IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 229597

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

PIN # 4881315692

APPLICANT/OWNER: Karen Harris APPLICANT ADDRESS: 136 Hayes ST. Harmony NC 28634

SITE ADDRESS: 618 Butler Mill RD Harmony NC 28634 PHONE: 336-671-9953 ALT. PHONE ~

SITE DIRECTIONS: Hwy 21 N to Harmony Turn RT on Butler Mill RD.

SAP CONTROLLED: ☐ YES ☐ NO

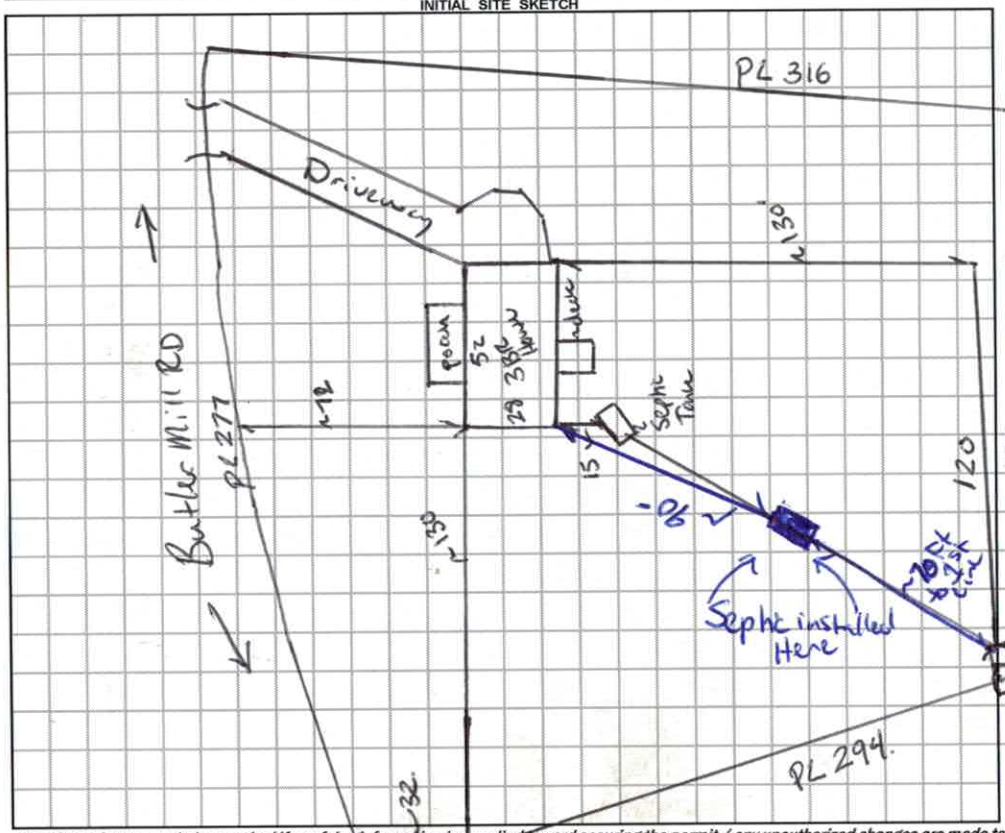
SUBDIVISION: Travis Eugene Ireland SECTION: ~ LOT # -1- LOT AREA: 1.615 Acres. DESIGN FLOW: 360 L.T.A.R.: .25

Septic Tank	1000	(gal)	STB	760-3008	Date	11-21.	☒ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms	3	Water Supply
Pump Tank	~	(gal)	PT	~	Date	~	System Description:	25% Reduction	☐ Business	No. Persons	6	☐ Private
Pump Make	~	Model		~	Serial #	~	Repair System Description:	50% Reduction	☐ Other	No. Employees		☒ Public
# Nitrification Fields	1	# Lines	3		Linear Ft	360	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☒ Crawl Space		☐ Community
Trench Width	36	Trench Bottom Depth(Low side)			32.	Gravel Depth	~	☒ GRAVITY ☐ PRESSURE	☐ Basement w/plumbing		☐ Basement w/o plumbing	

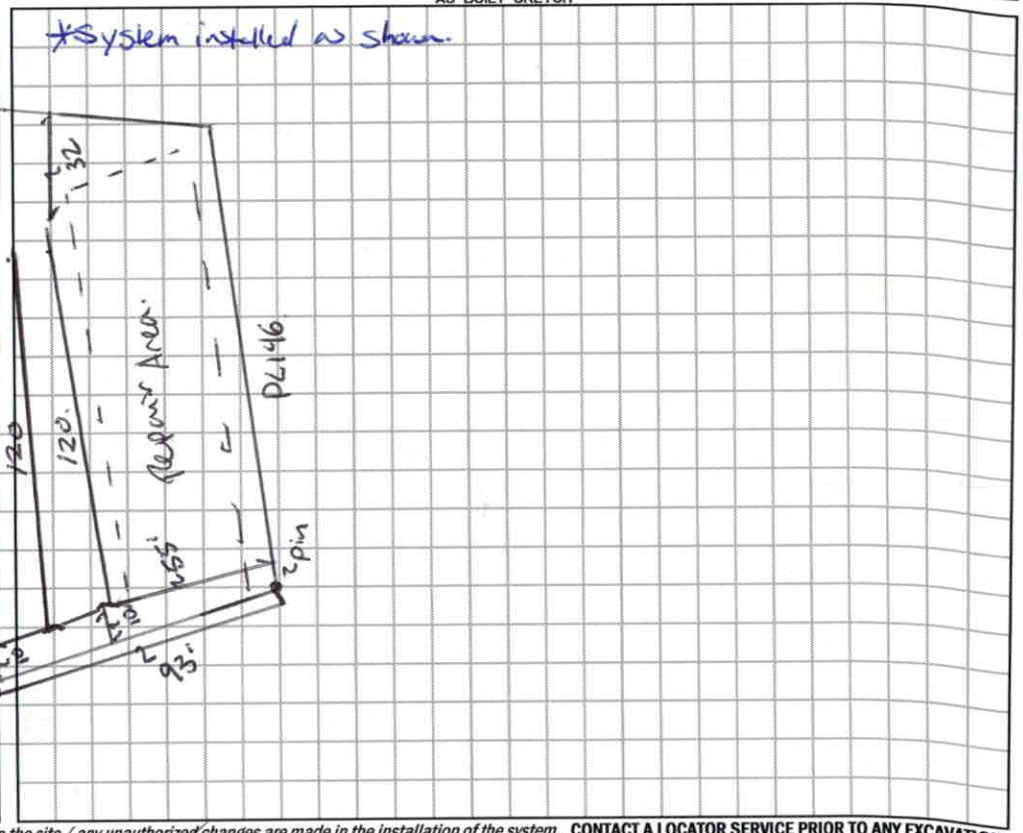
Comments / Conditions: Install Septic drainlines on the contour of the land & utilize Serial distribution. Do not exceed max depth of 32 inches on low side. Do not Drive, park, pave, grade or bury utilities in trench/bed/area.

Septic tank is 90 Ft from corner of house. First drainline is 70 Ft away from Tank.

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: Karen W. Harris Date:

Installed by: Diesel Salmons Grading & Hauling

IMPROVEMENT PERMIT by: Benjamin A. Bottoms Date: 10/13/2017

OPERATION PERMIT by: Benjamin A. Bottoms Date: 2/22/2018.

AUTHORIZATION TO CONSTRUCT by: Benjamin A. Bottoms Date: 10/13/2017.

Existing System Inspected by: Date:

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

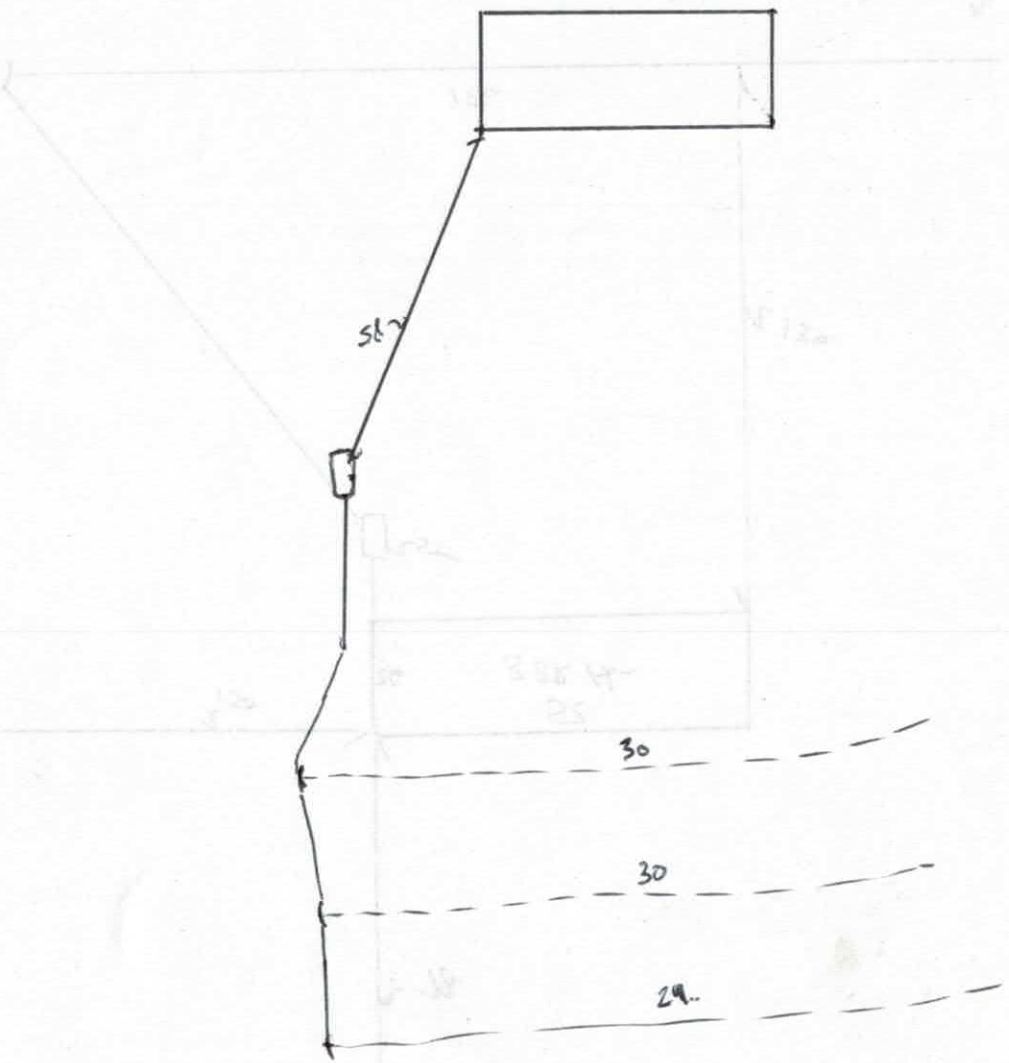
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH
ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

PROPERTY ID #: 4881315692.
DATE OF EVALUATION: —
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	Side 10%	0-5	SCL WSBK	SS SP. FR. SE NP.		48.	Lito mottles.	Mn conc	PS .25 TB-36. Init
		5-28	C SBK moist	SS SP FM SE MP					
		28-48	CL WSBK.	SS SP FR SE NP.					
6.	Side 10%	0-8	SCL WSBK	SS SP FR SE NP.		48	Lito mottles.		PS .25. Init
		8-42	C SBK	SS SP FM SE NP					
		42-48.	CL WSBK	SS SP FR SE NP.					

COMMENTS: _____

55'
pin
75
13
10
10
32'
130'
26
UST
78'
52'
3BR Hm
120'
120'
120'
9'
9'
11'
32'
130'


30
30
29..

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: Karen Harris Address: 136 Hayes St Harmony Zip: 28634
Applicant Email: Katharris777@gmail.com Phone: _____ Alt. Phone: _____
Owner Name: TRAVIS IRELAND Address: 601 Butler Mill Rd Harmony Zip: 28634
Owner Email: _____ Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 618 Butler Mill Rd
Subdivision Name: _____ Section/Phase: _____ Lot Number: _____
Driving Directions: Hwy 21 to Harmony turn Rt on Butler Mill Rd.

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: _____ — ( ) 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: 1300 Max. Number of Employees: ____ Max. Number of Seats/Beds/Other: ____

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: Karen Harris — 08/22/17
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

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, _____, 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.

~~See Attached~~ _____ _____ _____ _____

Signature of Owner(s) Date Signature of Witness Date

Please return this signed form to the appropriate office:

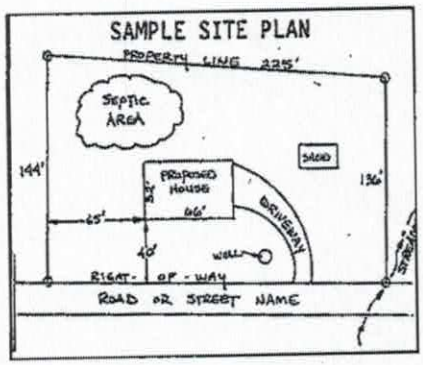
Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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

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:

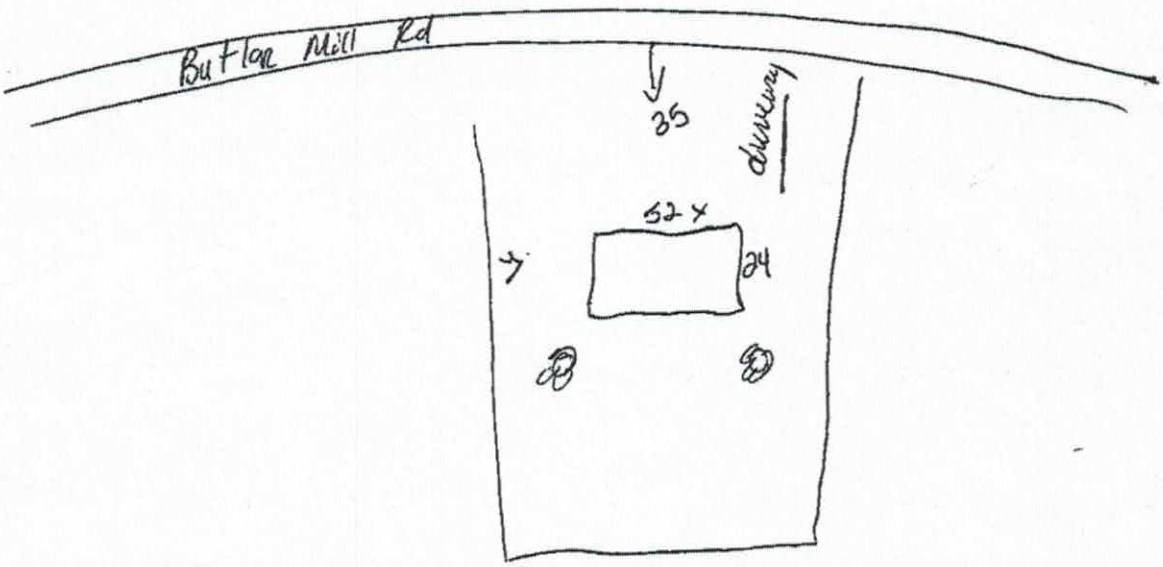
- ( ) Property Line measurements are clearly identified
- ( ) All proposed structures are indicated
- ( ) Front and side setbacks from property line
- ( ) Preferred driveway location
- ( ) Preferred well location
- ( ) Preferred septic system location
- ( ) North arrow, or other sufficient indicator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

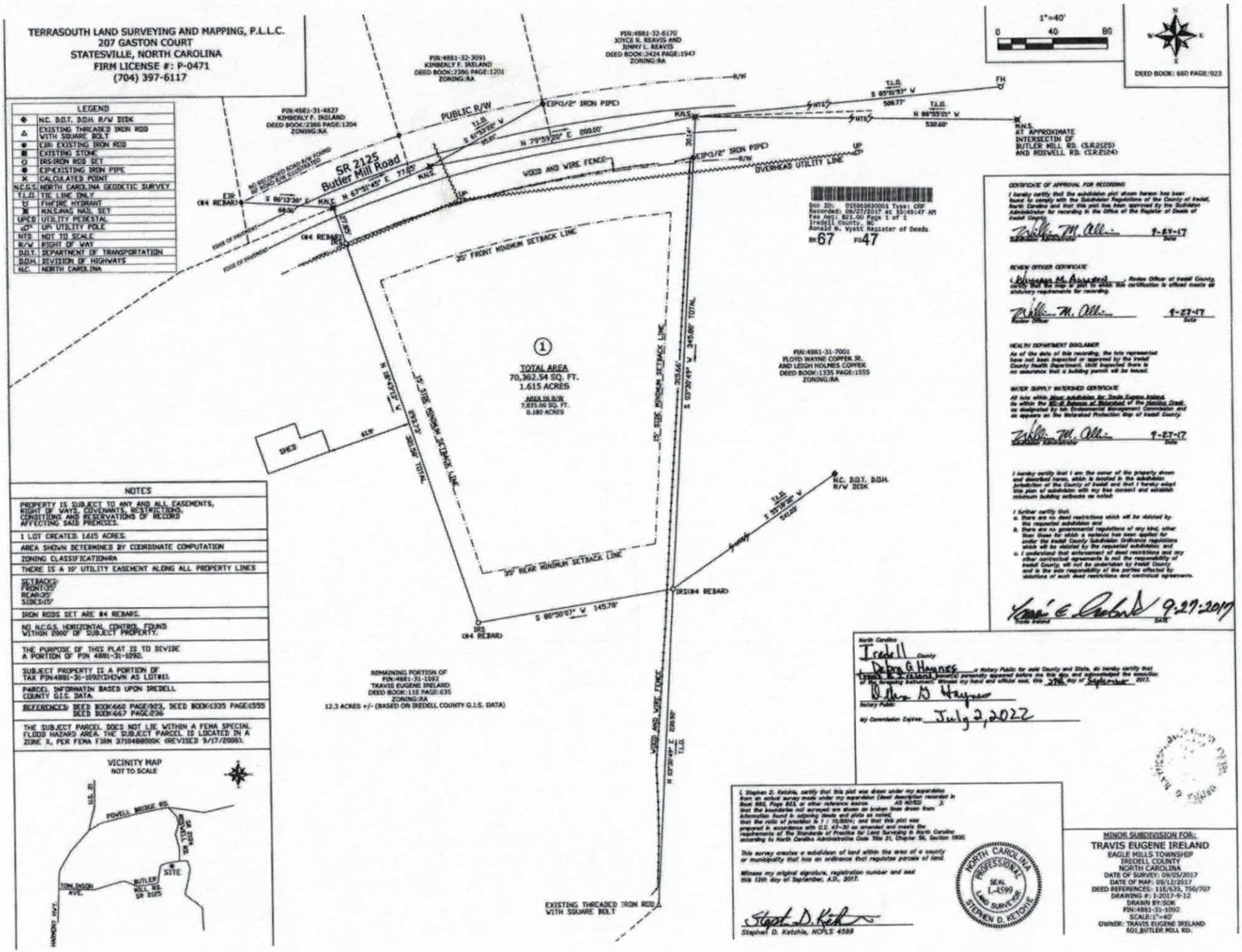


Signature: _____ _____

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

TERRASOUTH LAND SURVEYING AND MAPPING, P.L.L.C.
207 GASTON COURT
STATESVILLE, NORTH CAROLINA
FIRM LICENSE #: P-0471
(704) 397-6117

LEGEND	
⊕	N.C. D.O.T. D.O.H. R/W DISK
△	EXISTING THREADED IRON ROD WITH SQUARE BOLT
●	EIR- EXISTING IRON ROD
■	EXISTING STONE
O	IRS-IRON ROD SET
●	EIP-EXISTING IRON PIPE
X	CALCULATED POINT
N.C.G.S.	NORTH CAROLINA GEODETIC SURVEY
T.L.E.	TIE LINE ONLY
⊡	FIHERE HYDRANT
⊠	MAG&WAS NAIL SET
UPED	UTILITY PEDESTAL
⊂UP	UPL UTILITY POLE
NTS	NOT TO SCALE
R/W	RIGHT OF WAY
D.O.T.	DEPARTMENT OF TRANSPORTATION
D.O.H.	DIVISION OF HIGHWAYS
N.C.	NORTH CAROLINA



NOTES
PROPERTY IS SUBJECT TO ANY AND ALL EASEMENTS, RIGHT OF WAYS, COVENANTS, RESTRICTIONS, CONDITIONS AND RESERVATIONS OF RECORD AFFECTING SAID PREMISES.
1 LOT CREATED. 1.615 ACRES.
AREA SHOWN DETERMINED BY COORDINATE COMPUTATION
ZONING CLASSIFICATION:RA
THERE IS A 10' UTILITY EASEMENT ALONG ALL PROPERTY LINES
SETBACKS: FRONT:35' REAR:35' SIDE:15'
IRON RODS SET ARE #4 REBARS.
NO N.C.G.S. HORIZONTAL CONTROL FOUND WITHIN 2000' OF SUBJECT PROPERTY.
THE PURPOSE OF THIS PLAT IS TO DIVIDE A PORTION OF PIN 4881-31-1092.
SUBJECT PROPERTY IS A PORTION OF TAX PIN:4881-31-1092(SHOWN AS LOT#1).
PARCEL INFORMATIN BASED UPON IREDELL COUNTY G.I.S. DATA.
REFERENCES: DEED BOOK:660 PAGE:923, DEED BOOK:1335 PAGE:1555 DEED BOOK:667 PAGE:236
THE SUBJECT PARCEL DOES NOT LIE WITHIN A FEMA SPECIAL FLOOD HAZARD AREA. THE SUBJECT PARCEL IS LOCATED IN A ZONE X, PER FEMA FIRM 3710480000K (REVISED 9/17/2006).

VICINITY MAP
NOT TO SCALE

North Carolina
Iredell County
I, Debra G Haynes a Notary Public for said County and State, do hereby certify that Travis E. Ireland personally appeared before me this day, and acknowledged the execution of the foregoing instrument. Witness my hand and official seal, this 27th day of September 2017.
Debra G Haynes
Notary Public
My Commission Expires: July 2, 2022

I, Stephen D. Ketchie, certify that this plat was drawn under my supervision from an actual survey made under my supervision (deed description recorded in Book 660, Page 923, 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 (adopting to North Carolina Administrative Code Title 21, Chapter 56, Section 1600.

This survey creates a subdivision of land within the area of a county or municipality that has an ordinance that regulates parcels of land.

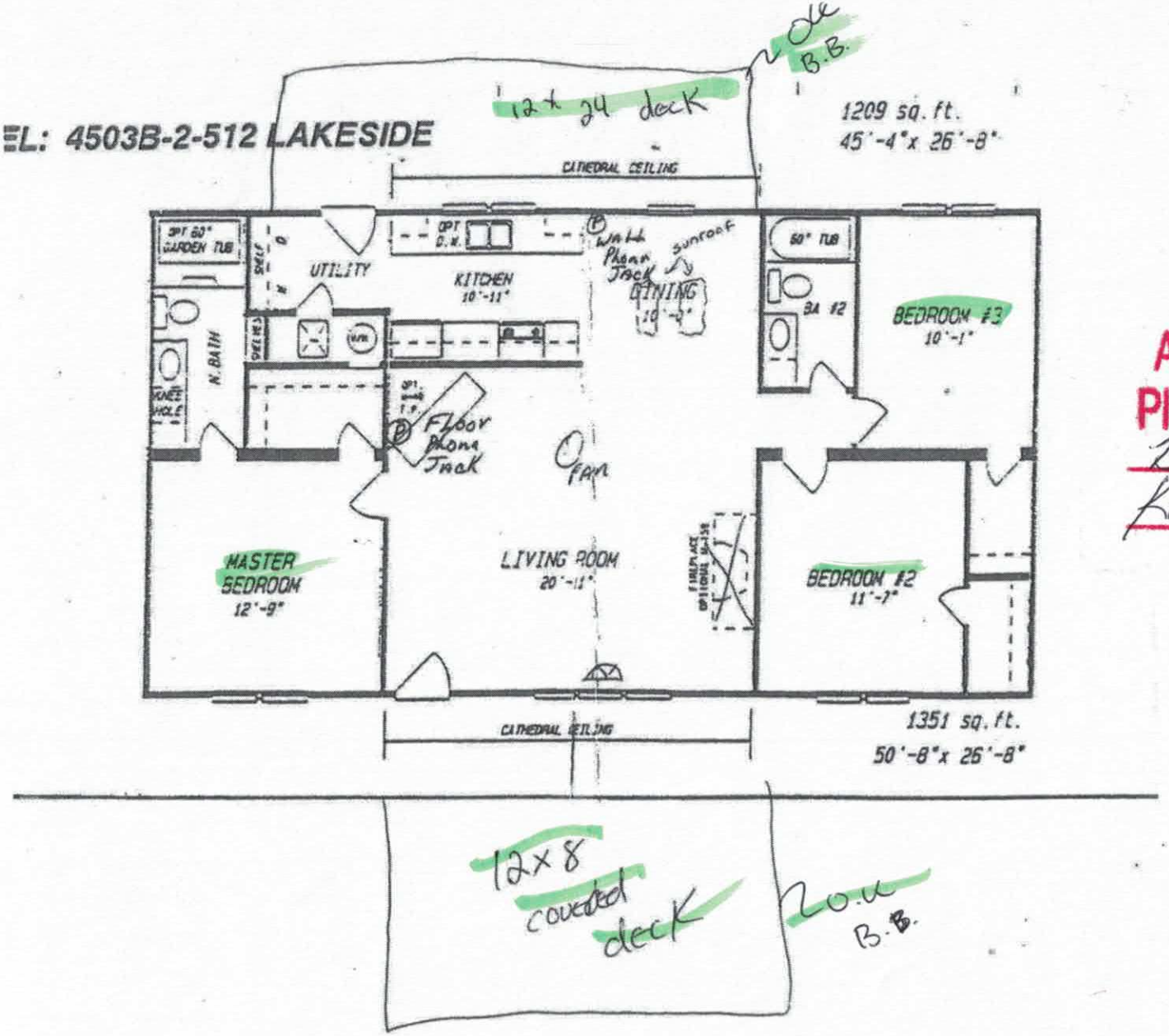
Witness my original signature, registration number and seal this 12th day of September, A.D., 2017.

Stephen D. Ketchie, NCPLS 4599

NORTH CAROLINA PROFESSIONAL SEAL L-4599 LAND SURVEYOR STEPHEN D. KETCHIE

MINOR SUBDIVISION FOR:
TRAVIS EUGENE IRELAND
EAGLE MILLS TOWNSHIP
IREDELL COUNTY
NORTH CAROLINA
DATE OF SURVEY: 09/05/2017
DATE OF MAP: 09/12/2017
DEED REFERENCES: 118/635, 750/707
DRAWING #: I-2017-9-12
DRAWN BY: SDK
PIN:4881-31-1092
SCALE:1"=40'
OWNER: TRAVIS EUGENE IRELAND
601 BUTLER MILL RD.

EL: 4503B-2-512 LAKESIDE



Width 27'5"
Length 51'5"
Ht 12'8"

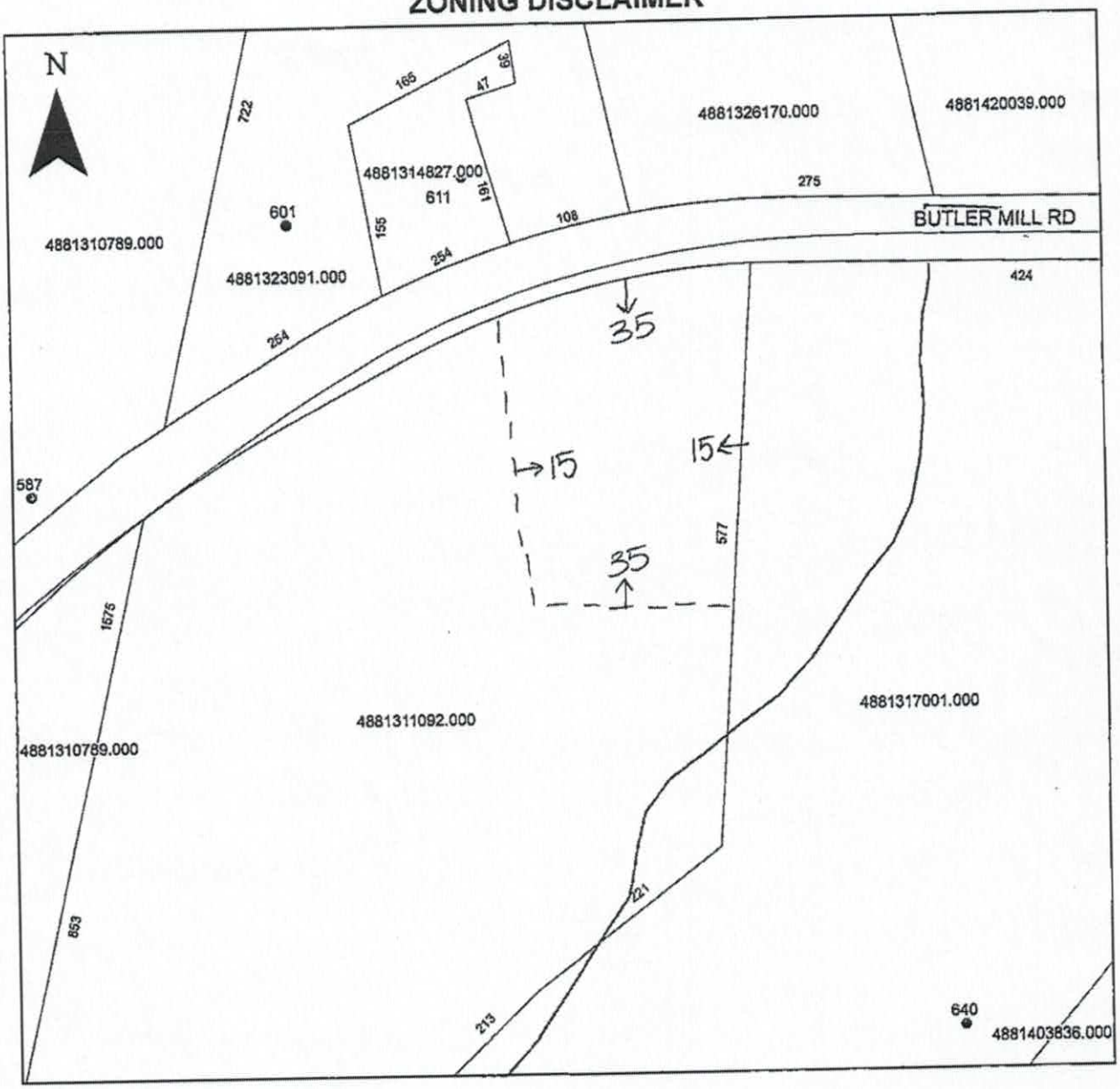
Acknowledgement Of Plans Submittal ONLY!

~~Benjamin A Botts~~ Date 10/13/17

~~Karen W. Harris~~ Date 10/19/17

Karen Harris

ZONING DISCLAIMER



Property Address Butler Mill Rd

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.

Karen Harris
Applicant

08/22/17
Date