IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP-302518

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

PIN # 4737774427

APPLICANT/OWNER: MOOREFIELD BUILDERS INC. APPLICANT ADDRESS: 429 FIFTH CREEK ROAD, STATESVILLE, N.C. 28625

SITE ADDRESS: 386 BLUEGILL LANE, STATESVILLE, NC 28625 PHONE: 704-880-6620 ALT. PHONE 704-682-4450

SITE DIRECTIONS: (N) ON 115, (R) ON SOUTH CHIPLEY FORD, (R) ON BLUEGILL, LOT AT END ON (R) SAP CONTROLLED: ☐ YES ☑ NO

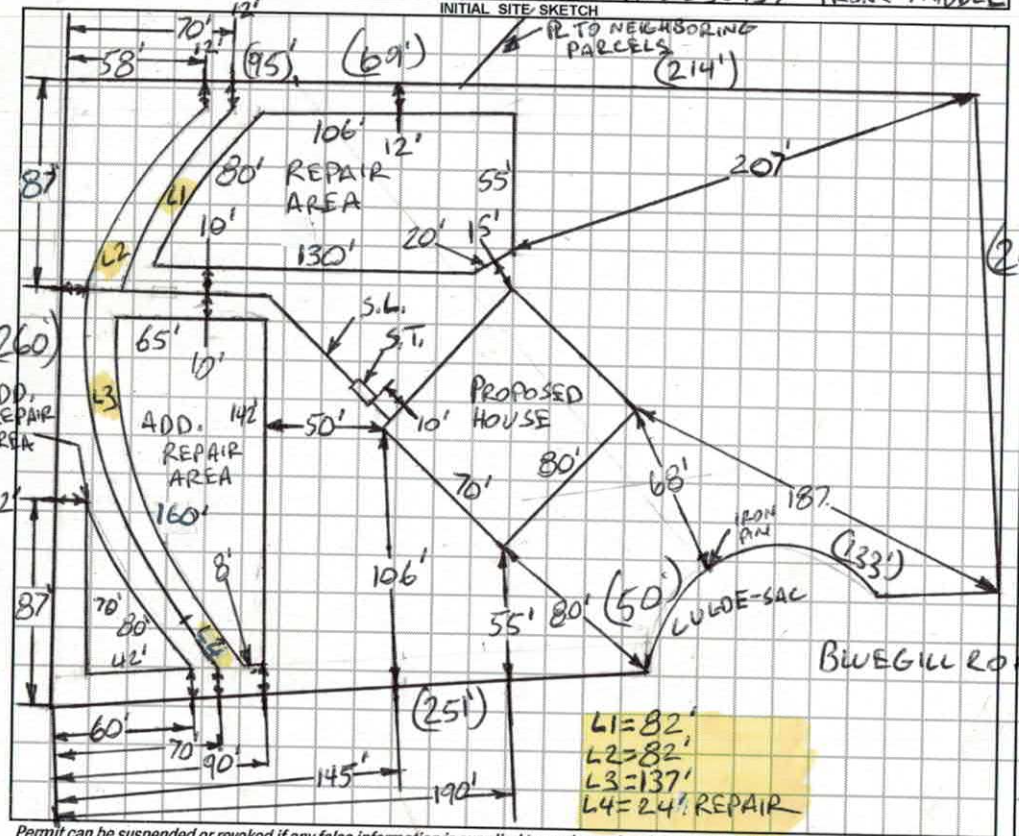
SUBDIVISION: POPLAR RIDGE SECTION: P2 LOT # 26-27 LOT AREA: 2.071 AC DESIGN FLOW: 360GPD L.T.A.R.: 0.3

Septic Tank	1000	(gal)	STB #012	Date	4-20-20	☑ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	☑ Residence	No. Bedrooms 3
Pump Tank	—	(gal)	PT —	Date	—	System Description:	25% REDUCTION			☐ Business	No. Persons 6
Pump Make	—	Model	—	Serial #	—	Repair System Description:	25% REDUCTION			☐ Other	No. Employees —
# Nitrification Fields	1	# Lines	3	Linear Ft	300FT	Maintenance Agreement Required:	☐ YES	☑ NO		☐ Slab	☐ Crawl Space
Trench Width	36IN	Trench Bottom Depth(Low side)	26 IN	Gravel Depth	—		☑ GRAVITY	☐ PRESSURE		☑ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☐ Private ☑ Public ☐ Community

Comments / Conditions: INSTALL ON CONTOUR, INSTALL ON 9FT CENTERS UTILIZE SERIAL DISTRIBUTION, LINE 2 AND 3 ARE ON THE SAME CONTOUR SPLIT FEED L2=82' AND L3=137' FROM MIDDLE

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed as Drawn

1 IN = 80 FT
ADD. = ADDITIONAL
S.T. = SEPTIC TANK
S.L. = SUPPLY LINE

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: Melissa Moorefield Date: 12-13-19 Installed by: Steve Jordan

IMPROVEMENT PERMIT by: Burnett C. White Date: 12-5-2019 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Burnett C. White Date: 12-9-2019 Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inpsector to confirm your inspection time.

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

Sheet 1 of 1
PROPERTY ID #: 4737774427
COUNTY: IREDELL

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

OWNER: ALLEN MORRISON
ADDRESS: 147 DEERCROFT DRIVE, STATESVILLE, N.C. 28625
PROPOSED FACILITY: 3 BR
PROPOSED DESIGN FLOW (.1949): 360 GPD
LOCATION OF SITE: 386 BLUEGILL LANE, STATESVILLE, N.C. 28625
APPLICATION DATE: 11-4-2019
DATE EVALUATED: 11-15-2019
PROPERTY SIZE: 2.071 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	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	HEAD 10%	0-7	SCL/SBK	FR/SS,SP,SEXP	MICA COMMON SAP INC IN CL	60+"	NA	NA	PS .3
		7-30	CL, SBK	FR/S, P, SEXP					
		30-60	CL/SBK	FR/SS, SP/SEXP					
2	LINEAR SIDE 12%	0-8	SCL, SBK	FR, SS, SP/SEXP	MICA COMMON SAP INC IN CL	48"	PS II L ~~NA~~	NA	PS .3
		8-29	CL, SBK	FR/S, P/SEXP					
		29-48	CL, WSBK	FR, SS, SP, SEXP					
		48-60	SAP/MAS	FI, NS/NP/SEXP					
	LINEAR SIDE 12%	0-12	SCL, SBK	FR, SS, SP, SEXP	MICA COMMON SAP INC IN CL	57"	PS II L	NA	PS .3
		12-30	CL, SBK	FR, S/P, SEXP					
		30-57	CL, WSBK	FR, SS, SP/SEXP					
		57-64	SAP/MAS	VFR, NS, NP, SEXP					
	RIDGE 5%	0-7	SCL, SBK	FR, SS, SP/SEXP	MICA COMMON SAP INC IN CL	50"	PS II L	NA	PS .3
		7-30	CL, SBK	FR, S/P, SEXP					
		30-50	CL, WSBK	FR, SS, FR, SEXP					
		50-60	SAP/MAS	VFR, NS/NP, SEXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
vailable Space (.1945)	PS	PS
stem Type(s)	25%	25%
e LTAR	0.3	0.3

OTHER FACTORS (.1946): PS
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Bryant C. White
OTHER(S) PRESENT:

MMENTS:

ated February 2014

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)

