ICHD - ENVIRONMENTAL HEALTH DIVISION

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

BLDR-2022-2195

PERMIT # RELAY-2023-22056

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

PIN # 4722-37-8474

APPLICANT / OWNER: Helmsman Homes, LLC | APPLICANT ADDRESS: 116 Gasoline Alley Suite 105, Mooresville, NC 28117

SITE ADDRESS: 845 OLD MOUNTAIN RD, STATESVILLE, NC 28677 | PHONE: 7042391492 | ALT. PHONE: 7043636038

SITE DIRECTIONS: N NC21-> L Old Mtn Rd -> lot on L just before Orville | SAP CONTROLLED: YES ☑ NO ☐

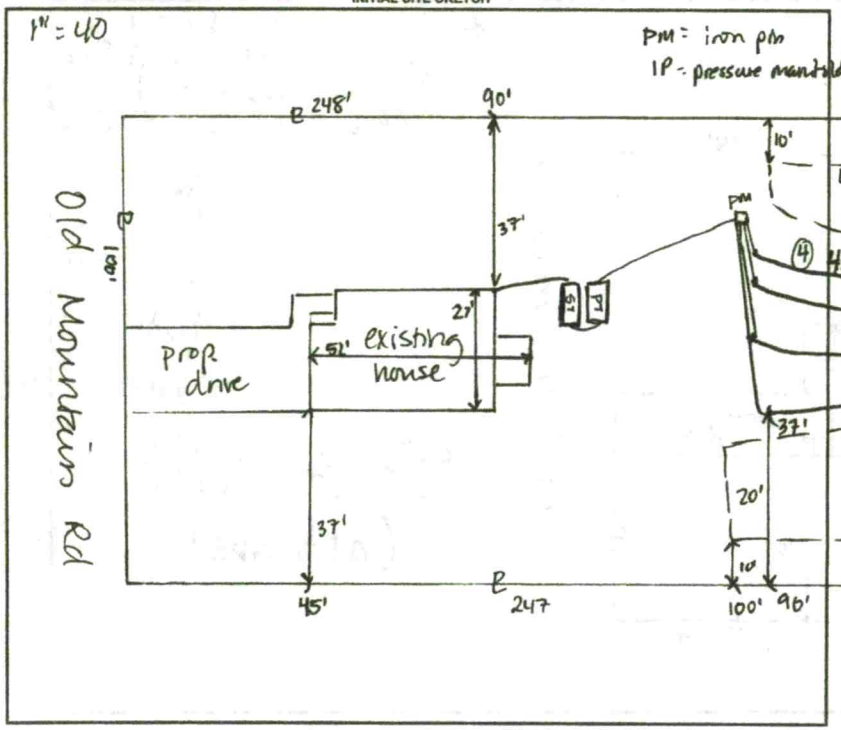
SUBDIVISION: AF Troutman | SECTION: N/A | LOT #: 75 | LOT AREA: 0.568 | DESIGN FLOW: 360 | L.T.A.R.: 0.3

Septic Tank: 1000 (gal)	STB:	Date:	☒ New System ☐ Repair ☐ Expansion	System Type: III	☑ Residence	No. Bedrooms: 3	Water Supply: Municipal Water
Pump Tank: 1000 (gal)	PT:	Date:	System Description: 25% Reduction - PM		☐ Business	No. Persons: 6	
Pump Make:	Model:	Serial #:	Repair System Description: Partial - 50% Reduction Plat 1959		☐ Other	No. Employees:	
# Nitrification Fields: 1	# Lines: 4	Linear Ft.: 300	Maintenance Agreement Required: ☐ YES ☑ NO		☑ Slab	☐ Crawl Space	
Trench Width: 36	Trench Bottom Depth (Low side): 32		Gravel Depth: 0	☐ GRAVITY ☑ PRESSURE	☐ Basement w/ Plumbing	☐ Basement w/o Plumbing	

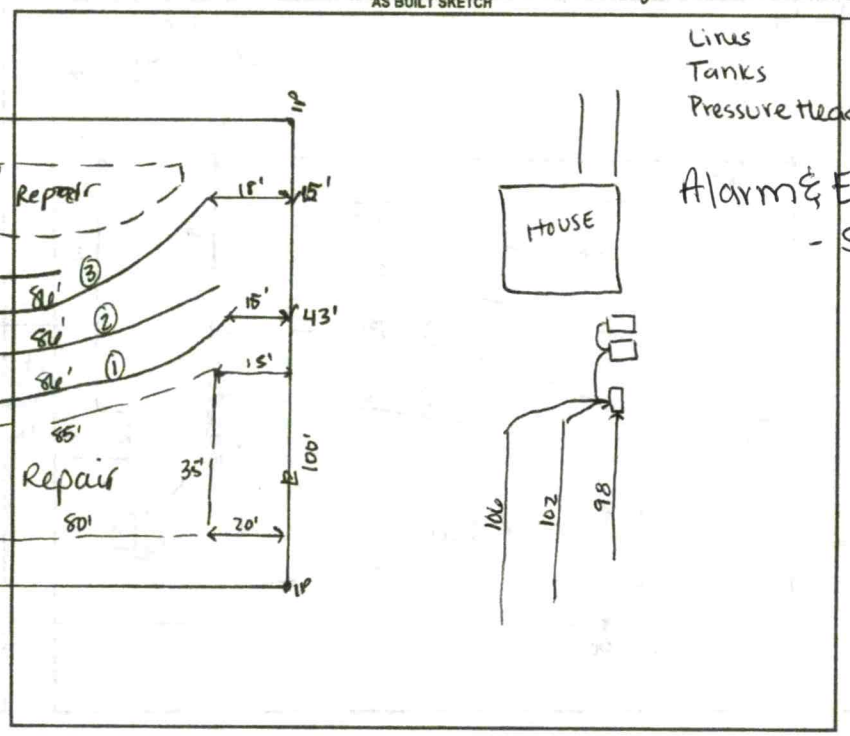
Comments / Conditions: Do not grade any further in drain field area. Install on contour. Pressure manifold: 2" supply, 2' pressure head. L1, L2, L3 = 3/4" SCH 80 tap, L4 = 1/2" SCH 80 Dose: 136.5 Flow: 35.78 gpm Run time: 3.8 min Drawdown: 6.5"

Do not exceed 36" max trench bottom, divert all drainage

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. 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: | Date: | Installed By: Kevin Kirkpatrick

IMPROVEMENT PERMIT by: D. Wiekberg | Date: 5/5/23 | OPERATION PERMIT by: Sydney Holland | Date: 7/31/23

AUTHORIZATION TO CONSTRUCT by: D. Wiekberg | Date: 5/5/23 | Existing System Inspected By: | Date:

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 BETWEEN 8am-9am the day the inspection is needed.

BLDR - 2023-16239

ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # RELAY-2023-22054

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

PIN # 4722-37-9358

APPLICANT / OWNER: Helmsman Homes, LLC | APPLICANT ADDRESS: 116 Gasoline Alley Suite 105, Mooresville, NC 28117

SITE ADDRESS: 841 OLD MOUNTAIN RD, STATESVILLE, NC 28677 | PHONE: 7042391492 | ALT. PHONE: 7043636038

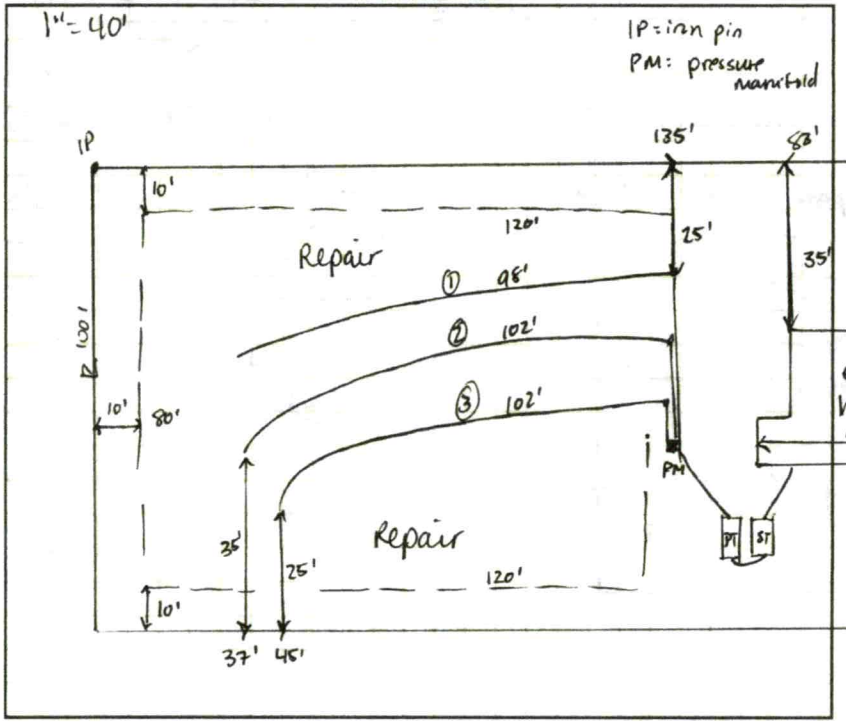
SITE DIRECTIONS: N NC21-> L Old Mtn Rd -> lot on L just before Orville | SAP CONTROLLED: YES ☑ NO ☐

SUBDIVISION: AF Troutman | SECTION: N/A | LOT #: 76 | LOT AREA: 0.57 | DESIGN FLOW: 360 | L.T.A.R.: 0.3

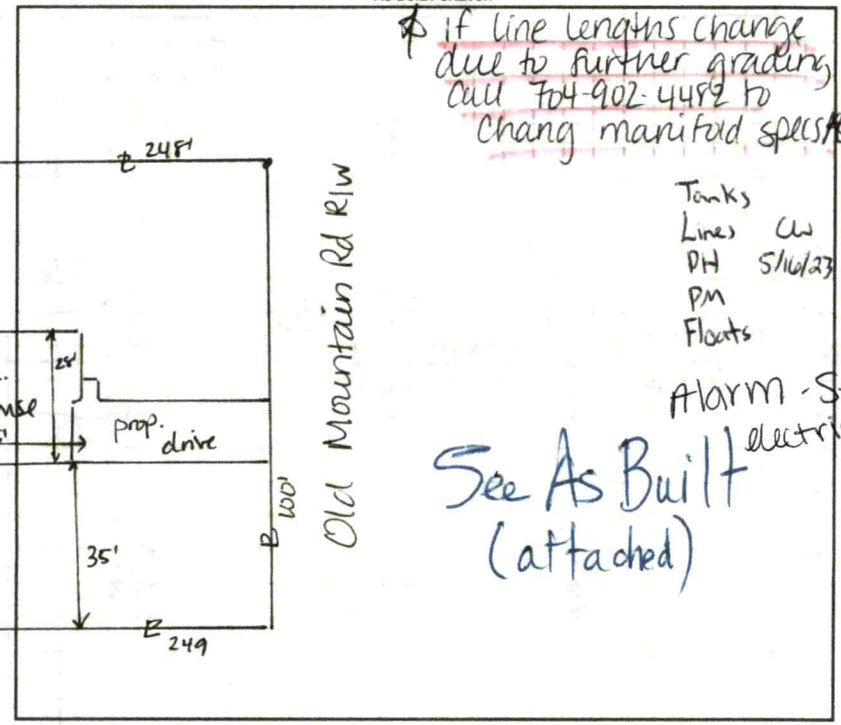
Septic Tank: 1000 (gal)	STB: 760	Date: 3/18/23	☐ New System ☐ Repair ☐ Expansion	System Type: III	☑ Residence	No. Bedrooms: 3	Water Supply: Other Public Water
Pump Tank: 1000 (gal)	PT: 303	Date: 3/27/23	System Description: 25% Reduction - PM		☐ Business	No. Persons: 6	
Pump Make:	Model: Liberty	Serial #:	Repair System Description: Partial 50% Reduction - plat 1959		☐ Other	No. Employees: 6	
# Nitrification Fields: 1	# Lines: 3	Linear Ft.: 302	Maintenance Agreement Required: ☐ YES ☑ NO		☑ Slab	☐ Crawl Space	
Trench Width: 36	Trench Bottom Depth (Low side): 34		Gravel Depth: 0	☐ GRAVITY ☑ PRESSURE	☐ Basement w/ Plumbing	☐ Basement w/o Plumbing	

Comments / Conditions: Do not grade any further in drain field area. Install on contour. Pressure manifold: 2" supply, 2' pressure head. L1, L2, L3 = 1/2" SCH 40 tap each line Dose: 137.4 Flow: 21.33 gpm Run time: 6.4 min Drawdown: 6.5" Do not exceed 36" max trench bottom, divert all drainage

INITIAL SITE SKETCH



AS BUILT SKETCH



If line lengths change due to further grading, call 704-902-4482 to change manifold specs

Tanks
Lines CW
PH 5/16/23
PM
Floats

Alarm - SH 7/31 electrical

See As Built (attached)

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: | Date: | Installed By: Rowan Septic

IMPROVEMENT PERMIT by: D. Mebey | Date: 5/5/23 | OPERATION PERMIT by: Sydney Holland | Date: 7/31/23

AUTHORIZATION TO CONSTRUCT by: D. Mebey | Date: 5/5/23 | Existing System Inspected By: | Date:

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 BETWEEN 8am-9am the day the inspection is needed.

ICHD - ENVIRONMENTAL HEALTH DIVISION

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

BLDR- 2022- 2195

PERMIT # RELAY-2023-22056

PIN # 4722-37-8474

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

APPLICANT / OWNER: Helmsman Homes, LLC APPLICANT ADDRESS: 116 Gasoline Alley Suite 105, Mooresville, NC 28117

SITE ADDRESS: 845 OLD MOUNTAIN RD, STATESVILLE, NC 28677 PHONE: 7042391492 ALT. PHONE: 7043636038

SITE DIRECTIONS: N NC21-> L Old Mtn Rd -> lot on L just before Orville SAP CONTROLLED: YES ☑ NO ☐

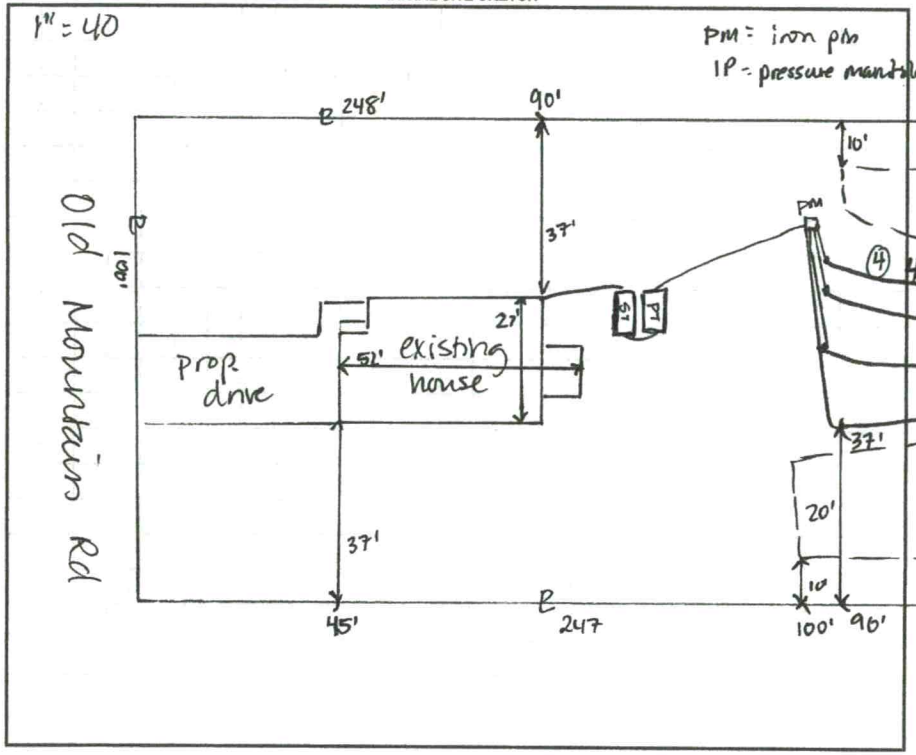
SUBDIVISION: AF Troutman SECTION: N/A LOT #: 75 LOT AREA: 0.568 DESIGN FLOW: 360 L.T.A.R.: 0.3

Septic Tank: 1000 (gal)	STB:	Date:	☒ New System ☐ Repair ☐ Expansion	System Type: III	☑ Residence	No. Bedrooms: 3	Water Supply: Municipal Water
Pump Tank: 1000 (gal)	PT:	Date:	System Description: 25% Reduction - PM		☐ Business	No. Persons: 6	
Pump Make:	Model:	Serial #:	Repair System Description: Partial - 50% Reduction Plat 1959		☐ Other	No. Employees:	
# Nitrification Fields: 1	# Lines: 4	Linear Ft.: 300	Maintenance Agreement Required: ☐ YES ☑ NO		☑ Slab	☐ Crawl Space	
Trench Width: 36	Trench Bottom Depth (Low side): 32		Gravel Depth: 0	☐ GRAVITY ☑ PRESSURE	☐ Basement w/ Plumbing	☐ Basement w/o Plumbing	

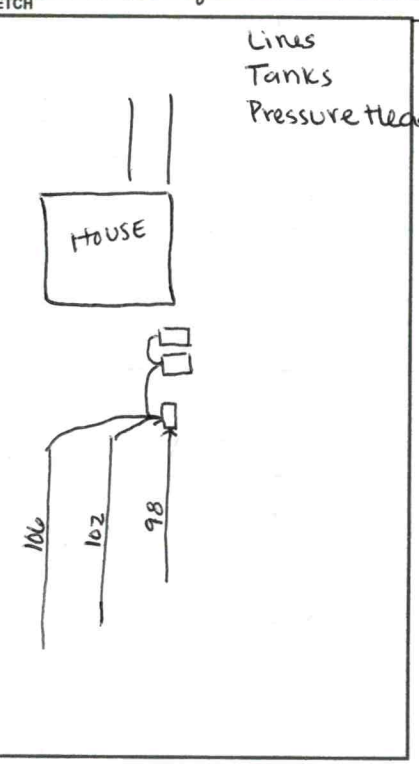
Comments / Conditions: Do not grade any further in drain field area. Install on contour. Pressure manifold: 2" supply, 2' pressure head. L1, L2, L3 = 3/4" SCH 80 tap, L4 = 1/2" SCH 80 Dose: 136.5 Flow: 35.78 gpm Run time: 3.8 min Drawdown: 6.5"

Do not exceed 36" max trench bottom, divert all drainage

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. 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: Date:

IMPROVEMENT PERMIT by: D. Wickers Date: 5/5/23

AUTHORIZATION TO CONSTRUCT by: D. Wickers Date: 5/5/23

Installed By: Kevin Kirkpatrick

OPERATION PERMIT by: Date:

Existing System Inspected By: Date:

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 BETWEEN 8am-9am the day the inspection is needed.

BLDR-2022-2195

ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # RELAY-2023-22056

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

PIN # 4722-37-8474

APPLICANT / OWNER: Helmsman Homes, LLC | APPLICANT ADDRESS: 116 Gasoline Alley Suite 105, Mooresville, NC 28117

SITE ADDRESS: 845 OLD MOUNTAIN RD, STATESVILLE, NC 28677 | PHONE: 7042391492 | ALT. PHONE: 7043636038

SITE DIRECTIONS: N NC21-> L Old Mtn Rd -> lot on L just before Orville | SAP CONTROLLED: YES ☑ NO ☐

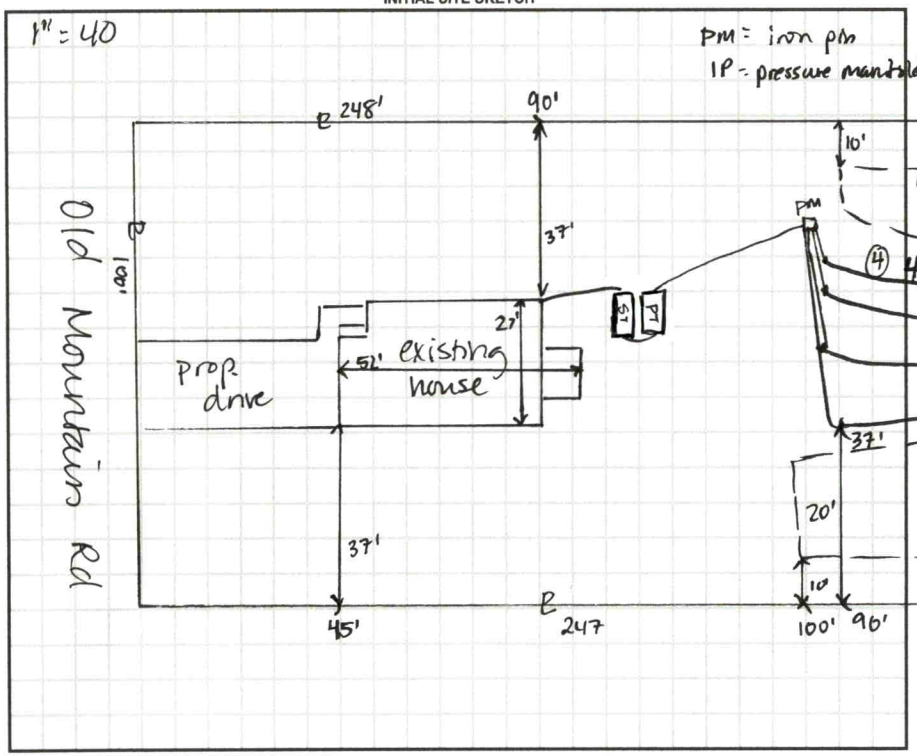
SUBDIVISION: AF Troutman | SECTION: N/A | LOT #: 75 | LOT AREA: 0.568 | DESIGN FLOW: 360 | L.T.A.R.: 0.3

Septic Tank: 1000 (gal)	STB:	Date:	☒ New System ☐ Repair ☐ Expansion	System Type: III	☑ Residence	No. Bedrooms: 3	Water Supply: Municipal Water
Pump Tank: 1000 (gal)	PT:	Date:	System Description: 25% Reduction - PM		☐ Business	No. Persons: 6	
Pump Make:	Model:	Serial #:	Repair System Description: Partial - 50% Reduction Plat 1959		☐ Other	No. Employees:	
# Nitrification Fields: 1	# Lines: 4	Linear Ft.: 300	Maintenance Agreement Required: ☐ YES ☑ NO		☑ Slab	☐ Crawl Space	
Trench Width: 36	Trench Bottom Depth (Low side): 32		Gravel Depth: 0	☐ GRAVITY ☑ PRESSURE	☐ Basement w/ Plumbing	☐ Basement w/o Plumbing	

Comments / Conditions: Do not grade any further in drain field area. Install on contour. Pressure manifold: 2" supply, 2' pressure head. L1, L2, L3 = 3/4" SCH 80 tap, L4 = 1/2" SCH 80 Dose: 136.5 Flow: 35.78 gpm Run time: 3.8 min Drawdown: 6.5"

Do not exceed 36" max trench bottom, divert all drainage

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. CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

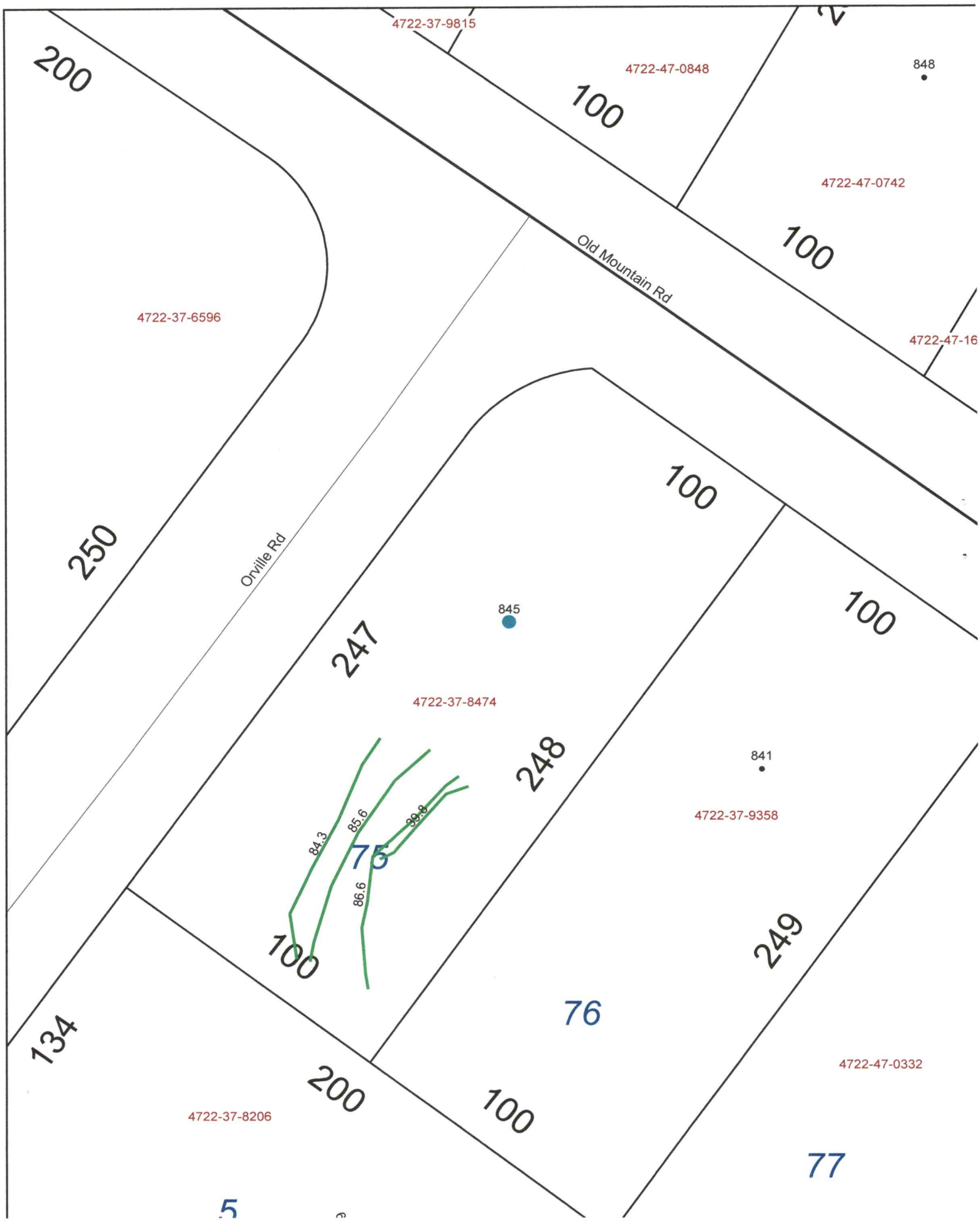
☐ IMPROVEMENT PERMIT with plat valid without expiration. ☑ IMPROVEMENT PERMIT with site plan valid for 60 mos. ☑ AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

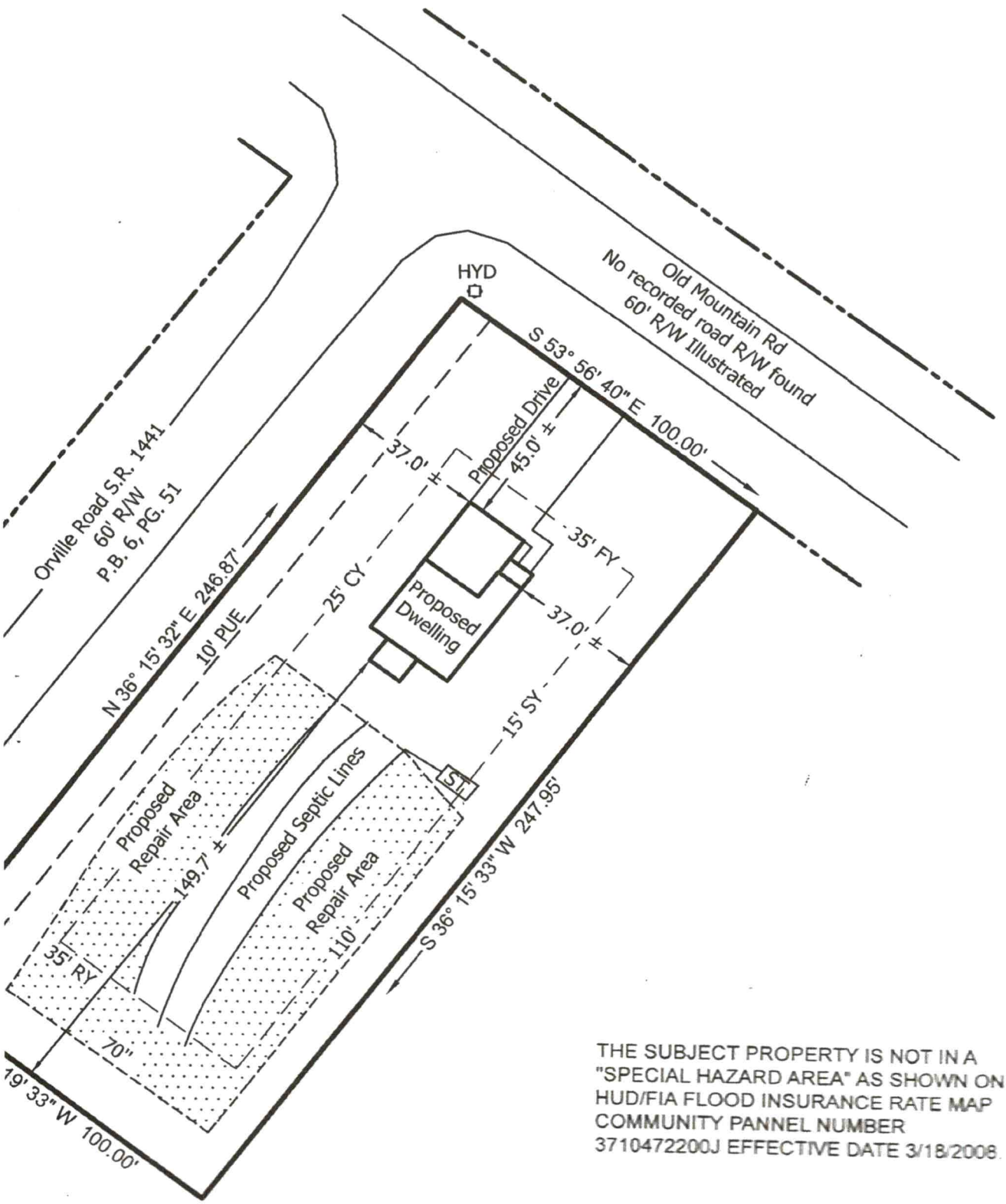
Owner / Applicant Signature: _____ Date: _____ Installed By: _____

IMPROVEMENT PERMIT by: D. Wiebers Date: 5/5/23 OPERATION PERMIT by: _____ Date: _____

AUTHORIZATION TO CONSTRUCT by: D. Wiebers Date: 5/5/23 Existing System Inspected By: _____ Date: _____

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 BETWEEN 8am-9am the day the inspection is needed.


4722-37-9815
4722-47-0848
848
200
100
4722-47-0742
100
Old Mountain Rd
4722-37-6596
4722-47-16
250
Orville Rd
100
845
247
100
4722-37-8474
248
841
4722-37-9358
84.3
85.6
99.8
75
86.6
100
249
134
76
4722-47-0332
200
100
4722-37-8206
77
5



THE SUBJECT PROPERTY IS NOT IN A "SPECIAL HAZARD AREA" AS SHOWN ON HUD/FIA FLOOD INSURANCE RATE MAP COMMUNITY PANNEL NUMBER 3710472200J EFFECTIVE DATE 3/18/2008.

PERMIT SNAPSHOT REPORT RELAY-2023-22056 FOR IREDELL COUNTY

Permit Type: EH Re-layout
Work Class: EH Intermediate
Status: In Progress
Valuation: $0.00
Project:
District: Iredell County
Square Feet: 0.00
Assigned To: Wieberg, Danielle
App Date: 04/13/2023
Exp Date: NOT AVAILABLE
Completed: NOT COMPLETED
Approval Expire Date:
Description: Applying for re-layout for a gravity system to a pump system

Parcel: 4722378474.000 Main
Address: 845 Old Mountain Rd Main
Statesville, NC 28677
Zone: RA(Residential Agricultural District)

Applicant/Authorized Agent
HELMSMAN HOMES, LLC
Staci Ivester
PO Box 3965
MOORESVILLE, NC 28117
Business: (980) 500-1251
Mobile: (704) 363-6038

Property Owner
John Morrow
116 Gasoline Alley Suite 105
Mooresville, NC 28117
Business: (980) 500-1251
Mobile: (704) 239-1492

Applicant/Authorized Agent
John Morrow
116 Gasoline Alley Suite 105
Mooresville, NC 28117
Business: (980) 500-1251
Mobile: (704) 239-1492

Permit Custom Fields

How is your site plan being submitted	Survey Plat	Does the site contain any jurisdictional wetlands	No	Non-domestic Sewage Generated	No
Other Public Agency	No	All proposed structure dimensions	26' x 53' 4"	What are the proposed structures	New Single Family Residence
If other Addition/Structure, please explain		Maximum Number of Bedrooms	3	Number of Occupants	6
Foundation Type	Concrete Slab Foundation	Residential/Business/Other	Residential	Number of Employees	6
Total number of seats	6	Water Supply	Other Public Water	Desired Septic System Type	No Preference
If other septic system type, please explain		Additional Unique Setbacks Apply	No		

Attachment File Name	Added On	Added By	Attachment Group	Notes
Signature_Staci_Ivester_4/13/2023.jpg	04/13/2023 14:43	Ivester, Staci		Uploaded via CSS
Old Monutain Rd - redell County AUTHORIZE AN OWNER_v1.pdf	04/14/2023 12:04	Nebel, Barbara	Available Online	Authorize to Act as Agent
Old Mtn Rd, 845 - Septic Permit_v1.pdf	04/14/2023 12:04	Nebel, Barbara	Available Online	Site Plan

Invoice No.	Fee	Fee Amount	Amount Paid
INV-00012306	Comprehensive Gravity System Re-layout	$320.00	$320.00
	Total for Invoice INV-00012306	**$320.00**	**$320.00**
	Grand Total for Permit	**$320.00**	**$320.00**

Workflow Step / Action Name	Action Type	Start Date	End Date
Application Completeness Check v.1		04/14/2023 12:04	04/14/2023 12:05
Confirm application complete v.1	Generic Action		04/14/2023 12:05
Fees v.1		04/14/2023 12:05	04/17/2023 11:05
Issue Invoice v.1	Generic Action		04/14/2023 12:05
Fees Paid v.1	Generic Action		04/17/2023 11:05
~~**Zoning Review v.1**~~			04/14/2023 12:05
~~Floodplain Admin Overview v.1~~	Task		04/14/2023 12:05
~~Issue Invoice v.1~~	Generic Action		04/14/2023 12:05
~~Fees Paid v.1~~	Generic Action		04/14/2023 12:05
Lot Readiness Verification v.1			
OSWP Septic Preliminary Site Visit v.1	Inspection		

PERMIT SNAPSHOT REPORT (RELAY-2023-22056)

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

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 329986

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

PIN # 4722-37-8474

APPLICANT/OWNER: Helmsman Homes APPLICANT ADDRESS: 136 Raceway Ste 7 Mooresville NC 28117

SITE ADDRESS: 845 Old Mountain Rd, Statesville NC PHONE: 704-208-4257 ALT. PHONE 704-996-6330 (Paul)

SITE DIRECTIONS: (N) NC 21 → (L) Old Mtn Rd → lot on (L) just before Orville SAP CONTROLLED: [X] YES [ ] NO

SUBDIVISION: AF Troutman SECTION: LOT # 75 LOT AREA: 0.568 ac DESIGN FLOW: 360 L.T.A.R.: 0.3

Septic Tank	1000	(gal)	STB	Date	[X] New System [ ] Repair [ ] Expansion System Type: I (II) III IV V VI	[X] Residence	No. Bedrooms	3	Water Supply	
Pump Tank		(gal)	PT	Date	System Description: 25% Reduction	[ ] Business	No. Persons	6	[ ] Private	
Pump Make		Model		Serial #	Repair System Description: Partial - 50% Red	[ ] Other	No. Employees		[X] Public	
# Nitrification Fields	1	# Lines	3	Linear Ft: 302'	Maintenance Agreement Required: [ ] YES [X] NO	[X] Slab	[ ] Crawl Space		[ ] Community	
Trench Width	36"	Trench Bottom Depth(Low side)	32"	Gravel Depth N/A	[X] GRAVITY [ ] PRESSURE	[ ] Basement w/plumbing			[ ] Basement w/o plumbing	

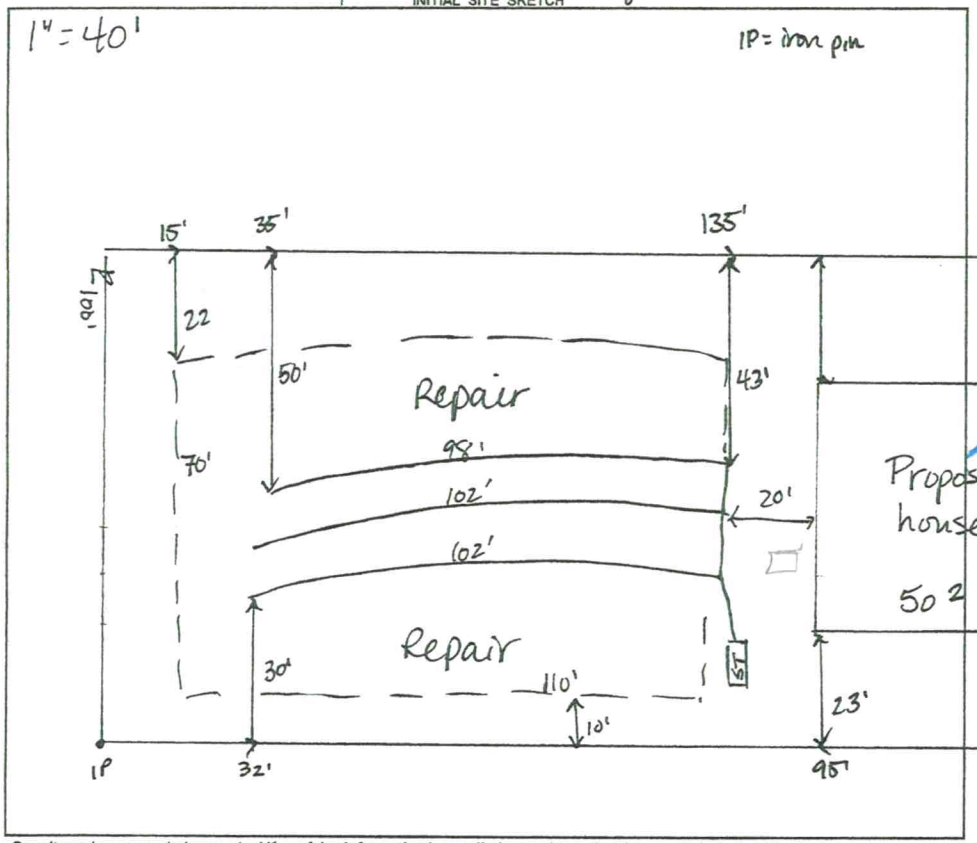
Comments / Conditions: Do not pave, grade, drive, park, or bury utilities in drainfield. Install on contour, do not exceed 36" TB use serial distribution, divert all drainage

INITIAL SITE SKETCH

If lot is graded, cut, or built up improperly for slab, system may become a pump

platted 1959 Set tank to achieve fall

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.

42
84
84
86

COPY

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.* [X] **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* [X] **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Maureen Reel Date: 8/11/22 Installed by:

IMPROVEMENT PERMIT by: D. Mabery Date: 8/1/22 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: D. Mabery Date: 8/1/22 Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION CALL 704-664-3703

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

Lot 75

Sheet 1 of 1
PROPERTY ID #: 4722375474
COUNTY: Iredell

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

OWNER: David Mouse Trust
APPLICATION DATE 6/24/22
ADDRESS: 208 Old Airport Rd Statesville
DATE EVALUATED: 7/25/22
PROPOSED FACILITY: SFR
PROPOSED DESIGN FLOW (.1949): 3100
PROPERTY SIZE: 0.568ac
LOCATION OF SITE: 845 Old Mtn Rd, Statesville Lot 75
PROPERTY RECORDED: 1969
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	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	5%	0-8	SCL	SSSP-FR-	Discontinuous band 24-common Sap incl 20-38	38"	D	PM	PS
		8-20	RC-SBK	SSSP-FI/FR-SSVP					
		20-38	CL/SCL-WSBK	SSSP-FR					
		38-60	SL-MSAP						0.3
			SCL/CL inc						
2	5%	0-10	SCL-SBK	SSSP-FR-SSVP	Sap incl Common Bands	60"	N/A	N/A	PS
		10-25	C-SBK	↓					
		25-47	CL/SCL-SBK						0.3
		47-60	SCL-WSBK						
3	8%	0-8	SCL-SBK	SSSP-FR-SSVP	(N) WR @ 44-discontinuous Sew WR inc throughout	55"	N/A	N/A	PS
		8-30	C-SBK	↓					
		30-55	CL/SCL-WSBK						0.3
4	8%	0-10	SCL-FRBK	SSSP-FR-SSVP	36-48 - Discon WR band	62"	N/A	N/A	PS
		10-31	C-SBK	↓					
		31-62	CL-WSBK						0.3

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	300'	Limited
System Type(s)	25%	50%
Site LTAR	0.3	0.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: D Wheeler
OTHER(S) PRESENT: P. Pennington 15' off back

COMMENTS:

Updated February 2014

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.

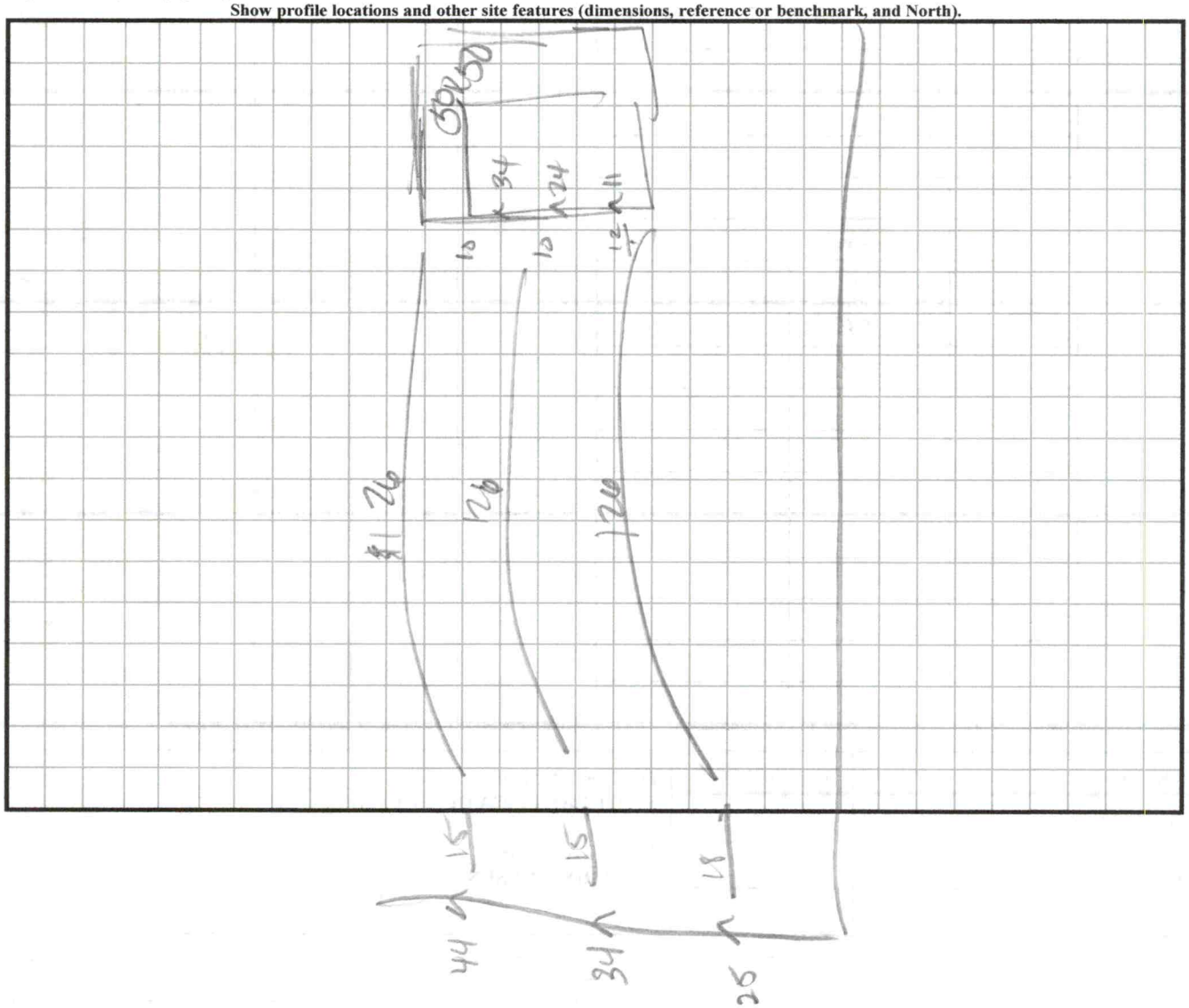
NOTES

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).



call Paul Penninger for site visit 704.996.6330 RECEIVED JUN 2 4 2022

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM AP-329986 $500.00

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) Septic Improvement Permit (X) Authorization to Construct ( ) Existing System Inspection ( ) Septic System Repair

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.

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 an (X) beside whichever is submitted if applicable (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: Helmsman Homes Address: 236 Raceway, Suite 7, Mooresville Zip: 28117
Applicant Email: ksimmerson@helmsmanhomes.com Phone: 704.208.4251 Alt. Phone:
Owner Name: DAVID T. MOOSE REVOC TR Address: 208 OLD AIRPORT RD, STATESVILLE, NC Zip: 28677
Owner Email: douglasajohnson1@gmail.com Phone: 704.400.5066 agent Alt. Phone:

Property Information:

Street Address: 845 Old Mountain Rd, Statesville, NC
Subdivision Name: A.F. Troutman Estates Section/Phase: Lot Number: 75
Driving Directions: South on Buffalo Shoals Rd, Left onto Old Mt Rd, lot on Rt just past Orville Rd

Site Development Information: *(check or complete ALL that apply*

(X) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem:
Maximum Number of Bedrooms: 3
Maximum Number of Occupants: 6
( ) Swimming Pool
( ) Other Addition/Structure:
Non-Residential Site Development: Type of Business:
Square Footage of Building: Max. Number of Employees: Max. Number of Seats/Beds/Other:

CHECK FOUNDATION TYPE
( ) Crawl Space Foundation
(X) Concrete Slab Foundation
(X) Basement with Plumbing
( ) Basement without Plumbing

Water Supply: ( ) Replacement Well – Reason:
( ) Multi-connection Well Number of Houses: Number of Persons:
( ) New Well ( ) Existing Well ( ) Community Well (X) City Water ( ) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed:
(X) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other:

Please answer the following to the best of your ability:
( ) Yes (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (X) 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.

Signature: 6.23.22
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

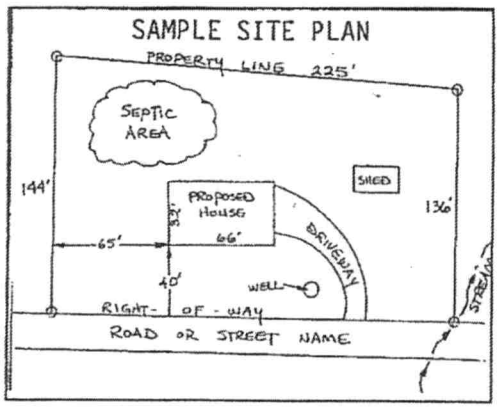
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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 OR WELL 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
- (X) Front and side setbacks from property line
- (X) Preferred driveway location
- ( ) Preferred well location N/A
- ( ) Preferred septic system location
- (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

USE THIS SPACE TO DRAW YOUR SITE PLAN

Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site

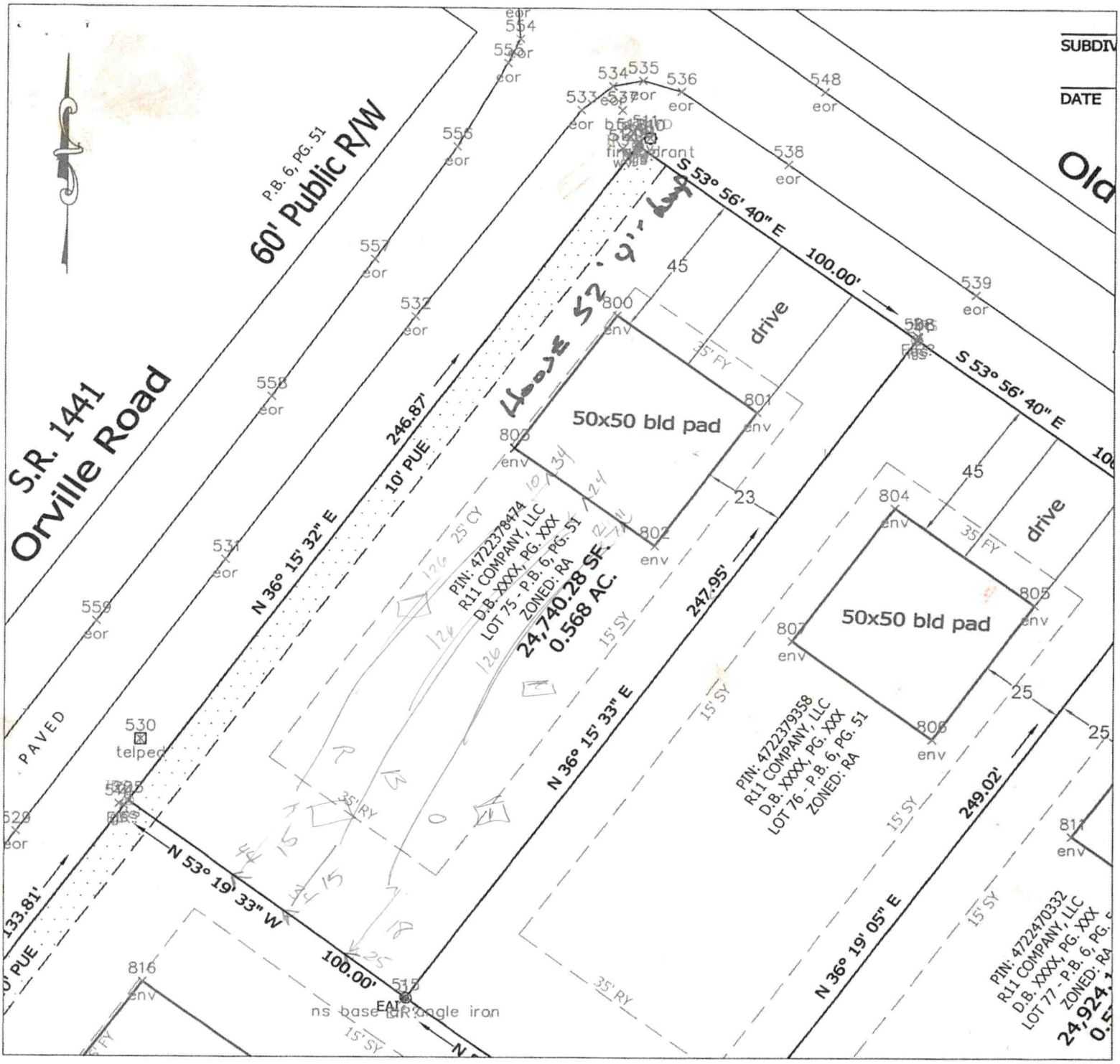
See attached site plan.

Signature: _____

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

6.23.22

DATE



Helmsman Homes - 845 Old Mountain Rd - Lot 75 - Septic Site Plan 6.22.23

Base site plan and lot/house pad staking by Jordan Grant & Associates, PLLC. Septic system must be approved and permitted by ICHD.

GRAPHIC SCALE

0 20 40 80

1 inch = 40 feet

NORTH CAROLINA
IREDELL COUNTY

I, L.B. CRICK, AFTER BEING DULY SWORN SAY THAT HE IS A REGISTERED SURVEYOR AND THAT THIS MAP OF A.F. TROUTMAN ESTATE IS IN ALL RESPECTS CORRECT AND WAS PREPARED BY ME FROM AN ACTUAL SURVEY MADE ON THE 4TH DAY OF JUNE 1959

L.B. Crick
L.B. CRICK R.L.S.

R.F. Nesbit
ASST. CLERK SUPERIOR COURT

NORTH CAROLINA
IREDELL COUNTY

THE FOREGOING CERTIFICATE BEING ON THE CORRECTNESS OF THE ATTACHED MAP OR PLAT IS ADJUDGED TO BE IN DUE FORM AND ACCORDING TO LAW THEREFORE LET SAID MAP TOGETHER WITH THIS CERTIFICATE BE REGISTERED

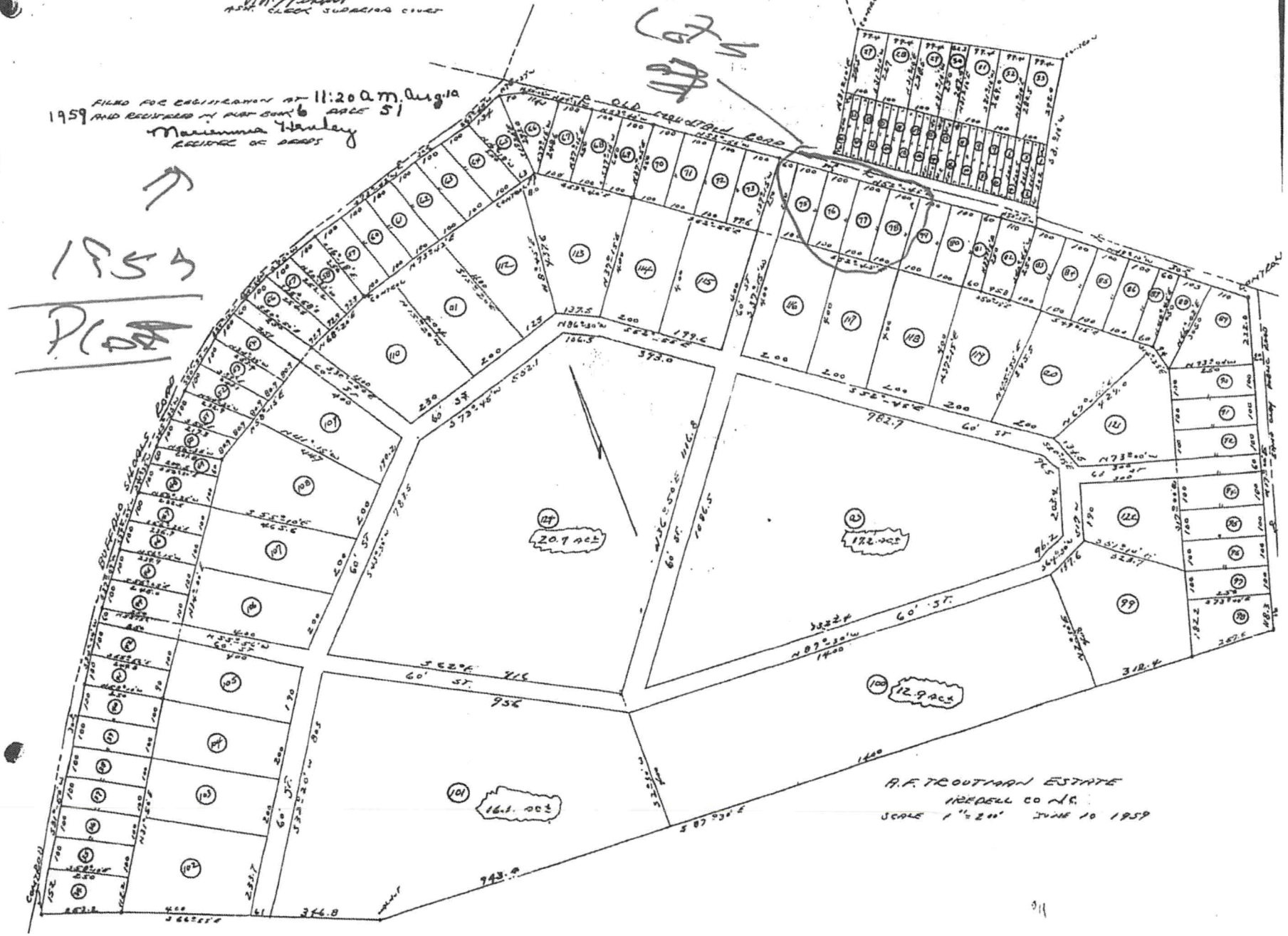
WITNESS MY HAND THIS THE 10th DAY OF JUNE, 1959

R.F. Nesbit
ASST. CLERK SUPERIOR COURT

FILED FOR CALIFORNIA AT 11:20 a.m. Aug. 10
1959 AND RECORDED IN PLAT BOOK 6 PAGE 51
Marianna Hanley
REGISTER OF DEEDS

1953

Plat





From: Paul Penninger <pgpenninger@gmail.com>
Sent: Wednesday, June 1, 2022 7:42 AM
To: Richard Hoffman <richard.hoffman@co.iredell.nc.us>
Subject: Lots 75-78 AF Troutman Estate - Orville and Old Mt Road

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

(Check and sign only ONE of the options below)

1. *** APPLICANT AND OWNER ARE THE SAME. *** (*Sign here*) _____

Applications for permits require the "signature of the owner or owner's legal representative" (15A NCAC 18A .1937). If the owner does not sign the application himself or herself, they can submit any one of the following documents to designate their legal representative: *Power of Attorney; Real Estate Contract; Estate executor; Bankruptcy trustee; Court ordered guardianship* In the absence of the above documentation, the property owner may provide the local health department with documentation that designates a legal representative. A property owner may:
Complete this form to document his or her legal representative, or provide his or her own form that contains the information in this form. If there are multiple property owners, then all property owners must sign the form that designates a legal representative.
By signing a form that designates a legal representative for purposes of 15A NCAC 18A .1937, the property owner authorizes that representative to act on their behalf in matters pertaining to the application and permitting process, including signing or receiving any application, document or permit. The owner retains full responsibility to meet all permit conditions specified by the local health department.

2. I, DAVID T. MOOSE REVOC TR, am the legal owner(s) of the property located at Lot 75-76 A.P. Troutman Estate, Old Mt. Road, identified as

PIN (Parcel Identification Number) 4722378474.000; 4722379358.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Paul Penninger/Penninger Soil Consulting Eric Wood/Helmsman Homes, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

- Application for Improvement Permit (IP) / Authorization to Construct (AC)
- Improvement Permit (IP) / Authorization to Construct (AC)
- Application for soil-site evaluation (new/repair)
- Application/permit for private drinking water well/well abandonment
- Application for Compliance Inspection

I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

David Thomas Moose
Signature of Owner(s)

6-16-22
Date

Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

ENVIRONMENTAL HEALTH REQUIREMENTS for SEPTIC and WELL PERMITS

The following items must be completed *PRIOR* to the *SUBMITTAL* of any Environmental Health Application. Incomplete applications will be returned to the applicant and cannot be processed or placed on the work list.

*** Initial all lines below to indicate you have submitted each form and completed every site requirement ****

Complete all Environmental Health forms:

___ Application
___ Site Plan with dimensions of proposed structure, addition, pool etc.
___ Documentation to Authorize Owner Agent (if the property owner is not the applicant)
___ Copy of Zoning Permit when applicable
___ Sign this sheet after you have completed all items

Lot must be cleared of heavy undergrowth. In order to evaluate the lot, the footprint of the proposed structure must be visible. Adequate area for the septic drain field and repair area must be sufficiently cleared of heavy undergrowth, with **50 feet of visibility** in all directions. Inspectors must be able to evaluate the property, shoot laser level elevations, layout the drain field, do soils work, etc. **If the lot is not cleared sufficiently, then a $100 site revisit fee will be charged and the evaluation will be put on HOLD until the requirement is met.**

Clearly mark all property corners by locating existing iron or concrete markers. Flag all property lines every 25 feet if adjacent corners are not visible when standing on any given corner. Property lines must be flagged by a licensed NC surveyor & easily identified **prior to application submittal** (exception may apply for septic repair evaluations only).
'Mow lines' and/or fence lines do NOT constitute marked lines. **If the property lines are not properly marked when the lot is ready to be evaluated, then the application will be put on HOLD and a $100 site re-visit fee charged.**

Stake or flag the footprint of the proposed structure, addition, pool etc. to match the site plan submitted. The proposed structure, etc. **must be staked** out on the property as per the site plan.

If an **Authorization to Construct (AC) is desired**, submit a recorded copy of the plat for newly created or subdivided lot(s) and a LEGIBLE copy of the basic floor plan no larger than 8 ½" x 14" for each floor of the structure including decks, porches, etc. **The overall dimensions must be clearly noted & the rooms labeled.**

Any site not meeting the above requirements when staff arrives for the evaluation will result in a $100 site revisit fee being charged and the request being placed on HOLD. This will delay the processing of the application.
Once work by Environmental Health staff begins, the up-front fees paid toward securing any health department permit are non-refundable. Refunds for work not started, due to a customer changing their mind or plans, are subject to an administrative fee of $50 to defray a portion of the costs of processing the refund.

Backhoe pits are required for all applications that require a soils evaluation.
DO NOT DIG PITS UNTIL THE EH SPECIALIST HAS AUTHORIZED AND SCHEDULED YOUR EVALUATION TIME.

- All utilities shall be marked before pits are dug. Call NC 811 for this service.
- **The applicant/agent is responsible for securing these services**
- **Backhoe pits are to be dug at the locations and depths determined by the Environmental Health Specialist or a NC Licensed Soil Scientist. A minimum of four pits must be dug.**
- **The EH specialist will contact you when your application is ready to be processed for pit scheduling.**
- **Your backhoe operator must be on site during the EH Specialist's evaluation to prevent your operator from having to return to the property for additional work.**

By signing below I am acknowledging the above specifications have been met and the site is READY to be evaluated AND I understand the backhoe pit requirement and will secure those services (if applicable).

Signature _____ Date 6.23.22

Questions? Contact the Environmental Health Offices below:

Statesville Office
349 North Center Street (2nd Floor Building Standards)
Statesville, NC 28677-4063
Phone: (704)878-5305 ext. 3456

Mooresville Office
610 East Center Avenue (2nd Floor Govt. Center South)
Mooresville, NC 28115-2548
Phone: (704)660-3625

IREDELL COUNTY · NC

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

APPLICATION NUMBER

329986
Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4722378474.000	845 OLD MOUNTAIN RD	Iredell County

Owner Information	Applicant Information
Name: MOOSE DAVID T REVOC TR	Name: HELMSMAN HOMES, LLC 236 RACEWAY DR STE 7
Address:	Address: PO BOX 3965 236 RACEWAY DR STE 7 MOORESVILLE, NC 28117
Phone:	Phone: (704)363-6038

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0	35	35	25	15	WSIV-PA Catawba/Lake Norman	NO

Remarks
SFD*ZD

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.

Signature of Owner/Contractor

Date: 06/23/2022

Permit Number	329986

TOTAL FEES:	$77.25

Department of Development Services
PLANNING DIVISION
PO BOX 788, STATESVILLE NC 28687-0788
349 N. Center Street / Building Standards Center
(704) 878-3113 / FAX (704)878-3171

Residential Zoning Permit Application

What are you building? (Please check)

Stick built ✓ Modular___ Duplex___ Singlewide___ Doublewide___ Pier___ Addition___ Bedroom addition___

Accessory dwelling (ie: M-I-L Suite, guest house)___ Accessory building (ie: garage, shed)___ Swimming pool___

Are there any other structures currently on the property such as dwellings, sheds, garages? (Please list type below)

No, Building house on vacant lot

Is there a septic tank on the property? Yes (No) If residence how many bedrooms? 3 and stories? 2

If an addition, please describe project: _____

Please list square footage of project (Pier, Addition, Accessory Dwelling, Accessory Building only): _____

Does the property have community water? Yes No If yes, please list who provides it: _____

Does the property have community sewer? Yes No If yes, please list who provides it: _____

Owner Information

Property Owner's Name DAVID T. MOOSE REVOC TR Phone # 704.400.5066 agent

Owner's Current Address 208 OLD AIRPORT RD, STATESVILLE, NC 28677

Property Information

Property Address 845 Old Mountain Rd, Statesville Parcel # 4722378474.000

Subdivision: A.F. Troutman Estates Lot 75 Lot:___ Zoning:___ Watershed: Y or N Flood Plain: Y or N Township:___

Directions to property (from a MAIN ROAD) _____

South on Buffalo Shoals Rd, Left onto Old Mt Rd, lot on Rt just past Orville Rd

Application Information

Applicant's Name or Company Helmsman Homes Applicant's Phone # 704.208.4251

Applicant's Address 236 Raceway, Suite 7, Mooresville, NC 28117

If Company, Representative's Name and Title Kelly Simmerson, manager

IN APPLYING FOR A ZONING PERMIT I CERTIFY THAT ALL INFORMATION ON THIS APPLICATION IS CORRECT AND THAT ALL WORK WILL COMPLY WITH IREDELL COUNTY ZONING REGULATIONS. THE IREDELL COUNTY ZONING DEPARTMENT WILL BE NOTIFIED OF ANY CHANGES THAT ARE MADE TO THIS PROJECT. I AM AWARE THAT THIS IS AN APPLICATION ONLY - NOT A PERMIT - AND DOES NOT CONSTITUTE APPROVAL OF THIS PROJECT. HOWEVER, IF THIS PROJECT IS APPROVED, THIS SIGNATURE IS VALID FOR ~~MY PERMIT~~

SIGNATURE OF APPLICANT _____ DATE 6.23.22

Paul Penninger

From: Richard Hoffman <richard.hoffman@co.iredell.nc.us>
Sent: Wednesday, June 1, 2022 9:32 AM
To: pgpenninger@gmail.com
Subject: FW: Lots 75-78 AF Troutman Estate - Orville and Old Mt Road
Attachments: Property Data Lot 75-78 AF Troutman Estates.pdf; Old Mountain Road and Orville Lots.pdf

Hey Paul

I address where the access is. I'm pretty sure DOT doesn't issue sf driveway permits so not sure they have a dog in the fight?

I just made them all off Old Mountain. You can certainly use these for soil evaluation. If you need an address off of Orville for the corner lot just let me know.

Thank you,

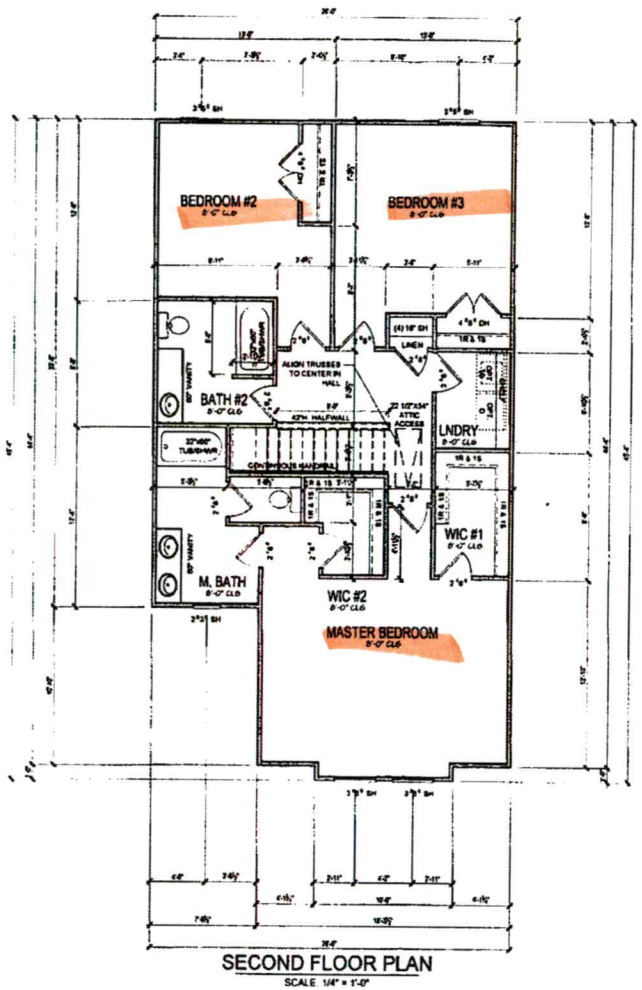
Rich A. Hoffman, MUP, AICP®, CZO
County Land Use Planner/Address Coordinator
Iredell County Planning & Development
349 N. Center St. Statesville, NC 28677
704-878-3118 x 3765

Acknowledgement Of Plans Submittal ONLY!

Mmenerer Date 8/11/22

Date 8/11/22

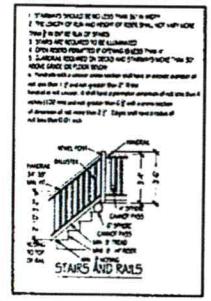
329986



SECOND FLOOR PLAN

SCALE: 1/4" = 1'-0"

SQUARE FOOTAGE	
FIRST FLOOR (HEATED)	708
SECOND FLOOR (HEATED)	1044
TOTAL (HEATED)	1752
GARAGE (UNHEATED)	300
FRONT PORCH	40



ELEVATION "A" - FARMHOUSE

EST. 2020

HELMSMAN HOMES

Township/County

Engineer

Stamp/seal

Project name/subname

FATHOM
1752 PLAN

HELMSMAN HOMES
256 RACEWAY DR
SUITE 2A
MOORESVILLE, NC 28117
PH: 704-208-4251

(C) 2020 copyright notice Helmsman Homes, Inc. All rights reserved. These plans are the property of Said Homes. Any use, reproduction, licensing, or distribution of these plans or a single page is prohibited. This document contains confidential and proprietary information that cannot be reproduced or divulged, in whole or in part, without written authorization from Said Homes.

Date
May 17, 2022

Drawn by

Reviewed by
HELMSMAN

Plan set scale
24x36 sheet
1/4" = 1'-0"
11x17 sheet
1/8" = 1'-0"

Proposition code
XX.XX.XXX

Drawing set
FOR CONSTRUCTION

Sheet title/description

Sheet no
A-4.0A

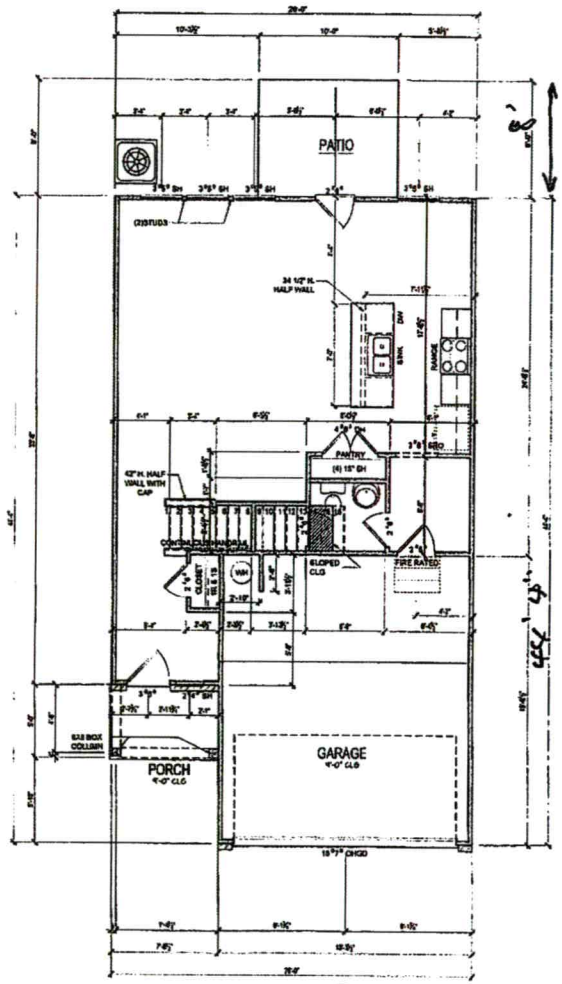
Master plan variant

Acknowledgement Of Plans Submittal ONLY!

Homeowner Date 8/11/22

Date 8/11/22

329986



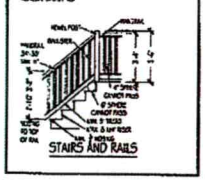
26'

FIRST FLOOR PLAN

SCALE: 1/4" = 1'-0"

52' 4"

SQUARE FOOTAGE	
FIRST FLOOR (HEATED)	708
SECOND FLOOR (HEATED)	1344
TOTAL (HEATED)	1752
GARAGE (UNHEATED)	360
FRONT PORCH	40



ELEVATION "A" - FARMHOUSE

HELMSMAN HOMES

Township/County

Engineer

Stamp/Seal

Project name/owner

FATHON
1752 PLAN

HELMSMAN HOMES
250 RACEWAY DR.
SUITE 2A
MOORESVILLE, NC 28117
PH: 704-658-4251

(C) 2020 copyright notice Helmsman Homes, Inc. all rights reserved. These plans are the property of said viewer, any use, reproduction, copying, or distribution of these drawings is strictly prohibited. This document contains confidential and proprietary information that cannot be reproduced or divulged, in whole or in part, without written authorization from Rick Yates.

Date
May 17, 2022

Drawn by

Reviewed by
HELMSMAN

Plan set scale
24x36 sheet
1/4" = 1'-0"
11x17 sheet
1/8" = 1'-0"

Project/plan code
XX.XX.XXXX

Drawing set
FOR CONSTRUCTION

Sheet title/description

Sheet no.
A-3.0A

Master plan version

IREDELL COUNTY · NC

Cash Register Receipt

Iredell County

Receipt Number
R17375

DESCRIPTION	ACCOUNT	QTY	PAID
PermitTRAK			**$577.25**
AP-329986 Address: 845 OLD MOUNTAIN RD APN: 4722378474.000			**$577.25**
EH NEW SYSTEM PERMITS			$500.00
GRAVITY SYSTEM	10492751-447004	0	$500.00
ZONING			$77.25
TECH FEE ZONING	104563-460450	0	$2.25
ZONING PERMIT	104563-472223	0	$75.00
TOTAL FEES PAID BY RECEIPT: R17375			**$577.25**

Date Paid: Friday, June 24, 2022

Paid By: HELMSMAN HOMES, LLC 236 RACEWAY DR STE 7

Cashier: BJK

Pay Method: CHECK 4767