ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT #AP 3060970

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

PIN # 4726-46-0439

APPLICANT/OWNER: Americas Home Place / Brian Stocks APPLICANT ADDRESS: 1206 Greenland Dr. Statesville

SITE ADDRESS: 203 Short Dog Dr, Statesville 28625 PHONE: 704-746-7094 ALT. PHONE —

SITE DIRECTIONS: 115 N → L on Midway → L on Short Dog → on L SAP CONTROLLED: ☐ YES ☒ NO

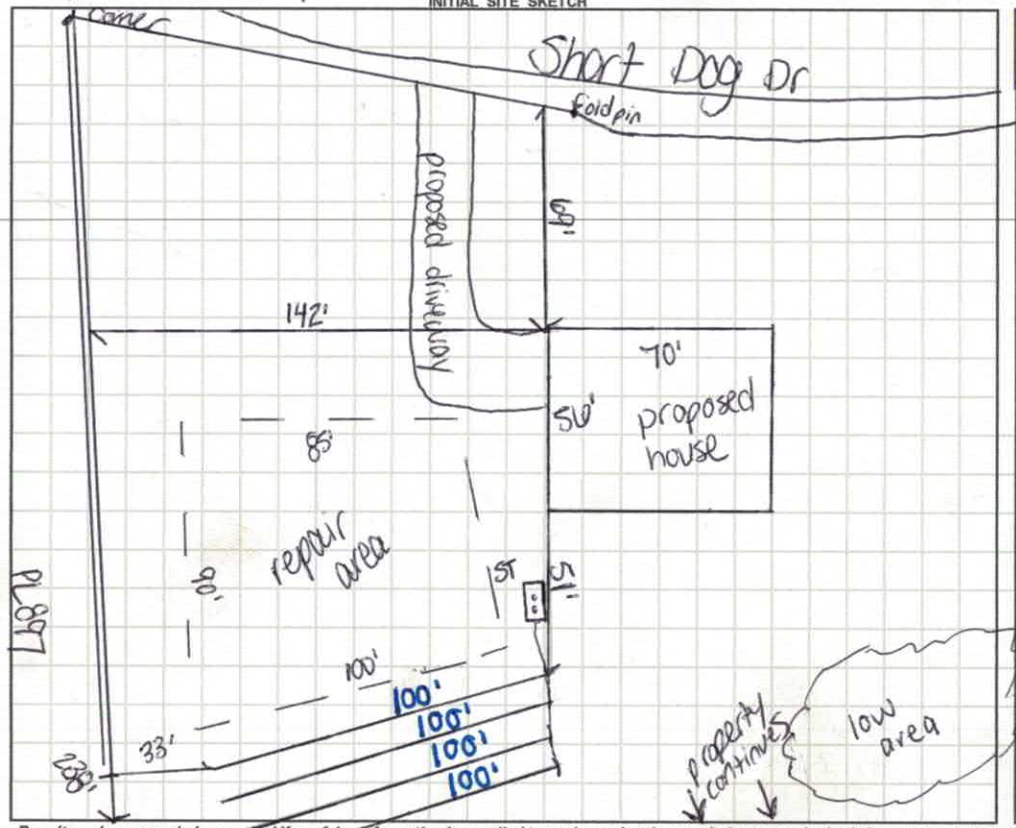
SUBDIVISION: Beagle Run SECTION: 2 LOT # 51+52+53 LOT AREA: DESIGN FLOW: 480 gpd L.T.A.R.: .3

Septic Tank	1000	(gal)	STB 760.	Date 6/4-2020	☒ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms	4	Water Supply	
Pump Tank		(gal)	PT	Date	System Description:	25% reduction	☐ Business	No. Persons	8	☐ Private	
Pump Make		Model		Serial #	Repair System Description:	25% reduction on	☐ Other	No. Employees		☒ Public	
# Nitrification Fields	1	# Lines	4	Linear Ft: 400'	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☐ Crawl Space		☐ Community	
Trench Width	36"	Trench Bottom Depth (Low side)		29"	Gravel Depth —	☒ GRAVITY ☐ PRESSURE	☐ Basement w/plumbing			☒ Basement w/o plumbing	

Comments / Conditions: Install on contour + utilize serial distribution. Do not exceed max depth of 36". Do not grade septic area. Keep tank 15' from basement cut.

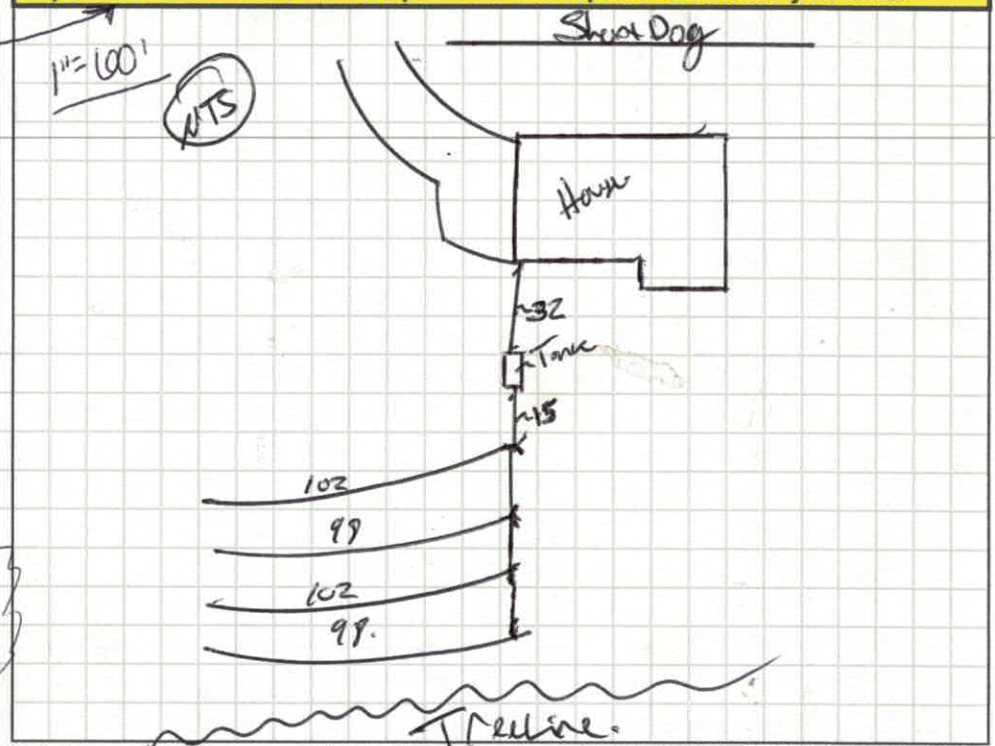
lots combined → deed bk 2703 pg 983-985

INITIAL SITE SKETCH



AS BUILT SKETCH

FOR SEPTIC 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.



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: Acceptance of Permit Recd Date: 5-20-20 Installed by: Groundbreaker - Shannon Henderson

IMPROVEMENT PERMIT by: Carla C. Nicks Date: 5-15-20 OPERATION PERMIT by: Benjamin A Bolton Date: 7/23/2020

AUTHORIZATION TO CONSTRUCT by: Carla C Nicks Date: 6-10-20 Existing System Inspected by: Date:

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

IREDELL COUNTY HEALTH DEPARTMENT
JANE HINSON, RN BSN MS
HEALTH DIRECTOR

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

ACKNOWLEDGEMENT OF ACCEPTANCE OF PERMIT DESIGN AND CONDITIONS

Any permit requiring a signature must have this form signed by the property owner or their authorized agent. Once this form is signed and returned to Environmental Health an official copy of the permit will be emailed to the email that you provide.

I, Chad Holloway, am the legal owner or the agent of the property located at 203 Short Dog Drive Statesville NC, identified as PIN(Parcel Identification Number) 4726-36-8655, 4726-46-1311, 4726-36-9756 located in Iredell County, North Carolina. (To be combined)
Permit # 306910.

I do hereby agree to the permit design and the conditions of this permit.

