Paid $195.00 5-13-14
Int. Relayout

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAGE 1: *APPLICATION FORM*

Application For:
(X) Septic Improvement Permit ( ) New Well Permit ( ) Authorization to Construct ( ) Well Repair Permit ( ) Existing System Inspection ( ) Well Abandonment ( ) 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:
Place an (X) *beside whichever is submitted if applicable*
( ) Survey Plat, scaled no more than 1 inch = 60 feet
( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information:

Applicant Name: Sher Homes **Address:** 8008 Corporate Center Dr. Ste 300 Charlotte NC **Phone:**

Owner Name: Same **Address:** **Phone:**

Property Information:

Street Address: 105 Overlook Ridge Ln

Subdivision Name: Anniston **Section/Phase:** **Lot Number:** 154

Driving Directions: Shearers, TL Anniston Way, TR Burnett, TL Walking Horse, TR Over look Ridge, on Lt on Corner

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
Maximum Number of Occupants:
( ) 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:
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:**
( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional (X) Other: Accepted

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

5/12/2014
DATE

IREDELL COUNTY HEATLH DEPARTMENT

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…**
SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site
____ **Front and side setbacks from property line…**
____ **Preferred driveway location and configuration, preferred 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:

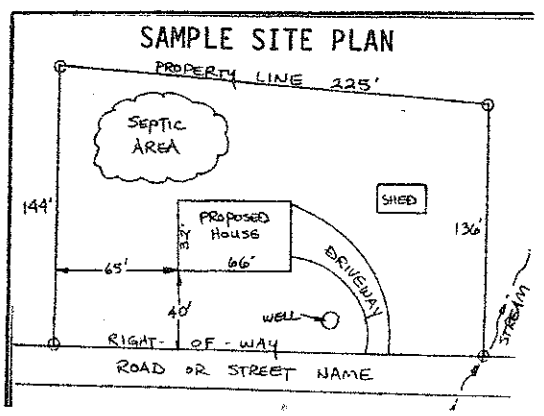
____ **Location of septic systems and wells within 100' of your property…** **N/A**
____ **Location of easements and rights of ways on your property…** **N/A**
____ **Location of any designated wetlands on the property…** **N/A**

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

5/12/2014
DATE

USE THIS SPACE TO DRAW YOUR SITE PLAN

See Attached Plan





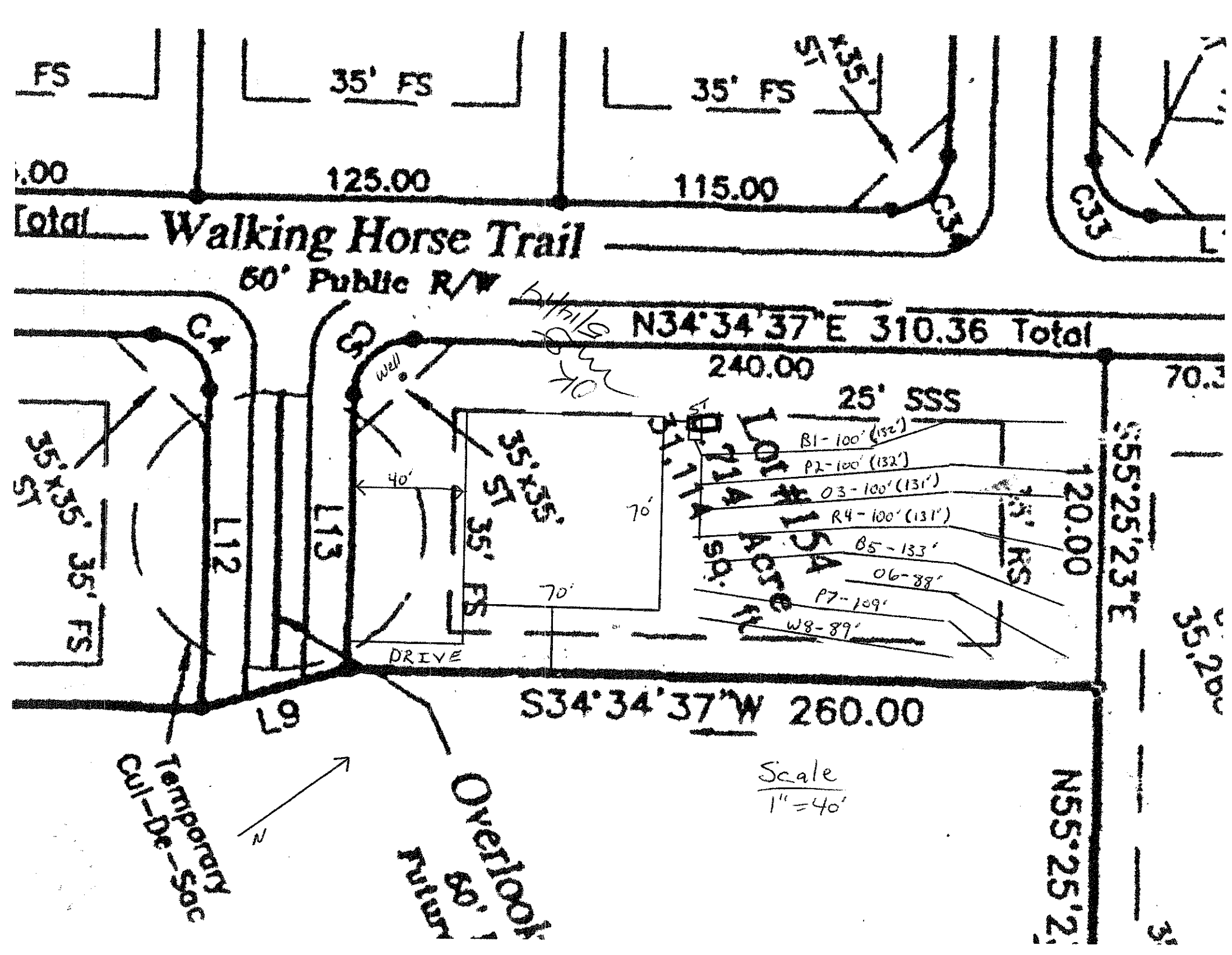
MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887

