ICHD - ENVIRONMENTAL HEALTH DIVISION

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

BLDR-2023-19193

PERMIT # 2023-14482

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

PIN # 4746 -- 45 -- 7866

APPLICANT/OWNER: Corey Hamelink APPLICANT ADDRESS: PO Box 3965 Mooresville

SITE ADDRESS: 152 Lorraindale Dr, Statesville 28625 PHONE: 980-500-1251 ALT. PHONE –

SITE DIRECTIONS: 21 N - Lorraindale SAP CONTROLLED: ☐ YES ☒ NO

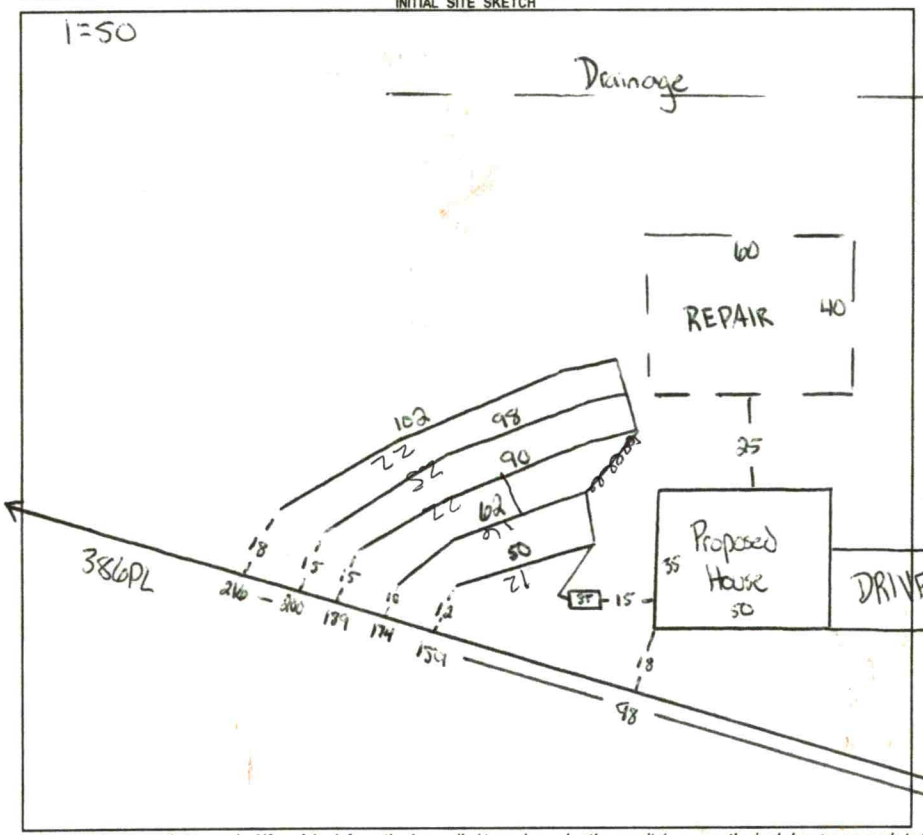
SUBDIVISION: Iredell Heights SECTION: – LOT # 615-622 LOT AREA: DESIGN FLOW: 480 gpd L.T.A.R.: 0.3

Septic Tank	1000	(gal)	STB	760	Date	7-10-23	☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	
Pump Tank		(gal)	PT		Date		System Description:	25% reduction			
Pump Make		Model			Serial #		Repair System Description:	Partial Repair			
# Nitrification Fields	1	# Lines	5		Linear Ft	400	Maintenance Agreement Required:	☐ YES	☒ NO		
Trench Width	36 in	Trench Bottom Depth ~~(Low side)~~			36 in		Gravel Depth	–	☒ GRAVITY	☐ PRESSURE	

☒ Residence	No. Bedrooms	4	Water Supply	
☐ Business	No. Persons	8	☐ Private	
☐ Other	No. Employees		☒ Public	
☐ Slab	☒ Crawl Space		☐ Community	
☐ Basement w/plumbing			☐ Basement w/o plumbing	

Comments / Conditions: Install on contour with the land. Do not grade, park, or drive on septic area

INITIAL SITE SKETCH



AS BUILT SKETCH

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

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:

IMPROVEMENT PERMIT by: Cory Hill Date: 2/17/23

AUTHORIZATION TO CONSTRUCT by: Cory Hill Date: 2/17/23

Installed by: Keegan Septic

OPERATION PERMIT by: Sydney Holland Date: 9/7/23

Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.

Item	Date	Initials
Drain Lines Checked		
Tanks Checked		
Pressure Manifold or Valve Box Checked		
Pressure Head Set		
Electrical Checked		
Floats Set		
Alarm Checked		
Maintenance Contract Needed? Y / N		
Comments:		

Repairs Only	
	State Code
Failing System Code	
Type of Distribution	G or P
Type of Failure/Malfunction	
Primary Cause of Failure/Malfunction	
Age of System? _____	
Initial or Repair? _____	

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SAP CONTROLLED: ☐ YES ☒ NO

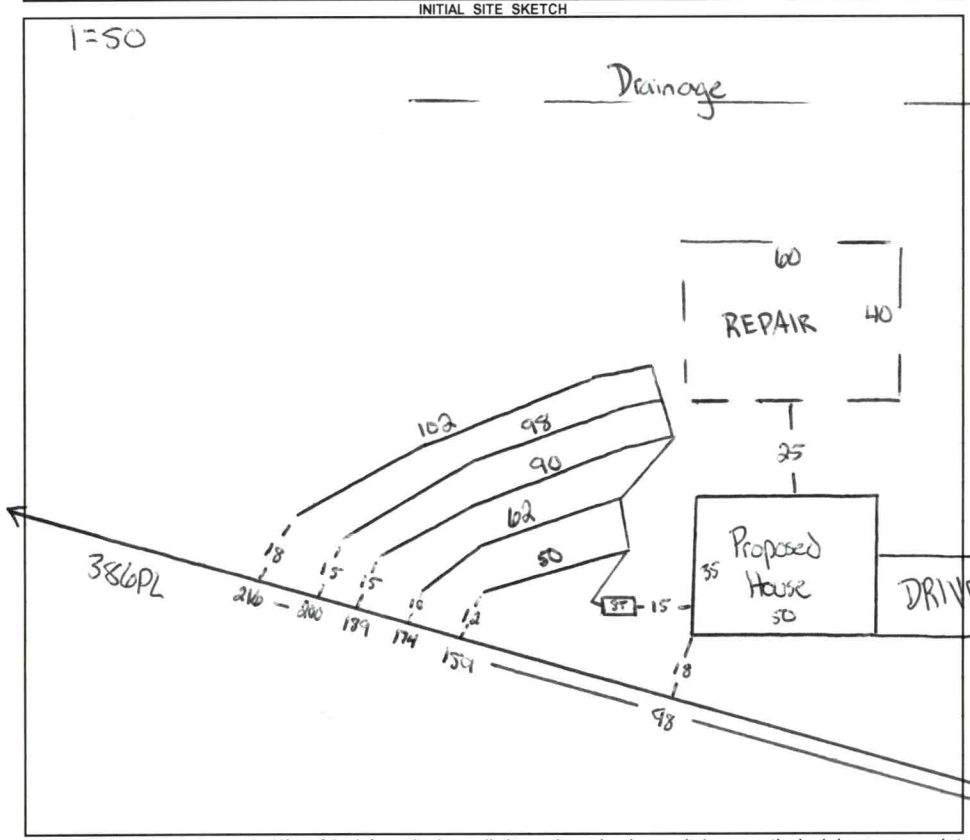
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Pump Make		Model			Serial #		Repair System Description:	Partial Repair			
# Nitrification Fields	1	# Lines	5		Linear Ft	400	Maintenance Agreement Required:	☐ YES	☒ NO		
Trench Width	36 in	Trench Bottom Depth ~~(Low side)~~		36 in	Gravel Depth	–	☒ GRAVITY	☐ PRESSURE			

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☐ Business	No. Persons	8	☐ Private
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☐ Slab	☒ Crawl Space		☐ Community
☐ Basement w/plumbing			☐ Basement w/o plumbing

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Owner / Applicant Signature: Online Signature Date: Installed by:

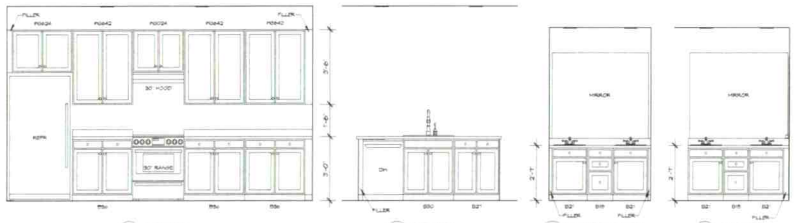
IMPROVEMENT PERMIT by: Cory Hill Date: 2/17/23 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Cory Hill Date: 2/17/23 Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.

Item	Date	Initials
Drain Lines Checked		
Tanks Checked		
Pressure Manifold or Valve Box Checked		
Pressure Head Set		
Electrical Checked		
Floats Set		
Alarm Checked		
Maintenance Contract Needed? Y / N		
Comments:		

Repairs Only	
	State Code
Failing System Code	
Type of Distribution	G or P
Type of Failure/Malfunction	
Primary Cause of Failure/Malfunction	
Age of System? _____	
Initial or Repair? _____	



A KITCHEN
B KITCHEN
C MASTER BATH
D BATH 2

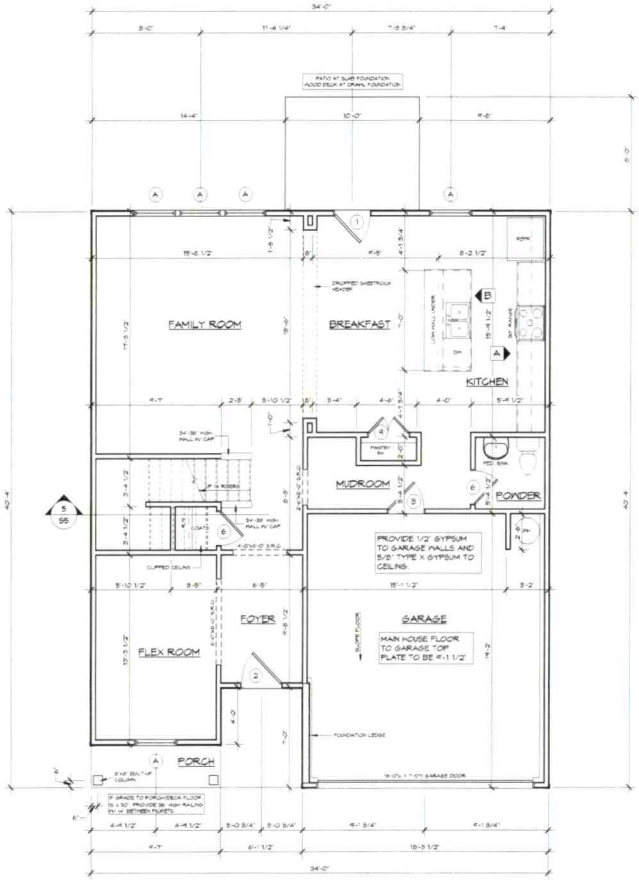
CABINET ELEVATION NOTES:
1. CABINET MAKER TO VERIFY ALL CABINET DIMENSIONS ON JOB SITE
2. NOMINAL DIMENSIONS SHOWN FOR CABINETS DO NOT INCLUDE FILLER SPACES FOR WALL SCRIBING
5. DO NOT SCALE DIMENSIONS FROM PRINTS. PLANS AND DETAILS MAY NOT ALWAYS PRINT TO SCALE. USE DIMENSIONS GIVEN OR CONSULT DESIGNER FOR FURTHER CLARIFICATION.

Cay Wid
2/17/23

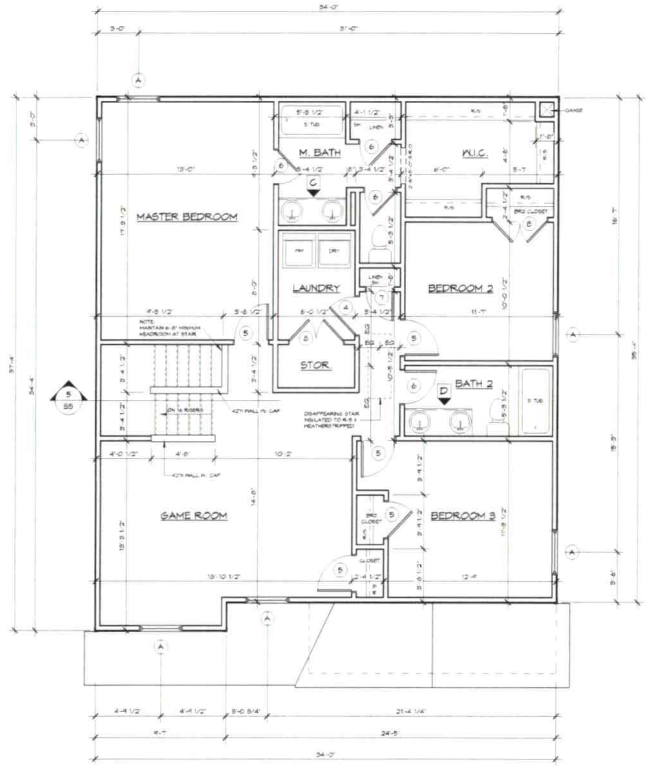
DOOR SCHEDULE		
TYPE	DOOR SIZE	DESCRIPTION
1	2'-8" x 6'-8" x 1 3/4"	1 LIGHT
2	3'-0" x 6'-8" x 1 3/4"	6 PANEL
3	2'-8" x 6'-8" x 1 3/4"	6 PANEL, 20 MINUTE
4	2'-8" x 6'-8" x 1 3/8"	6 PANEL
5	2'-6" x 6'-8" x 1 3/8"	6 PANEL
6	2'-4" x 6'-8" x 1 3/8"	6 PANEL
7	2'-0" x 6'-8" x 1 3/8"	6 PANEL
8	(2) 2'-0" x 6'-8" x 1 3/8"	6 PANEL, BI-HINGE
9	(2) 1'-6" x 6'-8" x 1 3/8"	6 PANEL, BI-HINGE

WINDOW SCHEDULE		
TYPE	WINDOW SIZE	DESCRIPTION
A	3'-0" x 5'-0"	SINGLE-HUNG

WINDOW NOTES:
- SEE PLAN FOR TEMPERED LOCATIONS.
- ENSURE W/ MANUFACTURER THAT EGRESS WINDOWS IN BEDROOMS MEET EGRESS REQUIREMENTS PER BUILDING CODE.
- PROVIDE FALL PROTECTION ON WINDOWS WHERE THE SILL IS LESS THAN 24" ABOVE THE FLOOR AND GREATER THAN 72" ABOVE GRADE.



1 FIRST FLOOR PLAN
1/4" = 1'-0"



2 SECOND FLOOR PLAN
1/4" = 1'-0"

GENERAL PLAN NOTES:
1. DESIGN BASED ON 2018 NORTH CAROLINA RESIDENTIAL CODE.
2. ALL CONSTRUCTION SHALL BE IN ACCORDANCE WITH 2018 NORTH CAROLINA RESIDENTIAL CODE AND LOCAL BUILDING CODES.
3. CONTRACTOR TO VERIFY ALL DIMENSIONS. DO NOT SCALE DIMENSIONS FROM PROJECT DRAWING. PLANS AND DETAILS MAY NOT ALWAYS PRINT TO SCALE. USE DIMENSIONS GIVEN OR CONSULT DESIGNER FOR FURTHER CLARIFICATION.
4. GRADE ELEVATIONS MAY VARY DUE TO TYPE OF FOUNDATION AND OTHER ON SITE CONSIDERATIONS.
5. PROVIDE ATTIC ACCESS W/ WEATHERSTRIPPING AND INSULATED PER R807 & LOCAL BUILDING CODE.
6. MECHANICAL EQUIPMENT AND WATER HEATER TO BE LOCATED ON SITE UNLESS SHOWN ON PLANS.
7. FRAMING HEIGHTS:
   A. FLOOR TO TOP PLATE FIRST FLOOR = 9'-1 1/2"
   B. FLOOR TO TOP PLATE SECOND FLOOR = 8'-1 1/2"
   C. FLOOR TO WINDOW HEAD FIRST FLOOR = 7'-0"
   D. FLOOR TO WINDOW HEAD SECOND FLOOR = 7'-0"

DIMENSION NOTES:
1. ALL EXTERIOR DIMENSIONS ARE TO MASONRY OR EXTERIOR FACE OF STUD
2. ALL INTERIOR DIMENSIONS ARE TO FACE OF STUD.

BRICK VENEER NOTES:
1. ANY BRICK VENEER SHOWN ON PLANS IS ASSUMED TO BE 4" THICK WITH A 1" AIR SPACE (5" FROM SHEATHING TO OUTSIDE OF BRICK)
2. PROVIDE STEEL ANGLE OVER OPENINGS PER STRUCTURAL PLAN AND NOTES.
3. PROVIDE STEEL ANGLE WHERE BRICK SITS ON RAFTERS PER STRUCTURAL PLAN AND NOTES.

STUD WALL NOTES:
- ALL STUD WALLS ARE TO BE FRAMED WITH 2X4 STUDS AT 16" O.C. UNLESS NOTED OTHERWISE.
- STUDS AT 2X6 WALLS ARE TO BE FRAMED AT 16" O.C. UNLESS NOTED OTHERWISE.

= 2X4 STUD WALL
= 2X6 STUD WALL

LIST OF ABBREVIATIONS
A.F.F. - ABOVE FINISHED FLOOR
A.O. - ARCHED OPENING
CLG. - CEILING HEIGHT
GWB - GOLD WATER HOSE BIBB
DIA - DIAMETER
DIAG - DIAGONAL
DISP - DISPOSAL
E.J. - DOUBLE JOIST
DBL - DRYER
H.B. - HOSE BIBB
H.W.H. - HOT WATER HOSE BIBB
N.T.S. - NOT TO SCALE
OH - OVERHANG
P.T. - PRESSURE TREATED
REFR - REFRIGERATOR
R.G.T. - ROOF GIRDER TRUSS
R.S. - ROD SHELF
SH - SHELVES
T.O.F. - TOP OF
W/C - UNDER COUNTER
U.N.O. - UNLESS NOTED OTHERWISE
W.C. - WATER CLOSET
W/M - WASHING MACHINE

SCALE 1/4" = 1'-0"

Helmsman Homes
Fits The Bill - A

Tino Home Design, LLC
Residential Design and Drafting Services

Plot Date: 10/13/2022
Revision Date:
Drawn By: DG
Sheet Number: A1

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

Sheet 1 of 1
PROPERTY ID #: 4746457860
COUNTY: Iredell

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

OWNER: Helmsman Homes
ADDRESS: PO Box 3965 Mooresville
PROPOSED FACILITY: 4 bdr home
PROPOSED DESIGN FLOW (.1949): 480 gpd
LOCATION OF SITE: 152 Lorraindale
APPLICATION DATE
DATE EVALUATED: 2/14/23
PROPERTY SIZE:
PROPERTY RECORDED: yes

WATER SUPPLY: Private X Public Well Spring Other
EVALUATION METHOD: Auger Boring X Pit Cut
TYPE OF WASTEWATER: X 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
1	Linear 12%	0-35	C ABK	SS SP SE FR		63	-	-	PS 0.3
		35-63	CL SBK	SS SP SE FR	SAP incl in CL				
2	Linear 14%	0-33	C ABK	SS SP SE FR		66	-	-	PS 0.3
		33-66	CL SBK	SS SP SE FR	SAP incl in CL				
3	Shoulder 8%	0-24	C SBK	SS SP SE FR		62	-	-	PS 0.35
		24-62	CL SBK	SS SP SE FR	heavy SAP incl in CL				
4	Foot 6%	0-32	C ABK	SS SP SE FR			-	-	PS 0.25
		32-56	CL ABK	SS SP SE FR	10 YR 6/3 @ 36"+ ~~chroma~~				

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	25%	Partial
Site LTAR	.3	

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Cory Whicker
OTHER(S) PRESENT: Sarah Bracken

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.

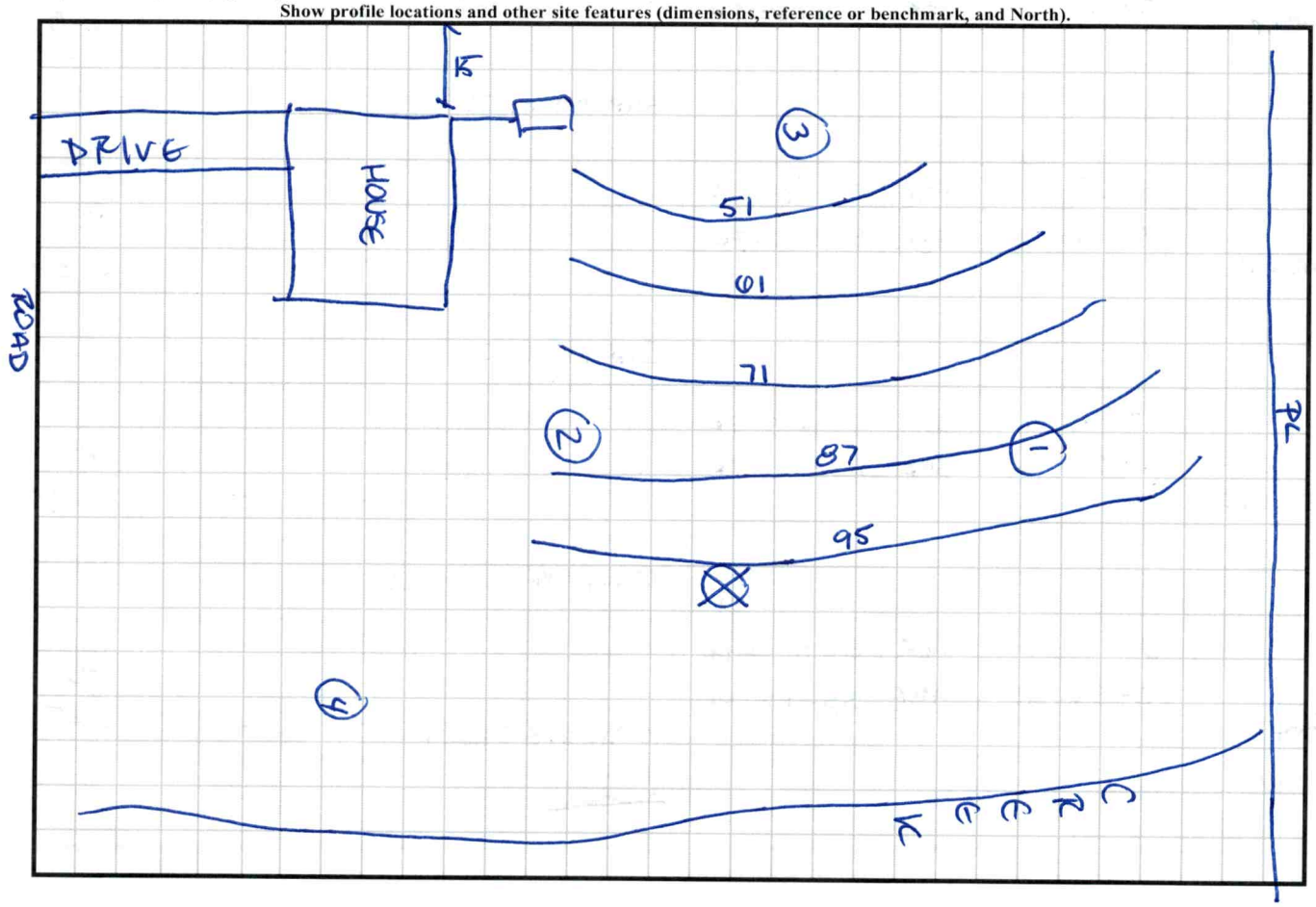
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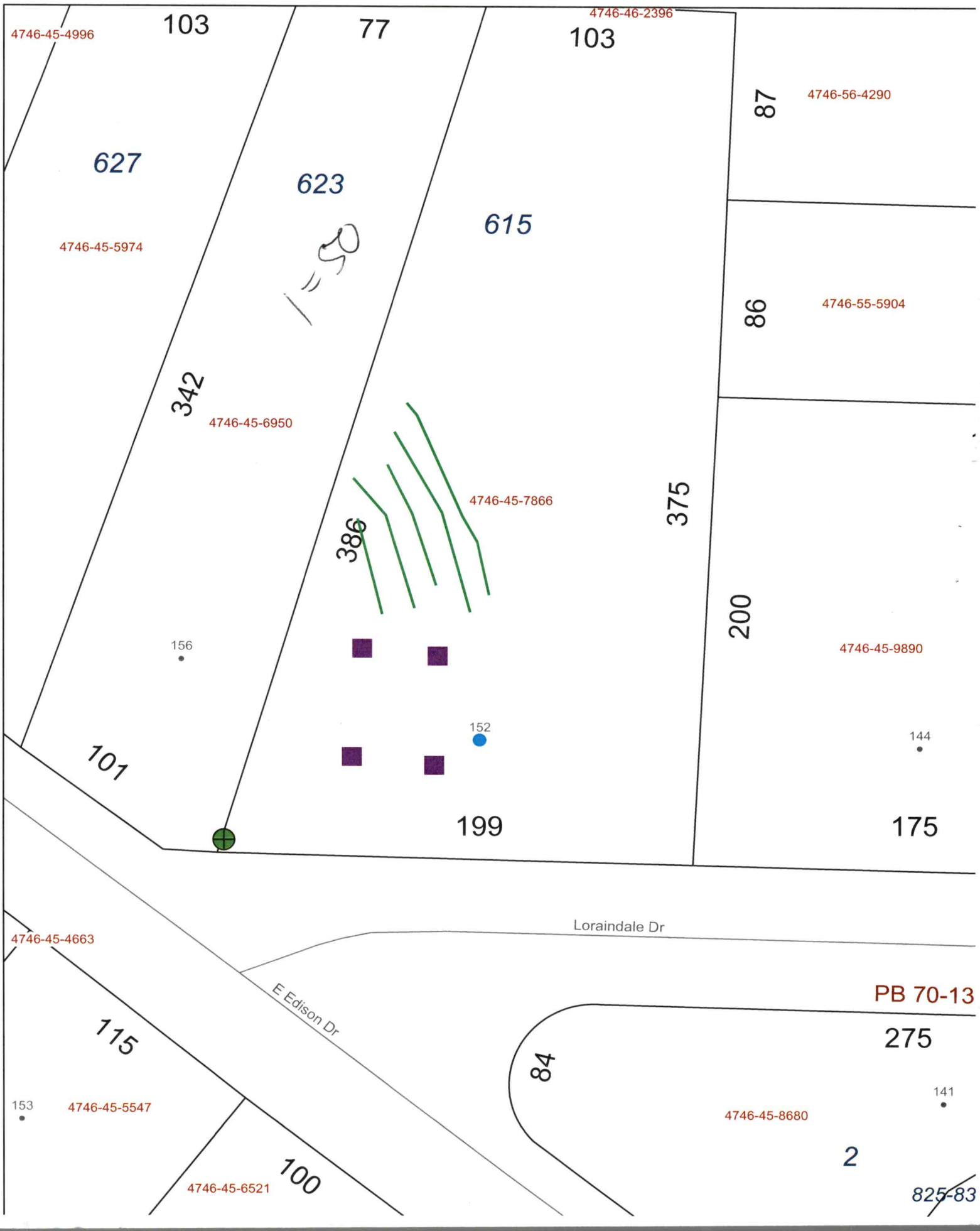
HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or 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/ft²

Show profile locations and other site features (dimensions, reference or benchmark, and North).




4746-45-4996
103
77
4746-46-2396
103
87
4746-56-4290
627
623
615
4746-45-5974
1"=50'
86
4746-55-5904
342
4746-45-6950
4746-45-7866
375
386
200
156
4746-45-9890
152
144
101
199
175
Loraindale Dr
4746-45-4663
PB 70-13
E Edison Dr
115
275
84
153
4746-45-5547
141
4746-45-8680
2
100
4746-45-6521
825-83