IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 226794

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

PIN # 4730494487

APPLICANT/OWNER: Gregory Syverson / Freedom Homes APPLICANT ADDRESS: 1124 Charlotte Hwy

SITE ADDRESS: 199 Hazelton Loop Mooresville, NC 28117 PHONE: 704-230-9537 ALT. PHONE 704-881-2326

SITE DIRECTIONS: Brawley School Rd → L on Canvasback → L on Regency Rd → lot at end on R SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: Regency Lake Village SECTION: C LOT # 7 LOT AREA: — DESIGN FLOW: 360gpd L.T.A.R.: 3 (repair 3)

Septic Tank 1000 (gal) STB Date

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines 5 Linear Ft 200'

Trench Width 24" Trench Bottom Depth(Low side) 30"/36" high side Gravel Depth N/A

☑ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI

System Description: PPBPS gravity

Repair System Description: LPP PPBPS

Maintenance Agreement Required: ☐ YES ☑ NO

☑ GRAVITY ☐ PRESSURE

☑ Residence No. Bedrooms 3

☐ Business No. Persons 6

☐ Other No. Employees

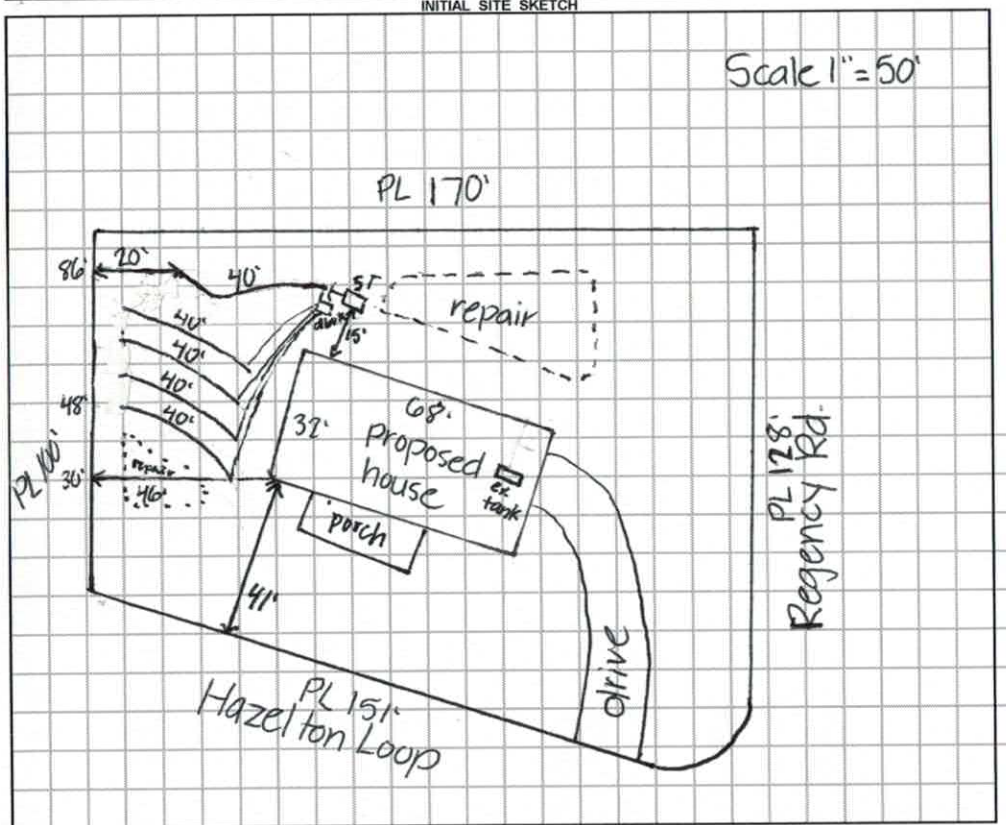
☐ Slab ☑ Crawl Space

☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☑ Community

Comments / Conditions: Install PPBPS gravity system with drain lines on contour. Pump + crush existing septic tank prior to construction of home. Do not build in repair area.

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: Kristy Syverson Date: 6-21-17

IMPROVEMENT PERMIT by: Pamela Watson Date: 6-20-17

AUTHORIZATION TO CONSTRUCT by: Pamela Watson Date: 6-20-17

Installed by: Craig Thompson-Grading

OPERATION PERMIT by: Benjamin D. Bolton Date: 9/6/2017

Existing System Inspected by: Date:

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

Sheet 1 of 1
PROPERTY ID #: 4730419457
COUNTY: Buncombe

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

OWNER: Greg Swenson / Freedom Homes
APPLICATION DATE: 5/2/17
ADDRESS: 1057 Bently RD MVL
DATE EVALUATED: 6/1/17
PROPOSED FACILITY: House SDR
PROPOSED DESIGN FLOW (.1949): 360 gpd
PROPERTY SIZE: ~
LOCATION OF SITE: 199 Hazelton Loop. MVL
PROPERTY RECORDED: Yes
WATER SUPPLY: ☐ Private ☑ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LSS 2-3%	0-4	scl wsbk	ss sp fr sdf	2.5YR4/6	48	~	~	ps .3
		4-32	c sbk	ss sp fm					
		32-48	cl wsbk	ss sp fr					
2	LSS 5%	0-5	scl wsbk	ss sp sef	" "	48	~	~	ps .3
		5-30	c sbk	fm					
		30-49	cl wsbk						
3	LSS 4-5%	0-2	top ~	ss sp sef	" "	48	~	~	ps .3
		2-28	c wsbk	fm					
		28-48	cl wsbk						
4	LSS 5%	0-3	scl wsbk	ss sp sef	" "	48	~	~	ps .3
		3-30	c sbk						
		30-48	cl wsbk						

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	200	200
System Type(s)	T IV pump	T IV pump
Site LTAR	.3	.3

OTHER FACTORS (.1946): Ditch.
SITE CLASSIFICATION (.1948): ps. .3
EVALUATED BY: Bullins
OTHER(S) PRESENT:

COMMENTS:

199 Hazelhurst Dr.

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope) CV (Convex Slope) D (Drainage Way) DS (Debris Slump) FP (Flood Plain) FS (Foot Slope) H (Head Slope) L (Linear Slope) N (Nose Slope) R (Ridge) S (Shoulder Slope) T (Terrace)	I	S (Sand) LS (Loamy Sand)	1.2 - 0.8	0.6 - 0.4	SEXP (Slightly Expansive) EXP (Expansive)	G (Single Grain) M (Massive) CR (Crumb) GR (Granular) SBK (Subangular Blocky) ABK (Angular Blocky) PL (Platy) PR (Prismatic)
	II	SL (Sandy Loam) L (Loam)	0.8 - 0.6	0.4 - 0.3		
	III	Si (Silt) SiCL (Silty Clay Loam) CL (Clay Loam) SCL (Sandy Clay Loam) SiL (Silt Loam)	0.6 - 0.3	0.3 - 0.15		
	IV	SC (Sandy Clay) SiC (Silty Clay) C (Clay) O (Organic)	0.4 - 0.1 None	0.2 - 0.05 None		

MOIST	WET
VFR (Very Friable)	NS (Non-sticky)
FR (Friable)	SS (Slightly Sticky)
FI (Firm)	S (Sticky)
VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
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.

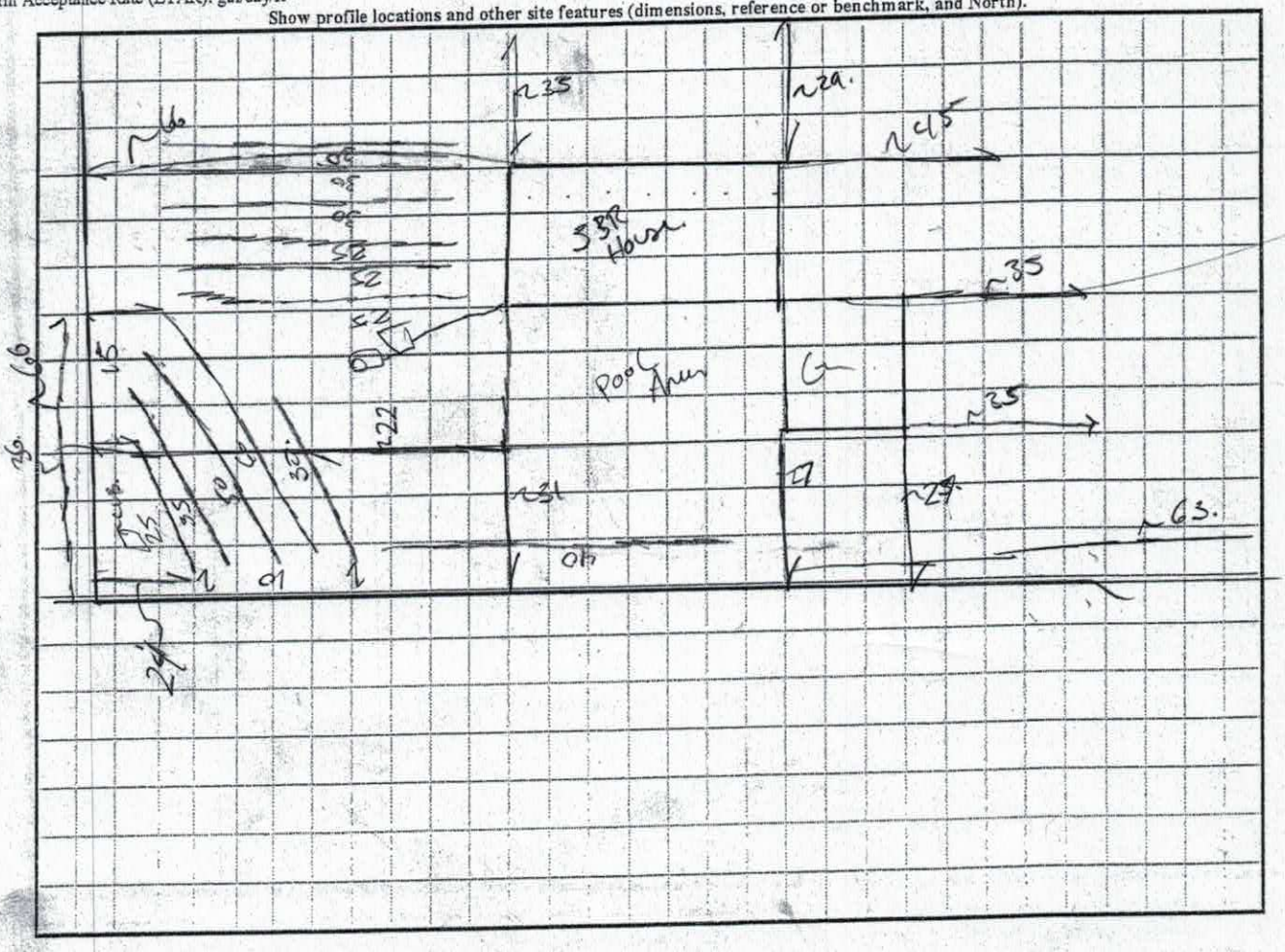
NOTES

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).



30' cir slight Incline u/Bank flows 25ft off pad

DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet 1 of 1
PROPERTY ID #: 4646089805
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Gregory Syverson
ADDRESS: 199 Hazelton Loop
PROPOSED FACILITY: SFR
PROPOSED DESIGN FLOW (.1949): 360gpd
LOCATION OF SITE: Brawley School, t/L Canvas Back, t/L Regency, lot at end on R
WATER SUPPLY: ☐ Private ☑ Public ☑ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

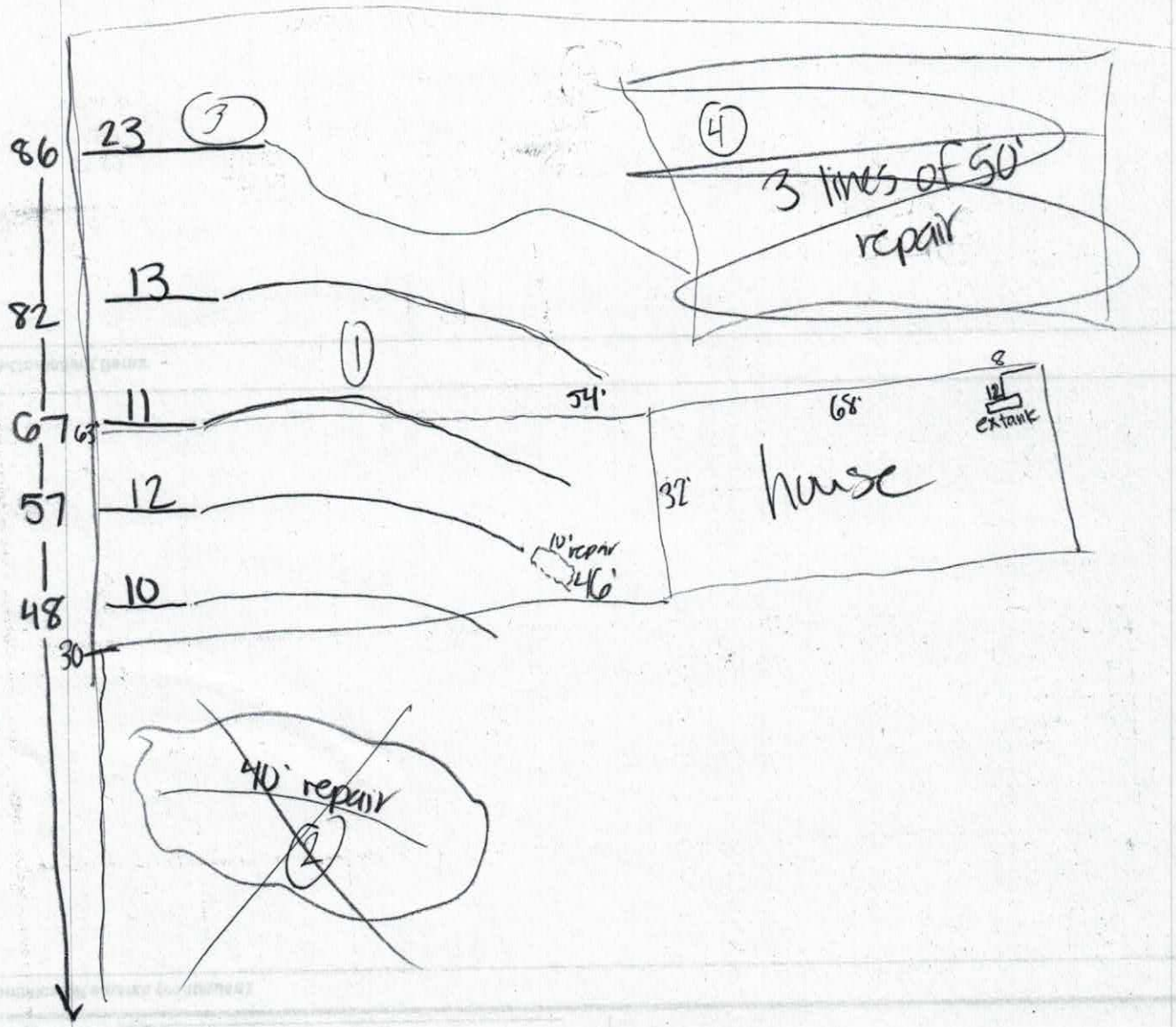
APPLICATION DATE: 5-2-17
DATE EVALUATED: 5-15-17
PROPERTY SIZE: .48ac
PROPERTY RECORDED: YES

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	13% LS/HS	0-11	WSBK SCL	Fr,SS,SP,SEXP	—	48	—	—	PS .3
		11-22	SBK C	Fr,SS,SP,SEXP					
		22-48	WSBK CL^PC	Fr-Fi,SS,SP,SEXP					
2	6% FS	0-15	WSBK SCL	Fr,SS,SP,SEXP	—	48	—	—	PS .3
		15-48	WSBK CL^PC	Fr,SS,SP,SEXP					
3	14% LS/HS	0-9	WSBK SCL	Fr,SS,SP,SEXP	—	48	—	—	PS .3
		9-20	SBK C	Fr,SS,SP,SEXP					
		20-48	WSBK CL^PC	Fr,SS,SP,SEXP					
4	7% SS	0-14	WSBK SCL	Fr,SS,SP,SEXP	—	48	—	—	PS .3
		14-23	SBK C	Fr,SS,SP,SEXP					
		23-48	WSBK CL^PC	Fr,SS,SP,SEXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	50% reduc.	LPP PPBPS
Site LTAR	.3	.3

OTHER FACTORS (.1946): PS
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Kayla Wilson
OTHER(S) PRESENT:

COMMENTS:



road

~~*repair exempt~~

RECEIVED MAY 2 - 2017

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

(THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED - APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS)

Paid $500.00

1. APPLICATION FOR: ✓ Improvement Permit ✓ Authorization To Construct ___ Existing System Inspection

226794

2. Page 2: *Site Plan Worksheet* Form MUST Accompany This Application
   The following optional attachments may also be submitted: ___Survey Plat, Scaled no more than 1 Inch = 60 Feet
   Place check ( ) beside whichever is submitted if applicable ___Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. Applicant Information:

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Freedom Homes	1124 Charlotte Hwy Troutman	704-528-7960	704-881-2326 Kimberly
Owner Name	Mailing Address	Home Phone #	Alternate Phone #
Gregory Syverson	1037 Briarhill Rd Mooresville	704-230-9587	

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
~~218 Regency Road~~ 199 Hazelton Loop Mooresville	Regency Lake Village	Lot 7

Driving Directions: I77 toward Charlotte, Exit 36 Toward Lincolnton, Merge onto River Hwy/NC 150 Toward Lake Norman Air Port ⓛ Williamson Rd ⓡ Brantley School Rd ⓛ Curves BACK ⓡ Regency Rd (Site is on Right)

5. RESIDENTIAL Site Development Information: *(Check or Complete ALL that apply)*

- ☒ New, Single Family Residence
- ( ) New, Multi-Family Residence
- ( ) Expansion of Existing Septic System
- ( ) Repair To Failing Septic System due to _____
- ( ) Other _____

Maximum Number of Bedrooms 3
Maximum Number of Occupants 3
If Expansion, Current Number of Bedrooms ___

- ☒ Crawl Space Foundation?
- ( ) Concrete Slab Foundation?
- ( ) Basement w/Plumbing?
- ( ) Basement w/out Plumbing?

IF Non-Residential Site Development: Type of Business _____
Square Footage of Building _____
Maximum Number of Employees _____
Maximum Number of Seats _____

6. Proposed Water Supply:

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

7. Desired Septic System Type: *(You may rank in order of preference, if any)* ( ) EXISTING SYSTEM installed _____ Year

( ) Alternative ☒ Conventional ( ) Innovative ( ) Modified Conventional ( ) Other _____

8. Please Answer The Following ( ) Yes (✓) No Does the site contain any jurisdictional wetlands?
   To The Best of Your Ability: ( ) Yes (✓) No Is any non-domestic sewage (i.e. industry) to be generated?
   ( ) Yes (✓) No Is the site subject to approval by any other public agency?

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

9. Signature: Kimberly Sneed
   Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

05-02-17
DATE

AUTHORIZATION TO ACT AS AGENT FOR OWNER

Any application/document/permit requiring a signature must be signed by the property owner or their authorized agent. This form shall be provided by the owner to allow specified individuals to act as agents for the owner. This form allows the specified individuals to sign or receive any application/document/permit on behalf of the owner. This form allows the authorized agent to make decisions on behalf of the owner pertaining to modifications of permits in the field. It is the responsibility of the owner to assure that any/all permit conditions specified on permits issued by this Division are followed.

I, Roger McGuffey, am the legal owner of the property located at 219 Rogersy Rd Mooresville NC 28117, identified as PIN(Parcel Identification Number) 4646089805.000, located in Iredell County, North Carolina.

I do hereby authorize (print authorized agent/company name) Freedom Homes, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

1. Improvement Permit (IP)/ Authorization to Construct (AC).
2. Application for soil-site evaluation (new/repair).
3. Application/permit for water well/well abandonment.
4. Application for existing system
5. Application for Improvement Permit (IP)/ Authorization to Construct (AC).

I agree to abide by any and all decisions and/or conditions between the agent acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division. This form must be fully executed before the individuals specified above will be recognized as the authorized agent.

X _____ 5/1/2017
Signature of Owner Date

_____ _____
Signature of Witness Date

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION:*

SITE PLAN WORKSHEET

SEE THE "SAMPLE SITE PLAN" BELOW. *INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!*

Place an (X) beside each item as you complete the site plan:

_____ **Property Line measurements are clearly identified...** _____ **All proposed structures are indicated...**

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

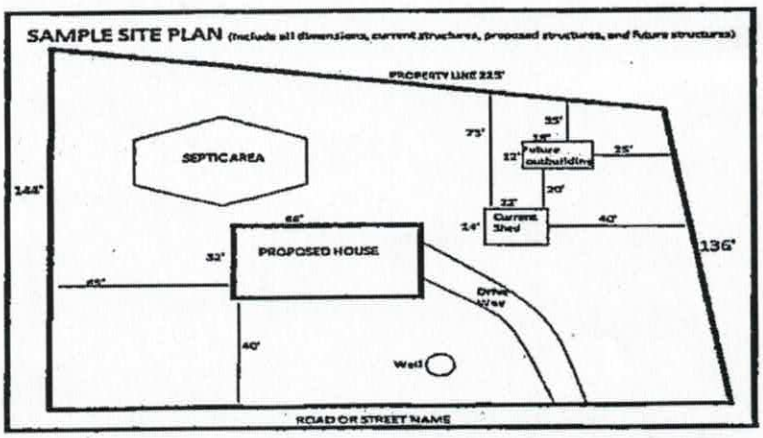
_____ **Front and side setbacks from property line...** _____ **Preferred driveway location and configuration, preferred well location...**

_____ **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

Attached →

Signature: Kimberly Spruel
REQUIRED property owner or owner's legal representative signature.

05-02-17
DATE

PERMIT TO INSTALL SEPTIC TANK

Permit NO. _____ Permit Date 18 Nov 1970

Owner Regina Lake Address Charlotte

Installed By Ervin Address Shelby

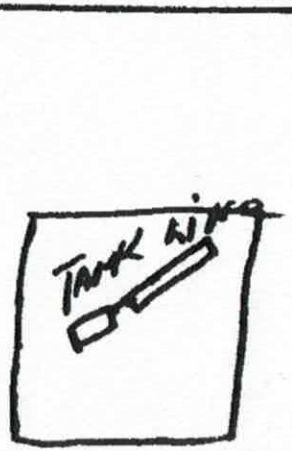
Location of Property Lot 7 Blk C

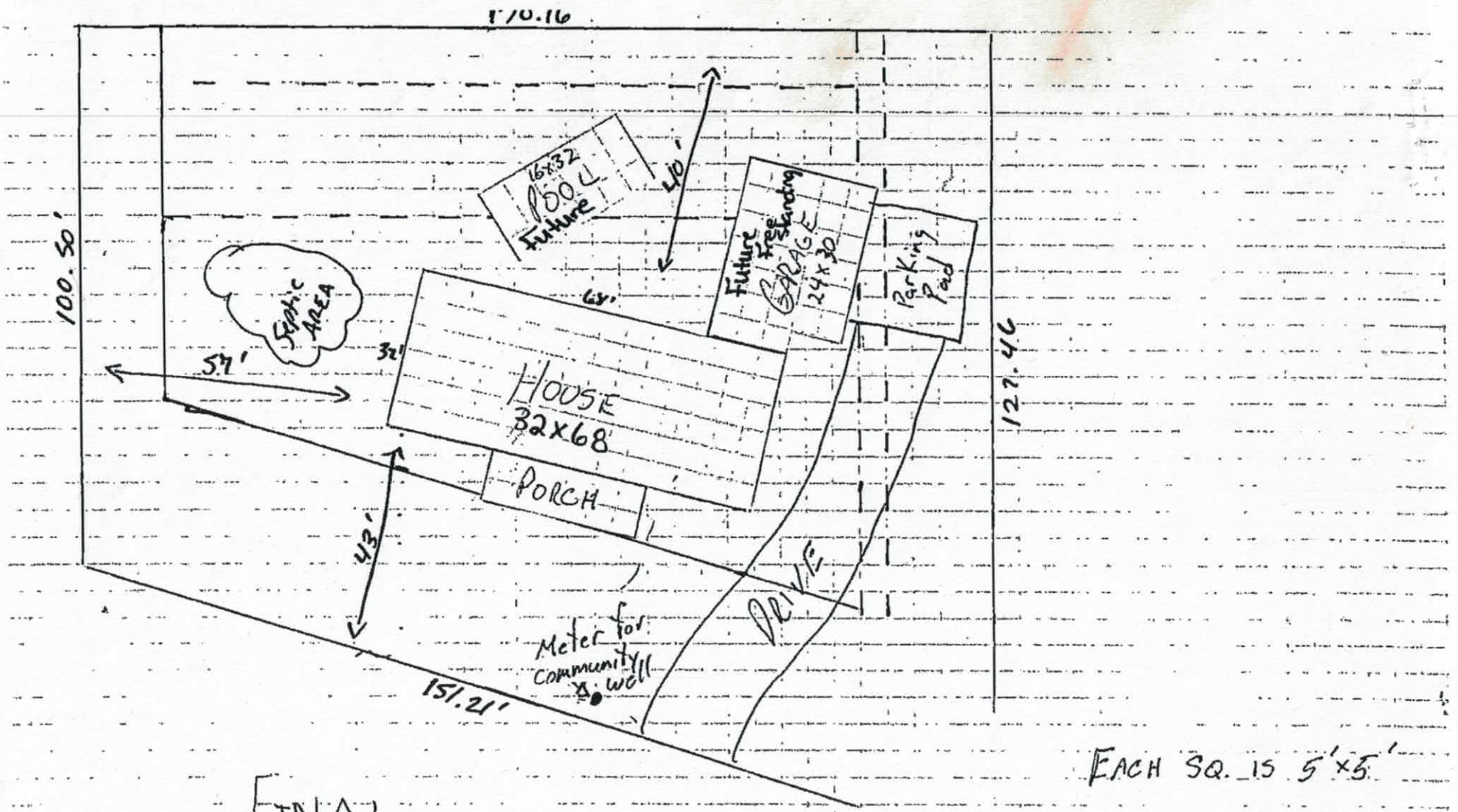
Tank		Capacity		Length of Lines		Fixtures	
Block	( )	1000	( )	225'	( )	No. of Baths	( )
Precast	(✓)	1250	( )	250'	( )	Dishwasher	( )
		1500	( )	Other _____		Garbage Grdr.	( )
		Other _____				Other _____	

NOTIFY HEALTH DEPARTMENT AT LEAST EIGHT HOURS BEFORE TANK IS TO BE INSPECTED.

Final Inspection 18 Nov 1970 Approved (✓) Disapproved ( )

Remarks _____





EACH SQ. IS 5'x5'

FINAL

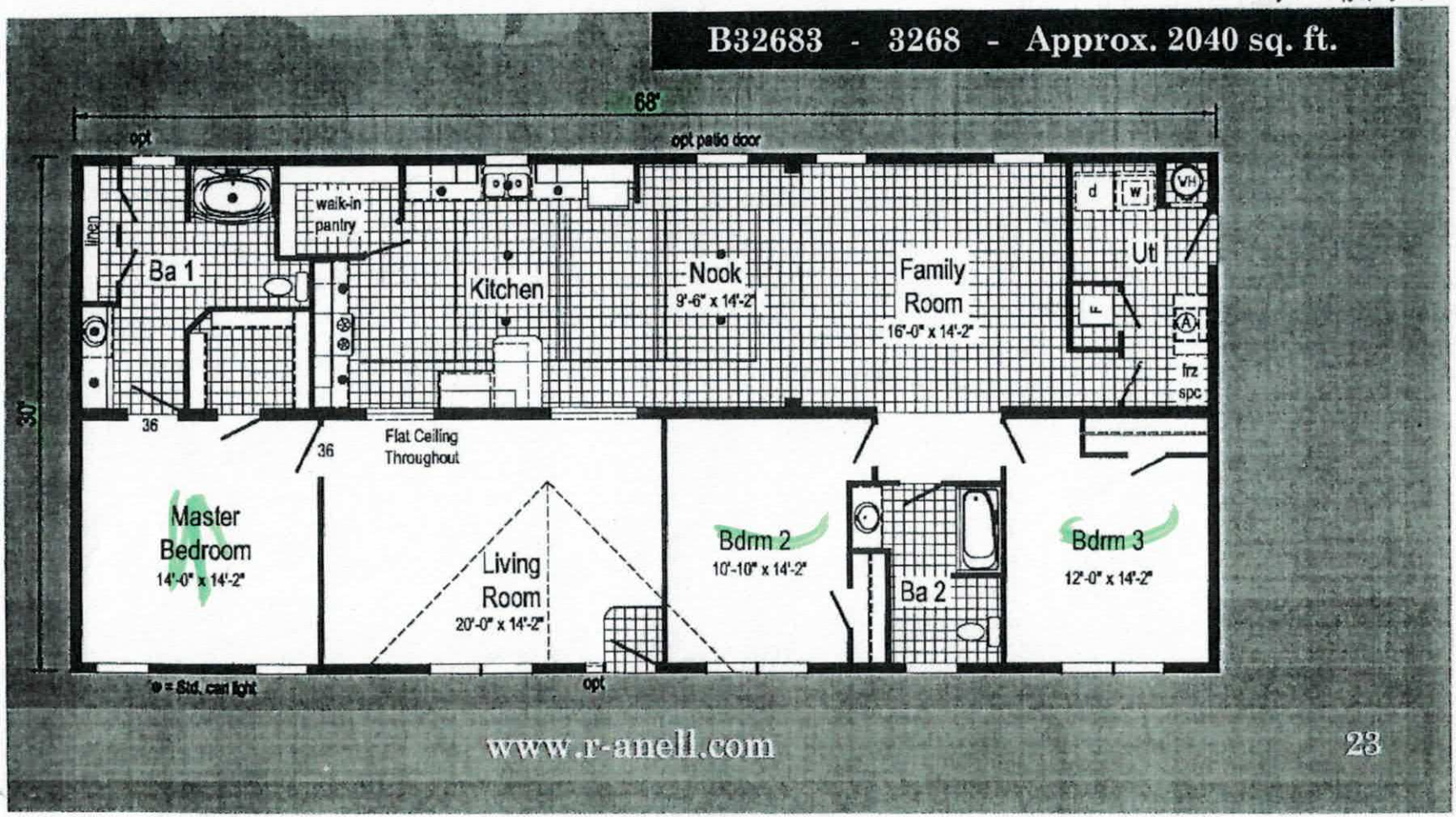
Syverson

Kimberly Sneed

Acknowledgement Of
Plans Submittal ONLY!
Ref # 226794 Date

Date 6/14/2017

6-20-17



IREDELL COUNTY

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

APPLICATION NUMBER
226794
Issue Date: 05/02/2017

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4646089805.000	218 REGENCY ROAD, MOORESVILLE, NC	IREDELL COUNTY

199 Hazelton Loop - Mrsvl

Owner Information	Applicant Information
Owner: MCGUFFEY ROGER D+	Applicant: FREEDOM HOMES-TROUTMAN
Address: 196 HAZELTON LOOP MOORESVILLE, NC 28117	Address: 1124 CHARLOTTE HWY TROUTMAN, NC 28166
Phone:	Phone: 704-883-6148

Use Requested	Zone Code
MODULAR	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
	35.00	35.00	25.00	15.00	CACL	X

Remarks:

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

Applicant: _____ Date: _____

Permit Number	101416	TOTAL FEES:	$ 77.25