05-22-13
PD $95.00 @ Stool



MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
1999 CANDLEWICK DRIVE
FORT MILL, S.C. 29715
803-802-4403 (office)
803-802-4402 (fax)

Reference: Data Sheet for Davidson Downes, Lot 3
House Footprint: See Plan
Building Setbacks: 35' front/back, 15' sides
Water Source: Community Well
Number of Bedrooms: 4/480 GPD
Pre-determined LTAR: 0.25 GPD/FT2 (ICHD)
Proposed System Type: 25% Reduction
Proposed Repair System Type: PPBPS
Distribution: Pressure Manifold
Flow per Tap: 1 @ 5.48, 2 @ 7.11
Tap Size & Material: 1 @ ½" SCH 80, 2 @ ½" SCH 40
System Flow: 19.7 GPM
Dosing Volume: 210 gallons
Pump Run Time: 10.7 minutes
Elevation Head: 14.3'
Friction Head: 4.0'
Pressure Head: 2'
Total Dynamic Head: 20.3'
Supply Line Length: 140'
Septic/Pump Tank Size: 1000 gallons
Proposed Trench Bottom: 18" (initial), 36" (repair)

Line	Design Length	Actual Length	Elevation
White 1		71'	1.7'
Blue 2		82'	2.6'
Pink 3		41'	3.7'
Orange 4		51'	4.6'
Blue 5		39'	5.6'
White 6		39'	6.6'
Pink 7	**55'**	**55'**	**7.9'**
Blue 8	**85'**	**85'**	**9.0'**
White 9	**85'**	**92'**	**10.6'**
Orange 10	**85'**	**92'**	**12.2'**

Line	Design Length	Actual Length	Elevation
Blue 11	**85'**	**94'**	**13.6'**
White 12	**85'**	**95'**	**14.2'**

Initial System: 480' **Repair System:** 323'
Pump Tank Elev.: 17.2' **House Corner Elev.:** 17.0'
Benchmark Elev.: 1.0' (Back left property corner)

Comments:
There is a current permit issued on this property. It was permitted with a private well, but there is community water available. Iredell County Environmental Health determined the site LTAR to be 0.25 GPD/FT2 and we made 5 soil observations to verify. We have changed the bedrooms from 3 to 4. Backfill for positive drainage, do not cut house pad. The pressure manifold is designed for 3 taps. The SCH 80 tap will feed Pink 7 and Blue 8. One SCH 40 tap will feed White 9 and Orange 10, and the other will feed Blue 11 and White 12. The supply line will come into the uppermost of the pair of lines and will serial feed to the lower line with a drop box or end cap (if using Infiltrator).

DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet ____ *of* ____
PROPERTY ID #: _____
COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Davidson Downes LLC _____ APPLICATION DATE _____
ADDRESS: _____ DATE EVALUATED: _____
PROPOSED FACILITY: _4 bedrooms_____ PROPOSED DESIGN FLOW (.1949): _480 GPD_____ PROPERTY SIZE: _____
LOCATION OF SITE: __Davidson downes lot 3_____ PROPERTY RECORDED: _____
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)		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	
1	LS 3%	0-10	Br CL WSBK	FR SS SP	Few Mn	36"			PS 0.25
		10-32	R C SBK	FR SS SP					
		32-36	YR C WSBK	FR SS SP	YBs				
					Chr 2 @ 36"				
2	LS 5%	0-4	Br SCL WSBK	FR SS SP	Few YBS	48"			PS 0.25
		4-34	R C SBK	FR SS SP					
		34-48	R C SBK	FR SS SP			Inc SAP		
3	LS 5%	0-4	Br SCL WSBK	FR SS SP		48"			PS 0.3
		4-48	R C SBK	FR SS SP			Few Inc SAP		
4	LS 5%	0-4	Br SCL WSBK	FR SS SP		48"			PS 0.3
		4-38	R C SBK	FR SS SP					
		38-48	R CL WSBK	FR SS SP			Few Inc SAP		

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	1440 FT2	640 FT2
System Type(s)	25% Reduction	PPBPS
Site LTAR	0.25	0.25

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____

EVALUATED BY: ___M A & Assoc._____
OTHER(S) PRESENT: _____

COMMENTS: _____

SOIL/SITE EVALUATION

(Continuation Sheet)

Sheet ____ of ____

DEPARTMENT OF ENVIRONMENT
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

PROPERTY ID #: ____________
DATE OF EVALUATION: ____________
COUNTY: ____________

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	
5	LS 7%	0-6	Br SCL WSBK	FR SS SP	Few YBs	48"	Few Inc SAP		PS 0.25
		6-48	R C SBK	FR SS SP					

COMMENTS: ____

12-7257

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

FAST TRACK

Application for IMPROVEMENT PERMIT , AUTHORIZATION TO CONSTRUCT, or EXISTING SYSTEM INSPECTION

(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)

Intermediate Request

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

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 #
DAVIDSON DOWNES INC	4643 MARINA LN, DENVER NC 28037	980-297 2787	
Owner Name	Mailing Address	Home Phone #	Alternate Phone #
SAME			

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
121 BUCKINGHAM PLACE RD	DAVIDSON DOWNES	LOT #3

Driving Directions: 115 SOUTH, LEFT ON PRESBYTERIAN, RT ON BUCKINGHAM, 3RD LOT ON LEFT

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

- (X) New, Single Family Residence — Maximum Number of Bedrooms 4 — (✓) Crawl Space Foundation?
- ( ) New, Multi-Family Residence — Maximum Number of Occupants 5 — ( ) Concrete Slab Foundation?
- ( ) Expansion of Existing Septic System — If Expansion, Current Number of Bedrooms ___ — ( ) Basement w/Plumbing?
- ( ) Repair To Failing Septic System due to ___ — ( ) Basement w/out Plumbing?
- ( ) Other ___

IF Non-Residential Site Development: Type of Business ___
Square Footage of Building ___
Maximum Number of Employees ___
Maximum Number of Seats ___

6. Proposed Water Supply:

( ) New Well ( ) Existing Well (X) Community Well ( ) City Water ( ) Other Public Water

7. Desired Septic System Type: *(You may rank in order of preference, if any)* ( ) Existing system--installed in ___ (YEAR)

( ) Alternative (X) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other 25% ( ) No Preference

8. 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. 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: ___ 5-22-13
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

$ PAID # 195.00 + 77.25 = 272.25
5-22-13 ad

Iredell County
Planning & Enforcement
349 N. Center St. PO Box 788
Statesville, NC 28687
704-878-3113

FILE COPY

Zoning Permit

Permit Number: 127256ZO

Printed: 5/22/2013

Master #: 127256

Associated Permits:

127256ZO	Zoning
127256GR	Grading
127256BU	Building
127256SA	Saw Service
127256FP	Fireplace

Applicant

Name: DAVIDSON DOWNES INC
Address: 4643 MARINER LANE
DENVER, NC 28037
Phone: 980-297-2787

Parcel

Parcel Number: 4654881220.000
Address: 121 BUCKINGHAM PLACE RD
Mooresville , NC 28115
Subdivision: Davidson Downes
Zoning: RA
Township: 0300
Area: 0.504
Lot(s): 3
Directions to Parcel: Hwy 115, left Presbyterian, right Buckingham Place Rd. property on left

Owners

Name: DAVIDSON DOWNES INC
Address: 4643 MARINER LANE
DENVER, NC 28037
Phone: 980-297-2787

Contractors

Contractor Type: Building
Name: Owner
Address: