BLDR-2022-10215

ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # OSWP-2022-1373

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

PIN # 4774-09-3021

APPLICANT / OWNER: HELMSMAN HOMES, LLC | APPLICANT ADDRESS: PO Box 3965, MOORESVILLE, NC 28117

SITE ADDRESS: 162 SALEM SPRINGS LN, STATESVILLE, NC 28625 | PHONE: 7043636038 | ALT. PHONE: (980) 500-1251

SITE DIRECTIONS: 64 -> R New Salem -> R Salem Springs -> lot on R | SAP CONTROLLED: YES ☐ NO ☑

SUBDIVISION: Salem Springs | SECTION: | LOT #: 9 | LOT AREA: 0.605 | DESIGN FLOW: 360 | L.T.A.R.: 0.25

Septic Tank: 1000 (gal)	STB: 760	Date: 7/11/23	☐ New System ☐ Repair ☐ Expansion	System Type:	☑ Residence	No. Bedrooms: 3	Water Supply: City Water
Pump Tank: (gal)	PT:	Date:	System Description: 25% Reduction		☐ Business	No. Persons: 6	
Pump Make:	Model:	Serial #:	Repair System Description: 50% Reduction		☐ Other	No. Employees:	
# Nitrification Fields:	# Lines: 4	Linear Ft.: 360	Maintenance Agreement Required: ☐ YES ☑ NO		☑ Slab	☐ Crawl Space	
Trench Width: 36	Trench Bottom Depth (Low side): 34		Gravel Depth:	☑ GRAVITY ☐ PRESSURE	☐ Basement w/ Plumbing	☐ Basement w/o Plumbing	

Comments / Conditions:

INITIAL SITE SKETCH

This permit is issued pursuant to G.S. 130A-335(a2), (a3) & (a4) using the signed and sealed LLS/LG Evaluation attached here, from:

Gene Young LEY

LSS# 1080 / 10005E

AS BUILT SKETCH

See attached for as built

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

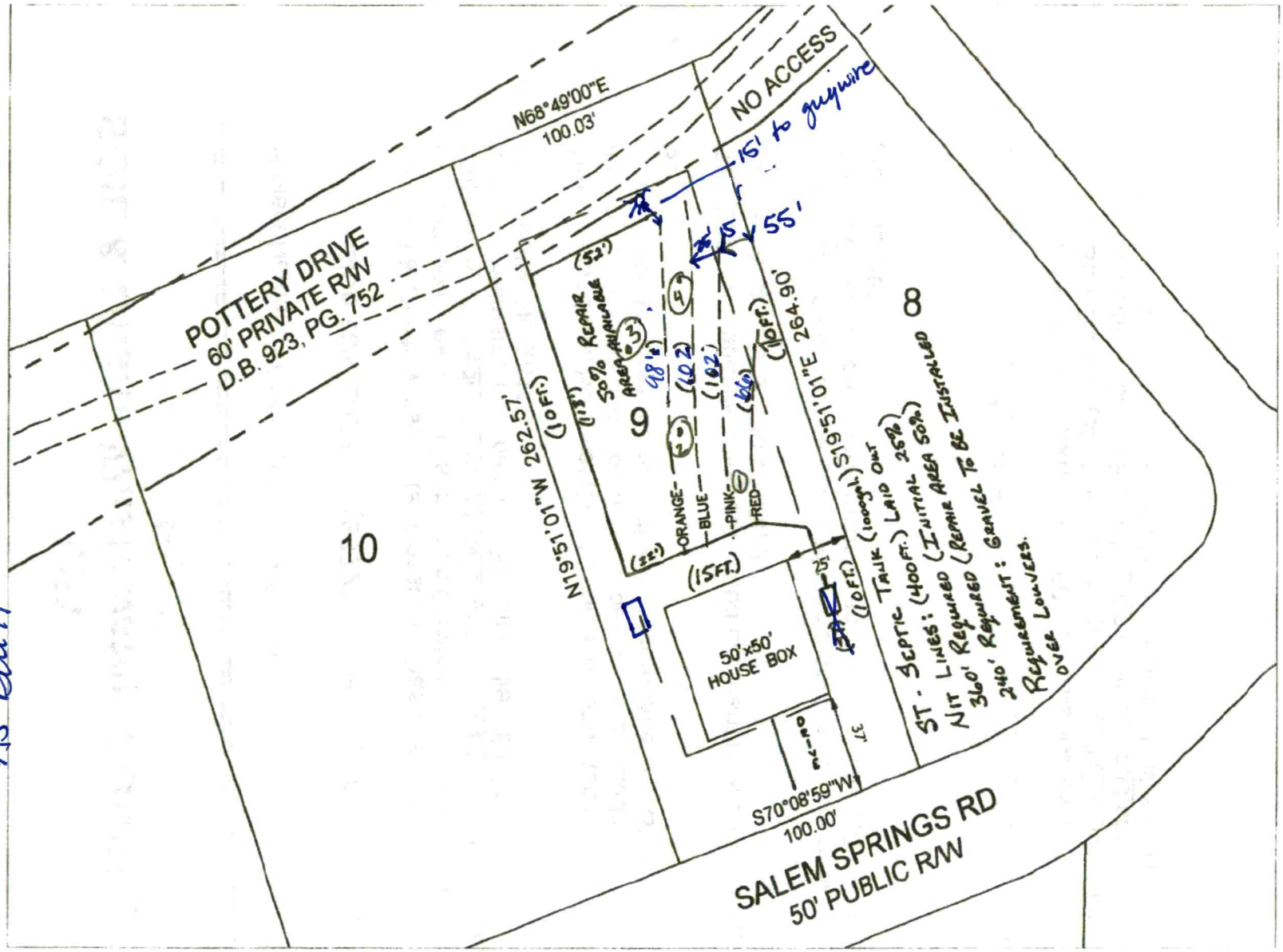
☐ IMPROVEMENT PERMIT with plat valid without expiration. ☑ IMPROVEMENT PERMIT with site plan valid for 60 mos. ☑ AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT–not to exceed 60 mo.

Owner / Applicant Signature: | Date: 11/23/2022 | Installed By: Specialty Septic

IMPROVEMENT PERMIT by: Ben Botkins | Date: 8/9/22 | OPERATION PERMIT by: D. Imesby | Date: 8/22/23

AUTHORIZATION TO CONSTRUCT by: Ben Botkins | Date: 8/9/22 | Existing System Inspected By: | Date:

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 BETWEEN 8am-9am the day the inspection is needed.



As Built

Salem Springs Subdivision Lot 9 Septic Site Plan

Base site plan from Salem Springs Subdivision Plans provided by Jordan Grant & Associates.

GRAPHIC SCALE

0 25 50 100

1 inch = 50 feet

LEY
SOIL & Onsite Wastewater CONSULTING PLLC

Project Name: SALEM SPRINGS LOT 9 Date: 7-27-22

Session Law 2022-11 (S372), AUTHORIZATION FORM

LEY Soil & Onsite Wastewater Consulting has been contracted to evaluate soil, design, and submit an Onsite Wastewater system proposal to the Iredell County Environmental Health Department on behalf of Helmsman Homes, 116 Gasoline Alley, STE 105, Mooresville, NC 28117

The Licensed Soil Scientist (LSS) Evaluation attached to this application is to be used to produce, design, and include construction features for permitting in accordance with SL 2022-11, S372

"The LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2).

"The plans or evaluations attached to this application are to be used to issue a Construction Authorization in accordance with G.S. 130A-335(a2), (a5) and (a6).

Tim Carr
Owner Signature

Gene Young--(336)-909-9060 geneleysoils@icloud.com
Gary Easter--(336)-909-9058 garyleysoils@icloud.com
Jeff Link--(336)-909-8624 jeffleysoils@icloud.com
NC Licensed Soil Scientist, AOWE, NC Environmental Health Specialist

BLDR-2022-10215

County: Iredell

This Section for Local Health Department Use Only

Initial submittal received: 8/18/2022 *Date* by BB *Initials*

Permit Number: OSWP -2022- 0689

162 Salem Springs Lot 9.

G.S. 130A-335(a6) states the following: *'If a local health department fails to act on an application for a construction authorization submitted pursuant to subsection (a5) of the section within 10 business days of receipt of a complete application, the local health department shall issue the construction authorization.'*

In accordance with G.S. 130A-335(a5) the construction authorization application is:

☐ Incomplete (If box is checked, information in this section is required.)

The following items are missing: _____

_____

Copies of this were sent to the AOWE/PE and the Owner on _____ *Date*

State Authorized Agent: _____ Date: _____

☐ Denied (See attached report.)

Copies of this were sent to the AOWE/PE and the Owner on _____ *Date*

State Authorized Agent: _____ Date: _____

☑ Complete

State Authorized Agent: Benjamin A. Botkins Date of Issuance: 8/19/2022

This Construction Authorization is issued pursuant to G.S. 130A-335(a2), (a5), and (a6) using the signed and sealed plans or evaluations attached here. This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes, or if information submitted in the application was falsified, inaccurate or misleading. The Construction Authorization shall not be affected by a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. The location and identification of all property lines, easements, water lines, and other appropriate utilities shall be the responsibility of the owner. Final landscaping shall be constructed to divert water and establish vegetative cover.

The Department, the Department's authorized agents, and the local health departments shall be discharged and released from any liabilities, duties, and responsibilities imposed by statute or in common law from any claim arising out of or attributed to plans, evaluations, preconstruction conference findings, submittals, or actions from a person licensed pursuant to Chapter 89C of the General Statutes as a licensed engineer or a person certified pursuant to Article 5 of Chapter 90A of the General Statutes as an Authorized On-Site Wastewater Evaluator in GS 130A-335(a2), (a5), and (a7). The Department, the Department's authorized agents, and the local health departments shall be responsible and bear liability for their actions and evaluations and other obligations under State law or rule, including the issuance of the operations permit pursuant to GS 130A-337.

Construction Authorization Expiration Date: 8/19/2027

See attached site sketch

County: Iredell

CONSTRUCTION AUTHORIZATION FOR G.S. 130A-335(a2)/SL2022-11

PIN/Lot Identifier: 4774-09-3021

Issued To: Helmsman Homes

Property Location: 162 Salem Springs Road TR, lot 9

AOWE/PE Plans/Evaluations Provided: Yes ☑ No ☐ If yes, name and license number of AOWE/PE: Gene Young, 10005E

Facility Type: House

☑ New ☐ Expansion ☐ Repair ☐ System Relocation

Basement? ☐ Yes ☑ No Basement Fixtures? ☐ Yes ☑ No

Type of Wastewater System** 25% Reduction (Initial) PPBPS (Repair)

Design Daily Flow: 360 GPD Wastewater Strength: ☑ domestic ☐ high strength ☐ industrial process

Session Law 2014-120 Section 53, Engineering Design Utilizing Low-flow Fixtures and Low-flow Technologies? ☐ Yes ☑ No

Installation Requirements/Conditions

Septic Tank Size: 1000 gallons Total Trench/Bed Length: 360 feet Trench/Bed Spacing: 9 feet on center

Drainfield square footage: 1440 Trench/Bed Width: 36 inches LTAR: .25 gpd/ft²

Soil Cover: 22 inches Slope Adjusted Maximum Trench/Bed Depth: 34 inches

Aggregate Depth: _____inches above pipe _____inches below pipe 6 inches total

Pump Tank Size (if applicable): _____ gallons Requires more than 1 pump? ☐ Yes ☑ No

Pump Requirements: _____ ft. TDH vs. _____ GPM Grease Trap Size (if applicable): _____ gallons

Distribution Method: ☑ Serial ☐ D-Box or Parallel ☐ Pressure Manifold(s) ☐ LPP ☐ Other: _____

Artificial Drainage Required: Yes ☐ No ☑ If yes, please specify details: _____

Legal Agreements *(If the answer is "Yes" to any type of legal agreements, please attach a copy of the agreement.)*

Multi-party Agreement Required [.1937(h)]: ☐ Yes ☑ No

Easement, Right-of-Way, or Encroachment Agreement Required [.1938(j)]: ☐ Yes ☑ No

Declaration of Restrictive Covenants: ☐ Yes ☑ No

****If applicable:**

I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit.

Owner/Legal Representative Print Name: _____

Owner/Legal Representative Signature: _____ Date: _____

Pre-Construction Conference Required: Yes ☑ No ☐

Conditions: See attached installer information sheet, Iredell County permission to change septic tank location and distribution type

The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .1959 are incorporated by reference into this permit and shall be met. Systems shall be installed in accordance with the attached system layout.

AOWE/PE Print Name: Gene Young AOWE

AOWE/PE Signature: Gene Young AOWE Date: 7-27-22

NC ONSITE WASTEWATER EVALUATOR — GENE YOUNG AOWE 10005E

This AOWE/PE submittal is pursuant to and meets the requirements of G.S. 130A-335(a2) and (a5).

See attached site sketch

LEY
SOIL & Onsite Wastewater CONSULTING PLLC

Project Name: Salem Springs Lot 9 Date: 7-27-22

Session Law 2022-11 (S372), AUTHORIZATION FORM

LEY Soil & Onsite Wastewater Consulting has been contracted to evaluate soil, design, and submit an Onsite Wastewater system proposal to the Iredell County Environmental Health Department on behalf of Helmsman Homes, 116 Gasoline Alley, STE 105, Mooresville, NC 28117

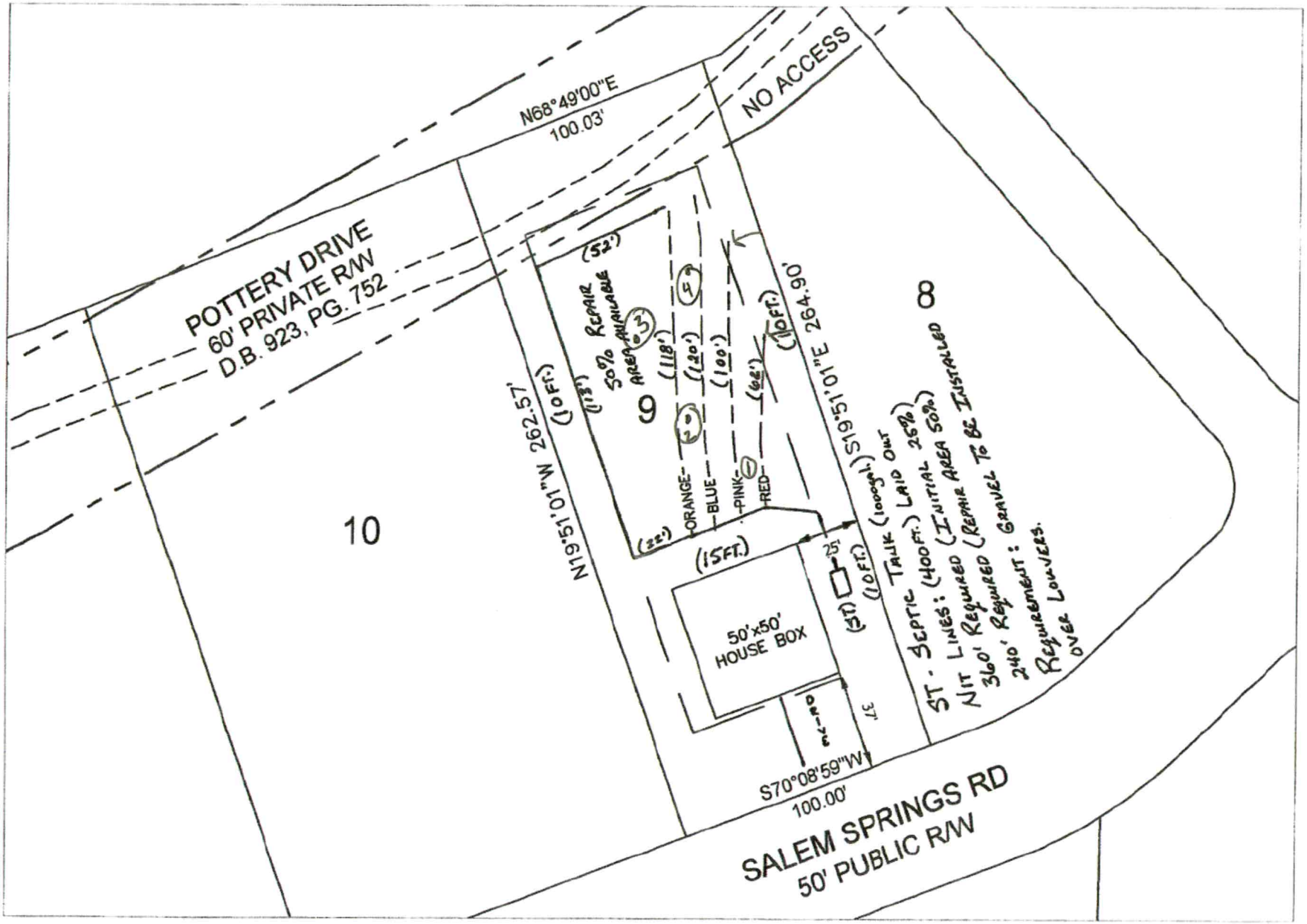
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NC Licensed Soil Scientist, AOWE, NC Environmental Health Specialist



Salem Springs Subdivision Lot 9 Septic Site Plan

Base site plan from Salem Springs Subdivision Plans provided by Jordan Grant & Associates.

GRAPHIC SCALE

0 25 50 100

1 inch = 50 feet

Sheet ____ of ____
PROPERTY ID #: ____
COUNTY: IREDELL

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

OWNER: NEST HOMES / SALEM SPRINGS / HELMSMAN HOMES APPLICATION DATE 2/10/22
ADDRESS: 236 RACEWAY DR. SUITE 7 DATE EVALUATED: ____
PROPOSED FACILITY: 3BR/HSE PROPOSED DESIGN FLOW (.1949): 360 PROPERTY SIZE: ____
LOCATION OF SITE: HWY 64 onto NEW SALEM RD. RT. ON SALEM SPRINGS RD. PROPERTY RECORDED: ____
WATER SUPPLY: . Private . Public . Well . Spring . Other ____
EVALUATION METHOD: . Auger Boring (Pit) . TYPE OF WASTEWATER: . (Sewage) Industrial Process . Mixed

(LOT # 9)

Landscape Position (1940)	L	L	L	L						
Slpoe%	< 4%	< 4%	< 4%	< 4%						
H 1 Depth (1943)	0-12"	0-10	0-8	0-10						
H1 texture 1941	SCL	SCL	SCL	SCL						
H1 Structure 1941	GR	GR	GR	GR						
H1 Consistance 1941	FR SSSP	FR SSSP	FR SSSP	FR SSSP						
H1 Mineralogy 1941	SEXP	SEXP	SEXP	SEXP						
H 2 Depth (1943)	12-48	10-48	8-46	10-38						
H2 texture 1941	C	C	C	C						
H2 Structure 1941	Blky	Blky	Blky	Blky						
H2 Consistance 1941	FI SP	FI SP	FI SP	FI SP						
H2 Mineralogy 1941	SEXP	SEXP	SEXP	SEXP						
H 3 Depth (1943)	48-60	48-55	46-58	38-52						
H3 texture 1941	C/BC	C/BC	C/BC	C/BC						
H3 Structure 1941	Blky	Blky	Blky	Blky						
H3 Consistance 1941	FI SP	FI SP	FI SP	FI SP						
H3 Mineralogy 1941	SEXP	SEXP	SEXP	SEXP						
H 4 Depth (1943)										
H4 texture 1941										
H4 Structure 1941										
H4 Consistance 1941										
H4 Mineralogy 1941										
LTAR	.25	.25	.25	.25						

Description	Initial System	Repair	Other Factors 1946
System Type	25%		Site Classification 135'
LTAR	.25	.25	

LICENSED SOIL SCIENTIST
GENE YOUNG
1080
STATE OF NORTH CAROLINA

Evaluated by GARY EASTER JEFF LINK, Gene Young

Installer Information

Be sure to read the permit very carefully before submitting bid.

The following details must be considered along with all other considerations:

Preconstruction Conference required with the installer, contractor, and AOWE before installation

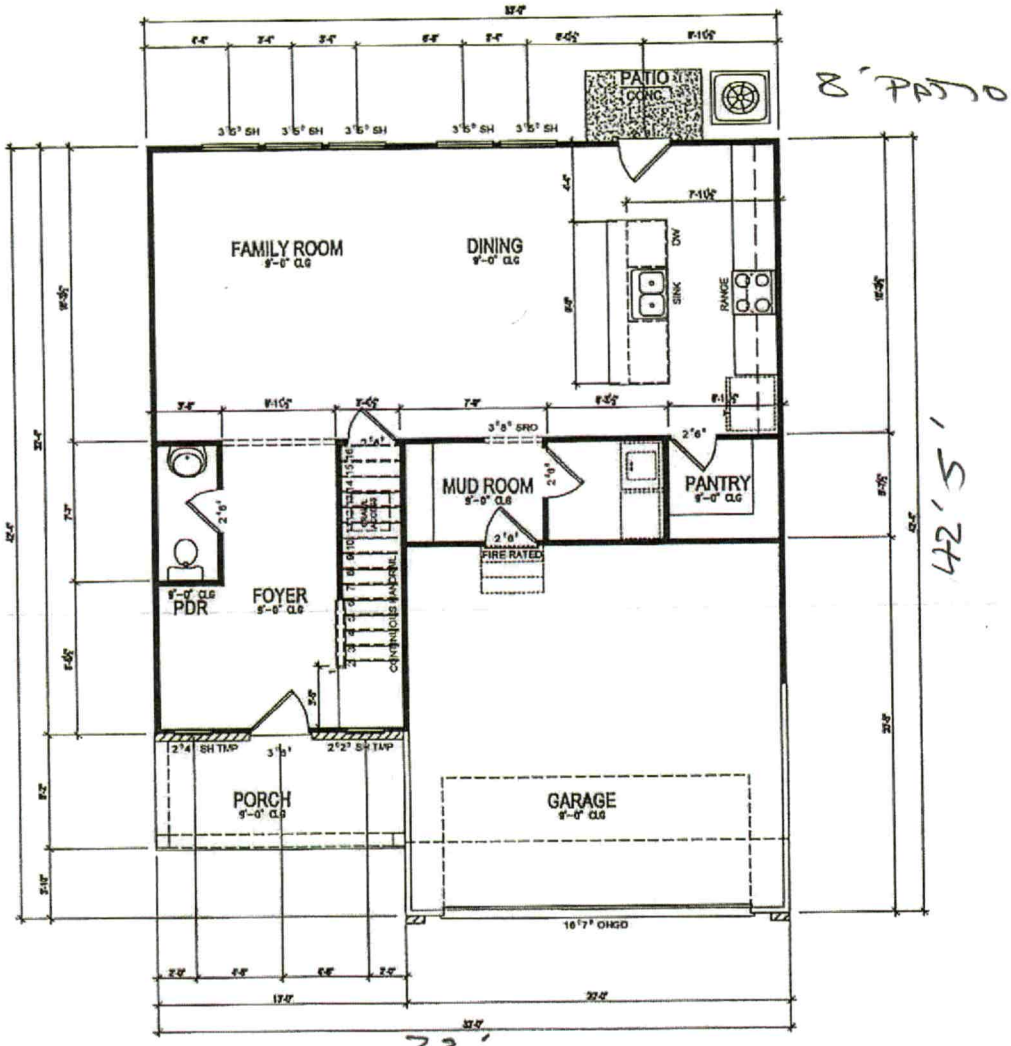
- **Installation inspections by the AOWE (designer) must be scheduled 5 weekdays in advance**
- Concrete Septic Tank shall be approved by NC DHHS, (Shoaf 1000-gallon STB 760 septic tank recommended)
- All tanks shall be properly back filled and compacted to prevent slump in the future
- The installer is responsible for final grades and returning that grade to original, with the exception of added structural features
- **The supply trench shall be compacted to eliminate any cavities left during initial fill placement continuous fall of 1/8 inches per foot required or sewage effluent pump will be required**
- Installation of the system shall be completed during dry conditions in order to protect the soil structure
- All fittings shall be pressure rated fitting
- All joints shall be cleaned with PVC pipe cleaner and a heavy bodied glue applied to weld all joints
- Trenches shall be carefully excavated so the bottom has no more than ¼" fall in 10 feet, with no high or low areas within. **Do not over excavate trenches!** Any fine grading should be completed by hand with a rake and shovel, leaving no loose material.
- All pipe openings in the tanks shall be properly grouted. This also applies to the joints around the rise.
- Earth dams, constructed of relatively impervious material, shall be installed at the beginning and end of each lateral to prevent unwanted lateral water movement.
- 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 pin flag locations should be checked by the installer prior to beginning trenches to ensure accuracy
- If septic tank risers are used, they should be a minimum of 6" above finished grade or within 6" of final grade if buried

See Design Specification Sheet for Onsite Wastewater System information

- **If grading for slab foundation is utilized, do not grade/create greater than 2 feet of elevation difference within 15 feet of any component of the septic or repair. If back filling, do not backfill over any initial or repair septic line**

System is specified as an Accepted 25% Reduction Gravity Chamber installation with #4, #5, or #6 gravel to be installed 6 inches deep on each side of the chambers

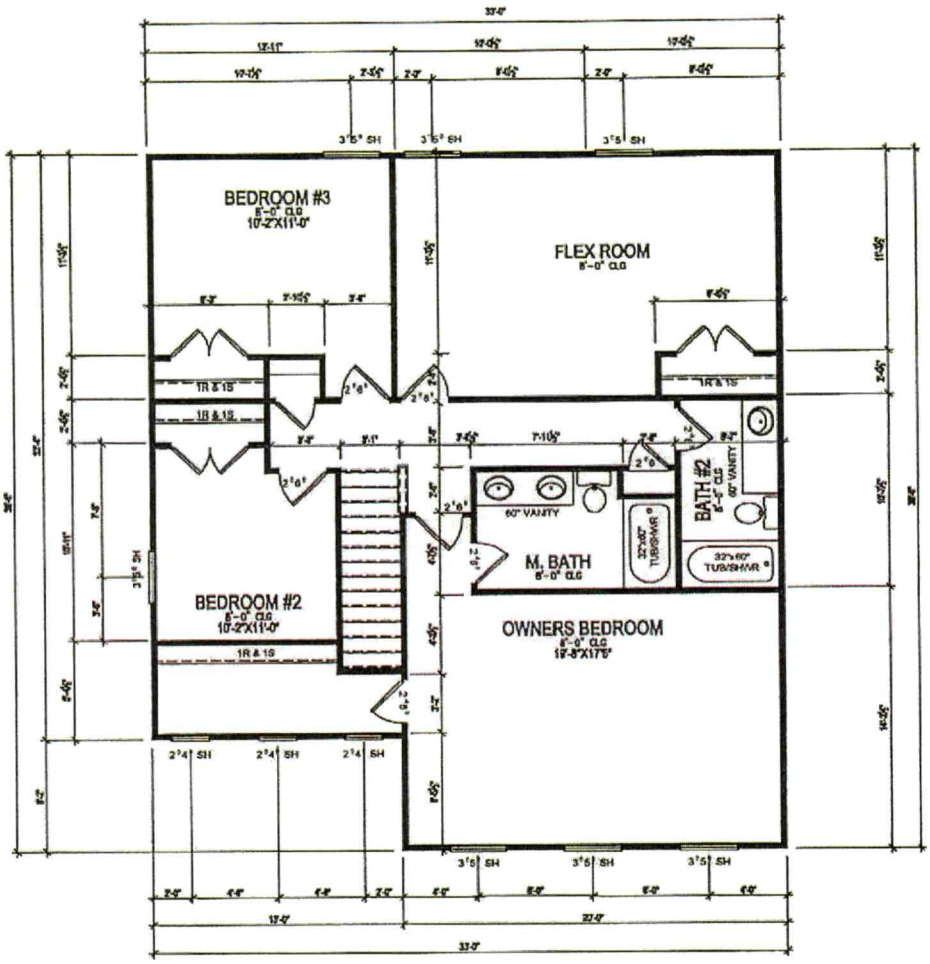
Repair is specified as an PPBPS .



2088 The Jibb Plan

FIRST FLOOR PLAN

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



2088 The Jibb Plan

SECOND FLOOR PLAN

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