IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 229755

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

PIN # 4625-85-7750

APPLICANT/OWNER: TRUMP NATIONAL APPLICANT ADDRESS: 120 POLPIS RD. MOORESVILLE, NC

SITE ADDRESS: SAME PHONE: 704-363-8889 ALT. PHONE → KEVIN CLARK

SITE DIRECTIONS: BSR, TR POLPIS, ON R SAP CONTROLLED: ☐ YES ☐ NO

SUBDIVISION: THE POINT ON NORMAN SECTION: 5 LOT # 1 LOT AREA: 5.954 AC DESIGN FLOW: 500 L.T.A.R.:

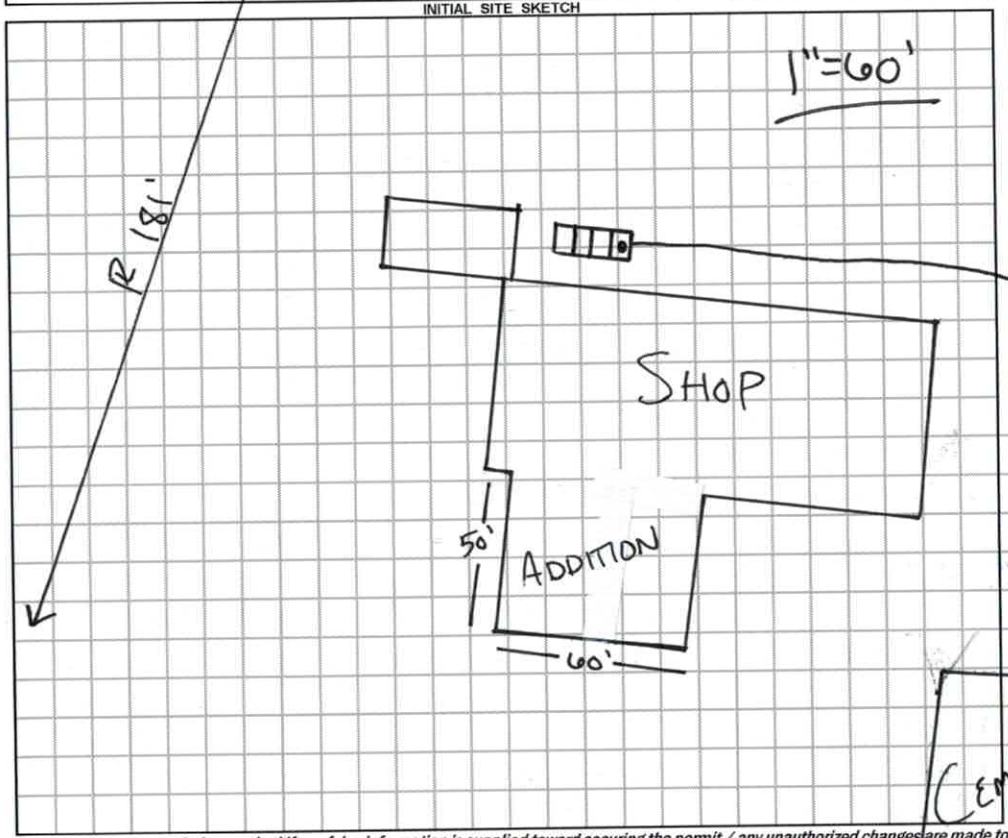
Septic Tank	(gal)	STB	Date	☐ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☐ Residence	No. Bedrooms
Pump Tank	(gal)	PT	Date	System Description:	PM – 25% REDUCTION	☐ Business	No. Persons
Pump Make	Model	EXISTING	Serial #	Repair System Description:	SAME	☒ Other	No. Employees 20
# Nitrification Fields	# Lines		Linear Ft	Maintenance Agreement Required:	☐ YES ☒ NO	☒ Slab	☐ Crawl Space
Trench Width	Trench Bottom Depth(Low side)		Gravel Depth		☐ GRAVITY ☒ PRESSURE	☐ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☒ Community

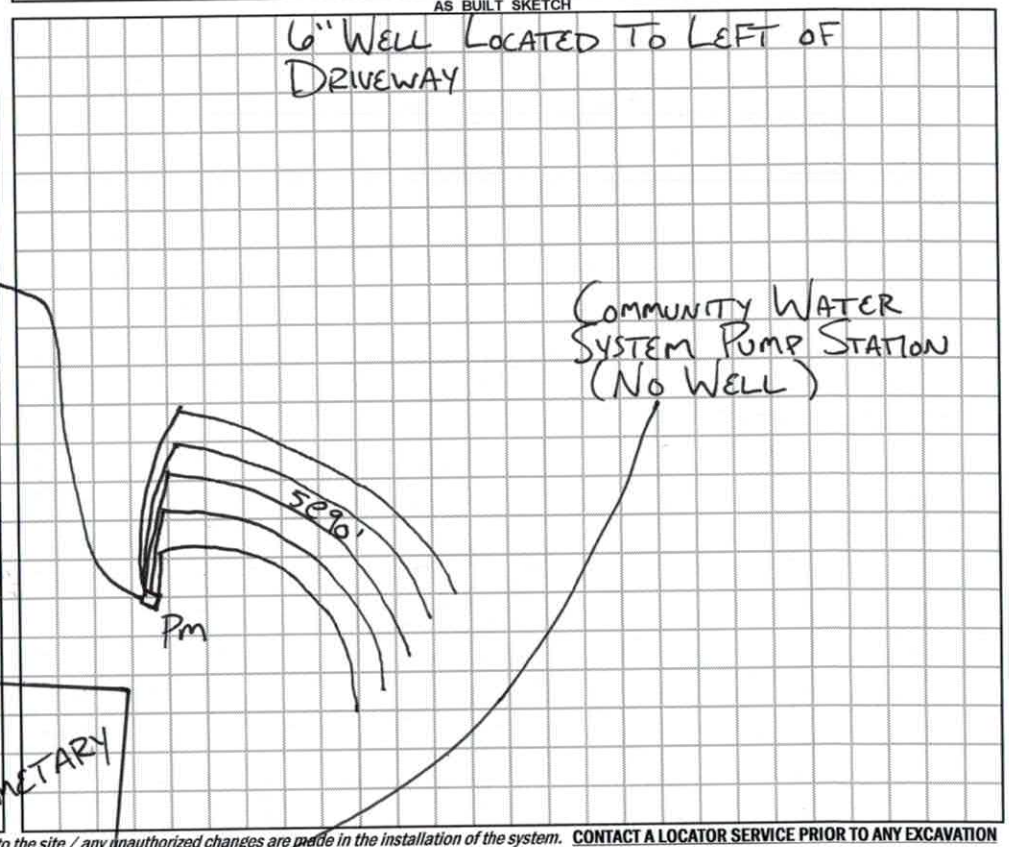
Comments / Conditions:

GOLF COURSE MAINTENANCE BUILDING

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: [signature] Date: 9-13-17 Installed by:

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: [signature] Date: 9-12-17

RECEIVED AUG 3 0 2017

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

PAGE 1: *APPLICATION FORM*

Paid $250.00 # 229599

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) Septic Improvement Permit ( ) Authorization to Construct (X) 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: Trump National Address: 120 Polpis rd Zip: 28117

Applicant Email: _____ Phone: _____ Alt. Phone: _____

Owner Name: Same Address: _____ Zip: _____

Owner Email: _____ Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 120 polpis road Point Ph 5 Lot 1 Maintance Bldg

Subdivision Name: Trump National Golf Course Section/Phase: _____ Lot Number: _____

Driving Directions: Brawley School road To Polpis 1st Vehicle drive 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 ___ Tank ___ Drain lines Describe Problem: _____

Maximum Number of Bedrooms: _____
Maximum Number of Occupants: _____
( ) Swimming Pool
(X) Other Addition/Structure: _____

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

Non-Residential Site Development: Type of Business: Golf Maintance
Square Footage of Building: 3000 Max. Number of Employees: 18 Max. Number of Seats/Beds/Other: - NA

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

( ) New Well (X) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: 98
( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other: pump 25% Reduction

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: _____ 8-29-2017
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, Gavin Arsenault, am the legal owner(s) of the property located at 120 Polpis Mooresville NC 28117, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) Gavin Arsenault, TNGC Charlotte LLC, 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.

Gavin Arsenault 8.29.17
Signature of Owner(s) Date

Jamie Minton 8/29/2017
Signature of Witness Date

Please return this signed form to the appropriate office:

Mooresville - Environmental Health
[illegible]
Fax: 704-662-3239
[illegible] Center Avenue, Mooresville, NC 28115

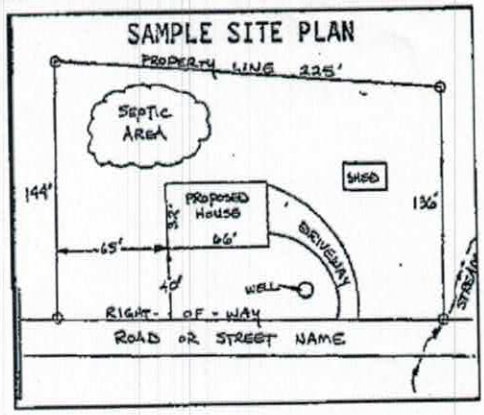
Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
342 N. Center Street, Statesville, NC 28677

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:

- (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 and well location**
- (X) **Area you prefer your septic system to be placed**
- (X) **North arrow, or other sufficient indicator of direction**



Circle N/A on the following if appropriate:

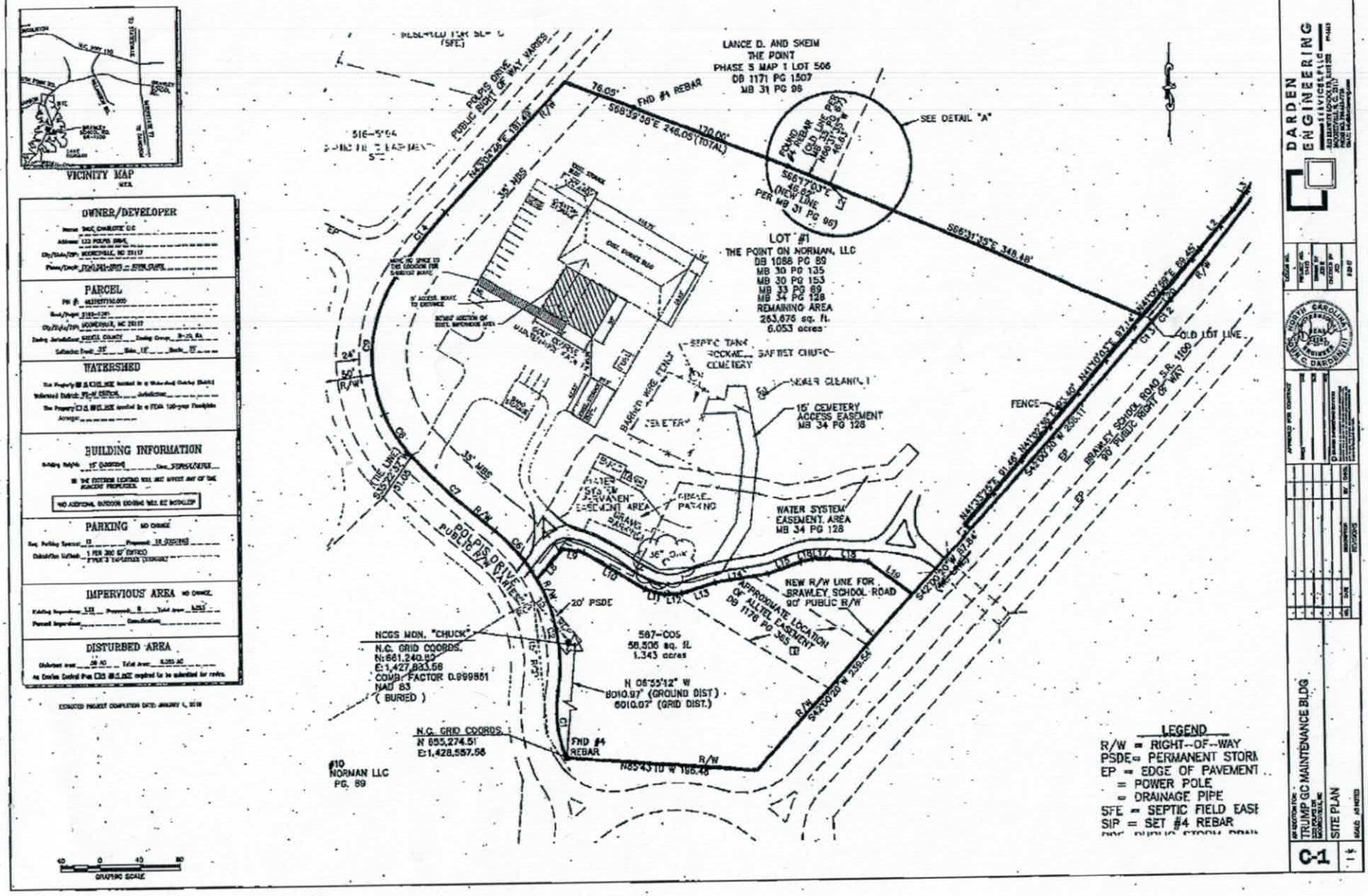
Location of septic systems and wells within 100' of your property N/A
Location of easements and rights of ways on your property N/A
Location of any designated wetlands on the property N/A

