IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 209521

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

PIN # 4768-39-1375.000

APPLICANT: Larry Dean Love APPLICANT ADDRESS: 135 Church Lake Rd. Statesville NC

SITE ADDRESS: 2230 Turnersburg Hwy. Statesville NC PHONE: 704-651-0306 ALT. PHONE: —

SITE DIRECTIONS: Hwy 21 North, Site across from Post Office

SUBDIVISION: — SECTION: — LOT # — LOT AREA: 9.770 Acre DESIGN FLOW: 240 GPD L.T.A.R.: .3

Septic Tank 1000 (gal) STB Infiltrator Date Jun 060

Pump Tank 1000 (gal) PT Infiltrator Date Jun 060.

Pump Make Gould Model 1/2 horse Serial #

Nitrification Fields 1 # Lines 2 Linear Ft: 200'

Trench Width 36" Max. Trench Bottom Depth * 24" * Gravel Depth N/A

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

System Description: 25% Reduction - Pump

Repair System Description: Same

Maintenance Agreement Required: ☐ YES ☑ NO ☐ GRAVITY ☑ PRESSURE

☒ Residence ☐ Business ☐ Other ☐ Slab ☒ Basement w/plumbing

No. Bedrooms 2 No. Persons 4 No. Employees — ☐ Crawl Space

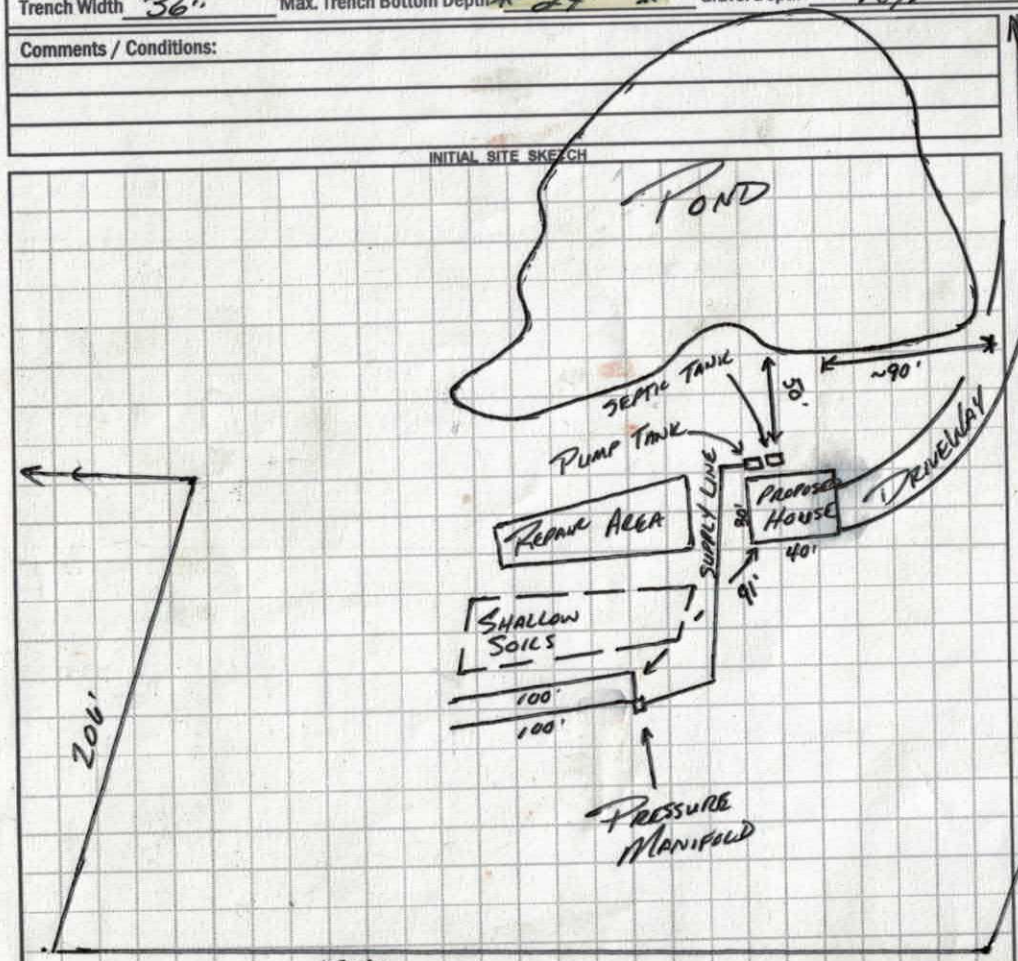
Water Supply: ☐ Private ☒ Public ☐ Community

☐ Basement w/o plumbing

Comments / Conditions:

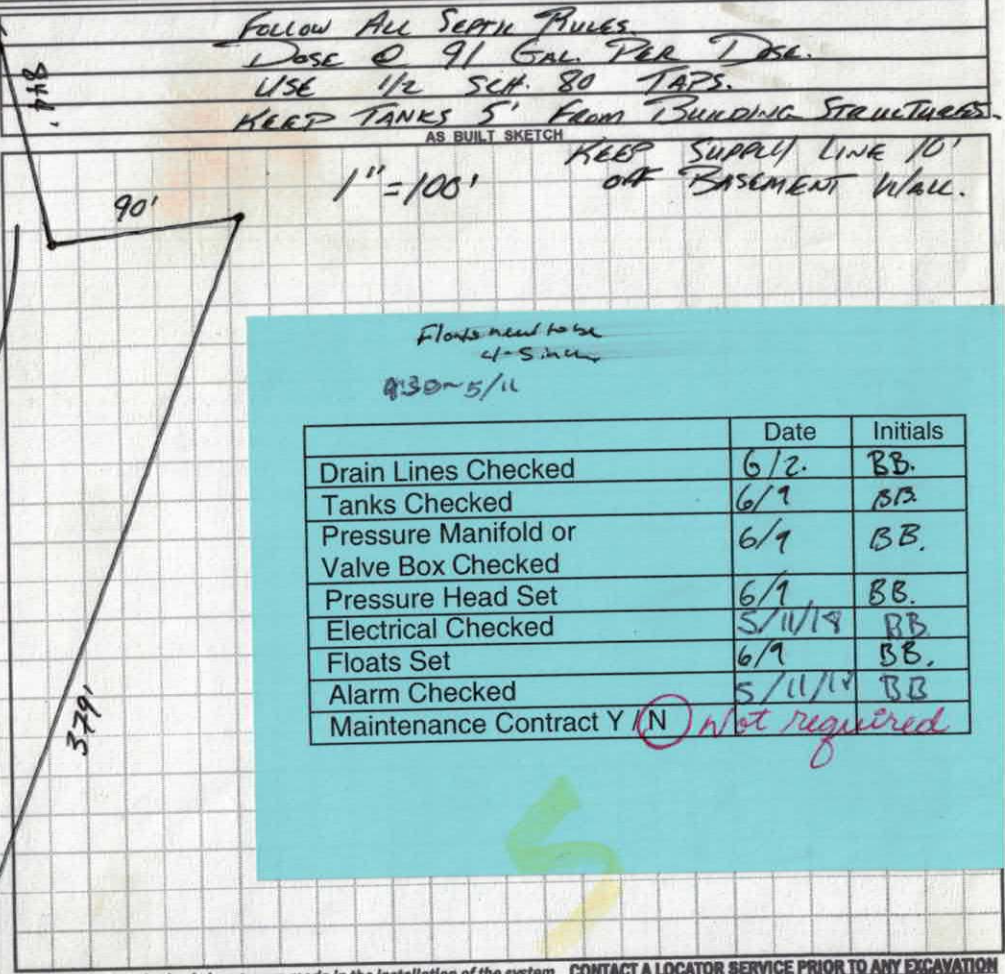
Follow All Septic Rules
Dose @ 91 Gal. Per Dose.
Use 1/2 Sch. 80 Taps.
Keep Tanks 5' From Building Structures.
Keep Supply Line 10' Off Basement Wall.

INITIAL SITE SKETCH



AS BUILT SKETCH

1" = 100'



Floats need to be 4-5 inch

9:30-5/11

	Date	Initials
Drain Lines Checked	6/2.	BB.
Tanks Checked	6/9	BB.
Pressure Manifold or Valve Box Checked	6/9	BB.
Pressure Head Set	6/9	BB.
Electrical Checked	5/11/18	BB
Floats Set	6/9	BB.
Alarm Checked	5/11/18	BB
Maintenance Contract Y (N)	Not required	

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: Larry D Love Date: 10/9/15 Installed by: Frye Grading

IMPROVEMENT PERMIT by: Date: 5/22/15 OPERATION PERMIT by: Benjamin A Bolton Date: 5/11/18

AUTHORIZATION TO CONSTRUCT by: Date: 5/22/15 Existing System Inspected by: Date:

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

DENR/DEH

ON-SITE WASTEWATER SECTION

Sheet 1 of 3
PROPERTY ID #: 1375
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Larry Love
APPLICATION DATE
ADDRESS:
DATE EVALUATED: 5/22/15
PROPOSED FACILITY: SFR
PROPOSED DESIGN FLOW (.1949): 240 GPD
PROPERTY SIZE: 9 Acre
LOCATION OF SITE: 2230 Turnersburg Hwy
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) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
N	LS 12%	0-18	SL, GR	VFR, SS, SP	N/A	36"	C-M SAP INCL 18"-36"	37"	.275
		18-36	RCL, WSBK	FR, SS, SP					
		AR 37"							
A2	LS 12%	0-8	SL, GR	VFR, SS, SP	N/A	38"	C-M SAP INCL 30"-38"	39	.275
		8-28"	RCL, SBK	FR, SS, SP					
		28-38	RCL,						
		AR 39"							
A3	LS 10%	0-8	SL/SCL/WSBK	VFR, SS, SP	N/A	44"	M SAP INCL 35"-43"	44"	.3
		8-33	RCL, SBK	FR, SS, SP					
		33-43	RCL, WSBK	FR, SS, SP					
		44" AR							
A4	LS 10%	0-8	BSL, GR	VFR, SS, SP	N/A	24"	/	25"	
		8-24"	RCL, SBK	FR, SS, SP					
		25"	AR						

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	Approved	Approved
Site LTAR	.3	.275

OTHER FACTORS (.1946): N/A
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Shane Cashion
OTHER(S) PRESENT: L. Love

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet)

Sheet ___ of ___

DEPARTMENT OF ENVIRONMENT
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

PROPERTY ID #: _____
DATE OF EVALUATION: _____
COUNTY: _____

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
P5	LL 16%	0-8	BSL, GR	VFR, SS, SP				25"	
		8-24	TC, SBK	FR, SS, SP					
		25	AR						
P6	LL 8%	0-12	BSL GR	VFR SS, SP	N/A	38"	N/A	39"	.3
		12-38	TC, SBK	FR, SS, SP					
		39"	AR						
P7	LL 10%	0-14	BSL, GR	VFR, SS, SP	N/A	36"	N/A	37"	.3
		14-36	TC, SBK	FR, SS, SP					
		37	AR						

COMMENTS: _____

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*
CC (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4
CV (Convex Slope)		LS (Loamy Sand)		
D (Drainage Way)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3
DS (Debris Slump)		L (Loam)		
FP (Flood Plain)	III	Si (Silt)	0.6 - 0.3	0.3 - 0.15
FS (Foot Slope)		SiCL (Silty Clay Loam)		
H (Head Slope)		CL (Clay Loam)		
L (Linear Slope)		SCL (Sandy Clay Loam)		
N (Nose Slope)		SiL (Silt Loam)		
R (Ridge)	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05
S (Shoulder Slope)		SiC (Silty Clay)		
T (Terrace)		C (Clay)		
		O (Organic)	None	None

MINERALOGY/ CONSISTENCE	STRUCTURE
NEXP (Non-expansive)	G (Single Grain)
SEXP (Slightly Expansive)	M (Massive)
EXP (Expansive)	CR (Crumb)
	GR (Granular)
	SBK (Subangular Blocky)
	ABK (Angular Blocky)
	PL (Platy)
	PR (Prismatic)

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.

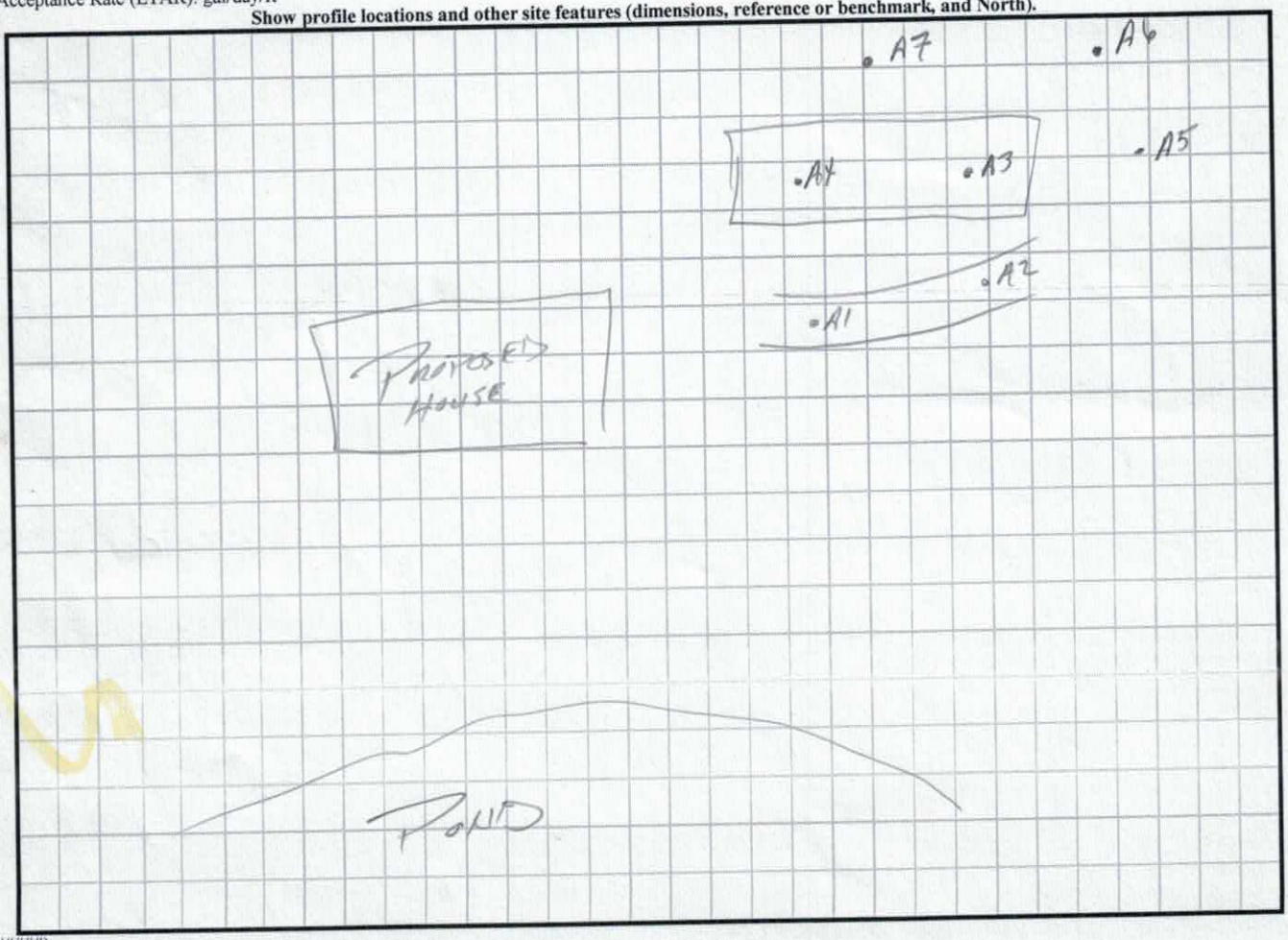
NOTES

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 (#####)

$500

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

209521 MAY 18

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:
Place an (X) beside whichever is submitted if applicable
( ) Survey Plat, scaled no more than 1 inch = 60 feet
( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information:

Applicant Name: Larry Dean Love Address: 135 Church Lake Rd. Statesville, N.C. 28625 Phone: 704-651-0306

Owner Name: Larry Dean Love Address: 135 Church Lake Rd Statesville N.C. 28625 Phone: 704-651-0306

Property Information:

Street Address: 2230 Turnersburg Rd., Statesville, N.C 28625

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

Driving Directions: Hwy 21 North to Turnersburg, N.C. Access from Turnersburg Post Office

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

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

Maximum Number of Bedrooms: 3
Maximum Number of Occupants: 2
( ) Swimming Pool
( ) Other Addition/Structure: _____

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

Non-Residential Site Development:
Type of Business: Main House pathway in Basement
Square Footage of Building: _____
Maximum Number of Employee: _____
Maximum Number of Seats/Beds/Other: _____

PAID 4397 MA 4/8

Water Supply:

( ) New Well ( ) Existing Well ( ) Community Well ( ) City Water (X) Other Public Water (Iredell 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:

(X) Yes ( ) 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: Larry Dean Love 4/7/15
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

* Call: 704-651-0306 before Coming *

IREDELL COUNTY HEALTH DEPARTMENT

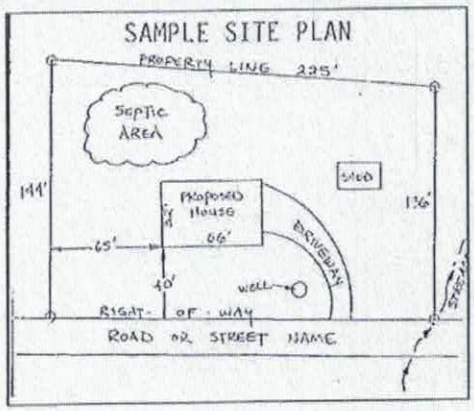
ENVIRONMENTAL HEALTH DIVISION

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
- (✓) North arrow, or other sufficient indicator of direction



Circle N/A on the following if appropriate:

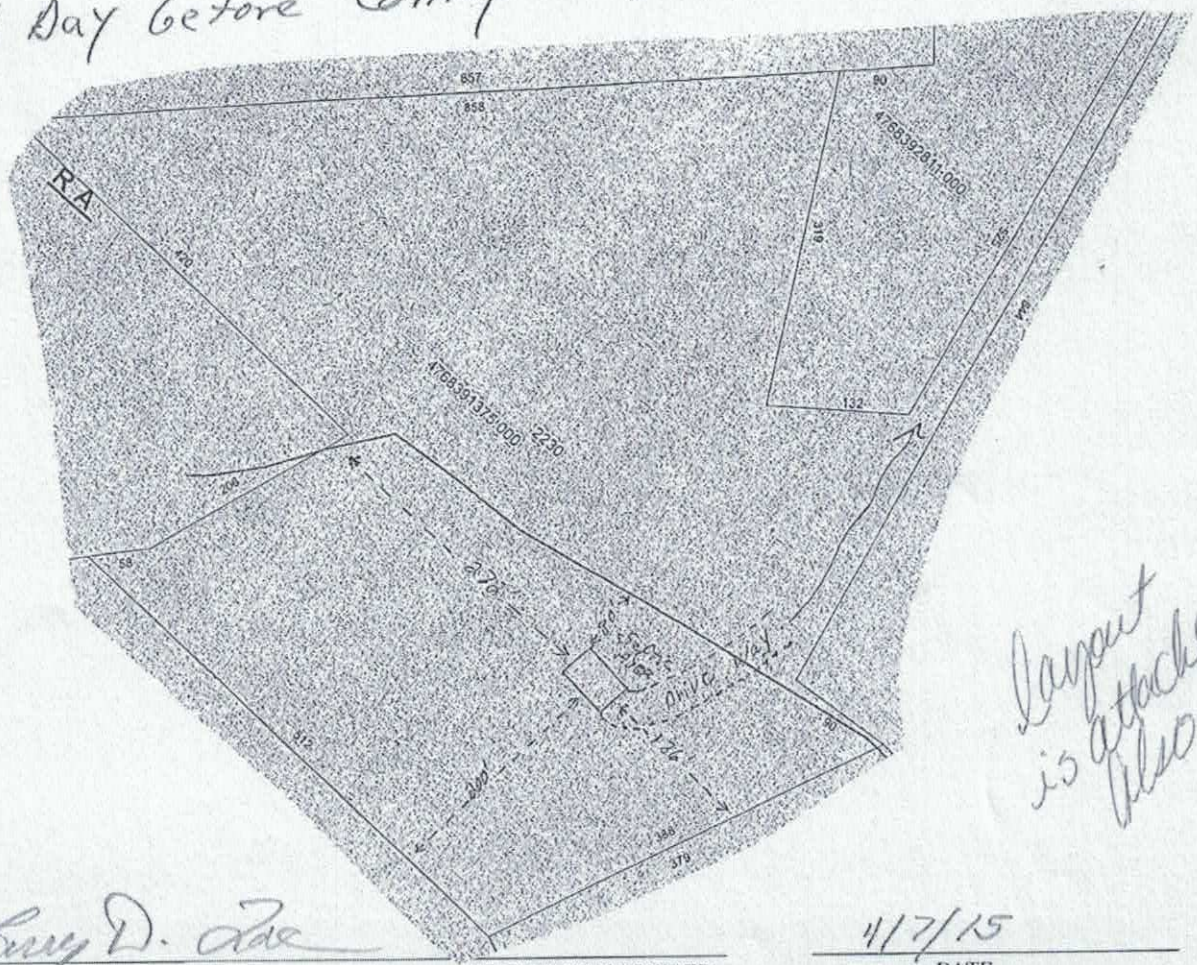
Location of septic systems and wells within 100' of your property (N/A)
Location of easements and rights of ways on your property N/A
Location of any designated wetlands on the property (N/A)

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 Attachments

Call Day before Coming 704-651-0306



Layout is attached also-

Signature: Larry D. Lee

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

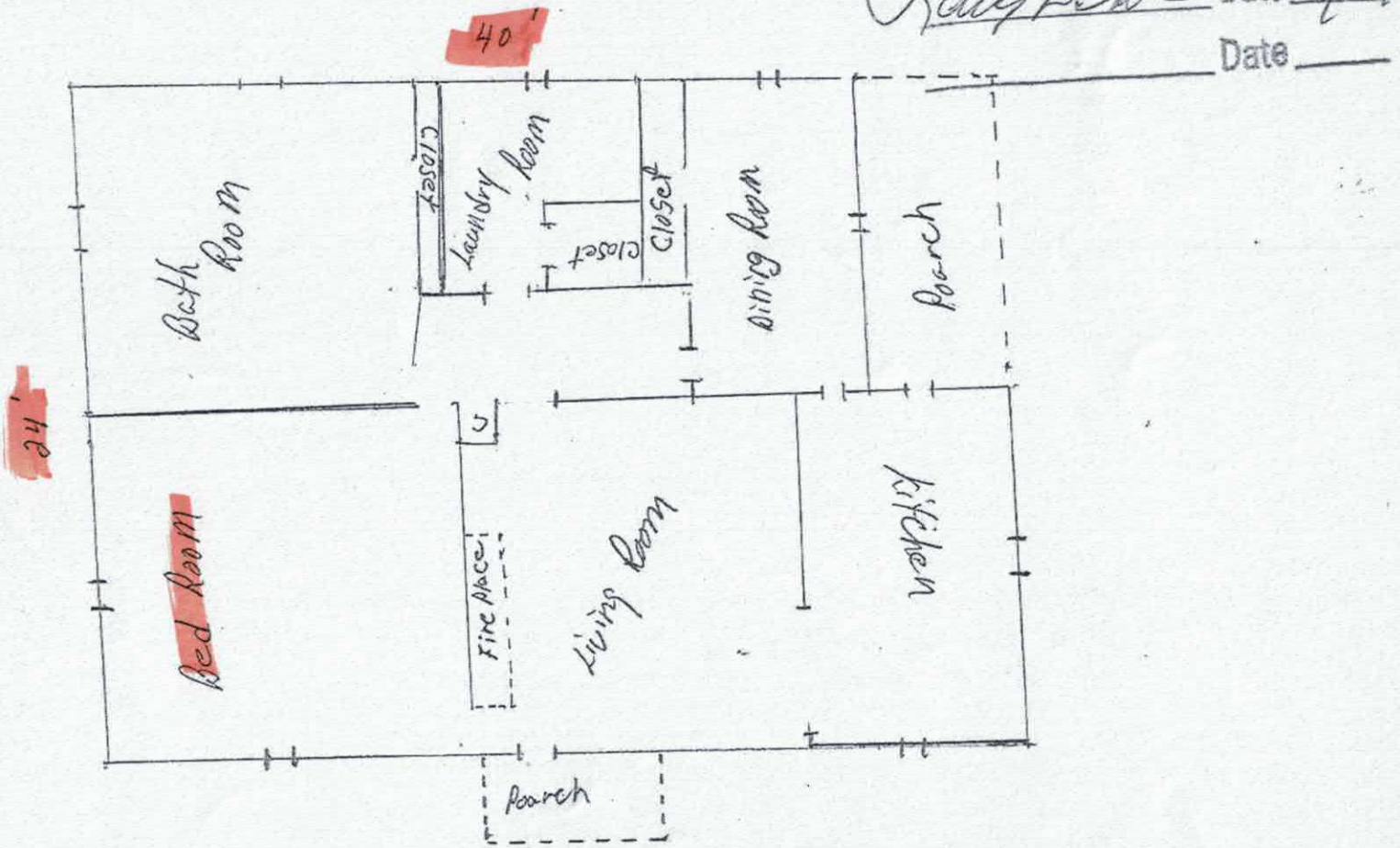
4/7/15

DATE

RA
420
90
512
56
206
375
398
844
525
132
319
90
657
858
2230
4768391375.000
4768392811.000
Proposed Quarry Haul Road
136'
378'
250'

Ground Level

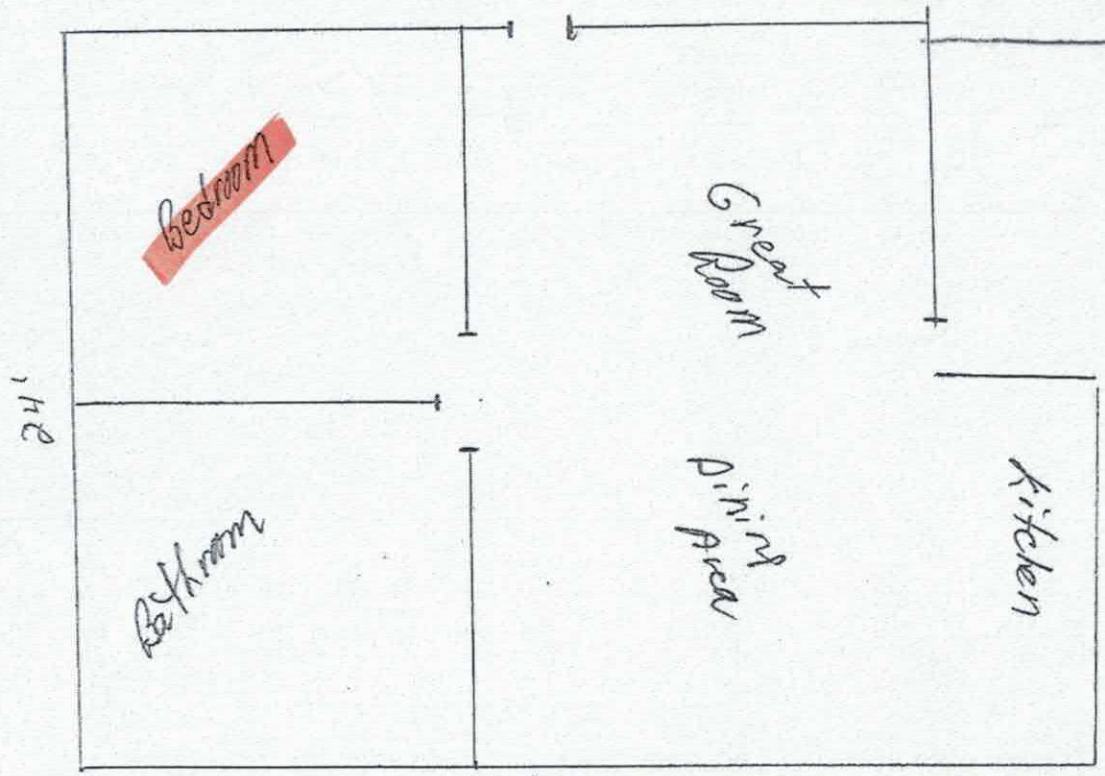
Acknowledgement
Plans Submittal ONLY!
Lacy Dove Date 4/8/15
Date



Existing House

5

Acknowledgement
Plans Submittal ONLY!
Kelly D. Date 4/8/15
Date



New Basement

5

IREDELL COUNTY

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

APPLICATION NUMBER
209521
Issue Date: 04/08/2015

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4768391375.000	2230 TURNERSBURG HIGHWAY, STATESVILLE, NC 28625	STATESVILLE

Owner Information	Applicant Information
Owner: LOVE LARRY D+BARBARA J	Applicant: LOVE LARRY D+BARBARA
Address: 279 IREDELL CO, NC 28625	Address: 135 CHURCH LAKE RD STATESVILLE, NC 28625
Phone:	Phone:

Use Requested	Zone Code
SFD--MOVING HOUSE ADDING BASEMENT	

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
9.770					NO	X

Remarks:

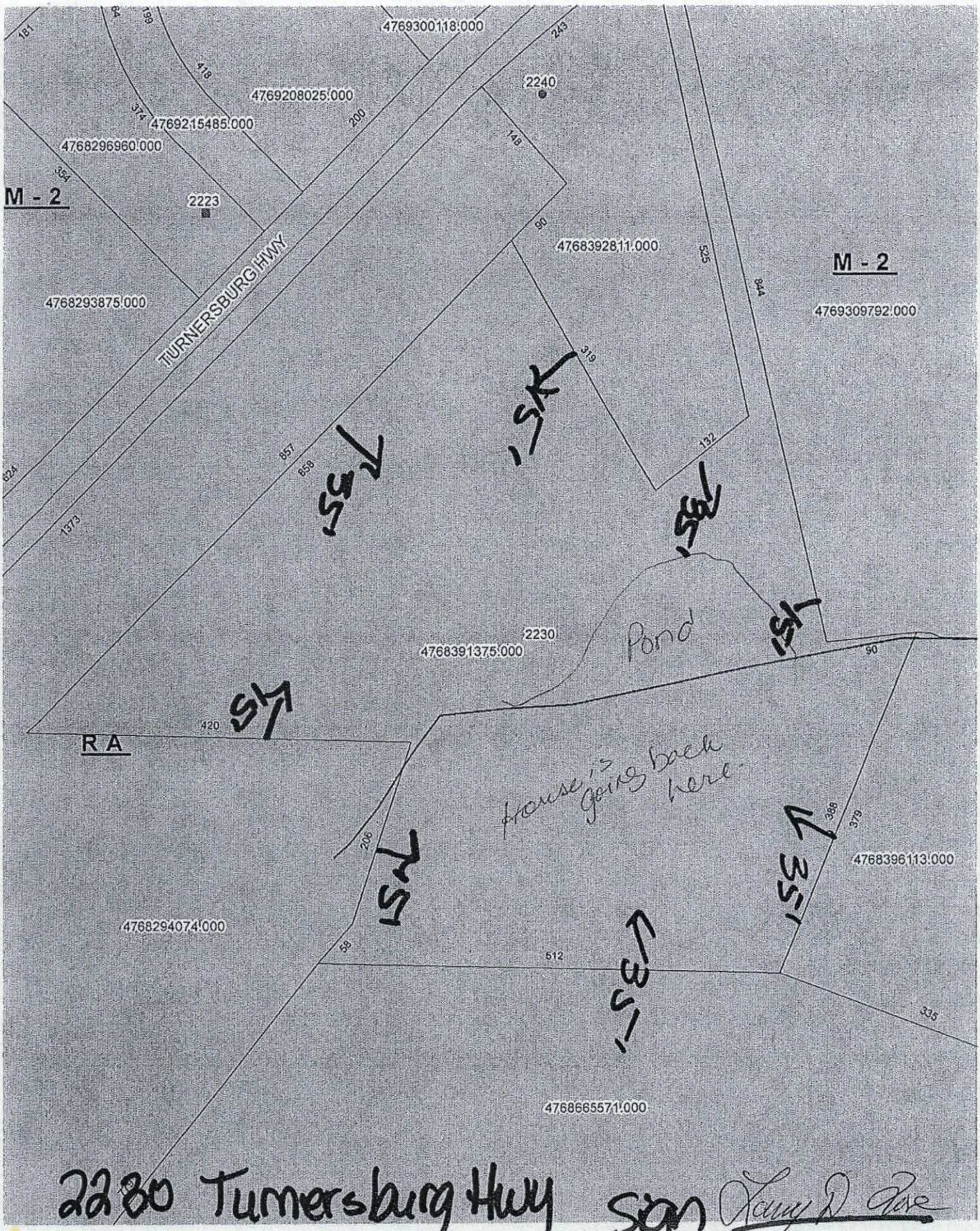
SETBACKS GIVEN BY REBECCA ON ATTACHED SHEET ON 4-7-15 MH

PAID 4/8 MH

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	35324	TOTAL FEES:	$ 77.25

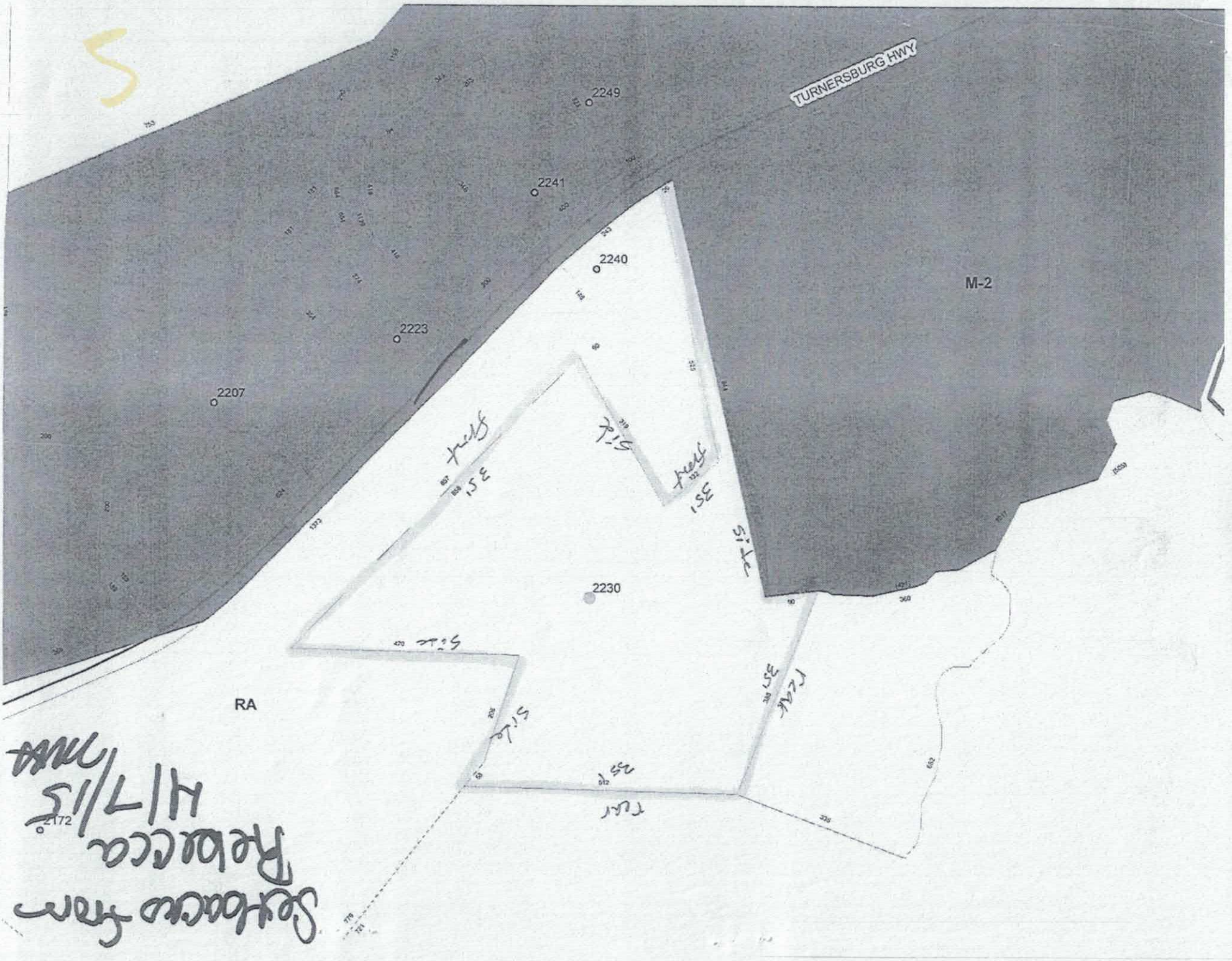


2280 Turnersburg Hwy

Zoning

sign

date 4/8/15


TURNERSBURG HWY
M-2
RA
2249
2241
2240
2223
2207
2230
2172