ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 x3456 Mooresville Office (704) 660-3625 (BB)

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

PERMIT : OSWP - 2024-55369

PIN # 4725-73-2592

APPLICANT/OWNER: ZAC RANDALL

APPLICANT ADDRESS: 159 POWDER HORN ROAD, MOORESVILLE, N.C. 28115

SITE ADDRESS: 114 BASS LANE, STATESVILLE, N.C. 28625

PHONE: 704-746-7235

ALT. PHONE —

SITE DIRECTIONS: (N) ON 115, (L) ON OLD WILKESBORO, (L) ON BRADLEY FARM, (L) ON MONTICELLO, (L) ON MONTE VISTA, (R) ON BASS, LOT ON (R)

SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: MONTICELLO HEIGHTS

SECTION: 2

LOT # 17-22

LOT AREA: 0.69 AC

DESIGN FLOW: 360 GPD

L.T.A.R.(Initial): EXT

L.T.A.R (Repair): 0.3

Septic Tank	1000 (gal)	STB		Date		☐ New System	☑ Repair	☐ Expansion	System Type: I II (III) IV V VI
Pump Tank	— (gal)	PT	—	Date	—	System Description:		GRAVEL BED	
Pump Make	—	Model	—	Serial #	—	Repair System Description:		HIGH CAPACITY CHAMBERS	
# Nitrification Fields	1	# Lines	EXT + 1	Linear Ft	EXT + 50 FT	Maintenance Agreement Required:		☐ YES	☑ NO
Trench Width	NEW 36 IN	*Max. Trench Depth(Initial)	EXT	*Max. Trench Depth(Repair)	58 IN	Gravel Depth	—	☑ GRAVITY	☐ PRESSURE

* Measured on the downhill side of the trench

Effluent Standard: ☑ DSE ☐ HSE ☐ TS-I ☐ TS-II ☐ RCW ☐ NSF/ANSI 40

Usable Depth to LC (Initial): EXT

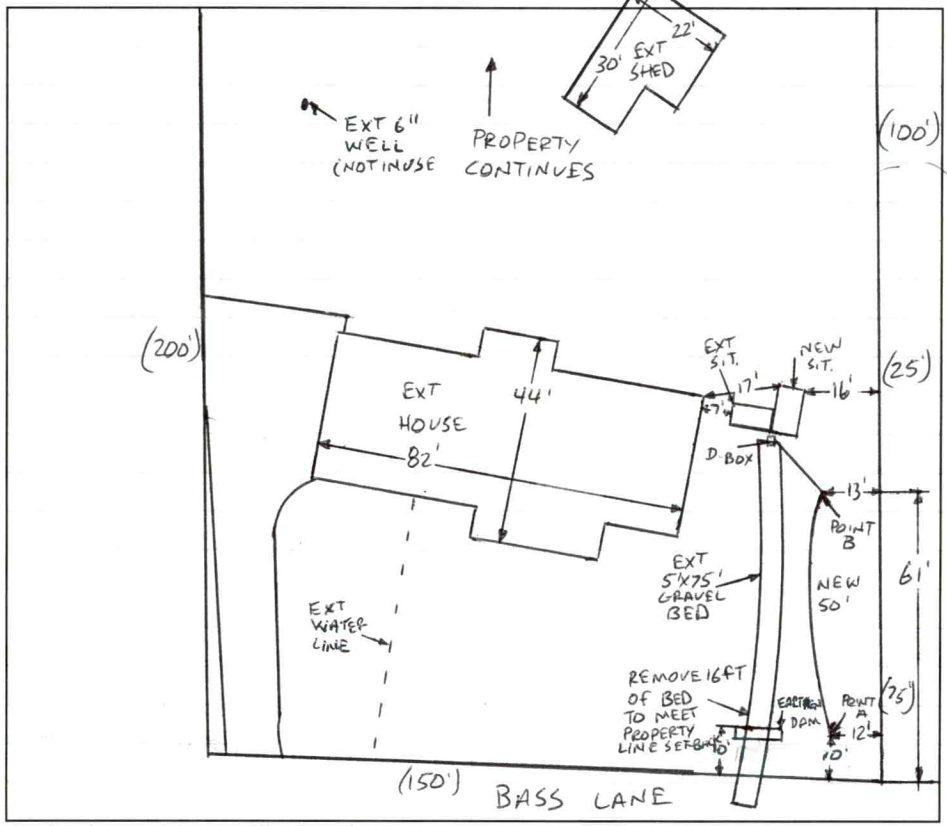
☑ Residence	No. Bedrooms	3	Water Supply
☐ Business	No. Persons	6	☐ Private
☐ Other	No. Employees	—	☑ Public
☐ Slab	☐ Crawl Space		☐ Community
☑ Basement w/plumbing		☐ Basement w/o plumbing	

Usable Depth to LC (Repair): 65 IN *Limiting Condition*

Comments / Conditions: INSTALL AS SHOWN, POINT B IS 4 IN LOWER THAN POINT A, USE NEW D-BOX TO FEED BED FIRST, EARTHEN DAM MUST BE INSTALLED IN BED 10 FT FROM PROPERTY LINE

PUMP, CRUSH, AND FILL EXISTING SEPTIC TANK, INSTALL AT 60 IN ON HIGHSIDE OF TRENCH DO NOT EXCEED OR SHALLOW UP SEE ATTACHED BPJ FORM, NEW TANK NOT TO EXCEED 3 FT OF COVER AS BUILT SKETCH

INITIAL SITE 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.

1 IN = 40 FT

S.T. = SEPTIC TANK

EXT = EXISTING

Installed as Shown

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: CST Dirt Solutions

IMPROVEMENT PERMIT by: Bufurt C. White Date: 6-27-2024 OPERATION PERMIT by: Sydney Hollard Date: 7/11/24

AUTHORIZATION TO CONSTRUCT by: Bufurt C. White Date: 6-27-2024 Existing System Inspected by: Date:

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

PROPERTY ID #: 4735-73-2592
COUNTY: IREDELL

SOIL/SITE EVALUATION *for* ON-SITE WASTEWATER SYSTEM

(Complete all fields in full)

OWNER: ZAC RANDALL DATE EVALUATED: 6-24-2024
ADDRESS: 159 POWDER HORN ROAD, MOORESVILLE, N.C. 28115
PROPOSED FACILITY: EXT 3BR PROPOSED DESIGN FLOW (.0400): 360GPD PROPERTY SIZE: 0.69AC
LOCATION OF SITE: 114 BASS LANE, STATESVILLE, N.C. 28625 PROPERTY RECORDED: YES
WATER SUPPLY: ✓ Public Single Family Well Shared Well Spring Other _____ WATER SUPPLY SETBACK: 50FT
EVALUATION METHOD: Auger Boring ✓Pit Cut TYPE OF WASTEWATER: ✓Domestic High Strength IPWW

PROFILE #	.0502 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY .0503 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY .0503 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .0504 SOIL WETNESS/ COLOR	.0505 SOIL DEPTH	.0506 SAPRO CLASS	.0507 RESTR HORIZ	.0509 PROFILE CLASS & LTAR*	.0503 SLOPE CORRECTION
1	FOOT 5%	0-22	FILL	MIXED						
		22-30	SCL, SBK	FI, SS, SP, SEXP	– BURIED A R/B MATRIX SAP INC THRU OUT	77"+	NA	NA	PS 1.3 INSTALL @ 60" HIGHSIDE	2"
		30-52	CL, SBK	FI, SS, P, SEXP						
		52-77	CL, WSBK	FRABS, SP, SEXP		NON CON QUARTZ VEIN @ 61"				
2										
3										
4										

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.0508)	–	PS
System Type(s)	–	HIGH CAP CHAMBER
Site LTAR	–	0.3
Maximum Trench Depth	–	58IN

