ICHD–ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP-305314

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

PIN # 4751-16-8597

APPLICANT/OWNER: Jimmy Kitchens APPLICANT ADDRESS: 114 Gray Barn Dr. Troutman, NC

SITE ADDRESS: 114 Gray Barn Dr. Troutman, NC 28166 PHONE: 704-252-1608 ALT. PHONE —

SITE DIRECTIONS: Ostwalt Amity → Pilch → Grny Barn → House on Right SAP CONTROLLED: ☐ YES ☒ NO

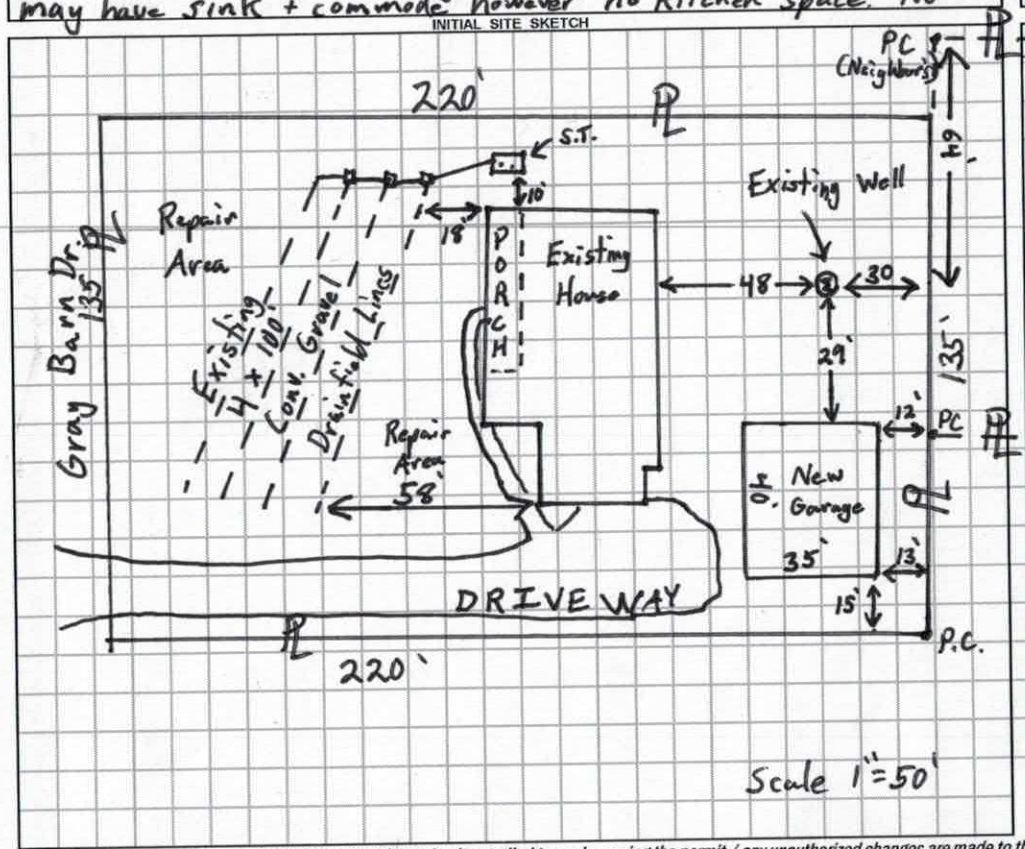
SUBDIVISION: Kelly Farmsteads SECTION: 2 LOT # 5 LOT AREA: 0.682 acres DESIGN FLOW: 360 GPD L.T.A.R.: 0.30

Septic Tank	1000 (Existing) (gal)	STB	Ex	Date	Ex	☐ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI
Pump Tank	— (gal)	PT	—	Date	—	System Description:	Existing - Conv. Gravity (Gravel)
Pump Make	—	Model	—	Serial #	—	Repair System Description:	Existing - Conv. Chambers
# Nitrification Fields	EXISTING	# Lines		Linear Ft		Maintenance Agreement Required:	☐ YES ☒ NO
Trench Width		Trench Bottom Depth (Low side)		Gravel Depth	Existing	☒ GRAVITY	☐ PRESSURE

☒ Residence	No. Bedrooms	3	Water Supply
☐ Business	No. Persons	6	☒ Private Existing
☐ Other	No. Employees		☐ Public
☐ Slab	☒ Crawl Space		☐ Community
☐ Basement w/plumbing			☐ Basement w/o plumbing

Comments / Conditions: System appeared functional at time of site visit (3/6/2020). System originally permitted in 1996. New garage may have sink + commode however no kitchen space. No business activities may operate from the garage without prior ICHD approval. Recommend having septic tank pumped every 5 years. See updated site plan dated 3/5/2020

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

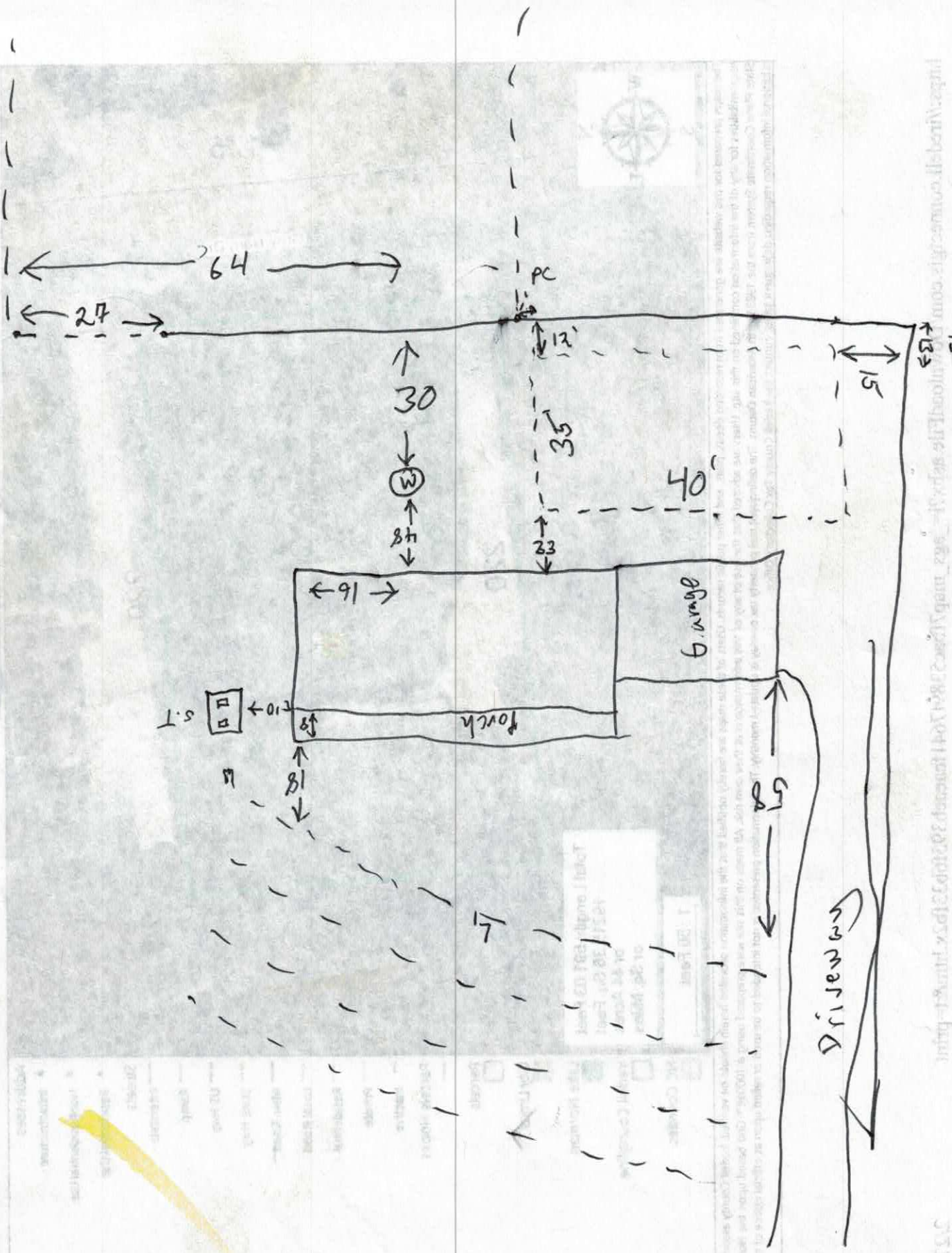
☐ IMPROVEMENT PERMIT *with plat* valid without expiration. ☐ IMPROVEMENT PERMIT *with site plan* valid for 60 mos. ☐ AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: [signature] Date: 3/6/2020 Installed by: —

IMPROVEMENT PERMIT by: — Date: — OPERATION PERMIT by: — Date: —

AUTHORIZATION TO CONSTRUCT by: — Date: — Existing System Inspected by: Tom Shuck Date: 3/10/2020

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.


64
PC
27
PC
12'
5
30
35
40'
W
48
33
91
Garage
Porch
S.T
10
5
81
58
Driveway

Tom

RECEIVED FEB 25 2020

AP-305319
$250.00

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

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: Jimmy Kitchens Address: 114 Gray Barn Dr. Zip: 28166
Applicant Email: JimmyK146@Yahoo.com Phone: 704-252-1608 Alt. Phone: _____
Owner Name: Jimmy Kitchens Address: 114 Gray Barn Dr. Zip: 28166
Owner Email: JimmyK146@Yahoo.com Phone: 704-252-1608 Alt. Phone: _____

Property Information:

Street Address: 114 Gray Barn Dr.
Subdivision Name: Kelly Farmsteads Section/Phase: I Lot Number: 5
Driving Directions: North@I 77, Exit 42 Left. Rt. on Oswalt Dairy; Left on Pitch; Left on Pear Tree Rt. on Gray Barn 2ND house on Rt. South@I 77 Exit 45 Left; Rt on Pitch; Rt. on Gray Barn

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

CHECK FOUNDATION TYPE

(✓) New Single Family Residence — Maximum Number of Bedrooms: 3
( ) New Multi-Family Residence — Maximum Number of Occupants: 1
( ) Accessory Building — ( ) Swimming Pool
( ) Bedroom(s) Addition — ( ) Other Addition/Structure: _____
( ) 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: _____

(✓) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

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?

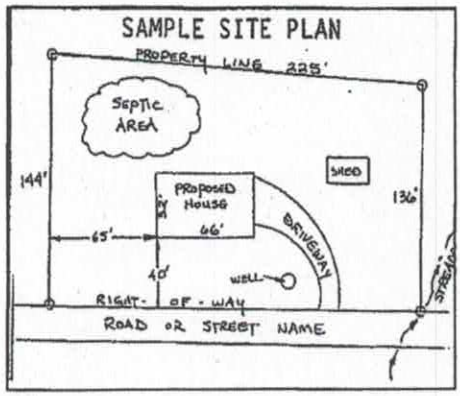
I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible 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: _____ November 18, 2019
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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 OR WELL PERMIT!!!*



Place an (X) beside each item as you complete the site plan:

- (X) Property Line measurements are clearly identified
- (X) All proposed structures are indicated
- (X) Front and side setbacks from property line
- (X) Preferred driveway location
- (X) Preferred well location
- (X) Preferred septic system location
- (X) North arrow, or other sufficient indicator of direction

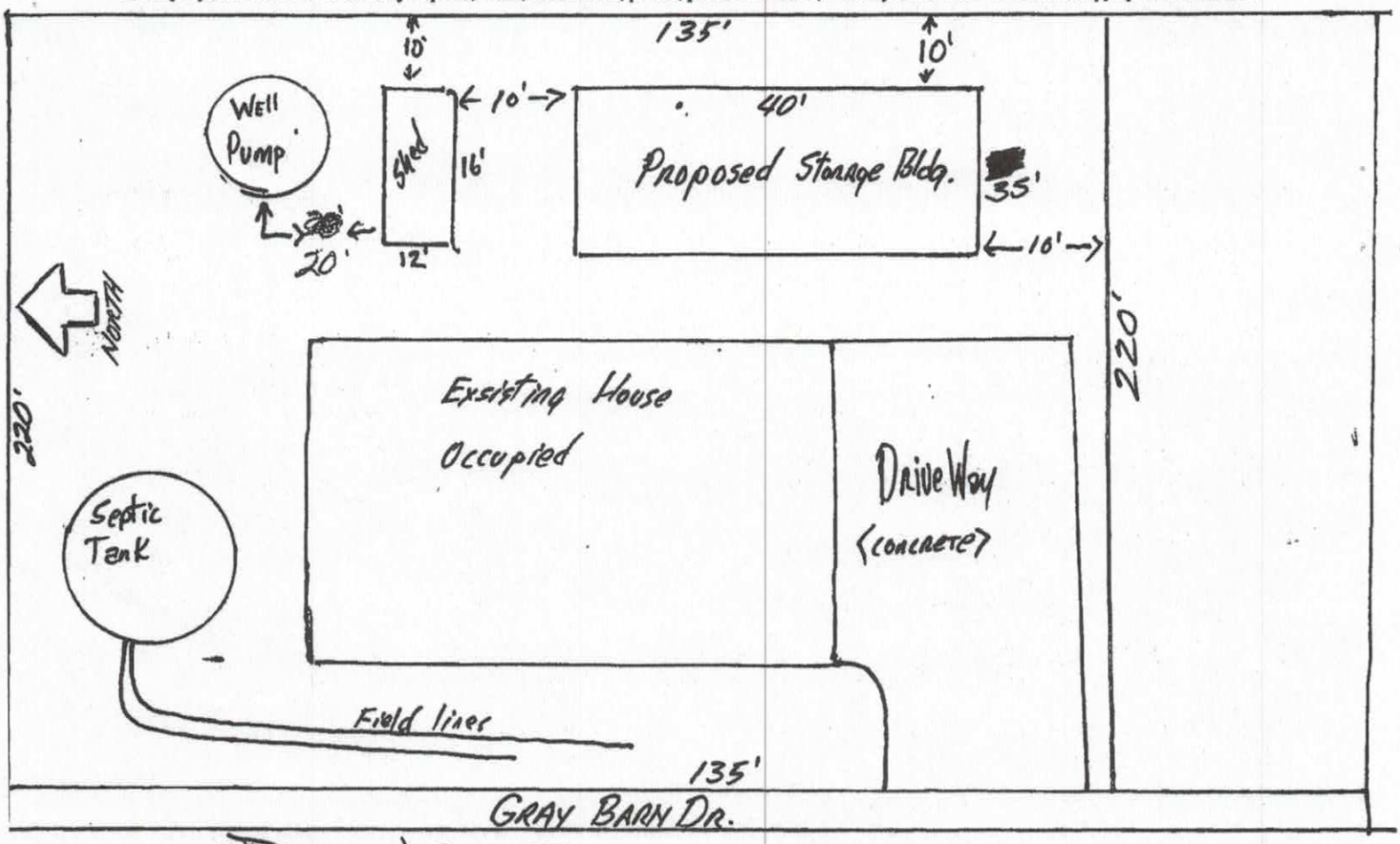
Circle N/A on the following if appropriate:

Location of septic systems and wells within 100' of your property
Location of easements and rights of ways on your property
Location of any designated wetlands on the property



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



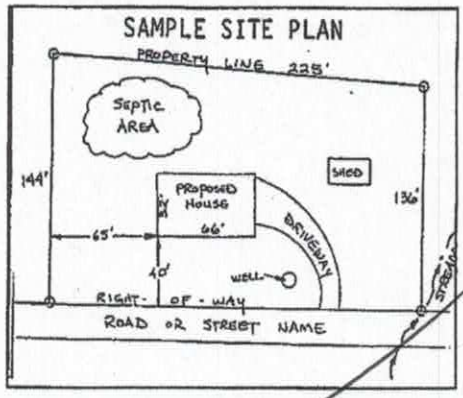
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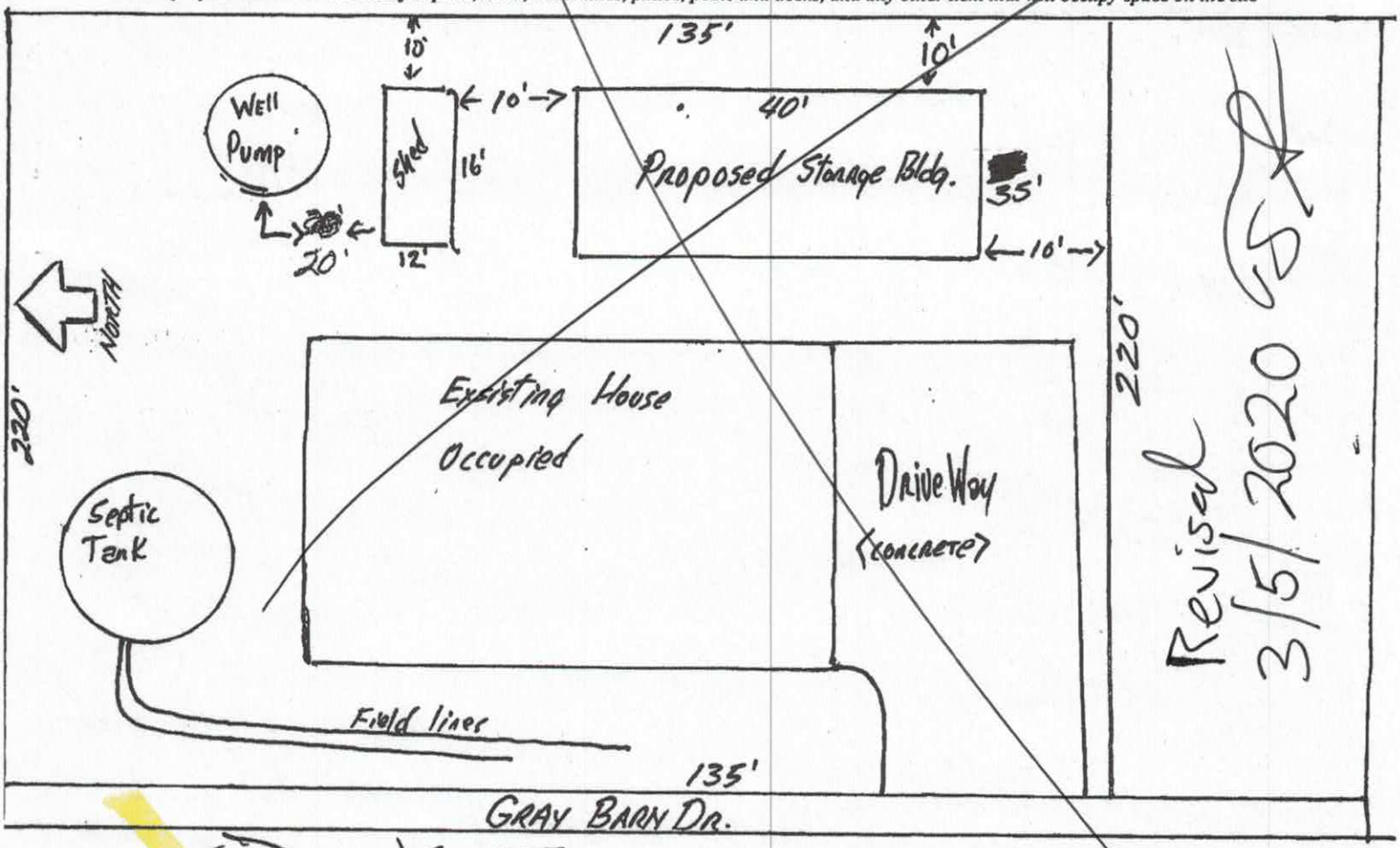
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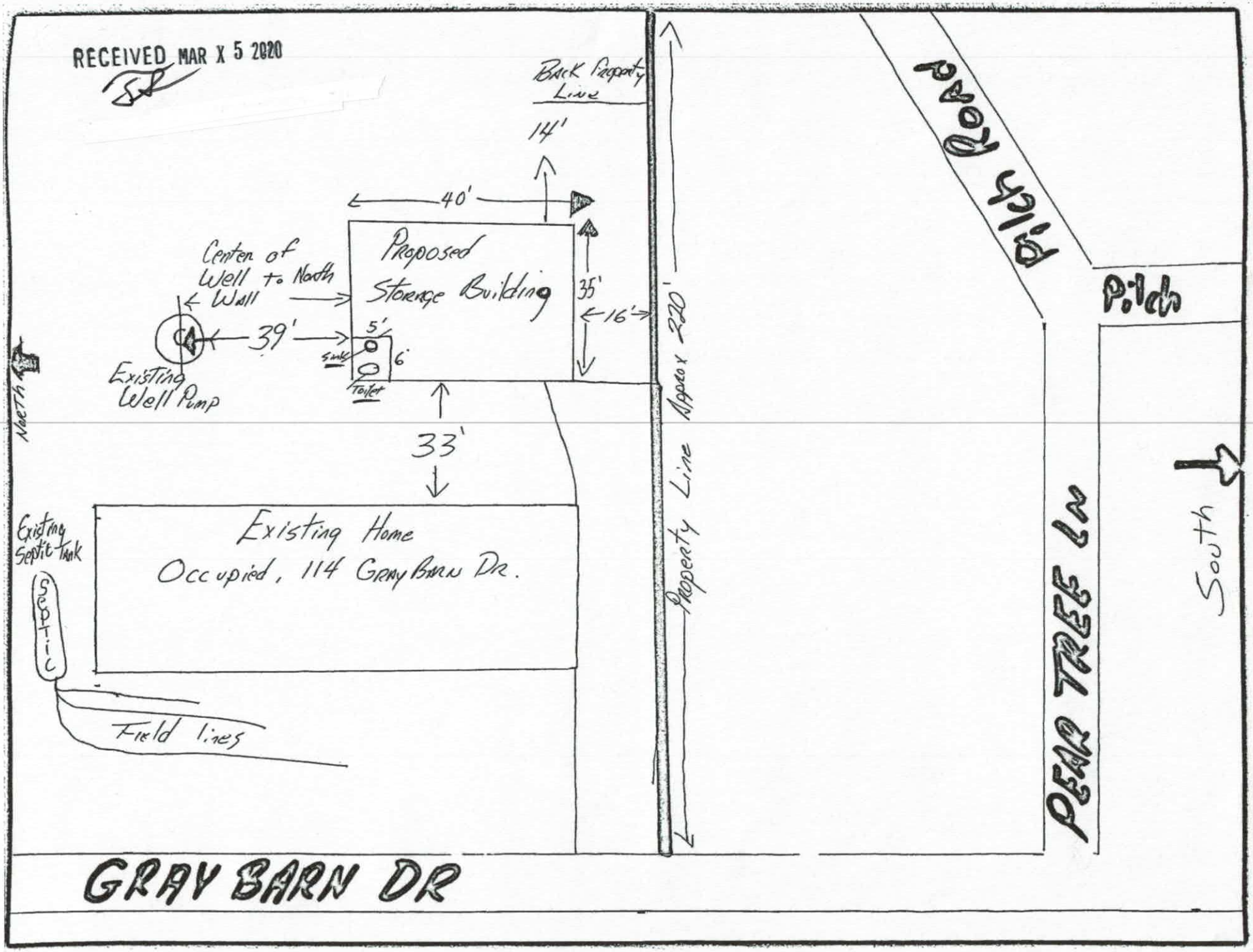
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Signature: _____ Nov. 18, 2019

Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE


RECEIVED MAR X 5 2020
Back Property Line
14'
40'
Proposed Storage Building
35'
16'
Center of Well to North Wall
39'
5'
6'
Sink
Toilet
Existing Well Pump
North
33'
Existing Home
Occupied, 114 Gray Barn Dr.
Existing Septic Tank
Septic
Field lines
Property Line Approx 220'
Pitch Road
Pitch
Pond Tree Ln
South
GRAY BARN DR

60110

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO 23401 DATE 3-22-96 TAX MAP NO 46-B - Pt 59 Watershed: Yes (No)

OWNER OR CONTRACTOR Kelly Conat. PHONE Business Home 528 4901

ADDRESS 167 Perthwood Dr. Troutman

LOCATION I-77 S TL Amity Hill TR Pilch TR Pear Tree TR Gray Barn 1000' Rt

SUBDIVISION Kelly Farmstead BLOCK / SECTION LOT 5 LOT AREA 1.652 acres SITE CLASS PS DESIGN FLOW 360 L.T.A.R 1.3

Septic Tank: 1000 Gallons: STB 794 Date 5-8-96
Pump Tank: Gallons: PT Date
Pump Make: Model Serial No
Notification Field No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

(New System) Repair System Type: I II III IV V VI
System Description: Conv. Gravity
Repair System Description: Gravity chambers
Maintenance Agreement Required Yes No

(House/Mod. Home) No Bedrooms 3
Mobile Home No Bathrooms 2
Business No Employees
Other
Slab Crawl Space Basement w/plumbing Basement wo/plumbing

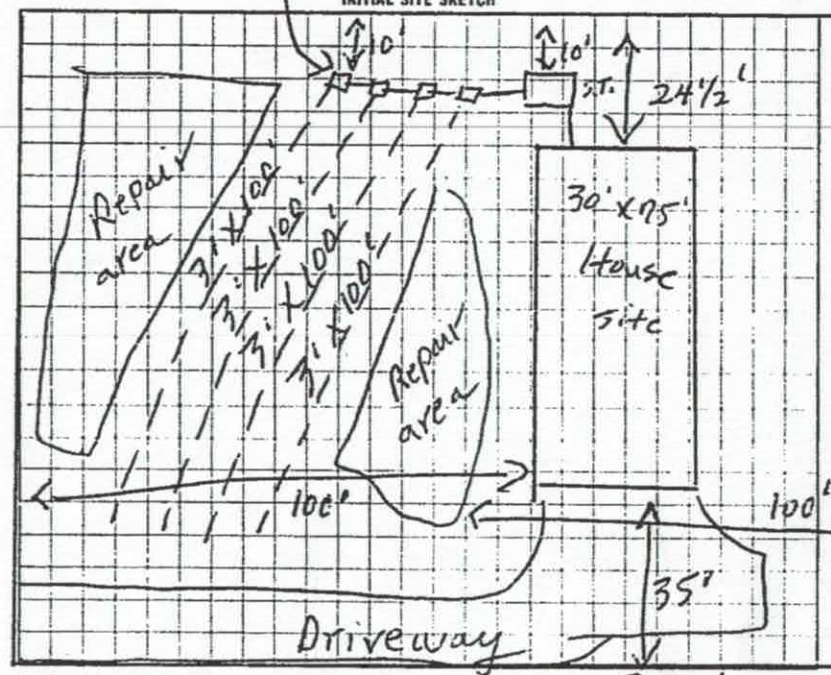
Water Supply: (Individual) Community Public

Comments

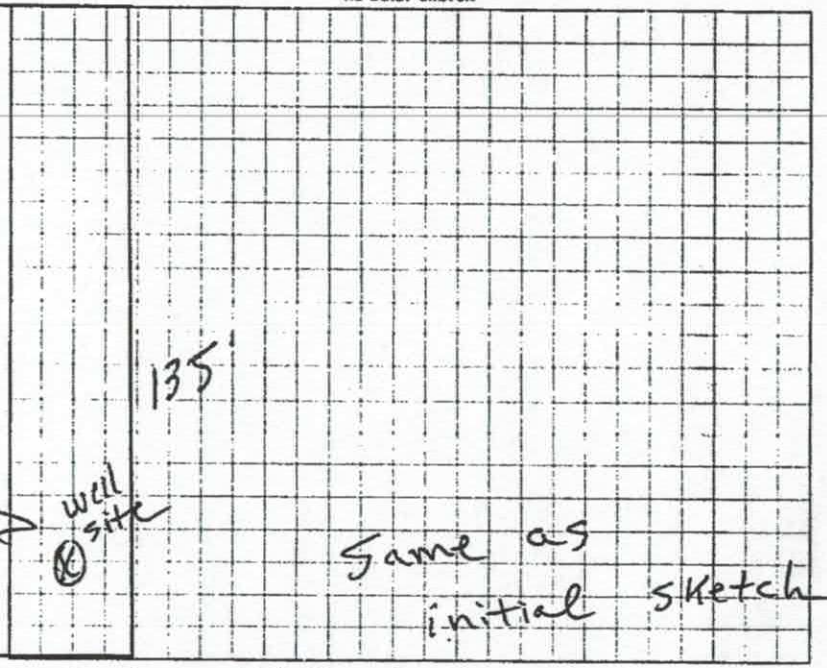
Drop boxes

Comments

INITIAL SITE SKETCH



AS BUILT SKETCH



I understand that this permit can be suspended or revoked if any false information is supplied and/or if during the permit any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system

Signed X Wes Kelly Installed by Wes Lytton

Improvement Permit by L. C. Moore date 3-22-96 Certificate of Completion by date

Authorization to Construct by L. C. Moore date 3-22-96 Operation Permit by L. C. Moore date 7-19-96

Authorization to Construct Expires 60 mos from issue

PERMIT NO AP-305314

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

APPLICATION NUMBER
305314 Issue Date: 02/25/2020

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4751168597.000	114 GRAY BARN DR	Iredell County

Owner Information	Applicant Information
Name: KITCHENS JAMES LEE JR Address: 114 GRAY BARN DR TROUTMAN, NC 28166 Phone:	Name: KITCHENS JAMES LEE JR Address: 114 GRAY BARN DR TROUTMAN, NC 28166 Phone:

Use Requested	Zone Code
Accessory Building	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0	0	10	10	10	N/A	NO

Remarks

RELOCATING 12X16 ACCESSORY STRUCTURE TO ACCOMMODATE ANOTHER

Accessory Structures: Must meet requirement R1 of the LDC. Shall not be erected in front building line of the principal structure or within 25' of a side street on a corner lot. Shall not be erected within 10' of any line not a street line or within 10' of any other building on the same lot. Shall not be erected within the 50' buffer zone of lake lots. Shall not exceed the height limitation of the principal structure. Exceptions to the front building line location: 1.If the lot is 1 acre or greater and the location of the structure is at least 150'from the frontage street right of way line then the structure can be located in front of home or 2.Is a double frontage lake lot. Any accessory building or structure over 2000 sq/ft shall be setback a minimum of 30' from any property line. Metal carports not exceeding 400 sq/ft are allowed in the front yard provided they meet the front setback requirement of the principal structure.

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.

Signature of Owner/Contractor

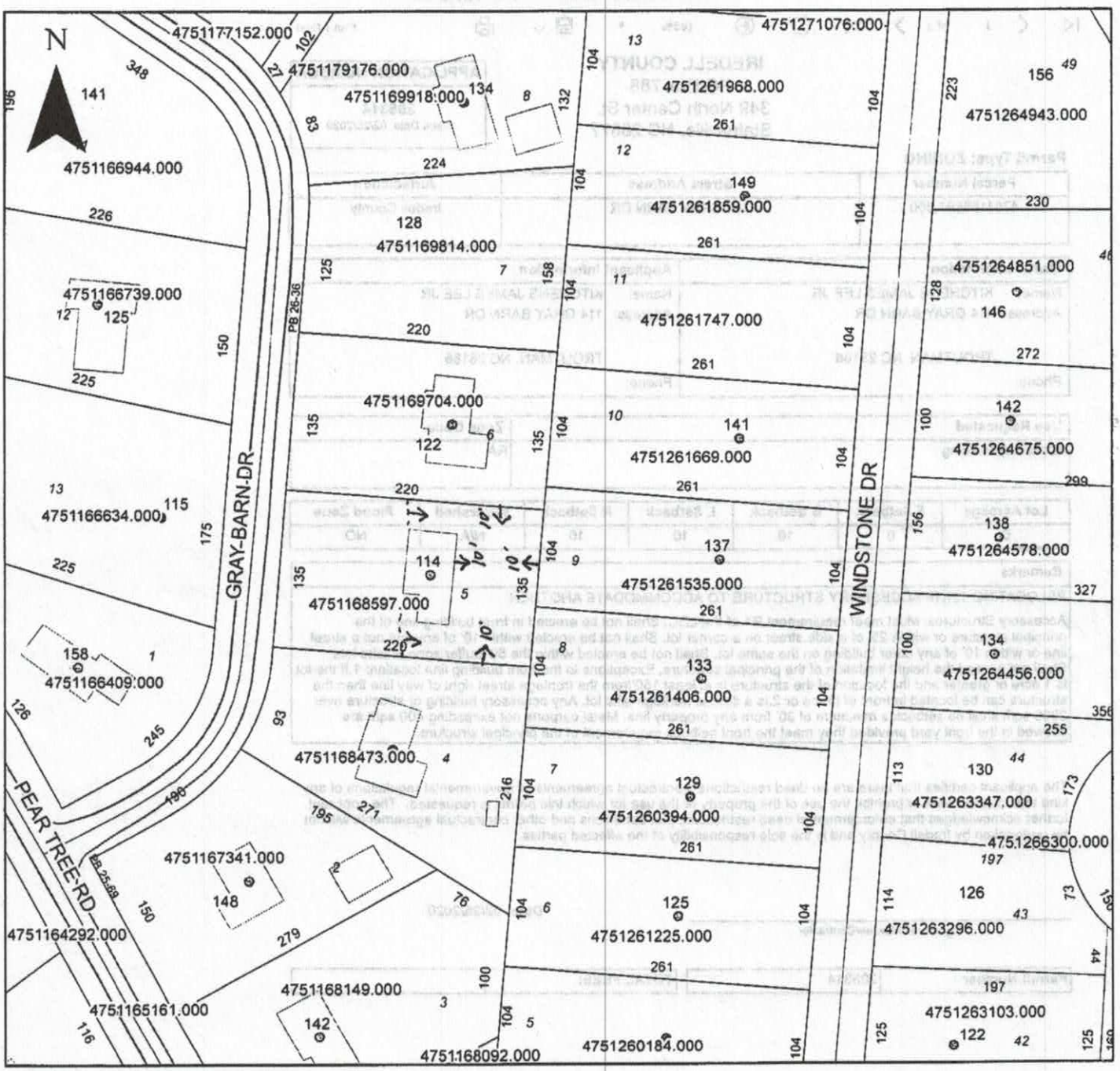
Date: 02/25/2020

Permit Number	305314	TOTAL FEES:	

12 x 16

RA WS-NO FL-NO .682 AC

ZONING DISCLAIMER



Property Address 114 Gray Barn Dr.

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Applicant

Feb. 25, 2020

Date