IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT # 178603

PIN # 4707057389 7377

APPLICANT: Chris Lewis

APPLICANT ADDRESS: 121 Falling Leaf Ln.

SITE ADDRESS: 1587 Midway Rd. - Statesville 28678

PHONE: 704-905-1503 ALT. PHONE: N/A

SITE DIRECTIONS: Hwy 115 N TL Midway Rd. Property on Left across from 1564 Midway Rd.

SUBDIVISION: N/A

SECTION: N/A LOT # N/A LOT AREA: 10.68 acres DESIGN FLOW: 360gpd L.T.A.R.: 0.2

Septic Tank 1000 (gal) STB 821-1000 Date 9-15-13

Pump Tank 1000 (gal) PT 46-1000 Date 7-1-13

Pump Make Zoeller Model PE51 Serial # K130261

Nitrification Fields 1 # Lines 4 Linear Ft: 452

Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI

System Description: 25% Reduction - Pump

Repair System Description: 25% Reduction - Pump

Maintenance Agreement Required: ☐ YES ☑ NO

☐ GRAVITY ☑ PRESSURE

☑ Residence No. Bedrooms 3

☐ Business No. Persons

☐ Other No. Employees

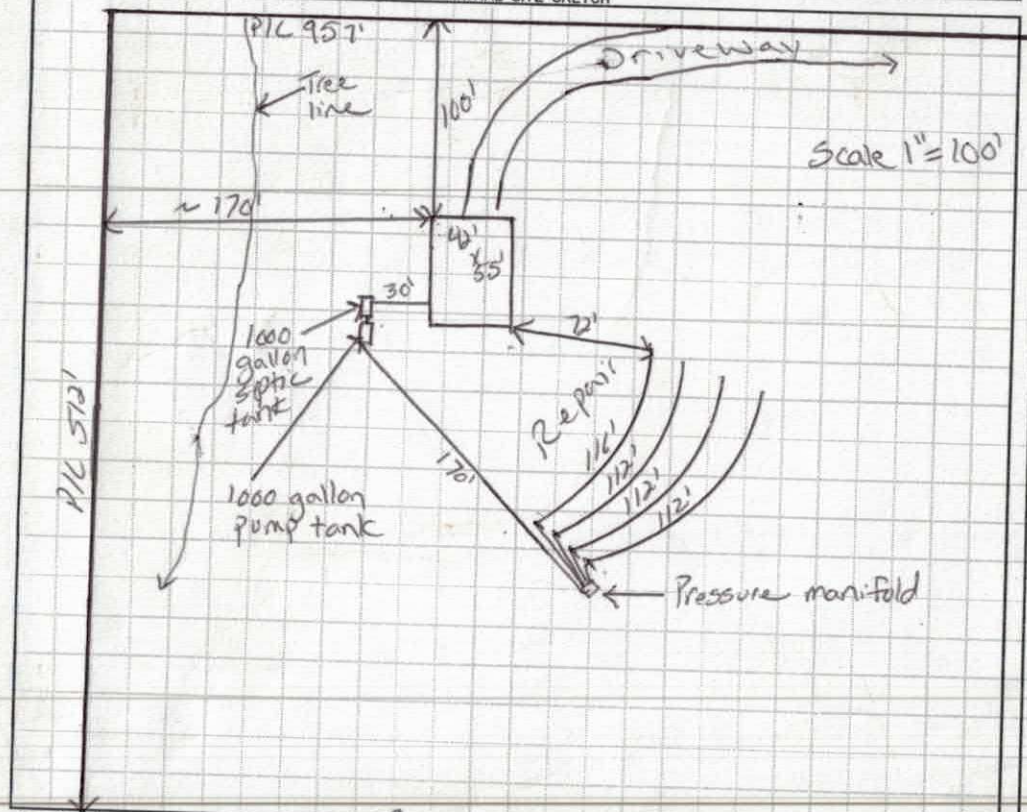
☐ Slab ☑ Crawl Space

☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions: Improvements ONLY! Submit floor plan prior to issuance of CA! Install a 25% Reduction System on contour with parallel distribution utilizing a pressure manifold as shown below.

INITIAL SITE SKETCH



AS BUILT SKETCH

- Quick 4 Chambers installed
- Red Polylok filter installed

	Date	Initials
Drain Lines Checked	11-5-13	LH
Tanks Checked	11-5-13	LH
Pressure Manifold or Valve Box Checked	11-5-13	LH
Pressure Head Set		
Electrical Checked		
Floats Set	11-5-13	LH
Alarm Checked		
Maintenance Contract Y (N)	N/A	N/A

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: [signature] Date: 08/16/13

IMPROVEMENT PERMIT by: Justin Henderson Date: 5-29-13

AUTHORIZATION TO CONSTRUCT by: Justin Henderson Date: 8-12-13

Installed by: Summey Septic Tank (1814)

OPERATION PERMIT by: Date:

Existing System Inspected by: Date:

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

DENR/DEH

ON-SITE WASTEWATER SECTION

Sheet 1 of 2
PROPERTY ID #: 470705 7389
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Chris Lewis
ADDRESS: 121 Falling Leaf Ln.
PROPOSED FACILITY: 3BR SFD
PROPOSED DESIGN FLOW (.1949): 360gpd
LOCATION OF SITE: Midway Rd.
WATER SUPPLY: • Private • Public • Well • Spring • Other
EVALUATION METHOD: • Auger Boring • Pit • Cut

APPLICATION DATE: 5-3-13
DATE EVALUATED: 5-23-13
PROPERTY SIZE: 10.68 acres
PROPERTY RECORDED: yes
N/A
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 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	12,5 NS	0-8	SCL SBK	Fr SS/SP Mod SE					need pits
		8-17	C ABK	Fi SS/SP Mod SE					
		17-48	SAP						
2	6,5% NS	0-10	SCL SBK	Fr SS/SP Mod SE	2,5Y7,2				need pits
		10-25	C ABK	Fi Mod					
3	5% NS	0-6	SL SBK	Fr Mod SE	2,5Y7,2				need pits
		6-20	C ABK	Fi Mod					
4	8% NS	0-5	SCL SBK	Fr Mod SE					need pits
		5-20	C ABK	Fi Mod SE					
		20-48	SAP						

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	III	III
Site LTAR	0.2	0.2

OTHER FACTORS (.1946): N/A
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Justin Henderson
OTHER(S) PRESENT: N/A

COMMENTS: N/A

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.

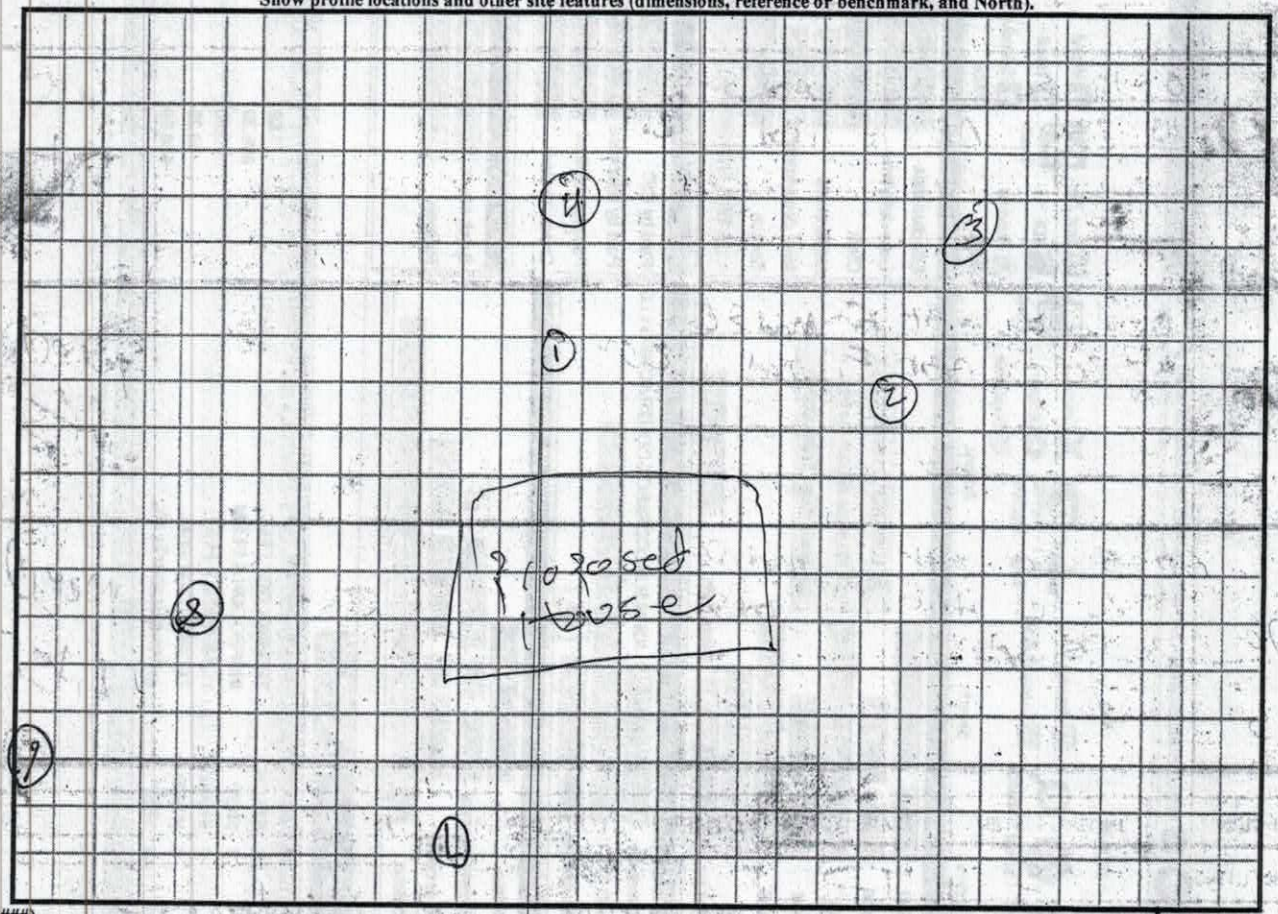
NOTES

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).



DENR (######)
Review (#####)

DENR/DEH

ON-SITE WASTEWATER SECTION

Sheet 2 of 2
PROPERTY ID #: 470705 7389
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Chris Lewis
ADDRESS: 121 Falling Leaf Ln. APPLICATION DATE 5-3-13
PROPOSED FACILITY: 3BR SFD PROPOSED DESIGN FLOW (.1949): 360gpd DATE EVALUATED: 5-28-13
LOCATION OF SITE: Midway Rd. PROPERTY SIZE: 10.68 acres
WATER SUPPLY: • Private • Public • Well • Spring • Other PROPERTY RECORDED: Y.S
EVALUATION METHOD: • Auger Boring • Pit • Cut TYPE OF WASTEWATER: N/A • 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	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
5	3% HS	0-4	SC SBK	Fr SS/SP Mod SE	>48" 2.5Y 6.6	>48"	>48"	>48"	PS 0.2
		4-31	C mica/redox ABK	Fi SS/SP Mod SE					
		31-48	CL mica WABK	Fr Mod SE					
6	6% HS	0-8	SC SBK	Fr SS/SP Mod SE	>48"	>48"	>48"	>48"	PS 0.2
		8-34	C mica/redox ABK	Fi SS/SP Mod SE					
		34-48	CL mica WABK	Fr Mod SE					
7	5% HS	0-7	SC SBK	Fr SS/SP Mod SE	>48" 2.5Y 6.6	>48"	>48"	>48"	PS 0.2
		7-31	C mica ABK	Fi SS/SP Mod SE					
		31-48	CL mica WABK	Fr Mod SE					
8	5% HS	0-8	SC SBK	Fr Mod SE	>48" 2.5Y 6.6	>48"	>48"	>48"	PS 0.2
		8-35	C mica/redox ABK	Fi Mod SE					
		35-48	CL mica WABK	Fr Mod SE					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	III	III
Site LTAR	0.2	0.2

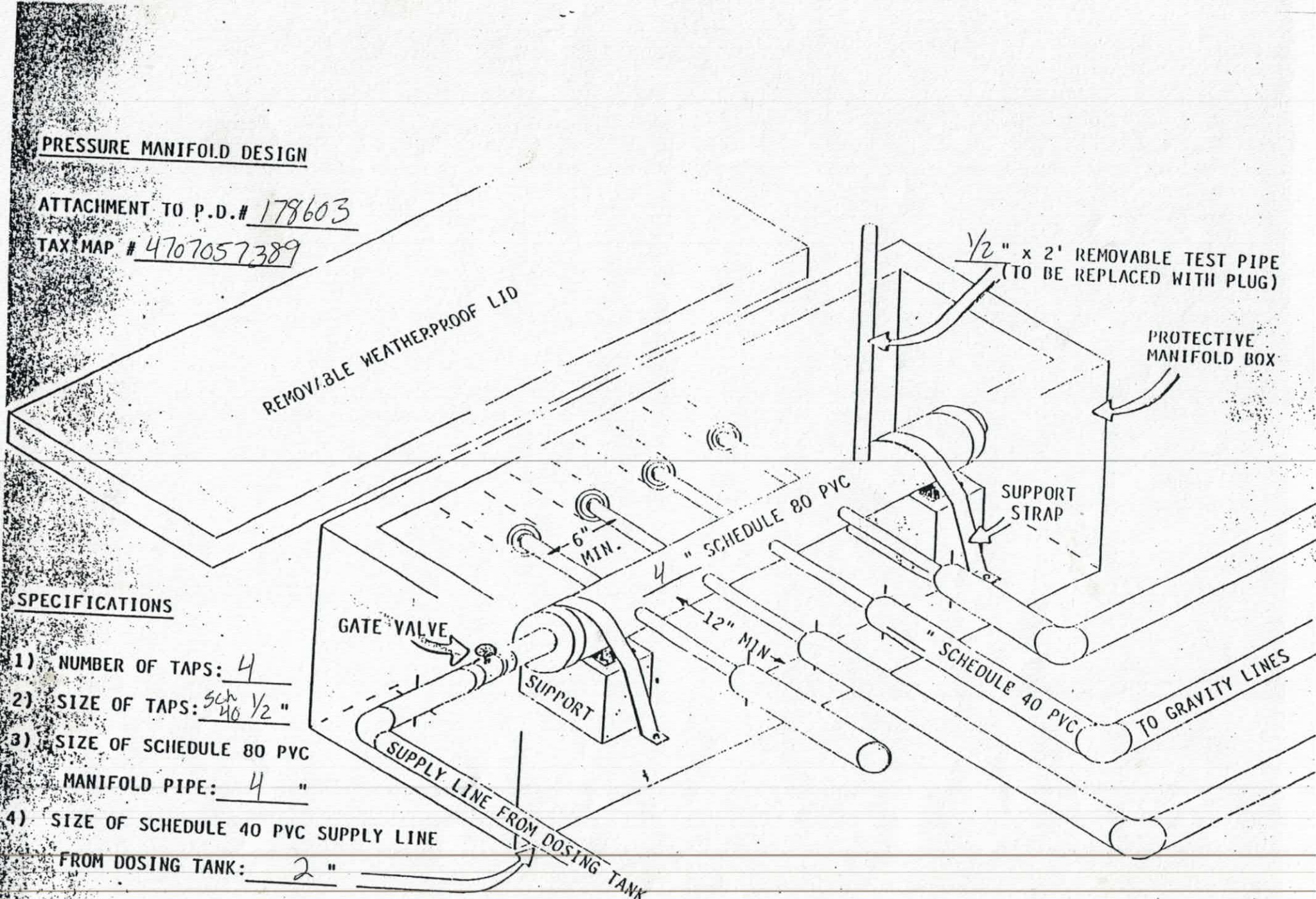
OTHER FACTORS (.1946): N/A
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Justin Henderson
OTHER(S) PRESENT: N/A

COMMENTS: N/A

PRESSURE MANIFOLD DESIGN

ATTACHMENT TO P.D.# 178603

TAX MAP # 4707057389



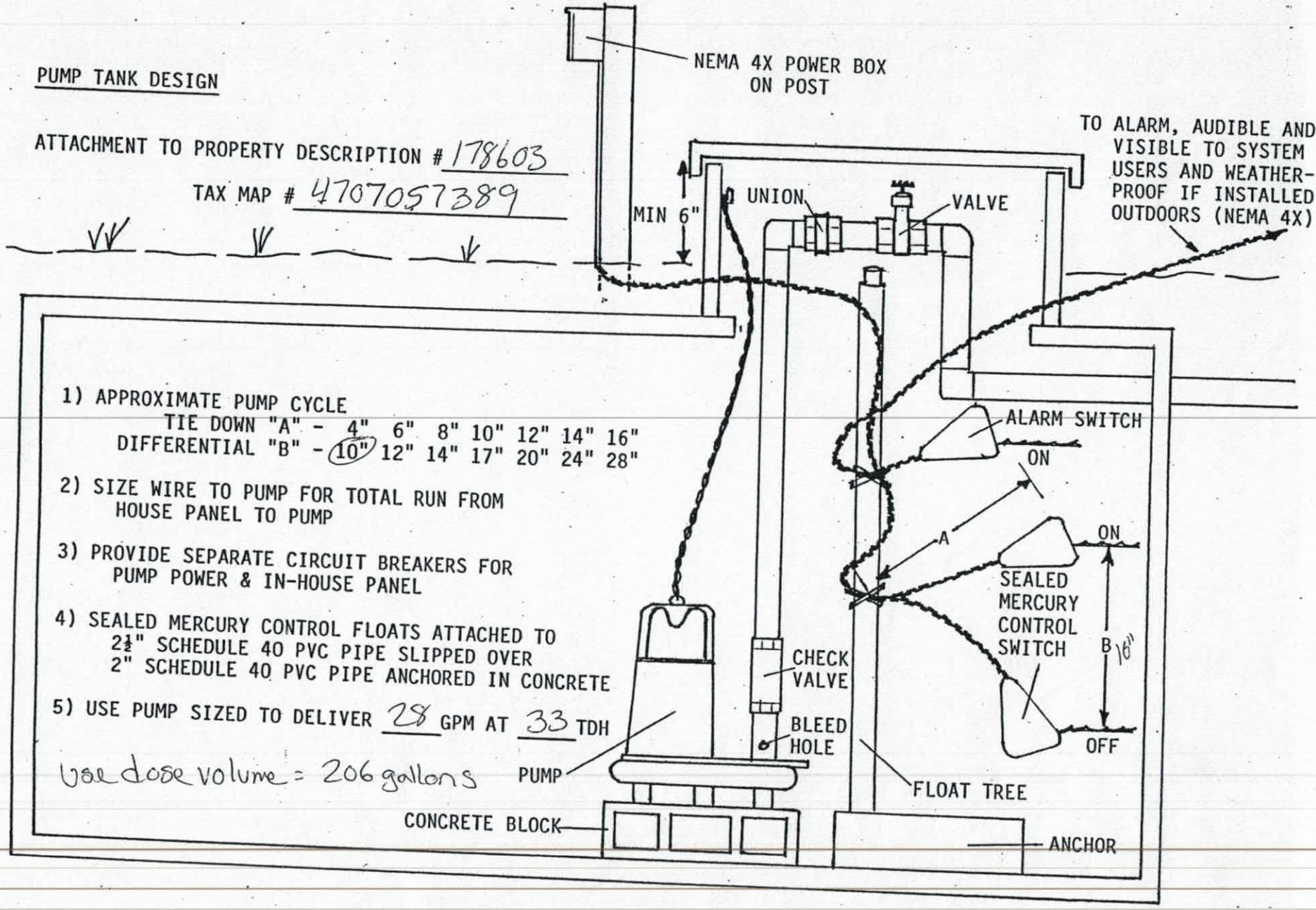
SPECIFICATIONS

1) NUMBER OF TAPS: 4
2) SIZE OF TAPS: Sch 40 1/2"
3) SIZE OF SCHEDULE 80 PVC MANIFOLD PIPE: 4"
4) SIZE OF SCHEDULE 40 PVC SUPPLY LINE FROM DOSING TANK: 2"

PUMP TANK DESIGN

ATTACHMENT TO PROPERTY DESCRIPTION # 178603

TAX MAP # 4707057389



1) APPROXIMATE PUMP CYCLE
   TIE DOWN "A" - 4" 6" 8" 10" 12" 14" 16"
   DIFFERENTIAL "B" - (10") 12" 14" 17" 20" 24" 28"

2) SIZE WIRE TO PUMP FOR TOTAL RUN FROM HOUSE PANEL TO PUMP

3) PROVIDE SEPARATE CIRCUIT BREAKERS FOR PUMP POWER & IN-HOUSE PANEL

4) SEALED MERCURY CONTROL FLOATS ATTACHED TO 2½" SCHEDULE 40 PVC PIPE SLIPPED OVER 2" SCHEDULE 40 PVC PIPE ANCHORED IN CONCRETE

5) USE PUMP SIZED TO DELIVER 28 GPM AT 33 TDH

Use dose volume = 206 gallons


GOULDS
WATER TECHNOLOGY
PE51M
SUBMERSIBLE PUMP
.5HP 1/60/115 9.5MA

IREDELL COUNTY HEALTH DEPARTMENT
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 X 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 X Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. Applicant Information:

CHRIS LEWIS	121 FALLING LEAF LANE STATESVILLE NC 28677	828.612.4333	704.905.1563
Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
TIMMY STIKELEATHER	146 WINDSOR DRIVE TAYLORSVILLE, NC 28681	828.446.9997	N/A
Owner Name	Mailing Address	Home Phone #	Alternate Phone #

4. Property Information:

PARCEL ID# 4707057389.00

NO ADDRESS AT THIS TIME → DIRECTLY ACROSS FROM 1564 MIDWAY ROAD STONY POINT, NC 28678	N/A	BACK 1/2 OF LOT
Street Address	Subdivision Name	Section/Phase and Lot Number

Driving Directions: HEAD NORTH ON 90 (TAYLORSVILLE HWY), PAST SCOTTS CREEK ROAD & TURN RIGHT ONTO MIDWAY ROAD, GOOVER RAIL ROAD TRACKS & IT IS ON THE OPEN FIELD ACROSS FROM DELLINGER FARM → DIRECTLY ACROSS FROM 1564 MIDWAY ROAD

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
- ( ) Other ___

Maximum Number of Bedrooms 3
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 ___

$ 517.25

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)*

( ) Alternative (✓) Conventional ( ) Innovative ( ) Modified Conventional (✓) Other CHEAPEST MOST EFFICIENT ( ) No Preference

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

05/03/13
DATE

PAID
Cash 8-16-13 DM

~~17858~~ 17886

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:

- 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:

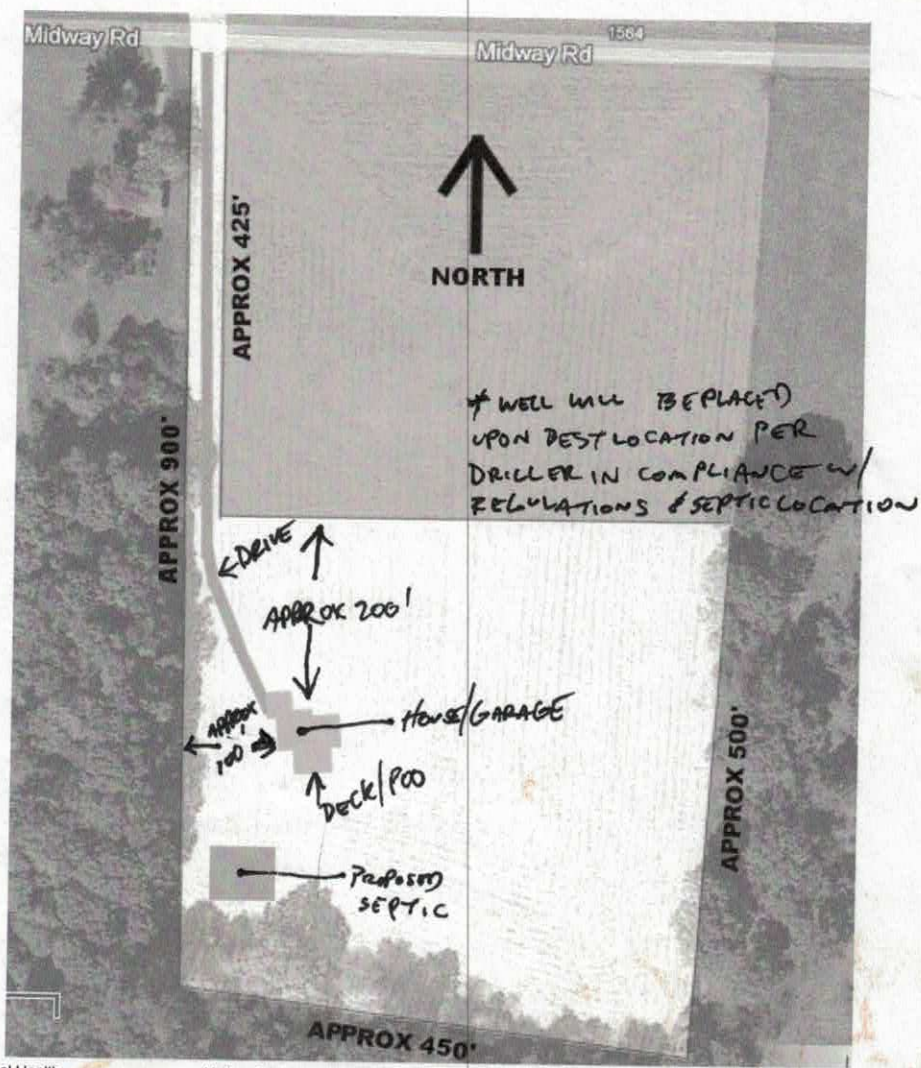
- ____ **Location of septic systems and wells within 100' of your property…** (N/A)
- ____ **Location of easements and rights of ways on your property…** (N/A)
- ____ **Location of any designated wetlands on the property…** (N/A)

Signature: _____

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

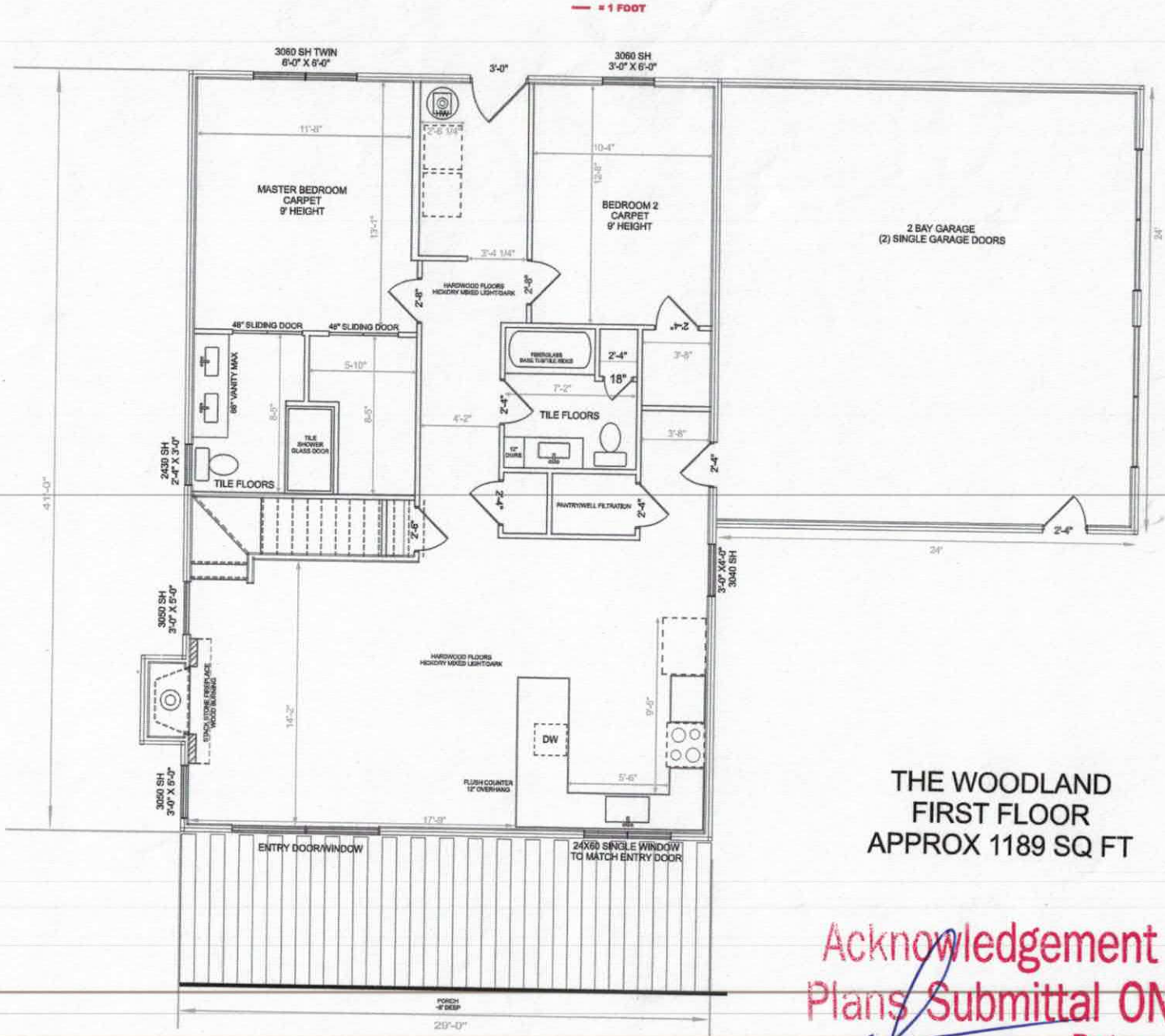
05/07/13
DATE

USE THIS SPACE TO DRAW YOUR SITE PLAN



White Copy – Environmental Health Yellow Copy – Applicant
C:\Users\dlutz\AppData\Local\Microsoft\Windows\Temporary Internet Files\OLK63F0\Application For OSWP Permit (2).doc

178603



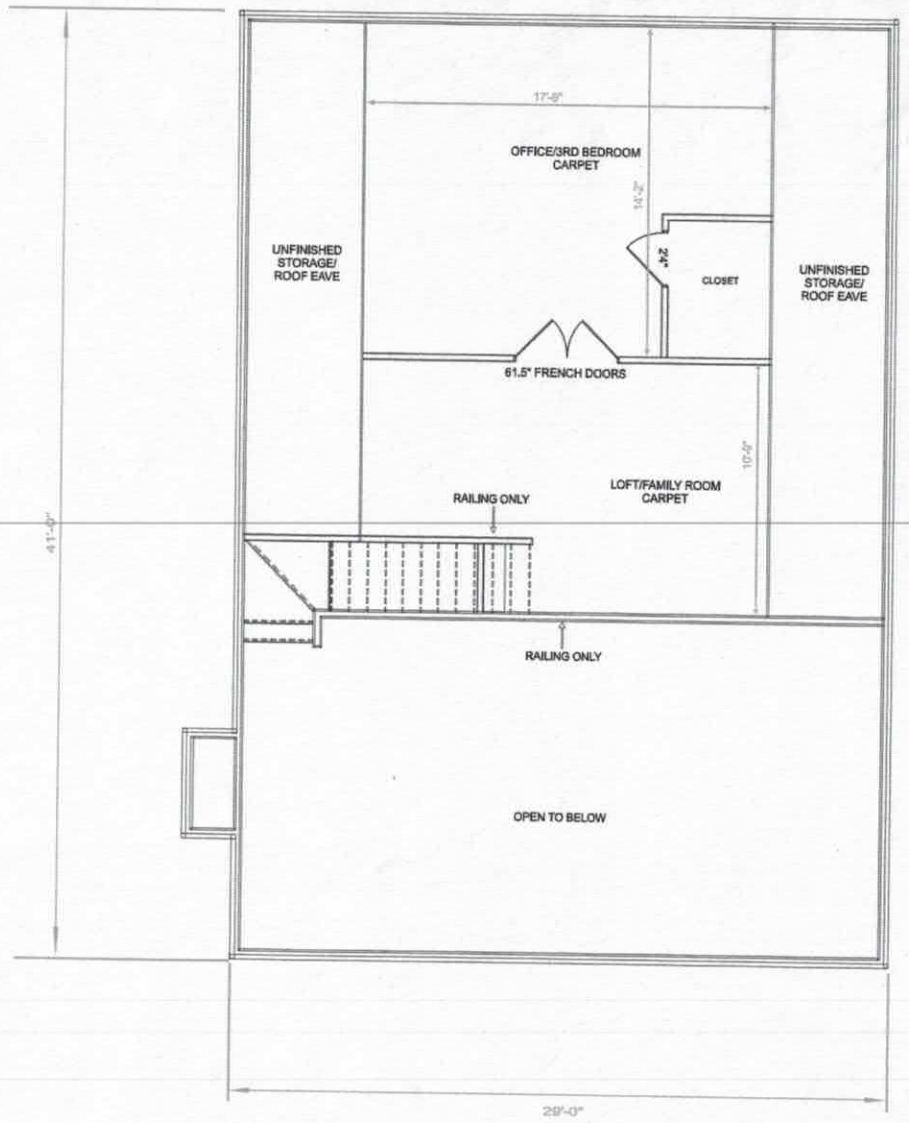
THE WOODLAND
FIRST FLOOR
APPROX 1189 SQ FT

Acknowledgement Of
Plans Submittal ONLY!

Date 08/09/13

Date 8-12-13

— = 1 FOOT



THE WOODLAND
SECOND FLOOR
APPROX 425 SQ FT

8-12-13

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

Zoning Permit

Permit Number: 178603ZO

Printed: 5/6/2013

Master #: 178603

Associated Permits:
178603ZO Zoning

Applicant

Name: CHRIS LEWIS
Address: 121 FALLING LEAF LANE
Statesville, NC 28677

Phone: 828-612-4333

Parcel

Parcel Number: 4707057389.000
Address: 000 MIDWAY DR
STAETSVILLE, NC 28678
Subdivision:
Directions to Parcel: HWY 115N, LEFT MIDWAY ROAD

Zoning: RA
Township: 1000
Area:
Lot(s):

Owners

Name: Timmy Stikeleather
Address: 1713 Midway Road
Stony Point, NC 28678

Contractors

Fees and Receipts:

Number	Description	Amount
FEE-283924-07	Zoning - Permit Application	$75.00
FEE-283925-07	Technology Fee - Planning	$2.25
FEE-283926-07	Environmental Health - Gravity System	$500.00
	Total Fees:	**$577.25**
REC-145758-07		$577.25
	Total Receipts:	**$577.25**

Conditions