IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 236684

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

PIN # 4629-65-1585 3436

APPLICANT/OWNER: John Whitley APPLICANT ADDRESS: 119 - I Steinbeck Way Mooresville, NC 28177

SITE ADDRESS: 108 116 Farley Lane Troutman NC 28166 PHONE: 704-660-3978 ALT. PHONE 704-658-9251

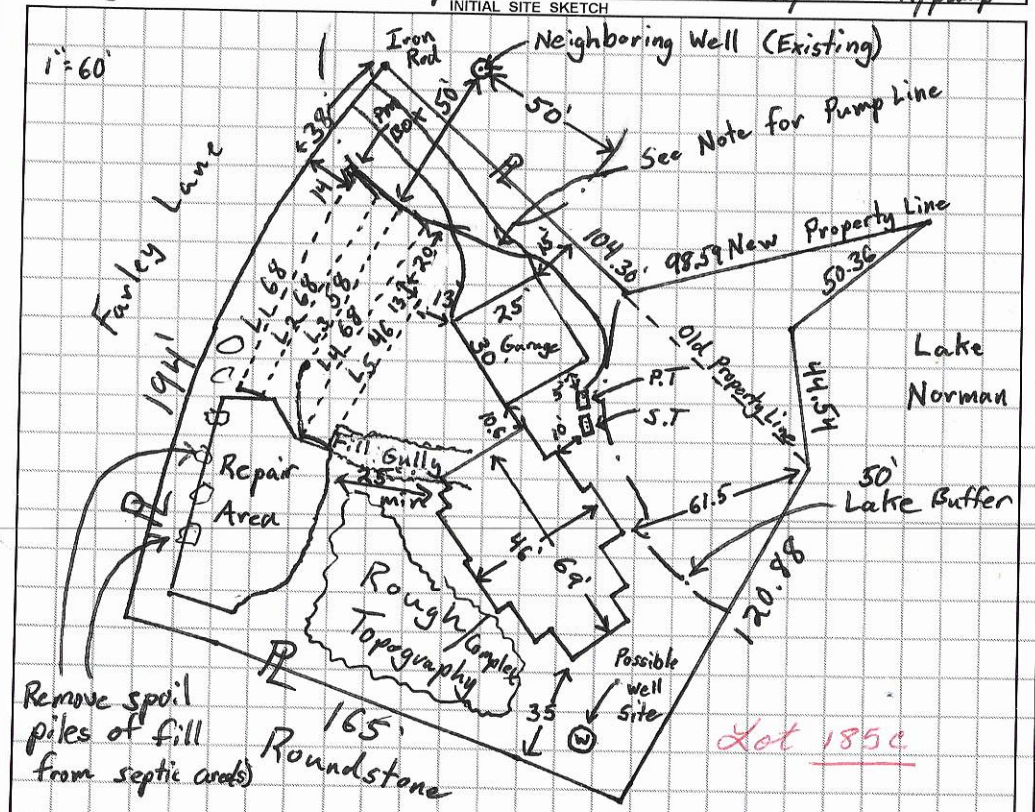
SITE DIRECTIONS: Perth Rd N from Rt 150 → L on State Park → L on Morrison Farm → R on Roundstone → R on Farley → on right SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: CL+T SECTION: 17 LOT # 186+185C LOT AREA: 0.69 acres DESIGN FLOW: 360 GPD L.T.A.R.: 0.30

Septic Tank	1000	(gal)	STB	Infiltrator	Date	Plastk	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms	3	Water Supply
Pump Tank	1000	(gal)	PT	Infiltrator	Date	Plastk	System Description: PM-25% Reduction				☐ Business	No. Persons	6	☒ Private
Pump Make	Liberty	Model	½ HP 280		Serial #		Repair System Description: 50% Reduction CLP-PPBPS)				☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	5 (2 taps)		Linear Ft	308	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☐ Crawl Space		☐ Community
Trench Width	36"	Trench Bottom Depth (Low side)		19"	Gravel Depth	—		☐ GRAVITY	☒ PRESSURE		☒ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions: Where pump line crosses driveway, install line at least 30" deep or utilize ductile iron. 50' lake buffer survey stakes must be present at time of septic tank/pump tank inspection. Though 331 l.f. of line has been laid out, only 308 need be installed as shown on the drawing. Spare area to be set aside for future repair area. Recommend pumping tank every 5 years.

