ICHD - ENVIRONMENTAL HEALTH DIVISION

(80) BLDR-2024-44339

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

PERMIT # OSWP-2023-39670

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

PIN # 4717 -- 84 -- 2515

APPLICANT/OWNER: Bryan A + Rebecca N Wall

APPLICANT ADDRESS: 114 Cove Gap, Statesville, NC 28625

SITE ADDRESS: 114 Cove Gap, Statesville, NC 28625

PHONE: (917)-747-7710 ALT. PHONE –

SITE DIRECTIONS: 115 - Midway - Cove Gap

SAP CONTROLLED: ☐ YES ☑ NO

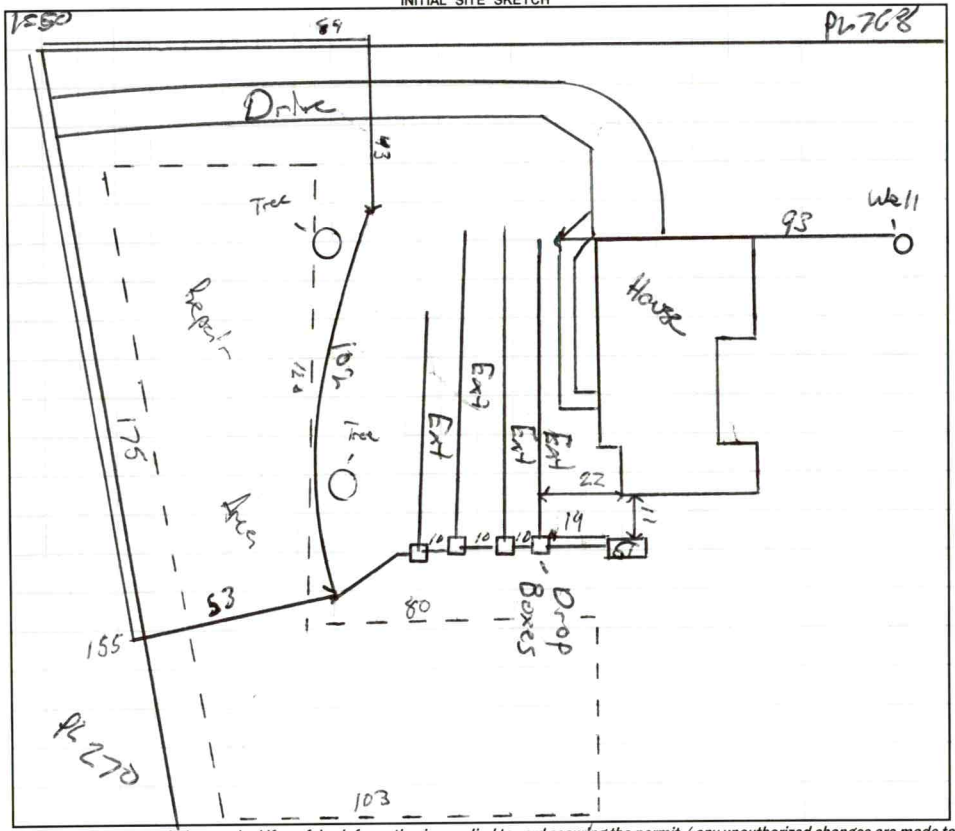
SUBDIVISION: – SECTION: – LOT # – LOT AREA: 5 AC DESIGN FLOW: 480 L.T.A.R.: -3

Septic Tank	Ext	(gal)	STB	Ext	Date	Ext	☐ New System	☐ Repair	☑ Expansion	System Type: I II III IV V VI	
Pump Tank		(gal)	PT		Date		System Description:	25% Reduction			
Pump Make			Model		Serial #		Repair System Description:	25% Reduction - Vertical			
# Nitrification Fields	1		# Lines	Ext+1	Linear Ft	Ext+102ft	Maintenance Agreement Required:	☐ YES	☑ NO		
Trench Width	36in		Trench Bottom Depth(Low side)	24in	Gravel Depth	N/A	☑ GRAVITY	☐ PRESSURE			

☑ Residence	No. Bedrooms	4	**Water Supply**
☐ Business	No. Persons	8	☑ Private Ext
☐ Other	No. Employees		☐ Public
☐ Slab	☑ Crawl Space		☐ Community
☐ Basement w/plumbing			☐ Basement w/o plumbing

Comments / Conditions: Install on contour. Do not drive, park or construct on septic area.

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.

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: Online Signature Date: Installed by: Anderson Septic

IMPROVEMENT PERMIT by: Matt Wilkie Date: 11/22/23 OPERATION PERMIT by: Matt Wilkie Date: 4/9/24

AUTHORIZATION TO CONSTRUCT by: Matt Wilkie Date: 11/22/23 Existing System Inspected by: Date:

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? _____	

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

Sheet 1 of 1
PROPERTY ID #: 47178425 15
COUNTY: Iredell

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

OWNER: Bryan A Wall
APPLICATION DATE 10/20/23
ADDRESS: 114 Cove Gap
DATE EVALUATED: 11/16/23
PROPOSED FACILITY: SFR
PROPOSED DESIGN FLOW (.1949): _____
PROPERTY SIZE: 5AC
LOCATION OF SITE: 114 Cove Gap
PROPERTY RECORDED: yes
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	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LS 5%	0-20	L/SBK	SS sp fr SE	-	48	Sap in Ch	Rock throughout C	PS .3
		20-48	CL/SBK	SS sp fr SE					
		~~0-35~~							
2	LS 3%	0-35	L/SBK	SS sp fr SE	-	48	-	Rock throughout C	PS .3
		35-48	CL/SBK	SS sp fr SE					
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	480	480
System Type(s)	25%	25%
Site LTAR	.3	.3

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Matthew W
OTHER(S) PRESENT: Cory W

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	SEXP (Slightly Expansive)	G (Single Grain)
CV (Convex Slope)		LS (Loamy Sand)			EXP (Expansive)	M (Massive)
D (Drainage Way)						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.

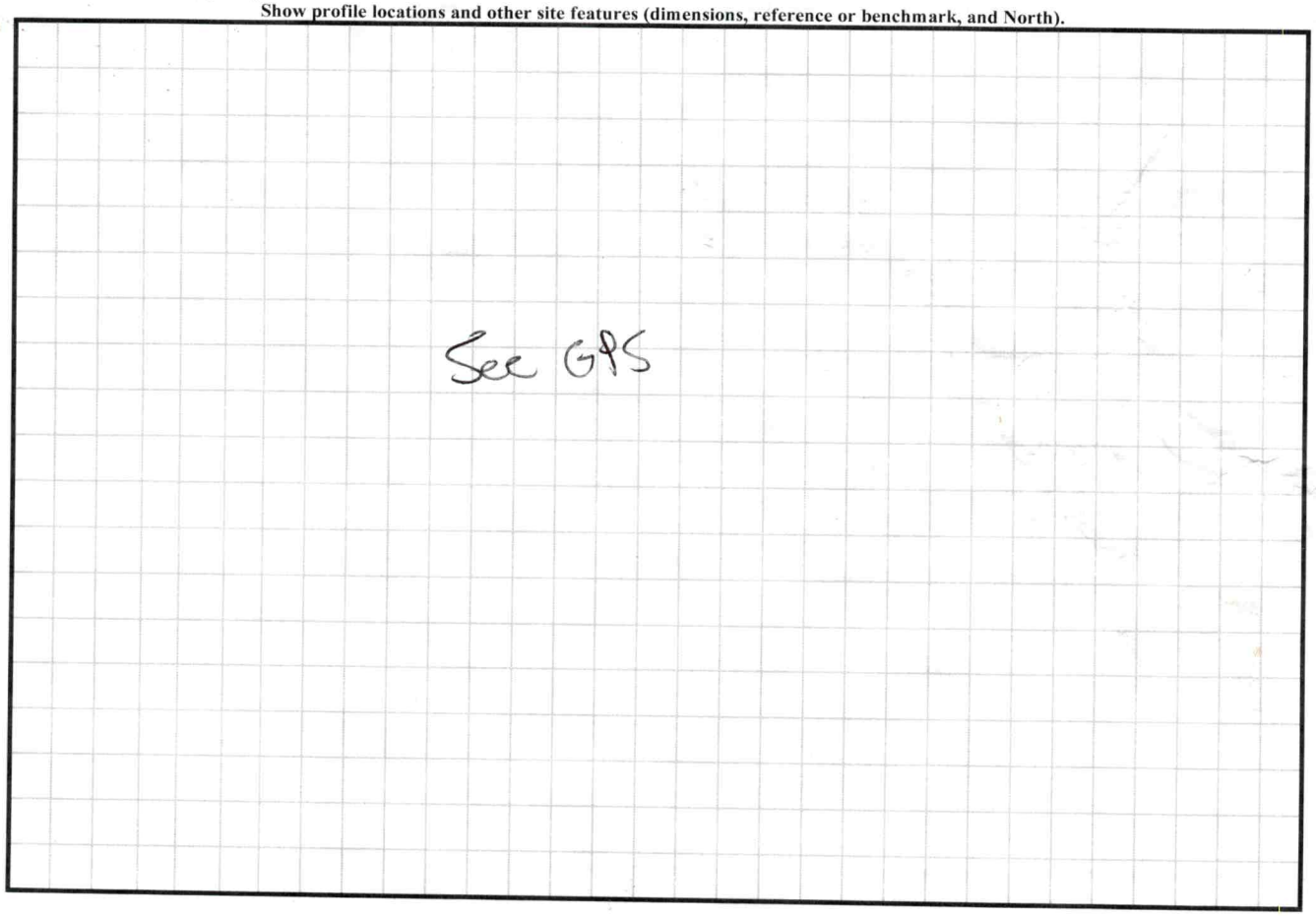
NOTES

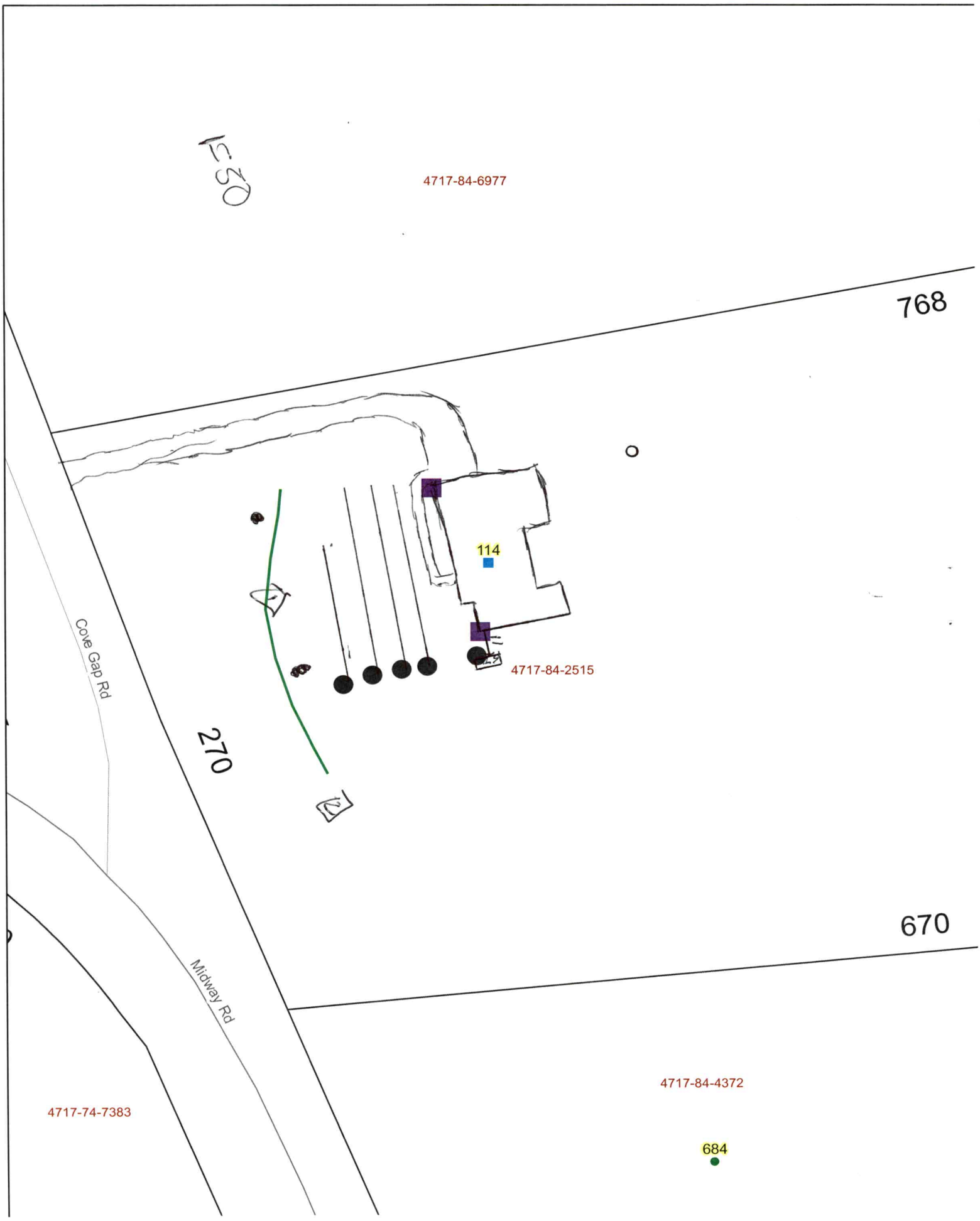
HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or 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).




150
4717-84-6977
768
114
Cove Gap Rd
270
4717-84-2515
670
Midway Rd
4717-84-4372
4717-74-7383
684



Tax Map Information

• PIN	4717842515.000
• Address	114 COVE GAP RD
• Account #	Acct 80007243
• Tax Owner	WALL BRYAN A
• Mailing Address	114 COVE GAP RD
•	STATESVILLE, NC 28625
• GIS Owner	WALL BRYAN A+REBECCA N
• Deed Info	2231 / 2036 - WD - 20130326
• Tax Acres	5 AC
• Lot #	
• Description	MASSEY+CAUDLE PROPERTY
• Zoning	R-20
• Old Parcel #	1009M00000A054
• Bldg Value	$212,870
• OBXF Value	$29,170
• Land Value	$49,700
• Total Value	$291,740
• Defer Value	$24,320
• Tax Districts	-ALLCNTY FIRE- -

IREDELL COUNTY NC

MAP FOR REFERENCE ONLY
NOT A LEGAL DOCUMENT

Iredell County, North Carolina makes no claims and no warranties, expressed or implied, concerning the validity or accuracy of the GIS data presented on this map.

Geometry updated 11/15/2023
Data updated 11/14/2023

Print map scale is approximate. Critical layout or measurement activities should not be done using this resource.

IREDELL COUNTY HEALTH DEPARTMENT

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

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

(1) PERMIT# 35955 PIN# 4717-84-4768 2515 DATE 6-2-06

OWNER OR APPLICANT KENNETH A. WAIT PHONE: Business 704-902-4495 Home 704-876-0047

ADDRESS 129 BECKHAM ROAD, STATESVILLE, NC 28625

LOCATION NC 115 NORTH TL MIDWAY RD, TR COVE GAP ROAD 0.1 MILE ON RIGHT

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 5 ACRES SITE CLASS. IPS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT2

Septic Tank: 1000 Gallons; STB TRSTD Date 3-05-06
Pump Tank: _____ Gallons; PT 1012-1000 Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines FIVE Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI
System Description: CONVENTIONAL, GRAVITY
Repair System Description: CONVENTIONAL, GRAVITY
Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Persons ____ No. Employees ____

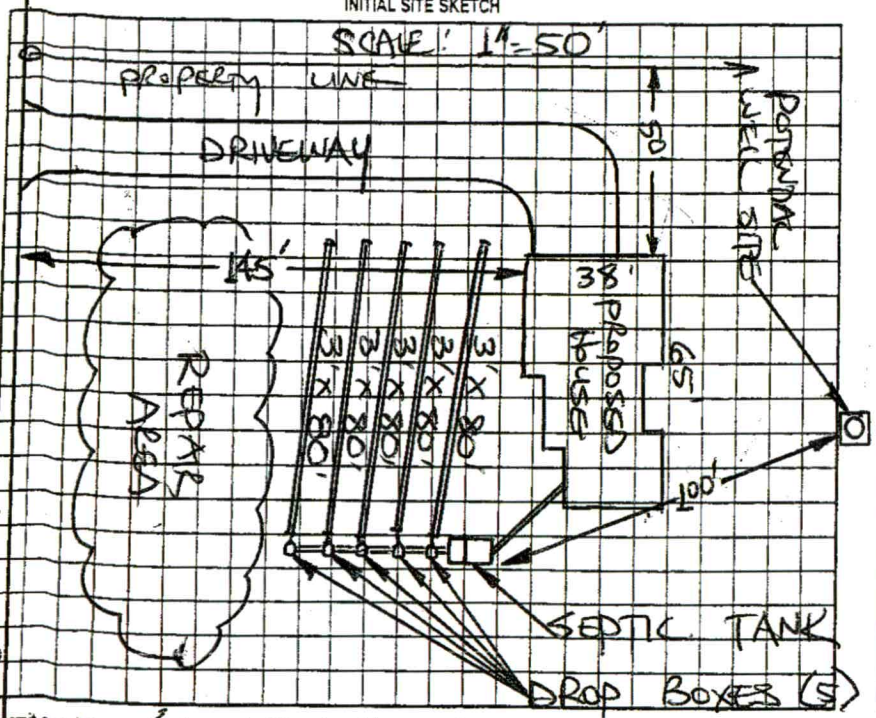
Water Supply: ☐ Individual ☐ Public ☐ Community WELL

☑ Gravity ☐ Pressure ☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

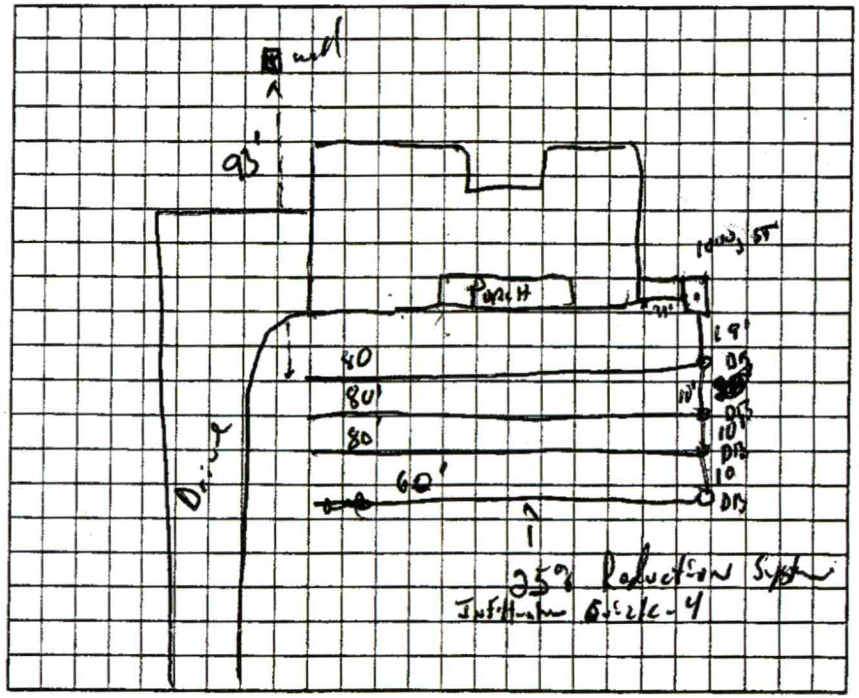
Comments/Conditions: AN "ACCEPTED SYSTEM" MAY ALSO BE USED - KEEP SYSTEM MINIMUM 100 FEET FROM WELL

Comments:/Conditions: Tough - Y:jkt

INITIAL SITE SKETCH



AS BUILT SKETCH



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: Kenneth A Wait date 6-2-06 Installed by: David Yount2