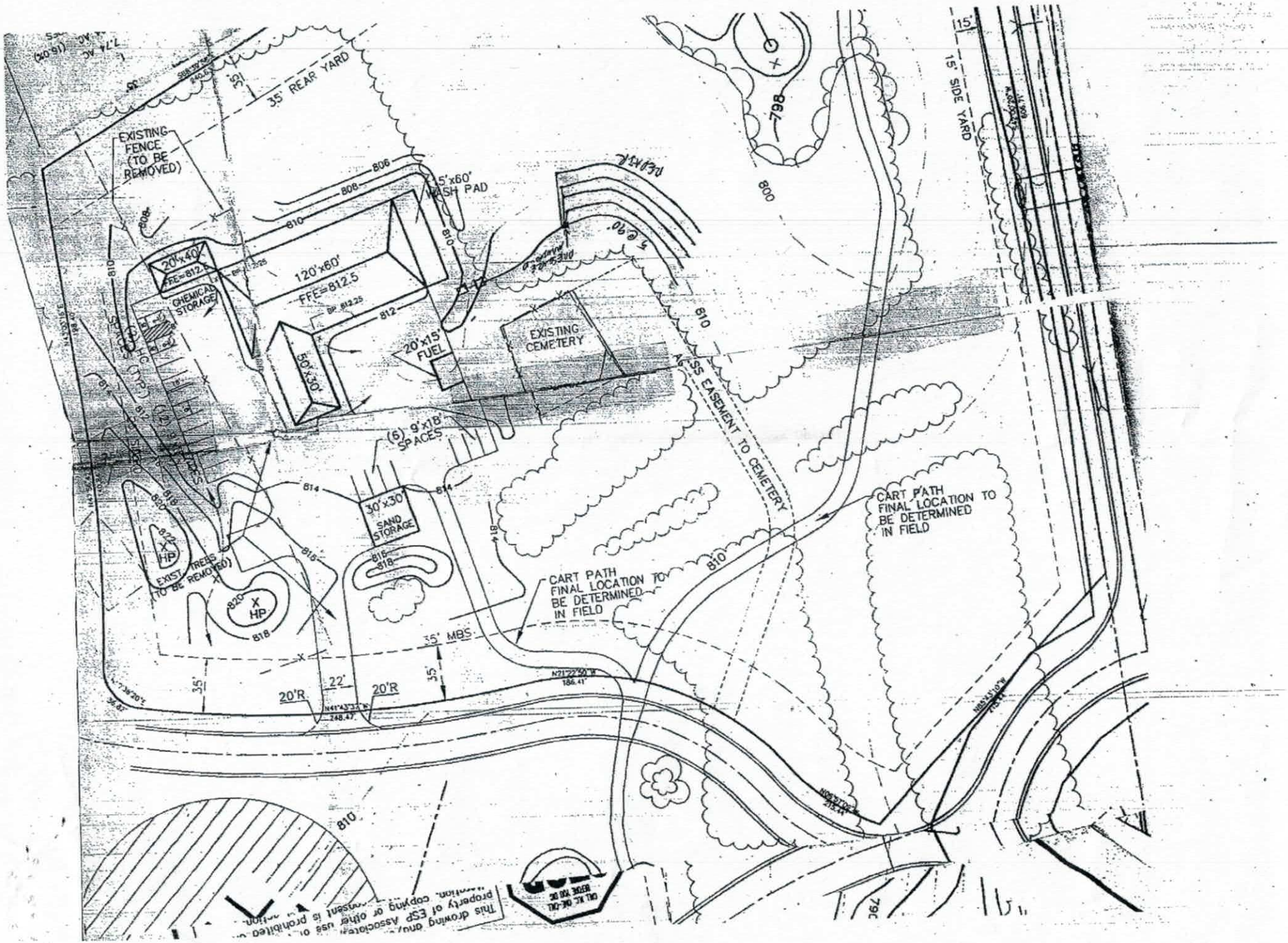
USE THIS SPACE TO DRAW YOUR SITE PLAN

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

See ATTACHED Please

Signature: _____ 8-29-2017
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**


VICINITY MAP
OWNER/DEVELOPER
PARCEL
WATERSHED
BUILDING INFORMATION
PARKING
IMPERVIOUS AREA
DISTURBED AREA
LANCE D. AND SKEIM
THE POINT
PHASE 5 MAP 1 LOT 506
DB 1171 PG 1507
MB 31 PG 96
LOT #1
THE POINT ON NORMAN, LLC
DB 1088 PG 89
MB 30 PG 135
MB 30 PG 153
MB 33 PG 89
MB 34 PG 128
REMAINING AREA
283,676 sq. ft.
6.053 acres
SEE DETAIL "A"
POLPS DRIVE
PUBLIC RIGHT OF WAY VARIES
BOLPS DRIVE
PUBLIC R/W VARIES
BRAWLEY SCHOOL ROAD S.R. 1100
90' PUBLIC RIGHT OF WAY
OLD LOT LINE
15' CEMETERY ACCESS EASEMENT MB 34 PG 128
WATER SYSTEM EASEMENT AREA MB 34 PG 128
NEW R/W LINE FOR BRAWLEY SCHOOL ROAD 90' PUBLIC R/W
APPROXIMATE LOCATION OF ALLTEL EASEMENT DB 1176 PG 365
20' PSDE
567-COS
56,506 sq. ft.
1.343 acres
NCGS MON. "CHUCK"
N.C. GRID COORDS.
N:661,240.83
E:1,427,833.58
COMB. FACTOR 0.999851
NAD 83
(BURIED)
N 06°55'12" W
8010.97' (GROUND DIST.)
8010.07' (GRID DIST.)
N.C. GRID COORDS.
N 655,274.51
E1,428,557.56
FND #4 REBAR
#10 NORMAN LLC PG. 89
N85°43'10" W 186.46
FENCE
SEPTIC TANK
RECKAR
SAFEST CHURCH
CEMETERY
SEWER CLEANOUT
BARBED WIRE FENCE
WATER METER
GRAVEL PARKING
FIRE HYDRANT
LEGEND
R/W = RIGHT-OF-WAY
PSDE = PERMANENT STORM
EP = EDGE OF PAVEMENT
= POWER POLE
= DRAINAGE PIPE
SFE = SEPTIC FIELD EASE
SIP = SET #4 REBAR
GRAPHIC SCALE
DARDEN ENGINEERING
TRUMP GC MAINTENANCE BLDG
SITE PLAN
C-1


35' REAR YARD
15'
15' SIDE YARD
EXISTING FENCE (TO BE REMOVED)
5'x60' WASH PAD
20'x40' FFE=812.5
CHEMICAL STORAGE
120'x60' FFE=812.5
50'x30'
20'x15' FUEL
EXISTING CEMETERY
ACCESS EASEMENT TO CEMETERY
(6) 9'x18' SPACES
30'x30' SAND STORAGE
EXIST. TREES TO BE REMOVED
CART PATH FINAL LOCATION TO BE DETERMINED IN FIELD
35' MBS
20'R
22'
798
800
806
808
810
812
814
816
818
820
822
HP

Site Address: 120 Polpis Dr. - Mooresville Maintenance facility

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5201

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

PERMIT# 072254 PIN# 4625853808 4625 82 6731 4625848012 DATE 4/21/98

OWNER OR CONTRACTOR CRESCENT RESOURCES PHONE: Business 663-6905 Jacobs Home 85-7750

ADDRESS PO Box 1003 CHARLOTTE NC 28202 Polpis

LOCATION BRAWLEY SCHOOL RD - TR ~~ROSSUM~~ POSSUM KNOB ON LT AT END 120 Polpis Dr.

SUBDIVISION ~~The Point~~ BLOCK / SECTION 5 LOT -1- LOT AREA 6.053Ac SITE CLASS PS DESIGN FLOW 500 GPD L.T.A.R. ~.30PD/FT

Septic Tank: 1500 Gallons; STB 797 Date 1/14/98

Pump Tank: 1000 Gallons; PT 27 Date 4/4/98

Pump Make: MYERS Model ME50S21 Serial No.

Nitrification Field: No Fields 1 Square Feet 1350 Linear Feet 450

No Lines 5@90' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

☐ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: PUMP 25% REDUCTION

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms No. Bathrooms No. Employees

☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☐ Community

Comments:/Conditions: Pressure

Comments:/Conditions: Golf Course Maintenance Facility

Now called Jump National Golf Club

INITIAL SITE SKETCH

See Site PLAN

AS BUILT SKETCH

I understand that this 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. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: [signature] Agent date 4/21/98 Installed by: STANLEY SEPTIC TANKS

Improvement Permit by: [signature] REHS date 4/21/98 Operation Permit by: [signature] REHS date 8/25/98

Authorization to Construct by: [signature] REHS date 4/21/98 Existing System Inspection by: date

HEALTH DEPT. COPY: WHITE INSPECTION COPY (FINAL): GREEN OWNER COPY (FINAL): YELLOW INSPECTION COPY (INITIAL): PINK OWNER COPY (INITIAL): GOLD

IREDELL COUNTY

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

APPLICATION NUMBER
229733
Issue Date: 09/08/2017

ZONING PERMIT

Industrial

Parcel Number	Street Address	Jurisdiction
4625857750.000	120 POLPIS DRIVE, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: TNGC CHARLOTTE LLC	Applicant: JLS MACHINE LLC
Address: 120 TRUMP SQUARE MOORESVILLE, NC 28117	Address: 4360 CALDWELL RD NEWTON, NC 28658
Phone:	Phone: 828-320-7465

Use Requested	Zone Code
OFFICE ADDITION TO TRUMP GC MAINTENANCE BUILDING	20CU

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
5.954	35.00	35.00	15.00	15.00	CACL	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	114475	TOTAL FEES:	$ 177.25