IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 222627

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

PIN # 4722-29-3186-2067

APPLICANT: J. Matthew Gallyon APPLICANT ADDRESS: 960 Old Mountain Rd. Statesville, NC

SITE ADDRESS: 121 Rainy Day Lane Statesville, NC (Tract #2) PHONE: 704-500-6174 ALT. PHONE:

SITE DIRECTIONS: Rt 21/115 N from Troutman → L on Old Mountain Rd → Lot on Right.

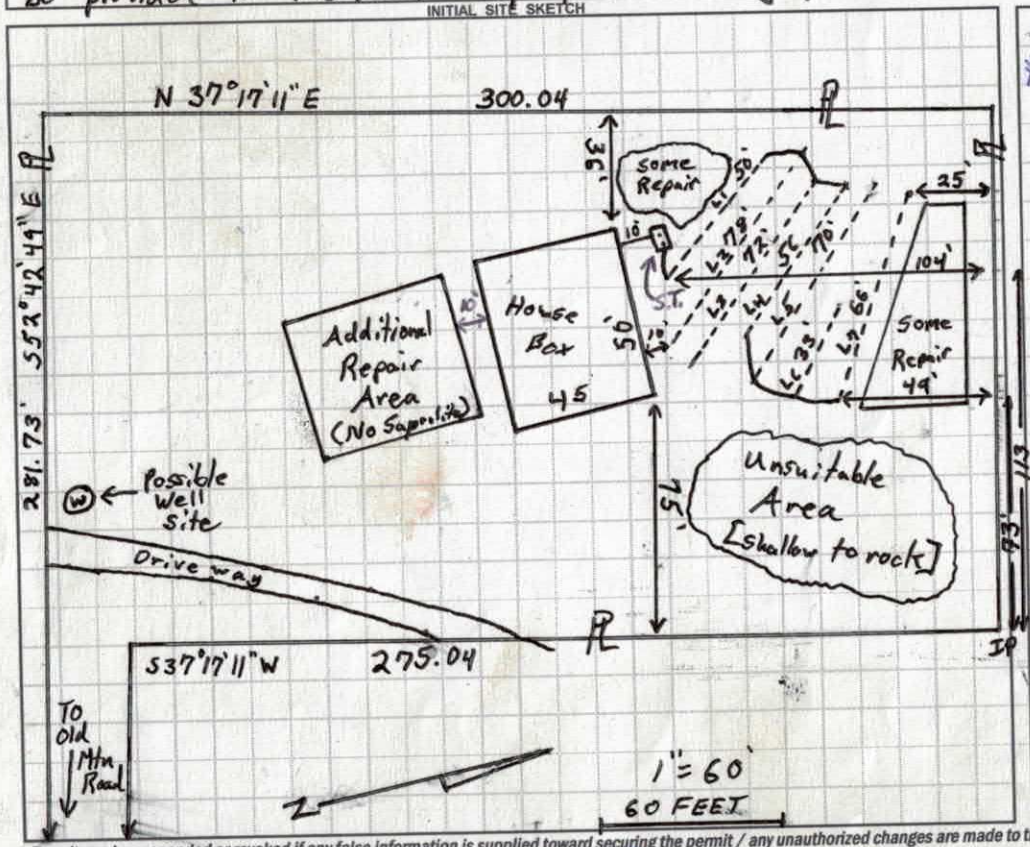
SUBDIVISION: — SECTION: — LOT # 2 LOT AREA: 1.393 acres DESIGN FLOW: 480 GPD L.T.A.R.: 0.30

Septic Tank	1000	(gal)	STB 1012	Date	11/16/17	☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI	☒ Residence	No. Bedrooms	4
Pump Tank	—	(gal)	PT —	Date	—	System Description: 25% Reduction	☐ Business	No. Persons	8
Pump Make	—	Model	—	Serial #	—	Repair System Description: 50% Reduction (LP-PP3PS)	☐ Other	No. Employees	
# Nitrification Fields	1	# Lines	7	Linear Ft:	400	Maintenance Agreement Required: ☐ YES ☒ NO	☐ Slab	☒ Crawl Space	
Trench Width	36"	Max. Trench Bottom Depth	36"	Gravel Depth	—	☒ GRAVITY ☐ PRESSURE	☐ Basement w/plumbing	☐ Basement w/o plumbing	

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Follow all N.C. septic rules. Recommend pumping septic tank every 3-5 years. To qualify for AC, a deeded + recorded plat (with deed book + page number) must be provided to the health department exactly matching the plat already on record with the department. Though ± 425 l.f. of line was laid out, only 400 l.f. need be installed.

INITIAL SITE SKETCH



AS BUILT SKETCH

*Installed as permitted.
*Quick Draft Drawn Distilled.

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: J Matthew Gallyon Date: 1-26-17 Installed by: Steve Jordan - Piedmont Backhoe

IMPROVEMENT PERMIT by: Tom Shuck Date: 11/29/16 OPERATION PERMIT by: Benjamin A Bethis Date: 12/28/17

AUTHORIZATION TO CONSTRUCT by: Tom Shuck Date: 11/30/16 Existing System Inspected by: Date:

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

DHHS

ON-SITE WASTEWATER SECTION

Sheet ____ of ____

PROPERTY ID #: ____

COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Matthew Gallyon — APPLICATION DATE: 10/19/16

ADDRESS: 960 Old Mountain Road — DATE EVALUATED: 11-10-16 + 11/14/16

PROPOSED FACILITY: 4BR House — PROPOSED DESIGN FLOW (.1949): 480 GPD — PROPERTY SIZE: 1.3 acres

LOCATION OF SITE: 121 Rainy Day Lane Troutman — 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	Pit LSS 25-30% Primary	0-22 22-31 31-60 Install @ 30-36"	Sandy clay w/BK Loam stone lite Sandy Saprolite MA some clay pieces Sandy Saprolite MA	Sl. Friable, SS, Sp, Soap Friable, T moderately Drained Very Friable, well Drained	—	22"	—	—	0.375 PS
2	Pit LSS Primary	0-8" 8-21" 21-48" 48-60" Install @ 30"-36"	Clay Loam w.SBK Clay Loam + Loamy Saprolite w/SBK Sandy Saprolite MA Sandy Saprolite MA few Mag manganese nodules	Sl. Firm, SS, Sp, Sosp Friable, SS, Sp, Soap Very Friable, well Drained Very Friable, moderately Drained	—	21"	—	—	0.30 PS
3	Pit LSS 25-30% Repair	0-10 10-22 22-48" 48-60"	Loam w.SBK Clay Loam/Heavy Loam v. weak SBK Loamy Saprolite MA Sandy Saprolite MA + some manganese nodules	Sl. Firm, SS, Sp, Soap Friable, SS, Sp, Soap Very Friable, well Drained Very Friable, Very well Drained	—	48"	—	—	0.30 PS
AH5	LSS 16% Other side of House Repair	0-18 18-26 26-45 45-48	SCL w. clay Pieces w.SBK R. Clay + trace Sandy Saprolite w.SBK Clay Loam + m.SBK Abundant Sandy Saprolite Sandy Saprolite MA	Sl. Firm SS, Sp, Soap Sl. Firm SS, Sp, Soap Friable, SS, Sp, Soap very Friable+ Well Drained	—	45"	—	—	0.30 PS

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	400 L.F.	300 L.F.
System Type(s)	25% Reduction	LPP BBPS
Site LTAR	0.30	0.30

OTHER FACTORS (.1946): ____

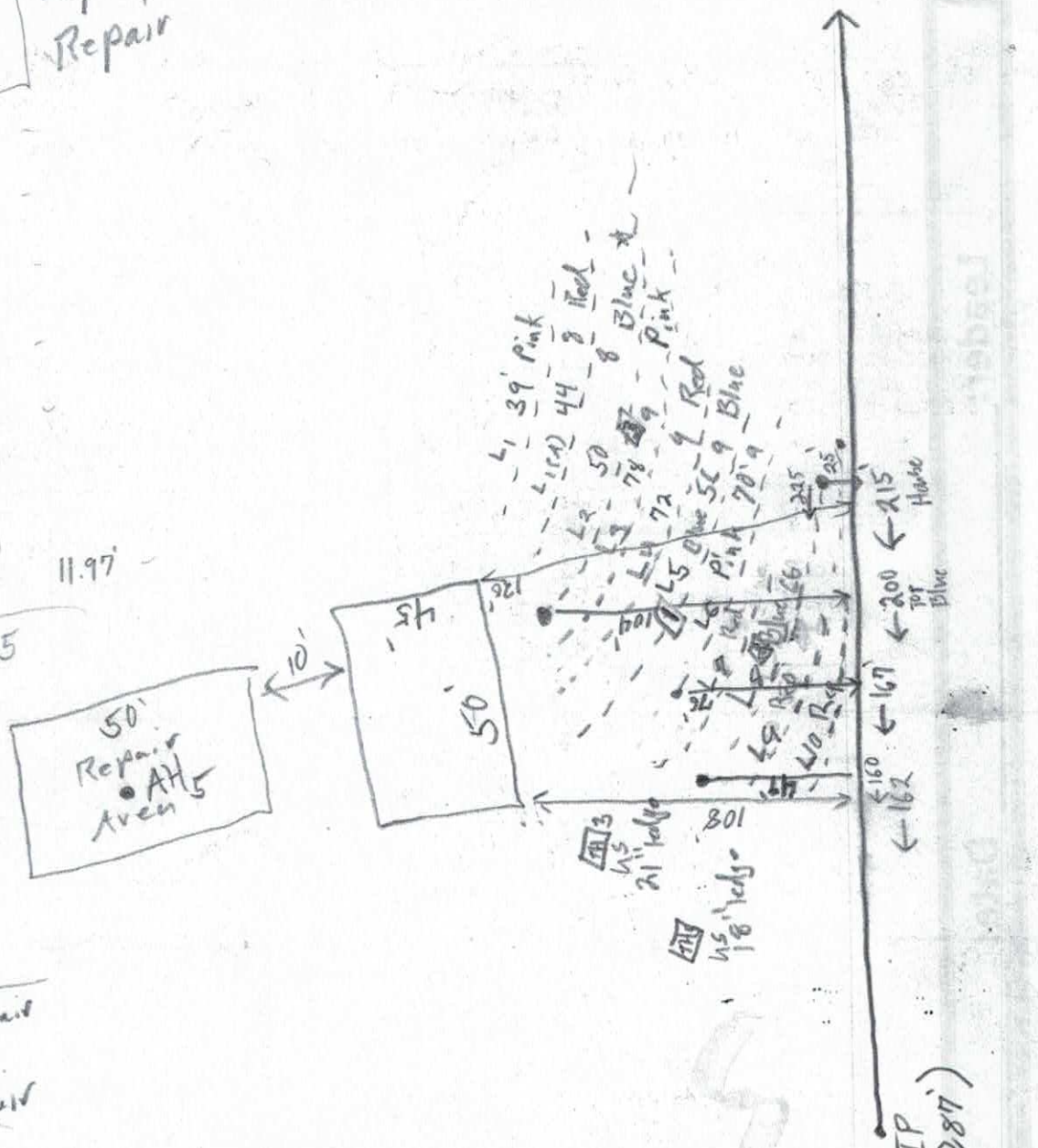
SITE CLASSIFICATION (.1948): PS

EVALUATED BY: Tom Shuck

OTHER(S) PRESENT: owner

COMMENTS: Fill in undulations

L1 Pink 39 3.95' Repair
L1(A) Red 44' Repair
2
L2 (B/Blue) 50'
L3 (P) 78'
L4 (R) 72'
L5 (B) 56'
L6 (Pink) 70'
L7 (Red) 33'
L8 (Blue) 66' 11.97'
425



25 (leftover)
44
39
+ 108

L9 (R) 38' Repair
L10 (P) 58' Repair
204

44.5
267

AH 5
0-18 Sandy Clay Loam w/clay Plugs
18-26 Clay Loam + some sandy Saprolite
26-45 Loam w/some saprolite
45-49 Sandy Saprolite

soil to 45'

#500

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)

1. APPLICATION FOR: ___ Improvement Permit ✓ Authorization To Construct ___ 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 ___ Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. Applicant Information:

J Matthew Gallyon	960 Old Mountain Road	704-500-6174	
Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
J Matthew Gallyon	960 Old Mountain Road	704-500-6174	
Owner Name	Mailing Address	Home Phone #	Alternate Phone #

4. Property Information:

954 Old Mountain Road - 121 Rainy Day Lane
Street Address — Subdivision Name — Section/Phase and Lot Number

Driving Directions: _____

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 (4)
Maximum Number of Occupants 5
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 ( ) Yes (✓) No Does the site contain any jurisdictional wetlands?
To The Best of Your Ability: ( ) 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.

X 9. Signature: J Matthew Gallyon — 10-19-16
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) — 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:

____ Property Line mensurements are clearly identified...

____ 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

____ Front and side setbacks from property line...

____ Area you prefer your septic system to be placed...

____ Preferred driveway location and configuration, preferred well location...

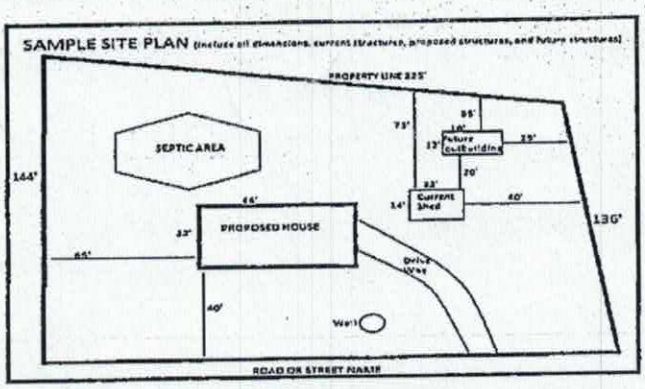
____ North arrow, or other sufficient indicator of direction...

Circle N/A on the following if appropriate:

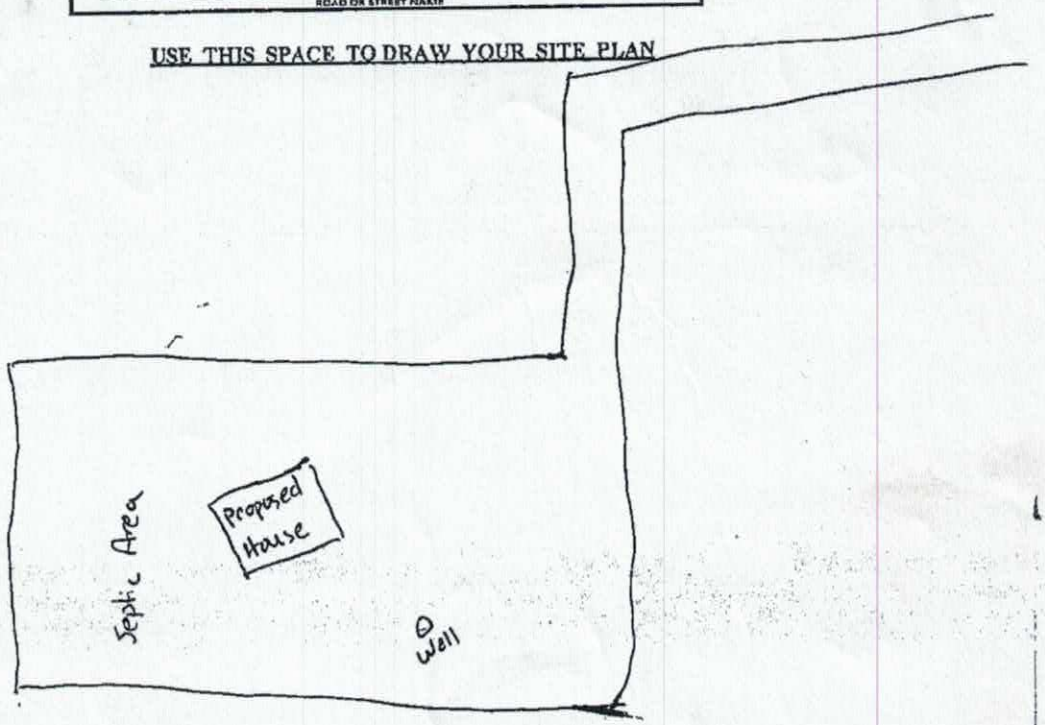
____ Location of septic systems and wells within 100' of your property... N/A

____ Location of easements and rights of ways on your property... N/A

____ Location of any designated wetlands on the property... N/A



USE THIS SPACE TO DRAW YOUR SITE PLAN

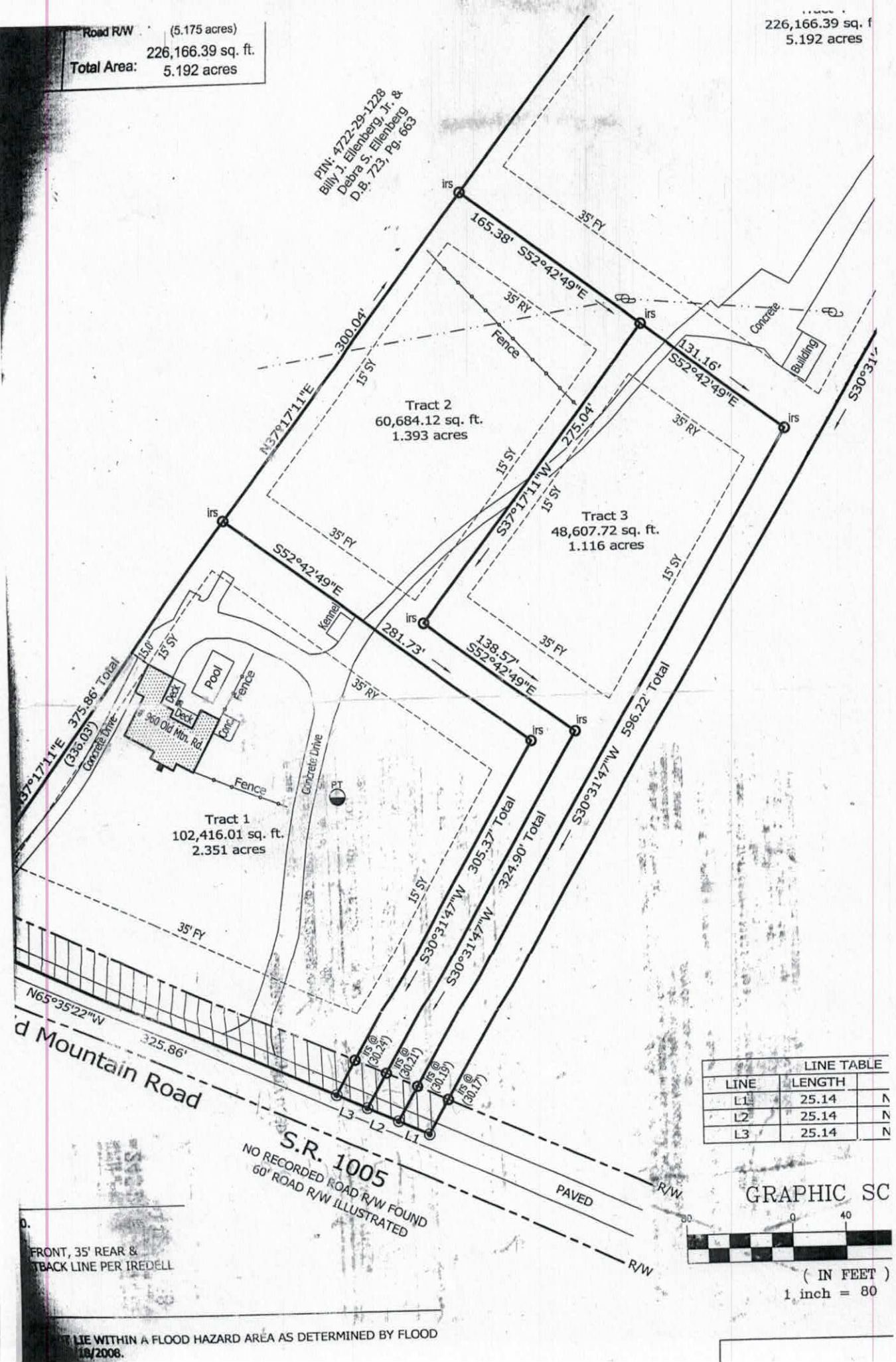


Signature: J Matthew Sallow

REQUIRED property owner or owner's legal representative signature.

10-19-16

DATE


Road R/W (5.175 acres)
Total Area: 226,166.39 sq. ft.
5.192 acres
226,166.39 sq. f
5.192 acres
PIN: 4722-29-1228
Billy J. Ellenberg, Jr. &
Debra S. Ellenberg
D.B. 723, Pg. 663
irs
165.38' S52°42'49"E
35' FY
35' RY
15' SY
Fence
Concrete
Building
131.16'
S52°42'49"E
300.04'
N37°17'11"E
Tract 2
60,684.12 sq. ft.
1.393 acres
275.04'
S37°17'11"W
Tract 3
48,607.72 sq. ft.
1.116 acres
S30°31'47"W
S52°42'49"E
281.73'
138.57'
S52°42'49"E
Kennel
Deck
Pool
Deck
Fence
Conc.
360 Old Mtn. Rd.
Fence
Concrete Drive
PT
Tract 1
102,416.01 sq. ft.
2.351 acres
375.86' Total
(336.03')
Concrete Drive
305.37' Total
324.90' Total
596.22' Total
N65°35'22"W
325.86'
Mountain Road
S.R. 1005
NO RECORDED ROAD R/W FOUND
60' ROAD R/W ILLUSTRATED
PAVED
R/W
R/W
L1
L2
L3
irs @ (30.24')
irs @ (30.21')
irs @ (30.19')
irs @ (30.17')
LINE TABLE
LINE
LENGTH
L1
25.14
L2
25.14
L3
25.14
GRAPHIC SC
0
40
(IN FEET)
1 inch = 80
FRONT, 35' REAR &
TBACK LINE PER IREDELL
T LIE WITHIN A FLOOD HAZARD AREA AS DETERMINED BY FLOOD
18/2008.

Type: CRP
Recorded: 10/14/2016 at 03:58:19 PM
Fee Amt: $26.00 Page 1 of 2
Revenue Tax: $0.00
Iredell County, NC
Ronald N. Wyatt Register of Deeds
BK 2451 PG 1127-1128

GENERAL WARRANTY DEED

Excise Tax: GIFT DEED

Tax Parcel ID No.: Portion of 4722-29-3186 Verified by:

on the ____ day of _____, 20____ By: _____

NO TITLE OPINION RENDERED OR IMPLIED – NO CLOSING HELD BY PREPARING ATTORNEY

Mail/Box to: Grantee

This instrument was prepared by: Kevin C. Donaldson, Attorney at Law, Jones, Childers, Donaldson & Webb, PLLC, 149 Welton Way, Mooresville, NC 28117

Brief description for the Index: _____

THIS DEED, made this the 14th day of October, 2016, by and between

GRANTOR: **Joy W. Fox, Unmarried**
whose mailing address is 960 Old Mountain Road, Statesville, NC 28677 and
whose mailing address is _____
(herein referred to collectively as **Grantor**) and

GRANTEE: **J. Matthew Gallyon and wife, Jodi K. Gallyon**
whose mailing address is 960 Old Mountain Road, Statesville, NC 28677 and
whose mailing address is _____
(herein referred to collectively as **Grantee**) and

WITNESSETH:

For love and affection from Grantee to Grantor, the receipt and sufficiency of which is hereby acknowledged, Grantor hereby gives, grants, bargains, sells and conveys unto Grantee in fee simple, subject to the Exceptions and Reservations hereinafter provided, if any, the following described property located in the Township of **Shiloh**, County of **Iredell**, State of North Carolina, more particularly described as follows:

TO LOCATE THE BEGINNING POINT begin at an iron pin found with grid coordinates N – 728,766.14 and E – 1,421,867.12 located in the line of Billy J. Ellenberg, Jr. (See Deed Book 723, Page 663) and Joy W. Fox (See Deed Book 2371, Page 155) near the northern margin of the right of way for Old Mountain Road (State Road 1005); thence South 37-17-11 West 39.83 feet to a computed point located near the centerline of Old Mountain Road; thence South 65-35-22 East 325.86 feet to the POINT AND PLACE OF BEGINNING; thence running from said Beginning Point with two new lines of Fox North 30-31-14 East 305.37 feet to an iron rod set and North 52-42-49 West 281.73 feet to an iron rod set a new common corner with Fox in the line of Ellenburg; thence with the line of Ellenburg North 37-17-11 East 300.04 feet to an iron rod set; thence the following four (4) new lines

R.O.T.C.

Page Count 2
☐NS ☐PQ ☐SI

Matches - SR

with Fox, now or formerly: 1) South 52-42-49 East 165.38 feet to an iron rod set; 2) South 37-17-11 West 275.04 feet to an iron rod set; 3) South 52-42-49 East 138.57 feet to an iron rod set; 4) South 30-31-47 West 324.90 feet to a computed point; 4) North 65-38-29 West 25.14 feet to the point and place of Beginning, the same containing 1.393 acres, more or less and being described as Tract 2 all in accordance with that certain survey entitled "Family Division for: Joy W. Fox" prepared by Matthew T. Grant, PLS and dated August 22, 2016.

Said property having been previously conveyed to Grantor by instrument(s) recorded in Book 2371, Page 155 and being reflected on plat(s) recorded in Map/Plat Book n/a, page/slide n/a.

All or a portion of the property herein conveyed ___ includes or ✓ does not include the primary residence of a Grantor.

TO HAVE AND TO HOLD unto Grantee, together with all privileges and appurtenances thereunto belonging, in fee simple, subject to the Exceptions and Reservations hereinafter and hereinabove provided, if any.

And Grantor hereby warrants that Grantor is seized of the premises in fee and has the right to convey same in fee simple, that title is marketable and is free and clear of encumbrances other than as set forth herein, and that Grantor will forever warrant and defend the title against the lawful claims of all persons or entities whomsoever.

This conveyance is made subject to the following Exceptions and Reservations:

1. **ANY AND ALL EASEMENTS, RIGHTS OF WAY AND RESTRICTIONS OF RECORD.**
2. **ANY AND ALL ZONING AND PLANNING ORDINANCES.**

All references to Grantor and Grantee as used herein shall include the parties as well as their heirs, successors and assigns, and shall include the singular, plural, masculine, feminine or neuter as required by context.

IN WITNESS WHEREOF, the Grantor has duly executed the foregoing as of the day and year first above written.

_____
(Entity Name)

By: _____
Print/Type Name & Title: _____

Joy W. Fox (SEAL)
Joy W. Fox

By: _____
Print/Type Name & Title: _____

_____ (SEAL)

By: _____
Print/Type Name & Title: _____

_____ (SEAL)

By: _____
Print/Type Name & Title: _____

_____ (SEAL)

State of North Carolina
County of Iredell

I certify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she signed the foregoing document:
Joy W. Fox, Unmarried.

Date: 10-14-16

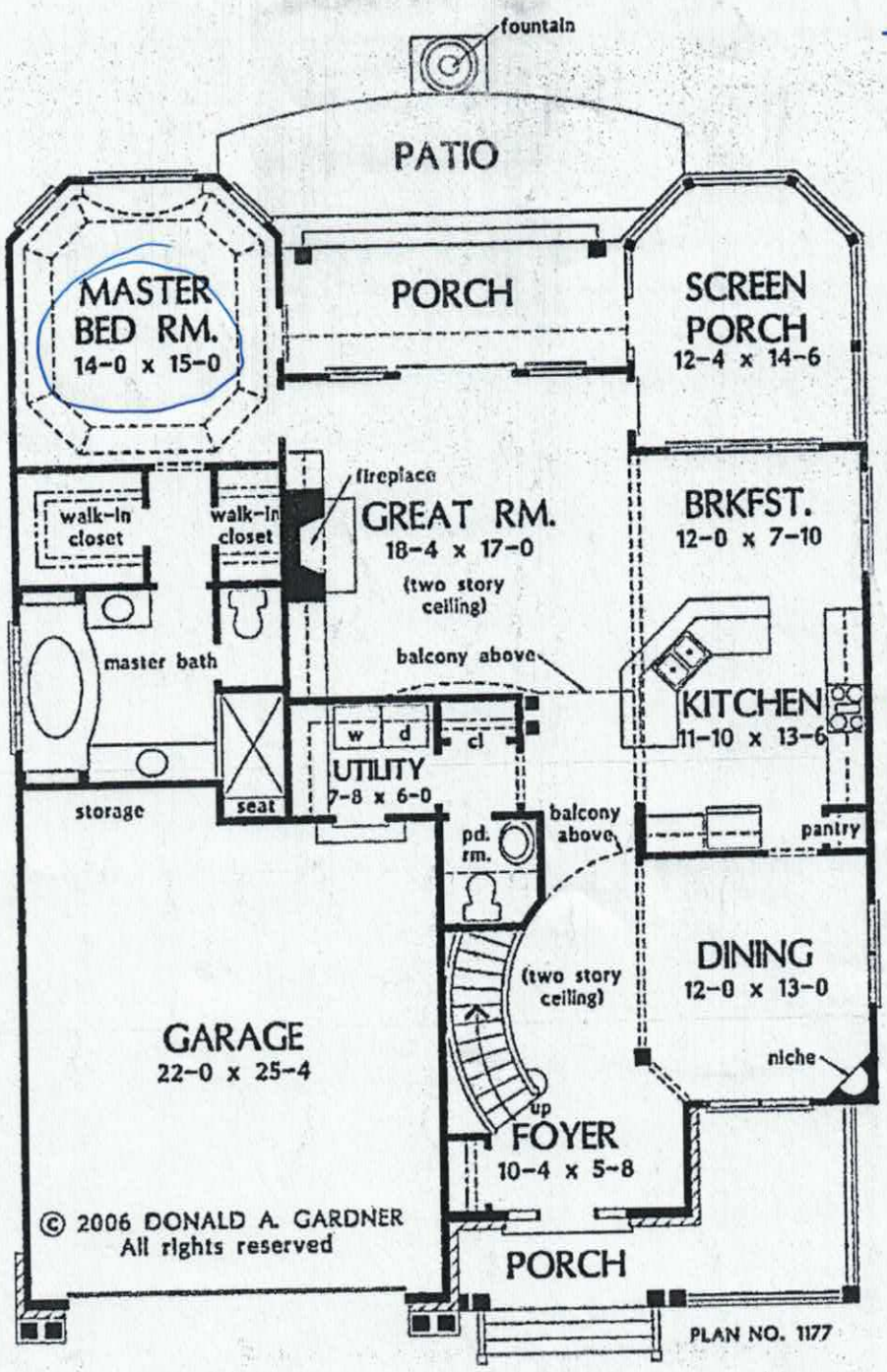
Jennifer M. Bryant Notary Public
Notary's Printed or Typed Name

My Commission Expires:
April 26, 2017

(Official/Notarial Seal)

JENNIFER M BRYANT
NOTARY
PUBLIC
CATAWBA COUNTY, NC

Revised December 17, 2009

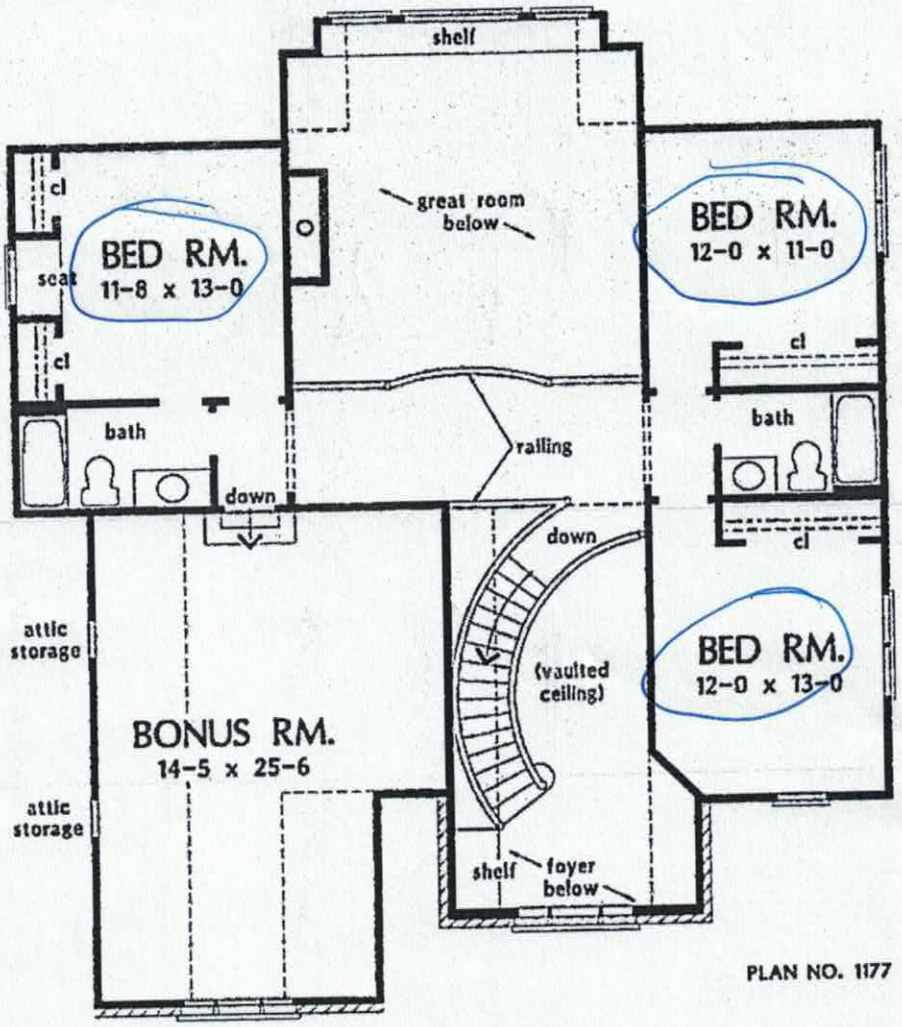


Acknowledgement of Plans Submittal ONLY!

Matthew Dalbo Date 1-26-17

Tom Shuck Date 12/1/2016

SECOND



SECOND FLOOR PLAN

Acknowledgement of Plans Submittal ONLY!

Matthew Gallyn Date 1-26-17

Tom Shuck Date 12/1/2016

IREDELL COUNTY

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

APPLICATION NUMBER
222627
Issue Date: 10/19/2016

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4722293186.000	954 OLD MOUNTAIN ROAD, STATESVILLE, NC 28677	IREDELL COUNTY

Owner Information	Applicant Information
Owner: FOX JOY W	Applicant: GALLYON, J MATTHEW
Address: 960 OLD MOUNTAIN ROAD STATESVILLE, NC 28677	Address: 960 OLD MOUNTAIN ROAD STATESVILLE, NC 28687
Phone:	Phone: 704-500-6174

Use Requested	Zone Code
SFD	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
10.055	35.00	35.00	15.00	15.00	NOT	X

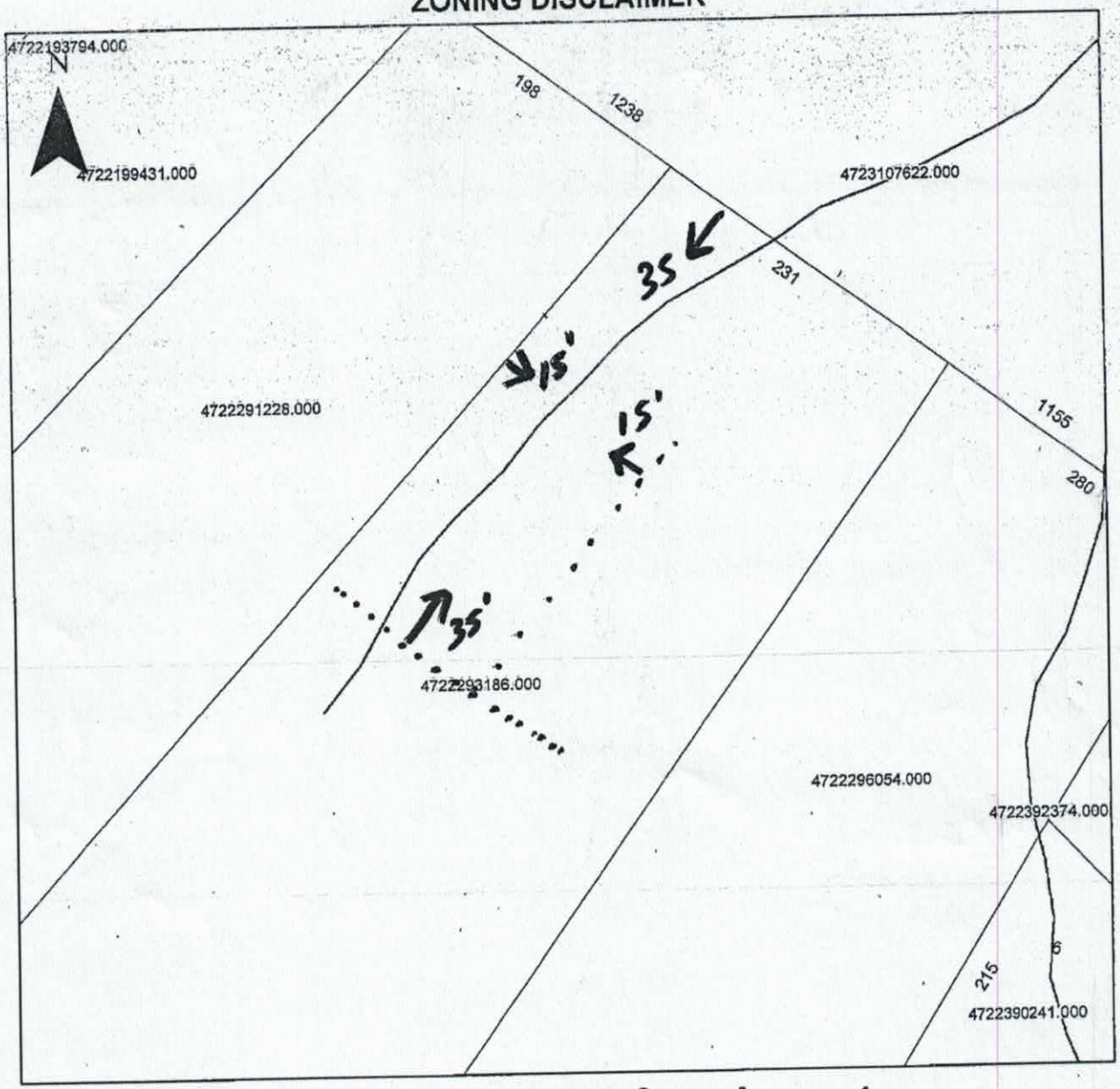
Remarks:

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	83626	TOTAL FEES:	$ 77.25

ZONING DISCLAIMER



Property Address 954 Old Mountain Rd

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.

Matthew Dalton
Applicant

10-19-16
Date