IREDELL COUNTY HEALTH DEPARTMENT

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

PERMIT # 235658

PIN # 4769179923

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

APPLICANT/OWNER: Jacob Deal

APPLICANT ADDRESS: 330 Tomlin Mill Rd, Olin

SITE ADDRESS: 330 Tomlin Mill Rd, Olin

PHONE: 704-902-3979

ALT. PHONE 704-880-5999

SITE DIRECTIONS: 77N exit 59 TR → ~2.5 miles on left

SAP CONTROLLED: [X] YES [ ] NO

SUBDIVISION: —

SECTION: — LOT # — LOT AREA: 1.363 ac

DESIGN FLOW: 360 gpd L.T.A.R.: .3

Septic Tank 1000 (gal) STB 1012 Date 3-23-18

Pump Tank ____ (gal) PT ____ Date ____

Pump Make ____ Model ____ Serial # ____

Nitrification Fields 1 # Lines 3 Linear Ft 300

Trench Width 30" Trench Bottom Depth(Low side) 30" Gravel Depth —

[X] New System [ ] Repair [ ] Expansion System Type: I II (III) IV V VI

System Description: 25% reduction

Repair System Description: 25% reduction

Maintenance Agreement Required: [ ] YES [X] NO

[X] GRAVITY [ ] PRESSURE

[X] Residence No. Bedrooms 3

[ ] Business No. Persons 6

[ ] Other No. Employees ____

[ ] Slab [ ] Crawl Space

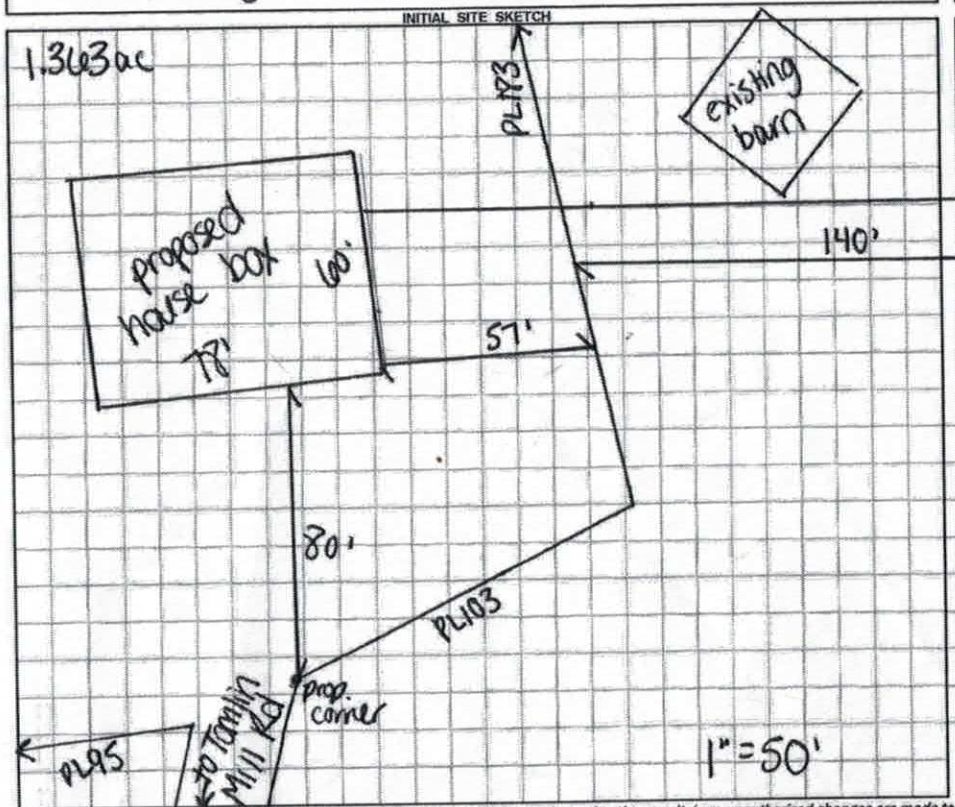
[X] Basement w/plumbing [ ] Basement w/o plumbing

Water Supply: [ ] Private [ ] Public [X] Community

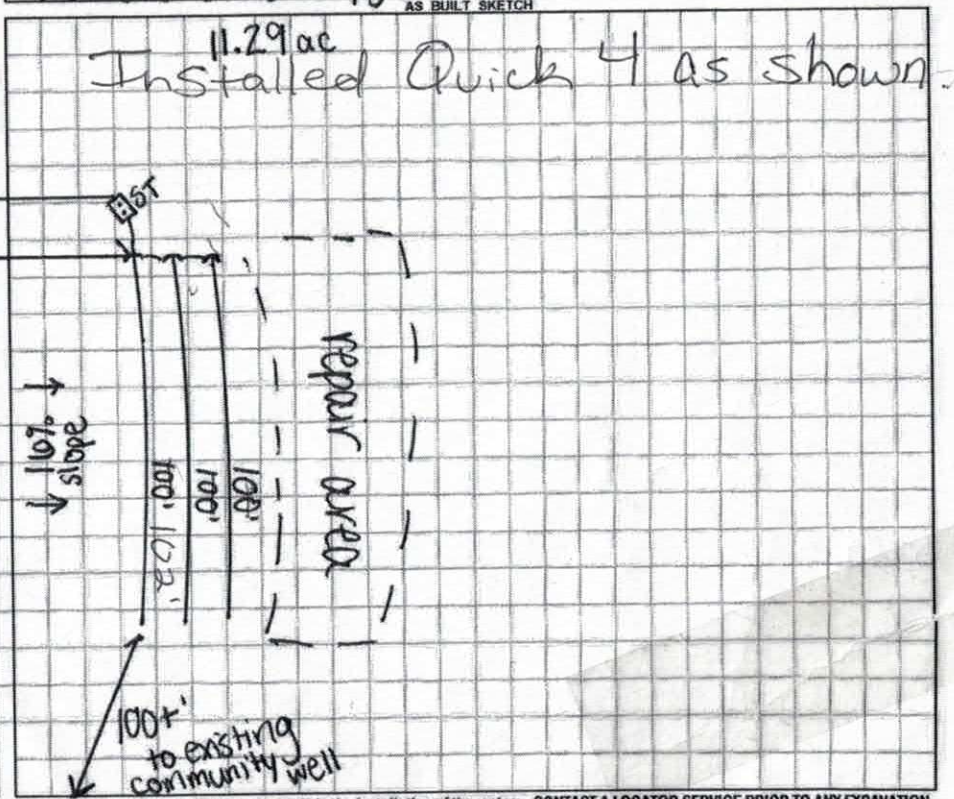
Comments / Conditions: Install on contour & utilize serial distribution. Do not pave / grade septic area.

★ system to be installed on parcel 4769284101 (11.29 ac) easement issued 5/16/18 – copy attached ★ Recorded BK 2556 pg 2441 - 2442

INITIAL SITE SKETCH



AS BUILT SKETCH



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. [X] IMPROVEMENT PERMIT *with site plan* valid for 60 mos. [X] AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: Jacob Deal Date: 5/24/18 Installed by: Steve Jordan

IMPROVEMENT PERMIT by: Carla C. Cave Date: 5/22/18 OPERATION PERMIT by: Maria Dotson Date: 6/13/18

AUTHORIZATION TO CONSTRUCT by: Carla C. Cave Date: 5/22/18 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 inpsector to confirm your inspection time.

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

Sheet 1 of 1
PROPERTY ID #: 4769179923
COUNTY: Iredell

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

OWNER: Jacob Deal
ADDRESS: 330 Tomlin Mill Rd
APPLICATION DATE: 5/14/18
PROPOSED FACILITY: SBR
PROPOSED DESIGN FLOW (.1949): 360 gpd
DATE EVALUATED: 5/22/18
LOCATION OF SITE: 330 Tomlin Mill Rd
PROPERTY SIZE: 1.363 ac
PROPERTY RECORDED: Y
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
1 I	SS 16%	0-11	SBK SCL	Fr SS SP SOAP	N/A	49"	N/A	N/A	PS .3
		11-31	SBK C	" "					
		31-49	WSBK CL	" "					
2 R	SS 16%	0-25	SBK C	Fr SS SP SOAP	→ few SOAP inc.	49"	N/A	N/A	PS .3
		25-49	WSBK CL	" "					
3 R	SS 16%	0-8	SBK SCL	Fr SS SP SOAP	few SOAP inc.	48"	N/A	N/A	PS .3
		8-20	SBK C	" "					
		20-48	WSBK CL	" "					
4 I	SS 16%	0-25	SBK C	Fr SS SP SOAP	NA	39"	PS	N/A	PS .3
		25-39	SBK CL	" "					
		39-48	L SOAP	VFr					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	300'	300'
System Type(s)	25% red	25% red
Site LTAR	.3	.3

