ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 3080609

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

PIN # 4658984521

APPLICANT/OWNER: Brittani Cramer-Jones | APPLICANT ADDRESS: 195 Shinville Rd

SITE ADDRESS: 195 Shinville Rd, Mooresville | PHONE: 704-308-8011 | ALT. PHONE —

SITE DIRECTIONS: 115S → L Shinville Rd → on L | SAP CONTROLLED: ☐ YES ext ☐ NO

SUBDIVISION: Jimmy Brawley Farm | SECTION: M2 | LOT # — | LOT AREA: .76 | DESIGN FLOW: ext | L.T.A.R.: ext

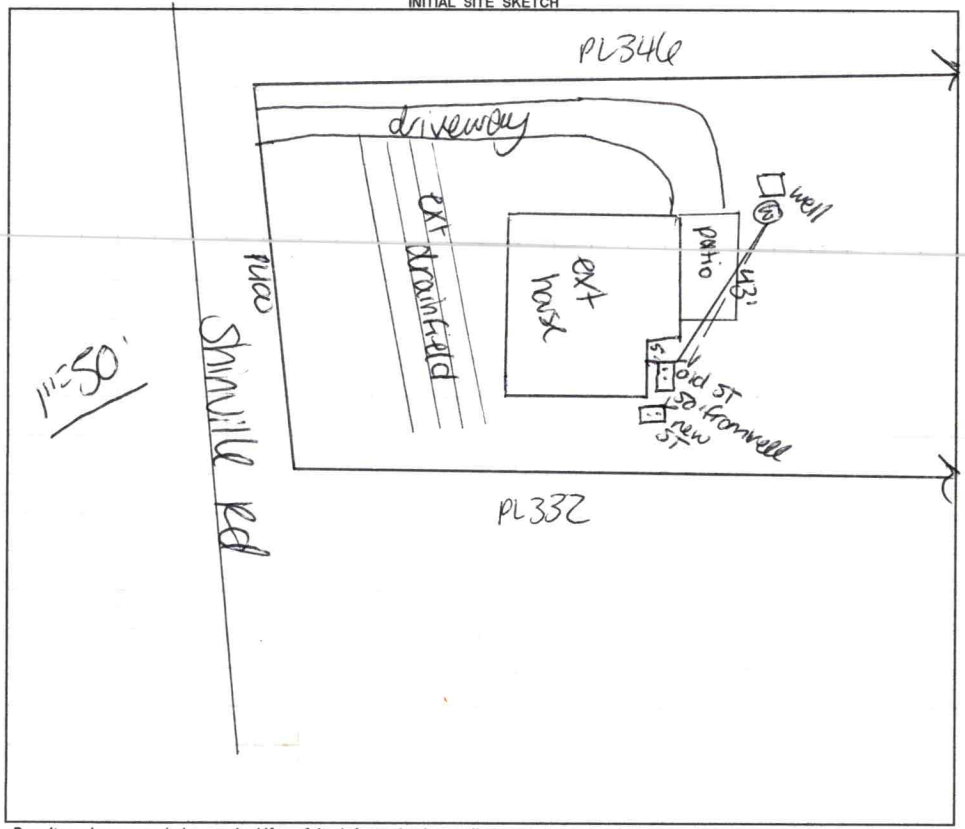
Septic Tank	1000 (gal)	STB 760	Date 3/22/2020	☐ New System	☒ Repair	☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms ext
Pump Tank	(gal)	PT	Date	System Description:				☐ Business	No. Persons ext
Pump Make	Model		Serial#	Repair System Description: tank				☐ Other	No. Employees
# Nitrification Fields	# Lines existing		Linear Ft	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☒ Crawl Space
Trench Width	Trench Bottom Depth(Low side)		Gravel Depth		☒ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Pump, crush, & fill cracked tank. Inspect & replace d-box if needed. New tank should be installed 50' from well!

* Property line should be verified at time of inspection to make sure tank meets setbacks → if pins cannot be found surveyor will be required.

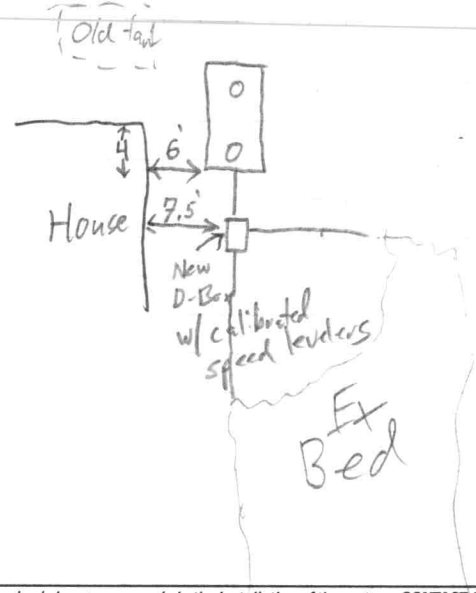
INITIAL SITE SKETCH



AS BUILT SKETCH

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

6/23/2020 Shoaf mid-seam 1000-gallon conc mid-seam tank w/ a Polylok PL-68



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: [signature] Date: 6/15/20 Installed by: Jared Lentz

IMPROVEMENT PERMIT by: Carla C. Nicks Date: 6-12-20 OPERATION PERMIT by: Sam Shuck Date: 6/23/2020

AUTHORIZATION TO CONSTRUCT by: Carla C. Nicks Date: 6-12-20 Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.

RECEIVED JUN 0 8 2020

AP-308069
Repair Evaluation

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) Septic Improvement Permit ( ) Authorization to Construct ( ) Existing System Inspection (X) 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: Brittani Cramer-Jones Address: 195 Shinnville Road Zip: 28115
Applicant Email: brittani.c@bellsouth.net Phone: 704-308-8011 Alt. Phone: _____
Owner Name: _____ Address: _____ Zip: _____
Owner Email: _____ Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 195 Shinnville Road, Mooresville, NC 28115
Subdivision Name: N/A Section/Phase: _____ Lot Number: _____
Driving Directions: Shinnville Road is at stoplight near intersection of Hwy 21 and 115. House is on the left.

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

CHECK FOUNDATION TYPE

( ) New Single Family Residence — Maximum Number of Bedrooms: _____ — (X) 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
(X) Repair to failing septic system — X Tank ___ Drain lines — Describe Problem: tank lid collapsed
Non-Residential Site Development: Type of Business: _____
Square Footage of Building: _____ Max. Number of Employees: _____ 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: unknown
(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: [signature] 4/14/2020
Property owner or owner's legal representative signature (SIGNATURE R

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MOORE'S Environmental Services

JACK MOORE Inspector Certification # 12331
DAVID LYNCH Inspector Certification # 43121
J.C. Moore
1227 Troutman Drive
Statesville, NC 28625
Phone (704) 873-2171
Fax (704) 873-9928
Mobile (704) 902-1122

ON-SITE WASTEWATER INSPECTION REPORT (Page 1 of 3)

DATE OF INSPECTION 02 Sep 2015

Street Address 195 Shinnville Rd

City Mooresville State NC ZIP 28115

CLIENT NAME Julie Baker
RE/MAX Executive Realty

Julie Baker
RE/MAX Executive Realty

Dear Ms. Baker:

At your request, on September 2, 2015, I inspected the septic system at 195 Shinnville Road, Mooresville, NC. Enclosed is a copy of the permit for this system from the Iredell County Environmental Health Department and a site drawing I made that shows the location of the septic system. Also enclosed is an inspection form that is required by the NC onsite wastewater board and the signed pre-inspection contract.

I opened the septic tank and found that it was a built in place tank with concrete slab lids. The walls were four inch concrete block with no seal or reinforcement. This tank meets no current or past standards; therefore, I recommend replacing this tank with a new state approved precast septic tank.

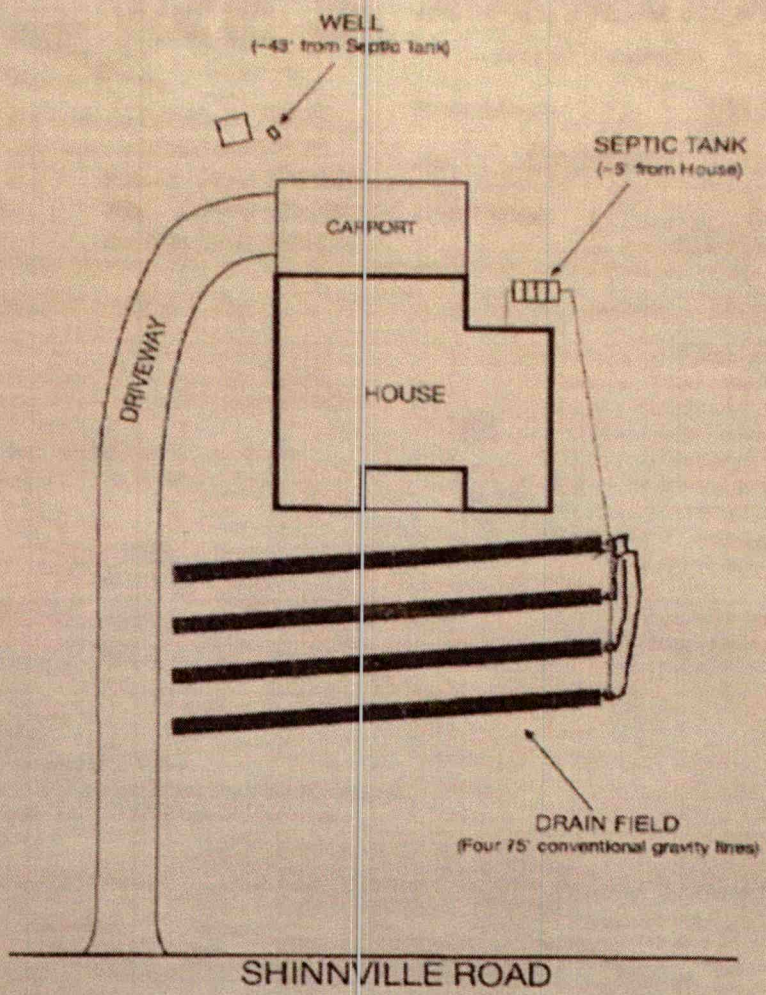
The drain field was replaced in 1995 with four 175-foot conventional gravity drain lines with a single distribution box. The drain lines and distribution device were functioning properly on the date of my inspection.

Thank you for the opportunity to serve you in this matter.

Sincerely,

J. C. Moore
NC Registered Sanitarian (Cert. #372) (32yrs)
Subsurface System Operator (Cert. #985357)
NC Onsite Wastewater Inspector (Cert. #12331)

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195 Shinnville Rd
Mooresville, NC 28117
2015 September 02
(Not to scale)

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