ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 326960

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

PIN # 4664 --68 --9159

APPLICANT/OWNER: Benfield Outdoor Service + Solutions APPLICANT ADDRESS: 939 Brawley School Mooresville NC

SITE ADDRESS: 225 Anniston Way Davidson NC 28036 PHONE: 704-3600326 ALT. PHONE

SITE DIRECTIONS: Coddle Creek Hwy to Johnston Dairy Q on Sherecorn 3/4 mile on Anniston SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Anniston SECTION: P2M1 LOT # 50 LOT AREA: .82 AC DESIGN FLOW: 480 L.T.A.R.: .25

Septic Tank	Existing	(gal)	STB	Ext	Date	Ext	☐ New System	☐ Repair	☐ Expansion	System Type: I II III (IV) V VI	☒ Residence	No. Bedrooms	4	Water Supply
Pump Tank	Existing	(gal)	PT	Ext	Date	Ext	System Description:	LPP-PBPS - 50% Reduction			☐ Business	No. Persons	8	☒ Private
Pump Make		Model			Serial #		Repair System Description:	Panel Block 50% Reduction			☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	*		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: * Keep Septic 15ft away from pool
* See notes Regarding System Design.

INITIAL SITE SKETCH

This permit is issued pursuant to Section 11 . (C) of S.L. 2018-114 using the signed and sealed LSS Evaluation by:

Benfield Outdoor Services + Solutions LLC.

LSS # 1258 Dated. 4/13/2022.

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.

Lowest line checked 8/16/22 BCW

Line floats, pressure, alarm, 8/16/22 DW

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: Benfield Outdoor Services Date: 6-7-22 Installed by: T4

IMPROVEMENT PERMIT by: Benjamin A Bolt Date: 6-1-2022 OPERATION PERMIT by: D. Mebane Date: 8/25/22

AUTHORIZATION TO CONSTRUCT by: Benjamin A Bolt Date: 6-1-2022. Existing System Inspected by: Date:

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

Item	Date	Initials
Drain Lines Checked		
Tanks Checked		
Pressure Manifold or Valve Box Checked		
Pressure Head Set		
Electrical Checked		
Floats Set		
Alarm Checked		
Maintenance Contract Needed? Y / N		
Comments:		

Repairs Only	
	State Code
Failing System Code	
Type of Distribution	G or P
Type of Failure/Malfunction	
Primary Cause of Failure/Malfunction	
Age of System? _____	
Initial or Repair? _____	

BENFIELD OUTDOOR SERVICES & SOLUTIONS

Benfield Outdoor Services & Solutions
Phone: (704) 360-0376
939 Brawley School Rd.
Mooresville, North Carolina 28117
Info@yardsbyboss.com
LLS: Miranda Stamper #1258

Iredell County Environmental Health Department
610 East Center Avenue
Mooresville, NC 28115
Phone: 704-664-5281
Fax: 704-664-9737

April 13, 2022

Recommended Wastewater Disposal System
Owner: Joanne and Joseph Widner
PIN: 4664689159.000

To whom it may concern,

You will find attached a copy of the wastewater disposal system proposed for the owners Mr. and Mrs. Joseph Widner. The lot of 50, PIN #4664689159.000 located on Anniston Way is in Iredell County. Also attached are the sealed soil notes, site plan and design for an onsite wastewater disposal system. This is submitted under Session Law 2018-114 (HB 374). Please review the attached proposal and contact me if you have any questions or concerns.

The LSS evaluation attached to this application is to be used to produce design and construction features for permitting in accordance with SL-2018-114 Section 11 (C).

Owner: Joanne and Joseph Widner

Signature: _____

Signature: _____

The LSS Evaluation is submitted pursuant to and meeting requirements of SL 2018-114 Section 11 (C)

Miranda Stamper, LSS

Signature: Miranda Stamper, LSS

LICENSED SOIL SCIENTIST
MIRANDA E. STAMPER
1258
STATE OF NORTH CAROLINA
4/13/22

LP PPBPS
Septic System Design

for

225 Anniston Way
Mooresville, North Carolina

Designed by:

Michael Benfield
Benfield Outdoor Services & Solutions, LLC
Mooresville, North Carolina
BOSS Project #: 1554

04/18/2022

225 Anniston Way
Table of Contents

Contact Information ---------- 1
Specifications (system) ---------- 2
Tap Chart (system) ---------- na
Site Plan (System) ---------- 4
Control Panel Specifications ---------- 5
Pump Specifications ---------- 7
Effuent Filter Specifications ---------- na
Supply Line Hydraulic Profile ---------- na

Attachments

Septic and Pumptank Details	Figure	1
Central Valve Box and Trench Details	Figure	2

225 Anniston Way
Contact Information

Client: Joanne & Joseph Widner
Attn:
Street Address: 225 Anniston Way
Davidson, NC
Phone: 631-404-9448
Email jaytjoseph@verizon.net

Designer: B.O.S.S.
Attn: Michael Benfield
Street Address: 939 Brawley School Rd.
Mooresville NC, 28117
Phone: 704-658-8616
Fax: na

225 Anniston Way

Layout/Design Specifications

Facility Type:	Single Family Home	
# of Bedrooms:	4	
Daily Flow:	480	**gal/day**
L.T.A.R.:	0.250	**gal/day/sq.ft**
Trench Depth:	32	**in MAX**
Trench Width:	24-36	**in**
Trench Pipe size:	1.25	**in**
Hole Diameter:	5/32	**in**
Number of Panels:	62	
CVB Length:	42	**in**
Manifold Diameter:	4	**in sch 80pvc**
Supply Line Length:	21	**ft**
Supply Line Diameter:	2	**in sch 40pvc**
Supply Line Volume:	22.10	**gallons**
Friction Loss + Fitting Loss:	1.68	**ft(supply line length + 70' for fittings in pump tank)**
Design Head:	2	**ft**
Elevation Head:	6.60	**ft**
Total Head:	10.28	**ft**
Dose Volume:	43.93	**gals**
% of Pipe Vol.	.75	
Drawdown:	2.18	**in @ 20.16 gal/in**
Pump Run Time:	1.76	**Minutes**
Control Panel:	SJE Rhombus Model112 control panel (or approved equivalent)	
Pump:	Zoeller5032-0008 High Flow (or approved equivalent)	
Tank Effluent Filter:	Zoeller 170-0144 residential effluent filter (or approved equivalent)	
Septic Tank:	1000	**gallon Shoaf**
Pump Tank:	1000	**gallon Shoaf**

LINE SCHEDULE				
LINE NUMBER	COLOR	FIELD ELEVATION	LENGTH (FT)	DESIGN LENGTH (FT)
1	RED	1.2	29	0
2	GREEN	1.9	46	0
3	PINK	2.6	77	50
4	ORANGE	3.1	88	50
5	RED	3.3	48	0
6	EXISTING Y	3.5	94	80
7	EXISTING P	4.5	93	66
8	EXISTING W	5.4	98	66
9	EXISTING B	6.3	75	44
10	YELLOW	7.2	54	0
11	GREEN	7.9	81	0
			TOTAL	TOTAL
			783	356

225 ANNISTON WAY, DAVIDSON NC.
SECTION 1, LOT 50 ANNISTON

4-BEDROOM LP-PPBPS INITIAL SYSTEM
ADD LINES 3-4A TO EXISTING
LINES 6-9 TOTAL 356 LINEAR FT (USE 320')
LTAR 0.25
50% REDUCTION 8-9' OC
30-32" TRENCH BOTTOM

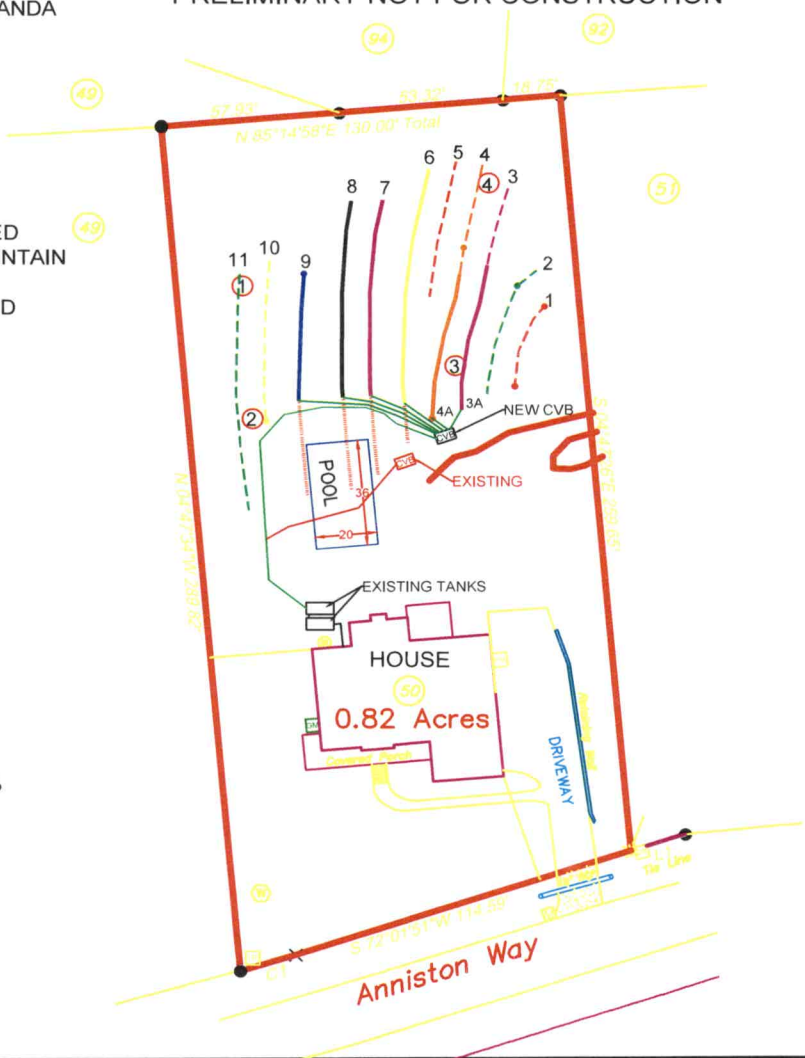
4-BEDROOM PANEL BLOCK REPAIR SYSTEM
LINES 1-2, 3B-4B, 5 10-11 TOTAL 321'
LTAR 0.25
27" TRENCH BOTTOM

FOR GENERAL USE NOT A SURVEY
PRELIMINARY NOT FOR CONSTRUCTION

Notes: SOIL INFORMATION PROVIDED BY LSS MIRANDA STAMPER

INSTRUCTIONS;
-REDUCE LINES 6-9 TOTALING 104'
-ADD NEW CVB
-ADD LINES 3A & 4A

CONDITIONS: MUST BE INSTALLED BY A LICENSED SEPTIC INSTALLER. DRAINFIELD AREA MUST MAINTAIN NATURAL CONTOURS & SLOPE. IMPROPER OR EXCESSIVE GRADING WILL VOID THIS DESIGN AND BOSS IS NOT LIABLE.



ADD LINE/PVC
INITIAL LINE
REPAIR LINE
REMOVE LINE

0 30 60
SCALE:
1" = 60 ft.

BOSS

Benfield Outdoor Services & Solutions, LLC
939 Brawley School Rd. Mooresville, NC 28117 Ph:704-360-0376
Info@yardsbyboss.com

JOANNE & JOSEPH WIDNER

LOT 50
ANNISTON SUBDIVISION
MOORESVILLE, NC
IREDELL COUNTY

DATE: 5/18/22 DRAWN BY: MDB CHECKED BY: MES

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

Sheet 1 of 1

PROPERTY ID #:
DATE OF EVALUATION: 4/7/22
COUNTY: Iredell

225 Anniston Way Job#1554

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
B1	3%	0-4	SCL SBK	SS NP FR	wetness free water @ 39"	47"			PS 0.3
		4-39	C SBK	S SP FI					
		39-47	C GR	S SP FI					
B2	3%	0-39	C SBK	NS SP FI	wetness 39"	39"	-		PS 0.3
B3	3-4%	0-29	C SBK	NS P FI		44"	SAP-1		PS 0.3
		29-44	CL GR/SBK	NS NP FR					
B4	3-4%	0-26	CL SBK	NS SP FR		44"	-		S 0.3
		26-44	C SBK	SS SP FI					

LICENSED SOIL SCIENTIST
MIRANDA E. STAMPER
1258
4/8/22
STATE OF NORTH CAROLINA

COMMENTS:

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*) _____

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, Joanne and Joseph Widner, am the legal owner(s) of the property located at 225 Anniston Way, Davidson, NC 28036, identified as

PIN (Parcel Identification Number) 4664689159.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Benfield Outdoor Services & Solutions, 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.

_____ 4/11/22
Signature of Owner(s) Date

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

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

IREDELL COUNTY · NC

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

APPLICATION NUMBER
326960 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4664689159.000	225 ANNISTON WAY	IREDELL COUNTY

Owner Information	Applicant Information
Name: JOSEPH WIDNER M+JOANNE	Name: BENFIELD OUTDOOR SERVICES AND SOLUTIONS
Address:	Address: 137 MISTY ARBOR LN MOORESVILLE, NC 28117
Phone:	Phone: (704)658-8616

Use Requested	Zone Code
SWIMMING POOL	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.82	0	10	10	10	N/A	NO

Remarks

INGROUND POOL *need relocation

Swimming Pool: Must meet requirement R22 of the LDC. Pools shall be located to comply with minimum setbacks for accessory structures- located behind front building line of house, 10' from side & rear property line. Lake lots must meet the 50' setback from the 760 contour line AND the 35' setback from the rear property line. Pools that are not an integral part of the principal building shall be located at least the minimum distance from the principal building necessary to comply with N.C. Building Code. Setback from house could be +/-10'. Fenced with a minimum 4' in height, and equipped with self-closing and positive self-latching gate provided with hardware for permanent locking. Fence not required for above ground pools if they are at least 4' in height, the ladder removed, or when NOT in use have a gate to the ladder as described above.

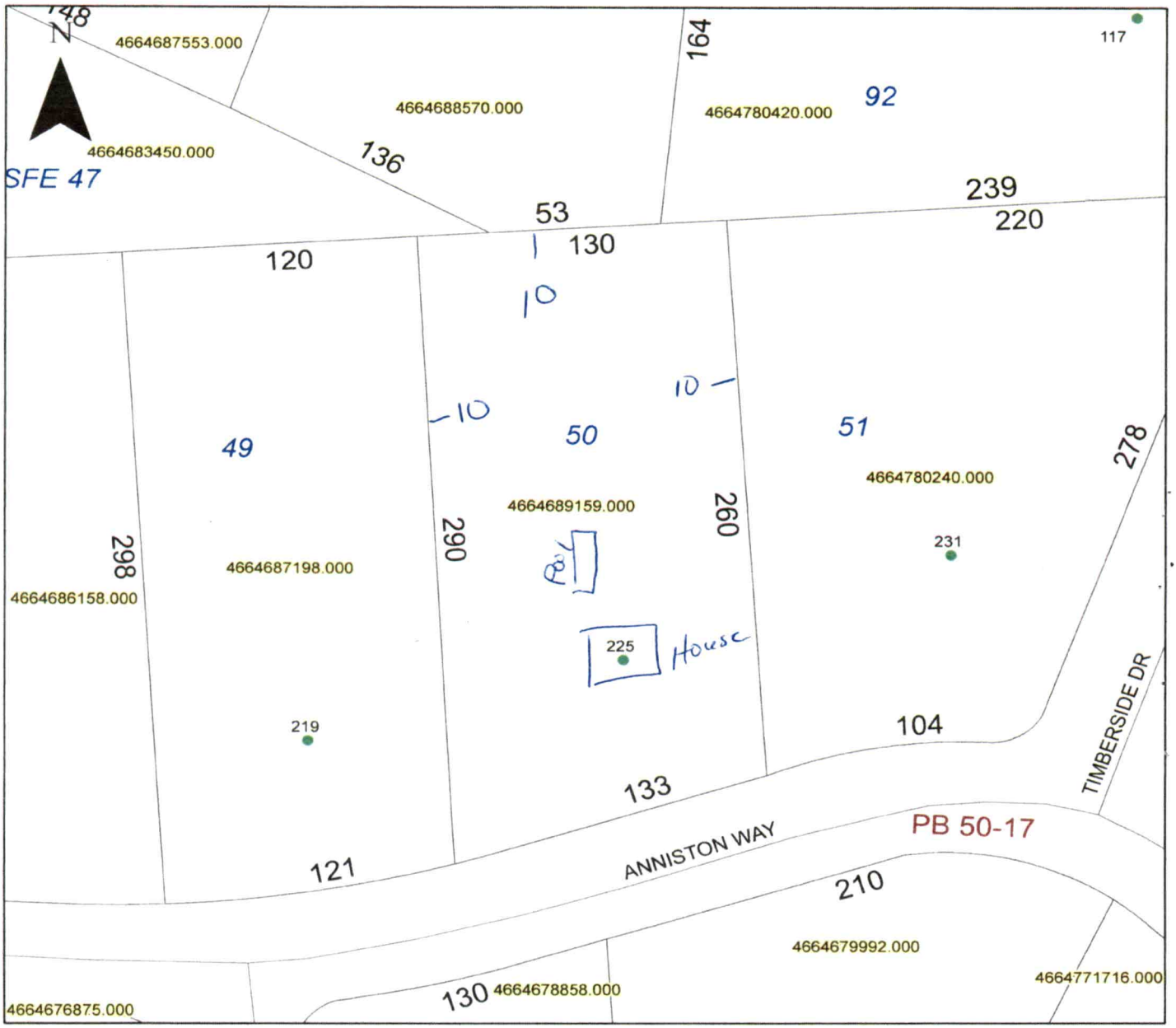
The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions, plat conditions and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

Date: 04/21/2022

Signature of Owner/Contractor

Permit Number	326960	TOTAL FEES:	$77.25

ZONING DISCLAIMER



Property Address 225 Anniston Way

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. Applicant further acknowledges that the 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

4/21/22
Date

RECEIVED APR 2 2 2022

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

S.L. Relocation

APPLICATION FORM AP-326960 $500.00

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) 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, 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: Benfield Outdoor Service and Solutions **Address:** 939 Brawley School, Mooresville, NC **Zip:** 28117

Applicant Email: info@yardsbyboss.com **Phone:** 704-360-0376 **Alt. Phone:**

Owner Name: Joanne and Joseph Widner **Address:** 225 Anniston Way, Davidson, NC 28036 **Zip:** 28036

Owner Email: jaytjoseph@verizon.net **Phone:** 631-404-9448 **Alt. Phone:**

Property Information:

Street Address: 225 Anniston Way, Davidson, NC 28036

Subdivision Name: Anniston **Section/Phase:** P2 M1 **Lot Number:** 50

Driving Directions: Take Coddle Creek Hwy south, turn right onto Johnston Dairy Rd, turn left on Shearers Rd, go about 3/4 mile and turn left onto Anniston Way

go about 1/2 a mile and the house will be on the left

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

CHECK FOUNDATION TYPE

( ) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem:

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 8
(X) Swimming Pool
( ) Other Addition/Structure:

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

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:
( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional (X) 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: _____ 4-19-22
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**

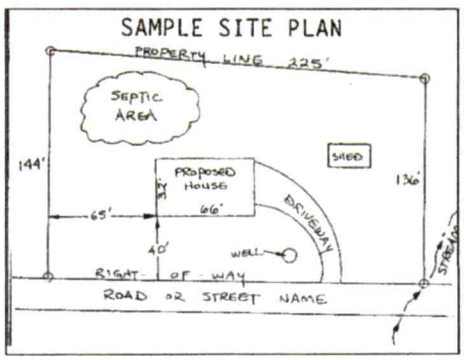
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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 OR WELL PERMIT!!!*

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

- (X) **Property Line measurements are clearly identified**
- (X) **All proposed structures are indicated**
- (X) **Front and side setbacks from property line**
- (X) **Preferred driveway location**
- (X) **Preferred well location**
- (X) **Preferred septic system location**
- (X) **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: _____ 4-19-22

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