ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # OSWP-2023-13

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

PIN # 4844 -- 82 -- 3618

APPLICANT/OWNER: CHARLES BLEVINS APPLICANT ADDRESS: 15705 JUNE WASHAM ROAD, DAVIDSON, N.C. 28036

SITE ADDRESS: 667 HOWARDS BRIDGE ROAD, UNION GROVE, N.C. 28689 PHONE: 980-406-7277 ALT. PHONE —

SITE DIRECTIONS: (N) ON 77, (L) ON 901, (R) ON HOWARDS BRIDGE, LOT ON (L) SAP CONTROLLED: ☐ YES ☑ NO REPAIR

SUBDIVISION: — SECTION: — LOT # — LOT AREA: 66.68 AC DESIGN FLOW: 240 GPD L.T.A.R.: 0.25 (0.2)

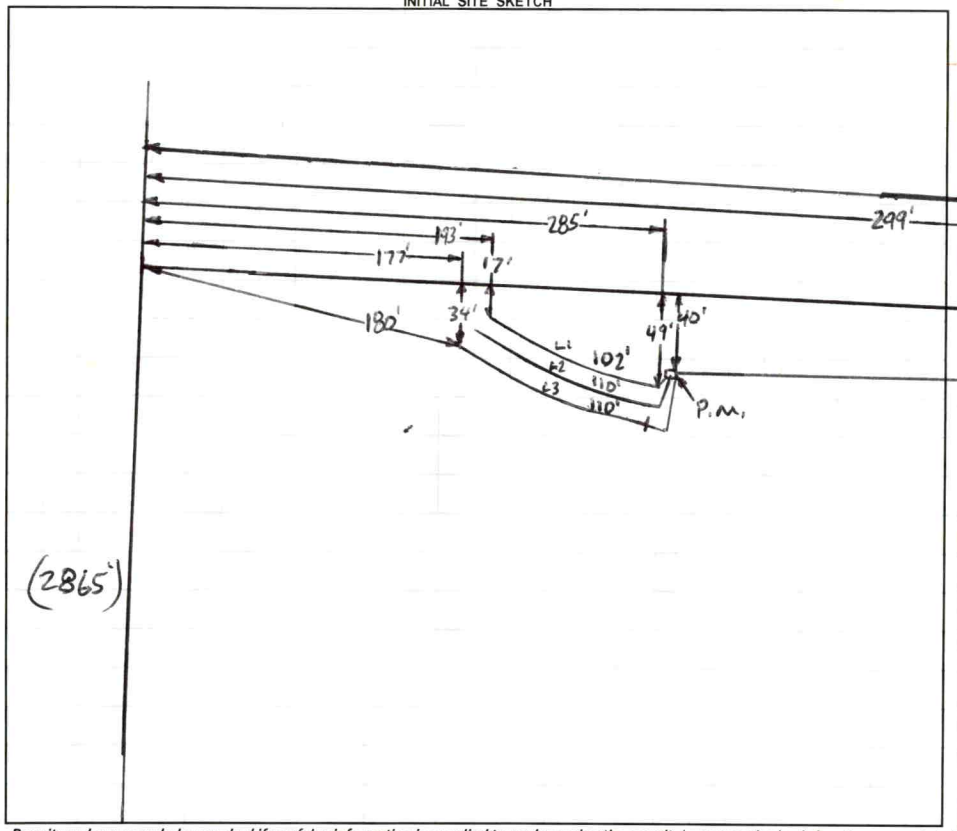
Septic Tank	1000 (gal)	STB	B54	Date	5-17-2023	☑ New System	☐ Repair	☐ Expansion	System Type: I (II) III IV V VI	☑ Residence	No. Bedrooms 2
Pump Tank	1000 (gal)	PT	169	Date	5-15-2023	System Description:	GRAVEL CONVENTIONAL - P.M			☐ Business	No. Persons 4
Pump Make	LOWLDS	Model	WED312NN	Serial #	—	Repair System Description:	CONVENTIONAL			☐ Other	No. Employees —
# Nitrification Fields	1	# Lines	3	Linear Ft	322 FT	Maintenance Agreement Required:	☐ YES	☑ NO		☐ Slab	☑ Crawl Space
Trench Width	36 IN	Trench Bottom Depth(Low side)	29 IN	Gravel Depth	12 IN	☐ GRAVITY	☑ PRESSURE			☐ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☑ Private EXT ☐ Public ☐ Community

Comments / Conditions: INSTALL ON CONTOUR, INSTALL ON 9FT CENTERS, UTILIZE PRESSURE MANIFOLD TO ACHIEVE EQUAL DISTRIBUTION, DO NOT EXCEED A 36IN MAX TRENCH DEPTH, DO NOT SHALLOW UP

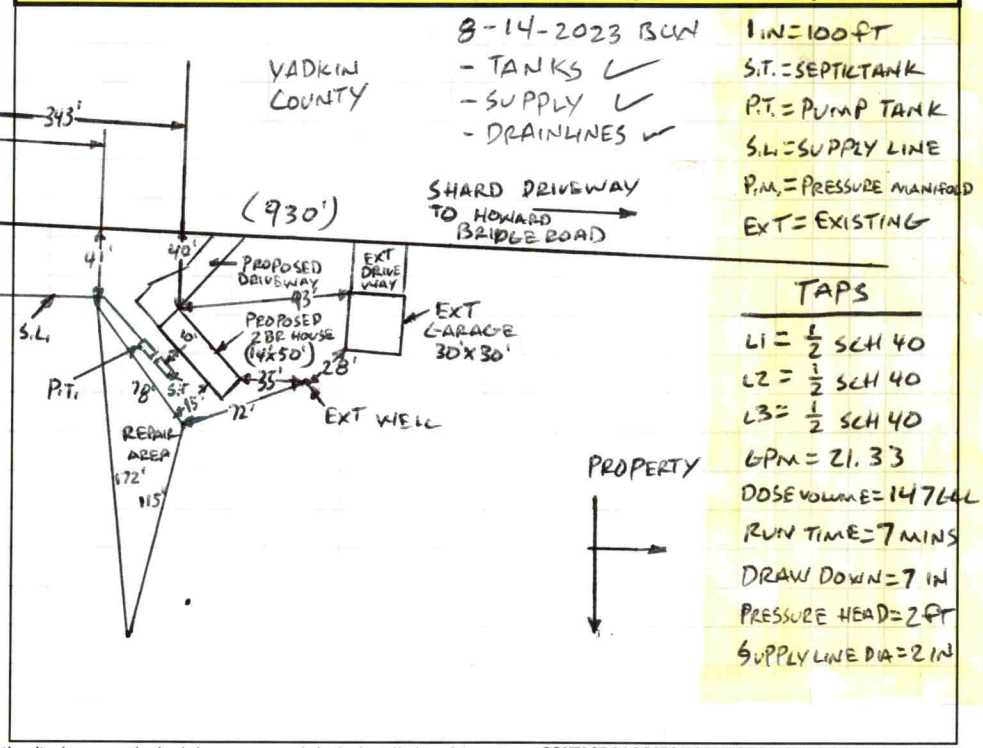
ALL SEPTIC COMPONENTS MUST BE 50FT FROM WELL
PRE-CONSTRUCTION MEETING REQUIRED

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: _____ Date: _____ Installed by: A-1 BACKHOE

IMPROVEMENT PERMIT by: Bryant C. White Date: 7-13-2023 OPERATION PERMIT by: Bryant C. White Date: 8-15-2023

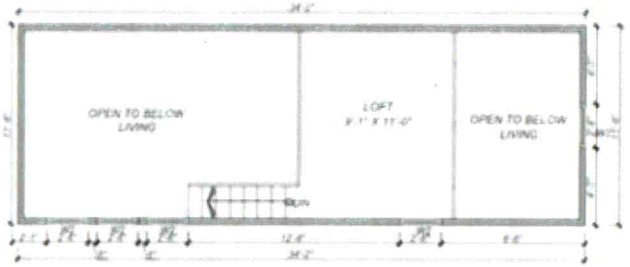
AUTHORIZATION TO CONSTRUCT by: Benjamin Bolt Date: _____ Existing System Inspected by: _____ Date: _____

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

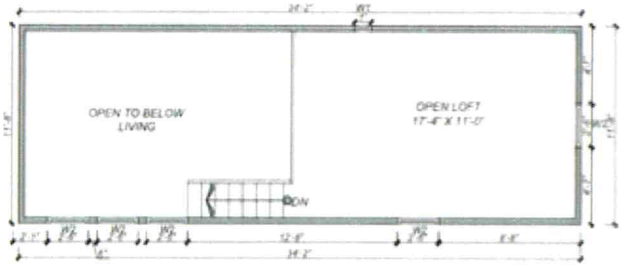
Item	Date	Initials
Drain Lines Checked		BLH
Tanks Checked		BLH
Pressure Manifold or Valve Box Checked		BLH
Pressure Head Set		BLH
Electrical Checked		BLH
Floats Set		BLH
Alarm Checked		BLH
Maintenance Contract Needed? Y / (N)		BLH
Comments:		

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? _____	

Loft

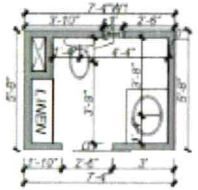


Standard Loft

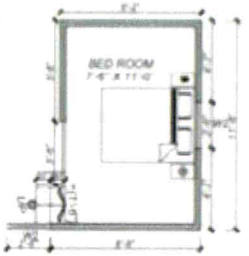


Extended Loft

BAB.
7/31/2023.



Half Bath
(Omega Only)



Step Up
(Omega Only)

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

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

PROPERTY ID #: 4844-82-3648
DATE OF EVALUATION: 5-17-2023
COUNTY: IREDELL

667 HOWARD BRIDGE ROAD, UNION GROVE, N.C. 28689

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
1	LINEAR SIDE 10%	0-11	PLOW LAYER	MIXED	Y/B MOTS 18"-27" 2.5Y 6/2 @ 23"	51"+	NA	NA	PS .2 ABOVE 26"
		11-21	C, ABK	FR, S, P, SEXP					
		21-26	C, PL	FI, S, P, SEXP					
		26-51	CL, WABK	FI, SS, SP, SEXP					
2	LINEAR SIDE 10%	0-11	PLOW LAYER	MIXED	Y/B MOT 32"-39" 2.5Y 6/2 @ 35" FIGAP BAND 32"-39"	52"+	NA	NA	PS .25 ABOVE 32"
		11-39	C, ABK	FI, S, P, SEXP					
		39-52	CL, WABK	FI, SS, SP, SEXP					
3	HEAD ~~LINEAR SIDE~~ 13%	0-14	PLOW LAYER	MIXED	Y/B MOTS 26"+ 2.5Y 6/2 @ 28", 35"	54"+	NA	NA	PS .2 ABOVE 26"
		14-36	C, ABK	FR, S, P, SEXP					
		36-54	CL, WBK	FI, SS, SP, SEXP					
4	NOSE 12%	0-8	PLOW LAYER	MIXED	Y/B MOTS 16"-25" 2.5Y 7/4S SAP INC THRU OUT	45"+	NA	NA	PS .25
		8-35	C, ABK	FR, S, P, SEXP					
		35-45	CL, WABK	FI, SS, SP, SEXP					
5	NOSE 13%	0-14	PLOW LAYER	MIXED	FEW Y/B MOT 2.5Y 7/4S 16"-20" SAP INC THRU OUT	49"+	NA	NA	PS .25
		14-49	C, ABK	FI, S, P, SEXP					

COMMENTS:

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope) CV (Convex Slope) D (Drainage Way) DS (Debris Slump) FP (Flood Plain) FS (Foot Slope) H (Head Slope) L (Linear Slope) N (Nose Slope) R (Ridge) S (Shoulder Slope) T (Terrace)	I	S (Sand) LS (Loamy Sand)	1.2 - 0.8	0.6 - 0.4	SEXP (Slightly Expansive) EXP (Expansive)	G (Single Grain) M (Massive) CR (Crumb) GR (Granular) SBK (Subangular Blocky) ABK (Angular Blocky) PL (Platy) PR (Prismatic)
	II	SL (Sandy Loam) L (Loam)	0.8 - 0.6	0.4 - 0.3		
	III	Si (Silt) SiCL (Silty Clay Loam) CL (Clay Loam) SCL (Sandy Clay Loam) SiL (Silt Loam)	0.6 - 0.3	0.3 - 0.15		
					MOIST	**WET**
	IV	SC (Sandy Clay) SiC (Silty Clay) C (Clay)	0.4 - 0.1	0.2 - 0.05	VFR (Very Friable) FR (Friable) FI (Firm) VFI (Very Firm v. Very Sticky)	NS (Non-sticky) SS (Slightly Sticky) S (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.

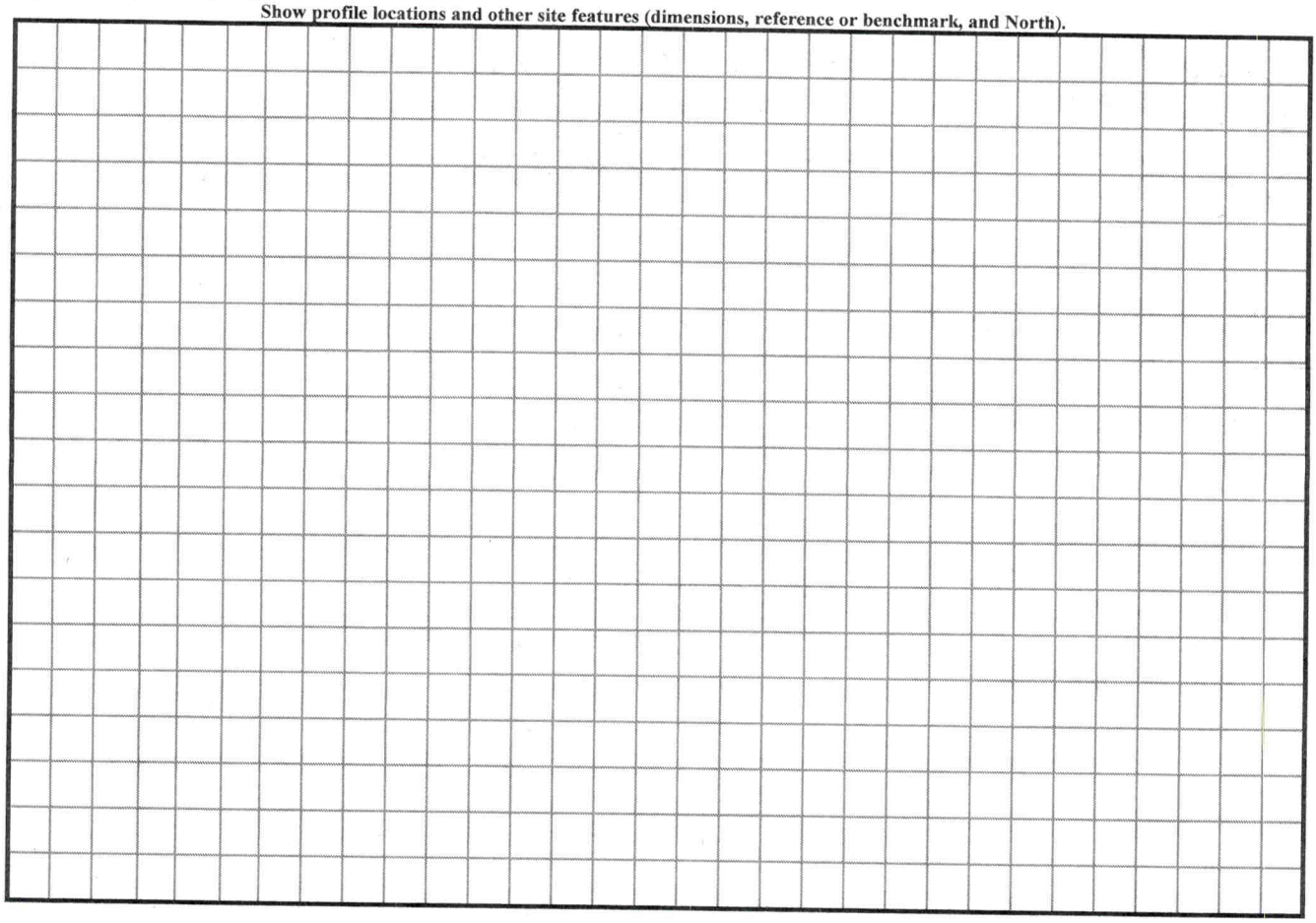
NOTES

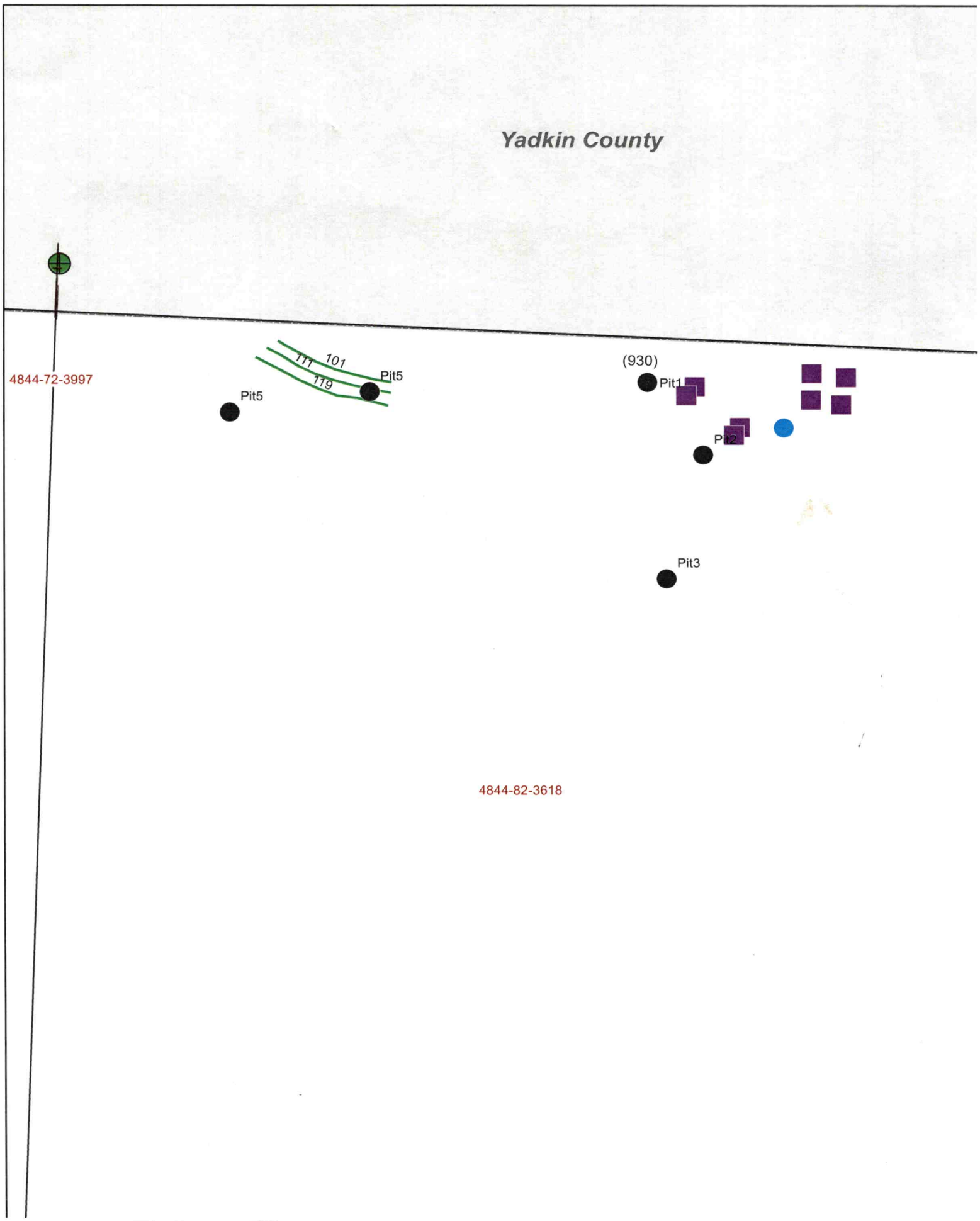
HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or 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).




Yadkin County
4844-72-3997
101
111
119
Pit5
Pit5
(930)
Pit1
Pit2
Pit3
4844-82-3618

PERMIT SNAPSHOT REPORT OSWP-2023-13588
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: White, Bryant

App Date: 01/12/2023
Exp Date: NOT AVAILABLE
Completed: NOT COMPLETED
Approval Expire Date:

Description: ***Add septic for a tiny house -Site Plan to drive back to lot is attached-SH
CALLED AND EMAILED 03/21/2023--- CLIENT CALLED ME TO LET ME KNOW HE IS TRAVELING AND WILL SUBMIT ONCE HE SPEAKS WITH CONTRACTOR

Parcel: 4844823618.000 Main

Address: 667 Howards Bridge Rd Main
Union Grove, NC 28689

Zone: RA(Residential Agricultural District)

Property Owner
Charles Blevins
15705 JUNE WASHAM RD
Davidson, NC 28036
Business: (980) 406-7277
Mobile: (980) 406-7277

Applicant/Authorized Agent
Charles Blevins
15705 JUNE WASHAM RD
Davidson, NC 28036
Business: (980) 406-7277
Mobile: (980) 406-7277

Permit Custom Fields

How is your site plan being submitted	Survey Plat	Does the site contain any jurisdictional wetlands	No	Non-domestic Sewage Generated	No
Other Public Agency	No	All proposed structure dimensions	See County Permit 312372	Maximum Number of Bedrooms	1
If other Addition/Structure, please explain	Tiny House	Number of Occupants	1	Foundation Type	Crawl Space Foundation
Water Supply	New Well	Desired Septic System Type	Conventional (most common)	If other septic system type, please explain	
Has this project been approved by TRC	No	Lot Acreage	66.68	Front Setback	35
Back Setback	35	Left Setback	15	Right Setback	15
Zoning Permit Issued Date	Mar 28 2023 12:00AM	Zoning Permit Expiration Date	Sep 24 2023 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	WSIII BOW HUNTING CREEK				

Attachment File Name	Added On	Added By	Attachment Group	Notes
Signature_Charles_Blevins_1/12/2023.jpg	01/12/2023 10:38	Blevins, Charles		Uploaded via CSS
Union Grove Blevins New Well Permit Signed 11-4-2020_v1.pdf	01/26/2023 14:51	COMEAUX, DEBRA	Available Online	Authorize to Act as Agent
667 HOWARDS BRIDGE RD SITE PLAN - PLOT PLAN.pdf	03/24/2023 16:57	COMEAUX, DEBRA	Available Online	SITE PLAN - PLOT PLAN
Ariel Map UGP HBR.pdf	04/27/2023 13:42	Holland, Sydney	Available Online	Map To Lot

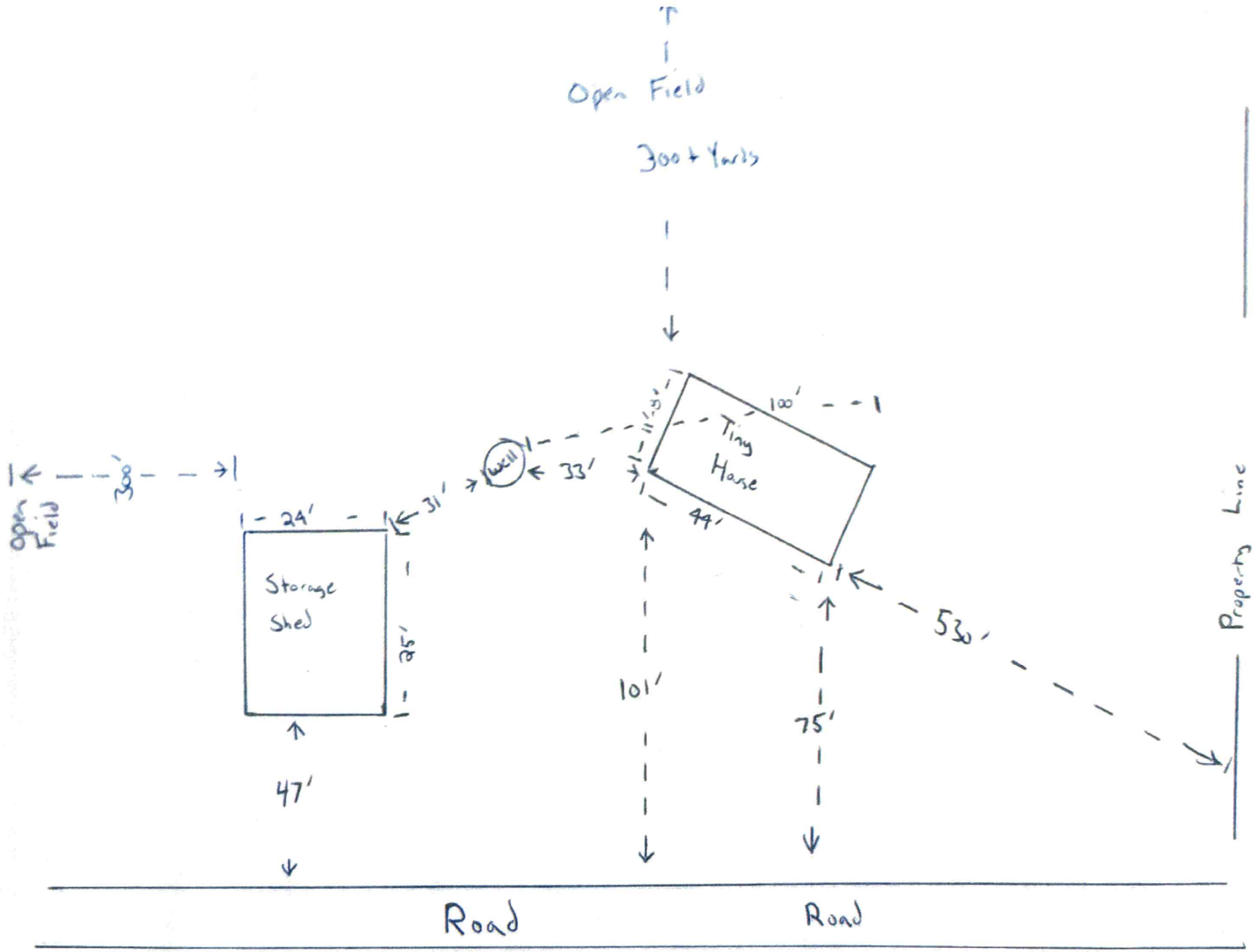
Note	Created By	Date and Time Created
1. Ok I spoke with Rebecca. I have emailed the customer. We need to know if there is a current home on the property, if not then the septic permit structure information will need to be changed to reflect New Single Family Residence.	Barbara Nebel	01/26/2023 12:36
2. Texted owner- Mailbox was full-4/27/23	Sydney Holland	04/27/2023 7:37

Invoice No.	Fee	Fee Amount	Amount Paid
INV-00012237	New Gravity System	$500.00	$500.00

PERMIT SNAPSHOT REPORT (OSWP-2023-13588)

Iredell Zoning Permit Fee		$75.00	$75.00
Iredell Zoning Tech Fee		$2.25	$2.25
	Total for Invoice INV-00012237	$577.25	$577.25
	Grand Total for Permit	**$577.25**	**$577.25**

Workflow Step / Action Name	Action Type	Start Date	End Date
Application Completeness Check v.1		03/24/2023 16:57	03/24/2023 16:57
Confirm application complete v.1	Generic Action		03/24/2023 16:57
Fees v.1		04/25/2023 16:58	04/25/2023 16:58
Issue Invoice v.1	Generic Action		04/25/2023 16:58
Fees Paid v.1	Generic Action		04/25/2023 16:58
Zoning Review v.1		03/28/2023 15:26	04/26/2023 10:58
Iredell County Zoning Approval v.1	Task	03/28/2023 15:26	04/26/2023 10:58
Issue Invoice v.1	Generic Action		03/28/2023 15:27
Fees Paid v.1	Generic Action		04/25/2023 16:58
~~**Lot Readiness Verification v.1**~~			04/27/2023 13:42
~~OSWP Septic Preliminary Site Visit v.1~~	Inspection		04/27/2023 13:42
~~OSWP Site Evaluation v.1~~	Inspection		04/27/2023 13:42
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		


Open Field
300+ Yards
Open Field
38'
24'
31'
Storage Shed
35'
47'
Well
33'
11'-3"
100'
Tiny House
44'
101'
75'
53'
Property Line
Road
Road

PTB

ICHD – Environmental Health Division

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 **PERMIT #** 312372

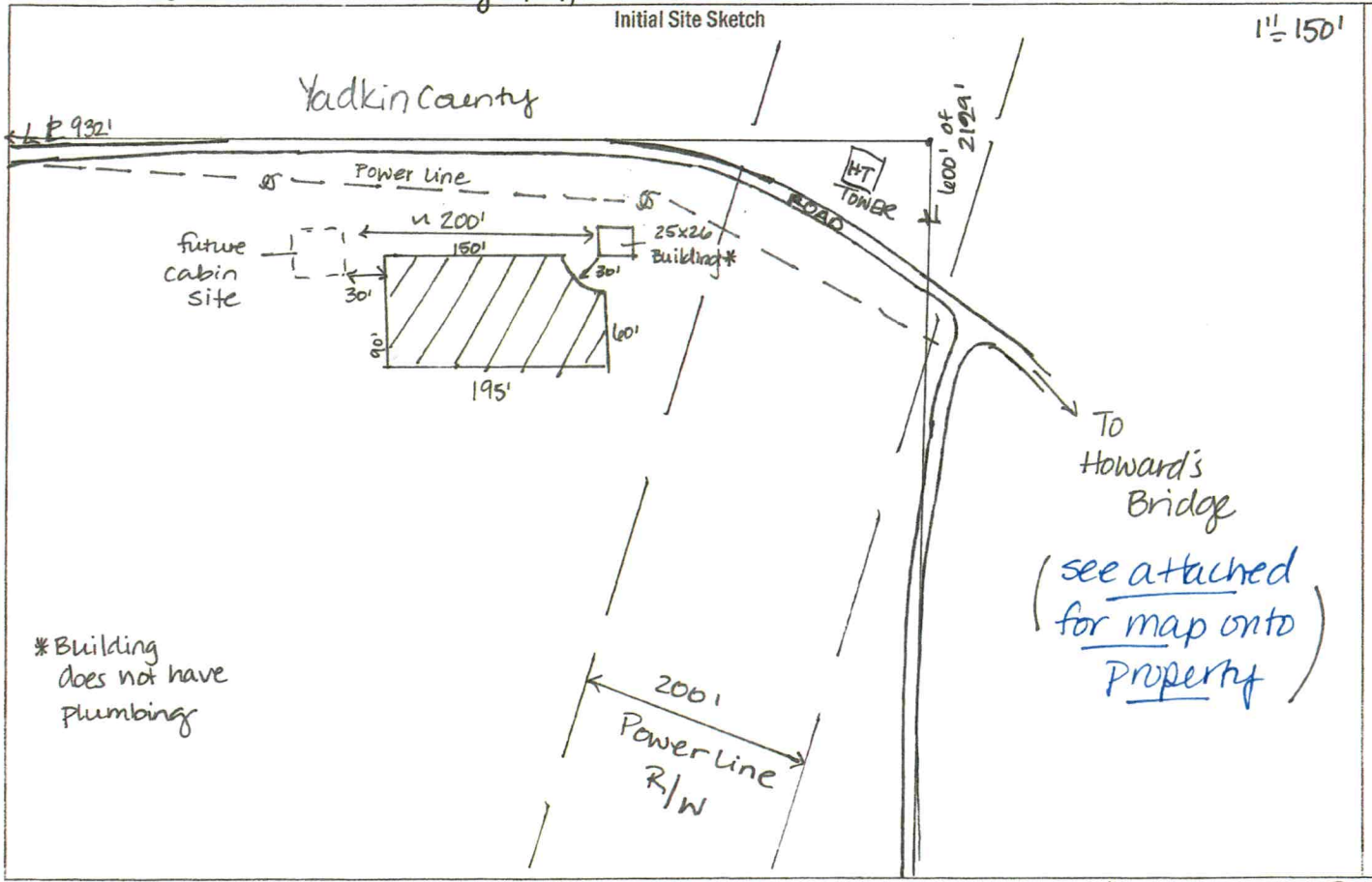
PRIVATE DRINKING WATER WELL PERMIT **PIN #** 4844 82 3618 **Type of Permit (circle one):** (New) Repair Abandonment

APPLICANT/OWNER NAME: Charles Blevins ADDRESS: 15705 June Washam Rd, Kannapolis, 28036 PHONE: 980-406-7277

DIRECTIONS TO SITE: I-77 N → exit 65 → (L) 901 → (R) Howards Bridge → see attached for further

SITE ADDRESS: 1667 Howards Bridge Rd, Union Grove 28689 SUBDIVISION: N/A SECTION/LOT: N/A

Initial Site Sketch



GROUTING RESULTS

Total Depth _____

Depth of Casing _____

Yield _____

Notes:

Well GPS Latitude: _____

Longitude: _____

PERMIT CONDITIONS/COMMENTS: Follow all NCAC 2C well rules - grout 20', Set 20' casing. Maintain 25' from all structures. Stay out of power line Right-of-ways. No known contaminant release w/in 1000'

WELL PERMIT ISSUED BY: D. Wieberg DATE: 12/16/2020 (Permit is valid for 5 years from date issued. This permit may be revoked if it is determined there has been a material change in any fact or circumstance upon which the permit is issued. Actions of the employees of the Iredell County Health Department shall in no way be taken as a guarantee that this well will produce water of any particular quantity or quality or for any amount of time. Employees of the Iredell County Health Department assume no liability for any damages, either direct or consequential which may be caused by this well.)

Well Contractor: _____ CONTRACTOR CERT #: _____ GROUT INSPECTION BY: _____ DATE: _____

OR CERTIFICATION OF GROUT NOT WITNESSED BY DEPT: _____ DATE: _____ WELL HEAD INSPECTION BY: _____ DATE: _____

WELL HEAD INSPECTION (check when completed): GROUT TO GROUND SURFACE ☐ WELL CONTRACTOR ID PLATE ☐ PUMP INSTALLER ID PLATE ☐ SAMPLE PORT ☐

ACCESS PORT / VENT ☐ WELL SEAL ☐ WELL HEAD 12 INCHES / PITLESS ADAPTOR 8 INCHES ABOVE GRADE ☐

CERTIFICATE OF COMPLETION BY: _____ DATE: _____ WATER SAMPLES BY: _____ DATE: _____

Attachments: Form GW-1a (required except for abandonment) ☐ Form GW-30 ☐ Water Sample Results ☐ Plat ☐ CALL 704-664-3703 to schedule grout or well head inspections between 8-9am