IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 245226.

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

PIN # 4765815521

APPLICANT/OWNER: WCH Inc APPLICANT ADDRESS: 2143 Mocksville Hwy Statesville NC 28625

SITE ADDRESS: 112 Lonehart Lane Statesville, NC 28625 PHONE: 704 902 2312 ALT. PHONE 704 902 2312

SITE DIRECTIONS: Hwy 64 East Past Cool Springs VFD Right on Lone Pine @ on Lone Heart Lot on R SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Lone Pine Meadows SECTION: 3 LOT # 28 LOT AREA: .581 Acres DESIGN FLOW: 360 L.T.A.R.: .275

Septic Tank 1000 (gal) STB 160 Date 11-25-19

Pump Tank – (gal) PT – Date –

Pump Make – Model – Serial # –

Nitrification Fields 1 # Lines 4 Linear Ft 328.

Trench Width 36. Trench Bottom Depth (low side) 36 max Gravel Depth –

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

System Description: Gravity 25% Reduction

Repair System Description: Pressure Manifold 25% Red Max 16 in

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:

INITIAL SITE SKETCH

See attached Proposed Septic Design by Soil & Forestry Services of the Carolinas, P.A. Ashley Rollens, NC Licensed Soil Scientist #1231 approved 6/14/19.

AS BUILT SKETCH

SEE ATTACHED

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**

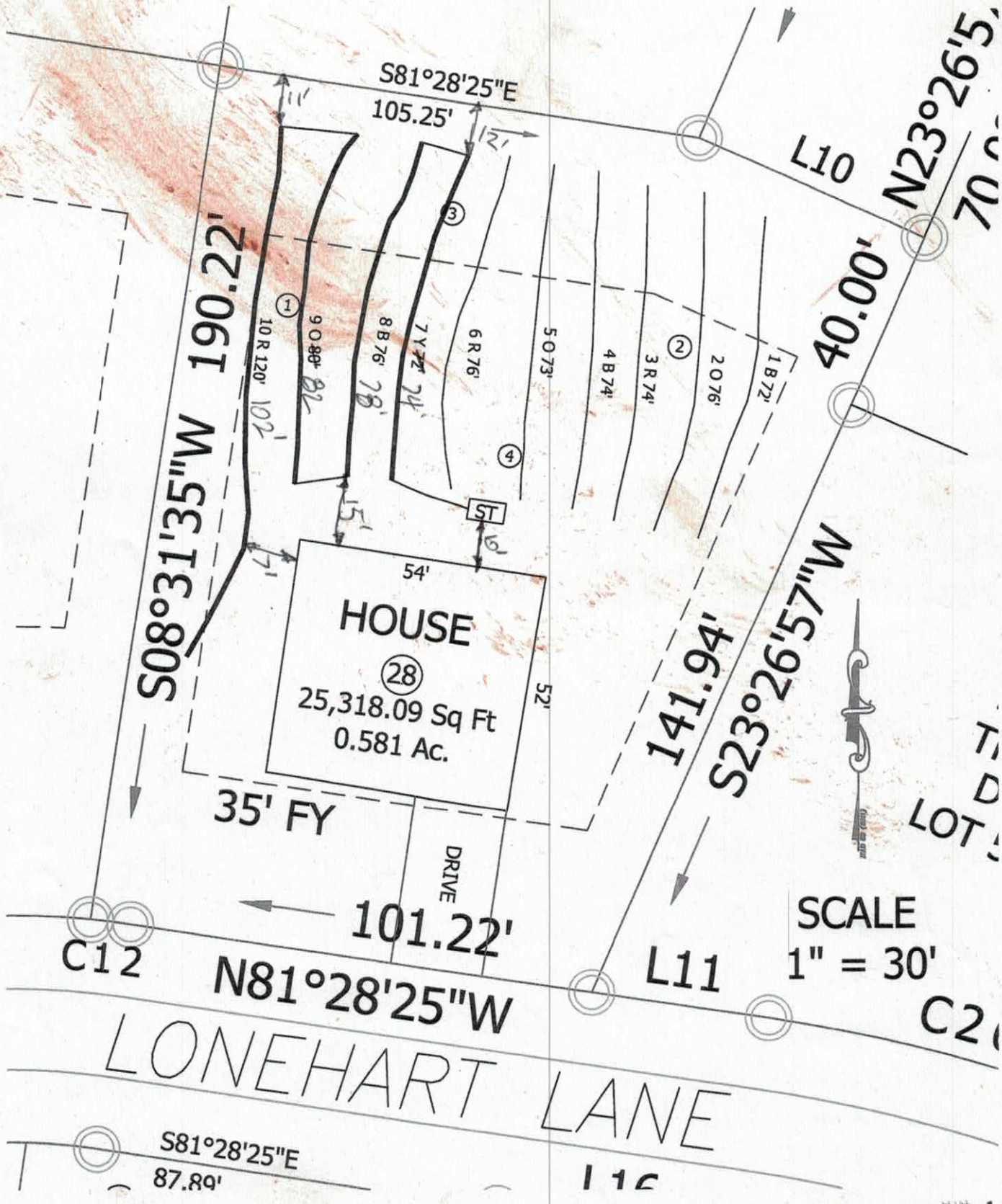
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Bruce Pott Date: 7-1-19 Installed by: COTHREN POOL

