06-26-13
Pd #320.00
Note new PIN #. Relayout. MS

New Septic System
IP Valid 06-20-13
8/12/13 4m MS
Re: If lot is ready staked & Underground

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
Application for IMPROVEMENT PERMIT, AUTHORIZATION TO CONSTRUCT, or EXISTING SYSTEM INSPECTION

(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(c) FOR DETAILS)

8/22/13 On Hold till Cleared

1. APPLICATION FOR: ___ Improvement Permit (✓) Authorization To Construct ___ BOTH ___ Existing System Inspection

2. 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 check ( ) beside whichever is submitted if applicable ___ Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. Applicant Information:

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Tom Palma Homes, Inc.	P.O. Box 2587 Davidson NC 28036		704-307-7475
Owner Name	Mailing Address	Home Phone #	Alternate Phone #
Tom Palma Homes, Inc.	" "		"

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
123 Ironwood Ct. Mrsvl, 28117	The Farms III	Phase 3 426

Driving Directions: Brawley School, R on Mckenzee, Left on Barberry, Turn left on Ironwood

5. RESIDENTIAL Site Development Information: *(Check or Complete ALL that apply)*

(✓) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
( ) Repair To Failing Septic System
( ) Other

Maximum Number of Bedrooms 4
Maximum Number of Occupants 8
If Expansion, Current Number of Bedrooms ___

(✓) Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) Basement w/Plumbing?
( ) Basement w/out Plumbing?

IF Non-Residential Site Development:
Type of Business
Square Footage of Building
Maximum Number of Employees
Maximum Number of Seats

6. Proposed Water Supply:
( ) New Well ( ) Existing Well (✓) Community Well ( ) City Water ( ) Other Public Water

7. Desired Septic System Type: *(You may rank in order of preference, if any)*
( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional (1) Other 25% reduction (2) ( ) No Preference

8. 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. industry) 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.

9. Signature: Tom Palma — 6/12/13
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

$ PAID
(ad) (Paid via EFT ac) Borrow updated 6/18/13 (ad)

IREDELL COUNTY HEATLH 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...
  SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site
- ✓ Front and side setbacks from property line...
- ✓ Preferred driveway location and configuration, preferred 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

Signature: Joan Brown — *REQUIRED* property owner or owner's legal representative signature.

6/12/15 — DATE

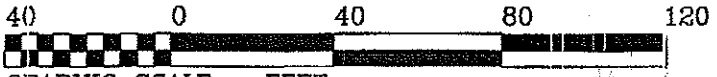
USE THIS SPACE TO DRAW YOUR SITE PLAN

Soil attached

White Copy – Environmental Health Yellow Copy – Applicant

123 Ironwood Ct.
Mooresville NC

Curve	Radius	Length	Chord	Chord Bear.
C1	602.22'	165.72'	165.20'	S 87°57'58" E
C2	50.00'	53.98'	51.40'	S 85°36'23" W



14'x14' deck

COS

N 81°41'43"E
52.51'

C1

35' S/B

426

89.1'

0.712 AC.+/-

20' S/B

61'+/- to edge of water

proposed house

4.00'
14.50'
26.25'
19.25'
18.29'
5.00'
26.38'
8.82'
21.33'
3.00'
12.8'
0.88'
21.50'
5.12'
21.50'
7.00'
35.82'
13.59'
22.00'

N 24°40'04"W 245.51'

S 16°00'03"W 229.79'

31.0'

67 S/B

60.69'

425

PB 47-12

47-12

PB 47-12

driveway

C2

IRONWOOD
COURT

T

LC

DATE: 6-13-

SCALE: 1" =

D

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RO

37(
P.O. B

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SURVEY
OF MY K

PROFE

SURV. BY: X

VICINI

Iredell County
Planning & Enforcement
349 N. Center St. PO Box 788
Statesville, NC 28687
704-878-3113

Zoning Permit

Permit Number: 119629ZO

Printed: 6/18/2013

Master #: 119629

Associated Permits:
119629ZO Zoning

Applicant

Name: Tom Palmer Homes, Inc
Address: 125 O'Henry Avenue
PO Box 2387
Davidson, NC 28036

Phone: 704-780-1448

Parcel

Parcel Number: 4626396094.000
Address: 123 Ironwood Ct.
Mooresville, NC 28117
Subdivision: The Farms

Zoning: RA
Township: 1700
Area: .72
Lot(s): 426

Directions to Parcel: Brawley School Rd., R on McKendree, L Bayberry

Owners

Name: Tom Palmer Homes, Inc
Address: P.O. Box 2387
Davidson, NC 28036

Phone: 704-307-7475

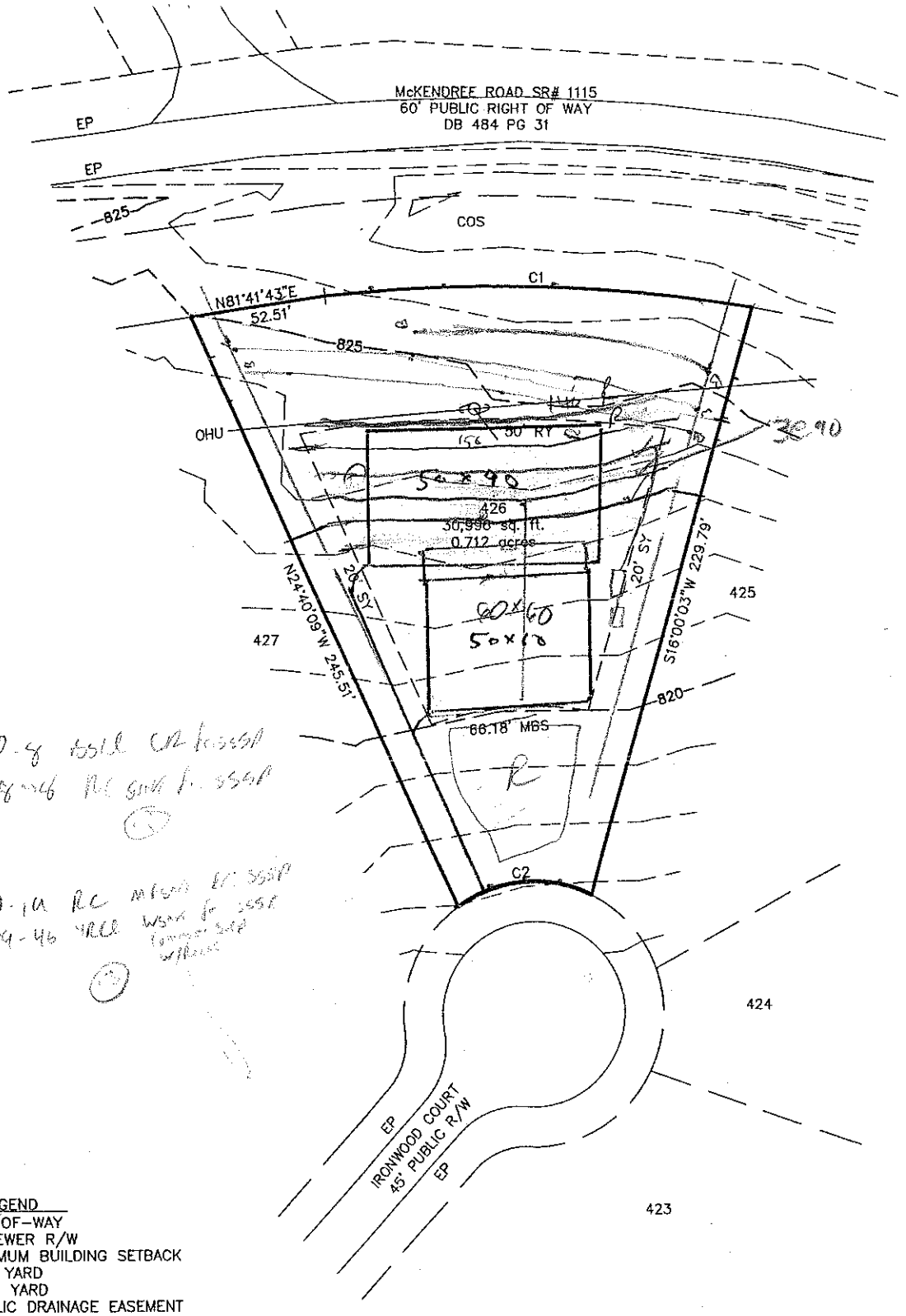
Contractors

Contractor Type: Building
Name: Tom Palmer Homes, Inc
Address: 125 O'Henry Avenue
Davidson, NC 28036

Phone: 704-780-1448
EFT 85928

Fees and Receipts:

Number	Description	Amount
FEE-288085-07	Zoning - Permit Application	$75.00
FEE-288086-07	Technology Fee - Planning	$2.25



LEGEND
R/W=RIGHT-OF-WAY
SSRW = SEWER R/W
MBS = MINIMUM BUILDING SETBACK
S.Y. = SIDE YARD
R.Y. = REAR YARD
PDE = PUBLIC DRAINAGE EASEMENT
FPE = FLOOD PROTECTION ELEVATION
PSDE =PERMANENT STORM DRAINAGE EASEMENT

= RED MAPLE "AUTUMN FLAME"

STREET TREES TO BE PLANTED OUTSIDE OF R/W

THE FARMS PHASE 3 LOT #426

IRONWOOD COURT

0.712 acres 30,996 sq. ft.

WOODED

1"=60'

9/10/04

FM3NR426

ESP ASSOCIATES, P.A.
engineering surveying•planning
10915 Southern Loop Boulevard
Pineville, N.C. (704) 583-4949

BAR SCALE 1"=60'

0 30 60 120

22

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
Application For Improvement Permit

ALL items on this application form must be completed before Health Department can begin work. One application must be completed by the property owner or agent for each (proposed) site.

PERSONAL INFORMATION: 660-1185 Mooresville

The Farms LLC		3214 Brawley Sch. Rd.		NC	28117
Applicant	Phone #	Mailing Address	City	State	Zip Code
Same					
Current Property Owner		Mailing Address	City	State	Zip Code

PROPERTY INFORMATION:

Farms Ph. 3	426		
(Proposed) Subdivision Name	(Proposed) Lot #	(Proposed) Block/Section #	State Road #

Comm. Well		
(Proposed) Water Supply: Public, Private Well	**Preliminary Plat Approval Date** (DEVELOPERS ONLY)	Tax Map #

Specific Directions to Property _____

TYPE OF FACILITY: (use check (X) or number as appropriate)

House X Mobile Home _____ Commercial _____ No. Bedrooms 4 No. Baths 4

No. Persons or Employees (commercial only) _____ Basement _____ Basement with Plumbing _____

Crawl Space X Concrete Slab _____ Garbage Disposal _____ Jaccuzi or spa _____

COVENANT AND SIGNATURE:

I hereby make application to the Iredell County Health Department for a soils/site evaluation of the property described above. This evaluation is to be conducted for the sole purpose of obtaining a septic system Improvement Permit. I hereby authorize Iredell County Health Department representatives to go onto the above property for purposes of conducting this evaluation. I understand that, by state law, any Improvement Permit issued on the above property may be voided if substantial changes are made to the designated sewage system site. The issuance of an Improvement Permit by the Iredell County Health Department does not relieve me from compliance with all other relevant state/local laws or regulations. As owner or authorized agent, I covenant that the contents of this application are true and represent the maximum facilities intended to be placed on this property to my knowledge to date.

I understand that any Improvement Permit issued on the above property is valid for five (5) years from the issuance date and is subject to revocation if the above described site plans or intended use changes.

4-5-04 DATE _____ SIGNATURE OF OWNER/AUTHORIZED AGENT

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
Application For Improvement Permit
Site Plan Form

INSTRUCTIONS TO APPLICANT: (Items in Parentheses are to be performed by DEVELOPERS ONLY)

All property corners must be staked and flagged with dimensions matching those shown on an approved final (preliminary) plat (**and** proposed house dimensions must be staked and flagged) before the Iredell County Health Department can begin review work on this proposed site. An application for an Improvement Permit is considered complete **only** when this site plan form is completed, signed, and attached to the application form.

As Close To Scale As Is Possible: 1. Draw in the proposed lot showing **all** proposed lot dimensions and orientation to proposed streets or roads. 2. Draw in the proposed structure showing dimensions and distances to property lines (include decks, walkways, etc.). E. Draw in the proposed driveway location. 4. Draw in all wells, both existing and proposed, including those on adjacent property (if known). 5. Draw in any other structure ie. sheds, outbuildings, pools, etc. which will occupy space on the proposed lot.

SEE ATTACHED SITE PLAN

1" = 50'

I hereby convenant that the above representation is correct to the best of my knowledge and ability.

4-5-04 Date _____ SIGNATURE OF OWNER/AUTHORIZED AGENT

Iredell County
ZONING PERMIT

227 South Center St. PO Box 788 Statesville, NC 28687 Phone 704-878-3118

Call Sanitarian between 8 a.m. & 9 a.m. Statesville 704-878-5305 Mooresville 704-664-5281

Permit #:	119629ZO	Subdivision:	The Farms
Proposed Use:	Single Family	Township:	1700 Davidson
Location of Property:	000 Ironwood Ct. Mooresville NC 28117		
Parcel #:	4625-50-5104.426	Zoning:	RA
Lot #:	426 Size: .72	Flood Plain:	No Watershed: WSIV-CA
Applicant:	Toney Jacobs & Associates, Inc (Toney Jacobs)	Owner:	The Farms, LLC
Address:	168 Broadbill Dr Mooresville NC 28117	Address:	2214 Brawley School Rd Mooresville, NC 28115
Phone:	704-663-6905	Phone:	
Property Recorded:	No Site Plan Reviewed:	Community Water:	No Community Sewer: No

If permitted the following minimum requirements must be met, unless Health Department requires more land area, or other qualifications are indicated in the comments.

Min. Lot Area: 30,000	Min. Front Yard: 35 ft	Min. Left Side Yard: 15 ft
Min. Lot Width: 100	Min: Rear Yard: 35 ft	Min: Right Side Yard: 15 ft
Min. Number Parking Spaces:		Max. Built Upon Area:

Comments:

Hold building permit until plat has been recorded to document lot creation from parent parcel.

Directions:

Brawley School Rd., R on McKendree, L Bayberry

FEES

Zoning Permit/Inspection Fee	☑	$45.00
Site Plan Review Fee	☐	$0.00
Environmental Health New System	☑	$200.00
Environmental Health Existing System	☐	$0.00
Total Fees:		$245.00

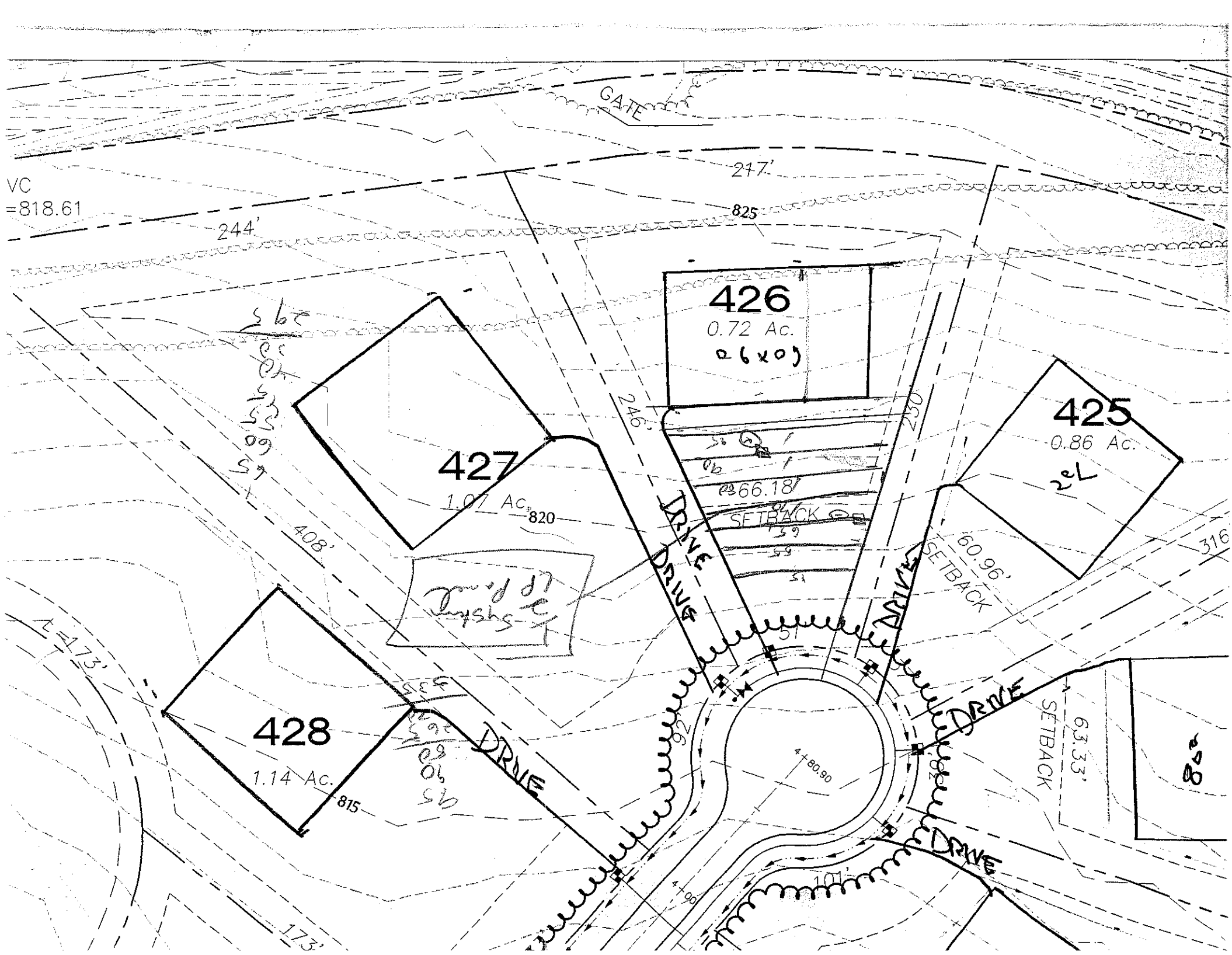
I certify that all statements made in this application and any attached documents are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that false information may be grounds for rejection of this application. Authorized Health Department and Planning & Enforcement Representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

Applicant:_____ Date: _____

A non-refundable fee of $45.00 is charged on all permit applications.

ELLIOTTE BLACKWELL

Printed: 3/5/2004


GATE
VC
=818.61
244'
247'
825
426
0.72 Ac.
427
1.07 Ac.
820
428
1.14 Ac.
815
425
0.86 Ac.
246'
250'
66.18'
SETBACK
60.96'
SETBACK
63.33'
SETBACK
DRIVE
DRIVE
DRIVE
DRIVE
DRIVE
DRIVE
408'
173'
316'
101'
80'

DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet ___ of ___
PROPERTY ID #: _____
COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: _____ APPLICANT: _____
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: _____
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
LOCATION OF SITE: 426 Farms II PROPERTY RECORDED: _____
WATER SUPPLY: ❑ Private ❑ Public ❑ Well ❑ Spring ❑ Other _____
EVALUATION METHOD: ❑ Auger Boring ❑ Pit ❑ Cut
TYPE OF WASTEWATER: ❑ Sewage ❑ Industrial Process ❑ Mixed

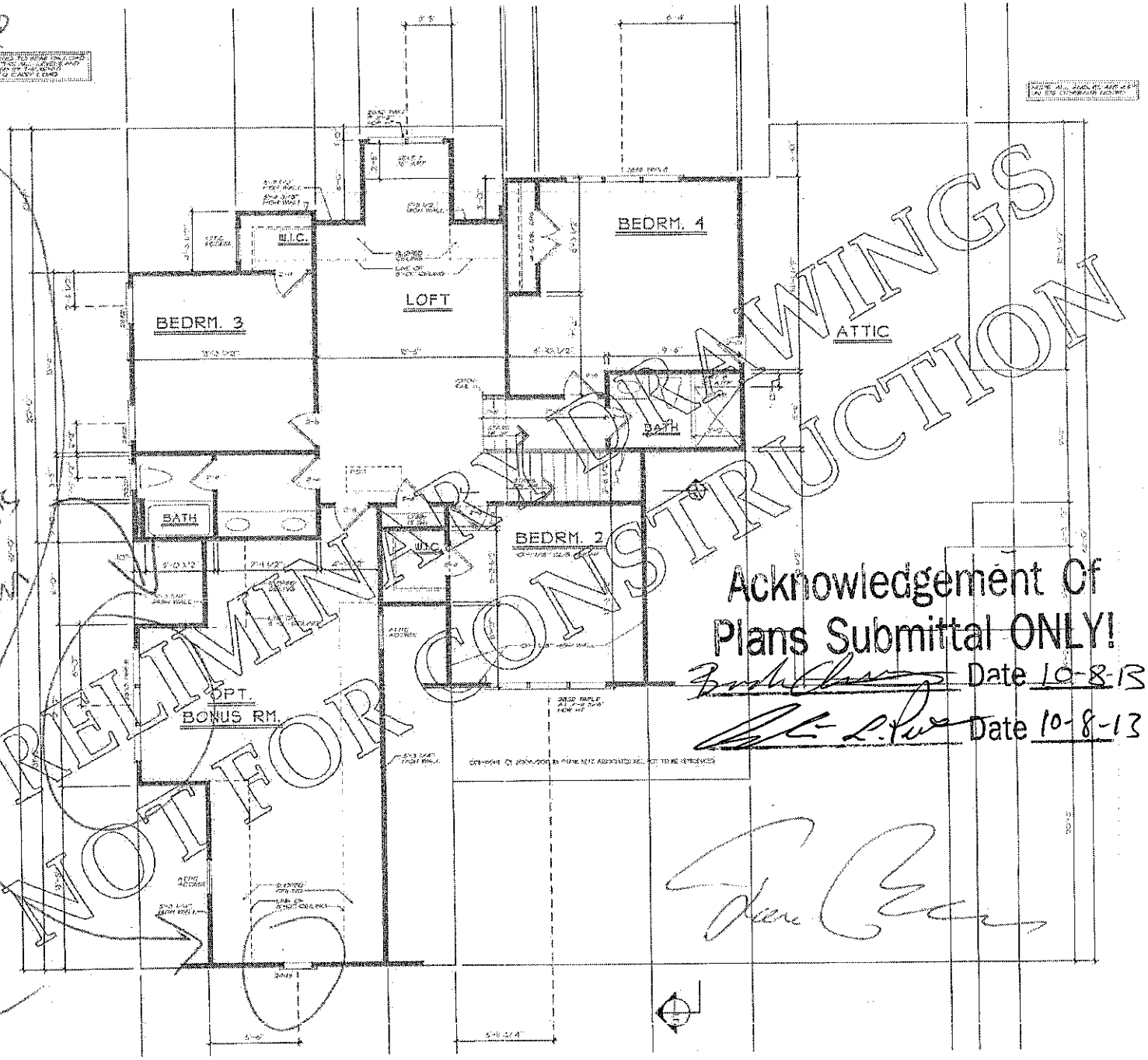
PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1		0-8	BSCL VR	fri SSSP					PS .3
		8-48	RC SAM	fri SP					
2		0-37	RC ABK	fri SP	few roots	PS			PS .25
		37-51	RC SAM	fri SSSP					
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____

EVALUATED BY: _____
OTHER(S) PRESENT: _____

123 Ironwood Ct
Mooresville



Bonus room will be designed so that windows do not meet egress requirements for a bedroom

PRELIMINARY DRAWINGS NOT FOR CONSTRUCTION

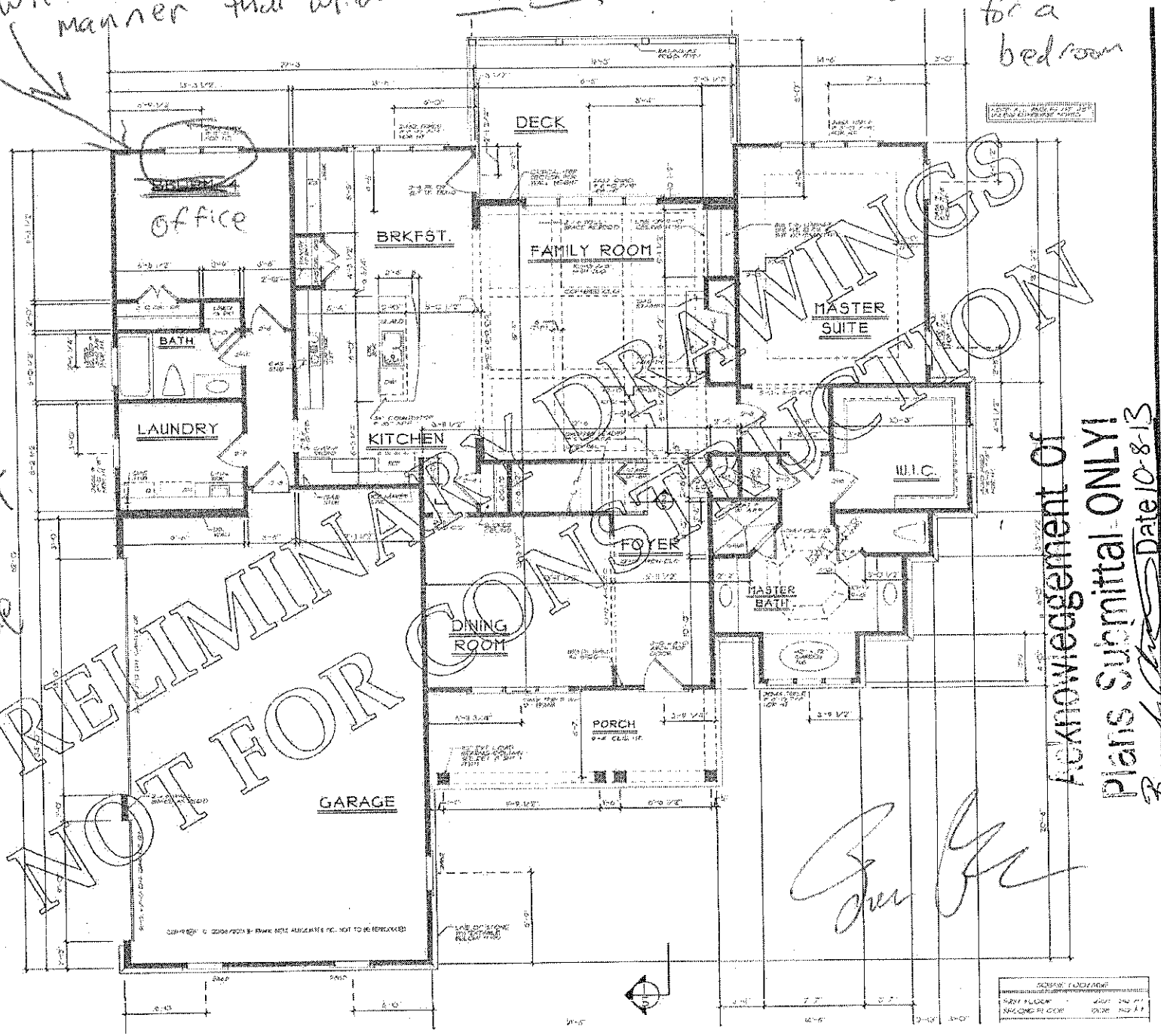
Acknowledgement Of Plans Submittal ONLY!

Date 10-8-13

Date 10-8-13

P.2

office will be designed in manner that windows do not meet egress requirements for a bedroom



PRELIMINARY DRAWINGS NOT FOR CONSTRUCTION

Approved as noted
Plans Submittal ONLY!
Date 10-8-13

Date 11-8-13

FRANK

VOTES

FRAMING NOTES

TY AND LIABILI

D3 Ironwood ct Maresville

8.1