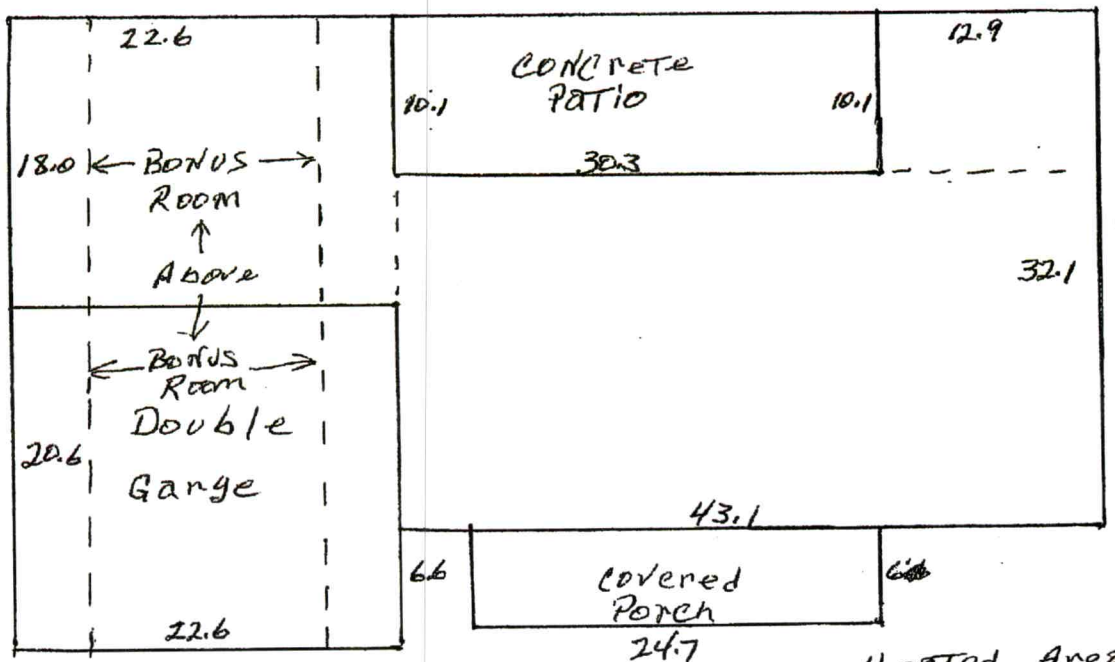
Improvement Permit by: STEVE HEDRICK date 6-2-06 Operation Permit by: _____ date 22 Sept.06

Authorization to Construct by: STEVE HEDRICK date 6-2-06 Existing System Inspection by: _____ date _____

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

Acknowledgement Of
Plans Submittal ONLY!
Matt Walker Date 11/22/23
Date

114 Cove Gap Road, Statesville

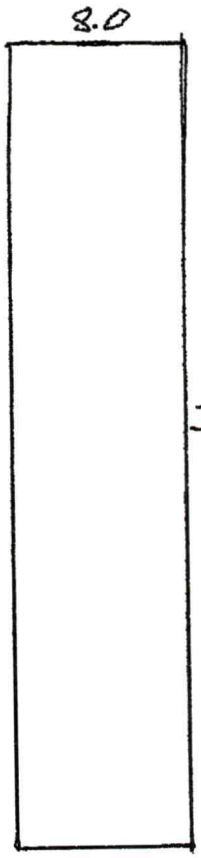


1-1-13 Dellinger Residence

PATIO — 306.03
Garage 465.56
Porch 148.20

Heated Area
12.9 X 10.1 — 130.29
22.0 X 43.1 — 948.20
22.6 X 18.0 — 406.80
Main Level 1,485.29
BONUS 308.80
1,794.09

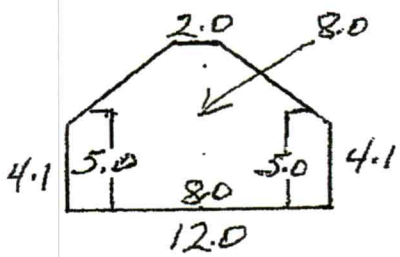
114 Cove Gap Road, Statesville



Heated Area

308.8 Sq Ft

Bonus
Room
Oven
Garage



1-1-13

Witnesses
Appraiser