88

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 231088

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

PIN # 4765-33-9319

APPLICANT/OWNER: R+L Construction LLC (Randy) APPLICANT ADDRESS: P.O. Box 6658 Statesville, NC

SITE ADDRESS: 110 Vance Po Rd Statesville, NC 28625 PHONE: 704-880-8219 ALT. PHONE

SITE DIRECTIONS: Mocksville Highway East from Statesville → R on Vance Po Rd → Lot on Right

SUBDIVISION: — SECTION: — LOT # — LOT AREA:

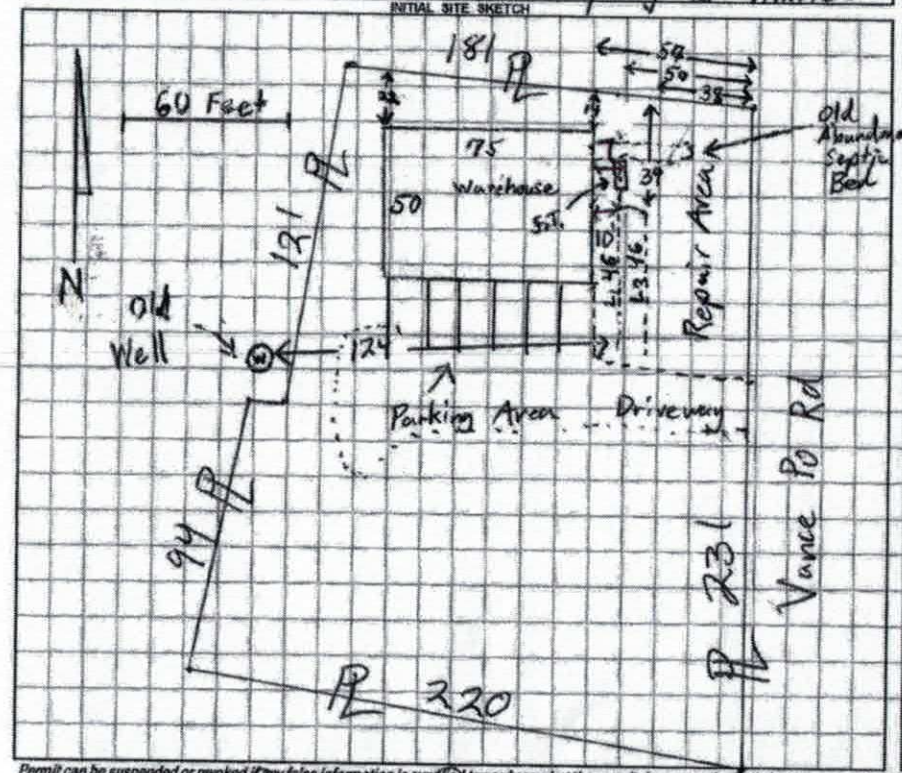
SAP CONTROLLED: ☐ YES ☒ NO

DESIGN FLOW: 100 GPD L.T.A.R.: 0.30

Septic Tank	1000	(gal)	STB	1012	Date	2-13-18	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI			☐ Residence	No. Bedrooms			Water Supply						
Pump Tank	—	(gal)	PT	—	Date	—	System Description: 25% Reduction						☒ Business	No. Persons	1 (one)		☐ Private						
Pump Make	—	Model		—	Serial #	—	Repair System Description: 25% Reduction						☐ Other	No. Employees			☐ Public						
# Nitrification Fields	1	# Lines		2	Linear Ft	84	Maintenance Agreement Required:		☐ YES	☒ NO			☒ Slab	☐ Crawl Space			☐ Community						
Trench Width	36"	Trench Bottom Depth(Low side)		35"	Gravel Depth	—			☒ GRAVITY	☐ PRESSURE			☐ Basement w/plumbing				☐ Basement w/o plumbing						

Comments / Conditions: Though 92' of line was laid out only 84' need be installed. No manufacturing shall occur at site and future occupancy is limited to 4 total employees. Recommend pumping septic tank every 3-5 years.

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed as shown.

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: [signature] Date: —

IMPROVEMENT PERMIT by: Tom Shuck Date: 1/12/2018

AUTHORIZATION TO CONSTRUCT by: Tom Shuck Date: 1/12/2018

Installed by: Steve Jordan

OPERATION PERMIT by: Kayla Wilson Date: 9-11-18

Existing System Inspected by: — Date: —

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 inspection time.

