File/Permit #: OSWP2025-84856

Manf -2025-84857

No Sub

IREDELL COUNTY HEALTH DEPARTMENT
BRADY FREEMAN, MPA REHS
HEALTH DIRECTOR

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

EXISTING SYSTEM APPROVAL

☒ Existing System Approval
- ☐ Site modification (e.g., storage shed) or footprint addition with no DDF or wastewater strength increase
- ☐ Reconnection when the proposed facility is in the same footprint as existing/previous facility

☒ Construction Authorization/Notice of Intent to Construct
[issued for reconnection when the proposed facility is not in the same footprint as existing/previous facility pursuant to Session Law 2023-77, Section 5.(c)]
[certified inspectors are not authorized to approve reconnections outside of footprint pursuant to Session Law 2023-77, Section 5.(c)]

Applicant: Matt Williams
Mailing Address: 316 N. Oakland Ave
City: Statesville
State: NC Zip: 28677
Phone #: (980) 434-8084
Email:

Owner: Emmer Nowlin
Mailing Address: 1238 Scotts Creek
City: Statesville
State: NC Zip: 28625
Phone #: (704) 881-4545
Email:

PIN/Lot Identifier: 4718122126

No sub

Property Location/Address: 122 Katy Ben Ln Stony Point, NC 28678

Facility Type: ☐ House/Modular ☒ Mobile/Manufactured Home ☐ Business ☐ Other:

Operation Permit/ATO #: OSWP 2025-84856 Design Daily Flow: 360 GPD
Number of Bedrooms: 3 Max # Occupants: 6 Other:
Wastewater Strength: ☒ Domestic ☐ High Strength ☐ Industrial Process Wastewater
Water Supply: ☒ Private well ☐ Public well ☐ Shared well ☐ Municipal Supply ☐ Spring ☐ Other:

Proposed Property Improvement: Place mobile home on lot.

All the following must be checked for approval:
- ☒ No current or past uncorrected malfunction of the system as described in 15A NCAC 18E .1303(a)(2)
- ☒ DDF and wastewater strength for the proposed facility do not exceed that of the existing system
- ☒ Proposed facility meets the setbacks in Section .0600 of 15A NCAC 18E

Approval Conditions: Keep MH 10ft off all septic and 25ft off well.

Inspector's Printed Name: Matthew Wilkinson Inspector Certification #: 3061
Inspector's Signature: Matt Wilki Date: 10/31/25

The existing system approval expires one year after the date of issuance.

See attached site sketch

Central Office
318 Turnersburg Hwy
Statesville, NC 28625
704 878-5300

Mooresville Office
610 E. Center Avenue
Mooresville, NC 28115
704 664-5281

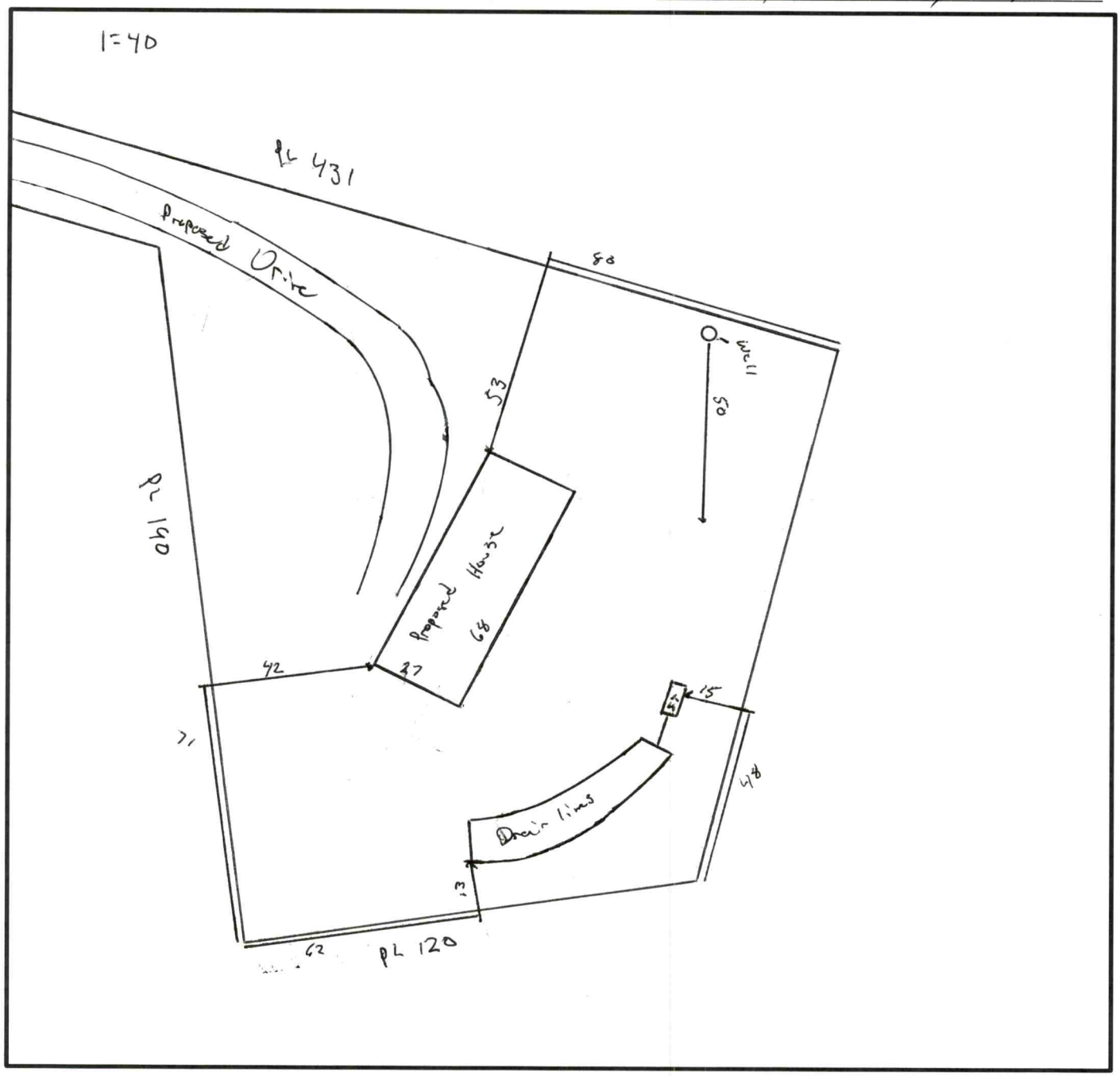
Environmental Health
349 N. Center Street
Statesville, NC 28677
704 878-5305 Ext.3456

https://www.iredellcountync.gov/161/Health-Department/

EXISTING SYSTEM APPROVAL
SITE SKETCH

Operation Permit/ATO #: 2025-84854 PIN/Lot Identifier: 4718122126

Owner: Matt Williams Property Location/Address: 122 Katy Ben Ln Stony Point, NC 28678



Include the existing and proposed structures and applicable setbacks.

PERMIT SNAPSHOT REPORT OSWP-2025-84858 FOR IREDELL COUNTY

Permit Type	Environmental Health OSWP	**Project:**		**App Date:**	10/13/2025
Work Class:	EH Septic Permit	**District:**	Iredell County	**Exp Date:**	NOT AVAILABLE
Status:	In Progress	**Square Feet:**	0.00	**Completed:**	NOT COMPLETED
Valuation:	$0.00	**Assigned To:**	Wilkinson, Matthew	**Approval Expire Date:**	

Description: Existing home removed and putting new double wide 27'X68' MANF-2025-84857

Parcel: 4718122126.000 Main	**Address:** 122 Katy Ben Ln Main Stony Point, NC 28678	**Zone:** RA(Residential Agricultural District)

Property Owner	Applicant/Authorized Agent
Emma Nowlin	Matt Williams
1258 Scotts Creek Rd	316 N. Oakland Ave
Statesville, NC 28625	Statesville, NC 28677
Mobile: (704) 881-4545	Mobile: (980) 434-8084

Permit Custom Fields

How is your site plan being submitted	Custom Site Plan	Septic Application/Permit Type	Authorization to Construct, Existing System Inspection	Does the site contain any jurisdictional wetlands	No
Non-domestic Sewage Generated	No	Other Public Agency	No	All proposed structure dimensions	27' X 68'
What are the proposed structures	New Single-Family Residence - Mobile Home	Type of New Single-Family Residence	Mobile Home	Maximum Number of Bedrooms	3
If other Addition/Structure, please explain		Number of Occupants	2	Foundation Type	Crawl Space Foundation
Water Supply	Existing Well	Desired Septic System Type	Conventional (most common)	If other septic system type, please explain	
Permit type(s)	Authorization to Construct	Has this project been approved by TRC	No	Lot Acreage	0.763
Front Setback	35	Back Setback	35	Left Setback	15
Right Setback	15	Zoning Permit Issued Date	Oct 14 2025 12:00AM	Zoning Permit Expiration Date	Apr 12 2026 12:00AM
Is the structure or development in the floodplain	No	Is the property in a local historic district?	No	Is the property located downtown?	No
Zoning Notes/Addendums	REQUIREMENTS FOR AL MULTI -SECTIONAL MOBILE HOMES Must meet requirement R9 of the LDC. Minimum size of main body is at least 22 feet by 40 feet; Must have standard residential shingles; Minimum of 3/12 roof pitch; Must have continuous masonry underpinning; Must have minimum roof eave and raker projections of 6 inches; Must have a 36 square foot deck or porch at all front entrances; Exterior siding must consist of vinyl or aluminum lap siding, wood, or hardboard,		comparable in composition, appearance and durability to residential siding; Must remove towing apparatus; Must face front property line and be no more than 20 degrees from parallel to the front property line. Original mobile home must be removed before Certificate of Occupancy can be approved.	Additional Unique Setbacks Apply	No

PERMIT SNAPSHOT REPORT (OSWP-2025-84858)

Watershed WSIV PA SOUTH YADKIN

Attachment File Name	Added On	Added By	Attachment Group	Notes
Signature_Matt_Williams_10/13/2025.jpg	10/13/2025 11:09	Williams, Matt		Uploaded via CSS
A1-Site Plan_v1 ok per LM.pdf	10/13/2025 11:42	Williams, Matt	Available Online	
122 katy ben floor plan_v1.pdf	10/13/2025 11:51	Williams, Matt	Available Online	
B1-Authorize to Act as Agent_v1.pdf	10/13/2025 11:51	Williams, Matt	Available Online	

Inspection Number	Status	Inspection Type	Request Date	Scheduled Start Date	Scheduled End Date	Actual Start Date	Actual End Date
2025-342856	Final Inspection Report	OSWP Septic/Well Preliminary Site Visit	10/27/2025			10/27/2025 14:02	10/27/2025 14:02

Inspectors: Bryant, Drew (Primary)

Checklist Item	Description	Passed	Comments
General Comments	Checklist item used to track general comments, not specific to any other checklist item	No	

Invoice No.	Fee	Fee Amount	Amount Paid
INV-00050490	Iredell Zoning Permit Fee	$75.00	$75.00
	Iredell Zoning Tech Fee	$2.25	$2.25
	Existing System Inspection	$250.00	$250.00
	Total for Invoice INV-00050490	$327.25	$327.25
	Grand Total for Permit	**$327.25**	**$327.25**

Workflow Step / Action Name	Action Type	Start Date	End Date
Application Completeness Check v.1		10/13/2025 11:35	10/13/2025 11:35
Confirm application complete v.1	Generic Action		10/13/2025 11:35
Zoning Review v.1		10/13/2025 11:37	10/27/2025 8:02
~~Floodplain Admin Overview v.1~~	Task		10/13/2025 11:37
Iredell County Zoning Approval v.1	Task	10/13/2025 11:37	10/13/2025 11:37
Issue Invoice v.1	Generic Action		10/13/2025 11:52
Fees Paid v.1	Generic Action		10/27/2025 8:02
Fees v.1		10/13/2025 11:52	10/27/2025 8:02
Fees Paid v.1	Generic Action		10/27/2025 8:02
Issue Invoice v.1	Generic Action		10/13/2025 11:52
Lot Readiness Verification v.1		10/27/2025 14:02	
OSWP Septic Preliminary Site Visit v.1	Inspection	10/27/2025 14:02	10/27/2025 14:02
OSWP Site Evaluation v.1	Inspection		
Issue Improvement Permit v.1			
Issue Invoice v.1	Generic Action		
Fees Paid v.1	Generic Action		
Issue Permit v.1	Generic Action		
Permit Completion Process v.1			
Authorization to Construct Permit v.1	Create Sub Permit		
Issue Authorization to Construct v.1	Generic Action		

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR John Miller DATE 5/31/85 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 115 N, Lf on Midway, Rt on Liberty Hill, Cross Creek, 1st MH on Rt

SUBDIVISION NAME _____ S. R. No. 1561

LOT NO. _____ SECTION OR BLOCK NO. _____

House ( ) Mobile Home (✓) Business ( ) Other _____

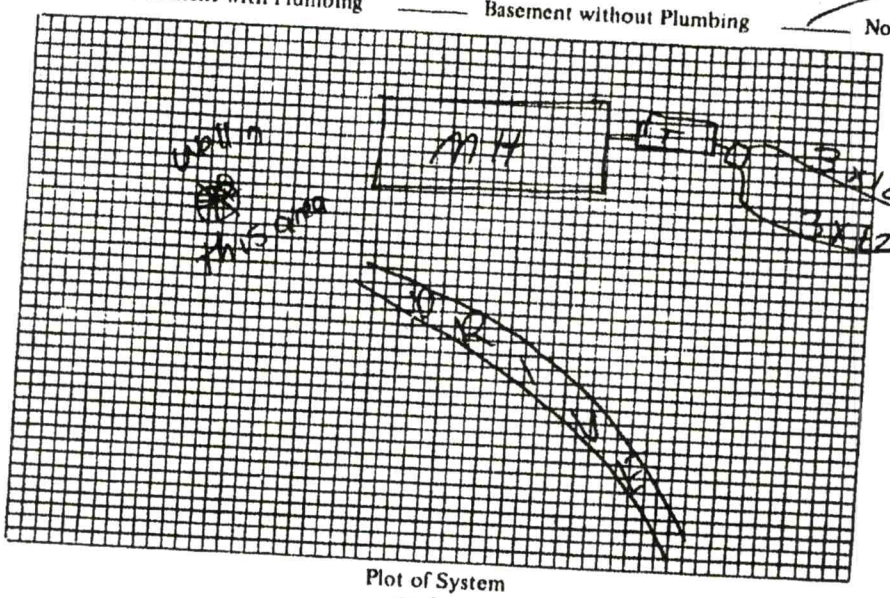
No. Bedrooms 3 No. Bathrooms 1½

Garbage Disposal Unit	Yes ( )	No ( )
Auto. Dishwasher	Yes ( )	No ( )
Auto. Wash. Machine	Yes ( )	No ( )
Site Suitable	Yes ( )	No ( )

Lot Area _____

Character & Porosity of Soil Prov. Suitable
Percolation Rate 5 gal / ft / day
Topography 2-6%
Depth to Water Table 10'+
Rock or other impervious formations Fractured rock

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by _____

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: _____

IMPROVEMENTS PERMIT BY Glenn Fox Jr.

COMMENTS: Keep well 50' from tank & line system.

CERTIFICATE OF COMPLETION BY [signature] DATE 5/31/85

EXISTING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Improvements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold

IREDELL COUNTY · NC

EH Data Collect

Legend

*EH data is highlighted in yellow and dashed lines.
*OB data is highlighted in green and solid lines.

- Property Corner
- Septic Tank
- Well
- Power Pole
- Utility Box
- Drainage Culvert
- Fence Post
- Tree
- Surface Rock
- D Box
- Water Tap
- Drain line
- Property line
- Driveway
- Ditch
- Terrace
- Fence
- System Layout Flags
- Buried Utility line
- Measurement Taken
- Power line
- Water line
- Other
- Building
- Septic Tank
- Pump Tank
- Repair Area
- Well Area
- Complex Topo Area
- Pool
- Pond
- other
- House corner
- Property corner
- Well
- Tail line



N

0 30 60 120 180 240

4718-12-6332

431

Well

Property Corner

Building

4718-12-2126

KATY BEN LN

122

Septic Tank

190

228

120

Drain line 43.4'

Drain line 61.5'

465

4718-12-0038

4718-11-1864