ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # AP-321527

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

PIN # 4677 --33 --6678

APPLICANT/OWNER: BOYCE GALLIHER | APPLICANT ADDRESS: 165 ASHLEY ACRES ROAD, STATESVILLE, N.C. 28677

SITE ADDRESS: 308 ALEXANDER ACRES ROAD, MOORESVILLE, N.C. 28115 | PHONE: 704-402-2795 | ALT. PHONE 704-890-8882

SITE DIRECTIONS: (S) ON 115, (L) ON 150, (R) ON ALEXANDER ACRES, LOT ON (R)

SAP CONTROLLED: ☐ ~~YES~~ ☐ ~~NO~~ EXT

SUBDIVISION: CAUDILL ESTATES | SECTION: — | LOT # 5 | LOT AREA: 2.5 ACRES | DESIGN FLOW: EXT 360GAD | L.T.A.R.: EXT

Septic Tank	EXT	(gal)	STB	EXT	Date	EXT
Pump Tank	—	(gal)	PT	—	Date	—
Pump Make	—	Model	—	Serial #	—	
# Nitrification Fields	1	# Lines	EXT	Linear Ft:	EXT	
Trench Width	EXT	Trench Bottom Depth(Low side)	EXT	Gravel Depth	EXT	

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

System Description: EXISTING

Repair System Description: EXISTING

Maintenance Agreement Required: ☐ YES ☑ ~~NO~~

☑ GRAVITY ☐ PRESSURE

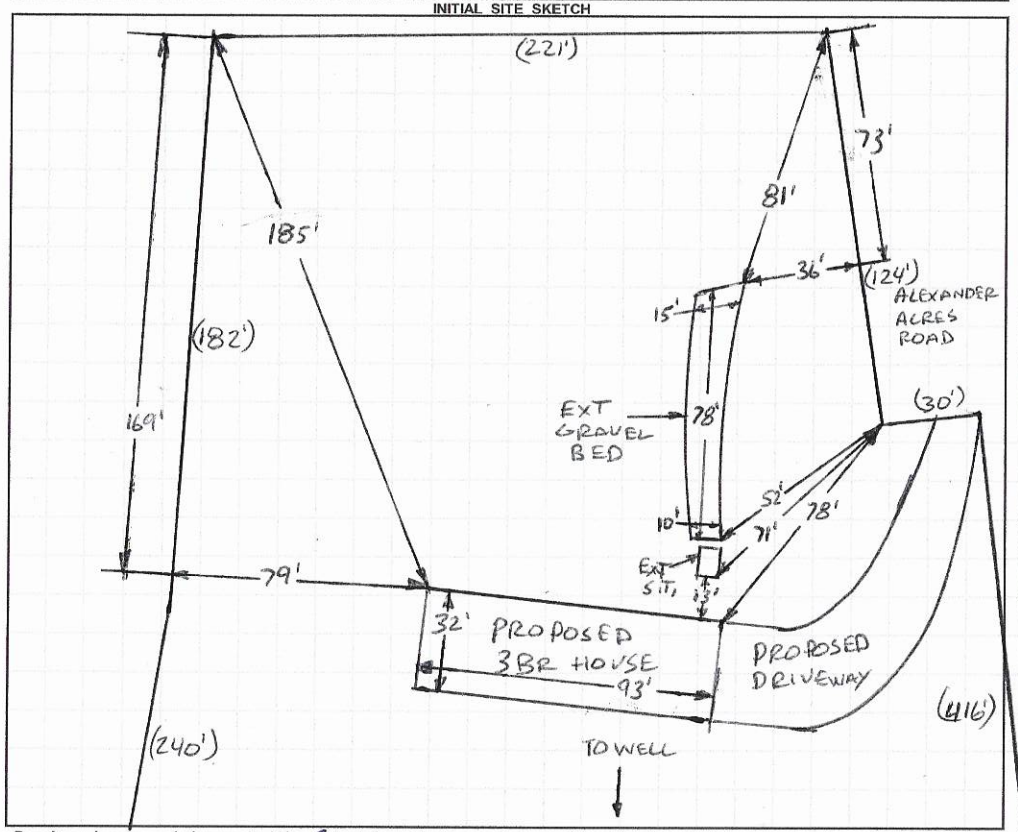
☑ ~~Residence~~ ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing

No. Bedrooms 3 | No. Persons 6 | No. Employees — | ☑ ~~Crawl Space~~ | ☐ Basement w/o plumbing

Water Supply: ☑ ~~Private~~ EXT ☐ Public ☐ Community

Comments / Conditions: SYSTEM APPEARS TO BE FUNCTIONING AT TIME OF INSPECTION, MAINTAIN 5FT MINIMUM FROM ALL PARTS OF SEPTIC AND 25FT FROM THE WELL WITH NEW HOUSE

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.

1 IN = 60 FT
S.T. = SEPTIC TANK
EXT = EXISTING

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**

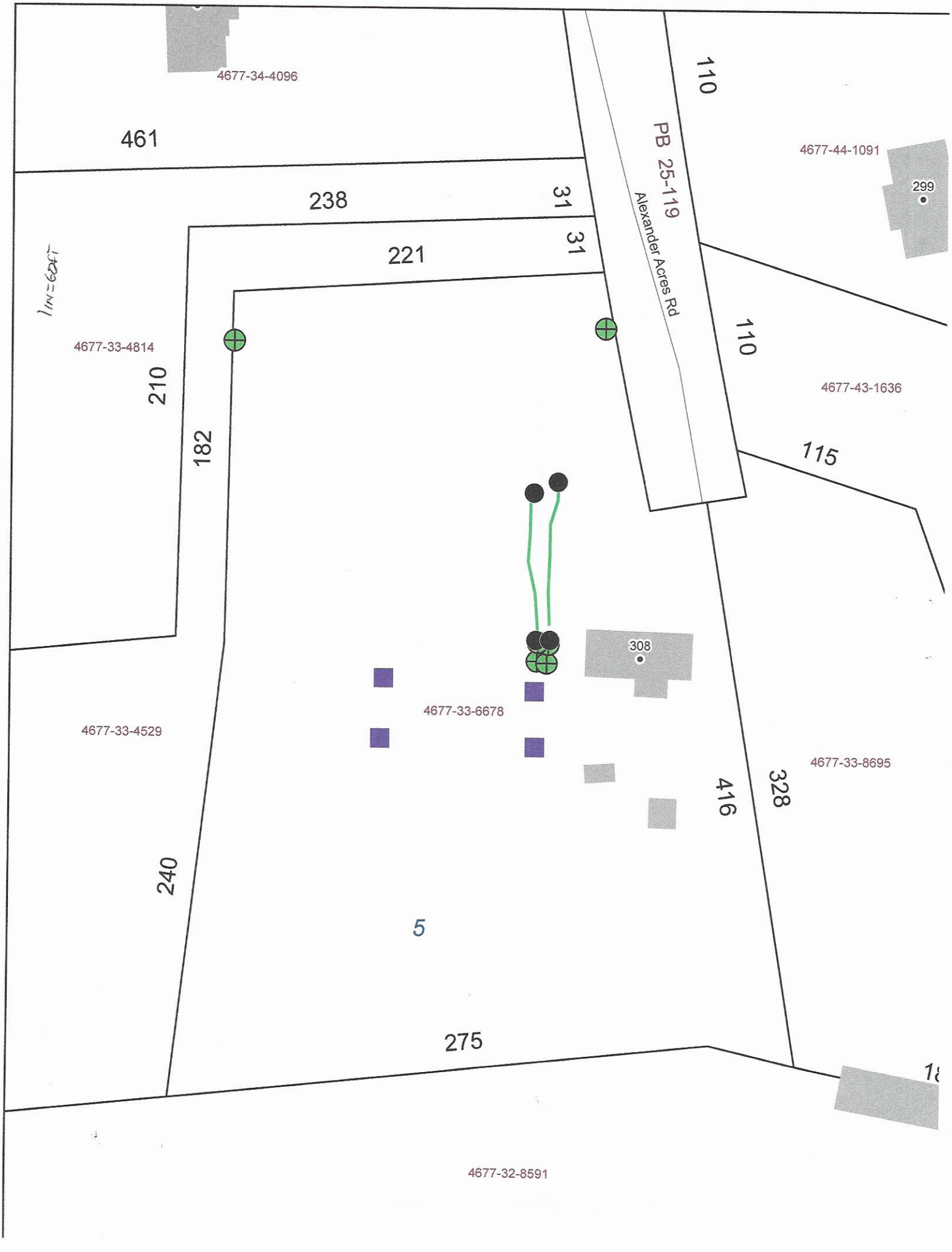
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☐ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Boyce Galliher | Date: 10-24-24 | Installed by: _____

IMPROVEMENT PERMIT by: _____ | Date: _____ | OPERATION PERMIT by: _____ | Date: _____

AUTHORIZATION TO CONSTRUCT by: _____ | Date: _____ | Existing System Inspected by: Bryant L. White | Date: 10-27-2024

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


4677-34-4096
461
238
31
31
221
1IN=60FT
4677-33-4814
210
182
PB 25-119
Alexander Acres Rd
110
110
4677-44-1091
299
4677-43-1636
115
308
4677-33-6678
4677-33-4529
4677-33-8695
416
328
240
5
275
4677-32-8591

RECEIVED SEP 17 2021

BW

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM*

AP-321527 $250.00

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) Septic Improvement Permit ( ) Authorization to Construct (X) 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: Boyce Galliher Address: 165 Ashley Acres Rd. Statesville Zip: 28677
Applicant Email: boycegalliher@icloud.com Phone: 704-402-2795 Alt. Phone: _____
Owner Name: Maria Moreno Address: 137 Key West Lane, Mooresville Zip: 28115
Owner Email: Herzybelen@hotmail.com Phone: 704 890 8882 Alt. Phone: _____

Property Information:

Street Address: 308 Alexander Acres, Mooresville N.C.
Subdivision Name: _____ Section/Phase: _____ Lot Number: _____
Driving Directions: 150 East - Rt on 152 - Rt Alexander Acres,

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: _____
Maximum Number of Bedrooms: 3
Maximum Number of Occupants: 3
( ) Swimming Pool
( ) Other Addition/Structure: _____
Non-Residential Site Development: Type of Business: _____
Square Footage of Building: _____ Max. Number of Employees: _____ Max. Number of Seats/Beds/Other: _____

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

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 ( ) 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: Boyce Galliher 6-15-21
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

321521

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*) L Maria Moreno

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, L Maria Moreno, am the legal owner(s) of the property located at _____, identified as PIN (Parcel Identification Number) 4677336678, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Boyce Galliher, Boyce Galliher _____, 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.

L Maria Moreno
Signature of Owner(s)

6-15-21
Date

Mooresville - Environmental Health

Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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

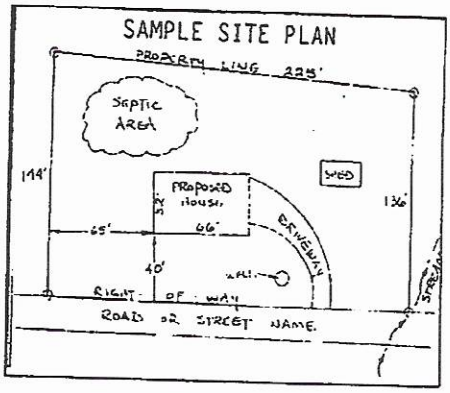
321527

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:

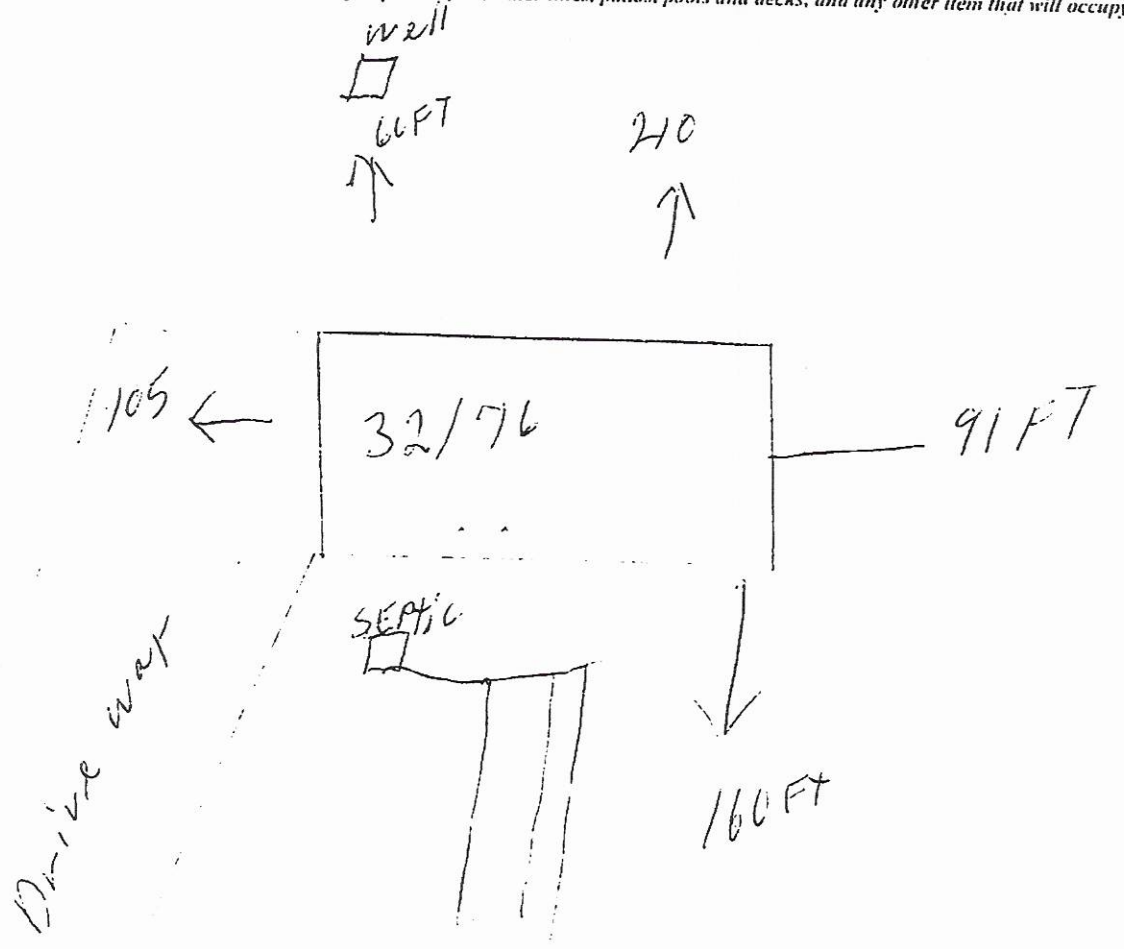
- (✓) Property Line measurements are clearly identified
- (✓) All proposed structures are indicated
- (✓) Front and side setbacks from property line
- (✓) Preferred driveway location and well location
- (✓) Area you prefer your septic system to be placed
- (✓) North arrow, or other sufficient indicator 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: [signature] 6-15/21

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

Acknowledgement Of
Plans Submittal ONLY!
Date 9.3.21

321521

Final

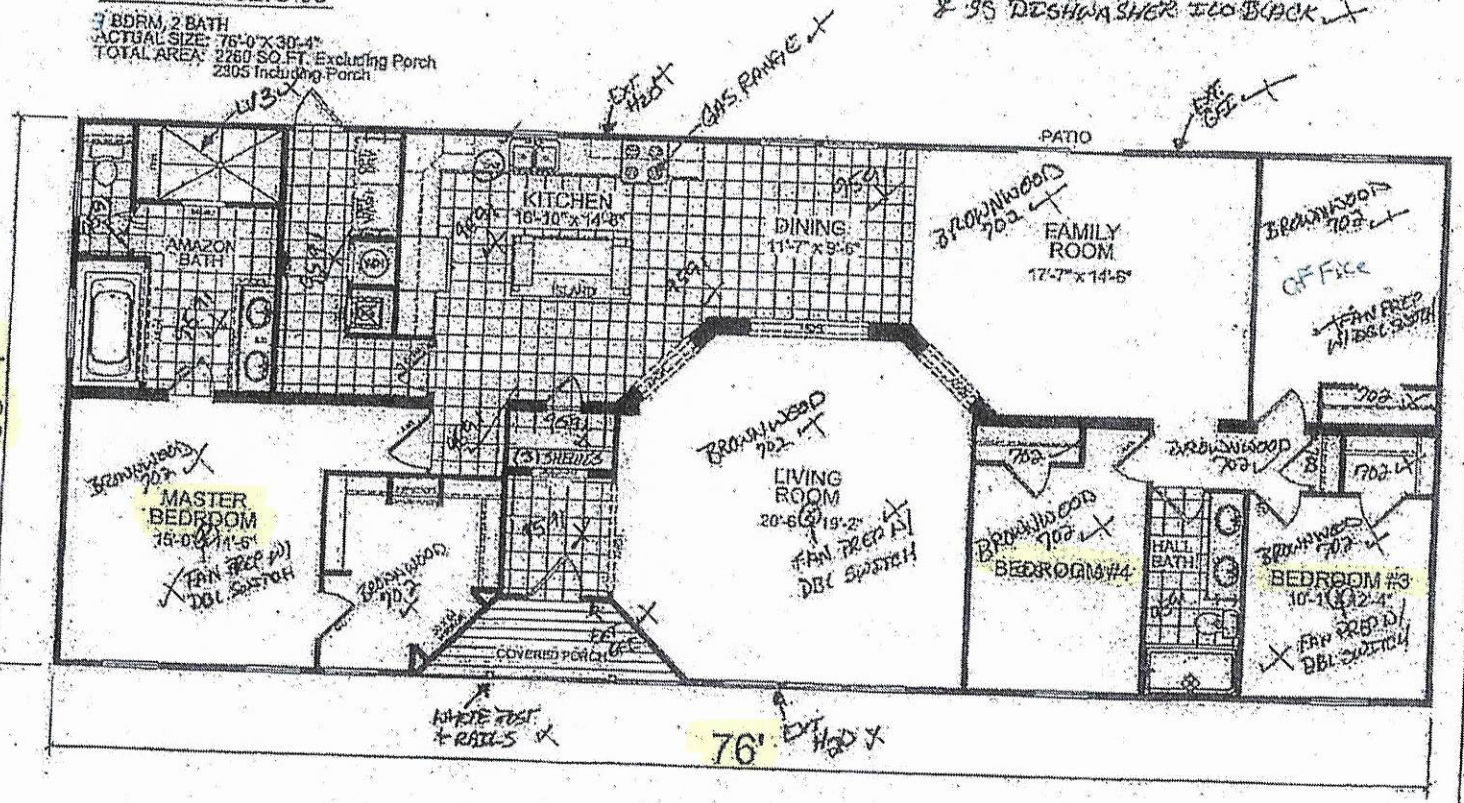
Buyer/Client White Date 10-27-2021

FACTORY SELECT - M. MORENO

* WHITE POST + RAILS ON PORCH
* TRYON PKG.
* AMAZON W3 SHWR ILO W1 - MBATH
* 5/12 HIP RAFTERS
* OMIT STD DORMER
* PREP FOR GAS DRYER
* SS FRENCH DOOR FRIDGE
* SS S/C GAS RANGE ILO GLSTOP ELEC. RNG (BLACK)
* SS MICROWAVE RNGHD ILO BLACK
* SS DISHWASHER ILO BLACK

MODEL 23-3276-05

3 BDRM, 2 BATH
ACTUAL SIZE: 76'-0" X 30'-4"
TOTAL AREA: 2280 SQ.FT. Excluding Porch
2305 Including Porch



MATERIALS AND SPECIFICATIONS SUBJECT TO CHANGE WITHOUT NOTICE FOR PRODUCTION AND CODE PURPOSES. ALL DIMENSIONS ARE NOMINAL AND APPROXIMATE. SQUARE FOOTAGE IS MEASURED FROM EXTERIOR WALL TO EXTERIOR WALL AND IS A APPROXIMATE FIGURE. THIS DRAWING IS A RENDERING AND IS MEANT FOR SALE PURPOSES ONLY.

CHAMPION

LITERATURE PLAN
23-3276-05
L-101

9.3.21

321527

Planning and Community Development
413 North Main Street
Mooresville, North Carolina 28115
Phone: 704-662-7040

September 16, 2021

The following information is a summary of Project ID 603383, titled 308 Alexander Acres as reviewed by the Town of Mooresville, NC in their online electronic plan review system.

Project Information

Project Address:	308 ALEXANDER ACRES
Project Number:	603383
Submittal Accepted:	9/13/21
Project Approved:	Approved

Site Information

Front Setback:	30
Side Setback(s):	15
Rear Setback:	40
Mooresville Zoning:	R2
Parcel ID:	4677336678.000
Acreage:	2.5
Subdivision Name:	
Lot Number:	5
Watershed:	WS-II- CODDLE CREEK

List of Required Inspections

There are no Town Utilities available at this address. Utility and Backflow inspections not needed.

Zoning

Approval for Mobile home placement
Must obtain all Iredell County permits and inspections,

321527

Project Overview

#603383

Project Title: 308 Alexander Acres
Application Type: Zoning Permit
Workflow: Staff Review

Jurisdiction: Town of Mooresville
State: NC
County: Iredell

Project Contacts

Contact Info: Applicant
Deena Abee
Abee's Clearing & Grading
2381 US Highway 64 W
Mocksville, NC 27028
P:17042393693
abeescg@gmail.com

Contact Info: Builder or Contractor
Boyce Galliher

165 Ashley Acres
Statesville, NC 28677
P:704-402-2795
boycegalliher@icloud.com

Contact Info: Owner
Boyce Galliher

165 Ashley Acres
Statesville, NC 28677
P:704-402-2795
boycegalliher@icloud.com

Please indicate which of the following contacts should be included in this project.: Builder or Contractor

Site Information

Project Address: 308 ALEXANDER ACRES

Project Description

Project Description:
Demolition

Zoning Request Type

Zoning Request Type: Zoning Permit
Proposed Use:

Existing Use: