ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 x3456 | Mooresville Office (704) 660-3625

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

PERMIT: OSWP 2024-446029

PIN # 4648-22-4034

APPLICANT/OWNER: Jason Jemmott

APPLICANT ADDRESS: 161 McInnis Rd, Mooresville NC 28117

SITE ADDRESS: 161 McInnis Rd, Mooresville 28117

PHONE: 607-348-3019 ALT. PHONE

SITE DIRECTIONS: Big Indian Lp - ⓛ McInnis - Lot on ⓛ

SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: SECTION: — LOT # — LOT AREA: 0.63 DESIGN FLOW: 360gpd

L.T.A.R.(Initial): — L.T.A.R (Repair): .3

Septic Tank	1000	(gal)	STB	7600	Date	11/24/24	☐ New System ☑ Repair ☐ Expansion	System Type: I II (III) IV V VI	☑ Residence	No. Bedrooms	3	Water Supply
Pump Tank		(gal)	PT		Date		System Description:		☐ Business	No. Persons	10	☑ Private
Pump Make			Model		Serial #		Repair System Description:	50% Reduction VPPBPS	☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	3		Linear Ft	201	Maintenance Agreement Required:	☐ YES ☑ NO	☐ Slab	☑ Crawl Space		☐ Community
Trench Width	24"	*Max. Trench Depth(Initial)	—		*Max. Trench Depth(Repair)	34"	Gravel Depth	—	☑ GRAVITY ☐ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing

* Measured on the downhill side of the trench

Effluent Standard: ☑ DSE ☐ HSE ☐ TS-I ☐ TS-II ☐ RCW ☐ NSF/ANSI 40

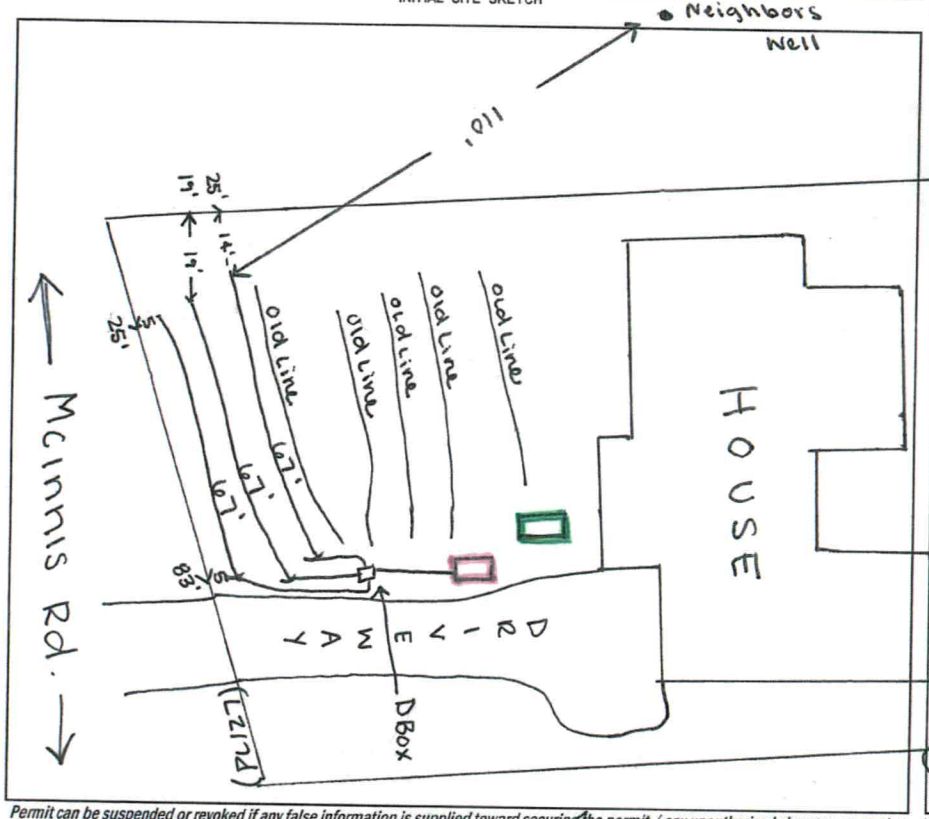
Usable Depth to LC (Initial): 48"

Usable Depth to LC (Repair): Limiting Condition

Comments / Conditions: Install lines on 6' centers. Irrigation must be removed at time of installation. All water lines must be 10' from all parts of Septic.

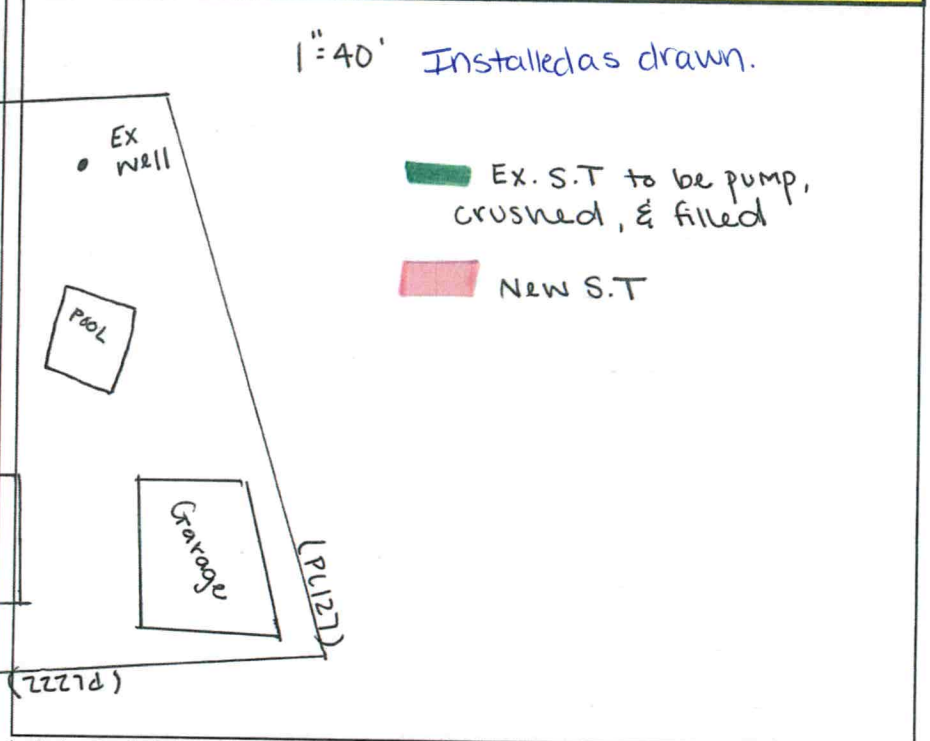
Do not pave, grade, park, drive, or bury utilities in drainfield. Pump, crush, & fill old tank.

INITIAL SITE SKETCH



AS BUILT SKETCH

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inspector to confirm your time.



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: online Date: — Installed by: Lentz

IMPROVEMENT PERMIT by: Sydney Holland Date: 2-7-24 OPERATION PERMIT by: Sarah Williams Date: 3/22/2024

AUTHORIZATION TO CONSTRUCT by: Sydney Holland Date: 2-8-24 Existing System Inspected by: Date:

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 x3456 | Mooresville Office (704) 660-3625

PERMIT : OSWP 2024-44629

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

PIN # 4648-22-4034

APPLICANT/OWNER: Jason Jemmott | APPLICANT ADDRESS: 161 McInnis Rd, Mooresville NC 28117

SITE ADDRESS: 161 McInnis Rd, Mooresville 28117 | PHONE: 607-348-3019 | ALT. PHONE —

SITE DIRECTIONS: Big Indian Lp - ⓛ McInnis - Lot on ⓛ | SAP CONTROLLED: ☐ YES ☑ NO

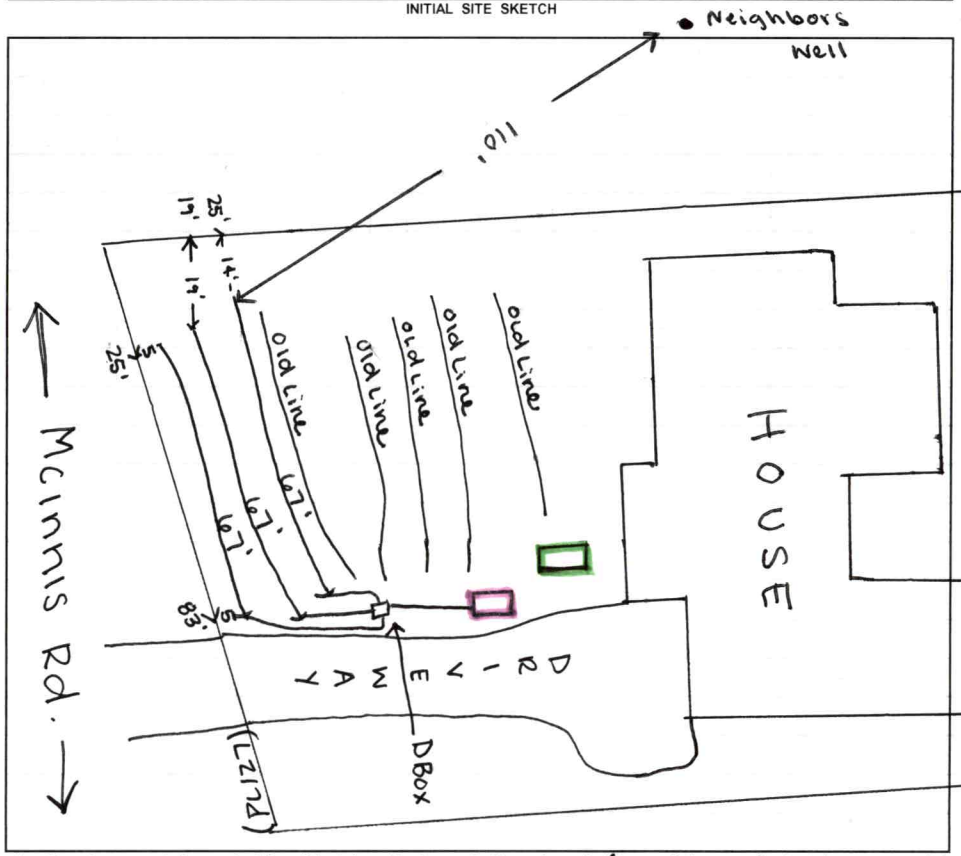
SUBDIVISION: — | SECTION: — | LOT # — | LOT AREA: 0.63 | DESIGN FLOW: 360gpd | L.T.A.R.(Initial): — | L.T.A.R (Repair): • 3

Septic Tank 1000 (gal)	STB	Date	☐ New System ☑ Repair ☐ Expansion	System Type: I II (III) IV V VI	☑ Residence	No. Bedrooms 3	Water Supply
Pump Tank (gal)	PT	Date	System Description: —		☐ Business	No. Persons 6	☑ Private
Pump Make	Model	Serial #	Repair System Description: 50% Reduction VPPBPS		☐ Other	No. Employees	☐ Public
# Nitrification Fields 1	# Lines 3	Linear Ft 201	Maintenance Agreement Required: ☐ YES ☑ NO		☐ Slab	☑ Crawl Space	☐ Community
Trench Width 24"	*Max. Trench Depth(Initial) —	*Max. Trench Depth(Repair) 34"	Gravel Depth —	☑ GRAVITY ☐ PRESSURE	☐ Basement w/plumbing	☐ Basement w/o plumbing	
* Measured on the downhill side of the trench	Effluent Standard: ☑ DSE ☐ HSE ☐ TS-I ☐ TS-II ☐ RCW ☐ NSF/ANSI 40		Usable Depth to LC (Initial): 48"		Usable Depth to LC (Repair):		Limiting Condition

Comments / Conditions: Install lines on 6' centers. Irrigation must be removed at time of installation. All water lines must be 10' from all parts of septic.

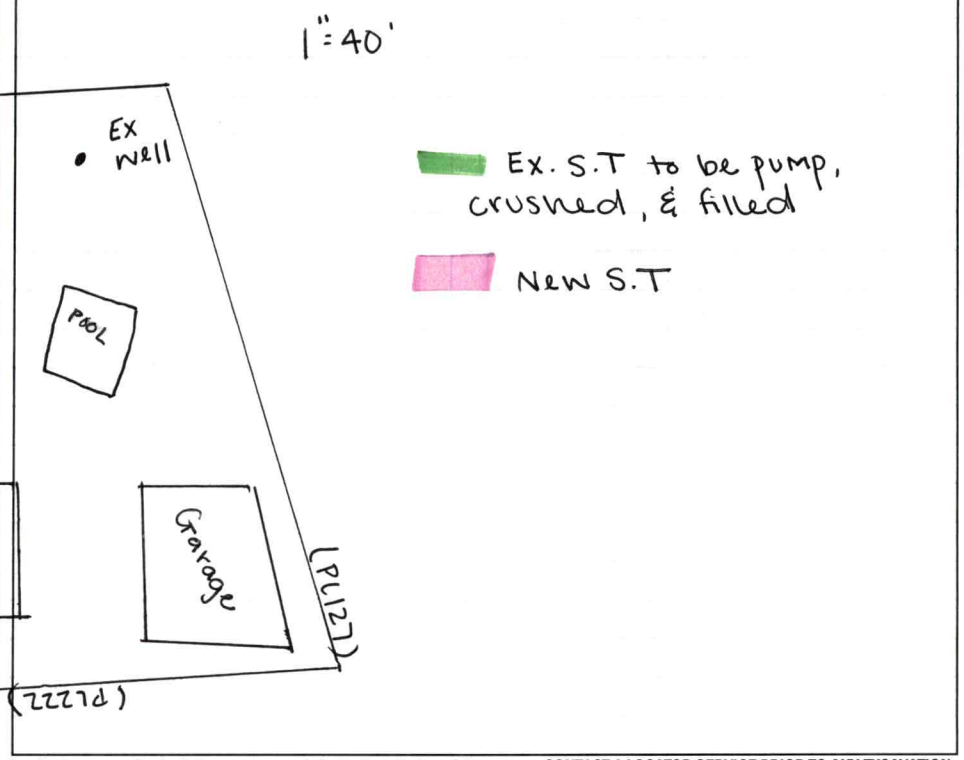
Do not pave, grade, park, drive, or bury utilities in drainfield. Pump, crush, & fill old tank.

INITIAL SITE SKETCH



AS BUILT SKETCH

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inspector to confirm your time.



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: Online | Date: — | Installed by:

IMPROVEMENT PERMIT by: Sydney Holland | Date: 2-7-24 | OPERATION PERMIT by: | Date:

AUTHORIZATION TO CONSTRUCT by: Sydney Holland | Date: 2-8-24 | Existing System Inspected by: | Date:

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 130.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 125493 PIN# 4648 22 4034. DATE 1/21/05

OWNER OR CONTRACTOR Bob + Penny Bechstein PHONE: Business _____ Home 704 872 3840

ADDRESS 3602 Rose St. Statesville NC 28677

LOCATION 150 w. TR Bluefield, TL Big Indian, T L McInnis Near End on Lt.

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 0.63 AC SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.3

Septic Tank: 1000 Gallons; STB 825 Date 11/9/05
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300'
No Lines 4 or 5 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth —

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Gravity 25% Reduction
Repair System Description: Pump Block
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms ____
☐ Business No. Employees ____
☐ Other _____

☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

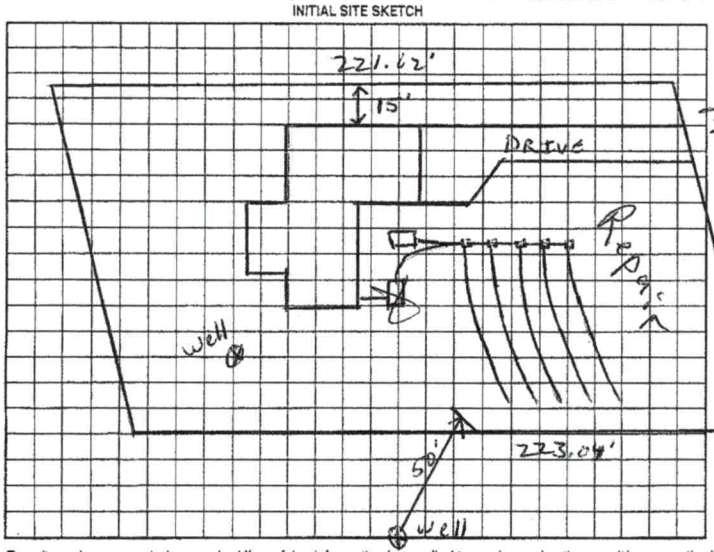
Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions:

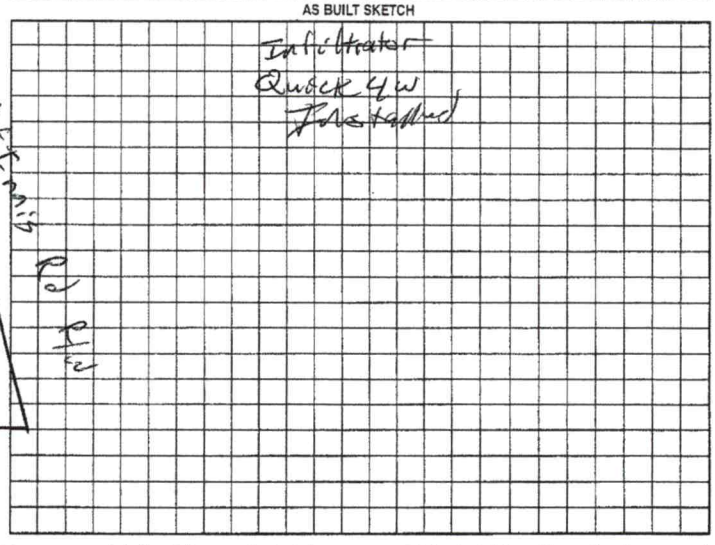
1" = 50'

Comments:/Conditions:

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. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: Lynn Fry-Hardek date 1/21/05 Installed by: Rowan Septic

Improvement Permit by: RS date 1/21/05 Operation Permit by: _____ date 12/20/05

Authorization to Construct by: RS date 1/21/05 Existing System Inspection by: _____ date _____

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK

LHD PERMIT NO. OR FILE REF: OSWP-2024-44629

OWNER REQUEST

for

BEST PROFESSIONAL JUDGMENT

for the repair of

WASTEWATER TREATMENT AND DISPERSAL SYSTEMS IN ACCORDANCE WITH 15A NCAC 18E .1306

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES
Division of Public Health

This page to be completed by owner of property or owner's legal representative

DATE: 02/07, **20** 24

WASTEWATER SYSTEM OWNER – For a place of residence list the property owner(s). For all others, list name of the business or organization and person delegated signature authority:

Print Property Owner(s): Jason and Samantha Jemmott

Business/Organization/Contact:

Mailing Address: 161 Mcinnis Rd

City: Mooresville State: NC Zip Code: 28117 County: Iredell

Telephone Number(s): 607-348-3019

Email Address: Jemmottjason@gmail.com

PHYSICAL LOCATION OF WASTEWATER SYSTEM

Parcel Identification Number (PIN): 4648224034

Physical Address (if different than mailing address): 161 Mcinnis Rd

City: Mooresville State: NC Zip Code: 28117

OWNER ATTESTATION

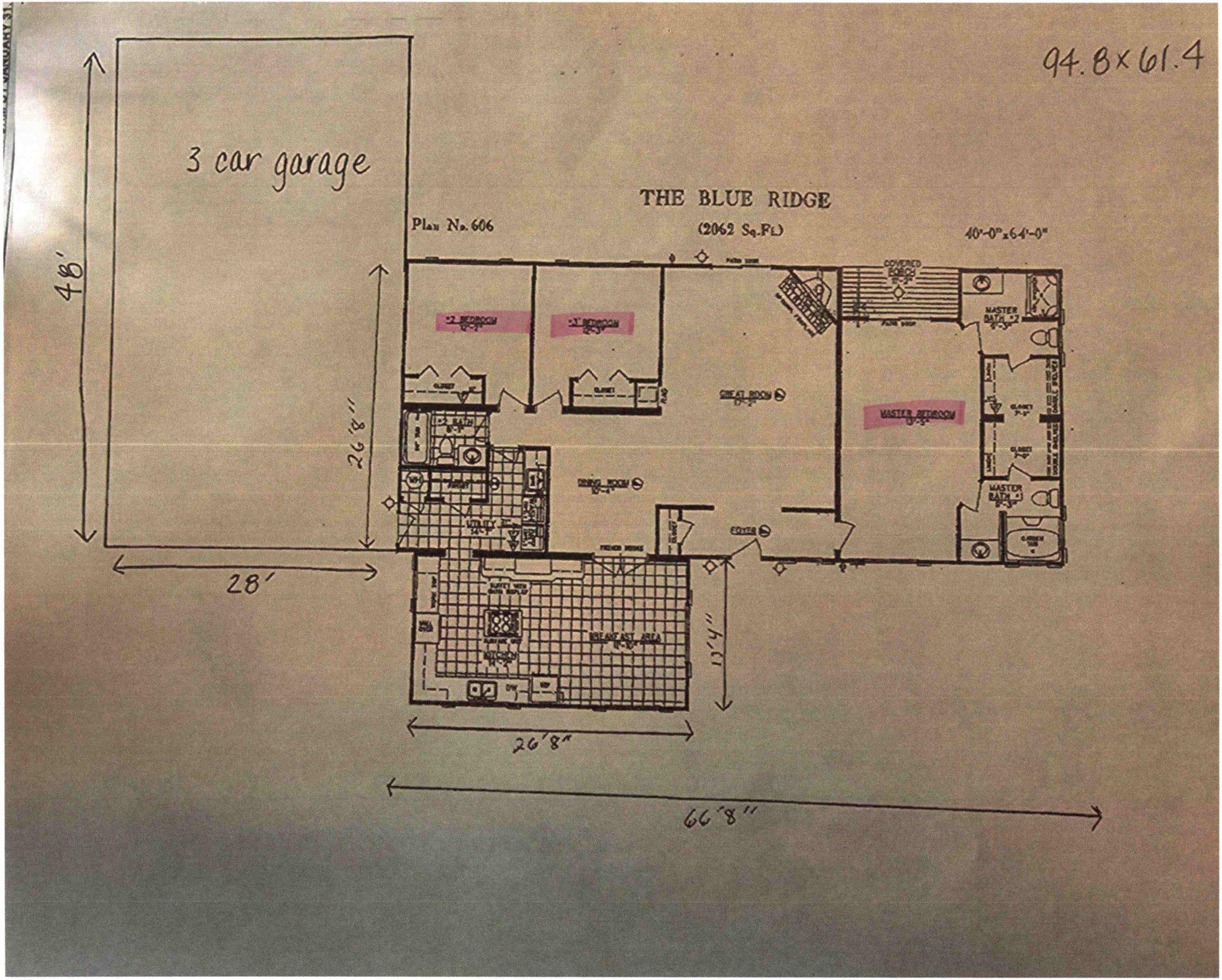
I, X Jason Jemmott, hereby request the use of best professional judgment in accordance
Owner's Printed Name

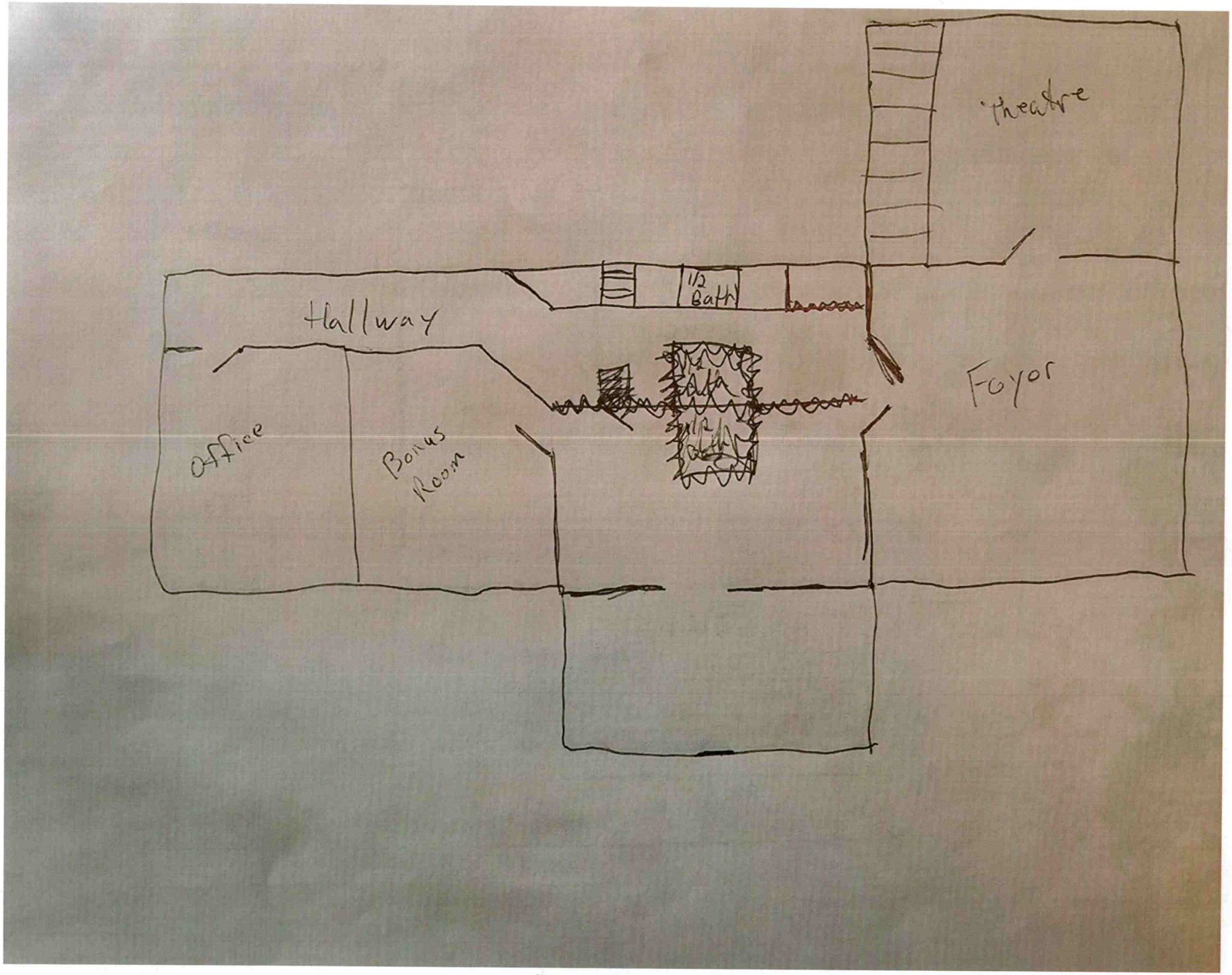
with 15A NCAC 18E .1306. I understand that the use of best professional judgment may be used to develop a repair that should enable my malfunctioning subsurface wastewater system to comply with 15A NCAC 18E .1303(a)(1) and give the system a reasonable expectation to function correctly. I agree to comply with all terms and conditions set forth on the associated repair permit, including any operation and maintenance requirements. By signing this document, I understand that I shall be liable for any damages associated with the use of best professional judgment to repair this malfunctioning subsurface wastewater system.

Owner's Signature: Jason Jemmott Date: 2/7/24

This written agreement shall be attached to the Construction Authorization, Operation Permit, Notice of Intent to Construct, or Authorization to Operate, as applicable.

