IREDELL COUNTY HEALTH DEPARTMENT

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

PERMIT # 226977

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

PIN # 4646-68-7255

APPLICANT/OWNER: Kurt Hahne | APPLICANT ADDRESS: P.O. Box 2412 Huntersville, NC 28078

SITE ADDRESS: 128 Hickory Hill Rd. Mooresville, NC 28117 | PHONE: 704-400-7528 | ALT. PHONE

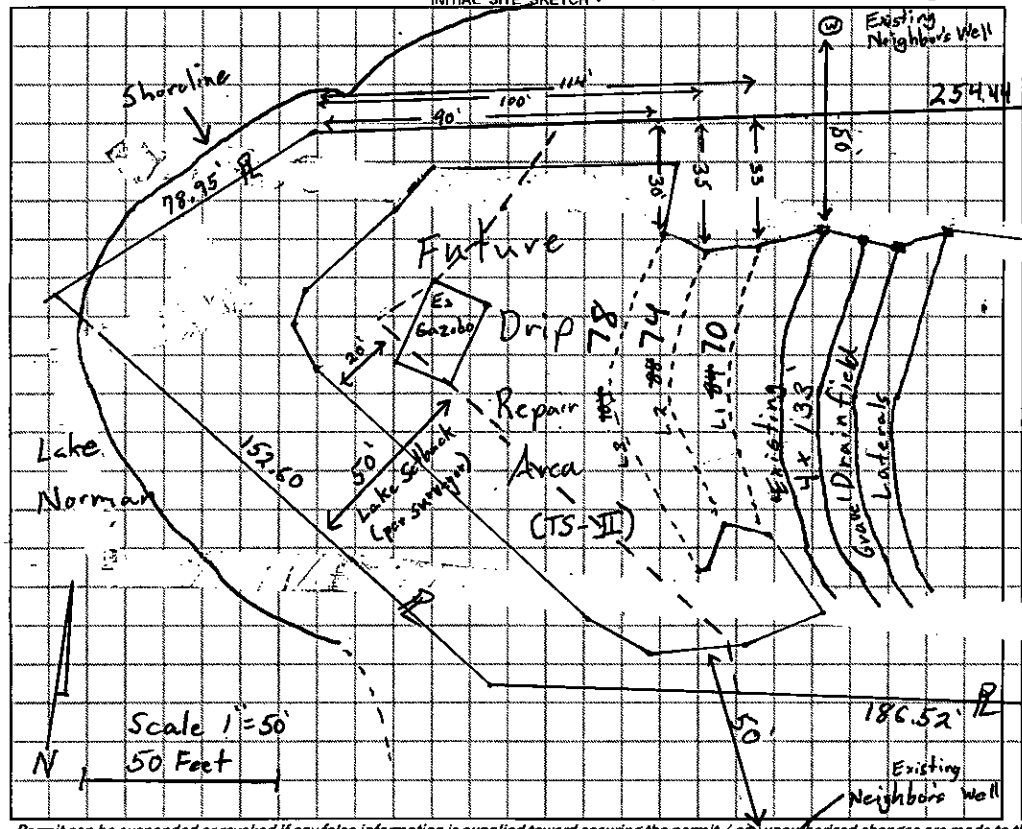
SITE DIRECTIONS: I-77 towards Lake Norman → L on Silver Hook → R on Apple Blossom → L on Hickory Hill → on Right | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: — | SECTION: — | LOT # — | LOT AREA: ≈ 1.7 acres | DESIGN FLOW: 600 GPD | L.T.A.R.: 0.275

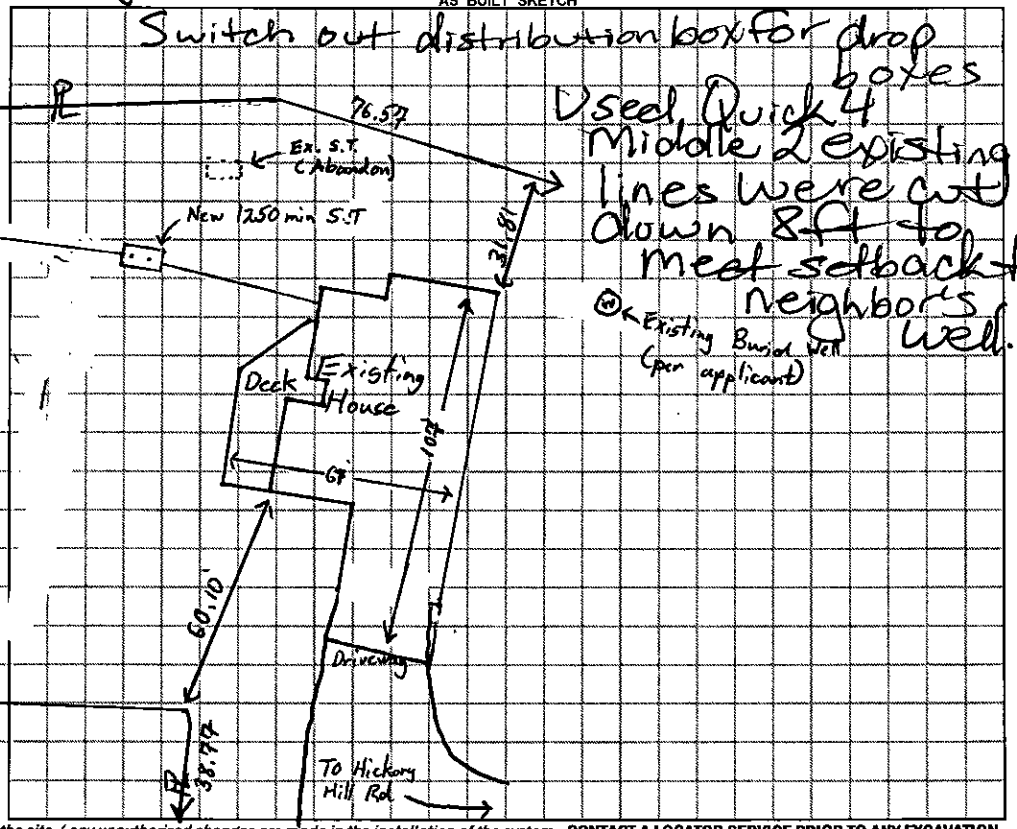
Septic Tank	1250	(gal)	STB	338	Date	10-10-17	☐ New System ☐ Repair ☒ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms	5	Water Supply
Pump Tank	—	(gal)	PT	—	Date	—	System Description:	Existing + New Tank + 25% Reduction	☐ Business	No. Persons	10	☒ Private
Pump Make	—	Model	—	Serial #	—		Repair System Description:	Drip + TS 2	☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	3	Linear Ft	218		Maintenance Agreement Required:	☐ YES ☒ NO	☒ Slab	☐ Crawl Space		☐ Community
Trench Width	36"	Trench Bottom Depth(Low side)	20"	Gravel Depth	—			☒ GRAVITY ☐ PRESSURE	☒ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions: Though 276 L.F. of drainfield has been laid out, only 218 l.f. is required to be installed. The extra area is to be set aside for future repair area purposes. Should repair be needed, existing Gazebo must be removed. Recommend pumping septic tank every 3-5 years. Existing tank to be pumped + crushed. Recommend locating buried well in front yard. If well doesn't meet required setbacks, abandon said well + relocate to area/site meeting setbacks. Also recommend uncovering all drop-boxes to ensure proper distribution.

INITIAL SITE SKETCH



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: [signature] Date: 9/7/17 Installed by: Richard Abernathy

IMPROVEMENT PERMIT by: Tom Shuck Date: 8/29/17 OPERATION PERMIT by: Maria Dotson Date: 11/28/17

AUTHORIZATION TO CONSTRUCT by: Tom Shuck Date: 8/29/17 Existing System Inspected by: Date:

RECEIVED MAY 9 - 2017

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)

Paid $500.00

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

****

226977

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 #
Kent Holman	P.O Box 2412 Huntersville NC 28070		704.400 7528
Owner Name	**Mailing Address**	**Home Phone #**	**Alternate Phone #**
Greg Wellborn	128 Hickory Hill Rd Mooresville NC 28117		704 998 7715

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
128 Hickory Hill Rd		

Driving Directions: I-77 S to Exit 35. (R) off exit. (L) on Silver Hollow Dr. (R) on Apple Blossom Dr. (L) on Hickory Hill Rd -

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

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

Maximum Number of Bedrooms 5
Maximum Number of Occupants 5
If Expansion, Current Number of Bedrooms 3

( ) 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 _____

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 (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.

9. Signature: _____ 5/2/17

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, Greg Wolfjung, am the legal owner(s) of the property located at 128 Hickory Hill Rd. Mooresville NC 28117, identified as PIN (Parcel Identification Number) 4646687255, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) Kurt Hahne, KLH Construction Inc., 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

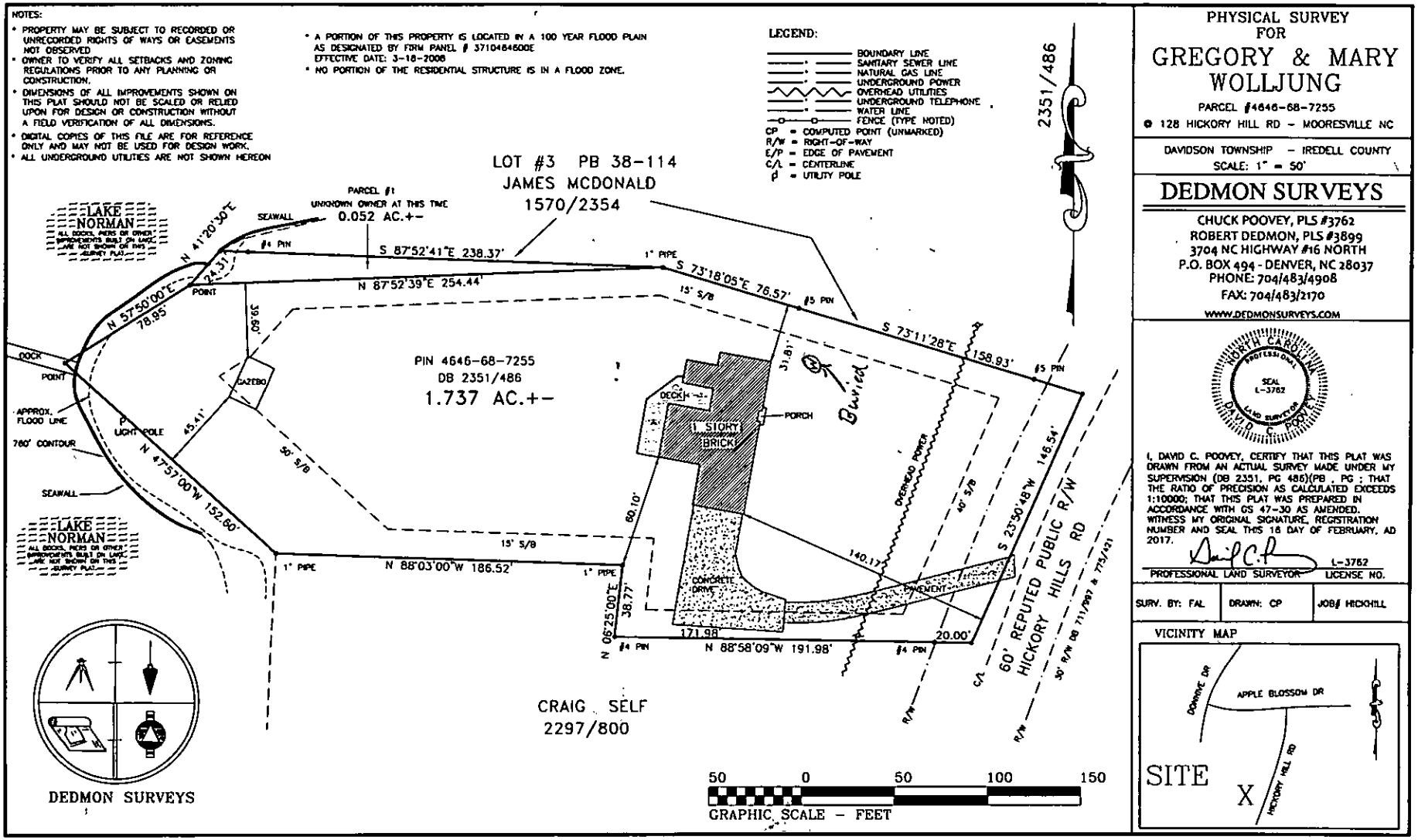
I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

Signature of Owner(s)	4-27-17 Date	Signature of Witness	4/27/17 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


NOTES:
• PROPERTY MAY BE SUBJECT TO RECORDED OR UNRECORDED RIGHTS OF WAYS OR EASEMENTS NOT OBSERVED
• OWNER TO VERIFY ALL SETBACKS AND ZONING REGULATIONS PRIOR TO ANY PLANNING OR CONSTRUCTION.
• DIMENSIONS OF ALL IMPROVEMENTS SHOWN ON THIS PLAT SHOULD NOT BE SCALED OR RELIED UPON FOR DESIGN OR CONSTRUCTION WITHOUT A FIELD VERIFICATION OF ALL DIMENSIONS.
• DIGITAL COPIES OF THIS FILE ARE FOR REFERENCE ONLY AND MAY NOT BE USED FOR DESIGN WORK.
• ALL UNDERGROUND UTILITIES ARE NOT SHOWN HEREON
• A PORTION OF THIS PROPERTY IS LOCATED IN A 100 YEAR FLOOD PLAIN AS DESIGNATED BY FIRM PANEL # 3710464600E EFFECTIVE DATE: 3-16-2006
• NO PORTION OF THE RESIDENTIAL STRUCTURE IS IN A FLOOD ZONE.
LEGEND:
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
ϕ = UTILITY POLE
LOT #3 PB 38-114
JAMES MCDONALD
1570/2354
2351/486
PARCEL #1
UNKNOWN OWNER AT THIS TIME
0.052 AC.+-
LAKE NORMAN
SEAWALL
#4 PIN
N 41°20'30"E
S 87°52'41"E 238.37'
1" PIPE
S 73°18'05"E 76.57'
#5 PIN
S 73°11'28"E 158.93'
N 87°52'39"E 254.44'
24.31'
POINT
N 57°50'00"E
78.85'
39.60'
15' S/B
DOCK
GAZEBO
PIN 4646-68-7255
DB 2351/486
1.737 AC.+-
APPROX. FLOOD LINE
760' CONTOUR
LIGHT POLE
45.41'
50' S/B
N 47°57'00"W 152.80'
SEAWALL
1 STORY BRICK
DECK
PORCH
Buried
31.81'
OVERHEAD POWER
40' S/B
60.10'
140.17'
S 23°50'48"W 146.54'
60' REPUTED PUBLIC R/W
HICKORY HILLS RD
50' R/W DB 711/991 & 775/421
C/L
R/W
CONCRETE DRIVE
PAVEMENT
38.77'
N 06°25'00"E
171.98'
20.00'
N 88°58'09"W 191.98'
#4 PIN
1" PIPE
N 88°03'00"W 186.52'
CRAIG SELF
2297/800
50 0 50 100 150
GRAPHIC SCALE - FEET
DEDMON SURVEYS
PHYSICAL SURVEY
FOR
GREGORY & MARY WOLLJUNG
PARCEL #4646-68-7255
128 HICKORY HILL RD - MOORESVILLE NC
DAVIDSON TOWNSHIP - IREDELL COUNTY
SCALE: 1" = 50'
DEDMON SURVEYS
CHUCK POOVEY, PLS #3762
ROBERT DEDMON, PLS #3899
3704 NC HIGHWAY #16 NORTH
P.O. BOX 494 - DENVER, NC 28037
PHONE: 704/483/4908
FAX: 704/483/2170
WWW.DEDMONSURVEYS.COM
NORTH CAROLINA PROFESSIONAL SEAL L-3762 LAND SURVEYOR DAVID C. POOVEY
I, DAVID C. POOVEY, CERTIFY THAT THIS PLAT WAS DRAWN FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION (DB 2351, PG 486)(PB , PG ; THAT THE RATIO OF PRECISION AS CALCULATED EXCEEDS 1:10000; THAT THIS PLAT WAS PREPARED IN ACCORDANCE WITH GS 47-30 AS AMENDED. WITNESS MY ORIGINAL SIGNATURE, REGISTRATION NUMBER AND SEAL THIS 16 DAY OF FEBRUARY, AD 2017.
PROFESSIONAL LAND SURVEYOR
L-3762
LICENSE NO.
SURV. BY: FAL
DRAWN: CP
JOB# HICKHILL
VICINITY MAP
DONNIVE DR
APPLE BLOSSOM DR
HICKORY HILL RD
SITE
X

NOTES:

- PROPERTY MAY BE SUBJECT TO RECORDED OR UNRECORDED RIGHTS OF WAYS OR EASEMENTS NOT OBSERVED
- OWNER TO VERIFY ALL SETBACKS AND ZONING REGULATIONS PRIOR TO ANY PLANNING OR CONSTRUCTION.
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- A PORTION OF THIS PROPERTY IS LOCATED IN A 100 YEAR FLOOD PLAIN AS DESIGNATED BY FIRM PANEL # 3710464600E EFFECTIVE DATE: 3-18-2008
- NO PORTION OF THE RESIDENTIAL STRUCTURE IS IN A FLOOD ZONE.

LEGEND:

BOUNDARY LIN
SANITARY SEW
NATURAL GAS
UNDERGROUNI
OVERHEAD UTI
UNDERGROUNI
WATER LINE
FENCE (TYPI
CP = COMPUTED POINT (UNMAR
R/W = RIGHT-OF-WAY
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C/L = CENTERLINE
ϕ = UTILITY POLE

LOT #3 PB 38-114
JAMES MCDONALD
1570/2354

PARCEL #1
UNKNOWN OWNER AT THIS TIME
0.052 AC.+-

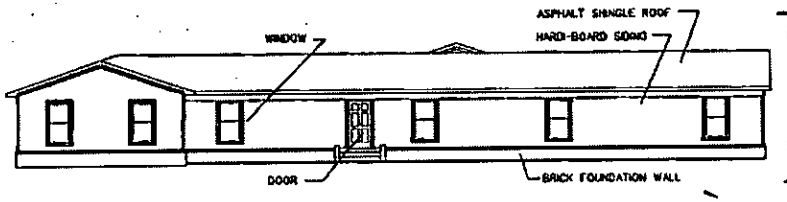
LAKE NORMAN
ALL DOCKS, PIERS OR OTHER IMPROVEMENTS BUILT ON LAKE ARE NOT SHOWN ON THIS SURVEY PLAT.

SEAWALL
#4 PIN
S 87°52'41"E 238.37'
1" PIPE
S 73°18'05"E 76.57'
#5 PIN
S 73°1
N 41°20'30"E
24.31'
POINT
N 87°52'39"E 254.44'
15' S/B
N 57°50'00"E
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GAZEBO
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#4 P
R/W

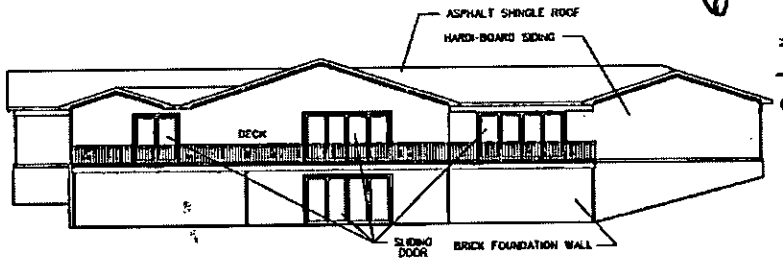
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CRAIG SELF
2297/800

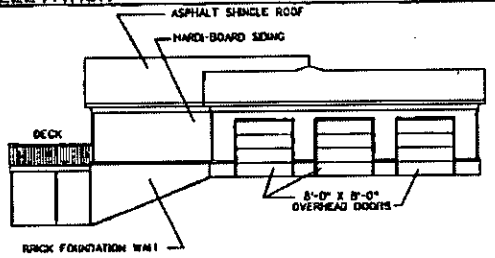
101'-4"



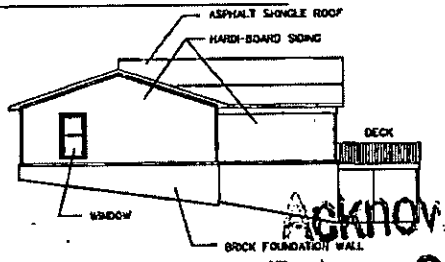
FRONT ELEVATION
1/8"=1'-0"



REAR ELEVATION
1/8"=1'-0"

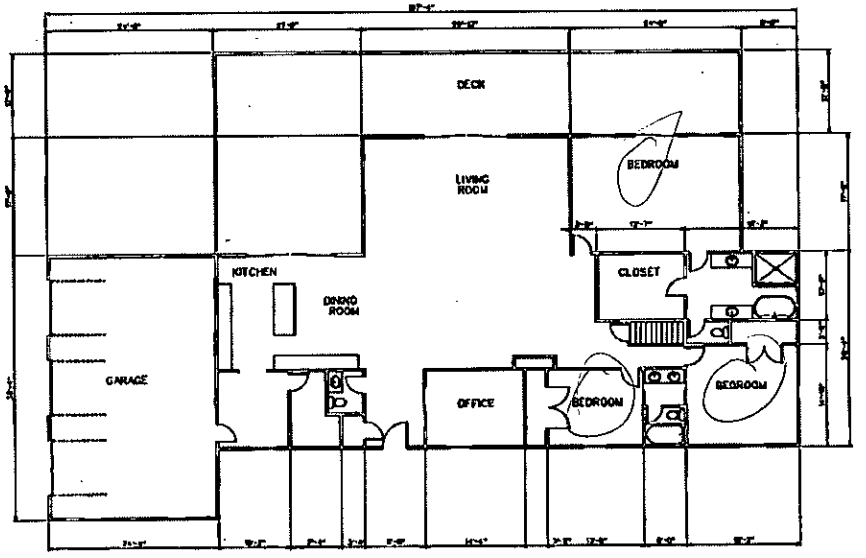


SIDE ELEVATION
1/8"=1'-0"



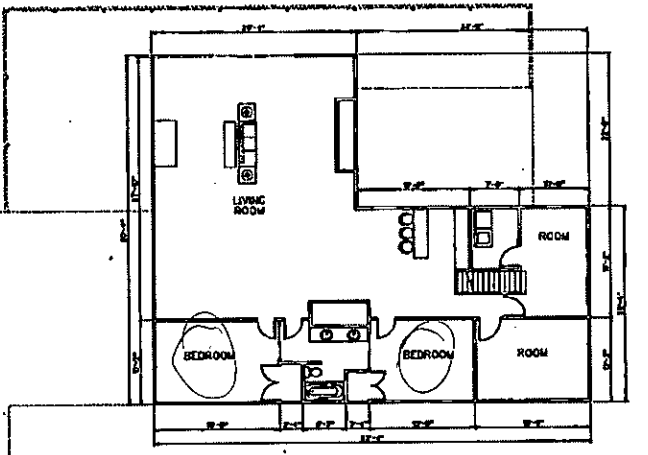
SIDE ELEVATION
1/8"=1'-0"

12'-0"
17'0"
38'4"
67'



UPPER LEVEL PLAN
1/8"=1'-0"

AREA CALCULATIONS	
UPPER LEVEL HEATED AREA	3,275 SQ.FT.
BASEMENT HEATED AREA	2,410 SQ.FT.
TOTAL HEATED AREA	5,685 SQ.FT.
UNHEATED AREA	
GARAGE	832 SQ.FT.
TOTAL UNDER ROOF	6,617 SQ.FT.
DECK	1,250 SQ.FT.



BASEMENT PLAN
1/8"=1'-0"

Acknowledgement of
Plans Submittal ONLY!
Tom Schuck Date 8/29/17
Date 5/9/17

Wilbur Associates
Architecture / Planning

PROPOSED RENOVATIONS TO
128 HICKORY HILL

SHEET
SKA-1

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

Sheet ___ of ___
PROPERTY ID #: ___
COUNTY: Iredell

Home

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

OWNER: Kurt Hahne
ADDRESS: P.O. Box 2412 Huntersville, NC 28078
PROPOSED FACILITY: 5BR SFR PROPOSED DESIGN FLOW (.1949): 600 GPD
LOCATION OF SITE: 128 Hickory Hill Rd. Mooresville
WATER SUPPLY: ☒ Private ☐ Public ☐ Well ☐ Spring ☐ Other ___
EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

APPLICATION DATE 5/2/2017
DATE EVALUATED: 8/18/17
PROPERTY SIZE: 1.734 acres
PROPERTY RECORDED: Yes

1 84 88 104 276 218 repair

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
1	11% Prim	0-11	V.W. SCL SBK	Sl. Friable, SS, Sp, Scap	—	36"	—	—	0.275 PS
		11-23	Clay w/m SBK/ABK some SAP	Sl. Firm, Sticky, Sp, Scap					
		23-36	Clay Loam W. SBK some SAP	Sl. Friable, SS, Sp, Scap					
		36-54"	Loamy MA Sap	moderately well Drained + Friable					
2	5% Repair	0-11	SCL V,W. SBK	Sl. Friable, SS, Sp, Scap	—	29"	—	—	0.30 PS
		11-24	Clay w/m ABK/SBK some SAP	Sl. Firm, Sticky, Sp, Scap					
		24-29	Clay Loam w. SBK Abundant SAP	Friable, SS, Sp, Scap					
		29-52"	MA Loamy Saprolite	Moderately Drained + Friable					
3	7% Repair	0-8	Fill Loose Loamy + gravels	—	—	53	—	—	0.275 PS
		8-22	SCL (compact) V,W. SBK/MA	very Firm, SS, Sp, Scap					
		22-33	Clay some SAP W. SBK	Sl. Firm, Sticky, Sp, Scap					
		33-53	Clay Loam W. SBK some SAP + magnese	Sl. Friable, SS, Sp, Scap					
4	13% Prim	0-8	Fill loose Loamy + gravels	—	—	53	—	—	0.275 PS
		8-20	SCL V,W. SBK	very Firm, SS Sp, Scap					
		20-44	Clay W-M SBK	Sl. Firm sticky, Sp, Scap					
		44-53	Clay Loam W. SBK (some SAP/magnese)	Sl. Friable, SS, Sp, Scap					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	276 + Fx	8000+ S.F.
System Type(s)	25%	Drip-Shallow
Site LTAR	0.275	0.1

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Tom Shuck
OTHER(S) PRESENT: ___

COMMENTS:

L_A R

L_B B

L_C W

L_D P 5.83

L_1 B 6.83 84

L_2 W 7.85 88

L_3 P 9.09 104