IMPROVEMENT PERMIT by: Benjamin A. Bolkin Date: 6/14/19 OPERATION PERMIT by: Bryant C. White Date: 3-19-2020

AUTHORIZATION TO CONSTRUCT by: Benjamin A. Bolkin Date: 7/1/19 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 inpsector to confirm your inspection time.



APPROVED JUN 14 2019

Soil & Forestry Services of the Carolinas, PA.

P.O. Box 832 Mooresville, NC 28115 Phone: (704) 658-1723 Fax: (704) 278-0989

Ashley Rollans, NC Licensed Soil Scientist
Mobile: (704) 746-5046
Email: rollans.ashley@yahoo.com

Attached is a proposed design for an Accepted Septic System with gravity dist. for a 3 bedroom single family residence on Lot 28, Lone Pine Meadows Subdivision, Statesville (PIN 4765815152), Iredell County, North Carolina.

Contents: **Page**

Information for the Installer---------- 1

Design Information
- Design Specifications---------- 2-3
- Layout Specifications---------- 4

Site Plan/System Plan---------- 5

Calculations---------- 6

Profile Descriptions---------- 7

Expedited Review Process Checklist---------- 8

Zoning Permit & Receipt---------- 9-11

Application---------- 12-13

Green Sheet---------- 14

Agent Authorization Form---------- 15

5/29/19

May 29, 2019
Project #: 18-0081
Design By: Soil & Forestry Services of the Carolinas, PA.

APPROVED JUN 14 2019

INFORMATION FOR THE INSTALLER:

The permit should be read very carefully prior to bidding. The following are details that must be considered along with all other considerations.

- Tanks shall be approved by NC DHHS, and certification supplied by the manufacturer.
- Tanks shall be water tested prior to installation.
- The installer shall be responsible to the owner for placement of the tanks and to insure that final grades are returned to the original natural grade, with exception of added structural features.
- The supply trench shall be compacted to eliminate cavities left during initial fill placement.
- Installation of the system shall be during dry conditions in order to protect the soil structure.
- All fittings shall be pressure rated fittings.
- All joints shall be cleaned with PVC pipe cleaner and a heavy bodied glue applied to weld all joints.
- Where required by the county health department, post installation inspections by the designer must be scheduled 5 week days in advance.
- Trenches shall be carefully excavated so the bottom is within 2" from the highest to . the lowest points of elevation within the trench. If the bottom elevation needs adjusting after it has been trenched, it will be done by removing high points rather than filling low points. It is extremely important to insure that trenches are not over excavated during initial trenching. All fine grading within the trench will be hand done with a shovel. No loose material will be left in the trench
- All pipe openings in the tanks shall be properly grouted. This also applies to the joints around the riser.
- All tanks shall be properly back filled and compacted to prevent slump at a later date.
- Earth dams, constructed of relatively impervious material, shall be installed at the beginning and end of each lateral.
- No heavy equipment shall be used on the field during or after installation. The use of a small loader (i.e. Bobcat) or a trencher (i.e. Ditch Witch 2300/2310) may be used for installation.
- Elevations at pinflag locations should be checked by the installer prior to beginning trenches.
- Septic tank riser shall be a minimum of 6" above finished grade.
- System is specified as a gravity 25% reduction (Accepted) installation.
- Repair is specified as a gravity 25% reduction (Accepted) installation.
- **Install top of Tank below elevation of any foundation drains**

APPROVED JUN 14 2019

GRAVITY ACCEPTED SYSTEM FOR WASTEWATER TREATMENT

Applicant:	W.C.U. Inc
Address:	2143 Mocksville Highway Statesville, NC 28625
Phone:	704.902.3124
County:	Iredell
Location:	112 Lonehart Lane Statesville, NC 28625
Source of Wastewater Flow:	3 Bedroom Single Family Residence
Estimated Gallons Per Day Flow:	360
System Flow:	N/A

Design Specifications

Drainfield Size:	348	
Loading Rate (gpd/ft.^{2}):	0.275	
Depth of Gravel in Trench:	N/A	
Gravel Size:	N/A	
Max.Trench Depth:	36 in.	Repair Trench Bottom 16 in.
Trench Width:	36 in.	Requires 4-6" group III cover
Septic Tank Size:	1000	
Estimated Supply Line Length:	30	
Supply Line Diameter:	4 in. SCH 40 PVC	
Supply Line Volume:	19.59	
Dosing Volume:	N/A	
Supply Manifold:	N/A	
Supply Manifold Length:	N/A	
Supply Manifold Volume:	N/A	
Recommended Float Controls:	N/A	
Recommended Control Panel:	N/A	
Pressure Head:	N/A	
Friction Head:	N/A	
Elevation Head:	N/A	
Total Dynamic Head:	N/A	
Threaded Union:	N/A	
Gate Valves:	N/A	
Check Valves:	N/A	
Anti-Siphon Hole:	N/A	
Additional Comments:	Soil suitability was performed by Soil & Forestry Services of the Carolinas, PA.	

APPROVED JUN 19 2019

112 Lonehart Lane

ACCEPTED SYSTEM

DESIGN FLOW (gpd):	360
SOIL APPLICATION RATE (gpd/ft.^{2}):	0.275
TOTAL AREA TRENCH BOTTOM:	1044
TOTAL LATERAL LENGTH:	348
NUMBER OF FIELDS:	1
LATERAL LENGTH REQUIRED PER FIELD:	327.2727273
SUPPLY LINE LENGTH:	30
TOTAL DYNAMIC HEAD:	N/A
MANIFOLD SIZE:	N/A
DOSING VOLUME:	N/A
PUMP TANK DRAW DOWN*:	N/A
SEPTIC TANK SIZE:	1000

APPROVED JUN 1 [illegible] 201

Layout Specifications - Lone Pine Meadows Lot 28

Project #: 18-0081

LAYOUT FOR 3 BEDROOM HOME

May 29, 2019

LINE #	FLAG COLOR	BS	HI	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM							
INSTR. 1							
1	BLUE					72	72
2	ORANGE					76	76
3	RED					74	74
4	BLUE					74	74
5	ORANGE					73	73
6	RED					76	76
7	***YELLOW***					*74*	*72*
8	***BLUE***					*76*	*76*
9	***ORANGE***					*80*	*80*
10	***RED***					*120*	*120*
					Total	795	793

	LINE LENGTH	LTAR GPD/FT2	SYSTEM TYPE	SOIL LTAR GPD/FT2	TRENCH SYSTEM	DISTRIBUTION
** System*	*348*	*0.275*	*ACCEPT.*	*0.275*	*25% RED*	*GRAVITY*
Repair	445	0.275	ACCEPT. At Grade	0.275	25% RED	PRESSURE MANIFOLD

Notes: **All measures in feet

**Nitrification lines are demonstrated on contour via colored pin flags

****HOUSES STAKED BY LICENSED SURVEYOR.**

APPROVED JUN 19 2019

CALCULATIONS

Location 112 Lonehart Lane
Statesville, NC 28625
Project Number 18-0081

Lot No: 28 Lone Pine Meadows

No. of Bedrooms 3

Design Flow 360 $^{gal}/_{day}$

LTAR 0.275 $^{gal}/_{ft^2\,day}$

PPBPS? (YES OR NO) NO

Supply Line Length 30 ft.

Supply Line Volume 19.59 gal.

Required Feet of Line 327.2727 ft.
Amount of Line from Layout 348 ft.

Gallons per Minute N/A $^{gal}/_{min}$

Required Septic Tank Capacity 1000 gal.
Septic Tank Size 1000 gal.

Panel Volume N/A gal.
# of Panels N/A
Dosing Volume N/A gal.

Tank Draw Down N/A

Pump Run Time

Elevation Head N/A ft.
Pressure Head N/A ft.
Friction Factor N/A ft./100 ft. *(From the interpolater.)*
Friction Head N/A ft.

Total Dynamic Head (+15%) N/A ft.

FRICTION FACTOR
INTERPOLATER
2" SCH 40 PVC

GPM	*f*
20	0.84
	-0.88
25	1.27
	-1.28
30	1.78
	-1.76
35	2.37
	-2.25
40	3.03
43.07	3.48
45	3.77
48.14	4.28
50	4.58
57.11	5.89
60	6.42

APPROVED JUN 14 2019

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

Sheet 1 of 1
PROPERTY ID #: 4765815152
COUNTY: Iredell

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

OWNER: WCU Inc.
ADDRESS: 2143 Mocksville Hwy Statesville NC 28625
PROPOSED FACILITY: BAR
LOCATION OF SITE: 112 Longhart Lane Statesville NC 28625
APPLICATION DATE
DATE EVALUATED: 5/24/19
PROPOSED DESIGN FLOW (.1949): 360gpd
PROPERTY SIZE: ± 0.581ac
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
B 1	L/6%	0-10	Bsl gr	FrSSSPSExP	f-c[Fe]depl. (16-28) fsap/illu	48	–	–	PS 0.275
		10-48	RcwmsbkMk	FSSSPSExP					
B 2	L/3%	0-7	Bsl gr	FrSSSPSExP	f-c[Fe]depl. (29-31) fsap	48	–	–	PS 0.275
		7-44	RcwmsbkMk	FSSSPSExP					
		44-48	RclwmsbkMk	FrSSSPSExP					
B 3	L/6%	0-5	Bsl gr	FrSSSPSExP	f-c[Fe]depl (22-34) fsap	48	–	–	PS 0.275
		5-12	RBscl wfsbk	" " " "					
		12-48	RcwmsbkMk	FSSSPSExP					
B 4	L/3%	0-8	Bsl gr	FrSSSPSExP	f[Fe]depl (20-28) fsap	48	–	chroma 10YR 6/2 @ 28 inches	PS 0.275 -Shallow 16 in max B. Bottins ICHD.
		8-48	BRcwmsbkMk	FSSSPSExP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	Accepted	Accepted
Site LTAR	0.275	0.275

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: S Ashley Rollins
OTHER(S) PRESENT:
B. Bottins 6/5/19 ICHD.

COMMENTS:

APPROVED JUN 14 2019

Updated February 2014

RECEIVED MAY 3 1 2019

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

Paid $350.00

PAGE 1: *APPLICATION FORM* # 245226

Application For:

(X) Septic Improvement Permit ( ) New Well Permit (X) Authorization to Construct ( ) Well Repair Permit ( ) Existing System Inspection ( ) Well Abandonmen ( ) Septic System Repa

THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SI IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTE APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAIL

Page 2: *Site Plan Worksheet* form MUST accompany this application

The following optional attachments may also be submitted:

Place an (X) beside whichever is submitted if applicable

( ) Survey Plat, scaled no more than 1 inch = 60 feet

(X) Custom Site Plan, scaled no more than 1 inch = 60 fee

Applicant Information:

Applicant Name: WCU Inc **Address:** 2143 Mocksville Hwy Statesville NC 28625 **Phone:** 7049023

Owner Name: WCU Inc **Address:** 2143 Mocksville Hwy Statesville NC 28625 **Phone:** 7049023

Property Information: 112 [redacted] Lane 4765815152

Street Address: [redacted] Lane Statesville, NC 28625

Subdivision Name: Lone Pine Meadows **Section/Phase:** 3 **Lot Number:** 28[redacted]

Driving Directions: Hwy 64 EAST PAST COOL SPRINGS VFD. Turn Right Lone Pine Rd. Turn right [redacted] Lonehart Lane. Lot on [redacted] Right

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

(X) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 3
Maximum Number of Occupants: 6
( ) Swimming Pool
( ) Other Addition/Structure:

(X) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

Non-Residential Site Development:

Type of Business:
Square Footage of Building:
Maximum Number of Employees:
Maximum Number of Seats/Beds/Other:

Water Supply:

( ) New Well ( ) Existing Well ( ) Community Well (X) City Water (X) 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 (X) Other: Accepted

Please answer the following to the best of your ability:

( ) Yes (X) No **Does the site contain any jurisdictional wetlands?**
( ) Yes (X) No **Is any non-domestic sewage (i.e. industrial) to be generated?**
( ) Yes (X) 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: [redacted]

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

[redacted] 5/29/19

DATE

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

Applications for permits require the "signature of the owner or owner's legal representative" (15A NCAC 18A .1937). If the owner does not sign the application himself or herself, they can submit any one of the following documents to designate their legal representative:

Power of Attorney; Real Estate Contract; Estate executor; Bankruptcy trustee; Court ordered guardianship

In the absence of the above documentation, the property owner may provide the local health department with documentation that designates a legal representative. A property owner may:

Complete this form to document his or her legal representative, or provide his or her own form that contains the information in this form.

If there are multiple property owners, then all property owners must sign the form that designates a legal representative.

By signing a form that designates a legal representative for purposes of 15A NCAC 18A .1937, the property owner authorizes that representative to act on their behalf in matters pertaining to the application and permitting process, including signing or receiving any application, document or permit. The owner retains full responsibility to meet all permit conditions specified by the local health department.

I, WCO INC / Bruce Porter, am the legal owner(s) of the property located at [redacted] Lane Statesville NC 28625, identified as PIN (Parcel Identification Number) [redacted] 47658 15152, located in Iredell County, North Carolina. 112 Lonehart Lane Pine Meadows [redacted] Lot 28

I do hereby authorize (print legal representative/company name) Samuel Ashley Rollans Rollans Soil Environmental Services, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

- Application for Improvement Permit (IP) / Authorization to Construct (AC)
- Improvement Permit (IP) / Authorization to Construct (AC)
- Application for soil-site evaluation (new/repair)
- Application/permit for private drinking water well/well abandonment
- Application for Compliance Inspection

I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

Bruce Porter 5-31-19

Signature of Owner(s) Date

Signature of Witness Date

Please return this signed form to the appropriate office:

Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

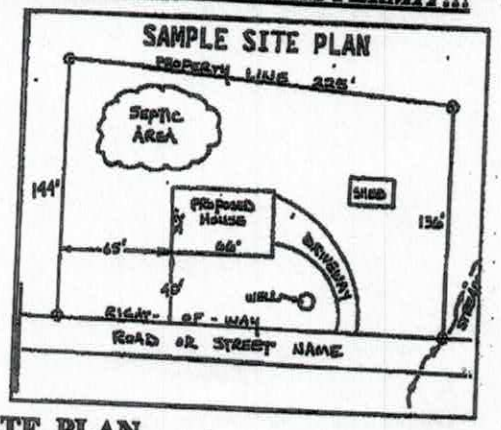
Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

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:

