ICHD - ENVIRONMENTAL HEALTH DIVISION

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

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

PERMIT : OSWP 2024-62587

PIN # 4785-63-7392

APPLICANT/OWNER: Lacey Owens

APPLICANT ADDRESS: 779 Barry Oak Rd, Cleveland

SITE ADDRESS: 779 Barry Oak Rd, Cleveland 27013

PHONE: 704-640-4794 ALT. PHONE 704-437-4085

SITE DIRECTIONS: 64E - Barry Oak

SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: - SECTION: - LOT # - LOT AREA: 1.37 DESIGN FLOW: 360 gpd

L.T.A.R.(Initial): - L.T.A.R (Repair): 0.3

Septic Tank	1000 (gal)	STB	7600	Date		☐ New System ☒ Repair ☐ Expansion	System Type: I (II) III IV V VI	☒ Residence	No. Bedrooms 3
Pump Tank	(gal)	PT		Date		System Description: -		☐ Business	No. Persons 6
Pump Make		Model		Serial #		Repair System Description:	25% reduction	☐ Other	No. Employees
# Nitrification Fields	1	# Lines	3	Linear Ft	300'	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☒ Crawl Space
Trench Width	36in	*Max. Trench Depth(Initial)	-	*Max. Trench Depth(Repair)	30in	Gravel Depth	-	☒ GRAVITY ☐ PRESSURE	☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

* Measured on the downhill side of the trench

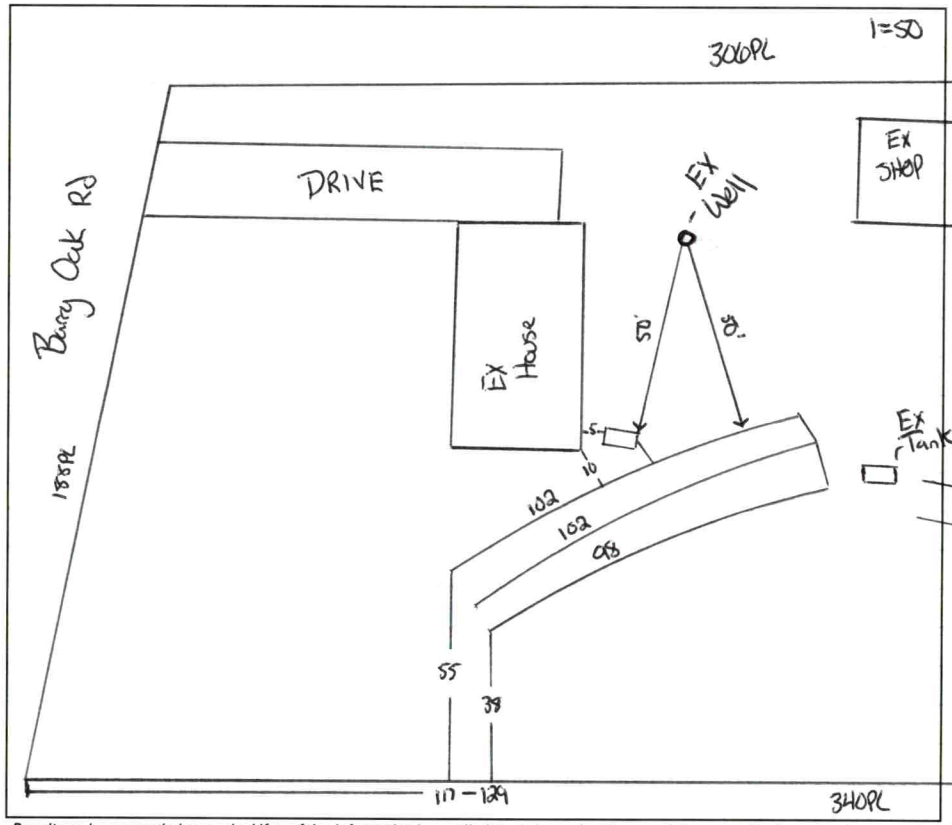
Effluent Standard: ☒ DSE ☐ HSE ☐ TS-I ☐ TS-II ☐ RCW ☐ NSF/ANSI 40