Chad Hol — 5/20/2020
Signature of Owner/Authorized Agent — Date

Lisa Dagenhart — 5/20/20
Signature of Witness — Date

Ckholloway@americashomeplace.com
email

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

Sheet 1 of 1
PROPERTY ID #:
COUNTY: Iredell

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

OWNER: AHP
ADDRESS: 1206 Greenland Dr, Statesville
APPLICATION DATE 4-24-20
DATE EVALUATED: 5-15-20
PROPOSED FACILITY: 4BR
PROPOSED DESIGN FLOW (.1949): 480gpd
PROPERTY SIZE:
LOCATION OF SITE: 203 Short Dog, Statesville
PROPERTY RECORDED: Y
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	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	L 17%	0-12	M SCL	Fi ss sp sexp	compacted	51"	-	-	PS .3
		12-28	SBK C	Fr ss sp sexp					
		28-51	SBK CL	Fi ss sp sexp	some mica				
2	L 17%	0-9	M SCL	Fi ss sp sexp	compacted	58"	-	-	PS .3
		9-38	SBK C	Fi ss sp sexp					
		38-58	SBK CL	Fi ss sp sexp					
3	L 17%	0-12	M SL	Fi ss sp sexp	compacted	52"	-	-	PS .3
		12-38	SBK C	Fi ss sp sexp					
		38-52	SBK CL	Fi ss sp sexp	few sap. inc. throughout CL				
4	L 17%	0-10	M SCL	Fi ss sp sexp	compacted	51"	-	-	PS .3
		10-36	SBK C	Fr ss sp sap					
		36-51	SBK CL	Fi ss sp sexp					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	400'	400'
System Type(s)	2Sa	2Sa PM
Site LTAR	.3	.3

OTHER FACTORS (.1946): N/A
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: C. Nicks
OTHER(S) PRESENT:

COMMENTS:

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.

