(Lot 30 split) PJB

4706-94-9954

ICHD–ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # 247454

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

PIN # 4716-04-8334

APPLICANT/OWNER: Willow Homes LLC APPLICANT ADDRESS: 175 Hidden River Ln Statesville, NC 28625

SITE ADDRESS: 126 Robert Dr. Statesville, NC PHONE: 704437-1330 ALT. PHONE

SITE DIRECTIONS: Hwy 115 TL Scotts Creek TL Robert Dr. 2nd lot on right

SUBDIVISION: Larkin Sloan Estate SECTION: LOT # 30 (1) LOT AREA: 1.1344 SAP CONTROLLED: ☐ YES ☒ NO

DESIGN FLOW: 360gpd L.T.A.R.: Trad .275 / .25Rep

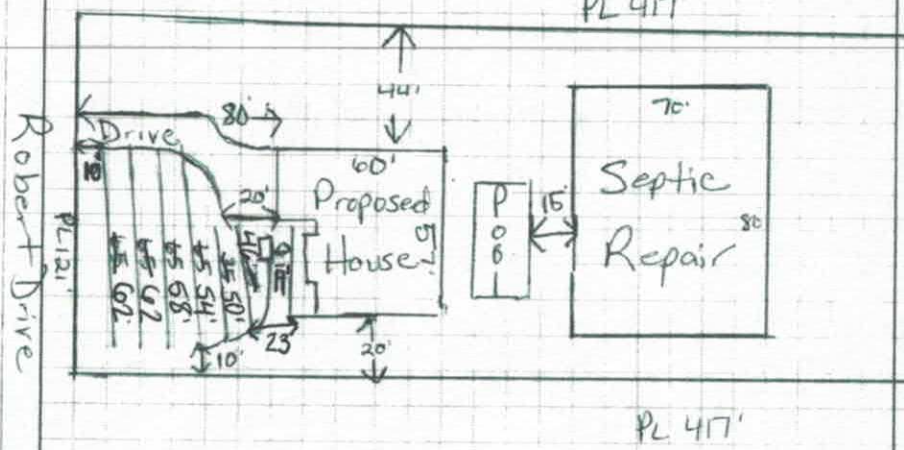
Septic Tank	1000	(gal)	STB	760	Date	12-6-19	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	
Pump Tank		(gal)	PT		Date		System Description:			Gravity - 25% Reduction	
Pump Make			Model		Serial #		Repair System Description:			25% Reduction	
# Nitrification Fields	1		# Lines	6	Linear Ft	330'	Maintenance Agreement Required:	☐ YES	☒ NO		
Trench Width	36"		Trench Bottom Depth(Low side)		24"-30"	Gravel Depth	N/A	☒ GRAVITY	☐ PRESSURE		

☒ Residence	No. Bedrooms	3	Water Supply
☐ Business	No. Persons	6	☐ Private
☐ Other	No. Employees		☒ Public
☐ Slab	☒ Crawl Space		☐ Community
☐ Basement w/plumbing			☐ Basement w/o plumbing

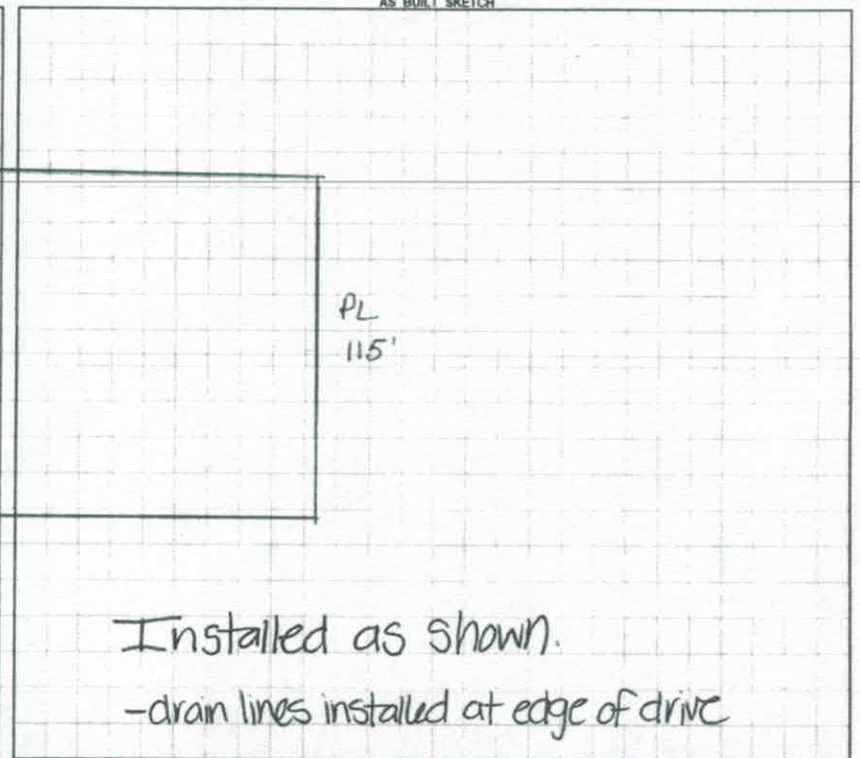
Comments / Conditions: Note: If house is moved 25ft or more from left property line than ST may be placed on side of house.

INITIAL SITE SKETCH

Scale 1:60'



AS BUILT SKETCH



Installed as shown.

-drain lines installed at edge of drive

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: Jami Date: 9-12-19 Installed by: Groundbreakers

IMPROVEMENT PERMIT by: Maria Sloan Date: 9/11/19 OPERATION PERMIT by: Rusty Waters Date: 4-2-20

AUTHORIZATION TO CONSTRUCT by: Maria Sloan Date: 9/12/19 Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inpsector to confirm your inspection time.

DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

PROPERTY ID #: _____
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Willow Homes LLC
ADDRESS: 175 Hidden River Ln Statesville, NC
PROPOSED FACILITY: House
PROPOSED DESIGN FLOW (.1949): 360 gpd
LOCATION OF SITE: 126 Robert Dr. Statesville, NC
APPLICATION DATE: 8/7/19
DATE EVALUATED: 8/22/19
PROPERTY SIZE: 1.134 Ac
PROPERTY RECORDED: Y

WATER SUPPLY: ☐ Private ☒ Public ☐ Well ☐ Spring ☐ Other _____
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	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	6%	0-10	Brn Scl	wSBK SS, SP, SExP, FR					PS
		10-36	Brn to R	C Cl m-w SBK SS, SP, SExP, FR					.25
5		36-48	R Cl	w SBK SS, SP, SExP, Fi-FR					
			w/ Yel/Brn	mottles	—	48"			
2	6%	0-11"	Brn Scl	w SBK SS, SP, SExP, FR					PS
		11-37"	Rd C m	w SBK SS, SP, SExP, Fi-FR					.25
6			w/Yel/Brn	Inclus					
		37-48	Rd Cl	w SBK SS, SP, SExP, Fi-FR		48"			
			w/Yel/Brn	Inclus	—				
3									
4									

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

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: _____
OTHER(S) PRESENT: _____

COMMENTS: _____

VISION OF ENVIRONMENTAL HEALTH
I-SITE WASTEWATER SECTION

Page 2 of 2
PROPERTY ID #:
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Willow Homes LLC
ADDRESS: 175 Hidden River Ln Statesville, NC
PROPOSED FACILITY: House
PROPOSED DESIGN FLOW (.1949): 360gpd
LOCATION OF SITE: 126 Robert Dr Statesville, NC
WATER SUPPLY: ☐ Private ☒ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut
APPLICATION DATE: 8/7/19
DATE EVALUATED: 8/22/19
PROPERTY SIZE: 1.134 Acre
PROPERTY RECORDED:
TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	4%	0-16	Brw SCL	wSBK SS, SP, SExP, FR					PS
		16-31	Brw to Rd C m	SBK SS, SP, SExP, FR					
		31-48"	R C m	wSBK SS SP, SExP, FR					.275
			w/ Few Jel/Brw mottles		—	48"			
2	4%	0-12	Brw SCL	SS, SP, SExP, FR					PS
		12-34	RCm	wSBK SS, SP, SExP, FR					.3
		34-42	RCL	wSBK SS, SP, SExP, FR					
			Few SAP Inclus		—	48"			
		42-48	RCL	wSBK SS, SP, SExP, FR w/ many SAP Inclus					
3	5%	0-9	Brw SCL	wSBK SS, SP, SExP, FR					PS
		9-30	Brw CL	wSBK SS, SP, SExP, FR					.275
		30-48	Rd L m	wSBK SS, SP, SExP, FR					
			w/ Some Jel/Brw mottles		—	48"			
4	4%	0-15	Brw SCL	wSBK SS SP, SExP, FR					PS
		15-32	Brw CL	wSBK SS SP, SExP, FI-FR					.275
		32-48	R C L m	wSBK SS SP, SExP, FI-FR					
			w/ Jel/Brw Mottles		—	48"			

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)		
Site LTAR	.275	.25

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: Maria Dotson
OTHER(S) PRESENT: Matthew Hicks & Tamie Henderson
COMMENTS:

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	NEXP (Non-expansive)	G (Single Grain)
CV (Convex Slope)		LS (Loamy Sand)			SEXP (Slightly Expansive)	M (Massive)
D (Drainage Way)					EXP (Expansive)	CR (Crumb)
DS (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
FP (Flood Plain)		L (Loam)				SBK (Subangular Blocky)
FS (Foot Slope)						ABK (Angular Blocky)
H (Head Slope)	III	Si (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
L (Linear Slope)		SiCL (Silty Clay Loam)				PR (Prismatic)
N (Nose Slope)		CL (Clay Loam)				
R (Ridge)		SCL (Sandy Clay Loam)			**MOIST**	**WET**
S (Shoulder Slope)		SiL (Silt Loam)				
T (Terrace)					VFR (Very Friable)	NS (Non-sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FR (Friable)	SS (Slightly Sticky)
		SiC (Silty Clay)			FI (Firm)	S (Sticky)
		C (Clay)			VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
		O (Organic)	None	None	EFI (Extremely Firm)	NP (Non-plastic)
						SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

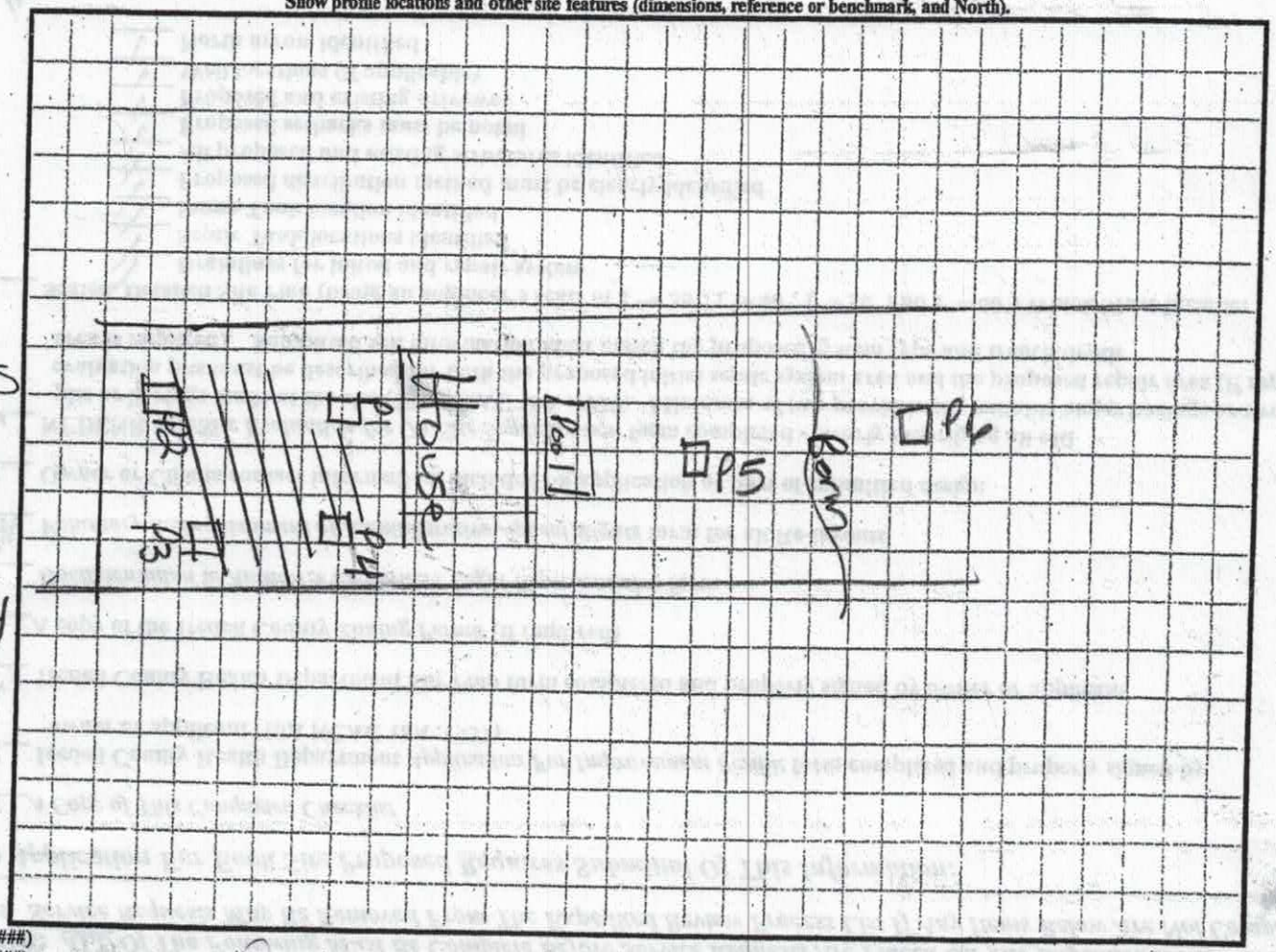
NOTES

HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
CLASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.

Long-term Acceptance Rate (LTAR): gal/day/ft^2

Show profile locations and other site features (dimensions, reference or benchmark, and North).



)ENR (######)
:eview (#####)

Matthew Hicks 8/16/19
SVL Site visit Placed pit flags

IREDELL COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH DIVISION

(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)

247454

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

7d $500

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 #
Willow Homes LLC	175 Hidden River Ln.	704-437-1330	
Owner Name	Mailing Address	Home Phone #	Alternate Phone #
Same ↑	"	"	

Jamie Henderson

4. **Property Information:**

Street Address	Subdivision Name	Section/Phase and Lot Number
(126) Lot 30 - Robert Dr.	Larkin Sloan Estate	Lot 30

Driving Directions: Hwy N115 (R) onto Scotts Creek Rd. (L) onto Robert Dr. - Property is 2nd Lot on (R)

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

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

Maximum Number of Bedrooms 3
Maximum Number of Occupants 6
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 ____ Year

( ) Alternative (✓) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other _____

8. **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. industry) 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.

9. **Signature:** Jamie Henderson
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

8-7-19
DATE

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION:*

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...**

***SHOW:** proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site*

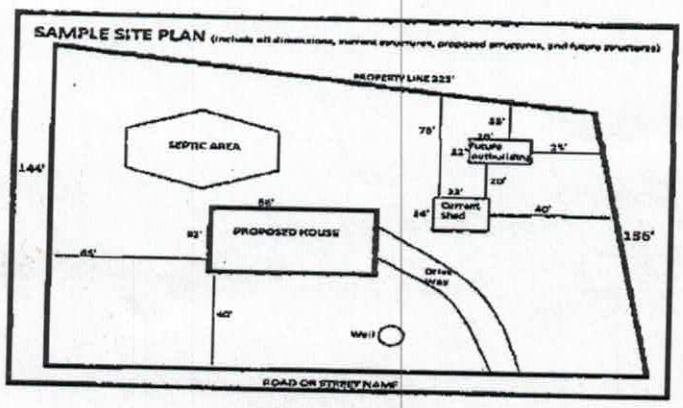
X **Front and side setbacks from property line...** X **Preferred driveway location and configuration, preferred well location...**

X **Area you prefer your septic system to be placed...** X **North arrow, or other sufficient indicator of direction...**

Circle N/A on the following if appropriate:

N/A **Location of septic systems and wells within 100' of your property... N/A**

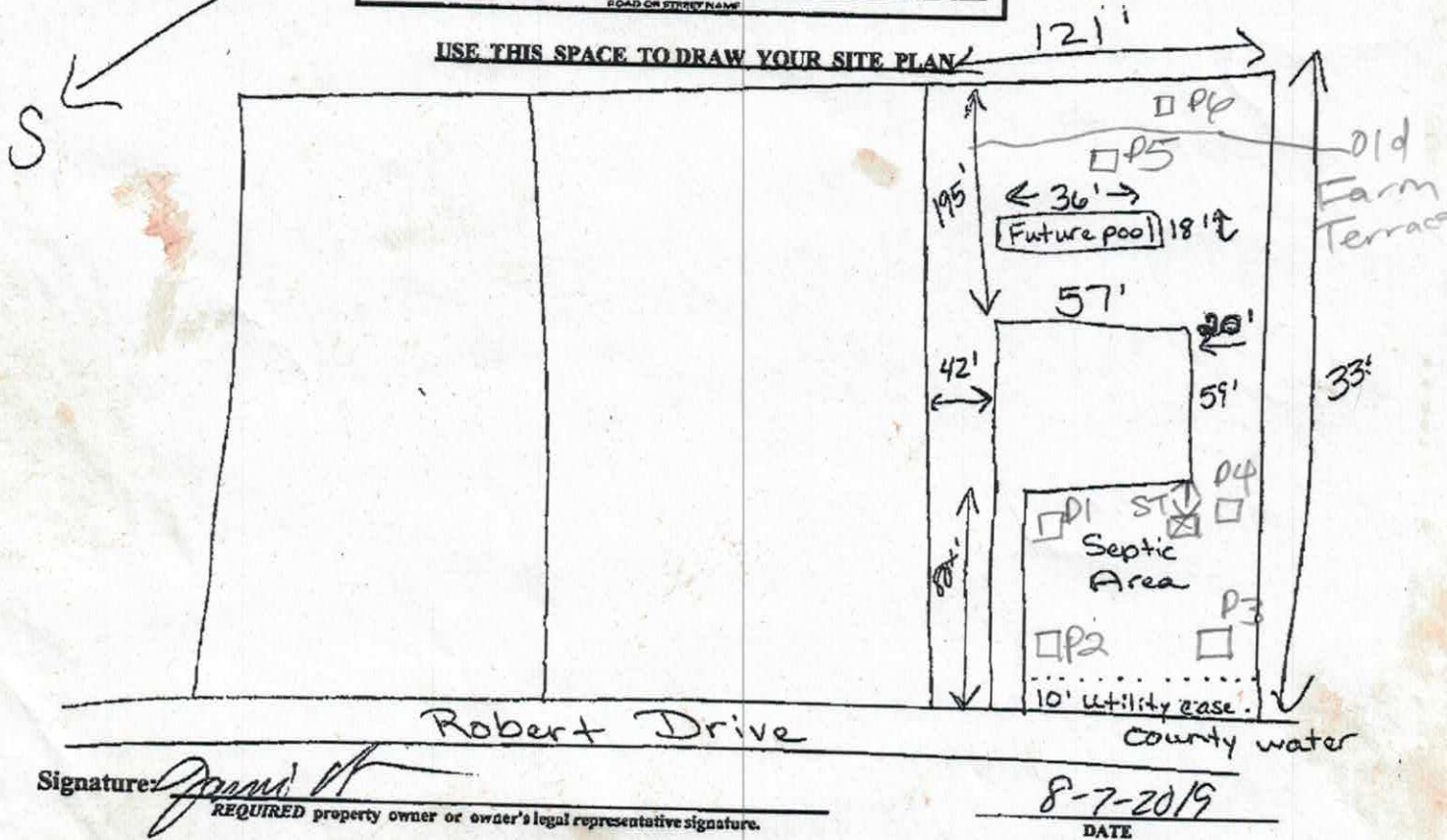
X **Location of easements and rights of ways on your property... N/A** N/A **Location of any designated wetlands on the property... N/A**



N

S

USE THIS SPACE TO DRAW YOUR SITE PLAN

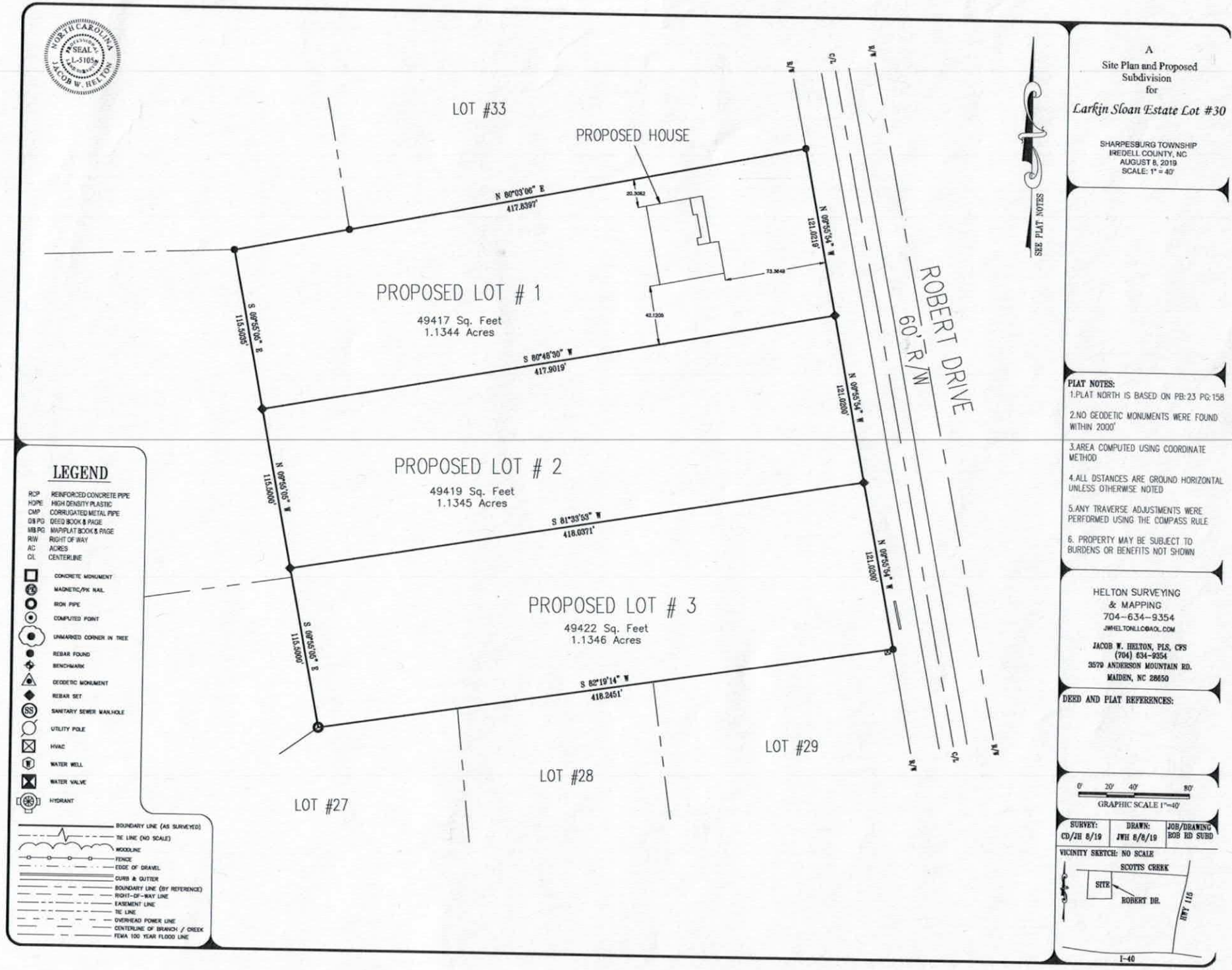


Signature: _____

***REQUIRED** property owner or owner's legal representative signature.*

8-7-2019

DATE



LEGEND

RCP	REINFORCED CONCRETE PIPE
HDPE	HIGH DENSITY PLASTIC
CMP	CORRUGATED METAL PIPE
DB/PG	DEED BOOK & PAGE
MB/PG	MAP/PLAT BOOK & PAGE
R/W	RIGHT OF WAY
AC	ACRES
C/L	CENTERLINE

- CONCRETE MONUMENT
- MAGNETIC/PK NAIL
- IRON PIPE
- COMPUTED POINT
- UNMARKED CORNER IN TREE
- REBAR FOUND
- BENCHMARK
- GEODETIC MONUMENT
- REBAR SET
- SANITARY SEWER MANHOLE
- UTILITY POLE
- HVAC
- WATER WELL
- WATER VALVE
- HYDRANT

- BOUNDARY LINE (AS SURVEYED)
- TIE LINE (NO SCALE)
- WOODLINE
- FENCE
- EDGE OF GRAVEL
- CURB & GUTTER
- BOUNDARY LINE (BY REFERENCE)
- RIGHT-OF-WAY LINE
- EASEMENT LINE
- TIE LINE
- OVERHEAD POWER LINE
- CENTERLINE OF BRANCH / CREEK
- FEMA 100 YEAR FLOOD LINE

A
Site Plan and Proposed Subdivision
for
Larkin Sloan Estate Lot #30

SHARPESBURG TOWNSHIP
IREDELL COUNTY, NC
AUGUST 8, 2019
SCALE: 1" = 40'

PLAT NOTES:

1. PLAT NORTH IS BASED ON PB: 23 PG: 158
2. NO GEODETIC MONUMENTS WERE FOUND WITHIN 2000'
3. AREA COMPUTED USING COORDINATE METHOD
4. ALL DSTANCES ARE GROUND HORIZONTAL UNLESS OTHERWISE NOTED
5. ANY TRAVERSE ADJUSTMENTS WERE PERFORMED USING THE COMPASS RULE
6. PROPERTY MAY BE SUBJECT TO BURDENS OR BENEFITS NOT SHOWN

HELTON SURVEYING
& MAPPING
704--634--9354
JWHELTONLLC@AOL.COM

JACOB W. HELTON, PLS, CFS
(704) 634-9354
3579 ANDERSON MOUNTAIN RD.
MAIDEN, NC 28650

DEED AND PLAT REFERENCES:

0' 20' 40' 80'
GRAPHIC SCALE 1"=40'

SURVEY:	DRAWN:	JOB/DRAWING
CD/JH 8/19	JWH 8/8/19	ROB RD SUBD

VICINITY SKETCH: NO SCALE

Recorded 7/8/19

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

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.

I, Jamie Henderson, am the legal owner(s) of the property located at 126 Robert Drive, Statesville NC 28625 identified as PIN (Parcel Identification Number) 4716040834, located in Iredell County, North Carolina.

I do hereby authorize **(print legal representative/company name)** Willow Homes LLC, 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.

Jamie H — 8-7-19

Signature of Owner(s) Date

Signature of Witness Date

Please return this signed form to the appropriate office:

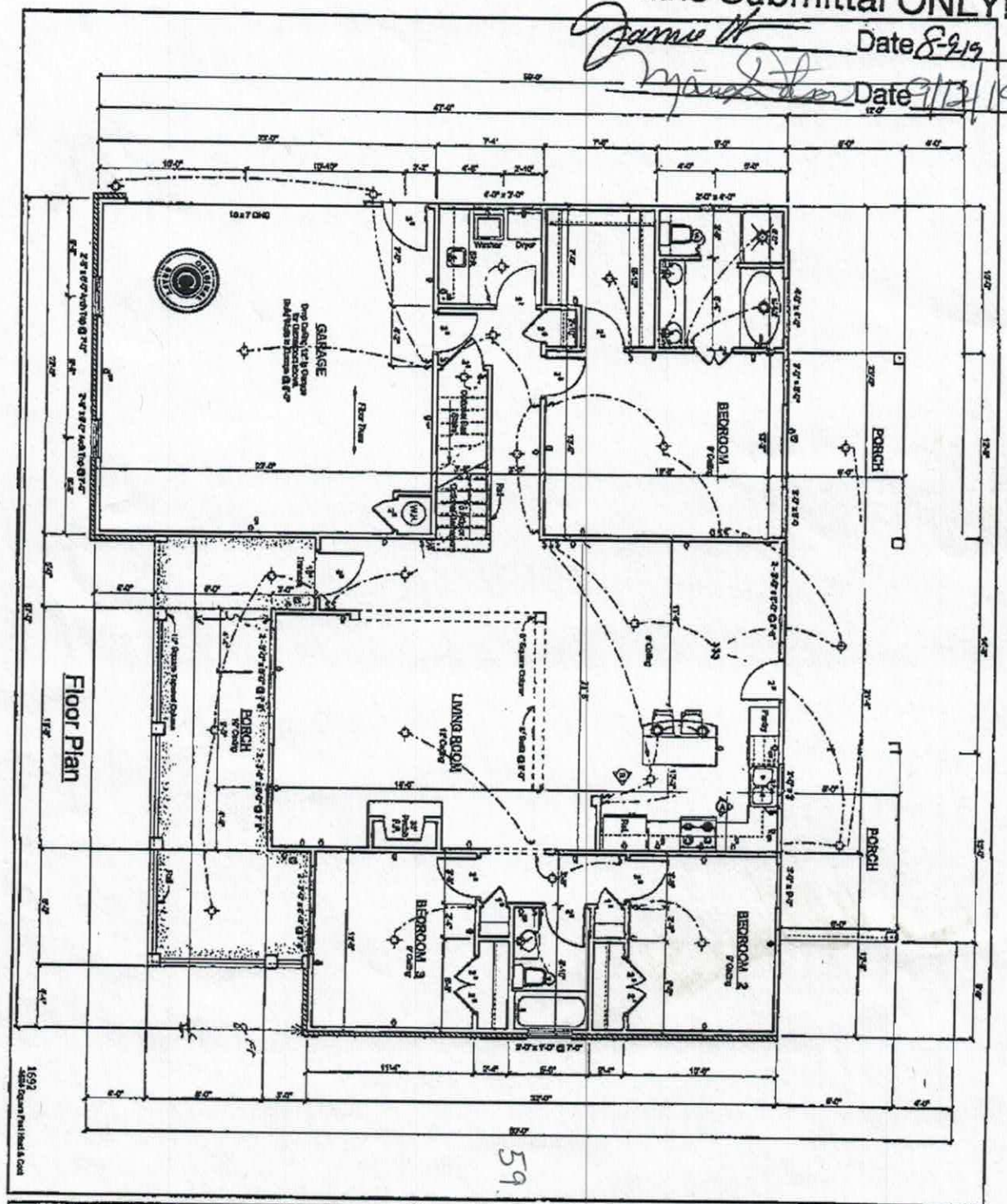
Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
adrienne.shea@co.Iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

Acknowledgement Of
Plans Submittal ONLY!

Date 8-9-19

Date 9/12/19



57

59

W.L. Martin Home Designs for Contact Information www.wlmartinhomes.com	#24141 " Seabeck "	Revisions / By	
Sheet 3 of 8 Sheets Job Drawn Date Scale 1/4" = 1'-0"			

IREDELL COUNTY

PO Box 788
349 North Center St.
Statesville, NC 28677

APPLICATION NUMBER
247454
Issue Date: 08/12/2019

ZONING PERMIT
Residential

Parcel Number	Street Address	Jurisdiction
4716040834.000	126 ROBERT DRIVE, STATESVILLE, NC 28625	

Owner Information	Applicant Information
Owner: JOHNSON JERRY LEE+NORA	Applicant: WILLOW HOMES LLC
Address: 0	Address: 175 HIDDEN RIVER LN
IREDELL CO, NC 28625	STATESVILLE, NC 28625
Phone:	Phone:

Use Requested	Zone Code
WILL NEED RECORDED DEED TO ISSUE BUILDING PERMIT	

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
3.400	35.00	35.00	15.00	15.00	NOT	X

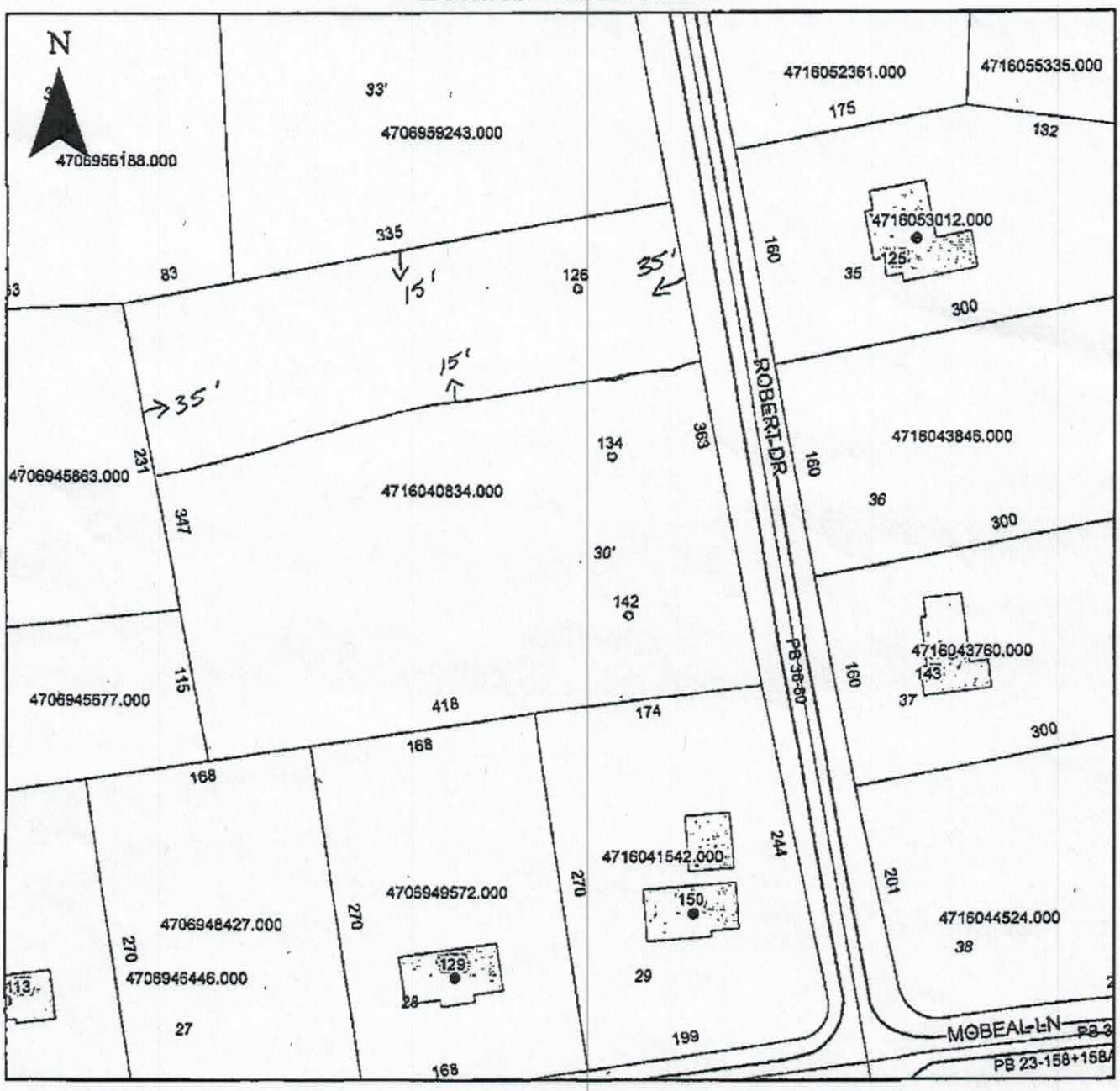
Remarks:

The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions, plat conditions and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

Applicant: _____ Date: _____

Permit Number	188543	TOTAL FEES:	$ 77.25

ZONING DISCLAIMER



Property Address 126 Robert Dr.

The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. Applicant further acknowledges that the enforcement of deed restrictions, plat conditions, and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

Applicant

8-12-2019
Date