ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 308153

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

PIN # 4753849565

APPLICANT/OWNER: Shanna Ward APPLICANT ADDRESS: 301 S Oakland Ave Statesville NC 28677

SITE ADDRESS: 176 Beaverbrook Road Statesville 28677 PHONE: 704-719-0429 ALT. PHONE -

SITE DIRECTIONS: I77 Exit 49A Right on Hwy 70 toward Salisbury Rt on Beaverbrook SAP CONTROLLED: ☐ YES ☐ NO

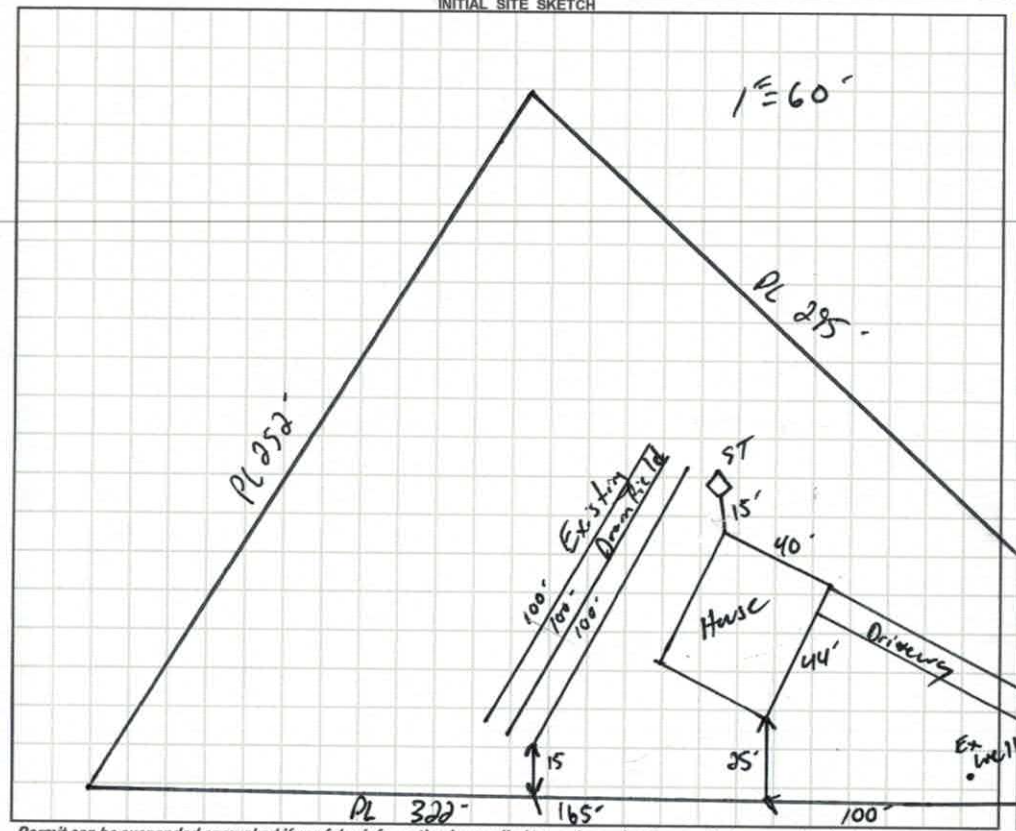
SUBDIVISION: Beaver FARM SECTION: - LOT# 54 LOT AREA: - DESIGN FLOW: Ex L.T.A.R.: Ex

Septic Tank	Ex (gal)	STB	Date	☐ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms 2
Pump Tank	(gal)	PT	Date	System Description:				☐ Business	No. Persons 4
Pump Make	Model		Serial #	Repair System Description: Ex				☐ Other	No. Employees
# Nitrification Fields	X # Lines	S	Linear Ft: Ag	Maintenance Agreement Required:	☐ YES	☐ NO		☐ Slab	☒ Crawl Space
Trench Width	Trench Bottom Depth(Low side)		Gravel Depth		☐ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Existing System Functioning properly at time of inspection.

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: Shanna Ward Date: 8/3/20 Installed by:

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

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Date: 7-30-2020

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

RECEIVED JUN 1 0 2020

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

$250.00

AP - 30815

Iredell County Health Department – Environmental Health Division

PAGE 1: APPLICATION FORM

Application For:
( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) 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: SHANA WARD Address: 301 S. OAKLAND AVE PO BOX 5392 STATESVILLE, NC 28677 Zip: 28677
Applicant Email: PINKTULIPS282@GMAIL.COM Phone: 704-719-0429 Alt. Phone:
Owner Name: SHANA WARD Address: 176 BEAVERBROOK RD. STATESVILLE, NC Zip: 28677
Owner Email: PINKTULIPS282@GMAIL.COM Phone: 704-719-0429 Alt. Phone:

Property Information:

Street Address: 176 BEAVERBROOK RD STATESVILLE NC 28677
Subdivision Name: BEAVER FARM Section/Phase: Lot Number: 54
Driving Directions: I-77 TO EXIT 49A-RIGHT ON HWY 70-RIGHT ON BEAVERBROOK

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

( ) 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: 2
Maximum Number of Occupants: 2
( ) Swimming Pool
( ) Other Addition/Structure:

CHECK FOUNDATION TYPE
(√) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) 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: 1 Number of Persons: 2
( ) 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: 1983
( ) No Preference ( ) Alternative (√) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other:

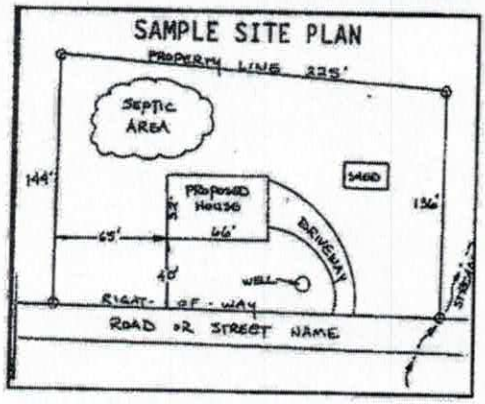
Please answer the following to the best of your ability:
( ) Yes ( ) No Does the site contain any jurisdictional wetlands?
( ) Yes (√) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes ( ) No Is the site subject to approval by any other public agency?

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: Shana Ward 6/1/20
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

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:

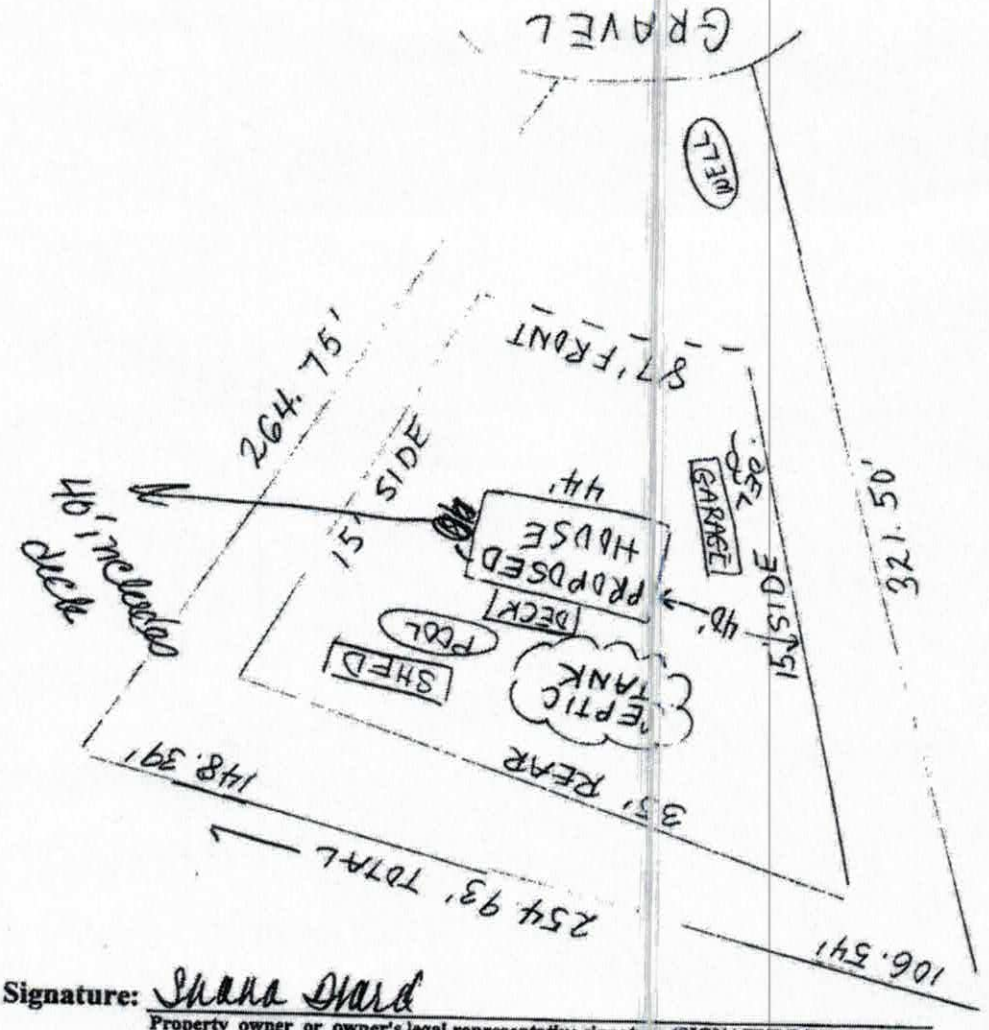
(X) Property Line measurements are clearly identified
(X) All proposed structures are indicated
(X) Front and side setbacks from property line
(X) Preferred driveway location and well location
(X) Area you prefer your septic system to be placed
( ) North arrow, or other sufficient indicator of direction

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

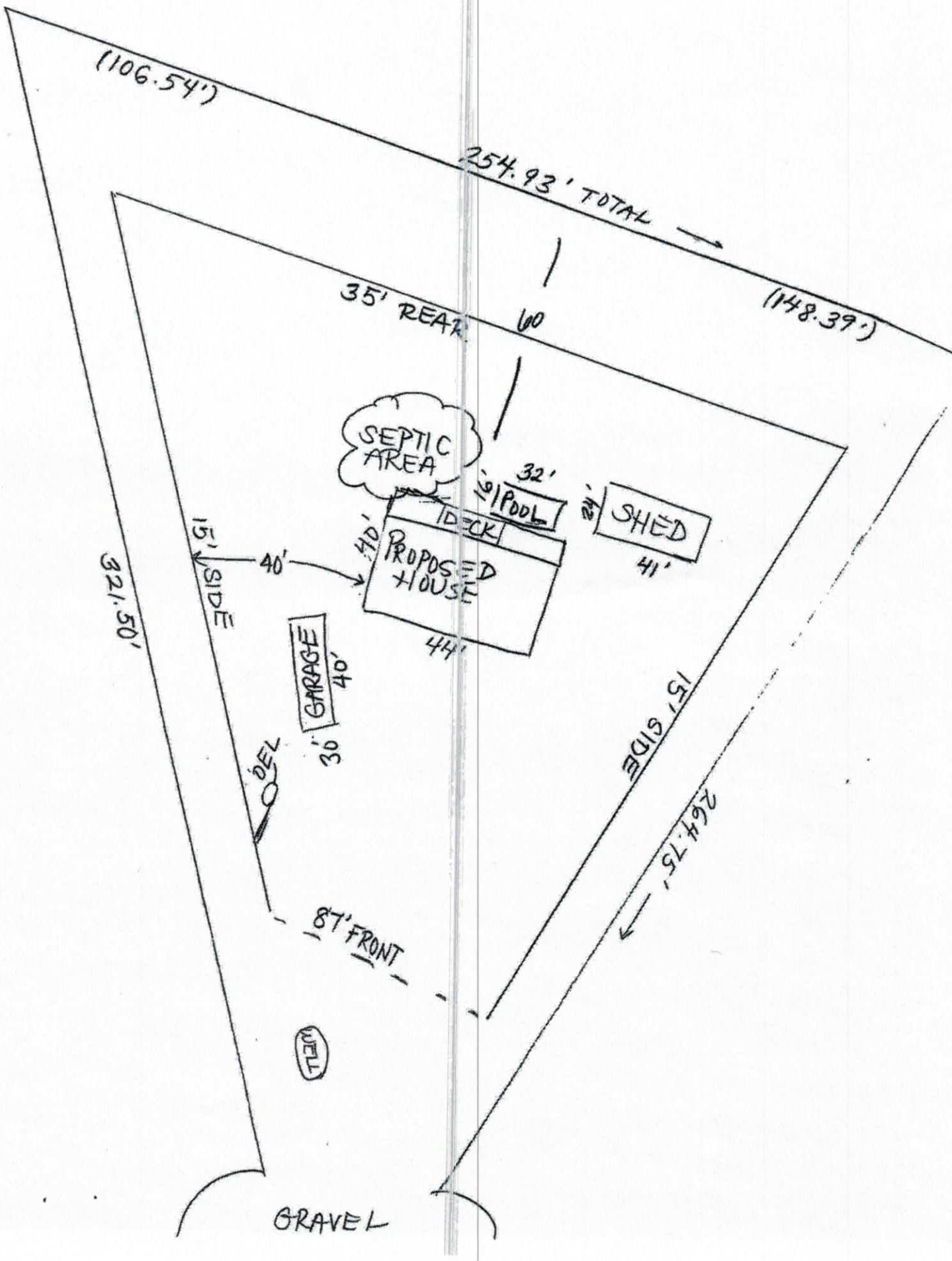
Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site



Want approval for bldg & pool for future - See other layout

Signature: Shana Ward
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

6/1/20
DATE


(106.54')
254.93' TOTAL
(148.39')
35' REAR
60
SEPTIC AREA
32'
12'
POOL
DECK
12'
SHED
41'
40'
40'
PROPOSED HOUSE
44'
15' SIDE
321.50'
GARAGE
40'
30'
DEL
15' SIDE
264.75'
87' FRONT
WELL
GRAVEL

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) Shana Hart

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, _____, 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)** _____, _____, 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.

Shana Hart
Signature of Owner(s)

6/1/20
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

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Ross Martin DATE 8-19-83 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 70 E before Statesville Concrete TR follow to end

SUBDIVISION NAME Beaver Farms LOT NO. 54 SECTION OR BLOCK NO. _____ S. R. No. _____

House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes ( ) No (✓)

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area 3/4 acre

Character & Porosity of Soil Clay/ Class IV-A

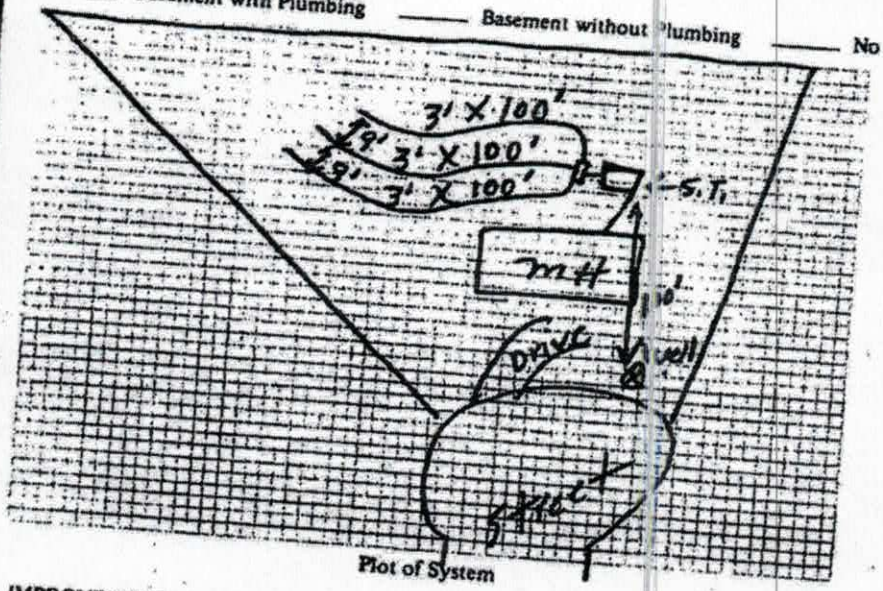
Percolation Rate 13 Sec/5 in/1 day

Topography 2 to 8%

Depth to Water Table 10'+

Rock or other impervious formations None

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 900 Linear Ft 300

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by Arnie Duncan Hope Bros.

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: _____

IMPROVEMENTS PERMIT BY L. C. Moore

COMMENTS: _____

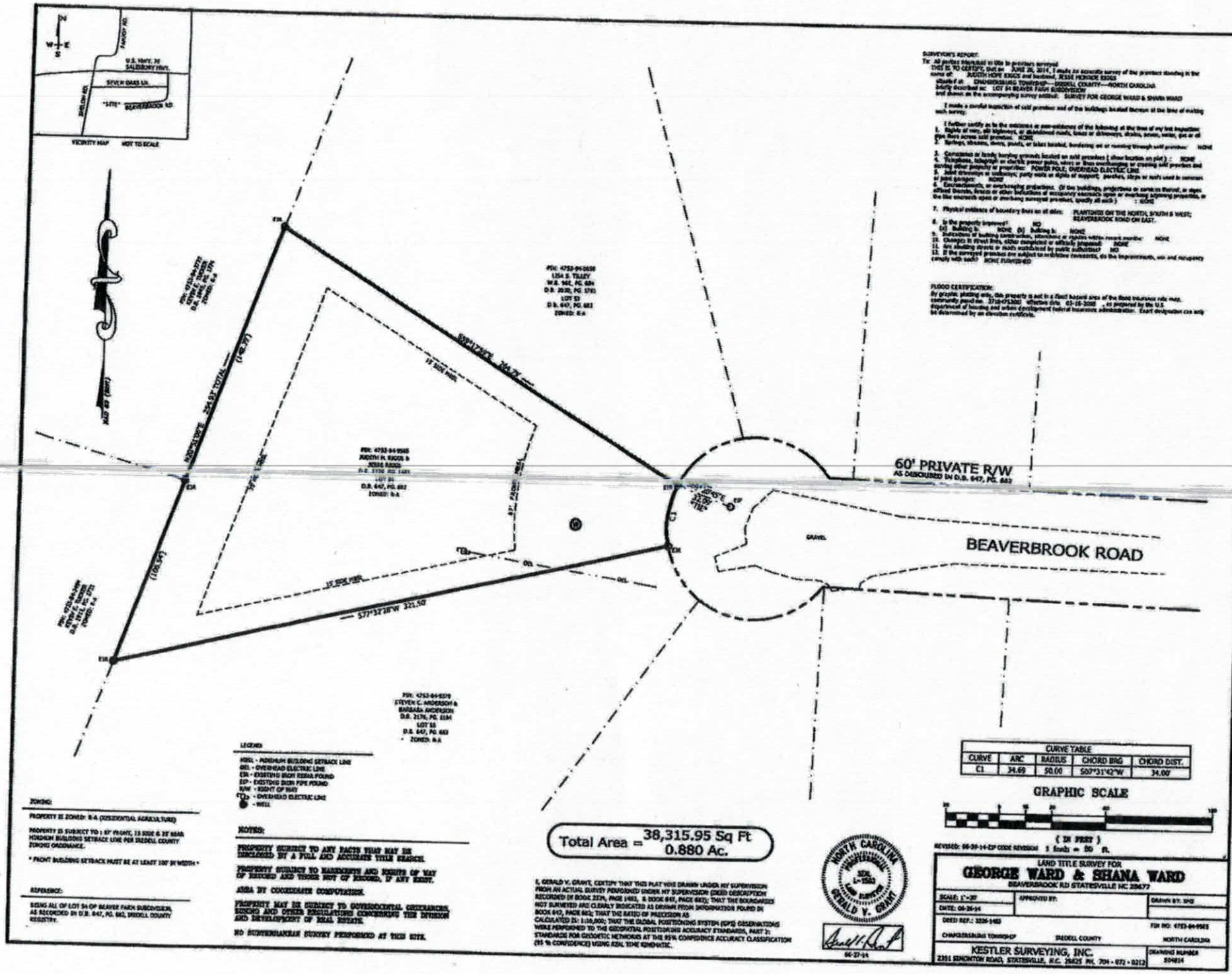
CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: L. C. Moore DATE 8-17-83

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Improvements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold



SURVEYOR'S REPORT:

To: All parties interested in title to premises surveyed

THIS IS TO CERTIFY, that on JUNE 26, 2014, I made an accurate survey of the premises shooting in the name of: JUDITH HOPE RIGGS and husband, JESSE MONROE RIGGS

situated at: CHAMBERSBURG TOWNSHIP — IREDELL COUNTY — NORTH CAROLINA

being described as: LOT 54 BEAVER PARK SUBDIVISION

and shown on the accompanying survey entitled: SURVEY FOR GEORGE WARD & SHANA WARD

I made a careful inspection of said premises and of the buildings located thereon at the time of making such survey.

I further certify as to the existence or non-existence of the following at the time of my last inspection:

1. Rights of way, old highways, or abandoned roads, lanes or driveways, drains, sewers, water, gas or oil pipe lines across said premises: NONE
2. Springs, streams, rivers, ponds, or lakes located, bordering on or running through said premises: NONE
3. Cemeteries or family burying grounds located on said premises (show location on plat): NONE
4. Telephone, telegraph or electric power poles, wires or lines overhanging or crossing said premises and serving other property or properties: POWER POLE; OVERHEAD ELECTRIC LINE
5. Joint driveways or walkways; party walls or rights of support, porches, steps or roofs used in common or joint garages: NONE
6. Encroachments, or encroaching projections. Of the buildings, projections or eaves on thereof, or upon adjoining lands, fences or other indications of occupancy exercised upon or overhanging adjoining properties, or the like encroach upon or overhang surveyed premises, specify all such): NONE
7. Physical evidence of boundary lines on all sides: PLANTINGS ON THE NORTH, SOUTH & WEST; BEAVERBROOK ROAD ON EAST.
8. Is the property improved? NO
   (a) Building is: NONE (b) Building is: NONE
9. Evidences of building construction, alterations or repairs within recent months: NONE
10. Changes in street lines, either completed or officially proposed: NONE
11. Are abutting streets or roads maintained by public authorities? NO
12. If the surveyed premises are subject to restrictive covenants, do the improvements, use and occupancy comply with same? NONE FURNISHED

FLOOD CERTIFICATION:

By graphic plotting only, this property is not in a flood hazard area of the flood insurance rate map, community panel no. 3710457500J effective date: 03-16-2006, as prepared by the U.S. department of housing and urban development federal insurance administration. Exact designation can only be determined by an elevation certificate.

ZONING:

PROPERTY IS ZONED: R-A (RESIDENTIAL AGRICULTURE)

PROPERTY IS SUBJECT TO : 50' FRONT, 15 SIDE & 35' REAR MINIMUM BUILDING SETBACK LINE PER IREDELL COUNTY ZONING ORDINANCE.

* FRONT BUILDING SETBACK MUST BE AT LEAST 100' IN WIDTH *

REFERENCE:

BEING ALL OF LOT 54 OF BEAVER PARK SUBDIVISION, AS RECORDED IN D.B. 647, PG. 662, IREDELL COUNTY REGISTRY.

LEGEND

MBSL - MINIMUM BUILDING SETBACK LINE
OHEL - OVERHEAD ELECTRIC LINE
EIR - EXISTING IRON REBAR FOUND
EIP - EXISTING IRON PIPE FOUND
R/W - RIGHT OF WAY
OHE - OVERHEAD ELECTRIC LINE
W - WELL

NOTES:

PROPERTY SUBJECT TO ANY FACTS THAT MAY BE DISCLOSED BY A FULL AND ACCURATE TITLE SEARCH.

PROPERTY SUBJECT TO EASEMENTS AND RIGHTS OF WAY OF RECORD AND THOSE NOT OF RECORD, IF ANY EXIST.

AREA BY COORDINATE COMPUTATION.

PROPERTY MAY BE SUBJECT TO GOVERNMENTAL ORDINANCES, ZONING AND OTHER REGULATIONS CONCERNING THE DIVISION AND DEVELOPMENT OF REAL ESTATE.

NO SUBTERRANEAN SURVEY PERFORMED AT THIS SITE.

CURVE TABLE				
CURVE	ARC	RADIUS	CHORD BRG	CHORD DIST.
C1	34.69	50.00	S07°31'02"W	34.00'

GRAPHIC SCALE

0 25 50 75 100 150

(IN FEET)

REVISED: 06-30-14 ZIP CODE REVISION 1 inch = 50 ft.

I, GERALD V. GRANT, CERTIFY THAT THIS PLAT WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY PERFORMED UNDER MY SUPERVISION (DEED DESCRIPTION RECORDED IN BOOK 2176, PAGE 1594, & BOOK 647, PAGE 662); THAT THE BOUNDARIES NOT SURVEYED ARE CLEARLY INDICATED AS DRAWN FROM INFORMATION FOUND IN BOOK 647, PAGE 662; THAT THE RATIO OF PRECISION AS CALCULATED IS: 1:10,000; THAT THE GLOBAL POSITIONING SYSTEM (GPS) OBSERVATIONS WERE PERFORMED TO THE GEODETIC POSITIONING ACCURACY STANDARDS, PART 2: STANDARDS FOR GEODETIC NETWORKS AT THE 95% CONFIDENCE ACCURACY CLASSIFICATION (95 % CONFIDENCE) USING RTK, TIME KINEMATIC.

06-27-14

LAND TITLE SURVEY FOR

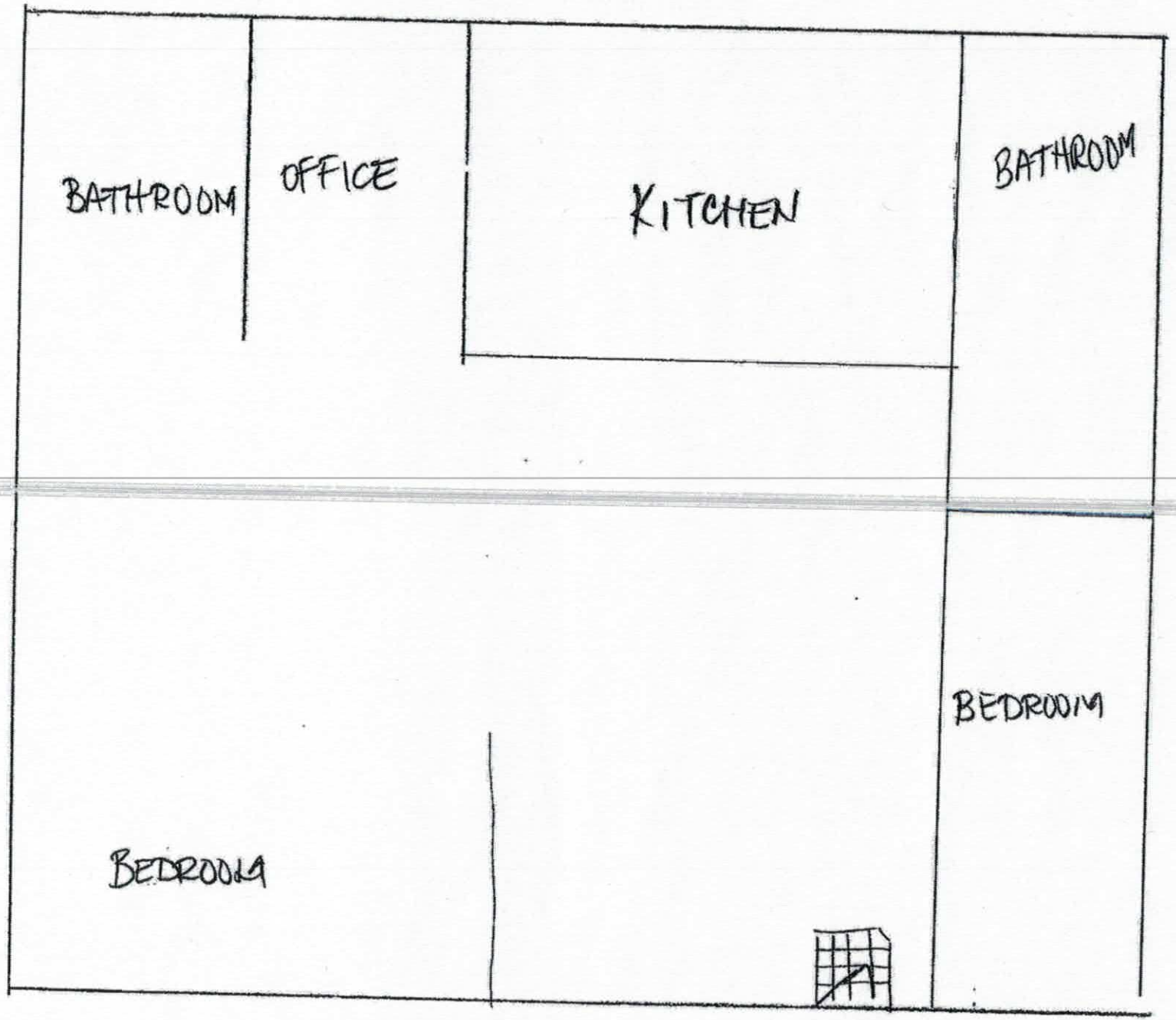
GEORGE WARD & SHANA WARD

BEAVERBROOK RD STATESVILLE NC 28677

SCALE: 1" = 50'	APPROVED BY:	DRAWN BY: SMD
DATE: 06-26-14		
DEED REF.: 3236-1403		PIN NO: 4753-94-9585
CHAMBERSBURG TOWNSHIP	IREDELL COUNTY	NORTH CAROLINA

KESTLER SURVEYING, INC.
2351 SIMONTON ROAD, STATESVILLE, N.C. 28625 PH. 704 • 872 • 8212

DRAWING NUMBER 304614



Shana Bland 6/10/20

IREDELL COUNTY · NC

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

APPLICATION NUMBER
308153 Issue Date:

Permit Type: ZONING

Parcel Number	Stree Address	Jurisdiction
4753849565.000	176 BEAVERBROOK RD	IREDELL COUNTY

Owner Information	Applicant Information
Name: WARD SHANA M Address: Phone:	Name: WARD SHANA M Address: Phone: 7047190429

Use Requested	Zone Code
Double-Wide Mobile Home	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0	35	35	15	15	N/A	NO

Remarks

DOUBLEWIDE

REQUIREMENTS FOR ALL MULTI -SECTIONAL MOBILE HOMES Must meet requirement R9 of the LDC. Minimum size of main body is at least 22 feet by 40 feet; Must have standard residential shingles; Minimum of 3/12 roof pitch; Must have continuous masonry underpinning; Must have minimum roof eave and raker projections of 6 inches; Must have a 36 square foot deck or porch at all front entrances; Exterior siding must consist of vinyl or aluminum lap siding, wood, or hardboard, comparable in composition, appearance and durability to residential siding; Must remove towing apparatus; Must face front property line and be no less than 20 degrees from parallel to the front property line. Original mobile home must be removed before Certificate of Occupancy can be approved.

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.

Paid Credit MAH 6/10/2020

Signature of Owner/Contractor

Date: 06/10/2020

Permit Number	308153	TOTAL FEES:	$77.25