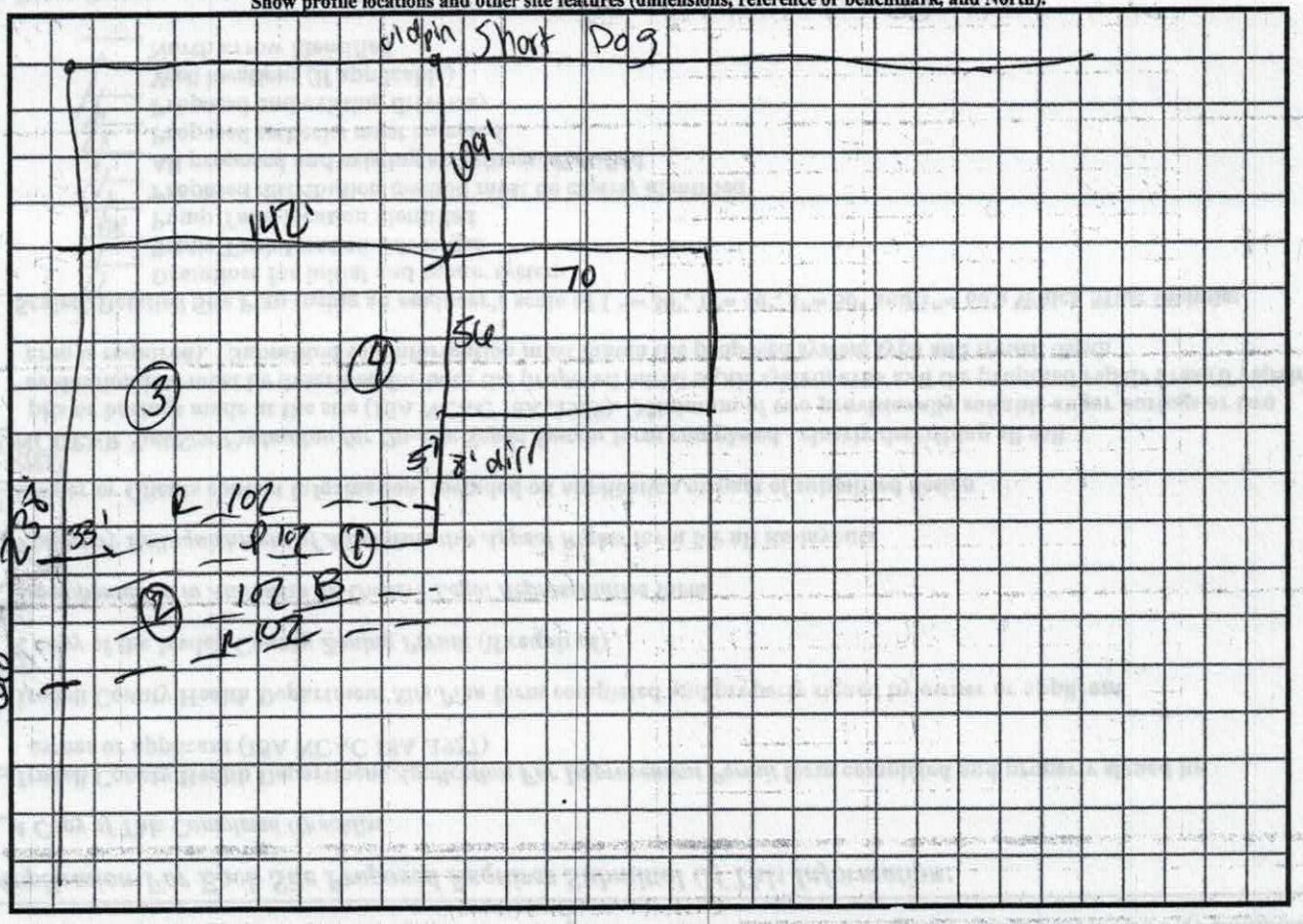
NOTES

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).



179w-7a

RECEIVED APR 2 4 2020

AP-306470
$500.00

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM*

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: America's Home Place Inc Address: 1206 Greenland Drive Statesville NC Zip: 28677
Applicant Email: ckholloway@ahphomes.com Phone: 704-746-7094 Alt. Phone: _____
Owner Name: Brian Stoehr Address: 148 Rock Island Drive Statesville NC Zip: 28625
Owner Email: bstoehr1153@gmail.com Phone: 704-902-9122 Alt. Phone: _____

Property Information:

Street Address: 203 Short Dog Drive Statesv. NC NC 28625
Subdivision Name: Beagle Run Section/Phase: 2 Lot Number: 51, 52, 53
Driving Directions: 115 N TL onto Midway TL onto Short Dog 1/4 mile on left

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: 4
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
( ) Concrete Slab Foundation
( ) Basement with Plumbing
(X) Basement without Plumbing

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

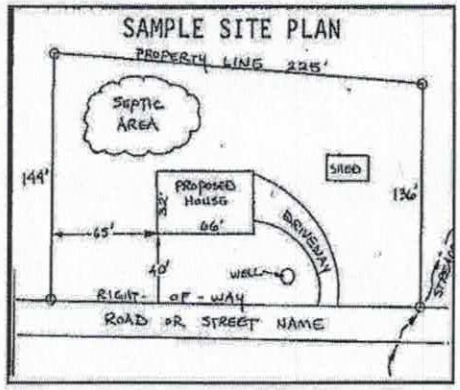
Signature: Mark Hall 4/23/2020
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *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:

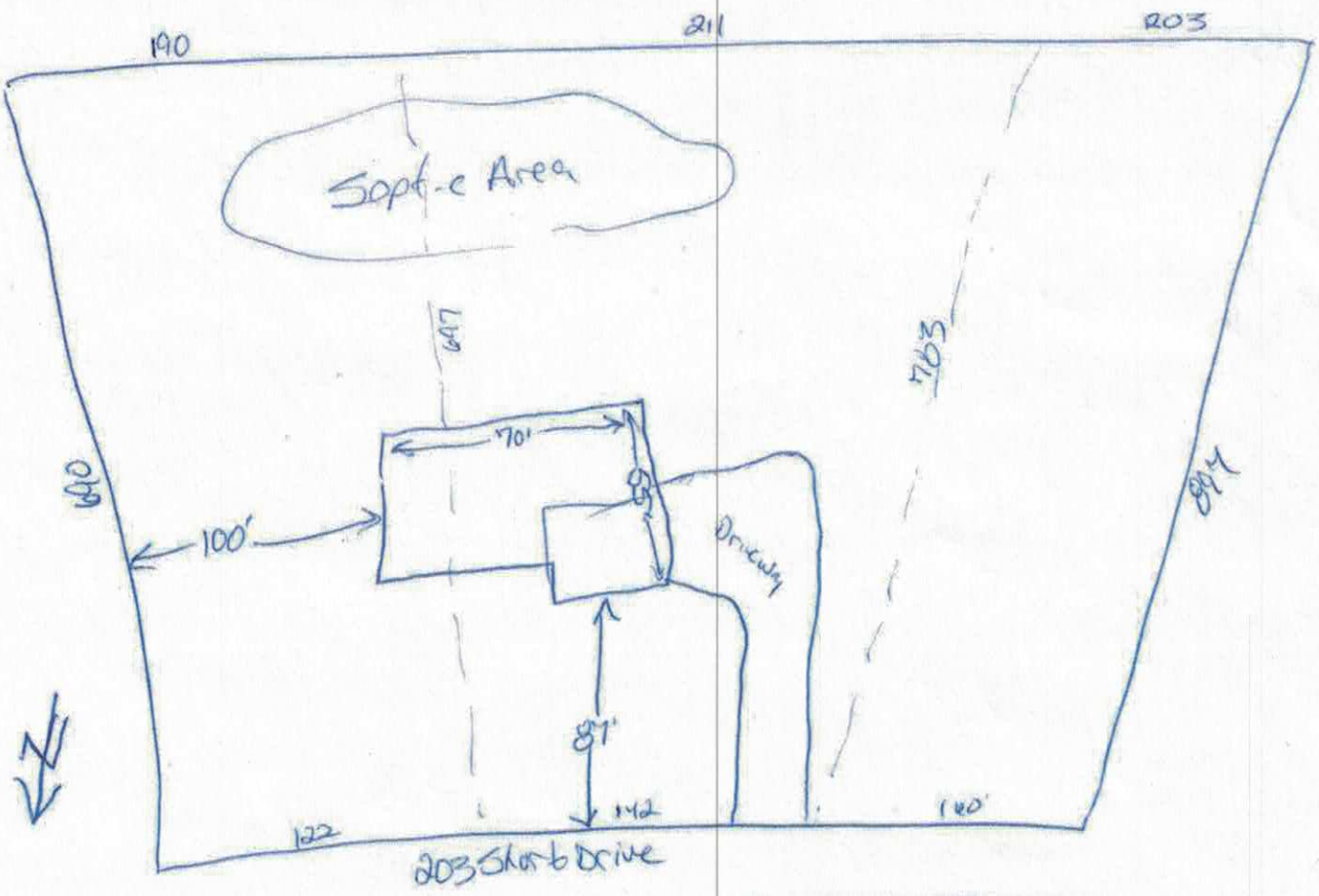
- (√) Property Line measurements are clearly identified
- (√) All proposed structures are indicated
- (√) Front and side setbacks from property line
- (√) Preferred driveway location and well location
- (√) Area you prefer your septic system to be placed
- (√) North arrow, or other sufficient indicator 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



Signature: Chad Hall — 4/23/2020

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

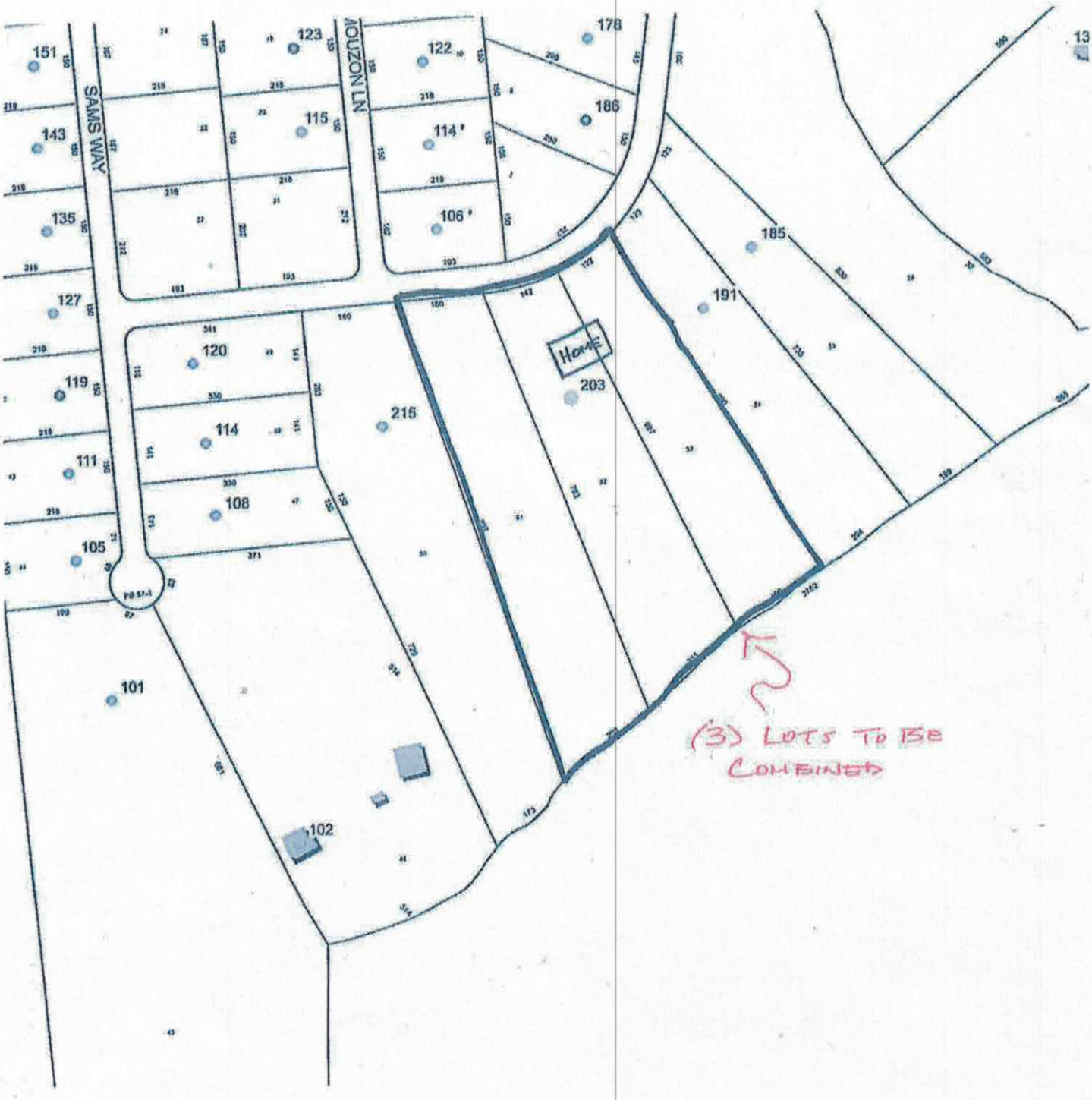
Preliminary Approval – SF Dwelling Permit (Short Dog Drive) - Lots #51 - #53

Regarding the properties located at 203 Short Dog Drive, It is permissible to go head and issue the Zoning and Environmental Health Permits to allow for the septic approval to be applied for, yet a hold shall be placed the Building Permit until the three lots are combined.

4-21-20

William Allison – Planner III

Date



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.

X 2. I, Brian Stoehr, am the legal owner(s) of the property located at 197 Short Dog Drive Statesville NC 28625 identified as Lots 51, 52, 53
4726361256,
PIN (Parcel Identification Number) 4726461841, 4726364655, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Chad Holloway, America's Home Place Inc, 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.

Brian Stoehr
Signature of Owner(s)

4/23/20
Date

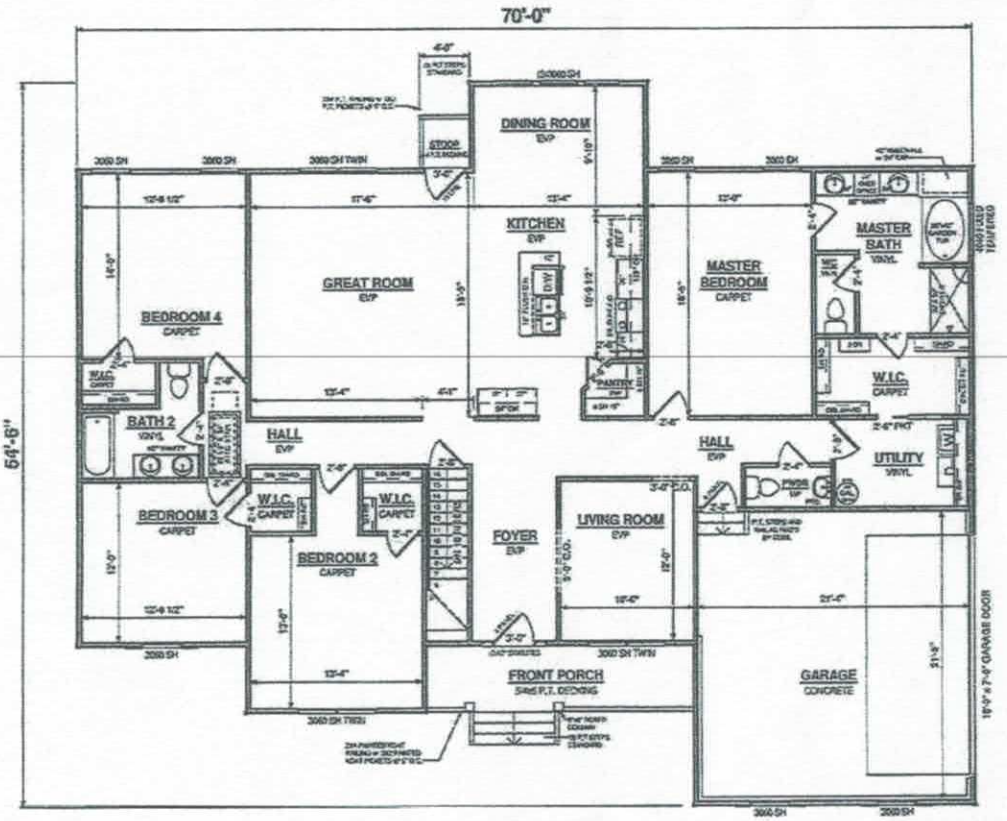
Mooresville - Environmental Health
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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

