IREDELL COUNTY HEALTH DEPARTMENT

KW Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 223850

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

PIN # 4654-75-4947 3697

APPLICANT/OWNER: DAVIDSON DOWNS LLC. APPLICANT ADDRESS: 4542 IVY RUN LN. DENVER, NC 28037

SITE ADDRESS: 252 SINK FARM RD. MOORESVILLE, NC 28115 PHONE: ALT. PHONE

SITE DIRECTIONS: 115 S, TL PRESBYTERIAN RD, TR SINK FARM, ON R SAP CONTROLLED: ☒ YES ☐ NO

SUBDIVISION: DAVIDSON DOWNS SECTION: 3 LOT # 140 LOT AREA: 1 AC DESIGN FLOW: 480 L.T.A.R.: .3

Septic Tank	1000 (gal)	STB	825	Date	10-18-17	☒ New System	☐ Repair	☐ Expansion	System Type: I II ☒ III IV V VI
Pump Tank	1000 (gal)	PT	302	Date	8-30-17	System Description:	PM-25% REDUCTION		
Pump Make	Zoeller	Model	N152	Serial #		Repair System Description:	50% REDUCTION		
# Nitrification Fields	1	# Lines	4	Linear Ft	400'	Maintenance Agreement Required:	☐ YES	☒ NO	
Trench Width	36"	Trench Bottom Depth ~~(Low side)~~	30" HIGH SIDE	Gravel Depth	—		☐ GRAVITY	☒ PRESSURE	

☒ Residence	No. Bedrooms	4	Water Supply
☐ Business	No. Persons	8	☐ Private
☐ Other	No. Employees		☐ Public
☐ Slab	☐ Crawl Space		☒ Community
☒ Basement w/plumbing			☐ Basement w/o plumbing

Comments / Conditions: RECOMMEND PUMPING SEPTIC TANK EVERY 3-5 YEARS.

2/15/18 Checked tanks, lines, supply lines & 2ft pressure head.

INITIAL SITE SKETCH

SEE PLAN FROM MICHAEL ATHANAS & ASSOCIATES

AS-BUILT SKETCH

Used Quick 4

	Date	Initials
Drain Lines Checked	2/15/18	MD
Tanks Checked	2/15/18	MD
Pressure Manifold or Valve Box Checked	2/15/18	MD
Pressure Head Set	2/15/18	MD
Electrical Checked	3-15-18	KW
Floats Set	2/15/18	MD
Alarm Checked	3-15-18	KW
Maintenance Contract Y ~~N~~	Not Required	
Comments:		

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: Date: 12-20-17 Installed by: Rowan Septic

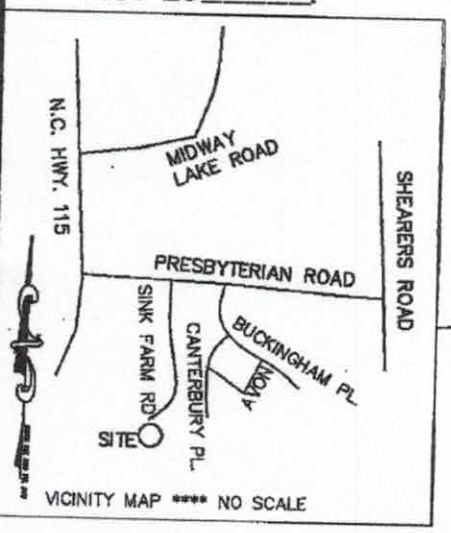
IMPROVEMENT PERMIT by: APPROVED Date: DEC 11 2017 OPERATION PERMIT by: Date: 3-15-18

AUTHORIZATION TO CONSTRUCT by: APPROVED Date: DEC 11 2017 Existing System Inspected by: Date:

plat book 66, page 94, that the ratio of precision is 1':10,000, that this map was prepared in accordance with the General Statutes of North Carolina Chapter 89C. my hand and seal on the 7, day of SEPTEMBER, A.D. 20 17.

WILLIAM M. ALLEN, PLS

NORTH CAROLINA PROFESSIONAL SEAL L-3499 LAND SURVEYOR WILLIAM M. ALLEN



RAY DEVELOPMENT LLC
1893\206

S29°40'29"W
125.37

EIP

35' REAR SETBACK

APPROVED DEC 11 2017

PLAT

LOT 140
1.00 AC.

15' SIDE SETBACK

15' SIDE SETBACK

(BASE BEARING)
S55°54'51"E

S55°54'51"E

FOUNDATION

Deck

Garage

29.1

38.9

353.21

343.57

DRIVE

Additional Repairs

LOT 139
RAY DEVELOPMENT LLC
1893\206

LOT 141
JAROD SUTPHIN
2493\337

Scale
1" = 50'

NOTES

1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENTS AND/OR RIGHTS OF WAY OF RECORD.
2) ACREAGE COMPUTED BY THE COORDINATE METHOD.
3) UNDERGROUND POWER
4) NO GRID MONUMENT FOUND WITHIN 2000 FEET.

LEGEND

= P.P. = POWER POLE
= POWER TRANS.
E.I.P. = EXISTING IRON FOUND
I.P.S. = #4 REBAR SET
R/W = RIGHT-OF-WAY

35' FRONT SETBACK

N34°05'09"E
125.00

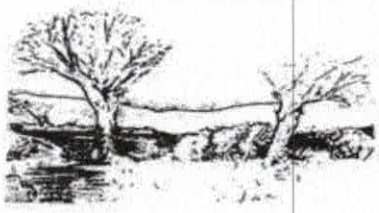
EIP

R\W

SINK FARM RD.
(50' PUBLIC R\W)

R\W

0' 25' 50' 100'



APPROVED DEC 11 2017

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

Reference: Data Sheet for Lot 140, Davidson Downs; Sink Farm Road; Iredell Co., NC
House Footprint: 70'x70'
Building Setback: 35' Front, 15' Side, 50' Rear
Water Source: Public Well
Number of Bedrooms: 4/480 GPD
Proposed LTAR: 0.3 gpd/ft2
Suggested System Type: 25% Reduction
Repair System Type: LP PPBPS
Distribution: Pressure Manifold
Flow per Tap: 5.48 GPM ½" SCH 80
Tap Size and Material: ½" SCH 80
System Flow: 21.92 GPM
Dosing Volume: 175 Gallons
Pump Run Time: 7.98 minutes
Elevation Head: 8.3'
Friction Head: 0.5'
Pressure Head: 2'
Total Dynamic Head: 10.8'
Supply Line Length: 35' of 2" PVC
Septic/Pump Tank Size: 1000/1000
Proposed Trench Bottom: 30"

Line	Design Length	Actual Length	Repair Length	Elevation
Blue 1		45'	45'	3.8'
Yellow 2		64'	64'	4.2'
White 3		85'	85'	4.7'
Pink 4	**100'**	**110'**		**5.7'**
Yellow 5	**100'**	**124'**		**6.4'**
Blue 6	**100'**	**148'**		**7.2'**
White 7	**100'**	**121'**	16'	**8.2'**

Initial System: 400' **Repair System:** 267+' LP PPBPS
Benchmark: 3' Front Right Property Iron
Pump Tank: 9.0' **House Corner:** 14' **Pressure Manifold**: 5.7'
Comments:
The tanks were adjusted to the front of the house. The basement plumbing will be lifted to the main level and gravity fall to the tanks. The tanks cannot be more than 36" below the ground surface. Some of the former repair area is used for the new tank area. Additional repair is located below W7.

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Paid $75.00 12-5-17

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)**

Applicant Name: Ray Development LLC **Address:** Denver, NC **Zip:** _____
Applicant Email: _____ **Phone:** 980-297-2787 Chris **Alt. Phone:** _____
Owner Name: Same **Address:** _____ **Zip:** _____
Owner Email: _____ **Phone:** _____ **Alt. Phone:** _____

Property Information:

Street Address: 252 Sink Farm Rd
Subdivision Name: Davidson Downs **Section/Phase:** _____ **Lot Number:** 140
Driving Directions: _____

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

(✓) 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: _____
( ) 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
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

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: Accepted

Please answer the following to the best of your ability:
( ) Yes (✓) No **Does the site contain any jurisdictional wetlands?**
( ) Yes (✓) No **Is any non-domestic sewage (i.e. industrial) 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.

Signature: _____ 12/5/2017
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, Chris Mozely, am the legal owner(s) of the property located at 252 Sink Farm Rd Davidson Downs Lot 140, identified as PIN (Parcel Identification Number) 4654753697, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Michael Athans & Assoc., 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)	12-5-17 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