OTHER FACTORS (.1946): N/A
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: C. Cave
OTHER(S) PRESENT: N/A

COMMENTS:

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope) CV (Convex Slope) D (Drainage Way) DS (Debris Slump) FP (Flood Plain) FS (Foot Slope) H (Head Slope) L (Linear Slope) N (Nose Slope) R (Ridge) S (Shoulder Slope) T (Terrace)	I	S (Sand) LS (Loamy Sand)	1.2 - 0.8	0.6 - 0.4	SEXP (Slightly Expansive) EXP (Expansive)	G (Single Grain) M (Massive) CR (Crumb) GR (Granular) SBK (Subangular Blocky) ABK (Angular Blocky) PL (Platy) PR (Prismatic)
	II	SL (Sandy Loam) L (Loam)	0.8 - 0.6	0.4 - 0.3		
	III	Si (Silt) SiCL (Silty Clay Loam) CL (Clay Loam) SCL (Sandy Clay Loam) SiL (Silt Loam)	0.6 - 0.3	0.3 - 0.15		
	IV	SC (Sandy Clay) SiC (Silty Clay) C (Clay) O (Organic)	0.4 - 0.1 None	0.2 - 0.05 None		

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.

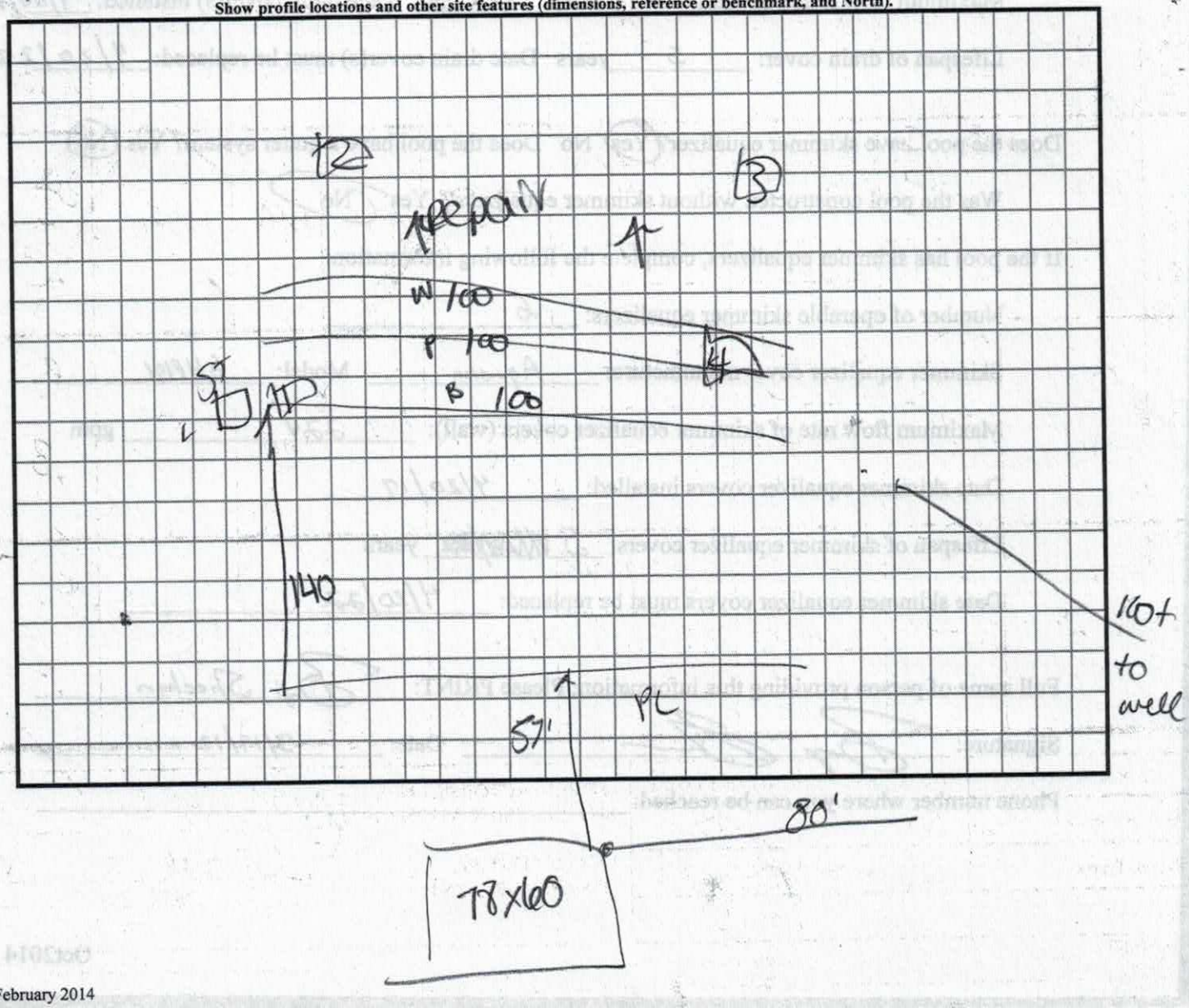
NOTES

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/ft²

Show profile locations and other site features (dimensions, reference or benchmark, and North).



2357058

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(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)

Applicant Name: Jacob P. Deal Address: 330 Tomlin Mill Rd. Olin, NC Zip: 28660
Applicant Email: jacobecalljps.com Phone: 704-902-3979 Alt. Phone: 704 880-5999
Owner Name: Jacob P. Deal Address: 330 Tomlin Mill Rd. Olin NC Zip: 28660
Owner Email: jacobe.calljps.com Phone: 704-902-3979 Alt. Phone: 704-880-5999

Property Information:

Street Address: 330 Tomlin Mill Rd. Olin NC 28660

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

Driving Directions: 77 N to exit 59. Go east past Rash Rd. Driveway on left before Rocky Creek.

T, W, TH.
- Tuesday
- 10am

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

(✓) New Single Family Residence Maximum Number of Bedrooms: 3
( ) New Multi-Family Residence Maximum Number of Occupants: 6
( ) Accessory Building ( ) Swimming Pool
( ) Bedroom(s) Addition ( ) Other Addition/Structure: _____
( ) 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: ____

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: 2 Number of Persons: 5
( ) 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: _____ 4 May 18
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

(Check and sign only ONE of the options below)

1. *** APPLICANT AND OWNER ARE THE SAME. *** *(Sign here)* _____

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.

2. I, Jacob P. Deal, am the legal owner(s) of the property located at 330 Tomlin Mill Rd. Olin NC 28660, identified as

PIN (Parcel Identification Number)_____, located in Iredell County, North Carolina.

I do hereby authorize **(print legal representative/company name)** Jacob Deal _____, 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.

_____ 15th May 18
Signature of Owner(s) Date

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

COPY

Prepared By and Return to: Benbow and Martin, P.C.

North Carolina
Iredell County

EASEMENT DEED

THIS EASEMENT made and entered into this 16 day of May, 2018 by and between Paul David Deal, and wife, Nancy W. Deal, hereinafter referred to as Grantors to Jacob Paul Deal and wife, Elizabeth McLaughlin Deal, referred to as Grantees, all of Iredell County, North Carolina.

WITNESSETH:

WHEREAS, the Grantor has agreed to convey to the Grantee an access easement for the sole purposes of placing a septic tank and septic lines on said property and maintaining said septic tank and septic drain lines.

BEING in Olin Township, Iredell County, North Carolina and being more particularly described as follows:

BEGINNING at an iron pin set in the line of Tract #4, 3 and 1 of the David Deal survey as prepared by Gerald V. Grant on 8-30-91 and being the Northernmost corner of Tract One (1) on said survey, and said BEGINNING point being located South 24 degrees 01 minutes 17 seconds East 84.63 feet from the property line in the Southern line of Rocky Creek; and running thence from said beginning point South 46 degrees 50 minutes 03 seconds East 183.21 feet to an iron pin set; thence East 90 degrees 0 minutes 0 seconds 225 feet to a point; thence North 0 degrees 0 minutes 0 seconds 200 feet to a point; thence Southwest approximately 365 feet to the point of BEGINNING and containing approximately 1.2 acres, more or less, to be used solely for the placement and maintenance of a septic tank system and the septic tank lines for the Grantees, their heirs and assigns.

NOW, THEREFORE, the Grantors, for good and adequate consideration, do hereby grant, bargain and convey unto the Grantees, their heirs, successors and assigns, a right of way across the lands of the Grantors for the sole purpose of placing a septic tank and septic lines on said property and maintaining said septic tank and septic drain lines.

The Grantors covenants that they are seized of the premises in fee simple, have the right to convey said right-of-way easement, that the title is marketable and free of all encumbrances, and that the party of the first part will warrant and defend the title against the lawful claims of all persons whomsoever except for the exceptions hereinabove stated.

IN TESTIMONY WEHREOF, the Grantors have caused this instrument to be executed on the day and year first above-written.

P David Deal (SEAL)
Paul David Deal

Nancy W Deal (SEAL)
Nancy W. Deal

State of North Carolina

Iredell County

I, a Notary Public of the County and State aforesaid, certify that Paul David Deal and Nancy W. Deal, personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official stamp or seal this 16 day of May, 2018.

Notary Public

My Commission Expires: 10/1/2021

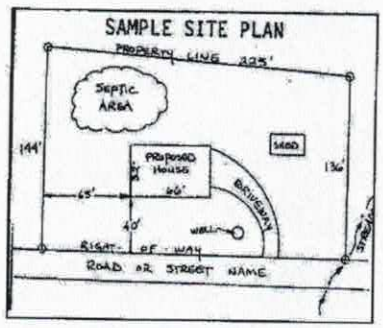
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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

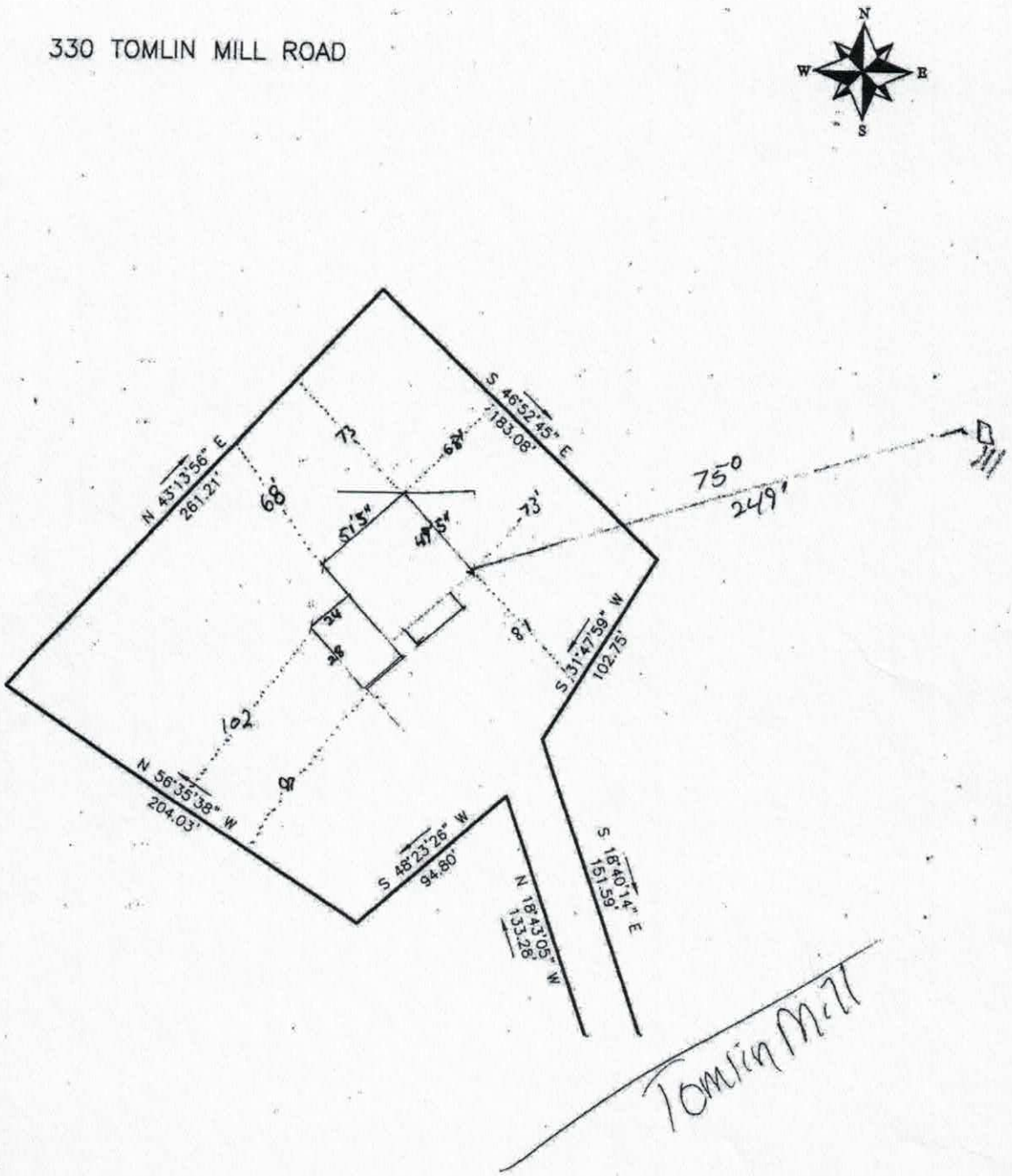
Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site

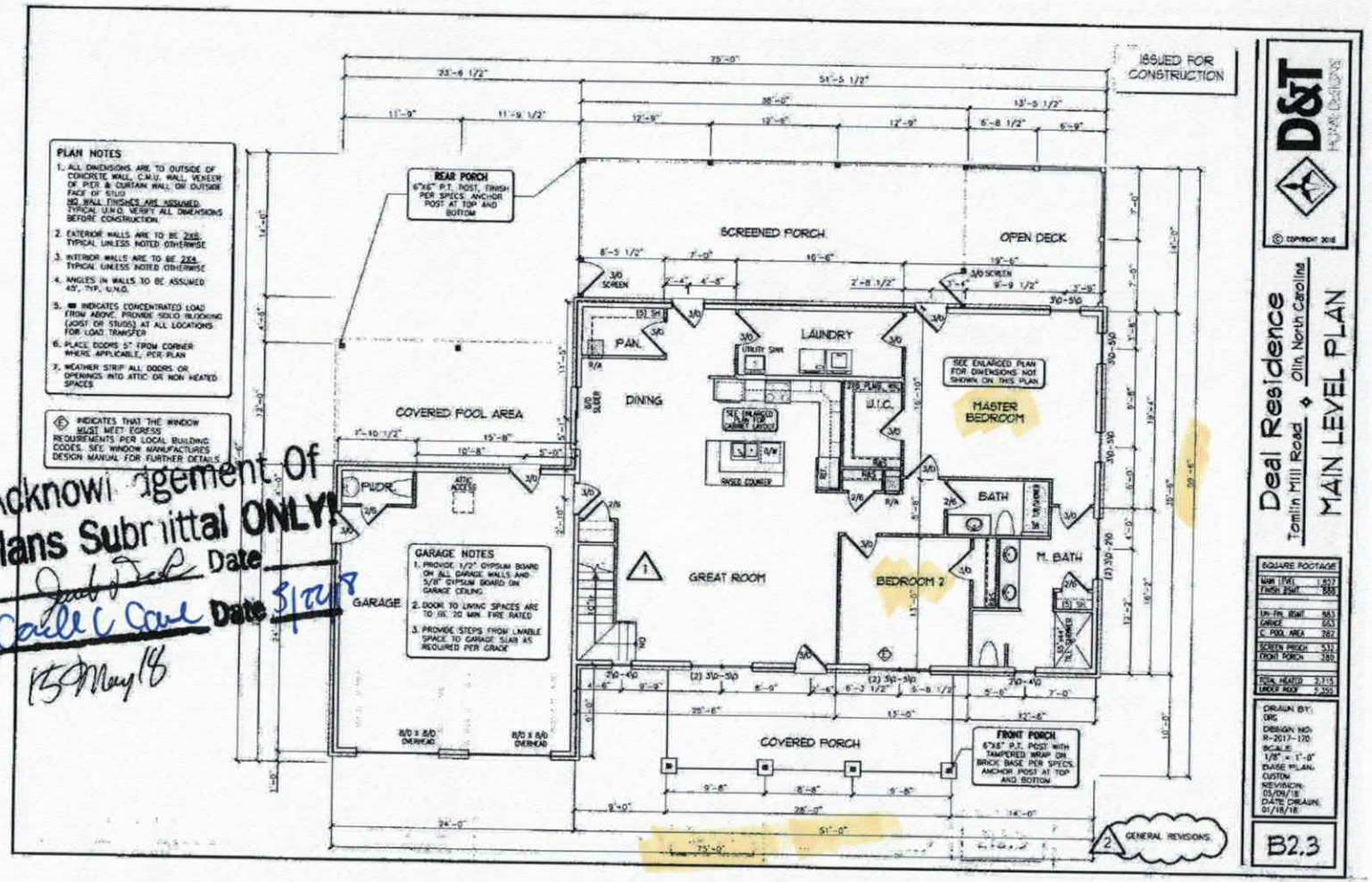
See attached

Signature: _____ 14 May 18

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

330 TOMLIN MILL ROAD




ISSUED FOR CONSTRUCTION
PLAN NOTES
1. ALL DIMENSIONS ARE TO OUTSIDE OF CONCRETE WALL, C.M.U. WALL, VENEER OF PIER & CURTAIN WALL OR OUTSIDE FACE OF STUD
NO WALL FINISHES ARE ASSUMED
TYPICAL U.N.O. VERIFY ALL DIMENSIONS BEFORE CONSTRUCTION
2. EXTERIOR WALLS ARE TO BE 2x6 TYPICAL UNLESS NOTED OTHERWISE
3. INTERIOR WALLS ARE TO BE 2X4 TYPICAL UNLESS NOTED OTHERWISE
4. ANGLES IN WALLS TO BE ASSUMED 45°, TYP. U.N.O.
5. ■ INDICATES CONCENTRATED LOAD FROM ABOVE. PROVIDE SOLID BLOCKING (JOIST OR STUDS) AT ALL LOCATIONS FOR LOAD TRANSFER
6. PLACE DOORS 5" FROM CORNER WHERE APPLICABLE, PER PLAN
7. WEATHER STRIP ALL DOORS OR OPENINGS INTO ATTIC OR NON HEATED SPACES
(E) INDICATES THAT THE WINDOW MUST MEET EGRESS REQUIREMENTS PER LOCAL BUILDING CODES. SEE WINDOW MANUFACTURES DESIGN MANUAL FOR FURTHER DETAILS
REAR PORCH
6"X6" P.T. POST, FINISH PER SPECS. ANCHOR POST AT TOP AND BOTTOM
SCREENED PORCH
OPEN DECK
COVERED POOL AREA
DINING
PAN.
LAUNDRY
UTILITY SINK
W.I.C.
MASTER BEDROOM
SEE ENLARGED PLAN FOR DIMENSIONS NOT SHOWN ON THIS PLAN
BATH
M. BATH
BEDROOM 2
GREAT ROOM
PWDR
ATTIC ACCESS
GARAGE
GARAGE NOTES
1. PROVIDE 1/2" GYPSUM BOARD ON ALL GARAGE WALLS AND 5/8" GYPSUM BOARD ON GARAGE CEILING.
2. DOOR TO LIVING SPACES ARE TO BE 20 MIN FIRE RATED
3. PROVIDE STEPS FROM LANDING SPACE TO GARAGE SLAB AS REQUIRED PER GRADE
COVERED PORCH
FRONT PORCH
6"X6" P.T. POST WITH TAMPERED WRAP ON BRICK BASE PER SPECS. ANCHOR POST AT TOP AND BOTTOM
GENERAL REVISIONS
Acknowledgement Of
Plans Submittal ONLY!
Date
Date 5/7/18
15 May 18
D&T
HOME DESIGNS
© COPYRIGHT 2018
Deal Residence
Tomlin Mill Road ◆ Olin, North Carolina
MAIN LEVEL PLAN
SQUARE FOOTAGE
MAIN LEVEL 2,677
FINISH SPACE 2,555
UN-FIN. SPACE 163
GARAGE 551
C. POOL AREA 282
SCREEN PORCH 532
FRONT PORCH 280
TOTAL HEATED 2,715
UNDER ROOF 3,765
DRAWN BY: DRS
DESIGN NO: 9-2017-170
SCALE: 1/8" = 1'-0"
BASE PLAN: CUSTOM
REVISION: 05/09/18
DATE DRAWN: 01/18/18
B2.3

Approved as Noted
This Submittal ONLY!
Date
Date
GARAGE SLAB
CONC. SLAB
STORAGE
W.I.C.
UTILITY ROOM
BEDROOM 3
SAFE ROOM
UNFINISHED BASEMENT
RETAINING WALL BY OTHERS (FIELD LOCATE)
ISSUED FOR CONSTRUCTION
2 GENERAL REVISIONS
B2.1
Deal Residence
Tomlin Mill Road ◆ Olin, North Carolina
LOWER LEVEL PLAN
D&T
HOME DESIGNS

IREDELL COUNTY

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

APPLICATION NUMBER
235658
Issue Date: 05/15/2018

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4769179923.000	330 TOMLIN MILL ROAD, OLIN, NC 28660	

Owner Information	Applicant Information
Owner: DEAL, JACOB P. DEAL, ELIZABETH M.	Applicant: DEAL, JACOB P.
Address: 330 TOMLIN MILL RD	Address: 330 TOMLIN MILL RD
OLIN, NC 28660	OLIN, NC 28660
Phone:	Phone:

Use Requested	Zone Code
SFD	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
	35.00	35.00	15.00	15.00		X

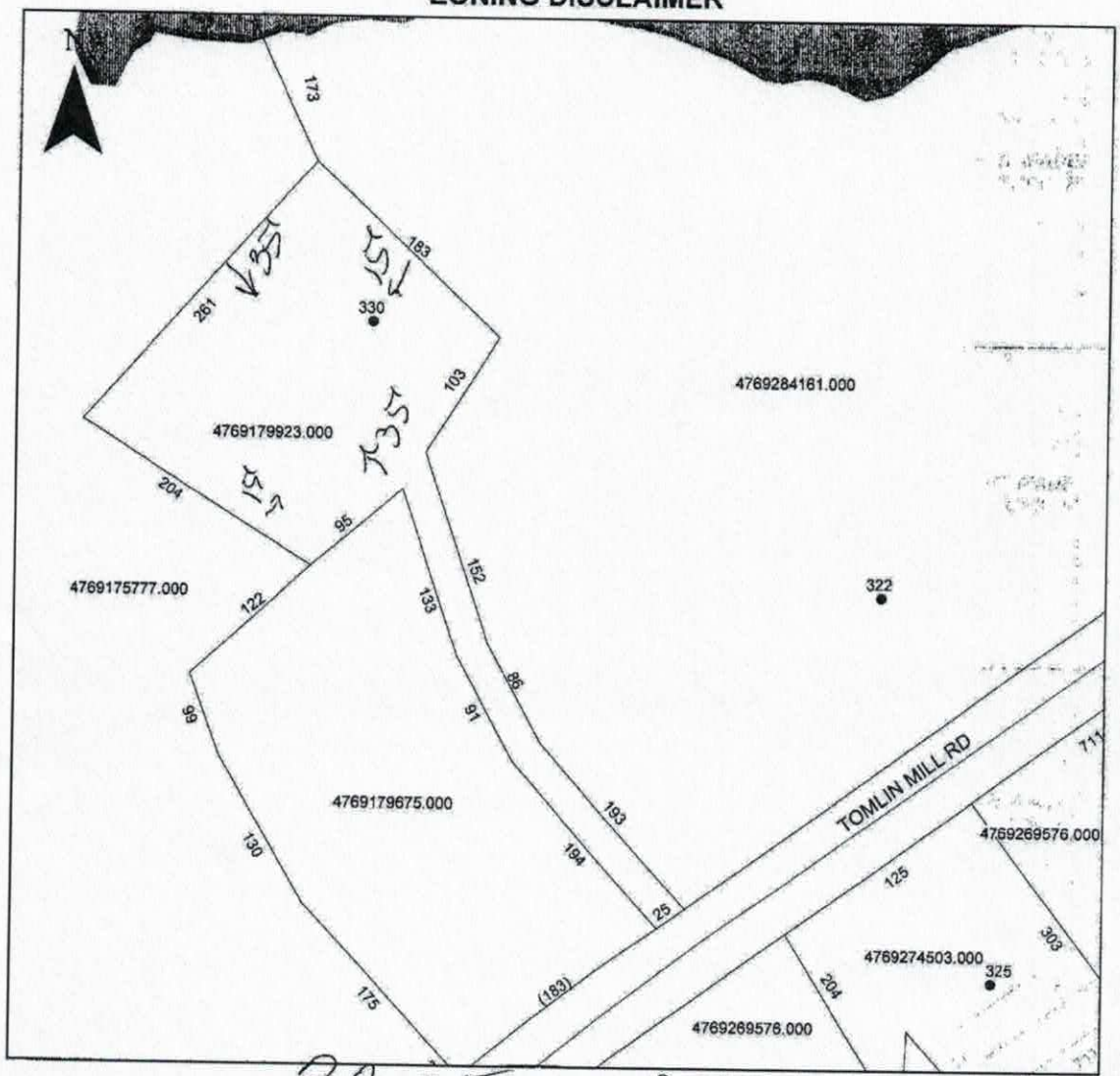
Remarks:

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	138909	TOTAL FEES:	$ 77.25

ZONING DISCLAIMER



Property Address 330 Tomlin Mill

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 May 18
Date