ICHD–ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 303019

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

PIN # 4624-45-4958

APPLICANT/OWNER: Kenneth Bealer Homes | APPLICANT ADDRESS: P.O. Box 3398 Mooresville, NC 28117

SITE ADDRESS: 207 Gainswood Dr. Mooresville, NC 28117 | PHONE: 704-662-6400 | ALT. PHONE: —

SITE DIRECTIONS: BSR towards Lake Norman → Gainswood → Lot/House on left | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: CL+T | SECTION: 6 | LOT # 503 | LOT AREA: 0.734 acres | DESIGN FLOW: 480 GPD | L.T.A.R.: 0.30

Septic Tank	1000 (gal)	STB ~~1250~~ 1012	Date 6-9-21	☒ New System ☐ Repair ☐ Expansion	System Type: I II III (IV) V VI	☒ Residence	No. Bedrooms 4	Water Supply
Pump Tank	1000 (gal)	PT 17	Date 7-23-21	System Description: LP-PPBPS (50% Reduction)		☐ Business	No. Persons 8	☒ Private
Pump Make	Unknown	Model 525	Serial # P907	Repair System Description: LP-PPBPS (50% Reduction) + TS II Pretreatment		☐ Other	No. Employees —	☐ Public
# Nitrification Fields	1	# Lines 3	Linear Ft 267'	Maintenance Agreement Required: ☒ YES ☐ NO		☐ Slab	☐ Crawl Space	☐ Community
Trench Width	24"	Trench Bottom Depth(Low side)	34"	Gravel Depth —	☐ GRAVITY ☒ PRESSURE	☒ Basement w/plumbing	☐ Basement w/o plumbing	

Comments / Conditions: Two existing wells must be abandoned prior to AC issuance. Primary + repair septic areas must be fenced off with NO stockpiling of materials or any vehicular traffic. Existing septic tank must be pumped by a licensed septic hauler and crushed in place.

INITIAL SITE SKETCH

See attached 30-scale drawing with approval date of 2/6/2020.

* Though 280 l.f. of primary drainfield line has been laid out, only 267 l.f. need be installed. Recommend 3 x 89 foot lines (21 panels each). 63 total panels. Recommend setting control floats to dose system 180-200 gallons per pumping event. Also recommend an event counter to track total pumping events be installed in control panel. Use 5/32" orifice size.

- Wells abandoned 7/10/2020 per TRACK IT ~~5/8~~
- 7/27/2020: Per floorplans + corresponding application (received 6/25/20), house to be a crawlspace with slab garage.

AS BUILT SKETCH

9" drawdown

	Date	Initials
Drain Lines Checked	10/1/21	MD
Tanks Checked	9/29/21	JB
Pressure Manifold or Valve Box Checked	11/8/21	MD
Pressure Head Set	11/8/21	MD
Electrical Checked	11/8/21	MD
Floats Set	11/8/21	MD
Alarm Checked	11/8/21	MD
Maintenance Contract (Y) / N	11/3/21	CW
Supply lines	10/1/21	MD

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**

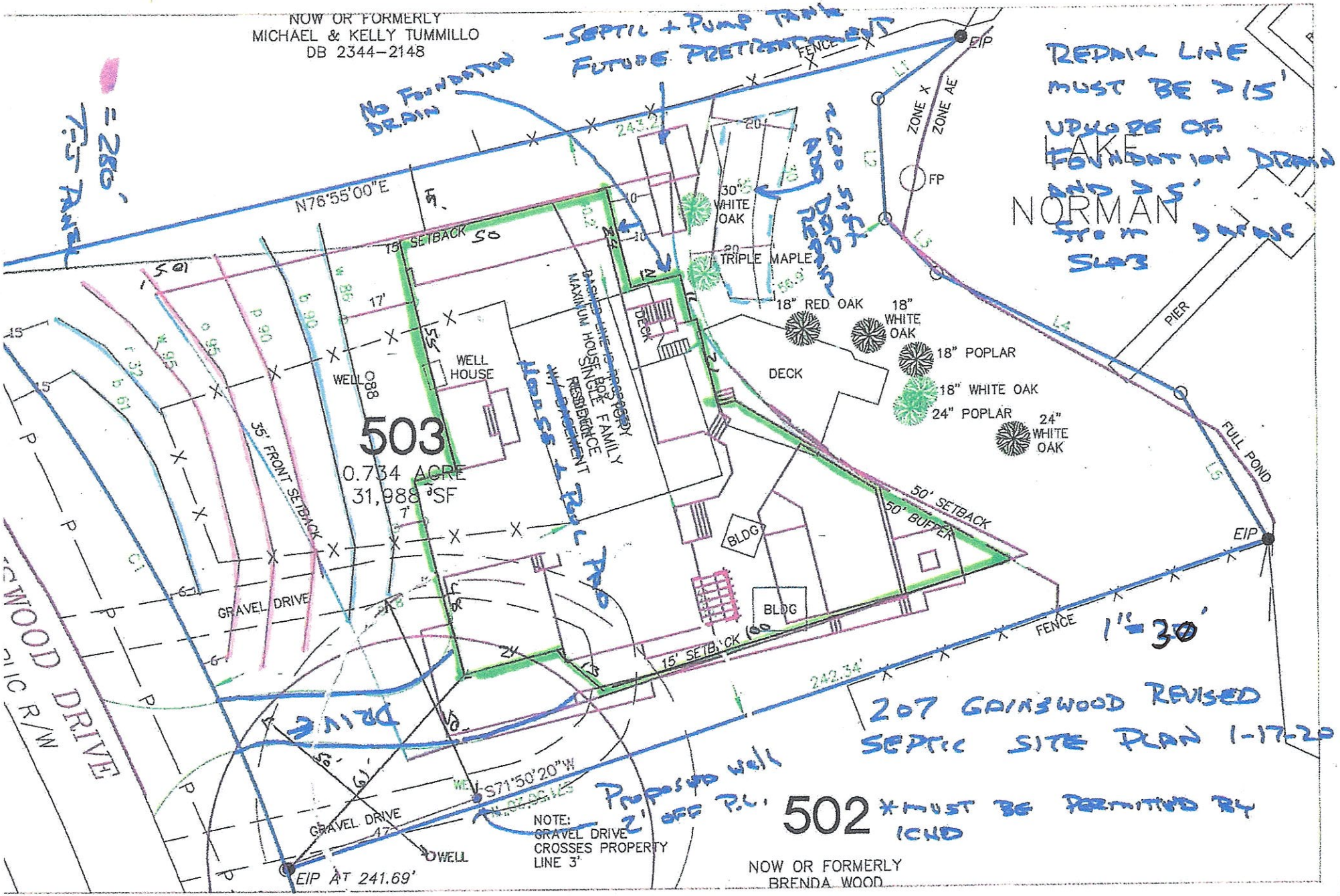
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Len K Bealer | Date: 2/7/2020 | Installed by: Steve Jordan Piedmont Backhoe

IMPROVEMENT PERMIT by: Tom Shuck | Date: 2/6/2020 | OPERATION PERMIT by: Marian Dodson | Date: 11/8/21

AUTHORIZATION TO CONSTRUCT by: Tom Shuck | Date: 7/27/2020 | 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.


NOW OR FORMERLY
MICHAEL & KELLY TUMMILLO
DB 2344-2148
-SEPTIC + PUMP TANK
FUTURE REPLACEMENTS
No Foundation Drain
REDAN LINE MUST BE >15' UPHILL OF FOUNDATION DRAIN AND >5' FROM SWALE
LAKE NORMAN
FENCE
EIP
ZONE X
ZONE AE
FP
N76°55'00"E
243.21'
15' SETBACK
50'
30" WHITE OAK
TRIPLE MAPLE
18" RED OAK
18" WHITE OAK
18" POPLAR
18" WHITE OAK
24" POPLAR
24" WHITE OAK
DECK
PIER
FULL POND
WELL HOUSE
WELL
DECK
PROPOSED LINE OF PROPERTY
MAXIMUM HOUSE FOOTPRINT FOR SINGLE FAMILY RESIDENCE W/ BASEMENT
503
0.734 ACRE
31,988 SF
35' FRONT SETBACK
GRAVEL DRIVE
BLDG
BLDG
50' SETBACK
50' BUFFER
15' SETBACK
242.34'
1"=30'
207 GAINSWOOD REVISED SEPTIC SITE PLAN 1-17-20
GAINSWOOD DRIVE
PUBLIC R/W
DRIVE
S71°50'20"W
GRAVEL DRIVE
WELL
EIP AT 241.69'
NOTE:
GRAVEL DRIVE
CROSSES PROPERTY
LINE 3'
Proposed well 2' off P.L.
502
NOW OR FORMERLY
BRENDA WOOD
*must be permitted by ICHD

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

Sheet 1 of 1
PROPERTY ID #: 4624-45-4958
COUNTY: Iredell

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

OWNER: Kenneth Bealer Homes
APPLICATION DATE: 11/29/19
ADDRESS: PO Box 3398 Mooresville, NC
DATE EVALUATED: 12-11-19
PROPOSED FACILITY: 4BR-SFR
PROPOSED DESIGN FLOW (.1949): 480 GPD
PROPERTY SIZE: 0.734 ac±
LOCATION OF SITE: 206 Gairswood Rd Mooresville, NC
PROPERTY RECORDED: Yes 1976
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 10% Rep	0-10	SCL V.W. SBK	SI. Friable, SS, SP, SEXP	—	62	—	—	0.30 PS
		10-32	Clay W. SBK V.W. ABK trace mica	SI. Firm, Sticky, SP, SOP					
		32-62	Clay Loam W. SBK some saprolite	SI. Friable, SS, SP, SEXP					
2	LSS 8% Rep	0-10	SCL W.W. SBK	SI. Friable, SS, SP, SEXP	—	62	—	—	0.30 PS
		10-34	Clay W. SBK/ABK	SI. Firm, Sticky, SP, SOP					
		34-62	Clay Loam W. SBK some saprolite	SI. Friable, SS, SP, SOP					
3	LSS 10% Rep	0-8	SCL V.W. SBK	SI. Friable, SS, SP, SEXP	—	61	—	—	0.30 PS
		8-29	Clay W. SBK/ABK V.W.	SI. Firm, Sticky, SP, SEXP					
		29-61	Clay Loam some mica/ W. SBK soft inclusions	SI. Friable, SS, SP, SEXP					
4	LSS 11% Rep	0-13"	SCL V.W. SBK	SI. Friable, SS, SP, SEXP	—	60"	—	—	0.30 PS
		13-29"	Clay W. SBK/ABK V.W.	SI. Firm, Sticky, SP, SEXP					
		29-60"	Clay W. SBK Loam some saprolite w. mica	SI. Friable, SS, SP, SEXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	280	269
System Type(s)	PM-MBPS	LP-MBPS+TSII
Site LTAR	0.30	0.30

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Tom Shuck
OTHER(S) PRESENT: Paul Pennegger

Tom Shuck issued IP & we have discussed relayout w/ him. Call Paul Pennington for site visit AP-303019 1/17/20 $500.00

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) 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.

704-996-6350

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 (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: Kenneth Bealer Homes Address: PO BOX 3398 MOORESVILLE NC Zip: 28117
Applicant Email: len@kbhlakenorman.com Phone: 704.662.6400 Alt. Phone:
Owner Name: David Blair Address: 207 Gainswood Drive, Mooresville, NC Zip: 28117
Owner Email: len@kbhlakenorman.com Phone: 704.662.6400 Alt. Phone:

Property Information:

Street Address: 207 Gainswood Drive, Mooresville, NC
Subdivision Name: CL&T Section/Phase: 6 Lot Number: 503
Driving Directions: Brawley School Rd, TL Gainswood, Lot on Left at 207 Gainswood.

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

(X) New Single Family Residence Maximum Number of Bedrooms: 4
( ) New Multi-Family Residence Maximum Number of Occupants: 8
( ) Accessory Building ( ) Swimming Pool
( ) Bedroom(s) Addition ( ) Other Addition/Structure:
( ) 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:

CHECK FOUNDATION TYPE

(X) Crawl Space Foundation
(X) Concrete Slab Foundation
( ) 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: T&J Panel

Please answer the following to the best of your ability:

( ) Yes (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (X) 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: _____ 1-17-20
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

(Check and sign only ONE of the options below)

1. * APPLICANT AND OWNER ARE THE SAME. * (*sign here*) X _____

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, David Blair, am the legal owner(s) of the property located at 207 Gainswood Drive, identified as

PIN (Parcel Identification Number) 4624454958.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Paul Penninger / Penninger Soil Consulting Len Bealer/ Kenneth Bealer Homes, 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.