INITIAL SITE SKETCH



AS BUILT SKETCH

Tap Sizing (2 Taps)

$L_1 + L_2$ = ¾" SCH 80 } serial connect @ distal ends of

$L_3 + L_4 + L_5$ = ¾" SCH 40 } drainfield lines. Set floats to dose field no more than 200 gallons/pumping event

* Prior to AC issuance, a copy of the recorded plat (with deed book and page number) must be provided to ICHD matching this information. *

*deed book 09 pg 08

1/16/19: Floorplans slightly larger than I.P. house box. House consequently to be built @ location shown on Survey Plat by William Allen (Dated 1/8/19)

Installed as Drawn

186 4-20-0 15-77 #116

185C 4-6-9-65-3436 #108

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: 1/16/19 Installed by: Lago Vista

IMPROVEMENT PERMIT by: Tom Shuck Date: 8/3/2018 OPERATION PERMIT by: [signature] Date: 9-4-2020

AUTHORIZATION TO CONSTRUCT by: Tom Shuck Date: 1/16/2019 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.

DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

PROPERTY ID #: 4629-65-1585
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: John Whitley
APPLICATION DATE: 6/20/18
ADDRESS: 116 Farley Lane Troutman NC
DATE EVALUATED: 7/12/18
PROPOSED FACILITY: 3 BR SFR
PROPOSED DESIGN FLOW (.1949): 3BR SFR
PROPERTY SIZE: 0.69 acres
LOCATION OF SITE: Maple Creek 116 Farley Lane Troutman
PROPERTY RECORDED: No
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	HS 16% slope Primary	0-6	SCL v.w. SBK	Sl. Friable, SS Sp, Ssxp		39"			0.325 PS
		6-24	Clay w-m SBK/ABK	Sl. Firm, Sticky Sp, Ssxp					
		24-39	Clay Loam w. SBK common SAP	Friable, SS, Sp, Ssxp					
		39-65	MA Loamy Saprolite	Very Friable, & well Drained					
2	15% slope LSS Primary	0-13	v. SCL w. SBK	Sl. Friable, SS Sp Ssxp		55"			0.30 PS
		13-155	Clay m. SBK/ABK	Sl. Firm, Sticky Sp, Ssxp					
3	LSS 8% Repair	0-6	SCL v.w. SBK	Sl. Friable, SS Sp Ssxp		56			0.30
		6-28	Clay m. ABK/SBK	Sl. Firm, Sticky Sp, Ssxp					
		28-56	Clay Loam w. SBK	Sl. Friable, SS, Sp, Ssxp					
			Common → Abundant Saprolite						
4	LSS 5% Repair	0-6	Sandy Clay Loam v.w. SBK	Sl. Friable, SS Sp, Ssxp		15"			0.35 PS
		6-15	Clay some SAP w ABK/SBK	Sl. Firm, Sticky Sp, Ssxp					
		15-50	MA Loamy Saprolite	Friable + Well Drained					
		50-67	MA Sandy Saprolite	Very Friable + well Drained					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	331	250+
System Type(s)	25% Reduction	50% Red
Site LTAR	0.30	0.30

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

COMMENTS:

Department of Environment, Health, and Natural Resources
Division of Environmental Health
On-site Wastewater Section

Sheet:
PIN #:
Lot #:
Permit #:
AppID:

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: John Whitley SEE Page 1
Address:
Proposed Facility: Design Flow (.1949)
Location of Site: 116 Farley Lane

Applicant:
Date Evaluated: 4/12/18
Property Size:
Property Recorded:

Water Supply: [ ] Public [X] Individual [X] Well [ ] Spring [ ] Other
Evaluation Method: [X] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [X] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	.1941 Consistence Mineralogy	b PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
5		0-18	Clay w. Artifacts	St Firm Sticky, Sp. Comp		18"			0.40 PS
		18-60	MA Loamy Saprolite	Well Drained / Very Friable					

Description	Initial System	Repair System
Available Space (.1945)		
System Type(s)		
Site LTAR		

Other Factors (.1946):
Soil Evaluation By:
Others Present:
Site Classification (.1948):
Site Evaluation By:
Others Present:

