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IREDELL COUNTY HEALTH DEPARTMENT
Environmental Health Division
Application For Improvement Permit and/or Authorization To Construct, 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)

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 ___ Custom Site Plan, Scaled no more than 1 Inch = 60 Feet
Place check ( ) beside whichever is submitted if applicable

3. **Applicant Information:**

Anthony & Sylvia Poole | 9201 C Southern Pine Blvd Charlotte | 704-773-4426 | Leah Jason
Applicant Name | Mailing Address | Home Phone # | Alternate Phone #

Brian & Kristin Bradley | 143 Burrell Place Davidson | 704-650-7462 |
Owner Name | Mailing Address | Home Phone # | Alternate Phone #

4. **Property Information:**

143 Burrell Place, Davidson 28036 | Anniston | 60
Street Address | Subdivision Name | Section/Phase and Lot Number

Driving Directions: See Attached

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

( ) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
( ) Repair To Failing Septic System
( ) Other Inground Pool 20x37

Maximum Number of Bedrooms ___
Maximum Number of Occupants ___
If Expansion, Current Number of Bedrooms ___

( ) Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) Basement w/Plumbing?
( ) Basement w/out Plumbing?

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

****

7. **Desired Septic System Type:** *(You may rank in order of preference, if any)*

( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other_____ ( ) No Preference

****

8. **Please Answer The Following To The Best of Your Ability:**

( ) Yes ( ) No Does the site contain any jurisdictional wetlands?
( ) Yes ( ) No Is any non-domestic sewage (i.e. industry) 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.

