ICHD–ENVIRONMENTAL HEALTH DIVISION PJB

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP-303628

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

PIN # 4648122793

APPLICANT/OWNER: 4G Design Build APPLICANT ADDRESS: 488 Pineville Rd. Statesville, NC

SITE ADDRESS: 434 Big Indian Loop Mooresville, NC 28117 PHONE: 704-578-4951 ALT. PHONE —

SITE DIRECTIONS: NC 150 W → R on Bluefield → L on Big Indian Loop → lot on R

SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: Indian Forest SECTION: — LOT # 8 LOT AREA: 2ac DESIGN FLOW: 480gpd L.T.A.R.: .3

Septic Tank	1000	(gal)	STB 744	Date	8/2/2020	☑ 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:	25% reduction	☐ Business	No. Persons	8	☑ Private
Pump Make		Model		Serial #		Repair System Description:	LP PPBPS	☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	7	Linear Ft	400'	Maintenance Agreement Required:	☐ YES ☑ NO	☑ Slab	☐ Crawl Space		☐ Community
Trench Width	36"	Trench Bottom Depth(Low side)	30"	Gravel Depth	—		☑ GRAVITY ☐ PRESSURE	☐ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions:

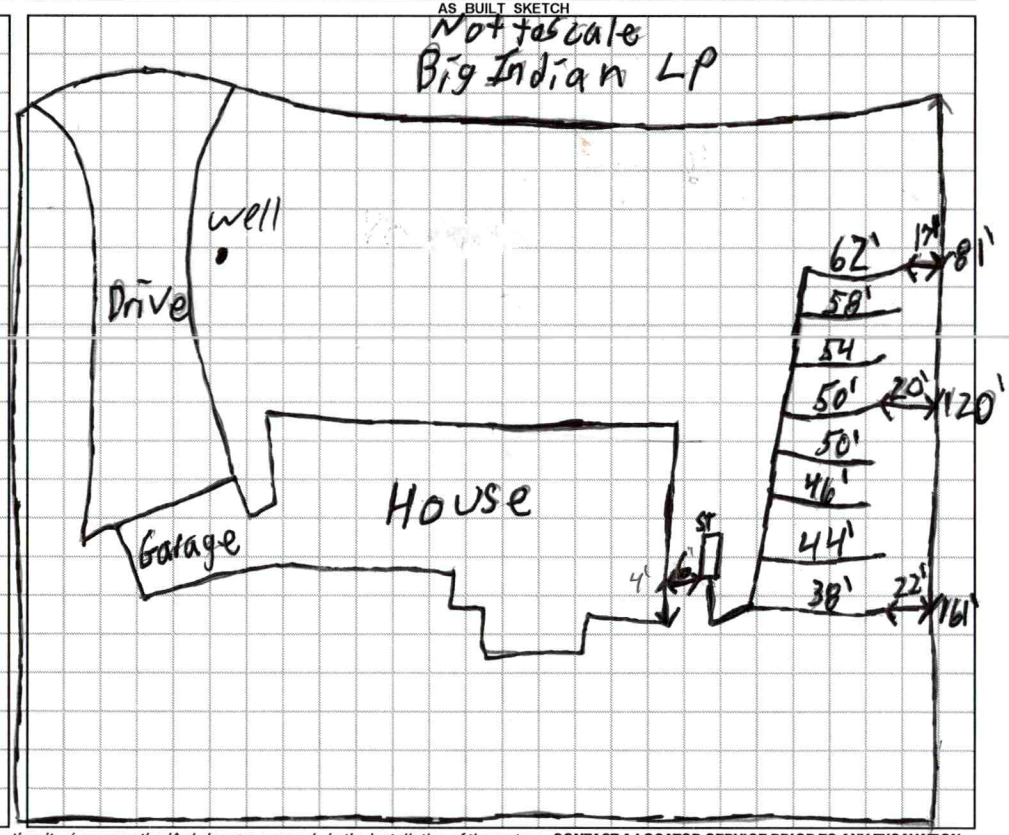
INITIAL SITE SKETCH

This permit is issued pursuant to Section 11 . (C) of S.L. 2018-114 using the signed and sealed LSS Evaluation by:

The Oaks Group, PA

LSS # 1313

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**

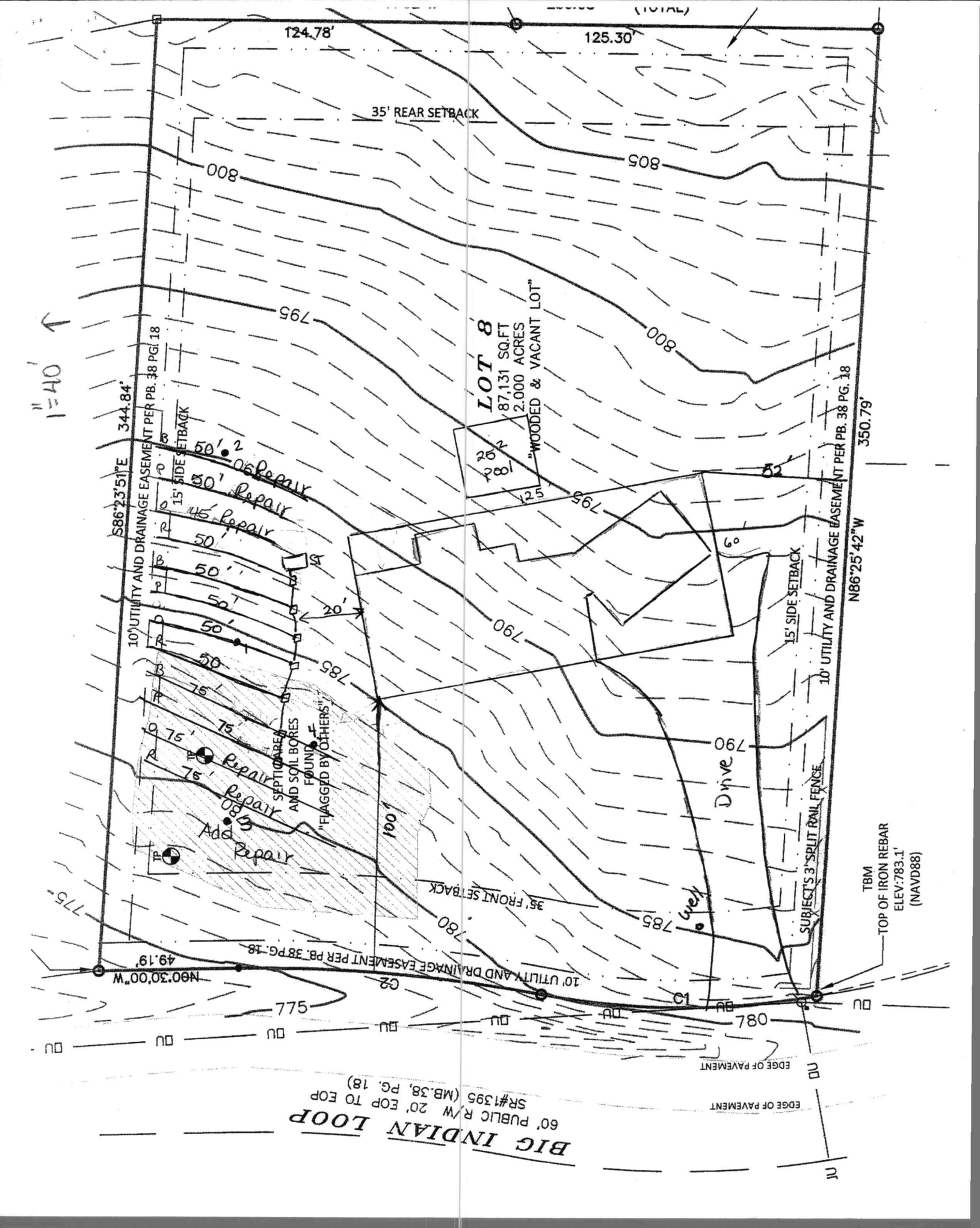
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☑ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☑ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Kathleen Sanders Date: 12-30-19 Installed by: Greenway Waste Solutions

IMPROVEMENT PERMIT by: Kayla Wilson Date: 12-27-19 OPERATION PERMIT by: Patrick J Boyle III Date: 10/9/2020

AUTHORIZATION TO CONSTRUCT by: Kayla Wilson Date: 12-30-19 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.


