IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP-320608

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

PIN # 4742420353

APPLICANT/OWNER: Joyce M Feilke APPLICANT ADDRESS: 462 Murdock Rd Troutman NC 28166

SITE ADDRESS: 462 Murdock Rd Troutman NC 28166 PHONE: 512-351-6405 ALT. PHONE ~

SITE DIRECTIONS: Exit 45 from I-77 to Murdock Rd. SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: ~ SECTION: ~ LOT # ~ LOT AREA: 2.27 Acres DESIGN FLOW: Existing L.T.A.R.: Existing

Septic Tank 1000 (gal) STB 1012 Date 4-3-21
Pump Tank ~ (gal) PT ~ Date ~
Pump Make ~ Model ~ Serial # ~
Nitrification Fields Ext # Lines Ext Linear Ft Ext
Trench Width Ext Trench Bottom Depth(Low side) Ext Gravel Depth Ext

☐ New System ☒ Repair ☐ Expansion System Type: I (II) III IV V VI
System Description: ~
Repair System Description: Tank Replacement
Maintenance Agreement Required: ☐ YES ☒ NO
☒ GRAVITY ☐ PRESSURE

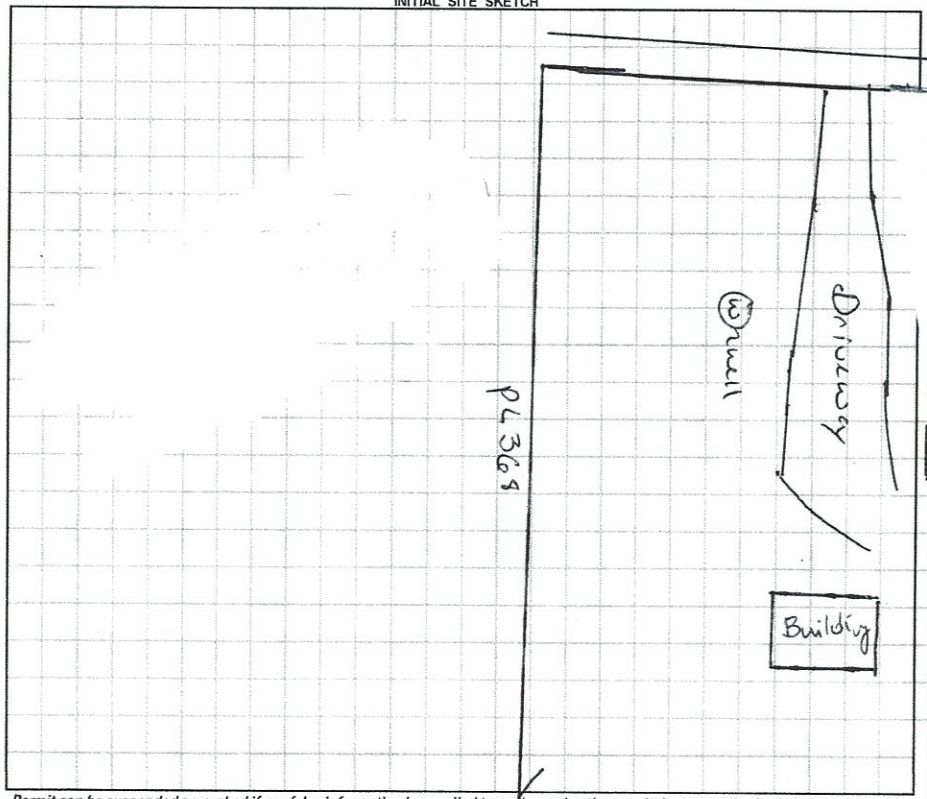
☒ Residence No. Bedrooms Ext
☐ Business No. Persons Ext
☐ Other No. Employees
☐ Slab ☒ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

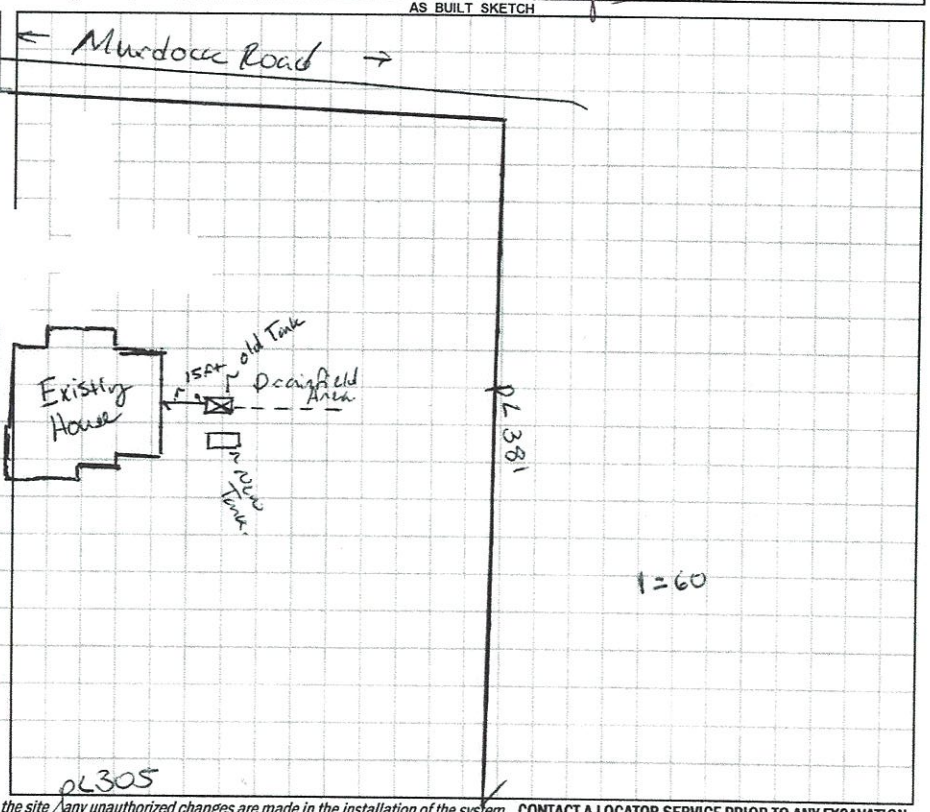
Comments / Conditions: Pump, crush, fill old cracked Septic tank. Install New Septic tank. Inspect and replace D-Box if necessary. Maintain 15ft From house foundation.

Yellowfitter 18ft 8in from ST to house, 13'7" from 15ft to basement steps.

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: Joyce Feilke Date: 11/01/21 Installed by: (Steve Jordon) Piedmont Backhoe Serv.

IMPROVEMENT PERMIT by: Bridget Lambert Date: 10-29-2021 OPERATION PERMIT by: Marisa Olson Date: 3/28/22

AUTHORIZATION TO CONSTRUCT by: Bridget Lambert Date: 10-29-2021 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.

RECEIVED AUG 18 2021

Call FIRST- Needs to get tank uncovered

AP- 320608

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

Repair Evaluation-No Chg.

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: Joyce Murdock Feilke Address: 462 Murdock Rd Troutman Zip: 28166
Applicant Email: jfeilke@icloud.com Phone: 512-351-6405 Alt. Phone: _____
Owner Name: same Address: _____ Zip: _____
Owner Email: same Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 462 Murdock Rd Troutman NC 28166
Subdivision Name: NA Section/Phase: _____ Lot Number: _____
Driving Directions: Exit 45 off Interstate 77, Go west on Murdock Rd 1.5 mi.

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

* New Septic system for existing House and new addition

( ) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ✓ Tank ✓ Drain lines Describe Problem: Cracked Tank - Old drain lines - Tree roots

Maximum Number of Bedrooms: 3
Maximum Number of Occupants: 6
( ) Swimming Pool
( ) Other Addition/Structure: _____

CHECK FOUNDATION TYPE
( ) Crawl Space Foundation
(✓) Concrete Slab Foundation – studio
(✓) Basement with Plumbing – House
( ) 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: _____
( ) 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: 1950
(✓) 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: Joyce Murdock Feilke
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

08/12/2021
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*) Joyce Murdock Feilke

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, Joyce Murdock Feilke, am the legal owner(s) of the property located at 462 Murdock Rd Troutman NC 28166, identified as PIN (Parcel Identification Number) 4742420353, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Gerald Rimmer, Rimmer Construction, 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.

Joyce Murdock Feilke
Signature of Owner(s)

08/12/2021
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

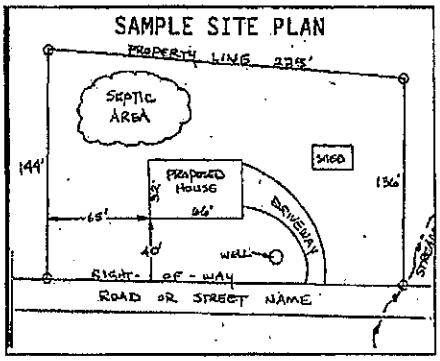
PIN # TAX MAP = 4742420353 462 Murdock Rd Troutman

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:

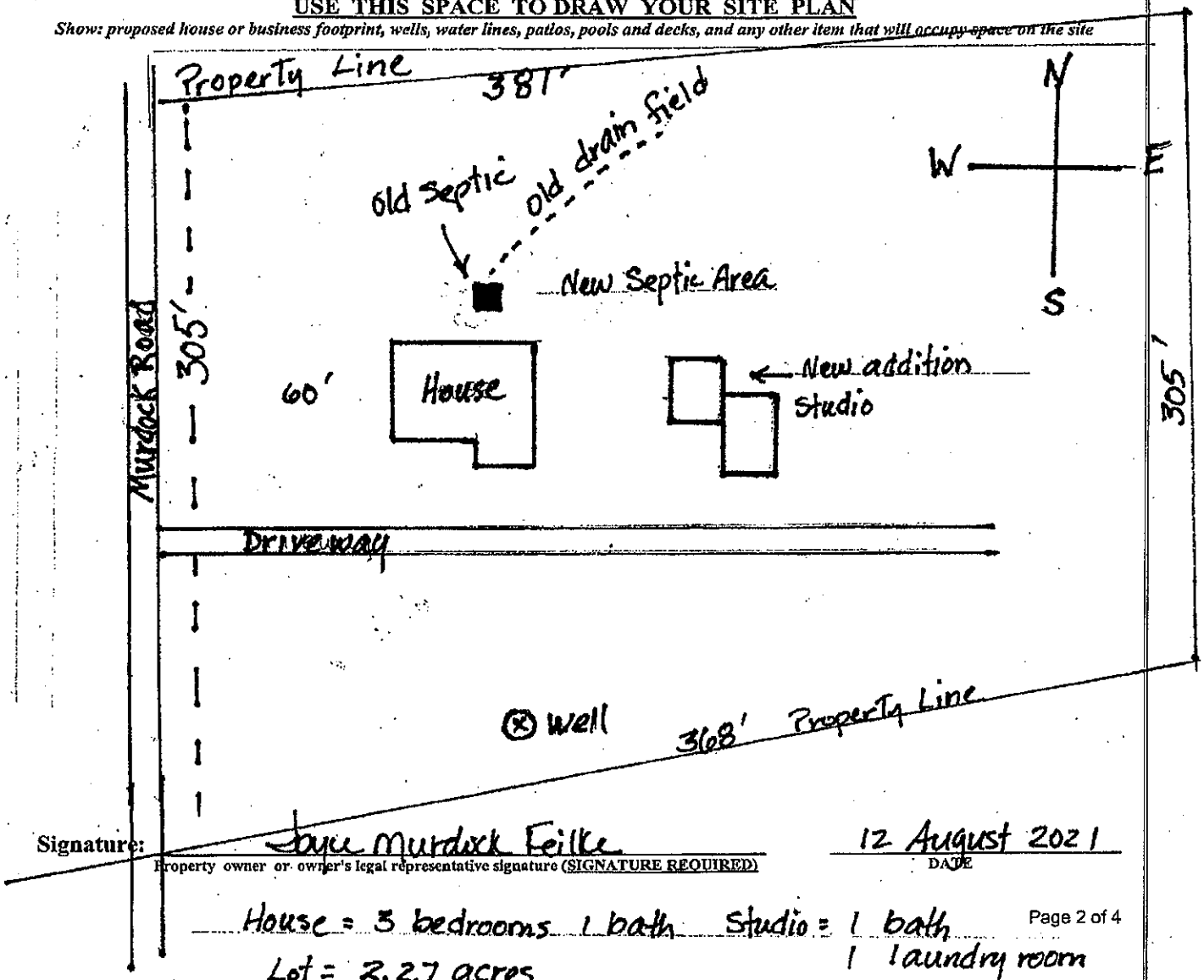
- (✓) Property Line measurements are clearly identified
- (✓) All proposed structures are indicated
- (✓) Front and side setbacks from property line
- (✓) Preferred driveway location and well location
- (✓) Area you prefer your septic system to be placed
- (✓) North arrow, or other sufficient indicator 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

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



Signature: Joyce Murdock Feilke
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

12 August 2021
DATE

House = 3 bedrooms 1 bath Studio = 1 bath
1 laundry room

Lot = 2.27 acres

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 239713

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

PIN # 4742420353

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SITE ADDRESS: 462 Murdock Rd Troutman NC 28166. PHONE: 512-351-6405 ALT. PHONE ~

SITE DIRECTIONS: Exit 45 from I-77 to Murdock Rd. SAP CONTROLLED: ☐ YES ☒ NO

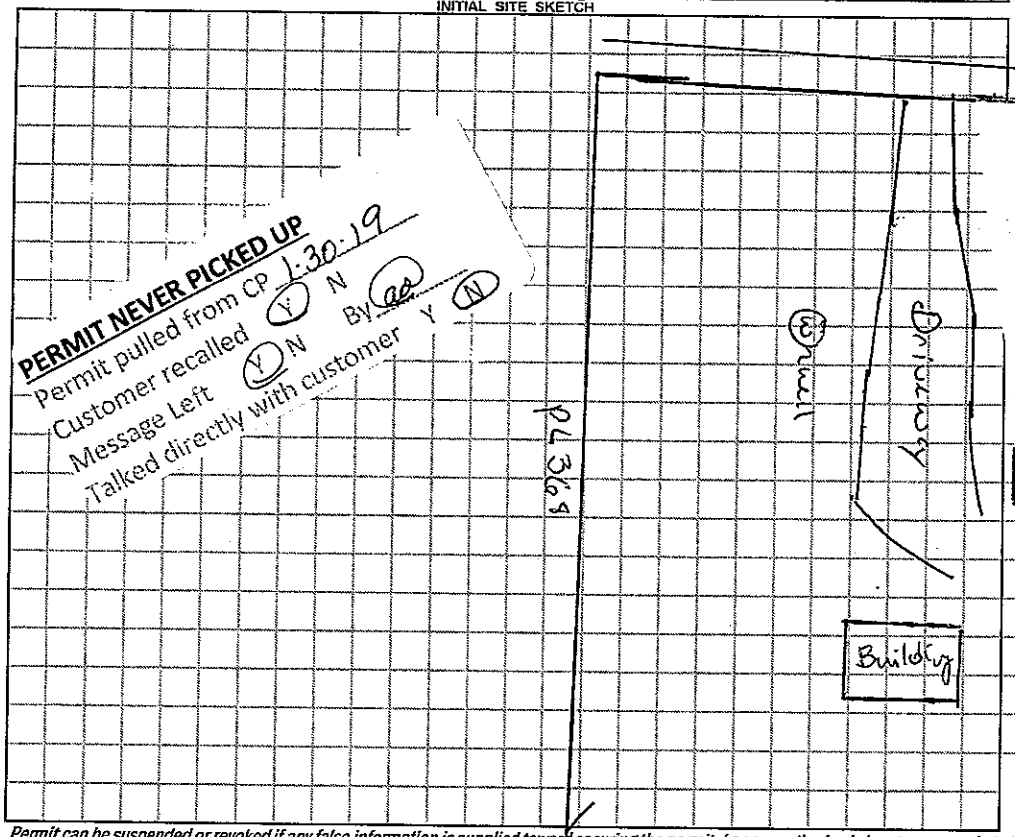
SUBDIVISION: ~ SECTION: ~ LOT # ~ LOT AREA: 2.27 Acres DESIGN FLOW: Existing L.T.A.R.: Existing

Septic Tank	1000 (gal)	STB		Date		☐ New System	☑ Repair	☐ Expansion	System Type: I (II) III IV V VI	☑ Residence	No. Bedrooms EXT
Pump Tank	~ (gal)	PT	~	Date	~	System Description:	~			☐ Business	No. Persons EXT
Pump Make	~	Model	~	Serial #	~	Repair System Description:	Tank Replacement			☐ Other	No. Employees
# Nitrification Fields	EXT	# Lines	EXT	Linear Ft:	EXT	Maintenance Agreement Required:	☐ YES	☑ NO		☐ Slab	☑ Crawl Space
Trench Width	EXT	Trench Bottom Depth(Low side)	EXT	Gravel Depth	EXT		☑ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing

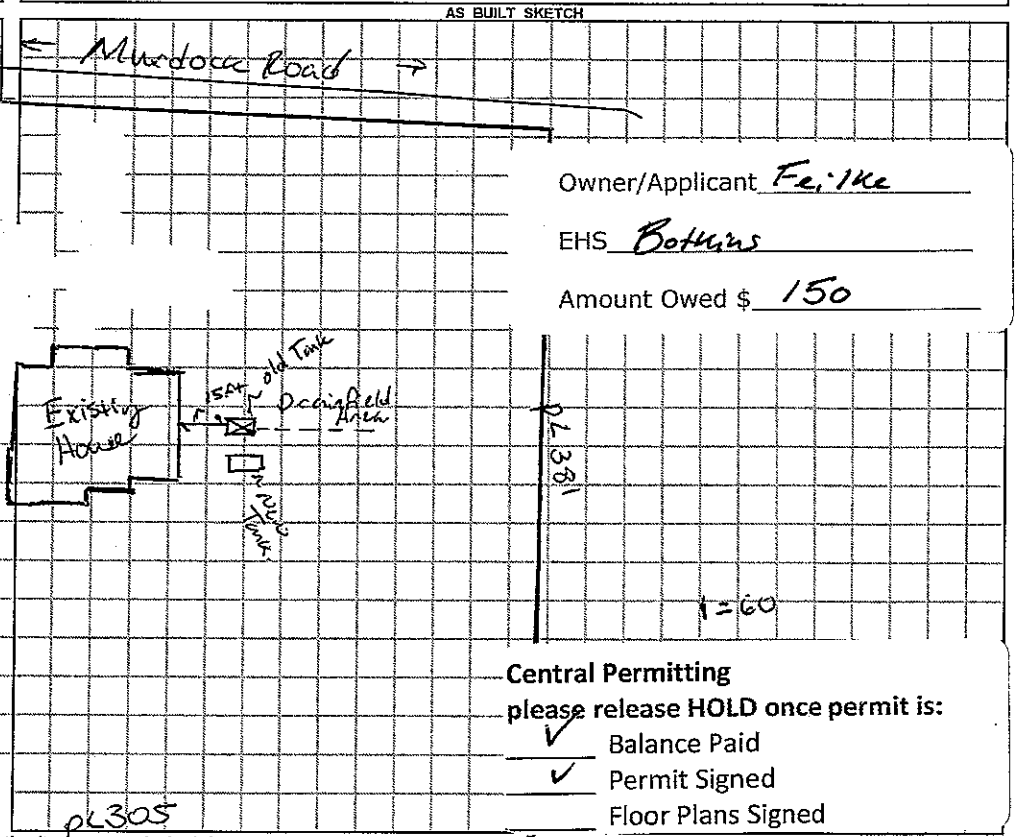
Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions: Pump, crush, fill old cracked Septic tank. Install New Septic tank. Inspect and replace D-Box if necessary. Maintain 15ft From house foundation.

INITIAL SITE SKETCH



AS BUILT SKETCH



Central Permitting
please release HOLD once permit is:
✓ Balance Paid
✓ Permit Signed
Floor Plans Signed

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: _____ Installed by: _____

IMPROVEMENT PERMIT by: Benjamin D Bottoms Date: 10/26/18 OPERATION PERMIT by: _____ Date: _____

AUTHORIZATION TO CONSTRUCT by: Benjamin D Bottoms Date: 10/26/18 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.