IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 223890

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

PIN # 4740-20-1805

APPLICANT: FRANK FERROUECHIO APPLICANT ADDRESS: 179 RIVER PARK RD. MOORESVILLE

SITE ADDRESS: 208 BROOKCREEK DR. TROUTMAN PHONE: 914-255-5411 ALT. PHONE:

SITE DIRECTIONS: CLONTZ HILL, TR BROOK CREEK, TR RIDGE CREEK, ON R

SUBDIVISION: ROCKY CREEK COVE SECTION: - LOT # 76 LOT AREA: 1.83 AC DESIGN FLOW: 360 L.T.A.R.: .275

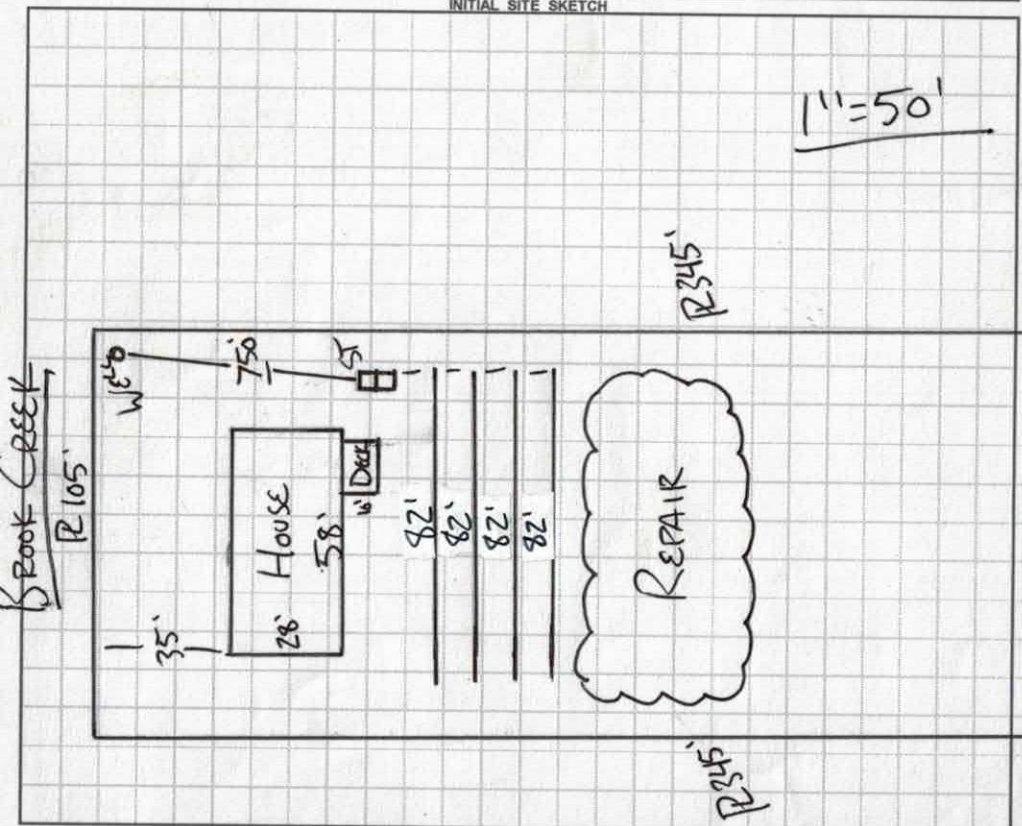
Septic Tank	1000	(gal)	STB	760	Date	4/23	☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms	3	Water Supply			
Pump Tank		(gal)	PT		Date		System Description:			25% REDUCTION	☐ Business	No. Persons	6	☒ Private			
Pump Make		Model			Serial #		Repair System Description:			PANEL BLOCK	☐ Other	No. Employees		☐ Public			
# Nitrification Fields	1	# Lines	4		Linear Ft:	328'	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☒ Crawl Space		☐ Community			
Trench Width	36"	(Max) Trench Bottom Depth		36"	Gravel Depth	—		☒ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing			☐ Basement w/o plumbing			

Comments / Conditions: Recommend pumping septic tank every 3-5 years.

Infiltrator Quick 4 Product used.

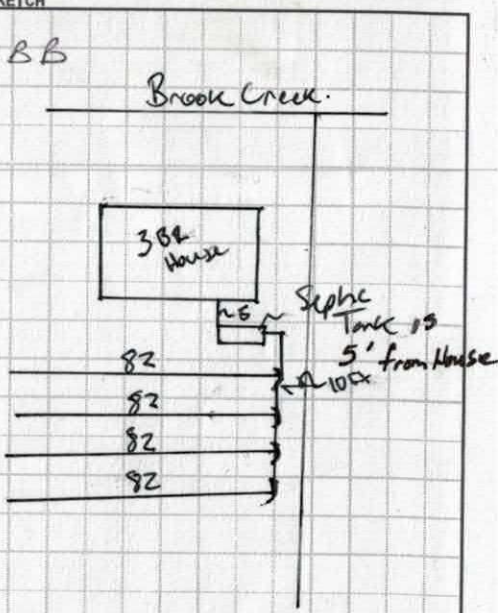
INITIAL SITE SKETCH

1"=50'



AS BUILT SKETCH

Drain Lines checked
Tank checked



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: Date: 2-22-17 Installed by: Jared Lentz Wastewater

IMPROVEMENT PERMIT by: Date: 2-13-17 OPERATION PERMIT by: Benjamin Bottoms Date: 7-12-17

AUTHORIZATION TO CONSTRUCT by: Date: 2-23-17 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK

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

Sheet 1 of 1
PROPERTY ID #: 4740 20 13
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Iron Ivey
ADDRESS: 208 BROOK CREEK DRIVE (LOT 76) APPLICATION DATE 2-1-17
PROPOSED FACILITY: Home PROPOSED DESIGN FLOW (.1949): DATE EVALUATED: 2-1-17
LOCATION OF SITE: Rocky Creek Subdivision PROPERTY SIZE: .830
WATER SUPPLY: ☒ Private ☐ Public ☒ Well ☐ Spring ☐ Other PROPERTY RECORDED: Yes
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
P 1	8%	0-6	RBRCL WF SBK	FR SS SP	Top of BT compacted to 12" few SAP	48"			PS, 3 Ben
		6-30	BRRC WM SBK/ABK	" " "					
		30-48	BRRCL WF SBK	" " "					
2	7%	0-5	BRCL WF SBK	FR SS SP	Stumphole w/Depl. com SAP	50"			PS, 3
		5-38	BRRC WM ABK/SBK	F. SS P.					
		38-50	BRRC WM SBK	FR SS SP					
3	8%	0-3	BRCL WF SBK	FR SS SP	few SAP	50"			PS .275-.3
		3-25	BRRC WM ABK	" " "					
		25-34	BRRC WM SBK	F. " "					
		34-50	BRRCL WM SBK	FR " "					
4	8%	0-5	BR CL WF SBK	FR SS SP	few/com SAP few/com INC. clay texture	50"			PS, 275 .3 Ben-.3
		5-24	BRRC M-WM ABK	FR SS P.					
		24-50	RBRCL WF SBK	" " SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	Accepted	PPBPS
Site LTAR	.275	.275

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: S. Ashley Rollins RA
OTHER(S) PRESENT:

COMMENTS:

IREDELL COUNTY HEALTH DEPARTMENT

223890 Paid $500.00

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

RECEIVED DEC 19 2016

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:

Applicant Name: Frank Ferrovecchio **Address:** 179 River Park Rd, Mooresville **Phone:** (914) 255-9111

Owner Name: Iron Ivy LLC **Address:** 179 River Park Rd, Mooresville **Phone:** (704) 360-2874

Property Information:

Street Address: 208 Brook Creek Drive, Troutman NC 28166

Subdivision Name: Rocky Creek Cove **Section/Phase:** _____ **Lot Number:** 76

Driving Directions: Perth Rd to Oconee Hill Rd, Oconee Hill to Ridge Creek Dr, Ridge Creek Dr turn Right @ Brook Creek Dr.

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

(X) New Single Family Residence	Maximum Number of Bedrooms: 3	(✓) Crawl Space Foundation
( ) New Multi-Family Residence	Maximum Number of Occupants: _____	( ) Concrete Slab Foundation
( ) Accessory Building	( ) Swimming Pool	( ) Basement with Plumbing
( ) Bedroom(s) Addition	( ) Other Addition/Structure: _____	( ) Basement without Plumbing

Non-Residential Site Development:

Type of Business: _____

Square Footage of Building: _____

Maximum Number of Employee: _____

Maximum Number of Seats/Beds/Other: _____

Water Supply:

(✓) 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 (3) Alternative (/) Conventional ( ) Innovative (2) 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: _____ 12/14/16

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

SAP @ 32" NEED PITS

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:

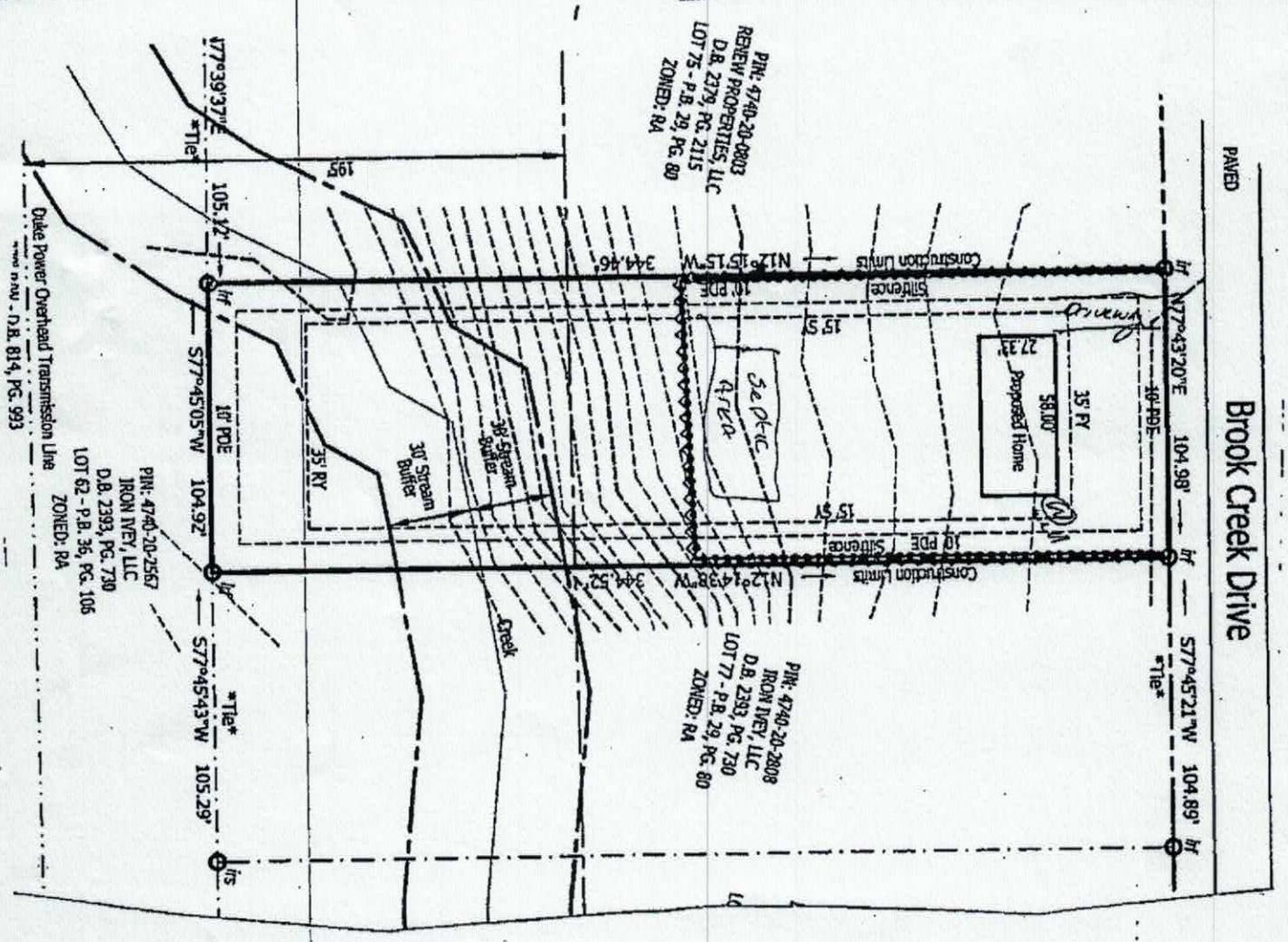
- X Property Line measurements are clearly identified...
- X All proposed structures are indicated...

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

- X Front and side setbacks from property line...
- X Area you prefer your septic system to be placed...
- X Preferred driveway location and configuration, preferred well location...
- 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
- N/A Location of easements and rights of ways on your property... N/A
- N/A Location of any designated wetlands on the property... N/A



Signature: _____

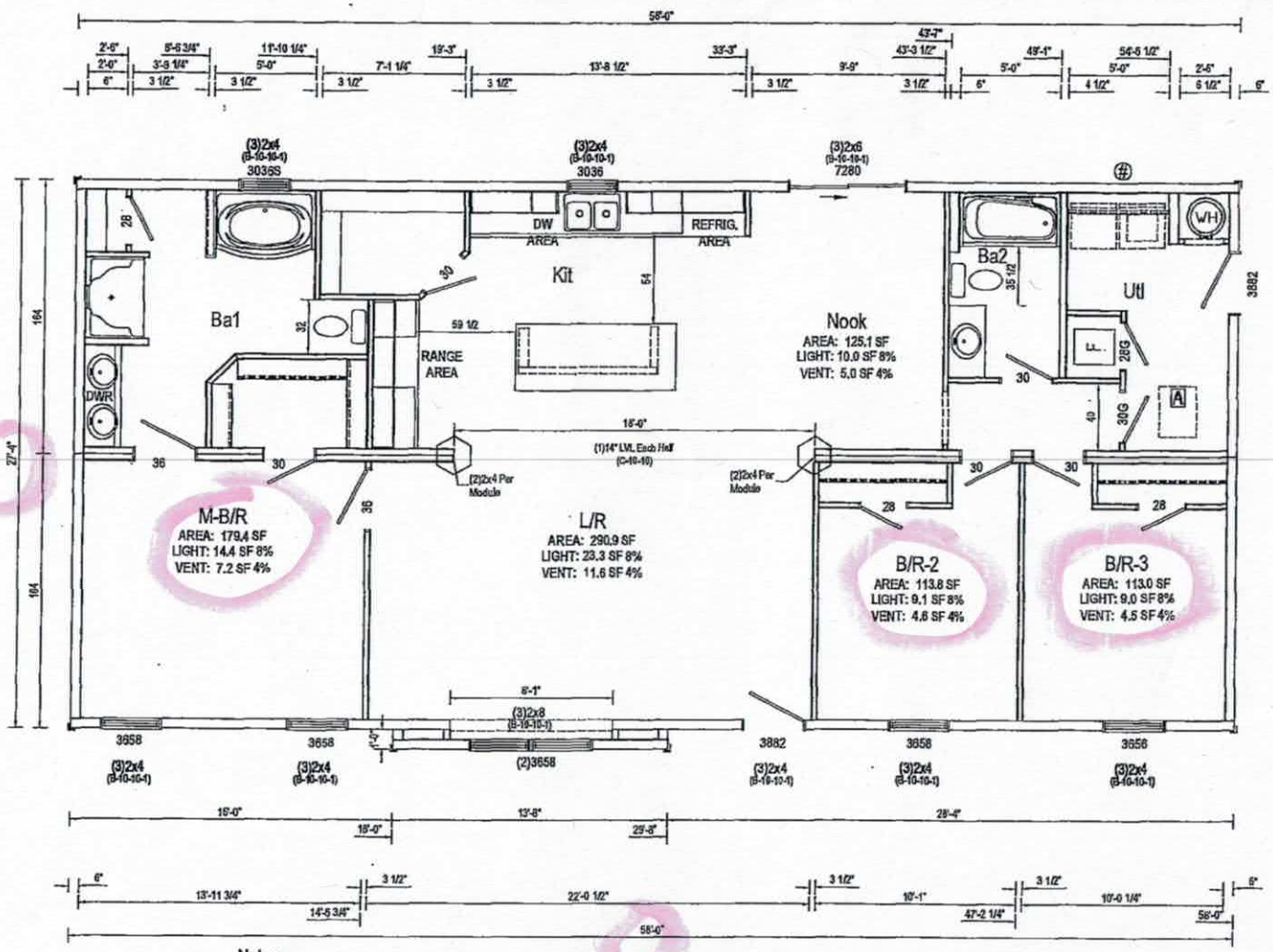
REQUIRED property owner or owner's legal representative signature.

12/14/16
DATE

208 Brookcreek

Lot 76

223890



Acknowledgement of Plans Submittal ONLY!

Date 2-23-17

Date 2-23-17

APPROVED BY

NTA INC. 1/19/2017

Approval of this document does not authorize or approve any deviation or deviations from the requirements of applicable State Laws

Michael Faller

Notes:

1. Exterior opening headers and jack studs are SPF #2 unless otherwise noted.
2. Sidewall headers may use alternate construction per section B-10 of Systems Manual.
3. LVL's where specified to be minimum of 1 1/2" wide, M.O.E. = 2.0 and fb = 2900 PSI.

Note:

* LVLs noted must extend past column on at least one end 24" minimum and be overlayed with OSB sheathing.

See Schedules and General Notes Page

Builder: R-Anell Housing Group, LLC - Subsidiary of The Commodore Corp.

Title: Floor Plan

Cutout: 2858

Revisions: Date / Number

Scale: 3/16" = 1'-0"

Date: 01/16/2017

Drawn By: NE

Reference: 2016-46

Cust: Specification 58

Dlr: Old Iron Mgmt.

Sht: 40672

Model/Eng. No.: B28581-A15

Pg: FP

208 Brook Creek

223890

IREDELL COUNTY

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

APPLICATION NUMBER
223890
Issue Date: 12/19/2016

ZONING PERMIT
Open Space

Parcel Number	Street Address	Jurisdiction
4740201805.000	208 BROOK CREEK DRIVE, TROUTMAN, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: ROCKY RIVER LLC	Applicant: FERROVECCHIO, FRANK
Address: 2710 S MAIN ST #1E SALISBURY, NC 28147	Address: 179 RIVER PARK RD MOORESVILLE, NC 28117
Phone:	Phone: 914-255-5411

Use Requested	Zone Code
MODULAR HOME	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.830	35.00	35.00	15.00	15.00	PACL	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	88641	TOTAL FEES:	$ 77.25