENTER UNLESS NOTED OTHERWISE.



ROOF PLAN

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



SECOND FLOOR PLAN

1170 SQ.FT.

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

Acknowledgement Of Plans Submittal ONLY!

Date 4-1-2020

Date 3-30-20

Gray Design

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PROJECT: Arbitter Residence

DATE: DEC. 12, 19

REVISION:

FILE NUMBER 2019-ARBITTER

SHEET: 4 OF: 4

NOTES:

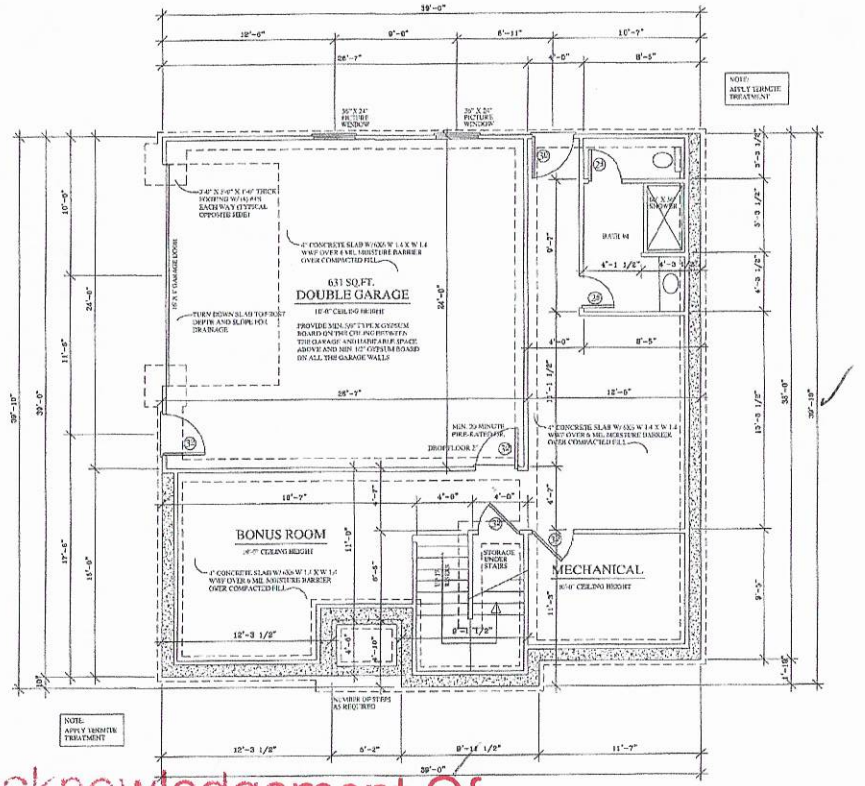
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ALL CEILING JOISTS SHALL BE 2" X 6" @ 16" O.C. MIN. SYP #2 UNLESS NOTED

SHEATHING 1/2" MIN. GYPSUM BOARD

INSULATION R-19 FLOOR, R-13 EXTERIOR WALLS, R-38 CEILING



BASEMENT PLAN

866 SQ.FT.

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

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Date 4/1/2020.

Date 3-30-20

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PROJECT:

Arbitter Residence

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REVISION:

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SHEET: 2 OF: 4