IREDELL COUNTY HEALTH DEPARTMENT

THIS PERMIT VOIDS PREVIOUS ISSUED 10-26-01

STATESVILLE 704-878-5305 | MOORESVILLE 704-664-5281

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

PERMIT# 094556 115209 PIN# 4629 64 1771 4629-54-9656 DATE 8-11-03

OWNER OR CONTRACTOR COURTLAND PROPERTIES PHONE: Business 704-363-1622 Home

ADDRESS 8468 QUEENS CT, CATAWBA, NC 28609

LOCATION US 21S, TR PERTH, TR STATE PARK, TL MORRISON FARM RD, TR SUNSET BAY DRIVE, LOT AT END ON LEFT

SUBDIVISION SUNSET BAY BLOCK / SECTION LOT 12 LOT AREA 0.78 ACRES SITE CLASS PS DESIGN FLOW 480 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons: STB 1012 Date 2-3-04

Pump Tank: 1000 Gallons: PI 27 Date 2-17-04

Pump Make: DELLINGER 40 GPM Model ME-100 Serial No.

Nitrification Field: No Fields 1 Square Feet EQ. TO 1600 Linear Feet 270

No Lines THREE Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth 24" SAND

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

System Description 50% REDUCTION, LOW-PRESSURE

Repair System Description: 50% REDUCTION, LOW-PRESS

Maintenance Agreement Required: ☑ Yes ☐ No

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

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees

☐ Other

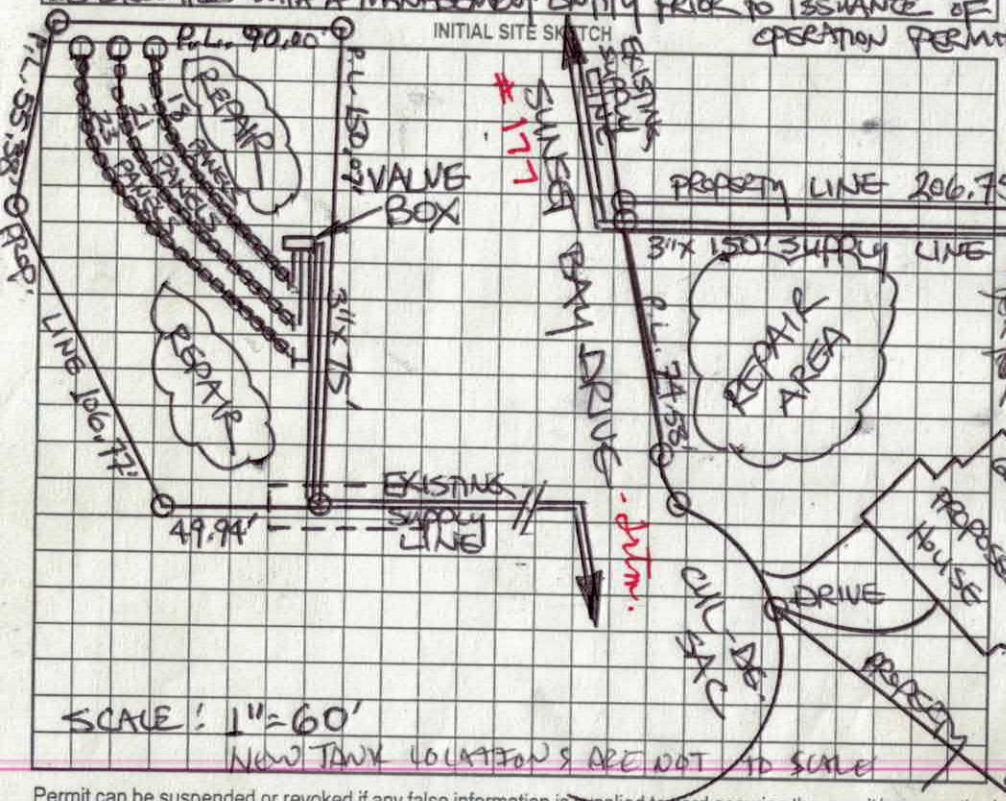
Water Supply: ☐ Individual ☐ Public ☑ Community

Comments/Conditions: INSTALL 50% REDUCTION SYSTEM IN THREE LINES ON CONTOUR AS FLAGGED USING 62 PPBPS PANELS, SEE ATTACHED SHEETS FOR PUMP & PRESSURE DISTRIBUTION. A CONTRACT SHALL BE EXECUTED WITH A MANAGEMENT ENTITY PRIOR TO ISSUANCE OF OPERATION PERMIT.

Comments/Conditions: ① ZABEL FILTER + MARKER B2/92/97

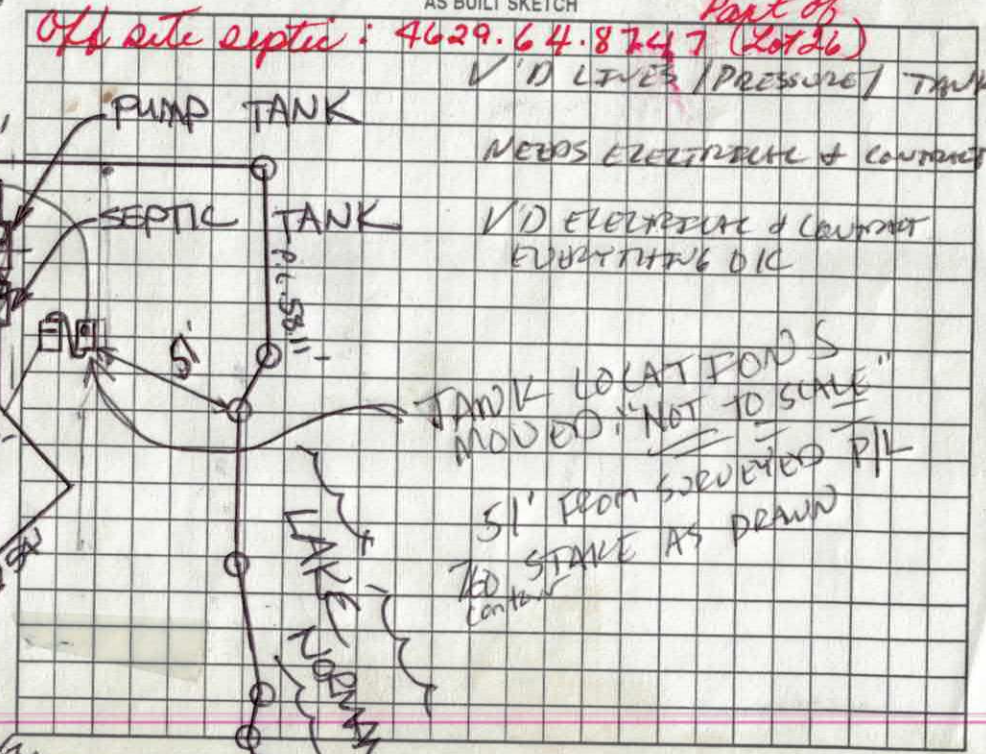
SUPPLY LINE NOT V'D BY HEALTH DEPT. INSTALLED PRIOR TO INSTALLATIONS OF ROADS.

INITIAL SITE SKETCH



AS BUILT SKETCH

Off site septic: 4629.64.8747 (Lot 26) Part of



V'D LINES / PRESSURE / TANKS

NEEDS ELECTRICAL & CONTRACT

V'D ELECTRICAL & CONTRACT EVERYTHING OK

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: _____ date 8-12-03

Improvement Permit by: STEVE HEDRICK date 8-11-03

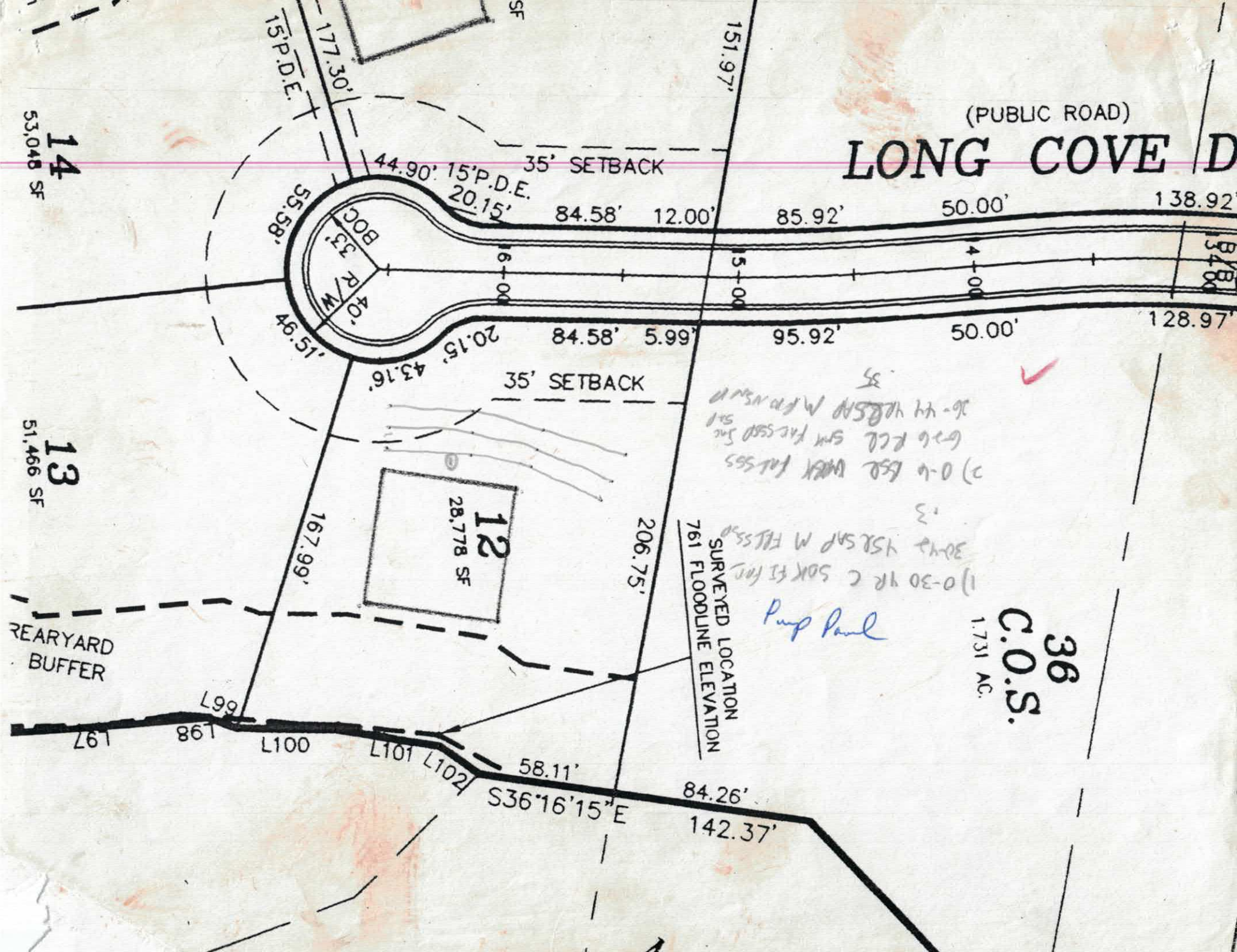
Authorization to Construct by: STEVE HEDRICK date 8-12-03

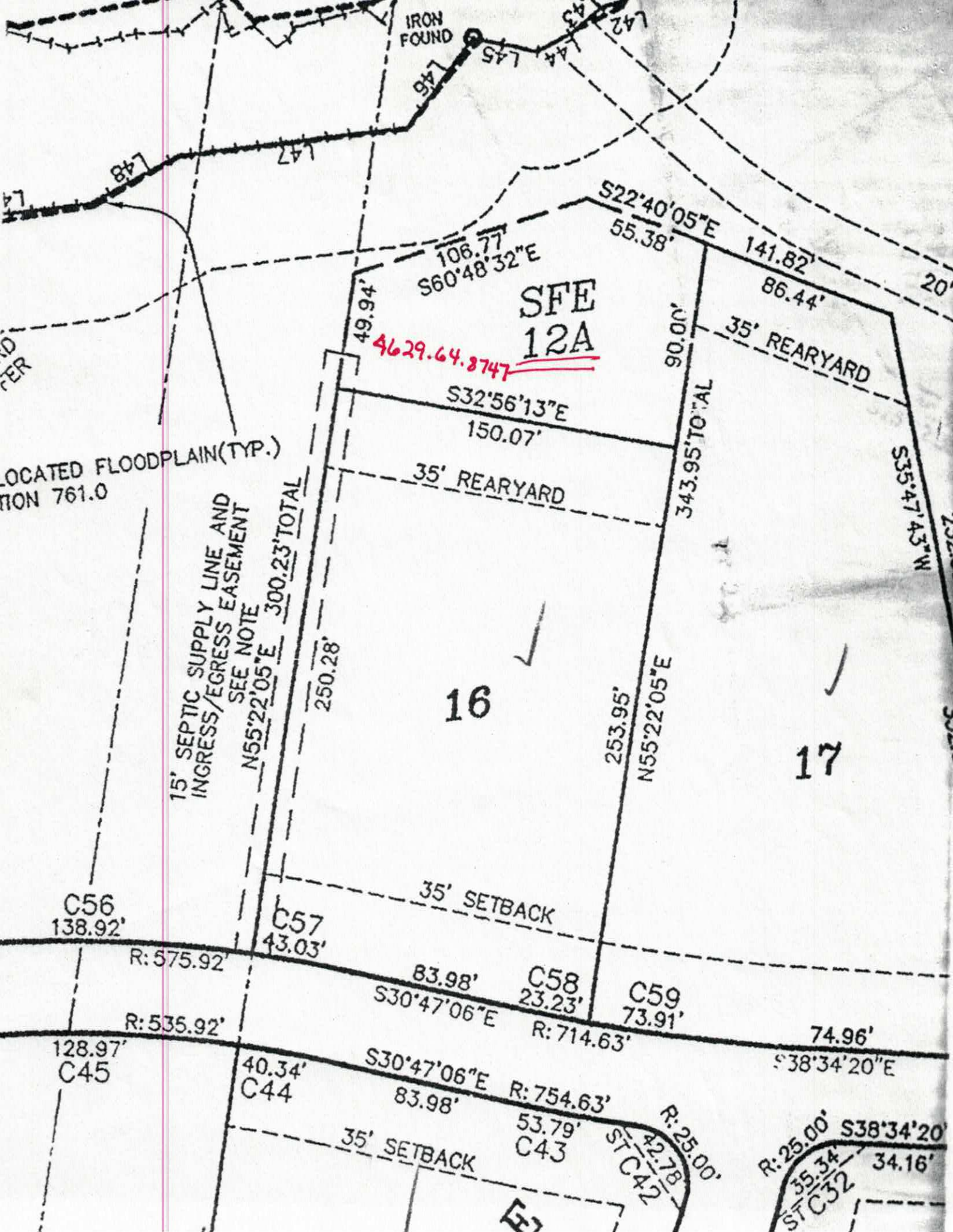
Installed by: STANLEY SEPTIC SERVICE

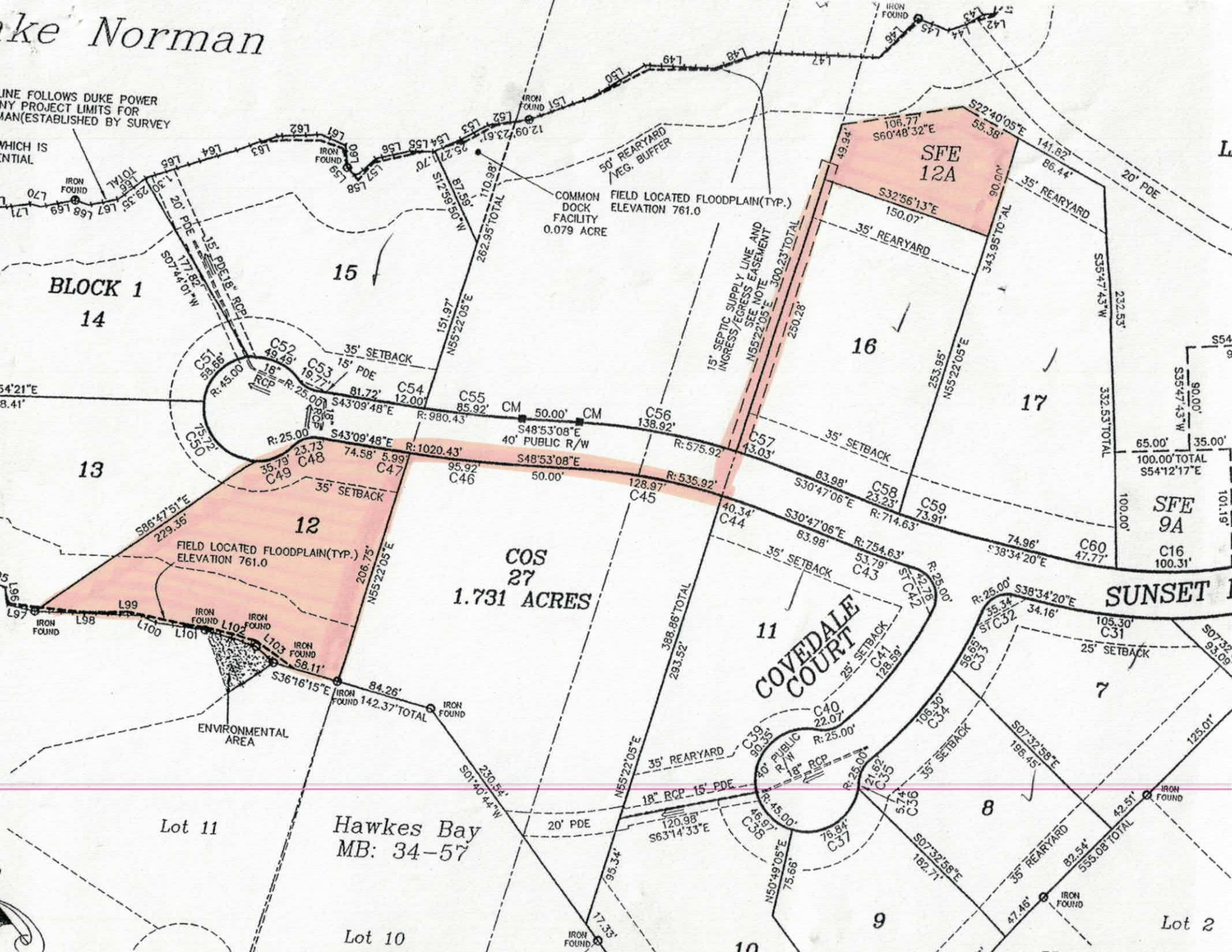
Operation Permit by: _____ date 4-13-04

Existing System Inspection by: _____ date _____

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


(PUBLIC ROAD)
LONG COVE D
14
53,048 SF
13
51,466 SF
12
28,778 SF
36
C.O.S.
1.731 AC.
35' SETBACK
35' SETBACK
15'P.D.E.
44.90'
15'P.D.E.
20.15'
177.30'
151.97'
55.58'
BOC
33'
R
40'
W
46.51'
20.15'
43.16'
84.58'
12.00'
85.92'
50.00'
138.92'
84.58'
5.99'
95.92'
50.00'
128.97'
167.99'
206.75'
REARYARD
BUFFER
SURVEYED LOCATION
761 FLOODLINE ELEVATION
L99
L61
86'
L100
L101
L102
58.11'
S36°16'15"E
84.26'
142.37'


IRON FOUND
L42
L43
L44
L45
L46
L47
L48
S22°40'05"E
55.38'
141.82'
86.44'
106.77
S60°48'32"E
49.94'
SFE
12A
4629.64.8747
90.00'
35' REARYARD
S32°56'13"E
150.07'
343.95'TOTAL
S35°47'43"W
LOCATED FLOODPLAIN(TYP.)
TION 761.0
35' REARYARD
15' SEPTIC SUPPLY LINE AND INGRESS/EGRESS EASEMENT SEE NOTE
N55°22'05"E 300.23'TOTAL
250.28'
253.95'
N55°22'05"E
16
17
35' SETBACK
C56
138.92'
R:575.92'
C57
43.03'
83.98'
C58
23.23'
C59
73.91'
74.96'
S38°34'20"E
S30°47'06"E
R:714.63'
R:535.92'
128.97'
C45
40.34'
C44
S30°47'06"E R:754.63'
83.98'
53.79'
C43
R:25.00'
ST C41
42.78'
R:25.00' S38°34'20"
34.16'
ST C32
35.34'
35' SETBACK

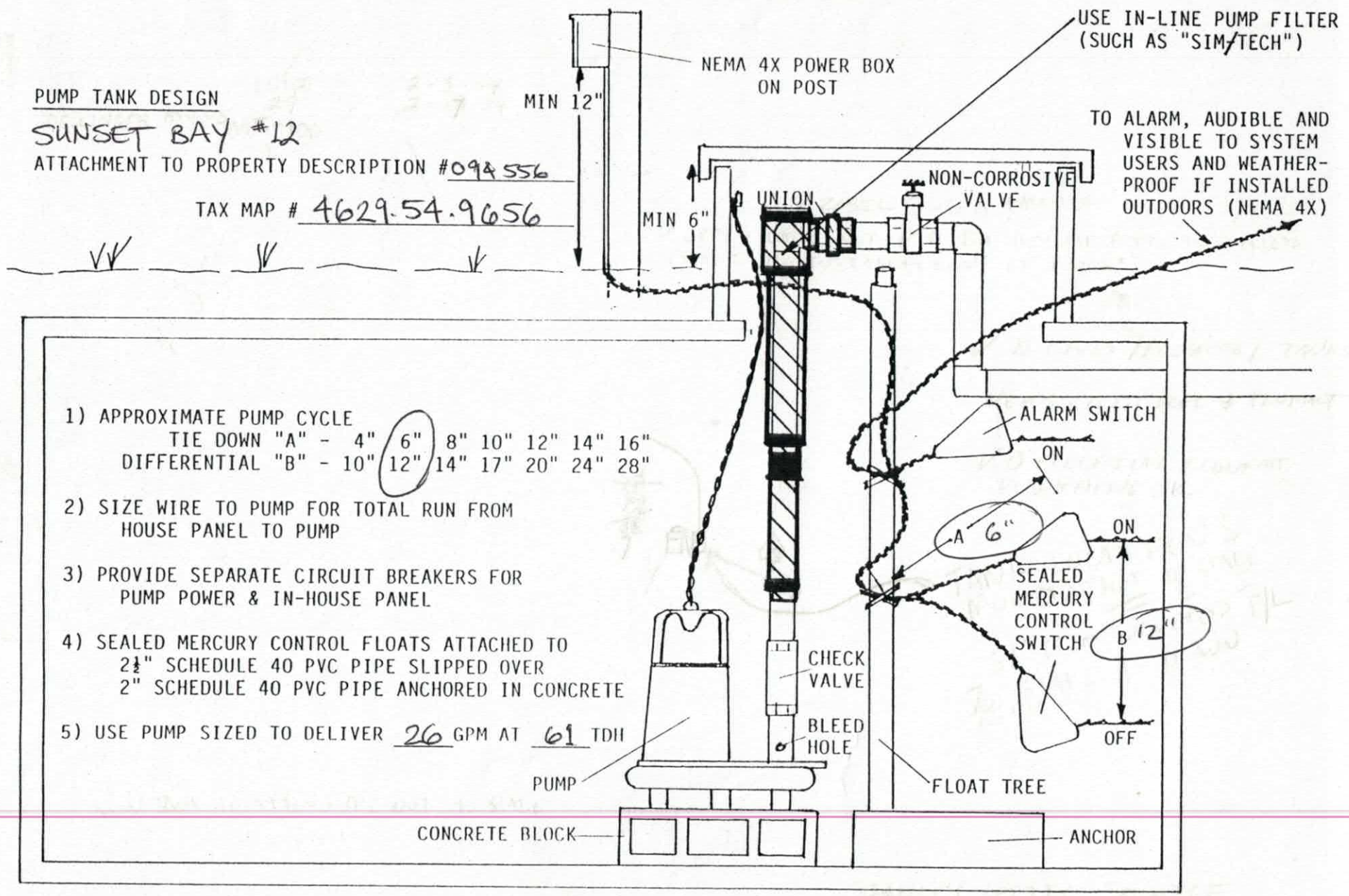

ke Norman
LINE FOLLOWS DUKE POWER
NY PROJECT LIMITS FOR
MAN(ESTABLISHED BY SURVEY
WHICH IS
NTIAL
IRON FOUND
BLOCK 1
14
15
16
17
13
12
11
7
8
9
10
SFE
12A
SFE
9A
COS
27
1.731 ACRES
COVEDALE
COURT
SUNSET
COMMON
DOCK
FACILITY
0.079 ACRE
FIELD LOCATED FLOODPLAIN(TYP.)
ELEVATION 761.0
50' REARYARD
/VEG. BUFFER
15' SEPTIC SUPPLY LINE AND
INGRESS/EGRESS EASEMENT
SEE NOTE
35' SETBACK
35' REARYARD
25' SETBACK
20' PDE
15' PDE/18" RCP
18" RCP
40' PUBLIC R/W
ENVIRONMENTAL
AREA
Lot 11
Hawkes Bay
MB: 34-57
Lot 10
Lot 2
262.95' TOTAL
388.86' TOTAL
343.95' TOTAL
332.53' TOTAL
555.08' TOTAL
142.37' TOTAL
S12°59'50"W
S07°44'01"W
N55°22'05"E
S43°09'48"E
S48°53'08"E
S30°47'06"E
S38°34'20"E
S07°32'58"E
S01°40'44"W
S36°16'15"E
S86°47'51"E
S22°40'05"E
S32°56'13"E
S35°47'43"W
S54°12'17"E
S63°14'33"E
N50°49'05"E
S60°48'32"E
100.00' TOTAL
65.00'
35.00'
90.00'
R:25.00
R:45.00
R:980.43'
R:1020.43'
R:575.92
R:535.92'
R:714.63'
R:754.63'

PUMP TANK DESIGN

SUNSET BAY #12

ATTACHMENT TO PROPERTY DESCRIPTION #094556

TAX MAP # 4629.54.9656



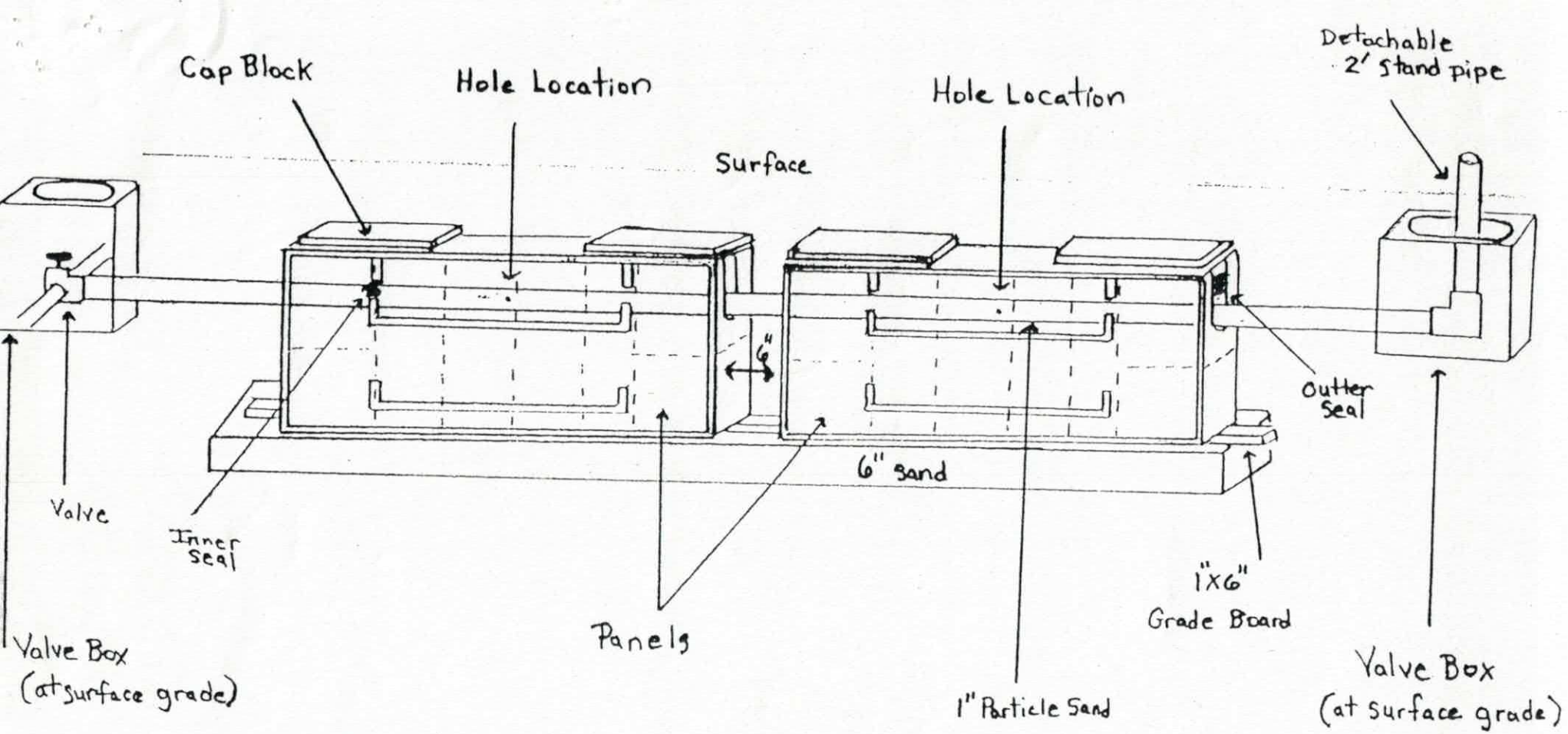
1) APPROXIMATE PUMP CYCLE
   TIE DOWN "A" - 4" (6") 8" 10" 12" 14" 16"
   DIFFERENTIAL "B" - 10" (12") 14" 17" 20" 24" 28"

2) SIZE WIRE TO PUMP FOR TOTAL RUN FROM HOUSE PANEL TO PUMP

3) PROVIDE SEPARATE CIRCUIT BREAKERS FOR PUMP POWER & IN-HOUSE PANEL

4) SEALED MERCURY CONTROL FLOATS ATTACHED TO 2½" SCHEDULE 40 PVC PIPE SLIPPED OVER 2" SCHEDULE 40 PVC PIPE ANCHORED IN CONCRETE

5) USE PUMP SIZED TO DELIVER 26 GPM AT 61 TDH



SUNSET BAY #12
PIN # 4629-54-9656 PD#094556

Pressure Dosed PPBPS

# of panels 62.
Size holes 5/32". 1 hole per panel.
Approximate amount of sand needed 48 TONS
100lbs. of partical sand per 8 panels.
Sidewalls raked and limed.
GPM 26.
TDH 61.

Comments

SCOUR TRENCH SIDEWALLS & APPLY A DUSTING OF LIME PRIOR TO INSTALLING SAND & PANELS

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:

Applicant	Phone #	Mailing Address	City	State	Zip Code
COURTLAND PROPERTIES	704-363 1622	8468 QUEENS CT CATAWBA	NC	~~SC~~ NC	28609
Current Property Owner		Mailing Address	City	State	Zip Code

PROPERTY INFORMATION:

(Proposed) Subdivision Name	(Proposed) Lot #	(Proposed) Block/Section #	State Road #
SUNSET BAY	12		

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

Specific Directions to Property _____

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

House V Mobile Home _____ Commercial _____ No. Bedrooms 4 No. Baths 3.5

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

Crawl Space _____ 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.

8-12-03 DATE _____ SIGNATURE OF OWNER/AUTHORIZED AGENT

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:

Applicant	Phone #	Mailing Address	City	State	Zip Code
PROVIDENT DEV. GR.	663-6905	6707 FAIRVIEW SUITE B	CHAR	N.C.	28210
Same					
Current Property Owner		Mailing Address	City	State	Zip Code

PROPERTY INFORMATION:

(Proposed) Subdivision Name	(Proposed) Lot #	(Proposed) Block/Section #	State Road #
~~Long Cove~~ SUNSET BAY	12		

(Proposed) Water Supply: Public, Private Well	**Preliminary Plat Approval Date** (DEVELOPERS ONLY)	Tax Map #
Comm WELL		4629-64-1771

Specific Directions to Property 150 W → Perth → STATE Park → (L) Morrison → (R) on Long Cove Dr. + go to the end of the cul-de-sac and lot 12 is on the left.

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 X Basement with Plumbing _____

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

COVENANT AND SIGNATURE:

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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.

2-22-2001 DATE M. Allen SIGNATURE OF OWNER/AUTHORIZED AGENT

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 325.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 094556 PIN# 4629641771 DATE 10/26/01

OWNER OR CONTRACTOR PROVIDENCE DEV. GROUP PHONE: Business 663-6905 Home

ADDRESS 6707 FAIRVIEW RD - CHARLOTTE N.C. 28210

LOCATION STATE PARK - TL MORRISON FARM - TR SUNSET BAY - AT END OF LT.

SUBDIVISION SUNSET BAY BLOCK / SECTION LOT 12 LOT AREA SITE CLASS. RS DESIGN FLOW 480GPD L.T.A.R. .36 LTAR/FT

Septic Tank: 1000 Gallons; STB Date

Pump Tank: 1000 Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 540 Linear Feet 270

No Lines 3@90 Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: LPP PANEL

Repair System Description: SAME OFFSITE

Maintenance Agreement Required: ☑ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees

☐ Other

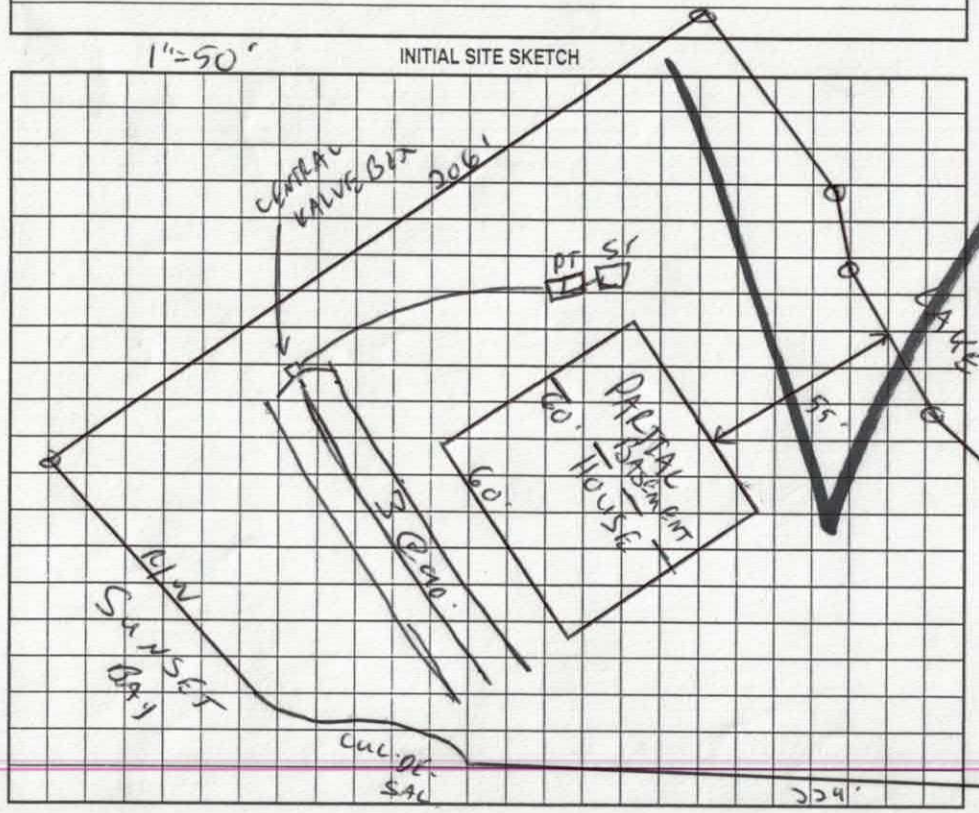
☐ Slab ☑ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☑ Community

Comments/Conditions:

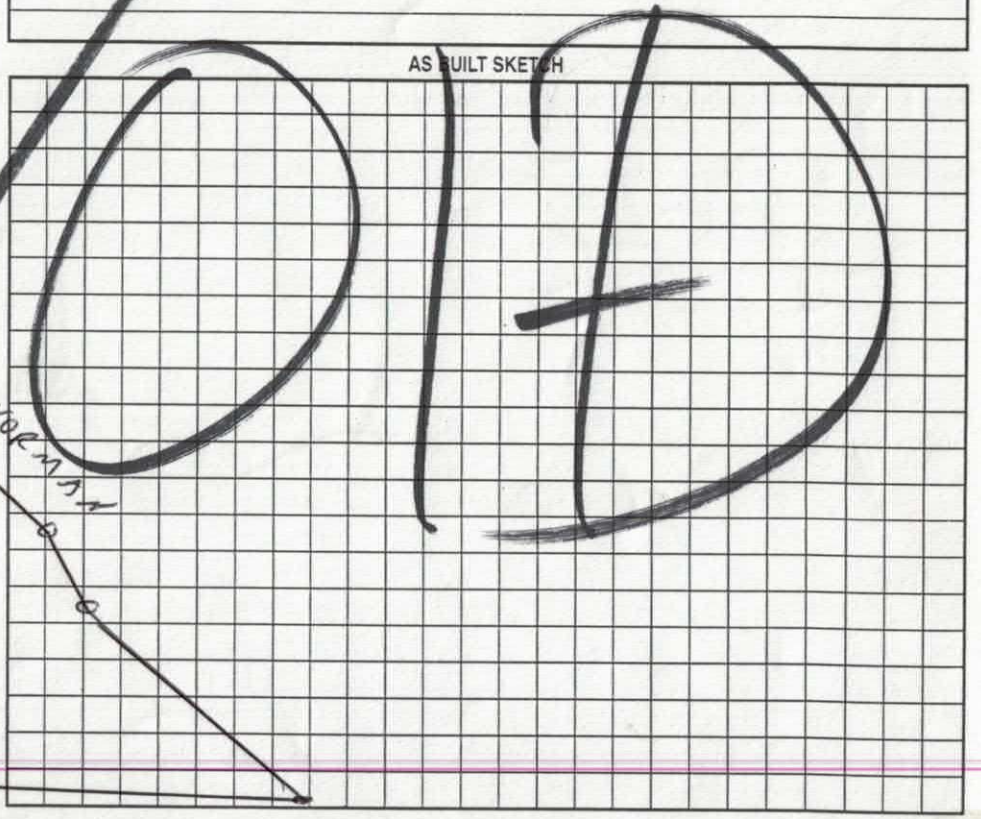
1"=50'

INITIAL SITE SKETCH



Comments/Conditions:

AS BUILT SKETCH



VOID

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.

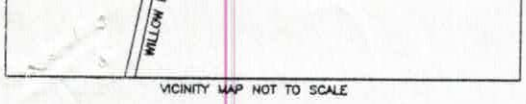
Signed: date 10-30-01 Installed by:

Improvement Permit by: C. [illegible] S date 10/26/01 Operation Permit by: date

Authorization to Construct by: date Existing System Inspection by: date

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

C1	1020.43	5.99	S43°19'53"E	5.99
C2	25.00	23.73	N70°21'21"W	22.85
C3	45.00	35.79	S74°45'10"E	34.85



VICINITY MAP NOT TO SCALE

LAKE NORMAN

L1 L3 L7 L2 L6 L5 L4

SUNSET BAY
MAP 39, PAGE 53
COS 27

S 55°22'05" W 206.75'

LOT 12
0.78 ACRES

50.69

50' SETBACK

15' SETBACK

69.87

79.16

PROPOSED HOUSE

27.41

35.00

14.50

4.00

11.50

8.50

24.84

60.09

30.33

S 86°47'51" E 229.36'

15' SETBACK

DRIVE

SEPTIC

35' SETBACK

35.72

LOT 13

C3

C2

C1 N 43°09'48" W 74.58'

SUNSET BAY DRIVE
A 40' PUBLIC R/W

R/W

R/W

PRELIMINARY PLAT
NOT FOR RECORDATION
CONVEYANCES, OR SALE

REF: MAP 39, PAGE 133

LEGEND
E.I.R. = EXISTING IRON ROD(#4 REBAR)
SQ.FT. = SQUARE FEET
PDE. = PUBLIC DRAINAGE EASEMENT
R/W = RIGHT-OF-WAY

* OR USE OFF SITE AS PRIMARY *

PLOT PLAN OF:
LOT 12 SUNSET BAY

DAVIDSON TOWNSHIP, IREDELL COUNTY
NORTH CAROLINA
COURTLAND PROPERTIES

PREPARED FOR _____

SCALE 1"=40'

MAP BOOK 39 PAGE 133

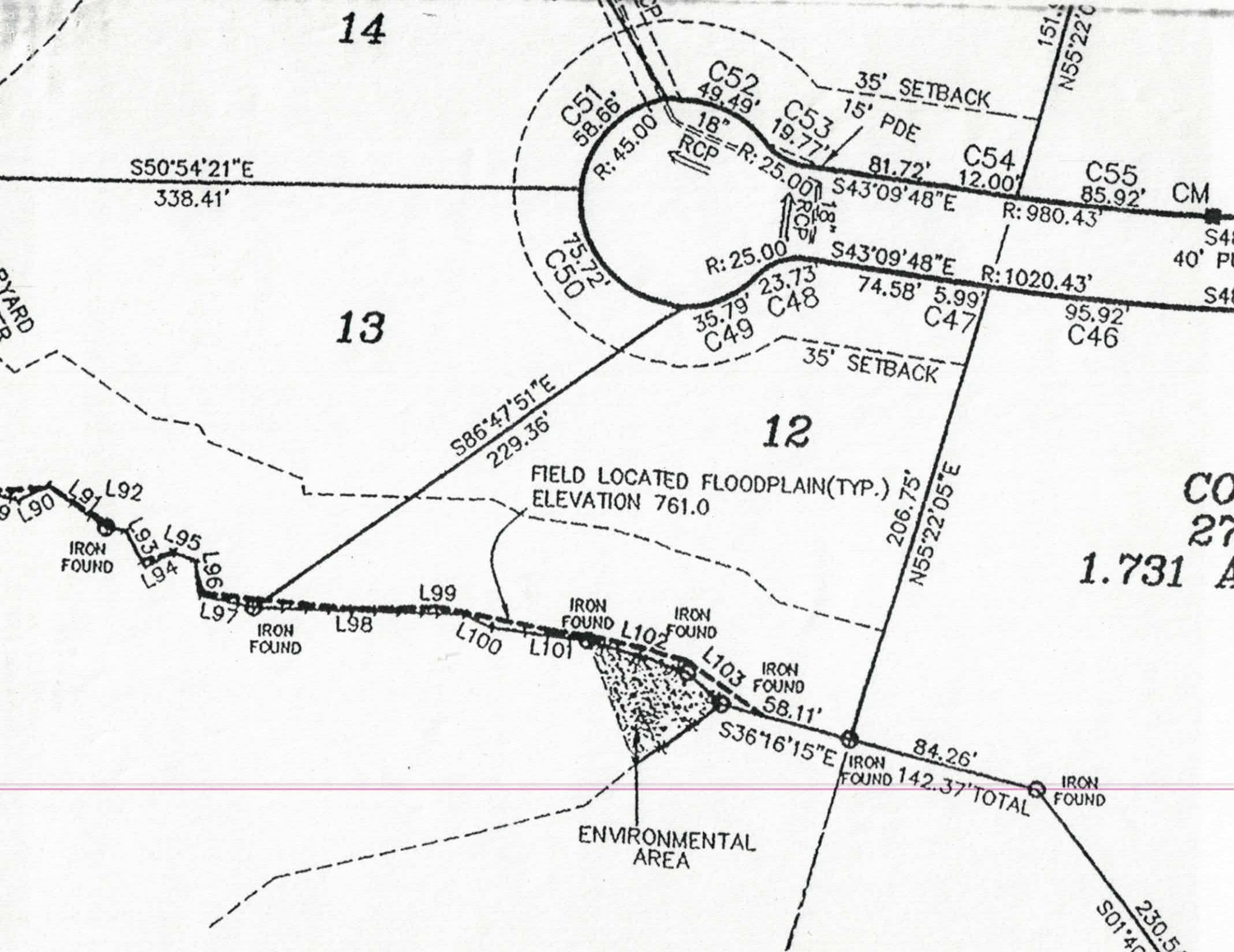
DEED BOOK _____ PAGE _____

PARCEL #4629 54 9656

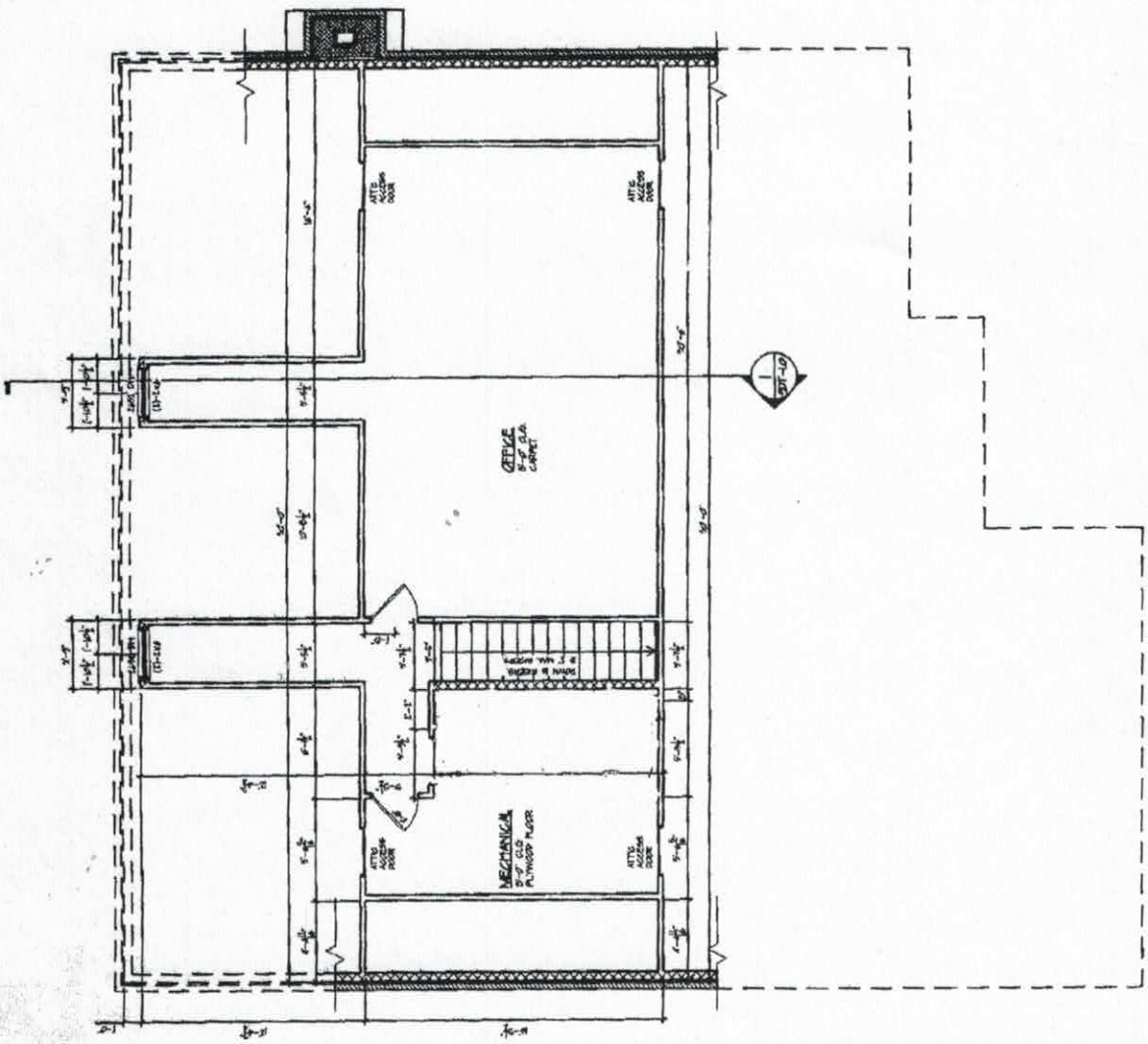
FLOOD CERTIFICATION

THIS IS TO CERTIFY THAT THE SUBJECT PROPERTY IN AND OUT LOCATED IN A SPECIAL FLOOD HAZARD AREA AS SHOWN ON MAPS PREPARED BY THE FEDERAL EMERGENCY MANAGEMENT AGENCY, FEDERAL INSURANCE ADMINISTRATION, DATED PANEL 370313-0150-C
06-22-98

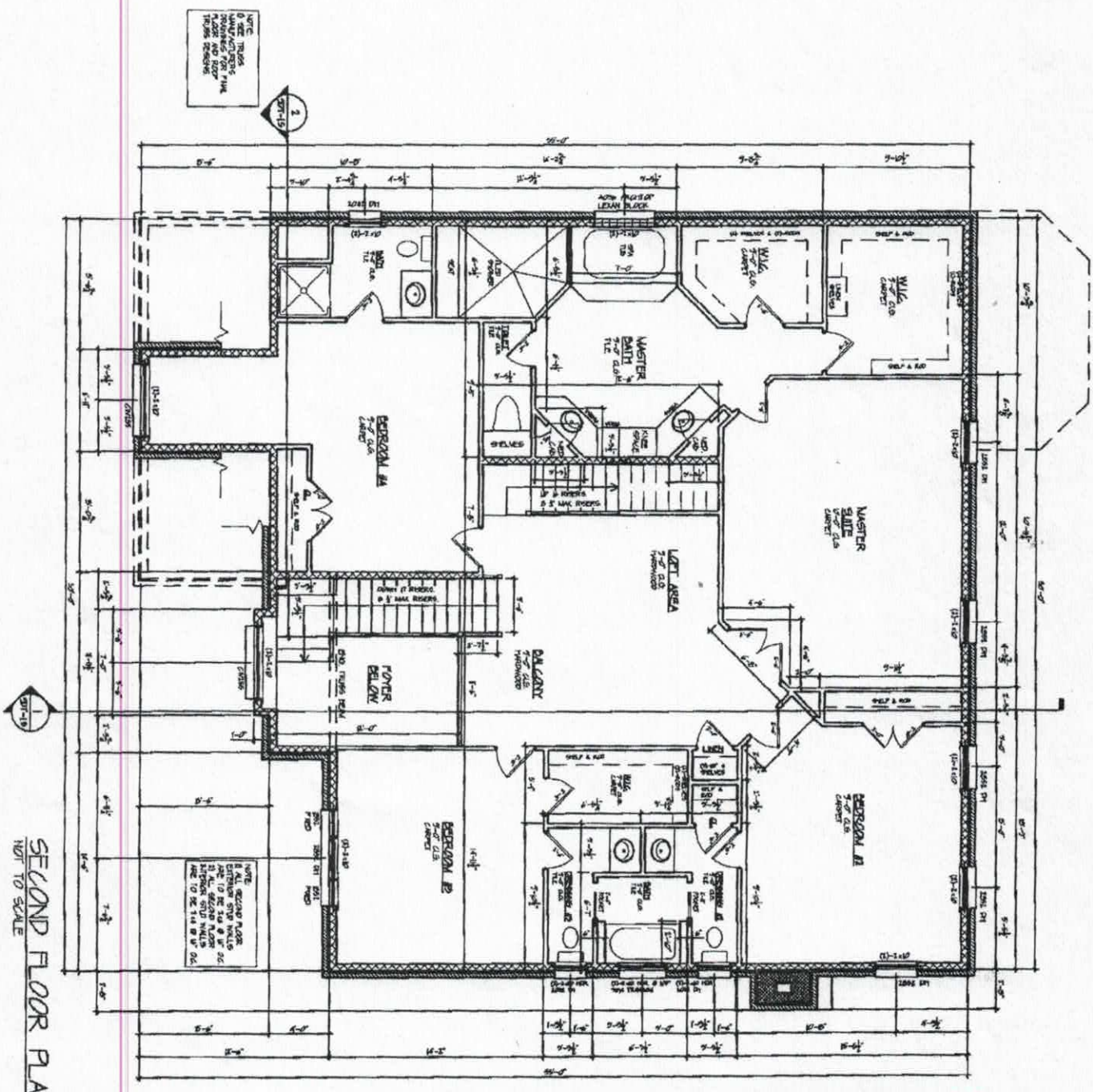
59250


14
13
12
C51
58.66'
R: 45.00'
C52
49.49'
C53
19.77'
35' SETBACK
15' PDE
18" RCP
R: 25.00'
81.72'
C54
12.00'
C55
85.92'
CM
R: 980.43'
S43°09'48"E
S50°54'21"E
338.41'
C50
75.72'
R: 25.00'
S43°09'48"E
R: 1020.43'
74.58'
5.99'
C47
95.92'
C46
23.73'
C48
35.79'
C49
35' SETBACK
S86°47'51"E
229.36'
FIELD LOCATED FLOODPLAIN(TYP.)
ELEVATION 761.0
206.75'
N55°22'05"E
L90
L91
L92
L93
L94
L95
L96
L97
L98
L99
L100
L101
L102
L103
IRON FOUND
IRON FOUND
IRON FOUND
IRON FOUND
IRON FOUND
58.11'
S36°16'15"E
84.26'
142.37' TOTAL
ENVIRONMENTAL AREA
1.731 A

Acknowledgement Of
Plans Submittal ONLY!
Steve Hamrick Date 8-12-03
Date 8-12-03



OPTIONAL OFFICE IN ATTIC TRUSSES
NOT TO SCALE



SECOND FLOOR PLAN
NOT TO SCALE

Acknowledgement Of Plans Submittal ONLY!

STEVE HEDRICK Date 8-12-03

Date 8-12-03

FIRST FLOOR W/ OPT. BASEMENT
NOT TO SCALE

Acknowledgement Of
Plans Submittal ONLY!

STEVE HEDRICK Date 8-12-03

Date 8-12-03

UNFINISHED
BASEMENT FLOOR PLAN
NOT TO SCALE

Acknowledgement Of
Plans Submittal ONLY!

STEVE HEDRICK Date 8-12-03

Date 8-12-03

IREDELL COUNTY
PROPERTY DESCRIPTION FORM
P.O. BOX 788 277 S. CENTER ST.
STATESVILLE, NC 28687
Call Sanitarian Between
8 a.m. and 9 a.m.
664-5281 / 878-5305

Permit No: 094556 Zoning Permit: X Improvements Permit: 1

Name: PROVIDENCE DEV Address: 6707 FAIRVIEW RD

City: CHARLOTTE State: NC Zip: 282100000

Phone: 7046636905

Proposed Use: 01

PIN #: 4629 64 1771 Zoning: R20 Township: 1700

Street Address: LONG COVE DR

Flood Zone: Plan Review Deposit: Date Received: / /

Subdivision/MHP: ~~LONG COVE~~ SUNSET DAY Lot #: 12 Lot Size: 28778

Has Property been recorded? Y Community Water? N Sewer? N

Provider:

Watershed: WSIVCA Approximate Area to be Disturbed: 0

Total Built-upon Area: 0 Erosion Plan Required?

Setbacks: F35 S15 R35 L50

Minimum Lot Size: 25000 Minimum Lot Width: 100

Land Use Permitted in this Zoning District? Y

Comments:

Hold Building Permits? Y Reason: PLAT NOT RECORDED

Location: PERTH,R STATE PARK,L MORRISON FARM,R LONG COVE

Staff: SBW Date: 02/08/01

Fees: Zoning: $ 31.50 Health: $ 175.00

Signature of Applicant:_____
Owner: Agent: