ICHD–ENVIRONMENTAL HEALTH DIVISION

PJB

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

PERMIT # AP30067

4:00

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

PIN # 4740-35-5252

APPLICANT/OWNER: PITA Investments, LLC | APPLICANT ADDRESS: P.O. Box 232 Mooresville, NC

SITE ADDRESS: 2782 Lipe Rd. Troutman, NC 28166 | PHONE: 704-634-4342 | ALT. PHONE 704-664-3455

SITE DIRECTIONS: Rt 21 → Flowerhouse Loop → Lipe Rd → Lot @ end on Right | SAP CONTROLLED: ☒ YES ☐ NO

SUBDIVISION: — | SECTION: — LOT # — LOT AREA: 0.982 acres | DESIGN FLOW: 360 GPD | L.T.A.R.: 0.30

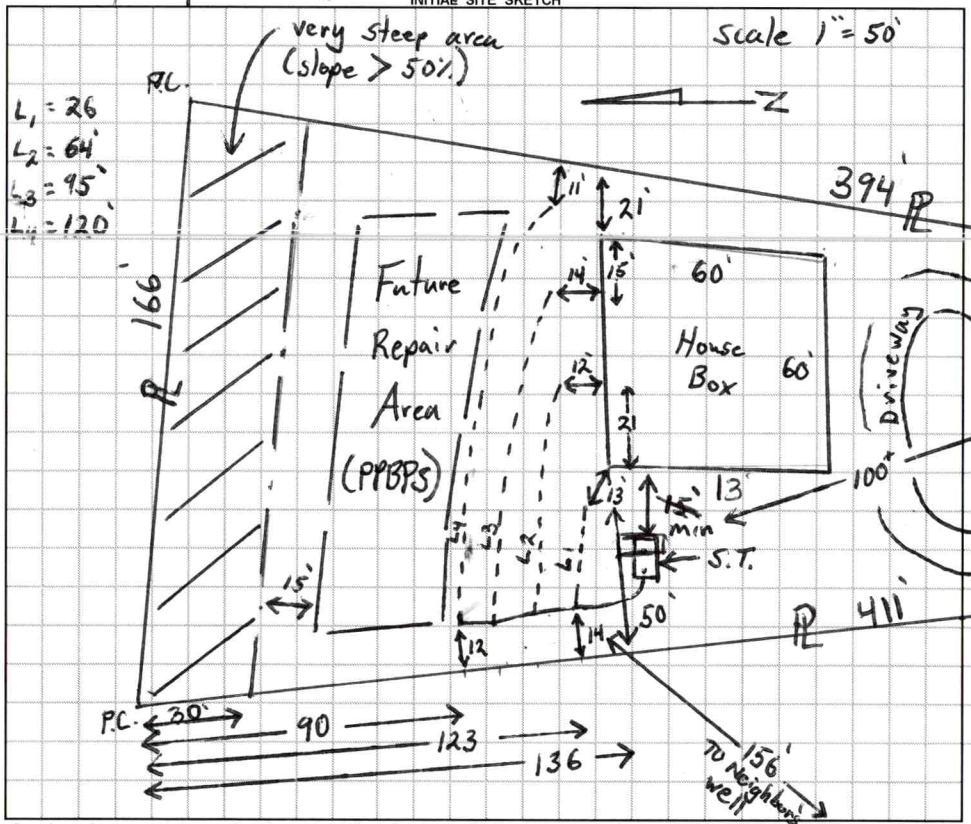
Septic Tank	1000 (gal)	STB	194	Date	5-2-20	☒ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 3
Pump Tank	— (gal)	PT	—	Date	—	System Description: 25% Reduction (serial distribution)		☐ Business	No. Persons 6
Pump Make	—	Model	—	Serial #	—	Repair System Description: PPBPS (50% Reduction)		☐ Other	No. Employees
# Nitrification Fields	1	# Lines	4	Linear Ft	300	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☒ Crawl Space
Trench Width	36"	Trench Bottom Depth(Low side)	22"	Gravel Depth	—	☒ GRAVITY	☐ PRESSURE	☐ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

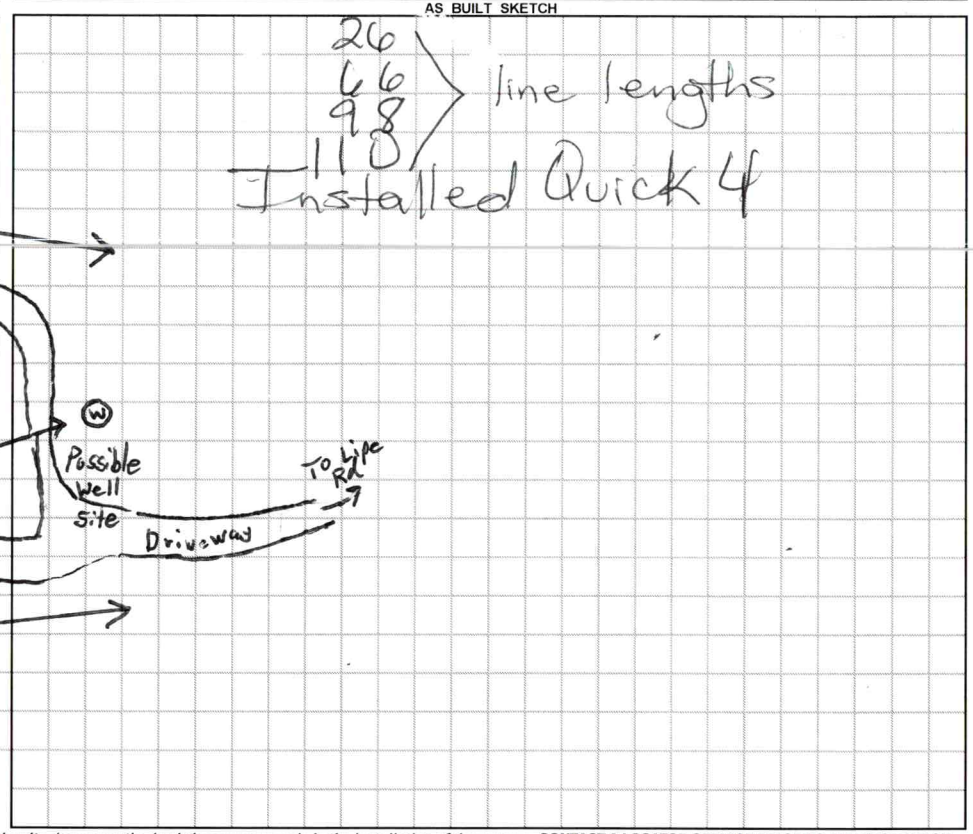
Comments / Conditions: Though 305 lf. of line has been laid out only 300 l.f. need be installed. Recommend having septic tank pumped every 3-5 years.

ST parrell to house
16 ft from top line to deck

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: _____ Date: 10/17/19 | Installed by: Richard Abernathy

IMPROVEMENT PERMIT by: Tom Shuck Date: 10/9/19 | OPERATION PERMIT by: Maria Dobson Date: 6/22/2020

AUTHORIZATION TO CONSTRUCT by: Tom Shuck Date: 10/16/19 | 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 #: 4740-35-5252
COUNTY: Iredell

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

OWNER: Pita Investments LLC — APPLICATION DATE 8/29/19
ADDRESS: PO Box 232 Mooresville, NC — DATE EVALUATED: 10/1/19
PROPOSED FACILITY: 3BR SFR — PROPOSED DESIGN FLOW (.1949): 360 GPD — PROPERTY SIZE: 0.982 acres
LOCATION OF SITE: 274 Lipe Rd Troutman, NC — 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	Distal 22% Prim	0-13	SCL V.W. SBK	SI. Friable, SS, Sp, Sap	–	60"	–	–	0.30 PS
		13-34	Clay M. SBK, W. ABK	SI. Firm, Sticky, Sp, Sap					
		34-60"	Clay Loam W. SBK	Friable, SS, Sp, Sap					
			Common Saprolite 42"-50" (Yellows)						
2	Upper 16% Header Prim	0-12	SCL V.W. SBK	SI. Friable, SS, Sp, Sap	–	25"	–	–	0.35 PS
		12-18	Clay M. SBK some mica	SI. Firm, Sticky, Sp, Sap					
		18-25	Clay Loam W. SBK common Sap	SI. Friable, SS, Sp, Sap					
		25-60	MA Loamy Saprolite	Well Drained + Very Friable					
3	24% Header Repair	0-8	SCL V.W. SBK	SI. Friable, SS, Sp, Sap	–	60"	–	–	0.325 PS
		8-60	Clay Loam W. SBK common micaceous saprolite	Friable, SS, Sp, Sap					
4	30% Distal Repair	0-9	SCL V.W. SBK	SI. Firm, SS, Sp, Sap	–	49"	–	–	0.325 PS
		9-28	Clay M. SBK W. ABK some Mica	SI. Firm, Sticky, SS, Sp, Sap					
		28-49	Clay Loam W. SBK some Sap	SI. Friable, SS, Sp, Sap					
		49-62	MA Loamy Saprolite	Very Friable + Well Drained					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	305 L.F.	200+ L.F.
System Type(s)	25% Red	MBPS
Site LTAR	0.30	0.325

OTHER FACTORS (.1946): N/A
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Tom Shuck
OTHER(S) PRESENT: N/A (Burt Abernathy dug holes)

** Steep Slope along rear PL (+30')

CALL Richard Abernathy
for Pits * 704 309 8625
or 704 309 8626 - Bart

AP300671

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

pd online
$500

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: PITA Investments, LLC Address: PO Box 232 Mooresville NC Zip: 28115
Applicant Email: ~~take~~ see below Phone: 704 634 4342 Alt. Phone: 704 664 3455
Owner Name: PITA Investments, LLC Address: PO Box 232 Mooresville NC Zip: 28115
Owner Email: todd@lakenormanchiro.com Phone: 704 634 4342 Alt. Phone: 704 664 3455

Property Information:

Street Address: 274 Lips Rd Troutman, NC 28166
Subdivision Name: NA Section/Phase: NA Lot Number: NA
Driving Directions: US 21 to Flowerhouse Lp to Lips Rd, End of road on (R).

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

CHECK FOUNDATION TYPE

(✓) New Single Family Residence Maximum Number of Bedrooms: 3 (✓) Crawl Space Foundation
( ) New Multi-Family Residence Maximum Number of Occupants: 6 ( ) Concrete Slab Foundation
( ) Accessory Building ( ) Swimming Pool ( ) Basement with Plumbing
( ) Bedroom(s) Addition ( ) Other Addition/Structure: ( ) Basement without Plumbing
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem:
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:

(✓) 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: _____ 8/29/19
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, PITA Investments, LLC, am the legal owner(s) of the property located at 274 Line Rd Troutman, NC, identified as PIN (Parcel Identification Number) 4740-34-1875 (parent parcel), located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) TODD ABERNATHY, _____, 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

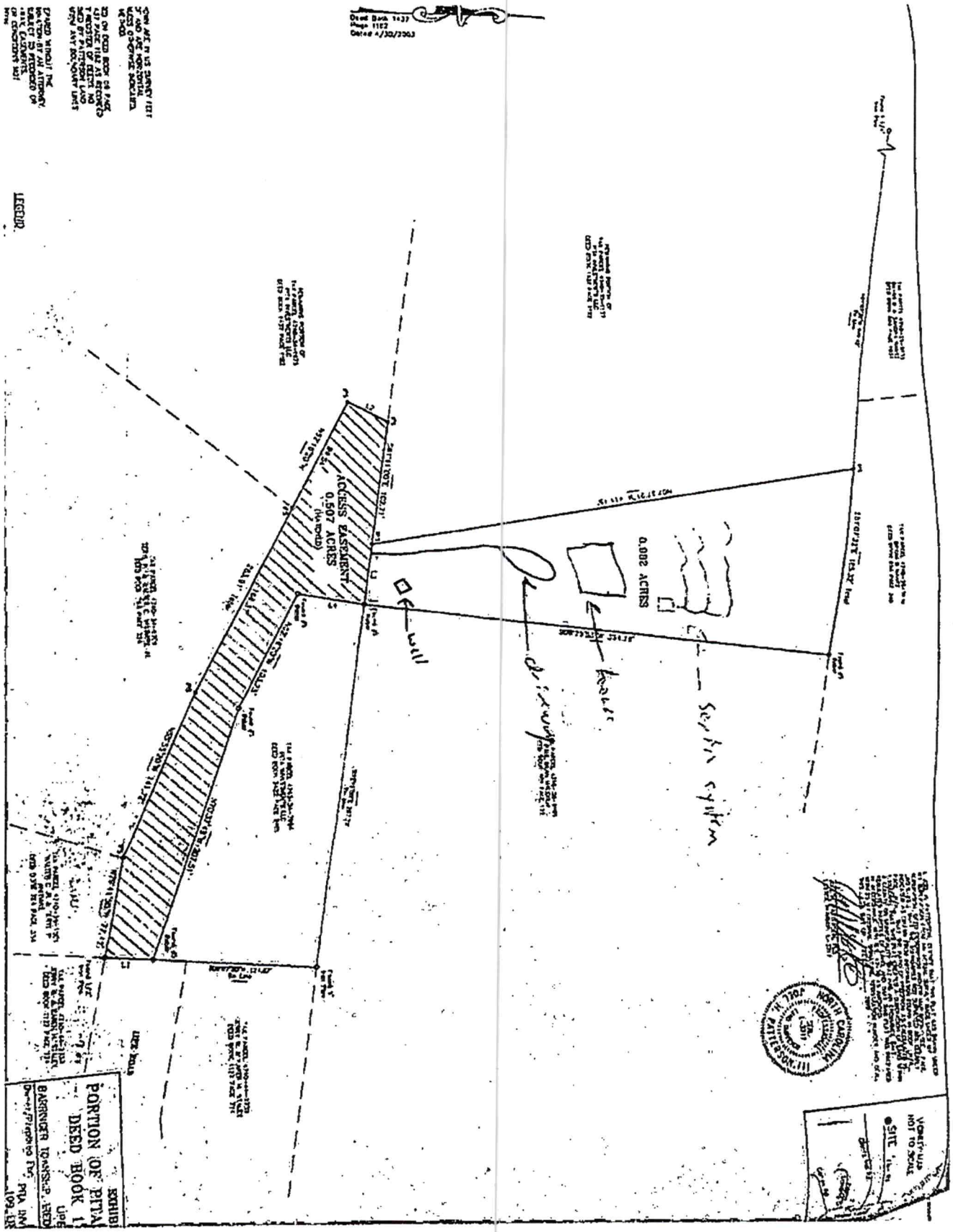
I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

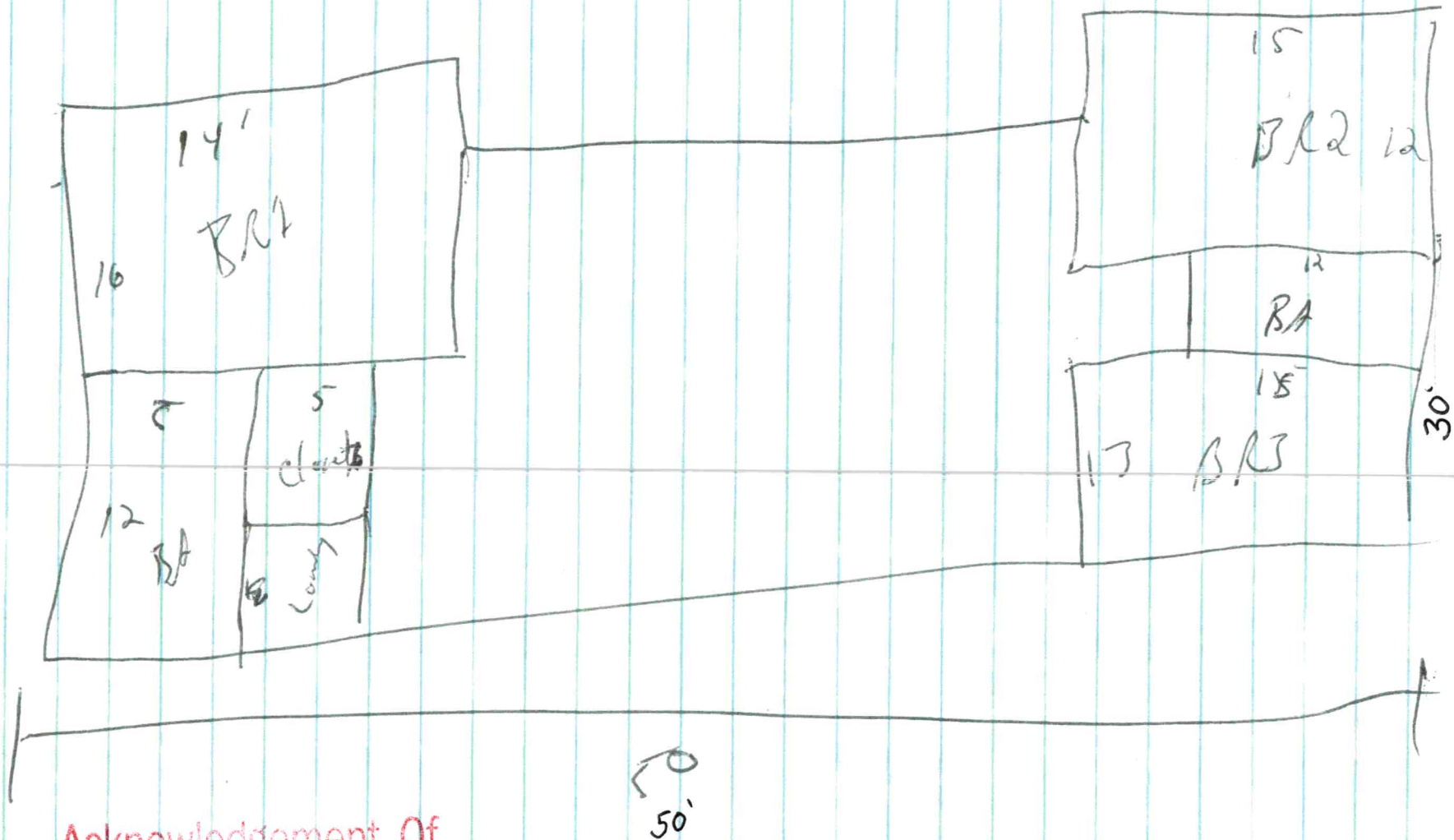
_____ _____ 9/9/14

Signature of Owner(s) 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


LEGEND
ACCESS EASEMENT
0.507 ACRES
0.002 ACRES
PORTION OF PITA
DEED BOOK 1
BARRINGER TOWNSHIP
SITE



Acknowledgement Of
Plans Submittal ONLY!

Date 10/10/19

Tom Shuck Date 10/10/19

(open floor plan [Kitchen/living area] in center of house per Todd Abernathy on 10/10/19 TS

IREDELL COUNTY · NC

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

APPLICATION NUMBER
300671 Issue Date: 09/06/2019

Permit Type: ZONING RESIDENTIAL

Parcel Number	Street Address	Jurisdiction
4740355252.000	274 LIPE RD	IREDELL COUNTY

Owner Information	Applicant Information
Name: PITA INVESTMENTS LLC	Name: PITA INVESTMENTS LLC
Address: P.O. BOX 232	Address: P.O. BOX 232
MOORESVILLE, NC 28115	MOORESVILLE, NC 28115
Phone: (704)634-4342	Phone: (704)634-4342

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.982	35	35	15	15	WSIV-PA Catawba/Lake Norman	

Remarks

SFD

Make sure ZOPC

PAID ONLINE
DATE: 9/13/19 MD

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.

See Attached

Signature of Owner/Contractor

Date: 09/10/2019

Permit Number	000195	TOTAL FEES:	$77.25

$ PAID