BLDR 2023-32715

ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # OSWP-2023-17861

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

PIN # 4774-14-7726

APPLICANT / OWNER: Providence Farm.LLC APPLICANT ADDRESS: 615 New Salem Road, Statesville, NC 28625

SITE ADDRESS: 121 PEACEHAVEN PL, STATESVILLE, NC 28625 PHONE: 704 706 5046 (LSS) ALT. PHONE:

SITE DIRECTIONS: 64 E to New Salem to Peacehaven. SAP CONTROLLED: YES ☐ NO ☒

SUBDIVISION: New Salem Estates. SECTION: LOT #: 14 LOT AREA: 0.965 DESIGN FLOW: 360 L.T.A.R.: .25

Septic Tank: (gal) 1000	STB: 7600	Date: 10/22/23	☑ New System ☐ Repair ☐ Expansion	System Type: IV	☑ Residence	No. Bedrooms: 3	Water Supply: Other Public Water
Pump Tank: (gal) 1000	PT: 3603	Date: 11/28/23	System Description: HPPBPS -LP		☐ Business	No. Persons: 6	
Pump Make: Goulds	Model: WE0311M	Serial #:	Repair System Description: HPPBPS-LP		☐ Other	No. Employees:	
# Nitrification Fields: 1	# Lines: 3	Linear Ft.: 240	Maintenance Agreement Required: ☑ YES ☐ NO		☐ Slab	☑ Crawl Space	
Trench Width: 36 in	Trench Bottom Depth (Low side): 16 in		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 LSS/LG Evaluation attached here from Soil & Forestry Services of the Carolinas. PA.

AS BUILT SKETCH

2.5 Y 6/2 found in trench at time of inspection. LSS notified, no action taken. LSS approved. Heavy rain event ~2 days before install & rain directly after install & during cover.

TANKS CHECKED

LINES moved from original design.

Pressure Head
Alarm
Floats
Pressure Manifold
Electrical
needs maintenance agreement✓

[Operations permit complete in accordance to G.S. 130A-335 (a2), (a3), & (a4). ICHD 4/10/2024]

Check gutter drains over tanks✓

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:

IMPROVEMENT PERMIT by: Date: 3-3-2023

AUTHORIZATION TO CONSTRUCT by: Date: 7-10-2023

Installed By: Craig Thompson

OPERATION PERMIT by: ICHD Date: 4/10/2024

Existing System Inspected By: Date:

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

County: Iredell

This Section for Local Health Department Use Only

Initial submittal received: 7/5/2023 (Date) by BR (Initials)

Permit Number: OSWP-2023-17861

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: Brian A Boss Date of Issuance: 7/10/2023

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: 7/10/2028.

See attached site sketch

County: Iredell

This Section for Local Health Department Use Only

Initial submittal received: 3-2-2023 (Date) by BB. (Initials)

Permit Number: OSWP-2023-17861.

G.S. 130A-335(a4) states the following: *'If a local health department fails to act on an application for an improvement permit submitted pursuant to subsection (a3) of the section within 10 business days of receipt of a complete application, the local health department shall issue the improvement permit.'*

In accordance with G.S. 130A-335(a3) the improvement permit 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 LSS and the Owner on _____ (Date)

State Authorized Agent: _____ Date: _____

☐ Denied (See attached report.)

Copies of this were sent to the LSS and the Owner on _____ (Date)

State Authorized Agent: _____ Date: _____

☑ Complete

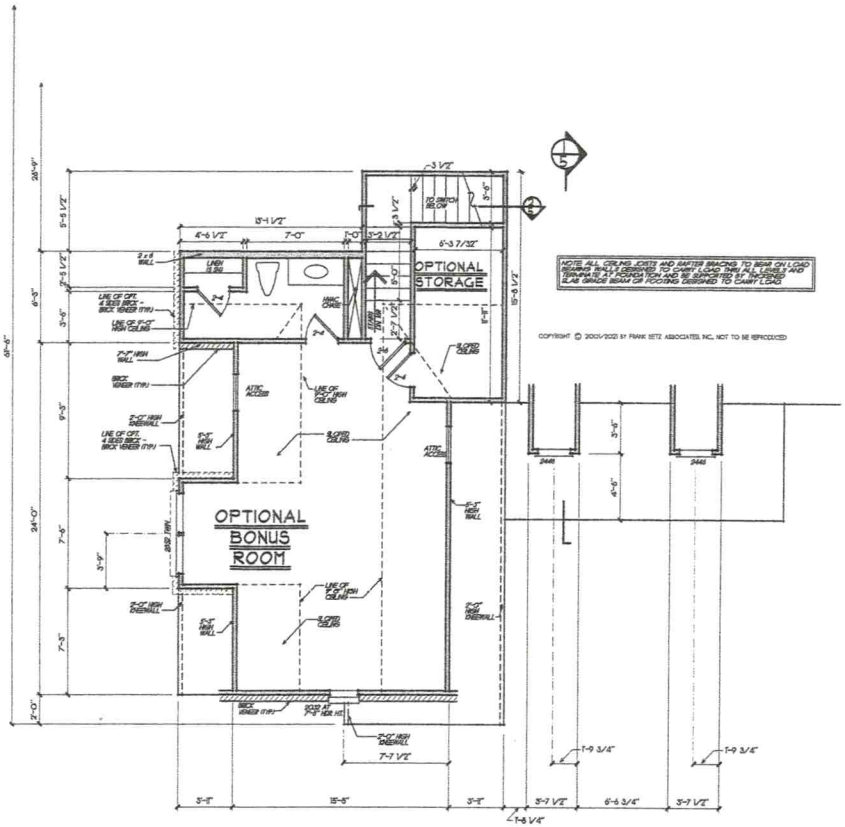
State Authorized Agent: Bjamin A Bass Date of Issuance: 3-3-2023

This Improvement Permit is issued pursuant to G.S. 130A-335 (a2), (a3), and (a4) using the signed and sealed LSS/LG evaluation(s) attached here. The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This site 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 Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to 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.

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 evaluations, submittals, or actions from a licensed soil scientist or licensed geologist pursuant to GS 130A-335(a2).

Improvement Permit Expiration Date: 3-3-2028.

See attached site sketch



OPT. SECOND FLOOR PLAN

1/4" = 1'-0"

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ESTABLISHED 1998
Direct: 678-607-4458 mainstreetmod@yahoo.com

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NOTE: LOCATE WATER HEATER & HVAC PER CODES AND SITE CONDITIONS CONSULT W/ BUILDER & OWNER PRIOR TO CONSTRUCTION

REVISIONS	DATE	BY
CLAS 3-21	7-20-21	DCP
CLAS 10-01	10-13-21	RJG

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GRANDE HOMES
STATESVILLE, NC.

SECOND FLOOR PLAN

THE WALLINGFORD

FRANK BETZ ASSOCIATES, INC.
DESIGNERS OF CUSTOM AND STOCK HOMEPLANS
3500 GEORGE BUSBEE PARKWAY
SUITE 100
KENNESAW, GEORGIA 30144
770-431-0888 678-717-3003

BY: CSM AJS CK: KCW TDJ

DATE: 9-08-01 11/4/2021

SHEET: 4

OF: 5

GENERAL NOTES

GENERAL FRAMING NOTES

WARRANTY AND LIABILITY

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Indemnity. The client agrees to defend, indemnify, and hold harmless from any claims, liability, or defense cost in excess of the limits provided above for injury or loss sustained by any person or entity allegedly caused by our company performance of services.

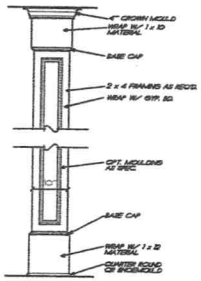
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Exclusive Model Section Provider for Frank Betz Associates, Inc.

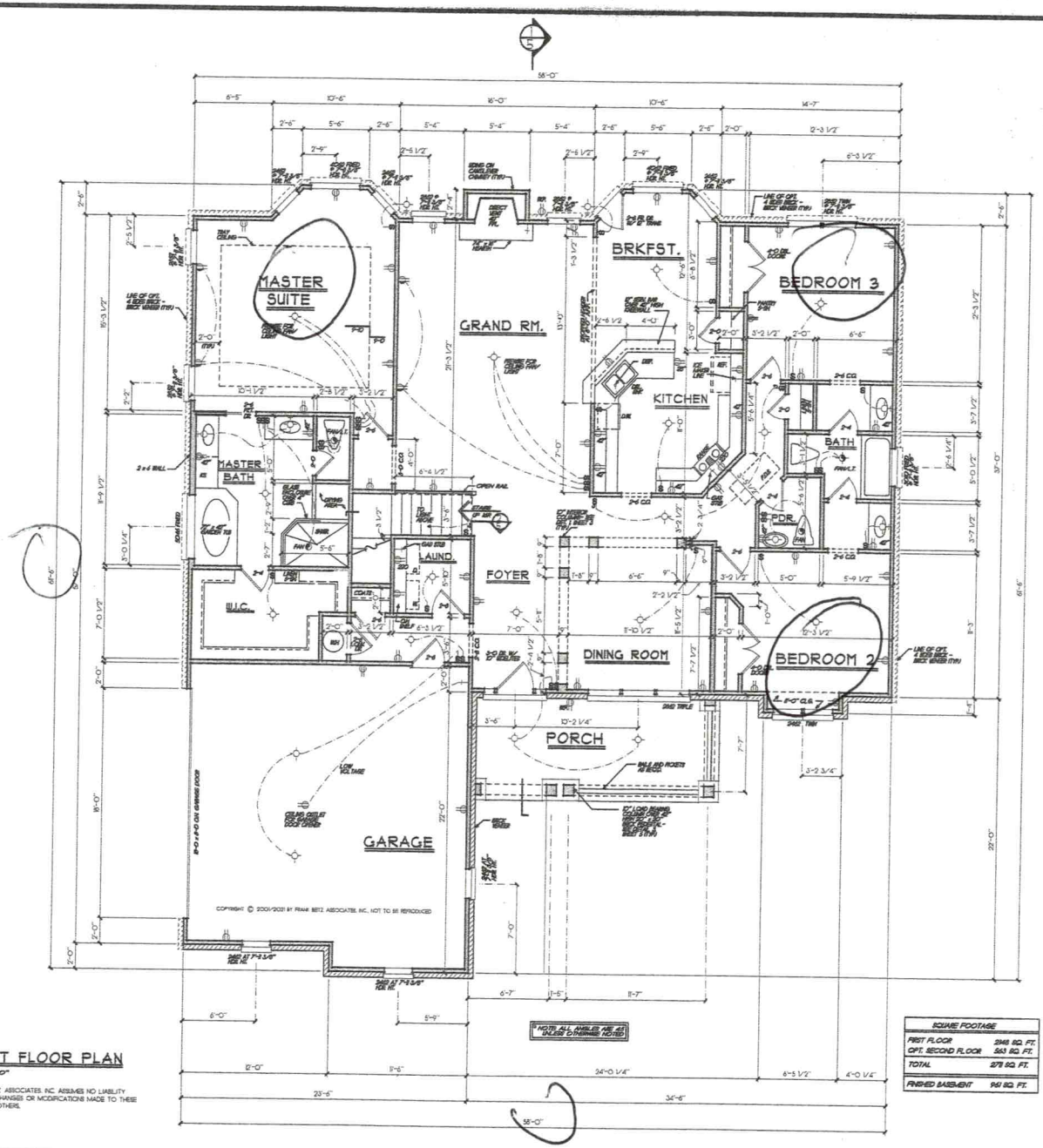
MAIN STREET Designs
ESTABLISHED 1984
Direct: 678-697-4455 mainstreetmodelsection@gmail.com

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NOTE LOCATE WATER HEATER & HVAC PER SOPRIS AND SITE CONDITIONS CONSULT W/ BUILDER & OWNER PRIOR TO CONSTRUCTION



3 INT. COLUMN DETAIL
3/4" = 1'-0"
COL-A EQPH



FIRST FLOOR PLAN
1/4" = 1'-0"

FRANK BETZ ASSOCIATES, INC. ASSUMES NO LIABILITY FOR ANY CHANGES OR MODIFICATIONS MADE TO THESE PLANS BY OTHERS.

