HS BLDR-2023-38140

ICHD–ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP 308792

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

PIN # 4772376526

APPLICANT/OWNER: Andy Peggs | APPLICANT ADDRESS: 214 Wood Duck Lp Mooresville NC 28117

SITE ADDRESS: 423 Triplett Rd Cleveland, NC 27013 | PHONE: 704-400-9598 | ALT. PHONE

SITE DIRECTIONS: N Center St to Son Shelton Ave, L on US70E, R on Bethesda Rd, L on Corn Flower Rd, L on Triplett Rd, 1st on R | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: A+L Properties of Mooresville LLC | SECTION: — | LOT # 1 | LOT AREA: 2.65 acres | DESIGN FLOW: 360 GPD | L.T.A.R.: .3

Septic Tank	1000 (gal)	STB	760	Date	7/25/23	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI
Pump Tank	— (gal)	PT	—	Date	—	System Description:	Gravity 25% Reduction		
Pump Make	—	Model	—	Serial #	—	Repair System Description:	Gravity 25% Reduction		
# Nitrification Fields	1	# Lines	4	Linear Ft	300'	Maintenance Agreement Required:	☐ YES	☒ NO	
Trench Width	36"	Trench Bottom Depth ~~(Low side)~~	36" max	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: Install lines on contour. DoNOT Drive on, store material or manipulate drainfield in any way. All Property Lines and Corners must be marked by a licensed surveyor during time of inspection and Installation.

INITIAL SITE SKETCH

See Attached and Approved Site Plan By Soil and Forestry Services of The Carolinas, PA Dated 8/4/2020 PJB

AS BUILT SKETCH

Installed as drawn.

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**

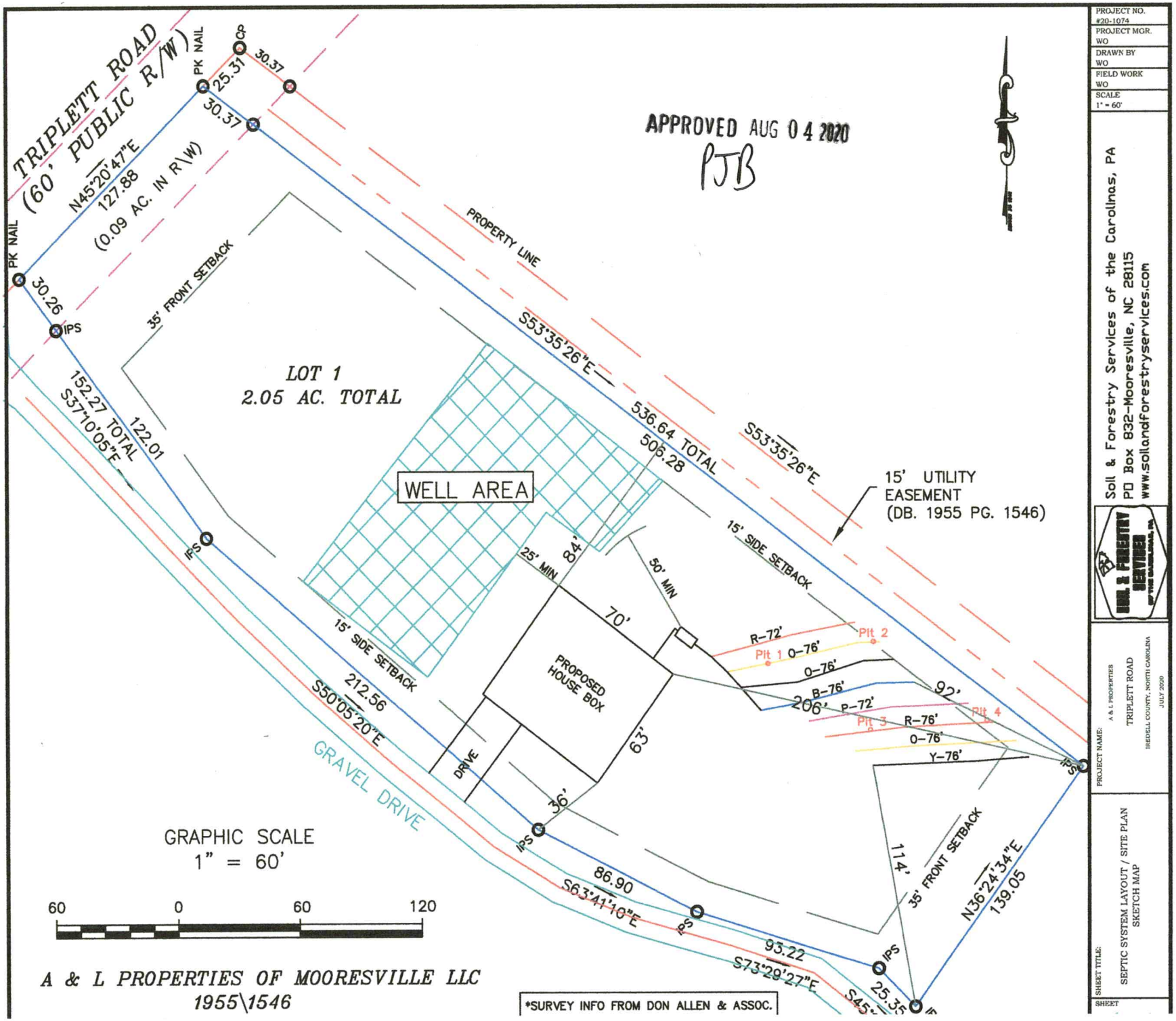
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

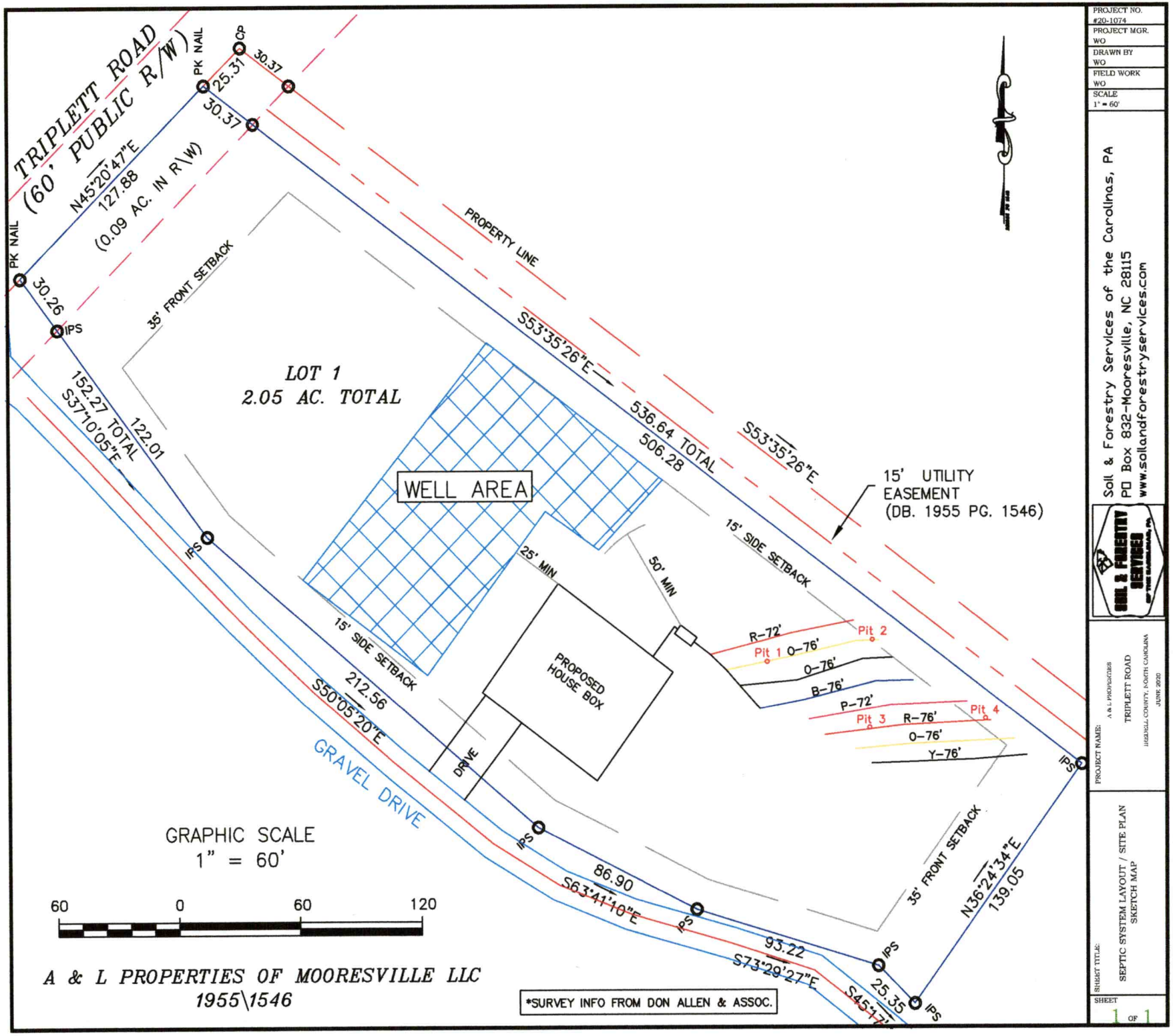
Owner / Applicant Signature: [signature] Date: 8/5/20 Installed by: CAC

