IREDELL COUNTY HEALTH DEPARTMENT

KW Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 240770

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

PIN # 4658547950

APPLICANT/OWNER: Larry Laney/Treadz APPLICANT ADDRESS: 223 Stutts Rd Mooresville NC 28117 Vickie 704 707

SITE ADDRESS: 2118 Charlotte Hwy Mooresville, NC 28117 PHONE: 704 201-4008 ALT. PHONE 704 651-6676, 5660

SITE DIRECTIONS: Hwy/US 21 N. on left after Connector/Cornelius Rd. SAP CONTROLLED: N/A ☐ YES ☐ NO

SUBDIVISION: N/A SECTION: — LOT # — LOT AREA: 1.812 Acres DESIGN FLOW: 100 gpd L.T.A.R.: Exist.

Septic Tank	Existing (gal)	STB		Date		☐ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI (Gravel)	☒ Residence	No. Bedrooms		Water Supply
Pump Tank	(gal)	PT		Date		System Description: Existing-Gravity-Conventional		☒ Business	No. Persons		☒ Private
Pump Make		Model		Serial #		Repair System Description: Gravity w/ Conventional	Fire Repair	☐ Other	No. Employees	3	☐ Public
# Nitrification Fields		# Lines	Existing	Linear Ft		Maintenance Agreement Required: ☐ YES ☐ NO		☒ Slab	☐ Crawl Space		☐ Community
Trench Width		Trench Bottom Depth(Low side)		Gravel Depth		☐ GRAVITY ☐ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing		

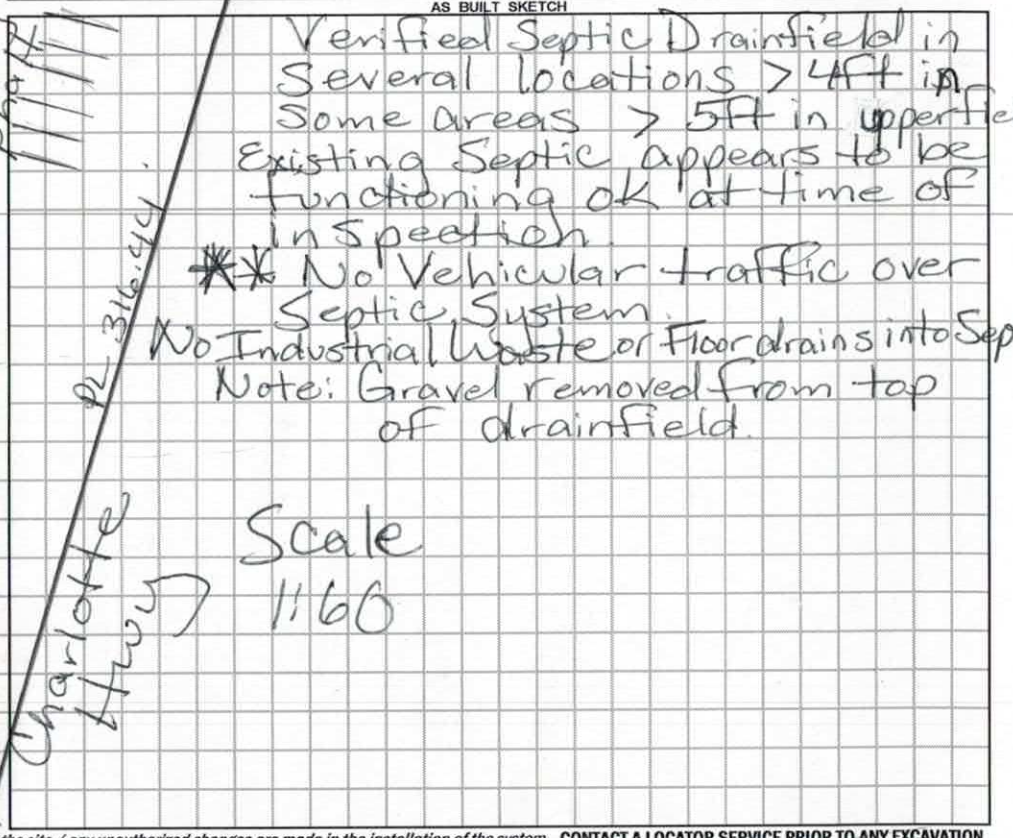
Comments / Conditions:

* Septic Easement Covers the entire Moose Lodge property.

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. **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: Larry Laney Date: 2/13/19 Installed by:

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Maria Dotson Date: 2/7/19

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

240770

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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: ( ) Survey Plat, scaled no more than 1 inch = 60 feet
Place an (X) *beside whichever is submitted if applicable* (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: LARRY R LANEY **Address:** 223 Stutts Rd, Mooresville, NC **Zip:** 28117
Applicant Email: JLANEY.52@yahoo **Phone:** 704-201-4008 **Alt. Phone:** 704-651-6676
Owner Name: SAME **Address:** _____ **Zip:** _____
Owner Email: _____ **Phone:** _____ **Alt. Phone:** _____

Property Information:

Street Address: 2118 Charlotte Hwy, Mooresville, NC 28117
Subdivision Name: _____ **Section/Phase:** _____ **Lot Number:** _____
Driving Directions: Hwy 21 South of Hwy 115 - North of Mooresville Moose Lodge

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

CHECK FOUNDATION TYPE

( ) New Single Family Residence — Maximum Number of Bedrooms: _____ — ( ) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: _____ — ( ) Concrete Slab Foundation
( ) Accessory Building — ( ) Swimming Pool — ( ) Basement with Plumbing
( ) Bedroom(s) Addition — ( ) Other Addition/Structure: _____ — ( ) Basement without Plumbing
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____
Non-Residential Site Development: Type of Business: Auto Repair & Sales
Square Footage of Building: _____ Max. Number of Employees: 3 Max. Number of Seats/Beds/Other: _____

Water Supply: ( ) Replacement Well – Reason: _____
( ) Multi-connection Well Number of Houses: _____ Number of Persons: _____

( ) 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: 1986
( ) 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 ( ) 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: Larry R. Laney 1-17-19
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

(Check and sign only ONE of the options below)

1. * APPLICANT AND OWNER ARE THE SAME. * (*Sign here***)** Larry L. Lowry

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.

2. I, _____, am the legal owner(s) of the property located at _____, identified as

PIN (Parcel Identification Number)_____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) _____, _____, 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) Date

Mooresville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

WALT McGIVREL / 704-928-2021 (TREAT) EXT 3174

Iredell County Building Standards 2021

349 North Center Street P.O. Box 788 Statesville, NC 28687
Commercial Permitting 704-928-2021 Fax 704-878-3122

Date of Inspection: 7 December 2018
Permit # 240770

Inspectors: Walt McGervey

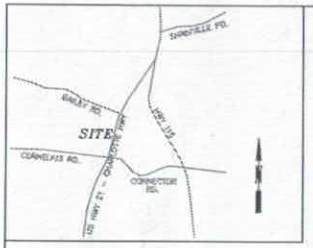
Location:	**Change of Use/ General Comments:**
Treadz Sales & Repair Garage 2118 Charlotte Highway, Mooresville, NC Contact: Victoria Hubschmitt Phone # 704 707 5660 victoria@treadznc.com	Intended New Occupancy/Use: S-1 vehicle repair/ M retail sales/ B office, counter sales, customer waiting area. Building has undergone numerous unapproved alterations and additions over many years of restaurant operation. Extensive non-code compliant additions to the electrical panels have created a significant safety issue which must be addressed prior to CO for new use. Numerous additions have been made to the structure as well,
Parcel # 4658547950.000	Current Approved Occupancy/Use: A-2 restaurant

Change of Use Inspection results:

☒ **Conditionally Approved.**

Inspection of Tenant Space and/or Structure does not entirely satisfy minimum code requirements for the intended new occupancy classification or use. Minor alterations and what may include extensive building trade work outlined/ listed below are necessary to meet minimum code requirements. Numerous items listed below must be permitted, inspected and accepted.

1. Project is considered as changing to an S-1/ M/ B occupancy use within a currently non-conforming structure of type V-B construction per the 2015 Existing Building Code & 2012 trade codes.
2. Provide a simple site plan to include general HC accessibility to the building, all exterior egress components, property boundaries, parking lay-out and other amenities governed by the NC State Building, trade codes and general statutes.
3. Clarify all use groups, classifications, and uses within the space under consideration, see NCSBC sections 303-311.
4. Please provide a schematic floor plan indicating the intended uses for each area of the structure; with intended doors for exiting the structure clearly indicated for inspector reference.
5. Any necessary permits to reference master permit number (**240770**); will be issued separately (w/additional fees):
   - Building (POS counter, egress, minor alterations, building repairs, general accessibility elements);
   - Plumbing (properly terminate any/all abandoned waste & supply lines/ relocate men's room lavatory);
   - Mechanical (permit available for any necessary work or supplemental heating units);
   - Gas piping (secure all gas piping, verify all abandoned fuel gas appliance supply lines are properly terminated);
   - Ventilation (S-1 repair garages must meet NCSBC 406.6.3, i.e. be mechanically ventilated);
   - Electrical (repair garages must meet NEC article 511).
6. Existing Electrical Panels must be surveyed by a licensed engineer in conjunction with Melvin Baxley (IC electrical Inspector). Minimum acceptance will be based upon intended use, general safety, functional panel schedule, and termination/ removal of non-compliant elements feeding to & from the panels.
7. Restrooms to be adequately ventilated per NCSBC 1203.4.2.1; meet 1210.2; water closets must meet NCSPC 420.2: verify seats meet NCSPC 420.3.
8. Men's Restroom must meet NCSPC 405.3.2.
9. Restroom (noted while on site) must be made accessible to the maximum extent feasible; compliance to be via accessible door hardware, addition of 18", 36" & 42" grab bars (ANSI figure 604.5.1 & 604.5.2), and include under lavatory pipe protection (ANSI 606.6). One accessible fixture of each type must be provided in each restroom.
10. Provide accessible doors through-out per ANSI 117.1 (404.2.4 - threshold, and 404.2.6 – lever handle hardware)
11. Verify compliance with NCSBC section 1006; 1007.2; and 1014.2.
12. Verify exterior egress lighting (1006.3) at primary egress door and along accessible route to HC parking & public way.



VICINITY MAP
NO SCALE

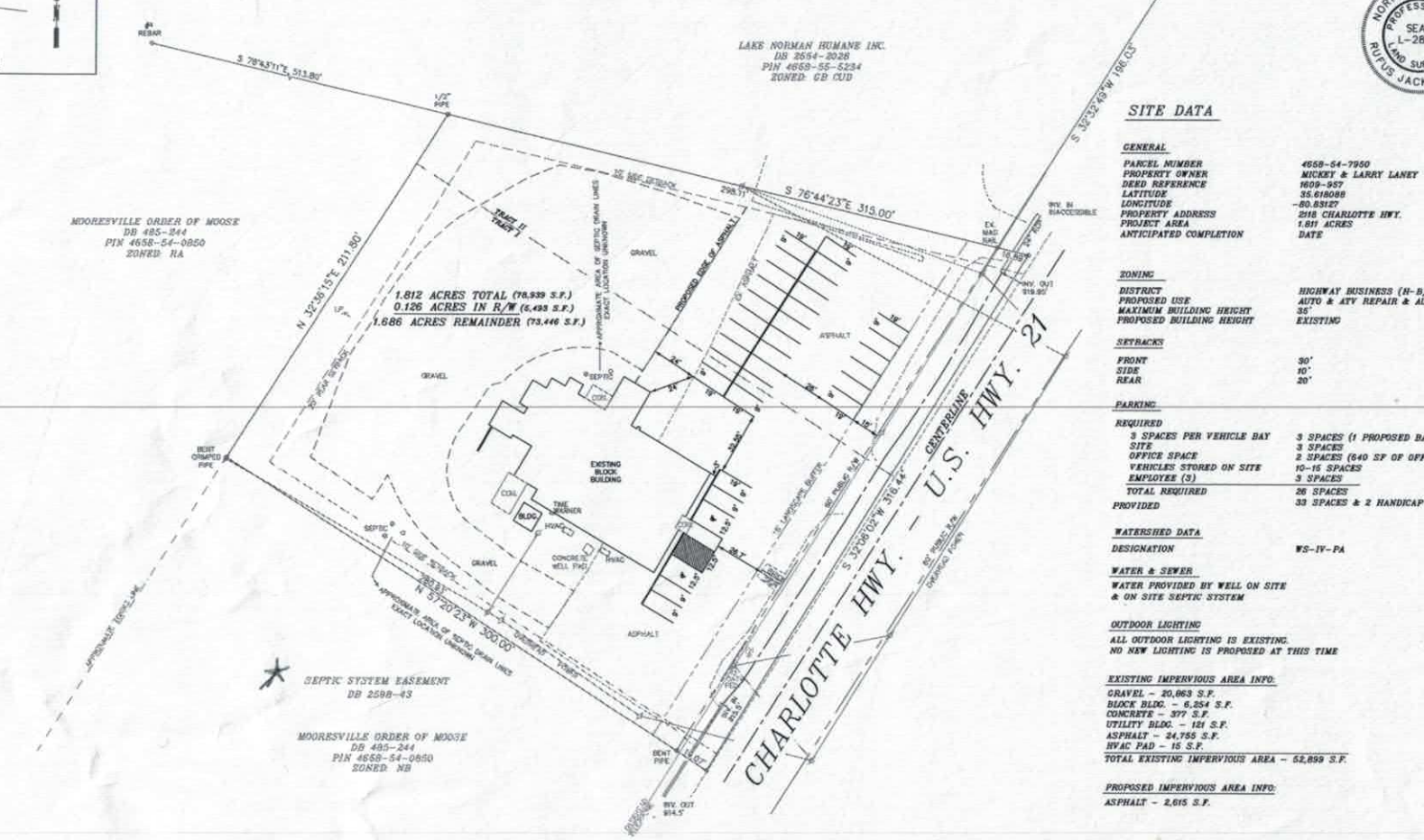
I, RUFUS JACKSON LOVE CERTIFY THAT THIS MAP WAS DRAWN FROM AN ACTUAL SURVEY UNDER MY DIRECT SUPERVISION, THAT THE RATIO OF PRECISION IS 1:10,000+ BEFORE ADJUSTMENTS; AND THAT THE ANGULAR ERROR WAS ± 7.5 SECONDS PER TURN.

WITNESS MY HAND AND OFFICIAL SEAL THIS 10th DAY OF JANUARY, 2019. 31ST JANUARY, 2019.

N.C.P.L.S. L-2844
LICENSE NO.

Rufus Jackson Love
PROFESSIONAL LAND SURVEYOR

NORTH CAROLINA PROFESSIONAL SEAL L-2844 LAND SURVEYOR RUFUS JACKSON LOVE



SITE DATA

GENERAL

PARCEL NUMBER	4658-54-7950
PROPERTY OWNER	MICKEY & LARRY LANEY
DEED REFERENCE	1609-957
LATITUDE	35.618088
LONGITUDE	-80.83127
PROPERTY ADDRESS	2118 CHARLOTTE HWY.
PROJECT AREA	1.811 ACRES
ANTICIPATED COMPLETION	DATE

ZONING

DISTRICT	HIGHWAY BUSINESS (H-B)
PROPOSED USE	AUTO & ATV REPAIR & AUTO SALES
MAXIMUM BUILDING HEIGHT	35'
PROPOSED BUILDING HEIGHT	EXISTING

SETBACKS

FRONT	30'
SIDE	10'
REAR	20'

PARKING

REQUIRED	
3 SPACES PER VEHICLE BAY	3 SPACES (1 PROPOSED BAY)
SITE	3 SPACES
OFFICE SPACE	2 SPACES (640 SF OF OFFICE SPACE)
VEHICLES STORED ON SITE	10-15 SPACES
EMPLOYEE (3)	3 SPACES
TOTAL REQUIRED	26 SPACES
PROVIDED	33 SPACES & 2 HANDICAP SPACES

WATERSHED DATA

DESIGNATION	WS-IV-PA

WATER & SEWER

WATER PROVIDED BY WELL ON SITE
& ON SITE SEPTIC SYSTEM

OUTDOOR LIGHTING

ALL OUTDOOR LIGHTING IS EXISTING.
NO NEW LIGHTING IS PROPOSED AT THIS TIME

EXISTING IMPERVIOUS AREA INFO:

GRAVEL - 20,863 S.F.
BLOCK BLDG. - 6,254 S.F.
CONCRETE - 377 S.F.
UTILITY BLDG. - 121 S.F.
ASPHALT - 24,755 S.F.
HVAC PAD - 15 S.F.
TOTAL EXISTING IMPERVIOUS AREA - 52,899 S.F.

PROPOSED IMPERVIOUS AREA INFO:

ASPHALT - 2,615 S.F.

REFERENCES:

DEEDS AND MAPS AS SHOWN

PYRAMID
LAND SURVEYING
C-1341
RUFUS JACKSON LOVE
PROFESSIONAL LAND SURVEYOR L-2844
P.O. Box 11
Davidson, NC 28036
(704) 892-4249

LEGEND:

	PROPERTY LINE
	TIE LINE
	UNSURVEYED LINE
	EDGE OF PAVEMENT
	SETBACK LINE
CP	COMPUTED POINT
PP	POWER POLE
LP	LIGHT POLE
FH	FIRE HYDRANT

NOTES:

1. THIS PROPERTY IS NOT LOCATED IN A DESIGNATED FLOOD ZONE PER FEMA MAP # 3710465800J, DATED 3/18/2008.
2. AREA DETERMINED BY COORDINATE COMPUTATION.
3. CP DENOTES COMPUTED POINT, NO MONUMENT FOUND OR SET.
4. UNDERGROUND UTILITIES NOT LOCATED AS OF THIS DATE.
5. NO NCGS GRID MONUMENTS ARE WITHIN 2000' OF SUBJECT PROPERTY.
6. ALL MONUMENTS ARE EXISTING UNLESS OTHERWISE NOTED.
7. THIS PROPERTY LIES IN THE WS-IV-PROTECTED AREA WATERSHED.
8. THERE WILL BE NO NEW DISTURBED AREA ON SITE.
9. THIS PROPERTY IS CURRENTLY ZONED HB (HIGHWAY BUSINESS).
10. SETBACKS FOR HB ZONING ARE: FRONT - 30'
SIDE - 10'
REAR - 20'

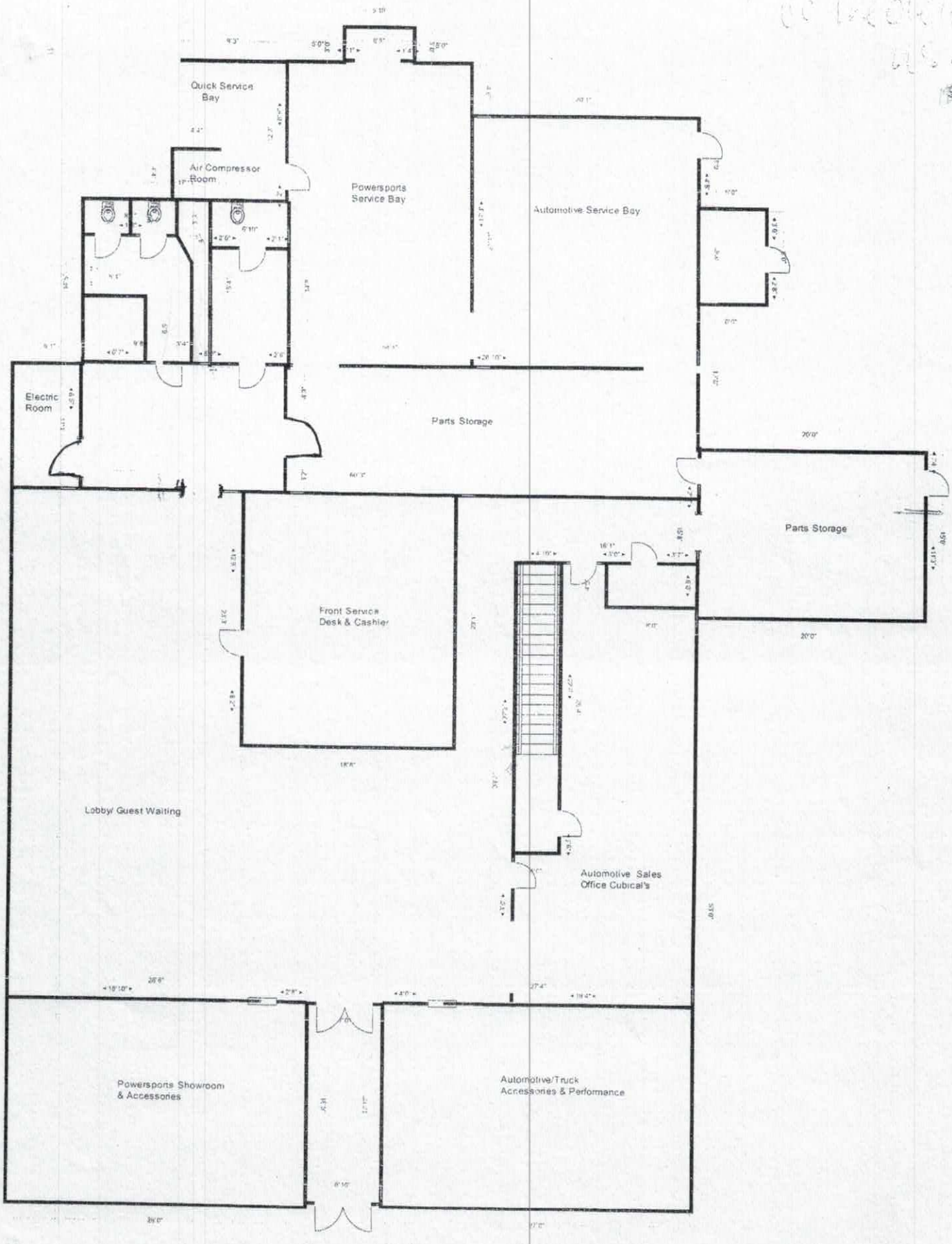
OWNERS INFO:

MICKEY & LARRY LANEY
4511 LANEY ROAD
MAIDEN, N.C. 28650
PHONE NUMBER

SITE LAYOUT PLAN

PROPERTY OF
MICKEY W. LANEY
LARRY R. LANEY
2118 CHARLOTTE HIGHWAY
DEED BOOK 1609-957, PIN 4658-54-7950
CODDLE CREEK TOWNSHIP, IREDELL COUNTY
NORTH CAROLINA
DECEMBER 6, 2018
REVISED PER IREDELL COUNTY COMMENTS 1/9/19
FILE NAME: HUSKSMITT-MON

40 0 40 80 120
GRAPHIC SCALE - FEET 1"=40'


Quick Service Bay
Air Compressor Room
Powersports Service Bay
Automotive Service Bay
Electric Room
Parts Storage
Parts Storage
Front Service Desk & Cashier
Lobby/ Guest Waiting
Automotive Sales Office Cubical's
Powersports Showroom & Accessories
Automotive/Truck Accessories & Performance

25' 0"
Executive Office
42' 10"
42' 10"
60' 0"
60' 0"
4' 10"
25' 2"
18' 0"
12' 2"
File Storage
12' 10"
25' 0"