9. Signature: _____ 4/7/15
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY HEALTH DEPARTMENT

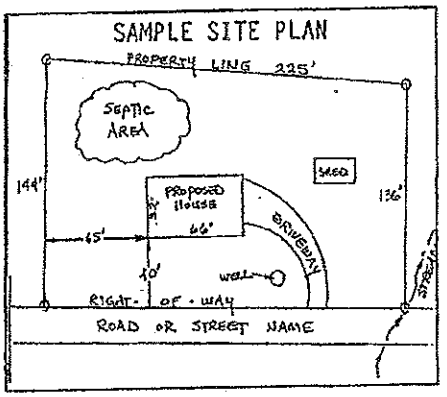
ENVIRONMENTAL HEALTH DIVISION

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

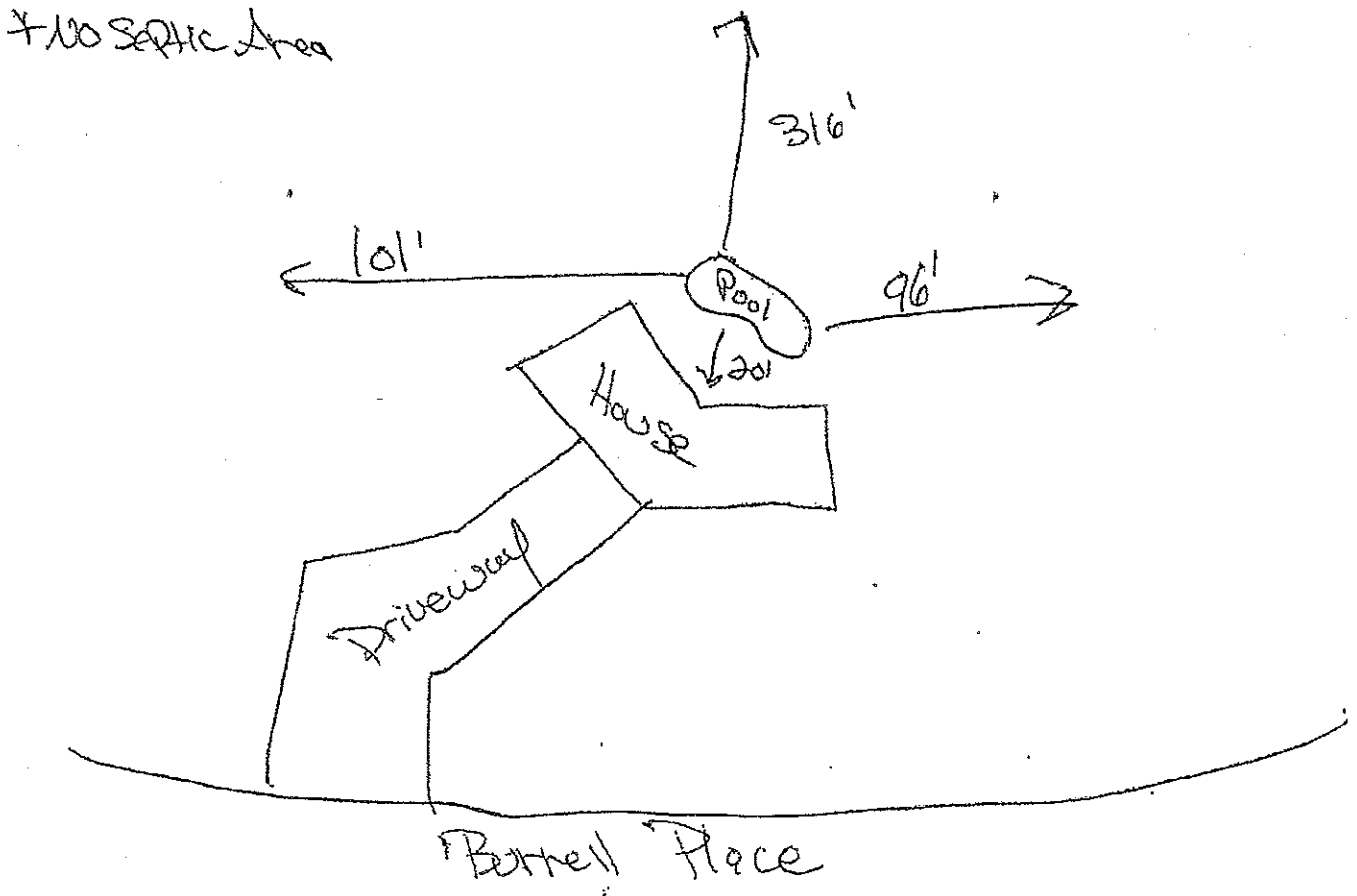


Circle N/A on the following if appropriate:

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



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

4/7/15
DATE

PRESSURE MANIFOLD SYSTEM
FOR WASTEWATER TREATMENT

Owner:	Annistion LLC
Address:	17824 Statesville Rd., Suite 112 Cornelius, NC 28031
Phone:	(704) 362-5007
County:	Iredell
Location:	ANNISTON LOT #60
Source of Wastewater Flow:	5 Bedroom Single Family Residence
Estimated Gallons Per Day Flow:	600
System Flow:	28.44

Design Specifications

Drainfield Size:	500
Loading Rate (gpd/ft.^{2}):	0.3
Depth of Gravel in Trench:	NA (25% reduction)
Gravel Size:	NA (25% reduction)
Trench Depth:	36 in.
Trench Width:	36 in.
Septic Tank Size:	1500 gal.
Pump Tank Size:	1500 gal.
Estimated Supply Line Length:	1254
Supply Line Diameter:	2 in. SCH 40 PVC
Supply Line Volume:	218.20
Dosing Volume:	228.55
Supply Manifold:	4 in. SCH 80 PVC
Supply Manifold Length:	4 ft. (minimum)
Supply Manifold Volume:	N/A
Recommended Float Controls:	SJE Sensor Float Control Switches as Required for Control Panel or County Approved Equivalents
Recommended Control Panel:	SJE-Rhombus Model 112 (NEMA 4x) Control Panel or County Approved Control Panel.
Pressure Head:	2 ft.
Friction Head:	22.32
Elevation Head:	60.00
Total Dynamic Head:	96.97
Threaded Union:	In Tank
Gate Valves:	1 in Tank 1 at Pressure Manifold
Check Valves:	In Tank
Anti-Siphon Hole:	NA
Additional Comments:	Soil suitability was performed by Rollans Soil & Environmental Services.

ANNISTON LOT #60
PRESSURE MANIFOLD DESIGN

DESIGN FLOW (gpd):	600
SOIL APPLICATION RATE (gpd/ft.^{2}):	0.3
TOTAL AREA TRENCH BOTTOM:	1500
TOTAL LATERAL LENGTH:	500
NUMBER OF FIELDS:	1
LATERAL LENGTH REQUIRED PER FIELD:	500
SUPPLY LINE LENGTH:	1254
TOTAL DYNAMIC HEAD:	96.97
MANIFOLD SIZE:	4 in.SCH 80 PVC
DOSING VOLUME:	228.55
PUMP TANK DRAW DOWN*:	7.4
SEPTIC TANK SIZE:	1500 gal.
PUMP TANK SIZE:	1500 gal.

