

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305

Moorestville Office (704) 660-3625

PERMIT #

AP 327214

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

PIN # 41014

--97--9043

APPLICANT/OWNER: Allison Hartley

APPLICANT ADDRESS: 1516 Binns Rd, Mooresville NC 28117

SITE ADDRESS: 1516 Binns Rd, Mooresville NC 28117

PHONE: 704-728-67105

ALT. PHONE

SITE DIRECTIONS: W Brasley School Rd -> R Tuskarora -> R Binns -> lot on R

SAP CONTROLLED:

YES NO

SUBDIVISION: Leonard & Bealer Family Trust SECTION: w/k LOT # 2 LOT AREA: 1.00 ac

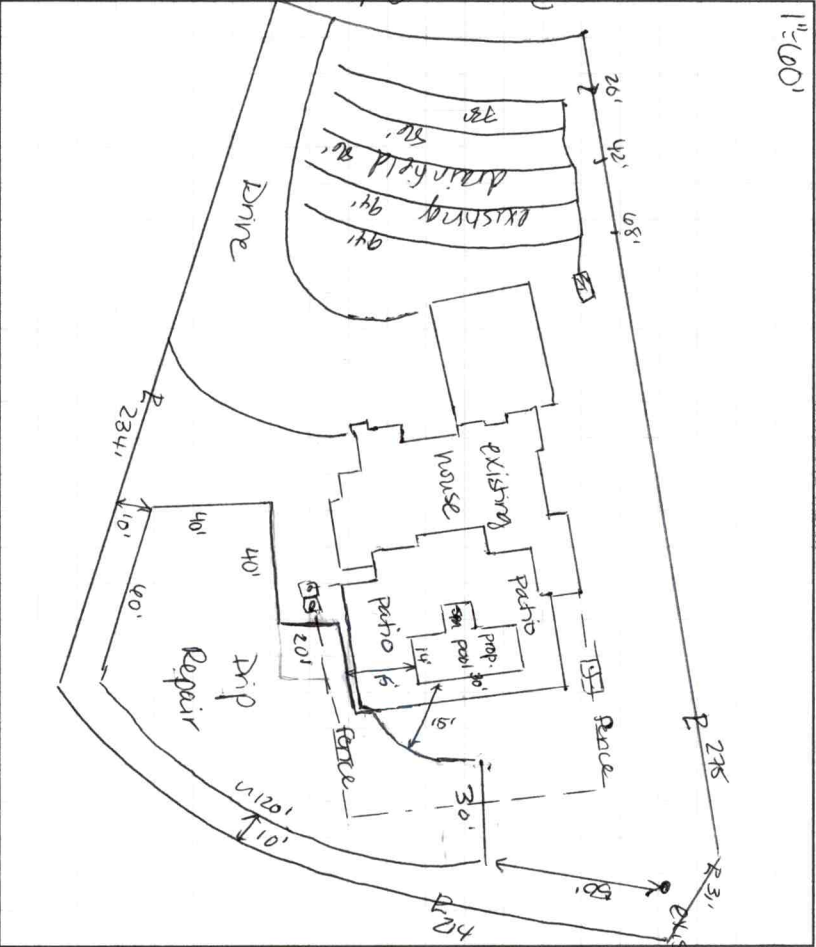
DESIGN FLOW: 480

L.T.A.R.: 0.275/0.1

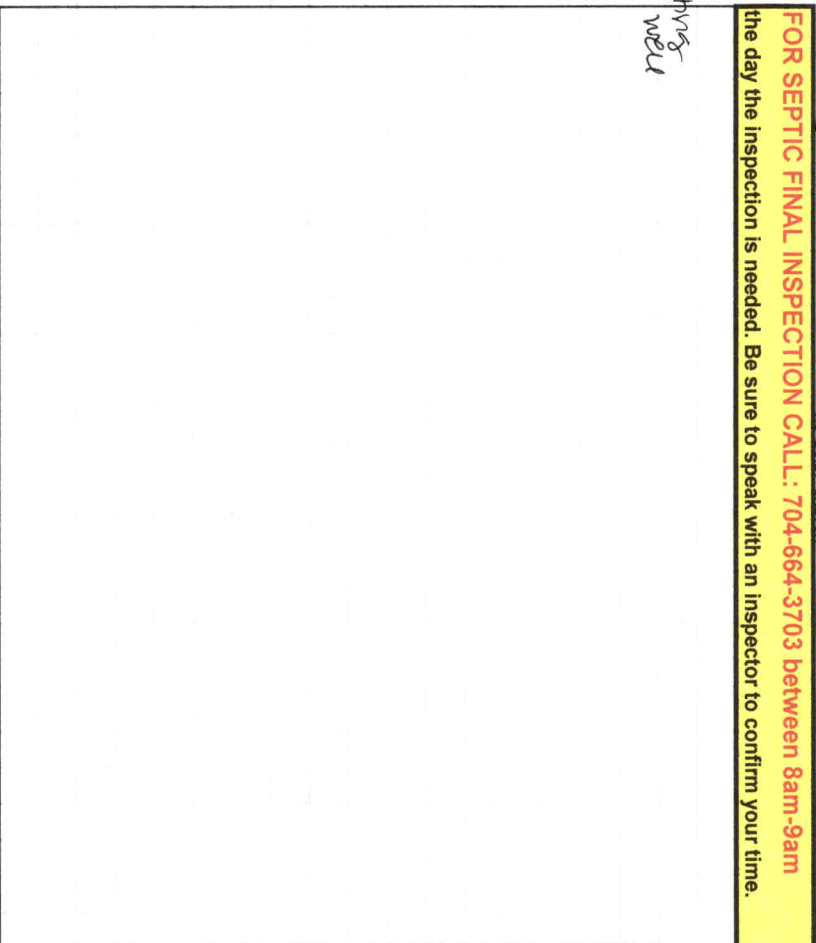
Septic Tank	1000 (gal)	STB T21012	Date	3/31/21	<input type="checkbox"/> New System	<input type="checkbox"/> Repair	<input type="checkbox"/> Expansion	System Type: I II III IV V VI	<input checked="" type="checkbox"/> Residence	No. Bedrooms	4	<input checked="" type="checkbox"/> Water Supply
Pump Tank		PT	Date		<input type="checkbox"/> System Description:	<input type="checkbox"/> Repair	<input type="checkbox"/> Expansion	System Type: I II III IV V VI	<input type="checkbox"/> Business	No. Persons	8	<input checked="" type="checkbox"/> Private
Pump Make		Model	Serial #		EXISTING 354p	<input type="checkbox"/> Repair	<input type="checkbox"/> Expansion	System Type: I II III IV V VI	<input type="checkbox"/> Other	No. Employees		<input type="checkbox"/> Public
# Nitrification Fields		# Lines	Linear Ft.		DNO-4800 ft2	<input type="checkbox"/> Repair	<input type="checkbox"/> Expansion	System Type: I II III IV V VI	<input type="checkbox"/> Slab	No. Crawlspace		<input type="checkbox"/> Community
Trench Width		Trench Bottom Depth (w/allow silt)	Gravel Depth	N/A	Maintenance Agreement Required:	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> Pressure	<input type="checkbox"/> Basement w/plumbing	<input type="checkbox"/> Basement w/o plumbing		

Comments / Conditions: The purpose of this permit is to redesignate the repair area for the installation of a pool.

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.

Use extreme caution installing fence & pouring patio - repair area must be preserved, usable soil is very shallow

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

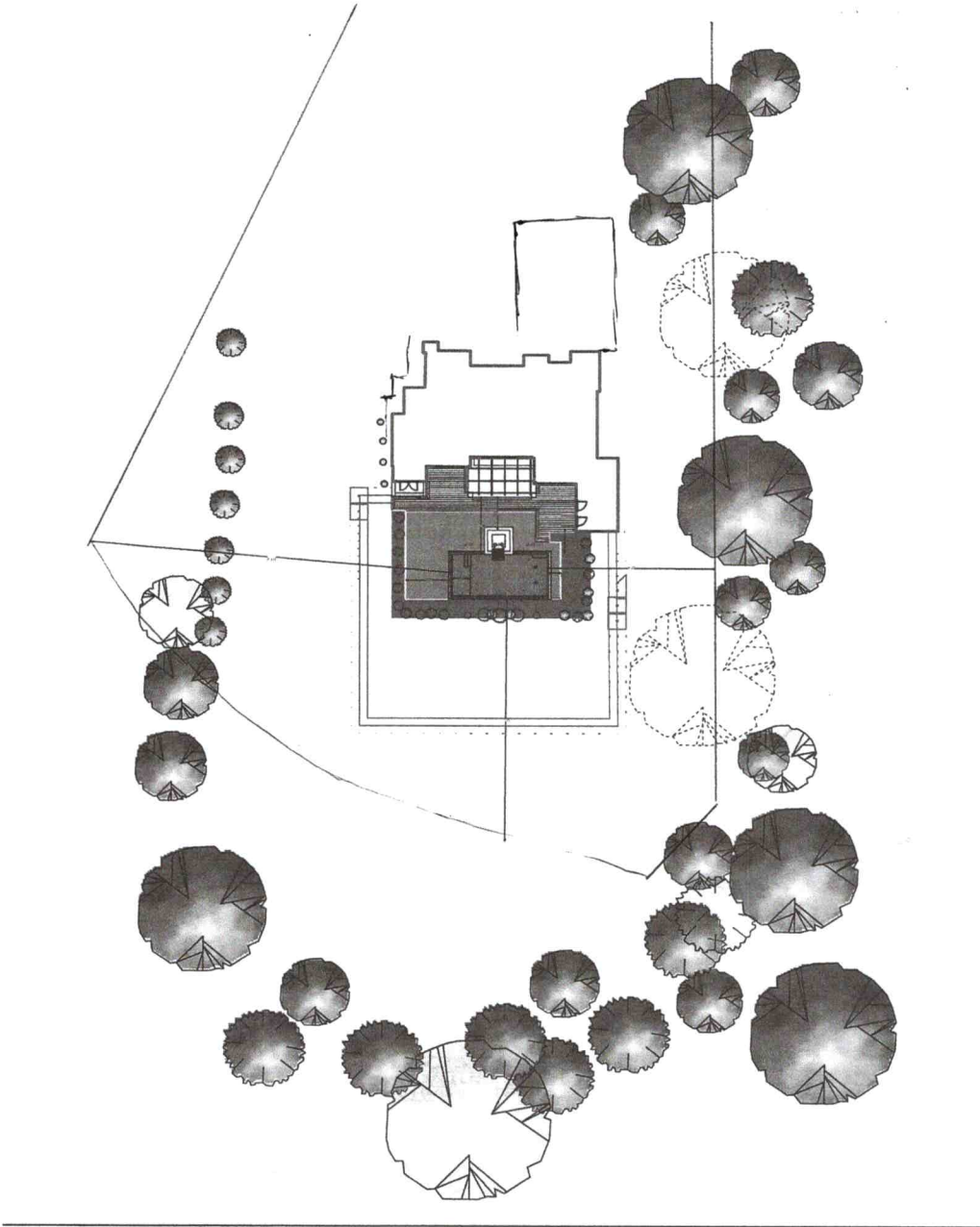
IMPROVEMENT PERMIT with plat valid without expiration. IMPROVEMENT PERMIT with site plan valid for 60 mos. AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT - not to exceed 60 mo.

Owner / Applicant Signature: Allison Hartley Date: 6.16.22 Installed by: Steve Jordan - Piedmont Backhoe

IMPROVEMENT PERMIT BY: D. Nieberg Date: 6/9/22 OPERATION PERMIT BY: D. Nieberg Date: 6/9/22

AUTHORIZATION TO CONSTRUCT BY: D. Nieberg Date: 6/9/22 Existing System Inspected by: D. Nieberg Date: 6/9/22

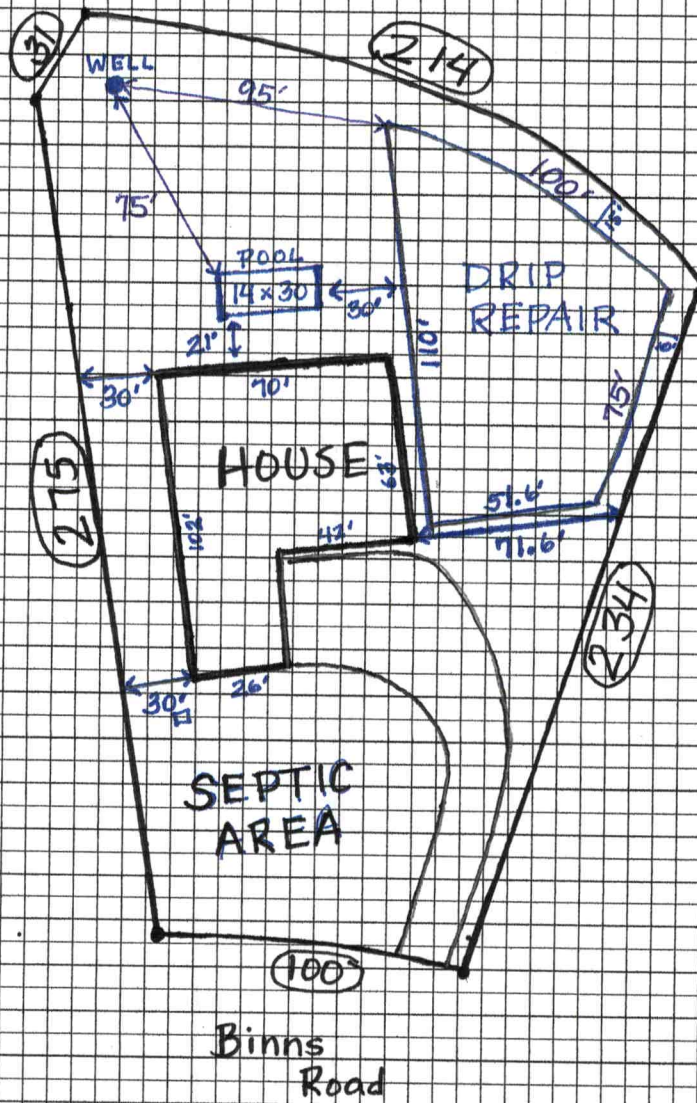
FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.



156 BINNS ROAD

5.20.2022

1/8" Graph Paper





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) Allison J. Hartley

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, Allison Hartley, am the legal owner(s) of the property located at 156 Binns Rd, Mooresville, NC 28117, identified as

PIN (Parcel Identification Number) 4614-97-9043-000, 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.

Allison Hartley
Signature of Owner(s)

5-20-2022
Date

Mooresville - Environmental Health
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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

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:

- ASH Application
- ASH Site Plan including the dimensions of proposed structure, addition, pool etc.
- ASH Documentation to Authorize Owner Agent (even if the property owner is the applicant – complete section 1 or 2)
- Copy of Zoning Permit when applicable
- ASH Sign this sheet after you have completed all items

ASH **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.**

ASH **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 revisit fee charged.**

ASH **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.

ASH **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 1/2" 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 nonrefundable. 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.

- ASH ✓ **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

Allison Hartley

Date 5-20-2022

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

Mooreville Office

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

**APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE
OR IT WILL NOT BE PROCESSED**

Iredell County Health Department – Environmental Health Division

PAGE 1: APPLICATION FORM

AP- 327214 \$500.00

M
DW
Relocation-Repair Area

- 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: Allison Hartley Address: 156 Binns Road Zip: 28117
 Applicant Email: ashart2001@yahoo.com Phone: 704.728.6765 Alt. Phone: _____
 Owner Name: Chris and Allison Hartley Address: 156 Binns Road Zip: 28117
 Owner Email: ashart2001@yahoo.com Phone: 704.728.6765 Alt. Phone: _____

Property Information:

Street Address: 156 Binns Road, Mooresville NC 28117
 Subdivision Name: N/A Section/Phase: _____ Lot Number: 2
 Driving Directions: South on I-77, West on Brawley School Rd, Rt on
Tuskarora Trail, Rt on Binns Rd. House #156 on right.

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

CHECK FOUNDATION TYPE

- New Single Family Residence
- New Multi-Family Residence
- Accessory Building
- Bedroom(s) Addition
- Repair to failing septic system
- Maximum Number of Bedrooms: 4
- Maximum Number of Occupants: _____
- Swimming Pool
- Other Addition/Structure: _____
- Crawl Space Foundation
- Concrete Slab Foundation
- Basement with Plumbing
- Basement without Plumbing

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: _____ 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: 2021
 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: Allison Hartley
 Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

5.20.2022
 DATE

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
 PAGE 2: SITE PLAN WORKSHEET

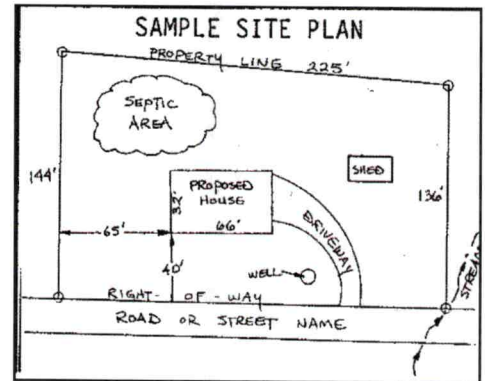
SEE THE "SAMPLE SITE PLAN" BELOW. INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!

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 and well location
- () Area you prefer your septic system to be placed
- () 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

Please see attached

Signature: _____

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

5-20-2022

DATE