Reference: Anniston SD, Lot 154
House Footprint: 70' x 70'
Building Setbacks: 35' front/rear, 25' side street, 15' side
Water Source: Private well
Number of Bedrooms: 4/480 GPD/FT2
Predetermined LTAR: 0.3 GPD/FT2 (ICHD)
Proposed System Type: 25% Reduction
Proposed Repair System Type: 25% Reduction
Distribution: Drop Boxes/End cap
Septic Tank Size: 1000 gallons
Proposed Trench Bottom: 24-36"

Line	Design Length	Actual Length
Blue 1	**100'**	**132'**
Pink 2	**100'**	**132'**
Orange 3	**100'**	**131'**
Red 4	**100'**	**131'**
Blue 5		133'
Orange 6		88'
Pink 7		109'
White 8		89'

Initial System: 400' **Repair System:** 419'

Comments:
This lot is currently permitted as a five bedroom PPBPS. M A & Associates is proposing a change to a four bedroom 25% reduction. The soils were approved by ICHD. No new soil observations were made.


FS
35' FS
35' FS
.00
125.00
115.00
Total
Walking Horse Trail
60' Public R/W
C1
C2
C3
C33
N34°34'37"E 310.36 Total
240.00
25' SSS
well
35' x 35' ST
35' FS
40'
70'
L12
L13
L9
DRIVE
Lot 1
1.114 Acre
sp.
BI - 100' (132')
P2 - 100' (132')
03 - 100' (131')
R4 - 100' (131')
B5 - 133'
06 - 88'
P7 - 109'
W8 - 89'
120.00
S34°34'37"W 260.00
N55°25'23"E
Temporary
Cul-De-Sac
Overlook
Scale
1" = 40'
N

RECEIVED APR 2 9 2014

704-
622-7444

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
Application for IMPROVEMENT PERMIT, AUTHORIZATION TO CONSTRUCT, or 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 _X_ 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
Place check ( ) beside whichever is submitted if applicable ___ Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. Applicant Information:

Shea Builders	8008 Corporate Center Drive, #300, Charlotte, NC 28226	(704) 319-5000	(704) 825-0533 x 107
Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Shea Builders	8008 Corporate Center Drive, #300, Charlotte, NC 28226	(704) 319-5000	(704) 825-0533 x 107
Owner Name	Mailing Address	Home Phone #	Alternate Phone #

4. Property Information:

105 Overlook Ridge Lane, Davidson, NC 28036	Anniston	Phase 4, Map 1, Lot 154
Street Address	Subdivision Name	Section/Phase and Lot Number

Driving Directions: I-77 South to Exit 30; turn right off ramp and travel approximately 1.1 miles to stoplight; turn left at stoplight onto Hwy 115 and travel approximately 1.1 miles; turn right onto Presbyterian Road and travel approximately 2.4 miles to a stop sign; turn right onto Shearers Road and Anniston is .1 mile on the left.

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

(X) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
( ) Repair To Failing Septic System
( ) Other

Maximum Number of Bedrooms 4
Maximum Number of Occupants ___
If Expansion, Current Number of Bedrooms ___

( ) Crawl Space Foundation?
( ) Concrete Slab Foundation?
(X) 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:

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

9. Signature: Cynthia Blondino
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

April 24, 2014
DATE

IREDELL COUNTY HEATLH 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:

- X — Property Line measurements are clearly identified...
- X — All proposed structures are indicated...
  SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site
- X — Front and side setbacks from property line...
- X — Preferred driveway location and configuration, preferred well location...
- X — Area you prefer your septic system to be placed...
- X — North arrow, or other sufficient indicator of direction...

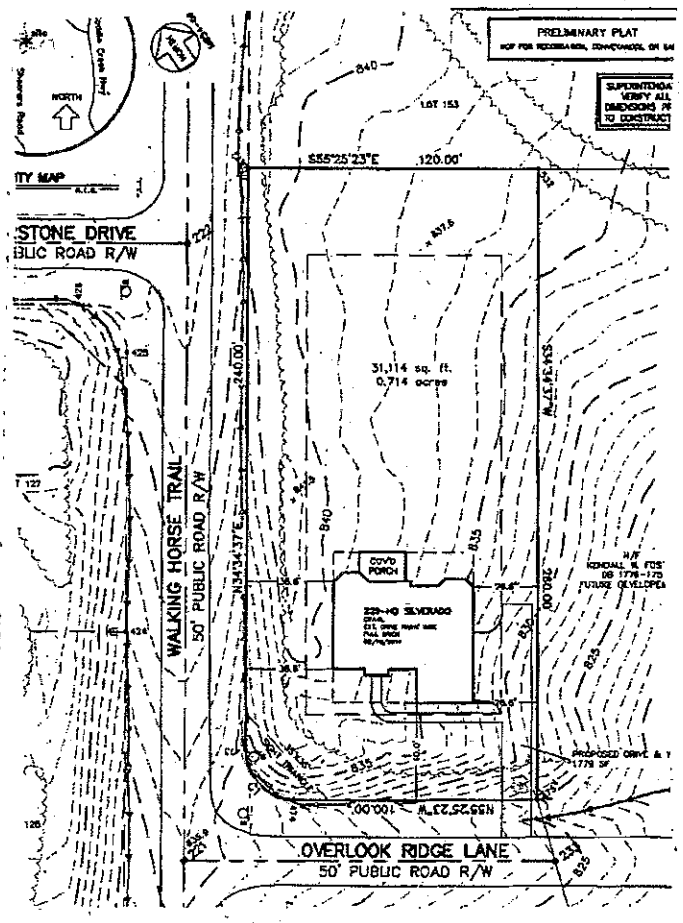
Circle N/A on the following if appropriate:

- X — Location of septic systems and wells within 100' of your property... N/A
- X — Location of easements and rights of ways on your property... N/A
- X — Location of any designated wetlands on the property... N/A

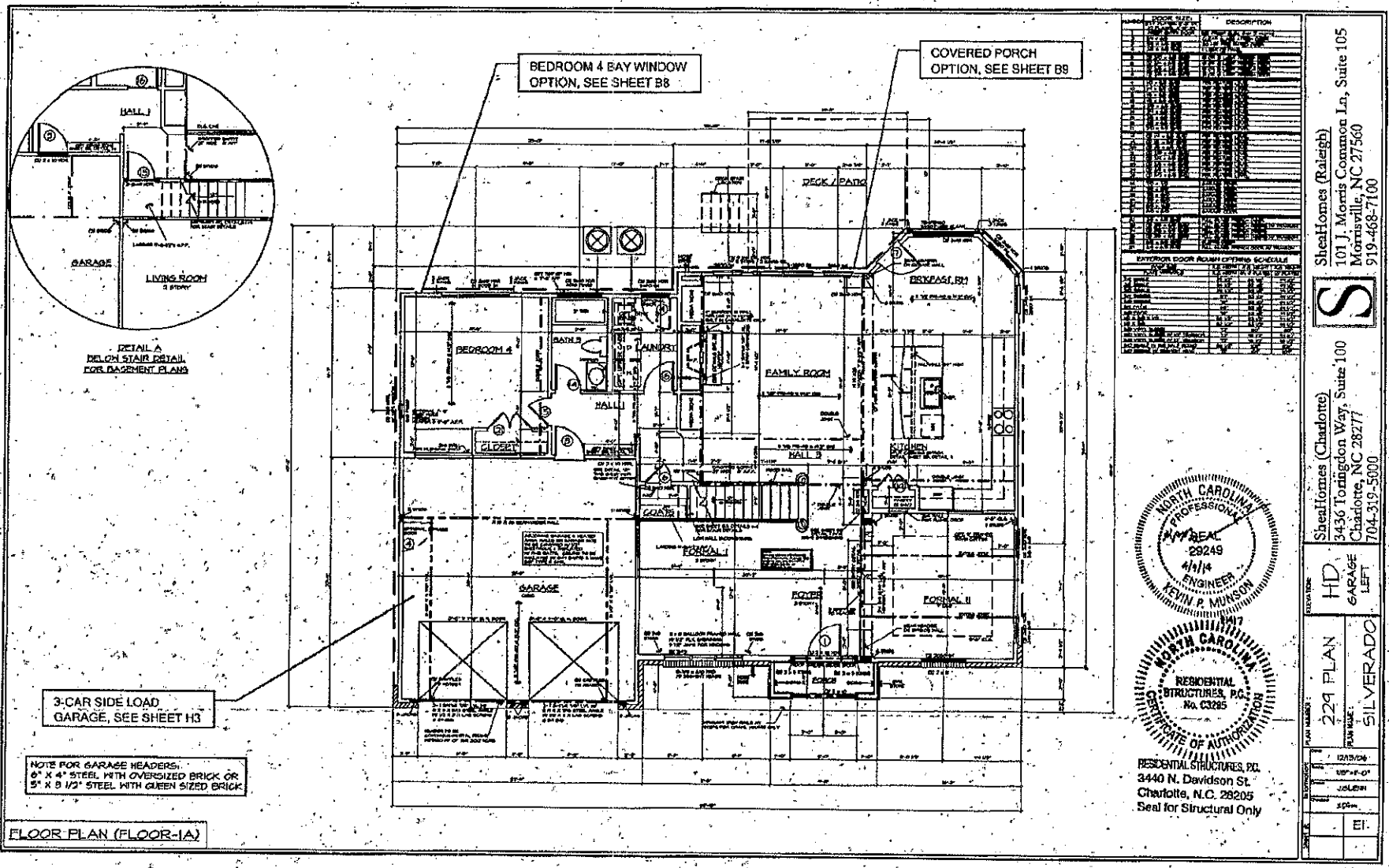
Signature: Cynthia Blanding
REQUIRED property owner or owner's legal representative signature.

April 24, 2014
DATE

USE THIS SPACE TO DRAW YOUR SITE PLAN



White Copy – Environmental Health Yellow Copy – Applicant
C:\Users\dlutz\AppData\Local\Microsoft\Windows\Temporary Internet Files\OLK83F0\Application For OSWP Permit (2).doc


BEDROOM 4 BAY WINDOW OPTION, SEE SHEET B8
COVERED PORCH OPTION, SEE SHEET B9
DETAIL A
DELON STAIR DETAIL FOR BASEMENT PLANS
3-CAR SIDE LOAD GARAGE, SEE SHEET H3
NOTE FOR GARAGE HEADERS:
6" X 4" STEEL WITH OVERSIZED BRICK OR
5" X 8 1/2" STEEL WITH QUEEN SIZED BRICK
FLOOR PLAN (FLOOR-1A)
DOOR SIZE
DESCRIPTION
EXTERIOR DOOR ROUGH OPENING SCHEDULE
NORTH CAROLINA PROFESSIONAL SEAL 29249 ENGINEER KEVIN P. MUNSON
NORTH CAROLINA RESIDENTIAL STRUCTURES, P.C. No. C3295 CERTIFICATE OF AUTHORIZATION
RESIDENTIAL STRUCTURES, PC.
3440 N. Davidson St.
Charlotte, N.C. 28205
Seal for Structural Only
SheaHomes (Raleigh)
101 J. Morris Common Ln, Suite 105
Morrisville, NC 27560
919-468-7100
SheaHomes (Charlotte)
3436 Toringdon Way, Suite 100
Charlotte, NC 28277
704-319-5000
ELEVATION
HD
GARAGE LEFT
PLAN NUMBER:
229 PLAN
PLAN NAME:
SILVERADO
12/15/06
1/8"=1'-0"
JOB NO.
SCALE
EL

IREDELL COUNTY

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

APPLICATION NUMBER
203061
Issue Date: 04/28/2014

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4664970874.000	105 OVERLOOK RIDGE LANE, DAVIDSON, NC 28036	DAVIDSON

Owner Information	Applicant Information
Owner: GIBRALTAR RESIDENTIAL I LLC	Applicant: SHEA BUILDERS LLC
Address: 119 IREDELL CO, NC 28625	Address: 8008 CORPORATE CENTER DR STE 300 CHARLOTTE, NC 28226
Phone:	Phone: 704-319-5000

Use Requested	Zone Code
SFD THIS PERMIT REPLACES PERMIT 148560	

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.710	35.00	35.00	15.00	25.00	NO	X

Remarks:

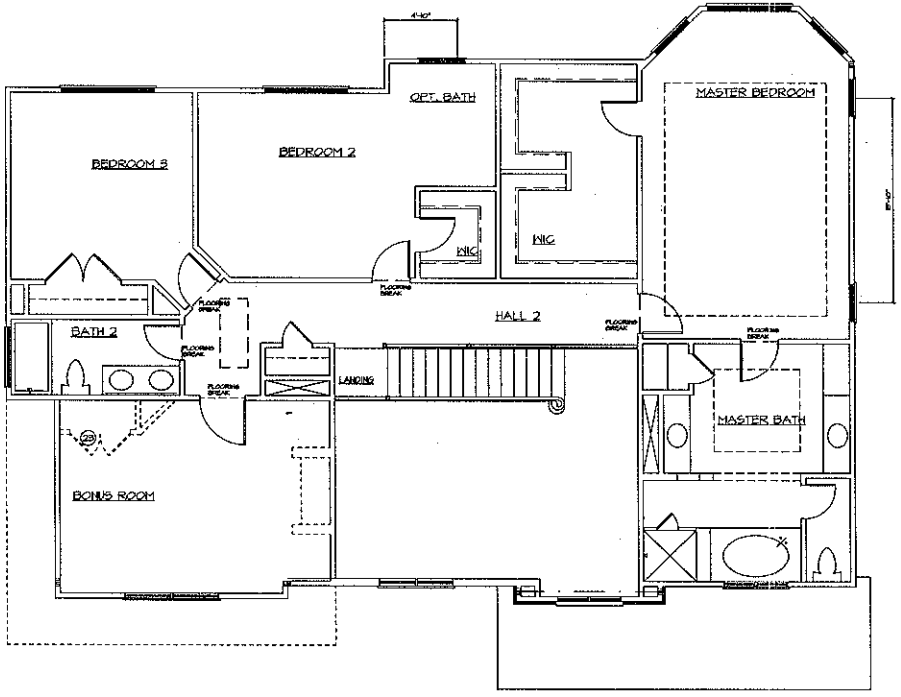
PAID
141915
4-28-14

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	10668	TOTAL FEES:	$ 77.25

Acknowledgement Of
Plans Submittal ONLY!
Maria Dotson Date 5/7/14
Date



FLOORING BREAKS

FLOOR PLAN (FLOOR-2A)

SheaHomes (Raleigh)
101 J. Morris Common Ln, Suite 105
Morrisville, NC 27560
919-468-7100

SheaHomes (Charlotte)
3436 Toringdon Way, Suite 100
Charlotte, NC 28277
704-319-5000

ELEVATION: BASE COMMON GARAGE LEFT

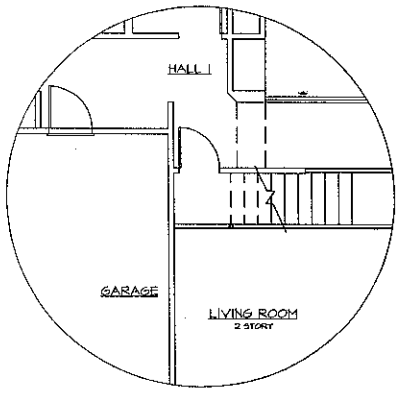
PLAN NUMBER: 229 PLAN

PLAN NAME: SILVERADO

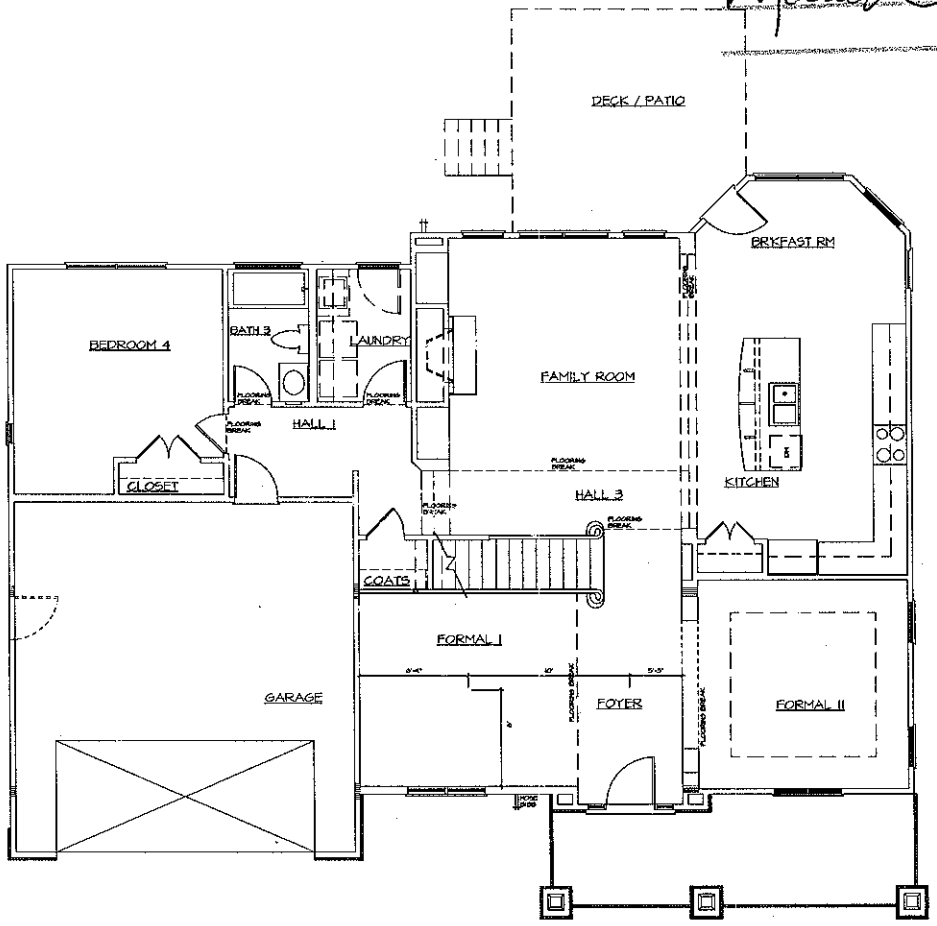
Submission: Date 12/13/06
Scale 1/8"=1'-0"
Drawn J.GLENN
Checked CAD

Sheet # B15

Acknowledgement Of
Plans Submittal ONLY
Maria Dotse Date 5/7/14
Date



DETAIL A
BELOW STAIR DETAIL
FOR BASEMENT PLANS



FLOORING BREAKS

FLOOR PLAN (FLOOR-1A)

SheaHomes (Raleigh)
101 J. Morris Common Ln, Suite 105
Morrisville, NC 27560
919-468-7100

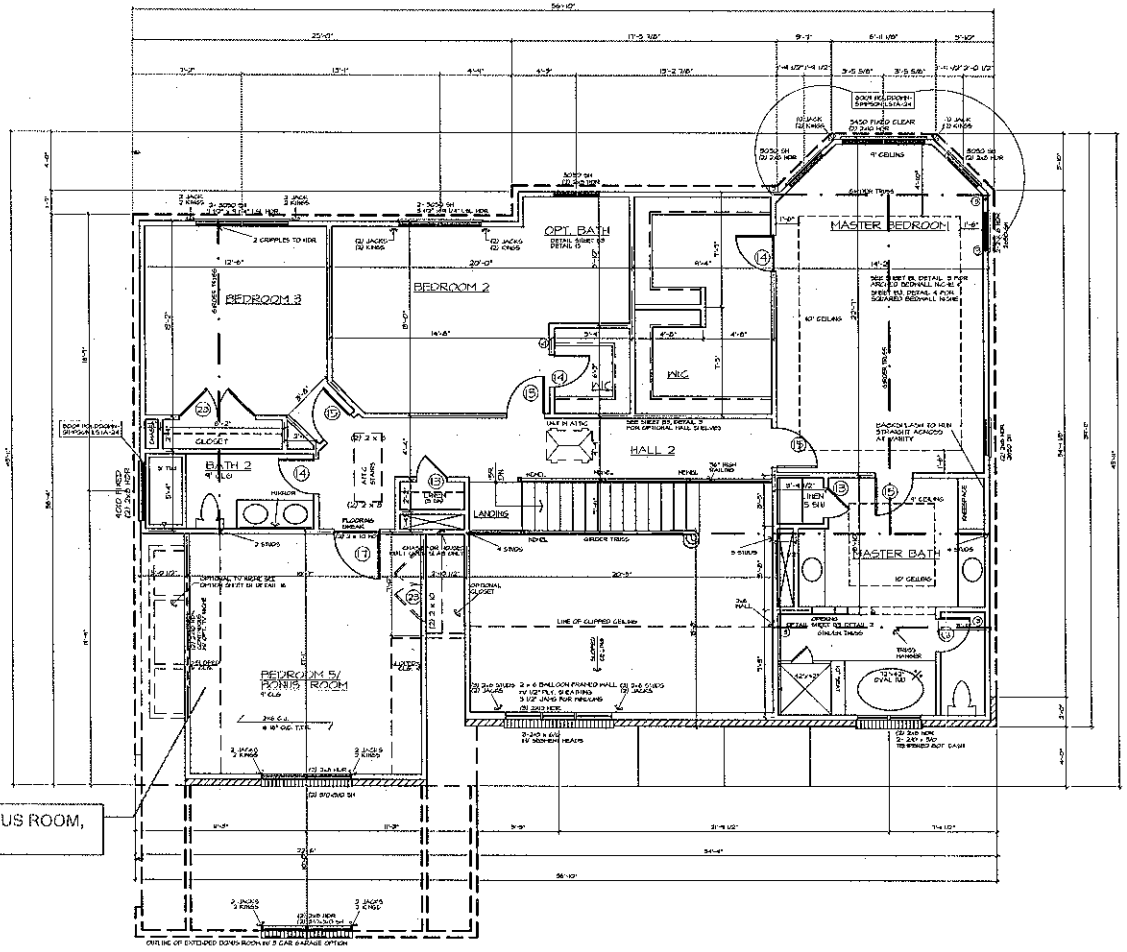
SheaHomes (Charlotte)
3436 Toringdon Way, Suite 100
Charlotte, NC 28277
704-319-5000

ELEVATION:	BASE COMMON GARAGE LEFT
PLAN NUMBER:	229 PLAN
PLAN NAME:	SILVERADO
Date:	12/13/06
Scale:	1/8"=1'-0"
Drawn:	J.GLENN
Checked:	CAD
Sheet #	B14

RECEIVED MAY - 1 2014

Acknowledgement Of
Plans Submittal ONLY!
Date 5/1/14

Date



FLOOR PLAN (FLOOR-2A)

NORTH CAROLINA PROFESSIONAL SEAL 29249 4/1/14 ENGINEER KEVIN P. MUNSON

NORTH CAROLINA RESIDENTIAL STRUCTURES, P.C. No. C3295 CERTIFICATE OF AUTHORIZATION

RESIDENTIAL STRUCTURES, P.C.
3440 N. Davidson St.
Charlotte, N.C. 28205
Seal for Structural Only

SheaHomes (Raleigh)
101 J. Morris Common Ln, Suite 105
Morrisville, NC 27560
919-468-7100

SheaHomes (Charlotte)
3436 Toringdon Way, Suite 100
Charlotte, NC 28277
704-319-5000

ELEVATION: HD GARAGE LEFT

PLAN NUMBER: 229 PLAN

PLAN NAME: SILVERADO

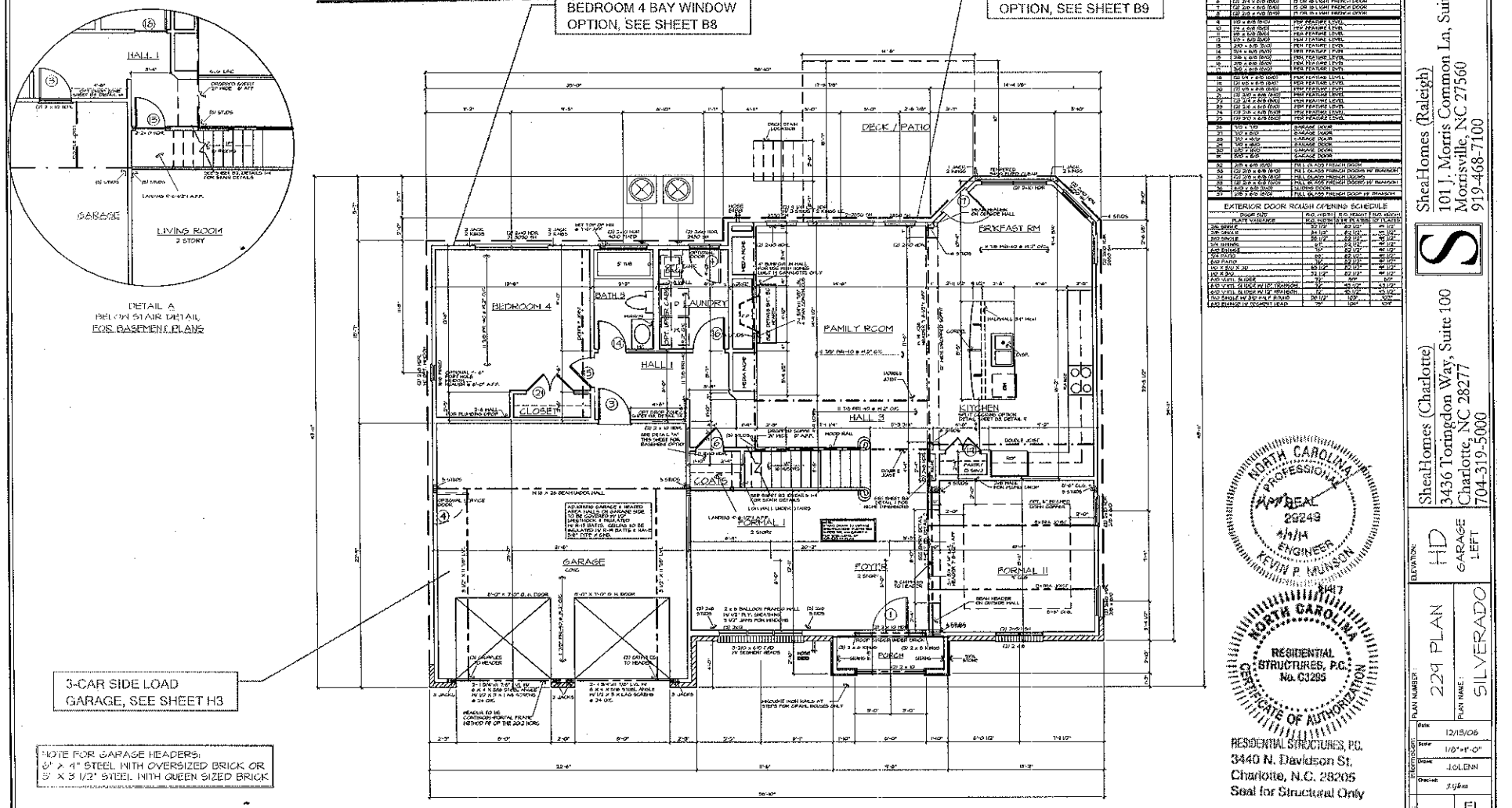
Date: 12/18/06
Scale: 1/8"=1'-0"
Drawn: J.GLENN
Checked: T.Tyson

