Permit #177589 New Well 10-16-13 PP $495.00 Pd $105.00 (Refund)

# IREDELL COUNTY HEALTH DEPARTMENT

## *ENVIRONMENTAL HEALTH DIVISION*

**PAGE 1: *APPLICATION FORM*** Paid $395.00 11-19-13 RM

**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* ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

**Applicant Information:**

**Applicant Name:** M. Kryoens **Address:** 221 Faulkner Pt Mooresville **Phone:** 704-136-3551

**Owner Name:** Daniel Smith **Address:** 164 Rustic Rd Mooresville **Phone:**

**Property Information:**

**Street Address:** 164 Rustic Rd Mooresville NC 28115

**Subdivision Name:** _____ **Section/Phase:** _____ **Lot Number:** _____

**Driving Directions:** Left on Potts Rd 2 mi. to Rt on to Rustic 1st on Rt

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

(✓) 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: _____

(✓) 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:**

(✓) 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 ( ) Other: _____

**Please answer the following to the best of your ability:**

( ) Yes (✓) No Does the site contain any jurisdictional wetlands?
( ) Yes (✓) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (✓) 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:** _____ 10-16-13

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

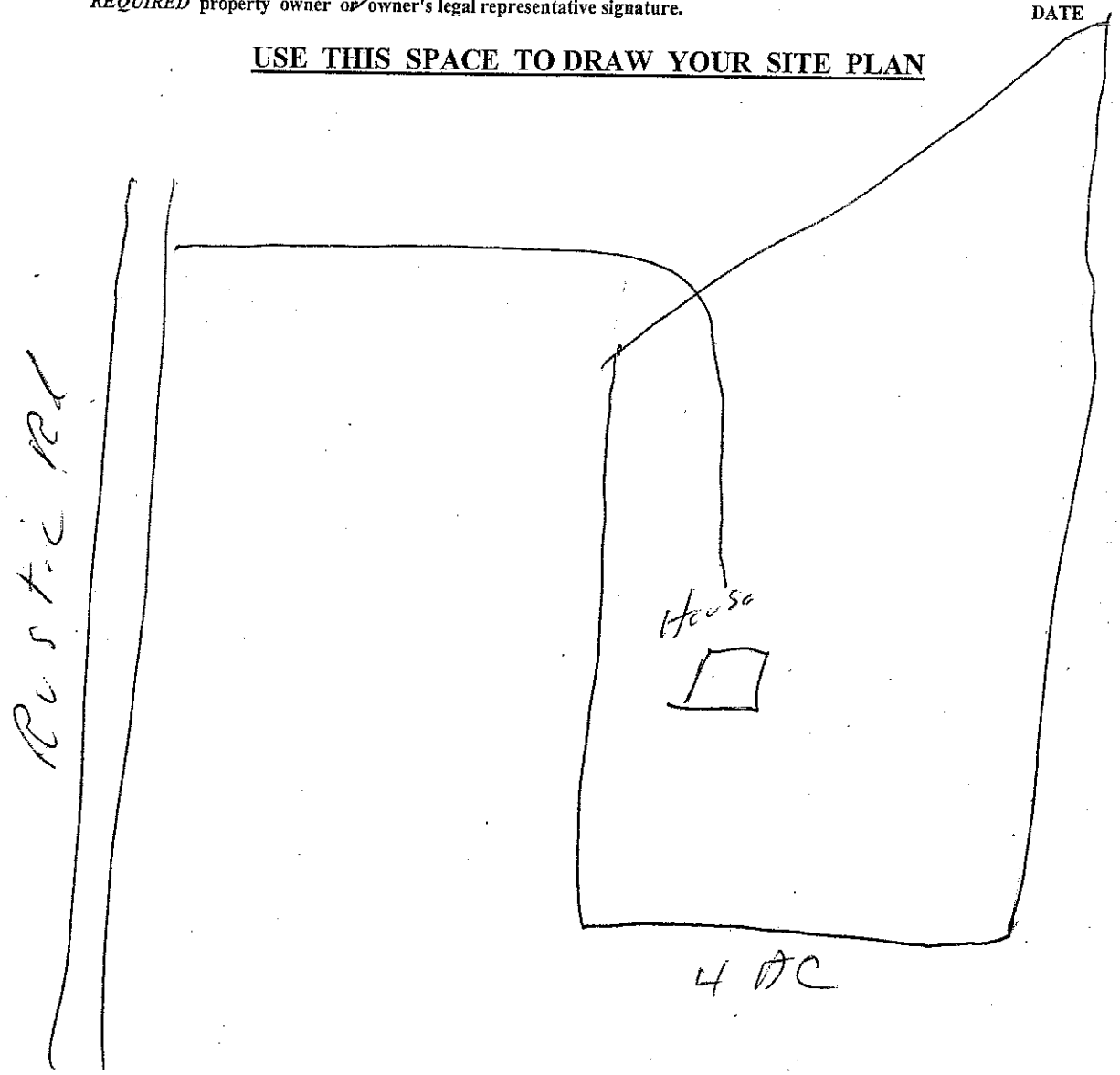
- ✓ Property Line measurements are clearly identified...
- ✓ All proposed structures are indicated...
  *SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site*
- ✓ Front and side setbacks from property line...
- ✓ 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:** [signature] 10-16-13
*REQUIRED* property owner or owner's legal representative signature. DATE

## USE THIS SPACE TO DRAW YOUR SITE PLAN



3/26/13 2nd Faxed.

**Iredell County**
**Planning & Enforcement**
**349 N. Center St. PO Box 788**
**Statesville, NC 28687**
**704-878-3113**

FILE COPY

## Zoning Permit

**Permit Number:** 177589ZO


Printed: 3/11/2013

**Master #:** 177589

**Associated Permits:**
177589ZO Zoning

### Applicant

**Name:** WAYNE G PATTERSON
**Address:** 1914 CODDLE CREEK HWY
MOORESVILLE, NC 28115
**Phone:**

### Parcel

**Parcel Number:** 4684093305.000
**Address:** ~~000~~ 164 RUSTIC RD
MOORESVILLE, NC 28115
**Subdivision:**
**Zoning:** RA
**Township:** 0300
**Area:** 36.78
**Lot(s):**
**Directions to Parcel:** ON THE CORNER OF PATTERSON FARM RD AND RUSTIC RD

### Owners

**Name:** WAYNE G PATTERSON
**Address:** 1914 CODDLE CREEK HWY
MOORESVILLE, NC 28115

PAID
Cash
3-11-13

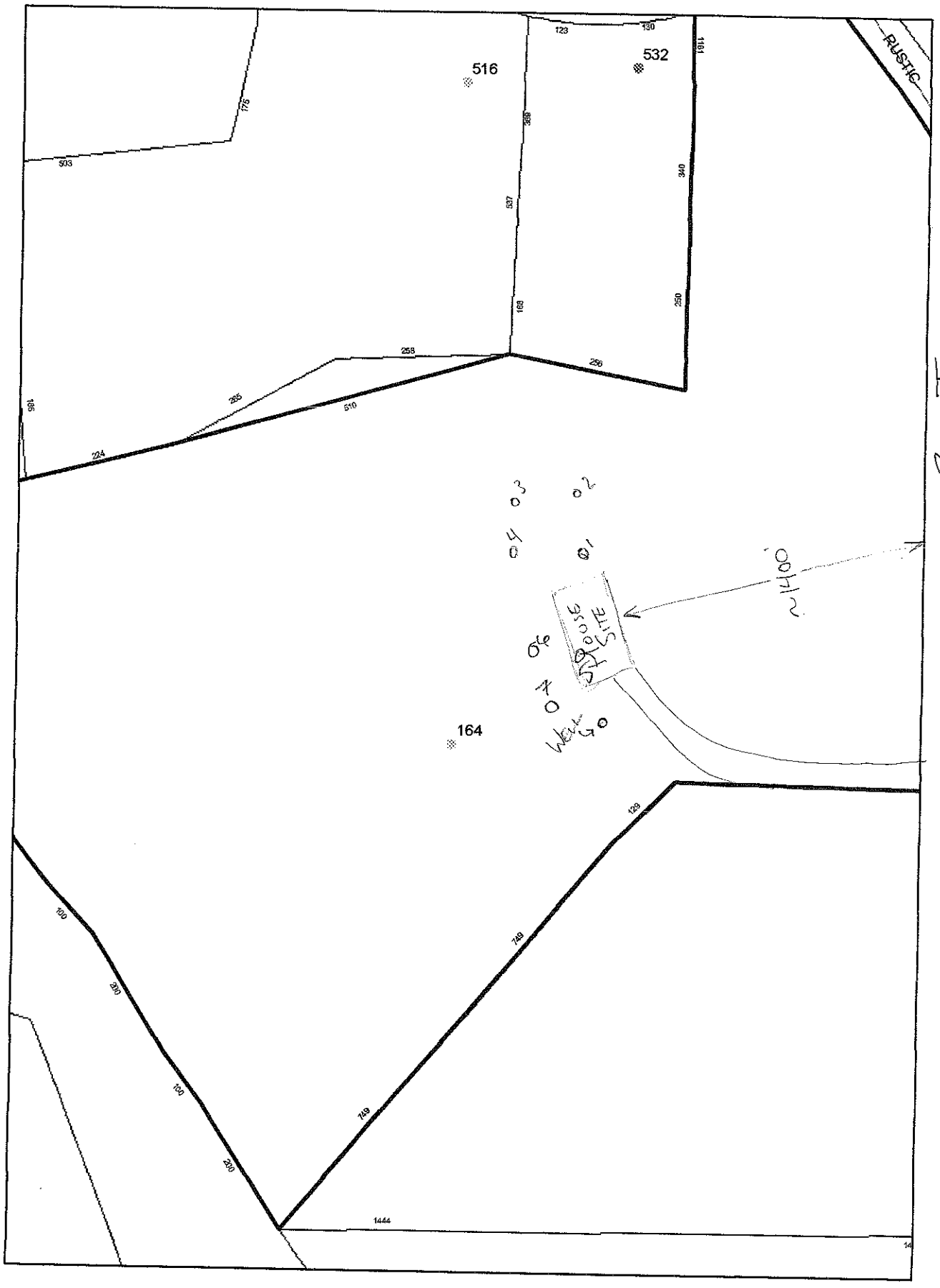
### Contractors

**Contractor Type:** Building
**Name:** Owner
**Address:**
**Phone:** 880 722 4984

1445

### Fees and Receipts:

| Number | Description | Amount |
|---|---|---|
| FEE-278355-07 | Zoning - Permit Application | $75.00 |
| FEE-278356-07 | Technology Fee - Planning | $2.25 |
| FEE-278357-07 | Environmental Health - Gravity System | $500.00 |


516
532
164
RUSTIC
123
130
161
503
175
369
340
537
168
250
258
256
185
265
510
224
03
02
04
01
2400'
SITE
HOUSE
06
07
WEST
123
749
749
100
200
200
200
1444
2ND JUNE

Department of Environment, Health, and Natural Resources
Division of Environmental Health
On-site Wastewater Section

Sheet: 1 OF 1
PIN #:
Lot #:
Permit #: 177589
AppID:

# SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: DANIEL AND VICKY SMITH
Address: RUSTIC RD.
Applicant: GARY PATTERSON
Date Evaluated: 4/30/2013
Property Size: 3.115 AC
Property Recorded: YES

Proposed Facility: SFR
Design Flow (.1949) 480
Location of Site: RUSTIC RD.
Water Supply: [ ] Public [X] Individual [X] Well [ ] Spring [ ] Other
Evaluation Method: [X] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [X] Sewage [ ] Industrial Process [ ] Mixed

| PROFILE # | .1940 Landscape Position/ Slope% | Horizon Depth (IN.) | SOIL MORPHOLOGY .1941 .1941 Structure/ Texture | .1941 Consistence Mineralogy | b PROFILE FACTORS .1942 Soil Wetness/ Color | .1943 Soil Depth (IN.) | .1956 Sapro Class | .1944 Restr Horiz | Profile Class & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| AB 1 | L 4% | 0-24 | RC,M,SBK | SS | NA | 48" | MANY @ 24" | 48+ | .35 |
| | | 24-48 | CL,W,SBK | SS | | | | | |
| AB 2 | L 4% | 0-12 | RC,M,SBK | SS | NA | 48" | MANY @ 12" | 48+ | .35 |
| | | 12-48 | CL,W,SBK | SS | | | | | |
| AB 3 | L 4% | 0-24 | RC,M,SBK | SS | NA | 48" | MANY @ 24" | 48" | .35 |
| | | 24-48 | CL,W,SBK | SS | | | | | |
| AB 4 | L 4% | 0-16 | RC,M,SBK | SS | NA | 48" | MANY @ 16" | 48" | .35 |
| | | 16-48 | CL,W,SBK | SS | | | | | |

| Description | Initial System | Repair System |
|---|---|---|
| Available Space (.1945) | PS | PS |
| System Type(s) | G-25% | G-25% |
| Site LTAR | .35 | .35 |

Other Factors (.1946):

Soil Evaluation By: BEN ALDRIDGE
Others Present: GARY PATTERSON, DANIEL SMITH, MIKE YOUNG

Site Classification (.1948): PS

Site Evaluation By: BEN ALDRIDGE
Others Present: GARY PATTERSON, DANIEL SMITH, MIKE YOUNG