IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP301099

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

PIN # 4639814551 4795

APPLICANT/OWNER: Robert Schubert | APPLICANT ADDRESS: PO Box 1763 Salisbury NC 28145

SITE ADDRESS: 1794 Perth Rd Mooresville NC 28117 | PHONE: 704-202-3341 | ALT. PHONE (Gayin) 704-310-1832

SITE DIRECTIONS: NC 115 N to Lon Connector Rd, S on Cornelius Rd, R on Perth, Lot on Left | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Perth Estates | SECTION: — | LOT # 3 | LOT AREA: 16.87 acres | DESIGN FLOW: 480 GPD | L.T.A.R.: .25

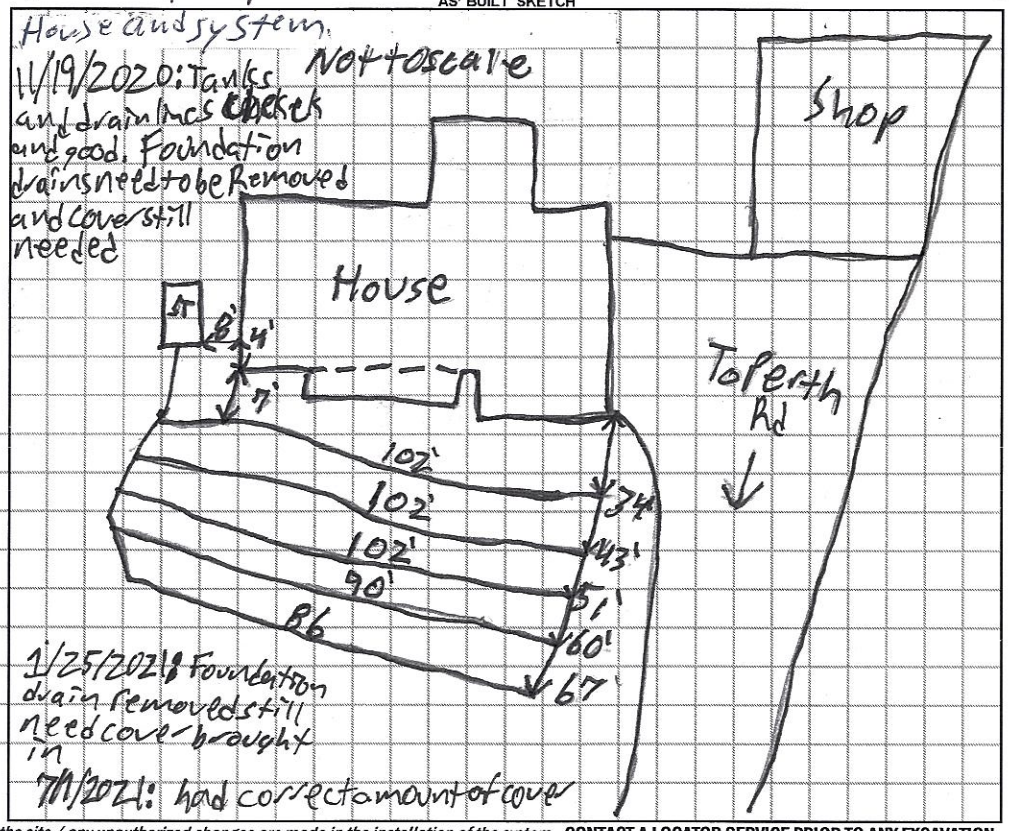
Septic Tank	1500 (1000) (gal)	STB	964	Date	7/5	☒ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 4	Water Supply
Pump Tank	— (gal)	PT	—	Date	—	System Description:	Gravity 25% Reduction	☐ Business	No. Persons 8	☒ Private
Pump Make	—	Model	—	Serial #	—	Repair System Description:	LPP&PS	☐ Other	No. Employees	☐ Public
# Nitrification Fields	1	# Lines	5	Linear Ft	480'	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☐ Crawl Space	☐ Community
Trench Width	36"	Trench Bottom Depth (~~Low side~~)	18" Highside	Gravel Depth	—	☒ GRAVITY	☐ PRESSURE	☒ Basement w/plumbing	☐ Basement w/o plumbing	

Comments / Conditions: Install lines on contour. Shallow ditch next to drainfield must be filled. Foundation is basement with plumbing but basement plumbing is not going to be initially installed when it is installed a grinder pump will be needed to get sewage to ST. Approved Type 3 soil must be brought in for top 3" of system. Riser on end having a cover on it to be able to locate

INITIAL SITE SKETCH

See Attached and approved Site plan by Michael Athanasand Associates 3/2/2020 PJB

AS BUILT SKETCH



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**

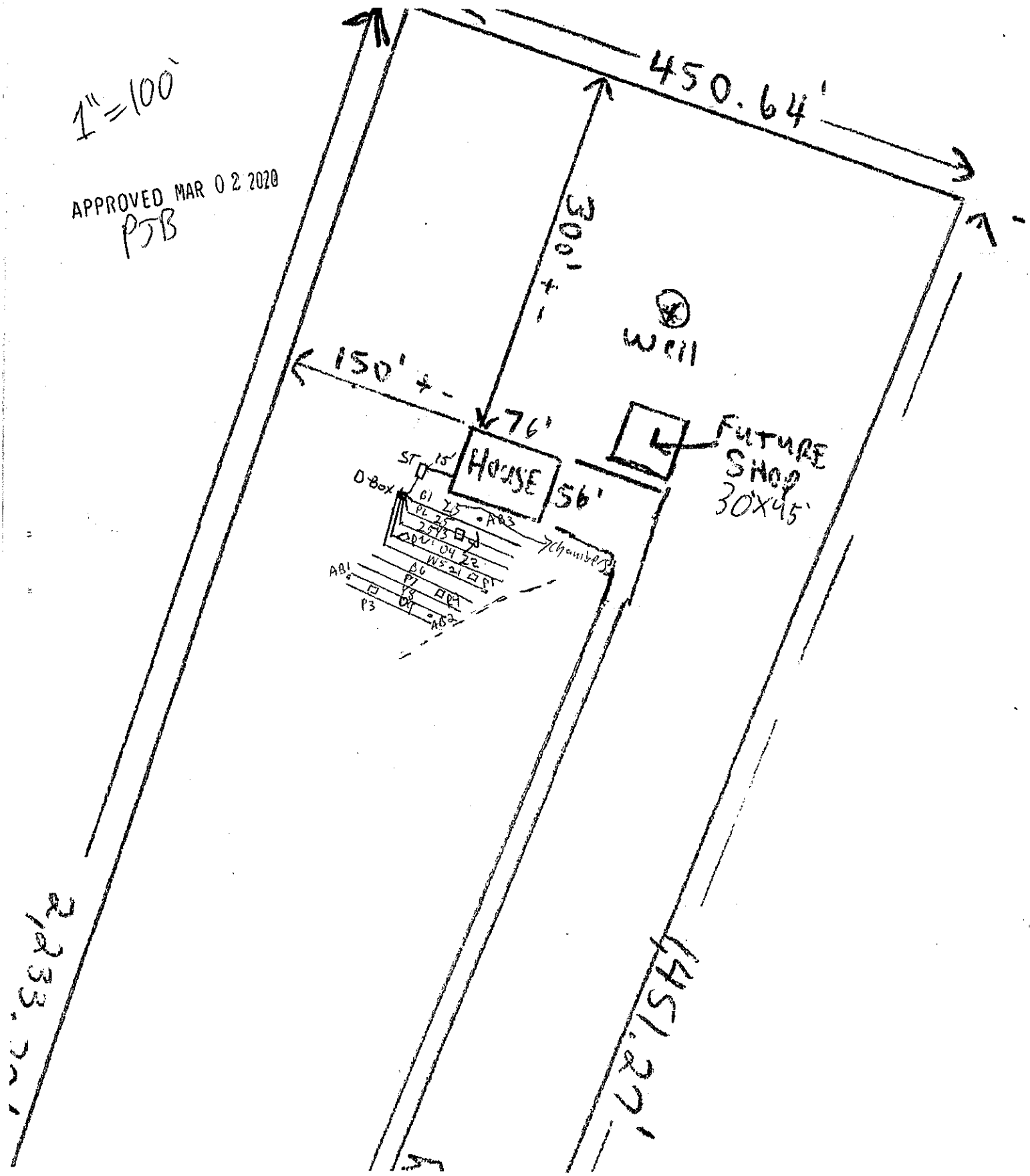
☐ **IMPROVEMENT PERMIT** ***with plat*** *valid without expiration.* ☒ **IMPROVEMENT PERMIT** ***with site plan*** *valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Jacqui Schubert | Date: 3/3/20 | Installed by: Randy Miller & Sons

IMPROVEMENT PERMIT by: Patrick J Boyle III | Date: 3/2/2020 | OPERATION PERMIT by: Patrick J Boyle III | Date: 7/1/2021

AUTHORIZATION TO CONSTRUCT by: Patrick J Boyle III | Date: 3/2/2020 | 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.


1"=100'
APPROVED MAR 0 2 2020
POB
450.64'
WELL
150' +-
76'
HOUSE
56'
FUTURE
SHOP
30X45'
15'
ST
O Box
7 Chambers
2,233.74'
1,451.27'



MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887
1/31/2020

APPROVED MAR 0 2 2020
PJB

Reference: Data Sheet for 1794 Perth Rd
House Footprint: See attached plan
Building Setbacks: 35' front/rear, 15' side
Water Source: Private well
Number of Bedrooms/Daily Flow: 4/480 GPD
Proposed LTAR: 0.25 GPD/FT^2
Proposed System Type: 25% Reduction
Proposed Repair System Type: PPBPS
Distribution: Gravity-Distribution box
Septic Tank Size: 1500 gallons
Proposed Trench Bottom: 18" (high side)

Line	Design Length	Actual Length
Blue 1	**96'**	**100'**
Pink 2	**96'**	**100'**
Yellow 3	**96'**	**100'**
Orange 4	**96'**	**100'**
White 5	**96'**	**100'**
Blue 6		92'
Pink 7		90'
Yellow 8		82'
Orange 9		75'

Initial System: 480' **Repair System:** 339'

Comments:
Approximately, three inches of addition cover will be needed over the system area. Do not cut the system area.

PROPERTY ID #: 4639814551
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Robert Schuberth APPLICATION DATE
ADDRESS: PO Box 1768, Salisbury, NC 28145 DATE EVALUATED:
PROPOSED FACILITY: 5 BDRM PROPOSED DESIGN FLOW (.1949): 600GPD PROPERTY SIZE: 16.87 AC
LOCATION OF SITE: 1794 Perth Rd PROPERTY RECORDED:
WATER SUPPLY: X Private ☐ Public 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)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
PIT 1	LS 5%	0-5	Br CL WSBK	FR SS SP SXF	N/A	51"	N/A	N/A	PS ~~0.3~~ .275
		5-51	R C SBK/ABK	FR SS SP SXF					
PIT 2	LS 5%	0-10	Br CL WSBK	FR SS SP SXF	N/A	55"	N/A	N/A	PS 0.3
		10-33	R C SBK/ABK	FR SS SP SXF					
		33-55	R CL WSBK	FR SS SP SXF					
PIT 3	LS 5%	0-10	Br CL WSBK	FR SS SP SXF	N/A	52"	N/A	N/A	PS 0.3
		10-42	R C ABK	FR SS SP SXF					
		42-52	R CL WSBK	FR SS SP SXF					
PIT 4	LS 5%	0-6	Br CL WSBK	FR SS SP SXF	N/A	48"	N/A	N/A	PS ~~0.3~~ .25
		6-42	R C ABK	FR SS SP SXF					
		42-48	R CL WSBK	FR SS SP SXF					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	1500 FT^2	1017 FT^2
System Type(s)	25% Reduction	PPBPS
Site LTAR	0.3	0.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: MA&A
OTHER(S) PRESENT:

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet)

PROPERTY ID #: 4639814551

DATE OF EVALUATION: _____

COUNTY: IREDELL

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	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
AB 1	LS 5%	0-4	Br SCL WSBK	FR SS SP SXP	N/A	48"	N/A	N/A	PS 0.3
		4-32	R C SBK	FR SS SP SXP					
		32-48	R CL WSBK	FR SS SP SXP					
AB 2	LS 5%	0-24	R C SBK	FR SS SP SXP	N/A	48"	N/A	N/A	PS 0.3
		24-48	R CL WSBK	FR SS SP SXP					
AB 3	LS 5%	0-30	R C SBK	FR SS SP SXP	N/A	48"	N/A	N/A	PS 0.3
		30-48	R CL WSBK	FR SS SP SXP					

COMMENTS: _____

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

Sheet 1 of 1
PROPERTY ID #: 4639814551
COUNTY: Iredell

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

18" Highside

OWNER: Robert Schuberth
ADDRESS: PO Box 1763 salisbury NC 28145
PROPOSED FACILITY: New single fam PROPOSED DESIGN FLOW (.1949): 480GPD
LOCATION OF SITE: 1794 Perth Rd mooresville NC 28117

APPLICATION DATE 1/27/202
DATE EVALUATED: 2/14/2024
PROPERTY SIZE: 16.87 acres
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	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
Change #									
Toe/Tch Gc/Y SS 5% 5		0-10	SC WSBK	—	Chroma 3's sat 24"	48"	Litho inclusions	some rock inclusions	PS.25
		10-40	C STRong ABK	Fr SS SP SEXP					
		40-48	CL ABK	Fr SSSP SEXP					
1 SS 5% 2		0-8	SCL SBK	Fr SS SP SEXP	Pass Chroma 2 at 36" YBmotts scattered throughout	57"	Few Litho inclusions	water seeping in from multiple areas at 11"	PS.275
		8-53	C STRong ABK	Fr SSS SP SEXP					
4th SS 3 4% B		0-8	SCL SBK	Fr SSS SP SEXP	Chroma 3's scattered throughout	54"	Litho inclusions	Rocks scattered throughout watersee @ 19 at 24"	PS.25
		8-43	CL ABK Strong	Fr SS SP SEXP					
		43-54	CL ABK	Fr SSS SP SEXP					
4 SS 4%		0-10	SCL WSBK	Fr SS SP SEXP	YBmotts scattered throughout	48"	Litho inclusions	Rocks scattered throughout water seeping in	PS.275
		10-43	C ABK	Fr SSS SP SEXP					
		43-48	CL SBK/ABK	Fr SSS SP SEXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	480	291
System Type(s)	25%Red	50%Red
Site LTAR	.25	.275

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: Patrick
OTHER(S) PRESENT: Heath, Barry, Kaylan

COMMENTS:

AP301099

RECEIVED FEB 0 3 2020 $500.00

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:
(✓) 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) Contact Gary McNeely 704 310 1832

Applicant Name: ROBERT SCHWERTH Address: PO Box 1763 SALISBURY, NC Zip: 28145
Applicant Email: SCHWERTHBuilders@gmail.com Phone: 704 202 3341 Alt. Phone:
Owner Name: " SAME " Address: " SAME " Zip:
Owner Email: " SAME " Phone: " SAME " Alt. Phone:

Property Information:

Street Address: 1794 PERTH ROAD MOORESVILLE NC 28117
Subdivision Name: — Section/Phase: Lot Number:
Driving Directions: FROM HWY 150, RIGHT ONTO PERTH ROAD - Drive couple miles until you pass CORNELIUS Rd on Right - THEN PROPERTY up 1/4 mile on left

Site Development Information: *(check or complete ALL that apply* 2-14-2020 RS

(✓) 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:
( ) 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 (X) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (X) 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: Robert Schwerth
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

1-27-2020
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)* Robert Schuberth

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, ROBERT SCHUBERTH, am the legal owner(s) of the property located at 1794 PERTH ROAD Mooresville, NC 28117, identified as

PIN (Parcel Identification Number) 4639814551, located in Iredell County, North Carolina.

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

Robert Schuberth
Signature of Owner(s)

1-27-2020
Date

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

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, ROBERT SCHUBERTH, am the legal owner(s) of the property located at 1794 PERTH ROAD Mooresville, NC 28117, identified as PIN (Parcel Identification Number) 4639814551, 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.

Robert Schuberth 1-27-2020 Jacquelyn Schuberth 1-27-2020

Signature of Owner(s) Date 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

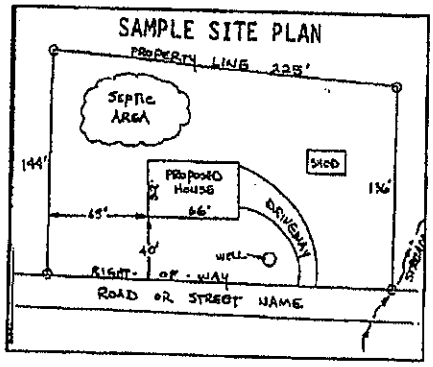
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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 mensurements 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

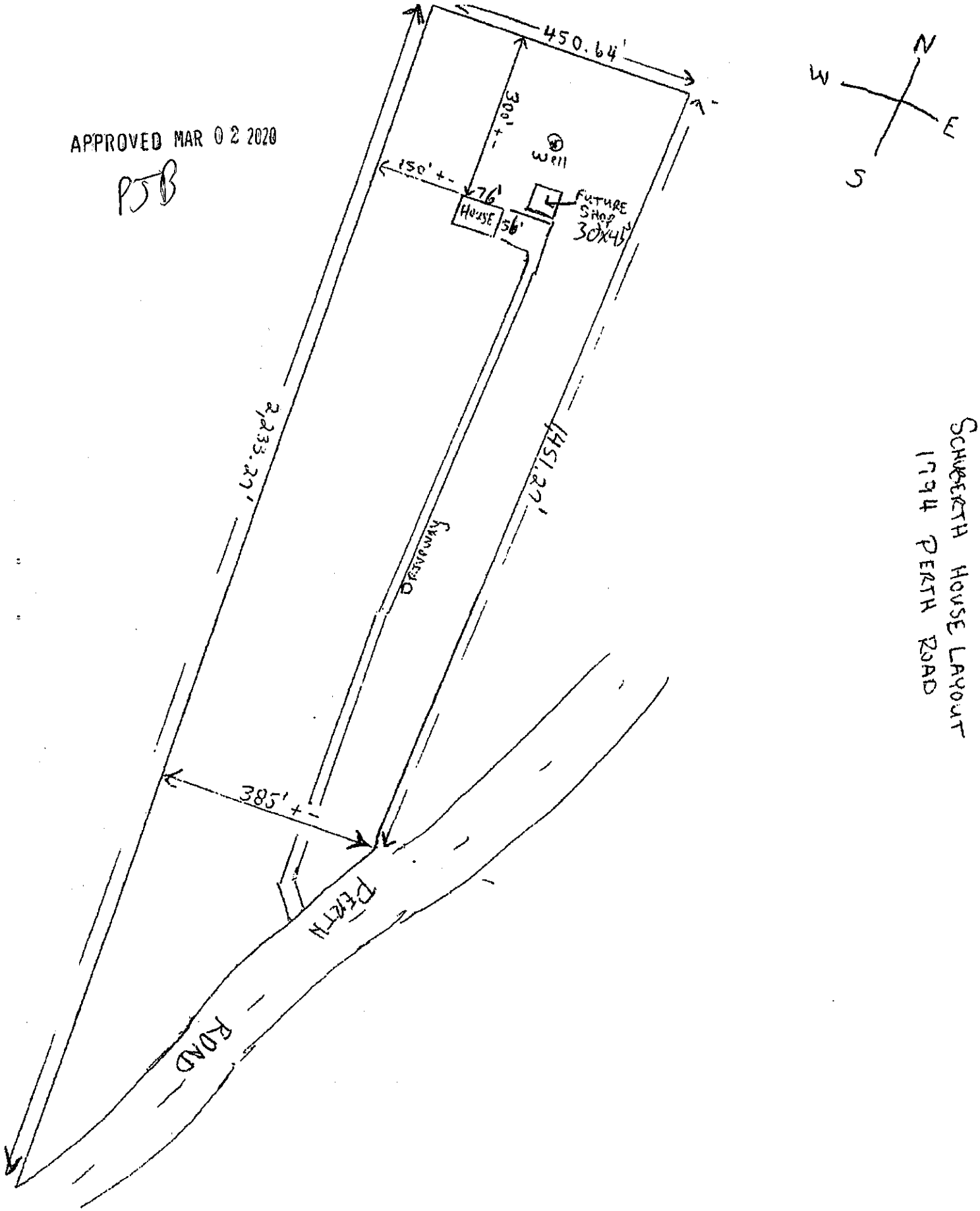
SEPERATE PAPER HAS Site PLAN

Signature: _____ 1-27-2020

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

APPROVED MAR 0 2 2020

PJB

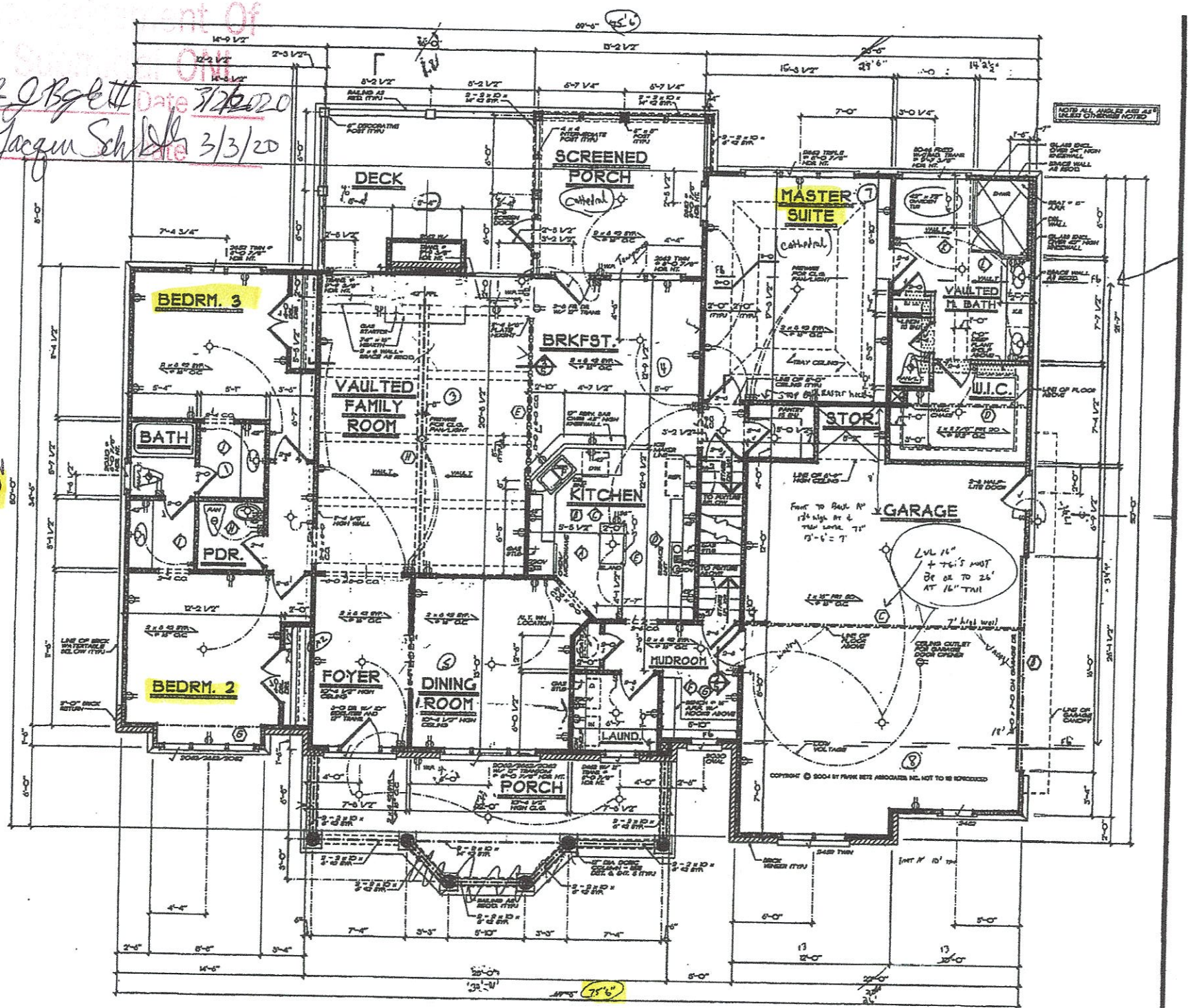


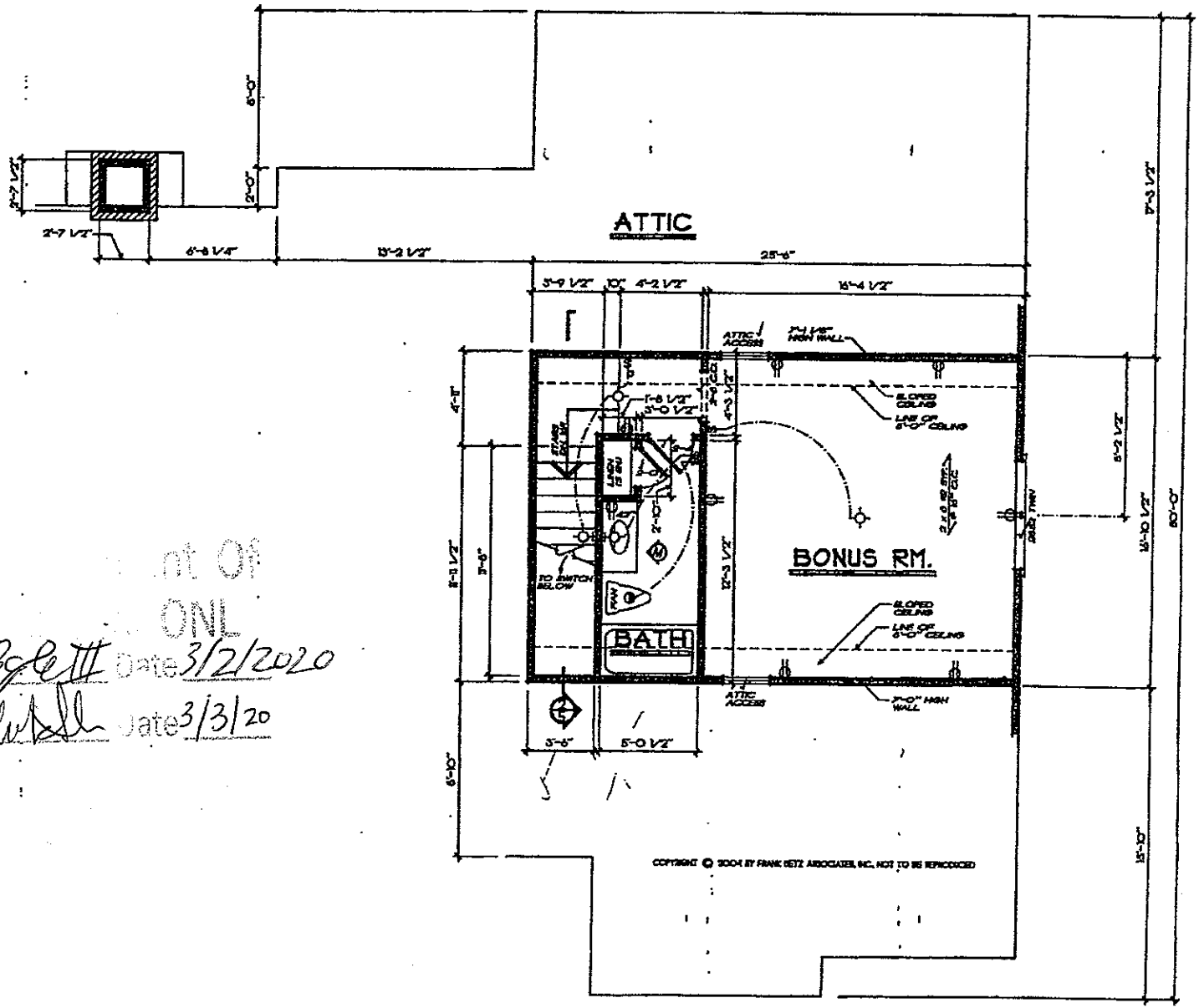
SCHUBERTH HOUSE LAYOUT
1794 PERTH ROAD

Acknowledgment Of
Plans Submitted Only

Patrick J Bgett III Date 3/2/2020

Jacqui Schilla Date 3/3/20





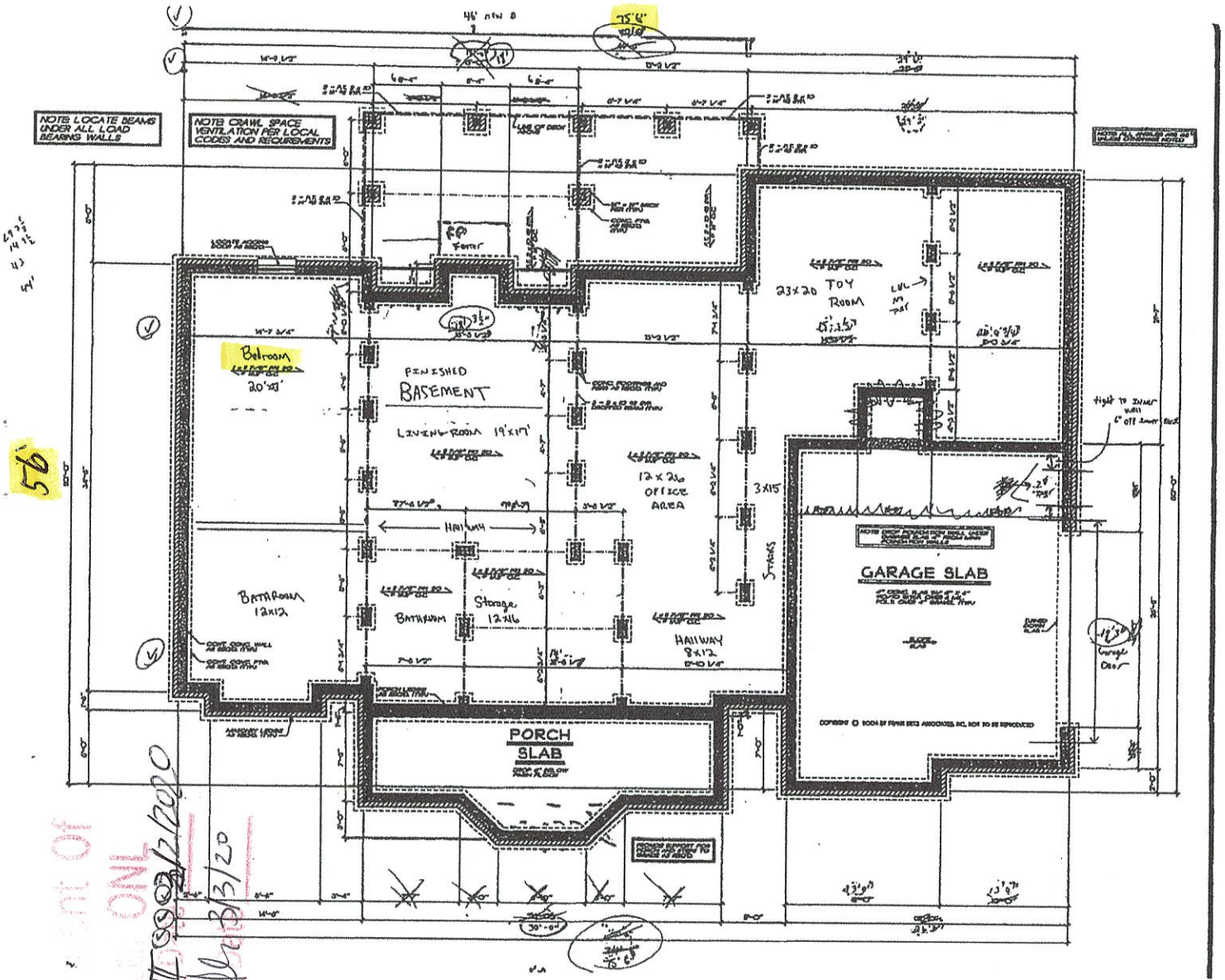
Act[illegible]nt Of
Plans [illegible] ONL
Patrick J Bagley III Date 3/2/2020
Jacqui Schlabach Date 3/3/20

COPYRIGHT © 2004 BY FRANK BETZ ASSOCIATES, INC., NOT TO BE REPRODUCED

OPT. SECOND FLOOR PLAN

1/4" = 1'-0"

FRANK BETZ ASSOCIATES, INC. ASSUMES NO LIABILITY FOR ANY CHANGES OR MODIFICATIONS MADE TO THESE PLANS BY OTHERS.



Add'l Info on Plans
Matthew Bigelow 12/2/2020
Jacqui Schlehuber 3/3/20

IREDELL COUNTY · NC

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

APPLICATION NUMBER
301099 Issue Date: 09/20/2019

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4639814551.000	1794 PERTH RD	Iredell County

Owner Information	Applicant Information
Name: LYTLE JOYCE S+N L MARTIN ETAL	Name: SCHUBERTH BUILDERS
Address:	Address: 386 RIVERWOOD DRIVE MOORESVILLE, NC 28117
Phone:	Phone:

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0	35	35	15	15	WSIV-CA Catawba/Lake Norman	NO

Remarks
New SFD ZONING ISSUED 9-20-19

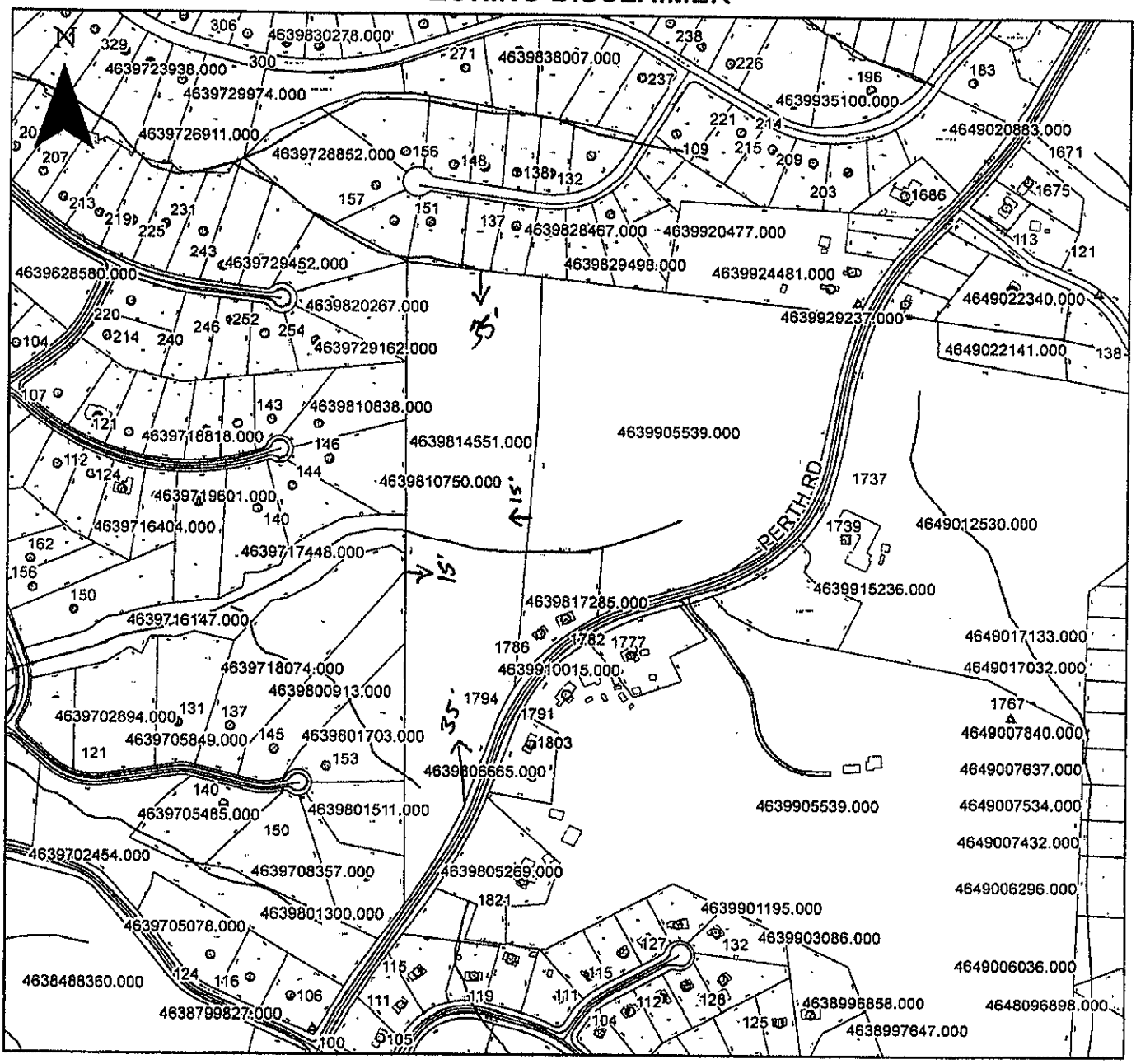
The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions, 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: 01/31/2020

Permit Number	301099	TOTAL FEES:	

ZONING DISCLAIMER



Property Address 1794 Perth Rd.

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. Applicant further acknowledges that the 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

1/31/2020
Date