6012

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Paid $250.00
#207903

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

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

Applicant Name: Haus Builders Inc **Address:** PO Box 3983 Mooresville 28117 **Phone:** 704.622.5573

Owner Name: Brian Scott **Address:** 128 Tradition Ln Mooresville 28115 **Phone:** 208-284-9921

Property Information:

Street Address: 128 Tradition Ln Mooresville NC 28115

Subdivision Name: The Norris Place **Section/Phase:** 1 **Lot Number:** 4

Driving Directions: Faith Rd (R) Mionah Ln (R) Tradition Ln
Gate Code: 6012

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

( ) New Single Family Residence
( ) New Multi-Family Residence
(X) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: _____
Maximum Number of Occupants: _____
( ) Swimming Pool
( ) Other Addition/Structure: _____

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

Non-Residential Site Development:
Type of Business: RES
Square Footage of Building: 1200
Maximum Number of Employee: —
Maximum Number of Seats/Beds/Other: —

Water Supply:

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

Desired Septic System Type: *(you may rank in order of preference)* **Year existing system installed:** 2005
( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional (X) Other: EXISTING

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?

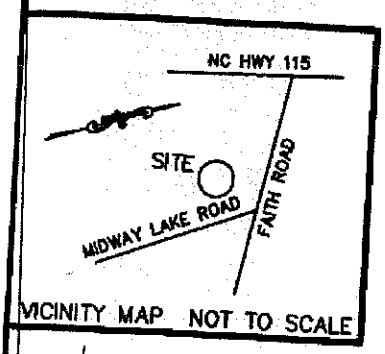
I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible 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: _____ 1/15/15
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

DAS DON ALLEN & ASSOCIATES, P. A.
"Since 1971"
Commercial * Residential * Mortgage Surveys * Multi-Family
Construction Staking * Subdivision Design * Topographical
111-D Raceway Drive * Mooresville * NC * 28117
(704) 664-7029 (704) 664-8041 Fax

I, certify that this map was drawn under my supervision from an actual survey made under my supervision recorded in deed book 1674, page 1955, and/or plat book 42, page 81, 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 14, day of JANUARY, A.D. 20 2014.

WILLIAM M. ALLEN, PLS



TIMOTHY LAWING
1325\24

THOMAS WILLIG
1589\1810

DOUGLAS GRAHAM
1747\1668

E.I.P.
N 17°12'59" E CM 328.60' (TOTAL)
158.87'
169.73'
E.I.P.
N 17°13'06" E
365.52'
E.I.P.
L1
CM

PROPOSED GARAGE
35' REAR SETBACK
PORTION OF LOT 5 = 0.617 AC.
OLD PROPERTY LINE
(TRACT II)
(TRACT 1)
LOT 4
2.990 AC. TOTAL
GARAGE
POOL
2 STORY BRICK METAL RF
20' DRAINAGE EASEMENT NEW LOCATION
S 45°46'56" W
707.23'
15' SIDE SETBACK
S 61°17'16" E
323.04'
15' SIDE SETBACK
35' FRONT SETBACK
C1
C2
TRADITION PLACE (PRIVATE)
LOT 5
GEORGE MOSER
1179\1786
LOT 3
2118\2081

LINE TABLE		
LINE	BEARING	LENGTH
L1	N 17°07'39" E	38.04'

CURVE TABLE				
CURVE	RADIUS	LENGTH	BEARING	CHORD
C1	50.00'	39.10'	S 61°02'51" E	38.11'
C2	50.00'	54.02'	S 07°41'53" E	51.43'

IREDELL COUNTY HEALTH DEPARTMENT

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

STATESVILLE 704-878-6305 MOORESVILLE 704-664-6281

PERMIT# 127900 PIN# 4655356157 4655-34-3904 George

OWNER OR CONTRACTOR Moser Brothers Inc.

ADDRESS 119 Barber Loop Mooresville, NC 28117 PHONE: Business 634-9703 Home 663-4030 DATE 8-16

LOCATION Highway 115 South, TL Faith, TR Midway Lake Rd TR Tradition Ln at end on right

SUBDIVISION The Homeplace BLOCK / SECTION ____ LOT 4 LOT AREA 2.3 Acres SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1007 Date 2-3-06
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 1200' Linear Feet 400'
No Lines 4@100' Trench Width 36" Max Trench Bottom Depth 36"

☒ New System ☐ Repair System Type: [illegible]
System Description: Gravity 25% Reduction
Repair System Description: Same
Maintenance Agreement Required: ☐ Yes ☒ No
Gravel Depth N/A ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

☒ House/Mod Home ☐ Mobile Home ☐ Business ☐ Other
No. Bedrooms 4 No. Bathrooms 4 No. Employees ____

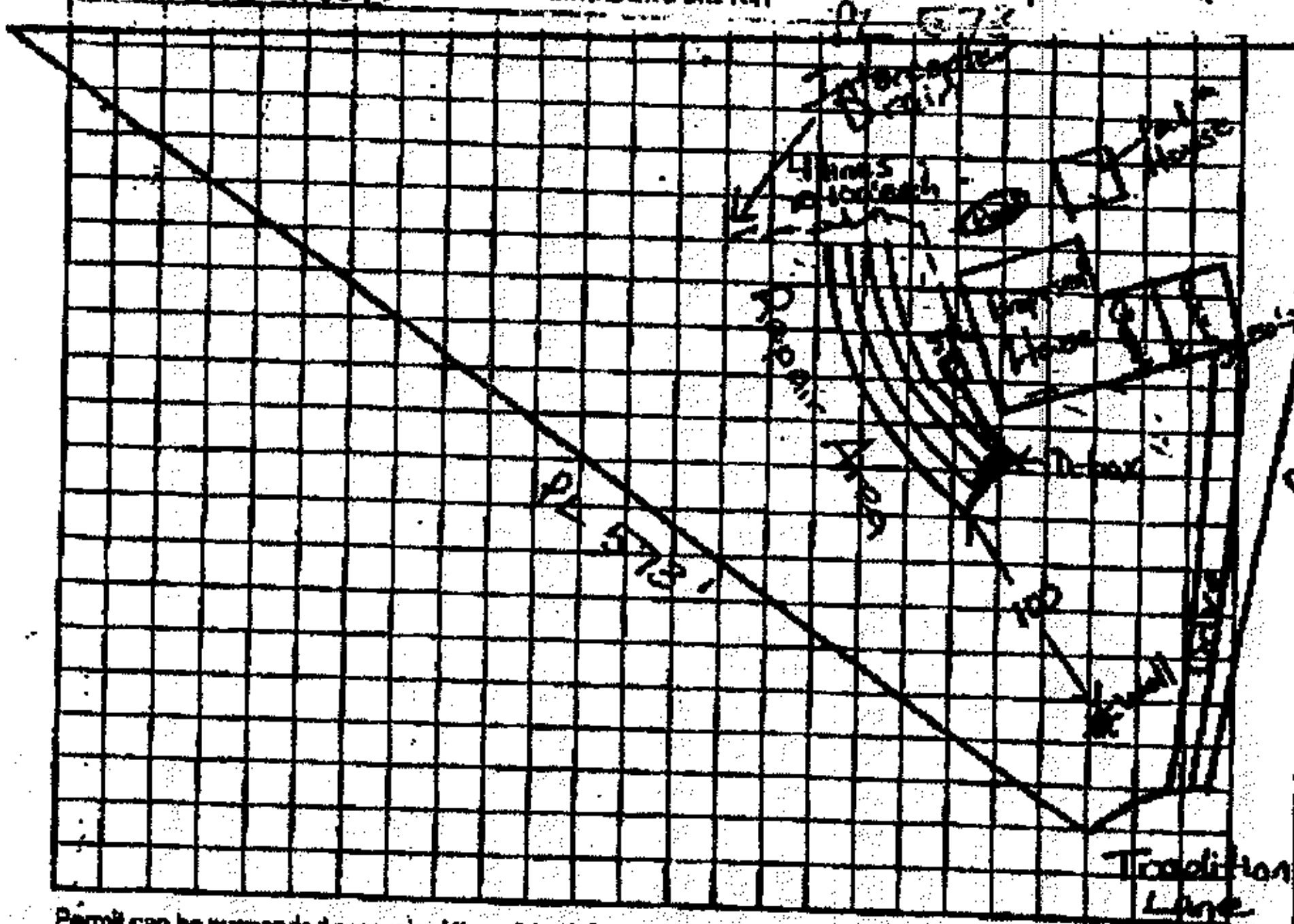
Water Supply: ☒ Individual ☐ Public ☐ Community

Comments/Conditions: Okay to use Distribution box or Drop boxes

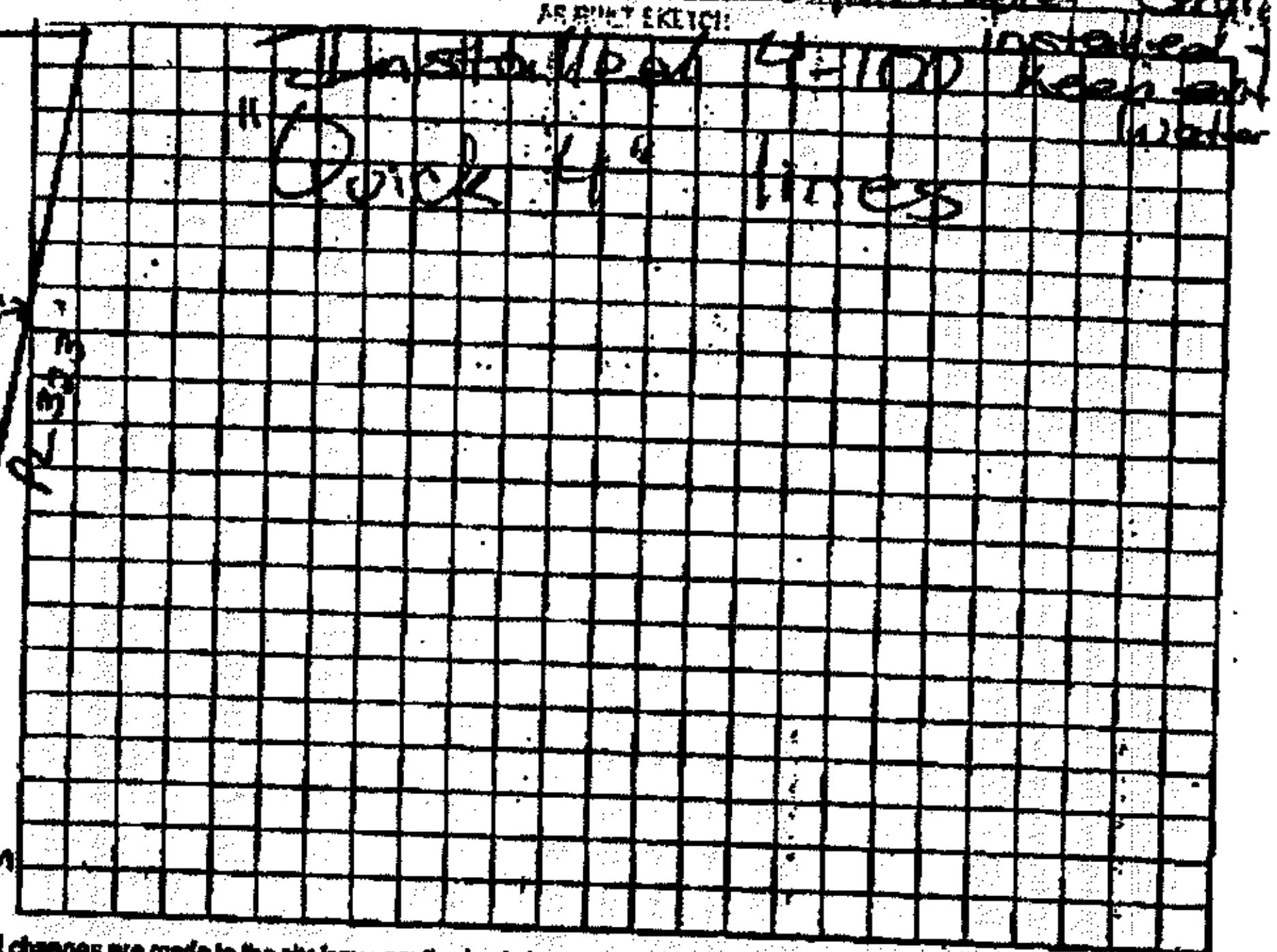
Comments/Conditions: *Keep pool at least 15' from Septic System. Some low chroma mottles found w/ [illegible] thru trenches therefore interceptor [illegible]

Scale 1:100

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: Alik Moser date 8/16/05 Installed by: A&S Grading

Improvement Permit by: [signature] RS date 8/16/05 Operation Permit by: [signature] RS date 4/6/06

Authorization to Construct by: [signature] RS date 8/16/05 Existing System Inspection by: ____ date ____

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

IREDELL COUNTY HEALTH DEPARTMENT

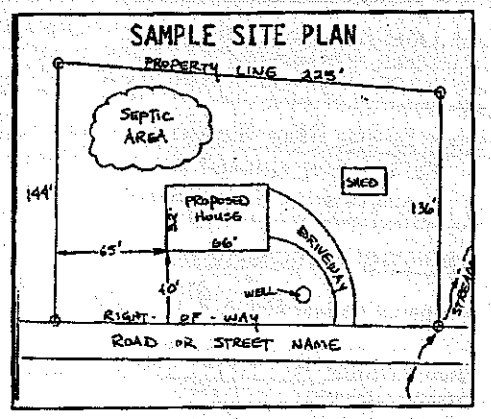
ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *SITE PLAN WORKSHEET*

SEE THE "SAMPLE SITE PLAN" BELOW. *INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!*

Place an (X) beside each item as you complete the site plan:

- ( ) **Property Line measurements are clearly identified**
- ( ) **All proposed structures are indicated**
- ( ) **Front and side setbacks from property line**
- ( ) **Preferred driveway location and well location**
- ( ) **Area you prefer your septic system to be placed**
- ( ) **North arrow, or other sufficient indicator of direction**

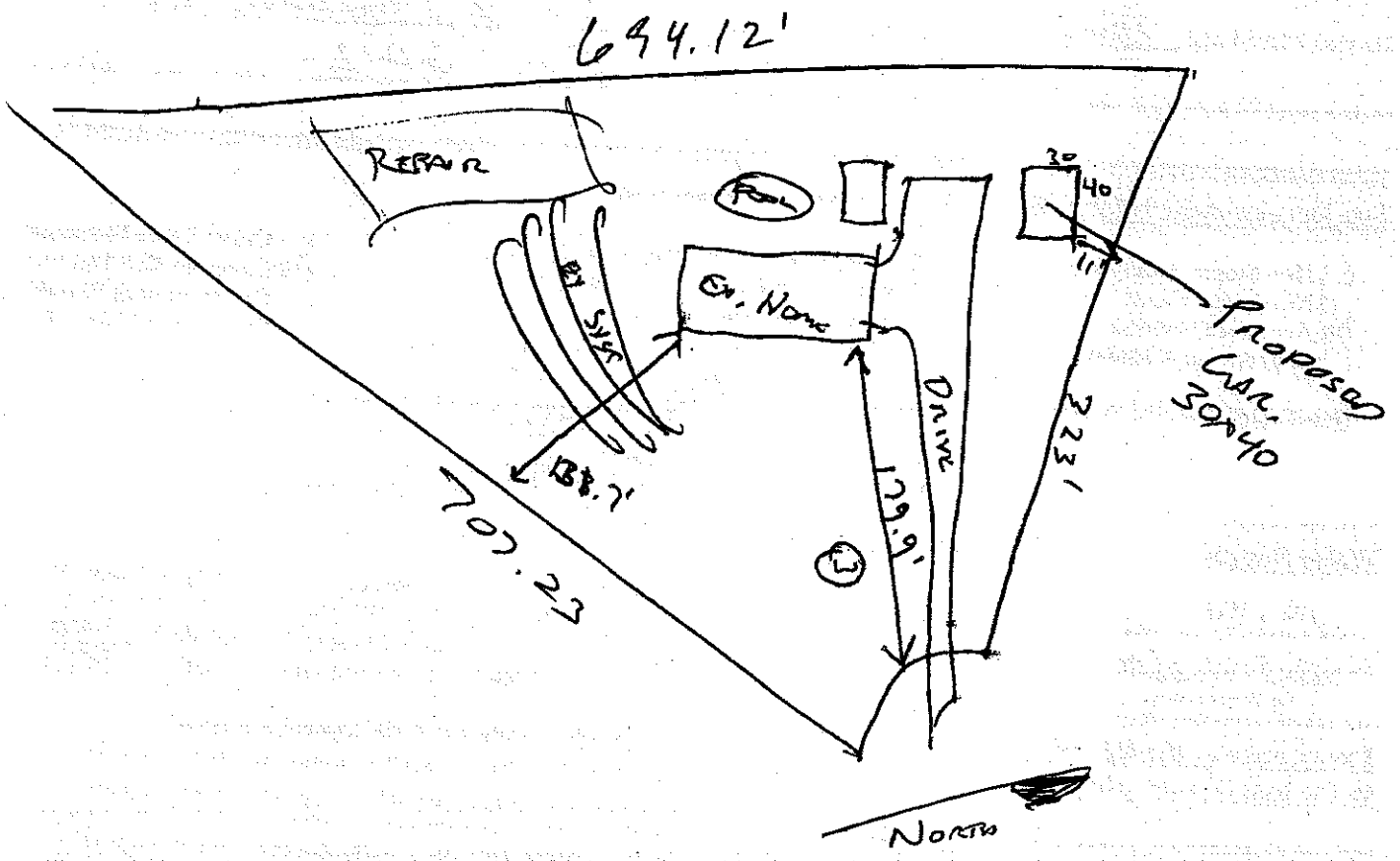


Circle N/A on the following if appropriate:

Location of septic systems and wells within 100' of your property	**N/A**
Location of easements and rights of ways on your property	**N/A**
Location of any designated wetlands on the property	**N/A**

USE THIS SPACE TO DRAW YOUR SITE PLAN

Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site



Signature: _____

Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

1/15/15

DATE