IREDELL COUNTY HEALTH DEPARTMENT

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

PERMIT # 235862

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

PIN # 4750534716 ✓

APPLICANT/OWNER: Justine Brawley — APPLICANT ADDRESS: 129 Creston Ct, Mooresville

SITE ADDRESS: 533 Houston Rd, Troutman 28166 — PHONE: 704-677-3034 — ALT. PHONE —

SITE DIRECTIONS: 21S → L on Houston Rd → on left — SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Brawley Family Farm — SECTION: — LOT # 1 — LOT AREA: 1 ac — DESIGN FLOW: 480gpd — L.T.A.R.: .3 (.275 repair)

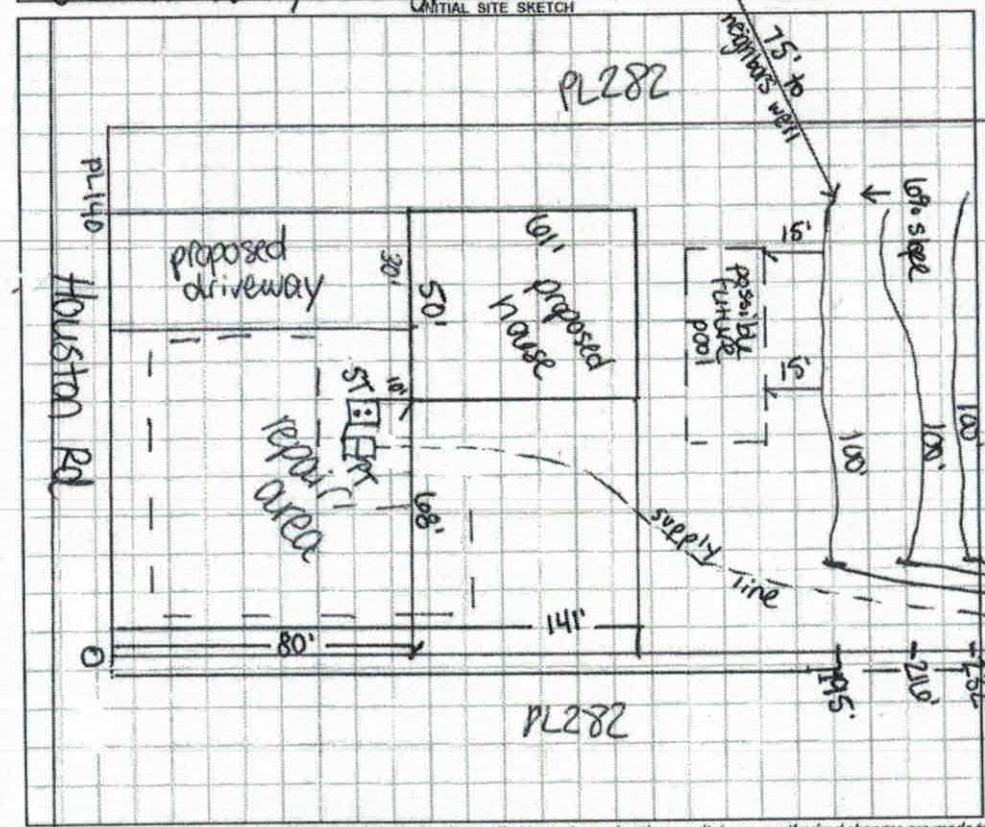
Septic Tank	1000 (gal)	STB: Infiltrator	Date 1050	☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 4	Water Supply	
Pump Tank	1000 (gal)	PT: Infiltrator	Date 1050	System Description: 25% reduction - PM				☐ Business	No. Persons 8	☐ Private	
Pump Make	Zoeller	Model 140	Serial #	Repair System Description: 50% reduction				☐ Other	No. Employees	☒ Public	
# Nitrification Fields	1	# Lines 4	Linear Ft 400	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☒ Crawl Space	☐ Community	
Trench Width	36"	Trench Bottom Depth (Low side)	33" (36" high)	Gravel Depth —	☐ GRAVITY	☒ PRESSURE		☐ Basement w/ plumbing		☐ Basement w/o plumbing	

Comments / Conditions: Install on contour. Do not pave / grade septic area. Use 1/2" sch 40 taps @ 7.11 gpm on each line. 0.3" drawdown, 28.44 gpm

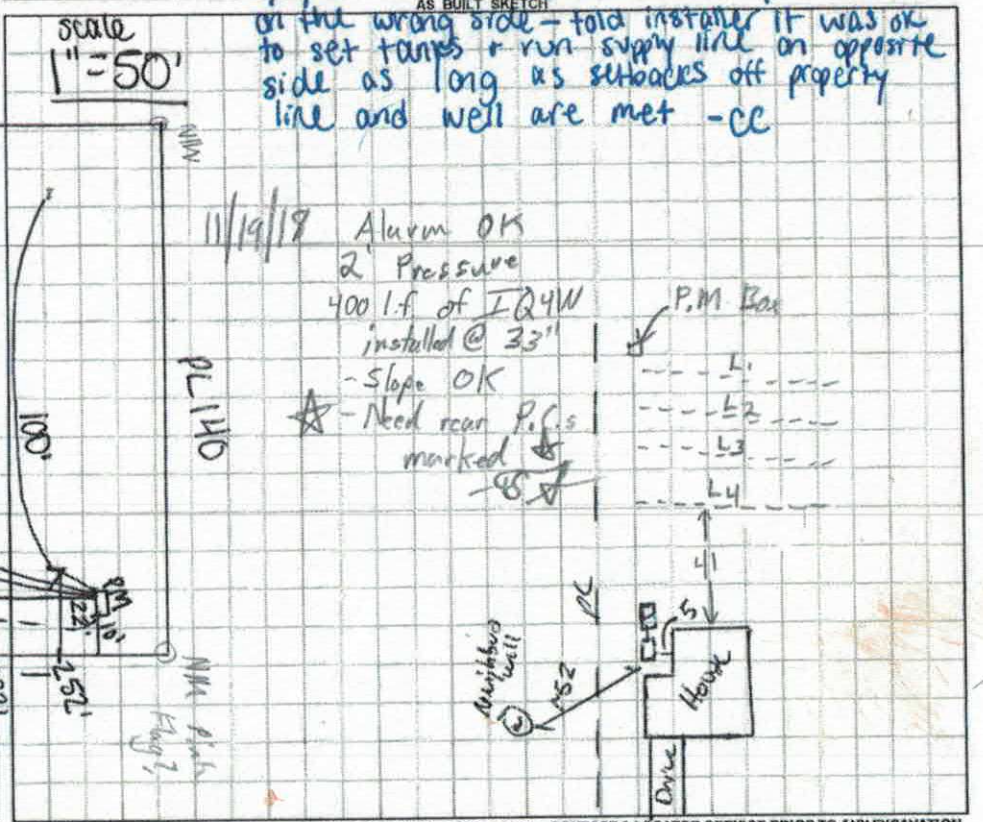
★ Back right property corner & back property line must be surveyed/visible at time of inspection.

11/13/18 - was informed house was plumbed on the wrong side - told installer it was ok to set tanks & run supply line on opposite side as long as setbacks off property line and well are met - CC

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: Justine B Brawley — Date: 8/6/18 — Installed by: Sid Gaskins - NC Water Management

IMPROVEMENT PERMIT by: Carla C. Caul — Date: 7/31/18 — OPERATION PERMIT by: Marina Dotson — Date: 1/3/19

AUTHORIZATION TO CONSTRUCT by: Carla C. Caul — Date: 7/31/18 — 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.

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

Sheet 1 of 2
PROPERTY ID #: 475053471608
COUNTY: Iredell

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

OWNER: Justine Brawley
ADDRESS: 129 Creston Ct
PROPOSED FACILITY: 4BR
LOCATION OF SITE: 535 Houston Rd
PROPOSED DESIGN FLOW (.1949): 480gpd
APPLICATION DATE 5/16/18
DATE EVALUATED: 7/31/18
PROPERTY SIZE: 1ac
PROPERTY RECORDED: Y

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	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	SS 6%	0-11	SBK SCL	Fr SSSP SEXP	few sap inc.	49"	N/A	N/A	PS .275
		11-37	SBK C	" "					
		37-49	ABK CL	" "					
2	SS 6%	0-7	SBK SCL	Fr SSSP SEXP	few sap/ heavy mica	52"	N/A	N/A	PS .3
		7-39	SBK C	" "					
		39-52	SBK CL	" "					
3	SS 6%	0-10	SBK SCL	Fr SSSP SEXP	few sap inc.	48"	N/A	N/A	PS .3
		10-33	SBK C	" "					
		33-48	SBK CL	" "					
4	SS 6%	0-7	SBK SCL	Fr SS SP SEXP	many sap inc/ heavy mica	52"	N/A	N/A	PS .3
		7-33	SBK C	" "					
		33-52	SBK CL	" "					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	25% - PM	50%
System Type(s)	400'	290'
Site LTAR	.3	.275

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

MOIST	WET
VFR (Very Friable)	NS (Non-sticky)
FR (Friable)	SS (Slightly Sticky)
FI (Firm)	S (Sticky)
VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
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.

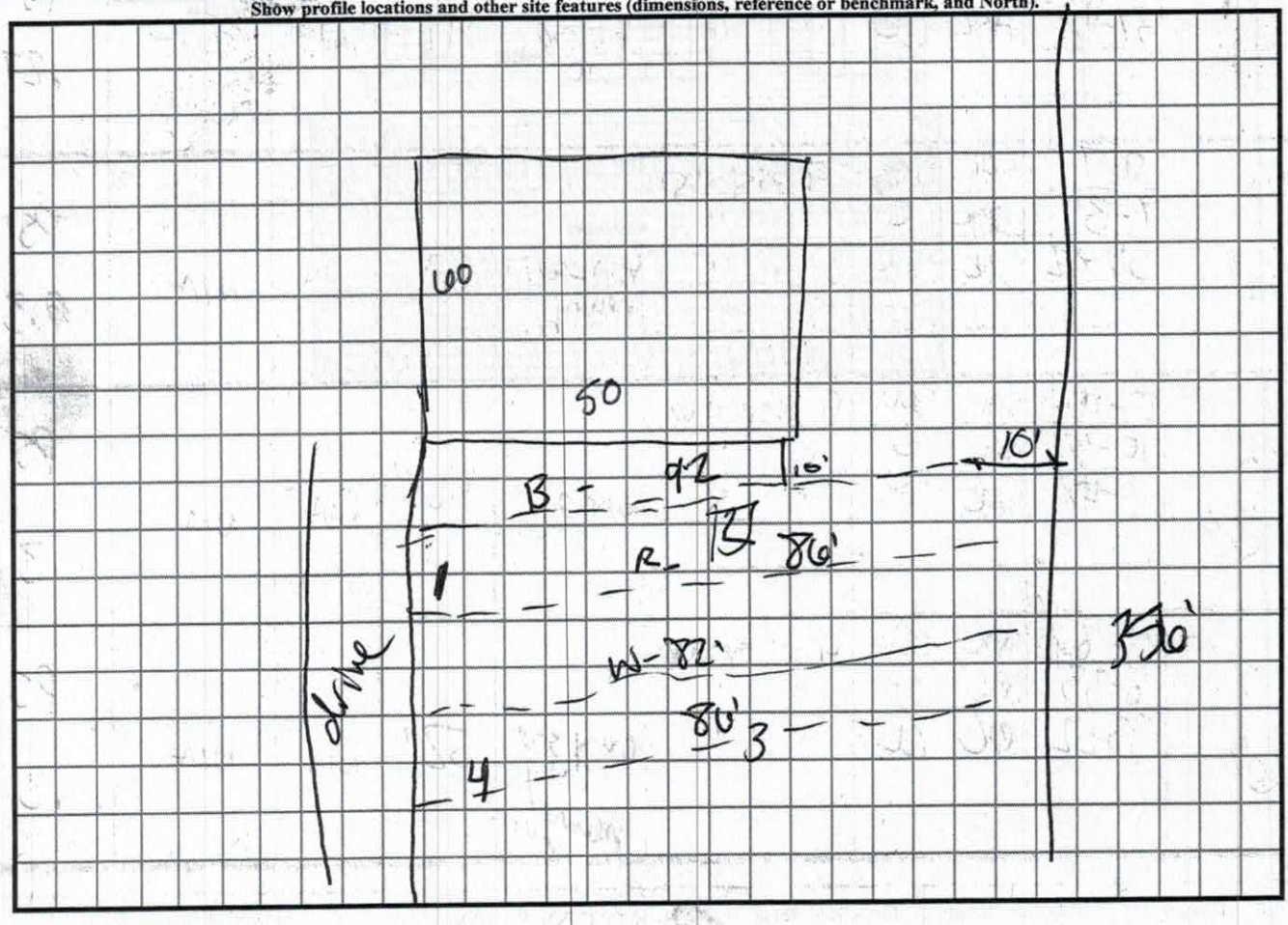
NOTES

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/ft²

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



.275 430' 85%
290' - panel

580'

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

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

PROPERTY ID #: 475053 47768
DATE OF EVALUATION: 7/31/18
COUNTY: Iredell

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	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
5	SS 6%	0-15	SBK SCL	FR SS SP SBKP	NA	50"	NA	NA	PS .3
		15-33	SBK C	" "					
		33-50	SBK CL	" "					
6	SS 6%	0-9	SBK SCL	FR SS SP SBKP	N/A	48"	N/A	N/A	PS .3
		9-34	SBK C	" "					
		34-48	SBK CL	" "					

COMMENTS:

Loose Pits.

RECEIVED MAY 22 2018

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Paid $500.00 # 235862

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(x) Septic Improvement Permit (x) 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: (X) 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: Justine Brawley Address: 129 Creston Ct. Mooresville NC 28115 Zip: _____

Applicant Email: jbrawley@weichertlka.com Phone: 704-677-3034 Alt. Phone: _____

Owner Name: weichert Address: _____ Zip: _____

Owner Email: lka.com Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 533 Houston Rd. Troutman, NC 28166

Subdivision Name: _____ Section/Phase: _____ Lot Number: _____

Driving Directions: _____

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

(X) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 8
( ) Swimming Pool
( ) Other Addition/Structure: _____

CHECK FOUNDATION TYPE
(X) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

Non-Residential Site Development: Type of Business: _____
Square Footage of Building: 3600 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 (X) City Water ( ) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: _____
( ) No Preference ( ) Alternative (X) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other: _____

Please answer the following to the best of your ability:

( ) Yes (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industrial) 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.

Signature: Justine Brawley 5/16/18
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

back corner must be surveyor @ metal

Tues 6/5 2pm

5 | 0-15 SCL
15-33 C
33-50 CL

thurs or friday - so check

6 0-9 SCL
9-34 C
34-48 CL

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

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.

I, George W. Brawley, Jr, am the legal owner(s) of the property located at _____, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Brawley Farm Properties, RLLLP _____, 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.

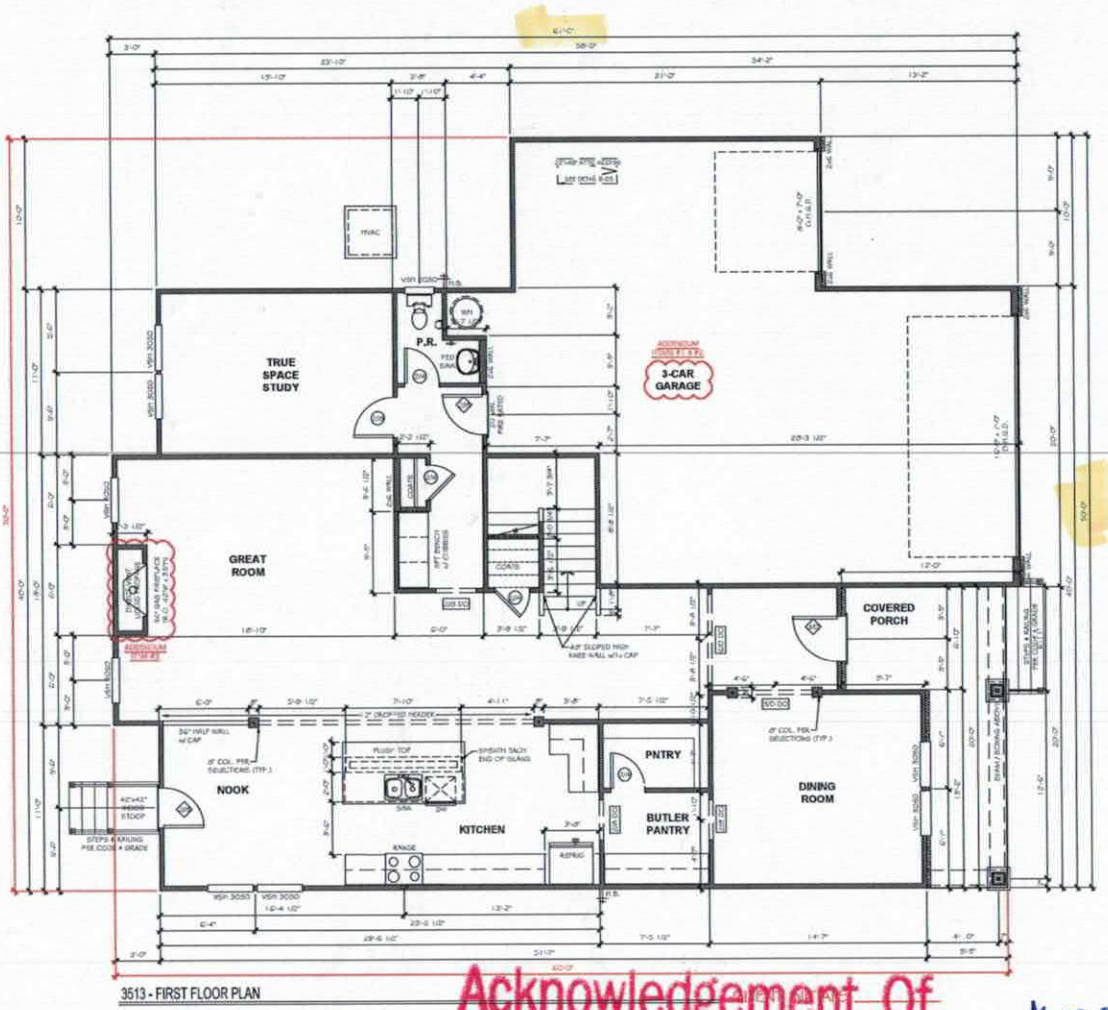
George W Brawley Jr. 5-22-2018 — Signature of Owner(s) / Date

[signature] 5/22/18 — Signature of Witness / Date

Please return this signed form to the appropriate office:

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



3513 - FIRST FLOOR PLAN

Acknowledgement Of
Plans Submittal ONLY!
Carter C. Cox Date 7/31/18
Justine Bradley Date 8/16/18

* garage will be on opposite side according to owner

OS JB DS DBJ

TrueHomes
IT'S ALL ABOUT U
2649 Brekonridge Centre Dr.
Suite 104
Monroe, N.C. 28110
704-271-1191

YOUR LOT
REGION A
LOT # 3

WINSLOW
3513

MECKLENBURG

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DRAWN BY: DRM
DATE: 04-06-18
SCALE: 3/16"= 1'-0"
CHECKED BY: SHC

SHEET: A2.1

DS

DS

SHEET:	A2.2
DRAWN BY:	DPM
DATE:	04-06-16
SCALE:	3/16"= 1'-0"
CHECKED BY:	SHC

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WINSLOW
3513

MECKLENBURG

YOUR LOT
REGION A
LOT # 3

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IT'S ALL ABOUT U
2649 Brekonridge Centre Dr.
Suite 104
Monroe, N.C. 28110
704-271-1191

IREDELL COUNTY

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

APPLICATION NUMBER
235862
Issue Date: 05/22/2018

ZONING PERMIT
Residential

Parcel Number	Street Address	Jurisdiction
4750534768.000	533 HOUSTON ROAD, TROUTMAN, NC 28166	

Owner Information		Applicant Information	
Owner:	BRAWLEY FARM PROPERTIES RLLLP	Applicant:	BRAWLEY, JUSTINE
Address:	P O BOX 4564	Address:	129 CRESTON CT
	MOORESVILLE, NC 28117		MOORESVILLE, NC 28115
Phone:		Phone:	704-677-9094 x3034

Use Requested	Zone Code
SFD	

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
	35.00	35.00	15.00	15.00	NOT	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	139760	TOTAL FEES:	$ 77.25