4721386827
5.79 acres

Permit 210582

IREDELL COUNTY HEALTH DEPARTMENT

Environmental Health Division

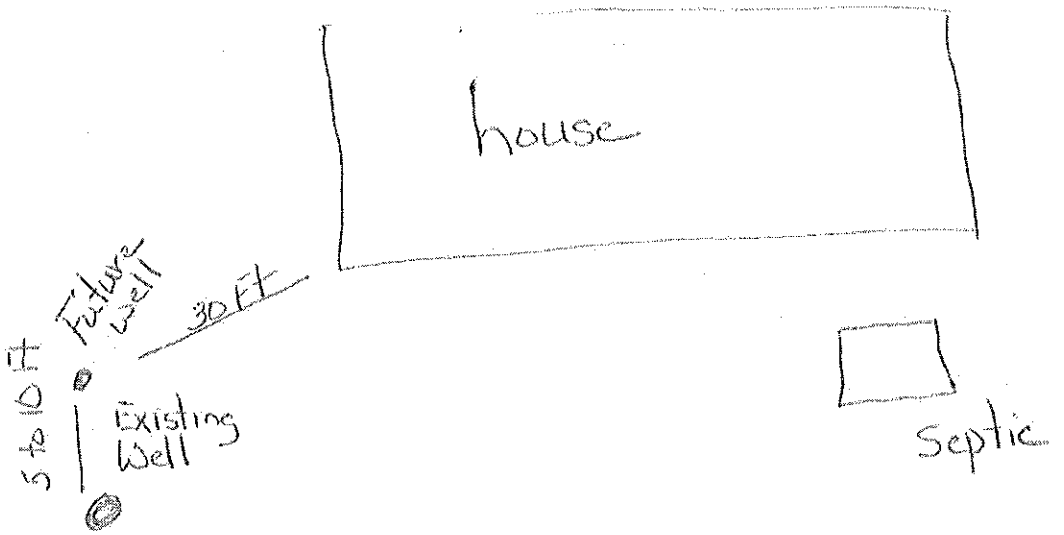
Statesville Office 704-878-5305 Mooresville Office 704-660-3625

APPLICATION FOR PRIVATE DRINKING WATER WELL PERMIT

Michael W. Crisp	158 Tangle Ln Statesville NC 28677	Cell 704 682 5373
Applicant Name	Full Address	Phone Number
Michael W. Crisp		home 704-528-9308
Name of Owner / Authorized Agent	Full Address	Phone Number
158 Tangle Ln	N/A	N/A
Property Street Address	Subdivision	Lot Number
	Dwelling	
Parcel Identification Number (PIN)	Intended Use of Property	Type of Well Permit (New, Repair, Abandonment)

All site characteristics such as existing or permitted sewage disposal systems, easements or rights of way, existing wells or springs, surface water or designated wetlands, chemical or petroleum storage tanks, landfills, waste storage, known underground contamination and any other characteristics or activities on the property or adjacent properties that could impact groundwater quality or suitability of the site for well construction must be identified on the site plan sketch below.

SITE PLAN SKETCH



CHECK AS APPLICABLE:

____ There are current or pending restrictions regarding groundwater use as specified in GS 87-88(a)

____ There is a variance regarding well construction or location issued under 15A NCAC 02C .0118.

By signing below I acknowledge that the information provided herein is true, complete and correct. Furthermore, I grant authorized county and state officials right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand 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 investigation can be performed.

Michael W. Crisp — 5/18/15

SIGNATURE OF OWNER OR AUTHORIZED AGENT — DATE

Health Department Copy - White

Applicant Copy - Yellow

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 Ronald Moss DATE 5-7-76 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Wallace Springs Rd. T.R. on Old Mountain Rd. T.L. on Troutman Historical Rd. T.R. Hoard Rd. Last House at End of Rd. No. _____

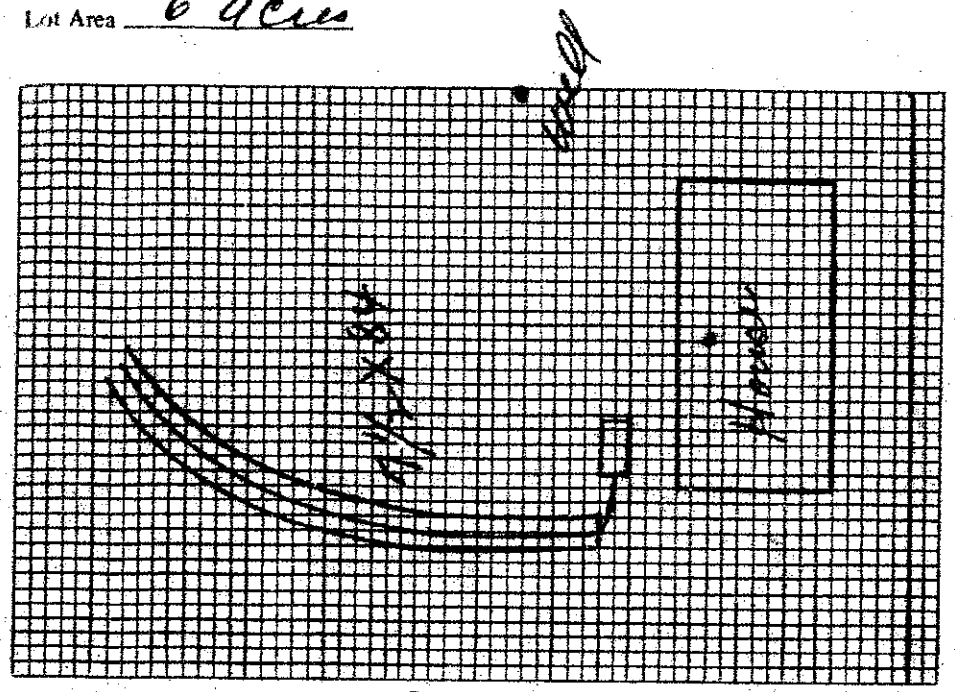
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2½

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Cecil Clay
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Slope
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	Low
			Rock or other impervious formations	None

Lot Area 6 Acres



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 625 Linear Ft. 250
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Sam Ostwalt

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 5-7-76

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

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

LEGEND

use the following standard abbreviations

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

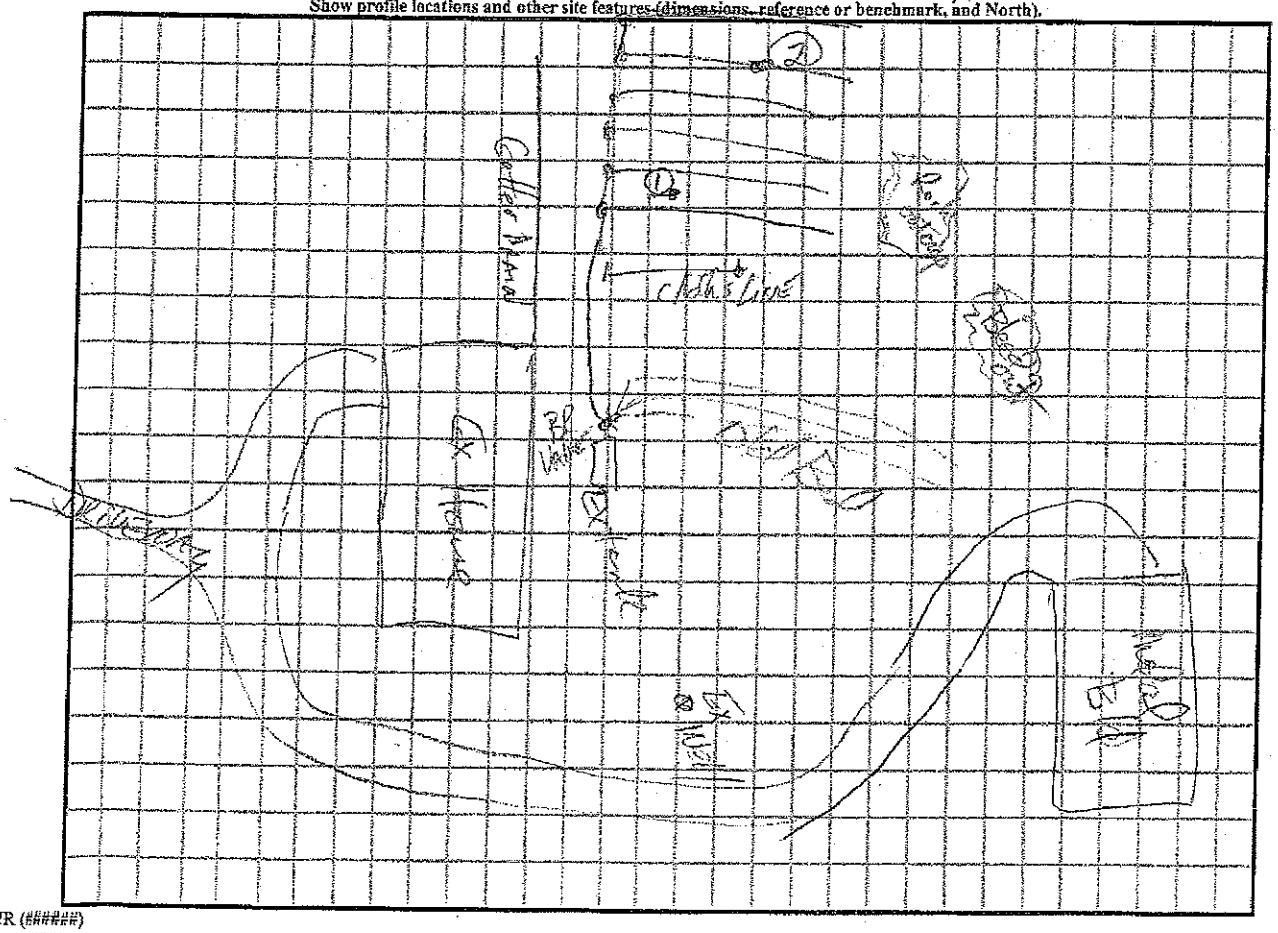
NOTES

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 60@50'/25% Reduction

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



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