ICHD - ENVIRONMENTAL HEALTH DIVISION

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

AP 326401

PERMIT # 2023-31958

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

PIN # 4756 -- 05 -- 0177

APPLICANT/OWNER: Thomas Kennedy APPLICANT ADDRESS: 109 Foxfire Ct, Statesville

SITE ADDRESS: 109 Foxfire Ct, Statesville 28625 PHONE: 336-467-4273 ALT. PHONE -

SITE DIRECTIONS: Jane Sowers - Carl Austin - Danbury - Foxfire SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Danbury Forest SECTION: P2 LOT # 23 LOT AREA: 158 x 130 DESIGN FLOW: 360 gpd L.T.A.R.: 0.3

Septic Tank	EX	(gal)	STB		Date						
Pump Tank	1000	(gal)	PT	363	Date						
Pump Make		Model			Serial #						
# Nitrification Fields	1	# Lines	5		Linear Ft	300'					
Trench Width	36 in	Trench Bottom Depth(Low side)		32 in	Gravel Depth	-					

☐ New System ☒ Repair ☐ Expansion System Type: I II (III) IV V VI

System Description: -

Repair System Description: 25% reduction

Maintenance Agreement Required: ☐ YES ☒ NO

☐ GRAVITY ☒ PRESSURE

☒ Residence No. Bedrooms 3

☐ Business No. Persons 6

☐ Other No. Employees

☒ Slab ☐ Crawl Space

☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply

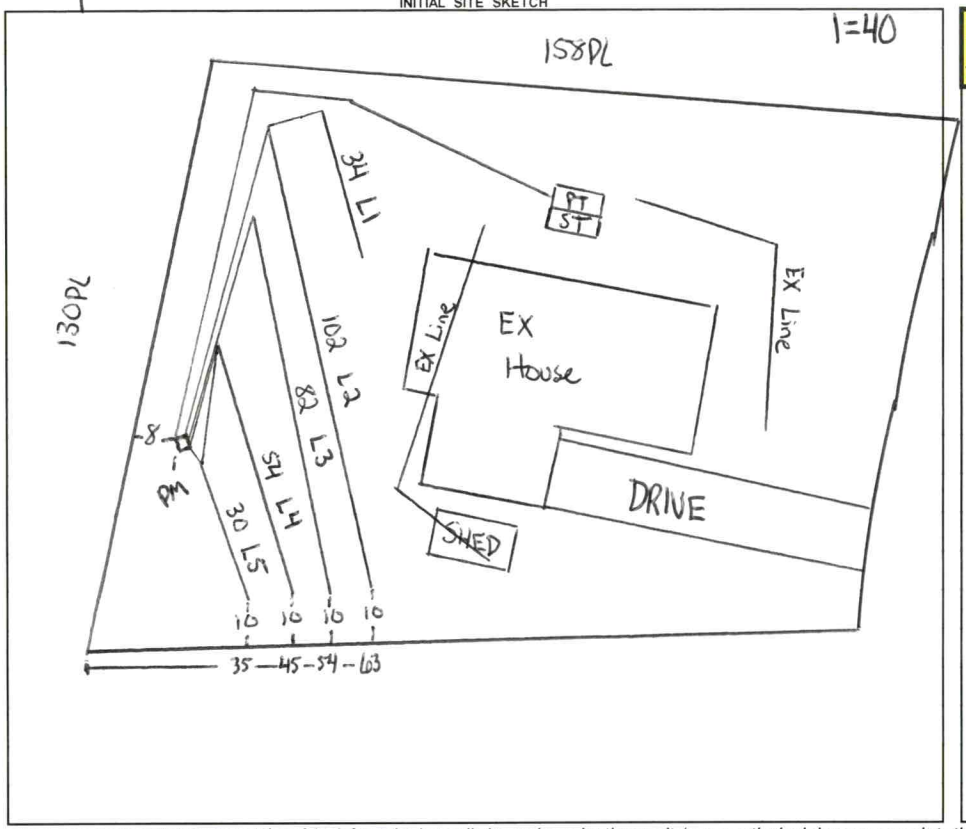
☐ Private

☒ Public

☐ Community

Comments / Conditions: Install on contour with the land. Do not exceed 36 inch trench bottom. Do not grade, park, or drive on septic area.

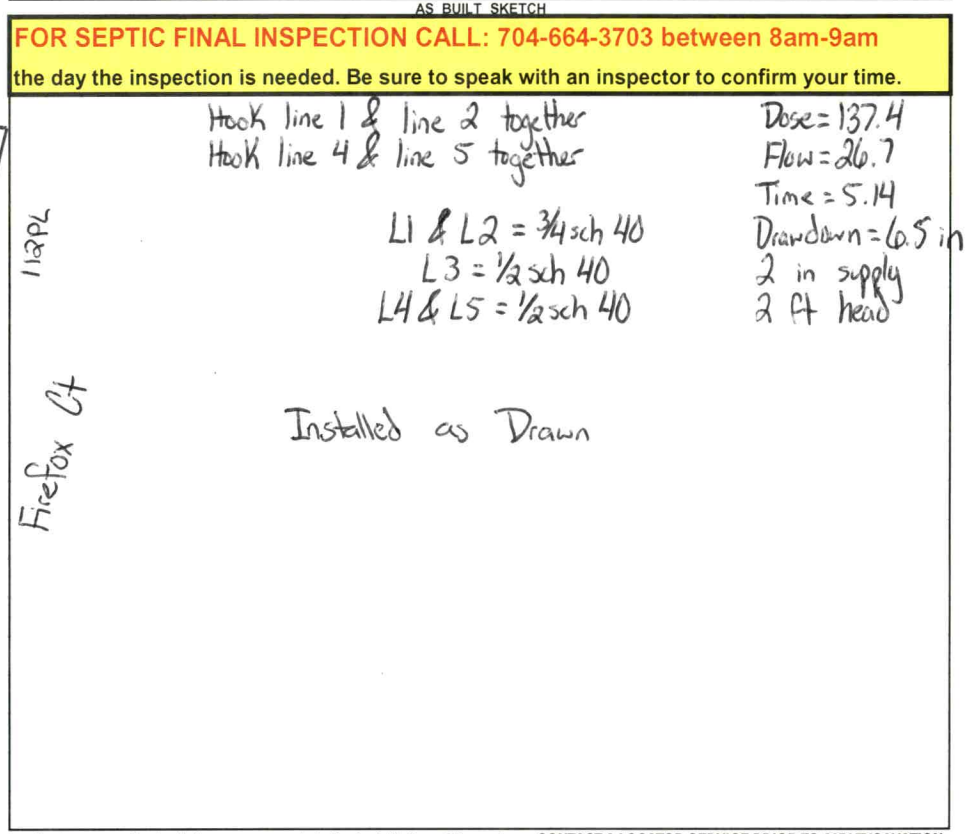
INITIAL SITE SKETCH



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: Online Signature Date: Installed by: Lentz

IMPROVEMENT PERMIT by: Cory Hill ✓ Date: 9/20/23 OPERATION PERMIT by: Cory Hill ✓ Date: 7/24/24

AUTHORIZATION TO CONSTRUCT by: Cory Hill ✓ Date: 9/20/23 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? _____	

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

Sheet 1 of 1
PROPERTY ID #: 4756050177
COUNTY: Iredell

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

OWNER: Thomas Kennedy
ADDRESS: 109 Foxfire Ct
PROPOSED FACILITY: 3 bd/1 home
PROPOSED DESIGN FLOW (.1949): 360 gpd
LOCATION OF SITE: 109 Foxfire Ct, Statesville 28625

APPLICATION DATE 7/25/23
DATE EVALUATED: 9/8/23
PROPERTY SIZE: 158 x 130
PROPERTY RECORDED: yes

WATER SUPPLY: Private X Public Well Spring Other
EVALUATION METHOD: X Auger Boring Pit Cut
TYPE OF WASTEWATER: X 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	Linear 7%	0-33 BG	C SBK	SS SP FR SE	-	48	-	-	.3 PS
		33-48 BG	CL SBK	SS SP FR SE					
2	LS 7%	0-36	C SBK	SS SP FR SE	-	48	-	-	0.3 PS
		36-48	CL SBK	SS SP FR SE					
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	X	360
System Type(s)		25%
Site LTAR	✓	.3

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

COMMENTS:

Updated February 2014

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.

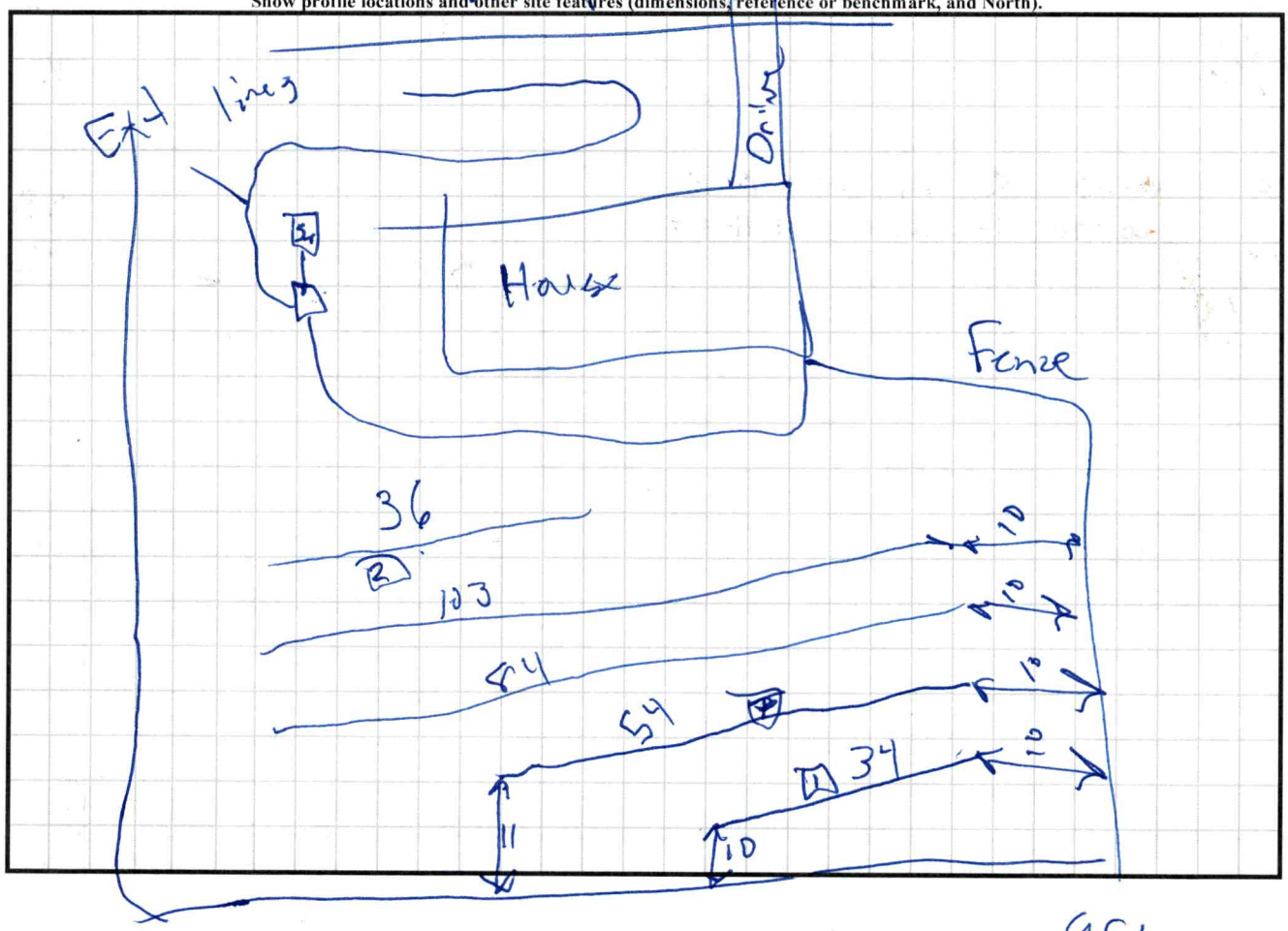
NOTES

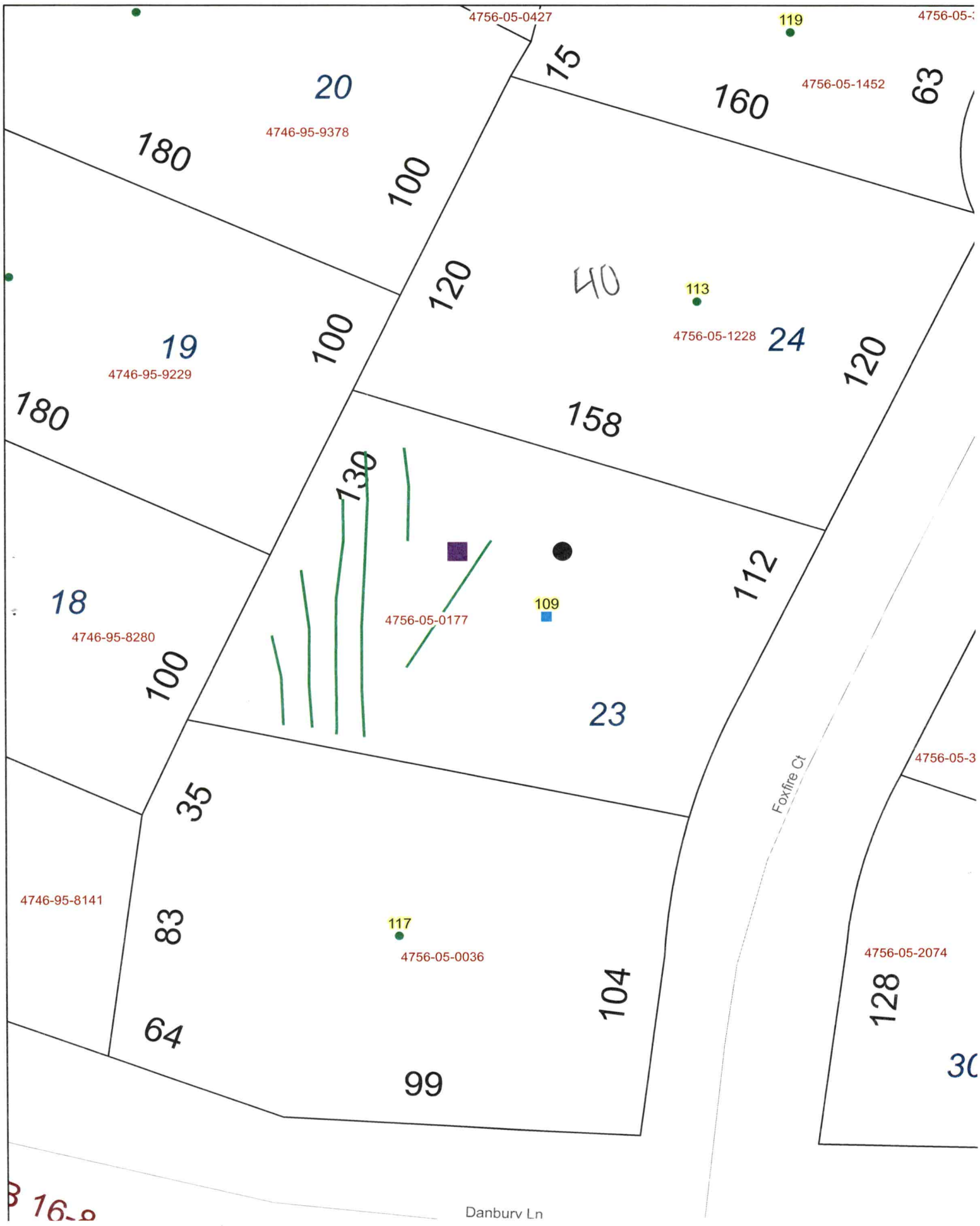
HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
CLASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

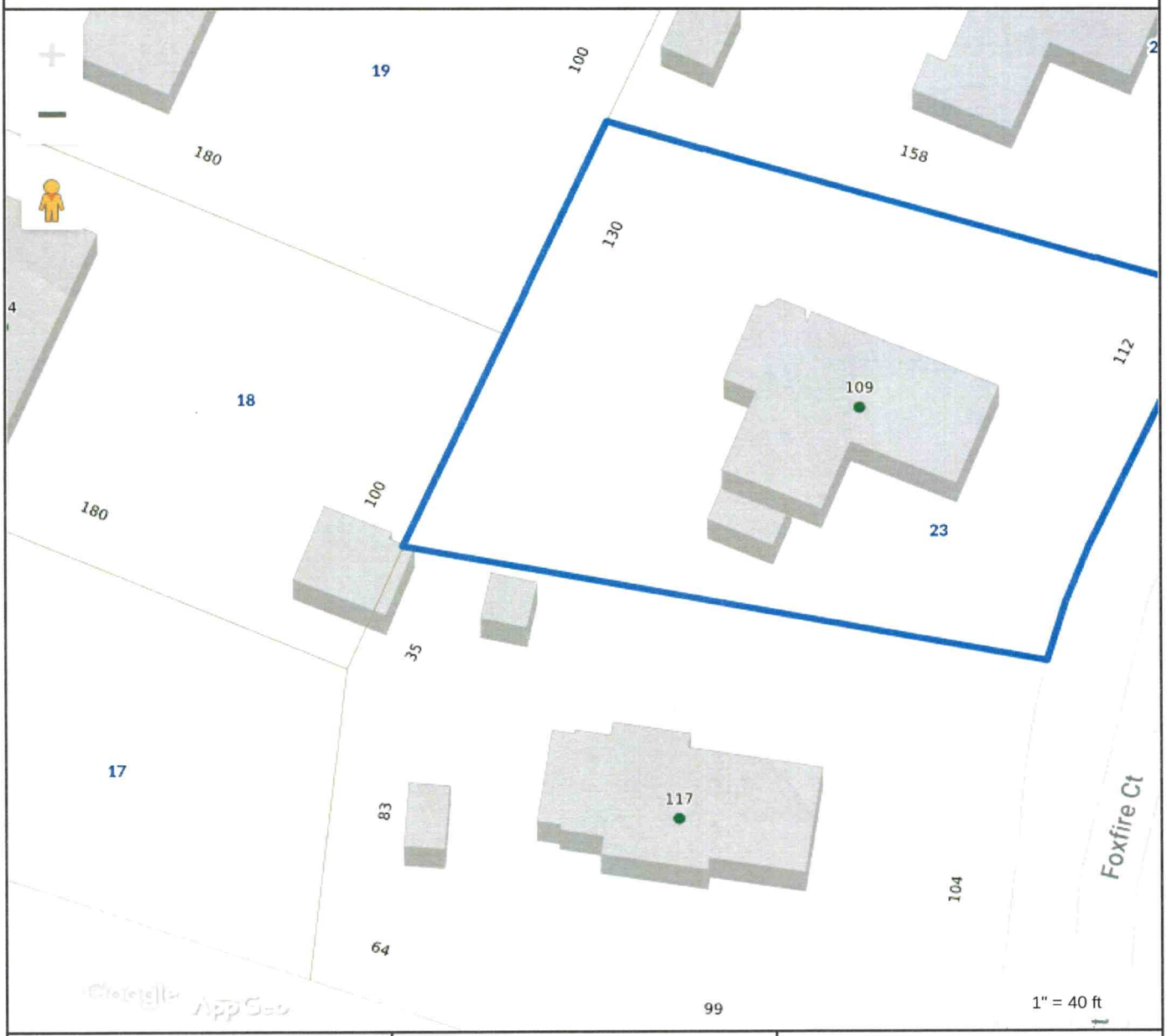
Evaluation of saprolite shall be by pits.

Long-term Acceptance Rate (LTAR): gal/day/ft^2

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




4756-05-0427
119
4756-05-1452
20
4746-95-9378
180
100
15
160
63
120
40
113
4756-05-1228
24
19
4746-95-9229
100
120
180
158
130
18
4746-95-8280
4756-05-0177
109
112
100
23
Foxfire Ct
4756-05-3
35
4746-95-8141
83
117
4756-05-0036
104
64
99
4756-05-2074
128
Danbury Ln



Tax Map Information

• PIN	4756050177.000
• Address	109 FOXFIRE CT
• Account #	Acct 80011856
• Tax Owner	KENNEDY RENA A K
• Mailing Address	109 FOXFIRE CT
•	STATESVILLE, NC 28625
• GIS Owner	KENNEDY RENA A K
• Deed Info	2269 / 423 - WD - 20131007
• Tax Acres	AC
• Lot #	23
• Description	DANBURY FOREST S2 PB16-8
• Zoning	R20
• Old Parcel #	1110B03000A023
• Bldg Value	$130,920
• OBXF Value	$3,680
• Land Value	$18,000
• Total Value	$152,600
• Defer Value	$0
• Tax Districts	-ALLCNTY FIRE- -

IREDELL COUNTY, NC

MAP FOR REFERENCE ONLY
NOT A LEGAL DOCUMENT

Iredell County, North Carolina makes no claims and no warranties, expressed or implied, concerning the validity or accuracy of the GIS data presented on this map.

Geometry updated 06/05/2023
Data updated 09/13/2023

Print map scale is approximate. Critical layout or measurement activities should not be done using this resource.

PERMIT SNAPSHOT REPORT OSWP-2023-31958 FOR IREDELL COUNTY

Permit Type:	Environmental Health OSWP	**Project:**		**App Date:**	07/25/2023
Work Class:	EH Septic Permit	**District:**	Iredell County	**Exp Date:**	NOT AVAILABLE
Status:	PRIORITY PERMIT	**Square Feet:**	0.00	**Completed:**	NOT COMPLETED
Valuation:	$0.00	**Assigned To:**	Whicker, Cory	**Approval Expire Date:**	

Description: Had septic issues. Called for repair. After digging and observing, company deemed repair impossible. Needing this handled ASAP to better accommodate my children.

Parcel: 4756050177.000 Main	**Address:** 109 Foxfire Ct Statesville, NC 28625 Main	**Zone:** R-20(Suburban Residential District)

Property Owner
Rena Kennedy
Home: (704) 437-4789

Applicant/Authorized Agent
Thomas Kennedy
109 Foxfire Court
Statesville, NC 28625
Mobile: (336) 467-4273

Permit Custom Fields

How is your site plan being submitted	Survey Plat	Septic Application/Permit Type	Relocate septic tank/drainlines, Repair	Does the site contain any jurisdictional wetlands	No
Non-domestic Sewage Generated	No	Other Public Agency	No	All proposed structure dimensions	See layout attachment
Maximum Number of Bedrooms	3	If other Addition/Structure, please explain		Number of Occupants	5
Foundation Type	Concrete Slab Foundation	Water Supply	Municipal Water	Desired Septic System Type	Conventional (most common)
Additional Unique Setbacks Apply	No				

Attachment File Name	Added On	Added By	Attachment Group	Notes
Signature_Thomas_Kennedy_7/25/2023 .jpg	07/25/2023 17:37	Kennedy, Thomas		Uploaded via CSS
109 Foxfire Ct AA Form_v1.jpg	09/06/2023 9:56	Nebel, Barbara	Available Online	Authorize to Act as Agent

Workflow Step / Action Name	Action Type	Start Date	End Date
Application Completeness Check v.1		09/06/2023 9:56	09/06/2023 9:56
Confirm application complete v.1	Generic Action		09/06/2023 9:56
Environment Health Inspections v.1			
Operation Permit Inspection v.1	Inspection		
OSWP Alarm Checked v.1	Inspection		
OSWP Drain Lines Checked v.1	Inspection		
OSWP Electrical Checked v.1	Inspection		
OSWP Floats Checked v.1	Inspection		
OSWP Maintenance Contract v.1	Inspection		
OSWP Pressure Head Checked v.1	Inspection		
OSWP Pressure Manifold Checked v.1	Inspection		
OSWP Tanks Checked v.1	Inspection		
~~Zoning Review v.1~~			09/06/2023 9:56
~~Floodplain Admin Overview v.1~~	Task		09/06/2023 9:56
~~Issue Invoice v.1~~	Generic Action		09/06/2023 9:56
~~Fees Paid v.1~~	Generic Action		09/06/2023 9:56
Fees v.1			
Issue Invoice v.1	Generic Action		