# IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 224043

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

PIN # 4639601010

APPLICANT: James & Michelle Pawlak APPLICANT ADDRESS: 206 Rinehardt Rd Mooresville, NC

SITE ADDRESS: 363 Stumpy Creek Mooresville, NC PHONE: 7046647411 ALT. PHONE: 7047379587

SITE DIRECTIONS: Hwy 150 W TR Perth Rd TL Liva Ln TL Stumpy Creek Rd on right

SUBDIVISION: CL&T SECTION: 14 LOT # 1041 LOT AREA: 2.545Ac DESIGN FLOW: 480gpd L.T.A.R.: .3

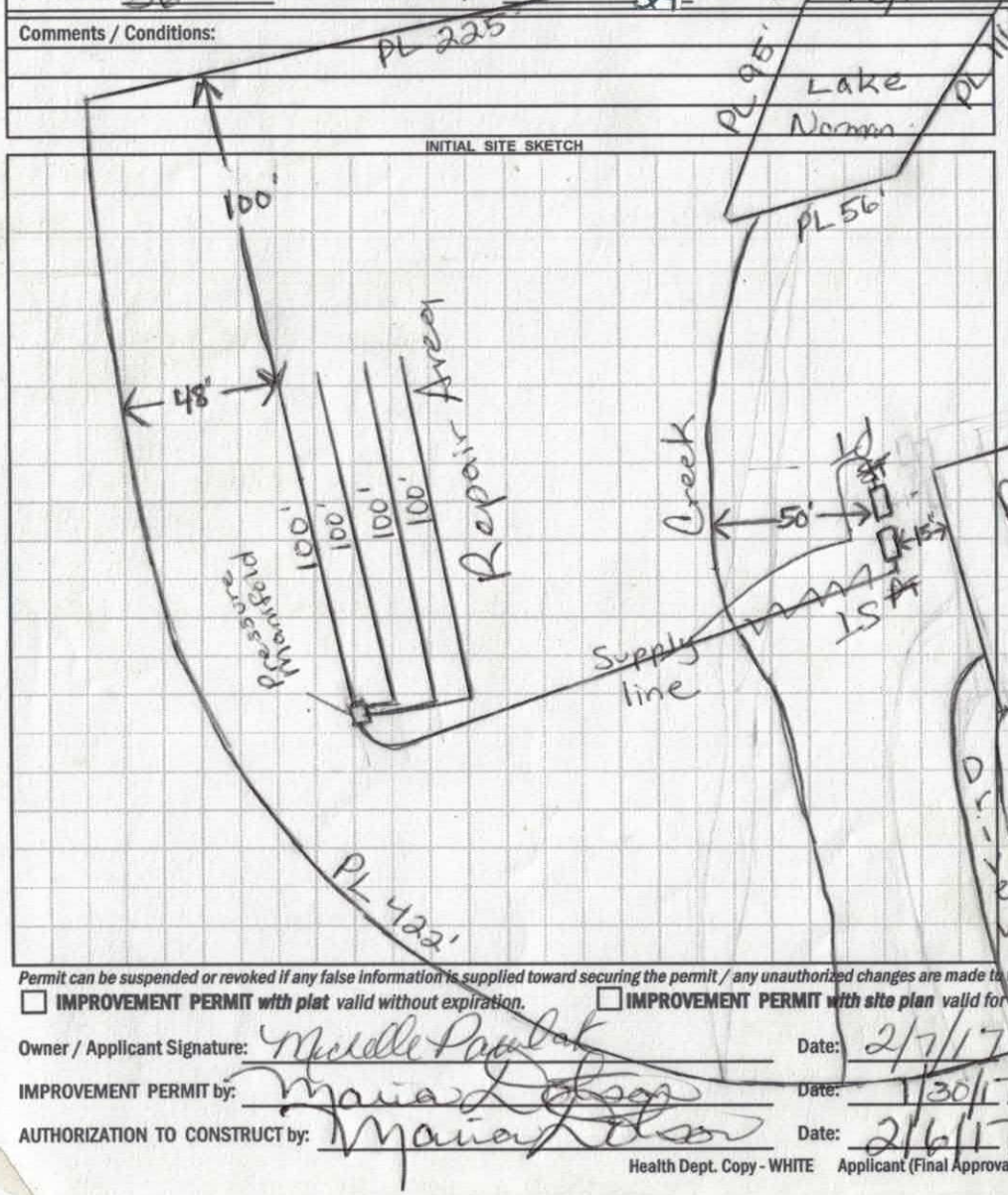
| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 (gal) | STB | 8541 | Date | 5-26-17 | ☒ New System | ☐ Repair | ☐ Expansion | System Type: I II III IV V VI | ☒ Residence | No. Bedrooms 4 |
| Pump Tank | 1000 (gal) | PT | 159 | Date | 5-14-17 | System Description: | Pump PM - 25% Reduction | | | ☐ Business | No. Persons 8 |
| Pump Make | Spulds | Model | WE0312MU | Serial # | | Repair System Description: | Same | | | ☐ Other | No. Employees |
| # Nitrification Fields | 1 | # Lines | 4 | Linear Ft: | 406' | Maintenance Agreement Required: | ☐ YES | ☒ NO | | ☒ Slab | ☐ Crawl Space |
| Trench Width | 36" | Max. Trench Bottom Depth | | | 24"± Gravel Depth | N/A | ☐ GRAVITY | ☒ PRESSURE | | ☒ Basement w/plumbing | ☐ Basement w/o plumbing |

Water Supply: ☒ Private ☐ Public ☐ Community

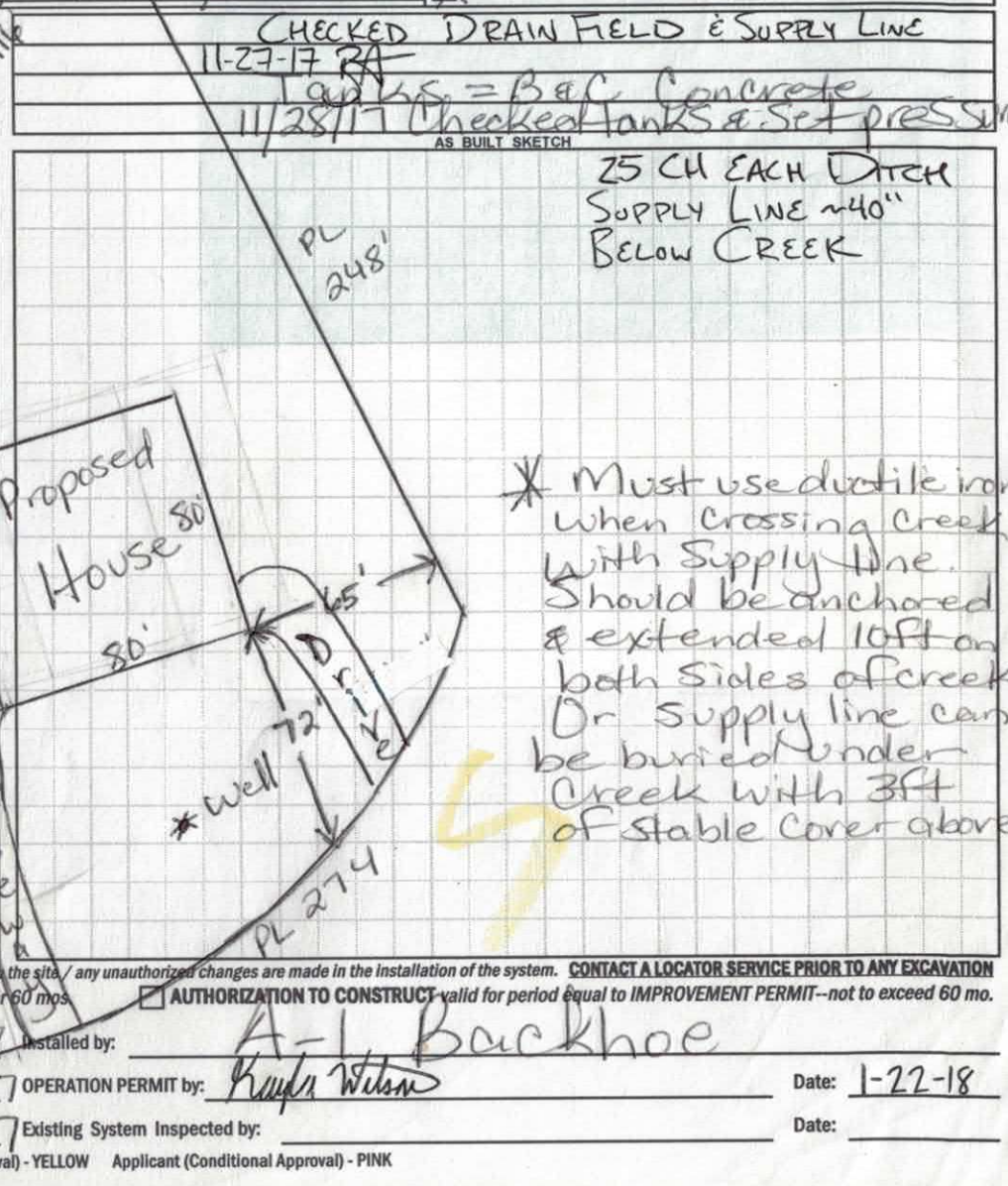
Comments / Conditions:

CHECKED DRAIN FIELD & SUPPLY LINE
11-27-17 RA
Tanks = B&C Concrete
11/28/17 Checked tanks & set pressure

INITIAL SITE SKETCH




AS BUILT SKETCH




25 CH EACH DITCH
SUPPLY LINE ~40" BELOW CREEK

* Must use ductile iron when crossing Creek with Supply line. Should be anchored & extended 10ft on both sides of creek. Or Supply line can be buried under Creek with 3ft of stable cover above

*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: Michelle Pawlak Date: 2/7/17 Installed by: A-1 Backhoe

IMPROVEMENT PERMIT by: Maria L Logan Date: 1/30/17 OPERATION PERMIT by: Kayla Wilson Date: 1-22-18

AUTHORIZATION TO CONSTRUCT by: Maria L Logan Date: 2/6/17 Existing System Inspected by: Date:

