ICHD–ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP303675

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

PIN # 4675434448 ✓

APPLICANT/OWNER: Chris and Rachel Fortune | APPLICANT ADDRESS: 310 Kilmer Ln Mooresville NC 28115

SITE ADDRESS: 1893 Coddle Creek Hwy Mooresville NC 28115 ✓ | PHONE: 704-658-7079 | ALT. PHONE 704-746-5046 (Ashley)

SITE DIRECTIONS: E Center Ave to R on NC 3N, Lot on L | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: CHRISTOPHER & RACHEL FORTUNE | SECTION: — | LOT # 4+5 ✓ | LOT AREA: 9.042 acres ✓ | DESIGN FLOW: 480GPD | L.T.A.R.: .30

Septic Tank	1000 (gal)	STB Infiltrator	Date	☒ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms	4	Water Supply
Pump Tank	— (gal)	PT —	Date —	System Description:	Gravity 25% Reduction	☐ Business	No. Persons	9	☐ Private
Pump Make	—	Model —	Serial # —	Repair System Description:	PM 25% Reduction	☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines 8	Linear Ft 400'	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☐ Crawl Space		☐ Community
Trench Width	36"	Trench Bottom Depth (~~Low side~~) max	30"/22" Low	Gravel Depth	—	☒ GRAVITY	☐ PRESSURE	☒ Basement w/ plumbing	☐ Basement w/o plumbing

Comments / Conditions: Install Lines on contour. Tank must be below basement plumbing. Do not Drive, store material, or manipulate drainfield in any way. Any part of septic System must be 5' off waters edge of pool. Property Line must be marked by licened Surveyor during time of instalation and inspection 434' of line laied out only 400' needed. Was told basement is to be daylighted so tank can be 5' off. If not tank will Have to be moved to meet setbacks. Elevation of tank and First drainlines should be shot to ensure the Required amount of fall can be achived

INITIAL SITE SKETCH

See Attached and Approved Site plan by Rollans Soil and Environmental services PA.

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**

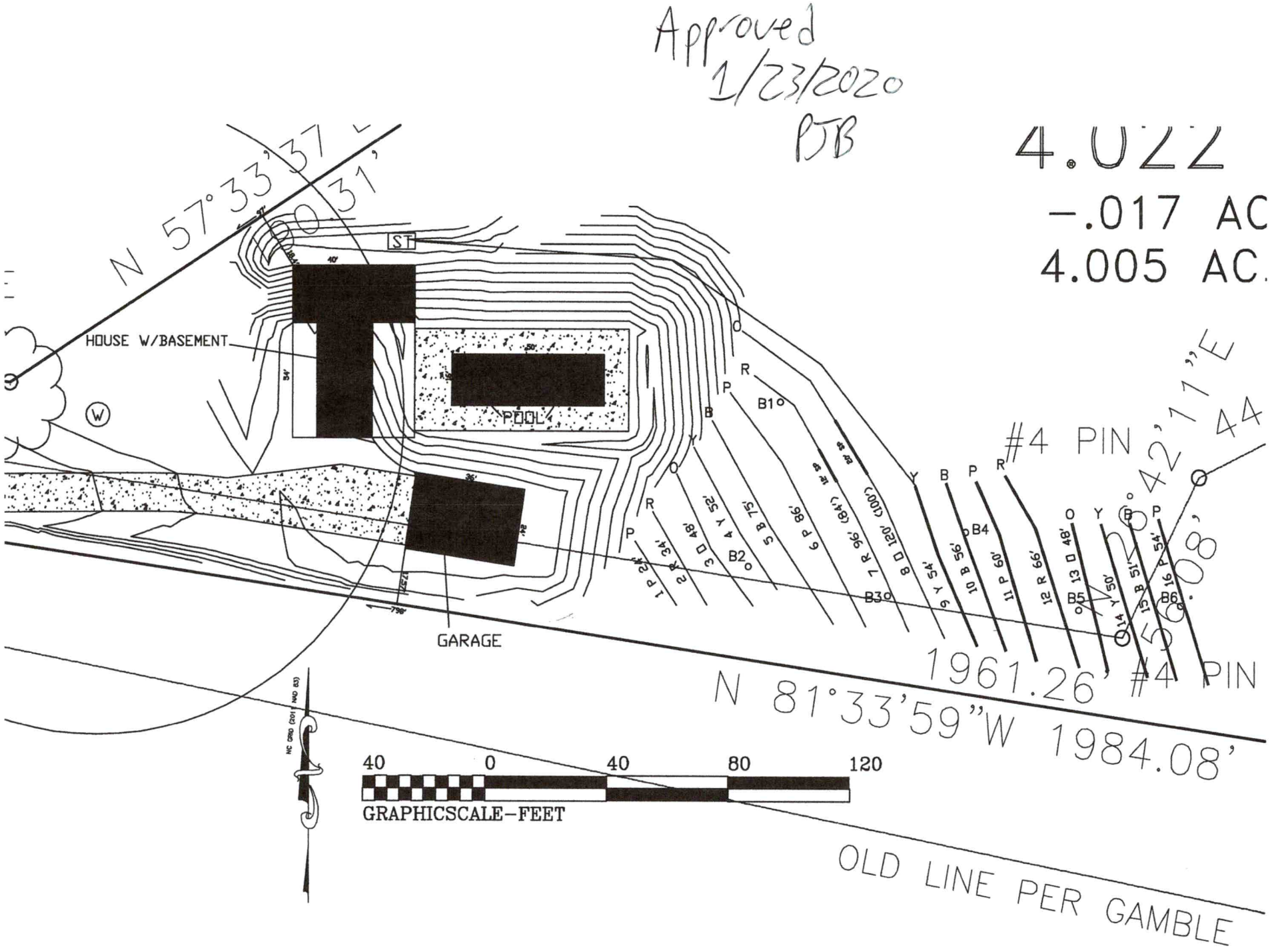
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

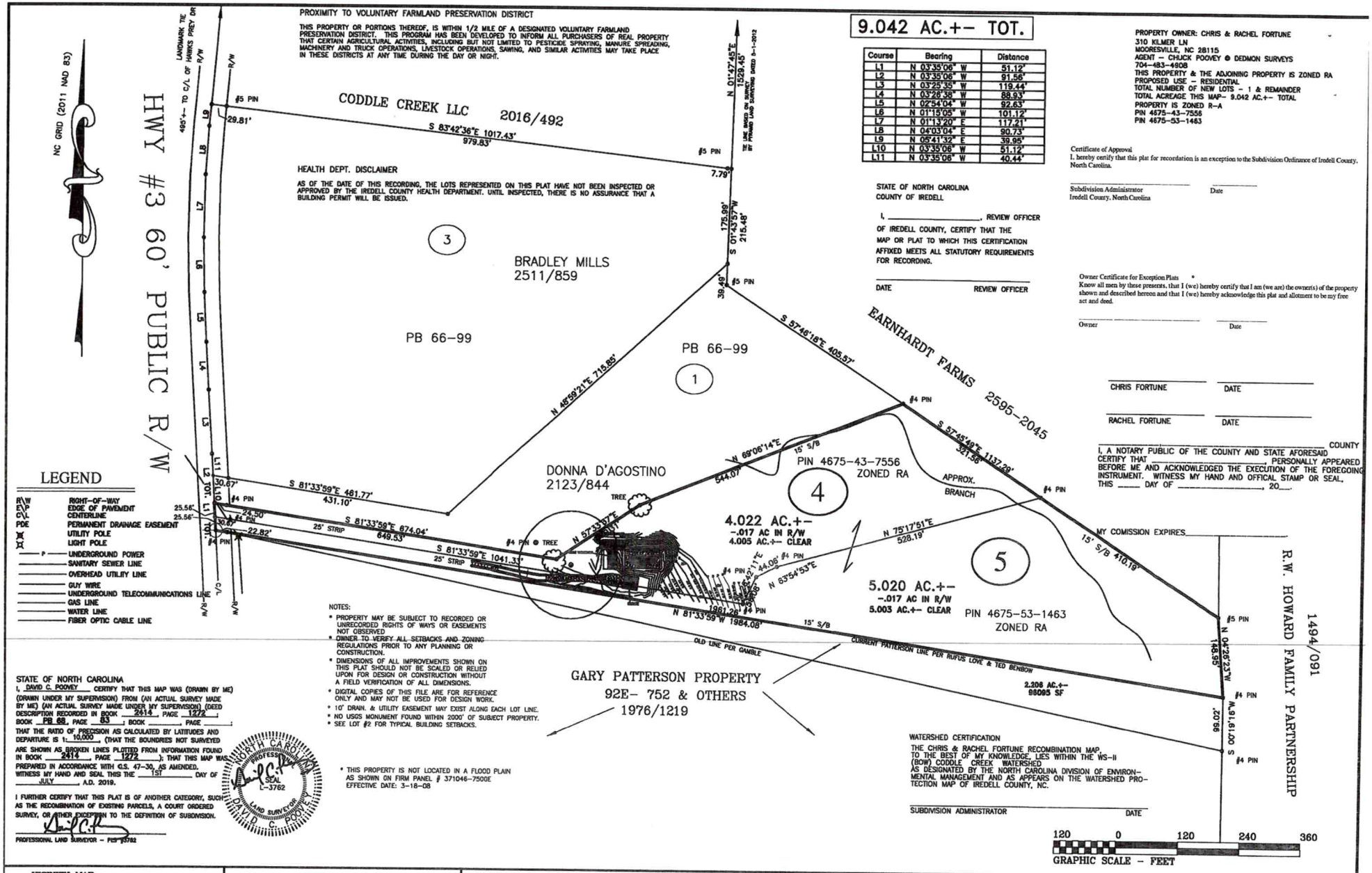
Owner / Applicant Signature: [signature] Date: 1/24/2020 Installed by: JST Enterprise

