IREDELL COUNTY HEALTH DEPARTMENT

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

PERMIT # 234758

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

PIN # 4824529824

APPLICANT/OWNER: Clayton Homes / Jay Barnett

APPLICANT ADDRESS: 1044 N. Andy Griffith Pkwy, Mt. Airy

SITE ADDRESS: 460 Zeb Rd, Union Grove

PHONE: 336-813-4042 ALT. PHONE

SITE DIRECTIONS: 115 N → R on Fletcher Rd → ~1.5 miles on right

SAP CONTROLLED: ☐ YES ☐ NO

SUBDIVISION: — SECTION: — LOT # — LOT AREA: 7ac

DESIGN FLOW: 360gpd L.T.A.R.: .35 (existing)

Septic Tank 1000 (gal) STB 1620 Date 7/17/93

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 4 # Lines Linear Ft 345'

Trench Width 36" Trench Bottom Depth(Low side) 36" Gravel Depth 12"

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

System Description: existing conv. gravel

Repair System Description: conv. gravel

Maintenance Agreement Required: ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

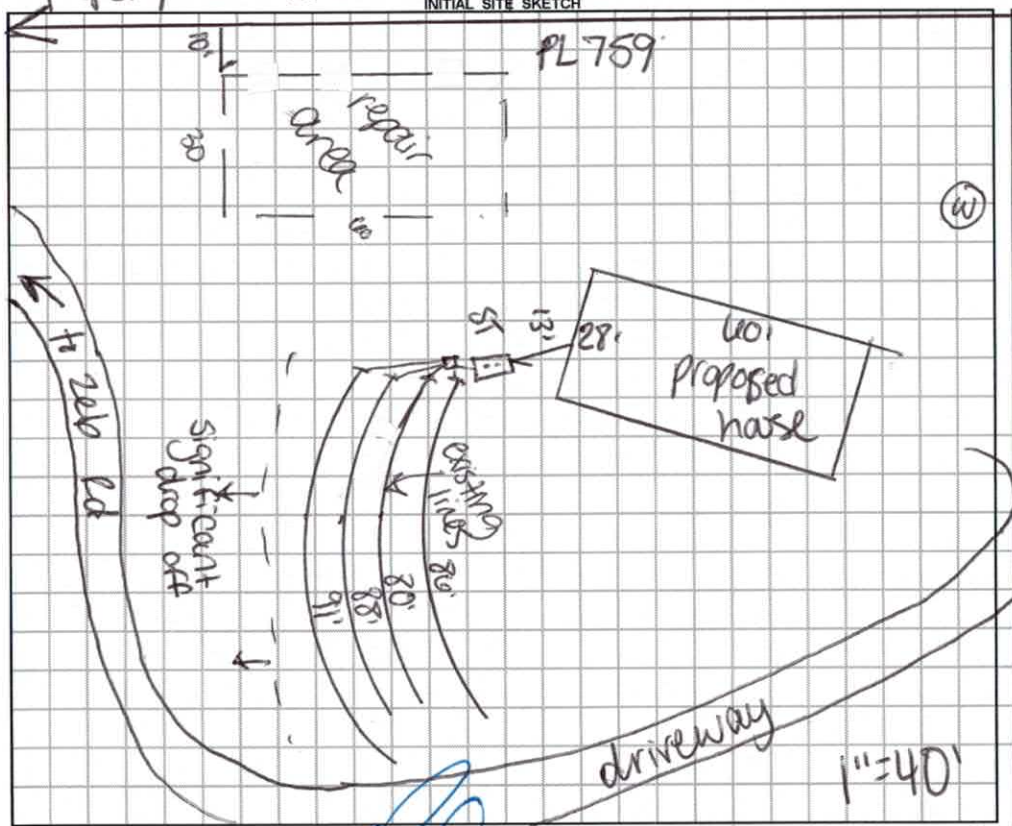
☒ Residence ☐ Business ☐ Other ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement w/o plumbing

No. Bedrooms 3 No. Persons 6 No. Employees

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: House must meet minimum 5' setback from septic tank. Existing system functioning properly at time of inspection.

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. 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: 7-13-18 Installed by:

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Carla C. Cave Date: 7/12/18

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inpsector to confirm your inspection time.

expansion 2347158

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(✓) Septic Improvement Permit ( ) Authorization to Construct ( ) Existing System Inspection ( ) Septic System Repair

THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED. APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS.

Page 2: *Site Plan Worksheet* form MUST accompany this application

The following optional attachments may also be submitted: ( ) Survey Plat, scaled no more than 1 inch = 60 feet
Place an (X) beside whichever is submitted if applicable ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: Clayton Homes #162 Address: 1044 N. And. Griffith pkwy Mt. Airy NC Zip: 27030
Applicant Email: John.Mills3825@yahoo Phone: 336-813-4042 Alt. Phone: _____
Owner Name: Jay Barnett Address: 1031 Union Grove rd. Union Grove Zip: 28689
Owner Email: NA Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 460 Zeb rd Union Grove, NC 286-89
Subdivision Name: _____ Section/Phase: _____ Lot Number: _____
Driving Directions: 115 N. Right on Fletcher rd. 1.4 miles on right

Site Development Information: *(check or complete ALL that apply*

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
(✓) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____
Non-Residential Site Development: Type of Business: _____
Square Footage of Building: [redacted] Max. Number of Employees: ____ Max. Number of Seats/Beds/Other: ____

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 4
( ) Swimming Pool
( ) Other Addition/Structure: _____

CHECK FOUNDATION TYPE
(✓) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

Water Supply: ( ) Replacement Well – Reason: _____
( ) Multi-connection Well Number of Houses: _____ Number of Persons: _____
( ) New Well (✓) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: _____
(✓) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other: _____

Please answer the following to the best of your ability:
( ) Yes ( ) No Does the site contain any jurisdictional wetlands?
( ) Yes (✓) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (✓) No Is the site subject to approval by any other public agency?

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

Signature: _____ 4-10-18
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

proposed

find tank

[redacted] tie on to system, add line

3R

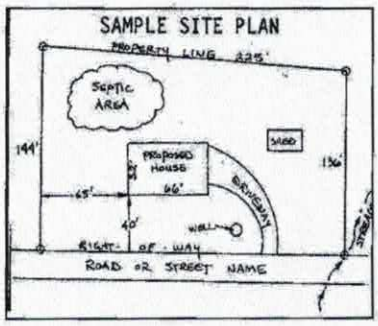
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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 OR WELL PERMIT!!!***

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

- (X) Property Line measurements are clearly identified
- (X) All proposed structures are indicated
- (X) Front and side setbacks from property line
- ( ) Preferred driveway location
- ( ) Preferred well location
- (X) Preferred septic system location
- ( ) 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

See attached

Signature: _____ 4-10-18

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

4100 Zeb Rd

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 15208 DATE 9/21/93 TAX MAP NO. 15P-A-41

OWNER OR CONTRACTOR WALTER O'NEAL PHONE: Business Home

ADDRESS

LOCATION NC 115 N, TR ZEB ROAD, ~ 1/2 MILE PAST PAVEMENT END, DRIVE ON (L) BEFORE CREEK

SUBDIVISION BLOCK / SECTION LOT LOT AREA ~7 ACRES SITE CLASS L.T.A.R 0.35 GPD/FT²

Water Supply: ✓ Individual ☐ Community ☐ Public WELL

Septic Tank: 1000 Gallons: STB 620 Date 7/17/93

Pump Tank: Gallons: PT Date

Nitrification Field: No Fields 1 Square Feet 1035 Linear Feet 345

No Lines 4 Trench Width 36" Trench Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: (I) II, IV, V, VI

System Description: CONV. GRAVITY

Repair System Description: CONV. GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod Home ☑ Mobile Home ☐ Business ☐ Other PLANNED FOR FUTURE 3BR

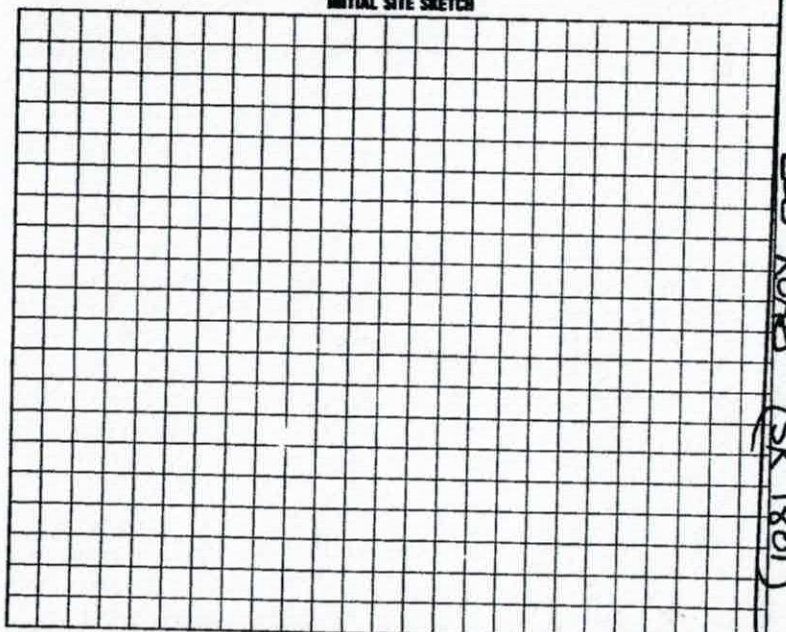
No Bedrooms 3 No Bathrooms 1½ No Employees

Garbage Disposal ☐ Yes ☑ No Auto Dishwasher ✓ Yes ☐ No Auto Washing Machine ✓ Yes ☐ No Other

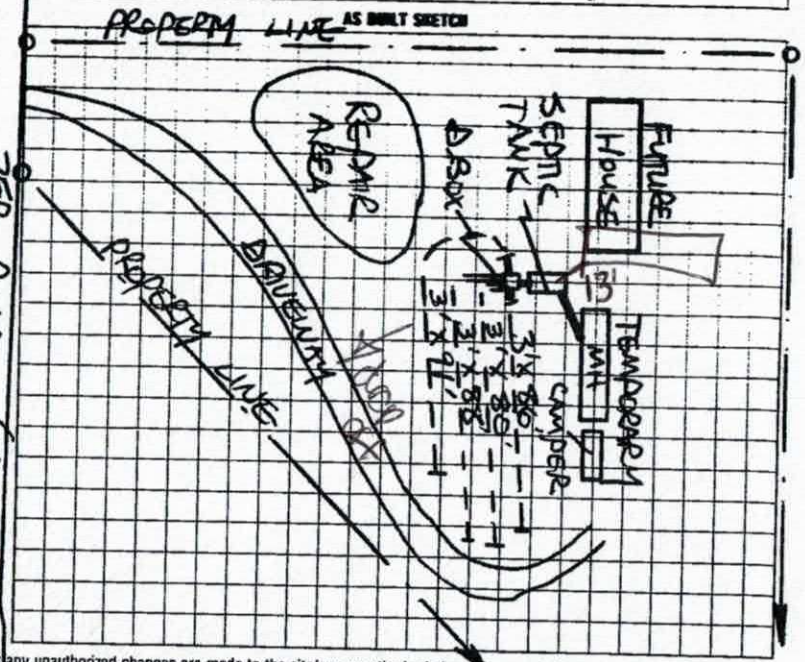
Slab Crawl Space Basement w/plumbing Basement w/o plumbing

Comments TEMPORARY CAMPER / MH TO BE REMOVED UPON OCCUPANCY OF FUTURE HOUSE.

INITIAL SITE SKETCH



AS BUILT SKETCH



I understand that this 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 is valid for 60 months from date of issuance.

Signed:

Improvement Permit by: STEVE HEDRICK date 9/21/93

Existing System Inspection by: date

Installed by: SAMMY REAVIS

Certificate of Completion by: STEVE HEDRICK date 9/21/93

Operation Permit by: date

HEALTH DEPT. COPY: WHITE INSPECTION COPY (FINAL): GREEN OWNER COPY (FINAL): YELLOW INSPECTION COPY (INITIAL): PINK OWNER COPY (INITIAL): GOLD

1035 SQ FT

A Survey for

JAY C. BARNETT and

DARLENE MARIE BARNETT

Property now in the name of Benjamin Reed Beard, Sr.

Lying in

NEW HOPE TOWNSHIP IREDELL COUNTY NORTH CAROLINA
PIN: 4824 62 9824 DEED: 996-1562
DATE: 08/16/2010 SCALE: 1" = 100.0'
DRAWING No. 08171Os DRAWN by JWR

"Lincoln's Run" Subdivision
Plat Bk. 46, Pg.34

David S. Peele
Maria M. Peele
1633-819

Surveyor's Notes:
a) Solid lines Surveyed this date. Broken lines, (Creek Calls), not surveyed this date, but taken from deed calls.
b) Flood Hazard Information taken from F.I.R.M. Community Panel 370313 0025 B, (05/15/80).

Legend

EIP	=	existing iron pin
IPS	=	iron pin set
CP	=	computed point
MN	=	Mag Nail
PK	=	Parker Kaylon Nail
RRS	=	Railroad Spike
PP	=	Power Pole
WM	=	Water Meter
TP	=	Telephone Pedestal
CATV	=	Cable TV Ped.
ST	=	Septic Tank
FH	=	Fire Hydrant
MH	=	Manhole

Overhead Elec. Power Line
U. G. Telephone Cable
Pasture Fence

ZEB Rd.
60' R/W
SR 1801

N 67°41'19"W
54.35'
Total

(at 20.64')

N 83°37'52"E
737.03'
Total

7.001 Ac

Existing building
Septic
Existing well
Single wide man. home
gravel drive
Pasture Bottom Creek
unpaved

Emma Vandagna
1702-2269

Deed: 996-1562

Total 750.72'

N 00°11'08"E

Total 251.75'

S 05°38'17"W

EIP (at 21.66')

Pasture Bottom Creek

Flood Hazard Area

branch

James E. Hoots
Kristal R. Lunsford
668 - 373

SITE
Creek
Zeb Rd
SR 1801

Pasture Bottom Creek Calls

Course	Bearing	Distance
L1	N 88°24'12" W	59.39'
L2	S 62°05'01" W	38.98'
L3	N 87°24'24" W	71.89'
L4	N 78°52'20" W	77.75'
L5	S 49°44'55" W	74.63'
L6	S 14°36'57" W	73.85'
L7	N 63°30'10" W	40.74'
L8	S 62°06'54" W	126.55'
L9	S 85°46'56" W	54.47'
L10	S 80°18'47" W	58.58'
L11	S 40°25'51" W	130.39'
L12	S 36°22'16" W	87.83'
L13	S 35°27'32" W	104.93'
L14	S 16°35'08" W	65.47'
L15	S 15°03'51" W	44.09'

100 0 100 200 300
GRAPHIC SCALE - FEET

NORTH CAROLINA PROFESSIONAL No. 3298 LAND SURVEYOR JOSEPH W. RAYMER

Joseph W. Rayner

Joseph W. Rayner, PLS
208 Absher Farm Loop
Statesville, NC 28625
704 871 - 1889

Ratio of Precision 1 / 29,8906



T - JUBILATION

Home Plan 21TRU28603RH

3 Beds · 2 Bath · 1580 sq. ft. · 60' width · 28' depth

www.claytonhomes.com/home-details.cfm?modelNumber=21TRU28603RH&postalCode=27030



Acknowledgement Of
Plans Submittal ONLY!
Date 7/12/18
Date 7-13-18

Features

The home series and floor plans shown all have starting prices within the price range indicated. Your local Home Center can quote you specific prices and terms of purchase for specific homes. Clayton invests in continuous product and process improvement. All home series, floor plans, specifications, dimensions, features, materials, availability, and starting prices shown are artist's renderings or estimates and are subject to change without notice or obligation. Dimensions are nominal and length and width measurements are from exterior wall to exterior wall. Starting prices include the home only, plus typical delivery and installation. Starting prices do not include other costs such as taxes, title fees, insurance premiums, filing or recording fees, land or

IREDELL COUNTY

PO Box 788
349 North Center St.
Statesville, NC 28677

APPLICATION NUMBER
234758
Issue Date: 04/10/2018

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4824529824.000	460 ZEB ROAD, UNION GROVE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: BARNETT JAY C+DARLENE M	Applicant: CLAYTON HOMES MT AIRY
Address: 1031 UNION GROVE RD	Address: 1044 N ANDY GRIFFITH PARKWAY
UNION GROVE, NC 28689	MOUNT AIRY, NC 27030
Phone:	Phone:

Use Requested	Zone Code
REPLACE SW WITH DW	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
7.000	35.00	35.00	15.00	15.00	BOWH	AE

Remarks:

SETBACK IS 15' RIGHT PROPERTY LINE BUT
THERE IS A STREAM THEY HAVE TO STAY 50'
OFF OF ON THAT SIDE MH PER WA

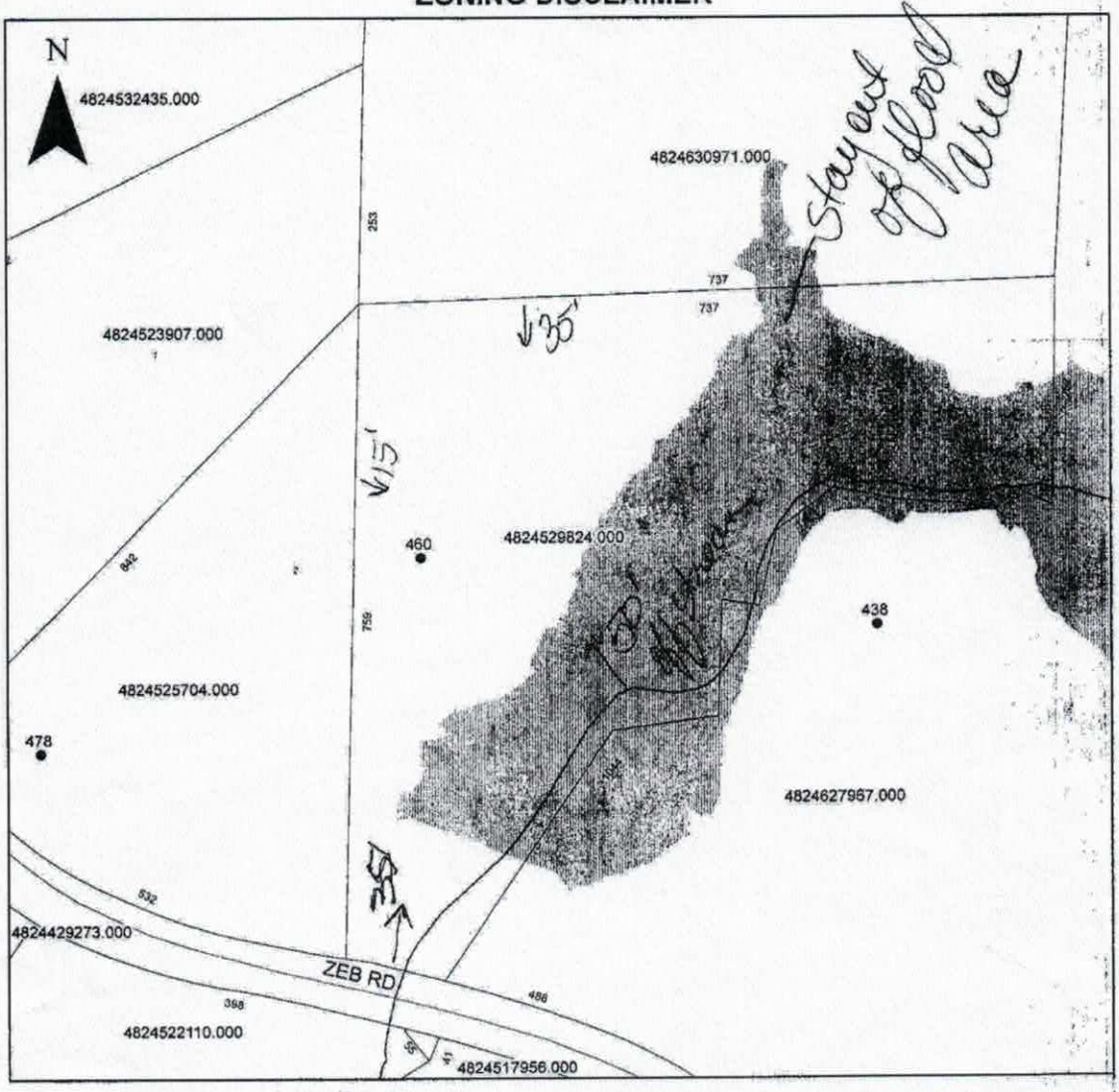
Accessory Mobile Home: Must meet requirement R8 of the LDC. Only one accessory mobile shall be permitted per lot or parcel. The lot or parcel shall contain sufficient land area for the principal residential structure or home and the accessory mobile home to be considered independent principal dwelling units with both individually meeting the minimum lot size and required setbacks. The mobile home cannot be used as a rental and only relatives including in-laws and son or daughter by legal adoption shall occupy the accessory mobile home.

The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions, plat conditions and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

Applicant: _____ Date: _____

Permit Number	135037	TOTAL FEES:	$ 77.25

ZONING DISCLAIMER



Property Address 460 Zeb

The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. Applicant further acknowledges that the enforcement of deed restrictions, plat conditions, and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

Applicant

4-10-18
Date