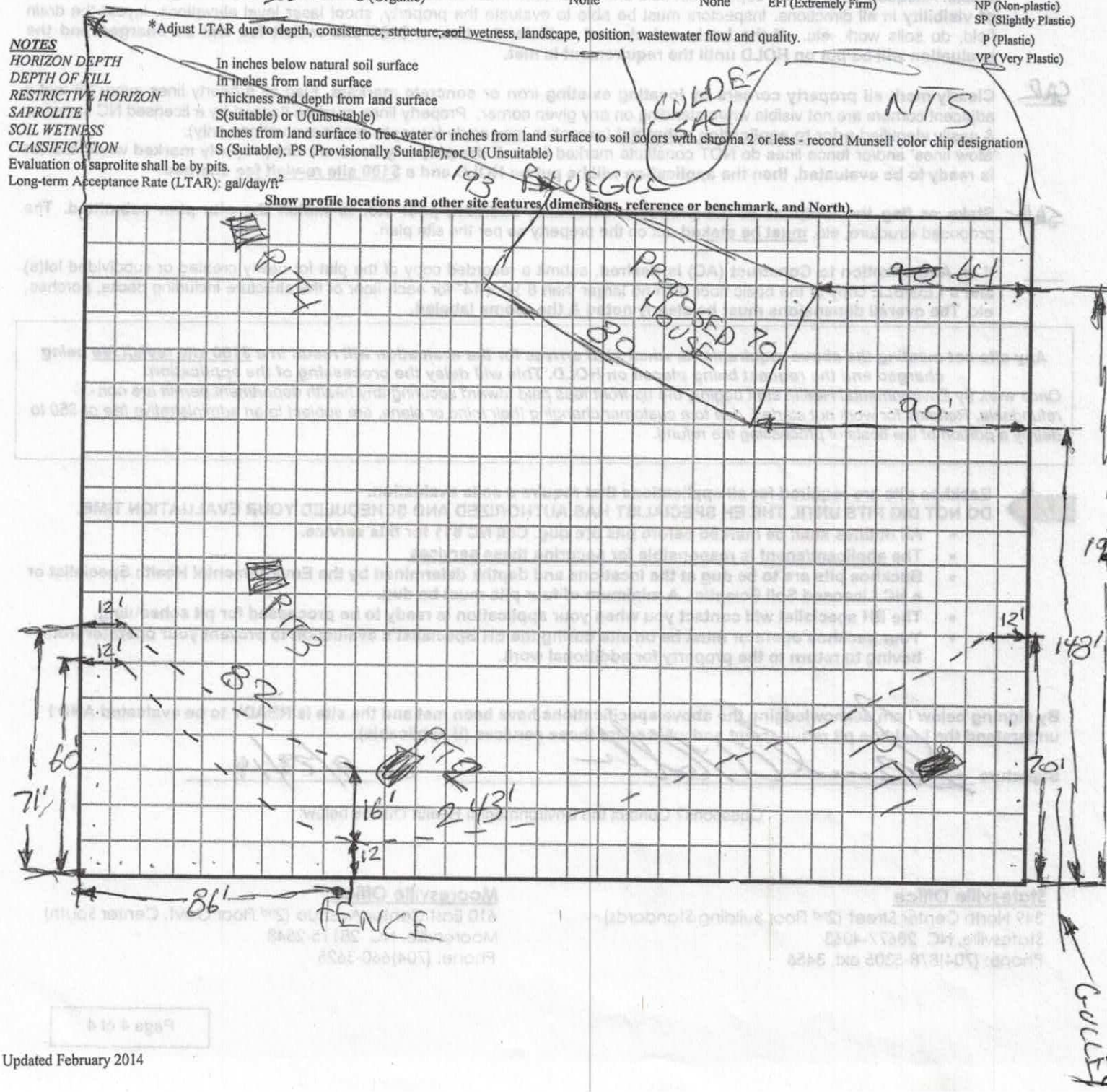
SOIL WETNESS — Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation

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).



AP-302518

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

11.8.19
$500.00

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM*

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(✓) 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: ( ) 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: Moorefield Builders Inc Address: 427 Fifth Creek Rd Zip: 28625
Applicant Email: M Builders 78 @ Gmail.com Phone: 704 8806620 Alt. Phone: 704 682 4450
Owner Name: Allen Morrison Address: 147 [redacted] Deercroft Dr. Zip: 28625
Owner Email: CSD247@yahoo.com Phone: 704-902-3862 Alt. Phone: 704-682-0134

Property Information:

Street Address: 386 Bluegill Lane
Subdivision Name: Poplar Ridge Section/Phase: _____ Lot Number: _____
Driving Directions: Turn Right on Bluegill Lane and go all the way to the end

Site Development Information: *(check or complete ALL that apply*

(✓) 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: 4
( ) 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
( ) 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 (✓) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: _____
( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other: _____

Please answer the following to the best of your ability:
( ) Yes (✓) No Does the site contain any jurisdictional wetlands?
( ) Yes (✓) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (✓) No Is the site subject to approval by any other public agency?

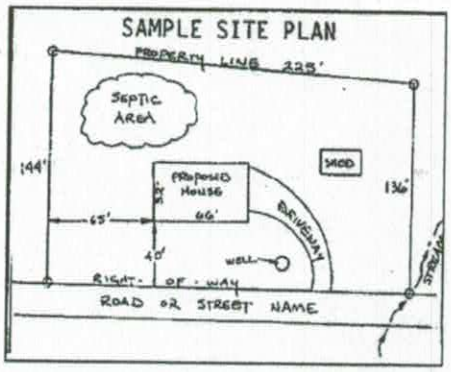
I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible 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.

Signature: _____ Nov 4, 2019
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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 OR WELL 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**
( ) **Preferred well location**
( ) **Preferred septic system location**
( ) **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**

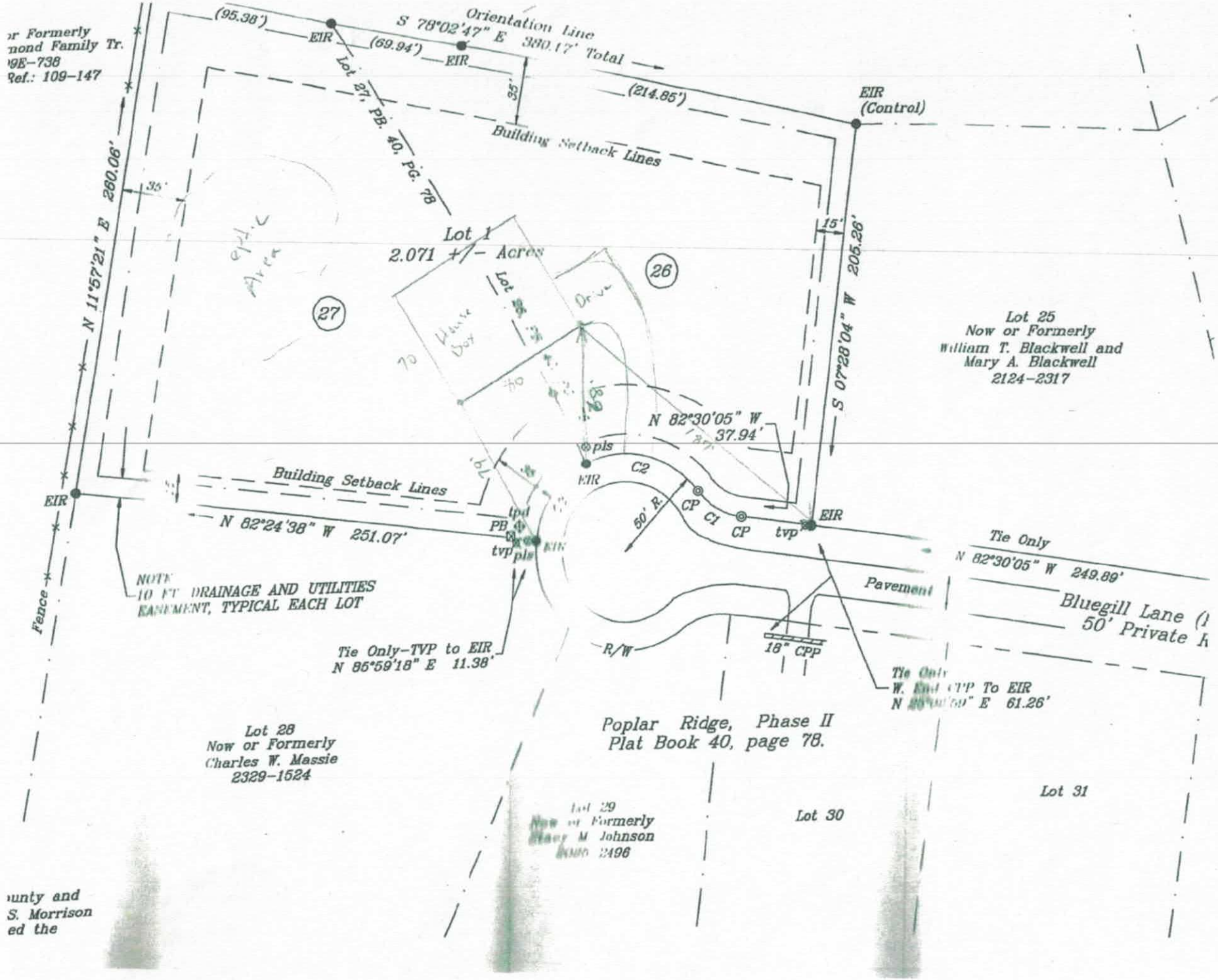
USE THIS SPACE TO DRAW YOUR SITE PLAN

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: Melissa S. Mansfield 11-8-19

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


Orientation Line
S 78°02'47" E 380.17' Total
(95.38')
EIR
(69.94')
EIR
Lot 27, PB. 40, PG. 78
35'
(214.85')
EIR
(Control)
Building Setback Lines
35'
N 11°57'21" E 260.06'
Lot 1
2.071 +/- Acres
26
27
15'
S 07°28'04" W 205.26'
Lot 25
Now or Formerly
William T. Blackwell and
Mary A. Blackwell
2124-2317
N 82°30'05" W
37.94'
pls
EIR
C2
50' R.
CP
C1
CP
tvp
EIR
Building Setback Lines
EIR
N 82°24'38" W 251.07'
tpd
PB
tvp
pls
EIR
Tie Only
N 82°30'05" W 249.89'
Pavement
Bluegill Lane (
50' Private R
NOTE
10 FT. DRAINAGE AND UTILITIES
EASEMENT, TYPICAL EACH LOT
Fence
Tie Only-TVP to EIR
N 85°59'18" E 11.38'
R/W
18" CPP
Tie Only
W. End CPP To EIR
N 80°00'50" E 61.26'
Lot 28
Now or Formerly
Charles W. Massie
2329-1524
Poplar Ridge, Phase II
Plat Book 40, page 78.
Lot 29
Now or Formerly
Mary M Johnson
Lot 30
Lot 31

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 prope-ty 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, Allen Morrison, am the legal owner(s) of the property located at _____, identified as PIN (Parcel Identification Number) 386 Blue Gill Lane, located in Iredell County, North Carolina.

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

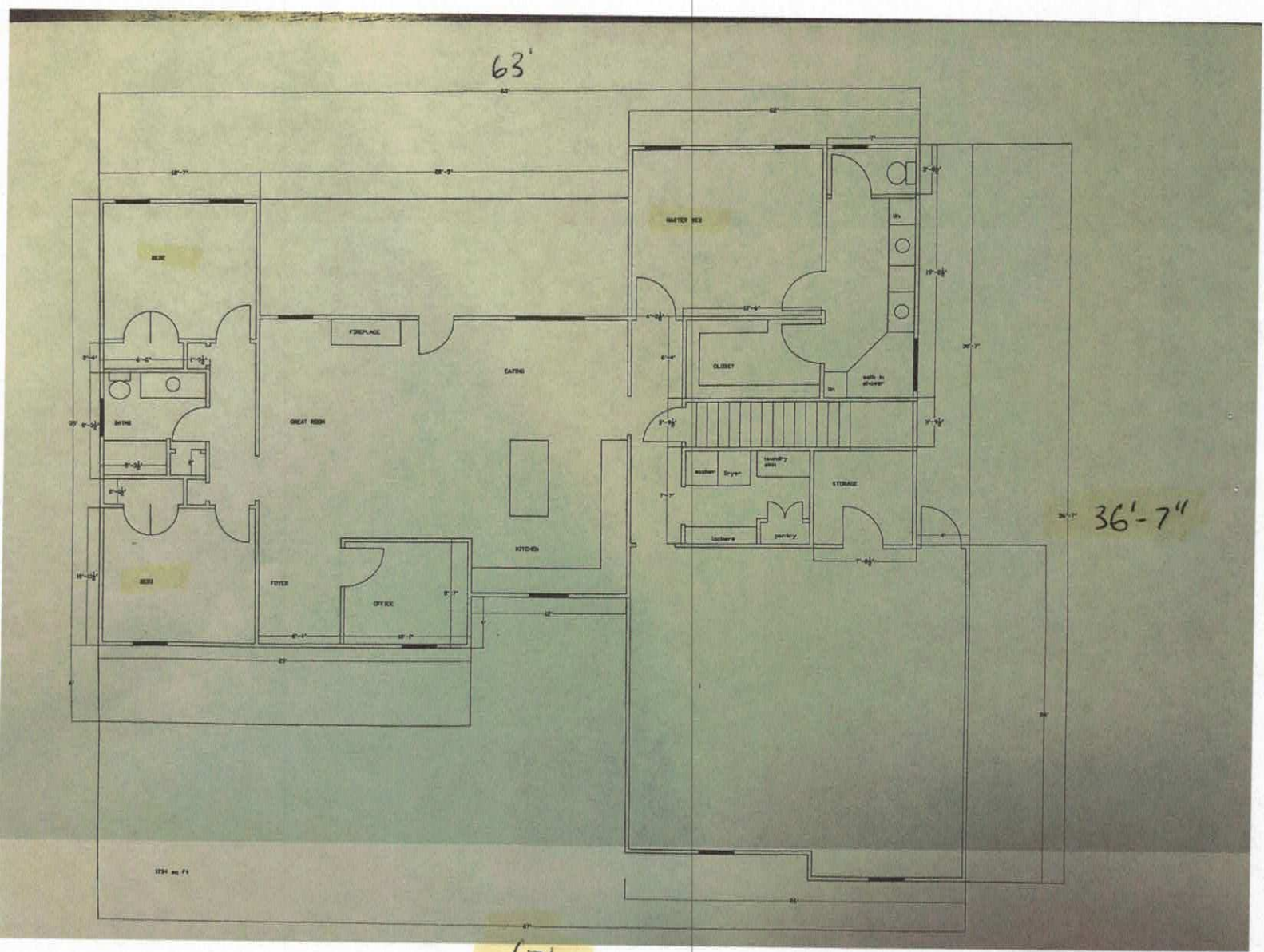
I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

Allen G. Morrison
Signature of Owner(s)

10/24/19
Date

Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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



Acknowledgement Of
Plans Submittal ONLY!
Melissa Moorefield Date 12-13-19
Brent Emmitt Date 12-9-19

IREDELL COUNTY · NC

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

APPLICATION NUMBER
302518 Issue Date: 11/08/2019

Permit Type: ZONING RESIDENTIAL

Parcel Number	Street Address	Jurisdiction
4737775428.000	386 BLUEGILL LN	IREDELL COUNTY

Owner Information	Applicant Information
Name: MORRISON ALLEN+STEPHANIE	Name: MOOREFIELD BUILDERS INC
Address:	Address: 429 FIFTH CREEK RD.
	STATESVILLE, NC 28625
Phone:	Phone: (704)880-6620

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.921	35	35	15	15	WSIV-CA South Yadkin	NO

Remarks
SFD

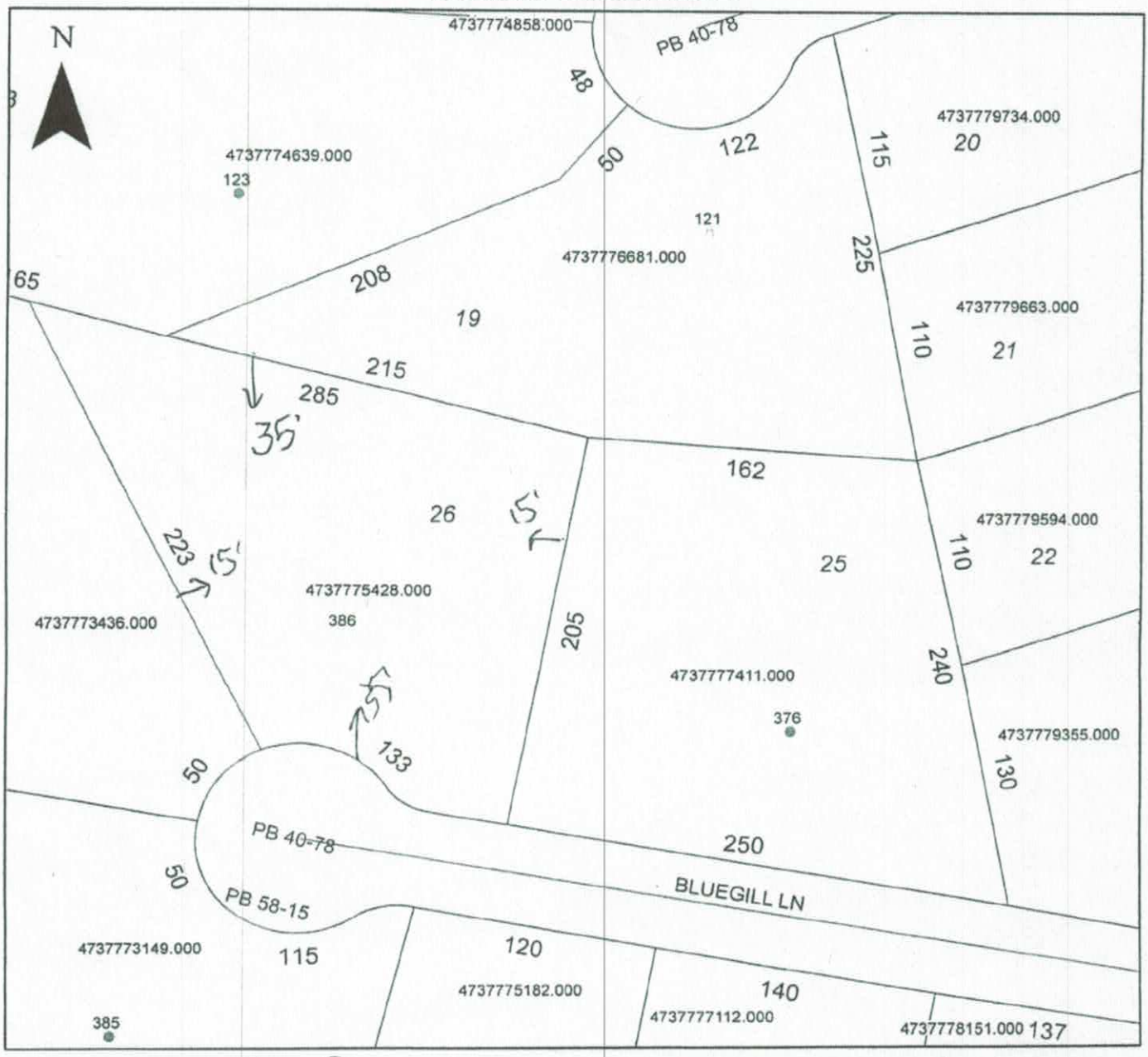
The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions,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

Signature of Owner/Contractor

Date: 11/08/2019

Permit Number	000786	TOTAL FEES:	$77.25

ZONING DISCLAIMER



Property Address 386 Bluegill Lane, Statesville, NC

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.

Melissa D. Mossefield
Applicant

11-8-19
Date