NOTE: ALL ANGLES ARE 45° UNLESS OTHERWISE NOTED

SQUARE FOOTAGE	
FIRST FLOOR	2148 SQ. FT.
OPT. SECOND FLOOR	563 SQ. FT.
TOTAL	2711 SQ. FT.
FINISHED BASEMENT	961 SQ. FT.

REVISIONS	DATE	BY
CLAS 2nd SET	7/20/2021	JCP
CLAS 3rd SET	10/19/2021	JCP

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GRANDE HOMES
STATESVILLE, NC.

FIRST FLOOR PLAN/DETAIL

THE WALLINGFORD

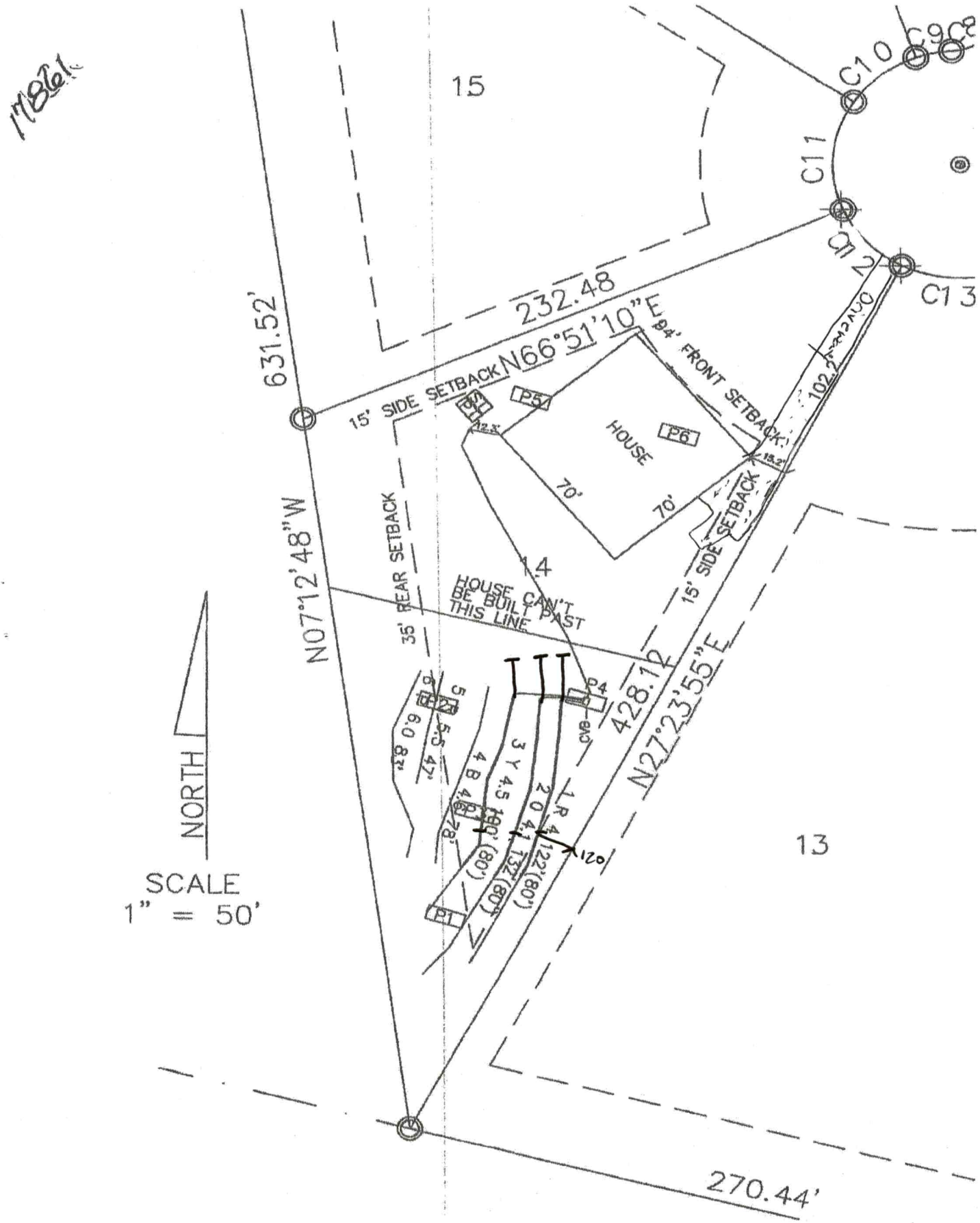
FRANK BETZ ASSOCIATES, INC.
DESIGNERS OF CUSTOM AND SPEC HOMEPLANS
3000 GEORGE BUSBEE PARKWAY
SUITE 190
KENNESAW, GEORGIA 30144
770-421-0988
678-717-3003

BY: CDW RJB CK: RDW TDJ

DATE: 9-04-01 7/14/2021

SHEET: 3

OF: 5


11861
15
C10
C9
C8
C11
C12
C13
631.52'
232.48
N66°51'10"E
94' FRONT SETBACK
15' SIDE SETBACK
102.2' CHORD
P5A
P5
P6
HOUSE
70'
70'
15' SIDE SETBACK
N07°12'48"W
35' REAR SETBACK
HOUSE CAN'T BE BUILT PAST THIS LINE
14
428.12
N27°23'55"E
P4
P3
P2
P1
6.0
5.5
47'
78'
3 Y 4.5
2 0 4'
1 R 4'
132'(80')
122'(80')
120'
13
NORTH
SCALE
1" = 50'
270.44'

County: Iredell

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

PIN/Lot Identifier: 4774147726

Issued To: Providence Farm LLC

Property Location: Peacehaven Pl

Subdivision: New Salem Estates Lot #: 124 Block: _____ Section: _____

LSS Report Provided: Yes ☒ No ☐

If yes, name and license number of LSS: Samuel Ashley Rollans #1731

New ☒ Repair ☐ Expansion ☐ System Relocation ☐

Proposed Structure: Single family Residence

Proposed Wastewater System Type: HPPBPS (At grade) (Initial) HPPBPS (At grade) (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): 0.25 Proposed LTAR (Repair): 0.25

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 Design

Licensed Soil Scientist Print Name: Samuel Ashley Rollans

Licensed Soil Scientist Signature: Samuel A Rollans Date: 1/25/23

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: 4774147726

Issued To: Providence Farm LLC

Property Location: Peacehaven Pl

AOWE/PE Plans/Evaluations Provided: Yes ☒ No ☐ If yes, name and license number of AOWE/PE: Samuel Ashley Rollans 10027E

Facility Type: Single Family Residence

☒ New ☐ Expansion ☐ Repair System Relocation ☐

Basement? ☐ Yes ☒ No Basement Fixtures? ☐ Yes ☒ No

Type of Wastewater System** HPPBPS (At grade) (Initial) HPPBPS (At grade) (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: 240 feet Trench/Bed Spacing: 8 feet on center

Drainfield square footage: 720 Trench/Bed Width: 36 inches LTAR: 0.25 gpd/ft²

Soil Cover: 6 inches min Slope Adjusted Maximum Trench/Bed Depth: 16 inches (Low side 7x6" Cover Required)

Aggregate Depth: _____ inches above pipe _____ inches below pipe _____ inches total

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

Pump Requirements: 15.79 ft. TDH vs. 22.14 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 Design

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.

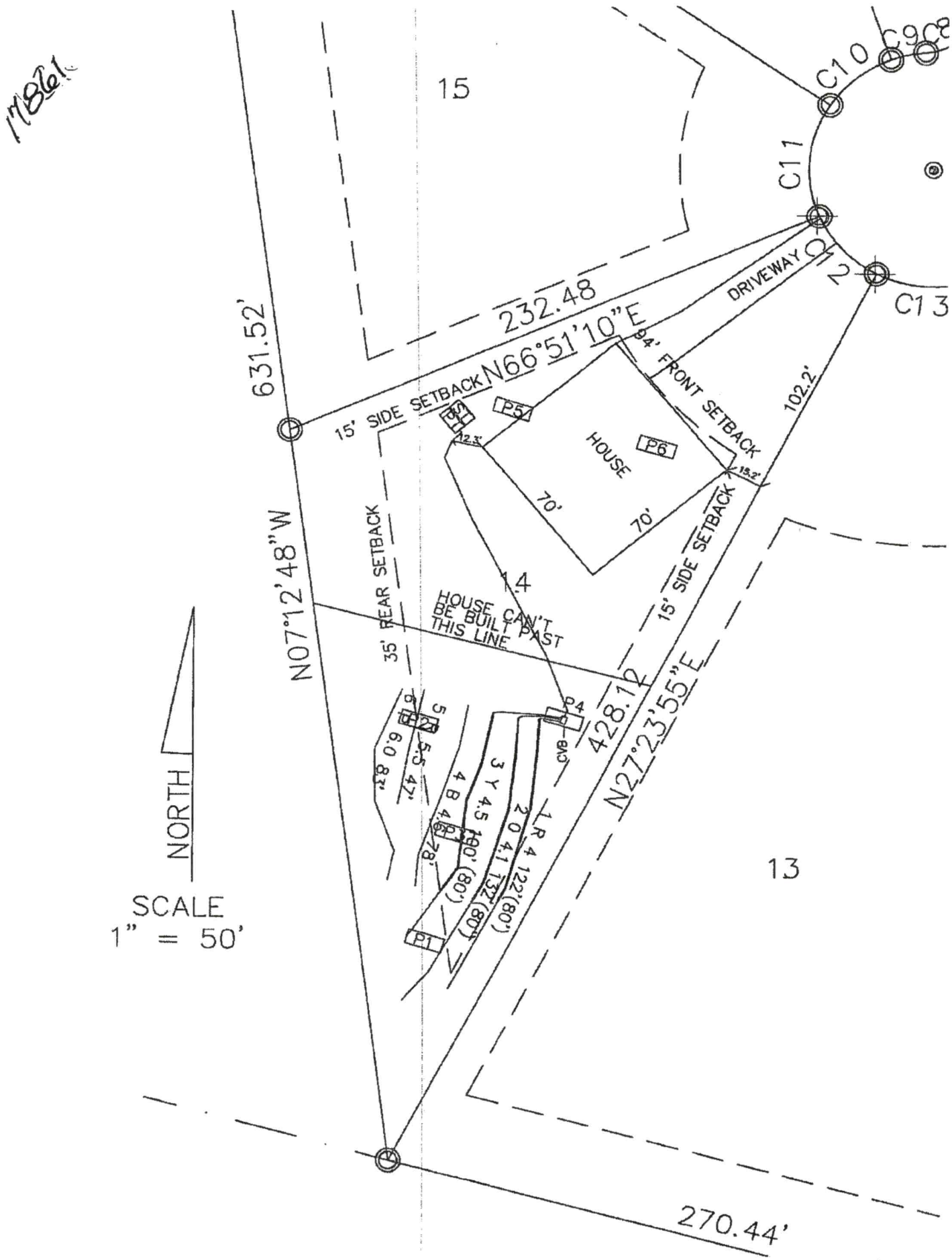
AOWE/PE Print Name: Samuel Ashley Rollans

AOWE/PE Signature: Samuel A Rollans Date: 1/25/22

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

See attached site sketch

SITE EVALUATOR 10027 E


17861
15
C10
C9
C8
C11
C12
C13
DRIVEWAY
232.48
631.52'
N66°51'10"E
94' FRONT SETBACK
15' SIDE SETBACK
102.2'
P5
P6
HOUSE
12.3'
15.2'
70'
70'
14
35' REAR SETBACK
HOUSE CAN'T BE BUILT PAST THIS LINE
N07°12'48"W
15' SIDE SETBACK
428.12'
N27°23'55"E
P4
P1
P2
P3
13
270.44'
NORTH
SCALE
1" = 50'

Peacehaven Place-Lot 14

Project #: 22-0168

LAYOUT FOR 3 BEDROOM HOME

January 17, 2023

LINE #	FLAG COLOR	BS	HI	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM							
INSTR. 1							
HOUSE CNR	(RIGHT REAR)				827.35		
P. TANK					826.00		
1	***RED***			***4.00***	***830.65***	***122***	***80***
2	***ORANGE***			***4.10***	***830.45***	***132***	***80***
3	***YELLOW***			***4.50***	***830.15***	***100***	***80***
4	BLUE			4.60	830.05	78	78
5	RED			5.50	829.15	47	47
6	PINK			6.00	828.65	83	83
					Total	**562**	**448**

	LINE LENGTH	LTAR GPD/FT²	SYSTEM TYPE	SOIL LTAR GPD/FT²	TRENCH SYSTEM	DISTRIBUTION	TRENCH DEPTH (LOW SIDE)
**** System***	***240***	***0.250***	***MOD.***	***0.250***	***HPPBPS AT - GRADE***	**LOW PRESSURE**	***16"*** 6" GROUP II OR III COVER REQUIRED
Repair	322	0.250	MOD.	***0.250***	HPPBPS AT-GRADE	LOW PRESSURE	***16"*** 6" GROUP II OR III COVER REQUIRED

Notes:

****All septic lines and pits located via GPS and tape measures**
**All measures in feet
**Nitrification lines are demonstrated on contour via colored pin flags

LP HPPBPS TAPSHEET -Peavehaven Place- Lot 14

SYSTEM

Line #	Color	Elevation	Length	Hole Size	Flow/hole	Trench Area	Number of Panels
1	*RED*	*830.65*	*80*	*0.156*	*0.41*	*240*	*18*
2	*ORANGE*	*830.45*	*80*	*0.156*	*0.41*	*240*	*18*
3	*YELLOW*	*830.15*	*80*	*0.156*	*0.41*	*240*	*18*
	total	**feet =**	**240**	**gal/min =**	**22.14**		**54**
			Des. Flow	**360**			
			Pump Run=	**8.78**			
			soil LTAR	**0.25**			
			LTAR +5%	**0.2625**			
			LTAR with mod.	**0.5**			
			LTAR with mod.. + 5%	**0.525**			

.156 equals 5/32 inch hole

CALCULATIONS

Location	Peavehaven Place Statesville, NC 28625	
Project Number	22-0168	
Lot No:	14	
No. of Bedrooms	3	
Design Flow	360	$^{gal}/_{day}$
LTAR	0.25	$^{gal}/_{ft^2\ day}$
PPBPS? (YES OR NO)	YES	
Supply Line Length	136	ft.
Supply Line Volume	23.664	gal.
Required Feet of Line	240	ft.
Amount of Line from Layout	240	ft.
Gallons per Minute	22.14	$^{gal}/_{min}$
Required Septic Tank Capacity	1000	gal.
Pump Tank Capacity	1000	gal.
Panel Volume	3.6	gal.
# of Panels	54	
Dosing Volume	194.40	gal.
	Note: Dosing Volume based on 100% of # of panels times 3.6 gal/panel	
Tank Draw Down	9.3	*Generic Draw Down of 21 gal.per in.*
Pump Run Time	8.78	minutes
Elevation Head	10	ft.
Pressure Head	2	ft.
Friction Factor	1.27	ft./100 ft. *(From the interpolater.)*
Friction Head	1.73	ft.
Total Dynamic Head (+15%)	15.79	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

SOIL & FORESTRY SERVICES
OF THE CAROLINAS, PA

www.soilandforestryservices.com

Attached is a proposed design for an At-Grade HPPBPS Septic System w/Low pressure distribution for a 3 bedroom single family residence on Peacehaven Place, Lot # 14, (PIN# 4774147726), Statesville NC, 28625.

Contents:

	Page
Information for the Installer	1
Design Information	
Design Specifications	2-3
Layout Specifications	4
System Tapsheet	5
Site Plan/System Plan	6
Calculations	7
Profile Descriptions	8
Septic Application	Online
Agent Authorization	Online
Improvements Permit Form	9
Construction Authorization Form	10

LICENSED SOIL SCIENTIST
SAMUEL A. ROLLAND
7231
STATE OF NORTH CAROLINA

January 17, 2023
Project #: 22-0168
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 NC DHHS, and certification supplied by the manufacturer.
- Tanks shall be water tested prior to installation.
- 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 during initial fill placement.
- Installation of the system shall be during dry conditions in order to protect the soil structure.
- All fittings shall be pressure rated fittings.
- 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 for installation.
- Elevations at pinflag locations should be checked by the installer prior to excavation
- Pumptank riser should be 6" above grade, control panel should be 12" above grade.
- Septic tank riser shall be a minimum of 6" above finished grade.
- System is specified as an At-grade HPPBPS installation with low pressure distribution.
- Repair is specified as an At-grade HPPBPS installation with low pressure distribution.
- Backfill 4 - 6" of material (County Approved) over panels, rake trench walls, lime side-walls, install trenches 36" wide and have no more than 1/4" fall in 10 feet.
- **Primary system & repair requires 6" approved cover over drainfield area.**

LP HPPBPS SYSTEM
FOR WASTEWATER TREATMENT

Owner/Applicant:	Providence Farm LLC
Current Address:	615 New Salem Rd Statesville, NC 28625
Phone:	704.450.7652
County:	Iredell
Location:	Peacehaven Place Statesville, NC 28625
Source of Wastewater Flow:	3 Bedroom Single Family Residence
Estimated Gallons Per Day Flow:	360 gpd
System Flow:	22.14 gpm

Design Specifications

Drainfield Size:	240
Loading Rate (gpd/ft.^{2}):	0.25
Depth of Gravel in Trench:	NA (PPBPS)
Gravel Size:	NA (PPBPS)
Trench Depth (LOW SIDE):	16 in., Repair 16 in. Trench Depth **Requires 6" approved cover**
Trench Width:	36 in.
Septic Tank Size:	1000
Pump Tank Size:	1000
Estimated Supply Line Length:	136
Supply Line Diameter:	2 in. SCH 40 PVC
Supply Line Volume:	23.66
Dosing Volume:	194.40
Supply Manifold:	N/A
Supply Manifold Length:	N/A
Supply Manifold Volume:	N/A
Recommended Float Controls:	SJE Sensor Float Control Switches as Required for Control Panel or County Approved Equivalents
Recommended Control Panel:	SJE-Rhombus Model 112 (NEMA 4x) Control Panel or County Approved Control Panel.
Pressure Head:	2 ft.
Friction Head:	1.73
Elevation Head:	10.00
Total Dynamic Head:	15.79
Threaded Union:	In Tank
Gate Valves:	1 in Tank 1 per lateral
Check Valves:	In Tank
Anti-Siphon Hole:	NA
Additional Comments:	Soil suitability was performed by Soil & Forestry Services of the Carolinas, PA

Peacehaven Place

LP HPPBPS

DESIGN FLOW (gpd):	360
SOIL APPLICATION RATE (gpd/ft.^{2}):	0.25
TOTAL AREA TRENCH BOTTOM:	720
TOTAL LATERAL LENGTH:	240
NUMBER OF FIELDS:	1
LATERAL LENGTH REQUIRED PER FIELD:	240
SUPPLY LINE LENGTH:	136
TOTAL DYNAMIC HEAD:	15.79
MANIFOLD SIZE:	N/A
DOSING VOLUME:	194.40
PUMP TANK DRAW DOWN*:	9.3
SEPTIC TANK SIZE:	1000
PUMP TANK SIZE:	1000

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

17.806

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*) Linda E. Eudy

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, _____, am the legal owner(s) of the property located at _____, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**)

_____, _____, 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.

_____ _____

Signature of Owner(s) Date

Mooresville - Environmental Health
barbara.nebel@co.iredell.nc.us
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

17861
121 Peacehaven

SOIL & FORESTRY SERVICES
OF THE CAROLINAS, PA

www.soilandforestryservices.com

Project#: 22-0168
January 17th, 2023

Linda Eudy
Attn: Linda Eudy
Email: linda.e.eudy@gmail.com

RE: Soil & Site Evaluation for a 3 Bedroom Residence at Peacehaven Place., 0.965 ac Parcel, PIN# 4774147726, Statesville, NC 28625, Iredell County, NC.

Linda:

At your request Soil & Forestry Services of the Carolinas (S&FS) has performed soil/site evaluations on parcel noted above. The Lot size is noted on the attached survey map & soil evaluation form. The purpose of our work was to identify soil areas with potential to support subsurface wastewater disposal systems and provide design details for Session Law submittals to Iredell County Health Department.

Site Conditions

At the time of our evaluation land cover on the property was mostly cleared/open on the property. Topography within the evaluated area was gentle slope near the house site with gentle percentage of slope in the proposed drainfield area. Property lines and corners were surveyed at the time of the evaluation . The Surveyor provided an Autocad File of the survey as a basemap. The proposed septic layout was located via GPS and tape measures which were used to produce the attached *Site Plan*. The house envelope was pinned in the field during our evaluation.

Methodology

We evaluated soil areas through the use of backhoe pits. Soil morphological conditions including color, texture, structure, etc. were reviewed in the field with six pits locations on the property flagged and located via GPS. Four backhoe pits are located in or adjacent to the proposed septic layout. Soil suitability was determined by referencing 15A NCAC 18A.1900 "Laws and Rules for Sewage Treatment and Disposal Systems". *Soil & Site Evaluation Forms* were utilized to record the soil morphological data for each boring. The house envelope was not staked at the time of evaluation. The house must be staked per site plan. An on-ground layout of system and repair was performed using a laser level. Pin flag locations of the layout were also located by GPS and tape measure. Detailed system & repair information is summarized in the following paragraph for this Lot.

Peacehaven Place. Lot 14 PIN #4774147726 (*See Attached Design*)
The septic layout for this lot (8' centers) yielded a total of 562 linear feet of line. The primary system is proposed as 240' of Modified Conventional (50% Reduction) HPPBPS drainfield with low pressure distribution. Trench depth (LOW SIDE) is specified at 16 inches. The repair system is proposed as 240' of Modified Conventional (50% Reduction) HPPBPS drainfield with low pressure distribution. Trench depth (LOW SIDE) is specified at 16 inches. There is 322 linear feet available for repair. **Primary system & repair requires group II or III approved cover over drainfield area.**

Session Law Requirements

All information needed to issue the IP must be submitted with the application. The application shall include all information described in 15A NCAC 18A .1937(d) and be accompanied by a signed and dated statement from the applicant (owner or owner's legal representative) that reads as follows:

"The LSS/LG evaluation(s) attached to this application is to be used to issue an Improvement Permit in accordance with G.S. 130A-335(a2) and (a3)."

Owner Date

Print Name Linda E. Eudy

Signature Linda E. Eudy 3-2-2023

The LSS evaluation shall include a statement bearing the LSS seal and signature that reads as follows:

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

Disclaimer
This report reflects the findings of S&FS, PA. *This LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2)."* Any site modifications that impact the proposed septic areas on the site may nullify this design for Peavehaven Place. System design requirements and site requirements shall be adhered to for installation and Operations Permits to be issued by the local Health Department. If you have questions regarding these requirements a Pre-Construction meeting should be scheduled to discuss. Please contact S&FS if you have any questions regarding this report or the attached information. S&FS also offers septic system inspection, wetland delineation and forestry services.

Sincerely,

LICENSED SOIL SCIENTIST
SAMUEL A. ROLLANS
1231
STATE OF NORTH CAROLINA

S. Ashley Rollans, LSS
Attachment: *Septic Design*

Sheet 1 of 1
PROPERTY ID #: 4774147726
COUNTY: Iredell

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

OWNER: Providence Farm LLC
ADDRESS: 615 New Salem Rd Statesville NC 28625
PROPOSED FACILITY: Residence
LOCATION OF SITE: Lot 14 Peacehaven Pl

APPLICATION DATE:
DATE EVALUATED: 12/16/2022
PROPERTY SIZE: 0.965
PROPERTY RECORDED: Yes

WATER SUPPLY: ☐ Private ☐ Well ☐ Spring ☑ Other — County Water

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 SAPR CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	L/5%	0-23	RBCLWFSBK	FRSS		53			0.25
		23-53	BRCWMABK/SBK	FRSP					
2	L/8%	0-3	BSLG	FRSSS		60			0.25
		3-10	RBSCLWFSBK	FRSS					
		10-60	BRCWFABK/SBK	FRSSP					
3	L/5%	0-8	BCLWFSBK	FRSS		62			0.25
		8-52	BRCWFABK/SBK	FRSSSP					
		52-82	RBCLWMSBK	FRSS					
4	L/5%	0-8	BCLWMSBK	FRSS		60			0.25
		8-38	BRCWMABK/SBK	FRSP					
		38-60	RBCWFSBK/ABK	FRSSP					
5	L/87%	0-4	BCLWFSBK	FRSSSP		60			0.1 DRIP
		4-60	BRCWFSBK	FRSSSP					
6	L/5%	0-5	RBCLWFSBK	FRSS		48			0.1 DRIP
		5-48	BRCWFSBK/ABK	FRSSP					
7								N/A	
8								N/A	
9								N/A	
10								N/A	

LICENSED SOIL SCIENTIST
SAMUEL A ROLLANS
1231
STATE OF NORTH CAROLINA

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Types(s)	HPPBPS	HPPBPS
Site LTAR	0.25	0.25

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Ashley Rollans
OTHER(S) PRESENT: Chad Wagner & Mason Freeman

COMMENTS:

INSPECTION AND MAINTENANCE AGREEMENT

STATE OF NORTH CAROLINA
COUNTY OF IREDELL

This agreement is made and entered into this 18th day of **March 2024**, by and between Grande Homes Co. (hereinafter referred to as the "Owner") and **Paul J. Chappin** (hereinafter referred to as the "Contractor").

WITNESSETH

WHEREAS, the Owner owns or controls the property upon which a ground absorption sewage treatment system (hereinafter "system") is installed, such system being designated a Type **IV** system under the Rules for Sanitary Sewage Collection, Treatment and Disposal found at 15A N.C. Administrative Code 18A.1900 et seq.; and

WHEREAS, 15A N.C. Administrative Code 18A.1961 requires a contract to be executed between the system owner and a management entity prior to the issuance of an Operation Permit for said system; and

WHEREAS, 15A N.C. Administrative Code 18A.1961 requires that a condition of the Operation Permit for said system be that a properly executed contract between the system owner and a management entity, shall be in effect for as long as the system is in use; and

WHEREAS, the Contractor is a management entity, of a type authorized by 15A N.C. Administrative Code 18A.1961 to manage a Type **IV** system.

NOW THEREFORE, in consideration of the premises and of the mutual covenants and promises contained in this Agreement, it is hereby agreed by and between the Owner and the Contractor as stipulated below.

INSPECTION AND MAINTENANCE AGREEMENT

1. The Contractor's Obligations. The Contractor shall perform the following services on the Owner's system located at:

121 Peacehaven Pl.

Statesville, NC 28625

a) The contractor shall inspect the system at least at the frequency, required in Table V (b) of 15A N.C. Admin. Code 18A.1961 (b) for a Type **IV** System.

b) The Contractor shall perform the following routine maintenance procedures in accordance with the conditions of the Operation Permit and the standard practices of the North Carolina Water Pollution Control System Operators Certification Commission.

c) The Contractor shall report the results of its inspections to the local health department at the frequency specified in Table V (b) of 15A N.C. Administrative Code 18A.1961 (b) for a Type **IV** System.

d) If an inspection indicates the need for system repairs, the Contractor shall notify the local health department within 48 hours of the inspection.

e) The Contractor shall notify the Owner of needed repairs, which are outside of the scope of routine maintenance described in subparagraph (b) above. The Contractors shall perform necessary repairs to the system at the request of the Owner and shall be entitled to payment therefor at the Contractor's normal charge for services and materials.

f) The Contractors shall employ or shall contract with a certified operator(s) if required by Table V (b) of 15A N.C. Admin. Code 18A.1961 (b) for a Type **IV** System.

g) The Contractor shall respond to a request for a nonscheduled service or maintenance call within **48** hours after receipt of such request.

INSPECTION AND MAINTENANCE AGREEMENT

2. The Owner's Obligations.

a) The Owner shall pay to the Contractor the sum of **$300.00** per year for periodic inspections, routine maintenance procedures and periodic reports. The annual fee may be amended upon sixty (60) days advance notice to the Owner, but may not be increased more than **10 percent per year**. The Owner shall pay to the Contractor his normal and customary fees for any work performed on the system as a result of nonscheduled service or maintenance calls. All fees are due and payable within thirty (30) days of billing. Payments due to the Contractor and unpaid by the Owner after thirty (30) days shall accrue interest from the due date until paid at a rate of **15** percent per month.

b) Within **10** days of receipt of notice of needed repairs pursuant to paragraph 1.e. above, the Owner shall request the Contractor to complete needed repairs or shall provide to the Contractor evidence that the needed repairs were satisfactorily completed by another entity.

c) The Owner shall provide the Contractor with such access to the system as is reasonably necessary for the Contractor to comply with the terms of this Agreement.

3. Term. This Agreement shall remain in effect until terminated.

a) Automatic Termination.
This agreement shall automatically terminate if the Operation Permit for the system is revoked and all appeals of the revocation are exhausted or the time for taking an appeal has passed.

b) Termination by Mutual Consent.
The Parties may mutually agree to terminate this Agreement by giving written notice of termination by mutual consent to the local health department thirty (30) days in advance of the date of termination.

c) Termination by the Owner.

The Owner may terminate this Agreement by giving notice to the Contractor and to the local health department thirty (30) days in advance of the date of termination.

d) Termination by the Contractor.

1) The Contractor may terminate this Agreement for cause by giving written notice of intent to terminate this Agreement to the Owner and to the local health department thirty (30) days in advance of the date of termination. Cause shall be defined as:

a) failure to remit payment for any bill for services performed under and in accordance with this Agreement if said bill is not paid within thirty (30) days of receipt by the Owner of the bill. If said bill is paid after notice of termination of this Agreement, the Agreement shall continue in effect; or

b) failure of the Owner to provide to the Contractor authorization to complete needed repairs or satisfactory evidence that needed repairs to the system were completed by another entity within **10** days of receipt of notice of needed repairs pursuant to paragraph 1.e. above. If said authorization to complete needed repairs or evidence of completion of said repairs is provided after notice of termination is given but prior to the date of termination of this Agreement, this Agreement shall continue in effect; or

c) failure of the Owner to allow the Contractor such access to the system as is reasonably necessary in order for the Contractor to comply with the terms of this Agreement.

2) The Contractor may not terminate this Agreement without cause, but may assign its rights and duties under this Agreement as provided in paragraph 4, below.

INSPECTION AND MAINTENANCE AGREEMENT

4. Assignment.

   a) Assignment by the Owner.
   The Owner shall notify the Contractor of the name and address of any purchaser of the property on which the system is located. The Owner shall also notify any purchaser of the property on which the system is located of the existence of this Agreement and shall assign all rights and duties under this Agreement to said purchaser.

   b) Assignment by the Contractor.
   The Contractor may assign its rights and duties under this Agreement to another management entity, which is qualified pursuant to 15A N.C. Admin. Code 18A.1961 to manage a Type **IV** system upon thirty (30) days written notice to the Owner and to the local health department.

5. Use of Subcontractors. The Contractor may subcontract with such manufacturers, suppliers and contractors as it deems desirable to perform any of the Contractor's duties under this Agreement. The Contractor shall at all times remain responsible for the performance of and payment for all work performed by all subcontractors.

6. Representations. The Parties represent to each other that each has the power, authority and legal right to enter into and perform its obligations as set forth in this Agreement.

7. Regulatory Amendments. References in this Agreement to sections of the Administrative Code shall include such rules as they may be amended in the future.

8. No Implied Waiver. The waiver by either Party, of the default or a breach by the other Party of any provision of this Agreement shall not operate or be construed to operate as a waiver of any subsequent default or breach. The failure at any time of either Party to enforce any provision of this Agreement (a) shall not be construed to be a waiver of such provisions, or of any other provision; and (b) shall not in any way affect the validity of this Agreement, or any part of this Agreement,

or the right of either Party thereafter to enforce all provisions of this Agreement.

9. Notice. Every notice required under this Agreement shall be in writing and shall be deemed sufficiently given if delivered in person or sent by certified or registered mail, return receipt requested, postage prepaid to the Party to be notified and addressed as follows:

To the Owner: Grande Homes, Inc.
121 Peacehaven Pl.
Statesville, NC 28625

To the Contractor: Paul J. Chappin
521 Virginia Ave.
Statesville, NC 28677

To the Local Health Department: Iredell County Environmental Health
610 East Center Ave., Suite 201
Mooresville, NC 28115

The date of any Notice shall be the date of personal delivery or the date shown on the return receipt as the date of delivery or attempted deliver, as the case may be. Changes in the respective addresses to which notice may be directed may be made from time to time by either Party by notice to the other party.

10. Place of Agreement. This Agreement and any questions concerning its validity, the system construction or performance shall be governed by the laws of the State of North Carolina notwithstanding the place of execution, or the order in which the signatures of the Parties are affixed.

11. Entire Agreement and Amendment. This Agreement supersedes all prior negotiations, agreements and understandings between the Parties with respect to the subject matter hereof and constitutes the entire Agreement between the Parties with respect to the subject matter hereof. To be effective, any amendment or modification to this Agreement must be in writing and must be signed by the Parties.

INSPECTION AND MAINTENANCE AGREEMENT

12. Severability. In the event that any provision of this Agreement shall, for any reason, be determined to be invalid, illegal or unenforceable in any respect, the Parties shall negotiate in good faith and agree to such amendments, modifications or supplements of or to this Agreement or such other appropriate actions as shall, to the maximum practicable in light of such determination, implement and give effect to the intentions of the Parties as reflected in this Agreement, and the other provisions of this Agreement shall, as so amended, modified, supplemented or otherwise affected by such actions, remain in full force and effect.

IN TESTIMONY WHEREOF, the Parties hereto have executed this Agreement in duplicate originals, one of which is retained by each of the Parties, the day and year first above written.

Matthew E. Mc Muller

(Owner)

(Contractor)