Comprehensive # OSWP-30660 (BCW)

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 243633

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

PIN # 4853-20-5000

APPLICANT/OWNER: Angie Lyalls / Timothy Gunter APPLICANT ADDRESS: 235 Giderth Rd, Union Grove

SITE ADDRESS: 1699 W Memorial Hwy, Union Grove PHONE: 704-880-0494 ALT. PHONE –

SITE DIRECTIONS: 901 → on left across from Gunters store SAP CONTROLLED: ☐ YES ☒ NO

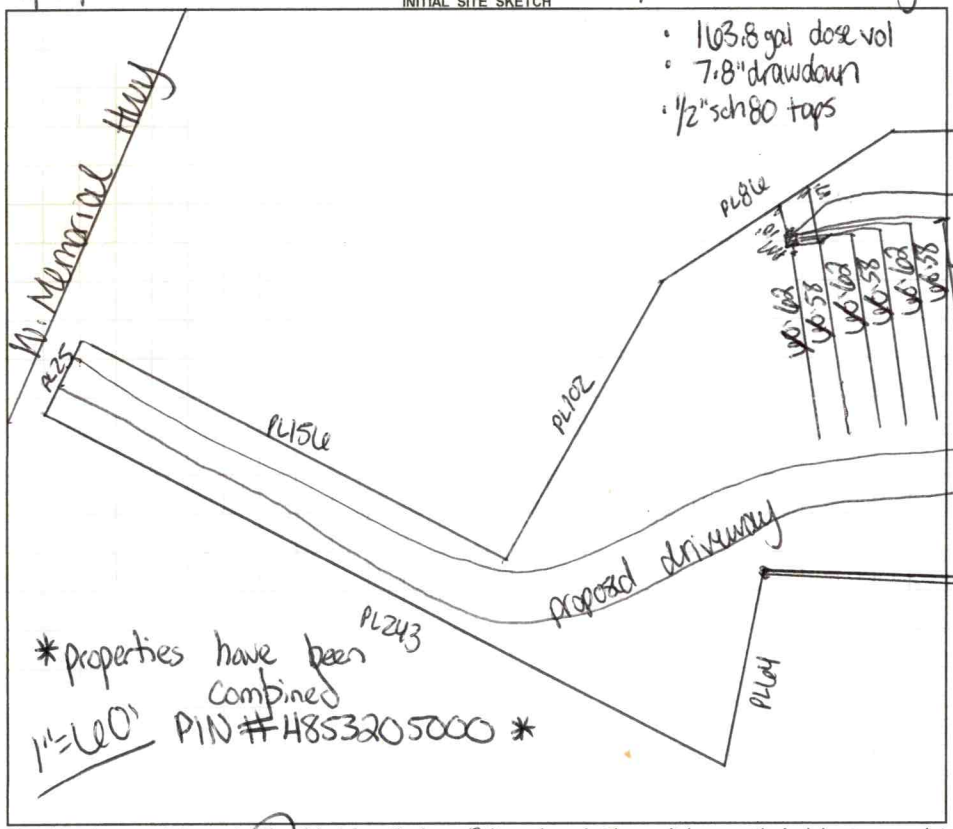
SUBDIVISION: Dorsey Allen Styers Prop SECTION: – LOT # 2 LOT AREA: 1.692ac DESIGN FLOW: 360gpd L.T.A.R.: .25 (.1R)

Septic Tank	1000 (gal)	STB	760	Date	7/28/23	☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 3	Water Supply
Pump Tank	1000 (gal)	PT	363	Date	7/28/23	System Description:			25% reduction - PM	☐ Business	No. Persons 6	☐ Private
Pump Make		Model		Serial #		Repair System Description:			drip	☐ Other	No. Employees	☒ Public
# Nitrification Fields	1	# Lines	6 @ 60'	Linear Ft:	360	Maintenance Agreement Required:		☐ YES	☒ NO	☐ Slab	☐ Crawl Space	☐ Community
Trench Width	36"	Trench Bottom Depth (Inside)	30" max	Gravel Depth	–			☐ GRAVITY	☒ PRESSURE	☒ Basement w/plumbing		☐ Basement w/o plumbing

Comments / Conditions: Install on contour, utilize pressure manifold. Do not exceed max depth of 30". Maintain 25' offset upslope of house. Do not drive over system with driveway.

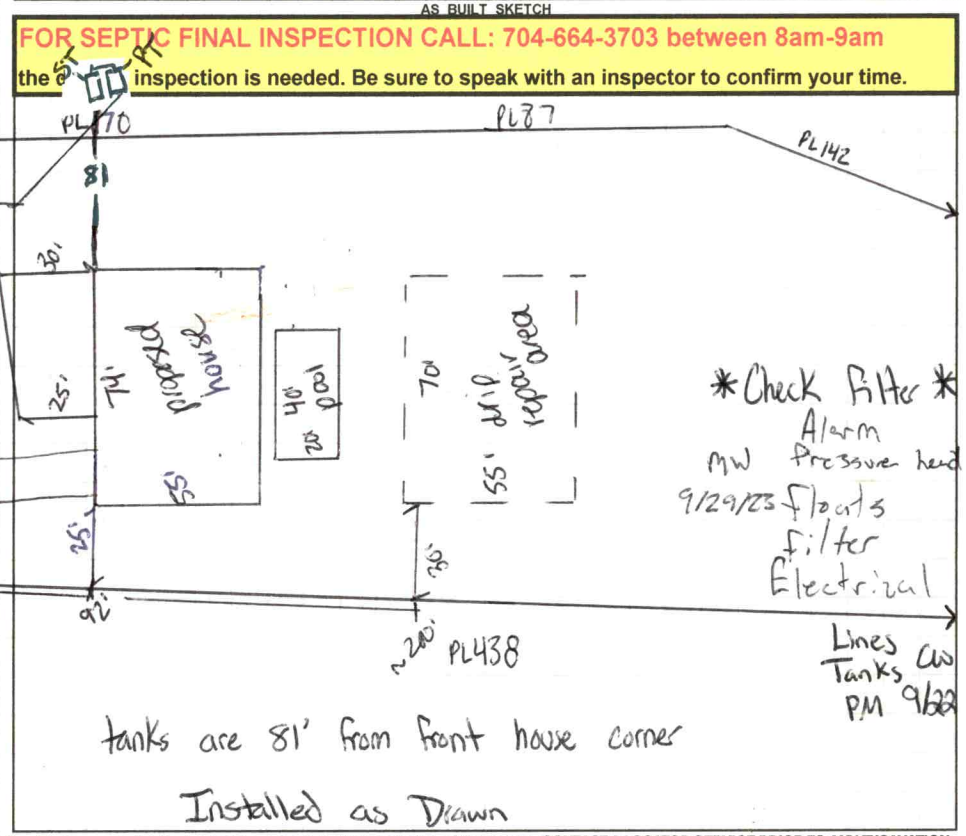
Tanks may be moved up to 5' off house if walk-out basement is built with no foundation drains.

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: Angie Lyalls Date: 7-21-20 Installed by: Gunter Grading

IMPROVEMENT PERMIT by: Carla C. Nicks Date: 7-21-20 OPERATION PERMIT by: Matt Wu Date: 9/29/23

AUTHORIZATION TO CONSTRUCT by: Carla C. Nicks Date: 7-21-20 Existing System Inspected by: Date:

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

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

Sheet 1 of 1
PROPERTY ID #: 4732040088
COUNTY: Iredell

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

OWNER: Angie Lyalls — APPLICATION DATE: 4-10-19
ADDRESS: 235 Gotorth Rd — DATE EVALUATED: 7-30-19
PROPOSED FACILITY: SFR — PROPOSED DESIGN FLOW (.1949): 360gpd — PROPERTY SIZE: 1.62ac
LOCATION OF SITE: 11099 W Memorial Hwy — PROPERTY RECORDED: Y
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	L 13%	0-11	GR SCL	Fr ss sp sticky	few prominent mottles in sap	42"	PS	—	PS .25
		11-31	SBK C	Fr ss sp sticky					
		31-42	SBK CL	Fr/Firm ss sp sticky					
		42-52	M LSAP	Fi					
2	L 10%	0-20	GR/SBK SCL	Fr ss sp sticky	some y/b mottles ~47"	47"	—	—	PS .25
		20-48	ABK C	Fr ss sp sticky					
3	L 10%	0-20	SBK C	Fr ss sp sticky	inclusions throughout	48"	—	—	PS .1 drip
		20-48	SBK/ABK CL	many firm sap					
4	L 13%	0-39	SBK C	Fr ss sp sticky	a few firm areas	50"	—	—	PS .25
		39-50	SBK CL	Fr ss sp sticky					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	360'	3600 sqft
System Type(s)	25% rm	drip
Site LTAR	.25	.1

OTHER FACTORS (.1946): N/A
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: C. Nicks
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.

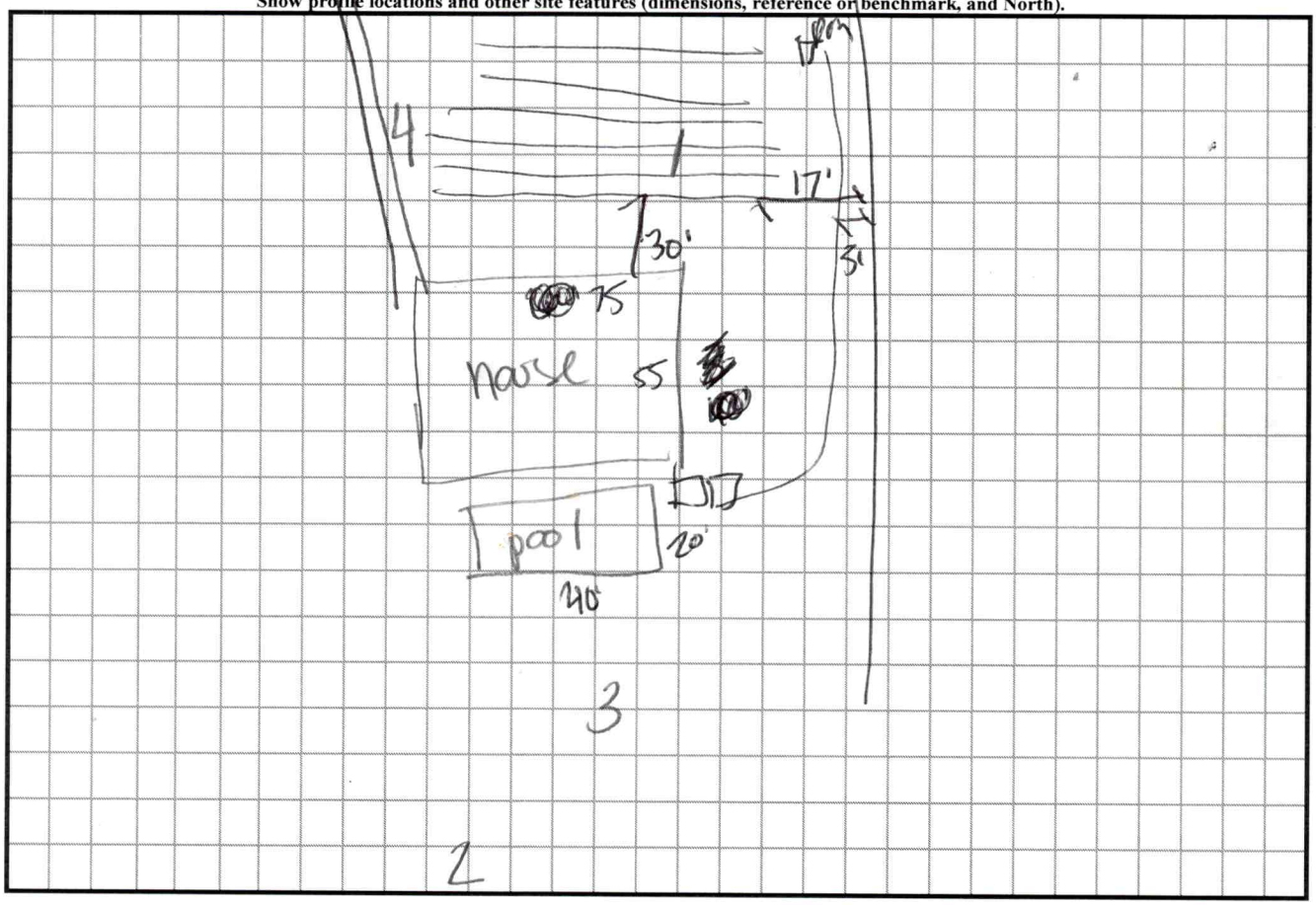
NOTES

HORIZON DEPTH	In inches below natural soil surface 90"
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).



CONNECTGIS WEB HOSTING

North Carolina
Iredell County

Iredell
Printed July 21, 2020
See Below for Disclaimer



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2-19-20 8.5 hrs. drafting
2-18-20 7.75 hrs. drafting
2-17-20 6.5 hrs. drafting
2-13-20 7 hrs. drafting

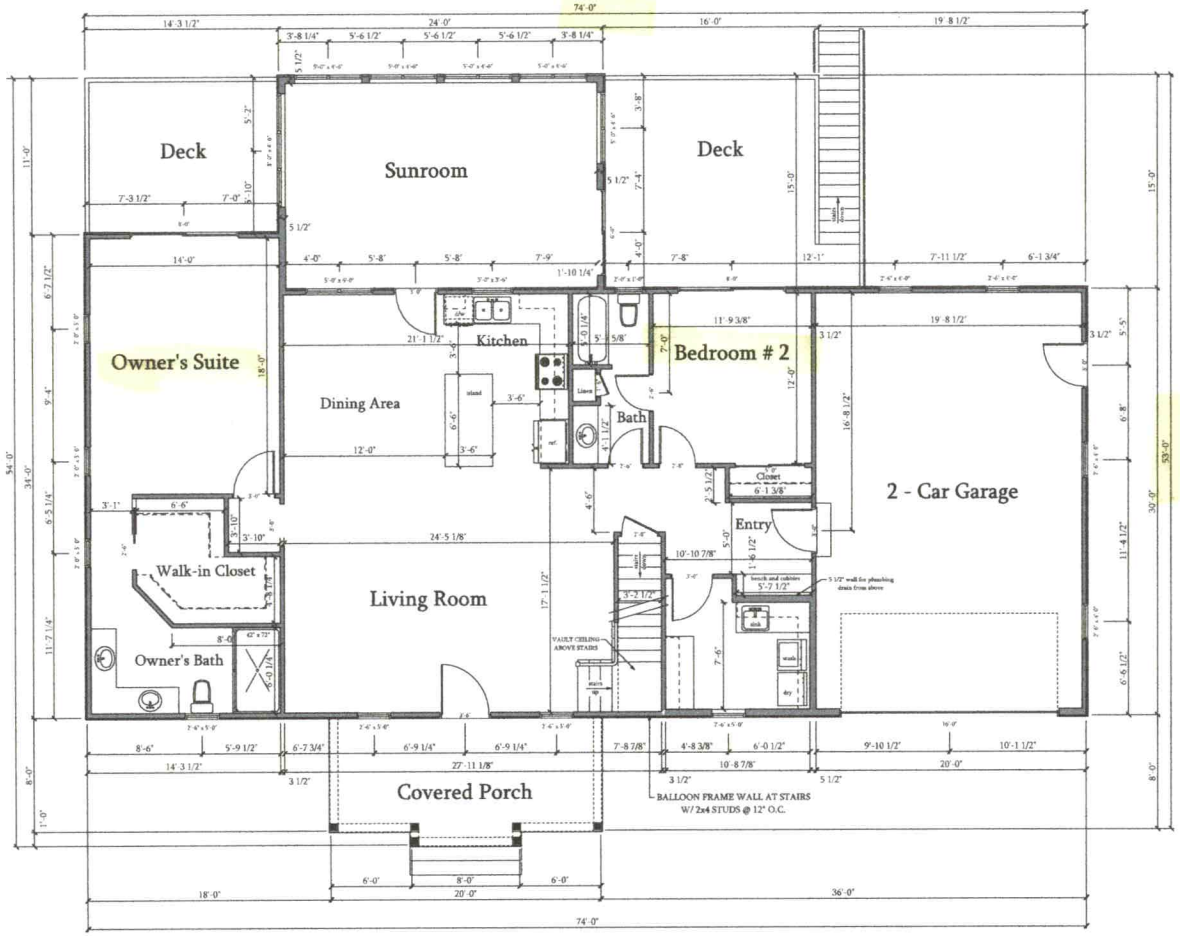
AREA CALCULATIONS

Heated:

Main Floor	2,037 s.f.
Upper Floor	565 s.f.
Total Heated	2,602 s.f.

Unheated:

Garage	600 s.f.
Front Porch	168 s.f.
Basement	1,573 s.f.
Upstairs storage # 1	378 s.f.
Upstairs storage # 2	267 s.f.
Total Under Roof	5,588 s.f.



1 / A-1 MAIN FLOOR PLAN
SCALE: 1/4" = 1'-0"

Acknowledgement Of
Plans Submittal ONLY!
Carla C. Nicks Date 7-21-20
Hugo Kepells Date 7-21-20

2-19-20

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U.S. HOME DESIGNS, INC.
2005 Hazelwood Dri, Statesville, NC. 28625 Phone: 704-309-0762
Designer: Stephen W. Turley
www.ushomedesigns.com

GUNTER RESIDENCE
569 Pineville Rd., Statesville NC

MAIN FLOOR PLAN

SHEET No. A-1

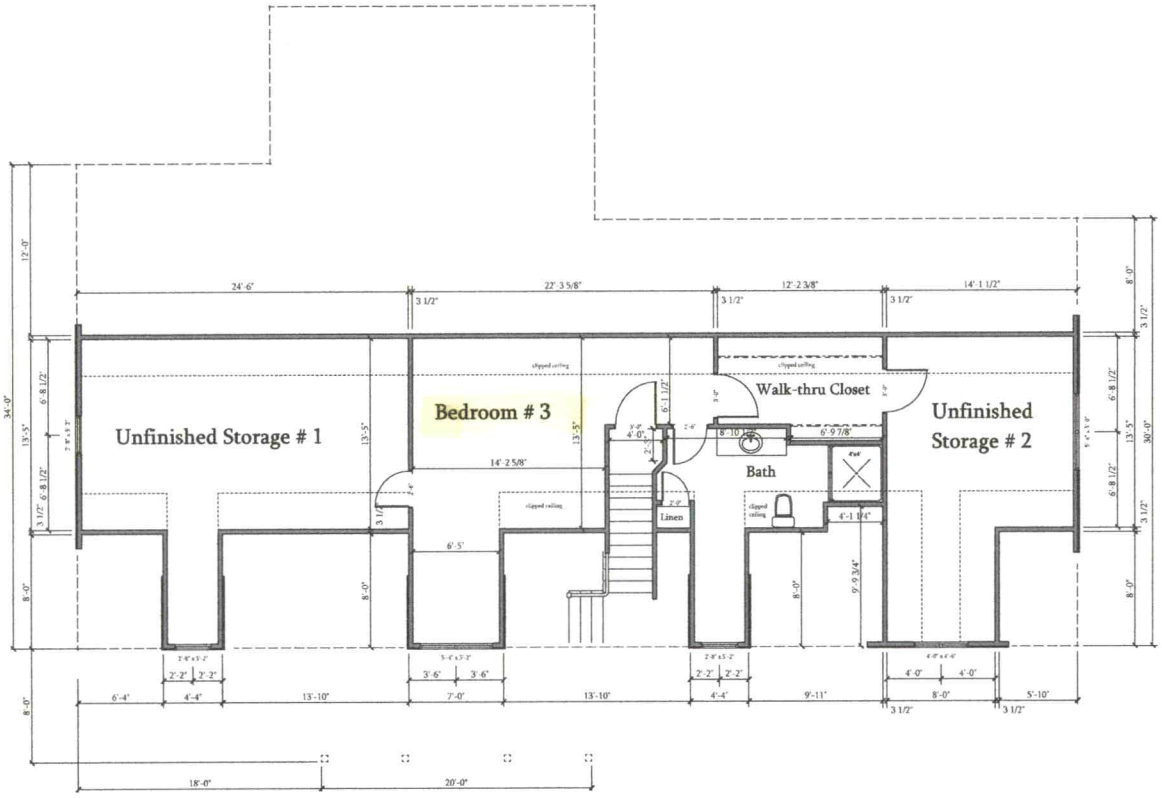
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1 / A-2 UPPER FLOOR PLAN

SCALE: 1/4" = 1'-0"

2-19-20

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2005 Hazelwood Dri., Statesville, NC 28625 Phone: 704-309-0762
Designer: Stephen W. Turley
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UPPER FLOOR PLAN GUNTER RESIDENCE
569 Pineville Rd., Statesville NC

SHEET No. A-2

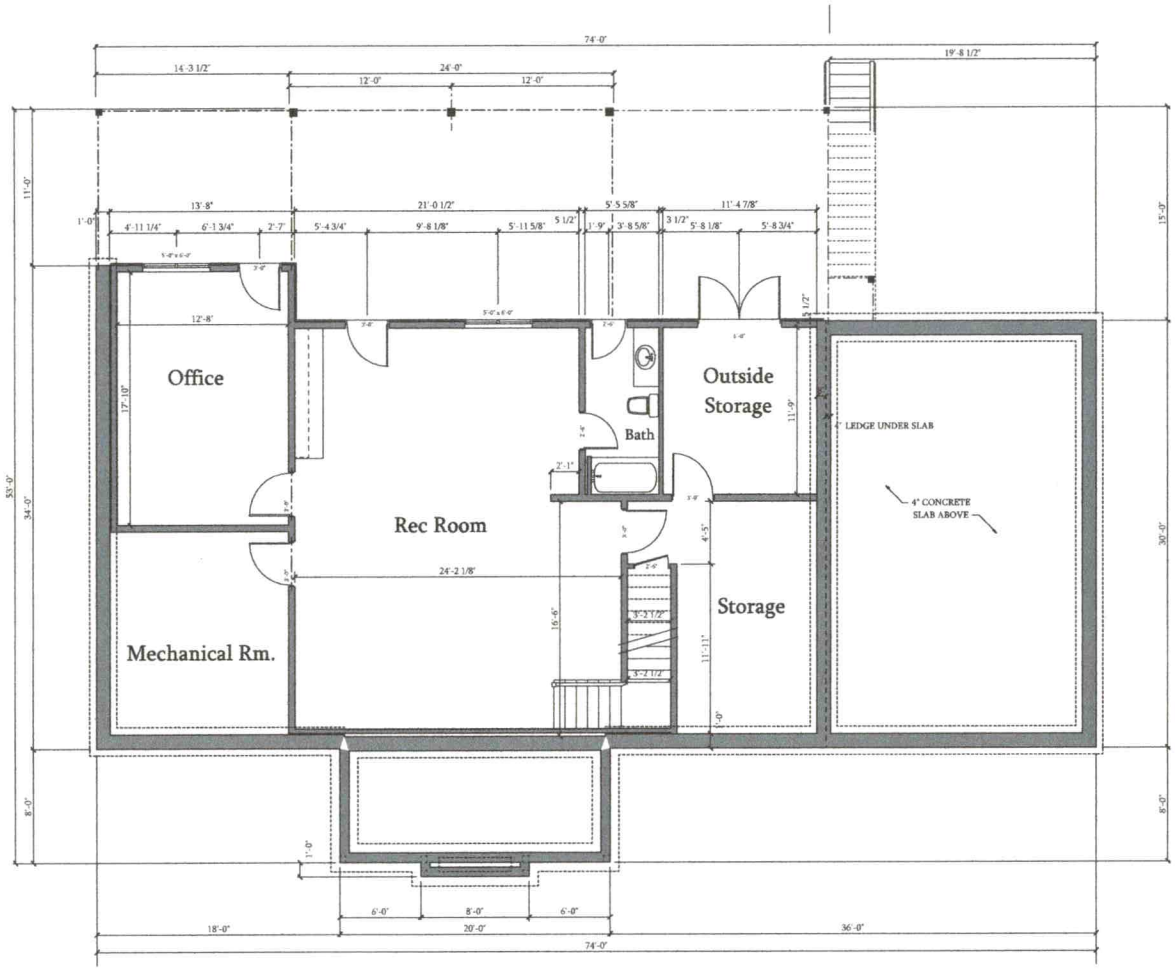
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1 / A-3 BASEMENT PLAN

SCALE: 1/4" = 1'-0"

PRELIMINARY
FOR REVIEW ONLY

2-19-20

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U.S. HOME DESIGNS, INC.
2005 Hazelwood Dr., Statesville, NC 28625 Phone: 704-309-0762
Designer: Steve Tuttle
www.ushomedesigns.com

GUNTER RESIDENCE
569 Pineville Rd., Statesville NC

BASEMENT PLAN

SHEET No. A-3

RECEIVED APR 10 2019

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM Paid $500.00 #243633

Application For: (X) 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: Angie Lyalls Address: 235 Goforth Rd Zip: 28660
Applicant Email: _____ Phone: 704-880-0494 Alt. Phone: _____
Owner Name: Angie Lyalls Address: 235 Goforth Rd Zip: 28660
Owner Email: _____ Phone: 704-880-0494 Alt. Phone: _____

Property Information:

Street Address: 1699 West Memorial Hwy Harmony, NC
Subdivision Name: _____ Section/Phase: _____ Lot Number: _____
Driving Directions: _____

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

(X) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____
Maximum Number of Bedrooms: 3
Maximum Number of Occupants: 3
( ) Swimming Pool
( ) Other Addition/Structure: _____
Non-Residential Site Development: Type of Business: _____
Square Footage of Building: _____ Max. Number of Employees: _____ Max. Number of Seats/Beds/Other: _____

CHECK FOUNDATION TYPE

( ) Crawl Space Foundation
( ) Concrete Slab Foundation
(X) Basement with Plumbing
( ) Basement without Plumbing

Water Supply: ( ) Replacement Well – Reason: _____
( ) Multi-connection Well Number of Houses: _____ Number of Persons: _____

(X) 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: Angie Lyalls 4-10-19
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

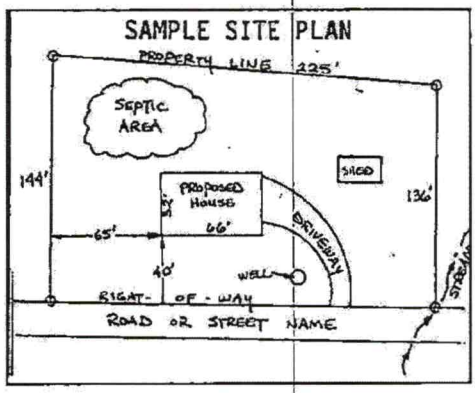
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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:

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

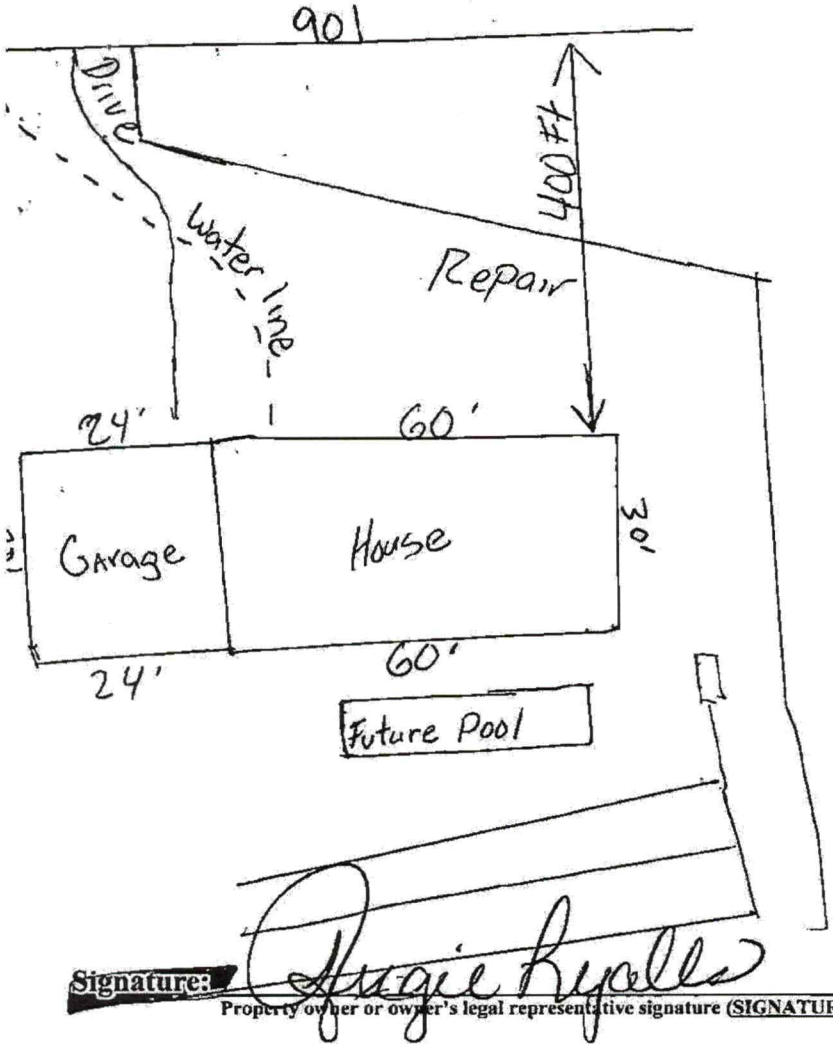


Circle N/A on the following if appropriate:

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



Signature: Angie Ryalls

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

4-10-19

DATE

ENVIRONMENTAL HEALTH REQUIREMENTS for SEPTIC and WELL PERMITS

The following items must be completed *PRIOR* to the *SUBMITTAL* of any Environmental Health Application. Incomplete applications will be returned to the applicant and cannot be processed or placed on the work list.

Initial all lines below to indicate you have submitted each form and completed every site requirement **

Complete all Environmental Health forms:

_____ Application
_____ Site Plan with dimensions of proposed structure, addition, pool etc.
_____ Documentation to Authorize Owner Agent (if the property owner is not the applicant)
_____ Copy of Zoning Permit when applicable
_____ Sign this sheet after you have completed all items

Lot must be cleared of heavy undergrowth. In order to evaluate the lot, the footprint of the proposed structure must be visible. Adequate area for the septic drain field and repair area must be sufficiently cleared of heavy undergrowth, with **50 feet of visibility** in all directions. Inspectors must be able to evaluate the property, shoot laser level elevations, layout the drain field, do soils work, etc. **If the lot is not cleared sufficiently, then a $100 site revisit fee will be charged and the evaluation will be put on HOLD until the requirement is met.**

Clearly mark all property corners by locating existing iron or concrete markers. Flag all property lines every 25 feet if adjacent corners are not visible when standing on any given corner. Property lines must be flagged by a licensed NC surveyor & easily identified **prior to application submittal** (exception may apply for septic repair evaluations only).
'Mow lines' and/or fence lines do NOT constitute marked lines. **If the property lines are not properly marked when the lot is ready to be evaluated, then the application will be put on HOLD and a $100 site re-visit fee charged.**

Stake or flag the footprint of the proposed structure, addition, pool etc. to match the site plan submitted. The proposed structure, etc. **must be staked** out on the property as per the site plan.

If an **Authorization to Construct (AC) is desired,** submit a recorded copy of the plat for newly created or subdivided lot(s) and a LEGIBLE copy of the basic floor plan no larger than 8 ½" x 14" for each floor of the structure including decks, porches, etc. **The overall dimensions must be clearly noted & the rooms labeled.**

Any site not meeting the above requirements when staff arrives for the evaluation will result in a $100 site revisit fee being charged and the request being placed on HOLD. This will delay the processing of the application.
Once work by Environmental Health staff begins, the up-front fees paid toward securing any health department permit are non-refundable. Refunds for work not started, due to a customer changing their mind or plans, are subject to an administrative fee of $50 to defray a portion of the costs of processing the refund.

Backhoe pits are required for all applications that require a soils evaluation.
DO NOT DIG PITS UNTIL THE EH SPECIALIST HAS AUTHORIZED AND SCHEDULED YOUR EVALUATION TIME.

- **All utilities shall be marked before pits are dug. Call NC 811 for this service.**
- **The applicant/agent is responsible for securing these services**
- **Backhoe pits are to be dug at the locations and depths determined by the Environmental Health Specialist or a NC Licensed Soil Scientist. A minimum of four pits must be dug.**
- **The EH specialist will contact you when your application is ready to be processed for pit scheduling.**
- **Your backhoe operator must be on site during the EH Specialist's evaluation to prevent your operator from having to return to the property for additional work.**

By signing below I am acknowledging the above specifications have been met and the site is READY to be evaluated AND I understand the backhoe pit requirement and will secure those services (if applicable).

Signature _____ **Date** 4-10-19

Questions? Contact the Environmental Health Offices below:

Statesville Office
349 North Center Street (2nd Floor Building Standards)
Statesville, NC 28677-4063
Phone: (704)878-5305 ext. 3456

Mooresville Office
610 East Center Avenue (2nd Floor Govt. Center South)
Mooresville, NC 28115-2548
Phone: (704)660-3625

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

(Check and sign only ONE of the options below)

☐ **1. * APPLICANT AND OWNER ARE THE SAME. *** (*Sign here*) Hugie Ryalls

Applications for permits require the "signature of the owner or owner's legal representative" (15A NCAC 18A .1937). If the owner does not sign the application himself or herself, they can submit any one of the following documents to designate their legal representative: *Power of Attorney; Real Estate Contract; Estate executor; Bankruptcy trustee; Court ordered guardianship*

In the absence of the above documentation, the property owner may provide the local health department with documentation that designates a legal representative. A property owner may:

Complete this form to document his or her legal representative, or provide his or her own form that contains the information in this form. If there are multiple property owners, then all property owners must sign the form that designates a legal representative.

By signing a form that designates a legal representative for purposes of 15A NCAC 18A .1937, the property owner authorizes that representative to act on their behalf in matters pertaining to the application and permitting process, including signing or receiving any application, document or permit. The owner retains full responsibility to meet all permit conditions specified by the local health department.

☐ **2.** I, _____, am the legal owner(s) of the property located at _____, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize **(print legal representative/company name)**

_____, _____, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

- Application for Improvement Permit (IP) / Authorization to Construct (AC)
- Improvement Permit (IP) / Authorization to Construct (AC)
- Application for soil-site evaluation (new/repair)
- Application/permit for private drinking water well/well abandonment
- Application for Compliance Inspection

I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

[redacted] Hugie Ryalls _____ 4-10-19

Signature of Owner(s) Date

Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

IREDELL COUNTY

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

APPLICATION NUMBER
243633
Issue Date: 04/10/2019

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4853204028.000	1699 WEST MEMORIAL HIGHWAY, HARMONY, NC 28634	

Owner Information	Applicant Information
Owner: LYALLS, ANGIE	Applicant: LYALLS, ANGIE
Address: 235 GOFORTH	Address: 235 GOFORTH
OLIN, NC 28660	OLIN, NC 28660
Phone:	Phone:

Use Requested	Zone Code
SFD	

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
	35.00	35.00	15.00	15.00	NOT	X

Remarks:

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	173621	TOTAL FEES:	$ 77.25

PERMIT SNAPSHOT REPORT OSWP-2023-30660 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: 07/12/2023
Exp Date: NOT AVAILABLE
Completed: NOT COMPLETED
Approval Expire Date:

Description: COMPREHENSIVE RE DRAW OF THE SEPTIC SYSTEM - BLDG PERMIT IS IN MUNIS #243633. 8/29 Spoke w/Crystal. She stated the house is started. They own lots on both sides of house. Site ready GM 8/30 Site visit, site ready GM

Parcel:	Address:	Zone:
4853204028.000 Main	1699 W Memorial Hwy Harmony, NC 28634 Main	RA(Residential Agricultural District)

Applicant/Authorized Agent
GUNTER GRADING COMPANY
PO BOX 188 PO BOX 188
UNION GROVE, NC 28689
Business: (704) 902-9229

Property Owner
TIMOTHY S GUNTER

Permit Custom Fields

How is your site plan being submitted	Custom Site Plan	Septic Application/Permit Type	Re-Layout/change septic permit (sys not installed)	Does the site contain any jurisdictional wetlands	No
Non-domestic Sewage Generated	No	Other Public Agency	No	All proposed structure dimensions	35'X60'
What are the proposed structures	New Single-Family Residence - Modular	Type of New Single-Family Residence	Stick Built	Maximum Number of Bedrooms	3
If other Addition/Structure, please explain		Number of Occupants	3	Foundation Type	Basement with Plumbing
Residential/Business/Other	Residential	Water Supply	Community Well	Desired Septic System Type	Conventional (most common)
Additional Unique Setbacks Apply	No				

Attachment File Name	Added On	Added By	Attachment Group	Notes
Signature_Crystal_Reed_7/12/2023.jpg	07/12/2023 12:26	Reed, Crystal		Uploaded via CSS
Signature_Crystal_Reed_7/12/2023.jpg	07/12/2023 12:26	Reed, Crystal		Uploaded via CSS
1699 W Memorial AA form.pdf	08/14/2023 12:30	Nebel, Barbara	Available Online	AA Form
Doresy Allen Styers Lot 2 Recombination Plat 80-120 A.pdf	08/14/2023 12:40	Nebel, Barbara	Available Online	Site Plan
Doresy Allen Styers Lot 2 Recombination Prelim 8-8-2023 B.pdf	08/14/2023 12:40	Nebel, Barbara	Available Online	Site Plan
Xerox Scan_08162023085938.pdf	08/16/2023 11:26	Hart, Ronda	Available Online	Septic permit on file

Inspection Number	Status	Inspection Type	Request Date	Scheduled Start Date	Scheduled End Date	Actual Start Date	Actual End Date
2023-133980	Passed - Permit	OSWP Septic/Well Preliminary Site Visit	08/30/2023	08/30/2023 0:00	08/30/2023 0:00	08/30/2023 16:27	08/30/2023 16:27

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. 8/29 Crystal stated site ready. She said they own business on one side of the house and the vacant lot on the other side. House properties are 2 acres. GM	Grace McLeod	08/29/2023 16:45

Invoice No.	Fee	Fee Amount	Amount Paid

PERMIT SNAPSHOT REPORT (OSWP-2023-30660)

INV-00019151	New Gravity System		$500.00	$500.00
		Total for Invoice INV-00019151	$500.00	$500.00
		Grand Total for Permit	**$500.00**	**$500.00**

Workflow Step / Action Name	Action Type	Start Date	End Date
Application Completeness Check v.1		08/14/2023 12:30	08/14/2023 12:30
Confirm application complete v.1	Generic Action		08/14/2023 12:30
Fees v.1		08/14/2023 12:30	08/29/2023 15:47
Issue Invoice v.1	Generic Action		08/14/2023 12:30
Fees Paid v.1	Generic Action		08/29/2023 15:47
Lot Readiness Verification v.1		08/30/2023 16:26	
OSWP Septic Preliminary Site Visit v.1	Inspection	08/30/2023 16:26	08/30/2023 16:27
OSWP Site Evaluation v.1	Inspection		
~~**Zoning Review v.1**~~			08/14/2023 12:35
~~Floodplain Admin Overview v.1~~	Task		08/14/2023 12:35
~~Issue Invoice v.1~~	Generic Action		08/14/2023 12:35
~~Fees Paid v.1~~	Generic Action		08/14/2023 12:35
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		

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

Sheet 1 of 1
PROPERTY ID #:
COUNTY: IREDELL

4853-20-4028

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

OWNER: Timothy S. Gunter — APPLICATION DATE 7/12/23
ADDRESS: PO BOX 188 Union Grove NC 28689 — DATE EVALUATED: 9/6/23
PROPOSED FACILITY: SFR — PROPOSED DESIGN FLOW (.1949): 360 — PROPERTY SIZE: 5.830
LOCATION OF SITE: 1699 W. Memorial Hwy Harmony NC 28634 — PROPERTY RECORDED: ✓
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	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LS	0-32	C PL	S P SE VFR	10YR 7/1 manganese incl 32"+ heavy SAP incl throughout 0-			—	U
		32-54	CL PL	SS SP SE VFR					
		54-60	L SAP M	NS NP SE VFR					
2	LS	0-26	C ABK	S PSE FR	few Lithe incl in C 10"+ 2.5Y 7/1 @ 17"+ heavy SAP in CL 26"+			—	U
		26-34	CL ABK/PR	SS SP SE VFR					
		34-58	L SAP P/C	NS NP SE VFR					
3	LS/SH	0-24	C ABK	S P SE FR	few YB in C 10YR 7/2 @ 39"+			—	PS 0.25
		24-59	CL WABK	SS SP SE FR					
4	LS/SH	0-20	FILL MIXED	—	mixed SAP SAP inc heavy 20"+ 10YR 6/2 @ 22"+			—	U
		20-53	C ABK	S P SE FR					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)	U	U
Site LTAR		

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): U

EVALUATED BY: S. Williams
OTHER(S) PRESENT: M. Wilkinson

COMMENTS: Site has previous permit. Looking to relocate septic area to achieve gravity combined property unsuitable to relocate septic area. Keeping OSWP 24363 3.

Updated February 2014

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.

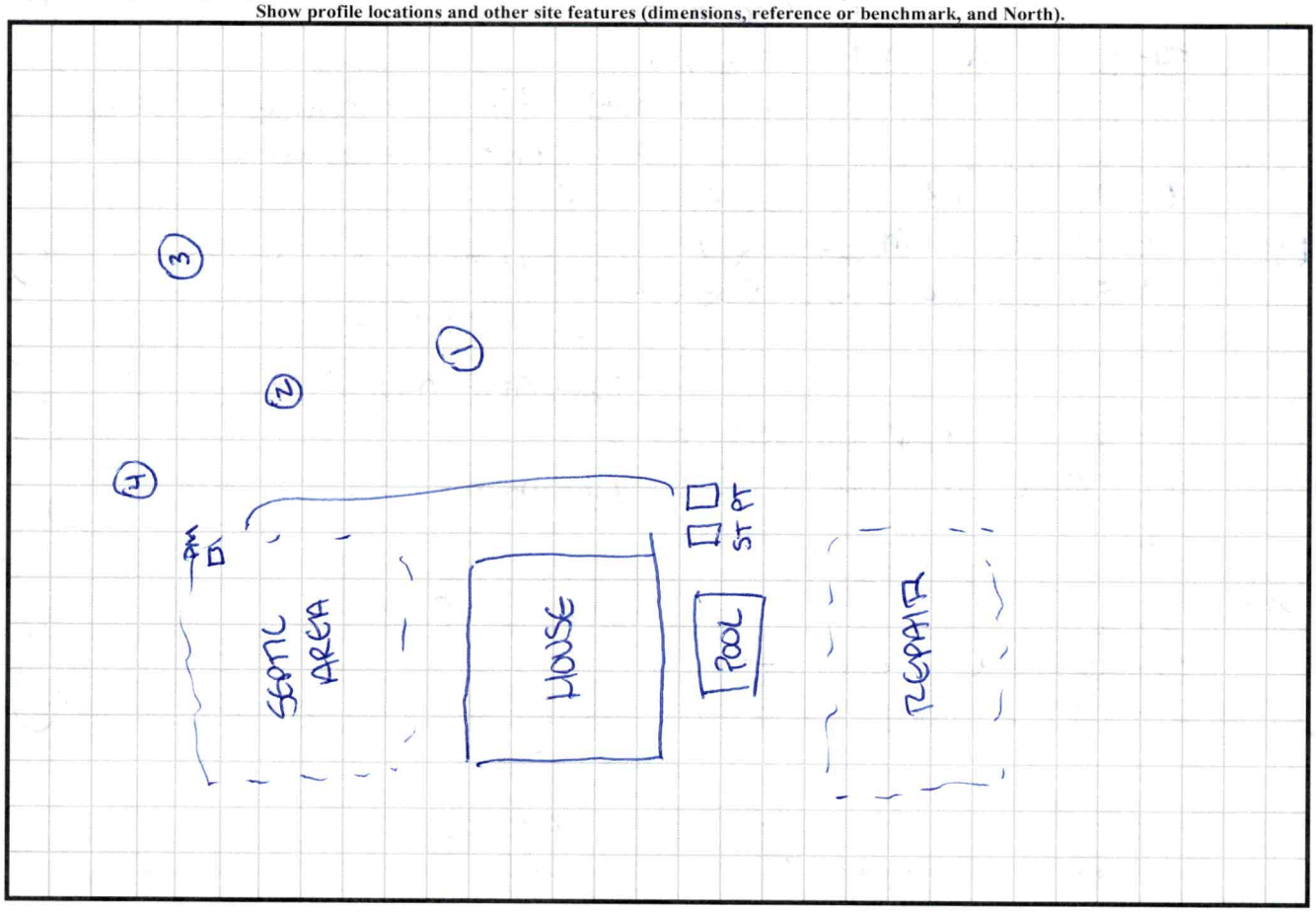
NOTES

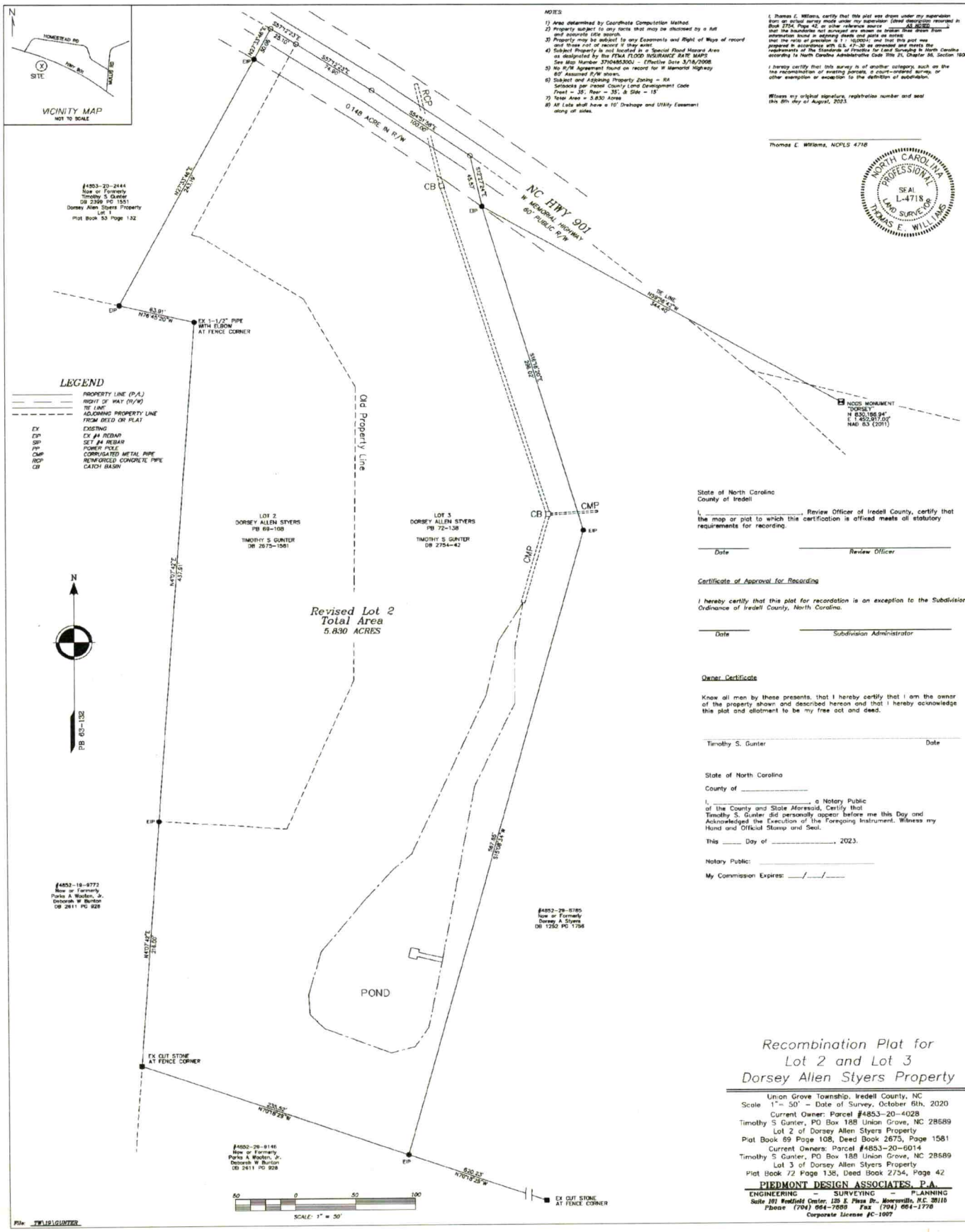
HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or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




N
HOMESTEAD RD
Hwy. 901
SITE
VICINITY MAP
NOT TO SCALE
NOTES:
1) Area determined by Coordinate Computation Method.
2) Property subject to any facts that may be disclosed by a full and accurate title search.
3) Property may be subject to any Easements and Right of Ways of record and those not of record if they exist.
4) Subject Property is not located in a Special Flood Hazard Area as designated by the FEMA FLOOD INSURANCE RATE MAPS See Map Number 3710485300J - Effective Date 3/18/2008.
5) No R/W Agreement found on record for W Memorial Highway 60' Assumed R/W shown.
6) Subject and Adjoining Property Zoning - RA Setbacks per Iredell County Land Development Code Front - 35', Rear - 35', & Side - 15'
7) Total Area = 5.830 Acres
8) All Lots shall have a 10' Drainage and Utility Easement along all sides.
I, Thomas E. Williams, certify that this plat was drawn under my supervision from an actual survey made under my supervision (deed description recorded in Book 2754, Page 42, or other reference source AS NOTED); that the boundaries not surveyed are shown as broken lines drawn from information found in adjoining deeds and plats as noted; that the ratio of precision is 1 : 10,000+; and that this plat was prepared in accordance with G.S. 47-30 as amended and meets the requirements of The Standards of Practice for Land Surveying in North Carolina according to North Carolina Administrative Code Title 21, Chapter 56, Section 1600.
I hereby certify that this survey is of another category, such as the recombination of existing parcels, a court-ordered survey, or other exemption or exception to the definition of subdivision.
Witness my original signature, registration number and seal this 8th day of August, 2023.
Thomas E. Williams, NCPLS 4718
NORTH CAROLINA PROFESSIONAL SEAL L-4718 LAND SURVEYOR THOMAS E. WILLIAMS
#4853-20-2444
Now or Formerly
Timothy S. Gunter
DB 2398 PG 1551
Dorsey Allen Styers Property
Lot 1
Plat Book 53 Page 132
N07°23'48"E 263.19'
S57°17'23"E 23.10'
N07°23'48"E 10.00'
S57°17'23"E 74.40'
RCP
0.148 ACRE IN R/W
S64°57'58"E 100.18'
S57°17'23"E 45.91'
CB
EIP
NC HWY 901
W. MEMORIAL HIGHWAY
60' PUBLIC R/W
TIE LINE
N09°16'47"W
344.40'
63.91'
N78°45'20"W
EX. 1-1/2" PIPE
WITH ELBOW
AT FENCE CORNER
S57°16'20"E
286.02'
NCGS MONUMENT
"DORSEY"
N 830,188.94'
E 1,452,917.05'
NAD 83 (2011)
LEGEND
PROPERTY LINE (P/L)
RIGHT OF WAY (R/W)
TIE LINE
ADJOINING PROPERTY LINE FROM DEED OR PLAT
EX EXISTING
EIP EX #4 REBAR
SIP SET #4 REBAR
PP POWER POLE
CMP CORRUGATED METAL PIPE
RCP REINFORCED CONCRETE PIPE
CB CATCH BASIN
Old Property Line
LOT 2
DORSEY ALLEN STYERS
PB 69-108
TIMOTHY S GUNTER
DB 2675-1581
LOT 3
DORSEY ALLEN STYERS
PB 72-138
TIMOTHY S GUNTER
DB 2754-42
CB
CMP
EIP
CMP
N07°07'42"E 437.61'
Revised Lot 2
Total Area
5.830 ACRES
N
PB 69-132
EIP
S57°08'14"W 96.85'
#4852-19-9772
Now or Formerly
Parks A Wooten, Jr.
Deborah W Burton
DB 2611 PG 928
N07°07'42"E 218.00'
#4852-29-8785
Now or Formerly
Dorsey A Styers
DB 1252 PG 1756
POND
EX CUT STONE
AT FENCE CORNER
S04°50'
N70°19'29"W
#4852-29-9146
Now or Formerly
Parks A Wooten, Jr.
Deborah W Burton
DB 2611 PG 928
EIP
620.25'
N70°19'29"W
EX CUT STONE
AT FENCE CORNER
50 0 50 100
SCALE: 1" = 50'
File: TW\IS\GUNTER
State of North Carolina
County of Iredell
I, _____, Review Officer of Iredell County, certify that the map or plat to which this certification is affixed meets all statutory requirements for recording.
Date
Review Officer
Certificate of Approval for Recording
I hereby certify that this plat for recordation is an exception to the Subdivision Ordinance of Iredell County, North Carolina.
Date
Subdivision Administrator
Owner Certificate
Know all men by these presents, that I hereby certify that I am the owner of the property shown and described hereon and that I hereby acknowledge this plat and allotment to be my free act and deed.
Timothy S. Gunter
Date
State of North Carolina
County of _____
I, _____, a Notary Public of the County and State Aforesaid, Certify that Timothy S. Gunter did personally appear before me this Day and Acknowledged the Execution of the Foregoing Instrument. Witness my Hand and Official Stamp and Seal.
This _____ Day of _____, 2023.
Notary Public: _____
My Commission Expires: ____/____/____
Recombination Plat for
Lot 2 and Lot 3
Dorsey Allen Styers Property
Union Grove Township, Iredell County, NC
Scale 1"= 50' - Date of Survey, October 6th, 2020
Current Owner: Parcel #4853-20-4028
Timothy S Gunter, PO Box 188 Union Grove, NC 28689
Lot 2 of Dorsey Allen Styers Property
Plat Book 69 Page 108, Deed Book 2675, Page 1581
Current Owners: Parcel #4853-20-6014
Timothy S Gunter, PO Box 188 Union Grove, NC 28689
Lot 3 of Dorsey Allen Styers Property
Plat Book 72 Page 138, Deed Book 2754, Page 42
PIEDMONT DESIGN ASSOCIATES, P.A.
ENGINEERING - SURVEYING - PLANNING
Suite 101 Foxfield Center, 125 E. Plaza Dr, Mooresville, N.C. 28115
Phone (704) 664-7888 Fax (704) 664-1778
Corporate License #C-1007