SITE CLASSIFICATION (.0509): PS W/BPJ
EVALUATED BY: Buffy C. Wilder
OTHER(S) PRESENT: _____

Comments: _____

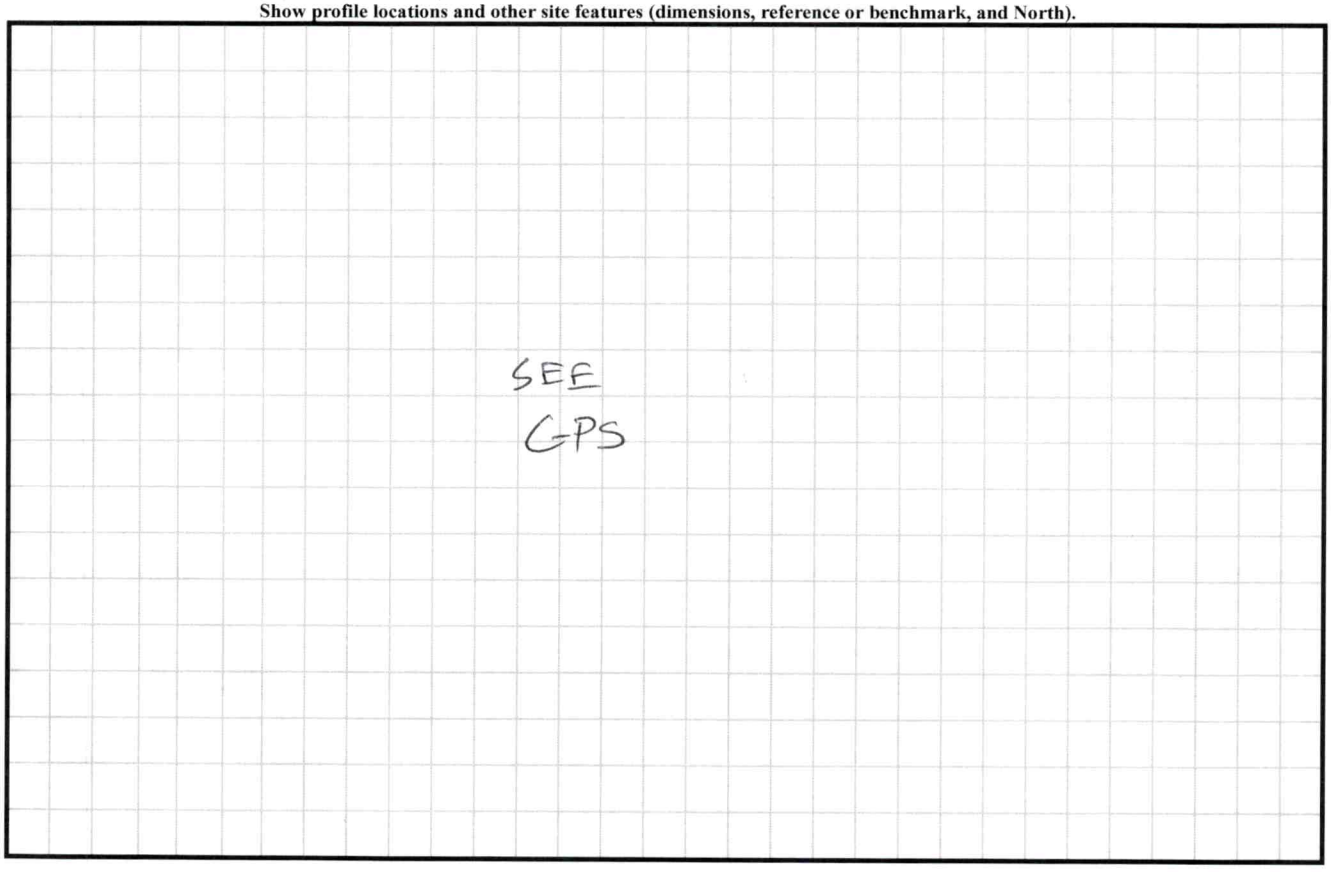
LEGEND

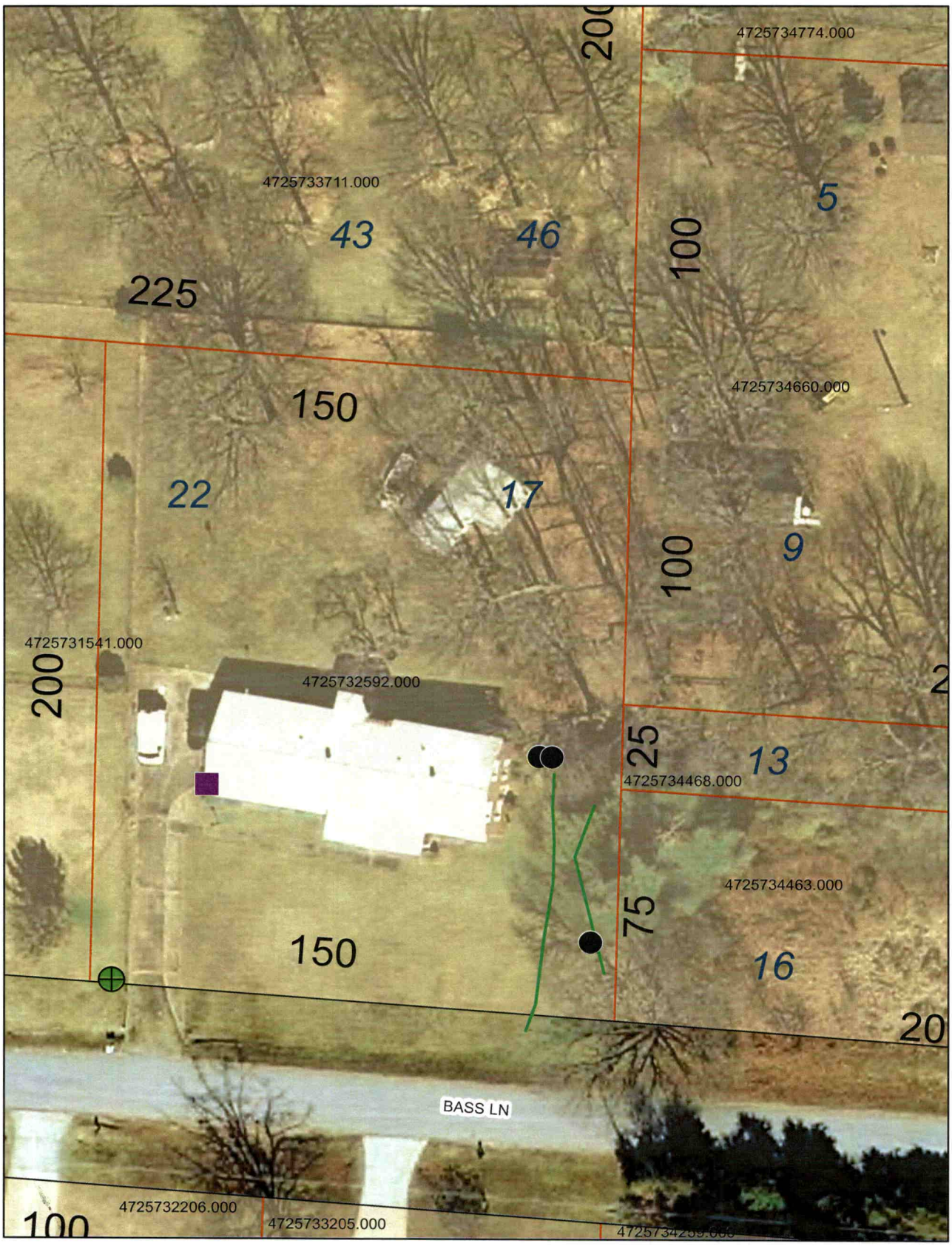
LANDSCAPE POSITION	SOIL GROUP	SOIL TEXTURE	CONVENTIONAL LTAR (gpd/ft²)	SAPROLITE LTAR (gpd/ft²)	LPP LTAR (gpd/ft²)	MINERALOGY/ CONSISTENCE		STRUCTURE
CC (Concave slope)	I	S (Sand)	0.8 - 1.2	0.6 - 0.8	0.4 -0.6	MOIST	WET	SG (Single grain)
CV (Convex Slope)		LS (Loamy sand)		0.5 -0.7		Lo (Loose)	NS (Non-sticky)	M (Massive)
D (Drainage way)	II	SL (Sandy loam)	0.6 - 0.8	0.4 -0.6	0.3 - 0.4	VFR (Very friable)	SS (Slightly sticky)	GR (Granular)
FP (Flood plain)		L (Loam)		0.2 - 0.4		FR (Friable)	S (Sticky)	SBK (Subangular blocky)
FS (Foot slope)	III	SiL (Silt loam)	0.3 - 0.6	0.1 - 0.3	0.15 - 0.3	FI (Firm)	VS (Very sticky)	ABK (Angular blocky)
H (Head slope)		SCL (Sandy clay loam)		0.05 - 0.15**		VFI (Very firm)	NP (Non-plastic)	PR (Prismatic)
L (Linear Slope)		CL (Clay loam)		None		EFI (Extremely firm)	SP (Slightly plastic)	PL (Platy)
N (Nose slope)		SiCL (Silty clay loam)					P (Plastic)	
R (Ridge/summit)		Si (Silt)					VP (Very plastic)	
S (Shoulder slope)	IV	SC (Sandy clay)	0.1 - 0.4		0.05 - 0.2	SEXP (Slightly expansive)		
T (Terrace)		SiC (Silty clay)				EXP (Expansive)		
TS (Toe Slope)		C (Clay)						
		O (Organic)	None					

* Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.
**Sandy clay loam saprolite can only be used with advanced pretreatment in accordance with 15A NCAC 18E .1200.

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); Evaluation of saprolite shall be by pits.
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) or U (Unsuitable)

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




4725734774.000
4725733711.000
43
46
225
150
22
17
100
5
4725734660.000
9
100
4725731541.000
200
4725732592.000
25
13
4725734468.000
4725734463.000
75
150
16
20
BASS LN
4725732206.000
100
4725733205.000

LHD PERMIT NO. OR FILE REF: OSWP-2024-55369

BEST PROFESSIONAL JUDGMENT
for
LOCAL HEALTH DEPARTMENTS
or
PRIVATE LICENSED PROFESSIONALS
IN ACCORDANCE WITH 15A NCAC 18E .1306

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES
Division of Public Health

This page to be completed by LHD or private licensed professional

SITE LIMITATIONS – Check the specific rules that prevent the site from being repaired and permitted in accordance with G.S. 130A, Article 11 and 15A NCAC 18E.

- ☐ Rule .0502 – Topography & Landscape Position
- ☐ Rule .0503 – Soil Morphology
- ☐ Rule .0504 – Soil Wetness Condition
- ☐ Rule .0505 – Soil Depth
- ☐ Rule .0506 – Saprolite
- ☐ Rule .0507 – Restrictive Horizons
- ☐ Rule .0508 – Available Space
- ☑ Other Rule(s) (please specify): fill

PLEASE CHECK THE FOLLOWING WHEN COMPLETED:
(all boxes must be reviewed, and applicable boxes checked before issuance of repair permit)

- ☑ Wastewater system troubleshooting complete. Household/facility water use has been reviewed.
- ☑ Wastewater system repair does not reduce the required horizontal setbacks to drinking water wells as indicated in 15A NCAC 18E .0601.
- ☑ Wastewater system repair does not reduce the required horizontal setbacks to surface water bodies greater than 50 percent of the horizontal setbacks indicated in 15A NCAC 18E .0601.
- ☑ Wastewater system repair has a reasonable expectation to function in accordance with 15A NCAC 18E .1306(c)(2)(D).

REHS SIGNATURE (if applicable)

Bryant C. White — **Signature of Authorized Agent**

6-27-2024 — **Date**

OR

AOWE/PE SIGNATURE (if applicable)

Signature of AOWE/PE | **License Number** | **Date**

This written agreement shall be attached to the Construction Authorization, Operation Permit, Notice of Intent to Construct, or Authorization to Operate, as applicable.

LHD PERMIT NO. OR FILE REF: _____

OWNER REQUEST

for

BEST PROFESSIONAL JUDGMENT

for the repair of

WASTEWATER TREATMENT AND DISPERSAL SYSTEMS IN ACCORDANCE WITH 15A NCAC 18E .1306

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES
Division of Public Health

This page to be completed by owner of property or owner's legal representative

DATE: June 24th, **20** 24

WASTEWATER SYSTEM OWNER – For a place of residence list the property owner(s). For all others, list name of the business or organization and person delegated signature authority:

Print Property Owner(s): Zachary Randall

Business/Organization/Contact: _____

Mailing Address: 159 Powder Horn Road

City: Mooresville State: NC Zip Code: 28115 County: Iredell

Telephone Number(s): 704-746-7235

Email Address: ZNRassociates@gmail.com

PHYSICAL LOCATION OF WASTEWATER SYSTEM

Parcel Identification Number (PIN): 4725-73-2592

Physical Address (if different than mailing address): 114 Bass Lane

City: Statesville State: NC Zip Code: 28625

OWNER ATTESTATION

I, X Zachary Randall, hereby request the use of best professional judgment in accordance
Owner's Printed Name

with 15A NCAC 18E .1306. I understand that the use of best professional judgment may be used to develop a repair that should enable my malfunctioning subsurface wastewater system to comply with 15A NCAC 18E .1303(a)(1) and give the system a reasonable expectation to function correctly. I agree to comply with all terms and conditions set forth on the associated repair permit, including any operation and maintenance requirements. By signing this document, I understand that I shall be liable for any damages associated with the use of best professional judgment to repair this malfunctioning subsurface wastewater system.

Owner's Signature: _____ Date: 6/24/24

This written agreement shall be attached to the Construction Authorization, Operation Permit, Notice of Intent to Construct, or Authorization to Operate, as applicable.

PERMIT SNAPSHOT REPORT OSWP-2024-55369 FOR IREDELL COUNTY

Permit Type	Environmental Health OSWP	**Project:**		**App Date:**	06/11/2024
Work Class:	EH Septic Improvement Permit Repair	**District:**	Statesville	**Exp Date:**	NOT AVAILABLE
Status:	PRIORITY PERMIT	**Square Feet:**	0.00	**Completed:**	NOT COMPLETED
Valuation:	$0.00	**Assigned To:**	White, Bryant	**Approval Expire Date:**	
Description:	PRIORITY PERMIT -- REPAIR TANK IS CRACKED				

Parcel: 4725732592.000 Main	**Address:** 114 Bass Ln Statesville, NC 28625 Main	**Zone:** R-10(Urban Low Density Residential Distr R-10(Urban Low Density Residential Distr

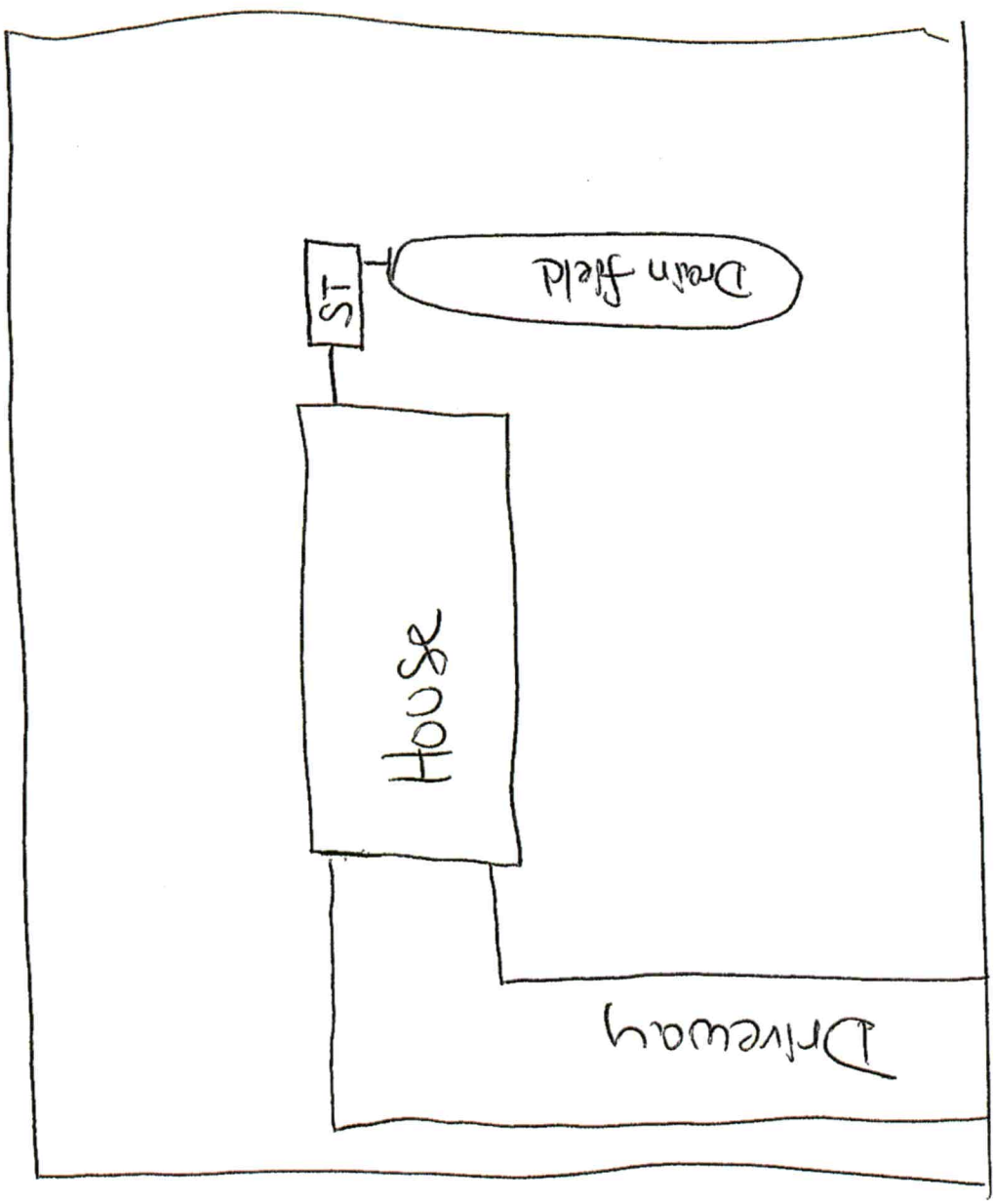
Property Owner	Applicant/Authorized Agent	Project Contact
ZAC RANDALL	ZAC RANDALL	ZAC RANDALL
Mobile: (704) 746-7235	Mobile: (704) 746-7235	Mobile: (704) 746-7235

Permit Custom Fields

How is your site plan being submitted	Custom Site Plan	Does the site contain any jurisdictional wetlands	No	Non-domestic Sewage Generated	No
Other Public Agency	No	All proposed structure dimensions	SEPTIC TANK CRACKED	What are the proposed structures	New Single-Family Residence - Stick Built
Maximum Number of Bedrooms	3	Number of Occupants	2	Foundation Type	Crawl Space Foundation
Water Supply	Community Well, Existing Well	Desired Septic System Type	No Preference	Additional Unique Setbacks Apply	No

Attachment File Name	Added On	Added By	Attachment Group	Notes
114 BASS LN AUTHORIZE AN OWNER_v1.pdf	06/11/2024 15:24	COMEAUX, DEBRA	Available Online	
114 BASS LN SITE PLAN_v1.pdf	06/11/2024 15:24	COMEAUX, DEBRA	Initial Site Sketch	

Workflow Step / Action Name	Action Type	Start Date	End Date
Application Completeness Check v.1		06/11/2024 15:24	06/11/2024 15:25
Confirm application complete v.1	Generic Action		06/11/2024 15:25
~~**Lot Readiness Verification v.1**~~			06/11/2024 15:29
~~OSWP Septic Preliminary Site Visit v.1~~	Inspection		06/11/2024 15:29
~~OSWP Site Evaluation v.1~~	Inspection		06/11/2024 15:29
~~OSWP Tanks Checked v.1~~	Inspection		06/11/2024 15:29
~~**Zoning Review v.1**~~			06/11/2024 15:25
~~Floodplain Admin Overview v.1~~	Task		06/11/2024 15:25
~~Issue Invoice v.1~~	Generic Action		06/11/2024 15:25
~~Statesville Zoning Approval v.1~~	Task		06/11/2024 15:25
~~Fees Paid v.1~~	Generic Action		06/11/2024 15:25
Assign v.1			
Case Assigned v.1	Generic Action		
Permit Ready v.1			
Issue Permit v.1			
Issue Invoice v.1	Generic Action		
Fees Paid v.1	Generic Action		
Issue Permit v.1	Generic Action		
Environment Health Inspections v.1			
Operation Permit Inspection v.1	Inspection		



114 Bass Lane
Statesville, NC 28625