SH

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # OSWP2022-11757

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

PIN # 4705 -- 37 -- 8946

APPLICANT/OWNER: Araceli Anselmo APPLICANT ADDRESS: 219 Trailway Dr. Statesville NC 28625

SITE ADDRESS: 206 Trailway Dr Statesville NC 28625 PHONE: 7043267229 ALT. PHONE 7044029059

SITE DIRECTIONS: US 64 → (L) Tippard Farm → (R) Happy Acres → (L) Trailway → on (L) SAP CONTROLLED: ☐ YES ☐ NO

SUBDIVISION: Casa Grande SECTION: 2 LOT # 14 LOT AREA: 1.61 AC DESIGN FLOW: 360 L.T.A.R.: EXT

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

EXISTING

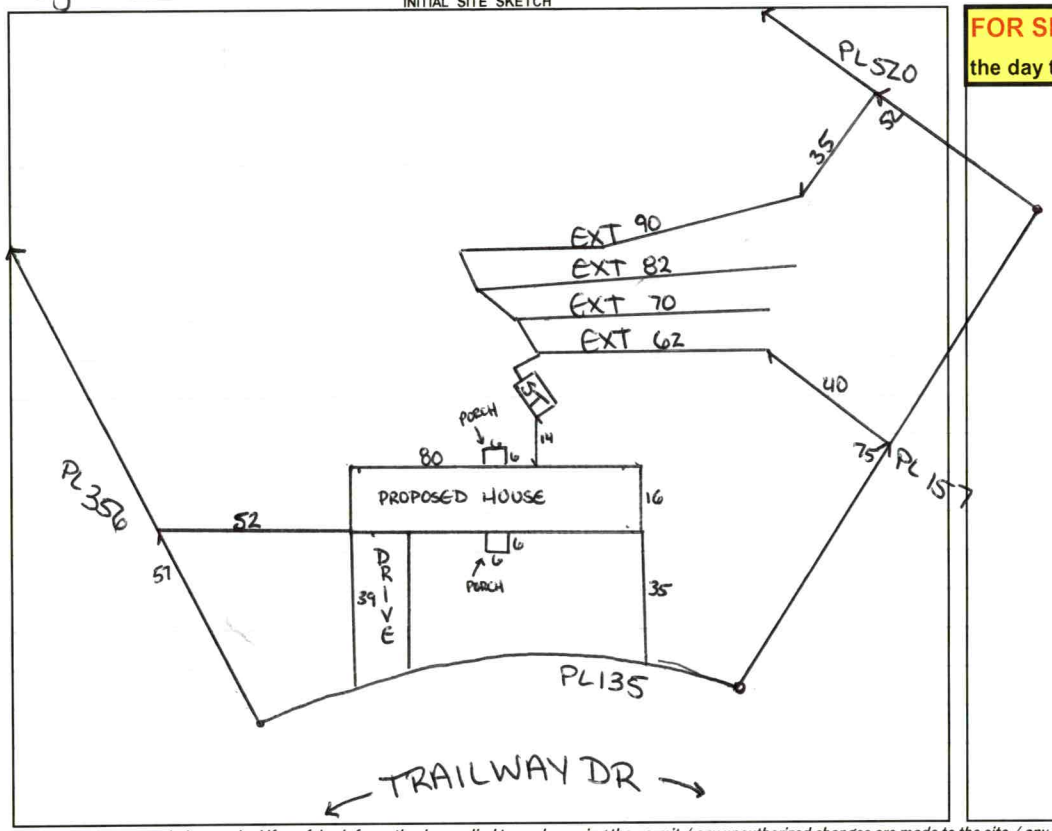
☐ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI
System Description: EXISTING
Repair System Description:
Maintenance Agreement Required: ☐ YES ☒ NO
☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 3
☐ Business No. Persons 6
☐ Other No. Employees —
☐ Slab ☒ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply
☐ Private
☒ Public
☐ Community

Comments / Conditions: System appeared to be functioning at time of inspection. Do not grade, pave, park, construct on system.

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.

