ICHD - ENVIRONMENTAL HEALTH DIVISION

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

HS

MANF 2024-52233

PERMIT # 2023-37305 ✓

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

PIN # 4778 -- 16 -- 9995 ✓

APPLICANT/OWNER: Timothy Marlow

APPLICANT ADDRESS: 135 Harmony Blend Dr, Harmony

SITE ADDRESS: 123 Harmony Blend Dr, Harmony 28634

PHONE: 704-546-2202

ALT. PHONE -

SITE DIRECTIONS: 21 N - Chief Thomas - Harmony Blend

SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION:

SECTION: - ✓ LOT # ✓ LOT AREA: 9.826 acres

DESIGN FLOW: 360 gpd L.T.A.R.: 0.3

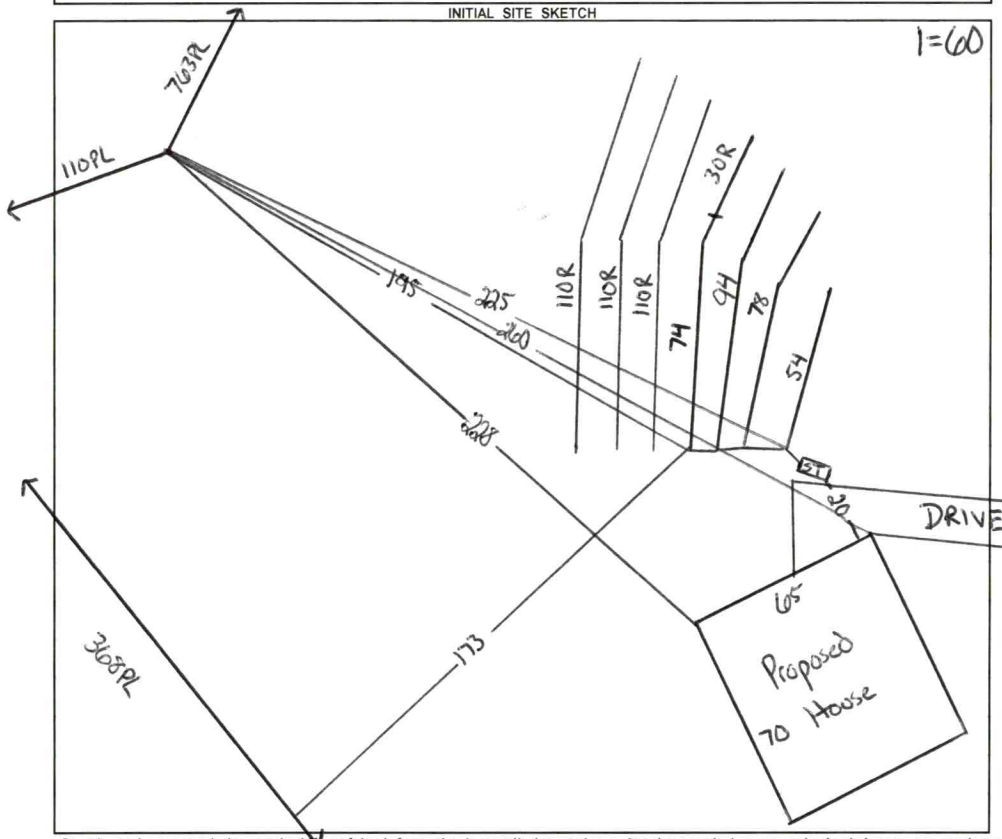
Septic Tank	1000	(gal)	STB 8/10/2024	Date	760	☒ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 3
Pump Tank		(gal)	PT	Date		System Description:	25% reduction	☐ Business	No. Persons 6
Pump Make		Model		Serial #		Repair System Description:	25% reduction	☐ Other	No. Employees
# Nitrification Fields	1	# Lines	4	Linear Ft	300'	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☒ Crawl Space
Trench Width	36 in	Trench Bottom Depth(Low side)		30 in	Gravel Depth	-	☒ GRAVITY ☐ PRESSURE	☐ Basement w/ plumbing	☐ Basement w/o plumbing

Water Supply: ☐ Private ☒ Public ☐ Community

Comments / Conditions: Install on contour with the land. Do not grade, park, or drive on septic area.

House moved foward, does not impact septic

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.

Installed as drawn.

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: Online Signature Date: -

Installed by: Chris Frye ✓

IMPROVEMENT PERMIT by: Cary Whitt ✓ Date: 11/9/23

OPERATION PERMIT by: Sarah Williams ✓ Date: 10/1/2024

AUTHORIZATION TO CONSTRUCT by: Cary Whitt ✓ Date: 3/15/24

Existing System Inspected by: Date:

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

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

Sheet 1 of 1
PROPERTY ID #: 4778169945
COUNTY: Iredell

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

OWNER: Timothy Marlow
ADDRESS: 135 Harmony Blend
PROPOSED FACILITY: 3 bd/r home
PROPOSED DESIGN FLOW (.1949): 360 gpd
LOCATION OF SITE: 123 Harmony Blend
APPLICATION DATE 9/22/23
DATE EVALUATED: 11/8/23
PROPERTY SIZE: 9.826
PROPERTY RECORDED: yes

WATER SUPPLY: Private X Public Well Spring Other
EVALUATION METHOD: Auger Boring X Pit Cut
TYPE OF WASTEWATER: X 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 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	Linear 10%	0 - 24	C SBK	SS SP FR SE	-	48	-	-	.325 PS
		24 - 48	CL SBK	SS SP FR SE					
2	Linear 11%	0 - 12	Compacted		-	48	-	-	.3 PS
		12 - 32	C SBK	SS SP FR SE					
		32 - 48	CL SBK	SS SP FR SE					
3	Linear 12%	0 - 10	Compacted		-	48	Many inc in C & CL layer		.3 PS
		10 - 29	C SBK	SS SP FI SE					
		29 - 48	CL SBK	SS SP FR SE					
4	Linear 10%	0 - 11	Compacted		-	48	-	-	.3 PS
		11 - 28	C SBK	SS SP FI SE					
		28 - 48	CL SBK	SS SP FR SE					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	25%	50%
Site LTAR	.3	.3

OTHER FACTORS (.1946): PS
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Cory Whicker
OTHER(S) PRESENT:

COMMENTS:

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	SEXP (Slightly Expansive)	G (Single Grain)
CV (Convex Slope)		LS (Loamy Sand)			EXP (Expansive)	M (Massive)
D (Drainage Way)						CR (Crumb)
DS (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
FP (Flood Plain)		L (Loam)				SBK (Subangular Blocky)
FS (Foot Slope)						ABK (Angular Blocky)
H (Head Slope)	III	Si (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
L (Linear Slope)		SiCL (Silty Clay Loam)				PR (Prismatic)
N (Nose Slope)		CL (Clay Loam)				
R (Ridge)		SCL (Sandy Clay Loam)			**MOIST**	**WET**
S (Shoulder Slope)		SiL (Silt Loam)				
T (Terrace)					VFR (Very Friable)	NS (Non-sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FR (Friable)	SS (Slightly Sticky)
		SiC (Silty Clay)			FI (Firm)	S (Sticky)
		C (Clay)			VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
		O (Organic)	None	None	EFI (Extremely Firm)	NP (Non-plastic)
						SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

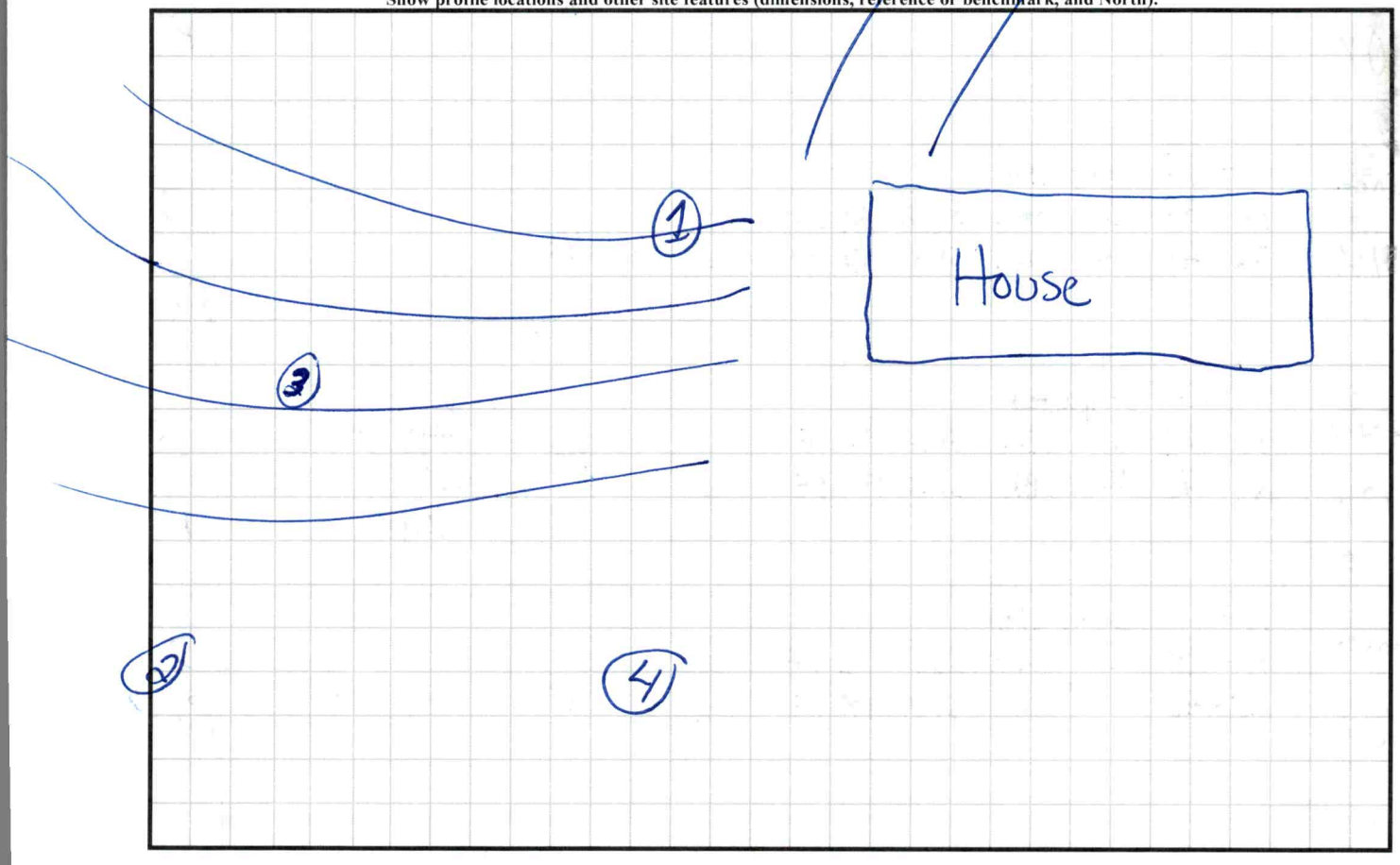
NOTES

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)
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), PS (Provisionally Suitable), or U (Unsuitable)

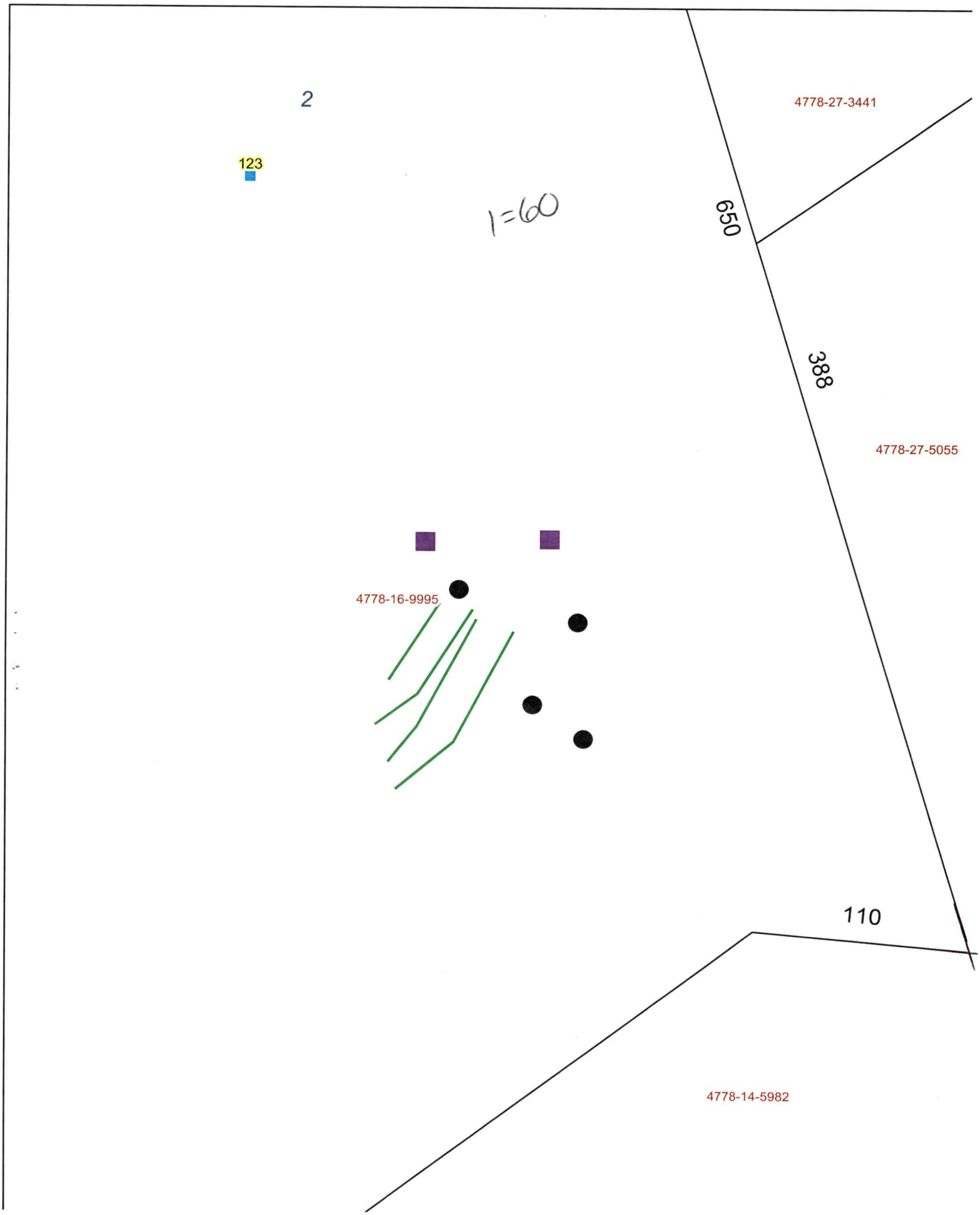
Evaluation of saprolite shall be by pits.

Long-term Acceptance Rate (LTAR): gal/day/ft^2

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



Updated February 2014


2
123
1=60
650
388
110
4778-27-3441
4778-27-5055
4778-16-9995
4778-14-5982

PERMIT SNAPSHOT REPORT OSWP-2023-37305 FOR IREDELL COUNTY

Permit Type: Environmental Health OSWP
Work Class: EH Septic Permit
Status: On Hold
Valuation: $0.00

Project:
District: Iredell County
Square Feet: 0.00
Assigned To: Whicker, Cory

App Date: 09/22/2023
Exp Date: NOT AVAILABLE
Completed: NOT COMPLETED
Approval Expire Date:

Description: new home 2 bath 3 bedroom 10/02 sent email. GM 10/03 Spoke to Sandra. She stated site ready GM 9.8 acres. Site ready GM

Parcel:	**Address:**	**Zone:**
4778169995.000 Main	123 Harmony Blend Dr Main Harmony, NC 28634	RA(Residential Agricultural District)

Property Owner	Applicant/Authorized Agent
timothy marlow	timothy marlow
135 harmony blend dr	135 harmony blend dr
harmony, NC 28634	harmony, NC 28634
Home: (704) 546-2202	Home: (704) 546-2202

Permit Custom Fields

How is your site plan being submitted	Custom Site Plan	Septic Application/Permit Type	Authorization to Construct	Does the site contain any jurisdictional wetlands	No
Non-domestic Sewage Generated	No	Other Public Agency	No	All proposed structure dimensions	1600 sq feet 28by60
What are the proposed structures	Manufactured Home	Type of New Single-Family Residence	Mobile Home	Maximum Number of Bedrooms	3
If other Addition/Structure, please explain		Number of Occupants	2	Foundation Type	Crawl Space Foundation
Residential/Business/Other	Residential	Water Supply	Municipal Water	Desired Septic System Type	No Preference
Has this project been approved by TRC	No	Lot Acreage	9.826	Front Setback	35
Back Setback	35	Left Setback	15	Right Setback	15
Zoning Permit Issued Date	Sep 29 2023 12:00AM	Zoning Permit Expiration Date	Mar 27 2024 12:00AM	Is the structure or development in the floodplain	No
Is the property in a local historic district?	No	Is the property located downtown?	No	Zoning Notes/Addendums	REQUIREMENTS FOR ALL MULTI -SECTIONAL MOBILE HOMES Must meet requirement R9 of the LDC. Minimum size of main body is at least 22 feet by 40 feet; Must have standard residential shingles; Minimum of 3/12 roof pitch; Must have continuous masonry underpinning; Must have minimum roof eave and raker projections of 6 inches; Must have a 36 square foot deck or porch at all front entrances; Exterior siding must consist of vinyl or aluminum lap siding, wood, or hardboard, comparable in composition, appearance and durability to residential siding; Must remove towing apparatus; Must face front property line and be no more than

PERMIT SNAPSHOT REPORT (OSWP-2023-37305)

	20 degrees from parallel to the front property line. Original mobile home must be removed before Certificate of Occupancy can be approved.	Additional Unique Setbacks Apply	No	Watershed	NOT IN A WATERSHED

Attachment File Name	Added On	Added By	Attachment Group	Notes
Signature_timothy_marlow_9/22/2023.jpg	09/22/2023 11:56	marlow, timothy		Uploaded via CSS
123 harmony blend zd_v1.pdf	09/22/2023 16:06	COMEAUX, DEBRA	Available Online	Additional Supporting Information
123 hramony blend_v1.pdf	09/22/2023 16:06	COMEAUX, DEBRA	Available Online	Authorize to Act as Agent
123 harmony blend site plan_v1.pdf	09/25/2023 11:09	Sloan, Chrystal	Available Online	Site Plan

Inspection Number	Status	Inspection Type	Request Date	Scheduled Start Date	Scheduled End Date	Actual Start Date	Actual End Date
2023-147124	Passed - Permit	OSWP Septic/Well Preliminary Site Visit	10/03/2023	10/03/2023 0:00	10/03/2023 0:00	10/03/2023 16:29	10/03/2023 16:29

Inspectors: McLeod, Grace (Primary)

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

Note	Created By	Date and Time Created
1. 10/03 Spoke to Sandra. She stated site ready. 9.8 acres site near back of property. Road bed is packed and drivable. GM	Grace McLeod	10/03/2023 9:25
2. Called and left message 10/4 Waiting to hear back for pits	Cory Whicker	10/04/2023 8:48

Invoice No.	Fee		Fee Amount	Amount Paid
INV-00021220	New Gravity System		$500.00	$500.00
	Iredell Zoning Permit Fee		$75.00	$75.00
		Total for Invoice INV-00021220	$575.00	$575.00
INV-00021221	Iredell Zoning Tech Fee		$2.25	$2.25
		Total for Invoice INV-00021221	$2.25	$2.25
		Grand Total for Permit	**$577.25**	**$577.25**

Workflow Step / Action Name	Action Type	Start Date	End Date
Application Completeness Check v.1		09/25/2023 9:50	09/25/2023 9:50
Confirm application complete v.1	Generic Action		09/25/2023 9:50
Lot Readiness Verification v.1		10/03/2023 16:29	
OSWP Septic Preliminary Site Visit v.1	Inspection	10/03/2023 16:29	10/03/2023 16:30
OSWP Site Evaluation v.1	Inspection		
Zoning Review v.1		09/25/2023 14:31	09/29/2023 11:52
~~Floodplain Admin Overview v.1~~	Task		09/25/2023 14:31
Iredell County Zoning Approval v.1	Task	09/25/2023 14:45	09/29/2023 11:52
Issue Invoice v.1	Generic Action		09/25/2023 14:31
Fees Paid v.1	Generic Action		09/29/2023 11:52
Fees v.1		10/02/2023 16:03	10/02/2023 16:03
Issue Invoice v.1	Generic Action		10/02/2023 16:03
Fees Paid v.1	Generic Action		10/02/2023 16:03
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			

PERMIT SNAPSHOT REPORT (OSWP-2023-37305)

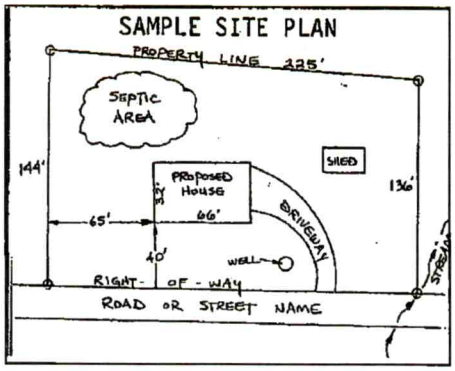
Authorization to Construct Permit v.1	Create Sub Permit
Issue Authorization to Construct v.1	Generic Action

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *SITE PLAN WORKSHEET*

SEE THE "SAMPLE SITE PLAN" BELOW. *INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!*



Place an (X) beside each item as you complete the site plan:

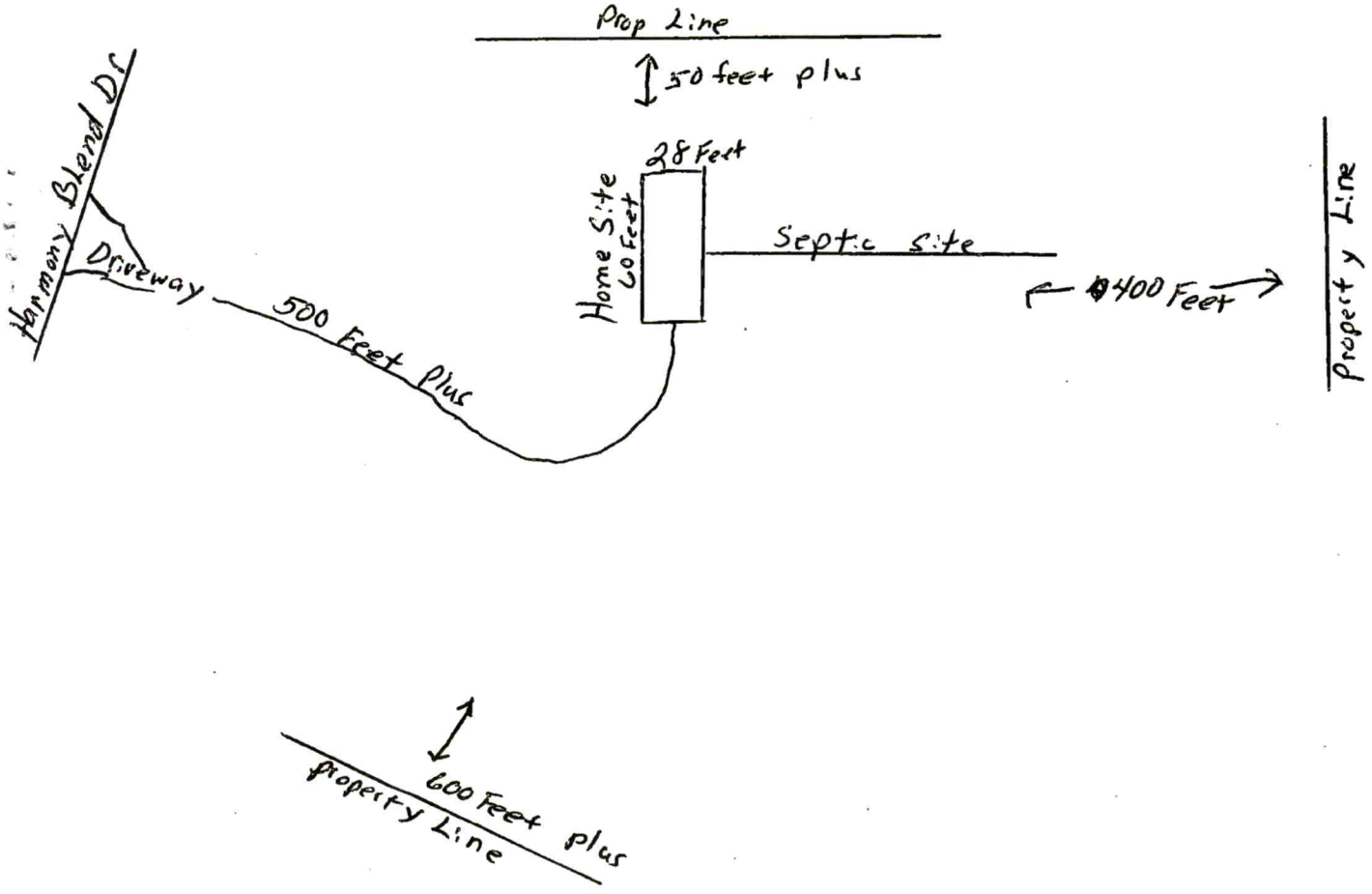
- ( ) **Property Line measurements are clearly identified**
- ( ) **All proposed structures are indicated**
- ( ) **Front and side setbacks from property line**
- ( ) **Preferred driveway location and well location**
- ( ) **Area you prefer your septic system to be placed**
- ( ) **North arrow, or other sufficient indicator of direction**

Circle N/A on the following if appropriate:

Location of septic systems and wells within 100' of your property	**N/A**
Location of easements and rights of ways on your property	**N/A**
Location of any designated wetlands on the property	**N/A**

USE THIS SPACE TO DRAW YOUR SITE PLAN

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



Signature: _____ _____

Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**