# IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 213599

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

PIN # 4742443373

APPLICANT: Jeffery + Sheila Hall APPLICANT ADDRESS: 141 Postell Dr Statesville NC 28625

SITE ADDRESS: 343 Duck Creek Rd Troutman NC PHONE: 704-929-2539 ALT. PHONE: 704-533-5423

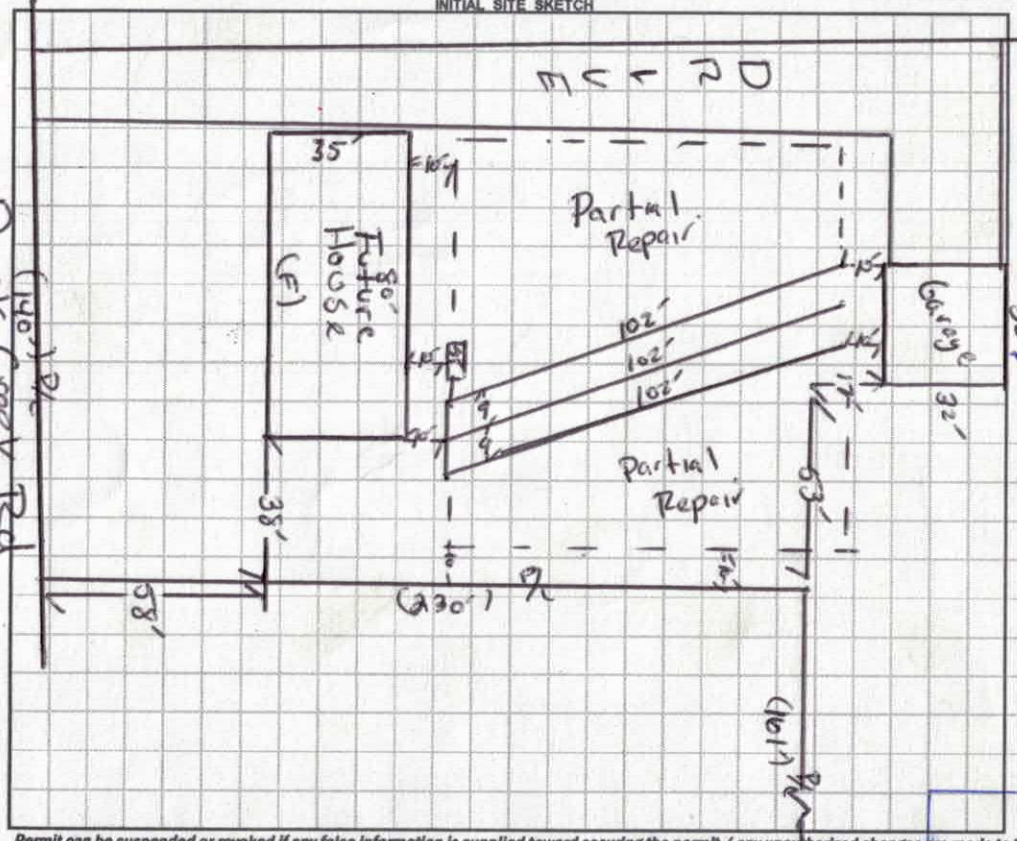
SITE DIRECTIONS: 77S to Exit 45 T/R then T/L Murdock Rd T/R Duck Creek Rd

SUBDIVISION: Gary C Freeze SECTION: N/A LOT # 1 LOT AREA: 2.499 DESIGN FLOW: 360 L.T.A.R.: 0.3

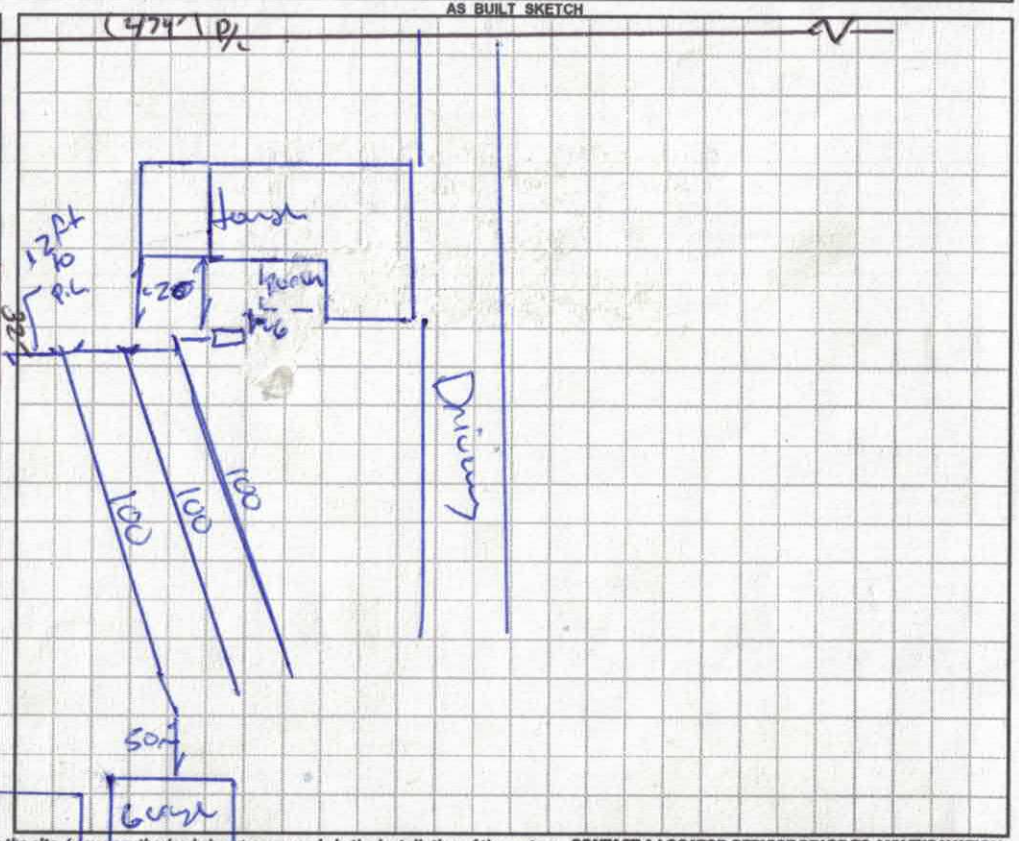
| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 | (gal) | STB | 2/1012 | Date | 2/28/17 | [X] New System | [ ] Repair | [ ] Expansion | System Type: I II [III] IV V VI | [X] Residence | No. Bedrooms | 3 | Water Supply |
| Pump Tank | | (gal) | PT | | Date | | System Description: | 25% Reduction | | | [ ] Business | No. Persons | 6 | [X] Private |
| Pump Make | | Model | | | Serial # | | Repair System Description: | 50% Reduction | | | [ ] Other | No. Employees | | [ ] Public |
| # Nitrification Fields | 1 | # Lines | 3 | | Linear Ft: | 300 | Maintenance Agreement Required: | [ ] YES | [X] NO | | [ ] Slab | [X] Crawl Space | | [ ] Community |
| Trench Width | 36" | Max. Trench Bottom Depth | 30" | | Gravel Depth | N/A | | [X] GRAVITY | [ ] PRESSURE | | [ ] Basement w/plumbing | | | [ ] Basement w/o plumbing |

Comments / Conditions: Install 25% reduction on contour with serial distribution.

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: Sheila Hall / Sheila Hall Date: 10-8-15 Installed by: David Vantz Grading

IMPROVEMENT PERMIT by: Date: 10/07/15 OPERATION PERMIT by: Benjamin A. Batkins Date: 6/28/17

AUTHORIZATION TO CONSTRUCT by: Date: 10/08/15 Existing System Inspected by: Date:

10-12-15

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

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

Sheet 1 of 1
PROPERTY ID #: 4742433372
COUNTY: Iredell

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

OWNER: Jeff Hall
ADDRESS: 343 Duck Creek Rd
PROPOSED FACILITY: SFD
PROPOSED DESIGN FLOW (.1949): 360
LOCATION OF SITE: 77 to Exit 47 to Murdock to Duck Creek w/R

APPLICATION DATE: 9/16/15
DATE EVALUATED: 10/06/15
PROPERTY SIZE: 2.499ac
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 | L 3% | 0-20 | WSBK CL | fr SE | PS | PS | N/A | N/A | PS .3 |
| | | 20-38 | SBK C | fi SE | | | | | |
| | | 38-48 | WSBK BC | fi/fr SE | | | | | |
| 2 | L 2% | 0-12 | WSBK CL | fr SE | PS | PS | 43" | 43" | PS .3 |
| | | 12-20 | SBK C | fi SE | | | | | |
| | | 20-43 | WABK BC | fi/fr SE | | | | | |
| | | 43-48 | Mass Stell | fr N/A | | | | | |
| 3 | L 3% | 0-20 | SBK C | fi SE | PS | PS | N/A | N/A | PS .3 |
| | | 20-48 | WABK BC | fi/fr SE | | | | | |
| 4 | L 3% | 0-10 | WSBK CL | fr SE | PS | PS | N/A | N/A | PS .3 |
| | | 10-24 | SBK C | fi SE | | | | | |
| | | 24-48 | WABK BC | fi/fr SE | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | PS | PS |
| System Type(s) | ~~III~~ | ~~III~~ |
| Site LTAR | .3 | .3 |

OTHER FACTORS (.1946): PS
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: H. Snow
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) | I | S (Sand) | 1.2 - 0.8 | 0.6 - 0.4 | SEXP (Slightly Expansive) | G (Single Grain) |
| CV (Convex Slope) | | LS (Loamy Sand) | | | EXP (Expansive) | M (Massive) |
| D (Drainage Way) | | | | | | CR (Crumb) |
| DS (Debris Slump) | II | SL (Sandy Loam) | 0.8 - 0.6 | 0.4 - 0.3 | | GR (Granular) |
| FP (Flood Plain) | | L (Loam) | | | | SBK (Subangular Blocky) |
| FS (Foot Slope) | | | | | | ABK (Angular Blocky) |
| H (Head Slope) | III | Si (Silt) | 0.6 - 0.3 | 0.3 - 0.15 | | PL (Platy) |
| L (Linear Slope) | | SiCL (Silty Clay Loam) | | | | PR (Prismatic) |
| N (Nose Slope) | | CL (Clay Loam) | | | | |
| R (Ridge) | | SCL (Sandy Clay Loam) | | | MOIST | WET |
| S (Shoulder Slope) | | SiL (Silt Loam) | | | | |
| T (Terrace) | | | | | VFR (Very Friable) | NS (Non-sticky) |
| | IV | SC (Sandy Clay) | 0.4 - 0.1 | 0.2 - 0.05 | FR (Friable) | SS (Slightly Sticky) |
| | | SiC (Silty Clay) | | | FI (Firm) | S (Sticky) |
| | | C (Clay) | | | VFI (Very Firm v. Very Sticky) | VS (Very Sticky) |
| | | O (Organic) | None | None | 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.

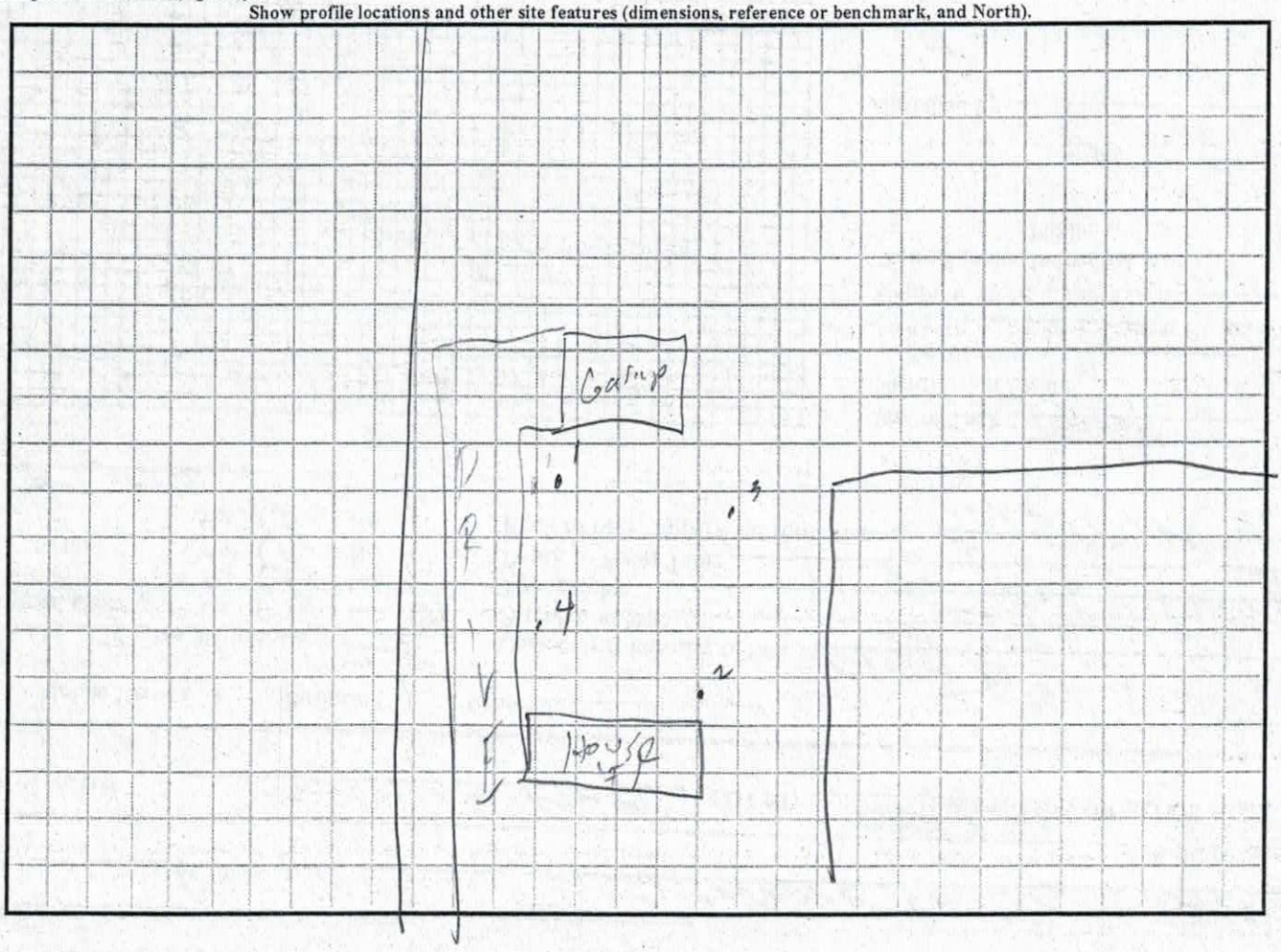
***NOTES***

| | |
|---|---|
| *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).



# IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

*(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)*

1. APPLICATION FOR: ___Improvement Permit ✓Authorization To Construct ___ Existing System Inspection

2. 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 check ( ) beside whichever is submitted if applicable* ___Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. Applicant Information:

| Applicant Name | Mailing Address | Home Phone # | Alternate Phone # |
|---|---|---|---|
| Jeffery + Sheila Hall | 141 Postell Dr Statesville, NC 28625 | 704-929-2539 | 704-533-5423 |
| Owner Name | Mailing Address | Home Phone # | Alternate Phone # |
| Jeffery + Sheila Hall | 141 Postell Dr. Statesville, NC 28625 | 704-929-2539 | 704-533-5423 |

4. Property Information:

343 Duck Creek Rd Troutman, NC 28166 (Street Address) ____ (Subdivision Name) ____ (Section/Phase and Lot Number)

Driving Directions: I-77 S to Exit 45 - Take Right
Left onto Murdock Rd - Rt on Duck Creek Rd
Property is on the right

5. RESIDENTIAL Site Development Information: *(Check or Complete ALL that apply)*

(X) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
(X) Repair To Failing Septic System due to ____
( ) Other ____

Maximum Number of Bedrooms 3
Maximum Number of Occupants 2
If Expansion, Current Number of Bedrooms ___

(X) Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) Basement w/Plumbing?
( ) Basement w/out Plumbing?

IF Non-Residential Site Development: Type of Business ____ Square Footage of Building ____ Maximum Number of Employees ____ Maximum Number of Seats ____

6. Proposed Water Supply:

(X) New Well ( ) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

7. Desired Septic System Type: *(You may rank in order of preference, if any)* ( ) EXISTING SYSTEM installed ____ (Year)

( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional (X) Other Gravity Feed Chamber

8. Please Answer The Following ( ) Yes (X) No Does the site contain any jurisdictional wetlands?
   To The Best of Your Ability: ( ) Yes (X) No Is any non-domestic sewage (i.e. industry) 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.

9. Signature: Jeffery Hall Sheila Hall (Property owner or owner's legal representative signature (SIGNATURE REQUIRED)) 9-16-15 (DATE)

# 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:**

✓ **Property Line measurements are clearly identified...** ____ **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*

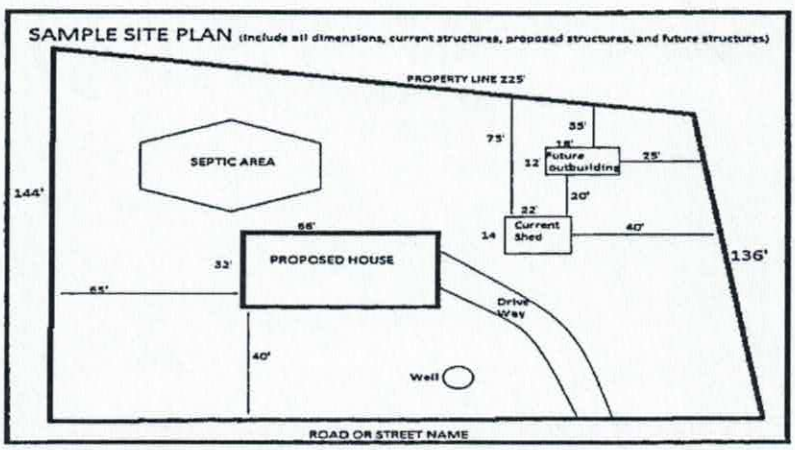
✓ **Front and side setbacks from property line...** ✓ **Preferred driveway location and configuration, preferred well location...**

✓ **Area you prefer your septic system to be placed...** ✓ **North arrow, or other sufficient indicator of direction...**

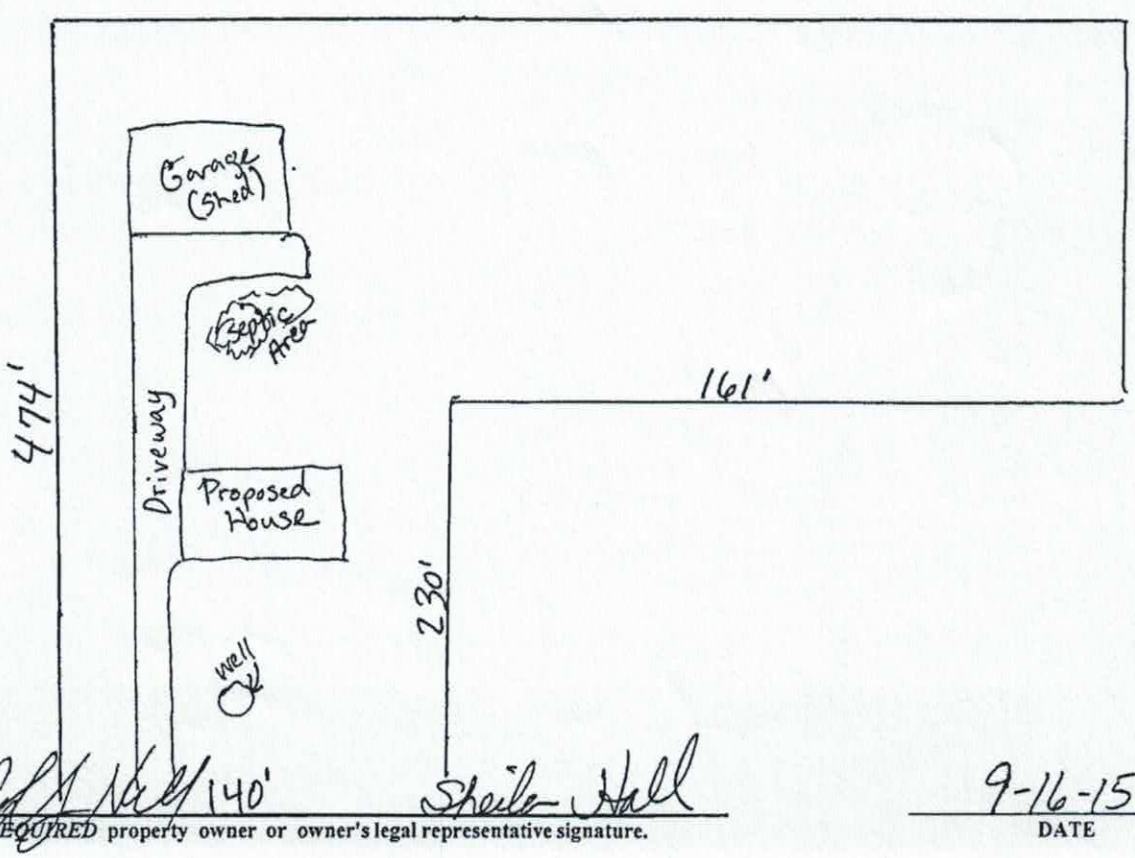
**Circle N/A on the following if appropriate:**

✓ **Location of septic systems and wells within 100' of your property... N/A**

NA **Location of easements and rights of ways on your property... N/A** NA **Location of any designated wetlands on the property... N/A**




**USE THIS SPACE TO DRAW YOUR SITE PLAN**



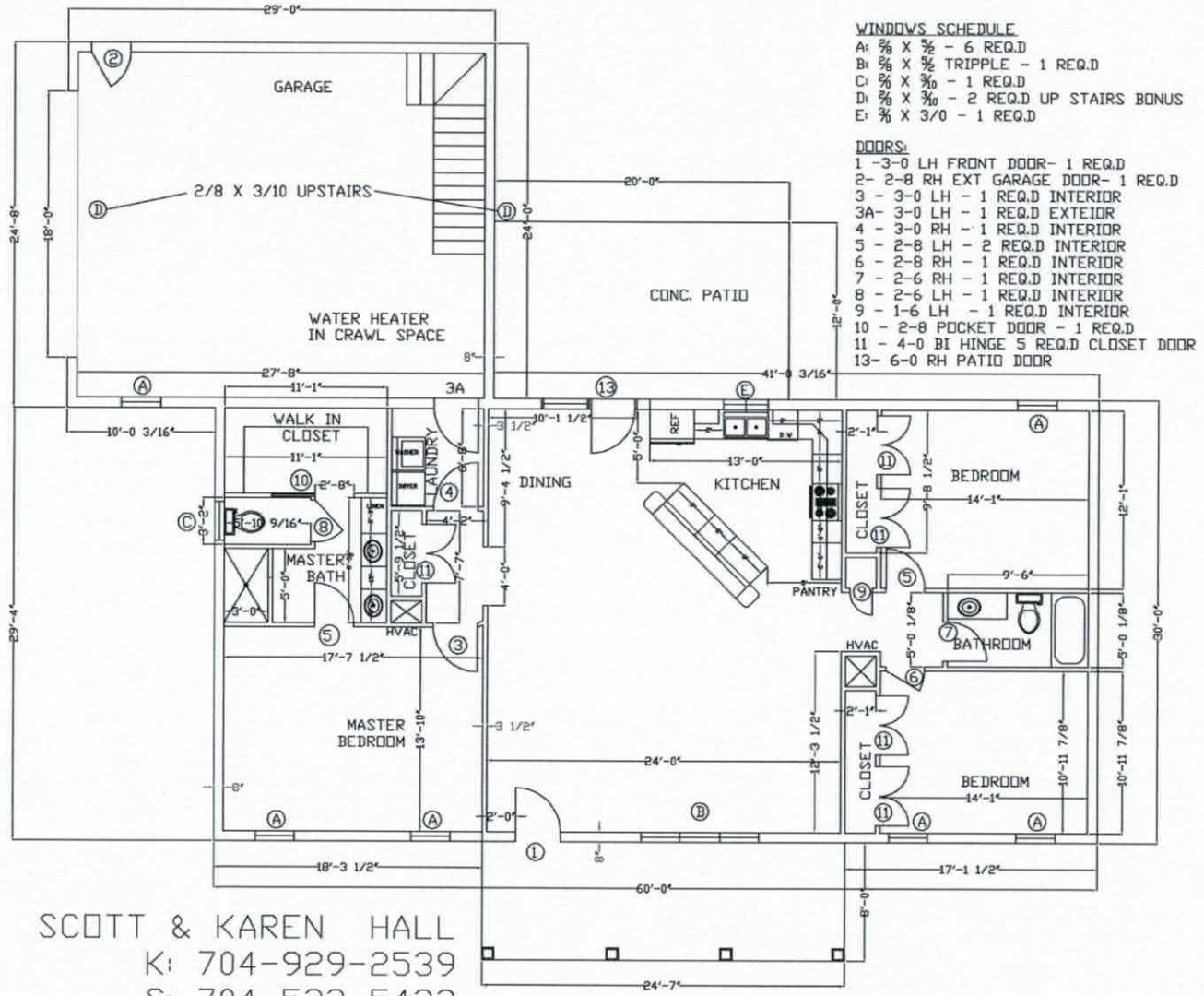

**Signature:** Sheila Hall

**REQUIRED property owner or owner's legal representative signature.**

9-16-15

**DATE**

**03/08/17 Rev (2)**




WINDOWS SCHEDULE
A: 2/8 X 5/2 - 6 REQ.D
B: 2/8 X 5/2 TRIPPLE - 1 REQ.D
C: 2/8 X 3/10 - 1 REQ.D
D: 2/8 X 3/10 - 2 REQ.D UP STAIRS BONUS
E: 3/8 X 3/0 - 1 REQ.D

DOORS:
1 -3-0 LH FRONT DOOR- 1 REQ.D
2- 2-8 RH EXT GARAGE DOOR- 1 REQ.D
3 - 3-0 LH - 1 REQ.D INTERIOR
3A- 3-0 LH - 1 REQ.D EXTEIOR
4 - 3-0 RH - 1 REQ.D INTERIOR
5 - 2-8 LH - 2 REQ.D INTERIOR
6 - 2-8 RH - 1 REQ.D INTERIOR
7 - 2-6 RH - 1 REQ.D INTERIOR
8 - 2-6 LH - 1 REQ.D INTERIOR
9 - 1-6 LH - 1 REQ.D INTERIOR
10 - 2-8 POCKET DOOR - 1 REQ.D
11 - 4-0 BI HINGE 5 REQ.D CLOSET DOOR
13- 6-0 RH PATIO DOOR

SCOTT & KAREN HALL
K: 704-929-2539
S: 704-533-5423

# HALL MAIN FLOOR LAYOUT

1800 SQ. FT HEATED

2017 by TODD ELLIS BUILDERS

Scale: 3/16" | Sheet 1 of 1

Revised 3/16/17

Drawing Name: -

Date: 3/6/17

Drawn by: Dale Ellis

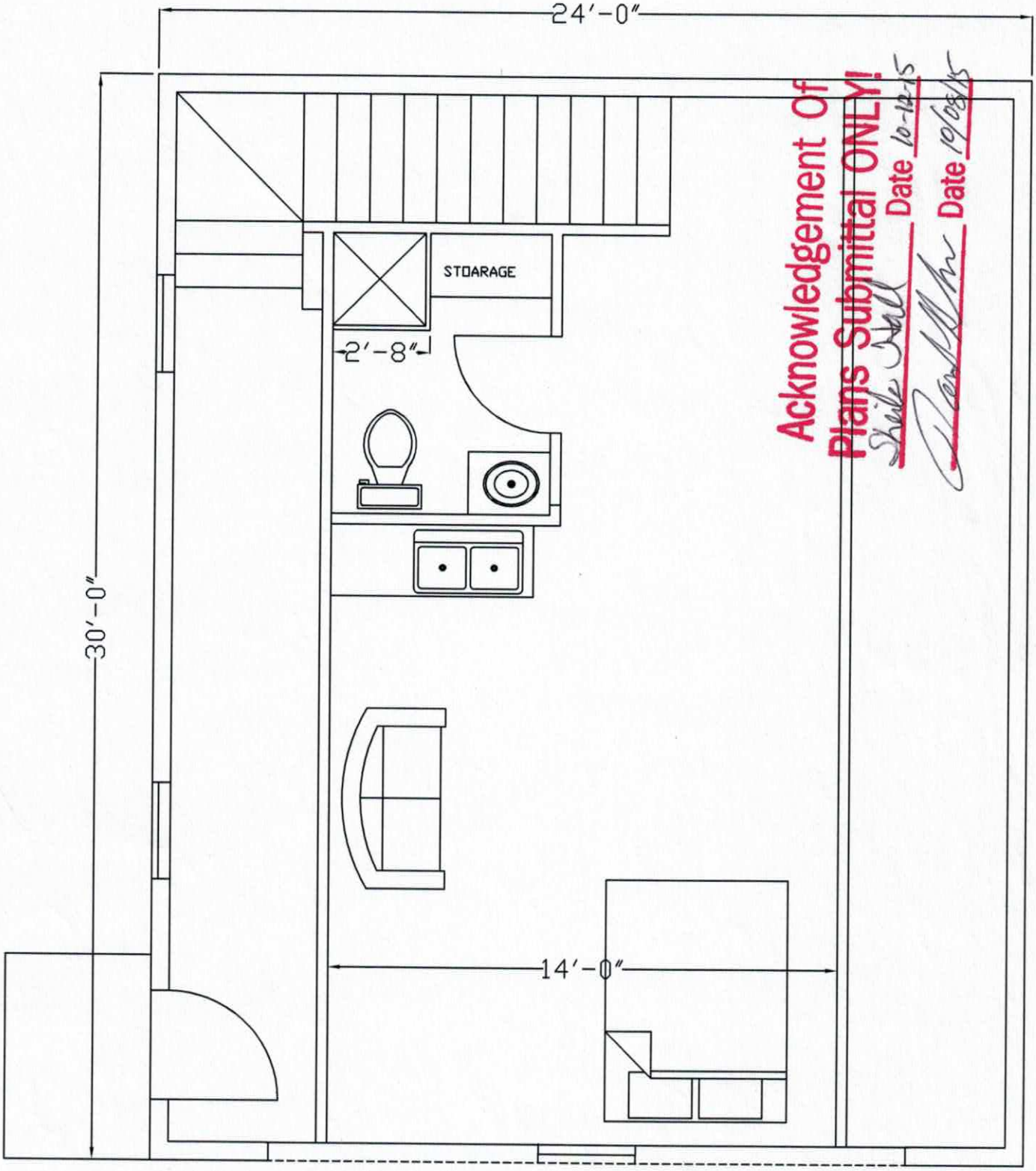
-IMPORTANT NOTE-

Project: SCOTT AND KAREN HALL
343 DUCK CREEK ROAD

TED PROJECT SUPERVISOR
TODD ELLIS
171 COPPER FARM RD.
STATESVILLE, NC 28625
EMAIL TODD@TODDELLISBUILDERS.COM

TODD ELLIS BUILDERS INC.
704-873-7373

PLAN




GARAGE WITH LIVING SPACE

# IREDELL COUNTY

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

| APPLICATION NUMBER |
|---|
| 213599 |
| Issue Date: 09/16/2015 |

## ZONING PERMIT

Residential

| Parcel Number | Street Address | Jurisdiction |
|---|---|---|
| 4742443372.000 | 343 DUCK CREEK ROAD, TROUTMAN, NC 28166 | |

| Owner Information | Applicant Information |
|---|---|
| Owner: HALL JEFFERY S+SHEILA KAREN | Applicant: HALL, JEFFERY |
| Address: 167 HUNTERS HILL DR<br>STATESVILLE, NC 28677 | Address: 141 POSTELL DRIVE<br>TROUTMAN, NC 28166 |
| Phone: | Phone: 704-929-2539 |

| Use Requested | Zone Code |
|---|---|
| SFD | RUR |

| Lot Acreage | F Setback | B Setback | L Setback | R Setback | Watershed | Flood Zone |
|---|---|---|---|---|---|---|
| | 35.00 | 35.00 | 15.00 | 15.00 | NOT | X |

**Remarks:**

Garage with living space- on site plan-
no project started for fees paid

$ PAID $577.25

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: See Attached Date: _____

| Permit Number | 49356 | TOTAL FEES: | $ 77.25 |
|---|---|---|---|