**Pump tank draw down based on a volume basis of 31 gallons per inch. Draw down may vary among pump tank manufacturers.*

ANNISTON LOT #60

Project #: 01-1005

LAYOUT FOR 5 BEDROOM HOME — June 27, 2007

LINE #	FLAG COLOR	BS	HI	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM		7.1			100.00		
INSTR. 1			107.10				
HOUSE CNR					44.20		
P.TANK					48.70		
1	DARK PINK			2.90	104.20	66	66
2	***ORANGE***			***3.40***	***103.70***	***125***	***125***
3	PINK			4.00	103.10	79	79
4	***BLUE***			***4.50***	***102.60***	***187***	***125***
5	ORANGE			4.80	102.30	85	85
6	***RED***			***5.50***	***101.60***	***129***	***125***
7	DARK PINK			5.90	101.20	64	64
8	***PINK***			***6.30***	***100.80***	***169***	***125***
9	ORANGE			7.60	99.50	86	86
10	DARK PINK			8.80	98.30	71	71
11	BLUE			10.30	96.80	47	47
					Total	**1108**	**998**

	LINE LENGTH	LTAR GPD/FT^2	SYSTEM TYPE	SOIL LTAR GPD/FT^2	TRENCH SYSTEM	DISTRIBUTION
** System*	***500***	***0.30***	***ACCEPT.***	***0.30***	***25% RED.***	**PRESSURE MANIFOLD**
Repair	498	0.30	MOD.	0.30	PPBPS	LOW PRESSURE

Notes:

** Elevations for pump tank and house corner obtained from county topography.

** TBM located at top of ground. (see site plan)

**TBM is assumed to be 100'

**All measures in feet

**Nitrification lines are demonstrated on contour via colored pin flags

**BS, HI, and FS indicate rod readings

PRESSURE MANIFOLD TAPSHEET - ANNISTON LOT#60

SYSTEM

Line #	Color	Elevation	Length	Hole Size	Flow/Tap	Trench Area
2	ORANGE	103.70	125	SCH 40 1/2	7.11	375
4	BLUE	102.60	125	SCH 40 1/2	7.11	375
6	RED	101.60	125	SCH 40 1/2	7.11	375
8	PINK	100.80	125	SCH 40 1/2	7.11	375
	total	feet =	500	gal/min =	28.44	
			Des. Flow	600		
			Pump Run=	8.04		
			soil LTAR	0.3		
			LTAR +5%	0.315		
			LTAR with ACCEPTED	0.33075		
			LTAR with ACCEPTED + 5%	0.3472875		

CALCULATIONS

Location ANNISTON SUBDIVISION

Project Number 01-1005

Lot No: Lot 60

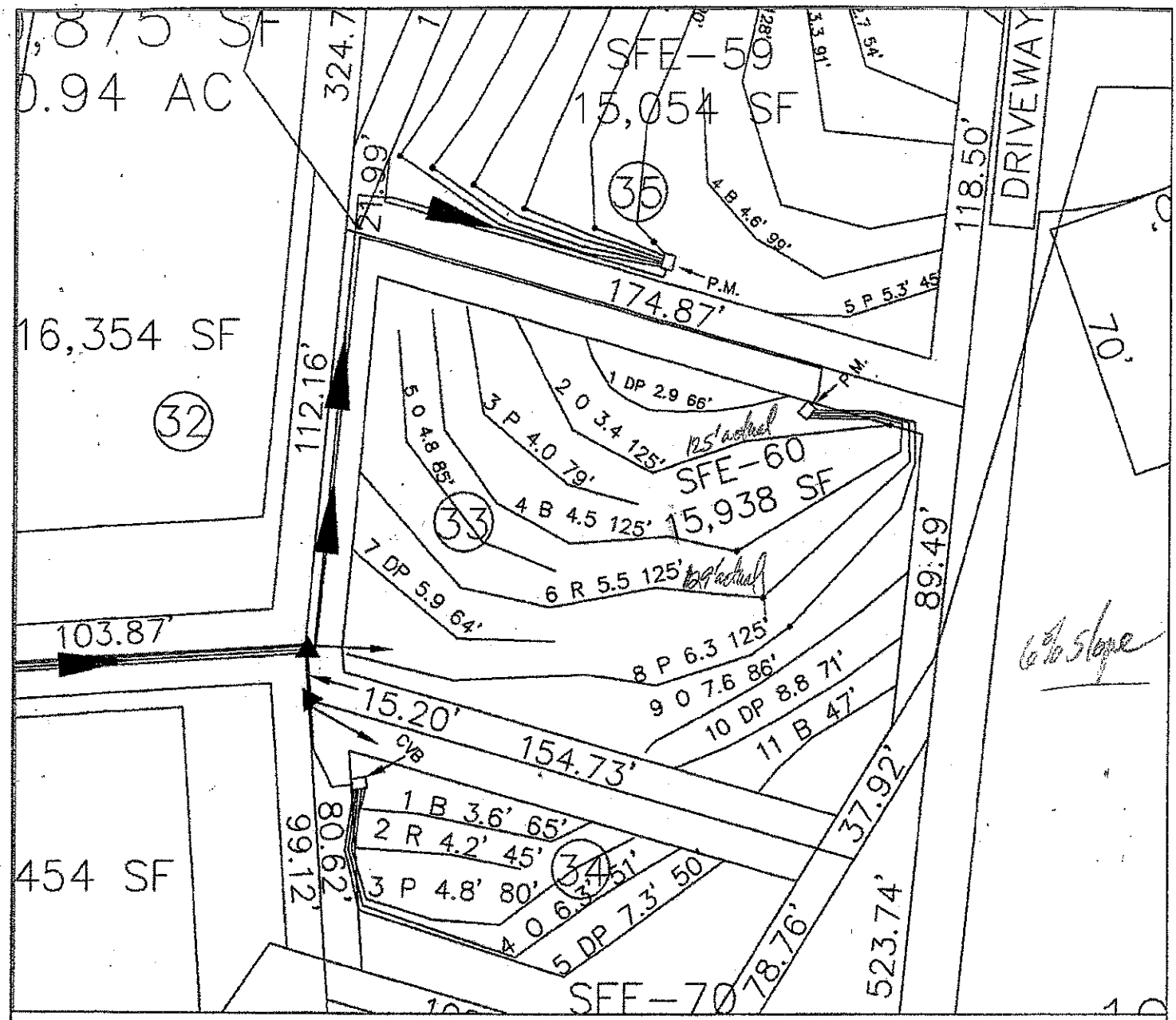
No. of Bedrooms	5	
Design Flow	600	$^{gal}/_{day}$
LTAR	0.3	$^{gpd}/_{ft^2}$
25% RED.? (YES OR NO)	YES	
Supply Line Length	1254	ft.
Supply Line Volume	218.196	gal.
Required Feet of Line	500	ft.
Amount of Line from Layout	500	ft.
Gallons per Minute	28.44	$^{gal}/_{min}$
Required Septic Tank Capacity	1500	gal.
Minimum Standard Tank Size	1500 gal.	
Lateral Line Volume	326.5	gal.
Dosing Volume	228.55	gal.

Note: Dosing Volume based on70% of lateral line volume

Tank Draw Down	7.4	*Genetic Draw Down of 31 gal.per in.*
Pump Run Time	8.04	minutes
Elevation Head	60	ft.
Pressure Head	2	ft.
Friction Factor	1.78	ft./100 ft. *(From the interpolater.)*
Friction Head	22.32	ft.
Total Dynamic Head (+15%)	96.97	ft.

FRICTION FACTOR INTERPOLATER
2" SCH 40 PVC

GPM	*f*
20	0.84
	-0.88
25	1.27
	-1.28
30	1.78
	-1.76
35	2.37
	-2.25
40	3.03
43.07	3.48
45	3.77
48.14	4.28
50	4.58
57.11	5.89
60	6.42



LEGEND

- Areas contain soils with 24 inches or more of useable material and have potential for conventional, modified conventional and low-pressure pipe (lpp) septic systems.
- House Footprint
- System lines.
- Repair lines.
- Temporary Bench Mark (TBM)
- Well Location. (25) Pit Location.

