BCW MANF-2023-39757

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # OSWP 2023-33612

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

PIN # 4798 -- 24 -- 4340

APPLICANT/OWNER: Laura Lawrie (Clayton Homes) APPLICANT ADDRESS: 2026 Northside Dr. Statesville NC 28677

SITE ADDRESS: 460 Society Rd Statesville NC 28625 PHONE: 704-929-1552 ALT. PHONE —

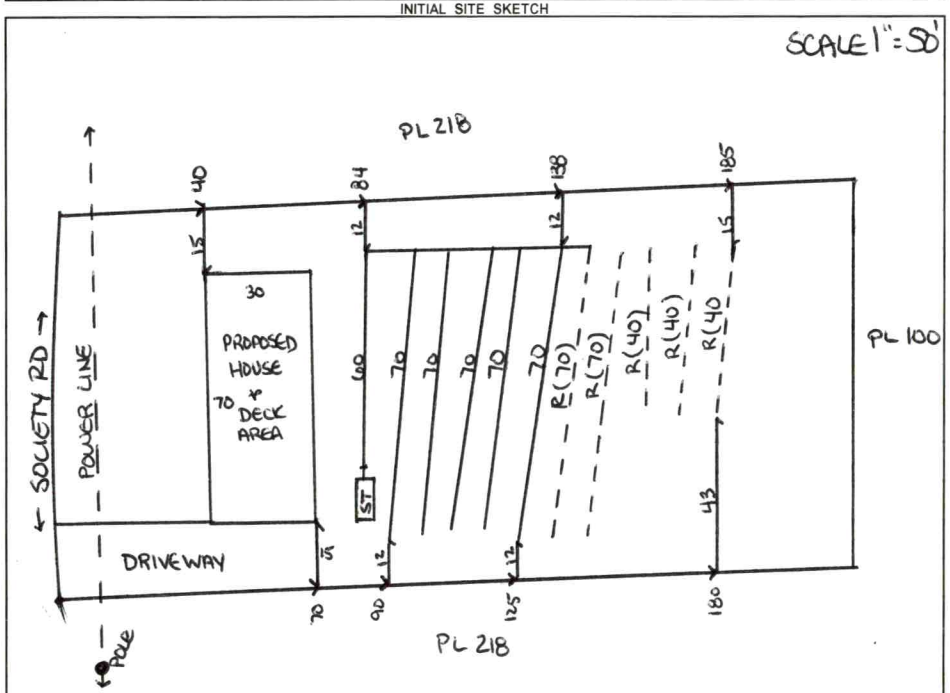
SITE DIRECTIONS: I40 E → Ⓔ Hwy 64 → Ⓛ Society Rd SAP CONTROLLED: [X] YES [ ] NO

SUBDIVISION: — SECTION: — LOT # — LOT AREA: 0.5 DESIGN FLOW: 360 L.T.A.R.: 0.25

Septic Tank	1000	(gal)	STB 760	Date	9/22/23	[X] New System	[ ] Repair	[ ] Expansion	System Type: I II III IV V VI	[X] Residence	No. Bedrooms 3	Water Supply
Pump Tank	—	(gal)	PT —	Date	—	System Description:	Gravity 25% Reduction			[ ] Business	No. Persons 6	[ ] Private
Pump Make	—	Model	—	Serial #	—	Repair System Description:	Gravity HPPBPS			[ ] Other	No. Employees —	[X] Public
# Nitrification Fields	1	# Lines	6	Linear Ft	360	Maintenance Agreement Required:	[ ] YES	[X] NO		[ ] Slab	[X] Crawl Space	[ ] Community
Trench Width	36"	Trench Bottom Depth(Low side)		34"	Gravel Depth	—	[X] GRAVITY	[ ] PRESSURE		[ ] Basement w/plumbing	[ ] Basement w/o plumbing	

Comments / Conditions: DO NOT GRADE, PAVE, PARK, DRIVE OVER SEPTIC AREA.
Install on contour utilizing serial distribution. 410' shown, only 360' needed

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. 60' lines.

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.* [X] **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 Date: Installed by: Steve Jordan

IMPROVEMENT PERMIT by: Sarah Williams Date: 10/16/2023 OPERATION PERMIT by: Sarah Williams Date: 11/16/23

AUTHORIZATION TO CONSTRUCT by: Sarah Williams Date: 10/16/2023 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? _____	

PERMIT SNAPSHOT REPORT OSWP-2023-33612 FOR IREDELL COUNTY

Permit Type: Environmental Health OSWP
Work Class: EH Septic Permit
Status: In Progress
Valuation: $0.00

Project:
District: Iredell County
Square Feet: 0.00
Assigned To: Bracken, Sarah

App Date: 08/11/2023
Exp Date: NOT AVAILABLE
Completed: NOT COMPLETED
Approval Expire Date:

Description: New singlewide construction 8/15 Called applicant VM full emailed. GM Adam will call back--open field. GM 8/17 Adam called site ready GM 8/17 Site visit only three corners marked Contacted Adam. GM Adam found rebar pin and marked corner. GM

Parcel: 4798244340.000 Main	**Address:** 460 Society Rd Statesville, NC 28625 Main	**Zone:** RA(Residential Agricultural District)

Applicant/Authorized Agent
CLAYTON HOMES #72
2026 NORTHSIDE 2026
NORTHSIDE DR
STATESVILLE, NC 28677
Mobile: (704) 929-1552

Property Owner
LAURA L LAWRIE

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	16x66 Singlewide and two 6x6 decks
What are the proposed structures	Manufactured Home, New Single Family Residence	Type of New Single-Family Residence	Mobile Home	Maximum Number of Bedrooms	3
If other Addition/Structure, please explain		Number of Occupants	3	Foundation Type	Crawl Space Foundation
Water Supply	Other Public Water	Desired Septic System Type	Conventional (most common)	Lot Acreage	0.5
Front Setback	35	Back Setback	35	Left Setback	15
Right Setback	15	Zoning Permit Issued Date	Aug 14 2023 12:00AM	Zoning Permit Expiration Date	Feb 10 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
Additional Unique Setbacks Apply	No	Watershed	NOT IN A WATERSHED		

Attachment File Name	Added On	Added By	Attachment Group	Notes
Signature_ADAM_CASSTEVENS_8/11/2023.jpg	08/11/2023 12:21	CASSTEVENS, ADAM		Uploaded via CSS
Lawrie Auth_v1.pdf	08/11/2023 16:26	Nebel, Barbara	Available Online	Authorize to Act as Agent
Lawrie Site Plan_v1.pdf	08/14/2023 15:36	Bailey, Julia	Available Online	Site Plan

Inspection Number	Status	Inspection Type	Request Date	Scheduled Start Date	Scheduled End Date	Actual Start Date	Actual End Date
2023-128797	Passed - Permit	OSWP Septic/Well Preliminary Site Visit	08/18/2023	08/18/2023 0:00	08/18/2023 0:00	08/18/2023 7:33	08/18/2023 7:33

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. 8/15 Called applicant VM full sent email. GM Adam called he will advise on property GM	Grace McLeod	08/15/2023 16:37

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

Sheet 1 of 2
PROPERTY ID #:
COUNTY: IREDELL
4798-24-4340

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

OWNER: Laura Lawrie / Clayton Homes — APPLICATION DATE 8/11/2023
ADDRESS: 2026 Northside Dr Statesville NC 28677 — DATE EVALUATED: 8/25/2023
PROPOSED FACILITY: SFR — PROPOSED DESIGN FLOW (.1949): 360 — PROPERTY SIZE: 0.5AC
LOCATION OF SITE: 460 Society Rd Statesville NC 28625 — PROPERTY RECORDED: Yes
WATER SUPPLY: Private (Public) Well Spring Other —
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 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LS 5%	0-6	FILL C MIXED DIST		few YB in C	(41)		—	PS 0.275
		6-24	C ABK	S P SE FR					
		24-41	CL ABK	SS SP SE FR					
		41-64	L SAP M	NS NP SE VFR					
					Sap incl / litho 26"+				
2	LS 3%	0-10	FILL C MIXED DIST		few YB in C	(36)		—	PS 0.25
		10-23	C SABK	S P SE FR					
		23-36	CL ABK	SS SP SE FR					
		36-62	L SAP M	NS NP SE VFR					
					Sap incl 22"+				
3	LS 2%	0-9	FILL CL MIXED DIST			(42)		—	PS 0.275
		9-33	C ABK	S P SE FR					
		33-42	CL SBK	SS SP SE FR					
		42-60	L SAP M	NS NP SE VFR					
					Sap incl	33"+			
4	LS 4%	0-17	FILL CL MIXED DIST		5YR 6/8 few YB inc	40" (51)	—	—	PS 0.25 REMOVE FILL
		17-42	C ABK	S P SE FR					
		42-51	CL SBK	SS SP SE FR					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	25% / 50%	50%
Site LTAR	0.25	0.25

OTHER FACTORS (.1946): ~~PS 0~~ Fill to be removed
SITE CLASSIFICATION (.1948): PS 0.25
EVALUATED BY: S. Williams
OTHER(S) PRESENT: —

COMMENTS: INITIAL SYSTEM TYPE TO BE DETERMINED AFTER FILL REMOVED - UNABLE TO LAY OUT ADDITIONAL PITS NEEDED AFTER FILL REMOVED TO CONFIRM SOIL DEPTH

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.

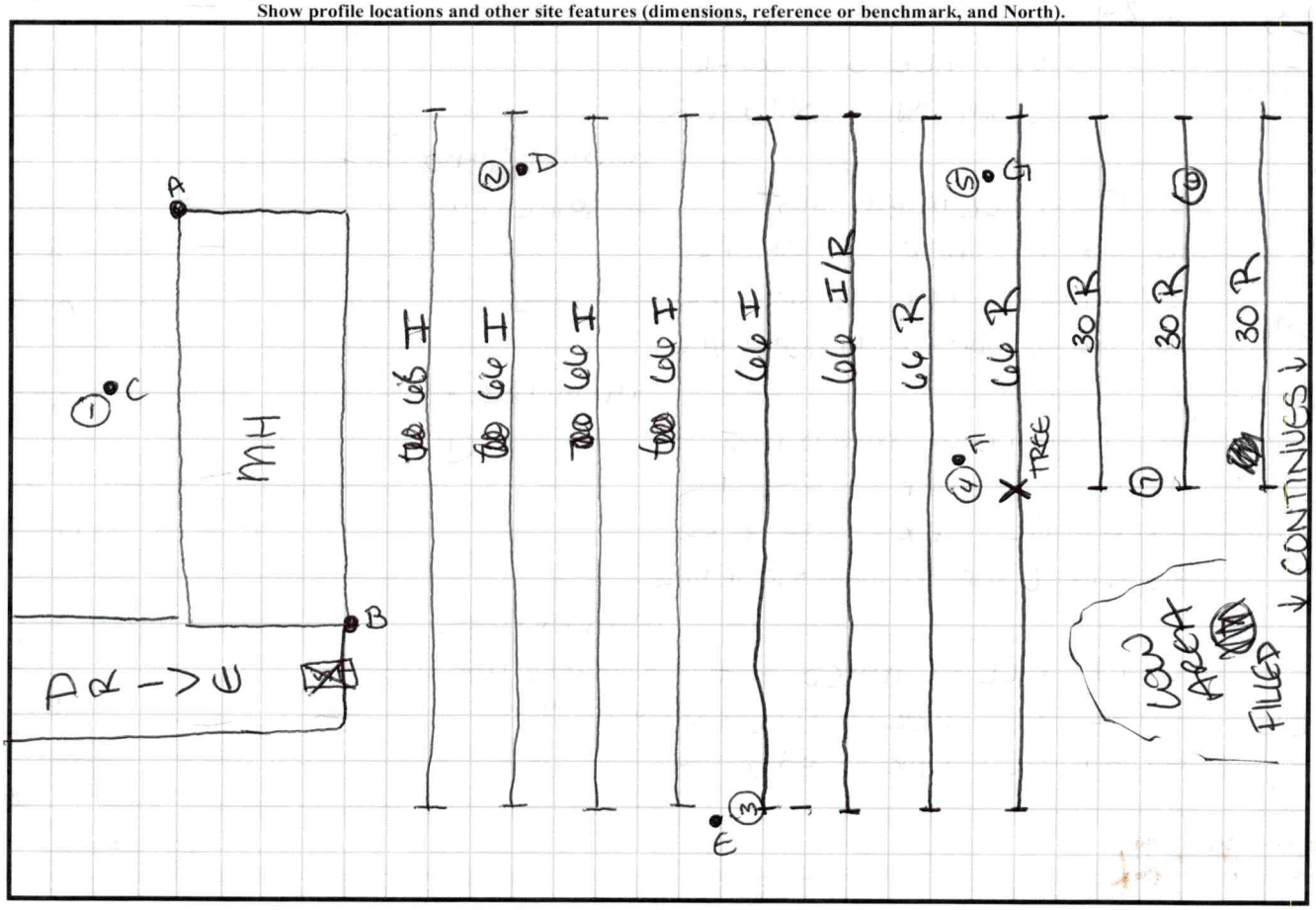
NOTES

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).



POWER POLE BENCHMARK

4th nail down from EU ID PLATE 4'9"

A 6'6"
B 7' 11"
C 4' 8"
D 8' 9"

E 9' 11"
F 10' 5"
G 10' 1"

S. Williams 460 Society Rd.

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

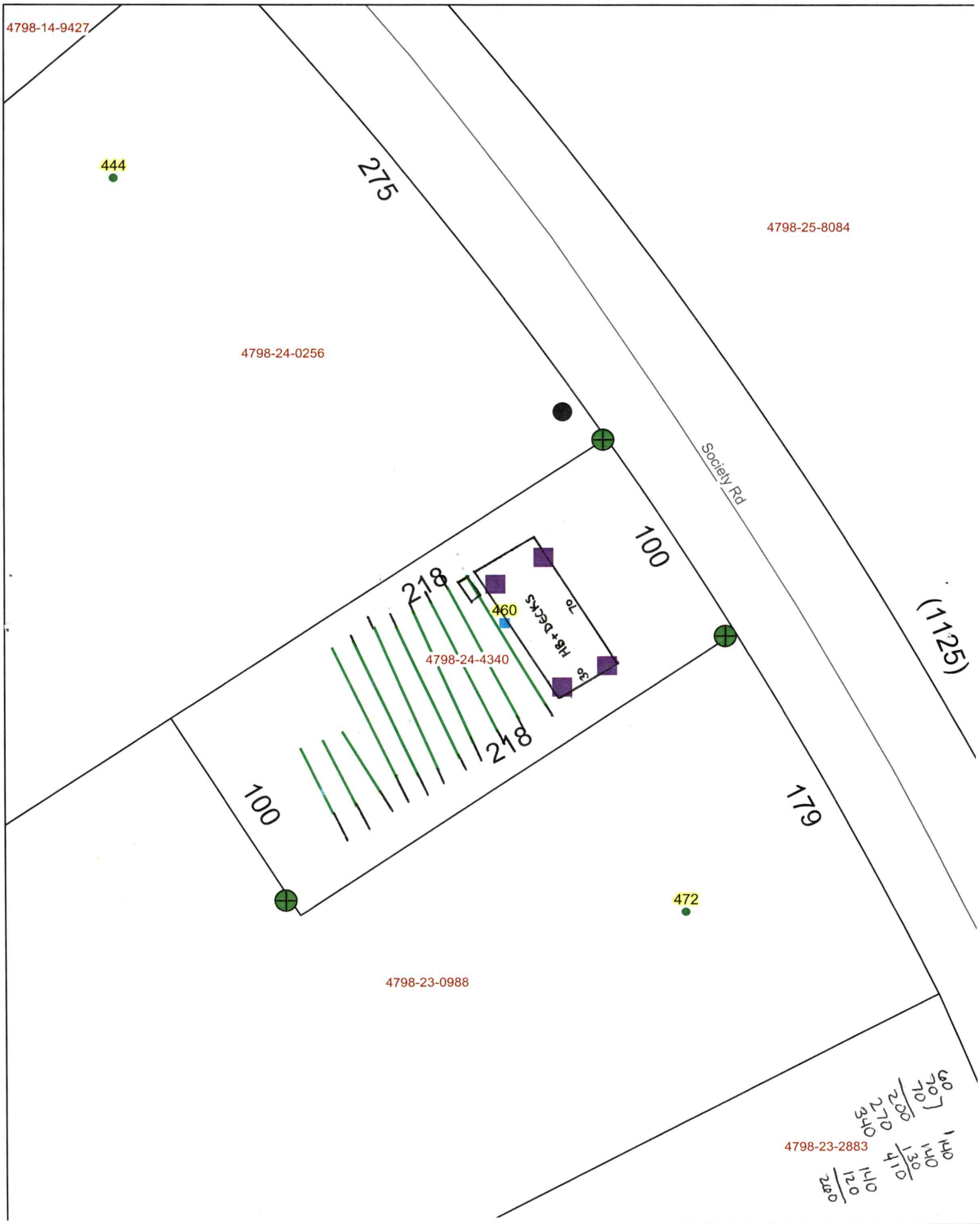
Sheet 2 of 2

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

PROPERTY ID #: 4798-24-4340
DATE OF EVALUATION: 8/25/2023
COUNTY: IREDELL

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	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
5	LS 2%	0-30	FILL CL MIXED DIST		10YR 5/6 @ 33"+	(42)		—	PS 0.25 REMOVE FILL
		30-45	C SABK	S P SE FR					
		45-60	CL ABK	SS SP SE FR					
					few Litho in CL				
6	LS 3-4%	0-4	TOP SOIL CL MIXED DIST		7.5YR 6/2 @ 34"+ 10YR 6/8 @ 28"+	(50)	—	—	PS 0.25
		4-24	C ABK	S P SE FR					
		24-50	CL ABK	SS SP SE FR					
					few YB in C				
7	LS 3-4%	0-19	C ABK	SS SP SE FR	—	(52)		—	PS 0.3
		19-52	CL SBK	SS SP SE FR					
					few Litho in CL				

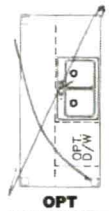
COMMENTS: _____


4798-14-9427
444
275
4798-25-8084
4798-24-0256
Society Rd
(1125)
100
218
460
70
HB+Decks
30
4798-24-4340
218
100
179
472
4798-23-0988
4798-23-2883
60
207
200
270
340
140
140
130
410
140
120
280

Acknowledgement Of
Plans Submittal ONLY!

Sarah Williams Date 10/16/2023

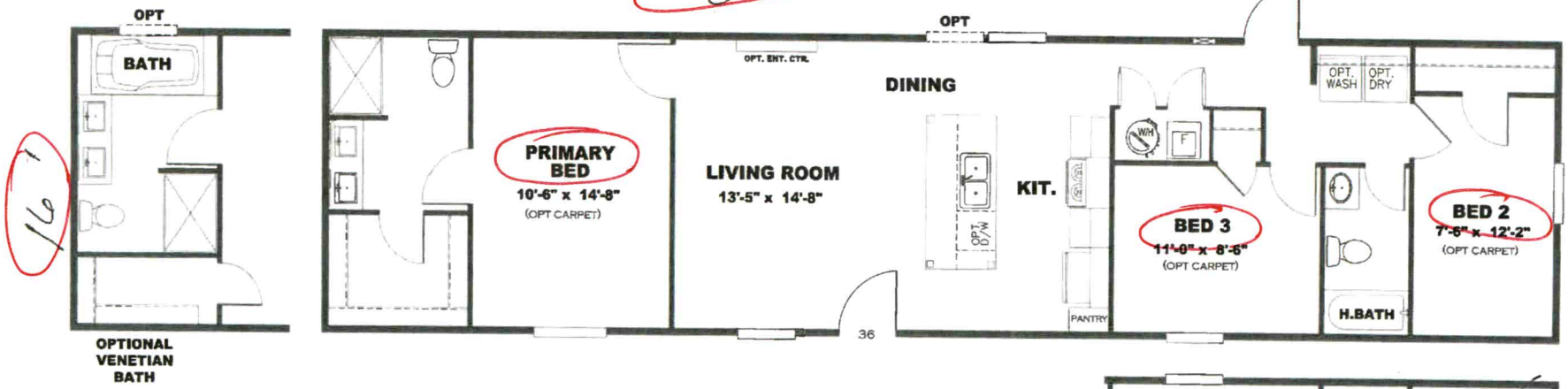
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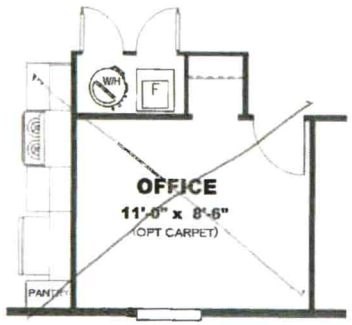


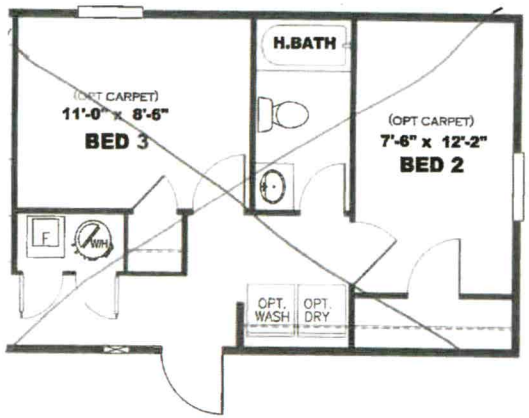
OPT
FARMHOUSE
SINK

66'

16'







DRAWING# MAC-22S162
MODEL# MAC16663A
16' x 66' CLASSIC

REV:-6/14/2023 9:23 AM

8-11-2023