IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 209388

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

PIN # 4658-30-4958.000

APPLICANT: LARRY C. ANDREAS APPLICANT ADDRESS: 181 MILLS FOREST LN. MOORESVILLE NC

SITE ADDRESS: 2334 CHARLOTTE HWY MOORESVILLE NC 28117 PHONE: 989-239-1224 ALT. PHONE: 704-877-4272

SITE DIRECTIONS: HWY 115/21 TO HWY 21. SITE ON R JUST BEFORE VALLEYVIEW

SUBDIVISION: COUNTRY SIDE ESTATES SECTION: LOT # 4 LOT AREA: .730 ACRE DESIGN FLOW: 480 GPD L.T.A.R.: .3

Septic Tank 1000 (gal) STB Date

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines 5 Linear Ft: 402'

Trench Width 36" Max. Trench Bottom Depth * 33" * Gravel Depth N/A

☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI

System Description: 25% REDUCTION - GRAVITY

Repair System Description: LD PPBS

Maintenance Agreement Required: ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

☒ Residence ☐ Business ☐ Other ☒ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement w/o plumbing

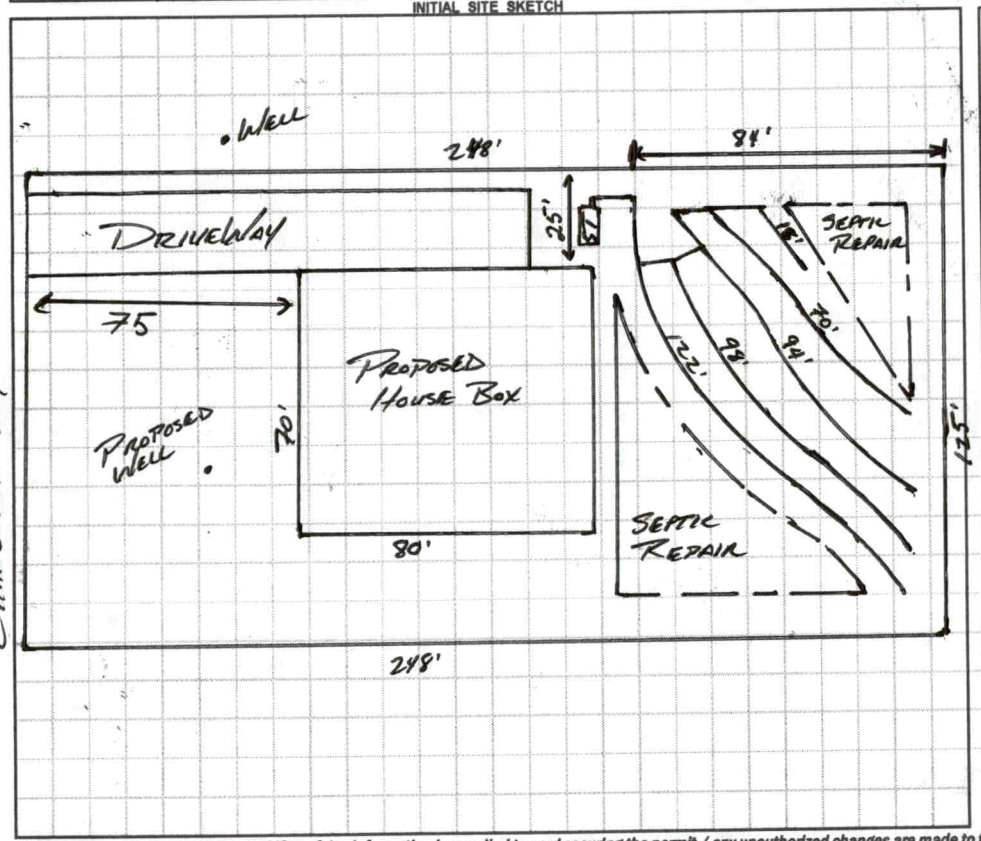
No. Bedrooms 4 No. Persons 8 No. Employees

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: FOLLOW ALL SEPTIC RULES.
FILL AND SMOOTH ANY ROUGH TOPOGRAPHY.
USE ENDCAP DISTRIBUTION. MAINTAIN 5' SEPERATION
FROM HOUSE AND 10' SEPERATION FROM PROPERTY

LINES WITH TANK AND DRAINFIELD.

INITIAL SITE SKETCH



AS BUILT SKETCH

1"=50

DEREK
704-928-6720

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:

IMPROVEMENT PERMIT by: APPROVED MAY 29 2015 Date:

AUTHORIZATION TO CONSTRUCT by: Date:

Installed by:

OPERATION PERMIT by: Date:

Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK

IREDELL COUNTY HEALTH DEPARTMENT

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

PERMIT # 209388

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

PIN # 4658-30-4958.000

APPLICANT: LARRY C. ANDREAS APPLICANT ADDRESS: 181 MILLS FOREST LN. MOORESVILLE NC

SITE ADDRESS: 2334 CHARLOTTE HWY MOORESVILLE NC 28117 PHONE: 989-239-1224 ALT. PHONE: 704-877-4772

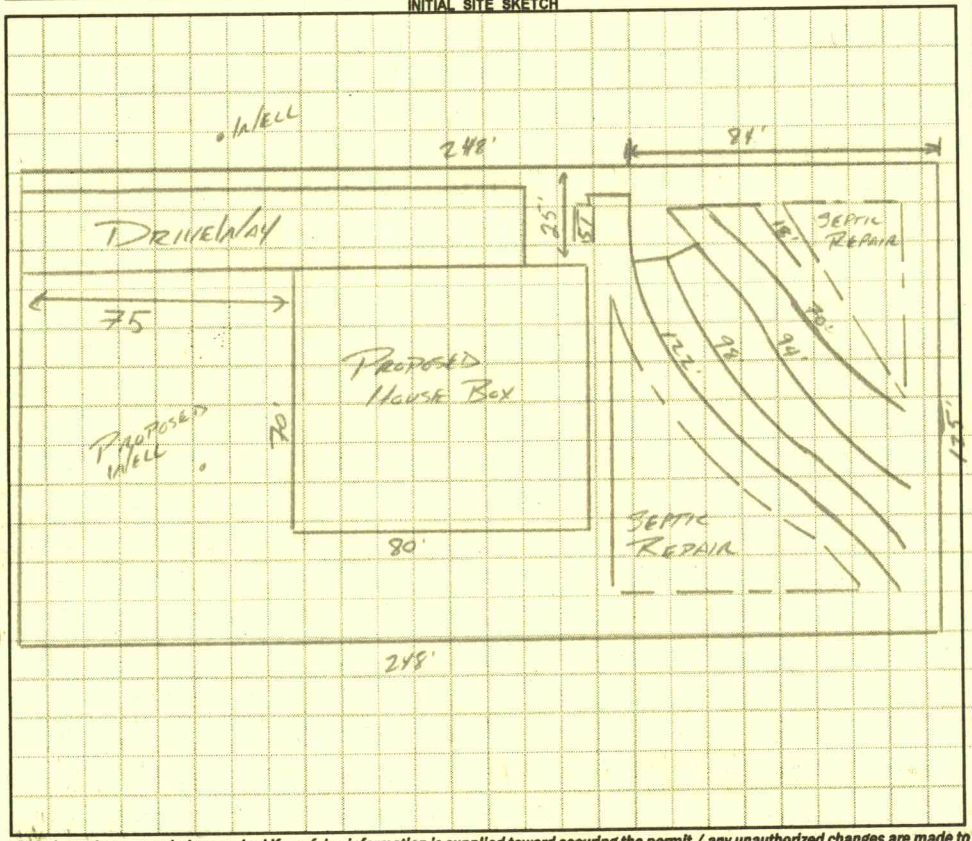
SITE DIRECTIONS: HWY 115/21 TO HWY 21. SITE ON R JUST BEFORE VALLEYVIEW

SUBDIVISION: COUNTRY SIDE ESTATES SECTION: LOT # 4 LOT AREA: .730 ACRE DESIGN FLOW: 480 GPD L.T.A.R.: .3

Septic Tank	1000	(gal)	STB	Date	☒ 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 - GRAVITY				☐ Business	No. Persons	8	☒ Private
Pump Make		Model		Serial #	Repair System Description: LD TRENCH				☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	5	Linear Ft: 402'	Maintenance Agreement Required:	☐ YES	☒ NO		☒ Slab	☐ Crawl Space		☐ Community
Trench Width	36"	Max. Trench Bottom Depth	* 33" *	Gravel Depth N/A		☒ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions: FOLLOW ALL SEPTIC RULES.
FILL AND SMOOTH ANY ROUGH TOPOGRAPHY.
USE ENDCAP DISTRIBUTION. MAINTAIN 5' SEPARATION
FROM HOUSE AND 10' SEPARATION FROM PROPERTY
LINES WITH TANK AND DRAINFIELD.

INITIAL SITE SKETCH



AS BUILT SKETCH

1" = 50

DEREK
704-928-6990

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: _____ Installed by: _____

IMPROVEMENT PERMIT by: _____ Date: APPROVED MAY 29 2015 OPERATION PERMIT by: _____ Date: _____

AUTHORIZATION TO CONSTRUCT by: _____ Date: _____ Existing System Inspected by: _____ Date: _____

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 209387

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

PIN # 4659-30-4958.000

APPLICANT: Larry C. Andreas APPLICANT ADDRESS: 181 Mills Forest Ln. Mooresville NC

SITE ADDRESS: 2334 Charlotte Hwy Mooresville NC 28117 PHONE: 989-239-1224 ALT. PHONE: 704-972-4772

SITE DIRECTIONS: Hwy 115/21 To Hwy 21. Site on R Just Before Valleyview

SUBDIVISION: Country Side Estates SECTION: LOT # 4 LOT AREA: .736 Acre DESIGN FLOW: 480 GPD L.T.A.R.: .3

Septic Tank 1000 (gal) STB Date

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines 5 Linear Ft: 402'

Trench Width 36" Max. Trench Bottom Depth * 33" * Gravel Depth N/A

☑ New System ☐ Repair ☐ Expansion System Type: I II ☑ III IV V VI

System Description: 25% Reduction - Gravity

Repair System Description: LD TBBR

Maintenance Agreement Required: ☐ YES ☑ NO

☑ GRAVITY ☐ PRESSURE

☑ Residence No. Bedrooms 4

☐ Business No. Persons 8

☐ Other No. Employees

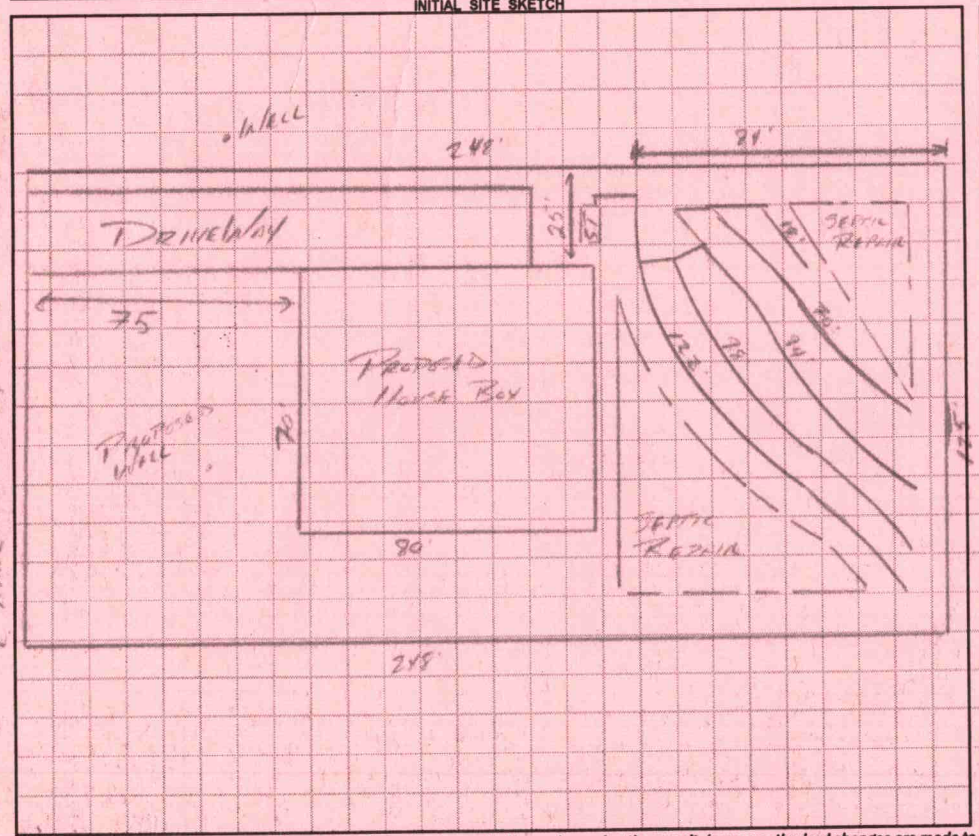
☑ Slab ☐ Crawl Space

☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions: Follow All Septic Rules.
Fill And Smooth Any Rough Topography.
Use Endcap Distribution. Maintain 5' Separation
From House And 10' Separation From Property
Lines With Tank And Drainfield.

INITIAL SITE SKETCH



AS BUILT SKETCH

1" = 50

Well

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:

IMPROVEMENT PERMIT by: APPROVED MAY 29 2015 Date:

AUTHORIZATION TO CONSTRUCT by: Date:

Installed by:

OPERATION PERMIT by: Date:

Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK

RECEIVED MAR 3 0 2015

P.1

Pd. $500.00 Statesville

#209388

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: APPLICATION FORM

Application For: (X) PERK TEST ( ) 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, SEALED 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 ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Place an (X) beside whichever is submitted if applicable

Applicant Information:

Applicant Name: LARRY C. ANDREAS Address: 181 MILLS FOREST LANE MOORESVILLE, NC Phone: 989-239-1224

Owner Name: Darrell M. Olynick Address: 2328 Charlotte Hwy Mooresville NC 28117 Phone: 704-872-4272

Property Information:

Street Address: [redacted] LOT #4 CHARLOTTE HWY., MOORESVILLE, NC

Subdivision Name: COUNTRYSIDE ESTATES Section/Phase: _____ Lot Number: 4

DEED BOOK 2258, PAGE 2169, PLATT BOOK PAGE 17-28

Driving Directions: _____

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

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

Maximum Number of Bedrooms: 4 or 5
Maximum Number of Occupants: 7-8
( ) 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: _____
Square Footage of Building: _____
Maximum Number of Employee: _____
Maximum Number of Seats/Beds/Other: _____

Water Supply:

(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: _____

(X) 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: Darrell M Olynick 3/23/2015

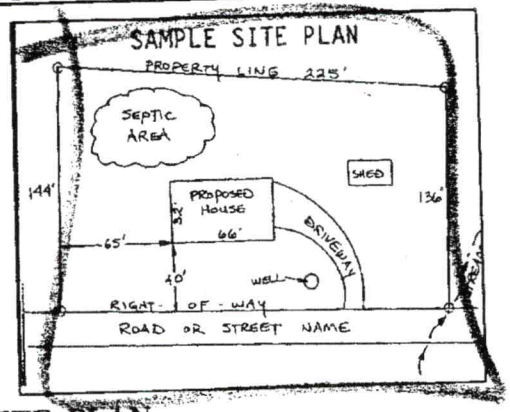
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

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**

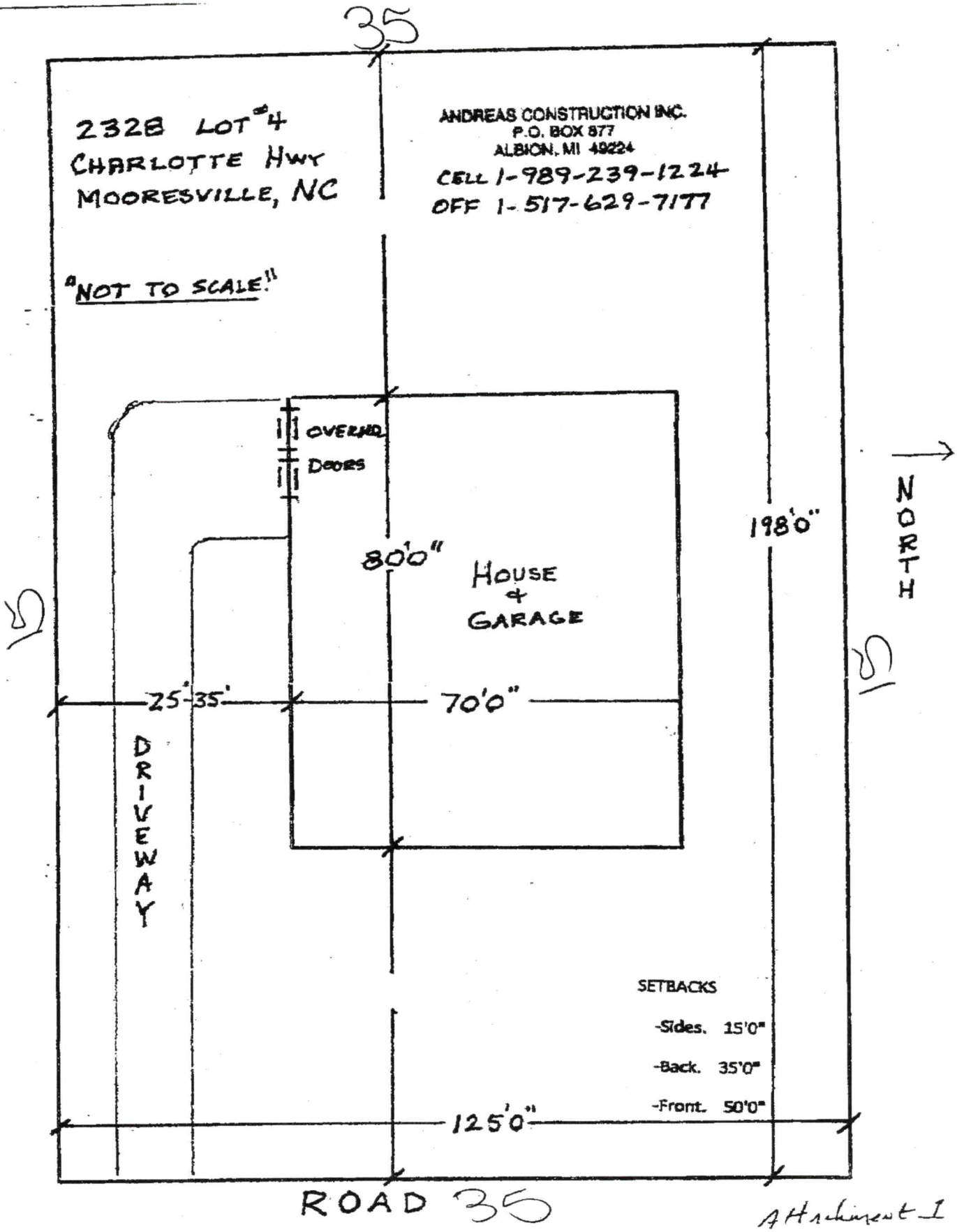
USE THIS SPACE TO DRAW YOUR SITE PLAN

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

See attached

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

3/30/15
DATE



Attachment I

IREDELL COUNTY

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

APPLICATION NUMBER
209388
Issue Date: 03/30/2015

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4658304958.000	2334 CHARLOTTE HIGHWAY, MOORESVILLE, NC 28117	MOORESVILLE

Owner Information	Applicant Information
Owner: OLYNICK, DARRELL	Applicant: ANDREWS, LARRY
Address: 2328 CHARLOTTE HWY MOORESVILLE, NC 28117	Address: 181 MILLS FOREST LANE MOORESVILLE, NC 28117
Phone: 704-872-4272	Phone: 989-239-1224

Use Requested	Zone Code
SFD	

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.730	35.00	35.00	15.00	15.00	PA	X

Remarks:

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.

Applicant: _____ Date: _____

Permit Number	34693	TOTAL FEES:	$ 77.25

ENVIRONMENTAL HEALTH REQUIREMENTS

The following numbered items MUST BE COMPLETED PRIOR TO THE SUBMITTAL of the Improvement Permit (IP) / Authorization to Construct (AC) / Existing System application packet.

Questions? Call Iredell County Environmental Health between 8:00-9:00a.m., Monday-Friday to speak with a Registered Sanitarian.
Statesville Office (704)878-5305 Mooresville Office (704)664-5281

1. **Complete all Environmental Health forms**: septic system application, site plan, new well water application (if applicable), and **sign this green sheet after** you completed all items. **Include in submittal a copy of the Zoning Permit.** A Zoning Permit is not required for septic system repairs or expansion where no addition is being made to an existing structure.

2. Clearly **mark all property corners**. Flag side lines every twenty-five feet if rear corners are not visible when standing on front corners.

3. **Stake or flag the footprint of the building structure**.

4. Where an **Authorization to Construct (AC) is desired**, submit a recorded copy of the **plat for the subdivision lot** (if not already on file at Environmental Health) and **include two(2) legible copies of the basic floor plan** not larger than 11" x 17" for each floor in the structure.

5. **Any site not having adequate visibility**(50' in any direction) **must be cleared of "undergrowth"** to allow access and provide good visibility.

6. All completed paperwork must be submitted to the Environmental Health Division of the Iredell County Health Department for review before any name will be placed on the service request (appointment) list. **Only properly completed applications will be placed on the service request list on a first come, first serve basis. Incomplete applications will be returned to the applicant.**

Completed permits must be picked up promptly. If it becomes necessary to send a certified letter (return receipt), postage will be charged and **any permit not picked up by the deadline in the letter will be voided.** All monies paid to that point are non-refundable.

Any site not ready when staff arrive for the evaluation will result in applicant being charged a site revisit fee of $100 and the request being returned to the bottom of the service request list. Once work by Environmental Health staff begins, the up-front fees paid toward securing any health department permit are non-refundable. Refunds for work not started, due to a customer changing their mind or plans, are subject to an administrative fee of $50 to defray a portion of the costs of processing the refund.

By signing below I am acknowledging the above specifications have been met and the site is ready to be evaluated.

Signature Lay C. Dale Date 3/21/2015

p.5

p.2

0043588
9216552

DEPARTMENT OF PLANNING & DEVELOPMENT
PO BOX 788, STATESVILLE NC 28687-0788
349 N. Center Street / Building Standards Center
(704) 878-3118 / FAX 928-2025

Residential Zoning Permit Application

What are you building? (Please check)

Stick built X Modular___ Duplex___ Singlewide___ Doublewide___ Pier___ Addition 4 Bedroom addition___

Accessory dwelling (ie: M-I-L Suite, guest house)___ Accessory building (ie: garage, shed)___ Swimming pool___

Are there any other structures currently on the property such as dwellings, sheds, garages? (Please list type below)

Is there a septic tank on the property? Yes (No) If residence how many bedrooms? 4 and stories?___

If an addition, please describe project: _____

Please list square footage of project (Pier, Addition, Accessory Dwelling, Accessory Building only): _____

Does the property have community water? Yes (No) If yes, please list who provides it: _____

Does the property have community sewer? Yes (No) If yes, please list who provides it: _____

Owner Information

Property Owner's Name Darrell Olynick Phone # 704-872-4272

Owner's Current Address 2328 Charlotte Hwy

Property Information

Property Address 2328 Charlotte Hwy Parcel # 104#4

Subdivision:_____ Lot:___ Zoning:___ Watershed: Y or N Flood Plain: Y or N Township:___

Directions to property (from a MAIN ROAD) _____

Application Information

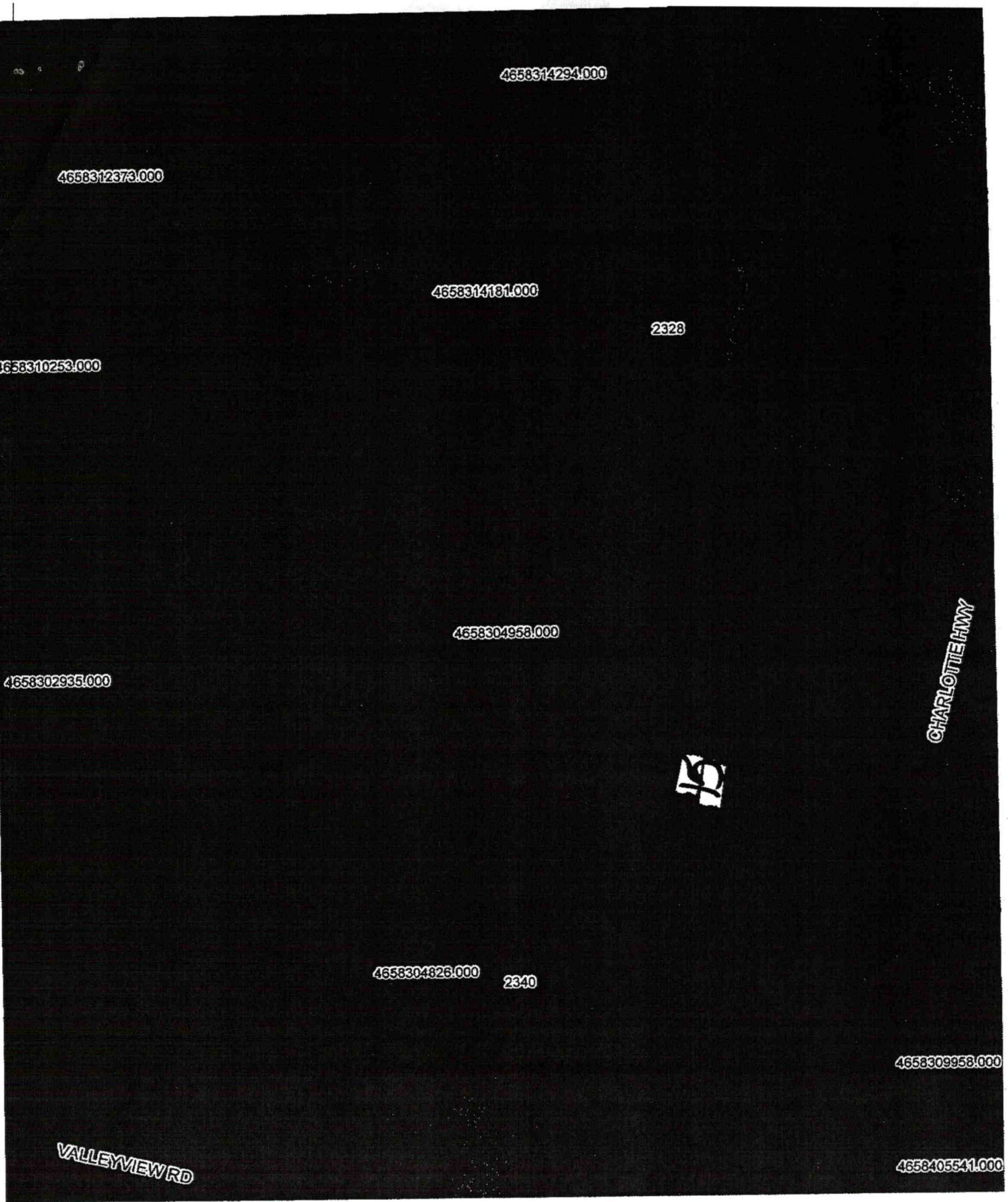
Applicant's Name or Company Larry Andress Applicant's Phone # 989-239-1224

Applicant's Address 191 Mills Forest LN.

If Company, Representative's Name and Title_____

IN APPLYING FOR A ZONING PERMIT I CERTIFY THAT ALL INFORMATION ON THIS APPLICATION IS CORRECT AND THAT ALL WORK WILL COMPLY WITH IREDELL COUNTY ZONING REGULATIONS. THE IREDELL COUNTY ZONING DEPARTMENT WILL BE NOTIFIED OF ANY CHANGES THAT ARE MADE TO THIS PROJECT. I AM AWARE THAT THIS IS AN APPLICATION ONLY - NOT A PERMIT - AND DOES NOT CONSTITUTE APPROVAL OF THIS PROJECT. HOWEVER, IF THIS PROJECT IS APPROVED, THIS SIGNATURE IS VALID FOR MY PERMIT

SIGNATURE OF APPLICANT DA Grad DATE 3/30/15



Sign Date 3/30/15

DENR/DEH

ON-SITE WASTEWATER SECTION

Sheet 1 of 2
PROPERTY ID #: 4958
COUNTY: IREDELL

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: LARRY ANDREAS — APPLICATION DATE
ADDRESS: 181 MILLS FOREST LN. MOORESVILLE — DATE EVALUATED: 4/30/15
PROPOSED FACILITY: SFR — PROPOSED DESIGN FLOW (.1949): 4 BR — PROPERTY SIZE:
LOCATION OF SITE: 2334 CHARLOTTE HWY MOORESVILLE NC — 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	
A1	LL 5%	0-8	SL, GR	VFR, SS, SP	N/A	48"	E-M SAP INCL 30"-48"	N/A	.3
		8-36	RC, SBK/ABK	FR, SS, SP					
		36-48	RCL, SBK/WSBK	FR, SS, SP					
A2	LL 5%	0-6	SL, GR	VFR, SS, SP	N/A	45"	C-M SAP INCL 25"-45"	—	.325
		6-20	RC, SBK	FR, SS SP					
		20-45	RCL, WSBK	" " "					
		45-48	SL SAP	VFR, SS SP					
A3	LL 5%	0-8	SCL, WSBK	VFR, SS, SP	N/A	45"	C-M SAP INCL 26"-48"	—	.3
		8-26	RC, ABK	FR, SS, SP					
		26-45	RCL, SBK	FR, SS, SP					
		45-48	SL SAP	VFR, SS, SP					
A4	LL 5%	0-8	SL, GR	VFR, SS, SP	N/A	48"	F-C SAP INCL 36-48"	N/A	.3
		8-36	RC, SBK/ABK	FR, SS SP					
		36-48	RCL, SBK	FR, SS, SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	APPROVED	APPROVED
Site LTAR	.3	.3

OTHER FACTORS (.1946): —
SITE CLASSIFICATION (.1948): I
EVALUATED BY: SHANE COSHION
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	

LEGEND

use the following standard abbreviations

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

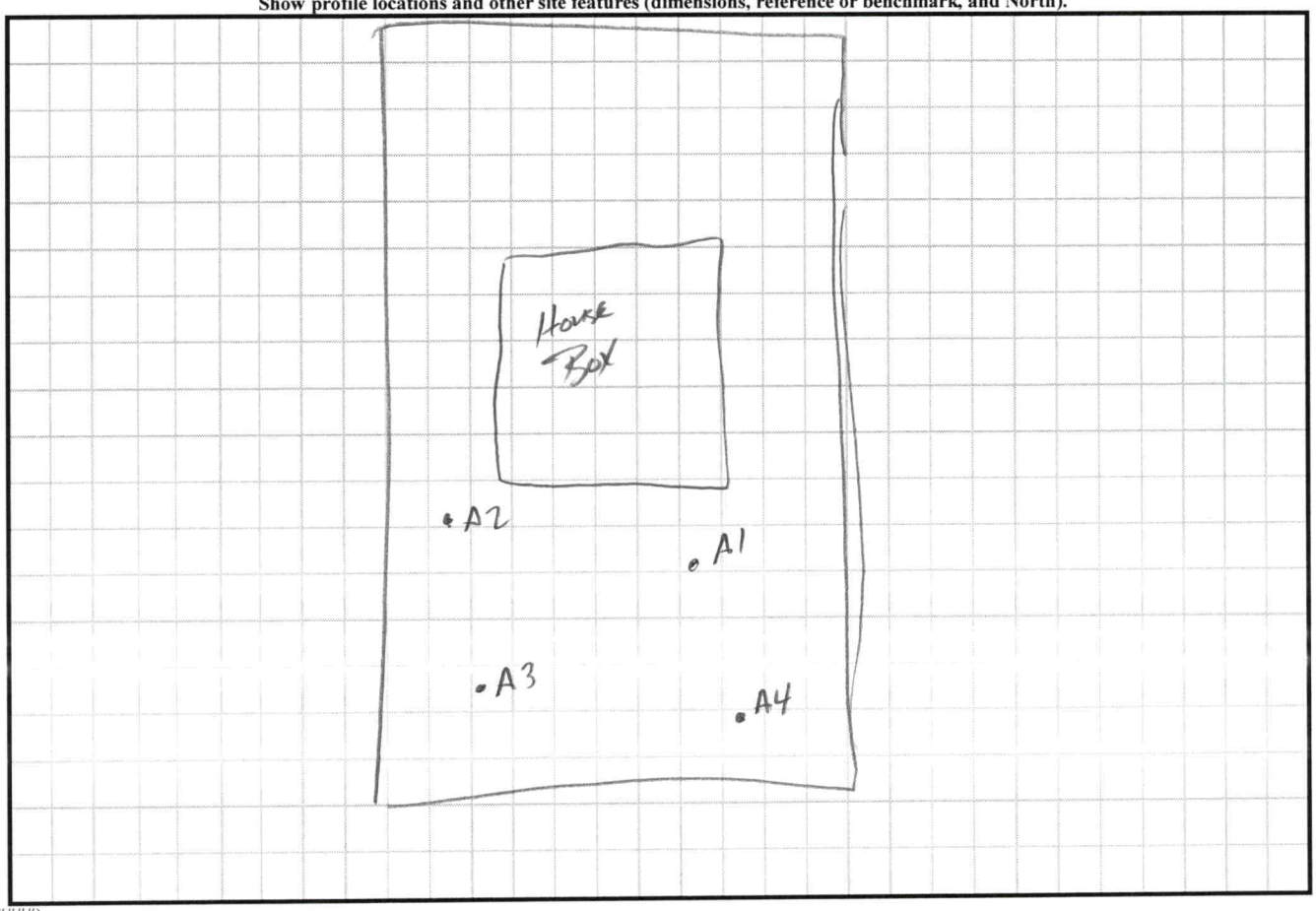
NOTES

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)

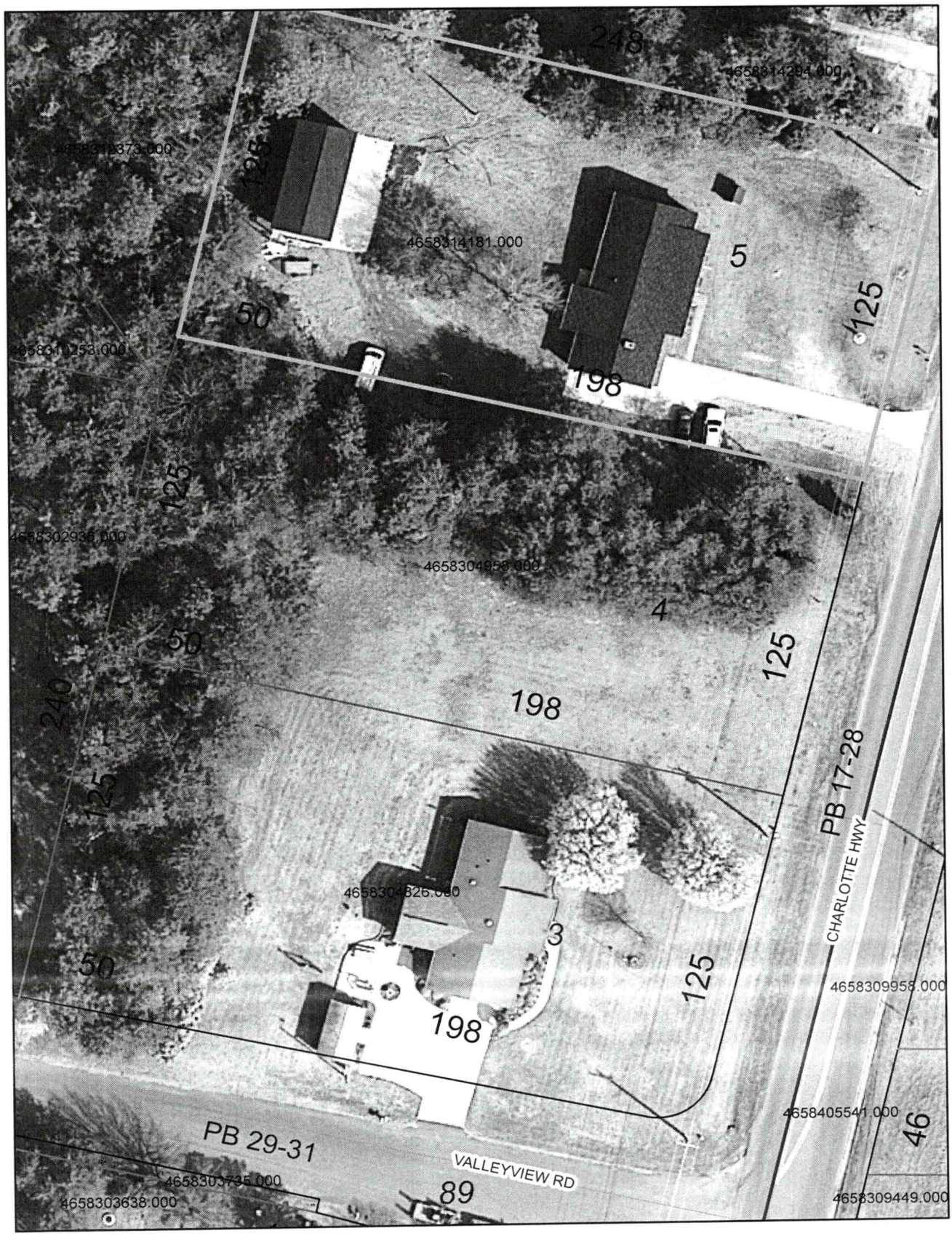
Evaluation of saprolite shall be by pits.

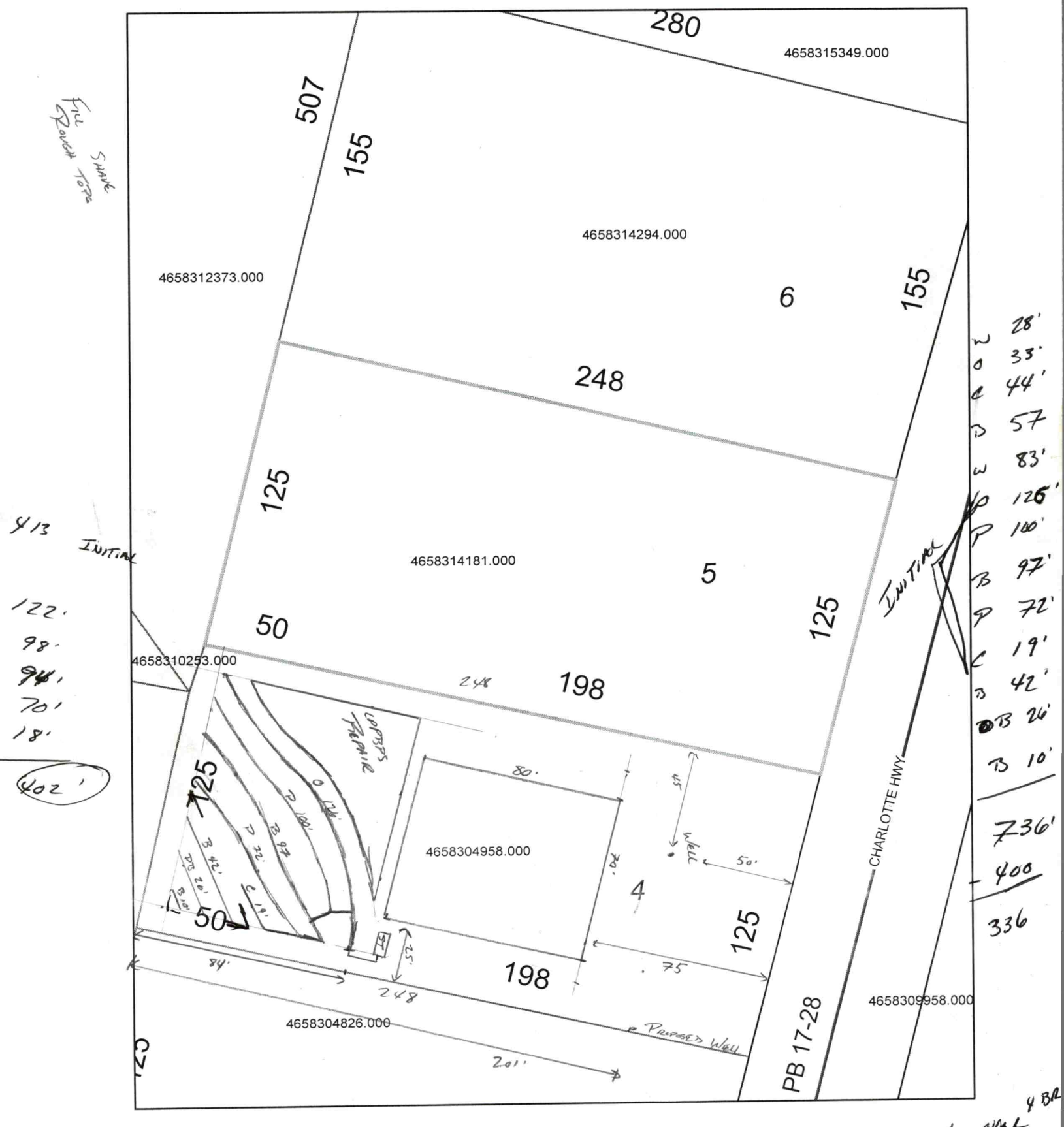
Long-term Acceptance Rate (LTAR): gal/day/ft^2

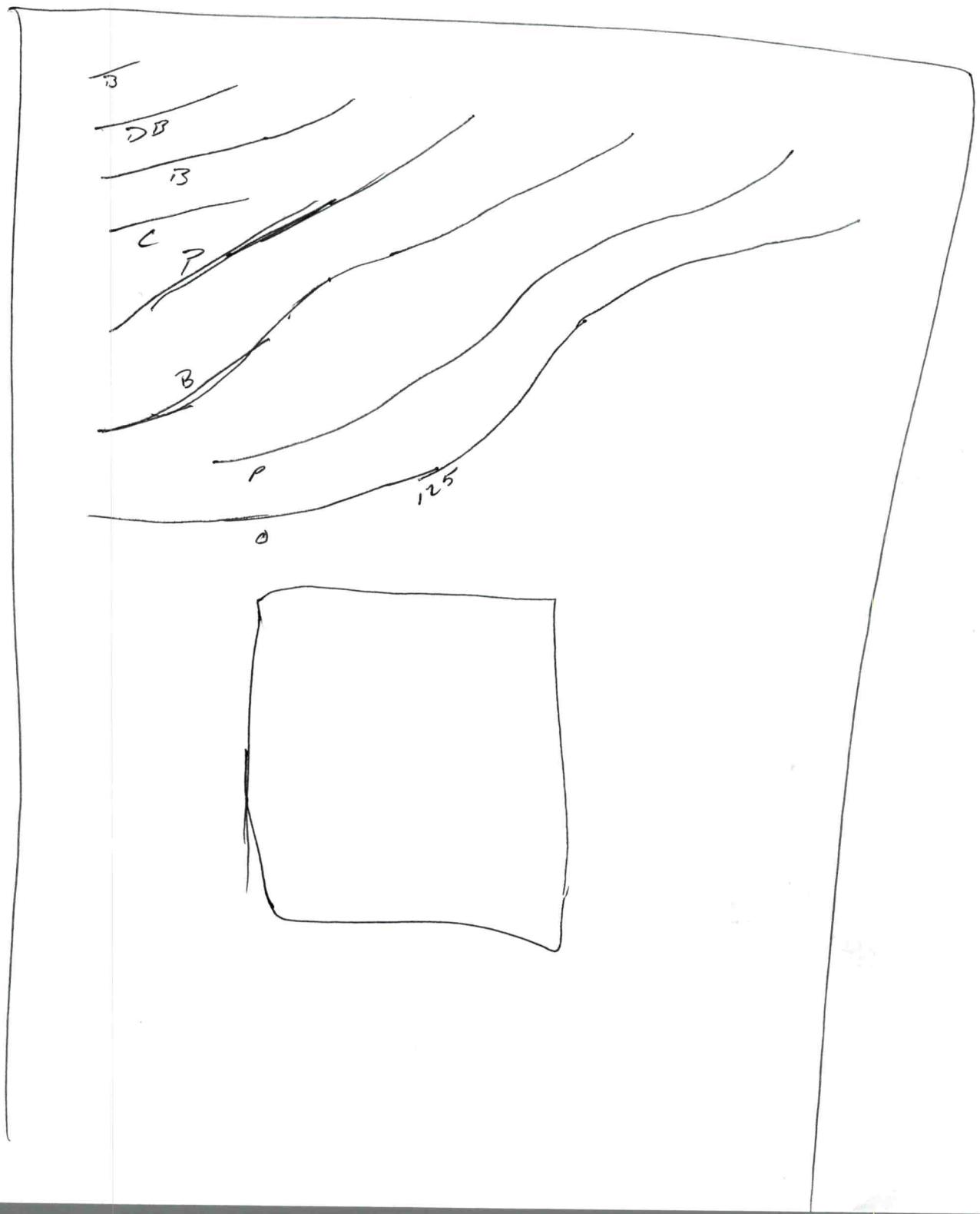
Show profile locations and other site features (dimensions, reference or benchmark, and North).



DENR (######)
Review (#####)


248
4658314294.000
4658312373.000
195
4658314181.000
5
50
125
4658310253.000
198
125
4658302936.000
4658304958.000
4
50
125
240
198
PB 17-28
125
4658304826.000
3
CHARLOTTE HWY
50
125
4658309958.000
198
4658405541.000
46
PB 29-31
VALLEYVIEW RD
4658305735.000
89
4658303638.000
4658309449.000


280
4658315349.000
507
155
4658314294.000
4658312373.000
6
155
248
125
4658314181.000
5
50
125
4658310253.000
248
198
125
4658304958.000
4
50
125
84'
248
198
75
4658304826.000
Proposed Well
201'
PB 17-28
4658309958.000
CHARLOTTE HWY
Initial
Initial
Coppers Prairie
80'
70'
50'
35'
Well
25'
122'
98'
70'
18'
402'
736'
400
336
70' dirt
4 BR


B
DB
B
C
P
B
P
125
0

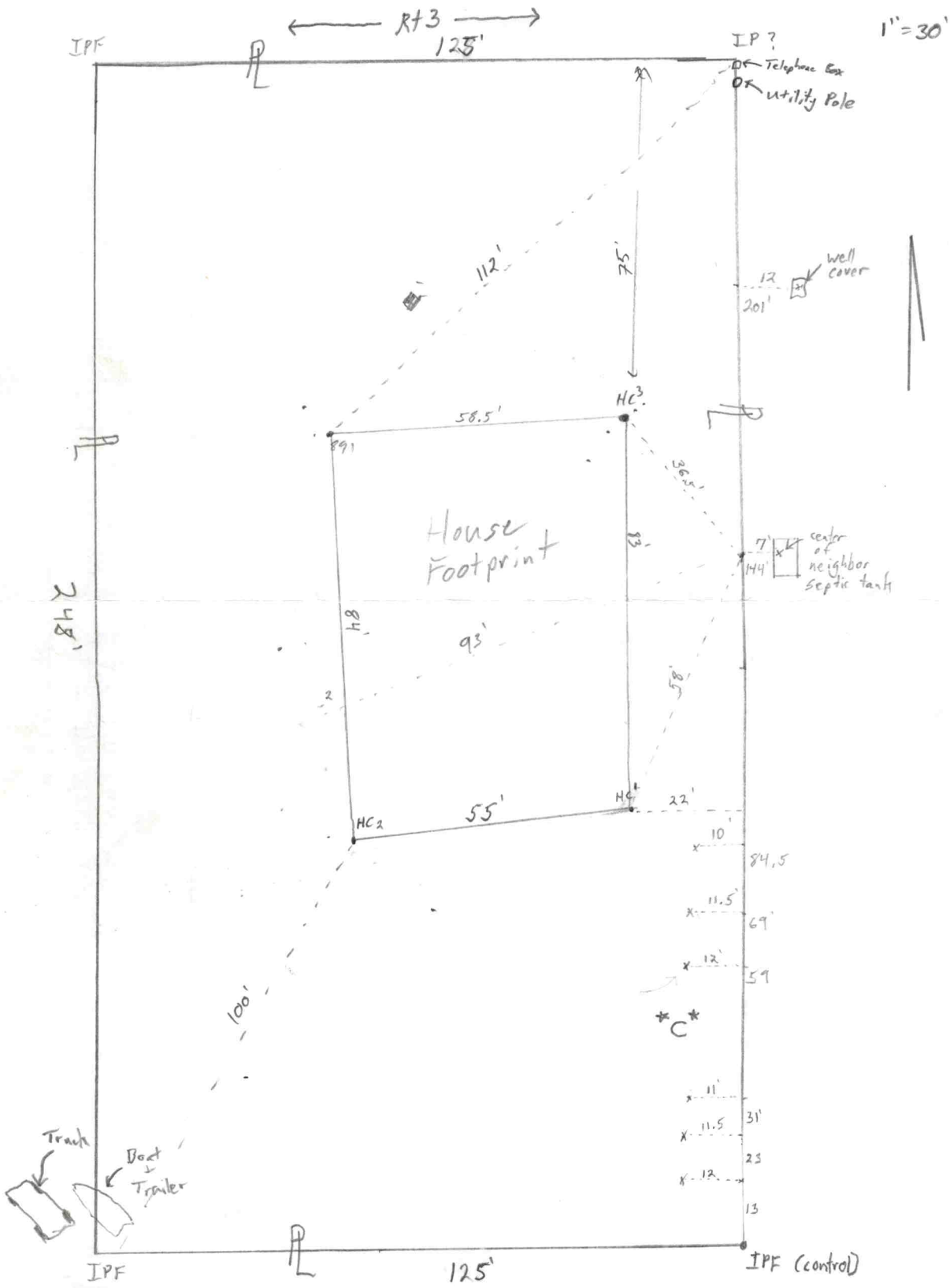
2334 Charlotte Highway

Field Drawing
5-27-15

Tom Shuck + Shane Cashion

58
93

1" = 30'



1:30 hf

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office – Central Permitting (704) 878-5305 Mooresville Office (704) 660-3625

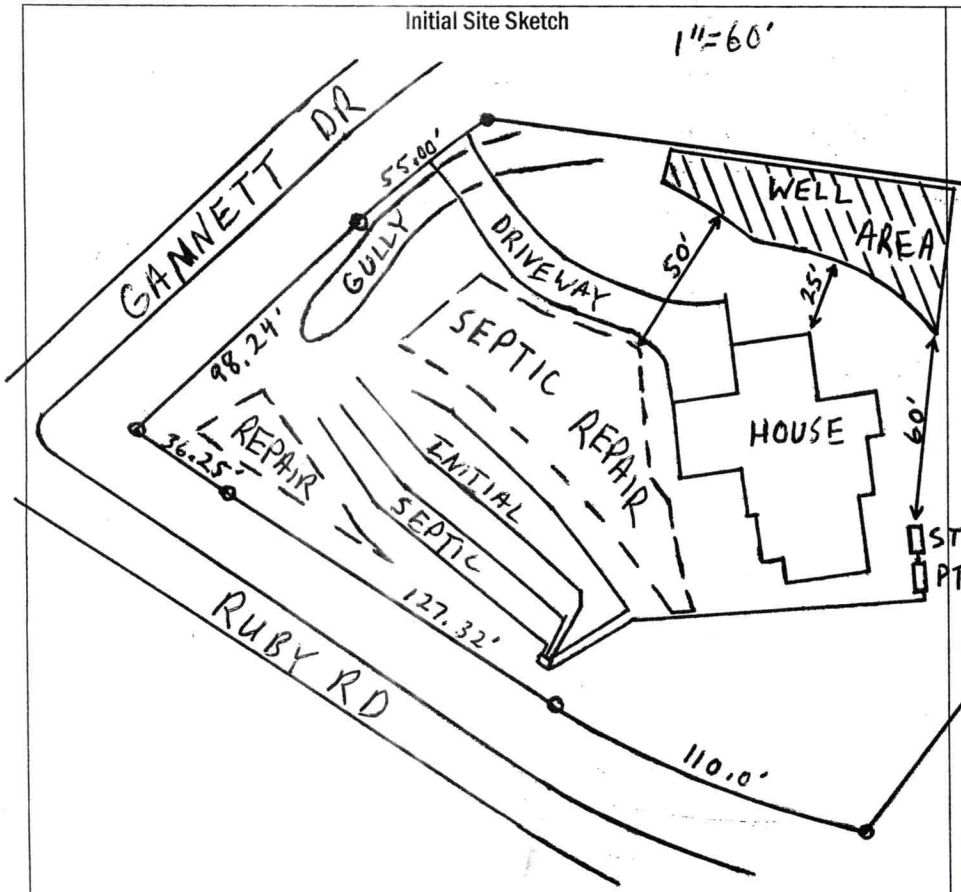
PRIVATE DRINKING WATER WELL PERMIT # 201006 **PIN #** 4636-30-6213 **Type of Permit (circle one):** (New) Repair Abandonment

APPLICANT NAME: Edge Building Company ADDRESS: PO Box 4946 Mooresville NC 28117 PHONE: 980-721-6778

DIRECTIONS TO SITE: Brawley Sch Rd, TL on Isle of Pines, TL on Gannett Dr, TR on Ruby Rd, Lot on corner on L

SITE ADDRESS: 134 Gannett Dr SUBDIVISION: CL+T SECTION/LOT: 5/1752

Initial Site Sketch



"As Built" Sketch

Well GPS Latitude: _____ Longitude: _____

PERMIT CONDITIONS/COMMENTS: * Follow all well Rules, 35ft of casing minimum required

WELL PERMIT ISSUED BY: [signature] DATE: 3-31-14 (Permit is valid for 5 years from date issued. This permit may be revoked if it is determined there has been a material change in any fact or circumstance upon which the permit is issued. Actions of the employees of the Iredell County Health Department shall in no way be taken as a guarantee that this well will produce water of any particular quantity or quality or for any amount of time. Employees of the Iredell County Health Department assume no liability for any damages, either direct or consequential which may be caused by this well.)

Well Contractor: _____ CONTRACTOR CERT #: _____ GROUT INSPECTION BY: _____ DATE: _____

OR CERTIFICATION OF GROUT NOT WITNESSED BY DEPT: _____ DATE: _____ WELL HEAD INSPECTION BY: _____ DATE: _____

TION (check when completed): GROUT TO GROUND SURFACE ☐ WELL CONTRACTOR ID PLATE ☐ PUMP INSTALLER ID PLATE ☐ SAMPLE PORT ☐

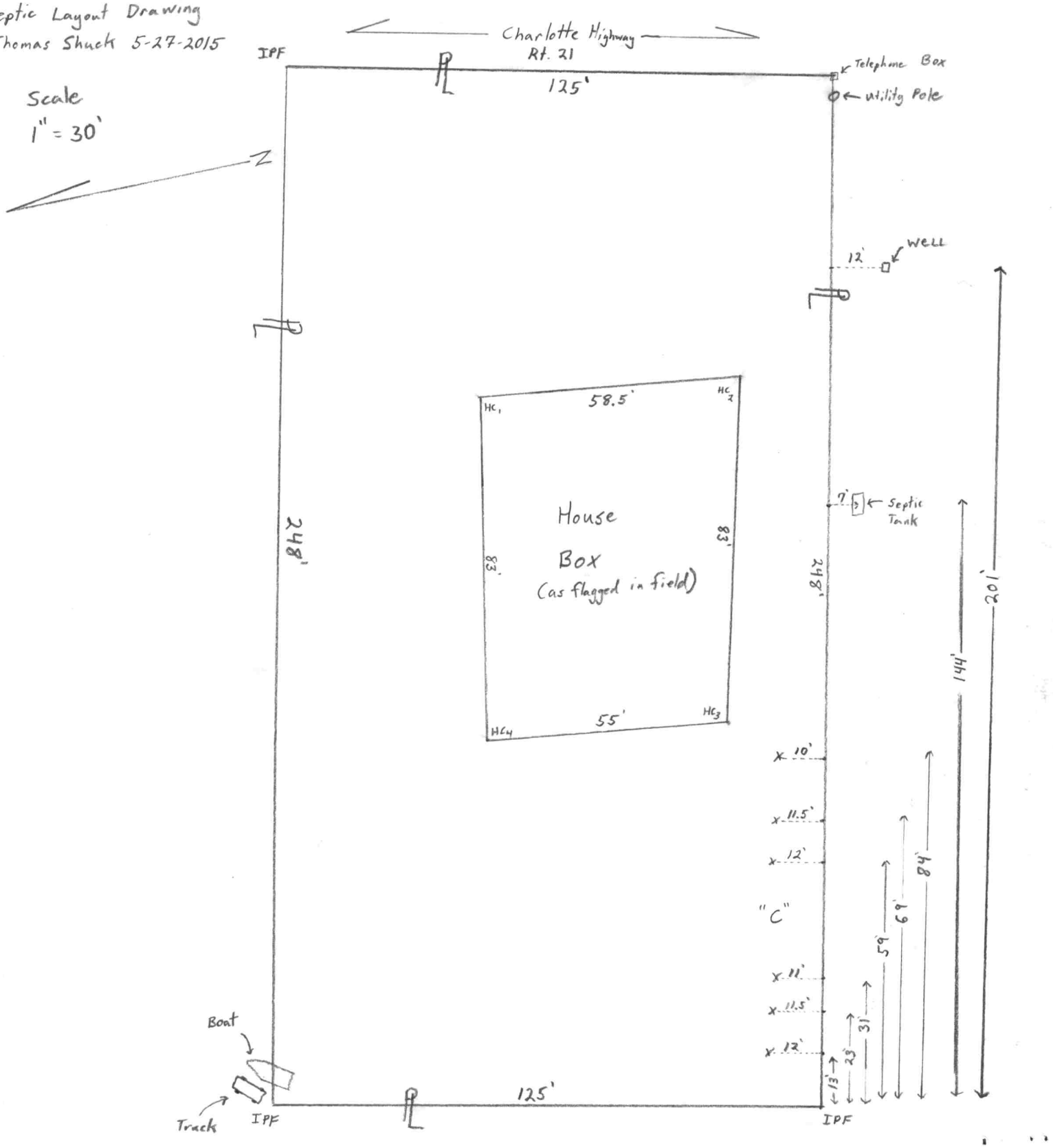
ACCESS PORT / VENT ☐ WELL SEAL ☐ WELL HEAD 12 INCHES / PITLESS ADAPTOR 8 INCHES ABOVE GRADE ☐

MPLETION BY: _____ DATE: _____ WATER SAMPLES BY: _____ DATE: _____

Attachments: Form GW-1a (required except for abandonment) ☐ Form GW-30 ☐ Water Sample Results ☐ Plat ☐

Health Dept. Copy – White Applicant Certificate of Completion – Yellow Applicant Well Construction Permit - Pink

2334 Charlotte Highway Mooresville
Countryside Estates Lot 4
Pin: 4658304958.000
DB 2351 DP 1804
Septic Layout Drawing
Thomas Shuck 5-27-2015



115.16'
115.00'
7,407.29 S.F.
241.39' TOT.
197.87'
N 76°-39'-47" W
115.10'
60.08'
60.0'
PROPO
N 76-39-47 W
197.87'
244.59' TOT.
125.17'
125.0'
30,983.13 S.F.
125.0'
CONC. MON.
251.14' TOT.
129.18'
125.0'
31,608.04 S.F.
125.0'
S 13°-20'-13" W
N 76°-39'-47" W
257.80' TOT.
N 13°-20'-13" E
S 16°-23'-20" W
125.18'
U.S. HWY. 21
125.0'
32,641.54 S.F.
125.0'
264.46' TOT.
125.17'
125.0'
33,472.79 S.F.
125.0'
271.12' TOT.
197.87'
N 76°-39'-47" W
N 16°-23'-20" E
PROPOSED 60' ST.
N76°-39'-47" W
274.32' TOT.
201.62'
S17°-28'-50" W
125.18'
34,668.14 S.F.
124.85'
N 76°-39'-