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

| | Date | Initials |
|---|---|---|
| Drain Lines Checked & Supply line | 11/27/17 | BA |
| Tanks Checked | 11/27/17 | BA |
| Pressure Manifold or Valve Box Checked * | 11/28/17 | MD |
| Pressure Head Set | 11/28/17 | MD |
| Electrical Checked | 1-22-18 | KW |
| Floats Set | 11/28/17 | MD |
| Alarm Checked | 1-22-18 | KW |
| Maintenance Contract Y / (N) | | |
| Comments: | | |

GOULDS
WATER TECHNOLOGY

**WE0312MU**
**SUBMERSIBLE PUMP**
**1/3HP 1/60/230 5.38" 4.9MA**



Division of Environmental Health
On-site Wastewater Section

Property ID:
Lot #:
File #:
AppID:

# SOIL/SITE EVALUATION
# for ON-SITE WASTEWATER SYSTEM

Owner: MICHELLE & JAMES PAWLAK
Applicant:
Address:
Date Evaluated:
Proposed Facility: SFR Design Flow (.1949) 480
Property Size: 2.545 AC
Location of Site: CL&T SEC 14 LOT 1041
Property Recorded: YES
Water Supply: [ ] Public [ X ] Individual [ X ] Well [ ] Spring [ ] Other
Evaluation Method: [ X ] Auger Boring [ X ] Pit [ ] Cut
Type of Wastewater: [ X ] Sewage [ ] Industrial Process [ ] Mixed

| PROFILE # | .1940 Landscape Position/ Slope% | Horizon Depth (IN.) | SOIL MORPHOLOGY .1941 .1941 Structure/ Texture | .1941 Consistence Mineralogy | b PROFILE FACTORS .1942 Soil Wetness/ Color | .1943 Soil Depth (IN.) | .1956 Sapro Class | .1944 Restr Horiz | Profile Class & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 8% | 0-6 | C,M,SBK | SS,SP,SEXP | Y/BR | | | | |
| | | 6-16 | CL.M.SBK | SS,SP,SEXP | Y/BR | | | | |
| | | 16-48 | SLSAP, M,SBK | STICKEY, EXP | CHROMA 2 @ 20" | 16" | U | | U |
| | | | | | | | | | |
| 2 | 8% | 0-10 | SCL,W,SBK | SS,SP,SEXP,FR | Y/BR | | | | |
| | | 10-36 | C,M,SBK | SS,SP,SEXP,FR | Y/BR | | | | |
| | | 36-48 | LSAP,W,SBK | STICKEY | CHROMA 2 @ 36" | 36" | PS | | .3 |
| | | | | | | | | | |
| 3 | 10% | 0-11 | SCL,W,SBK | SS,SP,SEXP,FR | Y/BR | | | | |
| | | 11-30 | C,M,SBK | SS,SP,SEXP,FR | Y/BR | | | | |
| | | 30-48 | LSAP,W,SBK | SS,SP,SEXP,FR | | 30" | PS | | .3 |
| | | | | | | | | | |
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| Description | Initial System | Repair System |
|---|---|---|
| Available Space (.1945) | | |
| System Type(s) | | |
| Site LTAR | | |

Other Factors (.1946):
Soil Evaluation By: BEN ALDRIDGE
Others Present: STEVE HEDRICK
Site Classification (.1948):
Site Evaluation By: BEN ALDRIDGE
Others Present:

Division of Environmental Health
On-site Wastewater Section

File #:

## SOIL/SITE EVALUATION
## for ON-SITE WASTEWATER SYSTEM
## CONTINUED

| PROFILE # | .1940 Landscape Position/ Slope% | Horizon Depth (IN.) | SOIL MORPHOLOGY .1941 | | OTHER PROFILE FACTORS | | | | Profile Class & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| | | | .1941 Structure/ Texture | .1941 Consistence Mineralogy | .1942 Soil Wetness/ Color | .1943 Soil Depth (IN.) | .1956 Sapro Class | .1944 Restr Horiz | |
| 1 | | 0-18 | C,M,SBK | SS,SP,SEXP | BR | | | | |
| | | 18-46 | C,M,SBK | STICKEY, PLASTIC | Y/BR | | | | |
| | | 46-66 | C,M,SBK | STICKEY, PLASTIC | CHROMA 2 @ 46" | 46" | | | .2 |
| | | | | | | | | | |
| 2 | | 0-10 | SCL,W,SBK | SS,SP,SEXP | R/BR | | | | |
| | | 10-45 | C,M,SBK | SS,SP,SEXP | Y/BR | | | | |
| | | 45-56 | C,M,SBK | STICKEY, PLASTIC | CHROMA 2 @ 45" | 45" | | | .3 |
| | | | | | | | | | |
| 3 | | 0-14 | C,M,SBK | SS,SP,SEXP | BR | | | | |
| | | 14+ | | | CHROMA 2 @ 14" | 14" | | | U |
| | | | | | | | | | |
| 4 | | 0-16 | C,M,SBK | STICKEY, PLASTIC | | | | | |
| | | 16+ | | | CHROMA 2 @ 16" | 16' | | | U |
| | | | | | | | | | |
| 5 | 10% | 0-18 | CL,W,SBK | SS,SP,SEXP | | | | | |
| | | 18-41 | SC,M,SBK | SS,SP,SEXP | CHROMA 2 @ 41" | 41" | | | .3 |
| | | | | | | | | | |
| 6 | 10% | 0-34 | CL,W,SBK | SS,SP,SEXP | | | | | |
| | | 34-59 | CL,W,SBK | SS,SP,SEXP | CHROMA 2 @ 49" | 49" | | | .35 |
| | | | | | | | | | |
| | | | | | | | | | |

Division of Environmental Health
On-site Wastewater Section

File #:

## SOIL/SITE EVALUATION
## for ON-SITE WASTEWATER SYSTEM
## CONTINUED

| PROFILE # | .1940 Landscape Position/ Slope% | Horizon Depth (IN.) | SOIL MORPHOLOGY .1941 | | OTHER PROFILE FACTORS | | | | Profile Class & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| | | | .1941 Structure/ Texture | .1941 Consistence Mineralogy | .1942 Soil Wetness/ Color | .1943 Soil Depth (IN.) | .1956 Sapro Class | .1944 Restr Horiz | |
| 5 | 10% | 0-18 | CL,W,SBK | SS,SP,SEXP | | | | | |
| | | 18-41 | SC,M,SBK | SS,SP,SEXP | CHROMA 2 @ 41" | 41" | | | .3 |
| | | | | | | | | | |
| 6 | 10% | 0-34 | CL,M,SBK | SS,SP,SEXP | | | | | |
| | | 34-59 | CL,M,SBK | SS,SP,SEXP | CHROMA 2 @ 49" | 49" | | | .3 |
| | | | | | | | | | |
| 7 | 10% | 0-26 | C,M,SBK | SS,SP,SEXP,FR | | | | | |
| | | 26-34 | CL,M,SBK | SS,SP,SEXP,FR | | | | | |
| | | 34-48 | SCL,M,SBK | SS,SP,SEXP,FR | | | | | |
| | | 48-50 | SCL,W,SBK | SS,SP,SEXP,FR | CHROMA 2 @ 49' | 49" | | | .35 |
| | | | | | | | | | |
| 8 | 5% | 0-7 | ORGANIC | | | | | | |
| | | 7-36 | C,M,SBK/ABK | SS,SP,SEXP,FR | | | | | |
| | | 36-48 | SCL,M,SBK | SS,SP,SEXP,FR | | 48" | | | .3 |
| | | | | | | | | | |
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DHHS

ON-SITE WASTEWATER SECTION

Sheet ____ of ____
PROPERTY ID #: ____
COUNTY: ____

# SOIL/SITE EVALUATION
## *for* ON-SITE WASTEWATER SYSTEM

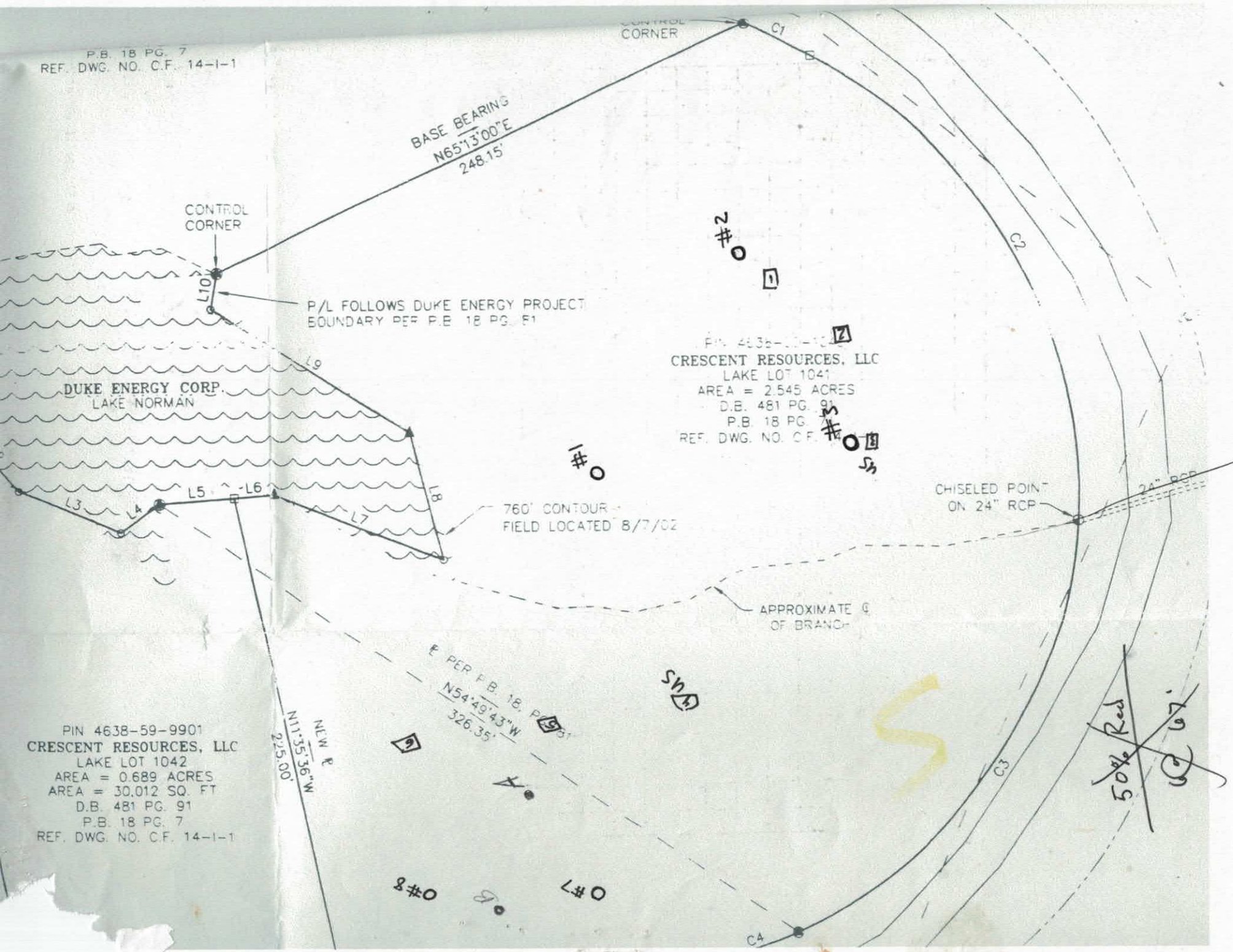
OWNER: James Pawlak — APPLICATION DATE
ADDRESS: — DATE EVALUATED: 1/26/17
PROPOSED FACILITY: House — PROPOSED DESIGN FLOW (.1949): 480gpd — PROPERTY SIZE: ____
LOCATION OF SITE: 363 Stumpy Creek Rd — PROPERTY RECORDED: ____
WATER SUPPLY: ☒ Private ☐ Public ☐ Well ☐ Spring ☐ Other ____
EVALUATION METHOD: ☒ 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 |
|---|---|---|---|---|---|---|---|---|---|
| | A | 0-17" | Brn Cl | wSBK | SS, SP, SExp, FR | | | | PS .3 |
| | | 17-40 | SC | m SBK | SS, SP, SExp, FR | | | | |
| | | | Indus of lower Chroma's | | | | | | |
| | | 40" | Chroma 2 | | | | | | |
| | B | 0-8" | Top Soil | | | | | | PS .3 |
| | | 8-37 | Cm | SBK | SS, SP, SExp, FR | | | | |
| | | 37-48" | SCL | wSBK | SS, SP, SExp, FR | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | PS | PS |
| System Type(s) | 25% Red | 25% Red |
| Site LTAR | .3 | .3 |