94.8 x 61.4


3 car garage
48'
28'
26'8"
THE BLUE RIDGE
Plan No. 606
(2062 Sq.Ft.)
40'-0" x 64'-0"
COVERED PORCH
MASTER BATH #2
2 BEDROOM
1 BEDROOM
CLOSET
GREAT ROOM
MASTER BEDROOM
CLOSET
MASTER BATH #1
CLOSET
DINING ROOM
LINEN
CLOSET
FOYER
BREAKFAST AREA
13'4"
26'8"
66'8"


theatre
1/2 Bath
Hallway
Foyor
Office
Bonus Room

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

Sheet 1 of 1
PROPERTY ID #: 4648224038
COUNTY: Iredell

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

OWNER: Jason Jemmott
ADDRESS: 161 McInnes
PROPOSED FACILITY: 3BR PROPOSED DESIGN FLOW (.1949): 360gpd
LOCATION OF SITE: 161 McInnes Mooresville 28117
WATER SUPPLY: ☑ Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring ☑ Pit ☐ Cut

APPLICATION DATE 1-11-24
DATE EVALUATED: 1-17-24
PROPERTY SIZE: 0.63
PROPERTY RECORDED: yes

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	LS 6%	0-20	C / ABK SBK	SS-SP-FR-SEXP	—	48"	-	—	P.S .3
		20-48	CL / SBK	SS-SP-FR-SEXP	Micainc. common Mg. inc thru out				
2									
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	—	200'
System Type(s)	—	50%
Site LTAR	—	.3

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

COMMENTS: Irrigation must be removed at time of irrigation
water line must be 10' from all systems.

Updated February 2014

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope) CV (Convex Slope) D (Drainage Way) DS (Debris Slump) FP (Flood Plain) FS (Foot Slope) H (Head Slope) L (Linear Slope) N (Nose Slope) R (Ridge) S (Shoulder Slope) T (Terrace)	I	S (Sand) LS (Loamy Sand)	1.2 - 0.8	0.6 - 0.4	SEXP (Slightly Expansive) EXP (Expansive)	G (Single Grain) M (Massive) CR (Crumb) GR (Granular) SBK (Subangular Blocky) ABK (Angular Blocky) PL (Platy) PR (Prismatic)
	II	SL (Sandy Loam) L (Loam)	0.8 - 0.6	0.4 - 0.3		
	III	Si (Silt) SiCL (Silty Clay Loam) CL (Clay Loam) SCL (Sandy Clay Loam) SiL (Silt Loam)	0.6 - 0.3	0.3 - 0.15		
	IV	SC (Sandy Clay) SiC (Silty Clay) C (Clay)	0.4 - 0.1	0.2 - 0.05		
		O (Organic)	None	None		

MOIST	WET
VFR (Very Friable)	NS (Non-sticky)
FR (Friable)	SS (Slightly Sticky)
FI (Firm)	S (Sticky)
VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
EFI (Extremely Firm)	NP (Non-plastic)
	SP (Slightly Plastic)
	P (Plastic)
	VP (Very Plastic)

*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

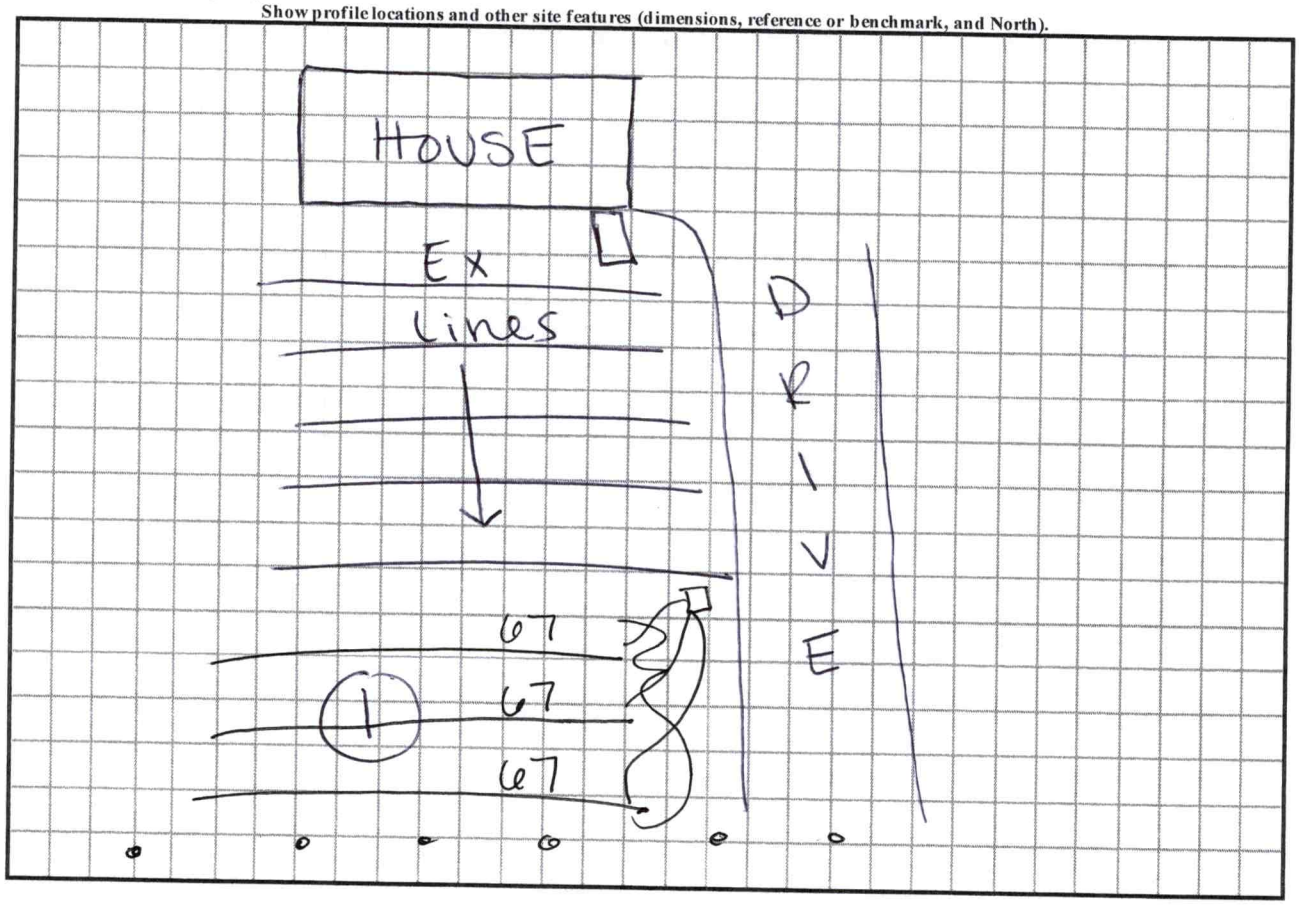
NOTES

HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
CLASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.

Long-term Acceptance Rate (LTAR): gal/day/ft^2

Show profile locations and other site features (dimensions, reference or benchmark, and North).



PERMIT SNAPSHOT REPORT OSWP-2024-44629 FOR IREDELL COUNTY

Permit Type	Environmental Health OSWP	**Project:**		**App Date:**	01/11/2024
Work Class:	EH Septic Permit	**District:**	Iredell County	**Exp Date:**	NOT AVAILABLE
Status:	PRIORITY PERMIT	**Square Feet:**	0.00	**Completed:**	NOT COMPLETED
Valuation:	$0.00	**Assigned To:**	Holland, Sydney	**Approval Expire Date:**	

Description: Leech field repair/improve. Area in front yard, grey water surfacing.

Parcel: 4648224034.000 Main	**Address:** 161 Mcinnis Rd Mooresville, NC 28117 Main	**Zone:** RA(Residential Agricultural District)

Property Owner	Applicant/Authorized Agent
Jason Jemmott	Jason Jemmott
161 McInnis Road	161 McInnis Road
Mooresville, NC 28117	Mooresville, NC 28117
Mobile: (607) 348-3019	Mobile: (607) 348-3019

Permit Custom Fields

How is your site plan being submitted	Survey Plat	Septic Application/Permit Type	Repair	Does the site contain any jurisdictional wetlands	No
Non-domestic Sewage Generated	No	Other Public Agency	No	All proposed structure dimensions	Existing structure.
Maximum Number of Bedrooms	6	If other Addition/Structure, please explain		Number of Occupants	2
Foundation Type	Crawl Space Foundation	Water Supply	Existing Well	Desired Septic System Type	Conventional (most common)
Additional Unique Setbacks Apply	No				

Attachment File Name	Added On	Added By	Attachment Group	Notes
Signature_Jason_Jemmott_1/11/2024.jpg	01/11/2024 12:34	Jemmott, Jason		Uploaded via CSS
20240111_115810_v1.jpg	01/11/2024 12:41	Nebel, Barbara	Available Online	Authorize to Act as Agent
Gmail - 161 mcinnis rd_v1.PDF	01/11/2024 12:41	Nebel, Barbara	Available Online	Site Plan

Workflow Step / Action Name	Action Type	Start Date	End Date
Application Completeness Check v.1		01/11/2024 12:39	01/11/2024 12:41
Confirm application complete v.1	Generic Action		01/11/2024 12:41
Environment Health Inspections v.1			
Operation Permit Inspection v.1	Inspection		
OSWP Alarm Checked v.1	Inspection		
OSWP Drain Lines Checked v.1	Inspection		
OSWP Electrical Checked v.1	Inspection		
OSWP Floats Checked v.1	Inspection		
OSWP Maintenance Contract v.1	Inspection		
OSWP Pressure Head Checked v.1	Inspection		
OSWP Pressure Manifold Checked v.1	Inspection		
OSWP Tanks Checked v.1	Inspection		
~~**Zoning Review v.1**~~			01/11/2024 12:39
~~Floodplain Admin Overview v.1~~	Task		01/11/2024 12:39
~~Issue Invoice v.1~~	Generic Action		01/11/2024 12:39
~~Fees Paid v.1~~	Generic Action		01/11/2024 12:39