Acknowledgement Of
Plans Submittal ONLY!

Date 5/20/2020

Date 5-15-20



SPECIAL NOTES

- GRANITE KITCHEN COUNTERTOPS w/4" GRANITE BACKSPLASH AND UNDERMOUNT SINK
- CULTURED MARBLE COUNTERTOPS IN ALL BATHS
- SMOOTH CEILINGS THROUGHOUT
- 22 1/2" x 54" PULL DOWN STAIR - INSULATED AND SEALED

AREAS	
FIRST FLOOR HEATED	2,494 SF
UNFINISHED BASEMENT	1,100 SF
GARAGE	494 SF
FRONT PORCH	156 SF
TOTAL UNDERROOF	4,244 SF
STOOP	16 SF

REVISIONS	DESCRIPTION	DATE
1	PRELIMINARY	5/14/20

TITLE: CUSTOM-FRANKLIN
ADDR: BRIAN & DONITA STOEHR
456 SHORT DOG DR
STATESVILLE, NC 28625
OFFICE: STATESVILLE, NC
DESIGNED BY: J. BECKLEY

JOB#: 87-20-035
2x4 EXTERIOR WALLS unless otherwise noted
FOUNDATION TYPE: BASEMENT

DRAWN BY: ITI
CHECKED BY: T. THOMPSON
PRINT DATE: 5/14/2020 12:10:44 PM

PROPERTY OF: AMERICA'S HOME PLACE, INC. ©2017

SHEET NUMBER: DP-4

FIRST FLOOR DESIGN PLAN

PRELIMINARY DESIGN PLANS

PAPER SIZE: 11"x 17" SCALE: 1/8" = 1'-0"

TO REPORT COPYRIGHT VIOLATIONS CALL (770)529-1128 THE USE OF THIS PLAN BY ANYONE OTHER THAN AN AGENT OF "AMERICA'S HOME PLACE, INC." IS IN VIOLATION OF THE FEDERAL COPYRIGHT VIOLATION ACT, 2108 REWARD FOR RECOVERING AN ACTUAL COPYRIGHT INFRINGEMENT.
©COPYRIGHT-ALL RIGHTS RESERVED NOTE: VIOLATORS OF THE COPYRIGHT WILL BE PROSECUTED TO THE FULLEST EXTENT OF THE LAW. THIS WORK IS THE INTELLECTUAL PROPERTY OF AMERICA'S HOME PLACE AND SHALL NOT BE REPRODUCED WITHOUT PERMISSION.

IREDELL COUNTY · NC

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

APPLICATION NUMBER
306970 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4726369756.000	203 SHORT DOG DR	

Owner Information	Applicant Information
Name: STOEHR BRIAN M+DONITA M	Name: AMERICA'S HOME PLACE INC
Address:	Address: 1206 GREEN LAND DRIVE
,	STATESVILLE, NC 28677
Phone:	Phone: (704)872-4400

Use Requested	Zone Code
	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
2.835	35	50	15	15		

Remarks
SFD need disclaimer

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.

Date: 04/23/2020

Signature of Owner/Contractor

Permit Number	306970

TOTAL FEES:	$77.25