IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 224418

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

PIN # 4626317064

APPLICANT/OWNER: Gabriella Espada APPLICANT ADDRESS: 127 Wildiris Ln

SITE ADDRESS: 127 Wildiris Ln Mooresville, NC 28117 PHONE: 704-609-8988 ALT. PHONE 704-619-6695

SITE DIRECTIONS: Brawley School Rd → R on Chuckwood → L on Morrows Ridge → R on Wildiris → lot at end SAP CONTROLLED: ☐ YES ☐ NO

SUBDIVISION: The Harbour SECTION: 3 LOT # 17 LOT AREA: .95ac DESIGN FLOW: 480gpd L.T.A.R.: —

Septic Tank 1000 (gal) STB Infiltrator Date

Pump Tank 1000 (gal) PT Infiltrator Date

Pump Make Liberty Model 102 Em 231 Horsepower

Nitrification Fields — # Lines — Linear Ft

Trench Width — Trench Bottom Depth(Low side) EXISTING Gravel Depth —

☐ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI

System Description: relocation of tanks

Repair System Description: PM 25% reduction

Maintenance Agreement Required: ☐ YES ☑ NO ☐ GRAVITY ☑ PRESSURE

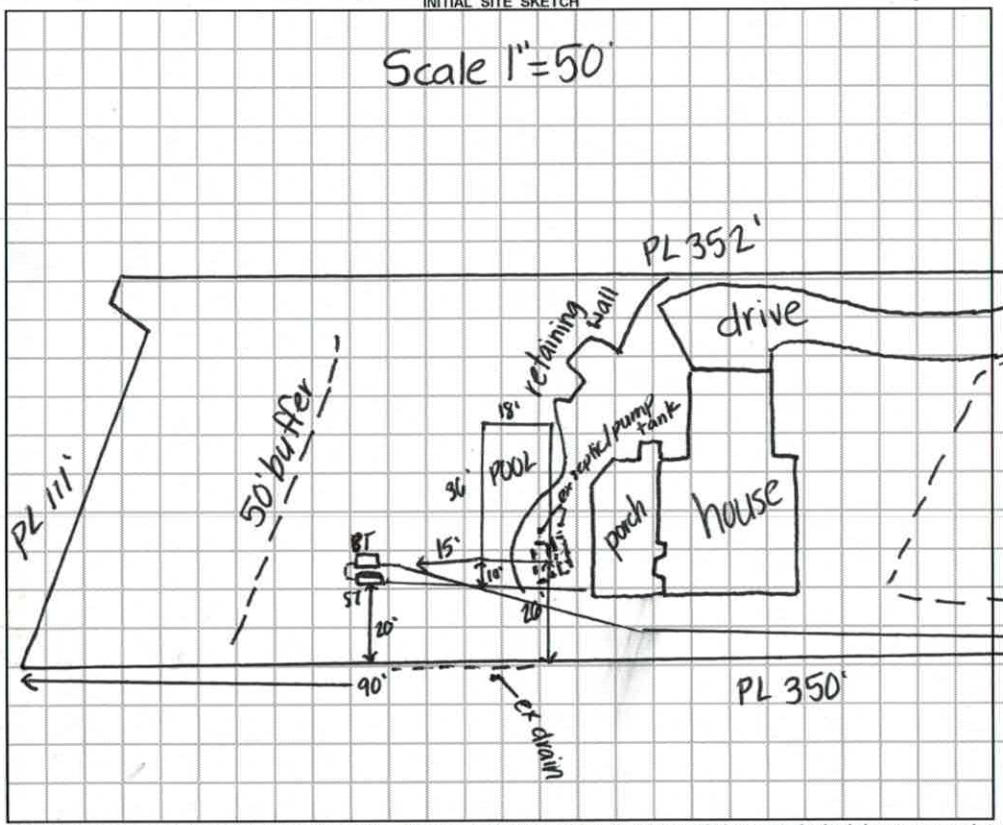
☑ Residence ☐ Business ☐ Other ☐ Slab ☐ Crawl Space ☑ Basement w/ plumbing ☐ Basement w/o plumbing

No. Bedrooms 4 No. Persons 8 No. Employees —

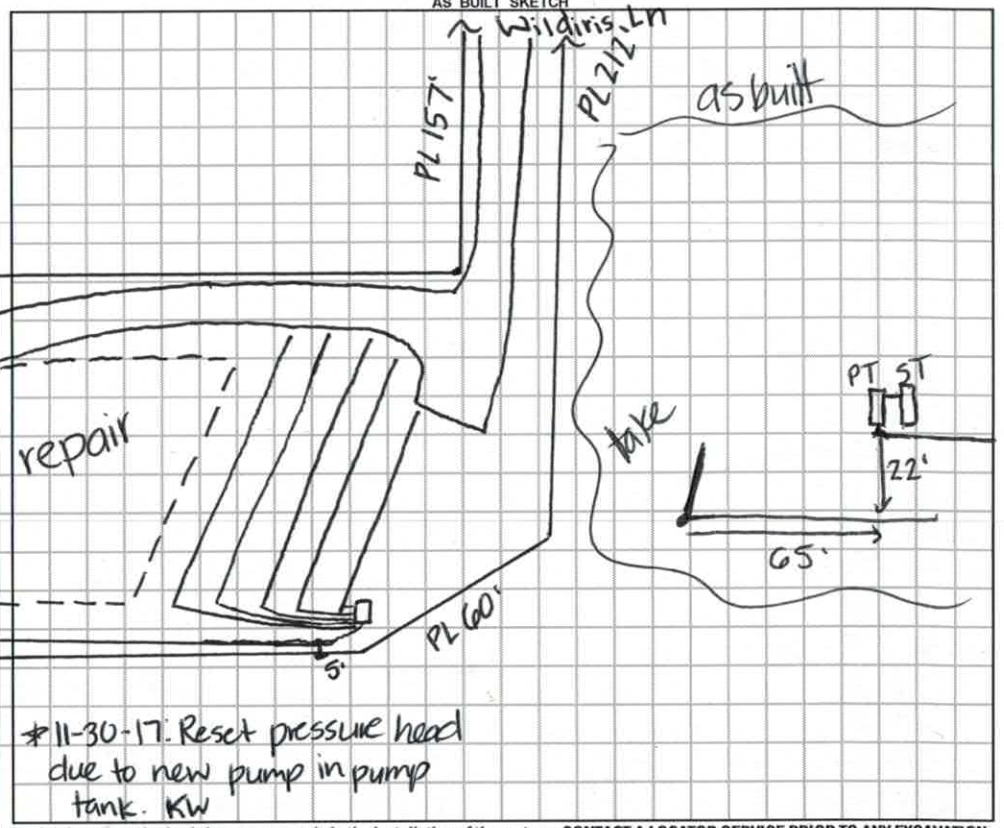
Water Supply: ☐ Private ☐ Public ☑ Community

Comments / Conditions: Pump, crush, & fill existing tanks. Maintain a minimum of 15' from any part of swimming pool. Supply line must maintain a minimum of 10' from pool. Maintain a minimum of 15' from neighbor's stormwater drain. Divert any water away from septic/pump tanks.

INITIAL SITE SKETCH



AS BUILT SKETCH



*11-30-17: Reset pressure head due to new pump in pump tank. KW

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: Gabriella Espada Date: 11/8/17 Installed by: T.W. Ammons Septic Service

IMPROVEMENT PERMIT by: Kayla Wilson Date: 11-7-17 OPERATION PERMIT by: Kayla Wilson Date: 11-30-17

AUTHORIZATION TO CONSTRUCT by: Kayla Wilson Date: 11-7-17 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.

RECEIVED NOV 3 - 2017

Paid $500.00 #224418

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM Relocate Tanks for Pool

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.

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: Jason & Gabriella Espada Address: 127 Wildiris Lane Zip: 28117
Applicant Email: gabby.espada17@gmail.com Phone: 704-609-8988 Alt. Phone:
Owner Name: Jason & Gabby Espada Address: 127 Wildiris Lane Zip: 28117
Owner Email: gabby.espada17@gmail.com Phone: 704-609-8988 Alt. Phone: 704-619-6695

Property Information:

Street Address: 127 Wildiris Lane Mooresville, NC 28117
Subdivision Name: The Harbour at the Point Section/Phase: III Lot Number: 17
Driving Directions: off Brawley School Rd

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: _____
(X) 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: 1996
(X) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other:

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: Gabriella Espada 11/3/17
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, Gabriella Espada, am the legal owner(s) of the property located at 127 Wildiris Lane, Mooresville, NC 28117, identified as PIN (Parcel Identification Number) 4656-31-7064, 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.

Gabriella Espada 11/3/17

Signature of Owner(s) Date

_____ _____

Signature of Witness Date

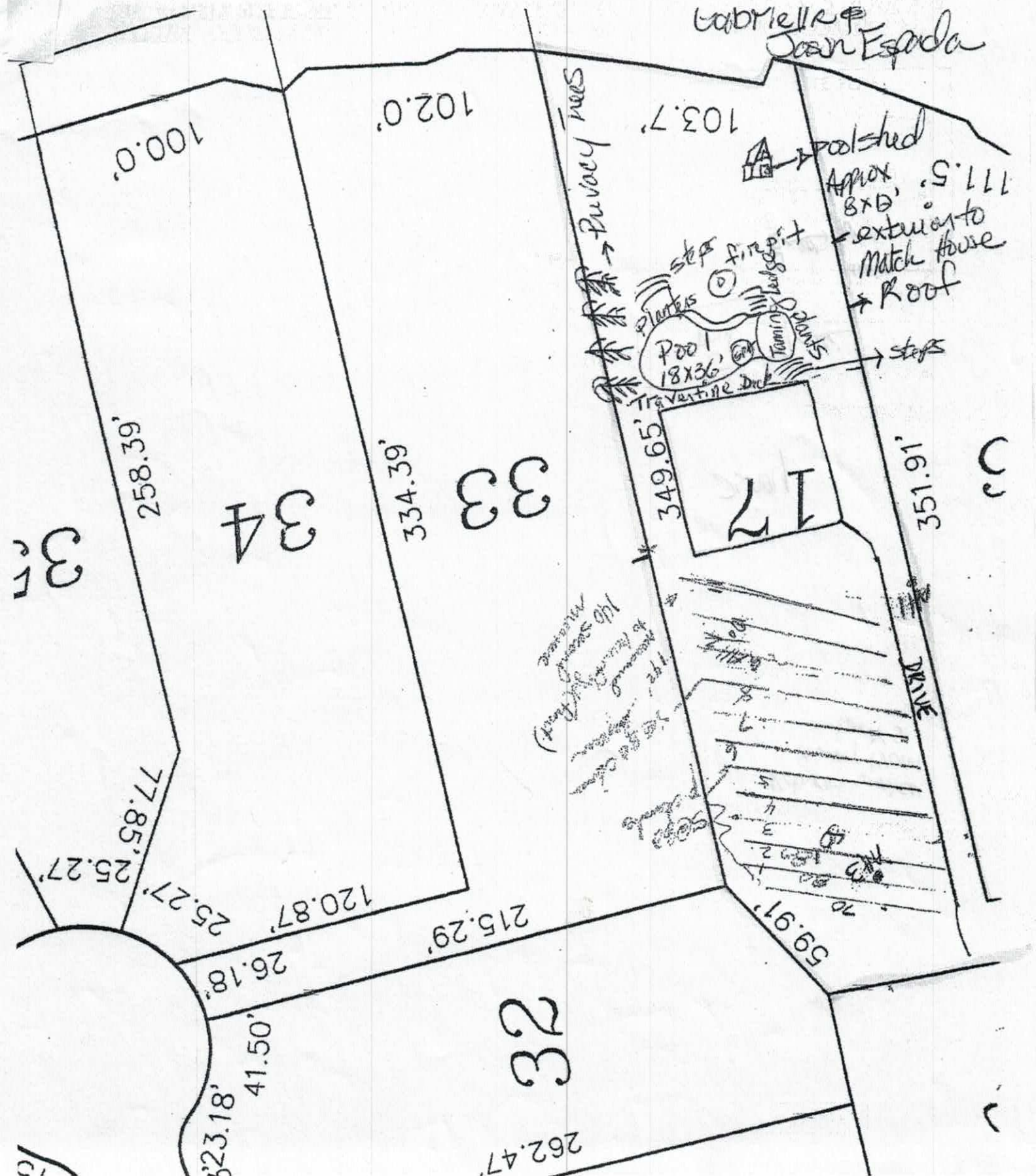
Please return this signed form to the appropriate office:

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

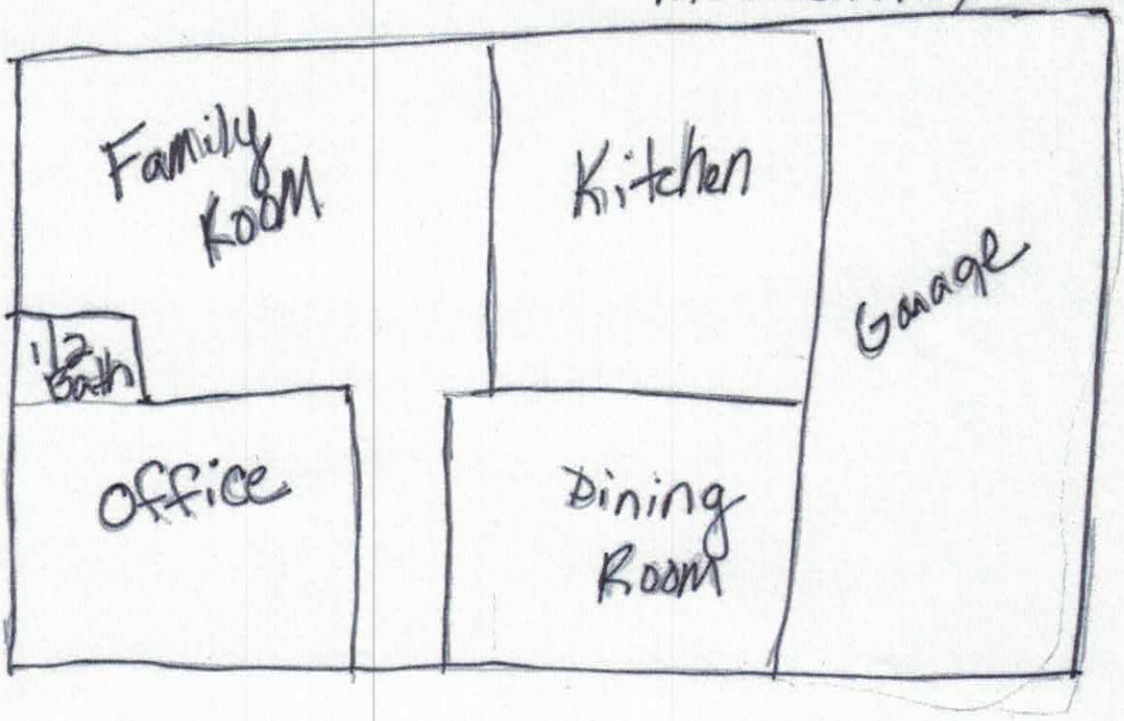
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

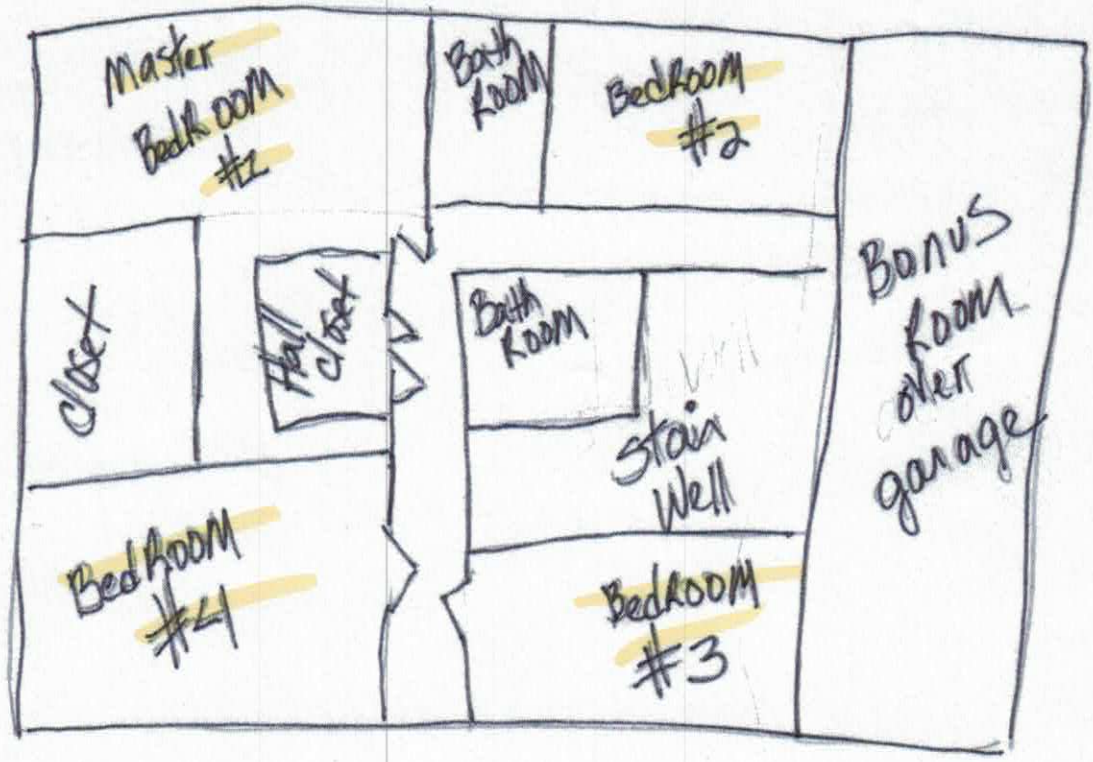
SITE PLAN WORKSHEET

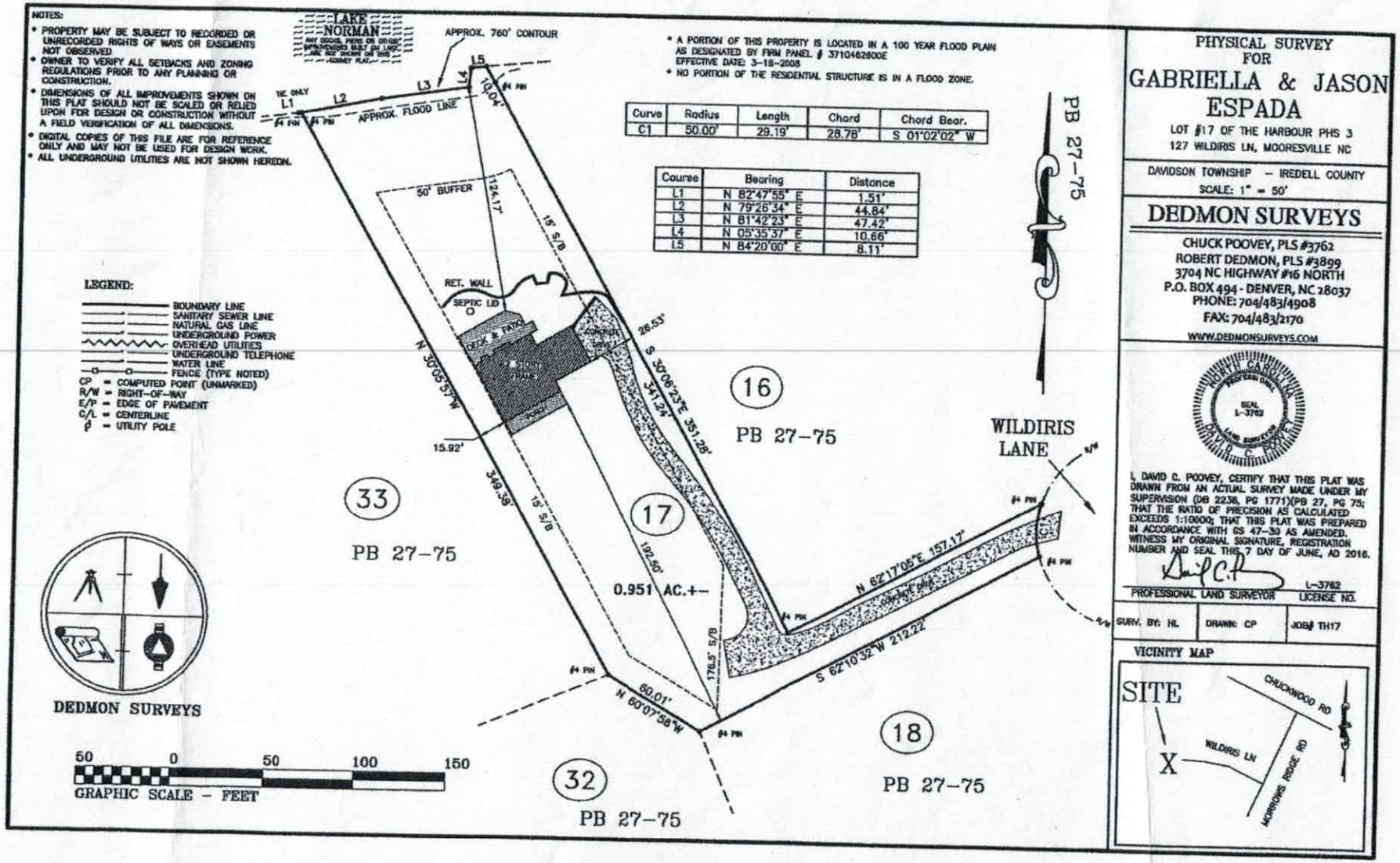


Jason & Gabriella Espada
127 Wildiris Lane
Mooresville, NC 28117

Acknowledgement Of Plans Submittal ONLY!
Date 11-7-17
Date 11/8/17






NOTES:
• PROPERTY MAY BE SUBJECT TO RECORDED OR UNRECORDED RIGHTS OF WAYS OR EASEMENTS NOT OBSERVED
• OWNER TO VERIFY ALL SETBACKS AND ZONING REGULATIONS PRIOR TO ANY PLANNING OR CONSTRUCTION.
• DIMENSIONS OF ALL IMPROVEMENTS SHOWN ON THIS PLAT SHOULD NOT BE SCALED OR RELIED UPON FOR DESIGN OR CONSTRUCTION WITHOUT A FIELD VERIFICATION OF ALL DIMENSIONS.
• DIGITAL COPIES OF THIS FILE ARE FOR REFERENCE ONLY AND MAY NOT BE USED FOR DESIGN WORK.
• ALL UNDERGROUND UTILITIES ARE NOT SHOWN HEREON.
LAKE NORMAN
APPROX. 760' CONTOUR
APPROX. FLOOD LINE
• A PORTION OF THIS PROPERTY IS LOCATED IN A 100 YEAR FLOOD PLAIN AS DESIGNATED BY FIRM PANEL # 3710462600E EFFECTIVE DATE: 3-18-2008
• NO PORTION OF THE RESIDENTIAL STRUCTURE IS IN A FLOOD ZONE.
Curve | Radius | Length | Chord | Chord Bear.
C1 | 50.00' | 29.19' | 28.78' | S 01°02'02" W
Course | Bearing | Distance
L1 | N 82°47'55" E | 1.51'
L2 | N 79°26'34" E | 44.84'
L3 | N 81°42'23" E | 47.42'
L4 | N 05°35'37" E | 10.66'
L5 | N 84°20'00" E | 8.11'
50' BUFFER
RET. WALL
SEPTIC LID
DECK & PATIO
CONCRETE
N 30°05'57" W
15.92'
349.39'
S 30°06'23" E 351.28'
341.24'
26.53'
192.50'
176.5'
15' S/B
N 62°17'05" E 157.17'
S 62°10'32" W 212.22'
60.01'
N 60°07'58" W
0.951 AC.+-
16
PB 27-75
17
33
32
18
WILDIRIS LANE
PB 27-75
LEGEND:
BOUNDARY LINE
SANITARY SEWER LINE
NATURAL GAS LINE
UNDERGROUND POWER
OVERHEAD UTILITIES
UNDERGROUND TELEPHONE
WATER LINE
FENCE (TYPE NOTED)
CP = COMPUTED POINT (UNMARKED)
R/W = RIGHT-OF-WAY
E/P = EDGE OF PAVEMENT
C/L = CENTERLINE
ø = UTILITY POLE
DEDMON SURVEYS
50 0 50 100 150
GRAPHIC SCALE - FEET
PHYSICAL SURVEY FOR
GABRIELLA & JASON ESPADA
LOT #17 OF THE HARBOUR PHS 3
127 WILDIRIS LN, MOORESVILLE NC
DAVIDSON TOWNSHIP - IREDELL COUNTY
SCALE: 1" = 50'
DEDMON SURVEYS
CHUCK POOVEY, PLS #3762
ROBERT DEDMON, PLS #3899
3704 NC HIGHWAY #16 NORTH
P.O. BOX 494 - DENVER, NC 28037
PHONE: 704/483/4908
FAX: 704/483/2170
WWW.DEDMONSURVEYS.COM
NORTH CAROLINA PROFESSIONAL SEAL L-3762 LAND SURVEYOR
I, DAVID C. POOVEY, CERTIFY THAT THIS PLAT WAS DRAWN FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION (DB 2236, PG 1771)(PB 27, PG 75; THAT THE RATIO OF PRECISION AS CALCULATED EXCEEDS 1:10000; THAT THIS PLAT WAS PREPARED IN ACCORDANCE WITH GS 47-30 AS AMENDED. WITNESS MY ORIGINAL SIGNATURE, REGISTRATION NUMBER AND SEAL THIS 7 DAY OF JUNE, AD 2016.
PROFESSIONAL LAND SURVEYOR
L-3762
LICENSE NO.
SURV. BY: HL
DRAWN: CP
JOB# TH17
VICINITY MAP
SITE
CHUCKWOOD RD
WILDIRIS LN
MORROWS RIDGE RD

IREDELL COUNTY

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

APPLICATION NUMBER
224418
Issue Date: 01/20/2017

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4626317064.000	127 WILDIRIS LANE, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: TEMPLETON PHILLIP+KRISTIN	Applicant: JASON, ESPADA
Address: 127 WILD IRIS DR MOORESVILLE, NC 28117	Address: 127 WILDIRIS LN MOORESVILLE, NC 28117
Phone:	Phone: 704-609-8988

Use Requested	Zone Code
NEW INGROUND CUSTOM CONCRETE SWIMMING POOL	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.950	35.00	50.00	10.00	10.00	CACL	AE

Remarks:

Swimming Pool Zoning Permit: Pools shall be located to comply with minimum setbacks requirements for accessory buildings and structures of the district in which located. Pools which are not an integral part of the principal building shall be located at least the minimum distance from the principal building necessary to comply with N. C. Building Code requirements. Pools shall be protected by a fence of equal enclosure, a minimum of four feet in height, and equipped with self-closing and positive self-latching gate to provide with hardware for permanent locking. Fencing Is NOT required for above ground pools if they are at least four (4) in height, the ladder is removed, or when NOT in use have a gate to the ladder as described above. SETBACKS FROM POOL TO OTHER STRUCTURES IS DETERMINED BY THE NC BUILDING CODE.

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	90801	TOTAL FEES:	$ 77.25