124.78'
125.30'
35' REAR SETBACK
805
800
795
800
LOT 8
87,131 SQ.FT
2.000 ACRES
"WOODED & VACANT LOT"
344.84'
S86°23'51"E
10' UTILITY AND DRAINAGE EASEMENT PER PB. 38 PG. 18
15' SIDE SETBACK
50' Repair
50' Repair
45' Repair
50'
50'
50'
50'
75'
75'
75' Repair
Repair
Add Repair
SEPTIC AREA AND SOIL BORES FOUND "FLAGGED BY OTHERS"
100'
20'
795
790
785
780
790
785
780
775
775
35' FRONT SET BACK
10' UTILITY AND DRAINAGE EASEMENT PER PB. 38 PG. 18
N00°30'00"W
49.19'
C2
C1
350.79'
N86°25'42"W
15' SIDE SETBACK
10' UTILITY AND DRAINAGE EASEMENT PER PB. 38 PG. 18
Drive
SUBJECT'S 3 'SPLIT RAIL FENCE
TBM
TOP OF IRON REBAR
ELEV:783.1'
(NAVD88)
EDGE OF PAVEMENT
EDGE OF PAVEMENT
BIG INDIAN LOOP
60' PUBLIC R/W 20' EOP TO EOP
SR#1395 (MB.38, PG. 18)
1"=40'

434 Big Indian Loop - The Oaks Group, PA

Number of Bedrooms	**4**
Basement or Crawl	**Concrete Slab**
Design Flow (gpd)	**480**
Primary System LTAR (gpd/ft2)	**0.3**
Primary System Type	**25% Reduction**
No. Lines	7 (See Table)
Total Linear Feet	400
Trench Width	3' min.
Trench Spacing	9' min.
Distribution Device	Drop Boxes or Other
Tank Size	1000 gallon tank
Max Trench Bottom Depth (Low Side)	30"
Maintenance Agreement Required	No
Repair System	**LP PPBPS**
Total Linear Feet	295
Repair Loading Rate	0.3
Repair trench depth	30"

Table: Summary of Primary and Repair Nitrification Line Specifications

Line No.	Use	Line Color	System Type	Line Length (Ft.)
1	Repair	Blue	LP PPBPS	50
2	Repair	Pink	LP PPBPS	50
3	Repair	Orange	LP PPBPS	45
4	System	Red	25% Reduction	50 endfed
5	System	Blue	25% Reduction	50 endfed
6	System	Pink	25% Reduction	50 endfed
7	System	Orange	25% Reduction	50 endfed
8	System	Red	25% Reduction	50 endfed
9	System	Blue	25% Reduction	75 midfed
10	System	Pink	25% Reduction	75 midfed
11	Repair	Orange	LP PPBPS	75
12	Repair	Red	LP PPBPS	75
				Total System: 400'
				Total Repair: 295'

Note: Keep necessary setbacks to foundation drains if used
Tank locations and distribution devices can be altered at ICHD's discretion
Must set plumbing to achieve gravity flow to tank
Remove berms in septic area to reduce ponding over drain field

THE OAKS GROUP, PA

To: Iredell County Environmental Health Department (ICHD)

From: Kathleen Saunders, LSS

RE: 434 Big Indian Loop

Date: December 15, 2019

Attached is the septic specification information required to permit 434 Big Indian Loop for an Improvement Permit and/or Construction Authorization Permit in Iredell County via the Session Law 14 permitting process.

The attached information is not an Improvement Permit or an Authorization to Construct, and is only to assist the Iredell with permitting. The ICHD has to approve each lot and only the ICHD can issue these permits. The system should be installed according to the ICHD permits, policies, and NC Rules, which these specifications are in accordance with. If the ICHD wishes to change tank locations, distribution devices, etc they may do so at their discretion.

All information and specifications have been prepared in conjunction with ICHD permitting guidelines for the current lot owners to acquire an Improvement Permit and/or Authorization to Construct on this lot. It is ultimately the ICHD's responsibility to verify all specifications, **excluding** soil descriptions, before permitting and/or septic system installation. The site contains highly variable soils; there may be soil features present that were not encountered during the evaluation.

The LSS Evaluation attached to this application is to be used to produce design and construction features for permitting in accordance with SL 2018-114 Section 11.(c). The LSS Evaluation is being submitted pursuant to and meets the requirements of SL 2018-114 11.(c). The LSS Evaluation contains sufficient information to produce design and construction features for an IP/CA, and the LSS contains the proper insurance with the proper coverage.

LICENSED SOIL SCIENTIST
KATHLEEN M. SAUNDERS
1313
STATE OF NORTH CAROLINA

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

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

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

OWNER: 46 Design Build
ADDRESS: 488 Pineville Rd Statesville
PROPOSED FACILITY: SFR
PROPOSED DESIGN FLOW (.1949): 480
LOCATION OF SITE: Indian Forest Lot B
APPLICATION DATE ___
DATE EVALUATED: 12/18/19
PROPERTY SIZE: 2 Ac
PROPERTY RECORDED: yes

WATER SUPPLY: ☐ Private ☐ Public ☒ Well ☐ Spring ☐ Other ___
EVALUATION METHOD: ☒ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	L 8-10%	0-24	WK SBK SCL	FR SS/SP	Br	48+	N/A	N/A	0.3
		24-44	Mo SBK C	↓	R				
		44-48	WK SBK C	↓	R; F Sap				
2	L 8-10%	0-8	Mo GR SL	FR NS/NP	DK Br	48+	N/A	N/A	0.3
		8-32	Mo SBK C	FR SS/SP	R				
		32-48	WK SBK CL	↓	R; C Sap				
3	L 8-10%	0-18	WK SBK SCL	FR SS/SP	Br	48+	N/A	N/A	0.3
		18-28	Mo SBK C	↓	R				
		28-48	WK SBK C	↓	R; C Sap				
4	L 8-10%	0-16	WK SBK SCL	FR SS/SP	Br R	48+	N/A	N/A	0.3
		16-41	Mo SBK C	↓	R; F Sap				
		41-48	WK SBK C	↓	R; C Sap				

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	III g	IV
Site LTAR	0.3	0.3

OTHER FACTORS (.1940): PS
SITE CLASSIFICATION (.1948): ___
EVALUATED BY: KMS
OTHER(S) PRESENT: ___

LICENSED SOIL SCIENTIST
KATHLEEN M. SAUNDERS
THE GREAT SEAL OF THE STATE OF NORTH CAROLINA
1313
STATE OF NORTH CAROLINA

COMMENTS: ___

Updated February 2014

Floor plans emailed to Bonda

RECEIVED DEC 2 0 2019

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Paid $500.00

Application For:
( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) Septic Improvement Permit (X) 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

AP- 303628

The following optional attachments may also be submitted:
Place an (X) beside whichever is submitted if applicable
( ) Survey Plat, scaled no more than 1 inch = 60 feet
(X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: 4G Design Build Address: 488 Pineville Rd Statesville Zip: 28677
Applicant Email: _____ Phone: _____ Alt. Phone: _____
Owner Name: Same Address: _____ Zip: _____
Owner Email: _____ Phone: _____ Alt. Phone: 704-578-4951 (LSS)

Property Information:

Street Address: 434 Big Indian Loop
Subdivision Name: Indian Forest Section/Phase: _____ Lot Number: 8
Driving Directions: Bluefield Rd, Big Indian Loop, on R

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

(X) 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
(X) 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
(X) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

Water Supply: ( ) Replacement Well – Reason: _____
( ) Multi-connection Well Number of Houses: _____ Number of Persons: _____
(X) 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 (X) 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: Kathleen Saunders 12-19-19
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

AUTHORIZATION TO ACT AS AGENT FOR OWNER

Any application/document/permit requiring a signature must be signed by the property owner or their authorized agent. This form shall be provided by the owner to allow specified individuals to act as agents for the owner. This form allows the specified individuals to sign or receive any application/document/permit on behalf of the owner. This form allows the authorized agent to make decisions on behalf of the owner pertaining to modifications of permits in the field. It is the responsibility of the owner to assure that any/all permit conditions specified on permits issued by this Division are followed.