_____ 11-25-19

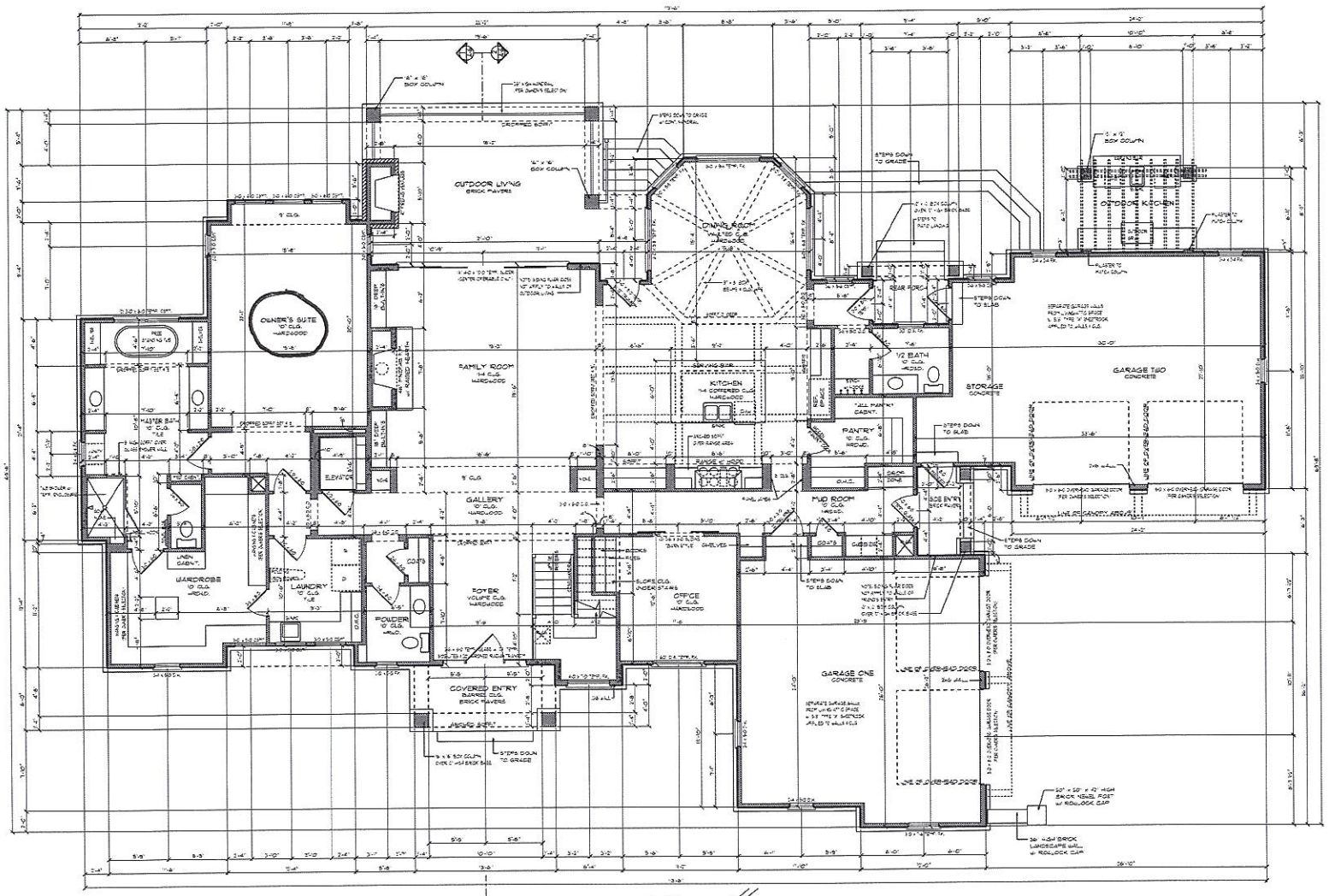
Signature of Owner(s) Date

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

114'4"

70'6"



P.O. Box 691286
Mint Hill, NC 28227
tel: 704-545-2928

PROJECT:

THE HUMES RESIDENCE

207 Gainswood Dr Mooresville, NC 28117

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ELITE DESIGN GROUP
CUSTOM HOME DESIGN
EST. 2003
EXCLUSIVE PLAN COLLECTION

DRAWN BY:
JOHN STEFANIK

DATE:
May 6th 2020

REVISED:

SHEET A-1
OF 18

Acknowledgement Of
Plans Submittal ONLY!
Date 7/28/2020
Tom Shuck Date 7/27/2020

STAIR NOTES

STAIR SECTION

NOTE:
BUILDER'S TO VERIFY DIM.'S / MECHANICAL ETC. FOR ELEVATOR SHAFT ASSEMBLY PER MFG. SPEC'S.

DOOR & WINDOW NOTE

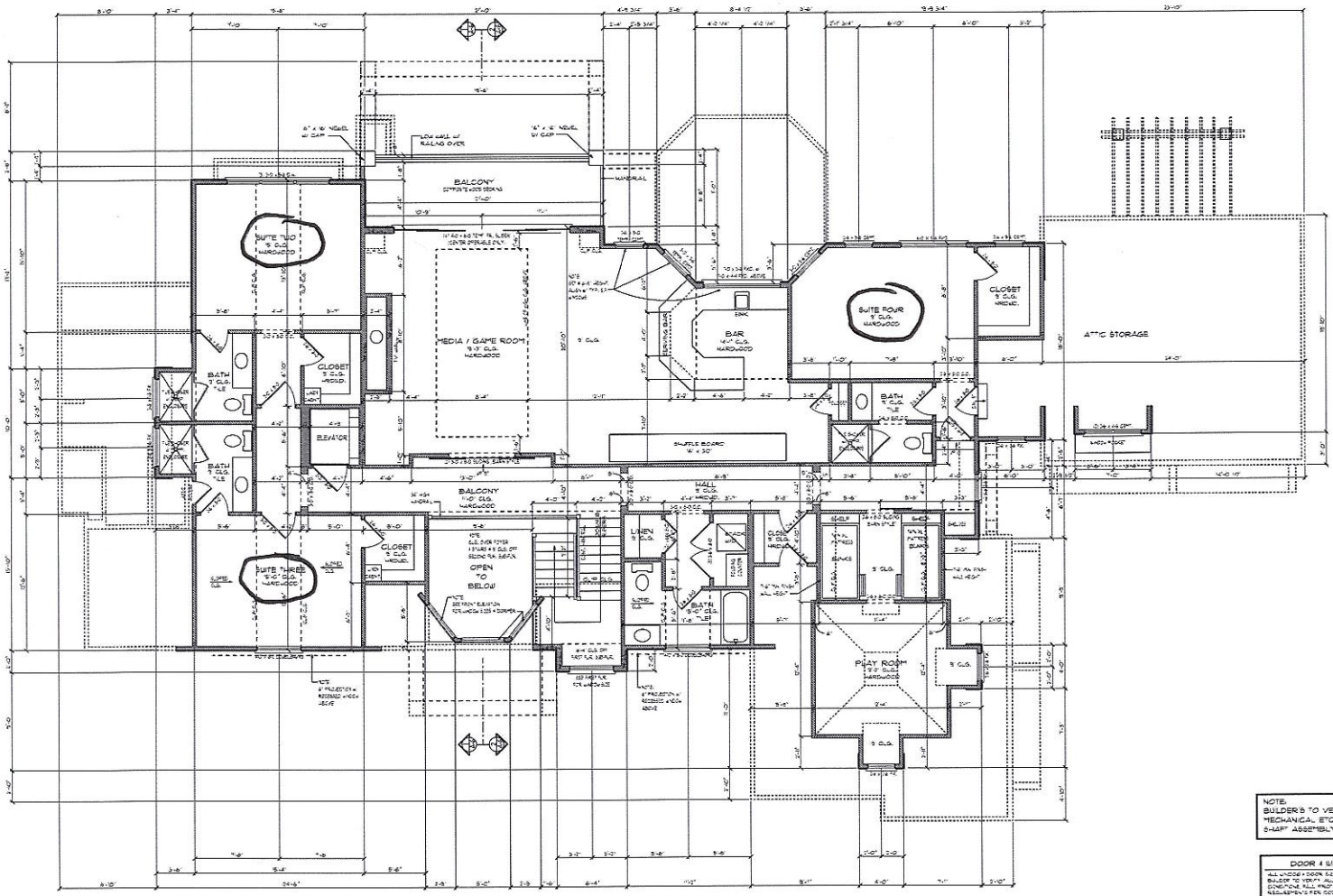
SQUARE FOOTAGE

FIRST FLOOR HEATED	3,038
SECOND FLOOR HEATED	2,693
TOTAL HEATED AREA	5,731
COVERED ENTRY	81
OUTDOOR LIVING	374
GARAGE ONE	600
GARAGE TWO / STORAGE	685
REAR PORCH	42
SIDE PORCH	45
TOTAL UNDER ROOF	7,568

FIRST FLOOR NOTES

FIRST FLOOR PLAN

Trip
704 - 622-4659
Ted Theis: 704-622-0728



NOTE:
BUILDER'S TO VERIFY DIM'S./ MECHANICAL, ETC. FOR ELEVATOR SHAFT ASSEMBLY PER MFG. SPEC'S.

DOOR & WINDOW NOTE

ALL WINDOW / DOOR SIZES AND OPENINGS BUILDER TO VERIFY. ALL SIZINGS & INFORMATION SHOWN ARE PROPERTY OF DOOR & GLAZING MANUFACTURER SELECTED. ALL DOORS & WINDOWS TO COMPLY W. ALL OF 2018 NORTH CAROLINA RESIDENTIAL CODES.

SECOND FLOOR NOTES

- 9' CEILING HEIGHT TYP. UNLESS NOTED OTHERWISE
- 8'-0" DOOR AND SIDELIGHT HEIGHT TYP. UNLESS NOTED OTHERWISE. SEE ELEVATION FOR SIDELIGHT HEIGHTS.
- PROVIDE ATTIC ACCESS TO ALL ATTIC SPACES ACCORDING TO CODE.
- SEE SECOND FLOOR CEILING PLAN FOR ALL SECOND FLR. BEAM & SECOND FLOOR HEADER SIZES.
- ALL DOORS W/ GLASS SHALL BE TEMPERED & WINDOWS SHALL BE TEMPERED PER STATE CODE
- ALL FRAMING DIMENSIONS FOR FIREPLACES SHALL BE CHECKED PER MFG.

SECOND FLOOR PLAN

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

Acknowledgement Of
Plans Submittal ONLY!
Date 7/29/2020
Tom Shuck Date 7/27/2020

P.O. Box 691286
Mint Hill, NC 28227
tel: 704-545-2928

PROJECT:

THE HUMES RESIDENCE
207 Gainswood Dr Mooresville, NC 28117

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ELITE DESIGN GROUP
EST. 2003

DRAWN BY:
JOHN STEFANIK

DATE:
May 6th 2020

REVISED:

SHEET A-2
OF 18

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

APPLICATION NUMBER
303019 Issue Date: 11/27/2019

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4624454958.000	207 GAINSWOOD DR	Iredell County

Owner Information	Applicant Information
Name: BLAIR DAVID S+MARIANN REVOC LIV TR	Name: PAUL PENNINGER
Address:	Address: 595 J M PENNINGER RD LEXINGTON, NC 27292
Phone:	Phone: (704)996-6330

Use Requested	Zone Code
Single Family Dwelling	R-20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0	35	50	15	15	WSIV-CA Catawba/Lake Norman	YES

Remarks
SFD REMOVE OLD HSE BEFORE BUILDING PERMIT IS ISSUED Lake Lots: Must meet both the 50-foot setback from the 760' contour line and the 35-foot setback from the rear property line for any structure.

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.

Signature of Owner/Contractor

Date: 11/27/2019

Permit Number	303019	TOTAL FEES:	$77.25