OTHER FACTORS (.1946): ____
SITE CLASSIFICATION (.1948): ____
EVALUATED BY: ____
OTHER(S) PRESENT: ____

COMMENTS: ____


P.B. 18 PG. 7
REF. DWG. NO. C.F. 14-I-1
CONTROL CORNER
C1
BASE BEARING
N65°13'00"E
248.15'
CONTROL CORNER
C2
L10
P/L FOLLOWS DUKE ENERGY PROJECT BOUNDARY PER P.B. 18 PG. 51
L9
DUKE ENERGY CORP.
LAKE NORMAN
CRESCENT RESOURCES, LLC
LAKE LOT 1041
AREA = 2.545 ACRES
D.B. 481 PG. 91
P.B. 18 PG.
REF. DWG. NO. C.F.
L3
L4
L5
L6
L7
L8
760' CONTOUR FIELD LOCATED 8/7/02
CHISELED POINT ON 24" RCP
24" RCP
APPROXIMATE ℄ OF BRANCH
℄ PER P.B. 18, PG. 51
N54°49'43"W
326.35'
NEW ℄
N11°35'36"W
225.00'
C3
C4
PIN 4638-59-9901
CRESCENT RESOURCES, LLC
LAKE LOT 1042
AREA = 0.689 ACRES
AREA = 30,012 SQ. FT
D.B. 481 PG. 91
P.B. 18 PG. 7
REF. DWG. NO. C.F. 14-I-1

RECEIVED DEC 2 9 2016

# 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)*

#224043

**1. APPLICATION FOR:** ✓ Improvement Permit ✓ Authorization To Construct ___ Existing System Inspection

**********

Paid $500.00

**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 # |
|---|---|---|---|
| JAMES + MICHELLE PAWLIK | 206 RIDEHARDT RD | 704 664 7411 | 704 737 9587 |
| Owner Name | Mailing Address | Home Phone # | Alternate Phone # |
| " | " | " | " |

**4. Property Information:**

| Street Address | Subdivision Name | Section/Phase and Lot Number |
|---|---|---|
| ~~391~~ 363 Stumpy Creek | Ø | CL+T SEC 14 LOT 104 |

**Driving Directions:** PERTH RD TO LIVA LANE

**5. RESIDENTIAL Site Development Information:** *(Check or Complete ALL that apply)*

(X) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
Repair To Failing Septic System due to _____
( ) Other _____

Maximum Number of Bedrooms 3
Maximum Number of Occupants 6
If Expansion, Current Number of Bedrooms ___

( ) Crawl Space Foundation?
(X) Concrete Slab Foundation?
(X) 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:**

(X) 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 PUMP SYSTEM

**8. Please Answer The Following** ( ) Yes (X) No Does the site contain any jurisdictional wetlands?

**To The Best of Your Ability:** ( ) Yes (X) 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:** James R Pawlik — 12-29-2016

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

# 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***

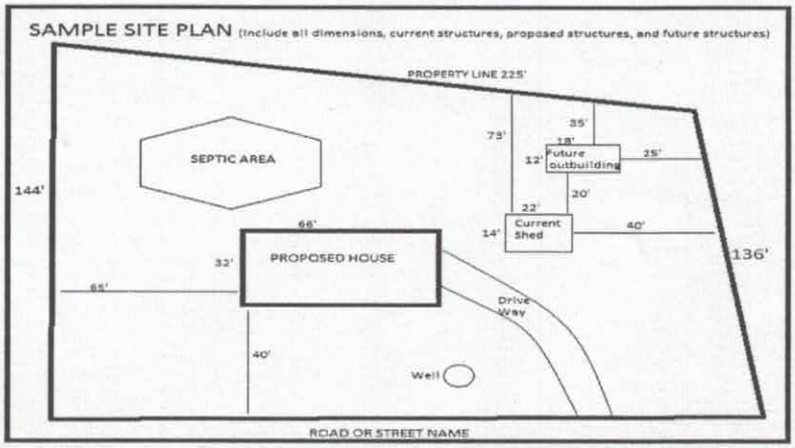
**_____ Front and side setbacks from property line…** **_____ Preferred driveway location and configuration, preferred well location…**

**_____ Area you prefer your septic system to be placed…** **_____ 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**

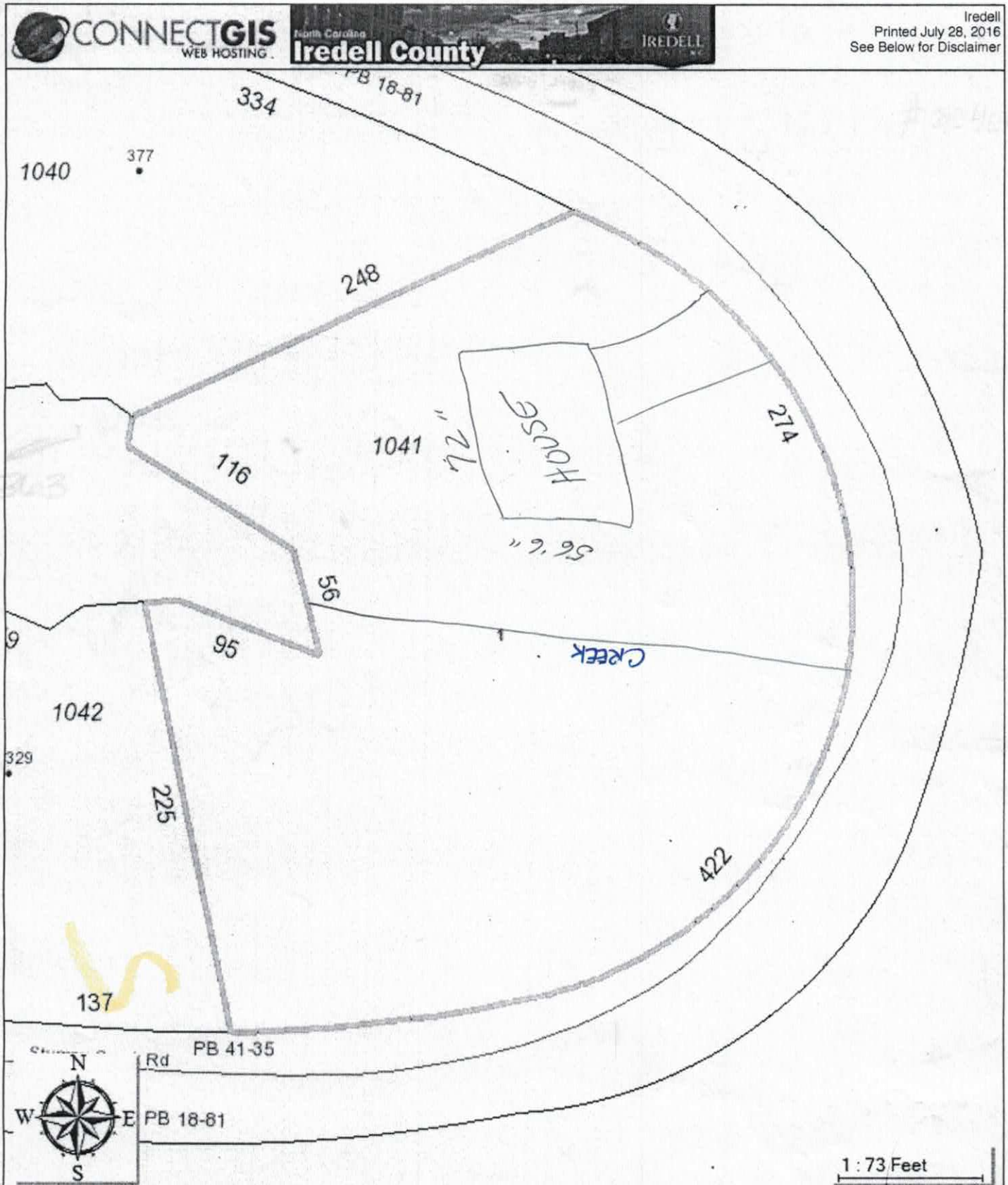
SEE ATTACHED

**Signature:** James R Pounds JP

***REQUIRED*** **property owner or owner's legal representative signature.**

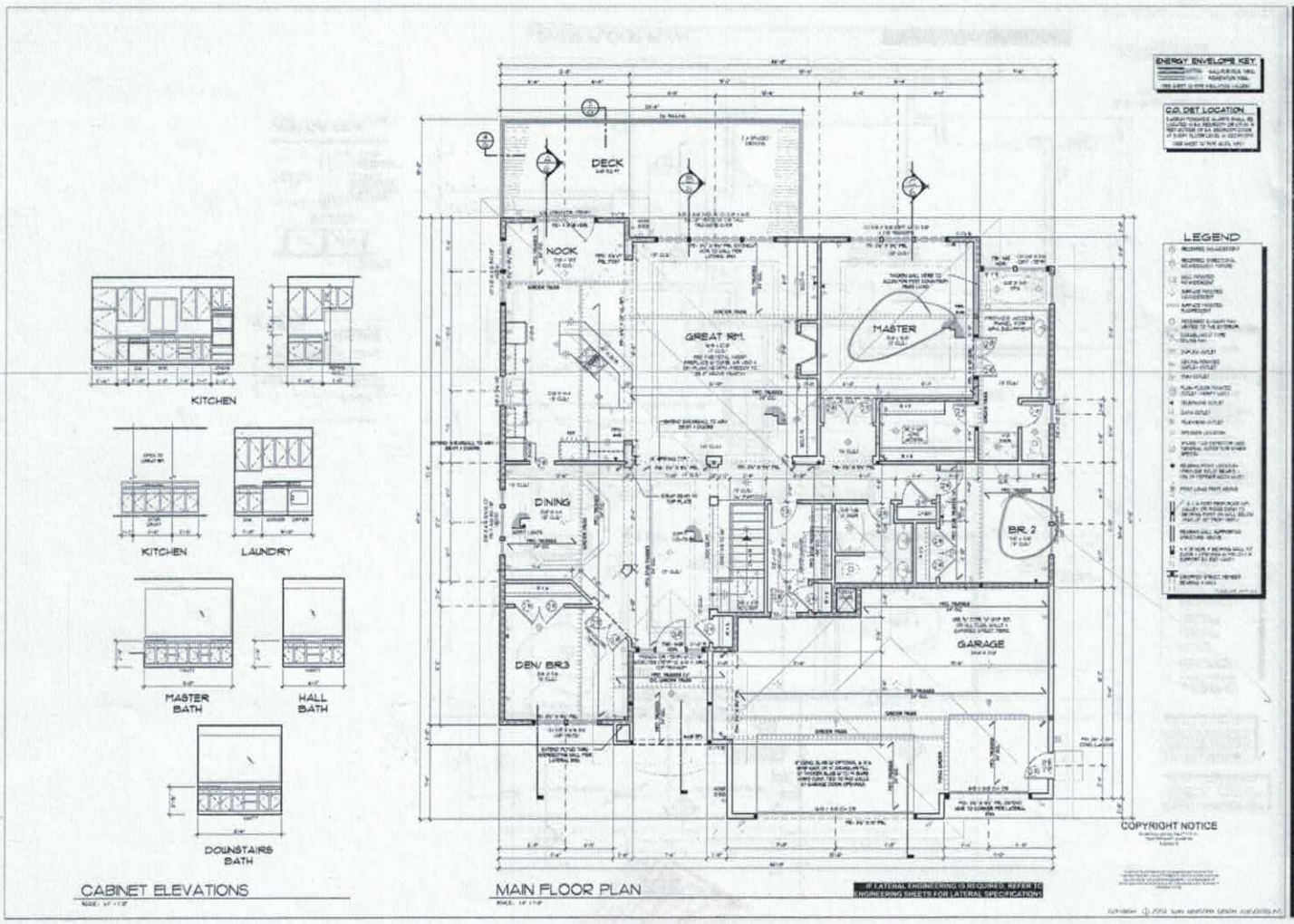
12-29-2016

**DATE**



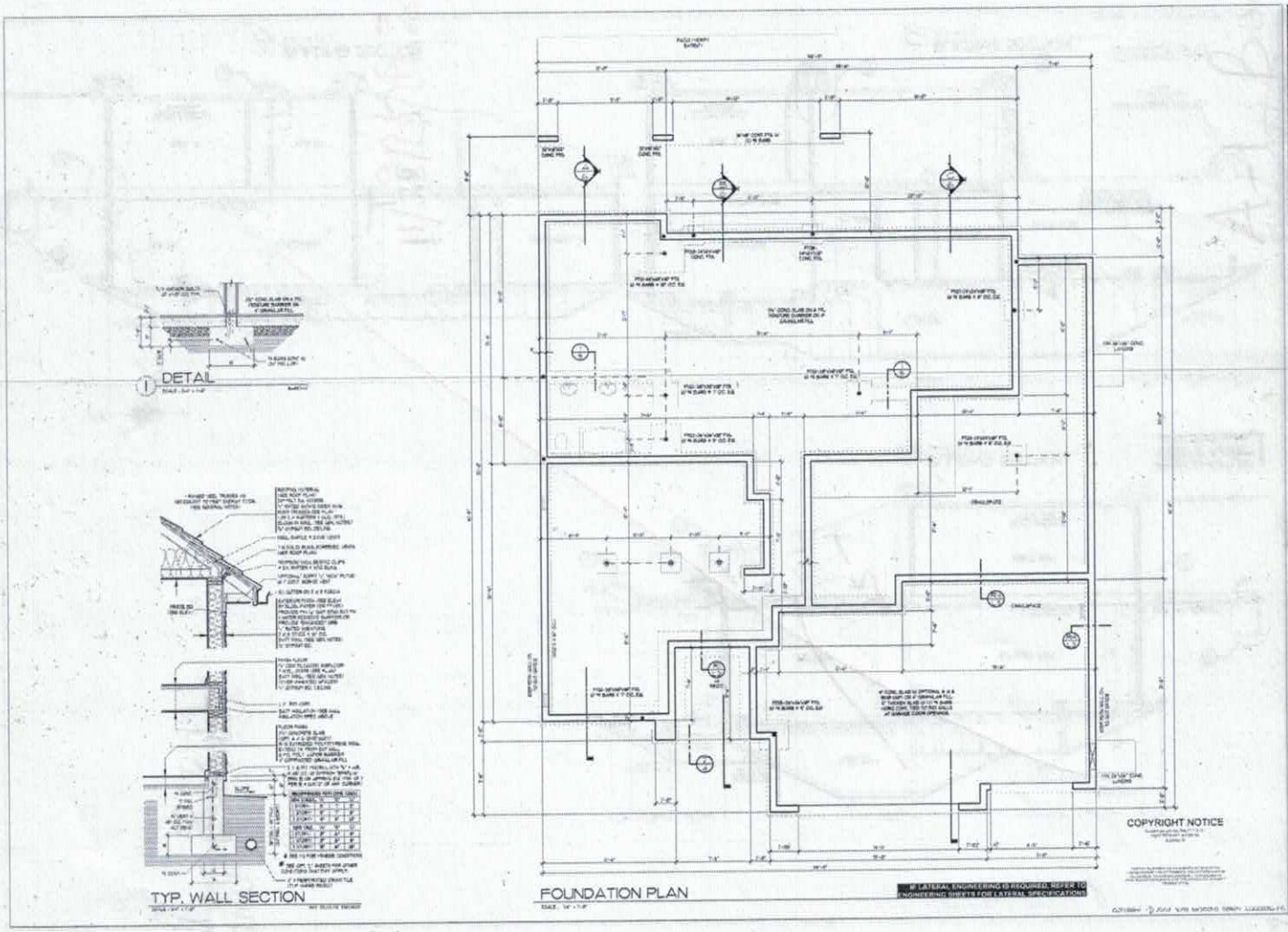

The maps prepared for this website are generated from recorded deeds, plats, and other public records. Users of these maps are hereby notified that the information provided herein should be verified. Iredell County assumes no legal responsibilities for any of the information contained on this site. Users are advised that the use of any of this information is at their own risk. All maps on this site were prepared using a 1000â€™ Grid based upon the North Carolina State Plane Coordinate System from the 1983 North American Datum. The delinquent real property tax overlay is updated monthly. The information presented is not intended to be used or relied upon as official notice of tax liens. For additional information regarding delinquent taxes, contact the Iredell County Tax Collector's Office.

Acknowledgement Of
Plans Submitted ONLY!
Date




Acknowledgement Of
Plans Submitted ONLY!
Date 2/6/17

Acknowledgement Of
Plans Submitted ONLY!




Acknowledgement Of
Plans Submitted ONLY!

Maria Lopez 2/6/17

Michelle Pawlak Date 2/7/17

# IREDELL COUNTY

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

FILE COPY

| APPLICATION NUMBER |
|---|
| 224043 |
| Issue Date: 12/29/2016 |

**ZONING PERMIT**
Open Space

| Parcel Number | Street Address | Jurisdiction |
|---|---|---|
| 4639601010.000 | STUMPY CREEK ROAD, MOORESVILLE, NC | IREDELL COUNTY |

| Owner Information | Applicant Information |
|---|---|
| Owner: PAWLAK JAMES R+MICHELLE M | Applicant: PAWLAK JAMES R+MICHELL |
| Address: 206 RHINEHARDT RD<br>MOORESVILLE, NC 28115 | Address: 206 RHINEHARDT RD<br>MOORESVILLE, NC 28115 |
| Phone: | Phone: |

| Use Requested | Zone Code |
|---|---|
| SFD REPLACING PERMTIT 149446 | RR |

| Lot Acreage | F Setback | B Setback | L Setback | R Setback | Watershed | Flood Zone |
|---|---|---|---|---|---|---|
| 2.545 | 35.00 | 50.00 | 15.00 | 15.00 | CACL | AE |

**Remarks:**

PAID
V6179
12-29-16

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 | 89301 | TOTAL FEES: | $ 77.25 |
|---|---|---|---|