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: ____ Date: ____ Installed by: ____

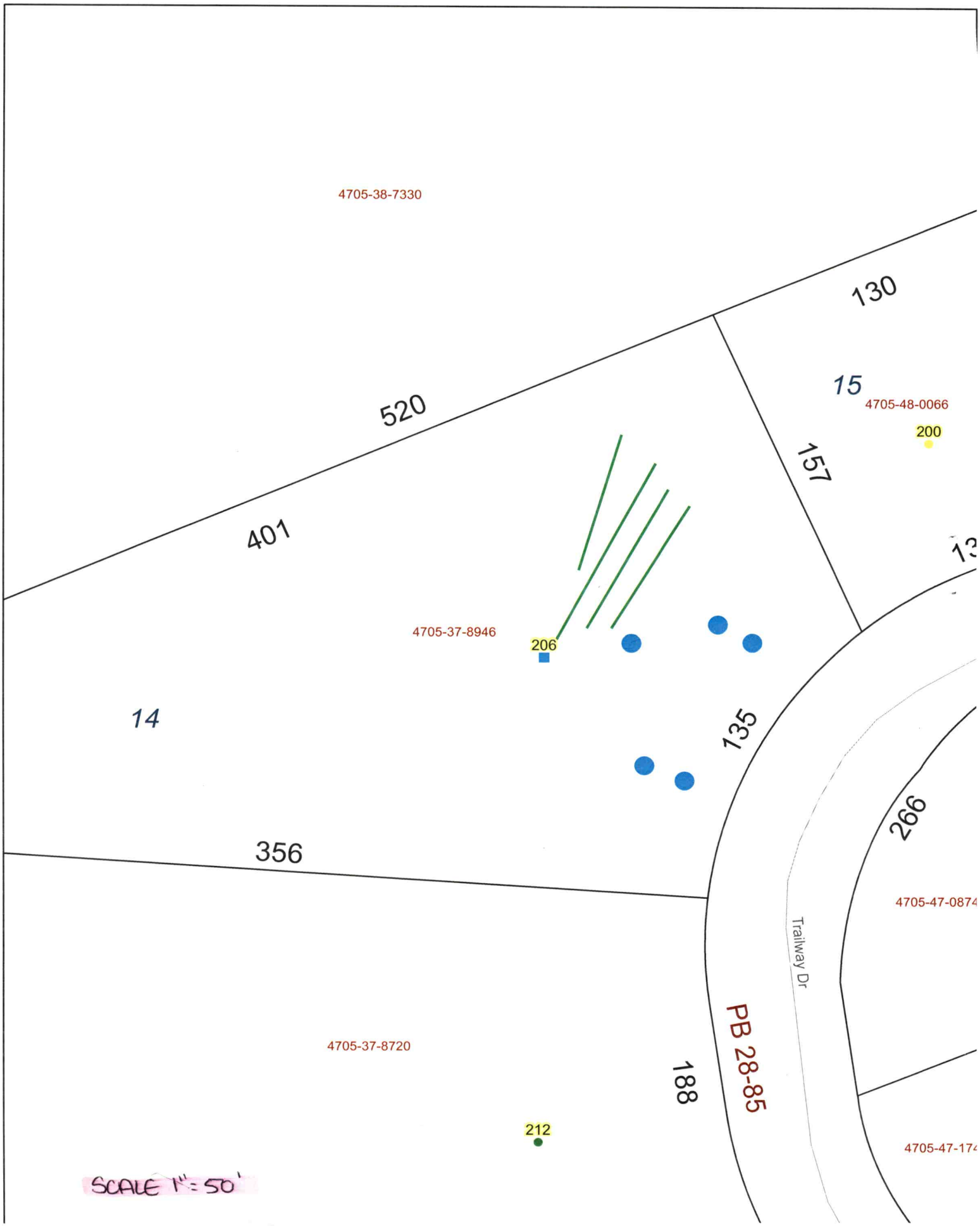
IMPROVEMENT PERMIT by: ____ Date: ____ OPERATION PERMIT by: ____ Date: ____

AUTHORIZATION TO CONSTRUCT by: ____ Date: ____ Existing System Inspected by: Sarah Williams Date: 9/21/2023

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

Item	Date	Initials
Drain Lines Checked		
Tanks Checked		
Pressure Manifold or Valve Box Checked		
Pressure Head Set		
Electrical Checked		
Floats Set		
Alarm Checked		
Maintenance Contract Needed? Y / N		
Comments:		

Repairs Only	
	State Code
Failing System Code	
Type of Distribution	G or P
Type of Failure/Malfunction	
Primary Cause of Failure/Malfunction	
Age of System? _____	
Initial or Repair? _____	


4705-38-7330
130
520
15
4705-48-0066
200
157
401
4705-37-8946
206
14
135
356
266
4705-47-0874
Trailway Dr
PB 28-85
4705-37-8720
188
212
4705-47-174
SCALE 1" = 50'

PERMIT SNAPSHOT REPORT OSWP-2022-11751 FOR IREDELL COUNTY

Permit Type:	Environmental Health OSWP	**Project:**		**App Date:**	12/16/2022
Work Class:	EH Existing Septic System	**District:**	Iredell County	**Exp Date:**	NOT AVAILABLE
Status:	In Progress	**Square Feet:**	0.00	**Completed:**	NOT COMPLETED
Valuation:	$0.00	**Assigned To:**	Bracken, Sarah	**Approval Expire Date:**	

Description: existing system inspection for replacement of singlewide DO NOT BUILD IN FLOOD ZONE IF YOU HAVE ANY QUSETIONS ON THE FLOOD ZONE YOU CAN CONTACT JONATHAN WILLIAMS IN THE PLANNING DEPT.
Email address on file is incorrect. Email bounced. Emailed applicant 2/16/23 to call Chrystal -rh.

CALLED AND LEFT MESSAGE TO PLEASE CALL OR EMAIL ME. dc

Parcel: 4705378946.000 Main	**Address:** 206 Trailway Dr Statesville, NC 28625 Main	**Zone:** RA(Residential Agricultural District)

Property Owner	Applicant/Authorized Agent
Araceli (call Edgar Castro) Anselmo	Araceli (call Edgar Castro) Anselmo
219 Trailway Drive	219 Trailway Drive
Statesville, NC 28625	Statesville, NC 28625
Home: (704) 326-7229	Home: (704) 326-7229
Mobile: (704) 402-9059	Mobile: (704) 402-9059

Permit Custom Fields

How is your site plan being submitted	Custom Site Plan	Does the site contain any jurisdictional wetlands	No	Non-domestic Sewage Generated	No
Other Public Agency	No	All proposed structure dimensions	16x80	What are the proposed structures	New Single-Family Residence - Modular
If other Addition/Structure, please explain		Maximum Number of Bedrooms	3	Number of Occupants	6
Foundation Type	Crawl Space Foundation	Water Supply	Other Public Water	Desired Septic System Type	No Preference
Lot Acreage	1.61	Front Setback	35	Back Setback	15
Left Setback	15	Right Setback	35	Zoning Permit Issued Date	Mar 1 2023 12:00AM
Zoning Permit Expiration Date	Aug 28 2023 12:00AM	Is the structure or development in the floodplain	No	Is the property located downtown?	No
Is the property in a local historic district?	No	Additional Unique Setbacks Apply	Yes	Zoning Notes/Addendums	DO NOT BUILD IN FLOOD ZONE IF YOU HAVE ANY QUSETIONS ON THE FLOOD ZONE YOU CAN CONTACT JONATHAN WILLIAMS IN THE PLANNING DEPT.REQUIREMENTS FOR ALL SINGLEWIDE MOBILE HOMES Must meet requirement R10 of the LDC. Must remove the towing apparatus, if it cannot be removed, it shall be screened; Must have a continuous underpinning; Must have 36 square foot front porch constructed within 12 inches of the floor elevation; Must have approved steps at all other secondary entrances and exits; Must face front property line and be no

more than 20 degrees from parallel to the front property line. Original home must be removed before Certificate of Occupancy can be approved.	Watershed NOT IN A WATERSHED

Attachment File Name	Added On	Added By	Attachment Group	Notes
Signature_Araceli_Anselmo_12/16/2022.jpg	12/16/2022 16:47	Anselmo, Araceli		Uploaded via CSS
Scan Dec 16, 2022 (4)_v1.pdf	12/19/2022 11:21	Nebel, Barbara	Available Online	Authorize to Act as Agent
206 TRAILWAY DR SITE PLAN.pdf	12/27/2022 16:14	Sloan, Chrystal		NOT APPROVED
4705378946.a1.tif	12/28/2022 8:21	Hart, Ronda	Available Online	Prior Septic permit
206 TRAILWAY DR ZONING DISCLAIMER SITE PLAN.pdf	03/01/2023 16:54	Sloan, Chrystal		

Inspection Number	Status	Inspection Type	Request Date	Scheduled Start Date	Scheduled End Date	Actual Start Date	Actual End Date
2023-116164	Passed - Permit	OSWP Septic/Well Preliminary Site Visit	07/19/2023	07/19/2023 0:00	07/19/2023 0:00	07/19/2023 12:24	07/19/2023 12:24

Inspectors: Holland, Sydney (Primary)

Checklist Item	Description	Passed	Comments
General Comments	Checklist item used to track general comments, not specific to any other checklist item	No	

Note	Created By	Date and Time Created
1. DO NOT BUILD IN FLOOD ZONE IF YOU HAVE ANY QUSETIONS ON THE FLOOD ZONE YOU CAN CONTACT JONATHAN WILLIAMS IN THE PLANNING DEPT.	Deborah Williams	12/27/2022 16:27
2. 3/3/23	Sydney Holland	03/03/2023 8:29
3. Back property line, right property line and flood zone needs to be marked.	Sydney Holland	03/06/2023 13:00
4. house box too close to front PL, Curve needs to be surveyed and house moved to be 35 from front PL. Called owner to discuss - left message - placing on hold until house can be moved back	Sarah Bracken	07/31/2023 14:04

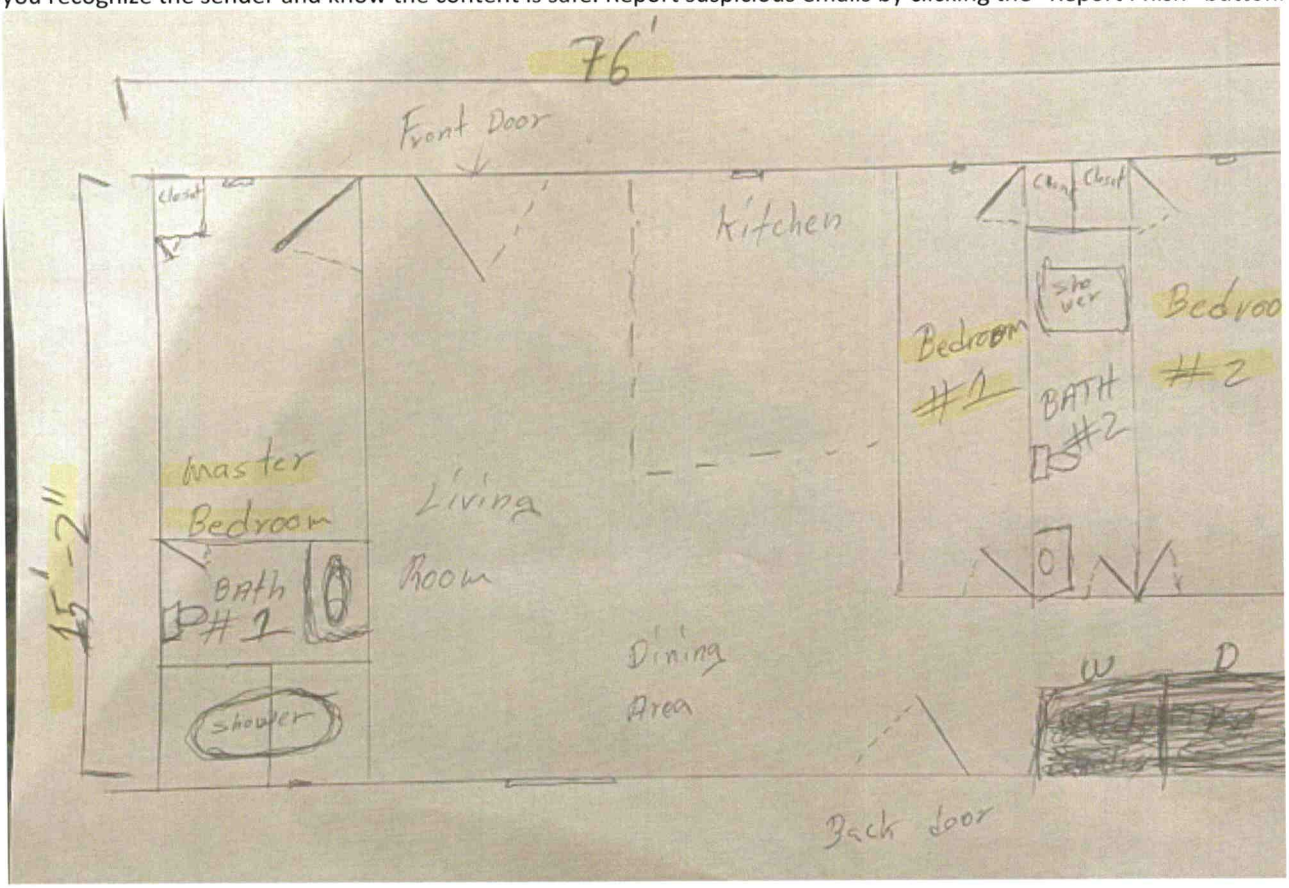
Invoice No.	Fee		Fee Amount	Amount Paid
INV-00006573	Existing System Inspection		$250.00	$250.00
		Total for Invoice INV-00006573	$250.00	$250.00
INV-00006578	Iredell Zoning Tech Fee		$2.25	$2.25
	Iredell Zoning Permit Fee		$75.00	$75.00
		Total for Invoice INV-00006578	$77.25	$77.25
INV-00010190	Site Revisit		$100.00	$100.00
		Total for Invoice INV-00010190	$100.00	$100.00
		Grand Total for Permit	**$427.25**	**$427.25**

Workflow Step / Action Name	Action Type	Start Date	End Date
Application Completeness Check v.1		12/19/2022 11:24	12/19/2022 12:09
Confirm application complete v.1	Generic Action		12/19/2022 12:09
Zoning Review v.1		12/19/2022 11:24	03/01/2023 17:02
Fees Paid v.1	Generic Action		12/27/2022 15:11
Iredell County Zoning Approval v.1	Task	12/19/2022 11:24	12/27/2022 15:34
Issue Invoice v.1	Generic Action		12/19/2022 13:01
Fees v.1		12/19/2022 12:09	12/27/2022 14:22
Issue Invoice v.1	Generic Action		12/19/2022 12:09
Fees Paid v.1	Generic Action		12/27/2022 14:22
Lot Readiness Verification v.1		07/19/2023 12:24	

Sarah Bracken

From: Ivan Castro <edgarin120@gmail.com>
Sent: Friday, December 8, 2023 10:45 AM
To: Sarah Bracken
Subject: Floorplans

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe. Report suspicious emails by clicking the "Report Phish" button.



Sent from my iPhone

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 CT MOORESVILLE 704-664-5281

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

PERMIT# 120500 PIN# 4705 37 8946 DATE 9/26/05

OWNER OR CONTRACTOR DELBERT & LINDA SECHRIST PHONE: Business 570 623 4226 Home 607 760 3336

ADDRESS RR 2 BOX 1086 LITTLE MEADOWS, PA 18830

LOCATION 40W 64W @ LIPPARO FARM RD @ HAPPY ACRES @ TRAILWAY @ LOT 206 TRAILWAY DR

SUBDIVISION CASA GRANDA BLOCK / SECTION II LOT 14 LOT AREA 1.61 ACRES SITE CLASS PS DESIGN FLOW 360gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 10-1-05
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet Eq 1200 Linear Feet 300
No Lines 4 Trench Width 36" Max Trench Bottom Depth 24" Gravel Depth NA

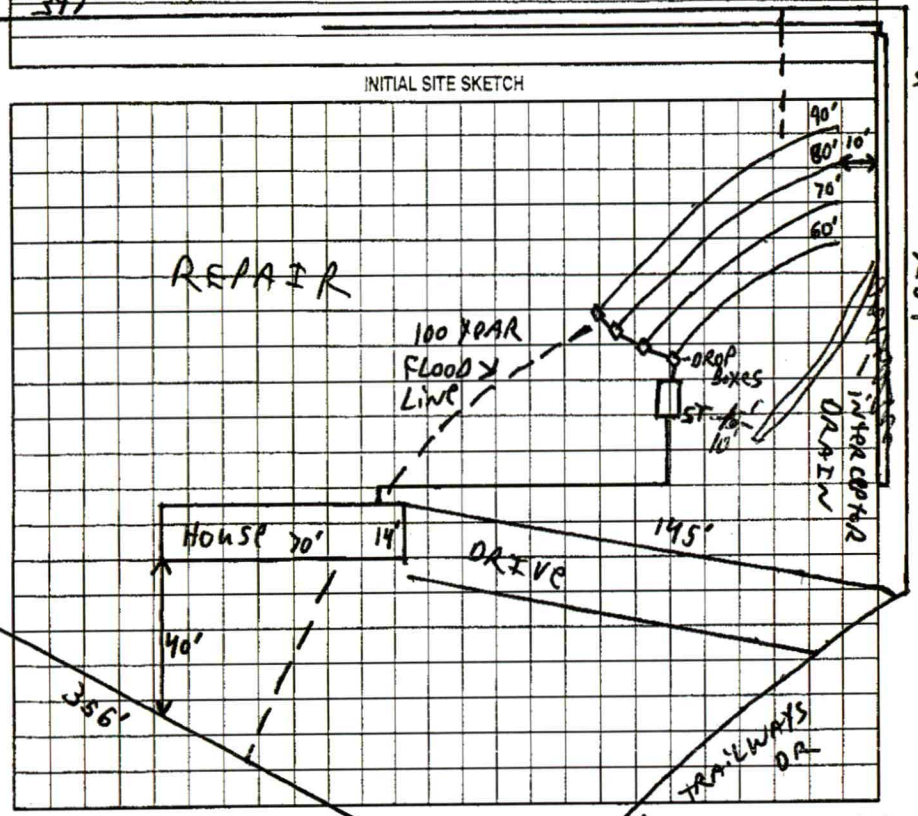
☒ New System ☐ Repair System Type: I, (II), III, IV, V, VI
System Description: GRAVITY 25% REDUCTION
Repair System Description: SAME
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms ____
☐ Business No. Employees ____
☐ Other ____
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

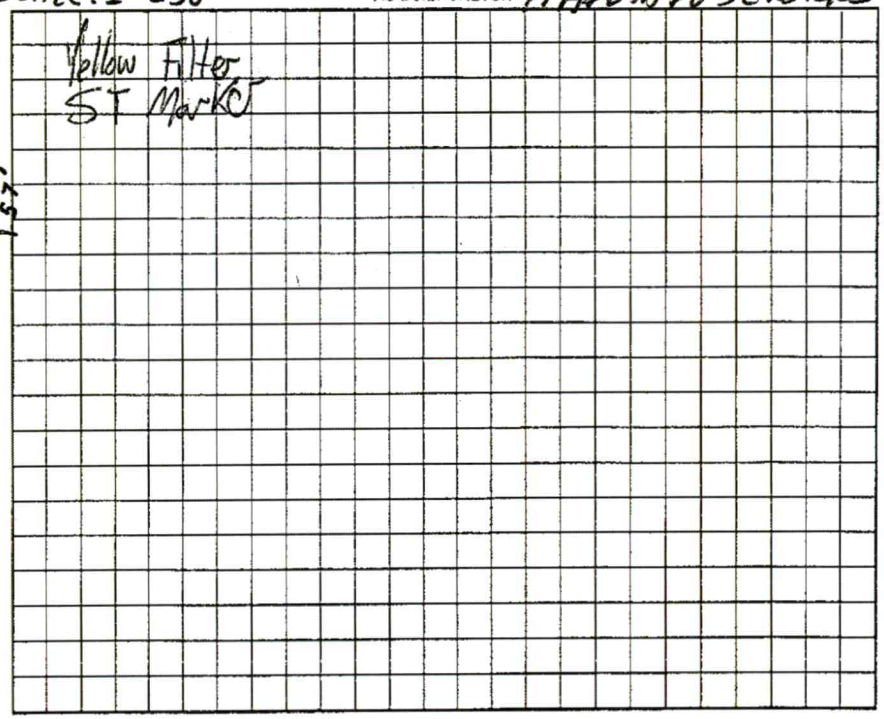
Comments:/Conditions: INSTALL ON CONTOUR. MAINTAIN SETBACKS. INSTALL SUB-SURFACE INTERCEPTOR DRAIN AS SHOWN.

INITIAL SITE SKETCH



Comments:/Conditions: (1) APPROVED 3 BEDROOM 16V 76' HOUSE PLANS. SLIDE HOUSE UP TO 38' OFF P/L SO BACK OF HOME IS IN SAME LOCATION. EXTRA 6' OF LENGTH WILL NOT AFFECT SYSTEM!

Scale: 1" = 50' AS BUILT SKETCH MAINTAIN SETBACKS



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. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: _____ date 1-23-06
Improvement Permit by: _____ date 9/26/05
Authorization to Construct by: _____ date 5-1-06

Installed by: A-1 Backhoe
Operation Permit by: James date 5-16-06
Existing System Inspection by: _____ date _____

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK