BLDR-2023-32155

ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # OSWP-2023-29328

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

PIN # 4706-46-5847

PPLICANT / OWNER: Cynthia Rovira APPLICANT ADDRESS: 151 Cajun Hideaway Ln., Statesville, NC 28625

TE ADDRESS: 117 CAJUN HIDEAWAY LN, STATESVILLE, NC 28625 PHONE: ALT. PHONE:

TE DIRECTIONS: SAP CONTROLLED: YES ☐ NO ☑

UBDIVISION: R L Fiemster SECTION: LOT #: 11 LOT AREA: 1.07 DESIGN FLOW: 360 L.T.A.R.: 0.3

eptic Tank: 1000 (gal)	STB: 760	Date: 1-8-2024	☑ New System ☐ Repair ☐ Expansion	System Type: III	☑ Residence	No. Bedrooms: 3	Water Supply: Other Public Water
ump Tank: (gal)	PT:	Date:	System Description: Accepted		☐ Business	No. Persons: 4	
ump Make:	Model:	Serial #:	Repair System Description: Accepted		☐ Other	No. Employees:	
Nitrification Fields: 1	# Lines: 4	Linear Ft.: 312	Maintenance Agreement Required: ☐ YES ☑ NO		☐ Slab	☐ Crawl Space	
ench Width: 36	Trench Bottom Depth (Low side): 30		Gravel Depth:	☑ GRAVITY ☐ PRESSURE	☑ Basement w/ Plumbing	☐ Basement w/o Plumbing	

omments / Conditions: This Improvement Permit is issued pursuant to G.S. 130A-335 (a2) and (a3) using the signed and sealed LSS/LG evaluation(s) ttached here. This Construction Authorization is issued pursuant to G.S. 130A-335(a2) and (a5) using the signed and sealed plans or evaluations attached here.

INITIAL SITE SKETCH

AS BUILT SKETCH

INSTALLED AS SHOWN (SEE ATTACHED)

rmit 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.

wner / Applicant Signature: Date:

IPROVEMENT PERMIT by: Benjamin A Botkins Date: 7/13/2023

UTHORIZATION TO CONSTRUCT by: Benjamin A Botkins Date: 7/13/2023

Installed By: GROUNDBREAKERS

OPERATION PERMIT by: Benjamin C. White Date: 3-5-2024

Existing System Inspected By: Date:

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

NCDHHS

Permit #: OSWP-2023-29328

This Section for Local Health Department Use Only

Initial submittal received: 6/30/2023 (*Date*) by BB (*Initials*)

G.S. 130A-335(a3) states the following:

When an applicant for an Improvement Permit submits to a local health department an Improvement Permit application, the permit fee charged by the local health department, the common form developed by the Department, and a soil evaluation pursuant to subsection (a2) of this section, the local health department shall, within five business days of receiving the application, conduct a completeness review of the submittal. A determination of completeness means that the Improvement Permit includes all of the required components. If the local health department determines that the Improvement Permit is incomplete, the local health department shall notify the applicant of the components needed to complete the Improvement Permit. The applicant may submit additional information to the local health department to cure the deficiencies in the Improvement Permit. The local health department shall make a final determination as to whether the Improvement Permit is complete within five business days after the local health department receives the additional information from the applicant. If the local health department fails to act within any period set out in this subsection, the applicant may treat the failure to act as a determination of completeness. The Department shall develop a common form for use as the Improvement Permit.

The review for completeness of this Improvement Permit was conducted in accordance with G.S. 130A-335(a3). This Improvement Permit is determined to be:

☐ Incomplete (If box is checked, information in this section is required.)

The following items are missing:

_____

_____

Copies of this were sent to the LSS and the Applicant on _____ (*Date*)

State Authorized Agent: _____ Date: _____

☑ Complete

State Authorized Agent: Benjamin A Botkins Date: 7/13/2023

This Improvement Permit is issued pursuant to G.S. 130A-335 (a2) and (a3) using the signed and sealed LSS/LG evaluation(s) attached here. The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This permit is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.

The Department, the Department's authorized agents, and the local health departments shall be discharged and released from any liabilities, duties, and responsibilities imposed by statute or in common law from any claim arising out of or attributed to evaluations, submittals, or actions from a licensed soil scientist or licensed geologist pursuant to GS 130A-335(a2).

Improvement Permit Expiration Date: 7/13/2028

See attached site sketch

NCDHHS

Permit #: OSWP-2023-29328

This Section for Local Health Department Use Only

Initial submittal received: 6/30/2023 (*Date*) by BB (*Initials*)

G.S. 130A-335(a5) states the following:

When an applicant for a Construction Authorization, or an Improvement Permit and Construction Authorization together, submits a Construction Authorization, or an Improvement Permit and Construction Authorization application together, the permit fee charged by the local health department, the common form developed by the Department, and any necessary signed and sealed plans or evaluations conducted by a person licensed pursuant to Chapter 89C of the General Statutes as a licensed engineer or a person certified pursuant to Article 5 of Chapter 90A of the General Statutes as an Authorized On-Site Wastewater Evaluator, the local health department shall, within five business days of receiving the application, conduct a completeness review of the submittal. A determination of completeness means that the Construction Authorization or Improvement Permit and Construction Authorization includes all of the required components. If the local health department determines that the Construction Authorization or Improvement Permit and Construction Authorization is incomplete, the local health department shall notify the applicant of the components needed to complete the Construction Authorization or Improvement Permit and Construction Authorization. The applicant may submit additional information to the local health department to cure the deficiencies in the Construction Authorization or Improvement Permit and Construction Authorization. The local health department shall make a final determination as to whether the Construction Authorization or Improvement Permit and Construction Authorization is complete within five business days after the local health department receives the additional information from the applicant. If the local health department fails to act within any period set out in this subsection, the applicant may treat the failure to act as a determination of completeness. The applicant may apply for the building permit for the project upon the decision of completeness of the Construction Authorization or Improvement Permit and Construction Authorization by the local health department or if the local health department fails to act within five business days. The Authorized On-Site Wastewater Evaluator or licensed engineer submitting the evaluation pursuant to this subsection may request that the local health department revoke or suspend the Construction Authorization or Improvement Permit and Construction Authorization for cause. Upon written request of the Authorized On-Site Wastewater Evaluator or licensed engineer, the local health department shall suspend or revoke the Construction Authorization or Improvement Permit and Construction Authorization pursuant to G.S. 130A-23. The Department shall develop a common form for use as the Construction Authorization.

The review for completeness of this Construction Authorization was conducted in accordance with G.S. 130A-335(a5). This Construction Authorization is determined to be:

☐ Incomplete (If box is checked, information in this section is required.)

The following items are missing: _____

_____

Copies of this were sent to the AOWE/PE and the Applicant on _____ (*Date*)

State Authorized Agent: _____ Date: _____

☑ Complete

State Authorized Agent: Benjamin A Botkins Date of Issuance: 7/13/2023

This Construction Authorization is issued pursuant to G.S. 130A-335(a2) and (a5) using the signed and sealed plans or evaluations attached here. This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be affected by a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.

The Department, the Department's authorized agents, and the local health departments shall be discharged and released from any liabilities, duties, and responsibilities imposed by statute or in common law from any claim arising out of or attributed to plans, evaluations, preconstruction conference findings, submittals, or actions from a person licensed pursuant to Chapter 89C of the General Statutes as a licensed engineer or a person certified pursuant to Article 5 of Chapter 90A of the General Statutes as an Authorized On-Site Wastewater Evaluator in GS 130A-335(a2), (a5), and (a7). The Department, the Department's authorized agents, and the local health departments shall be responsible and bear liability for their actions and evaluations and other obligations under State law or rule, including the issuance of the operations permit pursuant to GS 130A-337.

Construction Authorization Expiration Date: 7/13/2028

See attached site sketch

SOIL & FORESTRY SERVICES

www.soilandforestryservices.com

Project#: 22-0176
May 19th, 2023

Greg Rovira
Attn: *Greg Rovira*
Email: Cynthia_rovira@yahoo.com

RE: Soil & Site Evaluation for a 3 Bedroom Residence at 117 Cajun Hideaway Ln., 1.07 ac Parcel, PIN# 4706465847, Statesville, NC 28625, Iredell County, NC.

Mr. Greg:

At your request Soil & Forestry Services of the Carolinas (S&FS) has performed soil/site evaluations on parcel noted above. The Lot size is noted on the attached survey map & soil evaluation form. The purpose of our work was to identify soil areas with potential to support subsurface wastewater disposal systems and provide design details for Session Law submittals to Iredell County Health Department.

Site Conditions
At the time of our evaluation land cover on the property was mostly cleared/open on the property. Topography within the evaluated area was gentle slope near the house site with gentle percentage of slope in the proposed drainfield area. Property lines and corners were marked at the time of the evaluation by Survey. The Surveyor provided an Autocad File of the survey as a basemap. The proposed septic layout was located via GPS and tape measures which were used to produce the attached *Site Plan*. The house envelope was pinned in the field by survey for our evaluation.

Methodology
We evaluated soil areas through the use of auger borings. Soil morphological conditions including color, texture, structure, etc. were reviewed in the field with five auger boring and locations on the property flagged and located via GPS. Three auger borings are located in or adjacent to the proposed septic layout. Soil suitability was determined by referencing 15A NCAC 18A.1900 "Laws and Rules for Sewage Treatment and Disposal Systems". *Soil & Site Evaluation Forms* were utilized to record the soil morphological data for each boring. The house envelope was located via survey. An on-ground layout of system and repair was performed using a laser level. Pin flag locations of the layout were also located by GPS and tape measure. Detailed system & repair information is summarized in the following paragraph for this Lot. There is flexibility for the house to move forward toward Cajun Hideway if needed but must meet Zoning setbacks.

[redacted]

117 Cajun Hideaway LN. PIN #4706465847 *(See Attached Design)*
The septic layout for this lot (9' centers) yielded a total of 725 linear feet of line. The primary system is proposed as 312' of Accepted (25% Reduction) drainfield with gravity distribution. Trench depth (LOW SIDE) is specified at 30 inches. The repair system is proposed as 300' of Accepted (25% Reduction) drainfield with gravity distribution Trench depth (LOW SIDE) is specified at 30 inches. There is 339 linear feet available for repair.

Session Law Requirements

All information needed to issue the IP must be submitted with the application. The application shall include all information described in 15A NCAC 18A .1937(d) and be accompanied by a signed and dated statement from the applicant (owner or owner's legal representative) that reads as follows:

"The LSS/LG evaluation(s) attached to this application is to be used to issue an Improvement Permit in accordance with G.S. 130A-335(a2) and (a3)."

Owner Date

Print Name_____
Signature_____ _____

The LSS evaluation shall include a statement bearing the LSS seal and signature that reads as follows:

"The LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2)."

Disclaimer
This report reflects the findings of S&FS, PA. *This LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2)."* Any site modifications that impact the proposed septic areas on the site may nullify this design for 117 Cajun Hideaway ln. System design requirements and site requirements shall be adhered to for installation and Operations Permits to be issued by the local Health Department. If you have questions regarding these requirements a Pre-Construction meeting should be scheduled to discuss. Please contact S&FS if you have any questions regarding this report or the attached information. S&FS also offers septic system inspection, wetland delineation and forestry services.

Sincerely,

LICENSED SOIL SCIENTIST
SAMUEL A. ROLLANS
1231
STATE OF NORTH CAROLINA

S. Ashley Rollans, LSS
Attachment: *Septic Design*

[redacted]

SOIL & FORESTRY SERVICES

www.soilandforestryservices.com

Attached is a proposed design for an Accepted Septic System with gravity dist. for a 3 bedroom single family residence at 117 Cajun Hideaway ln, R L Fiemster PIN#(4706465847) Statesville 28625, Iredell County, NC.

Contents: **Page**

Information for the Installer---------- 1

Design Information
Design Specifications---------- 2-3
Layout Specifications---------- 4

Site Plan/System Plan---------- 5

Calculations---------- 6

Profile Descriptions---------- 7

Septic Application---------- online

Zoning Permit---------- online

Original Plat---------- 8

IP Form---------- 9

CA Form---------- 10

LICENSED SOIL SCIENTIST SAMUEL A. ROLLANS 1231 STATE OF NORTH CAROLINA

May 19, 2023
Project #: 22-0176
Design By: Soil & Forestry Services of the Carolinas, PA

INFORMATION FOR THE INSTALLER:

The permit should be read very carefully prior to bidding. The following are details that must be considered along with all other considerations.

- Tanks shall be approved by NC DHHS, and certification supplied by the manufacturer.
- Tanks shall be water tested prior to installation.
- The installer shall be responsible to the owner for placement of the tanks and to insure that final grades are returned to the original natural grade, with exception of added structural features.
- The supply trench shall be compacted to eliminate cavities left during initial fill placement.
- Installation of the system shall be during dry conditions in order to protect the soil structure.
- All fittings shall be pressure rated fittings.
- All joints shall be cleaned with PVC pipe cleaner and a heavy bodied glue applied to weld all joints.
- Where required by the county health department, post installation inspections by the designer must be scheduled 5 week days in advance.
- Trenches shall be carefully excavated so the bottom is within 2" from the highest to . the lowest points of elevation within the trench. If the bottom elevation needs adjusting after it has been trenched, it will be done by removing high points rather than filling low points. It is extremely important to insure that trenches are not over excavated during initial trenching. All fine grading within the trench will be hand done with a shovel. No loose material will be left in the trench
- All pipe openings in the tanks shall be properly grouted. This also applies to the joints around the riser.
- All tanks shall be properly back filled and compacted to prevent slump at a later date.
- Earth dams, constructed of relatively impervious material, shall be installed at the beginning and end of each lateral.
- No heavy equipment shall be used on the field during or after installation. The use of a small loader (i.e. Bobcat) or a trencher (i.e. Ditch Witch 2300/2310) may be used for installation.
- Elevations at pinflag locations should be checked by the installer prior to beginning trenches.
- Septic tank riser shall be a minimum of 6" above finished grade.
- System is specified as a gravity 25% reduction (Accepted) installation.
- Repair is specified as a gravity 25% reduction (Accepted) installation.

GRAVITY ACCEPTED SYSTEM
FOR WASTEWATER TREATMENT

Owner/Applicant: Greg Rovira

Address: 151 Cajun Hideaway Lane
Statesville NC 28625

Phone: 704-585-9017
County: Iredell
Location: 117 Cajun Hideaway

Source of Wastewater Flow: 3 Bedroom Single Family Residence
Estimated Gallons Per Day Flow: 360
System Flow: N/A

Design Specifications

Drainfield Size: 312
Loading Rate (gpd/ft.^{2}): 0.3
Depth of Gravel in Trench: N/A
Gravel Size: N/A
Low Side Trench Depth: 30 in. Repair Trench Bottom 30 in.
Trench Width: 36 in.
Septic Tank Size: 1000

Estimated Supply Line Length: 21
Supply Line Diameter: 4 in. SCH 40 PVC
Supply Line Volume: 13.71
Dosing Volume: N/A
Supply Manifold: N/A
Supply Manifold Length: N/A
Supply Manifold Volume: N/A

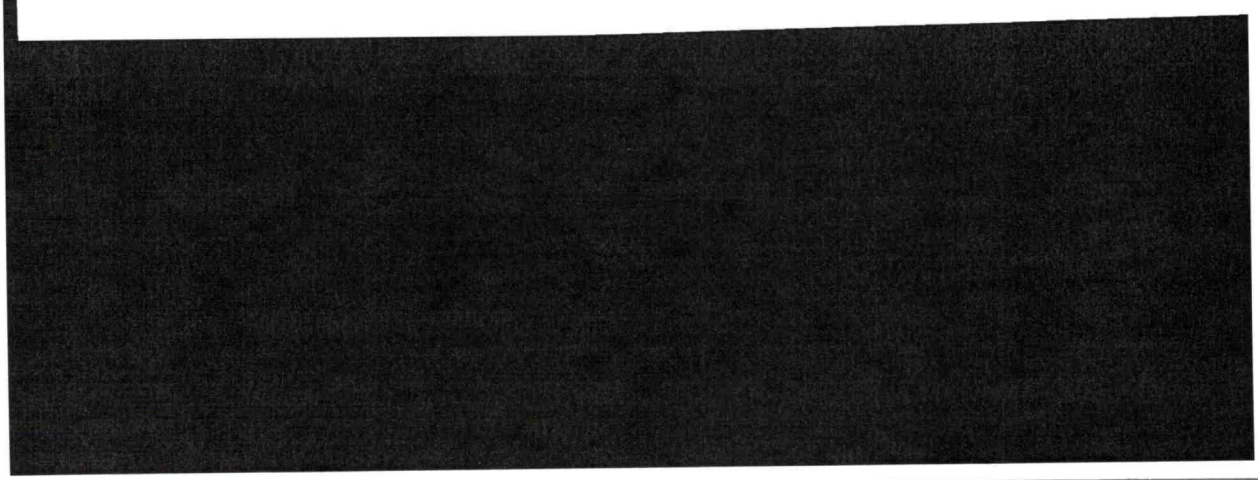
Recommended Float Controls: N/A

Recommended Control Panel: N/A

Pressure Head: N/A
Friction Head: N/A
Elevation Head: N/A
Total Dynamic Head: N/A

Threaded Union: N/A
Gate Valves: N/A

Check Valves: N/A
Anti-Siphon Hole: N/A
Additional Comments: Soil suitability was performed by Soil & Forestry Services of the Carolinas, PA



117 Cajun Hideaway

ACCEPTED SYSTEM

DESIGN FLOW (gpd):	360
SOIL APPLICATION RATE (gpd/ft.^{2}):	0.3
TOTAL AREA TRENCH BOTTOM:	936
TOTAL LATERAL LENGTH:	312
NUMBER OF FIELDS:	1
LATERAL LENGTH REQUIRED PER FIELD:	300
SUPPLY LINE LENGTH:	21
TOTAL DYNAMIC HEAD:	N/A
MANIFOLD SIZE:	N/A
DOSING VOLUME:	N/A
PUMP TANK DRAW DOWN*:	N/A
SEPTIC TANK SIZE:	1000

[redacted]

Layout Specifications -117 Cajun Hideaway Lane

Project #: 22-0176

LAYOUT FOR 3 BEDROOM HOME

May 19, 2023

LINE #	FLAG COLOR	BS	HI	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM							
INSTR. 1							
1	***RED***					***98***	***78***
2	***ORANGE***					***93***	***78***
3	***YELLOW***					***95***	***78***
4	***BLUE***					***100***	***78***
5	PINK					96	96
6	RED					97	97
7	ORANGE					58	58
8	YELLOW					88	88
					Total	725	651

	LINE LENGTH	LTAR GPD/FT2	SYSTEM TYPE	SOIL LTAR GPD/FT2	TRENCH SYSTEM	DISTRIBUTION	LOW SIDE TRENCH DEPTH
**** System***	***312***	***0.300***	***ACCEPT.***	***0.300***	***25% RED***	***GRAVITY***	***30"***
Repair	339	0.300	ACCEPT.	0.300	25% RED	GRAVITY	30"

Notes:

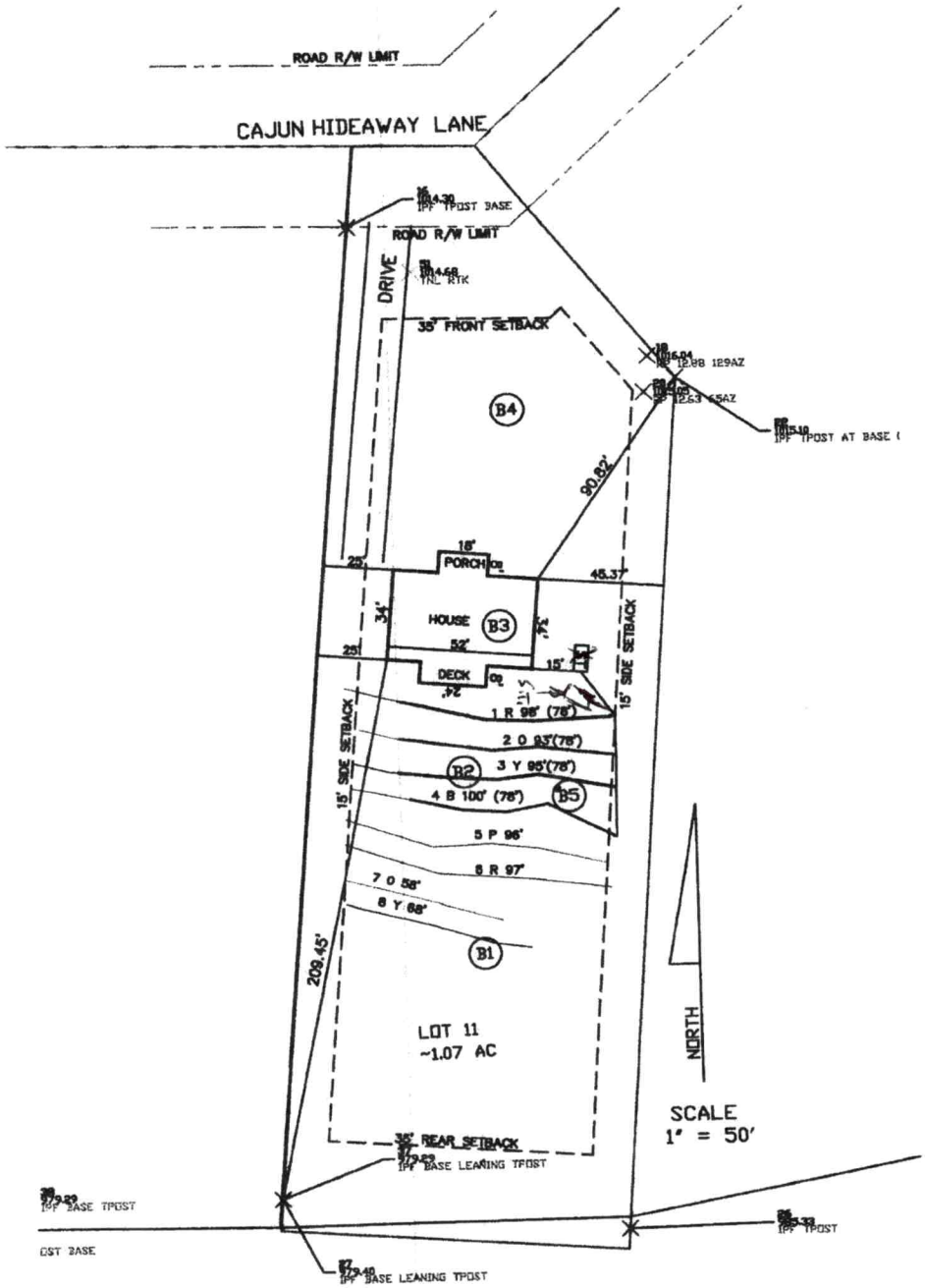
**All measures in feet

**Nitrification lines are demonstrated on contour via colored pin flags

**Nitrification lines were located by tape measures & GPS.

**Property lines, corners & house were located by a Professional Land Surveyor.

[redacted]



HOUSE ENVELOPE CAN MOVE FORWARD TOWARD CAJUN HIDEAWAY LANE BUT CANNOT MOVE CLOSER TO THE PROPOSED DRAINFIELD OR TANK.

[redacted]

CALCULATIONS

Location 117 Cajun Hideaway ln
Statesville, NC 28625
Project Number 22-0176

Lot No: 11

No. of Bedrooms 3

Design Flow 360 $^{gal}/_{day}$

LTAR 0.300 $^{gal}/_{ft^2\,day}$

PPBPS? (YES OR NO) NO

Supply Line Length 21 ft.

Supply Line Volume 13.713 gal.

Required Feet of Line 300 ft.
Amount of Line from Layout 312 ft.

Gallons per Minute N/A $^{gal}/_{min}$

Required Septic Tank Capacity 1000 gal.
Septic Tank Size 1000 gal.

Panel Volume N/A gal.
# of Panels N/A
Dosing Volume N/A gal.

FRICTION FACTOR
INTERPOLATER
2" SCH 40 PVC

GPM	f
20	0.84
	-0.88
25	1.27
	-1.28
30	1.78
	-1.76
35	2.37
	-2.25
40	3.03
43.07	3.48
45	3.77
48.14	4.28
50	4.58
57.11	5.89
60	6.42

Tank Draw Down N/A

Pump Run Time

Elevation Head N/A ft.
Pressure Head N/A ft.
Friction Factor N/A ft./100 ft. *(From the interpolater.)*
Friction Head N/A ft.

Total Dynamic Head (+15%) N/A ft.

[redacted]

Sheet 1 of 1
PROPERTY ID #: 4706408547
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM
(complete all fields in full)

OWNER: Gregory Rovira
ADDRESS: PO Box 76 Statesville NC 28699
PROPOSED FACILITY: 3 BR Manufactured/SFD
LOCATION OF SITE: Cajun Hideaway Lane Lot 11

APPLICATION DATE:
DATE EVALUATED: 12/14/2022
PROPERTY SIZE: 1.07
PROPERTY RECORDED: Yes

WATER SUPPLY: ☐ Private ☐ Well ☐ Spring ☑ Other — County Water

EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut

TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

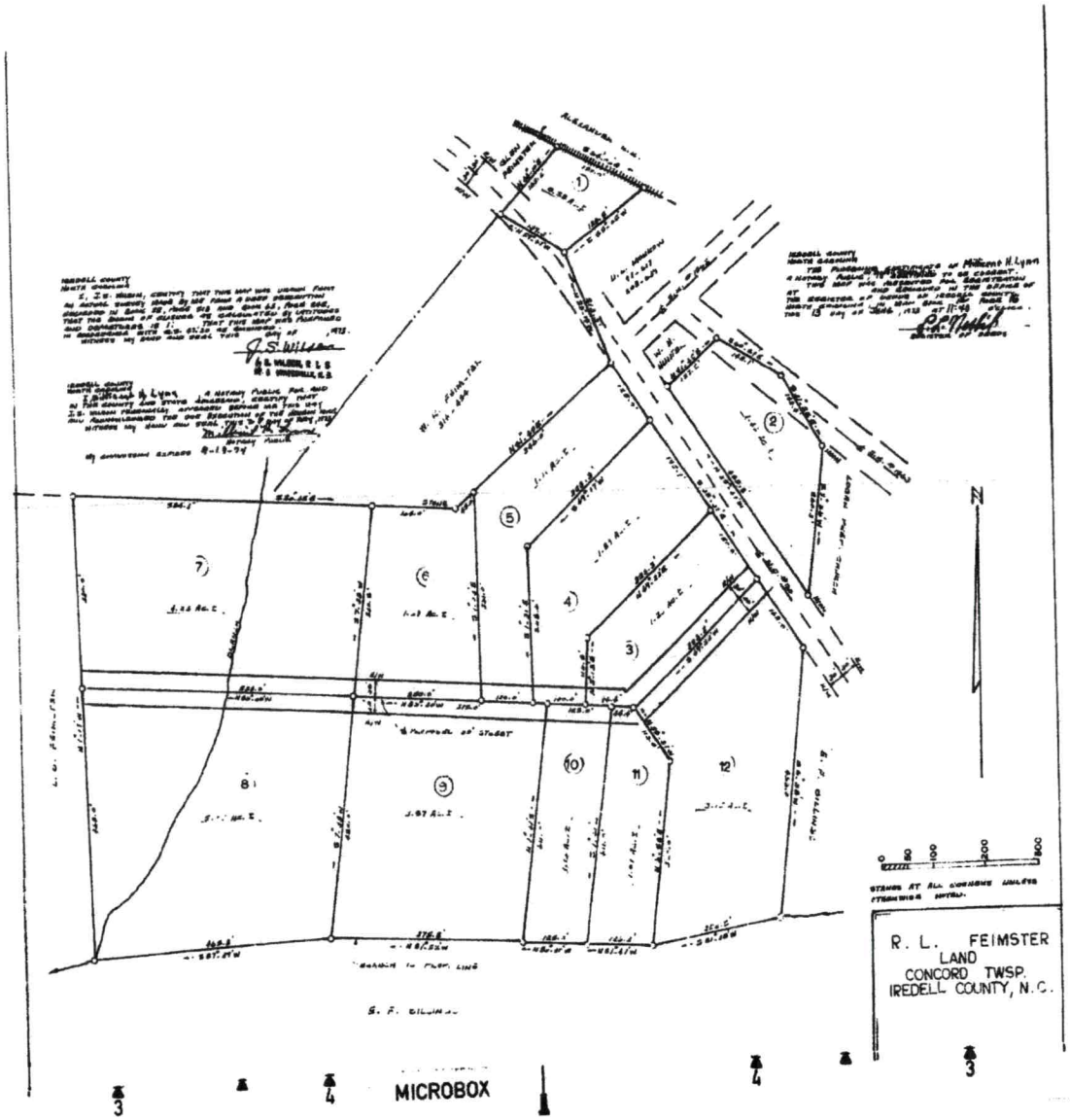
PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPR CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	L/10%	0-2 2-60	BCLWFSBK RCWMSSBK/ABK	FSSSP FRSSSP		50			PS - 0.3
2	L/10%	0-2 2-60	BCLWFSBK RCWMSSBK/ABK	FSSSP FRSSSP		50			PS - 0.3
3	L/6%	0-3 3-33 33-60	BCLWMSBK RCWMSSBK/ABK RBCLWFSBK	FRSSP FRSSSP FRSSSP	fsap	50			PS - 0.3
4	L/7%	0-4 4-40 40-60	BCLWMSBK RCWMSSBK/ABK RBCLWFSBK	FRSSSP FRSSSP FRSSSP	csap/fwr	50			PS - 0.3
5	L/6%	0-5 5-35 35-60	BCLWMSBK RCWMSBK BRCLWFSBK	FRSSSP FRSSSP FRSSSP	fsap	50			PS - 0.3

LICENSED SOIL SCIENTIST
SAMUEL A. ROLLINS
1281
STATE OF NORTH CAROLINA

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	ACCEPTED	ACCEPTED
Site LTAR	0.3	0.3

OTHER FACTORS (.1945): PS
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Ashley Rollins
OTHER(S) PRESENT: Chad Wagner & Mason Kreimer

COMMENTS:


R. L. FEIMSTER
LAND
CONCORD TWSP.
IREDELL COUNTY, N.C.
MICROBOX

County: Iredell

IMPROVEMENT PERMIT FOR G.S. 130A-335(a2)/SL2022-11

PIN/Lot Identifier: 4706462647

Issued To: Greg Rovira

Property Location: 117 Cajun Hideaway Ln Statesville NC 28625

Subdivision: R L Feimster Lot #: 11 Block: _____ Section: _____

LSS Report Provided: Yes ☒ No ☐

If yes, name and license number of LSS: Samuel Ashley Rollins #1231

New ☒ Repair ☐ Expansion ☐ System Relocation ☐

Proposed Structure: Single Family

Proposed Wastewater System Type: Accepted (Initial) Accepted (Repair)

Fill System: ☐ Yes ☒ No If yes, specify: ☐ New ☐ Existing (when adding more than 6 inches of fill to system area please provide a fill plan)

Proposed Design Daily Flow: 360 GPD Proposed LTAR (Initial): 0.3 Proposed LTAR (Repair): 0.3

Design Wastewater Strength: ☒ domestic ☐ high strength ☐ industrial process

Number of bedrooms: 3 Number of Occupants: 6 Other: _____

Pump Required: ☐ Yes ☒ No ☐ May be required based upon final location and elevations of facilities

Artificial Drainage Required: ☐ Yes ☒ No If yes, please specify details: _____

Type of Water Supply: ☐ Private well ☐ Public well ☐ Municipal Supply ☐ Spring ☐ Other: _____

Drainfield location meets requirements of Rule .1945: Yes ☒ No ☐

Drainfield location meets requirements of Rule .1950: Yes ☒ No ☐

Permit valid for: ☒ Five years [site plan submitted pursuant to GS 130A-334(13a)] ☐ No expiration [plat submitted pursuant to GS 130A-334(7a)]

Permit conditions:

See design

Licensed Soil Scientist Print Name: Samuel Ashley Rollans

Licensed Soil Scientist Signature: Samuel A Rollins Date: 5/31/23

The LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2).

See attached site sketch

[redacted]

County: Iredell

CONSTRUCTION AUTHORIZATION FOR G.S. 130A-335(a2)/SL2022-11

PIN/Lot Identifier: 4706465847

Issued To: Greg Rovira

Property Location: 117 Cajun Hideaway Ln, Statesville NC, 28625

AOWE/PE Plans/Evaluations Provided: Yes ☒ No ☐ If yes, name and license number of AOWE/PE: Samuel Ashley Rollens #10027E

Facility Type: Single Family

☒ New ☐ Expansion ☐ Repair System Relocation ☐

Basement? ☐ Yes ☒ No Basement Fixtures? ☐ Yes ☒ No

Type of Wastewater System** Accepted (Initial) Accepted (Repair)

Design Daily Flow: 360 GPD Wastewater Strength: ☒ domestic ☐ high strength ☐ industrial process

Session Law 2014-120 Section 53, Engineering Design Utilizing Low-flow Fixtures and Low-flow Technologies? ☐ Yes ☐ No

Installation Requirements/Conditions

Septic Tank Size: 1000 gallons Total Trench/Bed Length: 312 feet Trench/Bed Spacing: 9 feet on center

Drainfield square footage: 936 Trench/Bed Width: 36 inches LTAR: 0.3 gpd/ft²

Soil Cover: 6 min inches Slope Adjusted Maximum Trench/Bed Depth: 30 inches LOW SIDE

Aggregate Depth: _____inches above pipe _____inches below pipe _____inches total

Pump Tank Size (if applicable): _____ gallons Requires more than 1 pump? ☐ Yes ☐ No

Pump Requirements: _____ ft. TDH vs. _____ GPM Grease Trap Size (if applicable): _____ gallons

Distribution Method: ☒ Serial ☐ D-Box or Parallel ☐ Pressure Manifold(s) ☐ LPP ☐ Other: _____

Artificial Drainage Required: Yes ☐ No ☒ If yes, please specify details: _____

Legal Agreements *(If the answer is "Yes" to any type of legal agreements, please attach a copy of the agreement.)*

Multi-party Agreement Required [.1937(h)]: Yes ☐ No ☒

Easement, Right-of-Way, or Encroachment Agreement Required [.1938(j)]: ☐ Yes ☒ No

Declaration of Restrictive Covenants: ☐ Yes ☒ No

**If applicable:
*I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit.***

Owner/Legal Representative Print Name: _____

Owner/Legal Representative Signature: _____ Date: _____

Pre-Construction Conference Required: Yes ☐ No ☒

Conditions: See design

The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .1959 are incorporated by reference into this permit and shall be met. Systems shall be installed in accordance with the attached system layout.

AOWE/PE Print Name: Samuel Ashley Rollens

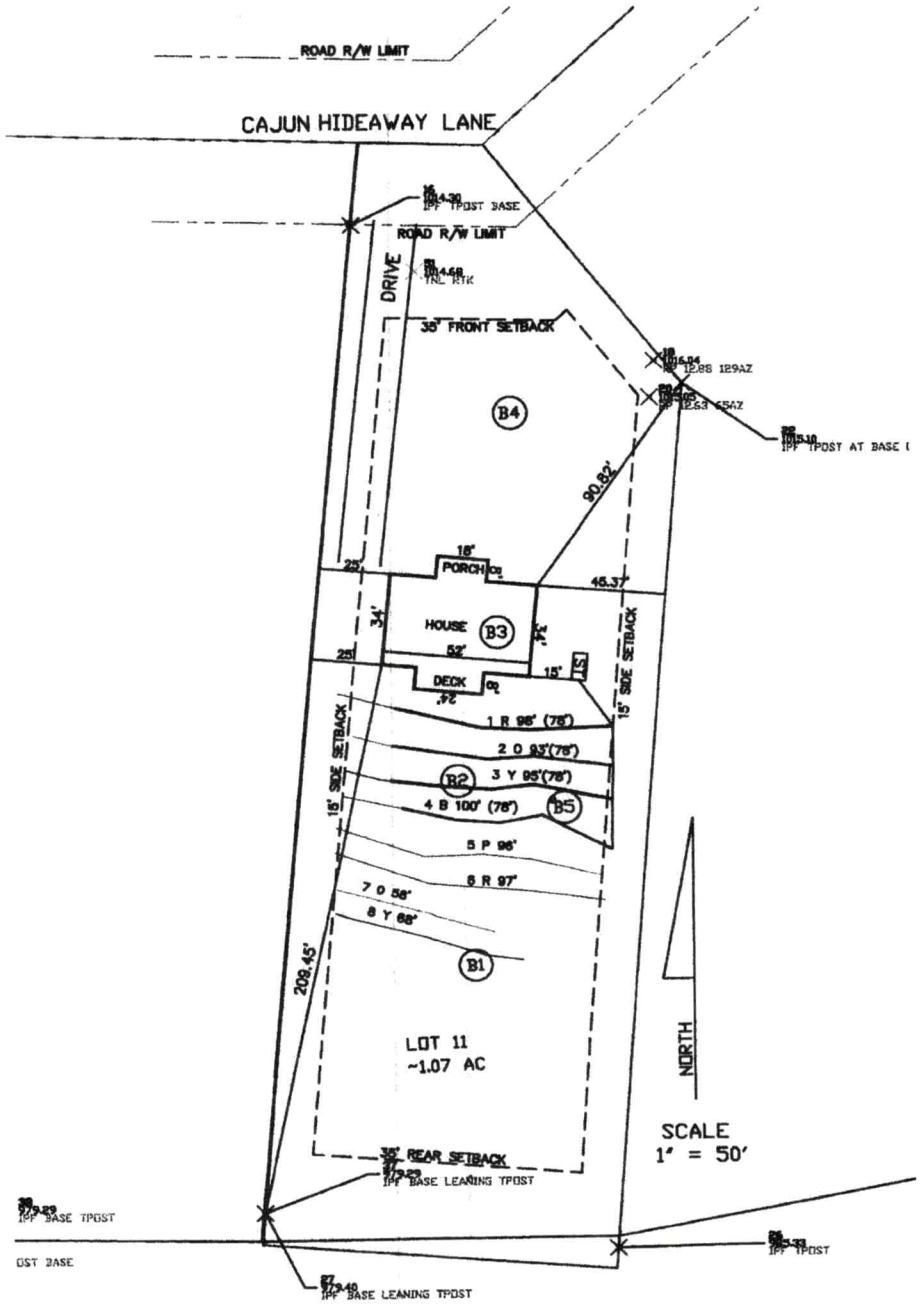
AOWE/PE Signature: Samuel A Rollens Date: 5/31/23

This AOWE/PE submittal is pursuant to and meets the requirements of G.S. 130A-335(a2) and (a5).

See attached site sketch

NC ONSITE WASTEWATER EVALUATOR Certification Number 10027E

[redacted]



HOUSE ENVELOPE CAN MOVE FORWARD TOWARD CAJUN HIDEAWAY LANE BUT CANNOT MOVE CLOSER TO THE PROPOSED DRAINFIELD OR TANK.

[redacted]