# ICHD - ENVIRONMENTAL HEALTH DIVISION

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

ManF-2023-23355 ... PERMIT # OSWP-2023-23363

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

PIN # 4763 -- 61 --5617

APPLICANT/OWNER: JEREMY L. PLYLER APPLICANT ADDRESS: 313 PILCH ROAD, TROUTMAN, N.C. 28166

SITE ADDRESS: 161 ARBOR DRIVE, STATESVILLE, N.C. 28677 PHONE: 704-339-9700 ALT. PHONE —

SITE DIRECTIONS: (E) ON 70, (R) ON BETHESDA, (L) ON TREELINE (R) ON ARBOR, LOT ON (L) SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: FOREST ACRES SECTION: A2 LOT # 132 LOT AREA: 0.48 AC DESIGN FLOW: 360 GPD L.T.A.R.: 0.3

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 | (gal) | STB | | Date | | | | |
| Pump Tank | — | (gal) | PT | — | Date | — | | | |
| Pump Make | — | Model | | — | Serial # | — | | | |
| # Nitrification Fields | 1 | # Lines | 4 | | Linear Ft | 168 ft | | | |
| Trench Width | 24 IN | Trench Bottom Depth(Low side) | | 33 IN | Gravel Depth | — | | | |

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

System Description: 50% REDUCTION

Repair System Description: 50% REDUCTION

Maintenance Agreement Required: ☐ YES ☑ NO

☑ GRAVITY ☐ PRESSURE

☑ Residence ☐ Business ☐ Other ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing

No. Bedrooms 3 No. Persons 6 No. Employees —

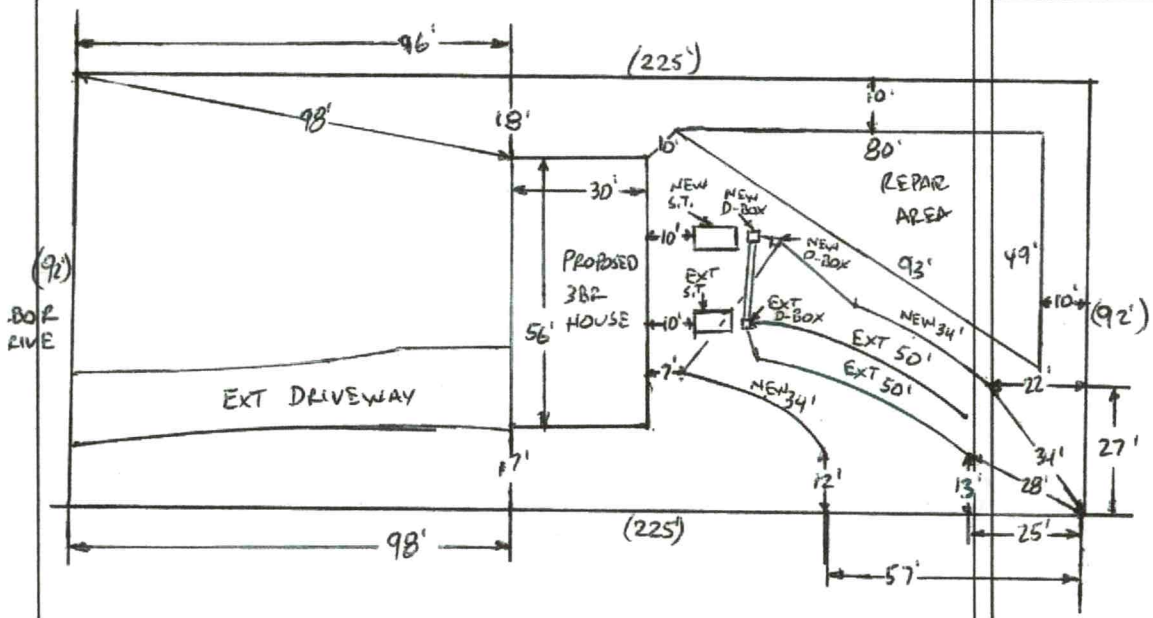
Water Supply: ☐ Private ☑ Public ☐ Community

☐ Basement w/o plumbing

Comments / Conditions: PUMP, CRUSH, AND FILL EXISTING SEPTIC TANK, INSTALL ON CONTOUR, INSTALL ON 8FT CENTERS, DO NOT EXCEED A 36IN MAX TRENCH BOTTOM, DO NOT SHALLOW UP,

CALL 704-902-0273 PRIOR TO INSTALLATION TO DISCUSS DISTRIBUTION.

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.**

1 IN = 40 FT

S.T. = SEPTIC TANK

EXT = EXISTING

Supply checked

*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: Date: Installed by: Craig Thompson

IMPROVEMENT PERMIT by: Burt L. White Date: 7-25-2023 OPERATION PERMIT by: Sydney Hallman Date: 9/22/23

AUTHORIZATION TO CONSTRUCT by: Date: 7/27/23 Existing System Inspected by: Date:

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

MANF-2023-23355

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ALT. PHONE —

SITE DIRECTIONS: (E) ON 70, (R) ON BETHESDA, (L) ON TREELINE (R) ON ARBOR, LOT ON (L)

SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: FOREST OAKS

SECTION: A2 LOT # 132 LOT AREA: 0.48 AC

DESIGN FLOW: 360 GPD L.T.A.R.: 0.3

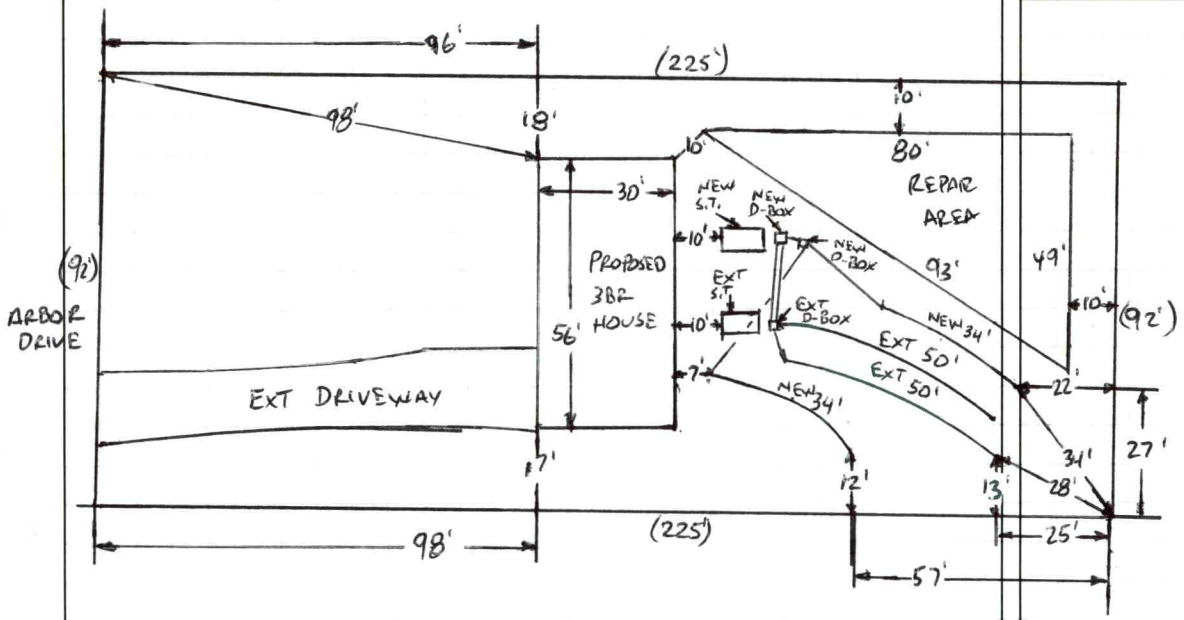
| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 | (gal) | STB | 760 | Date | 7-8-23 | ☐ New System | ☐ Repair | ☑ Expansion | System Type: I II (III) IV V VI | |
| Pump Tank | — | (gal) | PT | — | Date | — | System Description: | 50% REDUCTION | | | |
| Pump Make | — | Model | — | Serial # | — | | Repair System Description: | 50% REDUCTION | | | |
| # Nitrification Fields | 1 | # Lines | 4 | Linear Ft | 168 FT | | Maintenance Agreement Required: | ☐ YES | ☑ NO | | |
| Trench Width | 24 IN | Trench Bottom Depth(Low side) | 33 IN | Gravel Depth | — | | | ☑ GRAVITY | ☐ PRESSURE | | |

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

Comments / Conditions: PUMP, CRUSH, AND FILL EXISTING SEPTIC TANK, INSTALL ON CONTOUR, INSTALL ON 8FT CENTERS, DO NOT EXCEED A 36IN MAX TRENCH BOTTOM, DO NOT SHALLOW UP,

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1 IN = 40 FT
S.T. = SEPTIC TANK
EXT = EXISTING

Line } STI 9/7/23
Tank }

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Owner / Applicant Signature: Date: Installed by:

IMPROVEMENT PERMIT by: Burgent L. White Date: 7-25-2023 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: 7/27/23 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? _____ | |

161 ARBOR DRIVE, STATESVILLE, N.C. 28677

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| PIT 1 | LINEAR SIDE 8% | 0-6<br>6-36<br>36-57 | FILL MIXED<br>C, SBK FR, S, P, SEXP<br>CL, WSBK FR, SS, SP, SEXP | SAP INC THRU OUT | 57"+ | NA | NA | PS '3 |
| PIT 2 | LINEAR SIDE 5% | 0-7<br>7-36<br>36-64 | FILL MIXED<br>C, SBK FR, S, P, SEXP<br>CL, WSBK FR, SS, SP, SEXP | SAP INC THRU OUT | 64"+ | NA | NA | PS '3 |

224'
17'
35'
Driveway
Arbor Dr
92'
Proposed D/U
56'
28'
Septic area
Proposed
199'
Existing
19'
N/W



4763-61-3940
4763-61-4886
4763-61-5993
100
250
92
4763-61-7
92
92
92
157
Ext st outlet
Pit1
Ext st inlet
4763-61-3638
4763-61-4628
4763-61-5617
161
225
225
225
165
153
131
132
4763-61-6616
133
92
92
92
4763-61-7
Arbor Dr
PB 19-10
100
170
4763-61-3450
4763-61-4485
Island Sycamore Dr
118
160
18
4763-61-637
1 in = 40 ft

# PERMIT SNAPSHOT REPORT OSWP-2023-23363 FOR IREDELL COUNTY

**Permit Type:** Environmental Health OSWP
**Project:**
**App Date:** 04/26/2023

**Work Class:** EH Septic Expansion Improvement Permit
**District:** Iredell County
**Exp Date:** NOT AVAILABLE

**Status:** In Progress
**Square Feet:** 0.00
**Completed:** NOT COMPLETED

**Valuation:** $0.00
**Assigned To:** White, Bryant
**Approval Expire Date:**

**Description:** add ing new doublewide. need to add new line or total new drainfield

**Parcel:** 4763615617.000 Main
**Address:** 161 Arbor Dr Statesville, NC 28677 Main
**Zone:** RA(Residential Agricultural District)

Property Owner
JEREMY L PLYLER
313 Pilch Rd
Troutman, NC 28166
Business: (704) 339-9700

Applicant/Authorized Agent
JEREMY L PLYLER
313 Pilch Rd
Troutman, NC 28166
Business: (704) 339-9700

**Permit Custom Fields**

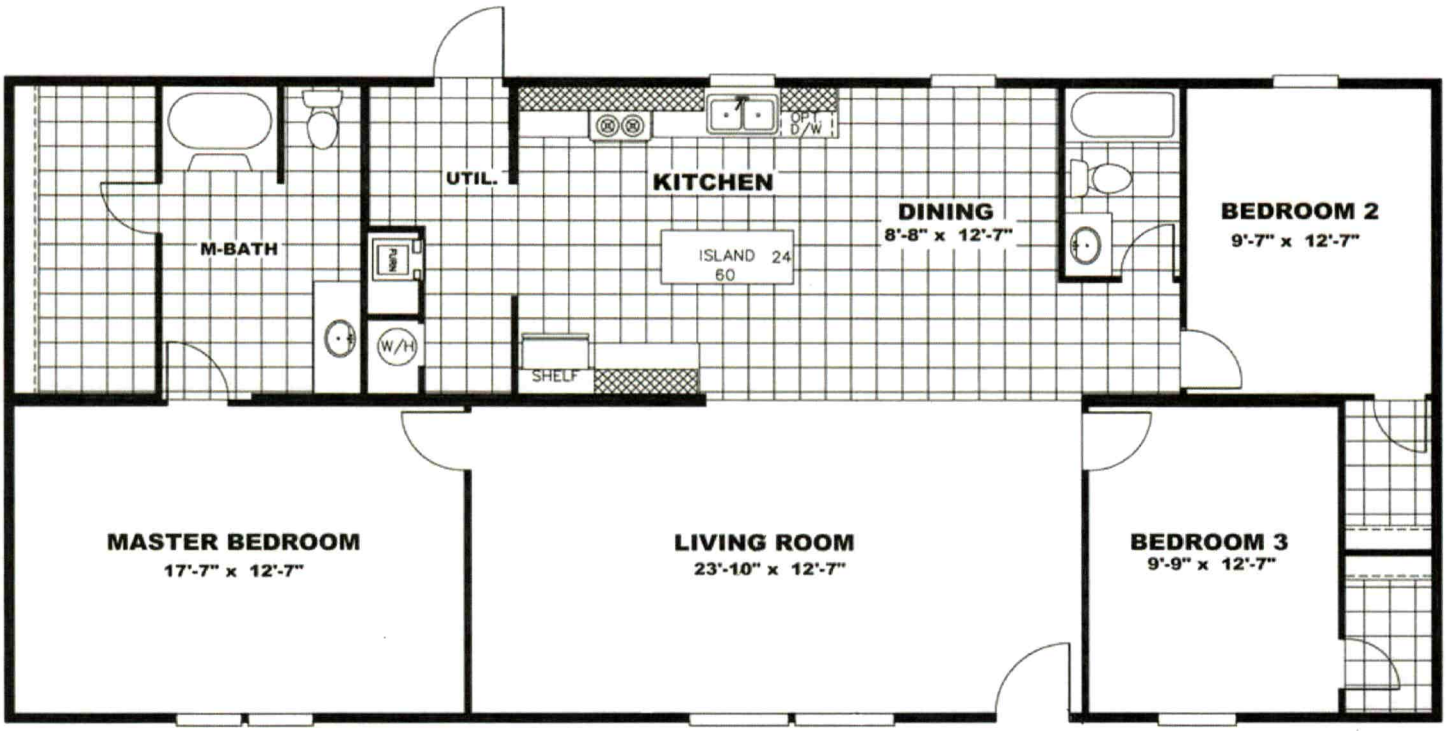
| | | | | | |
|---|---|---|---|---|---|
| How is your site plan being submitted | Custom Site Plan | Does the site contain any jurisdictional wetlands | No | Non-domestic Sewage Generated | No |
| Other Public Agency | No | All proposed structure dimensions | new doublewide 28'x56' | What are the proposed structures | Manufactured Home |
| If other Addition/Structure, please explain | | Maximum Number of Bedrooms | 3 | Number of Occupants | 4 |
| Foundation Type | Crawl Space Foundation | Residential/Business/Other | Residential | Number of Employees | 0 |
| Total number of seats | 0 | Water Supply | Other Public Water | Desired Septic System Type | Conventional (most common) |
| If other septic system type, please explain | | If existing, Year existing system installed | 1989 | Front Setback | 35 |
| Back Setback | 35 | Left Setback | 15 | Right Setback | 15 |
| Zoning Permit Issued Date | May 11 2023 12:00AM | Zoning Permit Expiration Date | Nov 7 2023 12:00AM | Is the structure or development in the floodplain | No |
| Is the property located downtown? | No | Is the property in a local historic district? | No | Additional Unique Setbacks Apply | Yes |
| Zoning Notes/Addendums | 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 more than | | 20 degrees from parallel to the front property line. Original mobile home must be removed before Certificate of Occupancy can be approved. | Watershed | NOT IN A WATERSHED |

# PERMIT SNAPSHOT REPORT (OSWP-2023-23363)

| Attachment File Name | Added On | Added By | Attachment Group | Notes |
|---|---|---|---|---|
| Signature_JEREMY_L_4/26/2023.jpg | 04/26/2023 14:43 | PLYLER, JEREMY L | | Uploaded via CSS |
| Scan Apr 26, 2023 (1)_v1.pdf | 04/28/2023 8:34 | Nebel, Barbara | Available Online | Authorize to Act as Agent |
| Scan Apr 26, 2023_v1.pdf | 04/28/2023 11:47 | Sloan, Chrystal | Available Online | Site Plan |

| Invoice No. | Fee | Fee Amount | Amount Paid |
|---|---|---|---|
| INV-00013143 | Iredell Zoning Tech Fee | $2.25 | $2.25 |
| | New Gravity System | $500.00 | $500.00 |
| | Iredell Zoning Permit Fee | $75.00 | $75.00 |
| | Total for Invoice INV-00013143 | $577.25 | $577.25 |
| | **Grand Total for Permit** | **$577.25** | **$577.25** |

| Workflow Step / Action Name | Action Type | Start Date | End Date |
|---|---|---|---|
| **Application Completeness Check v.1** | | 04/28/2023 8:34 | 04/28/2023 8:35 |
| Confirm application complete v.1 | Generic Action | | 04/28/2023 8:35 |
| **Fees v.1** | | 04/28/2023 12:17 | 05/11/2023 7:58 |
| Issue Invoice v.1 | Generic Action | | 04/28/2023 12:18 |
| Fees Paid v.1 | Generic Action | | 05/11/2023 7:58 |
| **Zoning Review v.1** | | 04/28/2023 8:34 | 05/11/2023 8:45 |
| ~~Floodplain Admin Overview v.1~~ | Task | | 04/28/2023 12:11 |
| Iredell County Zoning Approval v.1 | Task | 04/28/2023 8:34 | 05/11/2023 8:45 |
| Issue Invoice v.1 | Generic Action | | 04/28/2023 12:27 |
| Fees Paid v.1 | Generic Action | | 05/11/2023 8:44 |
| Lot Readiness Verification v.1 | | | |
| OSWP Septic Preliminary Site Visit v.1 | Inspection | | |
| OSWP Site Evaluation v.1 | Inspection | | |
| Issue Improvement Permit v.1 | | | |
| Issue Invoice v.1 | Generic Action | | |
| Fees Paid v.1 | Generic Action | | |
| Issue Permit v.1 | Generic Action | | |
| Permit Completion Process v.1 | | | |
| Authorization to Construct Permit v.1 | Create Sub Permit | | |
| Issue Authorization to Construct v.1 | Generic Action | | |


UTIL.
KITCHEN
OPT. D/W
DINING
8'-8" x 12'-7"
BEDROOM 2
9'-7" x 12'-7"
M-BATH
ISLAND 24
60
W/H
SHELF
MASTER BEDROOM
17'-7" x 12'-7"
LIVING ROOM
23'-10" x 12'-7"
BEDROOM 3
9'-9" x 12'-7"

241