DHHS

ON-SITE WASTEWATER SECTION

Warehouse

D ②

④ ③

Sheet ___ of ___

PROPERTY ID #: ___

COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

L1 Red 46'
L2 White 46'

OWNER: R+L Constructors LLC APPLICATION DATE 12-26-17

ADDRESS: PO Box 6658 Statesville, NC DATE EVALUATED: 1-8-2018

PROPOSED FACILITY: Warehouse PROPOSED DESIGN FLOW (.1949): 100 GPD (1 employee) PROPERTY SIZE: 0.96

LOCATION OF SITE: 110 Vance Po Rd Statesville 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	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	1% Summit Primary Distal	0-7	SCL compacted v.w. SBK	Firm, SS, Sp, Sep	Frosty!	61"	–	–	0.30 PS
		7-28	Clay w-m ABK/SBK	SI. Firm, sticky, Sp, Sep					
		28-61	Clay Loam w. SBK some SAP from 30"-44"	SI. Friable, SS, Sp, Sep					
				Keep 30"+" TB					
	1% Summit Primary Tank	0-9	SCL compact v.w. SBK	Firm, SS, Sp, Sep	Frost	62"	–	–	0.30 PS
		9-33	Clay w-m SBK/ABK	SI. Firm, Sticky, Sp, Sep					
		33-62	Clay Loam w. SBK some SAP 38"-45" + 50-62" (rounded pebbles)	SI. Friable, SS, Sp, Sep					
	2% Summit Repair-North	0-9	SCL v.w. SBK	Firm, SS, Sp, Sep	Frost	61	–	–	0.275 PS
		9-30	Clay w-m SBK/ABK	SI. Firm, sticky, Sp, Sep					
		30-61	Clay Loam w. SBK some Saprolite 47"-56" some Mngnese mixed in	SI. Friable, SS, Sp, Sep					
	2% Summit Repair Distal	0-7	SCL v.w. SBK	Firm, SS, Sp, Sep	Frost	61	–	–	0.30 PS
		7-30	Clay w-m ABK/SBK	SI. Firm sticky, Sp, Sep					
		30-61	Clay Loam w. SBK common Saprolite 54"-60"	SI. Friable, SS, Sp, Sep					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	92'	100+
System Type(s)	25%	25%
Site LTAR	0.30	0.275

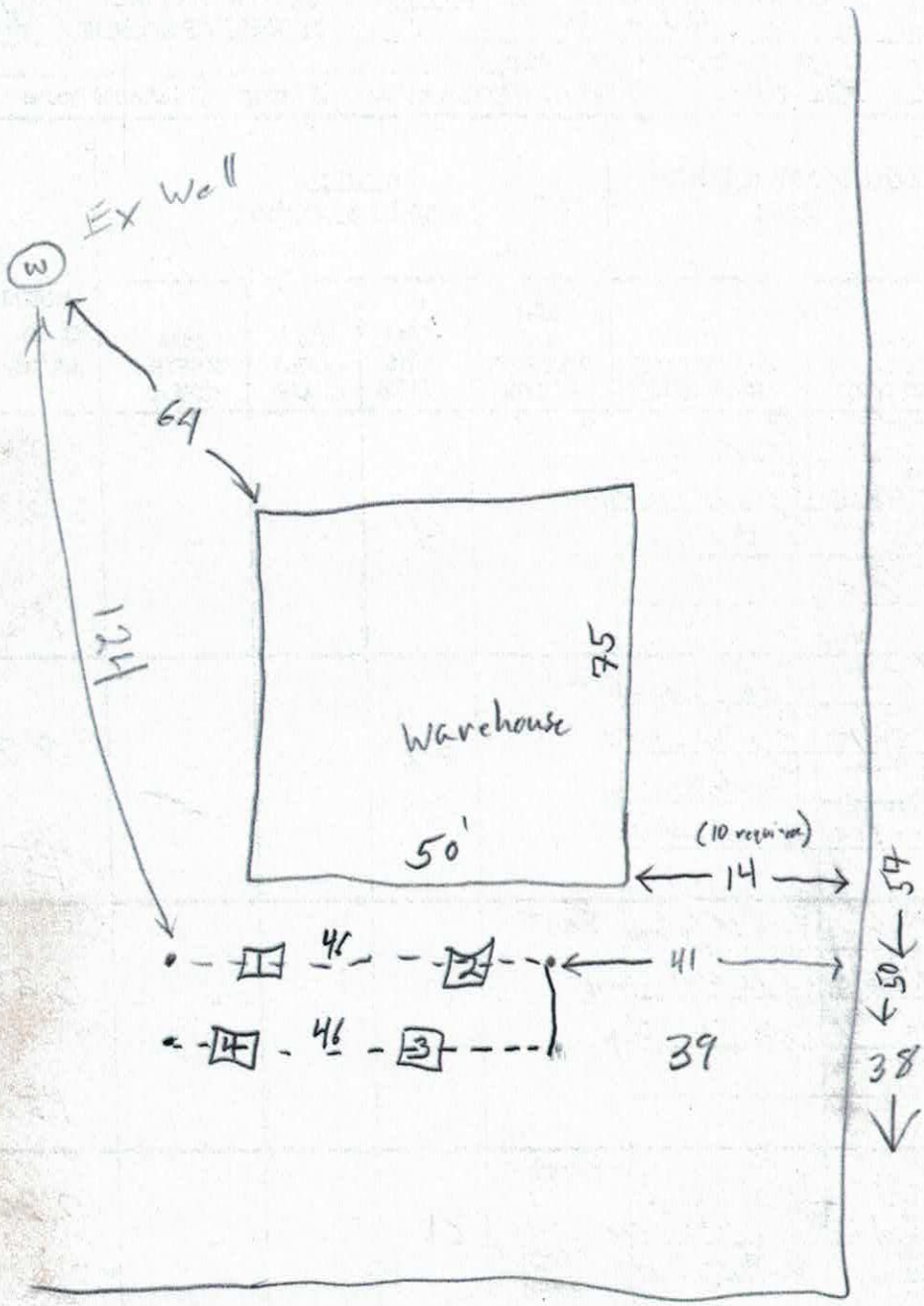
OTHER FACTORS (.1946): ___

SITE CLASSIFICATION (.1948): PS

EVALUATED BY: Tom Shuck

OTHER(S) PRESENT: ___

COMMENTS: ___


W
Ex Well
64
121
75
Warehouse
50'
(10 required)
14
54
41
46
46
41
50
39
38

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

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() 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: R+L Constructors LLC Address: PO Box 6055 Statesville NC Zip: 28687
Applicant Email: (Randy) Phone: 704 880 8219 Alt. Phone:
Owner Name: Same Address: Zip:
Owner Email: Phone: Alt. Phone:

Property Information:

Street Address: 110 Vance PO Rd Statesville NC 28625
Subdivision Name: Section/Phase: Lot Number:
Driving Directions: East Broad St to Mocksville Hwy turn Rt 1/4 mile turn Rt on Vance PO Property on Rt

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

CHECK FOUNDATION TYPE

( ) New Single Family Residence — Maximum Number of Bedrooms: — ( ) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: — (✓) Concrete Slab Foundation
( ) Accessory Building — ( ) Swimming Pool — ( ) Basement with Plumbing
( ) Bedroom(s) Addition — ( ) Other Addition/Structure: — ( ) Basement without Plumbing
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem:
Non-Residential Site Development: Type of Business: Warehouse
Square Footage of Building: 3750 Max. Number of Employees: 1 Max. Number of Seats/Beds/Other:

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: [signature] 12-26-2017
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

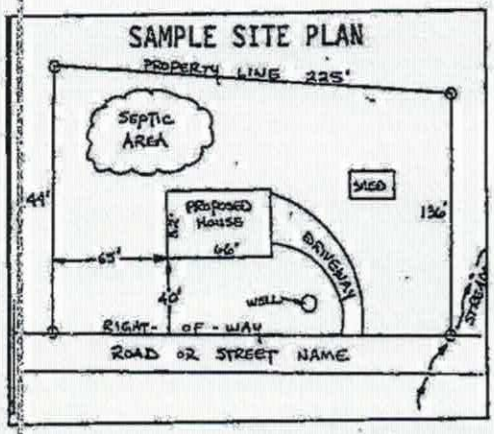
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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 OR WELL 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
- (✓) Preferred well location
- (✓) Preferred septic system location
- (✓) 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

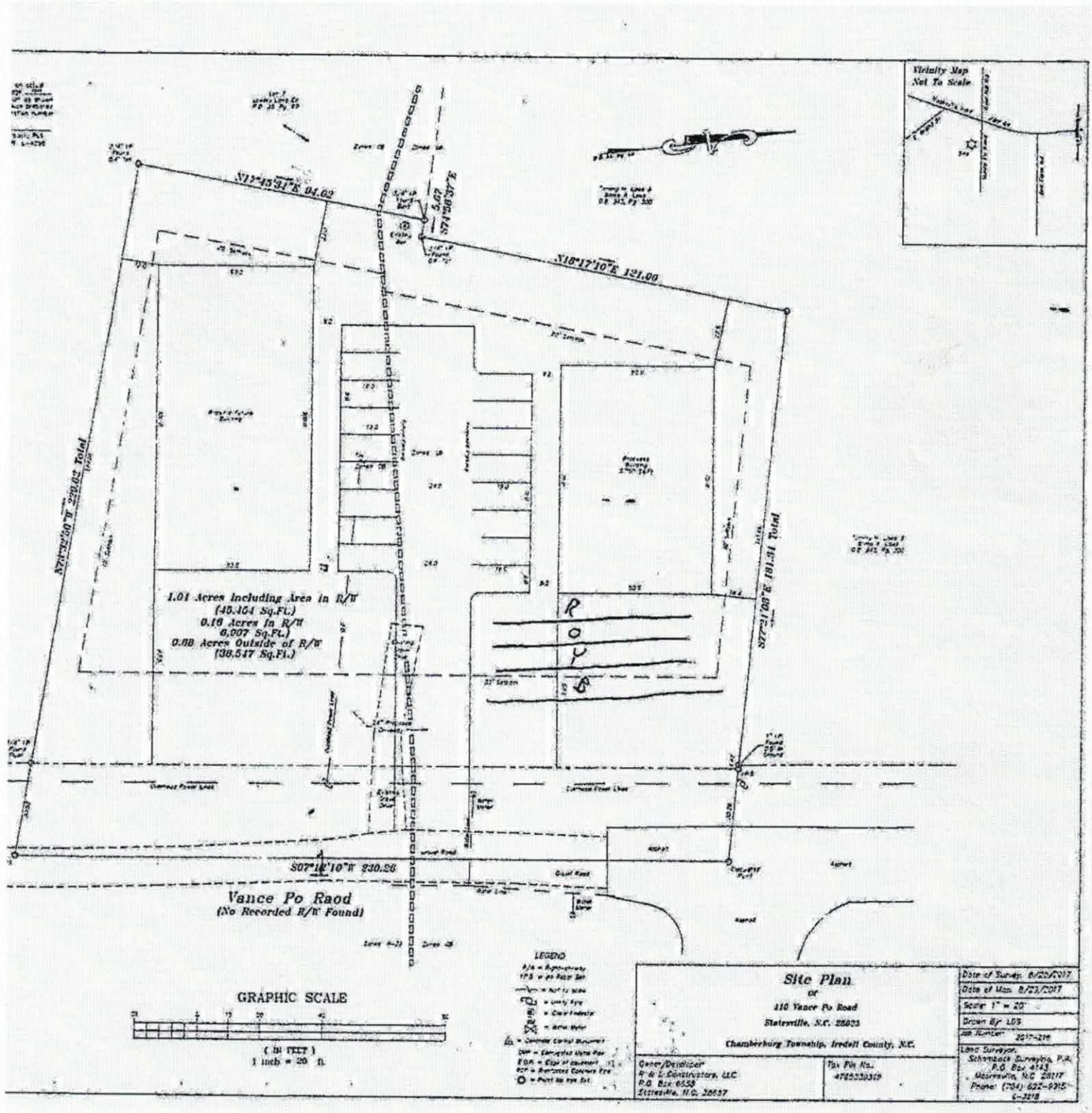
USE THIS SPACE TO DRAW YOUR SITE PLAN

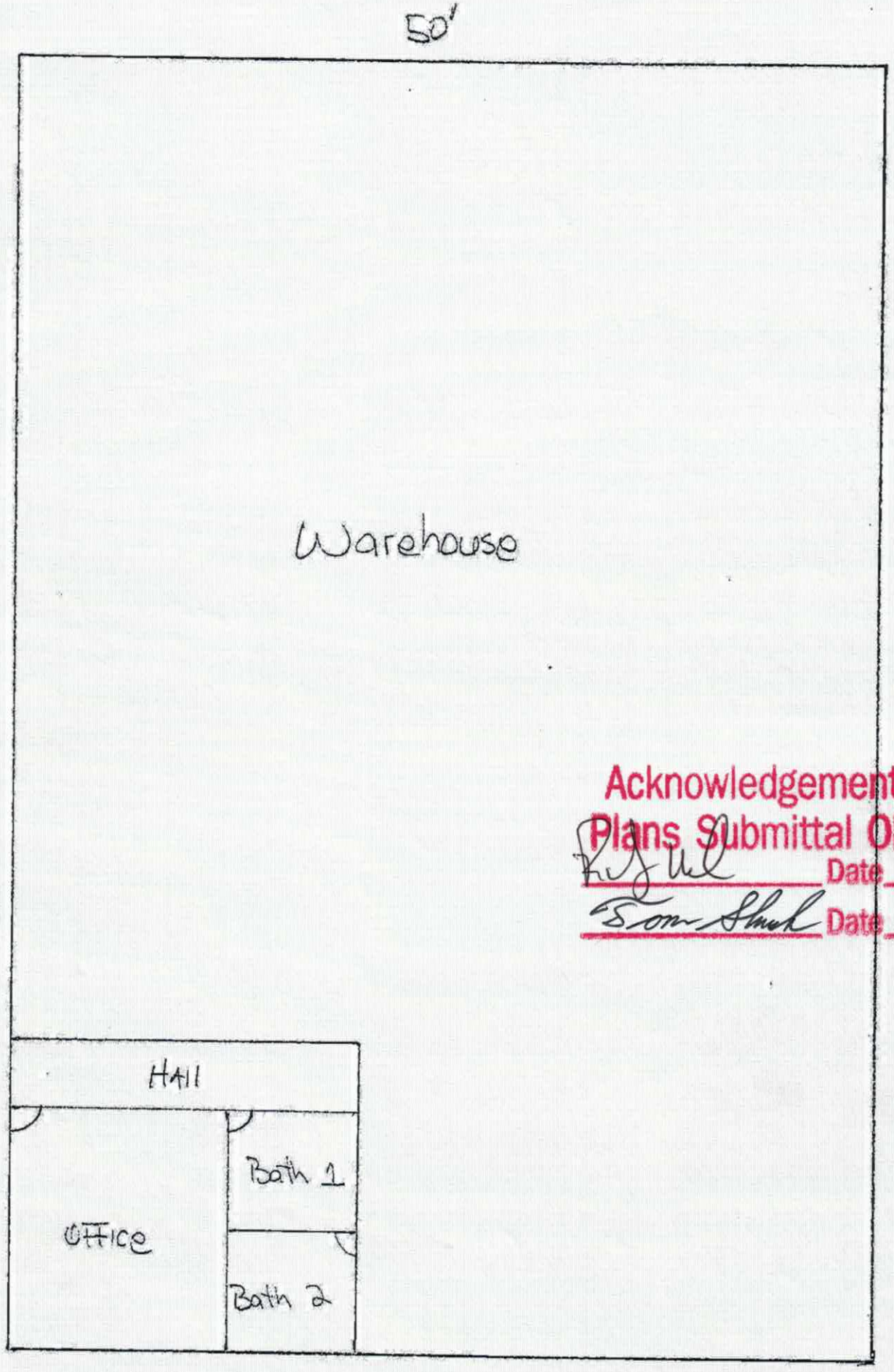
Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site

See Attached

Signature: _____ 12-26-2017

Property owner or owner's legal representative signature (SIGNATURE REQUIRED) — DATE


Vicinity Map
Not To Scale
N13°45'31"E 94.62
S74°56'37"E 5.62
N16°17'10"E 121.00
N77°50'0"W 229.62 Total
S27°08'31"E 181.31 Total
1.01 Acres Including Area in R/W
(45,464 Sq.Ft.)
0.16 Acres in R/W
6,907 Sq.Ft.)
0.88 Acres Outside of R/W
(38,547 Sq.Ft.)
ROYB
S07°12'10"W 230.26
Vance Po Raod
(No Recorded R/W Found)
GRAPHIC SCALE
(IN FEET)
1 inch = 20 ft.
LEGEND
Site Plan
of
110 Vance Po Road
Statesville, N.C. 28625
Chamberburg Township, Iredell County, N.C.
Date of Survey: 8/20/2017
Date of Map: 8/23/2017
Scale: 1" = 20'
Drawn By: LDS
Job Number: 2017-216
Land Surveyor:
Schumacher Surveying, P.A.
P.O. Box 4143
Mooresville, N.C. 28117
Phone: (704) 662-9915
C-3218
Owner/Developer
R & L Constructors, LLC
P.O. Box 6558
Statesville, N.C. 28687
Tax Pin No.
4765530319


50'
Warehouse
75'
Acknowledgement Of
Plans Submittal ONLY!
Date
Date 1/12/2018
HALL
Bath 1
OFFICE
Bath 2
Front

IREDELL COUNTY

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

APPLICATION NUMBER
231088
Issue Date: 12/19/2017

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4765339319.000	110 VANCE PO ROAD, STATESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: R & L CONTRACTORS LLC	Applicant: R & L CONTRACTORS LLC
Address: PO BOX 6658 STATESVILLE, NC 28687	Address: PO BOX 6658 STATESVILLE, NC 28687
Phone:	Phone:

Use Requested	Zone Code
R & L CONTRACTORS BUILDING	GB

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.960	30.00	20.00	10.00	10.00	NOT	X

Remarks:

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	123845	TOTAL FEES:	$ 177.25