ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP-308489

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

PIN # 4731 - 22 - 2099 2454

APPLICANT/OWNER: Karla Hodge APPLICANT ADDRESS: 174 Timber Lake Drive Troutman NC 28166

SITE ADDRESS: 138 Talley Ridge Drive Troutman NC 28166 PHONE: 269-569-0305 ALT. PHONE -

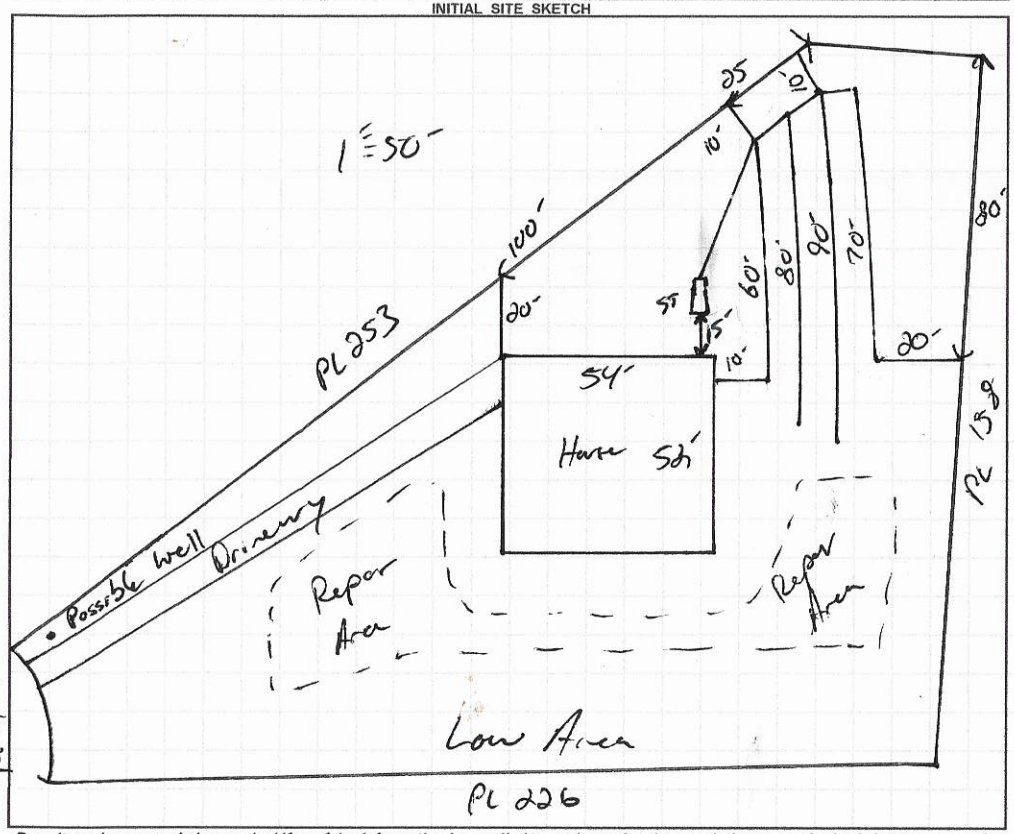
SITE DIRECTIONS: 21/115 South through troutman R on Talley St L on talley Ridge SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Talley Ridge SECTION: - LOT # 8 LOT AREA: 0.68 DESIGN FLOW: 360gpd L.T.A.R.: .3

Septic Tank	1000 (gal)	STB	Date	☒ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☒ 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:	50% Reduction	☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	4	Linear Ft: 300	Maintenance Agreement Required: ☐ YES ☒ NO	☐ Slab	☒ Crawl Space		☐ Community
Trench Width	36"	Trench Bottom Depth(~~Low side~~)	Max 36"	Gravel Depth -	☒ GRAVITY ☐ PRESSURE	☐ Basement w/ plumbing	☐ Basement w/o plumbing		

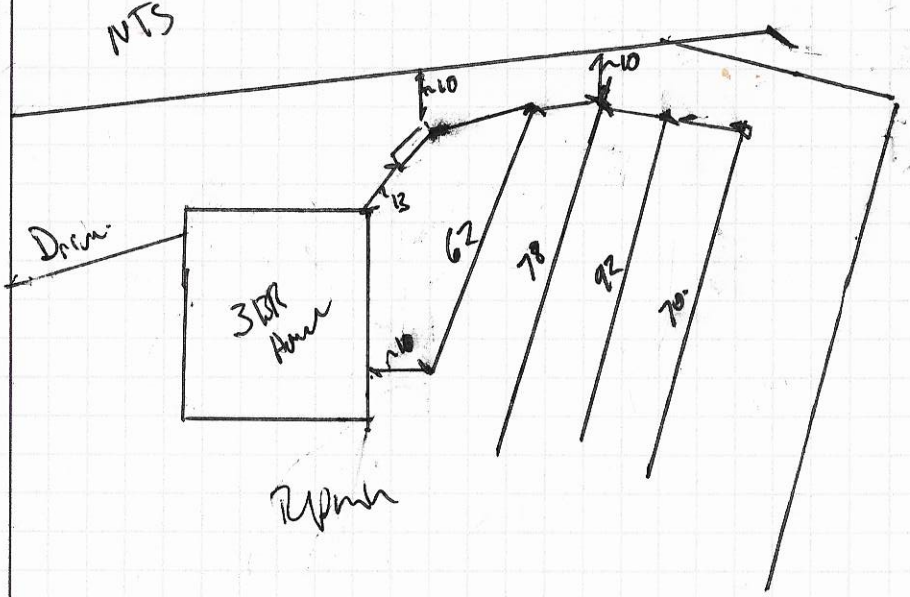
Comments / Conditions: Install Drainlines on Center of land and use Serial distribution.

INITIAL SITE SKETCH



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.



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 plot 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: [signature] Date: 8/21/20 Installed by: Byers Rentals

IMPROVEMENT PERMIT by: [signature] Date: 8-17-2020 OPERATION PERMIT by: [signature] Date: 1/7/2021.

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 8-17-2020 Existing System Inspected by: Date:

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

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

Sheet 1 of 1
PROPERTY ID #: 473/222099
COUNTY: Iredell

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

OWNER: Karla Hodge
ADDRESS: 179 Timber Lake Dr Troutman
PROPOSED FACILITY: 3 BR
PROPOSED DESIGN FLOW (.1949): _____
LOCATION OF SITE: Valley Ridge
APPLICATION DATE 6-16-2020
DATE EVALUATED: 7-22-20
PROPERTY SIZE: 0.68 Ac
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	SS S-6%	0-6	SBL SCL	F SSSPSap					
		6-30	SBL C						
		30-48	SBL CL						
					M/A	48+	Sap Inc @ 30+	M/A	PS .3
2	SS S-6%	0-6	SBL SCL						
		6-32	SBL C						
		32-48	SBL CL						
					M/A	48+	M/A	M/A	PS .3
3	SS S-6%	0-8	SBL SCL						
		8-32	CBL C						
		32-48	CBL CL						
					M/A	48+	M/A	M/A	PS .3
4	SS S-6%	0-8	SBL SCL						
		8-30	SBL C						
		30-48	SBL CL						
					4/B Mottles @ 30-35"	48+	M/A	M/A	PS .25

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	300'	240'
System Type(s)	25% Reduction	50% Reduction
Site LTAR	.3	.25

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Boggs
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) 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	0.2 - 0.05		
			None	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.

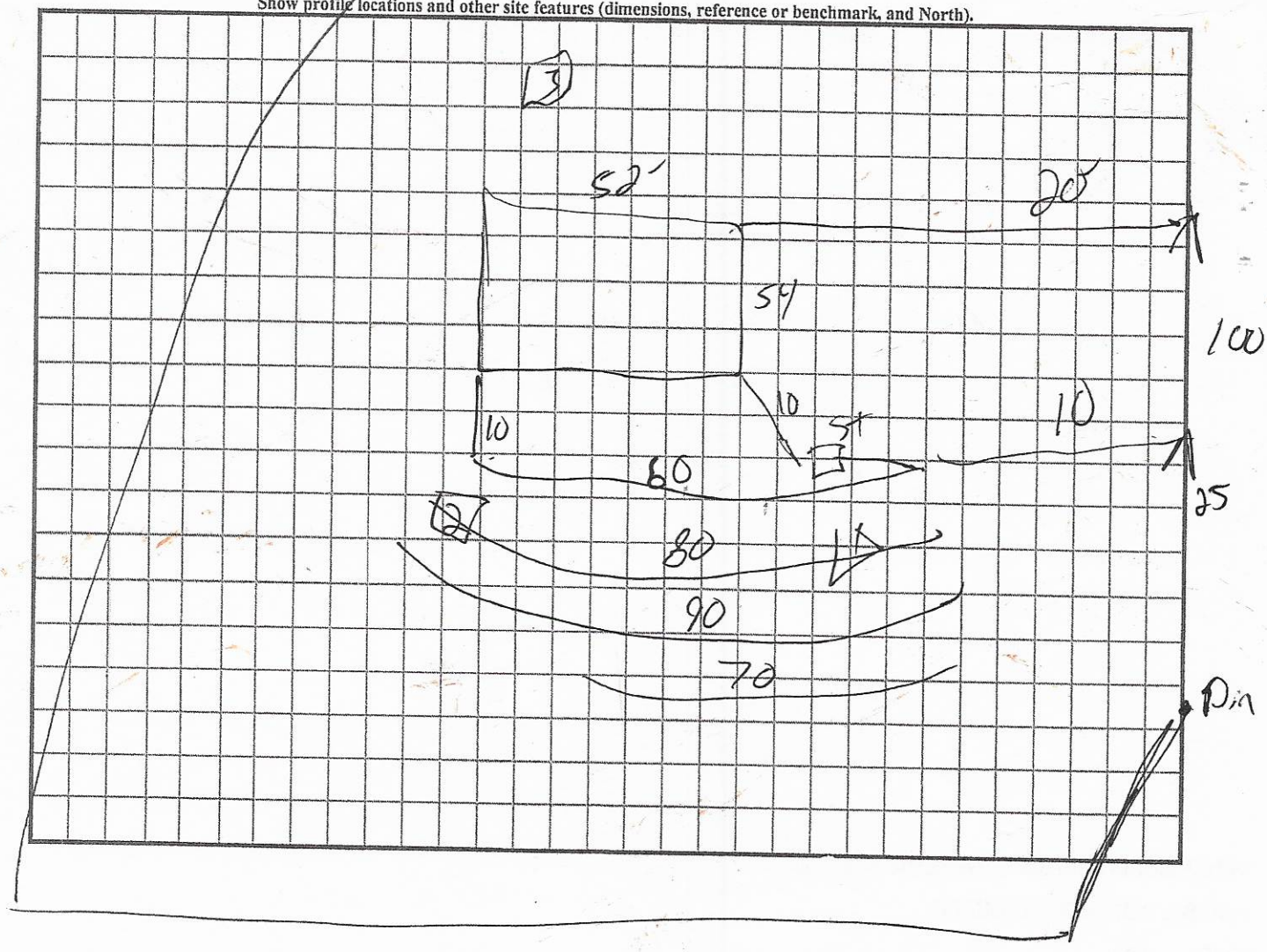
NOTES

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).



RECEIVED JUN 23 2020

AP-305300
$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 ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: Karla Hodge Address: 179 Timber Lake Dr Troutman Zip: 28166
Applicant Email: thekarlahodge@gmail.com Phone: 269-569-0305 Alt. Phone: _____
Owner Name: _____ Address: _____ Zip: _____
Owner Email: _____ Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 138 Talley Ridge Drive Troutman, NC 28166
Subdivision Name: Talley Ridge Section/Phase: _____ Lot Number: 8
Driving Directions: 77 South to Exit 42 - West on 21 to Talley St. - Turn Left. Talley Ridge is on left. Lot is at cul de sac

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: _____

CHECK FOUNDATION TYPE
(X) Crawl Space Foundation
( ) 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: _____
(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: Karla Hodge 6-16-20
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

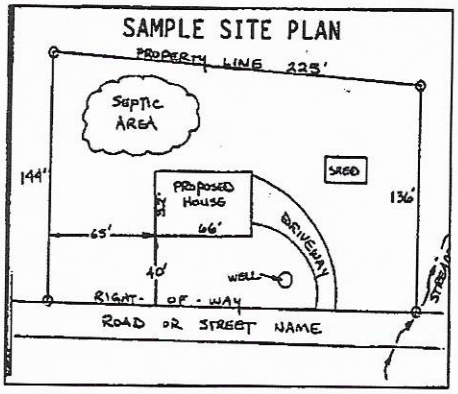
SVC

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:

See attached also

- (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**

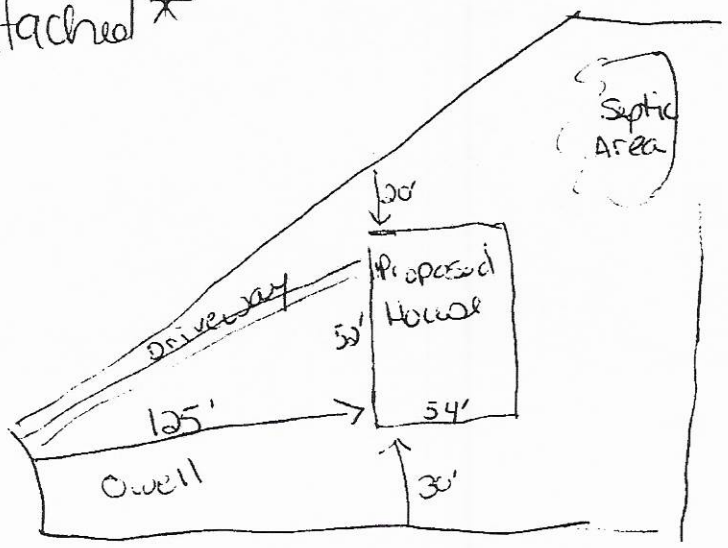
Circle N/A on the following if appropriate:

- **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

* See Attached *



Signature: Kara Hodge

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

6-16-20

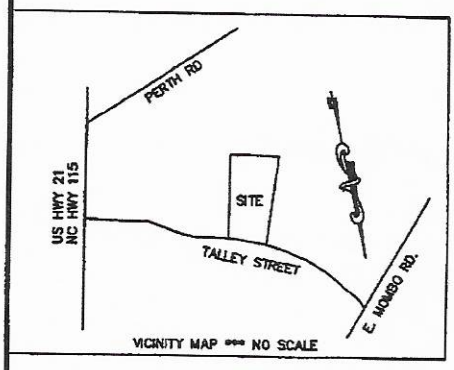
DATE

DAS DON ALLEN & ASSOCIATES, P.A.
"Since 1971"
Commercial * Residential * Mortgage Surveys * Multi-Family
Construction Staking * Subdivision Design * Topographical
131 Crosslake Park Drive – Suite 102 * Mooresville * NC * 28117
(704) 664-7029 (704) 664-8041 Fax

I, certify that this map was drawn under my supervision from an actual survey made under my supervision recorded in deed book 2305, page 64, and/or plat book 52, page 99, that the ratio of precision is 1':10,000, that this map was prepared in accordance with the General Statutes of North Carolina Chapter 89C. my hand and seal on the 11, day of JUNE, A.D. 20 20.

WILLIAM M. ALLEN

NORTH CAROLINA PROFESSIONAL SEAL L-3499 LAND SURVEYOR WILLIAM M. ALLEN





CURVE TABLE				
CURVE	RADIUS	LENGTH	BEARING	CHORD
C1	50.00'	38.44'	S 05°16'48" E	37.50'

PARCEL #: 4731222099
RILEY A. &
STEPHEN M. ANTONEK
2547/1652

LOT 9
JESSICA L. &
ZACHARY E. MILLARD
2603/2421

E.P. N75°10'32"W 48.38' E.I.P.

25' SETBACK

253.10'

NEIGHBOR FENCE ENCROACHES INTO LOT 8 BY 2.38'

15' SETBACK

N15°10'06"E

(BASE BEARING) S64°32'33"W

LOT 8
(0.68 AC.)

25' SETBACK

10' FRONT

178.74'

PARCEL #: 4731127526
SUSAN O. PICH
2389/817

R/W

E.I.P.

TALLEY HILLS DR.
(60' PUBLIC R\W)

C1

N68°10'17"W 48.83' (TIE ONLY)

PK NAIL

E.I.P.

25' SETBACK

20.00' PSDE

I.P.S.

228.39'

S80°13'43"E

R/W

10' UTILITY EASEMENT (TYPICAL)

LOT 7
ROCHELLE L. &
NICHOLAS DOTZEL
2305/64

LEGEND
P.P. = POWER POLE
E.I.P. = EXISTING IRON FOUND
I.P.S. = #4 REBAR SET
R/W = RIGHT-OF-WAY
PSDE = PUBLIC STORM DRAINAGE EASEMENT
CP = COMPUTED POINT

0' 25' 50' 100'
SCALE IN FEET

SCALE 1" = 50'

ACQUIRED BY: WILLIAM & KARLA HODGE

BOUNDARY SURVEY

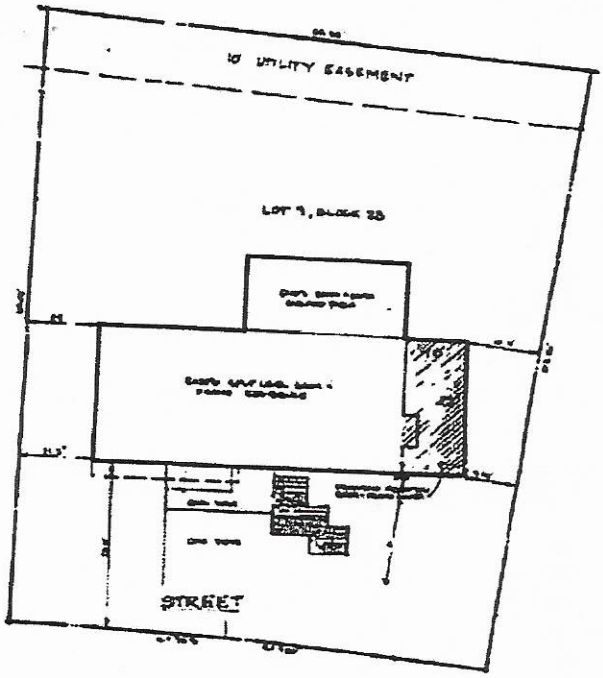
OF

138 TALLEY RIDGE DR.
LOT 8 TALLEY RIDGE SUBDIVISION

FALLSTOWN TWSP., IREDELL CO., N.C.

NOTES
1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENTS AND/OR RIGHTS OF WAY OF RECORD.
2) ACREAGE COMPUTED BY THE COORDINATE METHOD.
3) UNDERGROUND POWER
4) NO GRID MONUMENT FOUND WITHIN 2000 FEET.

FIELD BOOK:
FILE: TALLEY RIDGE 8.DWG
DC FILE:
TAX MAP NO: 4731222454



Please provide a drawing of your property in the space below (similar to drawing on the left) or attached in a separate document showing the layout of your home or business on the lot. If applicable, please clearing note expansions.

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, Karla Hodge, am the legal owner(s) of the property located at 138 Talley Ridge Troutman, NC, identified as PIN (Parcel Identification Number)_____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**)

Steve White, _____, 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.

Karla Hodge
Signature of Owner(s)

9-19-20
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

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, Nicholas + Rochelle Dotzel, am the legal owner(s) of the property located at 138 Talley Ridge Dr., identified as PIN (Parcel Identification Number)_____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) William + Karla Hodge _____, 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

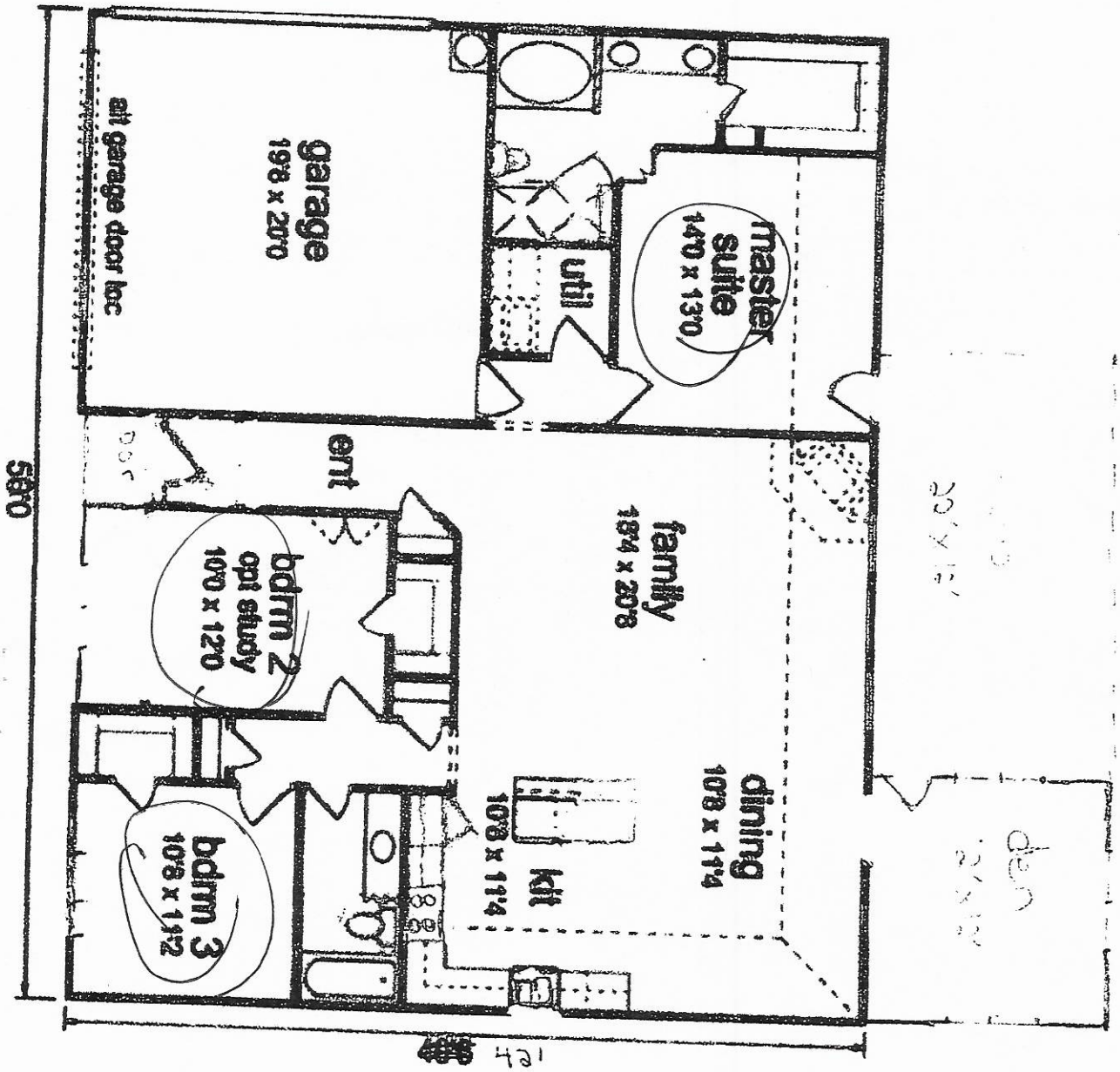
I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

Nicholas Dotzel Rochelle Dotzel
Signature of Owner(s)

6/18/2020
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

8-17-2020

6-[illegible]20

See reverse for new construction.

Zoning Permit # 308489 Code 104
Fee $ 45.00

Zoning Permit

LOCATION	Date (mm/dd/yy)	06/23/20	Tax Parcel # 4731222454
	Business Name or Property Owner		
	Street Address	138 Talley Ridge Drive	
	Business Type and/or Project Description	New House Build	
APPLICANT	Applicant	Karla Hodge	Preferred Phone 269-569-0305 (1903)
	Address City/State/Zip	179 Timber Ridge Dr Troutman NC 28166	
	E-Mail		
	Would you like your e-mail address added to: (check any of interest)	☐ The Whistle Stop (Town of Troutman newsletter) ☐ Troutman Business Council (Local Chamber of Commerce) ☐ Sunshine List (Agenda for Town Board Meetings)	

Following approval of this permit proceed to Iredell County Building Inspections (349 N Center St, Statesville, NC 28677). All Applicants, please note that final inspection by the Town is required prior to occupancy (exception, single family residential additions/expansions). Business Applicants, please note that proof of RPZ (backflow) inspection is required prior to occupancy (in addition, restaurants may be required to have a grease trap inspection).

Office Use Only

Zoning District(s)	RS	Plans Attached	Yes ☑ No ☐
Utilities	Well + Septic	Floodplain	Yes ☐ No ☑
Permitted Use of Property	SFR		
Minimum Setback Requirements	Front 25', Rear 25', Right Side 15', Left Side 15'. *Setback measured from nearest projecting point of structure to Property Line.*		

Comments: Home must be parallel to Front lot line or Street.
Landscaping requirements attached

I hereby certify that all of the information provided for this application is, to the best of my knowledge, accurate and complete. I understand that this permit will expire and become invalid unless the work for which it was issued is started within six (6) months of the date of issue or is the work authorized is suspended or abandoned for a period of one (1) year.

Karla Hodge
Signature of Applicant

To the best of my knowledge, this application is deemed complete and approved based on the information provided to me and my knowledge of the Town of Troutman Unified Development Ordinance.

Daniel Wirth
Signature of Zoning Administrator