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

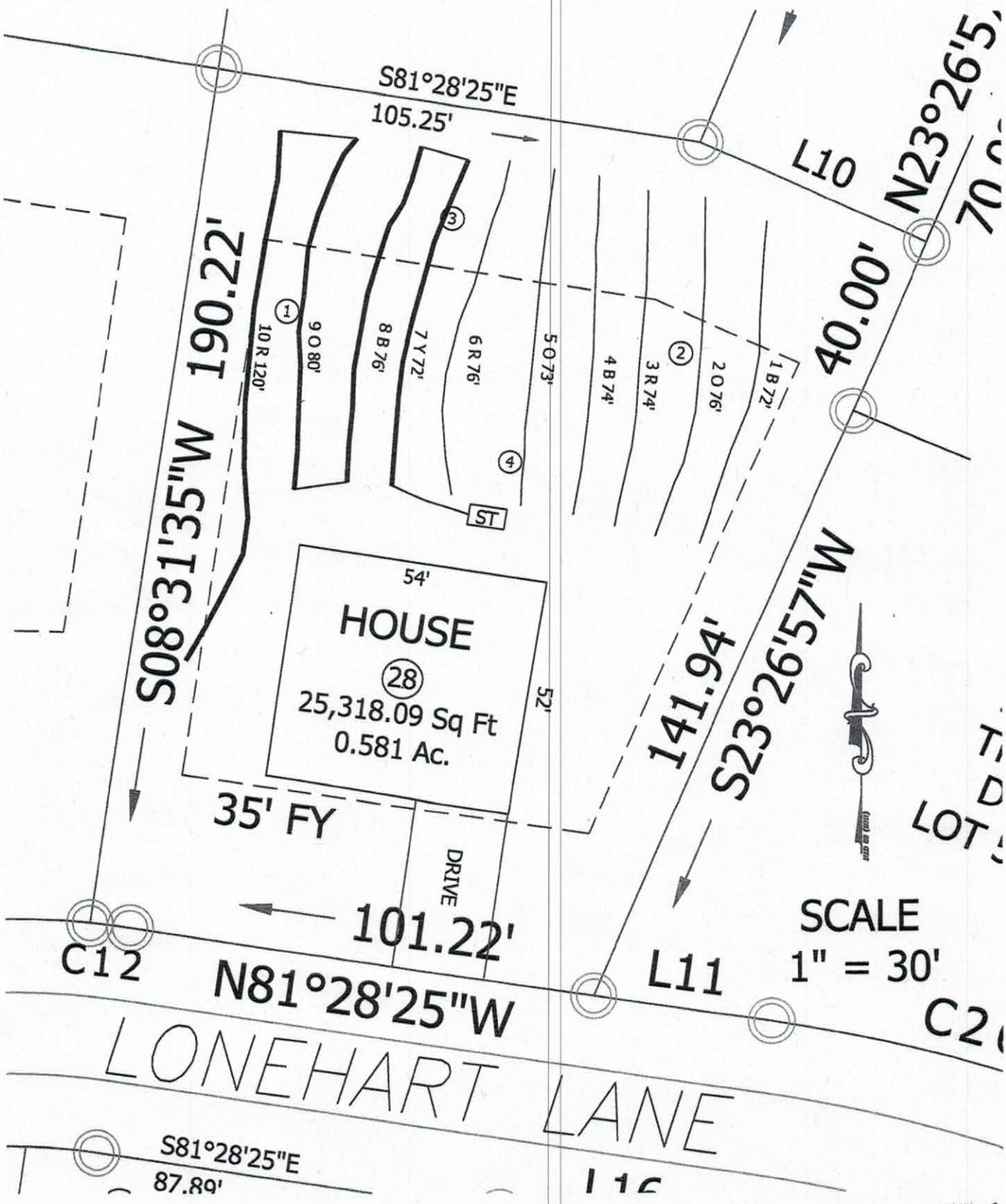
USE THIS SPACE TO DRAW YOUR SITE PLAN

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
Drawing

Signature: [signature] 5/29/19

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

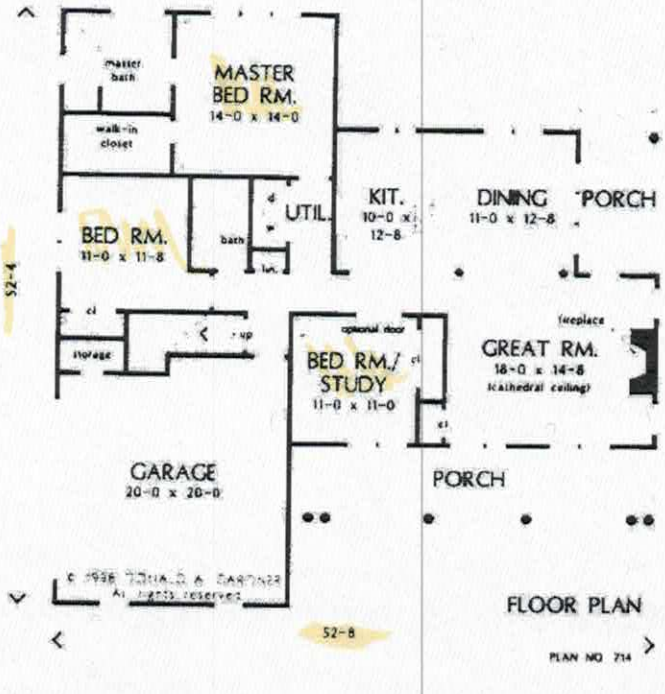


APPROVED JUN 14 2019

112 Lonehart

Floor Plans

FIRST

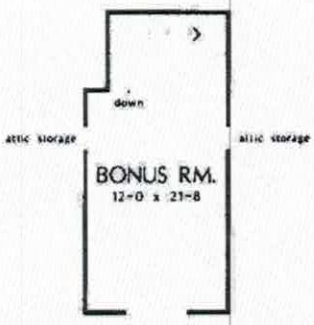


BONUS

Acknowledgement Of Plans Submittal ONLY!

Benjamin A Bell Date 7/1

Bruce Pond Date 7-3



BASEMENT STAIRS

Acknowledgement Of
Plans Submittal ONLY!
Benjamin A Bell Date 7/1
Date

IREDELL COUNTY

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

APPLICATION NUMBER
245226
Issue Date: 05/31/2019

Permit Type: IMPROVEMENT PERMIT APPLICATION

Parcel Number	Street Address	Jurisdiction
4765815152.000	112 LONEHART LANE	

Owner Information	Applicant Information	Contractor Information
Owner: WCU INC	Applicant: ROLLANS SOIL & ENVIRON	Contractor: WCU INC
Address: PO BOX 64	Address: 470 NORTH BROAD STREET SUITE D	Address: PO BOX 64
STEINHATCHEE, FL 32359	MOORESVILLE, NC 28115	STEINHATCHEE, FL 32359
Phone: 352-672-3132	Phone: 704-658-1723	Phone: 352-672-3132
		License Type: BLDG License Number: 50209

Project Description

NEW SINGLE FAMILY - IREDELL

Scope of Work

SFD

Permit Details:

EFT	IMPROVEMENT PERMIT FEE	Amount:	350.00
		Amount:	
		Amount:	
		Amount:	
		Amount:	
		Amount:	
		Amount:	

I hereby certify that all information in this application is correct and all work will comply with the state code and all other applicable state and local laws, ordinances and regulations. The respective department will be notified of any changes in the approved plans, a change of contractor, and/or specifications for the project permitted herein. This application becomes a permit only when validated and approved.

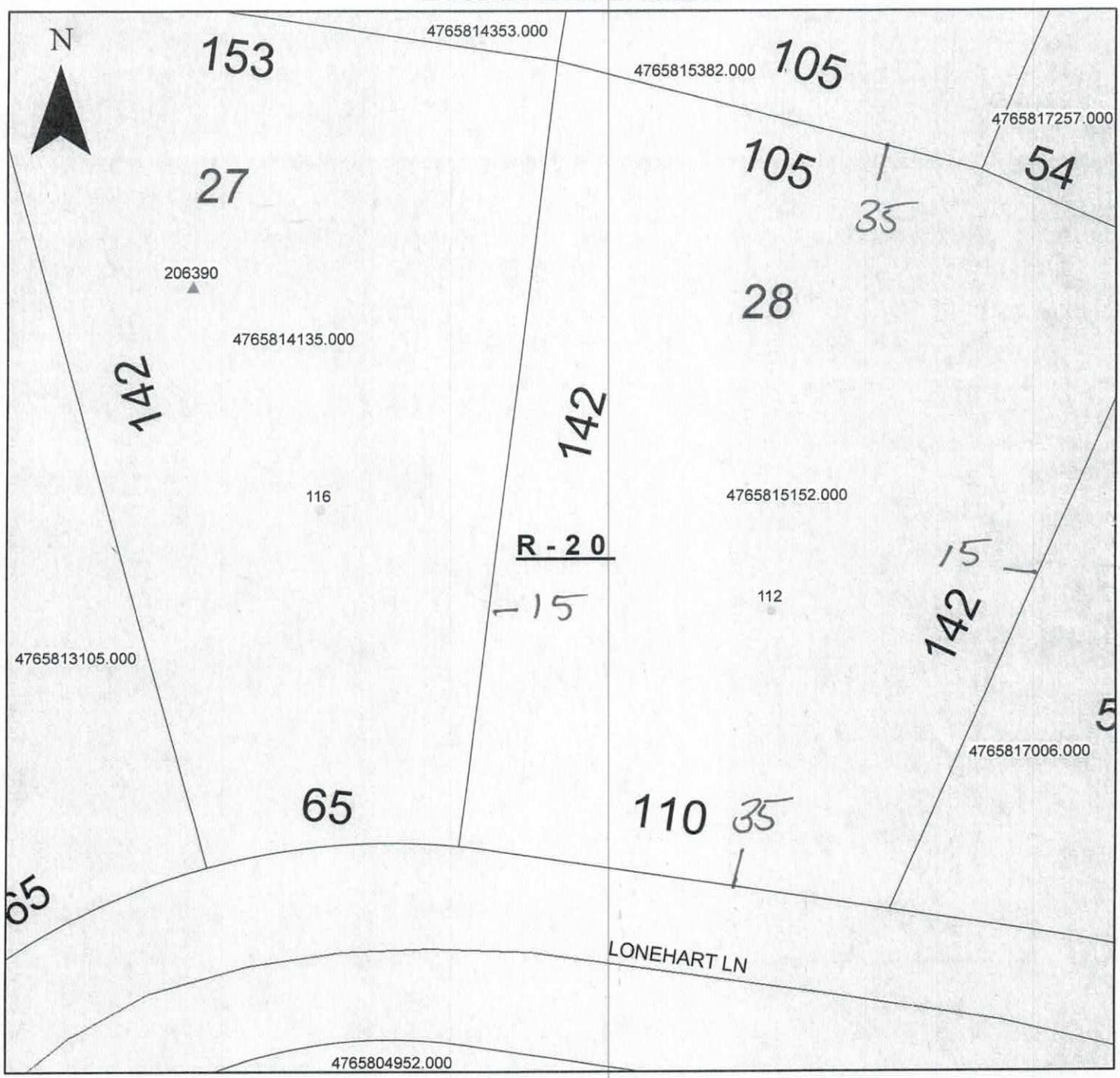
Signature of Owner/Contractor

Date: 05/31/2019

ANY PERMIT ISSUED EXPIRES SIX (6) MONTHS AFTER ISSUANCE IF NO INSPECTIONS HAVE BEEN MADE. ANY PERMIT ISSUED SHALL EXPIRE TWELVE (12) MONTHS AFTER LAST INSPECTION IF THE WORK IS DISCONTINUED.

Permit Number	179310	TOTAL FEES:	$ 350.00

ZONING DISCLAIMER



Property Address 112 Lonehart Ln

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. Applicant further acknowledges that the 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

5/31/19
Date