IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 224708

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

PIN # 4706160152

APPLICANT: Carolyn Houpe APPLICANT ADDRESS: 333 E Lackey Farm Rd Stony Point NC

SITE ADDRESS: 333 E Lackey Farm Rd Stony Point NC PHONE: 704-585-9102 ALT. PHONE: 704-450-6283

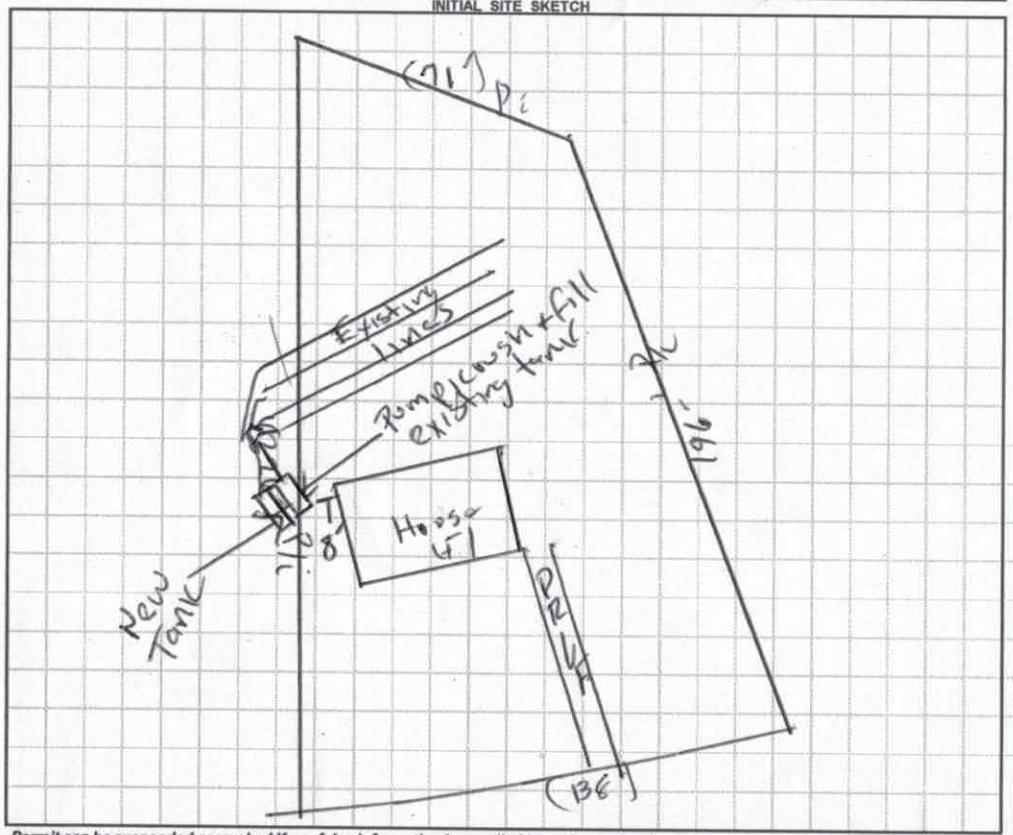
SITE DIRECTIONS: 40 w T/R 64/90 follow 64 T/R E Lackey Farm Rd Third house on left

SUBDIVISION: N/A SECTION: N/A LOT # N/A LOT AREA: 0.492 ac DESIGN FLOW: 360 L.T.A.R.: Ex

Septic Tank	1000	(gal)	STB	760	Date	4-22-17	☐ New System	☒ Repair	☐ Expansion	System Type: I ☒ II III IV V VI	☒ Residence	No. Bedrooms	3	Water Supply	
Pump Tank		(gal)	PT		Date		System Description:			Tank	☐ Business	No. Persons	6	☐ Private	
Pump Make			Model		Serial #		Repair System Description:				☐ Other	No. Employees		☒ Public	
# Nitrification Fields	Ex		# Lines	Ex	Linear Ft:	Ex	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☒ Crawl Space		☐ Community	
Trench Width	Ex		Max. Trench Bottom Depth	Ex	Gravel Depth	Ex		☒ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing			☐ Basement w/o plumbing	

Comments / Conditions: Pump + crush + fill existing tank maintain 5' off any building foundation

INITIAL SITE SKETCH



AS BUILT SKETCH

*Installed as drawn

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: Carolyn Houpe Date: 05/23/17 Installed by: Lentz septic service

IMPROVEMENT PERMIT by: Date: 05/22/17 OPERATION PERMIT by: Kayla Wilson Date: 5-26-17

AUTHORIZATION TO CONSTRUCT by: Date: 05/22/17 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK

IREDELL COUNTY HEALTH DEPARTMENT Permit 224708

ENVIRONMENTAL HEALTH DIVISION

Application for IMPROVEMENT PERMIT, AUTHORIZATION TO CONSTRUCT, or EXISTING SYSTEM INSPECTION

(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)

1. **APPLICATION FOR:** ___ Improvement Permit ___ Authorization To Construct ___ BOTH ___ Existing System Inspection

2. 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 check ( ) beside whichever is submitted if applicable ___ Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. **Applicant Information:**

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Carolyn F. Houpe	333 East Lackey Farm Road	704-585-9102	704-450-6283
Owner Name	**Mailing Address**	**Home Phone #**	**Alternate Phone #**
Carolyn F. Houpe	" " " Road	" " "	" " "

4. **Property Information:**

Street Address	Subdivision Name	Section/Phase and Lot Number
333 East Lackey Farm Road Stony Point, NC 28678	NO	

Driving Directions: From Statesville west on 64/90 Taylorville Rd, at second Red light 90 turn Right, 64 stay straight 5miles to East Lackey Farm Road on the Right, it will be the third House on the Left.

5. **RESIDENTIAL Site Development Information:** *(Check or Complete ALL that apply)*

( ) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
(X) Repair To Failing Septic System due to old age
( ) Other

Maximum Number of Bedrooms ___
Maximum Number of Occupants ___
If Expansion, Current Number of Bedrooms ___

( ) Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) Basement w/Plumbing?
( ) Basement w/out Plumbing?

IF Non- Residential Site Development:
Type of Business ___
Square Footage of Building ___
Maximum Number of Employees ___
Maximum Number of Seats ___

6. **Proposed Water Supply:**

( ) New Well ( ) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

7. **Desired Septic System Type:** *(You may rank in order of preference, if any)* ( ) Existing system--installed in 1991 (YEAR)
( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other ___ ( ) No Preference

8. **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. industry) 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.

9. **Signature:** David D. Rucker — 2/7/17
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) — DATE

IREDELL COUNTY HEALTH DEPARTMENT

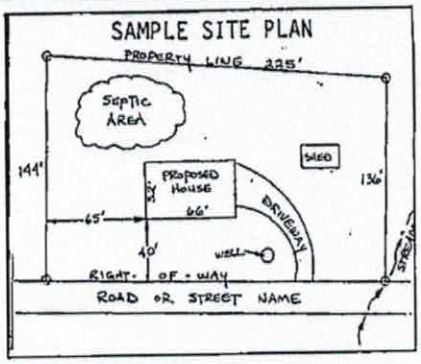
ENVIRONMENTAL HEALTH DIVISION

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
- ( ) Area you prefer your septic system to be placed
- ( ) North arrow, or other sufficient indicator of direction

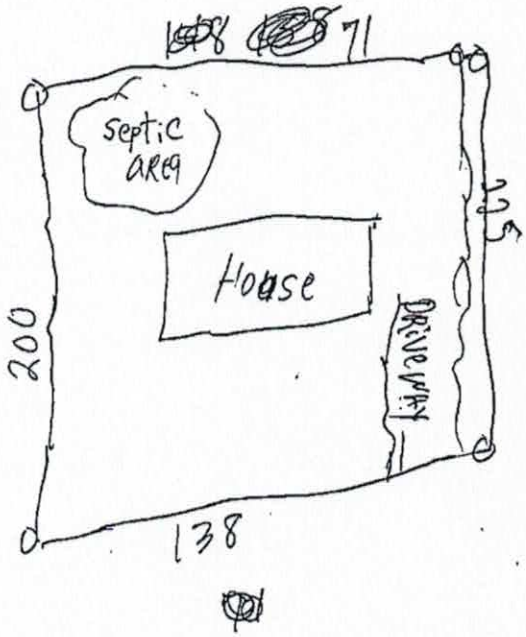


Circle N/A on the following if appropriate:

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: David D. Rucker

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

2/1/17

DATE

Doc ID: 015825090002 Type: CRP
Recorded: 05/17/2017 at 02:11:19 PM
Fee Amt: $26.00 Page 1 of 2
Revenue Tax: $0.00
Iredell County, NC
Ronald N. Wyatt Register of Deeds
BK 2490 PG 583-584

Drawn by: Alan G. Carpenter, Attorney at Law

NORTH CAROLINA

IREDELL COUNTY

DEED OF EASEMENT

This Deed of Easement is made this 15th day of May, 2017, by and between FAYE H. RUCKER and husband, DAVID RUCKER (hereinafter called "Grantor"), and CAROLYN FEIMSTER HOUPE, (hereinafter called "Grantee")

(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 the context.)

RECITALS:

1. The Grantor is the owner of a tract or parcel of land designated as Iredell County PIN 4706-15-0997 and described in Deed Book 2431, page 2144, Iredell County Registry.

2. The Grantee is the owner of a tract or parcel of land designated as Iredell County PIN 4706-16-0152 (0.49 acres) and described in Deed Book 853, page 419, Iredell County Registry.

3. The septic system serving the property of the Grantee is in need of repair, and it has been determined that septic system and drain field extends over and on to the property of the Grantor, and the Grantor therefore wishes to give an easement for septic purposes to the Grantee.

4. And, in order to comply with Iredell County Ordinances, the Grantee is in need of a recorded Deed of Easement, establishing that the septic easement area which extends over and on to the parcel designated as PIN 4706-15-0997 is an appurtenance to the tract designated as Iredell County PIN 4706-16-0152, and runs with the land.

R.O.T.C.

Page Count: 2

NOW, THEREFORE, in consideration of the foregoing premises and the sum of $1.00, receipt of which is hereby acknowledged, the Grantor does hereby give, grant, and convey unto the Grantee, his heirs and assigns, a perpetual right of way and easement for purposes of the installation and operation of a septic system and drain field, over and upon the property described as follows:

The property designated as Iredell County PIN 4706-15-0997 and described in Deed Book 2431, page 2144, Iredell County Registry, with said easement to incorporate such area as the Iredell County authorities shall determine is necessary for the operation of the septic system.

To have and to hold said right and easement to the said Grantee and his heirs and assigns; it being agreed that the right and easement hereby granted is appurtenant to and runs with the property of the Grantee and hereinabove referred to.

In Witness Whereof, the Grantor has caused this instrument to be duly executed, this the day and year first above written.

Faye H. Rucker (SEAL)

David Rucker (SEAL)

STATE OF NORTH CAROLINA
COUNTY OF IREDELL

I, a Notary Public of the County and State aforesaid, certify that Faye H. Rucker and David Rucker personally came before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official stamp or seal, this 10 day of May. 2017.

Notary Public

My Commission Expires:

(Official Seal)

BRITTNEY BENFIELD
Notary Public
Iredell Co., North Carolina
My Commission Expires Oct. 17, 2021