IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 25515 1.00

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

PIN # 4871423330

APPLICANT/OWNER: Ricky Driver — APPLICANT ADDRESS: 107 Tranquility Ln Harmony — PHONE: 704-902-5435 — ALT. PHONE —

SITE ADDRESS: 107 Tranquility Ln, Harmony

SITE DIRECTIONS: 21N → L on Little Wilkesboro Rd → R on Rabbit Hwy → Lon Tranquility → on right

SUBDIVISION: Harmony County Estates — SECTION: P2 — LOT # 33 — LOT AREA: .579 ac

SAP CONTROLLED: ☐ YES ☒ NO — DESIGN FLOW: 360 gpd — L.T.A.R.: .3

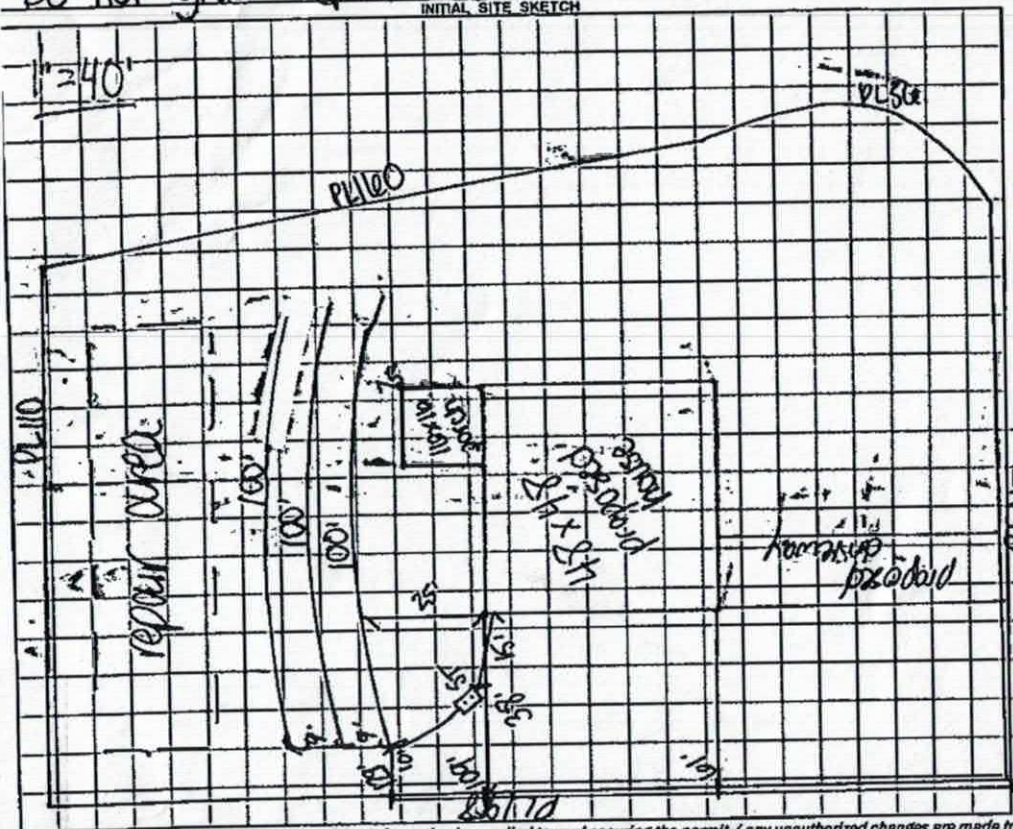
Septic Tank	1000 (gal)	STB	760	Date	1-1-18	☒ New System	☐ Repair	☐ Expansion	System Type: I II (II) IV V VI
Pump Tank	(gal)	PT		Date		System Description:	25% reduction		
Pump Make		Model		Serial #		Repair System Description:	50% reduction		
# Nitrification Fields	1	# Lines	3	Linear Ft	300	Maintenance Agreement Required:	☐ YES	☒ NO	
Trench Width	36"	Trench Bottom Depth(Low side)	35"	Gravel Depth	—		☒ GRAVITY	☐ PRESSURE	

☒ Residence	No. Bedrooms	3	Water Supply
☐ Business	No. Persons	10	☐ Private
☐ Other	No. Employees		☒ Public
☐ Slab	☒ Crawl Space		☐ Community
☐ Basement w/ plumbing			☐ Basement w/o plumbing

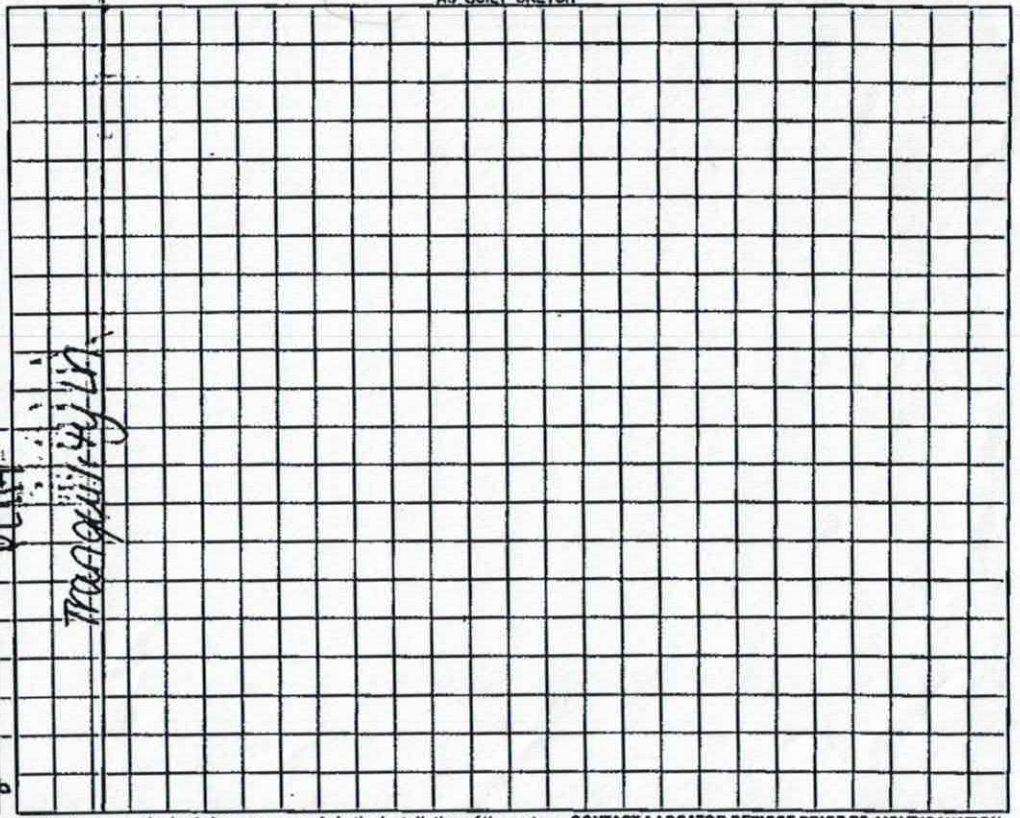
Comments / Conditions: Install on contour - utilize serial distribution. Maintain 5' setback off porch and 10' setback from foundation. Do not grade septic area.

Left from ST to House Corner
29ft from house to drainline
Installed Quick 4

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: Ricky Driver — Date: 5-31-18 — Installed by: Ground Breakers

IMPROVEMENT PERMIT by: Carla C. Cave — Date: 5/4/18 — OPERATION PERMIT by: Maria Nelson — Date: 9/10/18

AUTHORIZATION TO CONSTRUCT by: Carla C. Cave — Date: 5/29/18 — Existing System Inspected by: — Date:

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.

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

Sheet 1 of 1
PROPERTY ID #: 4714233330
COUNTY: Iredell

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

OWNER: Ricky Driver — APPLICATION DATE: 4/24/18
ADDRESS: 107 Tranquility Ln — DATE EVALUATED: 5/4/18
PROPOSED FACILITY: SBR — PROPOSED DESIGN FLOW (.1949): 3100 gpd — PROPERTY SIZE: 1.57 ac
LOCATION OF SITE: 107 Tranquility Ln Harmony — 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	LSS 2%	0-9	SBK SCL	FR SS SP SPP	N/A	48"	N/A	N/A	PS .3
		9-29	SBK C	" "					
		29-48	WSBK CL	" "					
2	LSS 3%	0-9	SBK SCL	FR SS SP SPP	com sap inc	48"	N/A	N/A	PS .3
		9-24	SBK C	" "					
		24-48	WSBK CL	" "					
3	LSS 2%	0-9	SBK SCL	FR SS SP SPP	few sap inc	48"	N/A	N/A	PS .3
		9-30	SBK C	" "					
		30-48	WSBK CL	" "					
4	LSS 3%	0-10	SBK SCL	FR SS SP SPP	com sap inc	49"	N/A	N/A	PS .3
		10-32	SBK C	" "					
		32-49	WSBK CL	" "					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	300'	200'
System Type(s)	25% red	50% red
Site LTAR	.3	.3

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

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		
	IV	SC (Sandy Clay) SiC (Silty Clay) C (Clay)	0.4 - 0.1	0.2 - 0.05		
		O (Organic)	None	None		

MOIST	WET
VFR (Very Friable)	NS (Non-sticky)
FR (Friable)	SS (Slightly Sticky)
FI (Firm)	S (Sticky)
VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
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.

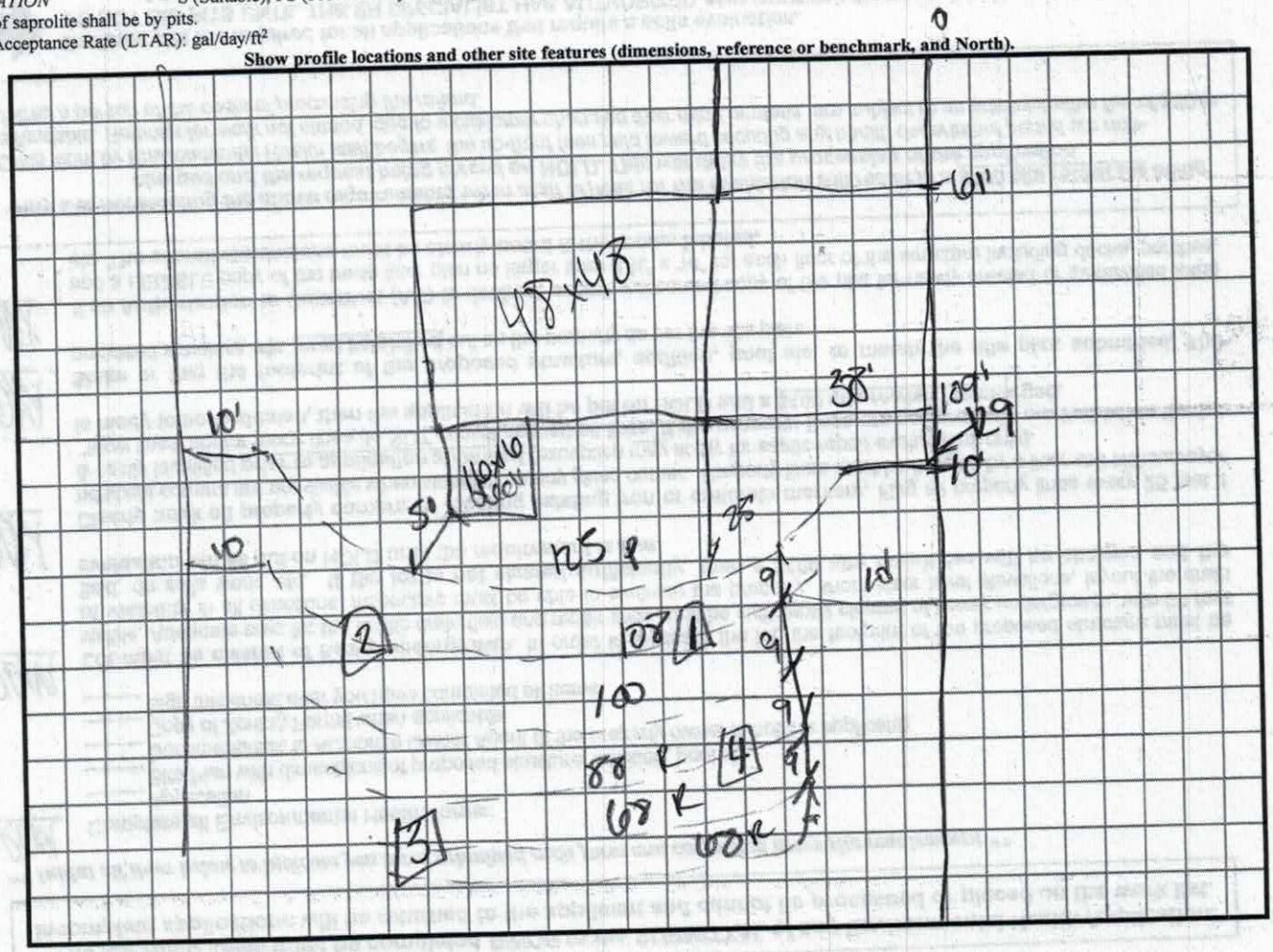
NOTES

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/ft²

Show profile locations and other site features (dimensions, reference or benchmark, and North).



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: RICKY DRIVER Address: 107 TRANQUILITY LN HARMONY NC Zip: 28634

Applicant Email: rickydriver@yahoo.com Phone: 704-902-5435 Alt. Phone: _____

Owner Name: WILLIAM & CHERYL MUNDY Address: PO Box 791 MOCKSVILLE NC Zip: 27028

Owner Email: _____ Phone: 336-492-7634 Alt. Phone: 336-403-9772

Property Information: Friday 9:30

Street Address: 106 TRANQUILITY LN HARMONY NC 28634

Subdivision Name: HARMONY COUNTRY ESTATES Section/Phase: _____ Lot Number: 33

Driving Directions: HEAD (NORTH) ON HWY 21, MAKE (LEFT) ONTO LITTLE WILKESBORO RD, MAKE (RIGHT) ONTO RABBIT HWY, MAKE (LEFT) ONTO TRANQUILITY LN, PROPERTY IS ON THE (RIGHT)

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

CHECK FOUNDATION TYPE

(✓) New Single Family Residence — Maximum Number of Bedrooms: 3 — (✓) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: 4 — ( ) Concrete Slab Foundation
( ) Accessory Building — ( ) Swimming Pool — ( ) Basement with Plumbing
( ) Bedroom(s) Addition — ( ) Other Addition/Structure: _____ — ( ) Basement without Plumbing
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____
Non-Residential Site Development: Type of Business: _____
Square Footage of Building: _____ Max. Number of Employees: _____ Max. Number of Seats/Beds/Other: _____

Water Supply: ( ) Replacement Well – Reason: _____
( ) Multi-connection Well Number of Houses: 3 Number of Persons: 5

( ) 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: Ricky Driver 4-24-18
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

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.

I, William D & Cheryl S. MUNDY am the legal owner(s) of the property located at 106 TRANQUILITY LN HARMONY NC 28634, identified as PIN (Parcel Identification Number) 4571423330.000, located in Iredell County, North Carolina.

William D Mundy 4-23-18
Signature of Owner(s) Date

Cheryl S. Mundy 4-23-18

I do hereby authorize (print legal representative/company name) RICKY DRIVER, 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.

Please return this signed form to the appropriate office:

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

704-878-3171
Stephani

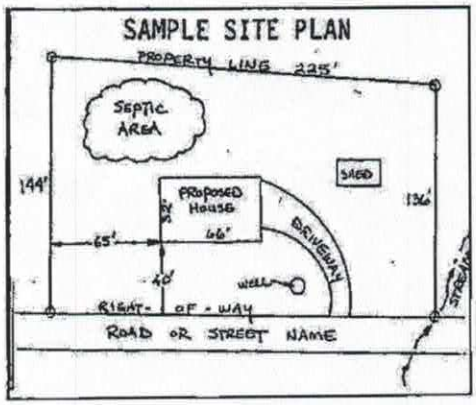
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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
- (X) Preferred driveway location
- ( ) Preferred well location
- (X) Preferred septic system location
- (X) North arrow, or other sufficient indicator of direction

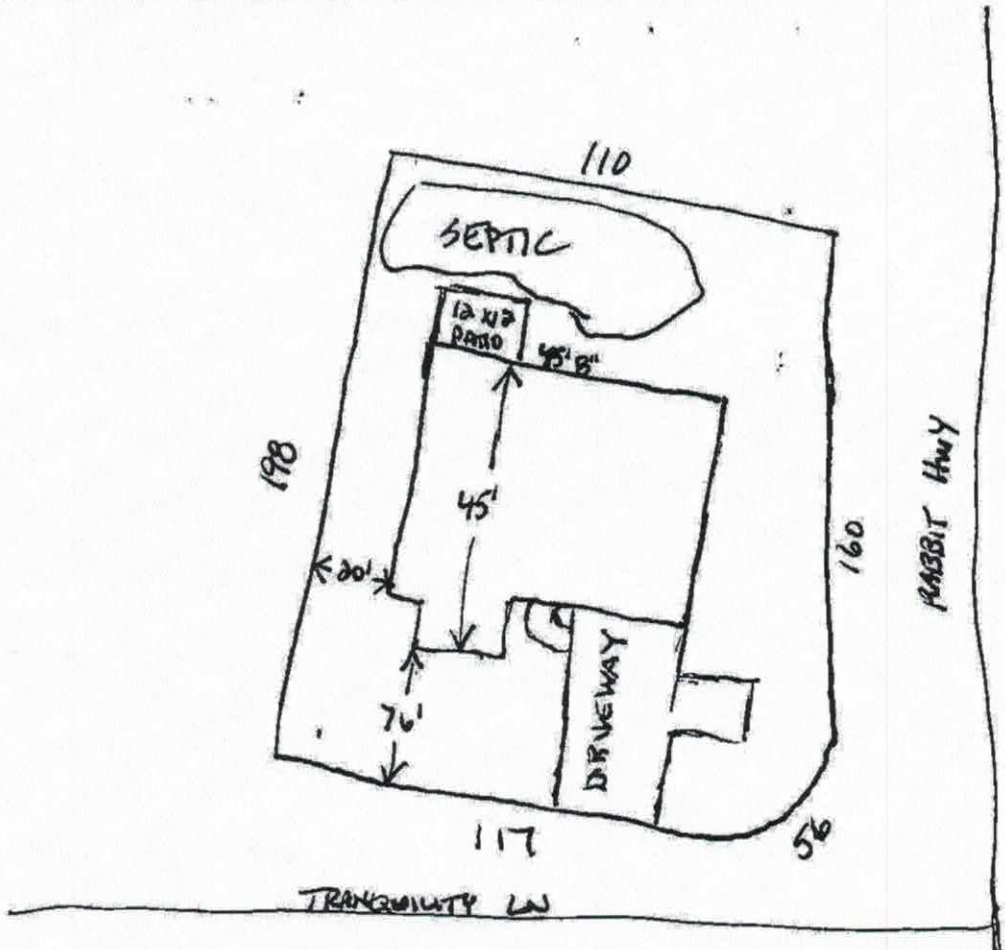


Circle N/A on the following if appropriate:

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

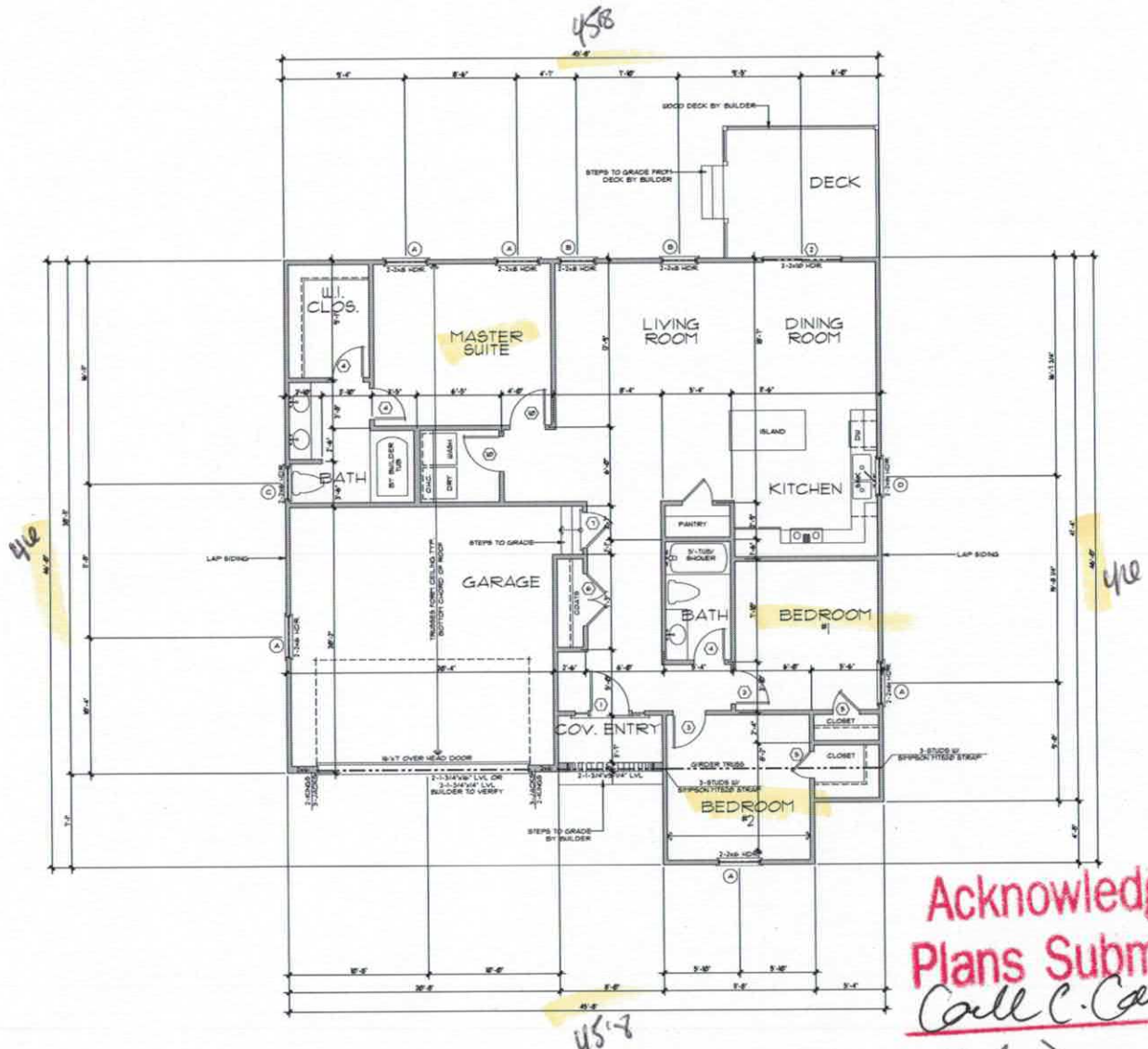
Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site



Signature: Katy Dees **4-24-18**

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

*BUILDER TO VERIFY ALL STRUCTURAL SIZES WITH ENGINEER AS REQUIRED



MAIN FLOOR NOTES

- ALL ANGLED WALLS ARE 45- U.N.O.
- * INDICATES BLOCKING FOR ABOVE CONCENTRATED LOADS AND ROOF BRACING POINT LOADS U.N.O.
- ALL DOORS ARE 6" FROM WALL UNLESS DIMENSIONED OTHERWISE
- TYPICAL SHEATHING TO BE 2' OSB SHEATHING + CORNERS + 25'-8" O.C. U.N.O.

EXTERIOR WALL HEIGHT (h)	STUD SIZE/ SPACING
h ≤ 10'	2x4 @ 16" oc
10' < h ≤ 12'	2x4 @ 12" oc
12' < h ≤ 18'	2x6 @ 16" oc
h > 18'	CONSULT ENG.

GARAGE WALL TO BE 2x6 @ 16" O.C. IF EXCEEDING 10' IN HEIGHT

DOOR SCHEDULE

	SIZE	DESCRIPTION
1	3'-0" x 6'-8"	DOOR W/ SIDELIGHTS (BY BUILDER)
2	6'-0" x 6'-8"	SLIDING UNIT
3	2'-6" x 6'-8"	SOLID DOOR
4	3'-0" x 6'-8"	SOLID DOOR
5	2'-8" x 6'-8"	SOLID DOOR
6	2-2'-8" x 6'-8"	SOLID DOOR
7	2'-8" x 6'-8"	36" PRATT DOOR
8	3'-0" x 6'-8"	DRYWALL OPENING
9	2-1'-0" x 6'-8"	SOLID DOOR
10	2'-8" x 6'-8"	SOLID DOOR

WINDOW SCHEDULE

	SIZE	DESCRIPTION
A	3'-0" x 5'-0"	SINGLE HUNG
B	2'-8" x 5'-0"	SINGLE HUNG
C	2'-0" x 3'-4"	SINGLE HUNG
D	3'-0" x 4'-0"	CASEMENT
E	2-2'-0" x 4'-0"	CASEMENT

Square Footage

4/26/18

Main Level	1,419 SqFt.
Covered Patio	1,419 SqFt.
Covered Entry	35 SqFt.
Garage	416 SqFt.
Total	1,870 SqFt.

MAIN LEVEL FLOOR PLAN

Acknowledgement Of Plans Submittal ONLY

Carl C. Carr Date 5/9/18

Reby Driver Date 5/9/18

DRIVER'S CUSTOM HOMES AND COMMERCIAL CONTRACTING, LLC

Driver Custom Homes

ENGINEER:

PROJECT: RANCH SPEC

DATE: APRIL 26, 2017

SHEET 3 OF 6 SHEETS

IMPORTANT NOTE FOR LIABILITY: THERE HAS BEEN REASONABLE CARE AND PROFESSIONAL SKILL IN PREPARATION AND EXECUTION OF THESE DOCUMENTS BUT NO GUARANTEE OF "PERFECT" DOCUMENTS OR FLAWLESS JUDGEMENT. BUILDER & TRADES MUST CAREFULLY INSPECT ALL DIMENSIONS & DETAILS FOR ACCURACY AND ASSUMES COMPLETE RESPONSIBILITY FOR THEM. ANY DISCREPANCIES SHOULD BE BROUGHT TO THE ATTENTION OF G.C. PRIOR TO CONSTRUCTION.

IREDELL COUNTY

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

APPLICATION NUMBER
235115
Issue Date: 04/27/2018

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4871423330.000	106 TRANQUILITY LANE, HARMONY, NC	HARMONY

Owner Information	Applicant Information
Owner: MUNDY WILLIAM D+CHERYL S	Applicant: RICKY MCKINLEY DRIVER
Address: P O BOX 791	Address: 107 TRANQUILITY LANE
MOCKSVILLE, NC 27028	HARMONY, NC 28634
Phone:	Phone: 704-902-5435

Use Requested	Zone Code
SFD	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.579	35.00	35.00	15.00	25.00	BOWH	X

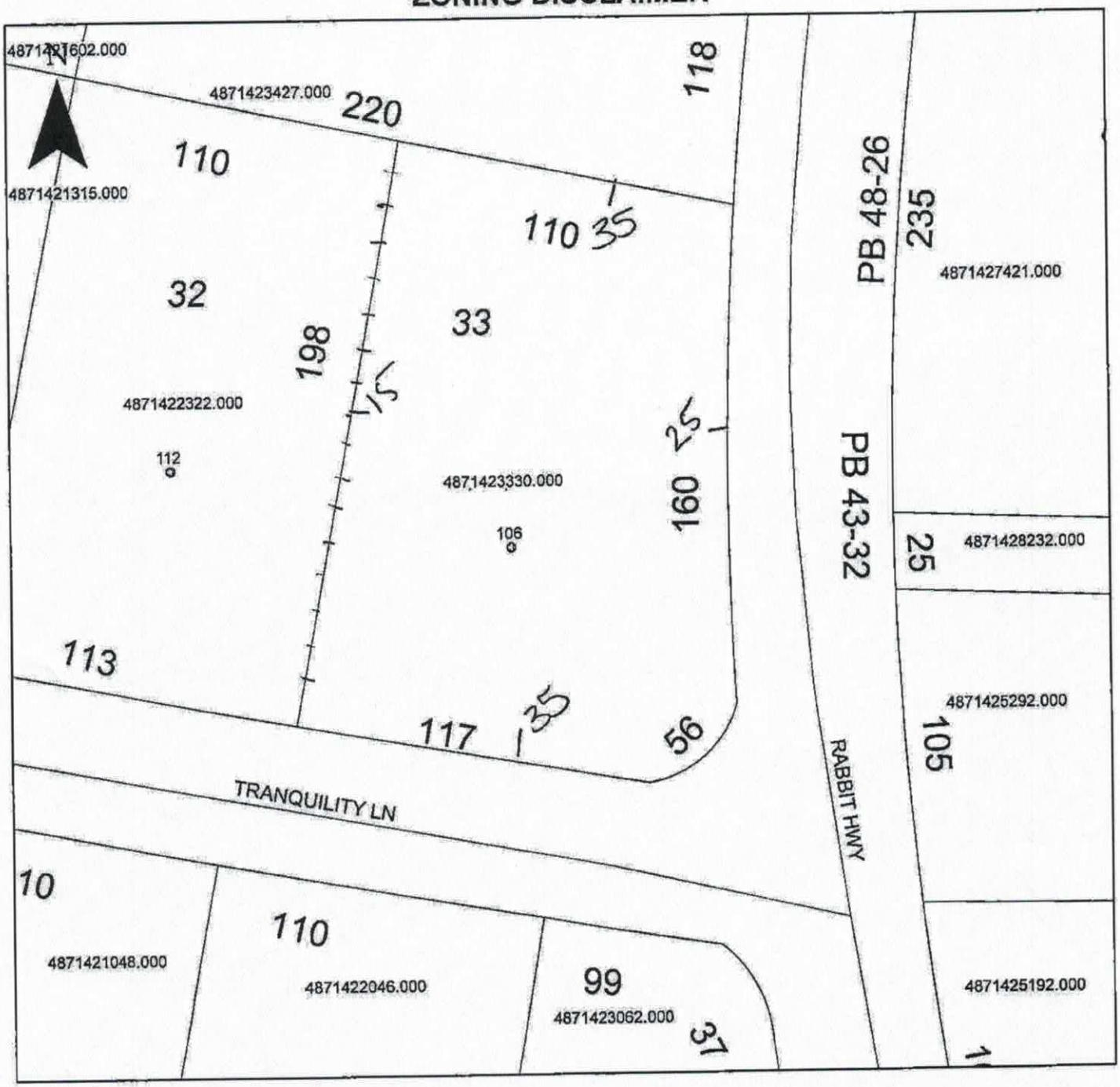
Remarks:

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	137106	TOTAL FEES:	$ 77.25

ZONING DISCLAIMER



Property Address 106 Tranquility

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.

X Rusty Dunn
Applicant

X 4-24-18
Date