# ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 x3456 Mooresville Office (704) 660-3625 BM

PERMIT : OSWP 2024-63143

PIN # 4775 - 37 - 8471

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

APPLICANT/OWNER: William Wilkins APPLICANT ADDRESS: 134 Nottingham Cir, Statesville

SITE ADDRESS: 134 Nottingham Cir, Statesville 28625 PHONE: 630-334-4100 ALT. PHONE -

SITE DIRECTIONS: 64 E - South - Fox Creek - Nottingham SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Fox Creek SECTION: - LOT # 30 LOT AREA: 1.1 DESIGN FLOW: 600 gpd L.T.A.R.(Initial): 0.25 L.T.A.R (Repair): 0.3

Septic Tank 1500 (gal) STB 964 Date

Pump Tank (gal) PT Date

Pump Make Model Serial #

# Nitrification Fields 1 # Lines Ex+4 Linear Ft Ex + 240

Trench Width 36in *Max. Trench Depth(Initial) 31in *Max. Trench Depth(Repair) 31in Gravel Depth -

* Measured on the downhill side of the trench

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

System Description: Existing + 25% reduction

Repair System Description: 50% reduction

Maintenance Agreement Required: ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

Effluent Standard: ☒ DSE ☐ HSE ☐ TS-I ☐ TS-II ☐ RCW ☐ NSF/ANSI 40

Usable Depth to LC (Initial): 48in

☒ Residence No. Bedrooms 5

☐ Business No. Persons 10

☐ Other No. Employees

☐ Slab ☐ Crawl Space

☒ Basement w/plumbing ☐ Basement w/o plumbing

Usable Depth to LC (Repair): 48in *Limiting Condition*

**Water Supply**

☐ Private

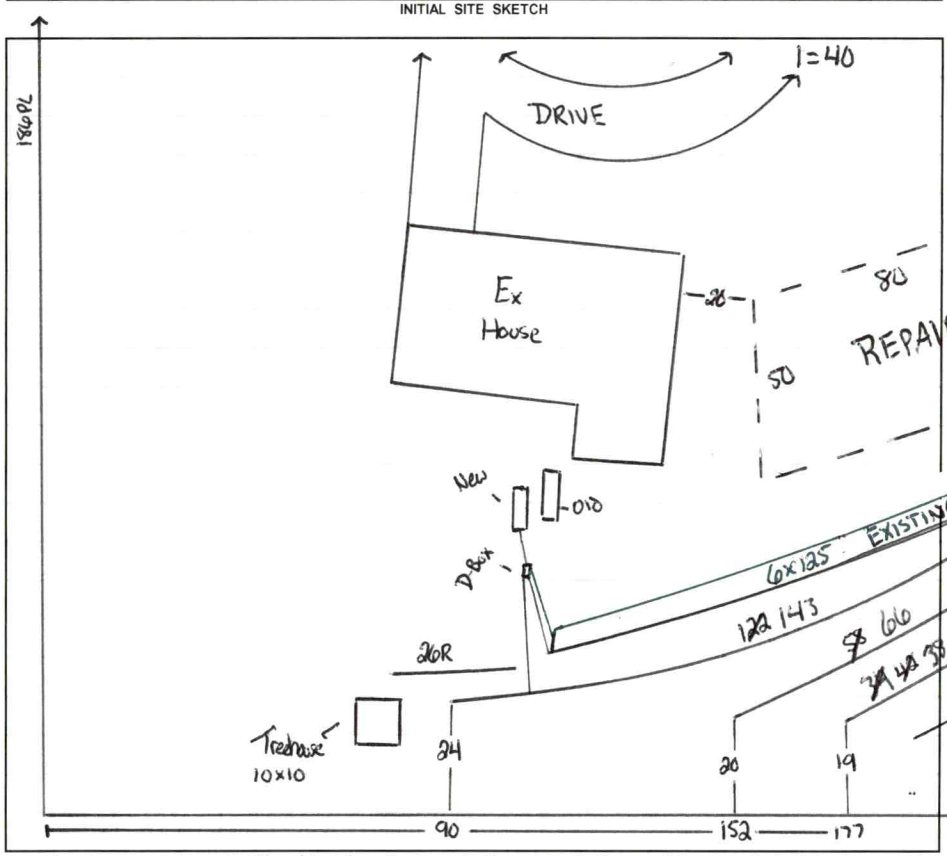
☒ Public

☐ Community

Comments / Conditions: Pump, crush, & fill old tank. Install on contour. Do not shallow up trench bottom. Feed Ex bed 2/3 from d-box and new lines 1/3 from D-Box.

May need to move fence to install system.

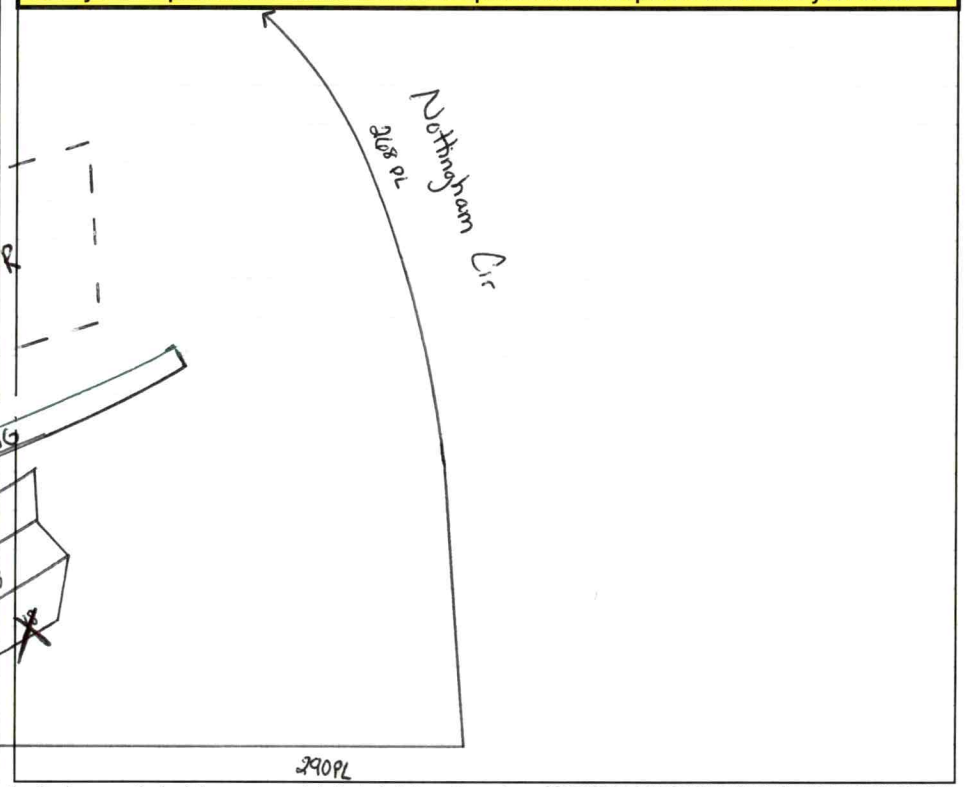
INITIAL SITE SKETCH




AS BUILT SKETCH

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 between 8am-9am

the day the inspection is needed. Be sure to speak with an inspector to confirm your time.




*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.* X **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Online Signature Date: Installed by: Lentz

IMPROVEMENT PERMIT by: Cory Hill Date: 11/15/24 OPERATION PERMIT by: Cory Hill Date: 2/25/25

AUTHORIZATION TO CONSTRUCT by: Cory Hill Date: 12/4/24 Existing System Inspected by: Date:

| Item | Date | Initials |
|---|---|---|
| Drain Lines Checked | | |
| Tanks Checked | | |
| Pressure Manifold or Valve Box Checked | | |
| Pressure Head Set | | |
| Electrical Checked | | |
| Floats Set | | |
| Alarm Checked | | |
| Maintenance Contract Needed? Y / N | | |
| Comments: | | |
| | | |
| | | |

| Repairs Only | |
|---|---|
| | State Code |
| Failing System Code | |
| Type of Distribution | G or P |
| Type of Failure/Malfunction | |
| Primary Cause of Failure/Malfunction | |
| | |
| Age of System? _____ | |
| Initial or Repair? _____ | |

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


PROPERTY ID #:
COUNTY: Iredell

## SOIL/SITE EVALUATION *for* ON-SITE WASTEWATER SYSTEM

(Complete all fields in full)

OWNER: William Wilkins DATE EVALUATED: 11/12/24
ADDRESS: 134 Nottingham
PROPOSED FACILITY: 5bd/r home PROPOSED DESIGN FLOW (.0400): 600 gpd PROPERTY SIZE: 1.1
LOCATION OF SITE: 134 Nottingham Cir PROPERTY RECORDED: yes
WATER SUPPLY: X Public Single Family Well Shared Well Spring Other WATER SUPPLY SETBACK: 10'
EVALUATION METHOD: Auger Boring X Pit Cut TYPE OF WASTEWATER: X Domestic High Strength IPWW

| PROFILE # | .0502 LANDSCAPE POSITION/ SLOPE % | HORIZON DEPTH (IN.) | SOIL MORPHOLOGY .0503 STRUCTURE/ TEXTURE | SOIL MORPHOLOGY .0503 CONSISTENCE/ MINERALOGY | OTHER PROFILE FACTORS .0504 SOIL WETNESS/ COLOR | .0505 SOIL DEPTH | .0506 SAPRO CLASS | .0507 RESTR HORIZ | .0509 PROFILE CLASS & LTAR* | .0503 SLOPE CORRECTION |
|---|---|---|---|---|---|---|---|---|---|---|
| 1 | LS 10% | 0 - 14 | SC SBK | SS SP FR SE | 10yr 6/5 at 23" | 51 | - | - | .25 PS | 4 |
| | | 14 - 31 | C ABK | SS SP FR SE | | | | | | |
| | | 31 - 51 | CL SBK | SS SP FR SE | | | | | | |
| 2 | LS 8% | 0 - 12 | SC SBK | SS SP FR SE | - | 50 | - | - | .3 PS | 4 |
| | | 12 - 30 | C ABK | SS SP FR SE | | | | | | |
| | | 30 - 50 | CL SBK | SS SP FR SE | | | | | | |
| 3 | LS 10% | 0 - 20 | SC SBK | SS SP FR SE | - | 48 | - | - | .3 PS | 4 |
| | | 20 - 48 | C SBK | SS SP FR SE | | | | | | |
| 4 | | | | | | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.0508) | ~~10~~ 5 | 5 |
| System Type(s) | 25% | 50% |
| Site LTAR | .25 | .3 |
| Maximum Trench Depth | 36 | 36 |

SITE CLASSIFICATION (.0509): S
EVALUATED BY: Cory Whitaker
OTHER(S) PRESENT:

Comments:

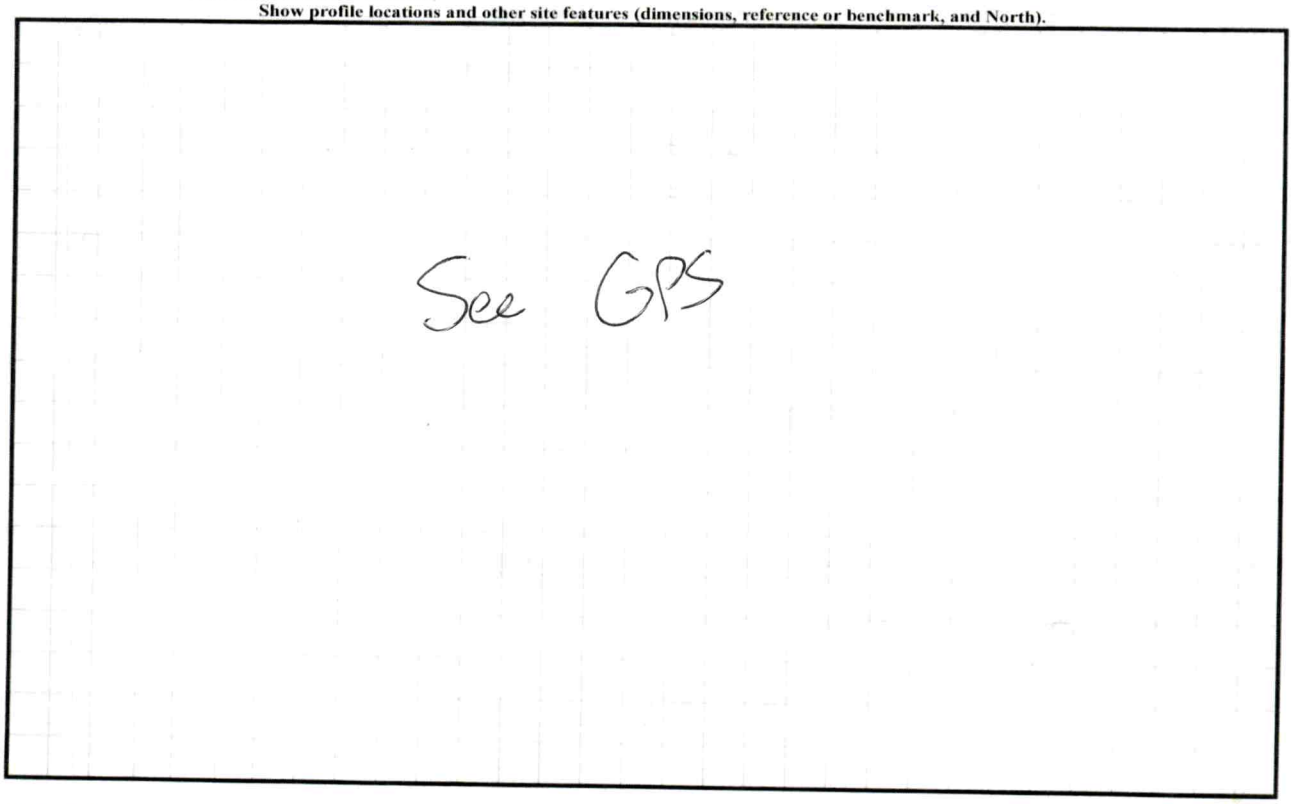
# LEGEND

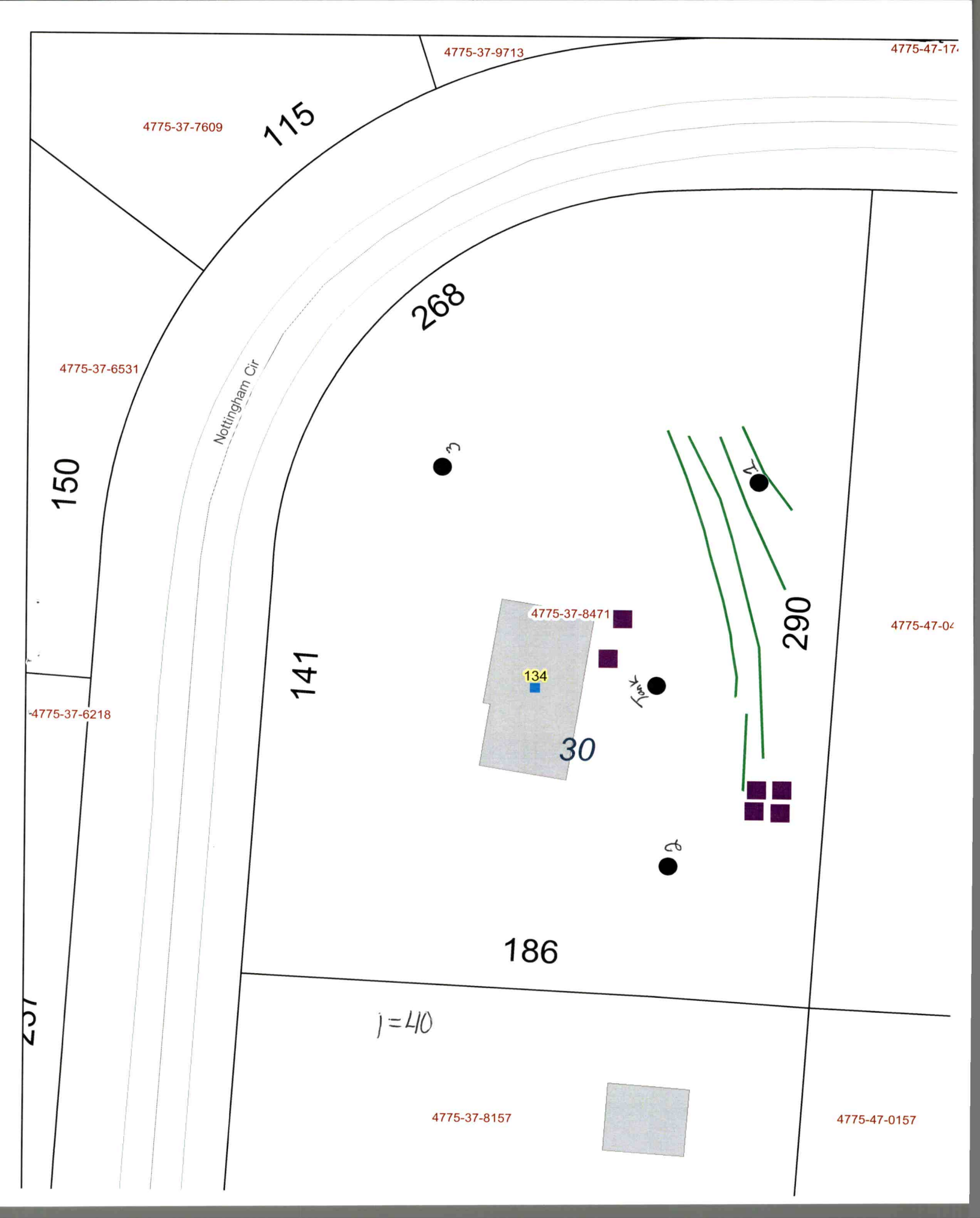
| LANDSCAPE POSITION | SOIL GROUP | SOIL TEXTURE | CONVENTIONAL LTAR (gpd/ft²) | SAPROLITE LTAR (gpd/ft²) | LPP LTAR (gpd/ft²) | MINERALOGY/ CONSISTENCE | | STRUCTURE |
|---|---|---|---|---|---|---|---|---|
| CC (Concave slope) | I | S (Sand) | 0.8 - 1.2 | 0.6 - 0.8 | 0.4 -0.6 | MOIST | WET | SG (Single grain) |
| CV (Convex Slope) | | LS (Loamy sand) | | 0.5 -0.7 | | Lo (Loose) | NS (Non-sticky) | M (Massive) |
| D (Drainage way) | II | SL (Sandy loam) | 0.6 - 0.8 | 0.4 -0.6 | 0.3 - 0.4 | VFR (Very friable) | SS (Slightly sticky) | GR (Granular) |
| FP (Flood plain) | | L (Loam) | | 0.2 - 0.4 | | FR (Friable) | S (Sticky) | SBK (Subangular blocky) |
| FS (Foot slope) | III | SiL (Silt loam) | 0.3 - 0.6 | 0.1 - 0.3 | 0.15 - 0.3 | FI (Firm) | VS (Very sticky) | ABK (Angular blocky) |
| H (Head slope) | | SCL (Sandy clay loam) | | 0.05 - 0.15** | | VFI (Very firm) | NP (Non-plastic) | PR (Prismatic) |
| L (Linear Slope) | | CL (Clay loam) | | None | | EFI (Extremely firm) | SP (Slightly plastic) | PL (Platy) |
| N (Nose slope) | | SiCL (Silty clay loam) | | | | | P (Plastic) | |
| R (Ridge/summit) | | Si (Silt) | | | | | VP (Very plastic) | |
| S (Shoulder slope) | IV | SC (Sandy clay) | 0.1 - 0.4 | | 0.05 - 0.2 | SEXP (Slightly expansive) | | |
| T (Terrace) | | SiC (Silty clay) | | | | EXP (Expansive) | | |
| TS (Toe Slope) | | C (Clay) | | | | | | |
| | | O (Organic) | None | | | | | |

* Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.
**Sandy clay loam saprolite can only be used with advanced pretreatment in accordance with 15A NCAC 18E .1200.

*HORIZON DEPTH* In inches below natural soil surface
*DEPTH OF FILL* In inches from land surface
*RESTRICTIVE HORIZON* Thickness and depth from land surface
*SAPROLITE* S(suitable) or U(unsuitable); Evaluation of saprolite shall be by pits.
*SOIL WETNESS* Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
*CLASSIFICATION* S (Suitable) or U (Unsuitable)

**Show profile locations and other site features (dimensions, reference or benchmark, and North).**




4775-37-9713
4775-47-17
4775-37-7609
115
268
4775-37-6531
Nottingham Cir
150
3
4
4775-37-8471
134
141
290
4775-47-04
Key
30
4775-37-6218
2
186
j=40
4775-37-8157
4775-47-0157

# PERMIT SNAPSHOT REPORT OSWP-2024-63143 FOR IREDELL COUNTY

| | | | | | |
|---|---|---|---|---|---|
| **Permit Type** | Environmental Health OSWP | **Project:** | | **App Date:** | 10/08/2024 |
| **Work Class:** | EH Septic Permit | **District:** | Iredell County | **Exp Date:** | NOT AVAILABLE |
| **Status:** | In Progress | **Square Feet:** | 0.00 | **Completed:** | NOT COMPLETED |
| **Valuation:** | $0.00 | **Assigned To:** | Whicker, Cory | **Approval Expire Date:** | |
| **Description:** | Please see notes; | | | | |

| | | |
|---|---|---|
| **Parcel:** 4775378471.000 Main | **Address:** 134 Nottingham Cir Statesville, NC 28625 Main | **Zone:** R-20(Suburban Residential District) |

| Property Owner | Applicant/Authorized Agent |
|---|---|
| William B Wilkins | William B Wilkins |
| 134 Nottingham Circle | 134 Nottingham Circle |
| Statesville, NC 28625 | Statesville, NC 28625 |
| Mobile: (630) 334-4100 | Mobile: (630) 334-4100 |

**Permit Custom Fields**

| | | | | | |
|---|---|---|---|---|---|
| How is your site plan being submitted | Survey Plat | Septic Application/Permit Type | Expand septic to add bedrooms | Does the site contain any jurisdictional wetlands | No |
| Non-domestic Sewage Generated | No | Other Public Agency | No | All proposed structure dimensions | n/a |
| Maximum Number of Bedrooms | 5 | If other Addition/Structure, please explain | | Number of Occupants | 4 |
| Foundation Type | Basement with Plumbing | Water Supply | Other Public Water | Desired Septic System Type | Conventional (most common) |
| If other septic system type, please explain | | Pump Make | | # of Nitrification Fields | |
| Model | | Serial # | | System Description | |
| Repair System Description | | Comments/Conditions | | Permit type(s) | Authorization to Construct |
| Has this project been approved by TRC | No | Lot Acreage | 1.1 | Front Setback | 35 |
| Back Setback | 35 | Left Setback | 15 | Right Setback | 15 |
| Is the structure or development in the floodplain | No | Is the property in a local historic district? | No | Is the property located downtown? | No |
| Additional Unique Setbacks Apply | No | Watershed | WSII BOW BACK CREEK | | |

| Attachment File Name | Added On | Added By | Attachment Group | Notes |
|---|---|---|---|---|
| Signature_William_Wilkins_10/8/2024.jpg | 10/08/2024 12:37 | Wilkins, William | | Uploaded via CSS |
| Xerox Scan_10082024161829.pdf | 10/08/2024 16:25 | Fleming, Latasha | Available Online | Notes/Email |
| 20241008123531_v1.pdf | 10/08/2024 16:25 | Wilkins, William | Available Online | |

| Inspection Number | Status | Inspection Type | Request Date | Scheduled Start Date | Scheduled End Date | Actual Start Date | Actual End Date |
|---|---|---|---|---|---|---|---|
| 2024-262059 | Passed - Permit | OSWP Septic/Well Preliminary Site Visit | 11/05/2024 | 11/05/2024 0:00 | 11/05/2024 0:00 | 11/05/2024 12:35 | 11/05/2024 12:35 |

**Comments:** Heath approved BN to change for Pete 11/5/24

**Inspectors:** Mravetz, Peter (Primary)

| Checklist Item | Description | Passed | Comments |
|---|---|---|---|
| General Comments | Checklist item used to track general comments, not specific to any other checklist item | No | |

# PERMIT SNAPSHOT REPORT (OSWP-2024-63143)

| Note | Created By | Date and Time Created |
|---|---|---|
| 1. William will find all corners for property and call me back when ready. | Peter Mravetz | 10/15/2024 8:06 |
| 2. Byron will call me back after he gets a survey done. | Peter Mravetz | 10/15/2024 12:35 |

| Invoice No. | Fee | | Fee Amount | Amount Paid |
|---|---|---|---|---|
| INV-00036872 | New Gravity System | | $500.00 | $500.00 |
| | | Total for Invoice INV-00036872 | $500.00 | $500.00 |
| | | **Grand Total for Permit** | **$500.00** | **$500.00** |

| Workflow Step / Action Name | Action Type | Start Date | End Date |
|---|---|---|---|
| Application Completeness Check v.1 | | | |
| Confirm application complete v.1 | Generic Action | | |
| **Lot Readiness Verification v.1** | | 11/05/2024 12:35 | |
| OSWP Septic Preliminary Site Visit v.1 | Inspection | 11/05/2024 12:35 | 11/05/2024 12:35 |
| OSWP Site Evaluation v.1 | Inspection | | |
| ~~**Zoning Review v.1**~~ | | | 10/11/2024 11:59 |
| ~~Floodplain Admin Overview v.1~~ | Task | | 10/11/2024 11:59 |
| ~~Iredell County Zoning Approval v.1~~ | Task | | 10/11/2024 11:59 |
| ~~Issue Invoice v.1~~ | Generic Action | | 10/11/2024 11:59 |
| ~~Fees Paid v.1~~ | Generic Action | | 10/11/2024 11:59 |
| **Fees v.1** | | 10/11/2024 11:59 | 10/11/2024 12:00 |
| Issue Invoice v.1 | Generic Action | | 10/11/2024 12:00 |
| Fees Paid v.1 | Generic Action | | 10/11/2024 12:00 |
| Issue Improvement Permit v.1 | | | |
| Issue Invoice v.1 | Generic Action | | |
| Fees Paid v.1 | Generic Action | | |
| Issue Permit v.1 | Generic Action | | |
| Permit Completion Process v.1 | | | |
| Authorization to Construct Permit v.1 | Create Sub Permit | | |
| Issue Authorization to Construct v.1 | Generic Action | | |

## IREDELL COUNTY HEALTH DEPARTMENT

### (SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR M. P. Knox DATE 4-17-78 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 64 E. TL on Rte 2177 4. - Forrench

_____ S. R. No. _____

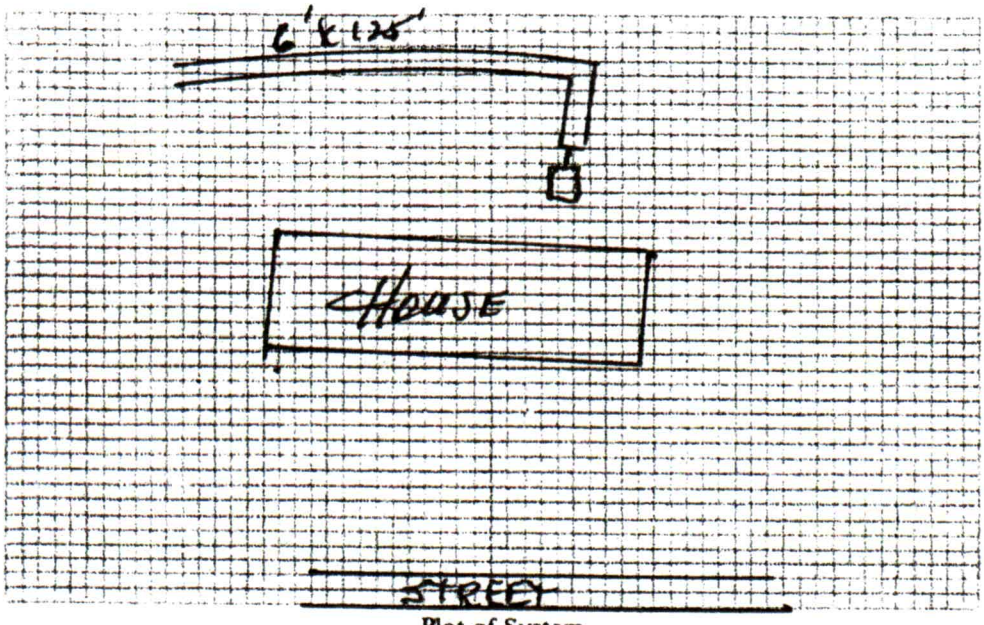
SUBDIVISION NAME Forrench LOT NO. 30 SECTION OR BLOCK NO. _____

House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

| | | | | | |
|---|---|---|---|---|---|
| Garbage Disposal Unit | Yes (✓) | No ( ) | Character & Porosity of Soil | | Clay |
| Auto. Dishwasher | Yes (✓) | No ( ) | Percolation Rate | | good |
| Auto. Wash. Machine | Yes (✓) | No ( ) | Topography | | 2 – 6% Slope |
| Site Suitable | Yes (✓) | No ( ) | Depth to Water Table | | comb. |
| | | | Rock or other impervious formations | | none |

Lot Area 1.10 Acres



Plot of System

Size of Tank 1250 G

Nitrification Field:
No. of Lines 2
Sq. Ft. 250 Linear Ft. 25'
Depth of Stone in Lines 16"

Water Supply: Individual ( )
Public (✓)

Installed by Ward Lackey

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Glenn Fox Jr. DATE 4/1

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold