BCH BLDR-2023-18963

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP324934

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

PIN # 4761 -- 45 -- 3302

APPLICANT/OWNER: Michael + Jessica Davidson APPLICANT ADDRESS: 144 Bluffton Rd Mooresville NC 28115

SITE ADDRESS: 1132 Bethesda Rd Statesville NC PHONE: 704-431 5709 ALT. PHONE 704 437 2580

SITE DIRECTIONS: Corner of Ostwalt Amity + Bethesda SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Mary Francis Deaton McNeely SECTION: ___ LOT # 9 LOT AREA: 1.088 AC DESIGN FLOW: 360 L.T.A.R.: .25

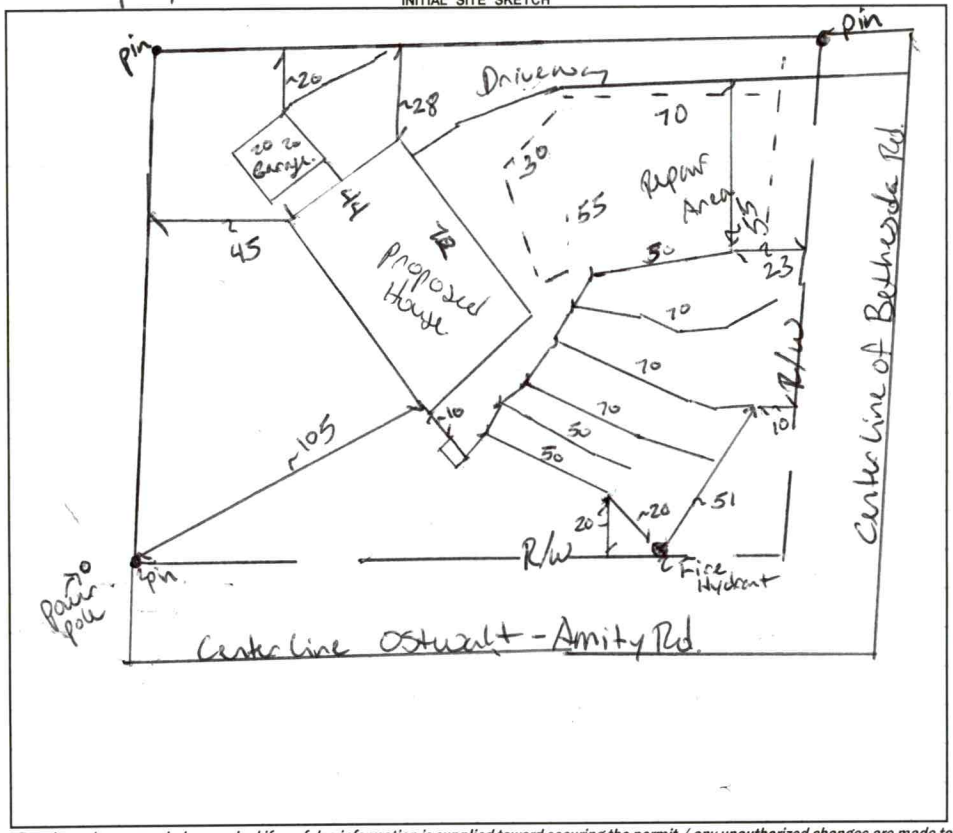
Septic Tank	1000 (gal)	STB	760	Date	8/16/23	☒ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms 3
Pump Tank	(gal)	PT		Date		System Description: Gravity 25% Reductin		☐ Business	No. Persons 6
Pump Make		Model		Serial #		Repair System Description: TS-11 Drip		☐ Other	No. Employees
# Nitrification Fields	1	# Lines	6	Linear Ft	360	Maintenance Agreement Required: ☐ YES ☒ NO		☐ Slab	☒ Crawl Space
Trench Width	36in	Trench Bottom Depth (~~Low side~~)	20 in Low	Gravel Depth	—	☒ GRAVITY ☐ PRESSURE		☐ Basement w/ plumbing	☐ Basement w/o plumbing

Water Supply: ☐ Private ☒ Public ☐ Community

Comments / Conditions: Install lines on the Contours of Land. Keep lines out of R/W Do not Drive Park Pave Grade or bury utilities in drainfield area.
* Property must be Recorded Prior to A/C *

Lot Recorded Bk 76 Pg 102
- House Box being squared up with back Property Line. Does not impact septic areas. Keep plumbing shallow to achieve gravity. If not may Require Pump.

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed as Drawn

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: Michael Davidson Date: 3/31/22 Installed by: Jake Williams

IMPROVEMENT PERMIT by: Benjamin A Bates Date: 3/24/22 OPERATION PERMIT by: Cory Whit Date: 9/27/23

AUTHORIZATION TO CONSTRUCT by: Benjamin A Bates Date: 3/14/22 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? _____	

RECEIVED JAN 2 6 2022

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* AP-324934 $500.00

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) Janice Estes 704-437-2580 realtor

Applicant Name: Michael & Jessica Davidson Address: 144 Bluffton Rd, Mooresville, NC Zip: 28115
Applicant Email: MJD24@icloud.com Phone: 704-431-5709 Alt. Phone: 704-431-0048
Owner Name: Michael & Jessica Davidson Address: 144 Bluffton Rd, Mooresville NC Zip: 28115
Owner Email: MJD24@icloud.com Phone: 704-431-5709 Alt. Phone: 704-431-0048

Property Information:

Street Address: 1132 Bethesda Rd, Statesville, NC

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

Driving Directions: _____

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: _____
Non-Residential Site Development: Type of Business: _____
Square Footage of Building: _____ Max. Number of Employees: _____ Max. Number of Seats/Beds/Other: _____

Maximum Number of Bedrooms: 3
Maximum Number of Occupants: 4
( ) Swimming Pool
( ) Other Addition/Structure: _____

CHECK FOUNDATION TYPE
( ) 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: Michael Davidson
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

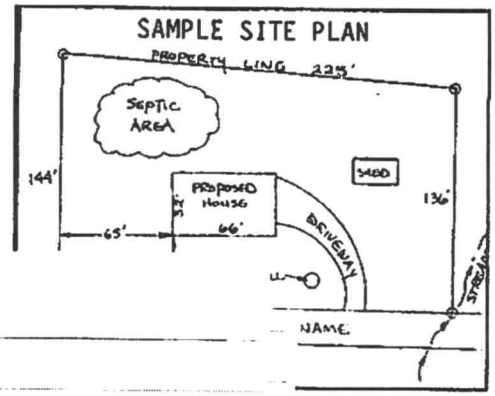
1/12/2022
DATE

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:

( ) **Property Line measurements are clearly identified**
( ) **All proposed structures are indicated**
( ) **Front and side setbacks from property line**
( ) **Preferred driveway location and well location**
( ) **Area you prefer your septic system to be placed**
( ) **Nr**

Circle N/A o

Loc
Loc
Loc

Show: pro ***space on the site***

FRONT of HOUSE
OSWALD AMITY Rd.
RIGHT OF WAY
Property Line
80ft.
70'
Depth
70'
Width
2500sq
Septic
Property Line
132'
Property Line
188'
BETHESDA RD
Right of Way
132'
S
E
W
N

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

1-12-22
DATE

IREDELL COUNTY · NC

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

APPLICATION NUMBER

324934
Issue Date: 01/24/2022

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4761453317.000	1132 BETHESDA RD	Iredell County

Owner Information	Applicant Information
Name: MCNEELY MARY F D ETAL	Name: MICHAEL AND JESSICA DAVIDSON
Address:	Address: 144 BLUFFTON RD
,	MOORESVILLE, NC 28115
Phone:	Phone: (704)436-5709

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0	35	35	15	25	N/A	NO

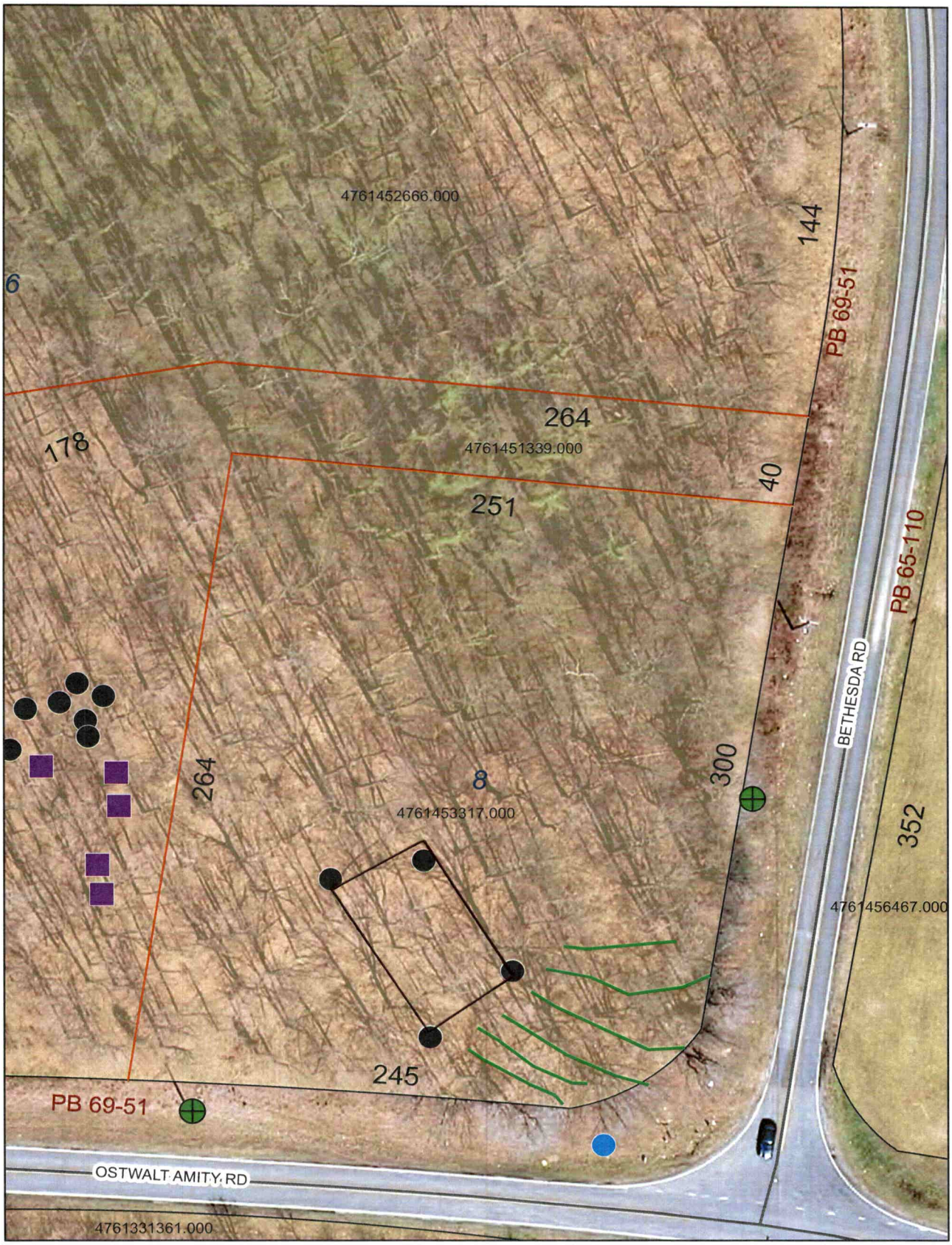
Remarks
SFD

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.

Date: 01/24/2022

Signature of Owner/Contractor

Permit Number	324934	TOTAL FEES:	$77.25


4761452666.000
6
144
PB 69-51
264
4761451339.000
178
40
251
PB 65-110
BETHESDA RD
264
8
4761453317.000
300
352
4761456467.000
245
PB 69-51
OSTWALT AMITY RD
4761331361.000

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

Sheet 1 of 1
PROPERTY ID #:
COUNTY: Iredell

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

OWNER: Michael & Jessica Overdorf
ADDRESS:
PROPOSED FACILITY: SFR
LOCATION OF SITE: 1152 Bethesda Road

APPLICATION DATE
DATE EVALUATED:
PROPOSED DESIGN FLOW (.1949):
PROPERTY SIZE:
PROPERTY RECORDED:

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)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
1	SS 7-35	0-6 6-31 31-48	SIL SCL ABL C SIL CL		27-31" 4B Mott				PS .25
2	SS 0-7	0-6 6-36 36-48	SIL SCL ABL C SIL CL		Few 4B Mott @ 30-36"				PS .25
3	SS 7-35	0-6 0-32 32-48	SIL SCL ABL C ABL CL		T, 5Y 8/1 @ 35" Chroma 10 YR 6/8 @ 32"				PS .25 Shelby
4	SS 0-35	0-6 6-32 32-48	SIL SCL ABL C SIL CL		Chroma 10 YR 6/8 @ 30"				PS .25 Shelby

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY:
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.

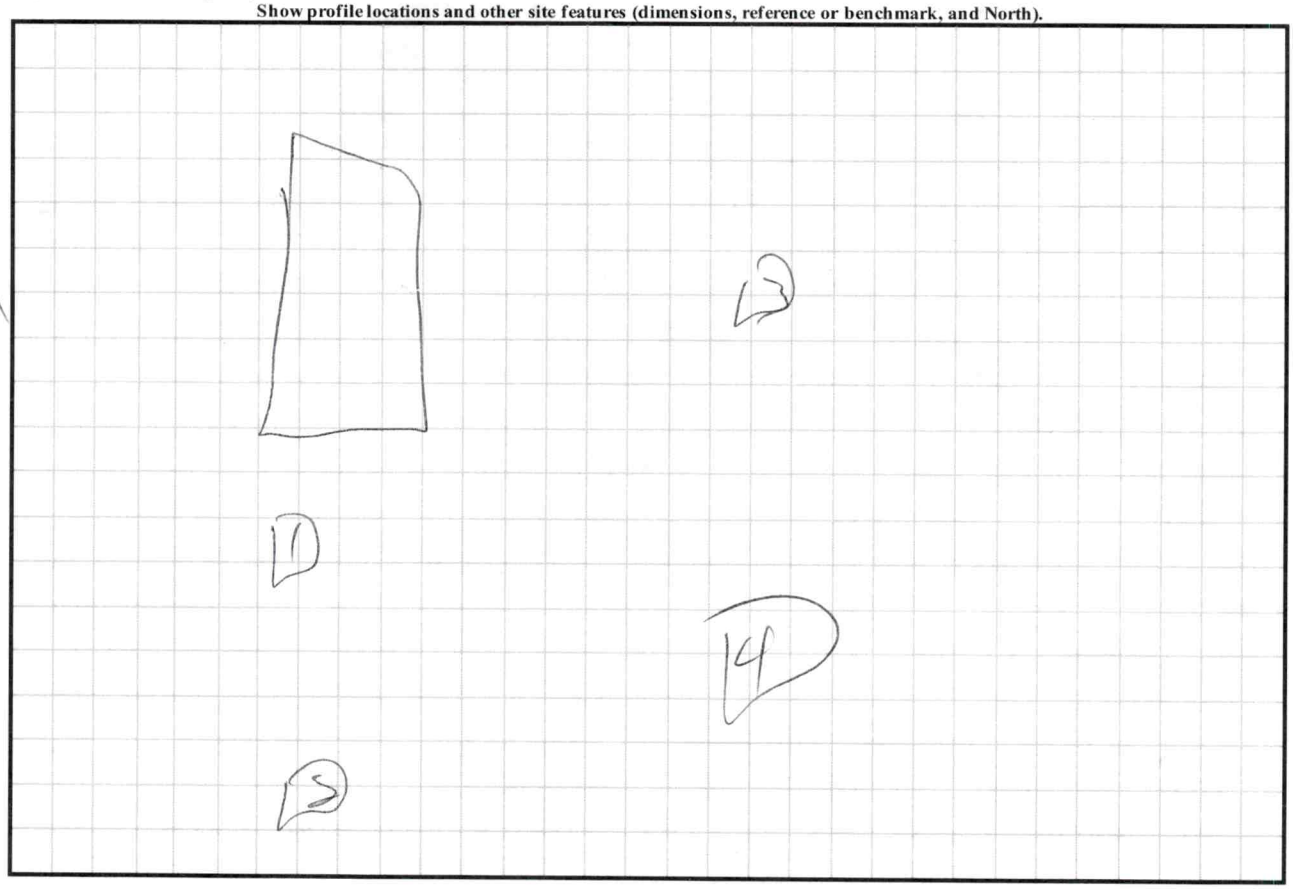
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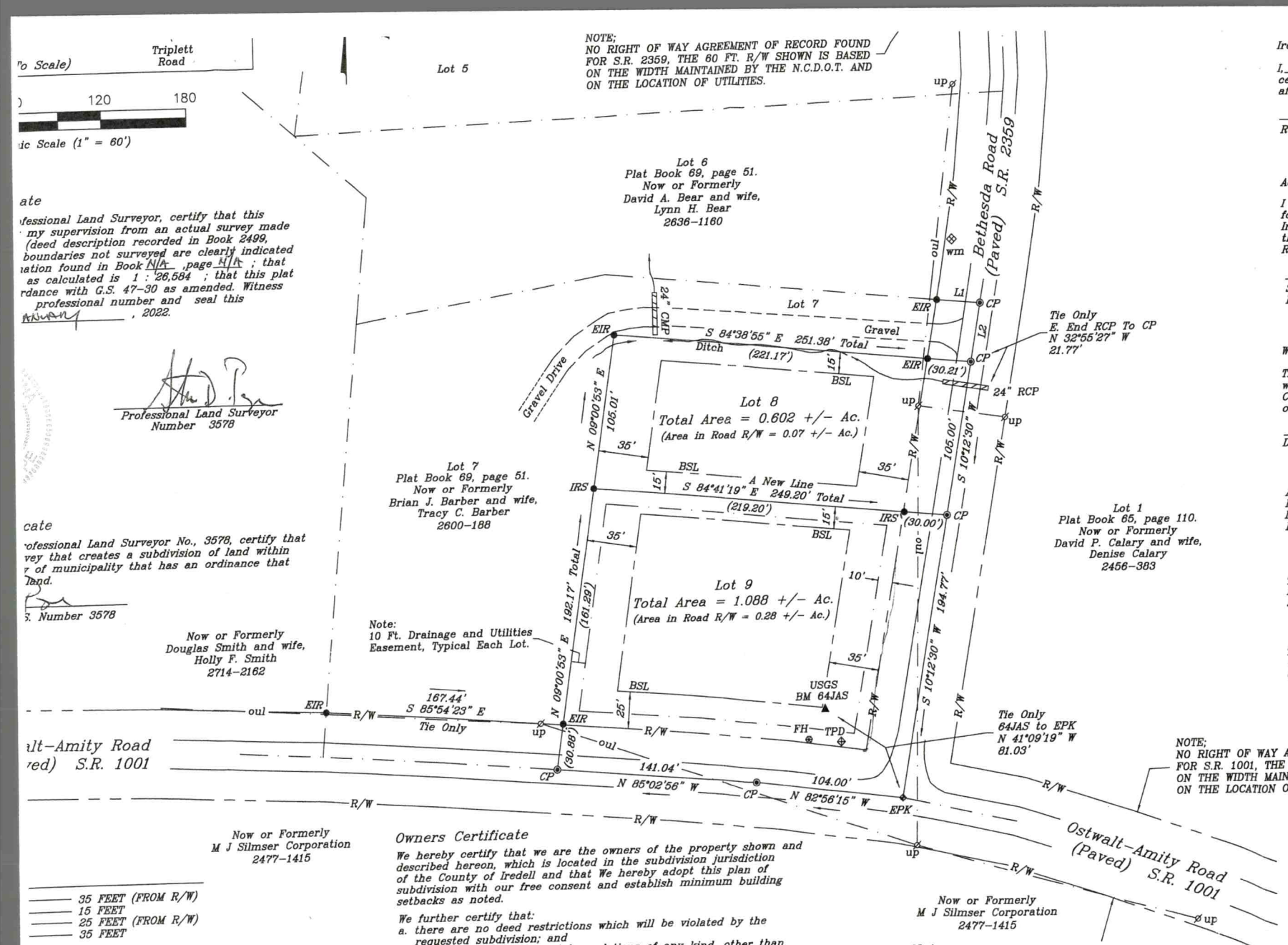
HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or 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).





o Scale)

120 180

ic Scale (1" = 60')

ate

fessional Land Surveyor, certify that this my supervision from an actual survey made (deed description recorded in Book 2499, boundaries not surveyed are clearly indicated ation found in Book N/A ,page N/A ; that as calculated is 1 : 26,584 ; that this plat rdance with G.S. 47–30 as amended. Witness professional number and seal this January , 2022.

Professional Land Surveyor
Number 3578

cate

ofessional Land Surveyor No., 3578, certify that vey that creates a subdivision of land within r of municipality that has an ordinance that land.

S. Number 3578

35 FEET (FROM R/W)
15 FEET
25 FEET (FROM R/W)
35 FEET

ER

McNeely, Pleasant Paul Deaton and eaton, Darius Timothy Deaton and Theodore R. Templeton and wife, nd Diana Templeton Robinson.

77

Owners Certificate

We hereby certify that we are the owners of the property shown and described hereon, which is located in the subdivision jurisdiction of the County of Iredell and that We hereby adopt this plan of subdivision with our free consent and establish minimum building setbacks as noted.

We further certify that:

a. there are no deed restrictions which will be violated by the requested subdivision; and
b. there are no governmental regulations of any kind, other than those for which a variance has been applied for under the Iredell County Subdivision Ordinance regulations, which will be violated by the requested subdivision; and
c. I understand that enforcement of deed restrictions and any other contractual agreements is not the responsibility of Iredell County, will not be undertaken by Iredell County, and is the sole responsibility of the parties affected by violations of such deed restrictions and contractual agreements.

Owners Notary

North Carolina, Iredell County

I, _____ a Notary Public for said County and State, do hereby certify that Mary Frances Deaton McNeely, Pleasant Paul Deaton and wife, Jacqueline P. Deaton, Darius Timothy Deaton and wife, Mary E. Deaton, Theodore R. Templeton and wife, Gail H. Templeton and Diana Templeton Robinson owners, personally appeared before me this day, and acknowledged the execution of the foregoing instrument. Witness my hand

Iredell County, North Caroli

I, _____, certify that the map or pl affixed meets all statutory

Review Officer

Administrator Certificate

I hereby certify that the s found to comply with the Iredell, North Carolina and the subdivision administrat Register of Deeds of Iredel

Subdivision Administrator
Iredell County, North Caro

Watershed Certificate

This Subdivision, to the be within a Water Supply Wate Carolina Division of Enviro on the Watershed Protectio

Date

As of the date of this rec have not been inspected c Department, until inspecte Building Permit will be iss

The lots represented on t foot Drainage and Utilities sides of each lot.

This property does not lie on HUD–FIA Flood Insuran CID 370313, Panel 4820, Z

NOTES:

PROPERTY SUBJECT DISCLOSED BY A FU

PROPERTY SUBJECT OF RECORD AND TH

AREA BY COORDINA

NO N.C.G.S. HORIZO WITHIN 2000 FEET

PROPERTY MAY BE