ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 324151

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

PIN # 4678-07-3097

APPLICANT/OWNER: Bart Abernathy APPLICANT ADDRESS: 1491 Mt. Ulla Hwy, Mt. Ulla NC 28125

SITE ADDRESS: 1229 Mt. Ulla Highway, Mooresville, NC 28115 PHONE: 704-309-8626 ALT. PHONE

SITE DIRECTIONS: (W) NC 150 → (L) Mt. Ulla Hwy → lot on (L), past Melody Lane SAP CONTROLLED: [ ] YES [X] NO

SUBDIVISION: BA Trautman SECTION: LOT # 16 LOT AREA: 1.02 ac DESIGN FLOW: EXISTING L.T.A.R.: EXISTING

Septic Tank	1000 (gal)	STB	7600	Date	4/25/23	[X] New System	[ ] Repair	[ ] Expansion	System Type: I (II) III IV V VI	[X] Residence	No. Bedrooms 2
Pump Tank	(gal)	PT		Date		System Description:	New Tank			[ ] Business	No. Persons 4
Pump Make	Model			Serial #		Repair System Description:	EXISTING			[ ] Other	No. Employees
# Nitrification Fields	# Lines EXISTING			Linear Ft		Maintenance Agreement Required:	[ ] YES	[X] NO		[ ] Slab	[X] Crawl Space
Trench Width	Trench Bottom Depth (Low side)			Gravel Depth	EXISTING		[X] GRAVITY	[ ] PRESSURE		[ ] Basement w/ plumbing	[ ] Basement w/o plumbing

Water Supply: [X] Private [ ] Public [ ] Community

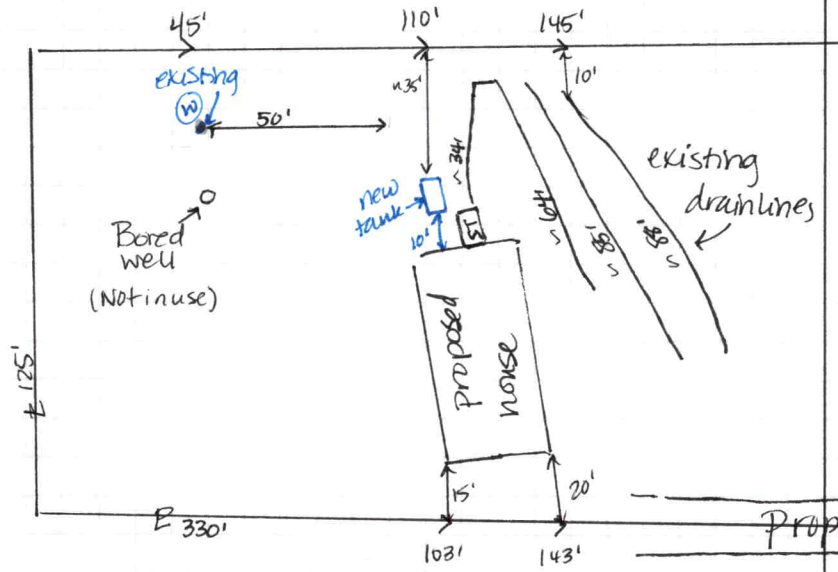
Comments / Conditions: Pump Crush & fill existing tank. Set new tank 10' from house, replace distribution devices as necessary.

Must have well variance to share well with 1225 Mt. Ulla
* See attached variance *
* Keep new tank maximum distance from well ≥ 50' *

INITIAL SITE SKETCH

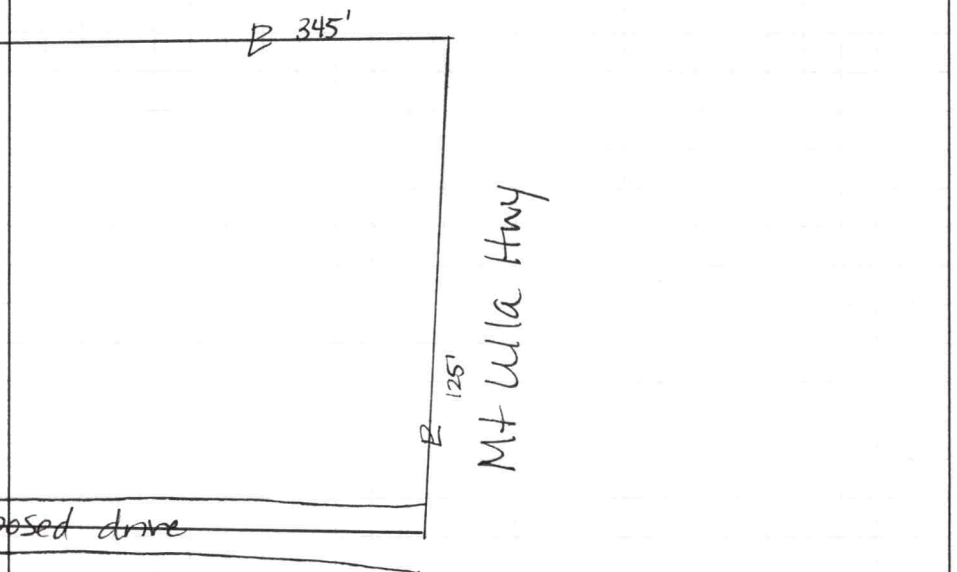
1" = 50'

ST = existing tank



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.



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.* [X] **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* [X] **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Bart Abernathy Date: 5-2-22 Installed by: Richard Abernathy

IMPROVEMENT PERMIT by: D Weber Date: 2/17/22 OPERATION PERMIT by: D Weber Date: 6/28/23

AUTHORIZATION TO CONSTRUCT by: D. Weber Date: 2/17/22 Existing System Inspected by: Date:

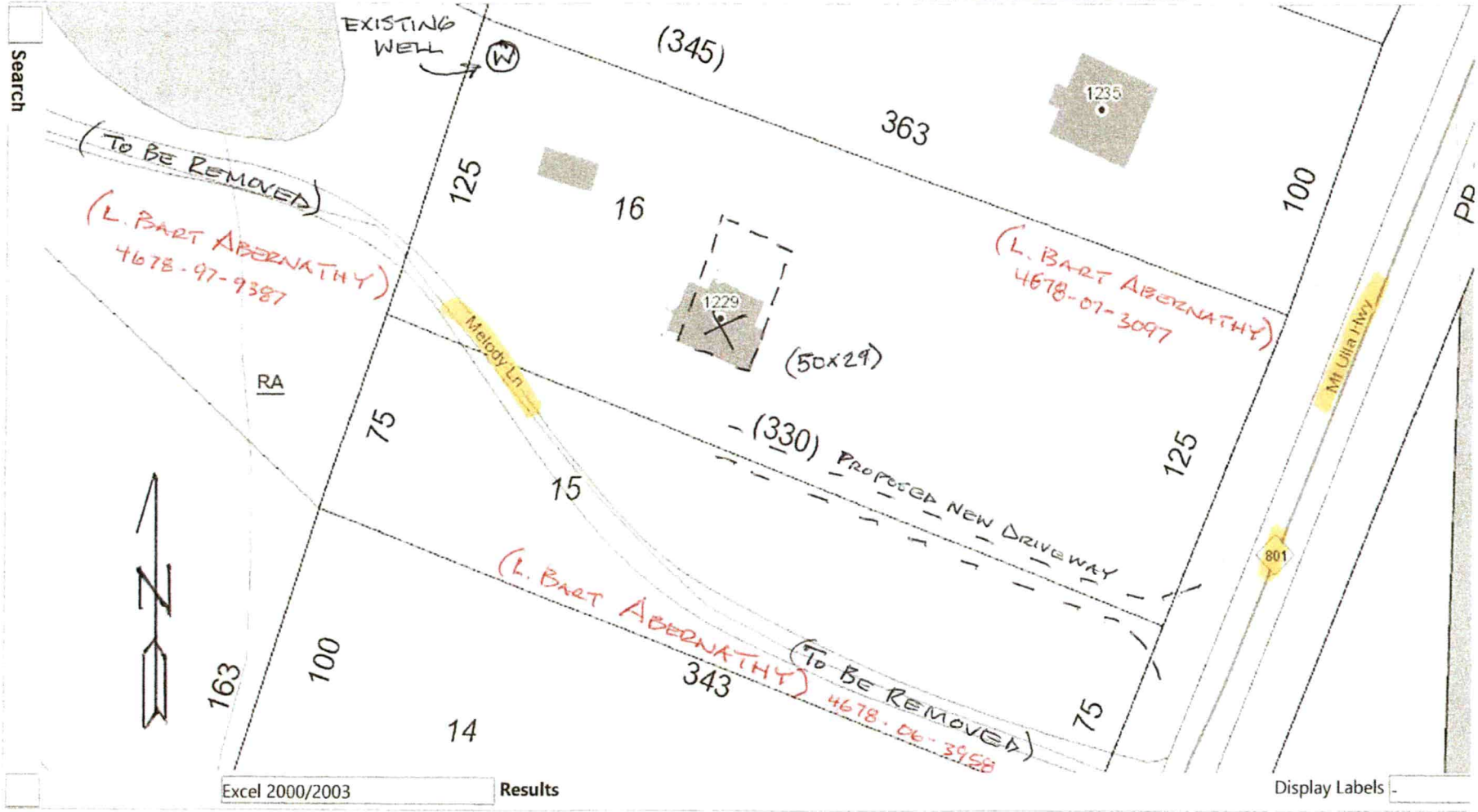
FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.

CONNECTGIS WEB HOSTING

Iredell County

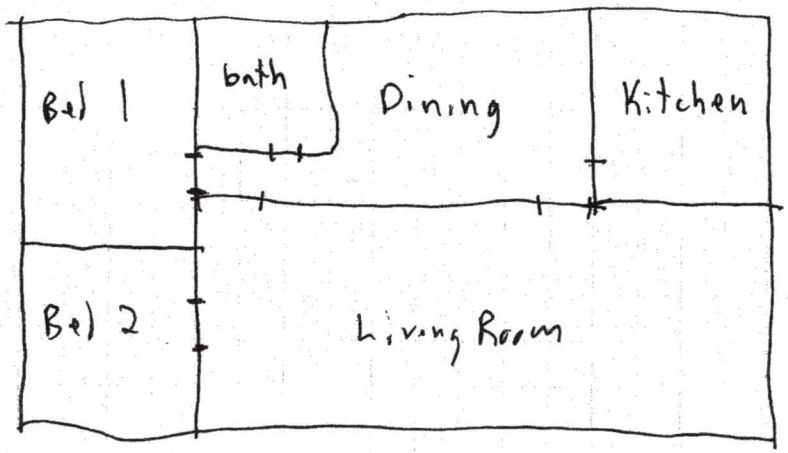
1229 Mt Ulla Hwy.

1:58 Feet 1" = 58'



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Replacement Home - Wishing to Utilize Existing System & Well



1229

Acknowledgement Of
Plans Submittal ONLY!

Date 5-2-22

Date 2/10/22

NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

ROY COOPER • Governor
KODY H. KINSLEY • Secretary
HELEN WOLSTENHOLME • Interim Deputy Secretary for Health
MARK T. BENTON • Assistant Secretary for Public Health
Division of Public Health

Onsite Water Protection Branch
February 14, 2022

Lee Bartlett Abernathy
1491 Mt. Ulla Highway
Mt. Ulla, NC 28125

Re: Approval No. JMB254

Private Well Located Less Than 100' To A Septic System [Rule 15A NCAC 2C .0107(a)(2)(C)]

Property location:
1229 Mt. Ulla Highway
Mooresville, NC 28115

Dear Mr. Abernathy:

On February 11, 2022, The On-Site Water Protection Branch received your request for a variance from the Well Construction standards, Title 15A North Carolina Administrative Code Subchapter 2C .0100. The request for a variance concerns a water supply well on the referenced property currently serving more than one dwelling. Another septic system is proposed near the well. The closest part of the septic system will be more than fifty feet away from the well, but closer than the required one hundred feet.

Specifically, the variance request grants you permission to use an existing water supply well at a distance closer than the one hundred foot setback to a septic system. Achieving the one hundred foot setback would be difficult given the challenges of the property.

Based upon information provided by the Iredell County Health Department, and the property owner, it is my finding that based upon current conditions as the site exist today (as well as the current proposal for use of the structure) you meet the conditions necessary for approval of a variance as specified by 15A NCAC .0118 (a) (1) and (2). On that basis and if the following conditions are met, the requested variance is approved:

North Carolina Department of Environmental Quality (DEQ) – Division of Water Resources (DWR)

VARIANCE APPLICATION FOR WELL CONSTRUCTION STANDARDS:

PRIVATE DRINKING WATER WELLS UNDER 15A NCAC 02C .0300

WATER SUPPLY WELLS UNDER 15A NCAC 02C .0107
All water supply wells not considered "Private Drinking Water Wells" and including irrigation, industrial, and commercial wells.

WELLS OTHER THAN WATER SUPPLY UNDER 15A NCAC 02C .0108
Including monitoring and recovery wells.

Print clearly or type information. Illegible submittals will be returned as incomplete.

DATE: 2/10, 20 22 **PERMIT NO.:** septic # 324151/324155 (to be completed by DWR/DPH)

A. WELL OWNER(S) – For single family residences, list all persons appearing on property deed. For all others, list name of the business/government agency and person and title with delegated signature authority:

Lee Bartlett Abernathy

Mailing Address: 1491 Mt. Ulla Highway
City: Mt. Ulla State: N.C Zip Code: 28125 County: Iredell
Day Tele No.: (704) 664-6506 Cell No.: (704) 309-8626
EMAIL Address: robyn@abernathygrading.com Fax No.:

B. PHYSICAL LOCATION OF WELL SITE

(1) Parcel Identification Number (PIN) of well site: 467 807 3097.000
County: Iredell

(2) Physical Address (if different than mailing address): 1229 Mt. Ulla Highway
City: Mooresville County: Iredell Zip Code: 28115

C. WELL DRILLER INFORMATION (if known)

Well Drilling Contractor's Name: unknown
NC Well Drilling Contractor Certification No.:
Company Name: Contact Person:
City: State: Zip Code: County:
Day Tele No.: Cell No.:
EMAIL Address: Fax No.:

D. **REASON FOR VARIANCE REQUEST** – Include type of well(s) to be constructed; rule for which the variance is being requested; description of how the alternate construction will not endanger human health and welfare and the environment; and reason why construction and/or operation in accordance with the standards is not technically feasible and/or provides equal or better protection of the groundwater.

Shared well that is less than 100 feet from a septic system
Currently 72', new tank will be 100' or greater.

E. **ATTACHMENTS** – Provide the following information as attachments to this application:

(1) A map showing general location of the property (including road names, NC State Route Number, distances, any key landmarks, etc.) sufficient for finding the well location.
(2) Detailed site map with scale showing location of proposed well relevant to septic system(s), building foundations, property lines, water bodies, potential sources of contamination, other wells, etc.
(3) Submit a copy of the local well permit application and site evaluation map (if applicable).
(4) Any other information relevant to the variance request such as a well construction diagram showing proposed well liner or atypical construction materials/methods.

F. **SIGNATURE(S)**

Lee Bartlett Abernathy
Signature(s) of Well/Property Owner(s)

Lee Bartlett Abernathy
Print or Type Well/Property Owner(s)

unknown
Signature of Person Responsible for Well Construction
(Typically the well driller)

Print or Type Name of Person Responsible for Well Construction
(Typically the well driller)

Signature of County Environmental Health Specialist

Danielle AM Wieberg, REHS 2572
Print or Type Full Name and Title of County Environmental Health Specialist

Per 15A NCAC 02C .0118 the Secretary of the Division of Water Resources or the Division of Public Health may require submittal of information deemed necessary to make a decision on the variance, may impose conditions as part of the decision, and shall respond in writing to the request within 30 days of receipt of the variance request. A variance applicant who is dissatisfied with the decision of the Director may commence a contested case by filing a petition as described in G.S. 150B-23 within 60 days after receipt of the decision.

North Carolina
Department of Health and Human Services
Division of Public Health

Please submit this form along with a Well Variance Application for an existing private water supply well.

Existing Well Variance Inspection Report

Well Site Location: Mooresville, BA Troutman, Lot 116
(Town, community, subdivision and Lot #)

Address: 1229 Mt. Ulla Highway County: Iredell

City/ST/Zip: Mooresville NC 28115 Date of SiteVisit: 2/8/2022

Well Construction

Date of Well Construction: unknown

If unknown, was it drilled before **1972**? YES or (NO)

If unknown, was it drilled before **7/1/2008**? (YES) or NO

What type of well is it:

(Drilled) Bored Hand Dug Jetted Other

Does the well have a cement slab? YES or (NO)

Does the well appear to be grouted? (YES) or NO

Well Head Completion

Is the well head 12" above land surface? (YES) or NO

If no, what is the height of the casing: _____ inches

Is there a sanitary well seal? (YES) or NO

Is the sanitary well seal in good repair? YES or (NO) see below

Are the following items present at the well head?

Vent yes Sample Tap yes - threaded

Well Tag no Pump Tag no

Potential Sources of Contamination?

Does the well currently meet separation requirements with known sources of contamination? YES or (NO)

If no, please provide distances to those it does meet:

Seal electrical more completely - well head seal in good repair

Well is less 100' from septic system. Will be >50'
Currently 72' - new tank will be approximately 100'

Other comments:

Complete below.

Name of person completing this form (please print): Danielle AM Wieberg, REHS

MELODY LANE
20' EASEMENT

BK 716 PG 354

North Carolina
Iredell County
Filed for registration on the 25 day of June 1985 4:15
P.M. recorded in Deed Book 716
page 354 and verified.
K. A. Nesbit
Register of Deeds
By Gwendolyn Nesbit Deputy

Re Stamps

Excise Tax

Tax Lot No.

Parcel Identifier No.

Verified by County on the day of , 19
by

Mail after recording to Robert N. Randall; P.O. Box 1085; Mooresville, NC 28115

This instrument was prepared by Robert N. Randall - Attorney

Brief description for the Index 1.432 Acres, Barringer Township

NORTH CAROLINA GENERAL WARRANTY DEED

THIS DEED made this 10th day of June , 19 85 , by and between

GRANTOR	GRANTEE
WILLIAM KENNETH MILLS and wife, MARTHA B. MILLS	JEFFREY DALE MILLS and wife, JULIE LOVINE MILLS

Enter in appropriate block for each party: name, address, and, if appropriate, character of entity, e.g. corporation or partnership.

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated in the XXXXXX Barringer Township, Iredell County, North Carolina and more particularly described as follows:

BEGINNING at an old iron pin, northwest corner of Lot No. 14 (Plat Book 3, page 74) owned by Clarence A. Davis (Deed Book 175, page 298) and running thence with Davis' line, South 18 deg. 57 min. West 162.86 feet to an iron pin, a new corner; thence a new line, North 48 deg. 07 min. 04 sec. West 447.15 feet to an iron pin, a new corner; thence a new line, North 41 deg. 29 min. 50 sec. East (passing through an iron pin at 29.5 feet) a total distance of 150.0 feet to an iron pin, a new corner in the southern margin of a 20 foot private right of way; thence with the southern margin of said 20 foot private right of way, South 48 deg. 07 min. 04 sec. East 384.70 feet to the point of BEGINNING, containing 1.432 acres.

Also, there is hereby conveyed a permanent right of way and easement for ingress, egress, regress and installation of utilities, to the Grantee and their heirs and assigns, in common with the Grantor and their heirs and assigns over a private road to be maintained by the parties using said road at their expense, said right of way described as follows:

Beginning in the right of way (near the western margin) of Highway No. 801, northeast corner of property of Clarence A. Davis, and running with Davis' line, NOrth 70 deg. 51 min. 26 sec. West 320.78 feet to an old iron pin, Davis' northwest corner; thence with the line of Jeffrey Dale Mills' 1.432 acre tract, North 48 deg. 07 min. 04 sec. WEst 384.70 feet to an iron pin; thence with a new line, North 41 deg. 29 min. 50 sec. East 20.0 feet to a stake; thence South 48 deg. 07 min. 04 sec. East 384.70 feet to a stake; thence South 70 deg. 51 min. 26 sec. East 320.78 feet to a stake in the right of way of N. C. Highway No. 801; thence within the right of way of said highway; thence South 23 deg. 39 min. 23 sec. West 20.0 feet to the point of beginning.

N.C. Bar Assoc. Form No. 3 - 1976, Revised - 1977

The above descriptions are in accordance with a plat of survey prepared by Kestler Surveying, Inc. dated March 14, 1985, a copy of which is hereto attached and made a part of this deed.

For back title see Deed Book 194, page 51 and Deed Book 588, page 623, Iredell County Registry.

The property hereinabove described was acquired by Grantor by instrument recorded in

A map showing the above described property is recorded in Plat Book page

TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the Grantee in fee simple.

And the Grantor covenants with the Grantee, that Grantor is seized of the premises in fee simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever except for the exceptions hereinafter stated. Title to the property hereinabove described is subject to the following exceptions:

IN WITNESS WHEREOF, the Grantor has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, the day and year first above written.

(Corporate Name)

By: .....

..... President

ATTEST:

..... Secretary (Corporate Seal)

USE BLACK INK ONLY

William Kenneth Mills (SEAL)
William Kenneth Mills

(SEAL)
Martha B. Mills

(SEAL)

(SEAL)

SEAL-STAMP

NORTH CAROLINA, IREDELL County.

I, a Notary Public of the County and State aforesaid, certify that
WILLIAM KENNETH MILLS & wife, MARTHA B. MILLS Grantor,
personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official stamp or seal, this 5th day of March, 1985.

My commission expires: 5-6-85 Notary Public

SEAL-STAMP

NORTH CAROLINA, County.

I, a Notary Public of the County and State aforesaid, certify that
personally came before me this day and acknowledged that he is Secretary of
a North Carolina corporation, and that by authority duly given and as the act of the corporation, the foregoing instrument was signed in its name by its
President, sealed with its corporate seal and attested by as its Secretary.
Witness my hand and official stamp or seal, this day of 19

My commission expires: Notary Public

Use Black Ink

The foregoing Certificate(s) of Lydia H. Smith (Widow) a Notary Public of Lincoln County, N.C.

is/are certified to be correct. This instrument and this certificate are duly registered at the date and time and in the Book and Page shown on the first page hereof.

L. L. NESBIT REGISTER OF DEEDS FOR IREDELL COUNTY

By Deputy Assistant - Register of Deeds

N. C. Bar Assoc. Form No. 3 © 1976, Revised © 1977

– will need well variance to shale
(72' to upper drain line)

RECEIVED DEC 2 2 2021

THUB

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED Paid $250.00

need to move house 5' (L) (road @ the back)

AP- 324151

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM*

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) 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: BART ABERNATHY Address: 1491 MT. ULLA HWY, MT ULLA NC Zip: 28125
Applicant Email: ROBYN@ABERNATHYGRADING.COM Phone: (704) 309-8626 Alt. Phone:
Owner Name: BART ABERNATHY Address: 1491 MT. ULLA HWY, MT ULLA, NC Zip: 28125
Owner Email: ROBYN@ABERNATHYGRADING.COM Phone: (704)309-8626 Alt. Phone: 704 664-6506

Property Information:

Street Address: 1229 MT. ULLA HWY., MOORESVILLE NC 28115
Subdivision Name: B A TROUTMAN (PB 3/PG 74) Section/Phase: — Lot Number: 16
Driving Directions: STA. HWY., TL OAKRIDGE FARM HWY., TL MT. ULLA HWY, 1500' ON LEFT PAST MOORESVILLE BLVD, TL MELODY LN., 150' ON THE RIGHT

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

(REPLACEMENT)
(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: 2
Maximum Number of Occupants: 4
( ) Swimming Pool
( ) Other Addition/Structure:

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

Water Supply: ( ) Replacement Well – Reason:
(X) Multi-connection Well Number of Houses: 2 Number of Persons: 8 MAX

( ) 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.

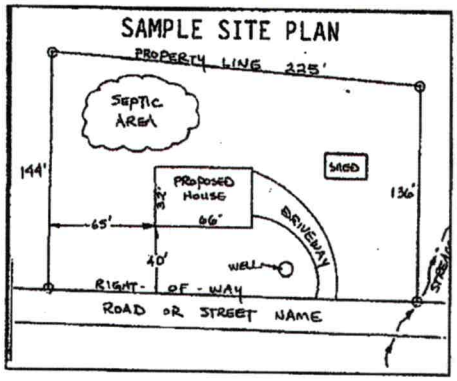
Signature: X Lee B Abernathy 12-20-21
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

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:

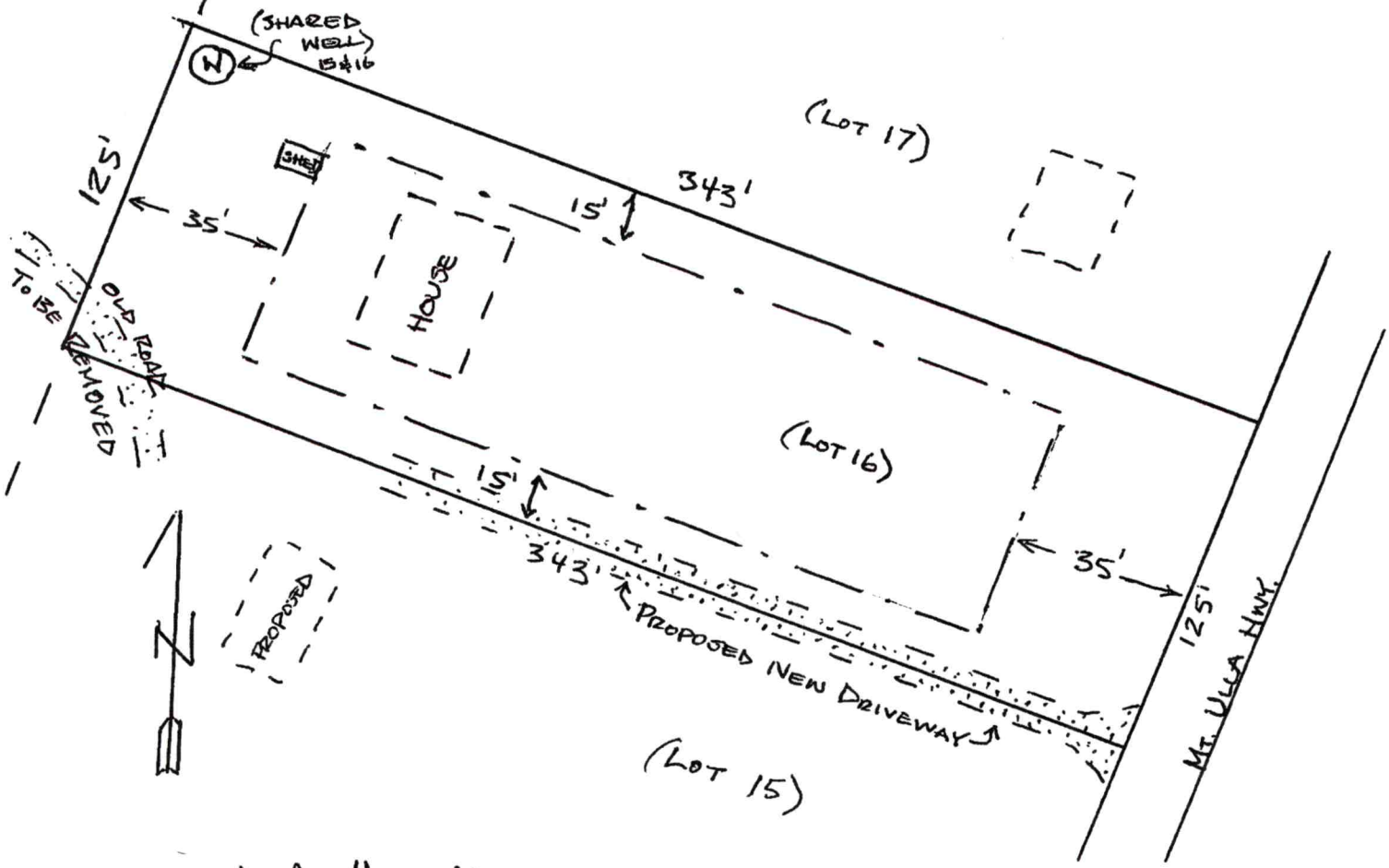
- (X) Property Line measurements are clearly identified
- (X) All proposed structures are indicated
- (X) Front and side setbacks from property line
- (X) Preferred driveway location and well location
- (X) Area you prefer your septic system to be placed (REPLACEMENT HOME)
- (X) North arrow, or other 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



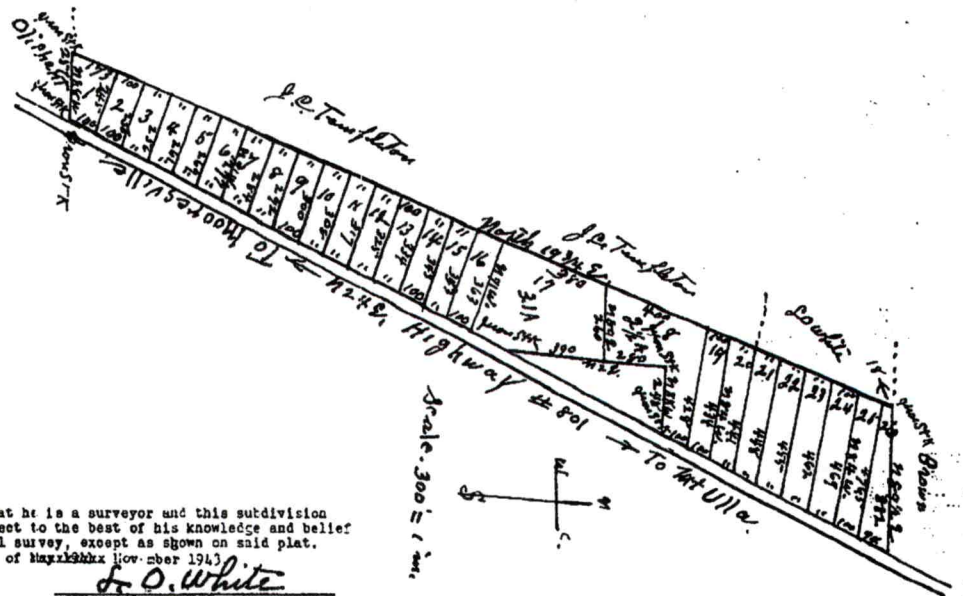
Signature: Lee B. Abernathy

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

12-20-21

DATE

PLAT. E. A. TROUTMAN, SUBDIVISION,
4 MILES EAST MOORESVILLE, N.C.
ON HIGHWAY # 801.



NORTH CAROLINA
IREDELL COUNTY

L.O. White being duly sworn says that he is a surveyor and this subdivision hereto attached is accurate and correct to the best of his knowledge and belief as was prepared by him from an actual survey, except as shown on said plat. The survey was made during the month of ~~May~~ November 1943.

L. O. White
Surveyor

Sworn to and subscribed before me this the 17th day of November 1943.

Miriam Patterson
Clerk of Superior Court

NORTH CAROLINA
IREDELL COUNTY.

The foregoing proof of the correctness of the attached map or plat, is adjudged to be in due form and according to law. Therefore let said map with this certificate be registered. Witness my hand this 17th day of November, A.D. 1943.

Miriam Patterson
Clerk of Superior Court

Filed for registration the 18 day of November, A.D. 1943, at 5 P.M.

L.F. Ervin
Register of Deeds.

PROPERTY

74

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*) X Lee B. Abernathy

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

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

_____ _____
Signature of Owner(s) 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

ENVIRONMENTAL HEALTH REQUIREMENTS for SEPTIC and WELL PERMITS

The following items must be completed *PRIOR* to the *SUBMITTAL* of any Environmental Health Application. Incomplete applications will be returned to the applicant and cannot be processed or placed on the work list.

*** Initial all lines below to indicate you have submitted each form and completed every site requirement ***

BA **Complete all Environmental Health forms:**

BA Application
BA Site Plan including the dimensions of proposed structure, addition, pool etc.
BA Documentation to Authorize Owner Agent (even if the property owner is the applicant – complete section 1 or 2)
BA Copy of Zoning Permit when applicable
BA Sign this sheet after you have completed all items

BA **Lot must be cleared of heavy undergrowth**. In order to evaluate the lot, the footprint of the proposed structure must be visible. Adequate area for the septic drain field and repair area must be sufficiently cleared of heavy undergrowth, with 50 feet of visibility in all directions. Inspectors must be able to evaluate the property, shoot laser level elevations, layout the drain field, do soils work, etc. **If the lot is not cleared sufficiently, then a $100 site revisit fee will be charged and the evaluation will be put on HOLD until the requirement is met.**

BA **Clearly mark all property corners by locating existing iron or concrete markers.** Flag all property lines every 25 feet if adjacent corners are not visible when standing on any given corner. Property lines must be flagged by a licensed NC surveyor & easily identified **prior to application submittal** (exception may apply for septic repair evaluations only). 'Mow lines' and/or fence lines do NOT constitute marked lines. **If the property lines are not properly marked when the lot is ready to be evaluated, then the application will be put on HOLD and a $100 site re-visit fee charged**.

BA **Stake or flag the footprint of the proposed structure, addition, pool etc. to match the site plan submitted**. The proposed structure, etc. must be staked out on the property as per the site plan.

BA **If an Authorization to Construct (AC) is desired,** submit a recorded copy of the plat for newly created or subdivided lot(s) and a LEGIBLE copy of the basic floor plan no larger than 8 ½" x 14" for each floor of the structure including decks, porches, etc. **The overall dimensions must be clearly noted & the rooms labeled.**

Any site not meeting the above requirements when staff arrives for the evaluation will result in a $100 site revisit fee being charged and the request being placed on HOLD. This will delay the processing of the application. *Once work by Environmental Health staff begins, the up-front fees paid toward securing any health department permit are nonrefundable. Refunds for work not started, due to a customer changing their mind or plans, are subject to an administrative fee of $50 to defray a portion of the costs of processing the refund.*

Backhoe pits are required for all applications that require a soils evaluation.
DO NOT DIG PITS UNTIL THE EH SPECIALIST HAS AUTHORIZED AND SCHEDULED YOUR EVALUATION TIME.

- **All utilities shall be marked before pits are dug. Call NC 811 for this service.**
- The applicant/agent is responsible for securing these services
- Backhoe pits are to be dug at the locations and depths determined by the Environmental Health Specialist or a NC Licensed Soil Scientist. A minimum of four pits must be dug.
- The EH specialist will contact you when your application is ready to be processed for pit scheduling.
- Your backhoe operator must be on site during the EH Specialist's evaluation to prevent your operator from having to return to the property for additional work.

By signing below, I am acknowledging the above specifications have been met and the site is READY to be evaluated AND I understand the backhoe pit requirement and will secure those services (if applicable).

Signature Lee B. Abernathy **Date** 12-20-21

Questions? Contact the Environmental Health Offices below:

Statesville Office
349 North Center Street (1st Floor Building Standards)
Statesville, NC 28677-4063
Phone: (704)878-5305 ext. 3456

Mooresville Office
610 East Center Avenue (2nd Floor Govt. Center South)
Mooresville, NC 28115-2548
Phone: (704)660-3625