Sheet #: E2

RECEIVED MAY - 1 2014

Acknowledgement Of
Plans Submittal ONLY!
Maria Dolan Date 5/7/14

Date



NUMBER	DOOR SIZE WIDTH x HEIGHT x THICKNESS	DESCRIPTION
1	3'-0" x 6'-8" x 1 3/4"	SOLID CORE FIRST DOOR
2	10'-0" x 8'-0"	SECTIONAL GARAGE DOOR
3	2'-6" x 6'-8" (30/20)	SOLID CORE DOOR
4	2'-8" x 6'-8" (32/20)	SOLID CORE DOOR
5	2'-6" x 6'-8" (30/20)	SOLID CORE DOOR
6	2'-0" x 6'-8" (24/20)	SOLID CORE DOOR
7	2'-6" x 6'-8" (30/20)	SOLID CORE DOOR
8	(2) 2'-0" x 6'-8" (48/20)	15 OR 10 LIGHT FRENCH DOOR
9	(2) 2'-4" x 6'-8" (56/20)	15 OR 10 LIGHT FRENCH DOOR
10	(2) 2'-6" x 6'-8" (60/20)	15 OR 10 LIGHT FRENCH DOOR
11	(2) 2'-8" x 6'-8" (64/20)	15 OR 10 LIGHT FRENCH DOOR
12	1'-0" x 6'-8" (12/20)	FIRE FEATURE LEVEL
13	1'-4" x 6'-8" (16/20)	FIRE FEATURE LEVEL
14	1'-6" x 6'-8" (18/20)	FIRE FEATURE LEVEL
15	2'-0" x 6'-8" (24/20)	FIRE FEATURE LEVEL
16	2'-0" x 6'-8" (24/20)	FIRE FEATURE LEVEL
17	2'-4" x 6'-8" (28/20)	FIRE FEATURE LEVEL
18	2'-6" x 6'-8" (30/20)	FIRE FEATURE LEVEL
19	2'-8" x 6'-8" (32/20)	FIRE FEATURE LEVEL
20	3'-0" x 6'-8" (36/20)	FIRE FEATURE LEVEL
21	3'-0" x 6'-8" (36/20)	FIRE FEATURE LEVEL
22	(2) 2'-0" x 6'-8" (48/20)	FIRE FEATURE LEVEL
23	(2) 2'-4" x 6'-8" (56/20)	FIRE FEATURE LEVEL
24	(2) 2'-6" x 6'-8" (60/20)	FIRE FEATURE LEVEL
25	(2) 2'-8" x 6'-8" (64/20)	FIRE FEATURE LEVEL
26	9'-0" x 7'-0"	GARAGE DOOR
27	16'-0" x 7'-0"	GARAGE DOOR
28	9'-0" x 8'-0"	GARAGE DOOR
29	16'-0" x 8'-0"	GARAGE DOOR
30	9'-0" x 8'-0"	GARAGE DOOR
31	16'-0" x 8'-0"	GARAGE DOOR
32	2'-8" x 6'-8" (32/20)	FULL GLASS FRENCH DOOR
33	(2) 2'-0" x 6'-8" (48/20)	FULL GLASS FRENCH DOORS W/ TRANSOM
34	(2) 2'-4" x 6'-8" (56/20)	FULL GLASS FRENCH DOORS W/ TRANSOM
35	(2) 2'-6" x 6'-8" (60/20)	FULL GLASS FRENCH DOORS W/ TRANSOM
36	(2) 2'-8" x 6'-8" (64/20)	FULL GLASS FRENCH DOORS W/ TRANSOM
37	2'-8" x 6'-8" (32/20)	FULL GLASS FRENCH DOOR W/ TRANSOM

EXTERIOR DOOR ROUGH OPENING SCHEDULE

DOOR SIZE PLATE VARIANCE	R.O. WIDTH	R.O. HEIGHT
2/6 GARAGE	2'-1 1/2"	6'-2 1/2"
2/8 GARAGE	2'-1 1/2"	6'-2 1/2"
3/0 SINGLE	3'-1 1/2"	6'-2 1/2"
5/0 SLIDING	5'-1"	6'-2 1/2"
6/0 RANGE	6'-1"	6'-2 1/2"
8/0 PATIO	8'-1"	6'-2 1/2"
9/0 PATIO	9'-1"	6'-2 1/2"
10/0 X 8/0 X 20"	10'-1 1/2"	8'-2 1/2"
16/0 X 8/0	16'-1 1/2"	8'-2 1/2"
4/0 VINYL SLIDER	4'-1"	6'-0"
6/0 VINYL SLIDER W/ (2) SIDELIGHTS	6'-1"	6'-2 1/2"
4/0 VINYL SLIDER W/ (2) SIDELIGHTS	4'-1"	6'-2 1/2"
7/0 SINGLE W/ 8'0" ARCH HEAD	3'-1 1/2"	8'-2 1/2"
4/0 SWINGS W/ ARCHED HEAD	4'-1"	6'-8"

SheaHomes (Raleigh)
101 J. Morris Common Ln, Suite 105
Morrisville, NC 27560
919-468-7100

SheaHomes (Charlotte)
3436 Toringdon Way, Suite 100
Charlotte, NC 28277
704-319-5000

NORTH CAROLINA PROFESSIONAL SEAL 29249 ENGINEER KEVIN P MUNSON

NORTH CAROLINA RESIDENTIAL STRUCTURES, P.C. No. C3295 CERTIFICATE OF AUTHORIZATION

RESIDENTIAL STRUCTURES, P.C.
3440 N. Davidson St.
Charlotte, N.C. 28205
Seal for Structural Only

ELEVATION: HD GARAGE LEFT

PLAN NUMBER: 229 PLAN

PLAN NAME: SILVERADO

Revisions	Date
	12/18/06
Scale	1/8"=1'-0"
Drawn	JOLENN
Checked	KPMunson
Sheet #	E1

DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet ___ of ___
PROPERTY ID #: 4664970870
COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Anniston LLC
ADDRESS: _____
APPLICATION DATE: 2/08
DATE EVALUATED: 1/08
PROPOSED FACILITY: 5BRM
PROPOSED DESIGN FLOW (.1949): 600 gpd
PROPERTY SIZE: _____
LOCATION OF SITE: Lot 154
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) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
P 154 A 1	SS 5-10%	0-27	RCMFABK/SBK	Fr ss sp sexp	csap	53	—	— OK	.3
		27-53	RSCLWFSBK	Fr ss sp sexp					
P 154 B 2	SS 5-10%	0-20	BRCLWSBK	Fr ss sp sexp	—	50	—	— WD	.3
		20-50	RCMWSBK/ABK	Fr ss sp sexp					
		0-17"							
P 154 C 3	SS 5-10%	0-15	BRCLWSBK	Fr ss sp sexp	FSap c-MSap	60	—	—	.3
		15-29	RCMFSBK/ABK	Fr ss sp sexp					
		29-60	RCLWFSBK	Fr ss sp sexp					
		Same							
P 154 D 4	SS 5-10%	0-9	BCLWSBK	Fr ss sp sexp	csap	44	PS	—	PS .3
		9-26	RBCMFSBK/ABK	Fr ss sp sexp					
		26-44	BCLWMSBK	Fr ss sp sexp					
		44-64	WCS/SapM	Fr sr sp sexp					
		0-10							
		10-56"	Same						

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

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: _____
OTHER(S) PRESENT: _____

COMMENTS: _____

DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet ___ of
PROPERTY ID #4664970874
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Niblock
ADDRESS: 105 Overlook Ridge Ln
PROPOSED FACILITY: House
LOCATION OF SITE: Anniston #154
APPLICATION DATE: 2-19-08
DATE EVALUATED: 2-25-08
PROPERTY SIZE: .79 Acre
PROPERTY RECORDED: ___
PROPOSED DESIGN FLOW (.1949): 600gpd
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) .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
1	154B	0-17"	Bw/Rd	M w/SBK	FR, SS, SP, SE				PS .3
		17-50	R/C	m SAK/ABK	FR, SS	SP, SE			
2	154C	0-15	Bw/Rd	C w/SBK	FR, SS, SP, SE				PS .3
		15-29	R/C	m-w SBK/ABK	FR, SS	SP, SE			
		29-60	R/C	w/SBK	FR, SS, SP, SE				
3	154D	0-10	R/C	w/SBK	FR, SS, SP, SE				PS .3
		10-26	Rd/Bw	C m SBK/ABK	FR, SS, SP, SE				
		26-44	Rd/Bw	C w/-m SBK	FR, SS, SP, SE				
		44-64	SL	SAP	massive FR, SS, SP, SE				
4									

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

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Maria Dotson
OTHER(S) PRESENT: ___

COMMENTS: ___



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 (All 70' x 70')
- System lines.
- Repair lines.
- TBM.
- Well Location.
- Purposed Pit Location
- RS&ES Pit Location.
- Health Dept. Pit Location.

GRAPHIC SCALE
1" = 50'

50 0 50 100

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) 278 - 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 IV

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

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