ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # AP 323340

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

PIN # 4729--19--9618

APPLICANT/OWNER: Terrance Hamby | APPLICANT ADDRESS: 160 Bowman Rd Statesville, NC

SITE ADDRESS: 115 Hicks Rd Statesville, NC 28625 | PHONE: 704-775-5825 | ALT. PHONE

SITE DIRECTIONS: 115 (N) → (R) Wilson Farm → (L) Hicks → lot on (L) | SAP CONTROLLED: [X] YES [ ] NO

SUBDIVISION: | SECTION: | LOT #: | LOT AREA: 1.497 ac | DESIGN FLOW: 360 gpd | L.T.A.R.: 0.275 / 0.25

Septic Tank	1000	(gal)	STB	160 (GSI)	Date	8-26-2022	[X] New System [ ] Repair [ ] Expansion	System Type: I II (III) IV V VI	
Pump Tank		(gal)	PT		Date		System Description:	Accepted - NO REDUCTION	
Pump Make			Model		Serial #		Repair System Description:	50% Reduction - deep install	
# Nitrification Fields	1		# Lines	7	Linear Ft	434'	Maintenance Agreement Required:	[ ] YES [X] NO	
Trench Width	36"		Trench Bottom Depth(Low side)	44" (48" MAX)	Gravel Depth	N/A	[X] GRAVITY	[ ] PRESSURE	

[X] Residence [ ] Business [ ] Other [ ] Slab [ ] Basement w/plumbing

No. Bedrooms: 3 | No. Persons: 6 | No. Employees: | [X] Crawl Space

Water Supply: [X] Private [ ] Public [ ] Community

[ ] Basement w/o plumbing

Comments / Conditions: Do not pave, grade, park, drive, or bury utilities in drainfield. Divert all drainage from drainfield. May go to 10' from R/L w/ drainlines. DO NOT shallow up trench

Stake proposed pool @ time of installation

INITIAL SITE SKETCH

See attached

Site plan by ICHD

approved 12/22/21

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.

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.* [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: [signature] Date: 12/29/21 | Installed by: K & M GRADING

IMPROVEMENT PERMIT by: D. Mebery Date: 12/22/21 | OPERATION PERMIT by: Bryant C. White Date: 10-19-2022

AUTHORIZATION TO CONSTRUCT by: D. Mebery Date: 12/22/21 | Existing System Inspected by: Date:

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

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

Sheet 1 of 1
PROPERTY ID #:
COUNTY: Iredell

surface drain

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

OWNER: Terrance Hanby
ADDRESS: 100 Brittain Rd, Statesville NC 28625
PROPOSED FACILITY: 3BR
PROPOSED DESIGN FLOW (.1949): 360
LOCATION OF SITE: 115 Hicks Rd, Statesville NC
APPLICATION DATE: 11/29/21
DATE EVALUATED: 12/14/21
PROPERTY SIZE:
PROPERTY RECORDED: yes

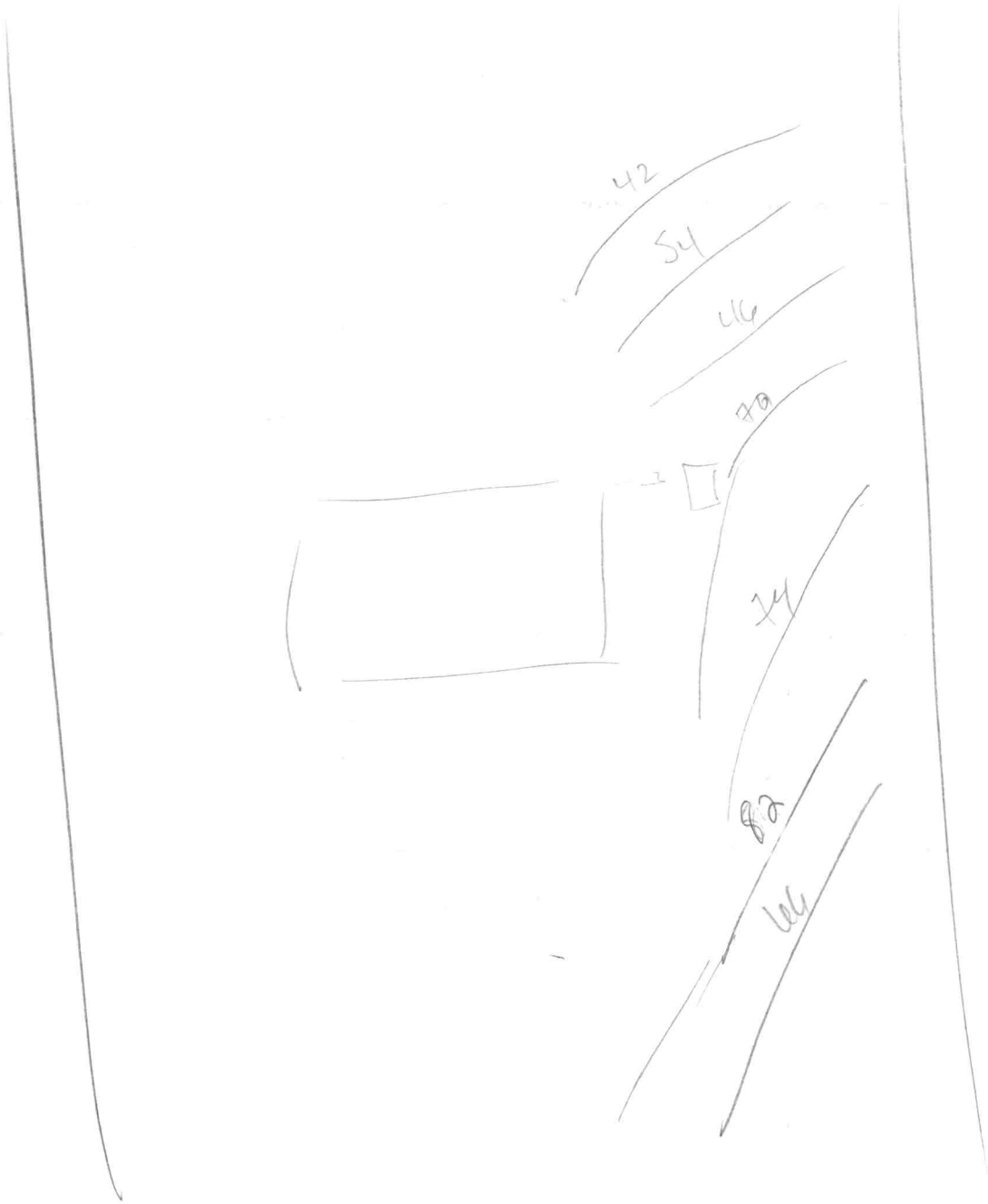
WATER SUPPLY: ☒ Private ☐ Public ☒ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut
TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LS 10%	0-6	SCL-SBK	SSSP-FR SEXP	10YR 5/4, 6/4 @20" 7.5YR 5/8 @24" = mottling few/comm litho incl common, sap incl 28"+	(54")	L	N/A	PS 0.275 TO 48
		6-28	C-SBK/ABK	↓					
		28-54	C-WSBK	↓					
		54-66	SAP-M-L	SSNP-FR					
2	LS 10%	0-9	CL-SBK	SSSP-FR SEXP	2.5Y 6/2 @30" YB mottling (67") litho/sap incl 31"+ no mottling		N/A	N/A	PS 0.275 TB @ 48 MAX
		9-31	C-SBK/ABK	↓					
		31-67	CL-WSBK	↓					
3	LS 12%	0-11	CL-SBK	SSSP-FR-SEXP	YB mottling Chroma 2's to 28" 2.5Y 6/2	(58")	SL		PS 0.275 TB @ 50
		11-30	C-ABK-SBK	↓					
		30-58	CL-WSBK	↓					
		58-67	SAP-M-SL	SSNP-FR					
4	LS 14%	0-18	CL	SSSP-FR SEXP	YB's/chroma 3's to 40"	48"	N/A	N/A	PS 0.25 TB @ 50
		18-40	C-SBK/ABK	↓					
		40-68	CL-WSBL	↓					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	4300	HPPBPS
System Type(s)	25% red (Ind)	
Site LTAR	0.275	0.275

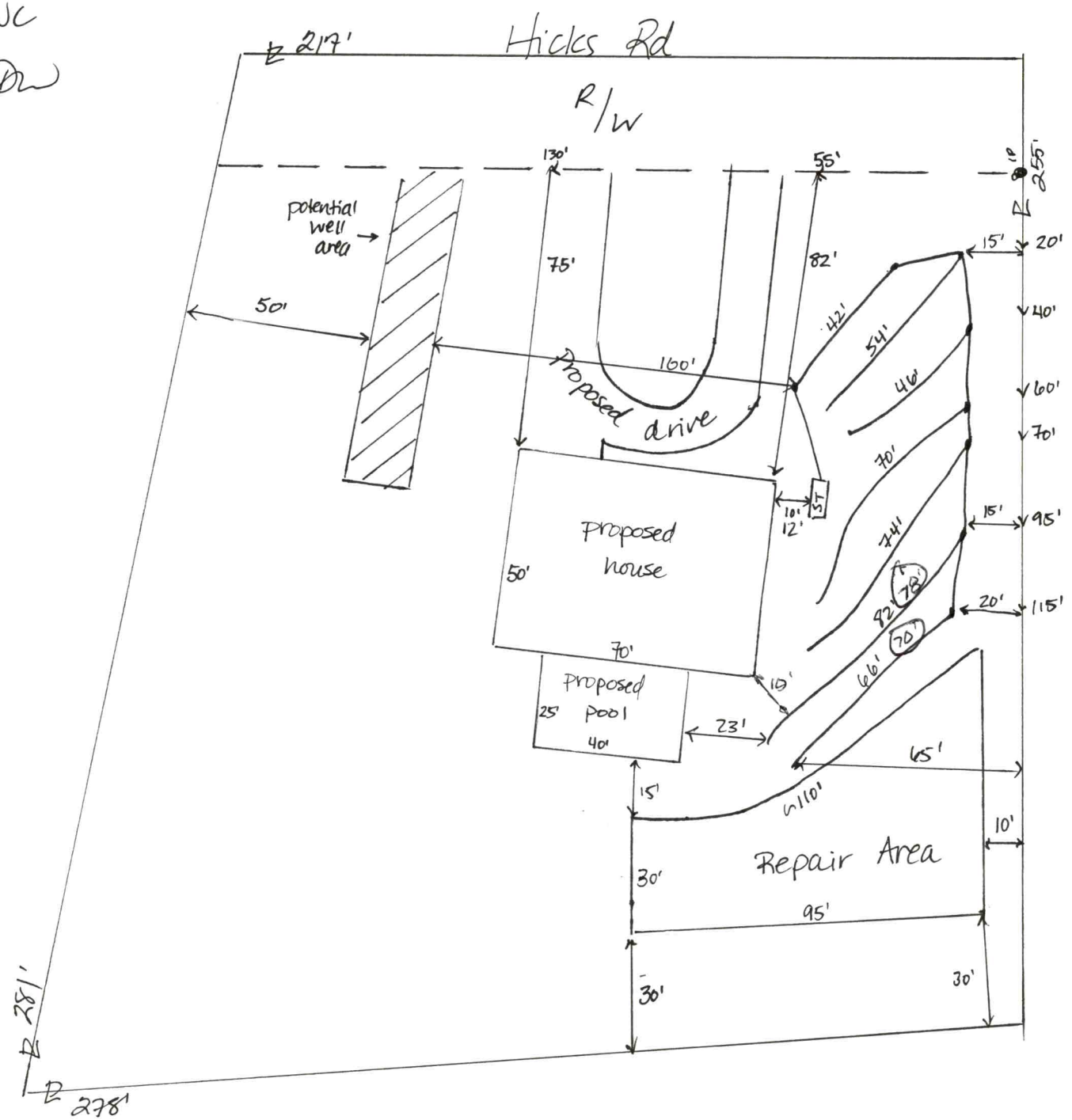
OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): RS
EVALUATED BY: DMebert
OTHER(S) PRESENT: B. White, K. Powell

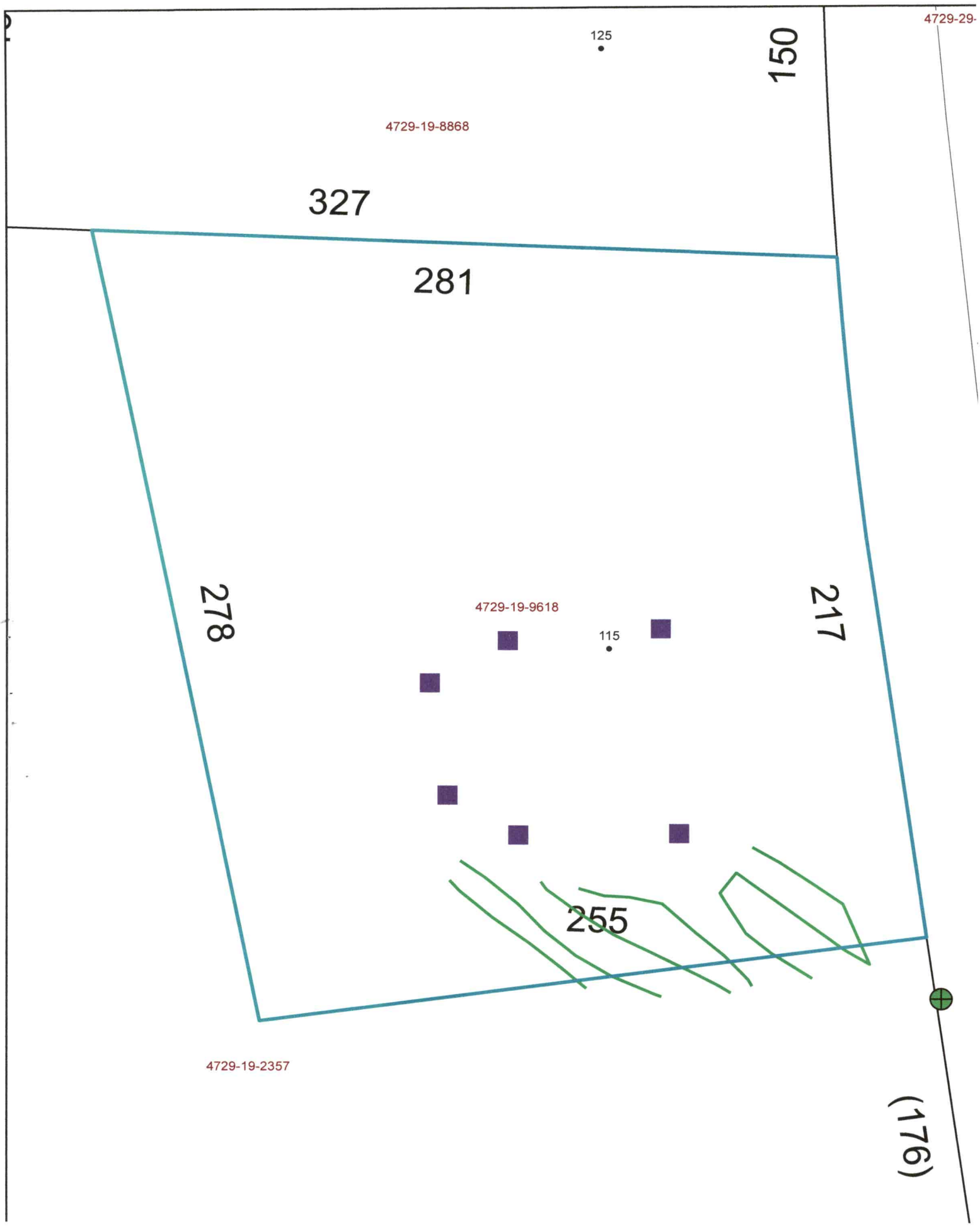
COMMENTS:


42
54
66
70
74
82
106

1"=40

115 Hicks Rd
Statesville, NC
12/22/21 DW




4729-29-
125
150
4729-19-8868
327
281
278
4729-19-9618
115
217
255
4729-19-2357
(176)

12/14 @ 9:30

DW

RECEIVED NOV 2 2 2021

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* AP-323340 $500.00

Application For: (X) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) Septic Improvement Permit ( ) 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: (X) Survey Plat, scaled no more than 1 inch = 60 feet
Place an (X) beside whichever is submitted if applicable ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: Terrance Hamby Address: 160 Bowman Rd, Zip: 28625
Applicant Email: thamby@statesville fence.com Phone: 704-775-5825 Alt. Phone: 704-682-4420
Owner Name: Josh & Gina Sloan Address: 218 Wilson Farm Rd Zip: 28625
Owner Email: N/A Phone: 704-450-7858 Alt. Phone: —

Property Information:

Street Address: 115 Hicks Rd, Statesville, NC 28625
Subdivision Name: N/A Section/Phase: N/A Lot Number: N/A
Driving Directions: 115 North to Wilson Farm Rd on Right then left on Hicks Rd → 1st property 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: 3 ≥ 4
Maximum Number of Occupants: 4
(X) Swimming Pool → Future
( ) Other Addition/Structure:

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

Non-Residential Site Development: Type of Business:
Square Footage of Building: ___ Max. Number of Employees: ___ Max. Number of Seats/Beds/Other: ___

Water Supply: ( ) Replacement Well – Reason:
( ) Multi-connection Well Number of Houses: Number of Persons:

(X) New Well ( ) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed:
( ) No Preference ( ) Alternative (X) 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: [signature] 11/19/2021
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) 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.

☑ **2.** I, Josh Sloan, am the legal owner(s) of the property located at 115 Hicks Rd, identified as PIN (Parcel Identification Number) 4729193337, located in Iredell County, North Carolina.

I do hereby authorize **(print legal representative/company name)** Terrance Hamby, 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.

Josh Sloan
Signature of Owner(s)

11/22/21
Date

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

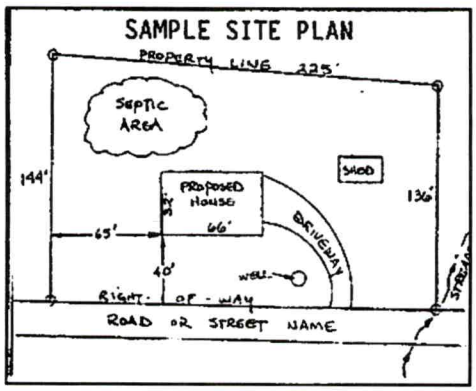
Statesville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

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:

- (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 and well location
- (X) Area you prefer your septic system to be placed
- (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

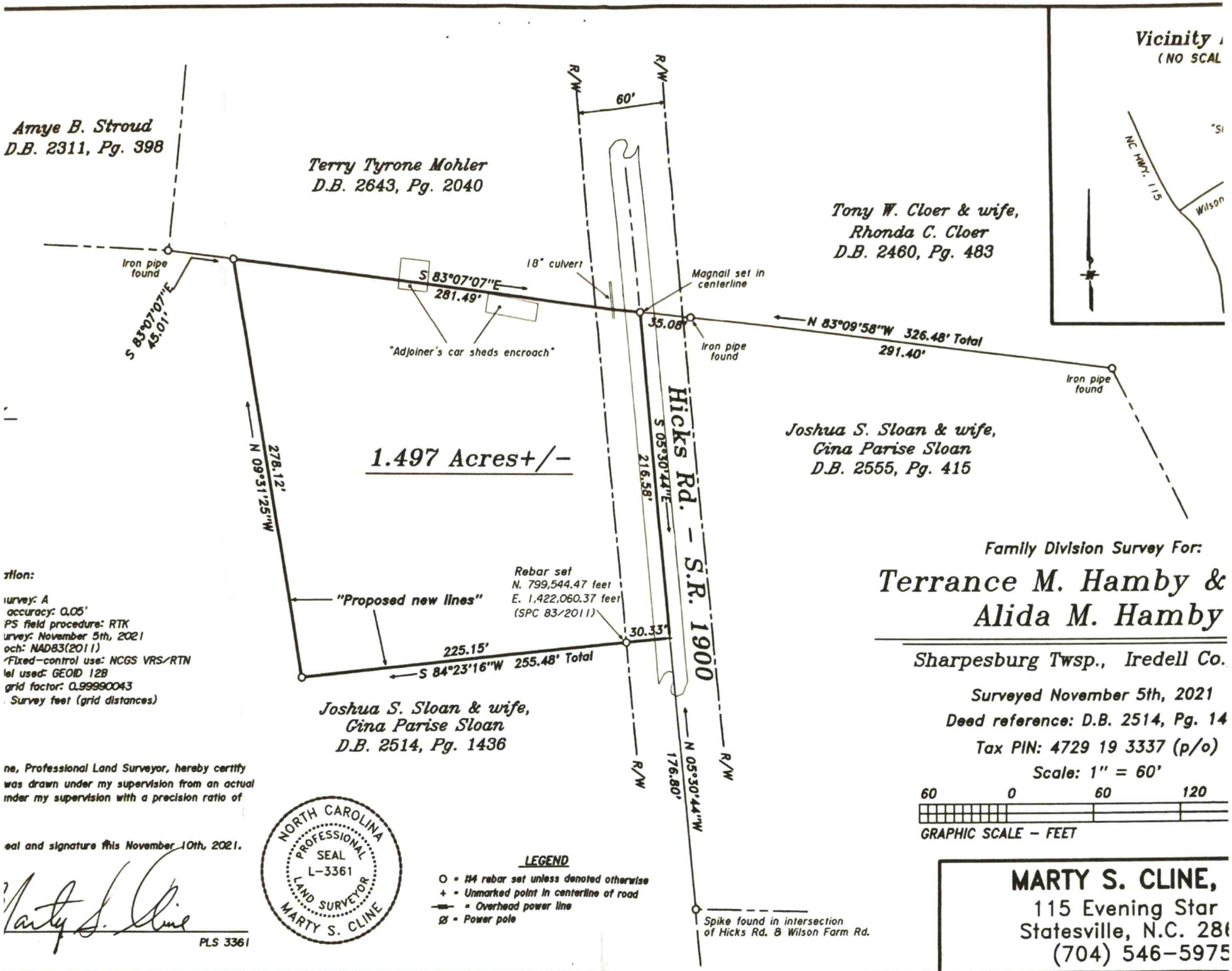
USE THIS SPACE TO DRAW YOUR SITE PLAN

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

PROPERTY LINE 278'
35' SETBACKS
SEPTIC AREA
69'
FUTURE POOL
85'
HOUSE
225'
15' SETBACK
72'
291'
15' SETBA
WELL
Circle Driveway
85
RIGHT OF WAY 31' FROM ROAD
HICKS RD

Signature: Tamara Hurley
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

11/22/2021
DATE



Family Division Survey For:

Terrance M. Hamby & Alida M. Hamby

Sharpesburg Twsp., Iredell Co.

Surveyed November 5th, 2021

Deed reference: D.B. 2514, Pg. 14

Tax PIN: 4729 19 3337 (p/o)

Scale: 1" = 60'

60 0 60 120

GRAPHIC SCALE – FEET

LEGEND

O = #4 rebar set unless denoted otherwise
+ = Unmarked point in centerline of road
—— = Overhead power line
Ø = Power pole

tion:

urvey: A
accuracy: 0.05'
PS field procedure: RTK
urvey: November 5th, 2021
och: NAD83(2011)
Fixed-control use: NCGS VRS/RTN
el used: GEOID 12B
grid factor: 0.99990043
Survey feet (grid distances)

ne, Professional Land Surveyor, hereby certify
was drawn under my supervision from an actual
nder my supervision with a precision ratio of

eal and signature this November 10th, 2021.

Marty S. Cline

PLS 3361

NORTH CAROLINA PROFESSIONAL SEAL L-3361 LAND SURVEYOR MARTY S. CLINE

MARTY S. CLINE,
115 Evening Star
Statesville, N.C. 28
(704) 546-5975

IREDELL COUNTY · NC

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

APPLICATION NUMBER
323340 Issue Date: 11/22/2021

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4729193337.000	115 HICKS RD	Iredell County

Owner Information	Applicant Information
Name: SLOAN JOSHUA S+GINA P	Name: TERRANCE HAMBY
Address:	Address: 160 BOWMAN RD
,	STATESVILLE, NC 28625
Phone:	Phone: (704)775-5825

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0	35	35	15	15	N/A	NO

Remarks
SFD LAND MUST BE SUBDIVIDED BEFORE BLDG PERMIT CAN BE ISSUED

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: 11/22/2021

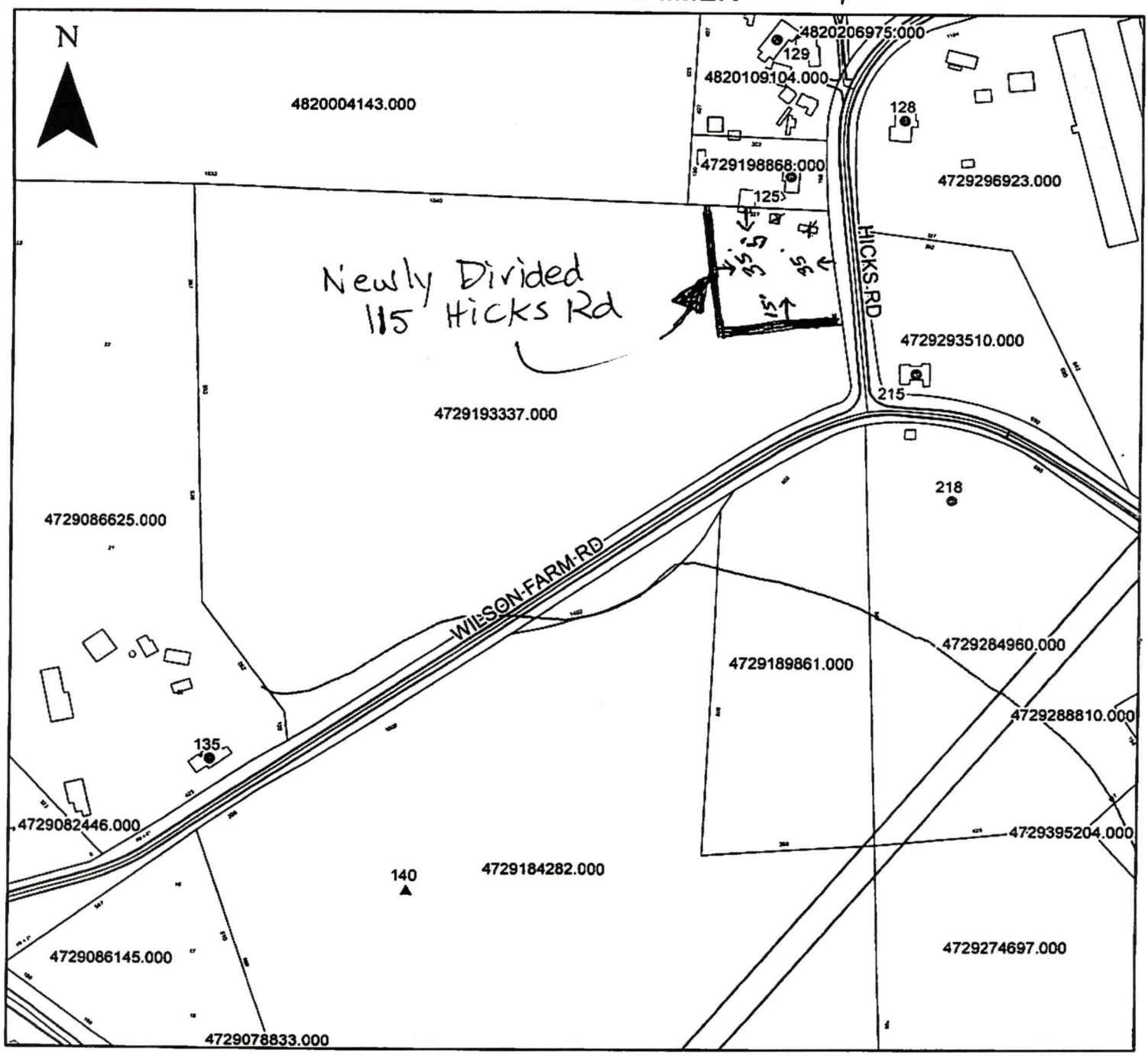
Signature of Owner/Contractor

Permit Number	323340	TOTAL FEES:	$77.25

323540

KH
NS - NO
FL - NO

ZONING DISCLAIMER



Property Address 115 Hicks Rd

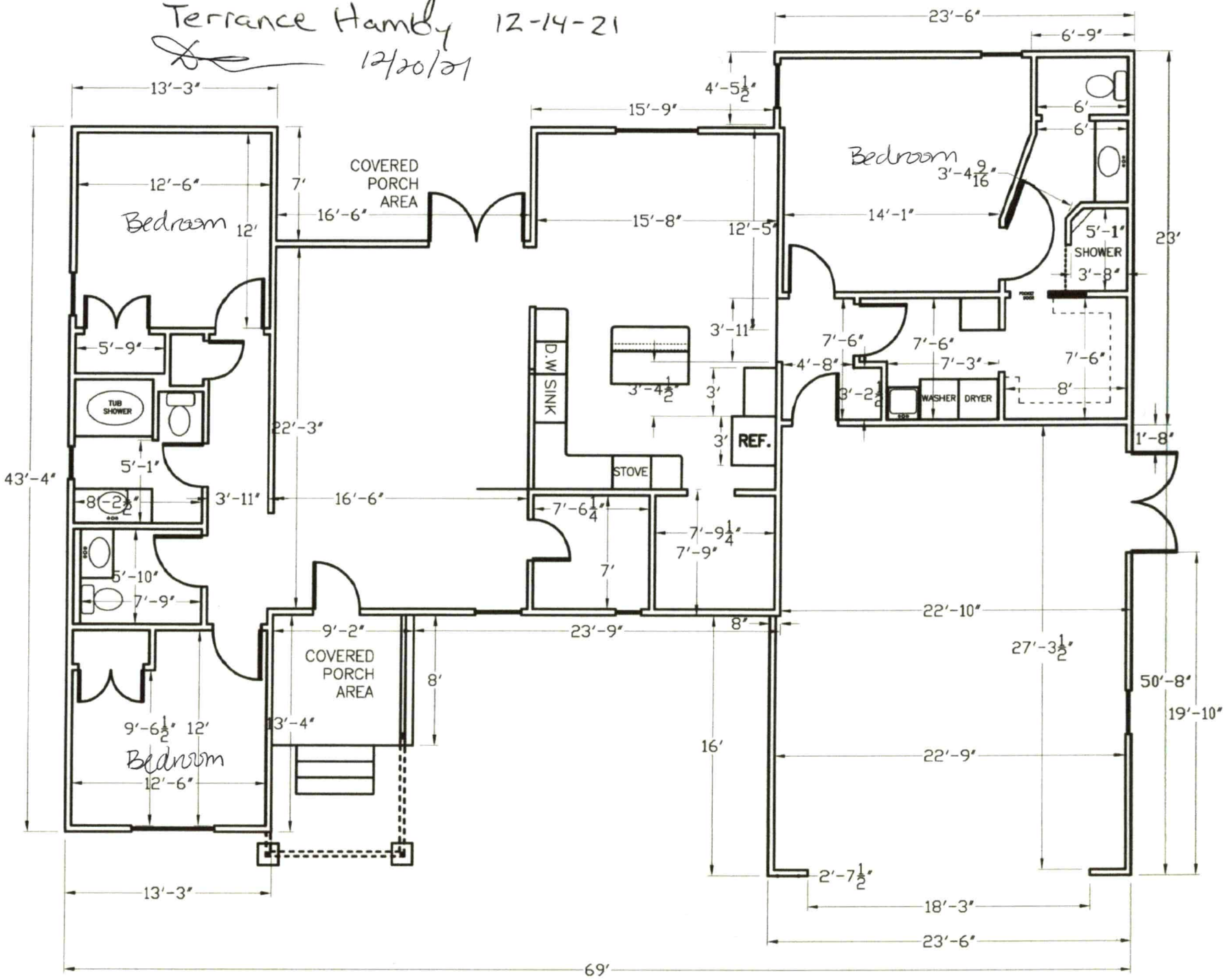
The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. Applicant further acknowledges that the enforcement of deed restrictions, plat conditions, and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

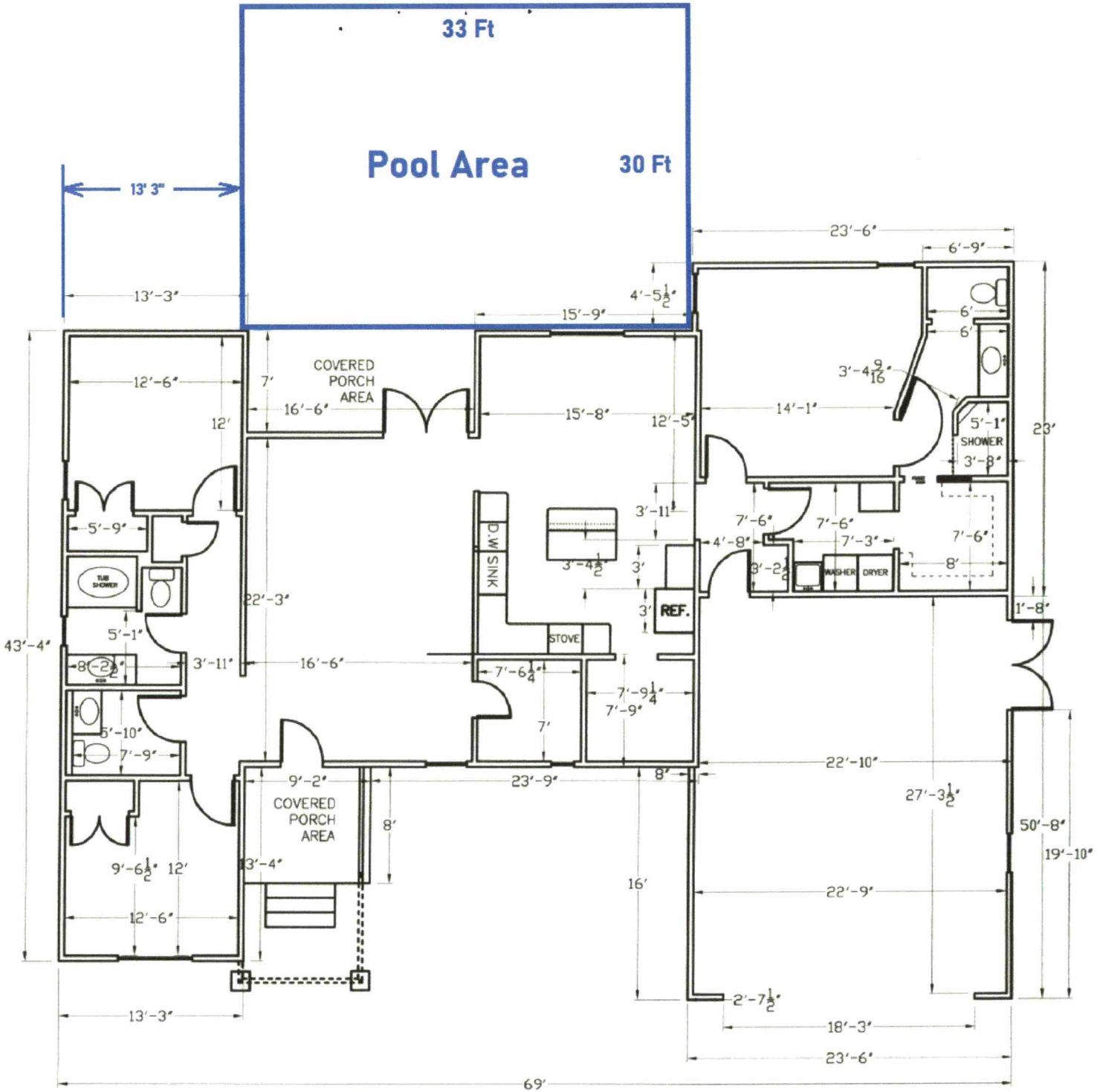
Applicant

11-22-21

Date

Duane Hamby
Terrance Hamby 12-14-21
12/20/21




33 Ft
Pool Area
30 Ft
13' 3"
13'-3"
15'-9"
4'-5½"
23'-6"
6'-9"
6'
6'
3'-4 9/16"
5'-1"
SHOWER
3'-8"
23'
14'-1"
12'-5"
3'-11"
7'-6"
7'-6"
7'-3"
7'-6"
4'-8"
3'-2½"
WASHER
DRYER
8'
1'-8"
12'-6"
7'
COVERED
PORCH
AREA
16'-6"
15'-8"
12'
5'-9"
D.W.
SINK
3'-4½"
3'
3'
REF.
STOVE
22'-3"
43'-4"
5'-1"
8'-2½"
3'-11"
16'-6"
7'-6¼"
7'-9¼"
7'-9"
7'
6'-10"
7'-9"
9'-2"
23'-9"
8'
22'-10"
27'-3½"
50'-8"
19'-10"
COVERED
PORCH
AREA
8'
9'-6½"
12'
13'-4"
16'
22'-9"
12'-6"
2'-7½"
18'-3"
23'-6"
13'-3"
69'

Type: CONSOLIDATED REAL PROPERTY
Recorded: 12/3/2021 1:04:25 PM
Fee Amt: $26.00 Page 1 of 4
Revenue Tax: $0.00
Iredell County, NC
Maureen P. Purcell Register of Deeds

BK 2876 PG 1552 - 1555

NORTH CAROLINA GENERAL WARRANTY DEED

NO OPINION ON TITLE EXPRESSED OR IMPLIED; NO CLOSING HELD

Excise Tax:	
Parcel ID:	Out of 4729-19-3337
Mail/Box to:	
Prepared by:	Jared E. Stone, Simon Law
Brief description for the Index:	+/-1.497 acres Hicks Road

THIS GENERAL WARRANTY DEED ("Deed") is made on the 1st day of December 2021, by and between:

GRANTOR	GRANTEE
Joshua S. Sloan and spouse, Gina Parise Sloan, 218 Wilson Farm Road Statesville, NC 28625	Terrance M. Hamby and spouse, Alida M. Hamby 160 Bowman Road Statesville, NC 28625

FOR VALUABLE CONSIDERATION paid by Grantee, the receipt and legal sufficiency of which is acknowledged, Grantor by this Deed does hereby grant, bargain, sell and convey to Grantee, in fee simple, all that certain lot, parcel of land or condominium unit in ____Iredell_____ County, North Carolina and more particularly described as follows (the "Property"):

See Exhibit A

All or a portion of the Property was acquired by Grantor by instrument recorded in Book 2221 page 694.

All or a portion of the Property ☐ includes or ☒ does not include the primary residence of a Grantor.

NC Bar Association Form No. 3 © Revised 11/2020
Printed by Agreement with the NC Bar Association

North Carolina Bar Association – NC Bar Form No. 3
North Carolina Association of Realtors, Inc. – Standard Form 3

R.O.T.C.

Page Count: 4
☐NS ☐PQ ☐SI

TO HAVE AND TO HOLD the Property and all privileges and appurtenances thereto belonging to Grantee in fee simple. Grantor covenants with Grantee that Grantor is seized of the Property in fee simple, Grantor has the right to convey the Property in fee simple, title to the Property is marketable and free and clear of all encumbrances, and Grantor shall warrant and defend the title against the lawful claims of all persons whomsoever, other than the following exceptions:

Easements, Deeds of Trust, or other restrictions of record.

IN WITNESS WHEREOF, Grantor has duly executed this North Carolina General Warranty Deed, if an entity by its duly authorized representative.

Name: Joshua S. Sloan

Name: Gina Parise Sloan

Name:

Name:

Entity Name

By:
Name:
Title:

By:
Name:
Title:

STATE OF NORTH CAROLINA, COUNTY OF IREDELL

I Patricia C. Abbott, a Notary of the above state and county, certify that the following person(s) personally appeared before me on the 1st day of December, 2021 each acknowledging to me that he or she signed the foregoing document, in the capacity represented and identified therein (if any): Joshua S. Sloan, and spouse Gina Parise Sloan.

Affix Notary Seal/Stamp

Patricia C. Abbott
Notary Public (Official Signature)
My commission expires: 10/6/23

Patricia C Abbott
Notary Public
Iredell County, NC
My commission Expires 10/6/23

NC Bar Association Form No. 3 © Revised 11/2020
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North Carolina Bar Association – NC Bar Form No. 3
North Carolina Association of Realtors, Inc. – Standard Form 3

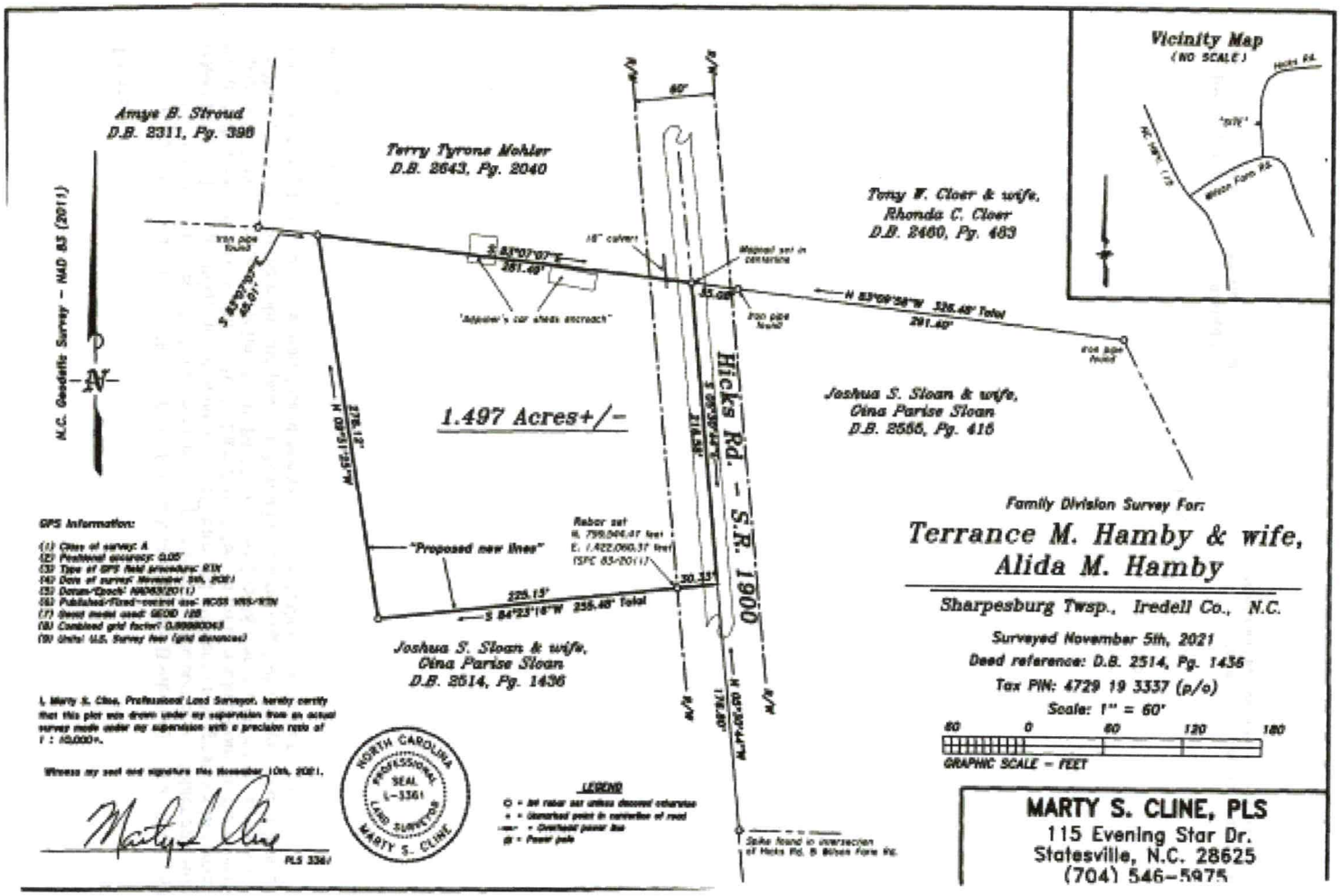
Exhibit A

Beginning at a #4 rebar set in the line of Terry Tyrone Mohler (Deed Book 2643, Page 2040); said rebar being located South 83-07-07 East 45.01 feet from an iron pipe found in the corner of Mohler and Amye B. Stroud (Deed Book 2311, Page 398); thence South 83-07-07 East 281.49 feet to a Magnail set in centerline of Hicks Road (S.R. 1900); thence South 05-30-44 East 216.58 feet to an unmarked point in the centerline of Hicks Road (S.R. 1900); thence a new line South 84-23-16 West 255.48 feet to a #4 rebar set; thence North 09-31-25 West 278.12 feet to the point and place of Beginning, containing 1.497 acres more or less, according to a survey by Marty S. Cline, Professional Land Surveyor, L-3361, dated November 5, 2021.

PIN: out of 4729-19-3337

NC Bar Association Form No. 3 © Revised 11/2020
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North Carolina Bar Association – NC Bar Form No. 3
North Carolina Association of Realtors, Inc. – Standard Form 3



THIS MAP MAY NOT BE A CERTIFIED SURVEY AND HAS NOT BEEN REVIEWED BY A LOCAL GOVERNMENT AGENCY FOR COMPLIANCE WITH ANY APPLICABLE LAND DEVELOPMENT REGULATIONS AND HAS NOT BEEN REVIEWED FOR COMPLIANCE WITH RECORDING REQUIREMENTS FOR PLATS.