# IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 222289

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

PIN # 4756-76-0967

APPLICANT: Tom Lawley APPLICANT ADDRESS: PO Box 2429 Denver

SITE ADDRESS: 106 Stonehouse Dr. Statesville PHONE: 704-361-3130 ALT. PHONE:

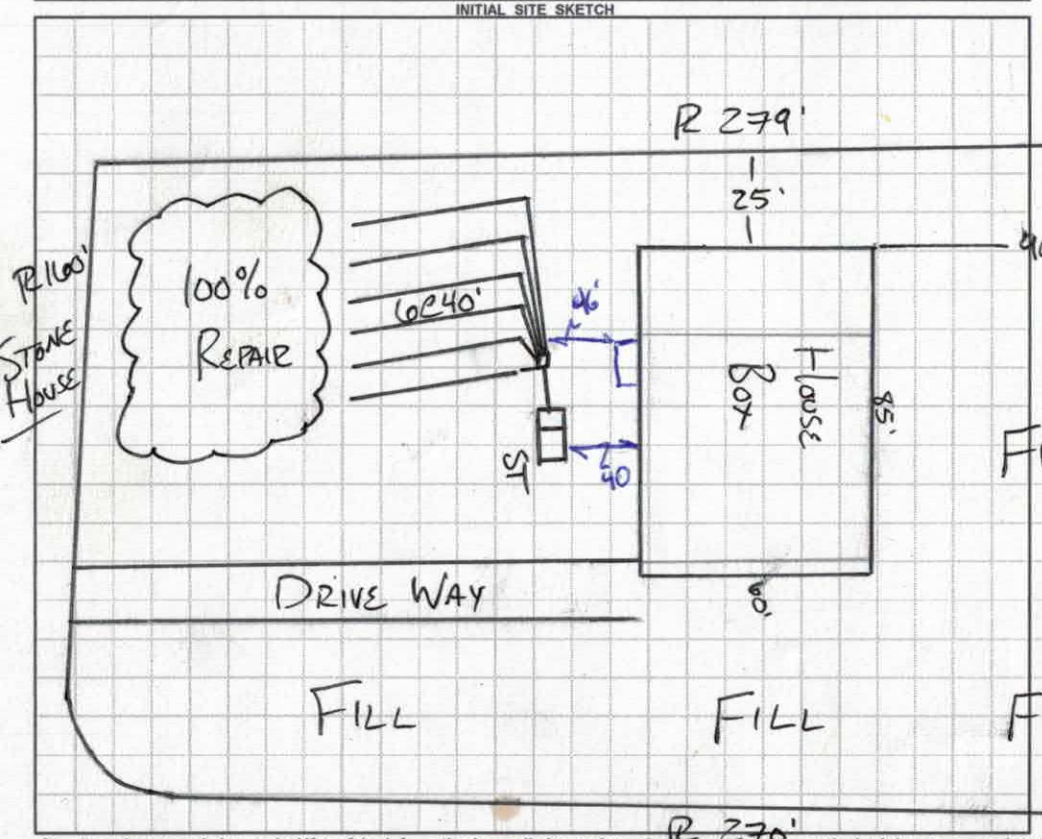
SITE DIRECTIONS: 21 N, TR Jane Sowers, TL Stonehouse, 1st on L

SUBDIVISION: Raymount Meadows SECTION: LOT # 114 LOT AREA: 1.16 AC DESIGN FLOW: 360 L.T.A.R.: .125

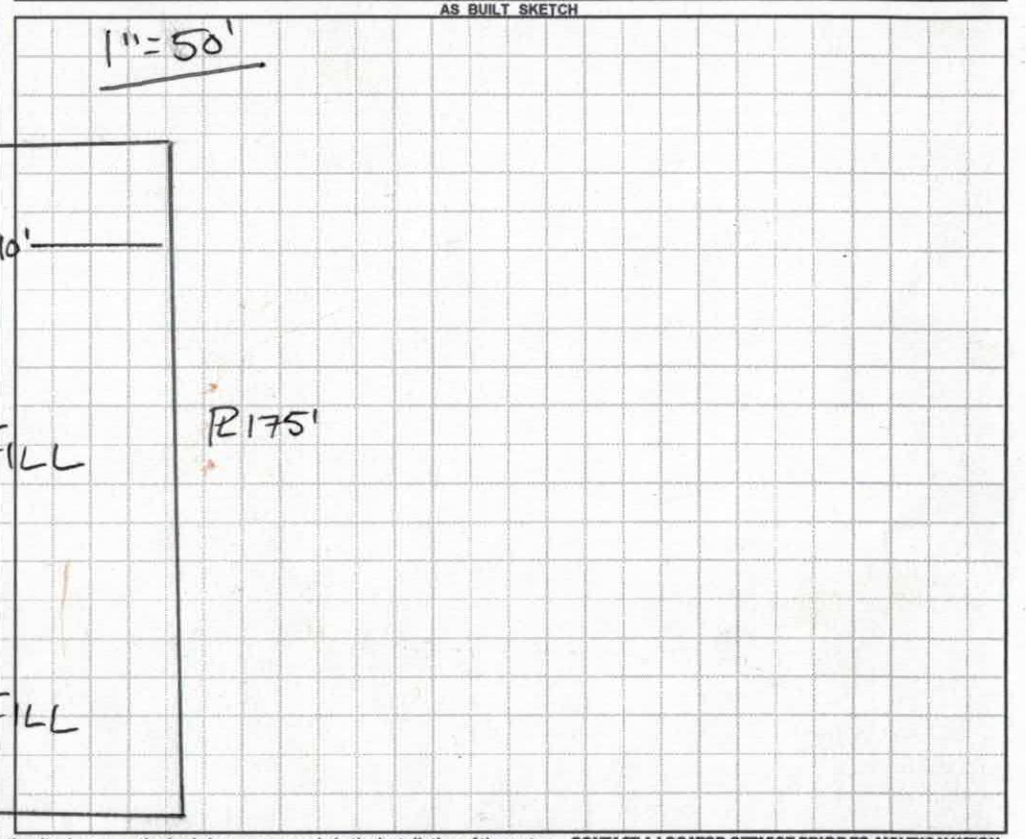
| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 (gal) | STB | 760 | Date | 2/23/17 | ☑ New System ☐ Repair ☐ Expansion | System Type: I II (III) IV V VI | ☑ Residence | No. Bedrooms | 3 | Water Supply |
| Pump Tank | (gal) | PT | | Date | | System Description: | PANEL BLOCK | ☐ Business | No. Persons | 6 | ☐ Private |
| Pump Make | | Model | | Serial # | | Repair System Description: | SAME | ☐ Other | No. Employees | | ☑ Public |
| # Nitrification Fields | 1 | # Lines | 6 @ 40' | Linear Ft: | 240' | Maintenance Agreement Required: | ☐ YES ☑ NO | ☐ Slab | ☑ Crawl Space | | ☐ Community |
| Trench Width | 24" | Max. Trench Bottom Depth | 36" | Gravel Depth | — | ☑ GRAVITY | ☐ PRESSURE | ☐ Basement w/plumbing | | ☐ Basement w/o plumbing | |

Comments / Conditions:

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: Tommy Lawley Date: 12/1/16 Installed by: Groundbreaking Grading

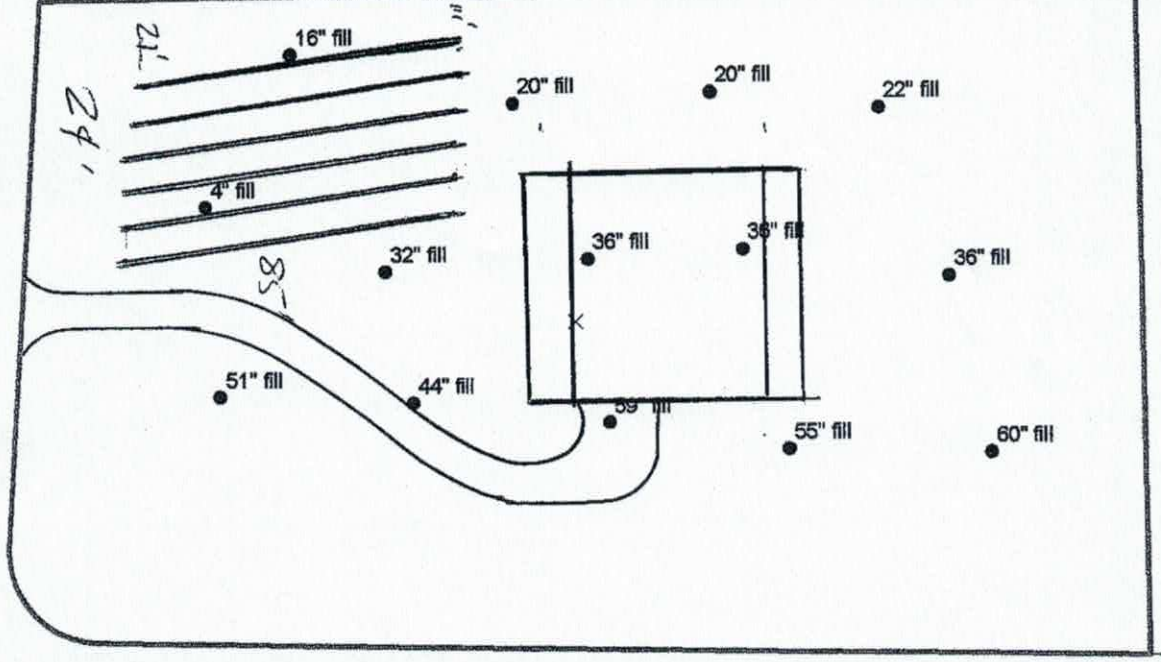
IMPROVEMENT PERMIT by: [signature] Date: 11-16-16 OPERATION PERMIT by: Benjamin A. Bakken Date: 5/11/2017

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 11-16-16 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK

# Amount of Fill in Inches, Baymount Stone lot 114

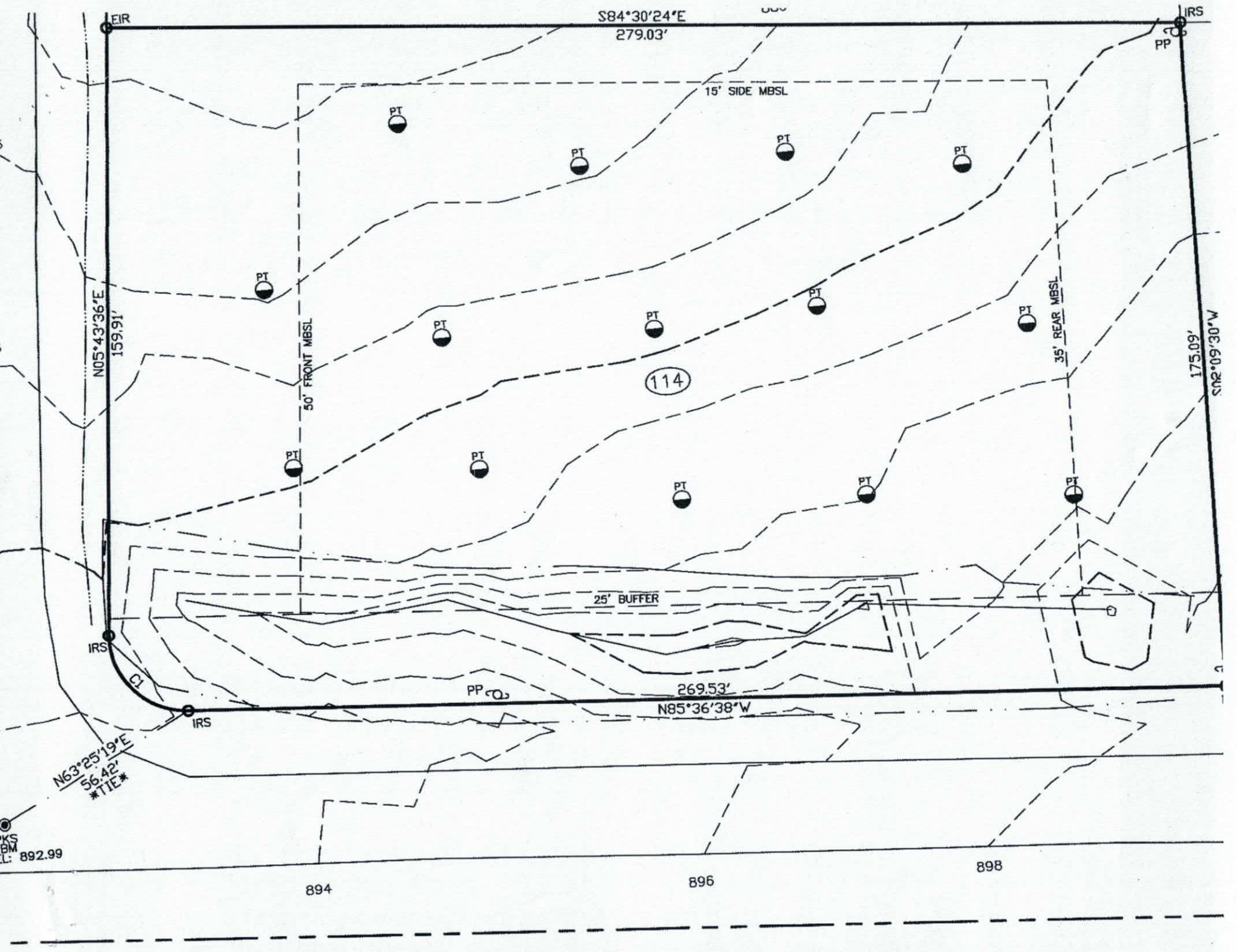
1 inch = 50 feet




STONE HOUSE

JANE SOWERS

1) X: 1456989.3789
Y: 767072.482806807
2) X: 1457048.45999707
Y: 767059.2456859 56
3) X: 1457100.41788941
Y: 767061.7512130 25
4) X: 1457144.65314068
Y: 767057.2068383 66
5) X: 1457162.97929507
Y: 767012.962120723
6) X: 1457173.96490587
Y: 766965.997412077
7) X: 1457120.732885 54
Y: 766967.543764429
8) X: 1457108.77626633
Y: 767020.617196992
9) X: 1457068.00589217
Y: 767018.2852753 38
10) X: 1457073.44609831
Y: 766974.827713952
11) X: 1457021.15084421
Y: 766980.622983831
12) X: 1457013.9798987
Y: 767015.405302111
13) X: 1456970.703178 12
Y: 766982.575047951
14) X: 1456966.94686655
Y: 767032.5[illegible]


EIR
S84°30'24"E
279.03'
IRS
PP
15' SIDE MBSL
PT
N05°43'36"E
159.91'
50' FRONT MBSL
114
35' REAR MBSL
175.09'
S02°09'30"W
25' BUFFER
IRS
C1
PP
269.53'
N85°36'38"W
IRS
N63°25'19"E
56.42'
*TIE*
892.99
894
896
898

DENR/DEH

ON-SITE WASTEWATER SECTION

Sheet 1 of 1

PROPERTY ID #: 4756-76-0963

COUNTY: IREDELL

# SOIL/SITE EVALUATION
## *for* ON-SITE WASTEWATER SYSTEM

OWNER: K. A. WATT CONSTRUCTION, LLC — APPLICATION DATE: 9-8-2008

ADDRESS: 129 BECKHAM ROAD — DATE EVALUATED: 8-4-2009

PROPOSED FACILITY: 3BR House — PROPOSED DESIGN FLOW (.1949): 360 — PROPERTY SIZE: 1.16 ACRE

LOCATION OF SITE: BAYMONT STONE HOUSE LOT 114 — PROPERTY RECORDED: YES

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 | SLIGHT H 2% | 0-12 | MSBK SC | FR SEXP | NONE NOTED | PS > 48" | NONE NOTED | NONE NOTED | PS 0.25 GPD/FT² |
| | | 12-48 | WSBK C | FR SEXP | | | | | |
| 2 | L 2% | 0-15 | MSBK SC | FR SEXP | NONE NOTED | PS > 48" | NONE NOTED | NONE NOTED | PS 0.25 GPD/FT² |
| | | 15-48 | WSBK C | FR SEXP | | | | | |
| 3 | L 2% | 0-15 | MSBK SC | FR SEXP | NONE NOTED | PS > 48" | NONE NOTED | NONE NOTED | PS 0.25 GPD/FT² |
| | | 15-48 | WSBK C | FR SEXP | | | | | |
| 4 | L 2% | 0-20 | MSBK SC | FR SEXP | NONE NOTED | PS > 48" | NONE NOTED | NONE NOTED | PS 0.25 GPD/FT² |
| | | 20-48 | WSBK C | FR SEXP | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | PS | PS |
| System Type(s) | III | III |
| Site LTAR | 0.25 | 0.25 |

OTHER FACTORS (.1946): NONE

SITE CLASSIFICATION (.1948): PS

EVALUATED BY: S. HEDRICK

OTHER(S) PRESENT: DAVID YOUNTZ

COMMENTS: THESE AUGER BORINGS WERE CONDUCTED AFTER FILL DIRT REMOVED

# LEGEND

*use the following standard abbreviations*

| LANDSCAPE POSITION | GROUP | SOIL TEXTURE | CONVENTIONAL .1955 LTAR* | LPP .1957 LTAR* | MINERALOGY/ CONSISTENCE | STRUCTURE |
|---|---|---|---|---|---|---|
| CC (Concave Slope)<br>CV (Convex Slope)<br>D (Drainage Way)<br>DS (Debris Slump)<br>FP (Flood Plain)<br>FS (Foot Slope)<br>H (Head Slope)<br>L (Linear Slope)<br>N (Nose Slope)<br>R (Ridge)<br>S (Shoulder Slope)<br>T (Terrace) | I | S (Sand)<br>LS (Loamy Sand) | 1.2 - 0.8 | 0.6 - 0.4 | NEXP (Non-expansive)<br>SEXP (Slightly Expansive)<br>EXP (Expansive) | G (Single Grain)<br>M (Massive)<br>CR (Crumb)<br>GR (Granular)<br>SBK (Subangular Blocky)<br>ABK (Angular Blocky)<br>PL (Platy)<br>PR (Prismatic) |
| | II | SL (Sandy Loam)<br>L (Loam) | 0.8 - 0.6 | 0.4 - 0.3 | | |
| | III | Si (Silt)<br>SiCL (Silty Clay Loam)<br>CL (Clay Loam)<br>SCL (Sandy Clay Loam)<br>SiL (Silt Loam) | 0.6 - 0.3 | 0.3 - 0.15 | | |
| | IV | SC (Sandy Clay)<br>SiC (Silty Clay)<br>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.

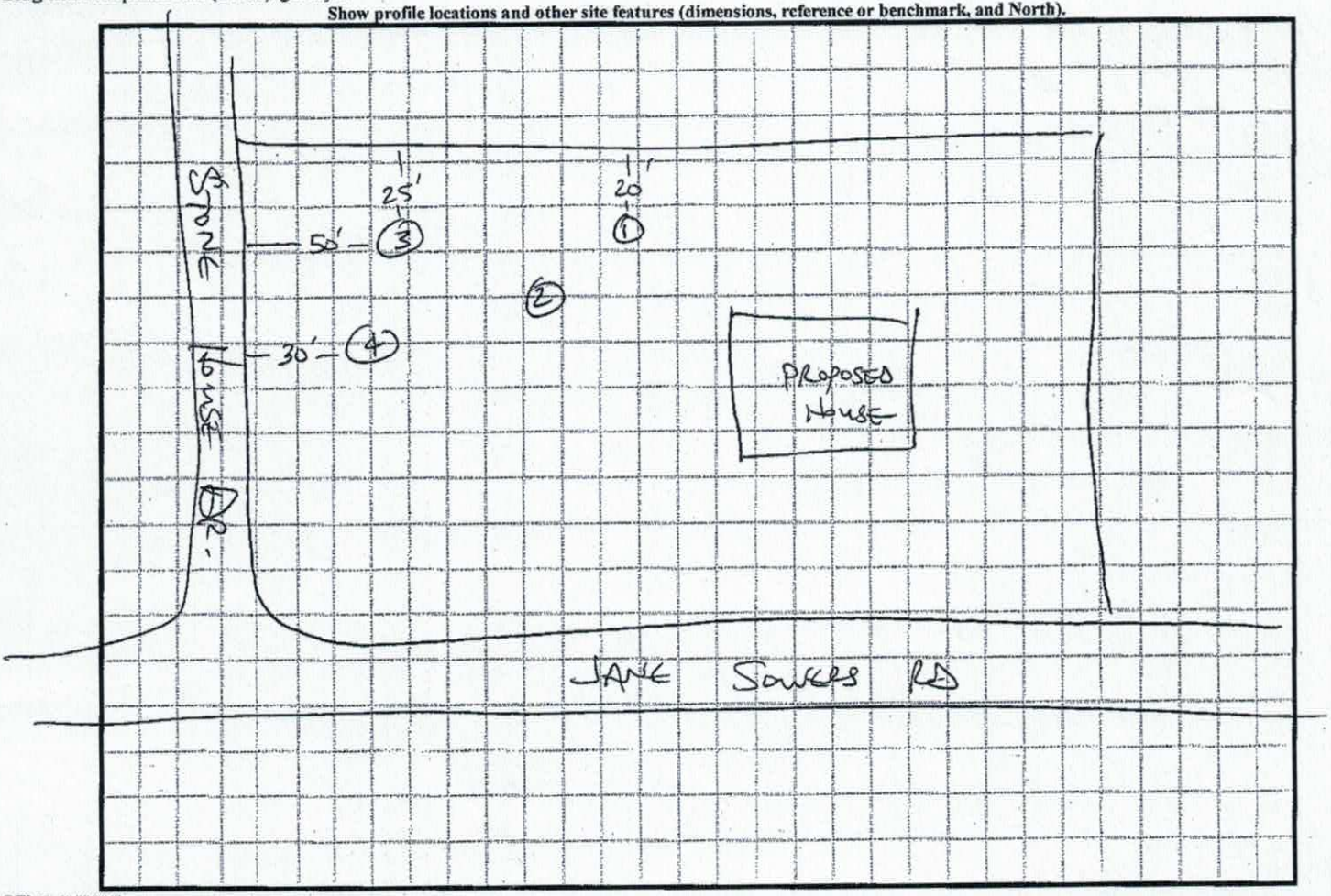
***NOTES***

| | |
|---|---|
| *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/ft$^2$

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




DENR (######)

Review (#####)

HOUSE NOT STAKED OK

# IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

*(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)*

1. APPLICATION FOR: ✓ Improvement Permit ✓ Authorization To Construct ___ Existing System Inspection

2. 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 check ( ) beside whichever is submitted if applicable* ___Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. Applicant Information:

| Applicant Name | Mailing Address | Home Phone # | Alternate Phone # |
|---|---|---|---|
| TOM LAWLEY | PO BOX 2429 DENVER 28037 | 704-361-3130 | 7043613130 |
| **Owner Name** | **Mailing Address** | **Home Phone #** | **Alternate Phone #** |
| DOREEN LYNCH | 1147 BUFFALO SCHOOLS RD CATAWBA 28609 | 774-307-0943 | |

4. Property Information:

| Street Address | Subdivision Name | Section/Phase and Lot Number |
|---|---|---|
| 106 STONE HOUSE DR. | STATESVILLE NC 28625 | |

Driving Directions: _____

5. RESIDENTIAL Site Development Information: *(Check or Complete ALL that apply)*

(✓) New, Single Family Residence — Maximum Number of Bedrooms 3 — (✓) Crawl Space Foundation?
( ) New, Multi-Family Residence — Maximum Number of Occupants 3 — ( ) Concrete Slab Foundation?
( ) Expansion of Existing Septic System — If Expansion, Current Number of Bedrooms ___ — ( ) Basement w/Plumbing?
(X) Repair To Failing Septic System due to _____ — ( ) Basement w/out Plumbing?
( ) Other _____

IF Non-Residential Site Development: Type of Business _____
Square Footage of Building _____
Maximum Number of Employees _____
Maximum Number of Seats _____

6. Proposed Water Supply:

( ) New Well ( ) Existing Well ( ) Community Well (✓) City Water ( ) Other Public Water

7. Desired Septic System Type: *(You may rank in order of preference, if any)* ( ) EXISTING SYSTEM installed _____ *Year*

( ) Alternative (✓) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other_____

8. Please Answer The Following ( ) Yes (✓) No Does the site contain any jurisdictional wetlands?
   To The Best of Your Ability: ( ) Yes (✓) No Is any non-domestic sewage (i.e. industry) 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.

9. Signature: _____ 10/05/2016
   Property owner or owner's legal representative signature (SIGNATURE REQUIRED) — DATE

# IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION:*

## *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:

_____ Property Line measurements are clearly identified...  _____ All proposed structures are indicated...

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

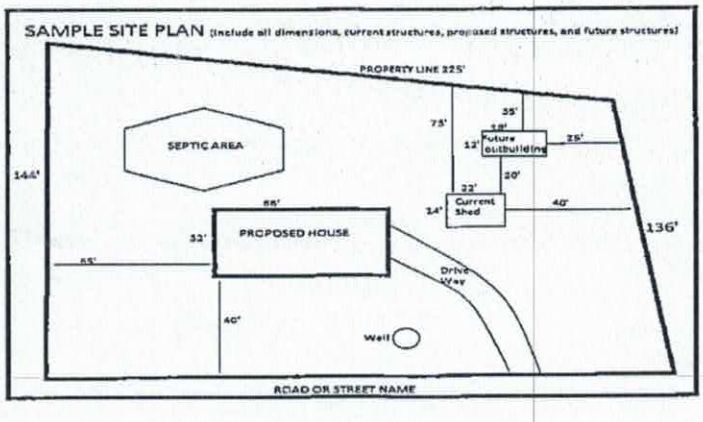
_____ Front and side setbacks from property line...  _____ Preferred driveway location and configuration, preferred well location...

_____ Area you prefer your septic system to be placed...  _____ North arrow, or other sufficient indicator of direction...

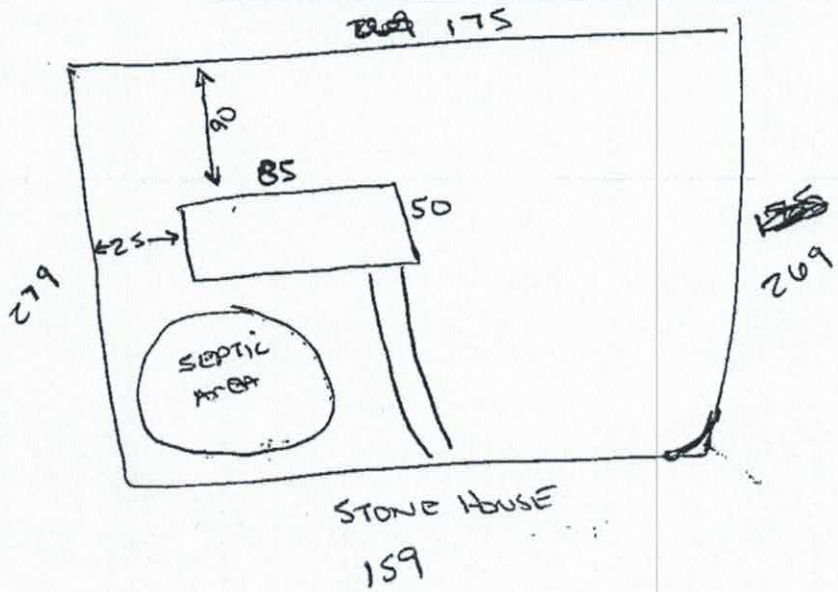
Circle N/A on the following if appropriate:

_____ 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**

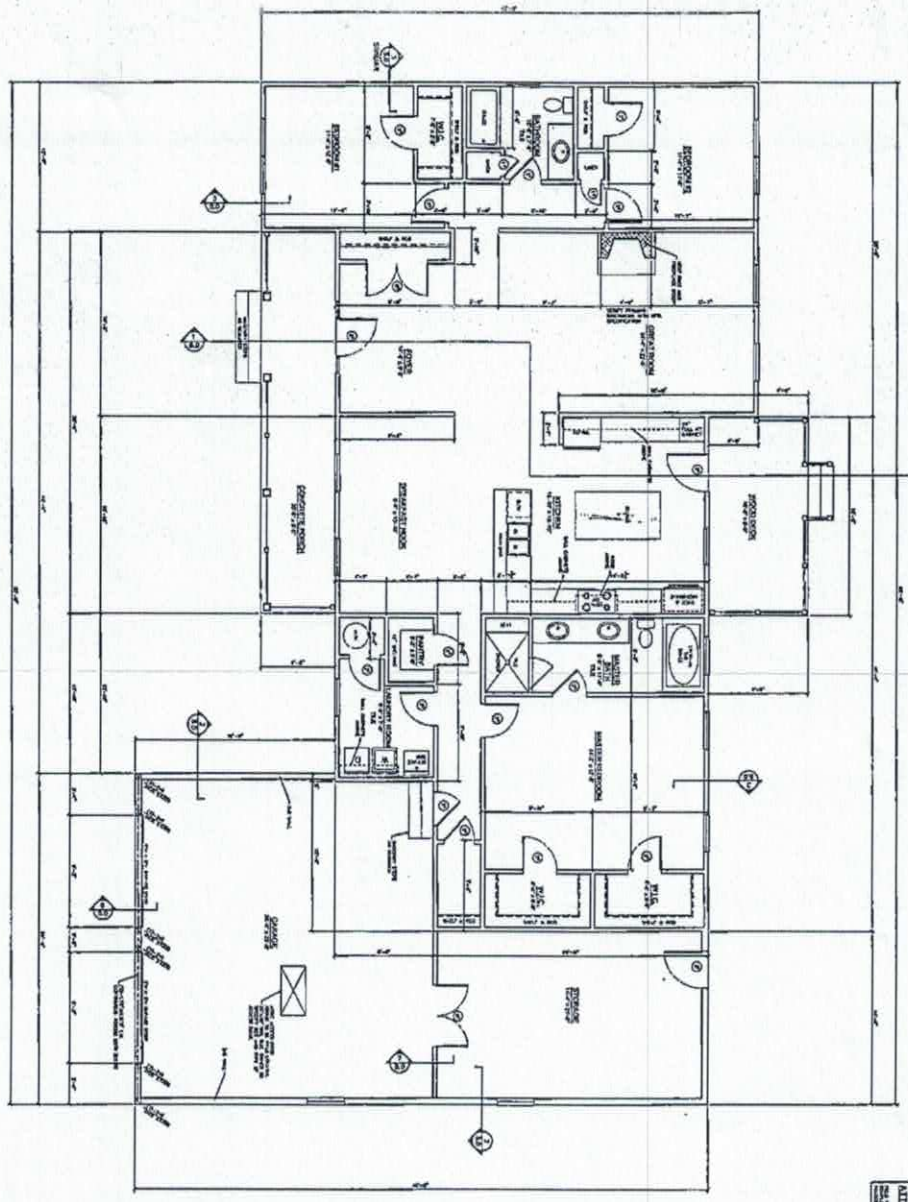



**Signature:** _____

*REQUIRED* property owner or owner's legal representative signature.

10/05/2016

DATE



FLOOR PLAN

82'

50'

100 SF. GARAGE

Acknowledgement Of
Plans Submittal ONLY!
Date 11-16-16

Date 12/1/16

A NEW RESIDENCE FOR
DENNIS AND DOREEN LYNCH
106 STONEHOUSE DRIVE
STATESVILLE, NC 28625

REVISIONS

MILL CREEK
ENGINEERING, PLLC

FLOOR PLAN
3.0
3 of 6
16104

# IREDELL COUNTY

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

FILE COPY

| APPLICATION NUMBER |
|---|
| 222289 |
| Issue Date: 10/05/2016 |

**ZONING PERMIT**
Open Space

| Parcel Number | Street Address | Jurisdiction |
|---|---|---|
| 4756760967.000 | 106 STONE HOUSE DRIVE, STATESVILLE, NC | IREDELL COUNTY |

| Owner Information | | Applicant Information | |
|---|---|---|---|
| Owner: | KA WATT CONSTRUCTION INC | Applicant: | FOURTEES INCORPORATED |
| Address: | 129 BECKHAM RD<br>STATESVILLE, NC 28625 | Address: | PO BOX 2429<br>DENVER, NC 28037 |
| Phone: | | Phone: | 704-361-3130 |

| Use Requested | Zone Code |
|---|---|
| SFD | R20 |

| Lot Acreage | F Setback | B Setback | L Setback | R Setback | Watershed | Flood Zone |
|---|---|---|---|---|---|---|
| 1.160 | 35.00 | 35.00 | 15.00 | 25.00 | NOT | X |

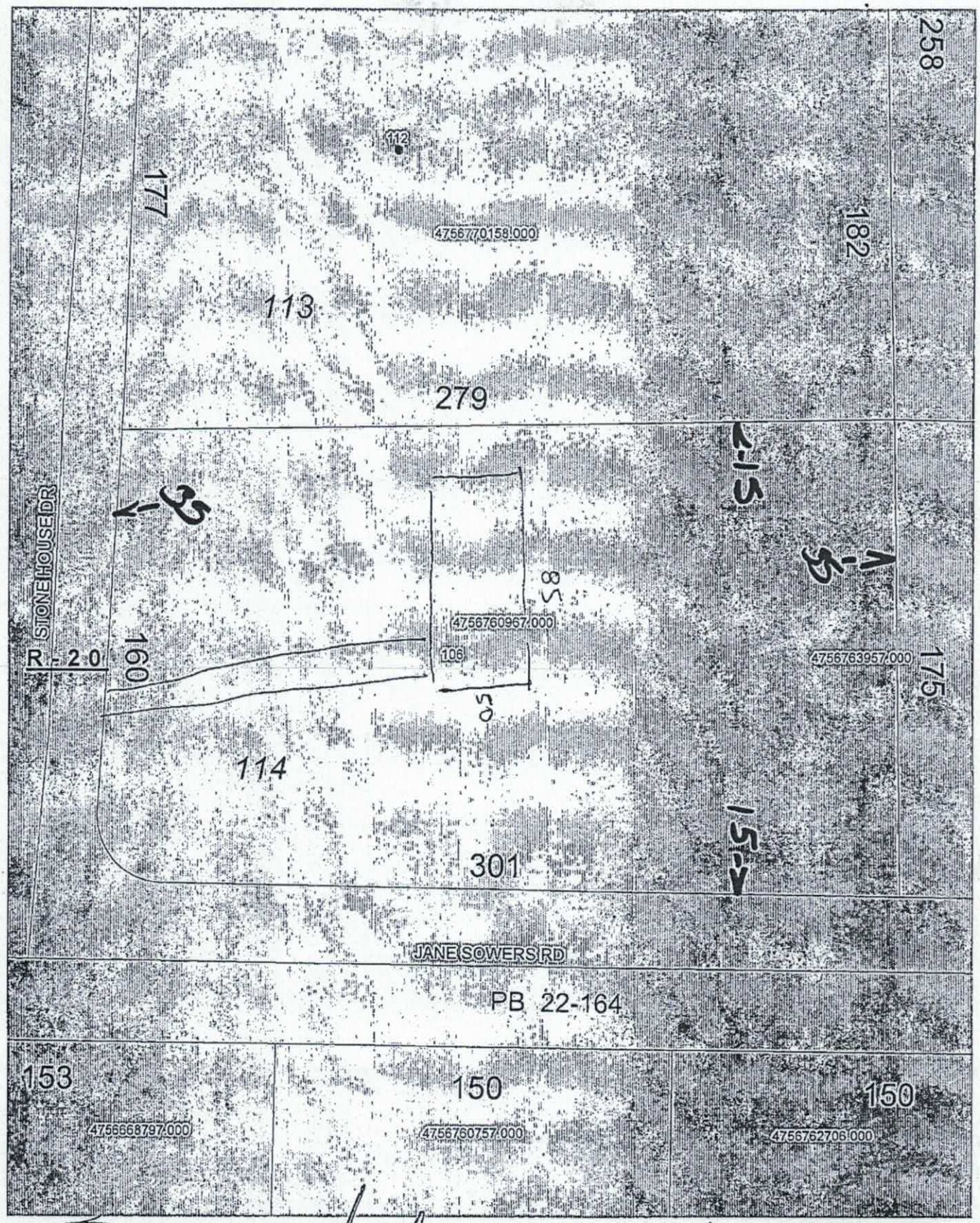
**Remarks:**

$ PAID

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 | 82332 | TOTAL FEES: | $ 77.25 |
|---|---|---|---|




Date 10/06/2016