Usable Depth to LC (Initial): 48 in

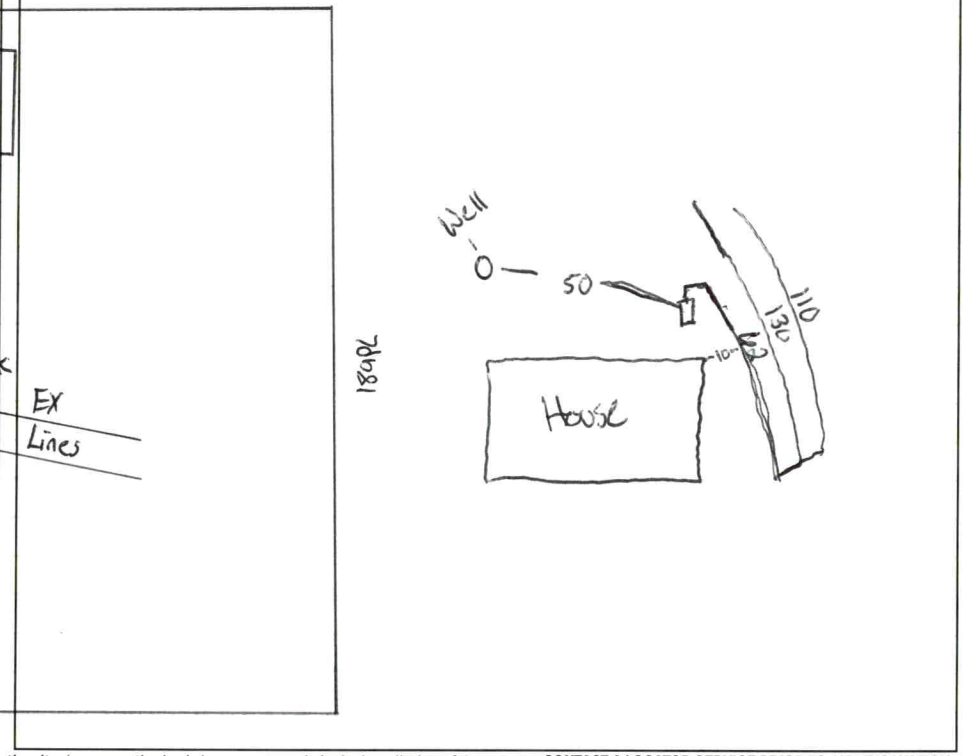
Usable Depth to LC (Repair): 48 in *Limiting Condition*

Comments / Conditions: Install on contour with the land. Pump, crush, & fill old tank.

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

Owner / Applicant Signature: Online Signature Date:

Installed by: Myers Septic

IMPROVEMENT PERMIT by: Coy Hill Date: 10/8/24

OPERATION PERMIT by: Coy Hill Date: 2/4/25

AUTHORIZATION TO CONSTRUCT by: Coy Hill Date: 10/8/24

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 #: 4785637392
COUNTY: Iredell

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

OWNER: Lacey Owens
DATE EVALUATED: 10/4/24
ADDRESS: 779 Barry Oak
PROPOSED FACILITY: 3 bdr home
PROPOSED DESIGN FLOW (.0400): 360 gpd
PROPERTY SIZE: 1.37
LOCATION OF SITE: 779 Barry Oak RD
PROPERTY RECORDED: yes
WATER SUPPLY: Public X Single Family Well Shared Well Spring Other
WATER SUPPLY SETBACK: 50 Ft
EVALUATION METHOD: X Auger Boring 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 12%	0 - 30	C SBK	SS SP FR SE	-	48	Few SAP inc in CL layer		.3 PS	5
		30 - 48	CL SBK	SS SP FR SE						
2	LS 10%	0 - 27	C SBK	SS SP FR SE	-	48	Few SAP inc in CL layer		.3 PS	4
		27 - 48	CL SBK	SS SP FR SE						
3										
4										

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.0508)	-	PS
System Type(s)	-	2S7.
Site LTAR	-	.3
Maximum Trench Depth		36.n

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

Comments:

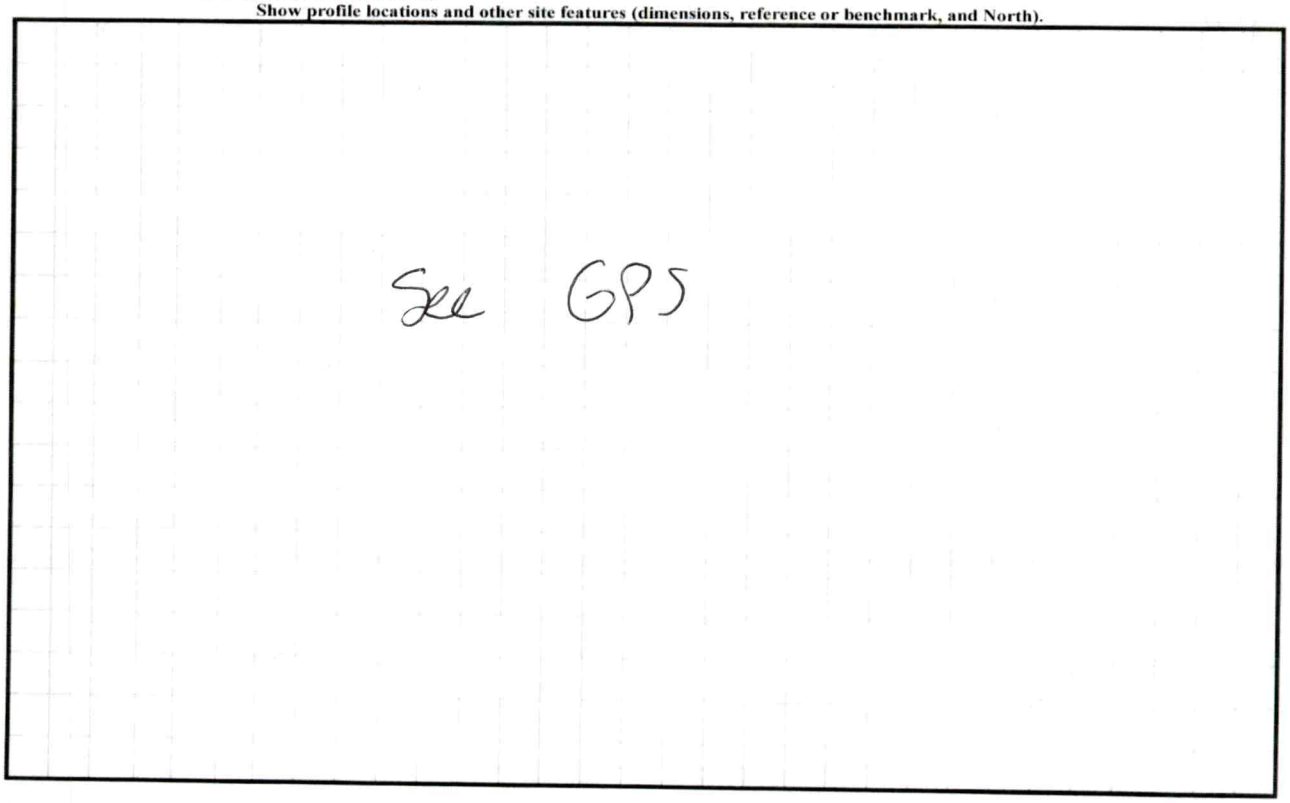
LEGEND

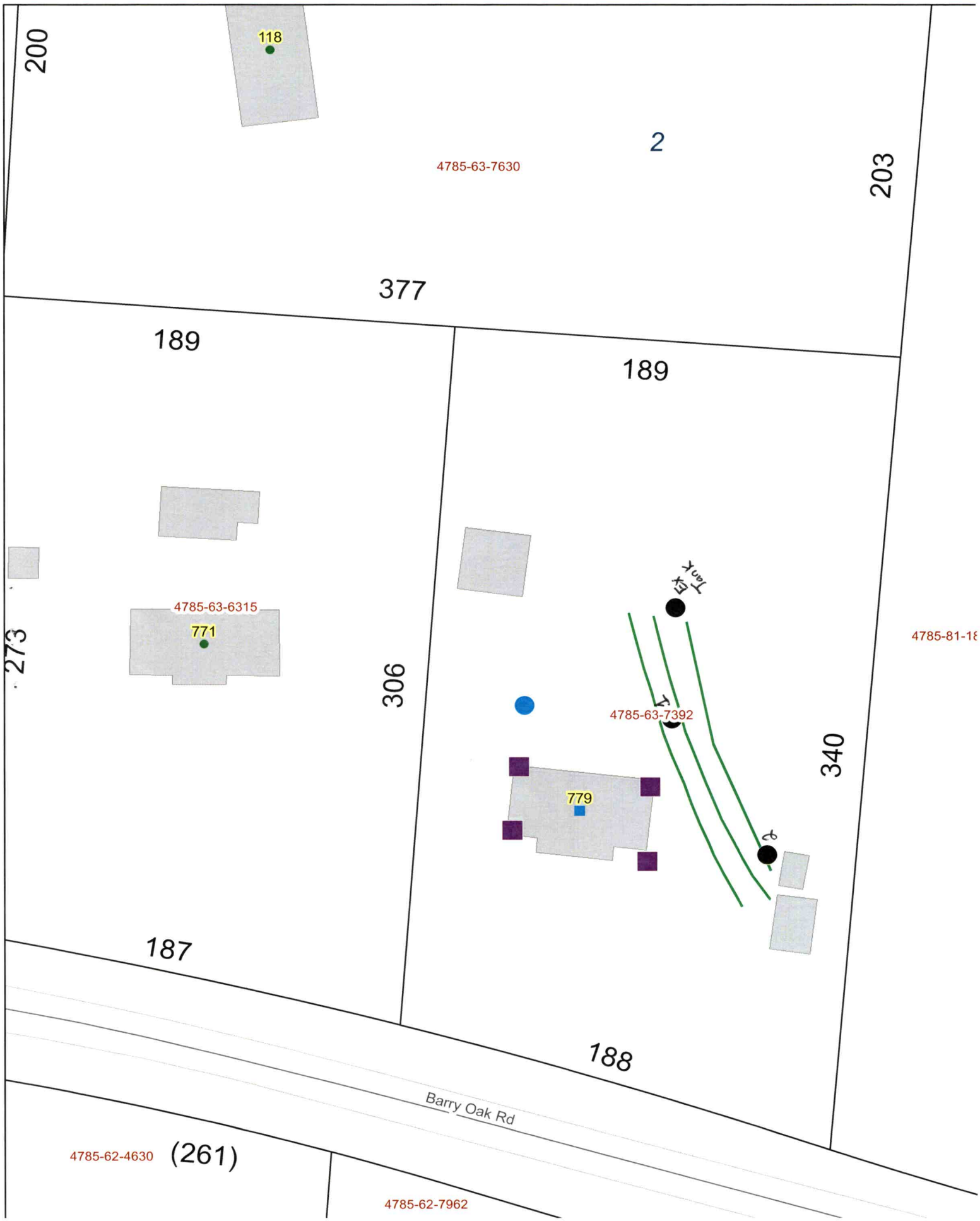
LANDSCAPE POSITION	SOIL GROUP	SOIL TEXTURE	CONVENTIONAL LTAR (gpd/ft²)	SAPROLITE LTAR (gpd/ft²)	LPP LTAR (gpd/ft²)	MINERALOGY/ CONSISTENCE		STRUCTURE
CC (Concave slope)	I	S (Sand)	0.8 - 1.2	0.6 - 0.8	0.4 -0.6	MOIST	WET	SG (Single grain)
CV (Convex Slope)		LS (Loamy sand)		0.5 -0.7		Lo (Loose)	NS (Non-sticky)	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).




200
118
2
4785-63-7630
203
377
189
189
4785-63-6315
771
273
306
Tank
4785-63-7392
4785-81-18
340
779
187
188
Barry Oak Rd
4785-62-4630
(261)
4785-62-7962

156 Direct

PERMIT SNAPSHOT REPORT OSWP-2024-62587 FOR IREDELL COUNTY

Permit Type	Environmental Health OSWP	**Project:**		**App Date:**	09/29/2024
Work Class:	EH Septic Permit	**District:**	Iredell County	**Exp Date:**	NOT AVAILABLE
Status:	PRIORITY PERMIT	**Square Feet:**	0.00	**Completed:**	NOT COMPLETED
Valuation:	$0.00	**Assigned To:**	Whicker, Cory	**Approval Expire Date:**	

Description: Request to remain. Septic not draining appropriately. Will possibly need new lines

Parcel: 4785637392.000 Main	**Address:** 779 Barry Oak Rd Cleveland, NC 27013 Main	**Zone:** RA(Residential Agricultural District)

Applicant/Authorized Agent	Property Owner
Lacey Owens	Shane D Owens
779 Barry Oak Rd	779 Barry Oak Rd
Cleveland, NC 27013	Cleveland, NC 27013
Home: (704) 437-4085	Mobile: (704) 437-4085
Mobile: (704) 640-4794	

Permit Custom Fields

How is your site plan being submitted	Survey Plat	Septic Application/Permit Type	Repair	Does the site contain any jurisdictional wetlands	No
Non-domestic Sewage Generated	No	Other Public Agency	No	All proposed structure dimensions	See attached images
What are the proposed structures	New Single-Family Residence - Modular	Type of New Single-Family Residence	Modular	Maximum Number of Bedrooms	3
If other Addition/Structure, please explain		Number of Occupants	3	Foundation Type	Crawl Space Foundation
Residential/Business/Other	Residential	Water Supply	Municipal Water	Desired Septic System Type	Other
If other septic system type, please explain	Yes- need repair	Pump Make		# of Nitrification Fields	
Model		Serial #		System Description	
Repair System Description		Comments/Conditions		Additional Unique Setbacks Apply	No

Attachment File Name	Added On	Added By	Attachment Group	Notes
Signature_Lacey_Owens_9/29/2024.jpg	09/29/2024 10:31	Owens, Lacey		Uploaded via CSS
4785637392.a1-1_v1.pdf	09/30/2024 8:23	Owens, Lacey	Available Online	
image_v1.jpg	09/30/2024 8:23	Owens, Lacey	Available Online	

Workflow Step / Action Name	Action Type	Start Date	End Date
Application Completeness Check v.1		09/30/2024 8:23	09/30/2024 8:26
Confirm application complete v.1	Generic Action		09/30/2024 8:26
Lot Readiness Verification v.1			
~~OSWP Septic Preliminary Site Visit v.1~~	Inspection		09/30/2024 8:26
OSWP Site Evaluation v.1	Inspection		
~~**Zoning Review v.1**~~			09/30/2024 8:23
~~Floodplain Admin Overview v.1~~	Task		09/30/2024 8:23
~~Iredell County Zoning Approval v.1~~	Task		09/30/2024 8:23
~~Issue Invoice v.1~~	Generic Action		09/30/2024 8:23
~~Fees Paid v.1~~	Generic Action		09/30/2024 8:23

PERMIT SNAPSHOT REPORT (OSWP-2024-62587)

Fees v.1	
Issue Invoice v.1	Generic Action
Fees Paid v.1	Generic Action
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 - *ENVIRONMENTAL HEALTH* ☑ STATESVILLE OFFICE 704-878-5305 ☐ MOORESVILLE OFFICE 704-664-5281

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PERMIT # 175253 PIN # 4785637392 DATE 10-12-12

OWNER Shane Owens APPLICANT: Erin Owens PHONE: Home/Cell # 704-682-5733 Business # N/A

SITE ADDRESS 779 Barry Oak Rd. OWNER / APPLICANT ADDRESS 777 Barry Oak Rd.

SITE DIRECTIONS Hwy 64E TR Barry Oak Rd. Property on left two lots past Furr Rd.

SUBDIVISION N/A BLOCK / SECTION N/A LOT # N/A LOT AREA 1.32acres DESIGN FLOW 360gpd L.T.A.R. Existing

Septic Tank EX Gallons: STB ____ Date ____

Pump Tank ____ Gallons: P T ____ Date ____

Pump Make ____ Model ____ Serial # ____

No. Nitrification Fields: 1 No. Lines 2 Linear Feet Existing

Trench Width EX Max. Trench Bottom Depth EX. Gravel Depth EX

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

System Description: Conventional

Repair System Description: ____

Maintenance Agreement Required ☐ YES ☑ NO

☑ GRAVITY ☐ PRESSURE

☑ Residence No. Bedrooms 3

☐ Business No. Persons ____

☐ Other No. Employees ____

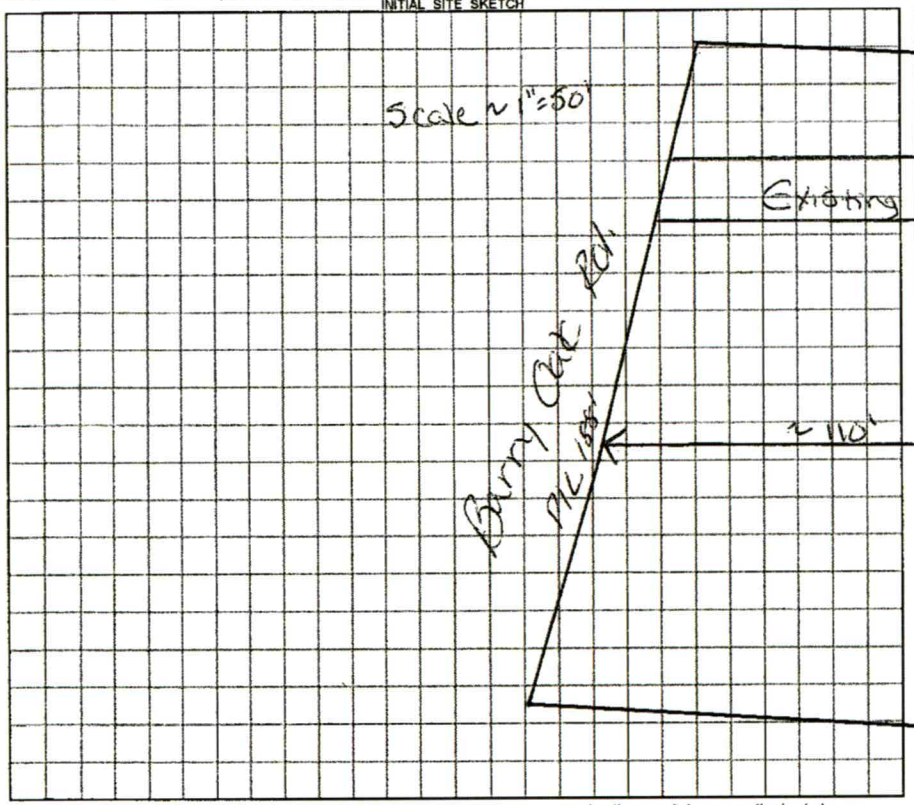
☐ Slab ☑ Crawl Space

☐ Basement w/plumbing ☐ Basement w/o plumbing

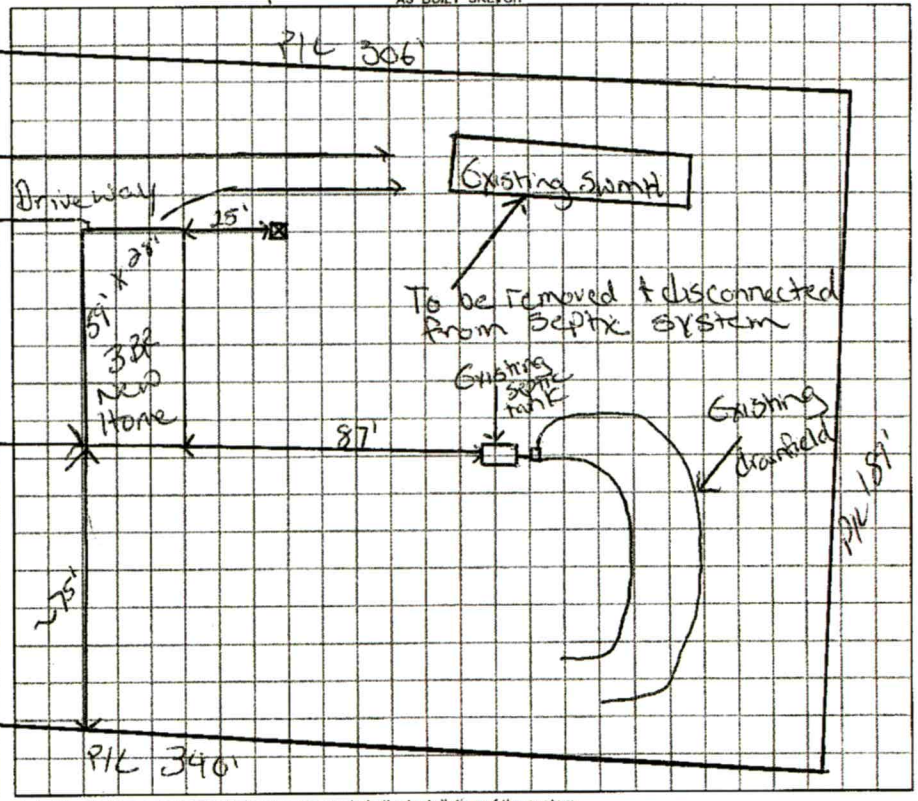
Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions - Remove / disconnect existing mobile home from septic system prior to connect new proposed home. Maintain a minimum of 25' between foundation of home & well. Maintain minimum of 5' btw home and all components of septic tank system.

INITIAL SITE SKETCH



AS BUILT SKETCH



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.

☐ ***IMPROVEMENT PERMIT*** with plat valid without expiration. ☐ ***IMPROVEMENT PERMIT*** with plat valid without expiration. site plan valid 60 months ☐ ***AUTHORIZATION TO CONSTRUCT*** valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: Erin Owens Date 10-16-12 Installed by: ____

IMPROVEMENT PERMIT by: ____ ***REHS*** Date ____ OPERATION PERMIT by: ____ ***REHS*** Date ____

AUTHORIZATION TO CONSTRUCT by: ____ ***REHS*** Date ____ Existing System Inspected by: Justin Henderson ***REHS*** Date 10-12-12

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

White Copy – Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant