BLDR-2022-10026

County: Iredell

This Section for Local Health Department Use Only

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

Permit Number: OSWP-2022-0685

156 Salem Springs Lot 8.

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

* System Inspected by AOWE, no Inspection performed by ICHD. See guidance Email from NCDHHS.

LEY
SOIL & Onsite Wastewater CONSULTING PLLC

Project Name: SALEM SPRINGS LOT 8

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

County: Iredell

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

PIN/Lot Identifier: 4774-09-4024

Issued To: Helmsman Homes

Property Location: 156 Salem Springs Rd - LOT 8

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): 1000 gallons Requires more than 1 pump? ☐ Yes ☑ No

Pump Requirements: 17.32 ft. TDH vs. 21.33 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 and from a pump system to a gravity fed system,

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

ONSITE WASTEWATER EVALUATOR

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

See attached site sketch

County: Iredell

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

PIN/Lot Identifier: 4774-09-4024

Issued To: Helmsman Homes –

Property Location: 156 Salem Springs Rd – LOT 8

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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

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

Pump Tank Size (if applicable): 1000 gallons Requires more than 1 pump? ☐ Yes ☑ No

Pump Requirements: 17.32 ft. TDH vs. 21.33 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:**
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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 and from a pump system to a gravity fed system,

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.

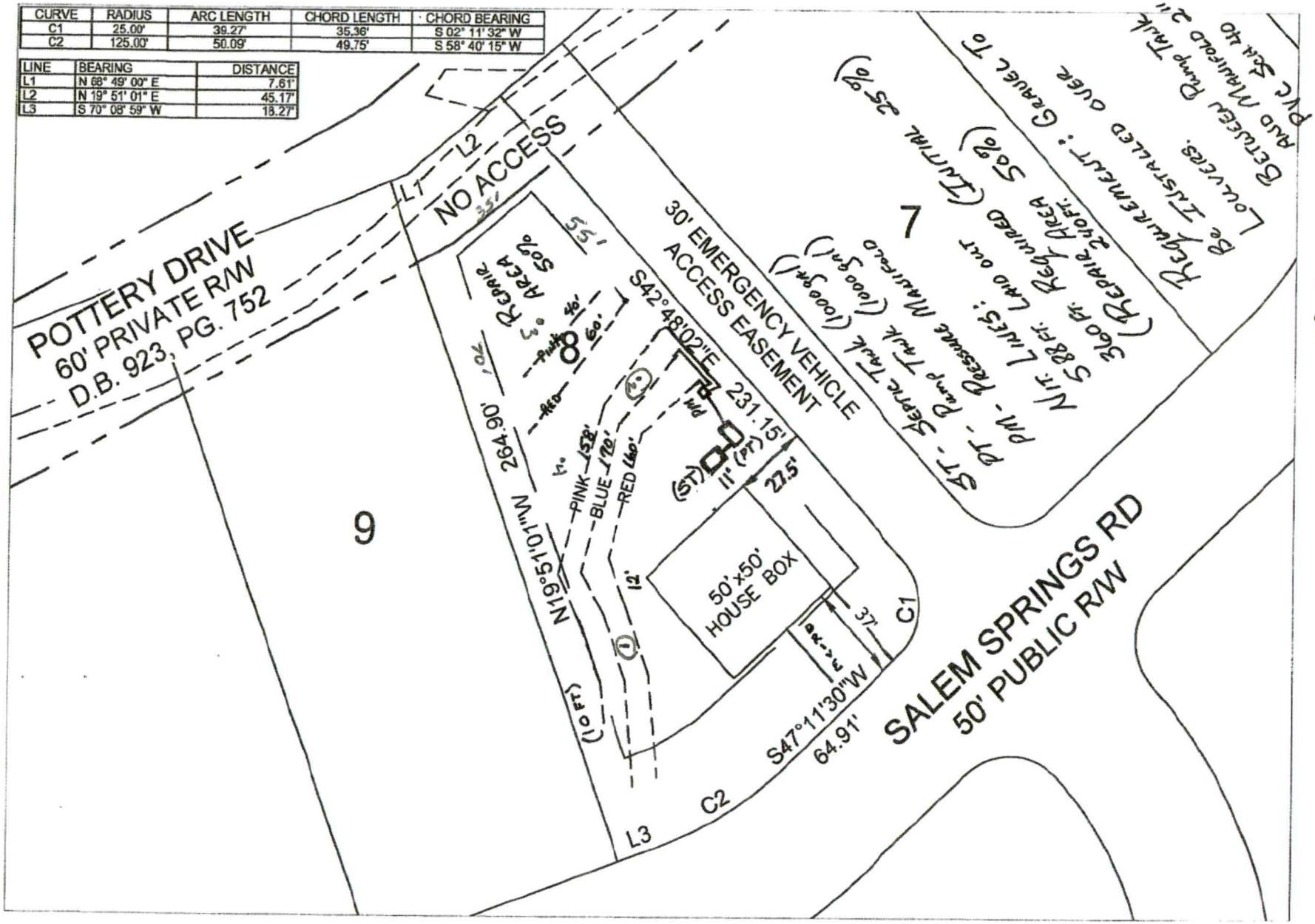
AOWE/PE Print Name: Gene Young AOWE

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

NC ONSITE WASTEWATER EVALUATOR

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

See attached site sketch



Salem Springs Subdivision Lot 8 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

CALCULATIONS

Location Salem Springs

Lot No: 8

No. of Bedrooms	3	
Design Flow	360	$^{gal}/_{day}$
LTAR	0.25	$^{gpd/ft^2}$
25% RED.? (YES OR NO)	YES	
Supply Line Length	20	ft.
Supply Line Volume	3.48	gal.
Amount of Line Required	360	
Amount of Line from Layout	360	ft.
Gallons per Minute	21.33	$^{gal}/_{min}$
Required Septic Tank Capacity	1000	gal.
Required Pump Tank Capacity	1000	gal.
Lateral Line Volume	235.08	gal.
Dosing Volume	164.56	gal.

Note: Dosing Volume based on 70% of lateral line volume

Tank Draw Down	7.8	*Generic Draw Down of 21 gal.per in.*
Pump Run Time	7.71	minutes
Elevation Head	12	ft.
Pressure Head	2	ft.
Friction Factor	3.48	ft./100 ft. *(From the interpolater.)*
Friction Head	0.70	ft.
Total Dynamic Head (+20%)	17.64	ft.

FRICTION FACTOR INTERPOLATER
2" SCH 40 PVC

GPM	*f*
20	0.84
	-0.88
25	1.27
	-1.28
30	1.78
	-1.76
35	2.37
	-2.25
40	3.03
43.07	3.48
45	3.77
48.14	4.28
50	4.58
57.11	5.89
60	6.42

PRESSURE MANIFOLD TAPSHEET - Salem Springs Lot 8

SYSTEM

Line #	Color	Elev	Length	Hole Size	Flow/Tap	gpd	Trench Area	Line LTAR
1	*pink*		*120*	SCH 40 1/2	**7.11**	54.85	360	0.15
2	*blue*		*120*	SCH 40 1/2	**7.11**	54.85	360	0.15
3	*red*		*120*	SCH 40 1/2	**7.11**	54.85	360	0.15
	total	**feet =**	**360**	**gal/min =**	**21.33**			
			Des. Flow	**360**				
			Pump Run=	**7.71**				
			LTAR	**0.250**				

Some lines flagged longer in the field, shorten to lengths shown here.

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 8)

Landscape Position (1940)	L	L	L	L						
Slpoe%	<4	<4	<4	<4						
H 1 Depth (1943)	0-8	0-6	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)	8-38	6-48	8-48	10-50						
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)	38-58	48-56	48-52	50-55						
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%		50%		Site Classification					
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 and 1 Piece Concrete Pump shall be approved by NC DHHS, (Shoaf 1000-gallon STB 760 septic tank and Shoaf PT 363 concrete 1000-gallon pump tank reccomended)
- 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 up to the louver height on each side of the chambers

Repair is specified as an PPBPS .

See notes on permit
10/5/2023

LEY
SOIL & Onsite Wastewater CONSULTING PLLC

Date: 9/30/23

Project Name: Helmsman Homes, 156 Salem Springs Drive, Lot 8

G. S. 130A-337(a1)

LEY Soil & Onsite Wastewater Consulting has been contracted to conduct an perform an inspection of the Onsite Wastewater system installation and issue an Operation Permit to the Iredell County Environmental Health Department on behalf of Helmsman Homes, 156 Salem Springs Drive, Lot 8

The system installed meets all of the conditions of the Improvement Permit and Construction Authorization, and the AOWE shall issue an as-built drawing with the Operation Permit that meets the standards and scale of the LHD that issued the Construction Authorization. The applicant shall submit these items to the LHD within two business days of receipt from the AOWE.

Tim Carr
_____ Owner Signature

Gene Young--(336)-909-9060 younggene1956@gmail.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

Section 5, Modifications to G.S. 130A-337: This Section adds new language, G.S. 130A-337(a1), that allows an AOWE to contract with an applicant to conduct an inspection of a wastewater system installation and issue an Operation Permit, accordingly. The AOWE is required to provide written verification to the applicant that the system installation meets all of the conditions of the Improvement Permit and Construction Authorization, and the AOWE shall issue an as-built drawing with the Operation Permit that meets the standards and scale of the LHD that issued the Construction Authorization. The applicant shall submit these items to the LHD within two business days of receipt from the AOWE.

This Section also adds language to G.S. 130A-337(a1) that releases liability from the Department, the Department's authorized agents, and the LHDs from any claims attributed to the wastewater system installation. The AOWE is responsible for ensuring that the wastewater system is installed in accordance with the Construction Authorization. However, the LHD retains the responsibility for the Improvement Permit and Construction Authorization.

This Section is effective immediately.

LEY SOILS

Operation Permit/Authorization to Operate (ATO)

PIN 4774-09-4024 Permit Number 156 SALEM SPRINGS RD LOT 8

County IREDELL Specific System Installed 259D REDUCTION ACCEPTED CHAMBER Q-4

System Type: 3G GPD: 360 Number of Bedrooms: 3 Maximum number of occupants: 6

HELMSMAN HOMES — Owner's Name

SPECIALITY SEPTIC # 1139 — System Installer/Certification Number

GENE YOUNG ACME — LEY Soils

NC ONSITE WASTEWATER EVALUATOR GENE YOUNG, ACME 10005E

9-8-23 — Date of Operation Permit Issuance

This system has been installed in compliance with applicable NC General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.

SEE ATTACHED ASBUILT DRAWING
PUMP NOT NEEDED

PERMIT CONDITIONS:

I. Performance: System shall perform in accordance with Rule .1961.

II. Monitoring: As required by Rule .1961.

III. Maintenance: Ground absorption sewage treatment and disposal systems shall be checked, and the contents of the septic tank removed, periodically from all compartments, to ensure proper operation of the system. The contents shall be pumped whenever the solids level is found to be more than 1/3 of the liquid depth in any compartment.

Other: _____

Subsurface system operator required? Yes ____ No X

If yes, see attached sheet for additional operation conditions, maintenance and reporting.

IV. Operation: _____

V. Other: _____

Operation Permit Inspection Check List

LOT 8

1139
SEPTIC

INSTALLER: SPECIALTY
APPLICATION #: _____
DATE: 9-7-23

1. LOCATION AND SEPARATION DISTANCES

A. **System installed in proper area**	✓	
B. **House location in proper area**	✓	
C. System meets .1950 setback requirements	✓	
D. Distance from septic system to any wells	NA	feet
E. Distance from septic tank to foundation	15	feet
F. Distance from septic system to all property lines	15	feet +

2. SEPTIC TANK/PUMP TANK

	SEPTIC TANK	PUMP TANK
A. Liquid capacity of septic tank	1000 gallons	____ gallons
B. Tank serial number	STB-760	____
C. Date of manufacture	7-7-23	____
D. Visually inspect the exterior walls and top of tank	✓	____
E. Visually inspect the interior walls, baffle wall, lids, air vent, filter, etc.	✓	____
F. Risers present ***OR*** tank is within 6" of finished grade	✓	____

GRAVEL/TRENCH DEPTHS

A.		N.	
B.		O.	
C.		P.	
D.		Q.	
E.		R.	
F.		S.	
G.		T.	
H.			
I.			
J.			
K.			
L.			
M.			

3. SUPPLY LINE TO TRENCHES

A. Supply line fall from septic tank to nitrification lines or distribution device ***at least*** 1/8" per foot (minimum)	3" FALL	
B. Supply line is ***minimum*** 3" Sch. 40 PVC, PE, or ABS	✓	
C. Length of supply line to trench	15'	feet

4. NITRIFICATION FIELD

A. Type of nitrification field	25% REDUCTION	
B. Manufacturer and model #	INFILTRATOR Q-4	
C. Nitrification trench ***does not exceed*** ¼" fall in 10 feet	✓	
D. Trench depth	33	inches MAXIMUM
E. Trench width	36	inches
F. Aggregate depth	6	inches ON EACH SIDE OF CHAMBER
G. Aggregate size (3,4,5,57, or 6 of ASTM D-448)	#5	
H. Distance between trenches	9	feet
I. Length of nitrification lines	367	feet
J. Step downs: (if applicable)		
1. ***Minimum*** of 2' undisturbed soil	✓	
2. Proper rise over step down	✓	
3. Solid pipe used	✓	
	____	
J. Distribution Devices: (if applicable)		
1. Type of distribution device	_____	
2. Device is watertight and of sound construction	____	
3. Device is on level foundation of soil or concrete	____	
4. Does the device perform as designed	____	
5. Inlet and outlet elevations recorded	____	

GRADE SHOTS

1.	4.2	19.	
2.	4.2	20.	
3.	4.2	21.	
4.	4.2	22.	
5.	5.6	23.	
6.	5.6	24.	
7.	5.6	25.	
8.	5.6		
9.	5.6		
10.	5.6		
11.	6.3		
12.	6.3		
13.	6.3		
14.			
15.			
16.			
17.			
18.			

County: Iredell

IMPROVEMENT PERMIT FOR G.S. 130A-335(a2)/SL2022-11

PIN/Lot Identifier: 4774-09-4024

Issued To: Helmsman Homes

Property Location: 156 Salem Springs Rd

Subdivision: Salem Springs Lot #: 8 Block: _____ Section: _____

LSS Report Provided: Yes ☑ No ☐

If yes, name and license number of LSS: Gene Young, LSS 1080

New ☑ Repair ☐ Expansion ☐ System Relocation ☐

Proposed Structure: House

Proposed Wastewater System Type: 25% Reduction (Initial) PPBPS (Repair)

Fill System: ☐ Yes ☑ No If yes, specify: ☐ New ☐ Existing (when adding more than 6 inches of fill to system area please provide a fill plan)

Proposed Design Daily Flow: 360 GPD Proposed LTAR (Initial): .25 Proposed LTAR (Repair): .25

Design Wastewater Strength: ☑ domestic ☐ high strength ☐ industrial process

Number of bedrooms: 3 Number of Occupants: 6 Other: _____

Pump Required: ☐ Yes ☐ No ☑ May be required based upon final location and elevations of facilities

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

Type of Water Supply: ☐ Private well ☑ Public well ☐ Municipal Supply ☐ Spring ☐ Other: _____

Drainfield location meets requirements of Rule .1945: Yes ☑ No ☐

Drainfield location meets requirements of Rule .1950: Yes ☑ No ☐

Permit valid for: ☑ Five years [site plan submitted pursuant to GS 130A-334(13a)] ☐ No expiration [plat submitted pursuant to GS 130A-334(7a)]

Permit conditions:

See Installer Information Sheet

Licensed Soil Scientist Print Name: Gene Young, LSS

Licensed Soil Scientist Signature: Gene Young LSS Date: 7-27-22

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

See attached site sketch

County: Iredell

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

PIN/Lot Identifier: 4774-09-4024

Issued To: Helmsman Homes

Property Location: 156 Salem Springs Rd - LOT 8

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

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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): 1000 gallons Requires more than 1 pump? ☐ Yes ☑ No

Pump Requirements: 17.32 ft. TDH vs. 21.33 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 and from a pump system to a gravity fed system,

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

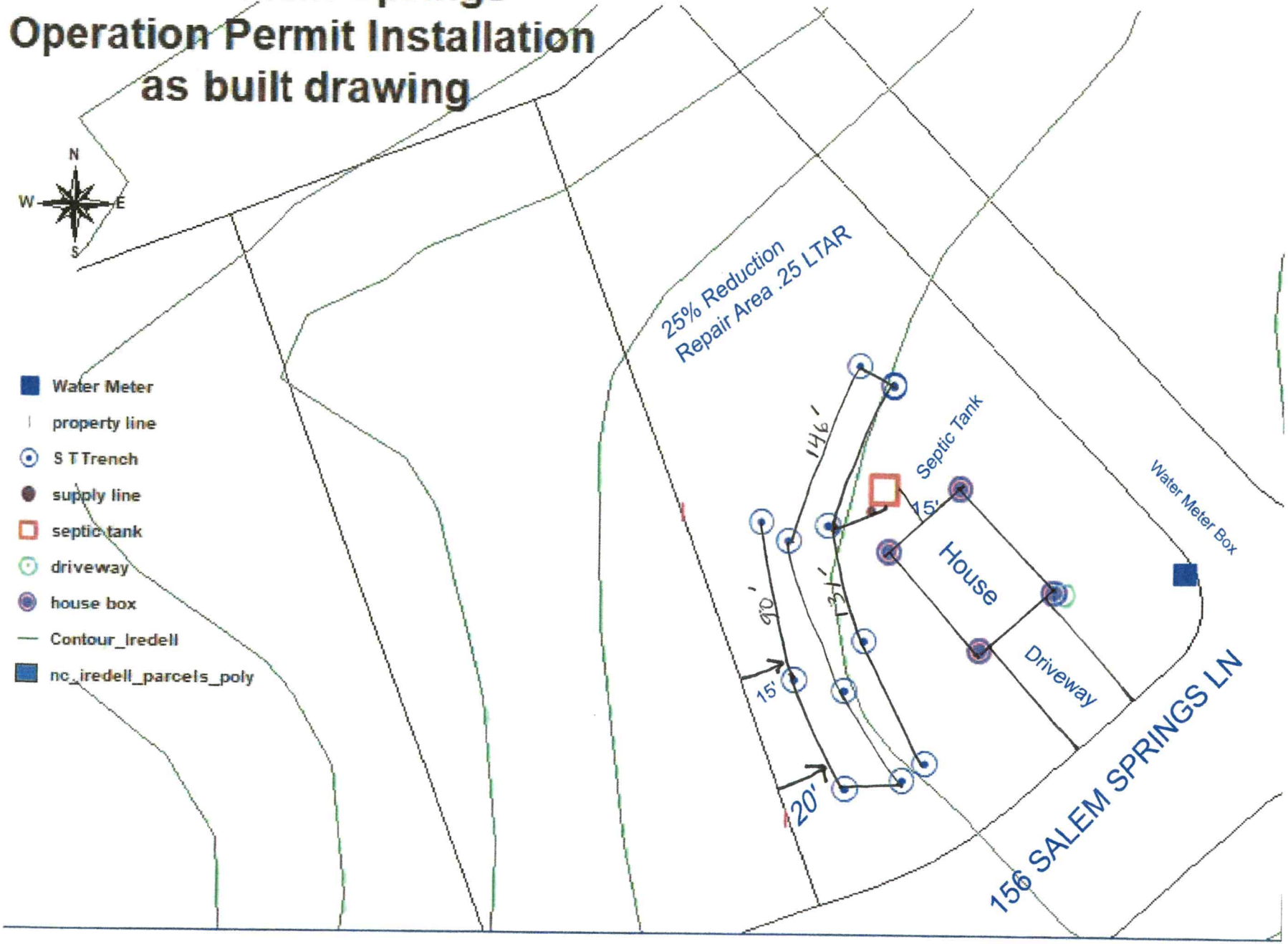
AOWE/PE Signature: Gene Young AOWE Date: 7-27-22

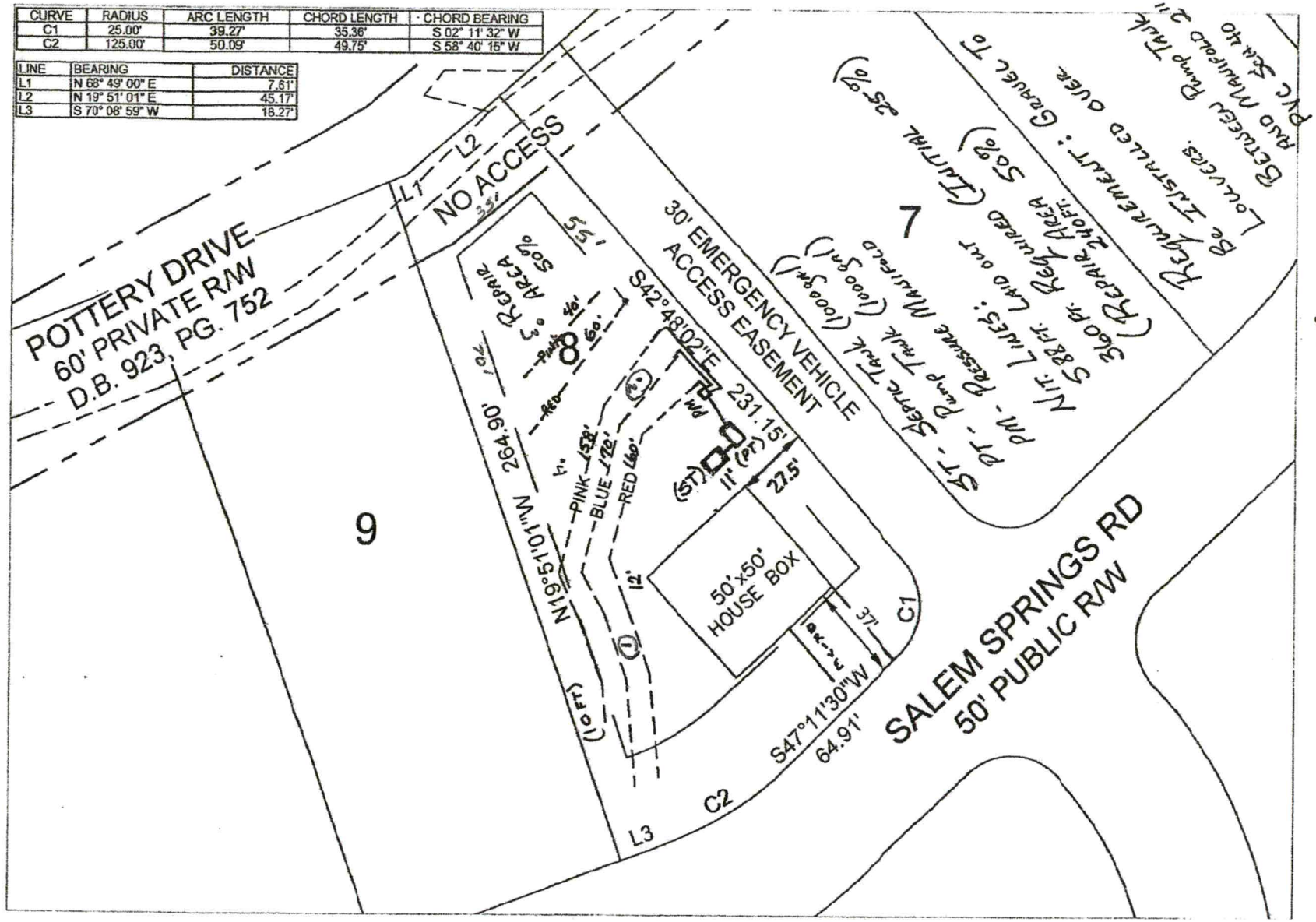
NC ONSITE WATER PROTECTION EVALUATOR

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

See attached site sketch

Lot 8 Salem Springs
Operation Permit Installation
as built drawing





Salem Springs Subdivision Lot 8 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