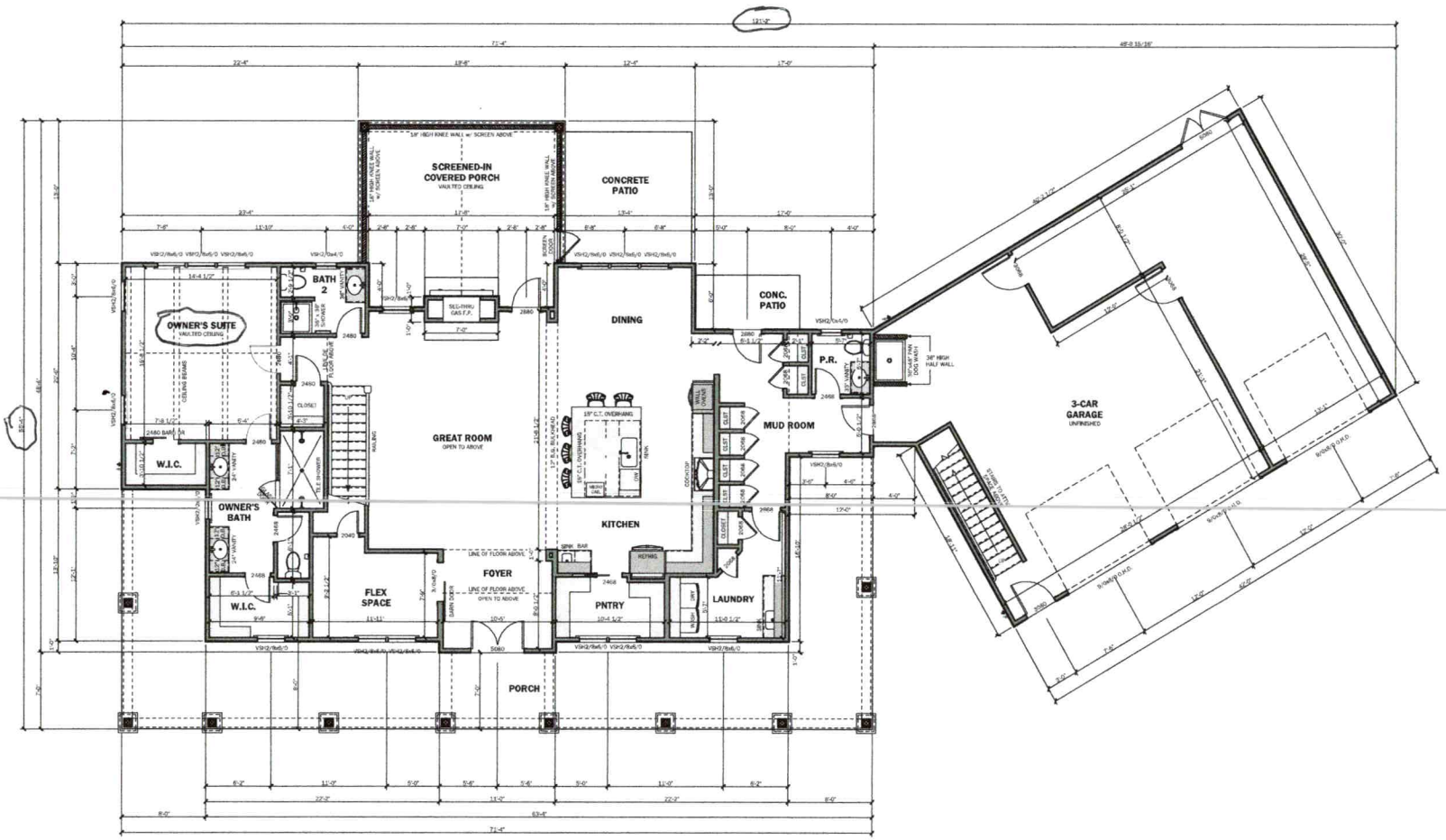
I, 4G Design Build, am the legal owner of the property located at 434 Big Indian Loop, identified as PIN(Parcel Identification Number) 4648-12-2793, located in Iredell County, North Carolina.

I do hereby authorize (print authorized agent/company name) The Oaks Group, _____, _____, _____, _____, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

1. Improvement Permit (IP)/ Authorization to Construct (AC).
2. Application for soil-site evaluation (new/repair).
3. Application/permit for water well/well abandonment.
4. Application for existing system.
5. Application for Improvement Permit (IP)/ Authorization to Construct (AC).

I agree to abide by any and all decisions and/or conditions between the agent acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division. This form must be fully executed before the individual's specified above will be recognized as the authorized agent.

Signature of Owner	12-19-19 Date
Signature of Witness	Date



FIRST FLOOR PLAN

SCALE: 1/4" = 1'-0"
WALL HEIGHT: 10'-1 1/8"
WINDOW HEADERS @ 6'-0" A.F.F.

SQUARE FOOTAGE

FIRST FLOOR:	2,042 SF
SECOND FLOOR:	1,022 SF
TOTAL:	3,064 SF
OPEN TO BELOW:	493 SF
LIN/PL STORAGE:	291 SF
GARAGE:	1,271 SF
FRONT PORCH:	865 SF
REAR PORCH:	326 SF

Acknowledgement Of
Plans Submittal ONLY!
Kayla Watson Date 12-30-19
Kathleen Saunders Date 12-30-19

4G DESIGN BUILD
488 PANTHILL ROAD
STATESVILLE, NC 28677
Ph: 1-833-4MBLD4G
www.bu4dg.com

Township/County: MOORESVILLE TWSP. IREDELL COUNTY

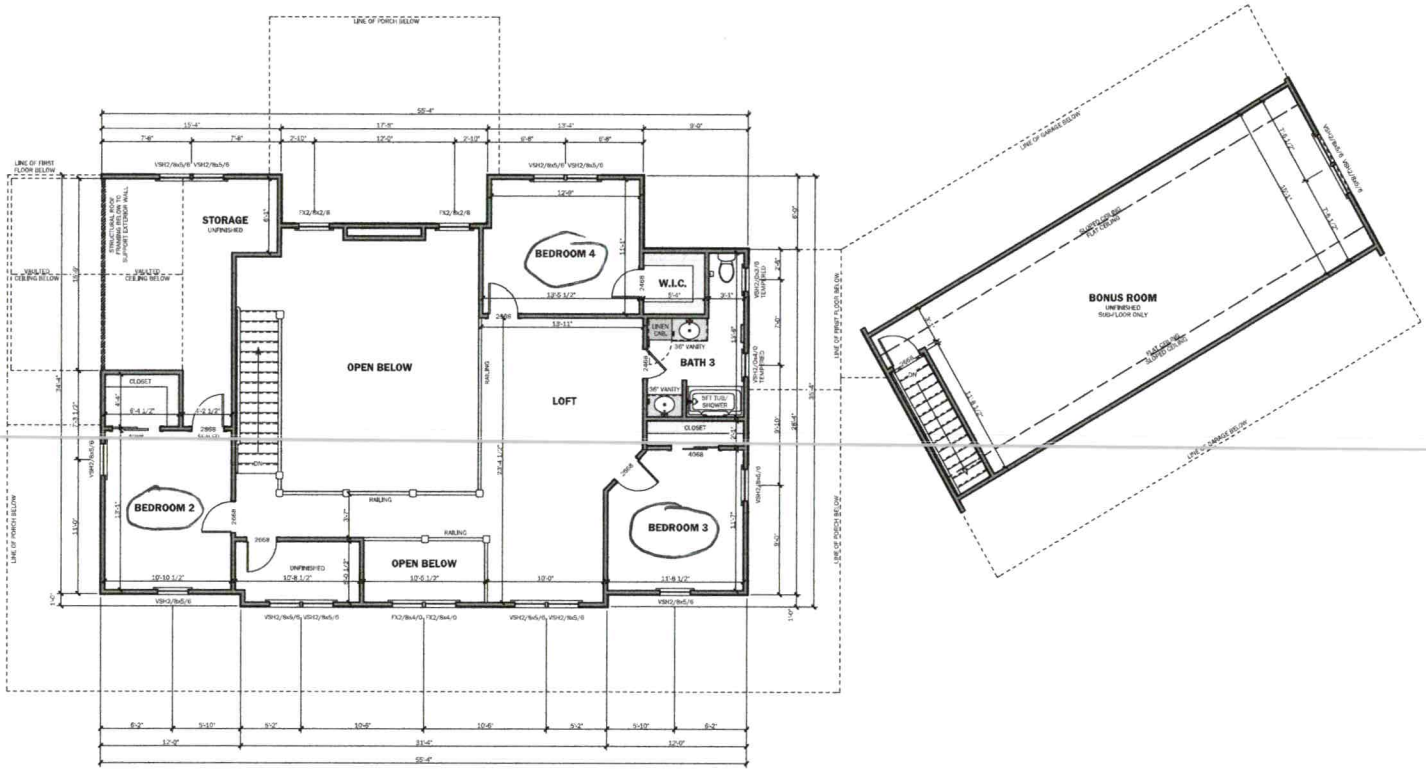
Engineer:

Stamp/Seal:

Project Name/Owner:
CUSTOM HOME
434 BIG INDIAN LOOP
MOORESVILLE, NC 28117
BEN & KELSEY GARLOCK
STREET ADDRESS
CITY, STATE ZIP
PH: 000-000-0000

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Date: 8/28/2019
Drawn By: RES
Reviewed By: —
Plan Set Scale: 30x42 sheet (D1) 1/4" = 1'-0" ; 11x17 sheet NOT TO SCALE
Project Plan Code: —
Drawing Set: NOT FOR CONSTRUCTION
Sheet Title Description: FIRST FLOOR PLAN
Sheet Number: A3.0
Master Plan Version: v1.0



SECOND FLOOR PLAN

SCALE: 1/4" = 1'-0"
WALL HEIGHT: 9'-1 1/8"
WINDOW HEADERS @ 7'-0" A.F.F.

Acknowledgement Of
Plans Submittal ONLY!
Kayla Watson Date 12-30-19
Kathleen Sauvola Date 12-30-19

4G DESIGN BUILD
488 PINEVILLE ROAD
STATESVILLE, NC 28677
PH: 1-833-4GBD4G
www.bd4g.com

Township/County
MOORESVILLE TWSP.
IREDELL COUNTY

Engineer

Stamp/Seal

Project Name/Owner
CUSTOM HOME
434 BIG INDIAN LOOP
MOORESVILLE, NC 28117
BEN & KELSEY GARLOCK
STREET ADDRESS
CITY, STATE ZIP
PH:000-000-0000

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Date
9/25/2019
Drawn By
RES
Reviewed By
—
Plan Set Scale
30x42 sheet (E1)
1/4" = 1'-0"
11x17 sheet
NOT TO SCALE
Project Plan Code
—
Drawing Set
NOT FOR CONSTRUCTION
Sheet Title Description
SECOND FLOOR PLAN
Sheet Number
A4.0
Master Plan Version
v1.0

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

APPLICATION NUMBER
303628 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4648122793.000	434 Big Indian Loop	Iredell County

Owner Information	Applicant Information
Name: GARLOCK BENJAMIN+KELSEY	Name: THE OAKS GROUP
Address:	Address: 121 HOLT LN
,	MOORESVILLE, NC 28117
Phone:	Phone: (704)578-4951

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
2	35	35	15	15	WSIV-CA Catawba/Lake Norman	NO

Remarks
SFD 434 BIG INDIAN LOOP

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.

Date: 12/20/2019

Signature of Owner/Contractor

Permit Number	303628	TOTAL FEES:	$77.25