GRAPHIC SCALE
1" = 40'

40 0 40 80

FOR PRELIMINARY PLANNING PURPOSES ONLY. ALL LOTS WILL REQUIRE FINAL APPROVAL BY THE COUNTY HEALTH DEPARTMENT ON A LOT BY LOT BASIS. THIS MAP SHOULD BY USED AS A GENERAL GUIDE, SOME ADJUSTMENTS WILL BE NECESSARY IN THE FIELD DUE TO SOIL VARIABILITY AND COMPLEX TOPOGRAPHIC FEATURES. THIS MAP ONLY REFLECTS EXISTING SOIL SUITABILITY FOR ON-SITE SEPTIC TANK SYSTEMS.

PLEASE REFER TO ATTACHED SOIL REPORT FOR ADDITIONAL SITE SPECIFIC INFORMATION

ROLLANS SOIL & ENVIRONMENTAL SERVICES
2120 GRAHAM ROAD
MOUNT ULLA, NC 28125
PHONE/FAX: (704) 276-0989
ASHLEY ROLLANS, NC LICENSED SOIL SCIENTIST
MOBILE: (704) 746-5046
EMAIL: ROLLANSFORTC@AOL.COM

MAP TITLE: SITE PLAN & DRAINFIELD AREAS

PROJECT NAME: ANNISTON, LLC. / ANNISTON PHASE II

LOCATION/DATE: SHEARER CHAPEL ROAD, IREDELL COUNTY, NORTH CAROLINA, JULY 2006

JOB # : 01-1005
FILE: C:\JOBS\01-1005
PROJECT MGR.: S.A.R.
FIELD WORK: S.A.R.
DRAWN BY: S.A.R.

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PERMIT# 142162 / FT2101 PIN# 4664-66-7477.000

OWNER OR APPLICANT Anniston LLC Shaw Construction 4046478297 DATE July 25, 2007

ADDRESS 11825 Statesville Blvd Suite B2 Cornelius, NC 28031

LOCATION Edwards Rd South TL Anniston Way TR Barnett outlet before creek

SUBDIVISION Anniston BLOCK / SECTION LOT 60 LOT AREA 2.11ac±5,498SF SITE CLASS. PS SEE DESIGN FLOW 660gpd L.T.A.R. 143 .33 SFE-60

~~1200~~ Septic Tank: ~~1500~~ # Gallons: STB 338 Date 12-16-11

~~1500~~ Pump Tank: 1500 # Gallons: PT 477 Date 7-12

Pump Make: LIBERTY Model FL 200 Serial No. ZHP 400

Nitrification Field: No Fields 1 Square Feet 1500 Linear Feet ~~500~~

No Lines 4@25' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth WR ☐ Gravity ☒ Pressure

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

System Description: Pan 25% Reduction

Repair System Description: LF PIPES

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Persons ___ No. Employees ___

Water Supply: ☒ Individual ☐ Public ☐ Community

☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Comments/Conditions: 1/18/2012 Reviewed Floor plans.

* Per plan specs

Septic Tank & Pump Tank Locations may require slight adjustment

INITIAL SITE SKETCH

SEE Plan from Rollins Soil & Env Services

Comments/Conditions:

* See plan for revised ~~Tank~~ Supply line location

Now 4 Bedroom – 1000g Tanks & 400 FT Drainline 3

AS BUILT SKETCH

CHECKED LINES

CHECKED TANKS

SET @ PH

CHECKED ALARM

CHECKED ELEC

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: Dori Dailey

Improvement Permit by: ___ date 8-1-07

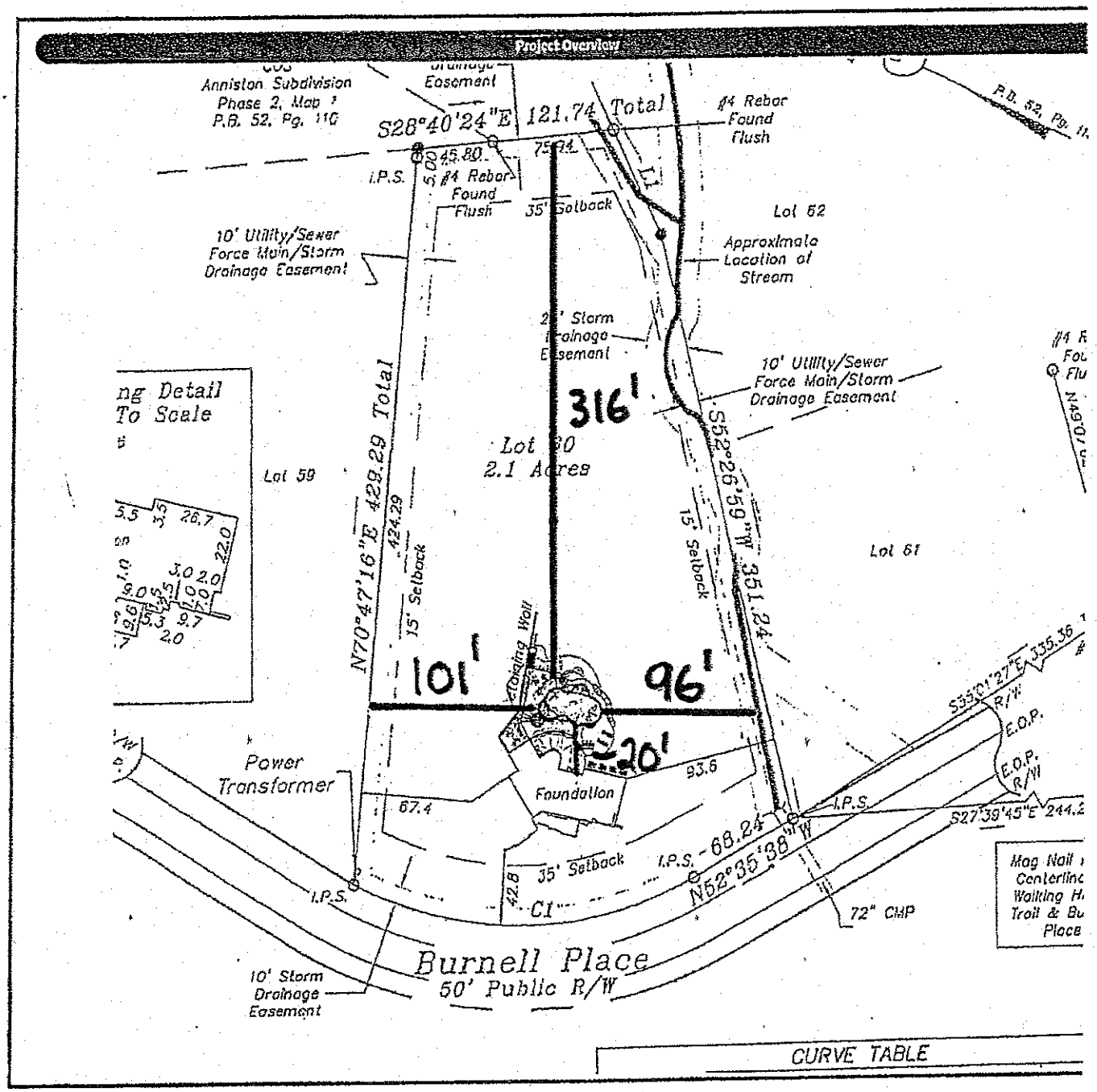
Authorization to Construct by: ___ date 7-25-07

Installed by: ABERNATHY

Operation Permit by: ___ date 4/18/2012

Existing System Inspection by: ___ date 1-3-13

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


Project Overview
Anniston Subdivision
Phase 2, Map
P.B. 52, Pg. 110
Drainage Easement
S28°40'24"E 121.74 Total
5.00
45.80
75.94
I.P.S.
#4 Rebar Found Flush
#4 Rebar Found Flush
35' Setback
Lot 62
10' Utility/Sewer Force Main/Storm Drainage Easement
Approximate Location of Stream
20' Storm Drainage Easement
10' Utility/Sewer Force Main/Storm Drainage Easement
316'
Lot 60
2.1 Acres
Lot 59
Lot 61
N70°47'16"E 429.29 Total
424.29
15' Setback
S52°26'59"W 351.24
15' Setback
101'
96'
Existing Wall
20'
93.6
Foundation
67.4
Power Transformer
42.8
35' Setback
I.P.S.
68.24
N52°35'38"W
I.P.S.
S33°01'27"E 335.36
R/W
E.O.P.
E.O.P. R/W
S27°39'45"E 244.2
72" CMP
Burnell Place
50' Public R/W
10' Storm Drainage Easement
CURVE TABLE