IMPROVEMENT PERMIT by: Patrick J Boyle III Date: 1/23/2020 OPERATION PERMIT by: [signature] Date: 11-9-2020

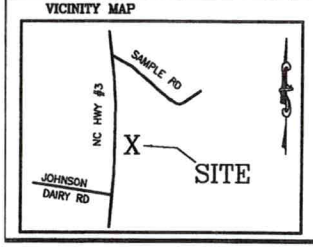
AUTHORIZATION TO CONSTRUCT by: Patrick J Boyle III Date: 1/23/2020 Existing System Inspected by: Date:

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


Approved
1/23/2020
PJB
4.022
-.017 AC
4.005 AC.
N 57°33'37" E
0031'
HOUSE W/BASEMENT
POOL
GARAGE
#4 PIN
S 56°42'11"E
1961.26'
#4 PIN
N 81°33'59"W 1984.08'
OLD LINE PER GAMBLE
40 0 40 80 120
GRAPHICSCALE-FEET



VICINITY MAP



DEDMON SURVEYS

DEDMON SURVEYS

CHUCK POOVEY, PLS #3762
ROBERT DEDMON, PLS #3899

3704 NC HIGHWAY #16 BUSINESS NORTH
P.O. BOX 494 - DENVER, NC 28037
PHONE: 704/483/4908
FAX: 704/483/2170

DATE 7-11-19		DB: 2414	PG: 1272
SCALE: 1" = 120'		DB:	PG:
		PB: 68	PG: 83
CODDLE CREEK TOWNSHIP			
IREDELL COUNTY, NC			
SURV. BY: JR, HL	DRAWN: CP	JOB# JRCODDLE 2019	

EXEMPT RECOMBINATION MAP FOR CHRISTOPHER & RACHEL FORTUNE

RECOMBINATION OF LOT #4 & LOT #5 OF PLAT BOOK 68-83

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

Sheet 1 of 2
PROPERTY ID #: 4675439
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM
(Complete all fields in full)

OWNER: Christopher & Rachel Fortune
ADDRESS: 310 Kilmer Ln Mooresville NC 28115
PROPOSED FACILITY: 4BR
PROPOSED DESIGN FLOW (.1949): 480 gpd
LOCATION OF SITE: Highway 3 1893 Coddle Creek HWY Mooresville NC 28115
APPLICATION DATE
DATE EVALUATED: 2/19/16 & 12/
PROPERTY SIZE: 9.04 AC
PROPERTY RECORDED: Yes
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
B 1	L/16%	0-4	BL Gr						PS .3-.325
		4-28	RC mmsbk	Fr SS SP					
		28-48	RBCL wfsbk	Fr SS SP	Few to C. SAP Inclu.	48"			
B 2	L/15%	0-2	BL Gr						PS .3-.325
		2-30	RC wmsbk	Fr SS SP					
		30-48	BC wmsbk	Fr SS SP	Few SAP.	48"			
B 3	L/15%	0-4	BCL wmsbk	Fr SS SP					PS .3-.325
		4-28	RC mmsbk	Fr SS SP					
		28-48	RBCL wmsbk	Fr SS SP	Few SAP Incl.	48"			
B 4	L/15%	0-4	BCL mmsbk	Fr SS SP					PS .3-.325
		4-26	RC mmsbk	Fr SS SP		40			
		26-48	RBCL wmsbk	Fr SS SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	Accepted	Accepted
Site LTAR	0.3	0.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: S. Ashley Rollins
OTHER(S) PRESENT: Chad Wagner

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet)

DEPARTMENT OF ENVIRONMENT
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

PROPERTY ID #: 4675439448
DATE OF EVALUATION: 3/19/16 & 12/11/1
COUNTY: Iredell

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	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
B 5	L/22%	0-17	BRC wmsbk	Fr SS SP	Few to C. SAP	54			PS .3-.325
		17-54	RBCL wfsbk	Fr SS SP					
B 6	L/22%	0-18	BRC wmsbk	Fr SS SP	Few to C. SAP	52			PS .3-.325
		18-52	RBCL wfsbk	Fr SS SP					

COMMENTS:

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

Sheet 1 of 2
PROPERTY ID #: 4675 439448
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM
(Complete all fields in full)

OWNER: Chris and Rachel Fortune — APPLICATION DATE 12/23/19
ADDRESS: 310 Kilmer Ln Mooresville NC 28115 — DATE EVALUATED: 1/8/2020
PROPOSED FACILITY: Newsingle fam — PROPOSED DESIGN FLOW (.1949): 480GPD — PROPERTY SIZE: 9.042acres
LOCATION OF SITE: 1693 Coddle Creek Hwy Mooresville NC 28115 — PROPERTY RECORDED: Yes

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
1	SS 16%	0-27	CSBK/ABK	FrSSSPSoxP	YBmottles scattered throughout	60"	Litho inclusions more common at bottom	water seeping at 13"	PS.25
		27-60	CLABK/SBK	FrSSSPSoxP					
2	SS 15%	0-28	CSBK/ABK	FrSSSPSoxP	YBmottles scattered throughout	60"	Litho inclusions more common at bottom	some Root channels at top	PS.25
		28-60	CLABK	FrSSSPSoxP					
3	SS 16%	0-29	C SBK/ABK	FrSSSPSoxP	YBmottles scattered throughout	50"	Litho inclusions sandy sap at 50"	—	PS.3
		29-50	CL SBK/ABK	FrSSSPSoxP					
		50-60	sandy sap Mass	VFI					
4	SS	0-26	CSBK/ABK	FrSSSPSoxP	—	60"	Litho inclusions throughout more common at bottom	—	PS.3
		26-60	CCSBK	FrSSSPSoxP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	400'	480'
System Type(s)	Gravity 25%	Pm Chamber
Site LTAR	.3	.25

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

COMMENTS: _____

Updated February 2014

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

Sheet 2 of 2
PROPERTY ID #: 4675439448
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM
(Complete all fields in full)

OWNER: Chris and Rachel Fortune
ADDRESS: 310 Kilmer Ln Mooresville NC 28115
PROPOSED FACILITY: New Single Fam PROPOSED DESIGN FLOW (.1949): 480GPD
LOCATION OF SITE: 1893 Coddle Creek Hwy Mooresville NC 28115
APPLICATION DATE: 12/23/19
DATE EVALUATED: 1/8/2020
PROPERTY SIZE: 4.042 acres
PROPERTY RECORDED: YES
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
5 1	SS 22%	0-16	C SBK/ANG	FrSSSPlas	—	60"	L The inclusions scattered throughout common at bottom	—	PS.3
		16-60	CL SBK	FrSSSPlas					
6 2	SS 21%	0-20	C SBK/ANG	FrSS	YBr MOTT scattered throughout	60"	Litho throughout more common at bottom	Rock vein going diagonally from surface at 24" straight @ entire site Lines	PS.3 Lutanaytrial
		20-60	CL SBK/ANG	FrSS					
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	400'	480'
System Type(s)	Gravity 2STB	PM Chamber
Site LTAR	.3	.25

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: Patrick B
OTHER(S) PRESENT: Ashley R

COMMENTS:

RECEIVED DEC 2 3 2019

Paid $350.00

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

AP # 303675

Application For: (X) 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 (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: Chris & Rachel Fortune **Address:** 310 Kilmer Lane, Mooresville NC **Zip:** 28115
Applicant Email: Chris@Charityrealty.org **Phone:** 704-658-7079 **Alt. Phone:**
Owner Name: Same **Address:** Same **Zip:** Same
Owner Email: Same **Phone:** Same **Alt. Phone:**

Property Information:

Street Address: 1893 Coddle Creek Highway Mooresv. lle NC 28115
Subdivision Name: N/A **Section/Phase:** N/A **Lot Number:** 4-5
Driving Directions: Take Coddle Creek Highway, lot is Past DEI on left

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

(X) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem:
Non-Residential Site Development: Type of Business:
Square Footage of Building: Max. Number of Employees: Max. Number of Seats/Beds/Other:

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

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

Water Supply: ( ) Replacement Well – Reason:
( ) Multi-connection Well **Number of Houses:** **Number of Persons:**
(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 25%

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: Steven A Fortune
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

12/23/19
DATE

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

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.

I, Chris & Rachel Fortune, am the legal owner(s) of the property located at 1893 Caddle Creek Highway Mooresville NC 28115, identified as PIN (Parcel Identification Number) 4607543948, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Soil & Forestry Ashley Bollans, 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.

12/23/19

Signature of Owner(s) Date

Signature of Witness Date

Please return this signed form to the appropriate office:

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
303675 Issue Date: 12/23/2019

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4675439448.000	1893 Coddle Creek Hwy	Iredell County

Owner Information	Applicant Information
Name: FORTUNE CHRISTOPHER P+RACHEL M	Name: ROLLANS SOIL & ENVIRONMENTAL SERVICES
Address:	Address: 470 NORTH BROAD STREET SUITE D MOORESVILLE, NC 28115
Phone:	Phone: (704)658-1723

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
9.042	35	35	15	15	WSII-BOW Coddle Creek	NO

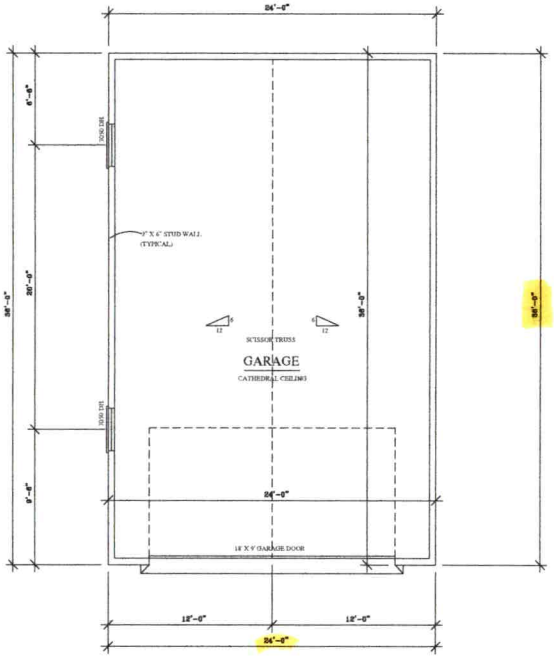
Remarks
SFD-1893 CODDLE CREEK HWY

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.

Signature of Owner/Contractor

Date: 12/23/2019

Permit Number	303675	TOTAL FEES:	$77.25

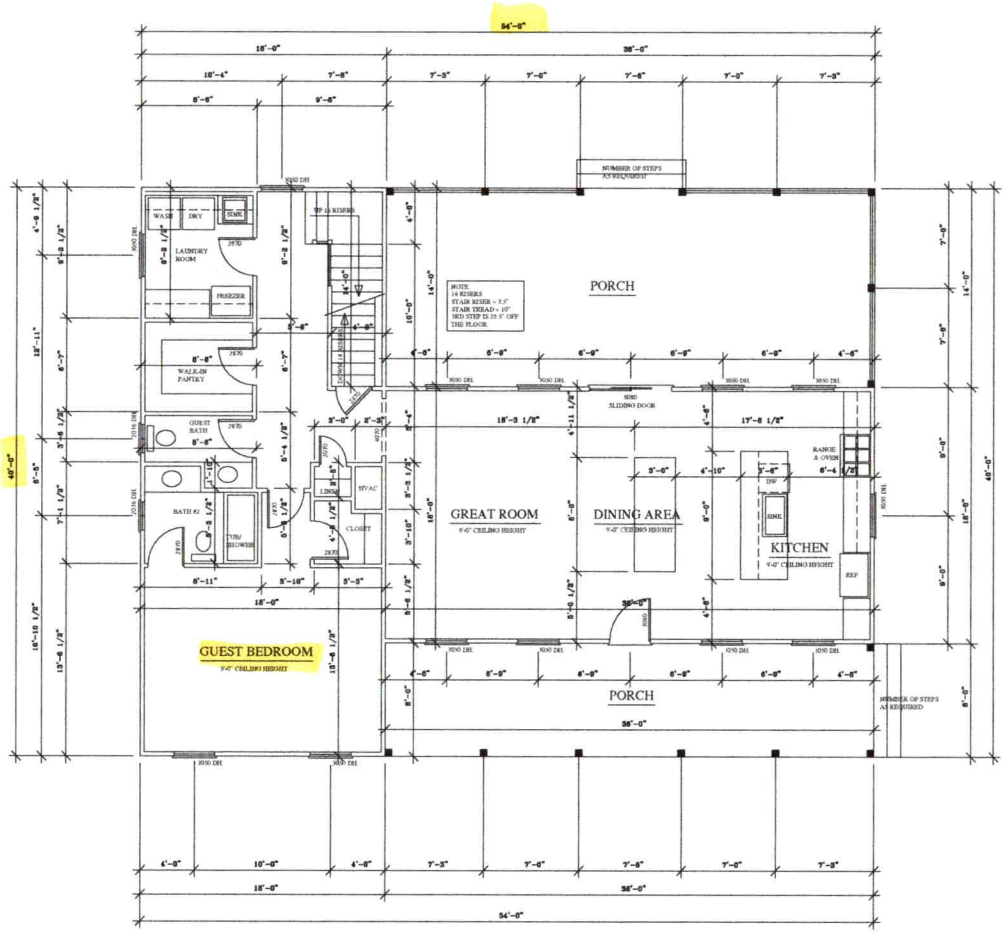


FLOOR PLAN

GARAGE

864 SQ.FT.

SCALE: 1/4" = 1'-0"



FIRST FLOOR PLAN

1368 SQ.FT.

SCALE: 1/4" = 1'-0"

Acknowledgment Of
Plans Submittal ONL
Patrick J Bagley II Date 1/23/2020
Date 1/24/2020

Gray Design

CONTRACTOR SHALL CHECK AND VERIFY ALL DIMENSIONS BEFORE BEGINNING CONSTRUCTION AND COORDINATE ANY CORRECTIONS OR REVISIONS WITH THE OWNER AND DESIGNER. JEFFERY D. GRAY WILL ASSUME NO LIABILITY FOR ANY ERRORS ONCE CONSTRUCTION BEGINS.

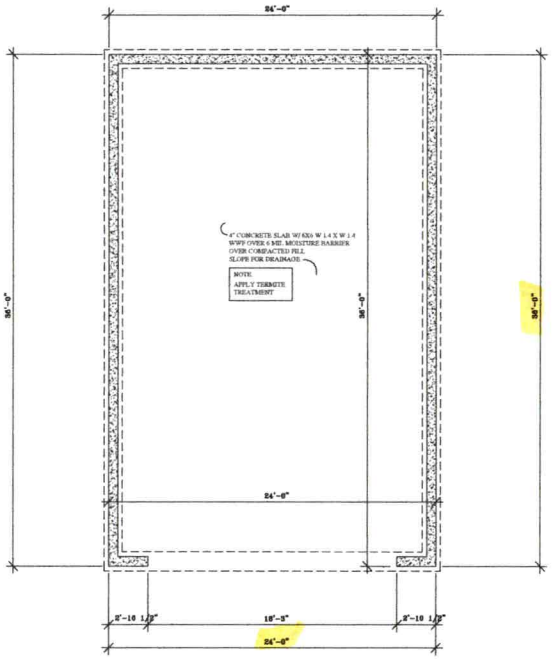
PROJECT: Fortune Residence

DATE: JUNE 17 19

REVISION:

FILE NUMBER 2019-FORTUNE

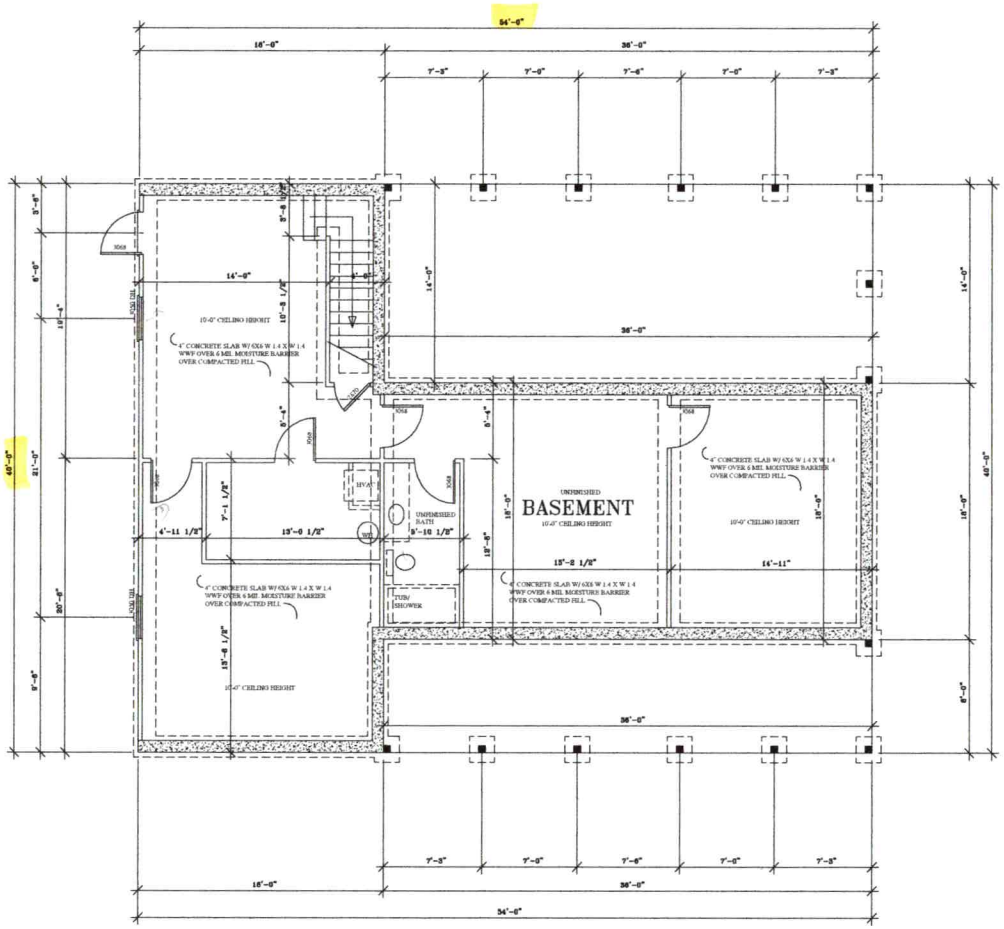
SHEET: 4 OF 5



FLOOR PLAN

GARAGE
RAISED SLAB

SCALE: 1/4" = 1'-0"



BASEMENT PLAN

1368 SQ.FT.

SCALE: 1/4" = 1'-0"

Acknowledgement Of
Plans Submittal ONL
Patrick J Bagley III Date 1/23/2020
Date 1/24/2020

N

Gray Design

CONTRACTOR SHALL CHECK AND VARIFY ALL DIMENSIONS BEFORE BEGINNING CONSTRUCTION AND COORDINATE ANY CORRECTIONS OR REVISIONS WITH THE OWNER AND DESIGNER. JEFFREY D. GRAY WILL ASSUME NO LIABILITY FOR ANY ERRORS ONCE CONSTRUCTION BEGINS

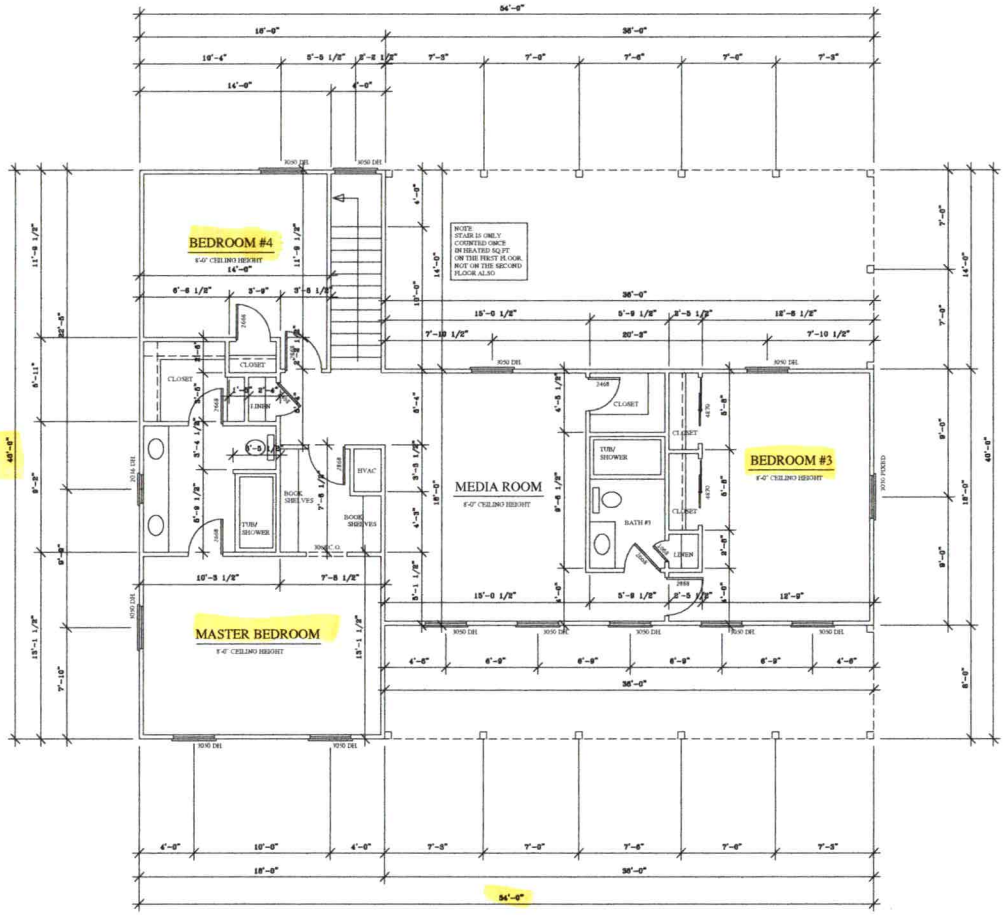
PROJECT:
Fortune Residence

DATE: JUNE 17 19

REVISION:

FILE NUMBER
2019-FORTUNE

SHEET:
3 OF: 5



SECOND FLOOR PLAN

1315 SQ.FT.

SCALE: 1/4" = 1'-0"

Acknowledgement Of
Plans Submittal ONL
Patrick J Boyle III Date 1/23/2020
Rach R Date 1/24/2020

Gray Design

CONTRACTOR SHALL CHECK AND VARIFY ALL DIMENSIONS BEFORE BEGINNING CONSTRUCTION AND COORDINATE ANY CORRECTIONS OR REVISIONS WITH THE OWNER AND DESIGNER. JEFFERY D. GRAY WILL ASSUME NO LIABILITY FOR ANY ERRORS ORCS CONSTRUCTION ERORRS.

PROJECT: Fortune Residence

DATE: JUNE 17, 19

REVISION:

FILE NUMBER 2019-FORTUNE

SHEET: 5 OF: 5