IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3825 PERMIT # 18406

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

PIN # 4773-40-8015.000

APPLICANT: Clayton Homes of Statesville APPLICANT ADDRESS: 2026 Northside Dr. Statesville NC

SITE ADDRESS: 151 Brown Farms Dr. Cleveland NC 27013 PHONE: 704-873-2547 ALT. PHONE: 704-677-8903

SITE DIRECTIONS: Hwy 70 E. TR Triplett Rd TR Brown Farms, Site on L

SUBDIVISION: TR Brown Farms SECTION: 3 LOT # 20 LOT AREA: .856 Acre DESIGN FLOW: 360 GPD L.T.A.R.: .275 I / .25 R

Septic Tank	1000 (gal)	STB	H2O	Date	7-4
Pump Tank	1000 (gal)	PT		Date	7-6
Pump Make		Model		Serial #	
# Nitrification Fields	1	# Lines	7 @ 31.2'	Linear Ft:	218'
Trench Width	24"	Max. Trench Bottom Depth	36"	Gravel Depth	N/A

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

System Description: PPBPS - Pressure Manifold

Repair System Description: LP-PPBPS

Maintenance Agreement Required: ☐ YES ☒ NO

☐ GRAVITY ☒ PRESSURE

☒ Residence No. Bedrooms 3

☐ Business No. Persons 6

☐ Other No. Employees

☐ Slab ☒ Crawl Space

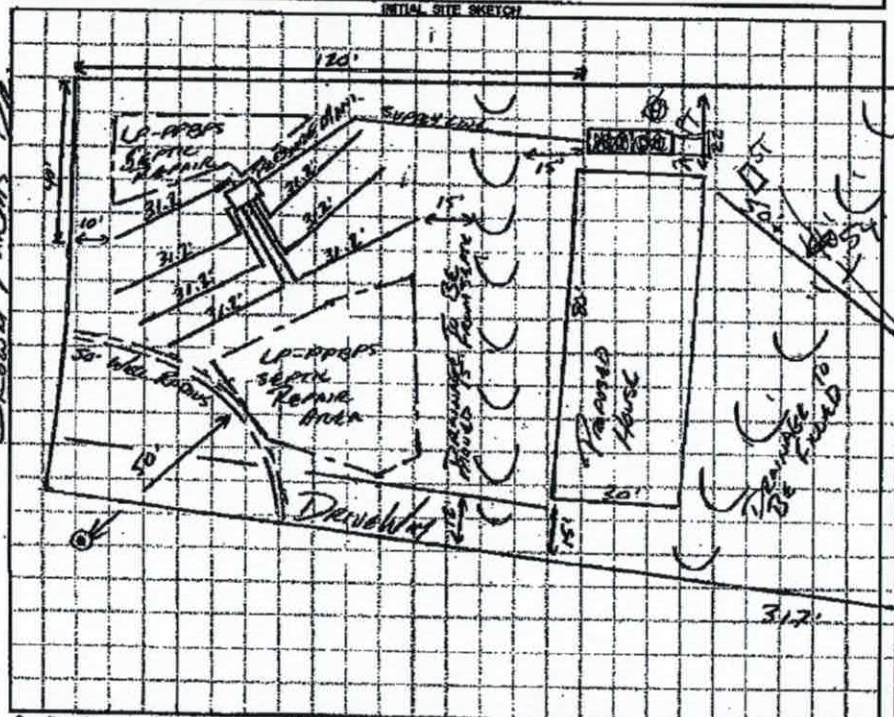
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

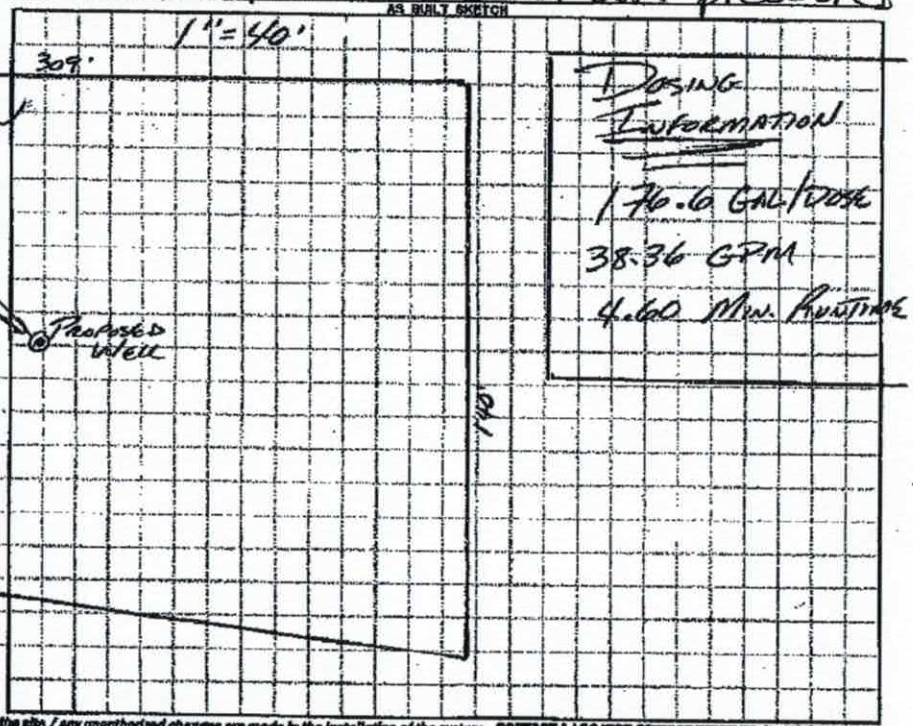
Comments / Conditions: Drainage swales to be diverted 15' from septic initial & repair area. Drainage at rear of proposed house is to be filled. Use 1½" Sch. 80 taps.

No Foundation Drain To Be Used Around Home.
12|19|16 Drainlines 5 ft to Neighbor's well
S1 - 52 ft to well
Checked S1, drainlines @ sat 2 ft pressure

INITIAL SITE SKETCH



AS BUILT SKETCH



Dosing Information

176.6 Gal/Dose

38.36 GPM

4.60 Min. Runtime

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 plot 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 mos.

Owner / Applicant Signature: Date: 7-29-2016 Installed by: Bryants Contracting

IMPROVEMENT PERMIT by: APPROVED JUL 22 2016 OPERATION PERMIT by: Maria Dotson Date: 12/29/16

AUTHORIZATION TO CONSTRUCT by: APPROVED JUL 22 2016 Existing System Inspected by: Date:

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

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

Sheet 1 of 3
PROPERTY ID #:
COUNTY:

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

OWNER: Jerry Brown
ADDRESS: 3044 Salisbury Rd Sve NC
PROPOSED FACILITY: SFR
PROPOSED DESIGN FLOW (.1949): 360 GPD
LOCATION OF SITE: JL Brown Farms Lot 20
APPLICATION DATE: 4/26/16
DATE EVALUATED: 7/10/16
PROPERTY SIZE: .856 Acre
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	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	CV 7%	0-48	RC, ABK	Fi/Fr, SS, SP	/	48"	/	/	.275 - .3
2	SS 8%	0-48	RC, ABK	Fi/Fr, SS, SP	/	48"	F SAP INCL.	/	.275
3	TS	0-9	BLC, ABK	Fr, SS, SP	FEW 4/B's	58"	F SAP INCL.	/	.25
		9-58	RC, ABK	Fi, S, P					
4	TS 2%	0-54	RC, ABK/WSBK	Fr, SS, SP	/	54"	F SAP INCL.	/	.275

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	Approved	Approved
Site LTAR	.275	.25

OTHER FACTORS (.1946): —
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: SC
OTHER(S) PRESENT: Vinnie (Clayton Homes) Chris Hagar

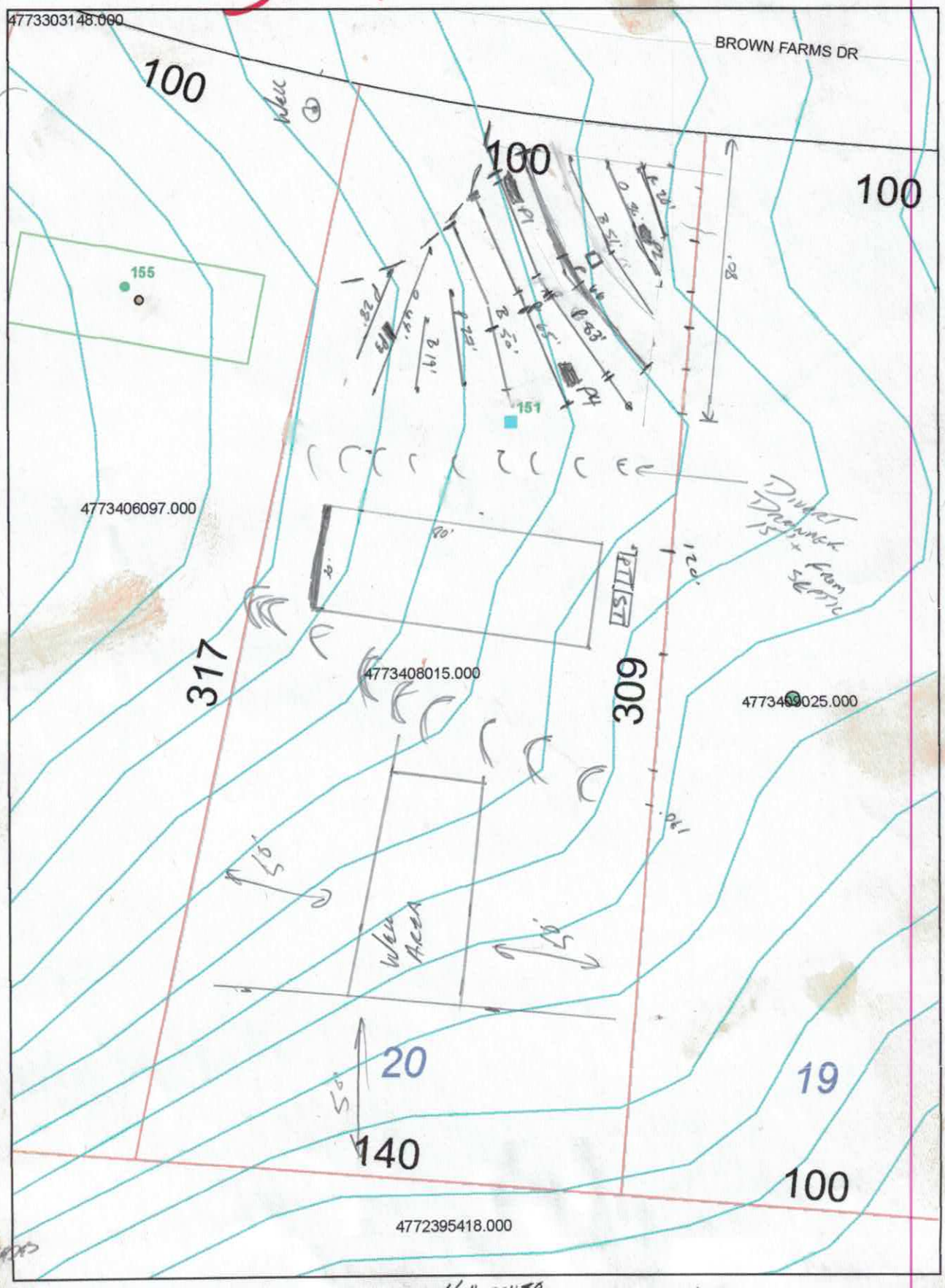
COMMENTS: P3 has stump hole on one side of pit

Soil Notes

3/3

1 inch = 40 feet

1:480



R 26'
B 47'
P 62'
O 83'
R 53'
B 45'
P 47'
O 26'

R 20'
O 36'
B 51'
P 66'
O 83'
P 65'
B 50'
P 27'
B 19'
O 44'
P 28'

489'

458 NEEDED

31' EXTRA

31' LINES w/ 7 LINES
7 PANEL PER DITCH

1/2" SCH80 TOPS 38.36

49 TOTAL

176.4 GAL/ROLL

~~2.91 3/16"~~ 214

~~10 PSI~~ 240

INITIAL @ .275

REPAIR @ .25

4
U
3
28

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

(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)

1. **APPLICATION FOR:** ___Improvement Permit ___Authorization To Construct ___Existing System Inspection

2. **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 check ( ) beside whichever is submitted if applicable ___Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. **Applicant Information:**

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Clayton Homes of Statesville	2026 Northside Drive Statesville NC 28625	704-873-2547	704-677-8903
Terry Brown	3044 Salisbury Hwy Statesville NC 28677		

4. **Property Information:**

Street Address	Subdivision Name	Section/Phase and Lot Number
151 Brown Farms Drive Cleveland NC 27013	J R Brown Farms	3/20

Driving Directions: Hwy 77 South to Hwy 70 East make a Right on Triplett Rd. Right on Brown Farms. Lot on the left.

5. **RESIDENTIAL Site Development Information:** *(Check or Complete ALL that apply)*

(X) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
( ) Repair To Failing Septic System due to _____
( ) Other _____

Maximum Number of Bedrooms 4 3 Bedroom
Maximum Number of Occupants 6 VGN
If Expansion, Current Number of Bedrooms ___

(X) Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) Basement w/Plumbing?
( ) Basement w/out Plumbing?

IF Non-Residential Site Development:
Type of Business _____
Square Footage of Building _____
Maximum Number of Employees _____
Maximum Number of Seats _____

6. **Proposed Water Supply:**

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

7. **Desired Septic System Type:** *(You may rank in order of preference, if any)* ( ) EXISTING SYSTEM installed _____ *Year*

( ) Alternative (X) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other_____

8. **Please Answer The Following** ( ) Yes (X) No Does the site contain any jurisdictional wetlands?
   To The Best of Your Ability: ( ) Yes (X) No Is any non-domestic sewage (i.e. industry) to be generated?
   (X) 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.

9. **Signature:** Jerry C Brown 4/26/2016
   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

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, Jerry Brown, am the legal owner(s) of the property located at Clayton Homes / Vinnie Nathaniel 151 Brownfarms Drive Cleveland, NC., identified as PIN (Parcel Identification Number) 4773-40-8015, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Vincent Nathaniel Clayton Homes, 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.

Jerry C Brown 4/26/2016 4/26/2016

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*:

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…**

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

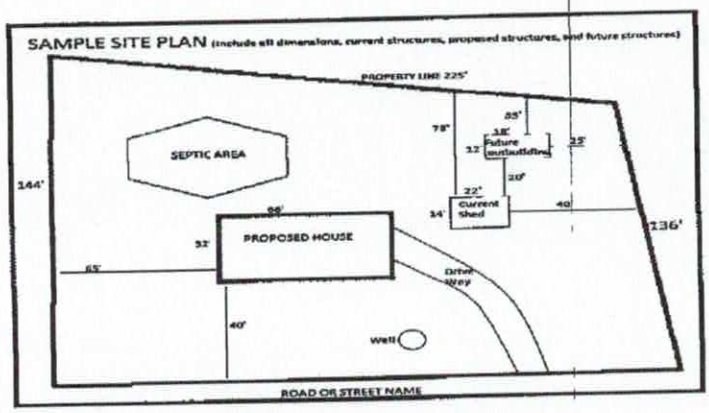
_____ Front and side setbacks from property line… **_____ Preferred driveway location and configuration, preferred well location…**

_____ 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

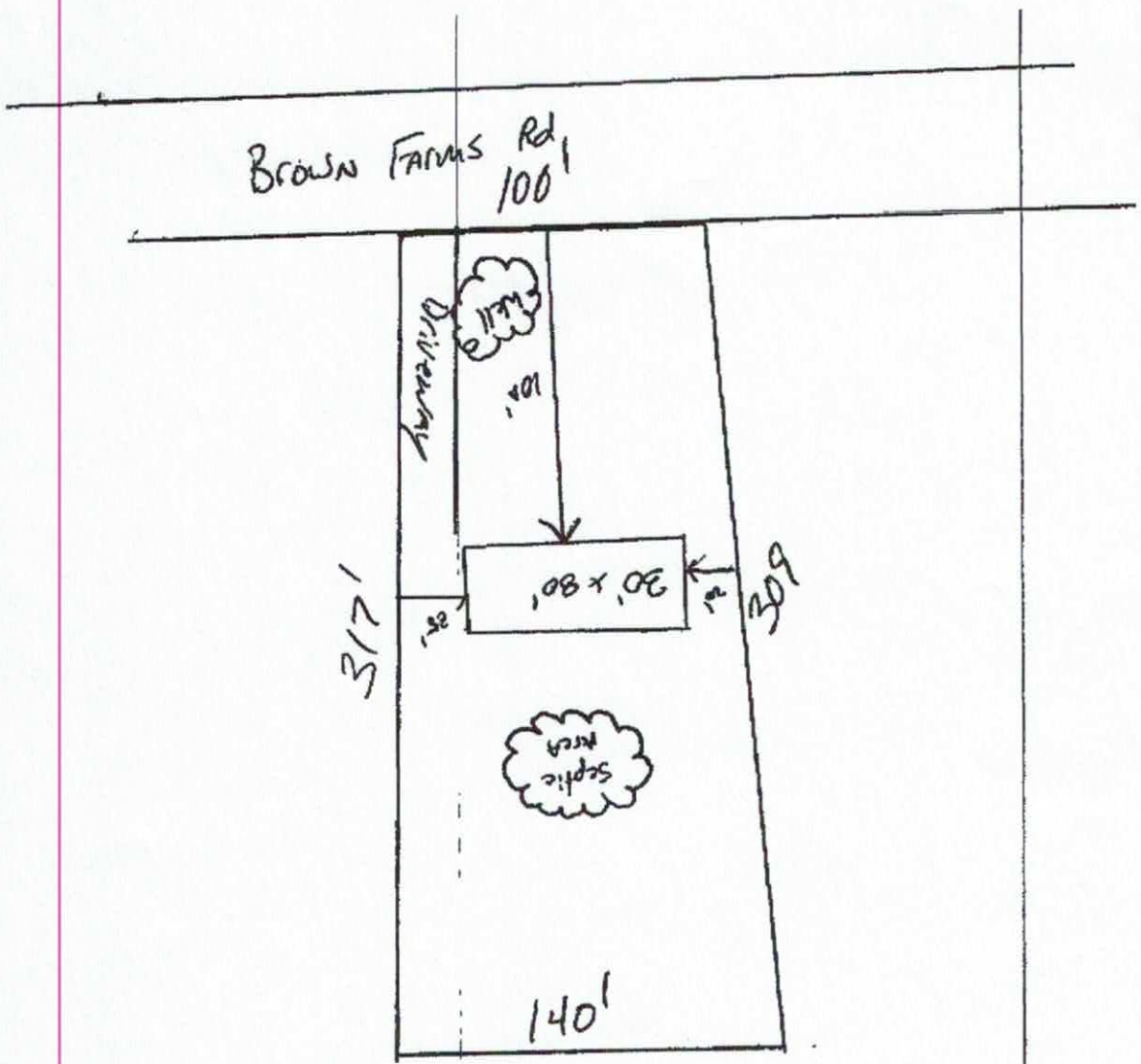
See Attached Form

Signature: _____

REQUIRED property owner or owner's legal representative signature.

4/27/2016

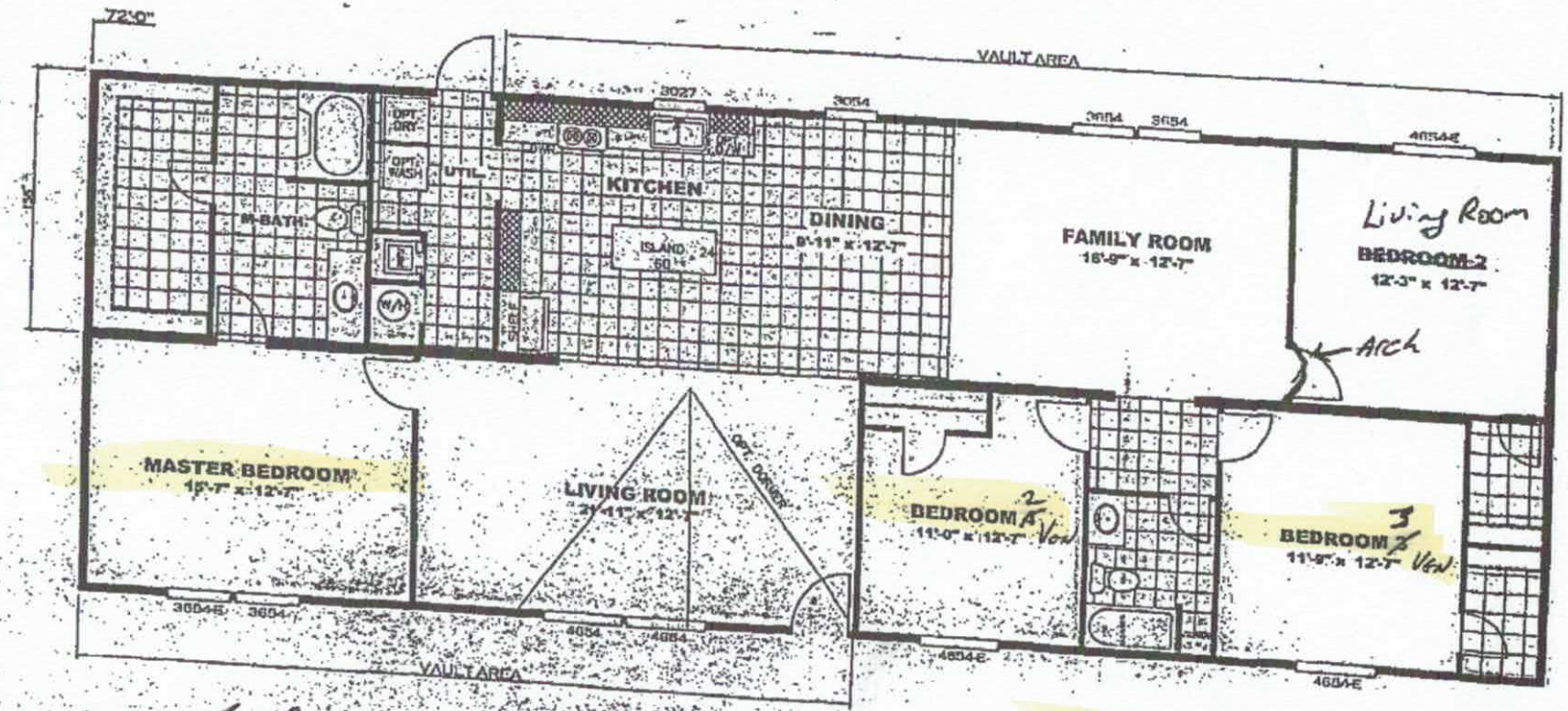
DATE


Brown Farms Rd
100'
Driveway
Well
104'
30' x 80'
25'
317'
309'
Septic Area
140'

APPROVED JUL 22 2016

Encore

Jerry C. Brown



7-29-2016

28' X 72'

IREDELL COUNTY

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

APPLICATION NUMBER
218406
Issue Date: 04/28/2016

ZONING PERMIT
Open Space

Parcel Number	Street Address	Jurisdiction
4773408015.000	151 BROWN FARMS DRIVE, CLEVELAND, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: BROWN JESSE D SR+KAY M	Applicant: CLAYTON HOMES OF STATE
Address: 310 TRIPLETT RD CLEVELAND, NC 27013	Address: 2026 NORTHSIDE DR STATESVILLE, NC 28677
Phone:	Phone:

Use Requested	Zone Code
DOUBLE WIDE HOME	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.856	35.00	35.00	15.00	15.00	NOT	X

Remarks:

$ PAID ck 5583 577.00 .25¢ cash

REQUIREMENTS FOR ALL MULTI -SECTIONAL MOBILE HOMES Minimum size of main body is at least 22 feet by 40 feet; Must have standard residential shingles; Minimum of 3/12 roof pitch; Must have continuous masonry underpinning; Must have minimum roof eave and raker projections of 6 inches; Must have a 36 square foot deck or porch at all front and rear entrances; Exterior siding must consist of vinyl or aluminum lap siding, wood, or hardboard, comparable in composition, appearance and durability to residential siding; Must remove towing apparatus; Must face front property line and be no less than 20 degrees from parallel to the front property line. Original mobile home must be removed before Certificate of Occupancy can be approved.

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: *See Attached* Date: _____

Permit Number	67209	TOTAL FEES:	$ 77.25