IMPROVEMENT PERMIT by: Patrick J Bagley II Date: 8/4/2020 OPERATION PERMIT by: Joel Williams Date: 9/12/2023

AUTHORIZATION TO CONSTRUCT by: Patrick J Bagley II Date: 8/4/2020 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.


TRIPLETT ROAD
(60' PUBLIC R/W)
PK NAIL
CP
25.31
30.37
30.37
N45°20'47"E
127.88
(0.09 AC. IN R\W)
PK NAIL
30.26
IPS
35' FRONT SETBACK
PROPERTY LINE
S53°35'26"E
536.64 TOTAL
506.28
S53°35'26"E
LOT 1
2.05 AC. TOTAL
152.27 TOTAL
S37°10'05"E
122.01
IFS
WELL AREA
15' UTILITY
EASEMENT
(DB. 1955 PG. 1546)
15' SIDE SETBACK
25' MIN
84'
50' MIN
70'
PROPOSED
HOUSE BOX
63'
15' SIDE SETBACK
212.56
S50°05'20"E
DRIVE
GRAVEL DRIVE
36'
IPS
R-72'
Pit 2
Pit 1 0-76'
0-76'
B-76'
206'
P-72'
92'
Pit 3
R-76'
Pit 4
0-76'
Y-76'
IFS
114'
35' FRONT SETBACK
N36°24'34"E
139.05
86.90
S63°41'10"E
IPS
93.22
S73°29'27"E
IPS
25.35
S45°
GRAPHIC SCALE
1" = 60'
60 0 60 120
A & L PROPERTIES OF MOORESVILLE LLC
1955\1546
*SURVEY INFO FROM DON ALLEN & ASSOC.
APPROVED AUG 04 2020
PJB
PROJECT NO.
#20-1074
PROJECT MGR.
WO
DRAWN BY
WO
FIELD WORK
WO
SCALE
1" = 60'
Soil & Forestry Services of the Carolinas, PA
PO Box 832-Mooresville, NC 28115
www.soilandforestryservices.com
SOIL & FORESTRY SERVICES
PROJECT NAME:
A & L PROPERTIES
TRIPLETT ROAD
IREDELL COUNTY, NORTH CAROLINA
JULY 2020
SHEET TITLE:
SEPTIC SYSTEM LAYOUT / SITE PLAN
SKETCH MAP
SHEET



PROJECT NO.	#20-1074
PROJECT MGR.	WO
DRAWN BY	WO
FIELD WORK	WO
SCALE	1" = 60'

Soil & Forestry Services of the Carolinas, PA
PO Box 832-Mooresville, NC 28115
www.sollandforestryservices.com

SOIL & FORESTRY SERVICES OF THE CAROLINAS, PA

PROJECT NAME: A & L PROPERTIES — TRIPLETT ROAD — IREDELL COUNTY, NORTH CAROLINA — JUNE 2020

SHEET TITLE: SEPTIC SYSTEM LAYOUT / SITE PLAN SKETCH MAP

SHEET 1 OF 1

Three (3) Bedroom Accepted Septic System Design using Gravity Distribution for Lot 1 A&L Properties of Mooresville, LLC 423 Triplett Road-PIN 4772376526

Contents: **Page**

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

Design Information

Design Specifications---------- 2-3

Layout Specifications---------- 4

Site Plan---------- 5

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

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

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

Iredell County Septic Application---------- 9-10

Iredell County Zoning Permit---------- 11

Environmental Health Requirements---------- 12

Agent Authorization---------- 13

Owner: A& L Properties of Mooresville, LLC
c/o Andy Peggs
704 400-9598
214 Wood Duck Loop
Mooresville, NC 28117
Job #'20-1074
Design By: Soil & Forestry Services of the Carolinas, PA

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 DHH, and certification supplied by the manufacturer.
- 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
- 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.
- Elevations at pinflag locations should be checked by the installer prior to beginning
- Septic tank riser shall be a minimum of 6" above finished grade.
- **System specified as accepted type using gravity distribution**
- **Repair specified as accepted type using gravity distribution**
- **Max trench depth specified at 36"**
- **System trenches installed on 9' minimum; 3' wide trenches**
- **Iredell County has approval to move tank or distribution device**

GRAVITY DOSED SYSTEM
FOR WASTEWATER TREATMENT

Owner:	A&L Properties of Mooresville
Contact:	Andy Peggs
Phone:	704 400-9598
County:	Iredell
Location:	Lot 1 A&L Properties-Triplett Road

Source of Wastewater Flow:	3 Bedroom Single Family Residence
Estimated Daily Wastewater Production:	360 gpd
System Flow:	gpm

Design Specifications

Drainfield Size:	300	lf	
Loading Rate:	0.3 gpd/ft.^{2}		
Depth of Gravel in Trench:	n/a		
Gravel Size:	n/a		
Trench Depth:	36	in	max
Trench Width:	36 in.		
Septic Tank Size:	1000		
Pump Tank Size:	n/a		
Estimated Supply Line Length:	10	lf	
Supply Line Diameter:	3 in. SCH 40 PVC		
Supply Line Volume:	n/a	gal	
Dosing Volume:	n/a	gal	

Recommended Float Controls:	n/a
Recommended Control Panel:	n/a

Pressure Head:	n/a	
Friction Head:	0.00	ft
Elevation Head:	0.00	ft
Total Dynamic Head:	0.00	ft
Threaded Union:	n/a	
Gate Valves:	n/a	
Check Valves:	n/a	
Anti-Siphon Hole:	n/a	
Recommended Pump:	n/a	

Lot 1 A&L Properties-Triplett Road

Gravity Design

DESIGN FLOW:	360	gpd
SOIL APPLICATION RATE:	0.3 gpd/ft.^{2}	
TOTAL AREA TRENCH BOTTOM:	900	sf
TOTAL LATERAL LENGTH:	300	lf
NUMBER OF FIELDS:	1	
LATERAL LENGTH REQUIRED PER FIELD:	300	lf
SUPPLY LINE LENGTH:	10	lf
TOTAL DYNAMIC HEAD:	0.00	gpm
DOSING VOLUME:	0.00	gal
PUMP TANK DRAW DOWN*:	0.0	in
SEPTIC TANK SIZE:	1000	
PUMP TANK SIZE:	n/a	

**Pump tank draw down based on a volume basis of 21 gallons per inch. Draw down may vary among pump tank manufacturers.*

Lot 1 A&L Properties-423 Triplett Road

Layout for a 3 bedroom home **June 2020**

LINE #	FLAG COLOR	BS	HI	FS	ELEV	FLAGGED LENGTH	DESIGN LENGTH
TBM							
INSTR. 1							
			SYSTEM				
1	Red					72	72
2	Orange					80	76
3	Yellow					84	76
4	Blue					84	76
			REPAIR				
5	Pink					76	72
6	Red					80	76
7	Orange					76	76
8	Yellow					80	76

	LINE LENGTH	LTAR GPD/FT²	SYSTEM TYPE	REDUCTION TYPE	DIST	MAX TRENCH DEPTH
SYSTEM	300	0.300	ACCEPT	25%	GRAVITY	36
REPAIR	300	0.300	ACCEPT	25%	GRAVITY	36

Notes:

**TBM is assumed to be 100'
**All measures in feet
**Nitrification lines are demonstrated on contour via colored pin flags
**BS and FS indicate rod readings

CALCULATIONS

Location 423 Triplett Road

Project Number 20-1074

Lot No:	1	
No. of Bedrooms	3	
Design Flow	360	$^{gal}/_{day}$
LTAR	0.3	$^{gal}/_{ft^2\ day}$
Accepted? (YES OR NO)	Yes	
Supply Line Length	10	ft.
Supply Line Volume	3.84	gal.
Required Feet of Line	300	ft.
Amount of Line from Layout	300	ft.
Gallons per Minute	0.00	$^{gal}/_{min}$
Required Septic Tank Capacity	1000	gal.
Minimum Standard Tank Size	1000	
Lateral Line Volume	195.9	gal.
Dosing Volume	0.00	gal.
Tank Draw Down	0.0	in.

Generic Draw Down of 21 gal.per in.

Pump Run Time	#DIV/0!	minutes
Elevation Head	0	ft.
Pressure Head	0	ft.
Friction Factor	0	ft./100 ft. *(From the interpolater.)*
Friction Head	0.00	ft.
Elevation Head +15%	0	
Total Dynamic Head	0.00	ft.

FRICTION FACTOR INTERPOLATER
2" SCH 40 PVC

GPM	*f*
20	0.84
	-0.88
25	1.27
27.4	1.51
30	1.78
	-1.76
35	2.37
37	2.63
40	3.03
42.7	3.43
45	3.77
46.51	4.01
50	4.58
57.11	5.89
60	6.42

PROPERTY ID #:4772376526
COUNTY: Iredell

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

OWNER: A&L Properties of Mooresville, LLC — APPLICATION DATE
ADDRESS: 214 Wood Duck Loop, Mooresville, NC 28117 — DATE EVALUATED: 6/1/20
PROPOSED FACILITY: New House — PROPOSED DESIGN FLOW (.1949): 360 — PROPERTY SIZE: 2.05
LOCATION OF SITE: Lot 1 A&L Properties of Mville-Triplett Road — PROPERTY RECORDED: 2008
WATER SUPPLY: x☐ Private ☐ Public x ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring x ☐ Pit ☐ Cut — TYPE OF WASTEWATER: x ☐ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAP CLASS	.1944 RESTR HORIZ	
1	L / 11%	0-8	B L WMGr	Fr SS SP	N/A	48	N/A		S .3
		8-48	BR C WFS	Fr SS SP					
2	L / 11%	0-8	B L WMGr	Fr SS SP	N/A	57	N/A		S .3
		8-57	BR C WMS	Fr SS SP					
3	L / 11%	0-10	B L WMGr	Fr SS SP	N/A	58	N/A		S .3
		10-58	BR C WMS	Fr SS SP					
4	L / 11%	0-9	B L WMGr	Fr SS SP	N/A	60	N/A		S .3
		9-60	BR C WMS	Fr SS SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	300	300
System Type(s)	ACCEPTED	ACCEPTED
Site LTAR	.3	.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Overby
OTHER(S) PRESENT: Joe Thompson

COMMENTS:

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

Sheet 1 of 1
PROPERTY ID #: 47723769
COUNTY: Iredell

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

OWNER: ALproperties
ADDRESS: 214 Woodbuckle Mooresville NC 28117
PROPOSED FACILITY: New Single Family Home PROPOSED DESIGN FLOW (.1949): 360GPD
LOCATION OF SITE: 423 Triplett Rd

APPLICATION DATE 6/30/2020
DATE EVALUATED: 7/23/2020
PROPERTY SIZE: 2.05 acres
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	SS	0-8	SCL WSBK	Fr SS SP SE XP	—	48"	Few Litho inclusions	—	PS.3
		8-40	C SBK	Fr SS SP SE XP					
		40-48	CL SBK	Fr SC SP SE XP					
2	SS	0-6	SCL WSBK	Fr SS SP SE XP	—	50"	Few Litho inclusions	—	PS.3
		6-40	C SBK	Fr SS SP SE XP					
		40-50	CL SBK	Fr SC SP SE XP					
3	SS	0-6	SCL WSBK	Fr SS SP SE XP	—	52"	Few Litho inclusions at bottom	—	PS.3
		6-48	C SBK	Fr SS SP SE XP					
		48-52	CL SBK	Fr SS SP SE XP					
4	SS 11%	0-7	SCL WSBK	Fr SS SP SE XP	—	54"	Few Litho inclusions at bottom	—	PS.3
		7-49	C SBK	Fr SS SP SE XP					
		49-54	CL SBK	Fr SS SP SE XP					

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

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: Patrick B
OTHER(S) PRESENT: _____

COMMENTS: Sunny 75 had been up for a few days

Updated February 2014

RECEIVED JUL 8 - 2020

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED AP-308792

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM* Paid $350.00

Application For: (X) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) Septic Improvement Permit (X) 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: (X) Survey Plat, scaled no more than 1 inch = 60 feet
Place an (X) beside whichever is submitted if applicable (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: ANDY PEGGS (A+L PROPERTIES OF MOORESVILLE LLC) Address: 214 WOOD DUCK LOOP MOORESVILLE Zip: 28117

Applicant Email: ANDY@CHILDFORMS.COM Phone: (704) 400-9598 Alt. Phone: _____

Owner Name: SAME Address: _____ Zip: _____

Owner Email: _____ Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 423 TRIPLETT ROAD PIN 4772376526

Subdivision Name: A+L PROPERTIES, LLC Section/Phase: PLAT 65-98 Lot Number: 1

Driving Directions: @ TRIPLETT AND CORNFLOWER INTERSECTION GO NORTH ON TRIPLETT. TURN IN 1ST GRAVEL DRIVE ON RIGHT.

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

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____

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

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

Non-Residential Site Development: Type of Business: _____
Square Footage of Building: _____ Max. Number of Employees: _____ 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.

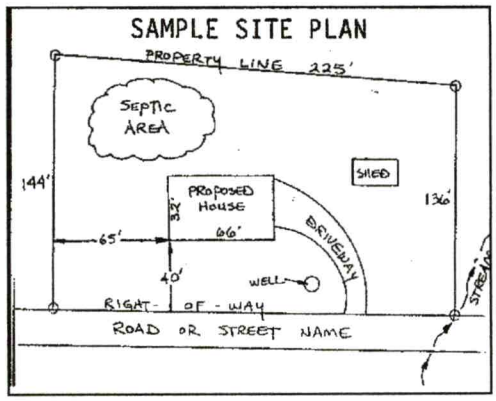
Signature: Wendell Cy 6-30-20
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

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

Signature: Wendell Cg

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

6-30-20

DATE

ENVIRONMENTAL HEALTH REQUIREMENTS for SEPTIC and WELL PERMITS

The following items must be completed *PRIOR* to the *SUBMITTAL* of any Environmental Health Application. Incomplete applications will be returned to the applicant and cannot be processed or placed on the work list.

*** Initial all lines below to indicate you have submitted each form and completed every site requirement ****

WO **Complete all Environmental Health forms**:

- WO Application
- WO Site Plan including the dimensions of proposed structure, addition, pool etc.
- WO Documentation to Authorize Owner Agent (even if the property owner is the applicant – complete section 1 or 2)
- WO Copy of Zoning Permit when applicable
- WO Sign this sheet after you have completed all items

WO **Lot must be cleared of heavy undergrowth**. In order to evaluate the lot, the footprint of the proposed structure must be visible. Adequate area for the septic drain field and repair area must be sufficiently cleared of heavy undergrowth, with 50 feet of visibility in all directions. Inspectors must be able to evaluate the property, shoot laser level elevations, layout the drain field, do soils work, etc. **If the lot is not cleared sufficiently, then a $100 site revisit fee will be charged and the evaluation will be put on HOLD until the requirement is met.**

WO **Clearly mark all property corners by locating existing iron or concrete markers.** Flag all property lines every 25 feet if adjacent corners are not visible when standing on any given corner. Property lines must be flagged by a licensed NC surveyor & easily identified **prior to application submittal** (exception may apply for septic repair evaluations only). 'Mow lines' and/or fence lines do NOT constitute marked lines. **If the property lines are not properly marked when the lot is ready to be evaluated, then the application will be put on HOLD and a $100 site re-visit fee charged**.

WO **Stake or flag the footprint of the proposed structure, addition, pool etc. to match the site plan submitted**. The proposed structure, etc. must be staked out on the property as per the site plan.

WO **If an Authorization to Construct (AC) is desired,** submit a recorded copy of the plat for newly created or subdivided lot(s) and a LEGIBLE copy of the basic floor plan no larger than 8 ½" x 14" for each floor of the structure including decks, porches, etc. **The overall dimensions must be clearly noted & the rooms labeled.**

Any site not meeting the above requirements when staff arrives for the evaluation will result in a $100 site revisit fee being charged and the request being placed on HOLD. This will delay the processing of the application. *Once work by Environmental Health staff begins, the up-front fees paid toward securing any health department permit are nonrefundable. Refunds for work not started, due to a customer changing their mind or plans, are subject to an administrative fee of $50 to defray a portion of the costs of processing the refund.*

Backhoe pits are required for all applications that require a soils evaluation.
DO NOT DIG PITS UNTIL THE EH SPECIALIST HAS AUTHORIZED AND SCHEDULED YOUR EVALUATION TIME.

- **All utilities shall be marked before pits are dug. Call NC 811 for this service.**
- The applicant/agent is responsible for securing these services
- Backhoe pits are to be dug at the locations and depths determined by the Environmental Health Specialist or a NC Licensed Soil Scientist. A minimum of four pits must be dug.
- The EH specialist will contact you when your application is ready to be processed for pit scheduling.
- Your backhoe operator must be on site during the EH Specialist's evaluation to prevent your operator from having to return to the property for additional work.

By signing below, I am acknowledging the above specifications have been met and the site is READY to be evaluated AND I understand the backhoe pit requirement and will secure those services (if applicable).

Signature Wendelly **Date** 6/30/20

Questions? Contact the Environmental Health Offices below:

Statesville Office
349 North Center Street (2nd Floor Building Standards)
Statesville, NC 28677-4063
Phone: (704)878-5305 ext. 3456

Mooresville Office
610 East Center Avenue (2nd Floor Govt. Center South)
Mooresville, NC 28115-2548
Phone: (704)660-3625

Public Health
Iredell County Health Department

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public Health
Iredell County Health Department

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, Chad Poggs/A+L Properties, am the legal owner(s) of the property located at _____, identified as PIN (Parcel Identification Number) 4772316526, located in Iredell County, North Carolina.

I do hereby authorize **(print legal representative/company name)** WENDEL OVERBY SOIL & FORESTRY 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.

_____ 6-30-20
Signature of Owner(s) Date

Mooresville - Environmental Health

Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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

IREDELL COUNTY · NC

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

APPLICATION NUMBER
308792 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4772376526.000	423 TRIPLETT RD	Iredell County

Owner Information	Applicant Information
Name: A+L PROPERTIES OF MOORESVILLE LLC	Name: A & L PROPERTIES
Address:	Address: 214 WOOD DUCK LOOP
,	MOOREVILLE , NC 28117
Phone:	Phone: (704)400-9598

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
2.05	35	35	15	15	N/A	NO

Remarks
SFD NEED DISCLAIMER

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.

Signature of Owner/Contractor

Date: 07/07/2020

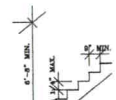
Permit Number	308792	TOTAL FEES:	$77.25

Acknowledgement Of Plans Submittal ONLY!
Date 8-5-20
Date 8/14/2020

PLAN NOTES:

1. VERIFY ALL LOCAL CODES, ENERGY TYPE I, AND SITE CONDITIONS PRIOR TO CONSTRUCTION.
2. REVIEW SELECTED MECHANICAL SYSTEMS WITH OWNER PRIOR TO CONSTRUCTION.
   RECOMMENDED LOCATIONS ARE AS FOLLOWS:
   THE WATER HEATER MAY TYPICALLY BE PLACED IN THE CRAWL SPACE OR IN THE GARAGE.
   H.V.A.C. UNIT(S) MAY TYPICALLY BE PLACED IN THE CRAWL SPACE OR IN THE ATTIC FOR ON STORY HOUSES, IN THE CRAWL SPACE FOR THE FIRST FLOOR AND IN ATTIC FOR THE SECOND FLOOR IN TWO STORY HOUSES.
   H.V.A.C. EQUIPMENT IN ATTIC SPACE SHALL BE ACCESSIBLE BY AN OPENING AS LARGE AS THE LARGEST PIECE OF EQUIPMENT AND IN NO CASE LESS THAN 22"X36".
3. SEE STRUCTURAL DRAWINGS FOR ADDITIONAL INFORMATION.
4. INSULATE AROUND ALL BATHS AND UTILITY ROOM.
5. TYPICAL WALL 2X4'S @ 16" O.C. UNLESS OTHERWISE DIMENSIONED.
6. PROVIDE SMOKE DETECTORS AS REQUIRED BY CODE.
7. PROVIDE DOORBELLS, TRANSFORMER, AND CHIME.
8. ALL LIGHTS SHALL BE 14" TH 130 SPACED AT 16" ON CENTER UNLESS NOTED OTHERWISE.

STANDARD DETAIL



TYPICAL STAIR DETAIL

SCALE: 1/4" = 1'-0"

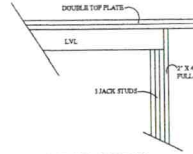
STANDARD DETAIL



TYPICAL HANDRAIL DETAIL

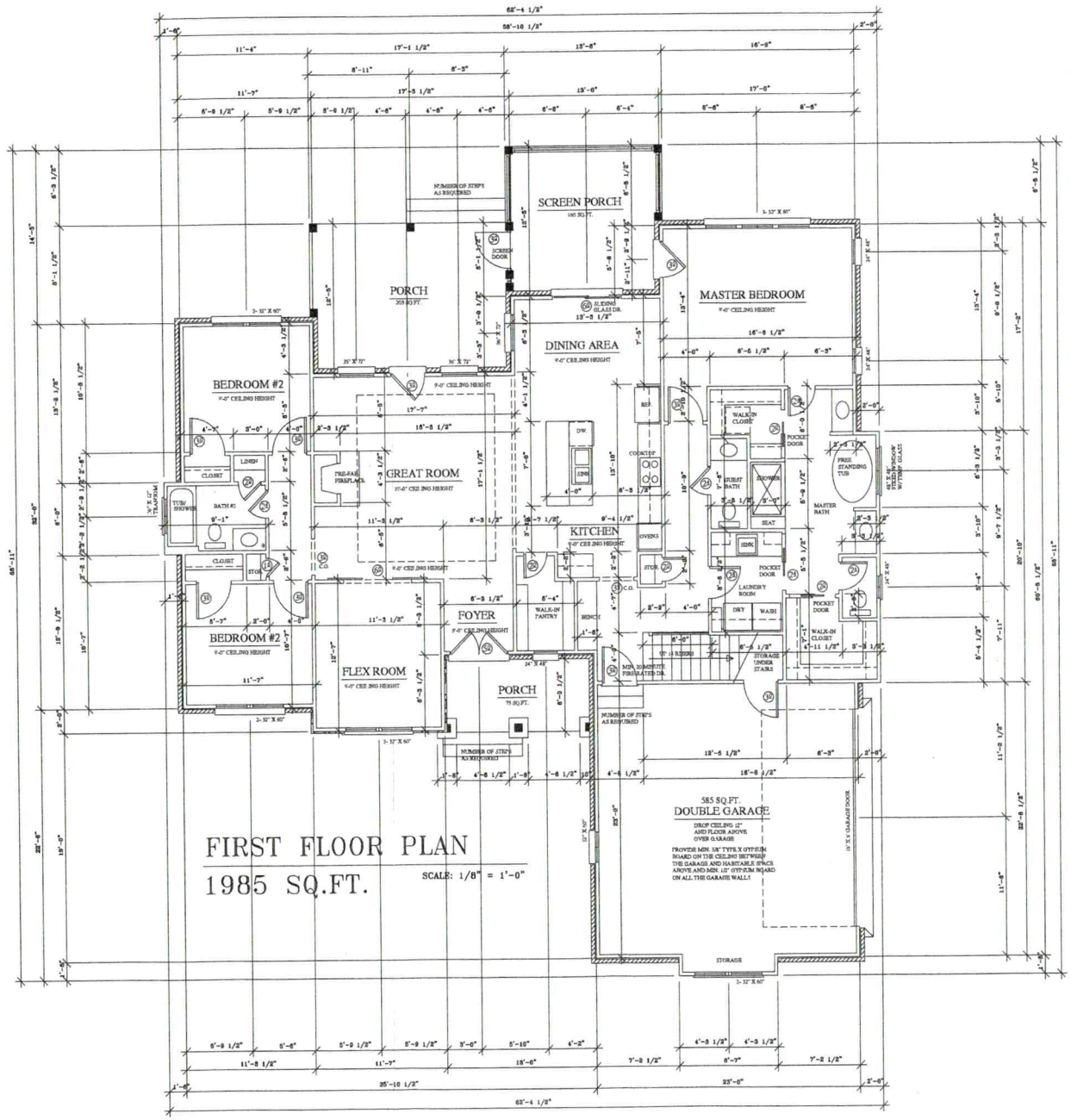
SCALE: 1/4" = 1'-0"

STANDARD DETAIL



DETAIL LVL SUPPORT

SCALE: 1/8" = 1'-0"



FIRST FLOOR PLAN

1985 SQ.FT.

SCALE: 1/8" = 1'-0"

N

Gray Design

CONTRACTOR SHALL CHECK AND VARIFY ALL DIMENSIONS BEFORE BEGINNING CONSTRUCTION AND COORDINATE ANY CORRECTIONS OR REVISIONS WITH THE OWNER AND DESIGNER. JEFFREY D. GRAY WILL ASSUME NO LIABILITY FOR ANY ERRORS ONCE CONSTRUCTION BEGINS.

PROJECT:

Brown Residence

DATE: MAY 31, 20

REVISION:

FILE NUMBER
2020-BROWN

SHEET:
4
OF: 6