0-8

8-14 clay m. ABH/SBH

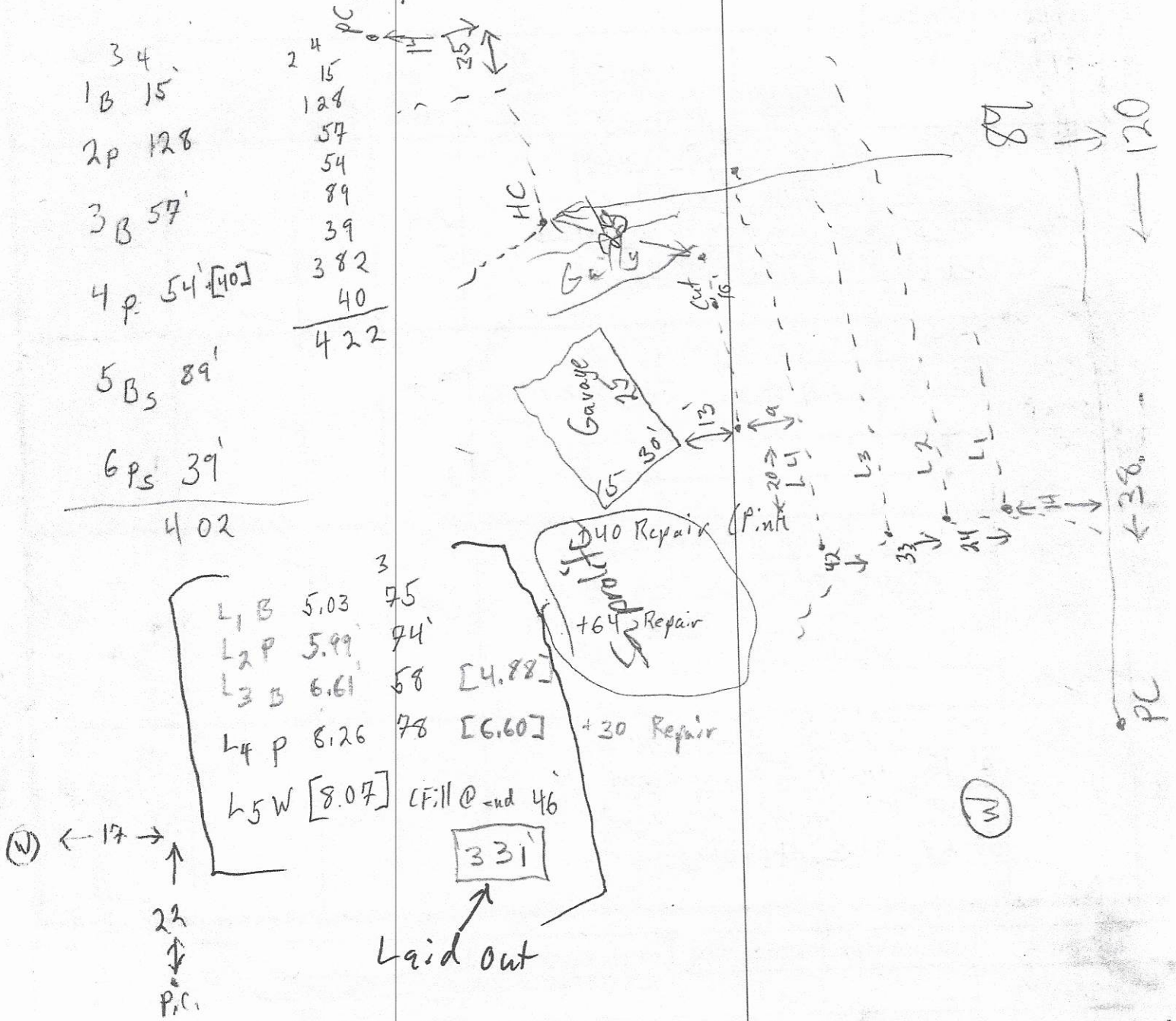
14-32 clay Loam w. SBH

32-60 MA Loamy Saprolite

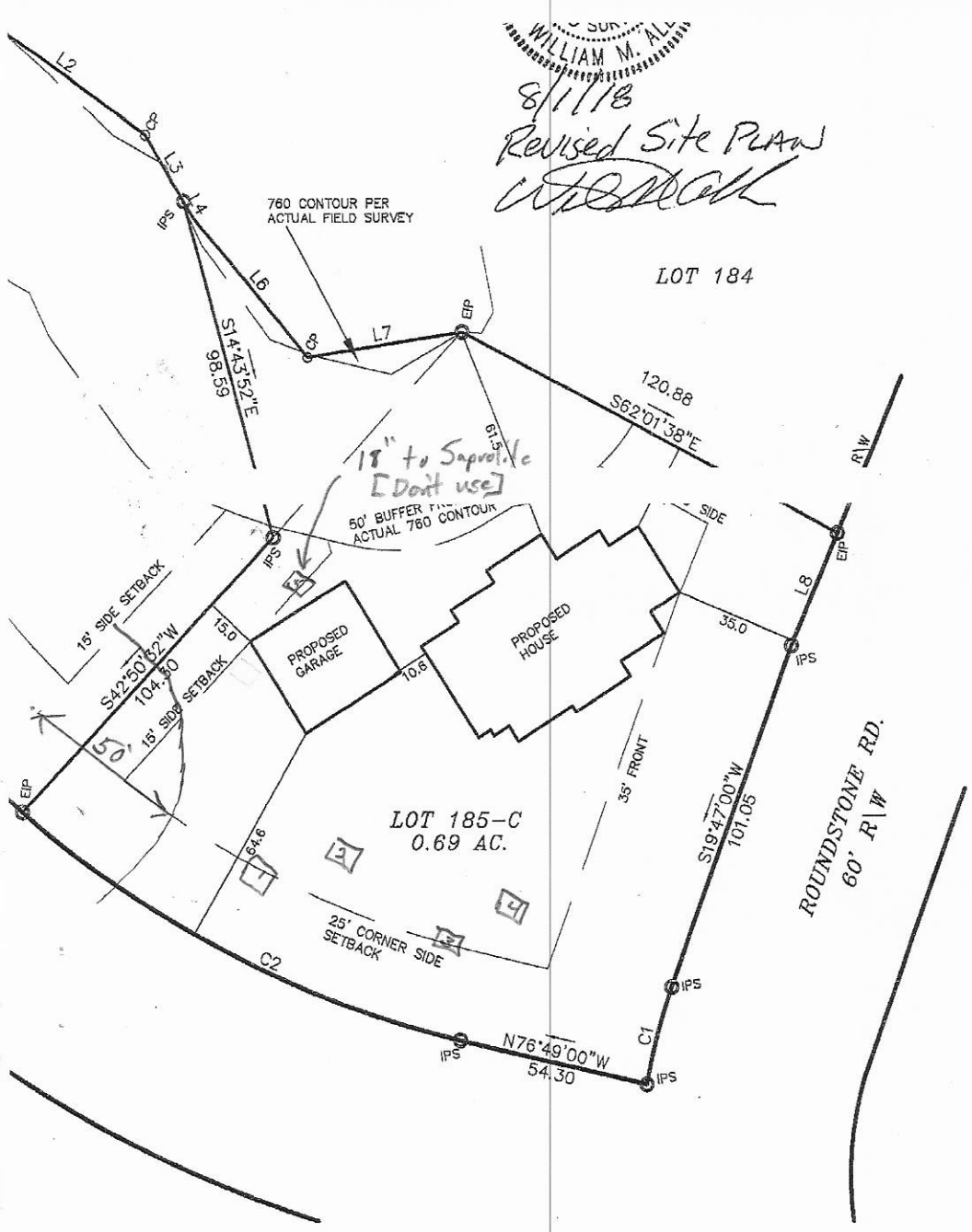
0.30

1 B	15'	
2 P	128	
3 B	57'	
4 P	54' [40]	
5 B_S	89'	
6 P_S	39'	
	402	

2	15
4	128
	57
	54
	89
	39
	382
	40
	422



L_1 B	5.03	75	
L_2 P	5.99	94'	
L_3 B	6.61	58	[4.88]
L_4 P	8.26	78	[6.60]
L_5 W	[8.07]	Fill @ end	46
			331'



☆ Garage moved closer to Pit 5 due to space needs + Saprolite Concerns.

RECEIVED DEC 2 7 2018

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) Septic Improvement Permit (X) 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: (X) 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: John R. Whitley **Address:** 119-I Steinbeck Way, Mrsvl **Zip:** 28117
Applicant Email: jcwhitley@att.net **Phone:** 704-658-9251 **Alt. Phone:** 980-722-0385
Owner Name: Same **Address:** _____ **Zip:** _____
Owner Email: _____ **Phone:** _____ **Alt. Phone:** _____

Property Information:

Street Address: 116 Farley Ln., Troutman, NC 28166
Subdivision Name: N/A CLiST **Section/Phase:** N/A 17 **Lot Number:** 185
Driving Directions: I-77N to Exit 36, L to Perth Rd, R on Perth, L on State Park Rd., L on Morrison Farm Rd., R on Roundstone, Lot on corner of Roundstone & Farley

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

(X) 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: 3
Maximum Number of Occupants: 6
( ) Swimming Pool
( ) Other Addition/Structure: _____
Non-Residential Site Development: Type of Business: _____
Square Footage of Building: _____ Max. Number of Employees: _____ Max. Number of Seats/Beds/Other: _____

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

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: _____
(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: John R. Whitley
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

12/26/2018
DATE

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 (X) Existing System Inspection ( ) Septic System Repair

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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: John Whitley Address: 119-I Steinbeck Way Mooresville, NC Zip: 28117
Applicant Email: jcwhitley@ATT.NET Phone: 704-660-3978 Alt. Phone: 704-658-9251
Owner Name: Boyd P. Falls (Trust) Address: 2024 Middleton Farm Dr Belmont, NC Zip: 28012
Owner Email: _____ Phone: 704-372-8207 Alt. Phone: 704-829-8230

Property Information: 4629651585 & 4629653444

Street Address: 116 Farley Lane, Troutman, NC 28166 (2 Parcels)
Subdivision Name: N/A Section/Phase: _____ Lot Number: 185 & 186
Driving Directions: From Troutman, R on Perth, R on State Park Rd., L on Morrison Farm, R on Roundstone, L on Farley

Site Development Information: *(check or complete ALL that apply* 8/2 JRW **CHECK FOUNDATION TYPE**

(X) New Single Family Residence Maximum Number of Bedrooms: X3 ( ) Crawl Space Foundation
( ) New Multi-Family Residence Maximum Number of Occupants: 3 ( ) Concrete Slab Foundation
( ) Accessory Building ( ) Swimming Pool (X) Basement with Plumbing
( ) Bedroom(s) Addition ( ) Other Addition/Structure: _____ ( ) Basement without Plumbing
( ) 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: _____

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

Please answer the following to the best of your ability:
( ) Yes ( ) 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: John L Whitley 6-20-2018
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

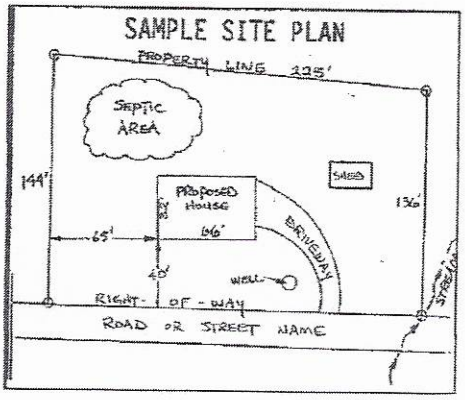
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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 OR WELL PERMIT!!!***

Place an (X) beside each item as you complete the site plan:

( ) Property Line measurements are clearly identified
( ) All proposed structures are indicated
( ) Front and side setbacks from property line
( ) Preferred driveway location
( ) Preferred well location
( ) Preferred septic system location
( ) 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 Survey Plat

Signature: _____
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

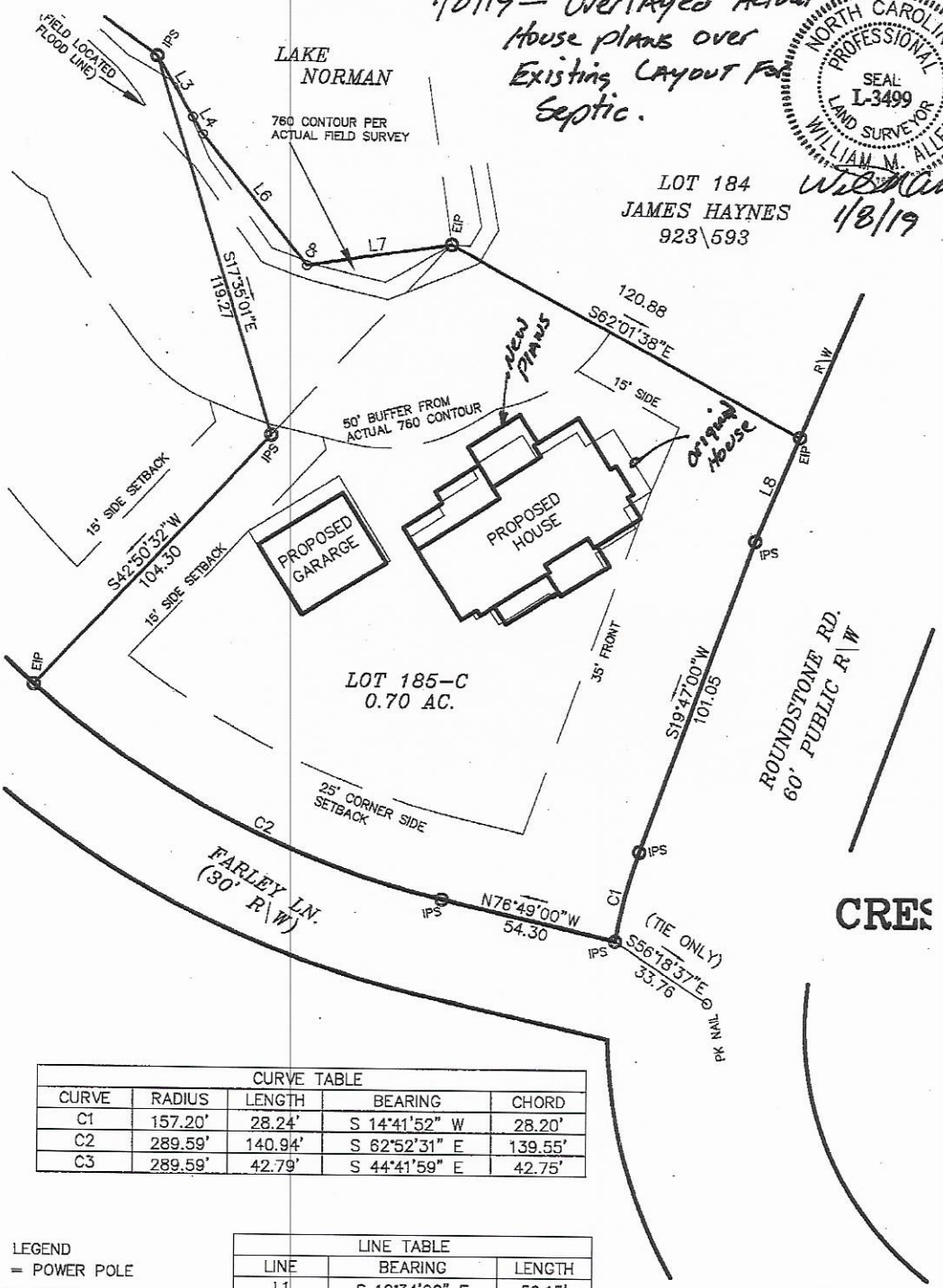
12/26/2018
DATE

1" = 40'

1/8/19 — Overlayed Actual House plans over Existing Layout for Septic.

NORTH CAROLINA PROFESSIONAL SEAL L-3499 LAND SURVEYOR WILLIAM M. ALLEN

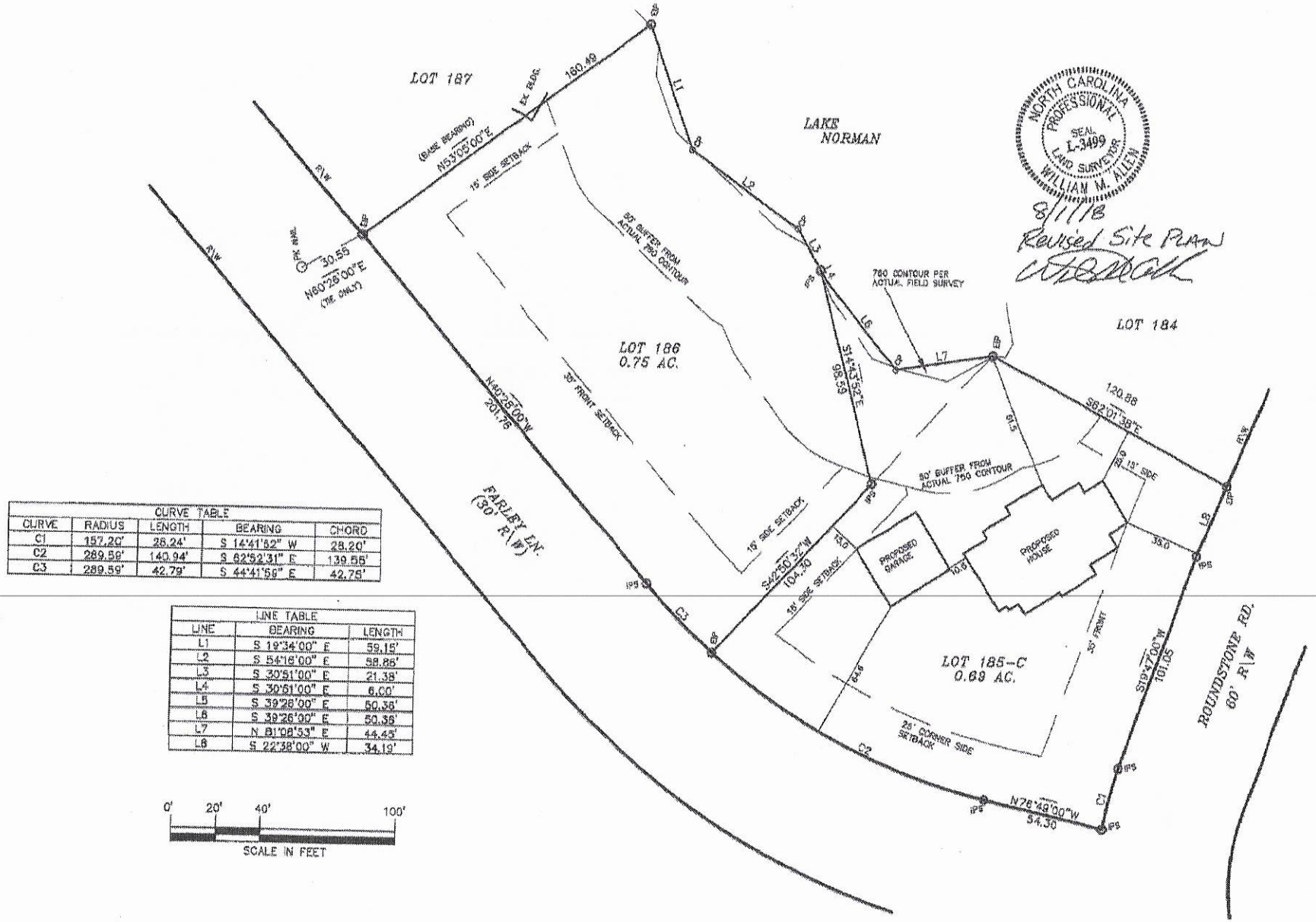
1/8/19



CURVE TABLE				
CURVE	RADIUS	LENGTH	BEARING	CHORD
C1	157.20'	28.24'	S 14°41'52" W	28.20'
C2	289.59'	140.94'	S 62°52'31" E	139.55'
C3	289.59'	42.79'	S 44°41'59" E	42.75'

LEGEND
= POWER POLE
/ER TRANS.
STING IRON FOUND
REBAR SET
HT-OF-WAY
PUTED POINT

LINE TABLE		
LINE	BEARING	LENGTH
L1	S 19°34'00" E	59.15'
L2	S 54°16'00" E	58.86'
L3	S 30°51'00" E	21.38'
L4	S 30°51'00" E	6.00'
L6	S 39°26'00" E	50.36'
L7	N 81°08'53" E	44.45'
L8	S 22°38'00" W	34.19'



NORTH CAROLINA PROFESSIONAL SEAL L-3499 LAND SURVEYOR WILLIAM M. ALLEN

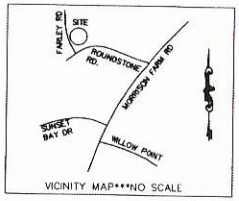
8/1/18
Revised Site Plan

CURVE TABLE				
CURVE	RADIUS	LENGTH	BEARING	CHORD
C1	157.20'	28.24'	S 14°41'52" W	28.20'
C2	289.59'	140.94'	S 62°52'31" E	139.56'
C3	289.59'	42.79'	S 44°41'56" E	42.75'

LINE TABLE		
LINE	BEARING	LENGTH
L1	S 19°34'00" E	59.15'
L2	S 54°16'00" E	98.86'
L3	S 30°51'00" E	21.38'
L4	S 30°51'00" E	6.00'
L5	S 39°26'00" E	50.36'
L6	S 39°26'00" E	50.36'
L7	N 81°08'53" E	44.45'
L8	S 22°38'00" W	34.19'

0' 20' 40' 100'
SCALE IN FEET

Book 69 Page 68 Page 1 of 1



VICINITY MAP***NO SCALE

IREDELL COUNTY, NORTH CAROLINA

THE LOTS SHOWN ON THIS PLAT
TO THE BEST OF MY KNOWLEDGE LIES WITHIN THE WS-IV
CRITICAL AREA OF THE LAKE NORMAN/CATAWBA RIVER WATERSHED
AS DESIGNATED BY THE NORTH CAROLINA DIVISION OF ENVIRONMENTAL
MANAGEMENT AND AS APPEARS ON THE
WATERSHED PROTECTION MAP OF IREDELL COUNTY.

12-6-18
DATE

SUBDIVISION ADMINISTRATOR

SURVEYORS CERTIFICATION

I, WILLIAM M. ALLEN CERTIFY THAT THIS MAP WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION DEED DESCRIPTION RECORDED IN BOOK ____ PAGE ____, THAT THE RATIO OF PRECISION AS CALCULATED BY LATITUDES AND DEPARTURES IS 1:10000, (THAT THE BOUNDARIES NOT SURVEYED ARE SHOWN AS BROKEN LINES PLOTTED FROM INFORMATION FOUND IN BOOK ____ PAGE ____) THAT THIS MAP WAS PREPARED IN ACCORDANCE WITH G.S. 47-30, AS AMENDED.

WITNESS MY HAND AND SEAL THIS 4 DAY OF Dec. A.D. 2018.

OFFICIAL SEAL

PROFESSIONAL LAND SURVEYOR
L-3499
REGISTRATION NUMBER

NORTH CAROLINA PROFESSIONAL LAND SURVEYOR SEAL L-3499 WILLIAM M. ALLEN

THIS SURVEY IS OF ANOTHER CATEGORY, SUCH AS THE RECOMBINATION OF EXISTING PARCELS, A COURT-ORDERED SURVEY, OR OTHER EXCEPTION TO THE DEFINITION OF

PROFESSIONAL LAND SURVEYOR

I, HEREBY CERTIFY THAT THIS PLAT FOR RECORDATION IS AN EXCEPTION TO THE SUBDIVISION ORDINANCE OF IREDELL COUNTY, NORTH CAROLINA.

12-6-18

SUBDIVISION ADMINISTRATOR
IREDELL COUNTY, NORTH CAROLINA

STATE OF NORTH CAROLINA
COUNTY OF IREDELL

I, William M. Allen, REVIEW OFFICER OF IREDELL COUNTY, CERTIFY THAT THE MAP OR PLAT TO WHICH THIS CERTIFICATION IS AFFIXED MEETS ALL STATUTORY REQUIREMENTS FOR RECORDING.

12-6-18
DATE

REVIEW OFFICER

Doc ID: 016404580001 Type: CRP
Recorded: 12/06/2018 at 08:35:45 AM
Fee Amt: $21.00 Page 1 of 1
Iredell County, NC
Ronald N. Wyatt Register of Deeds
BK 69 PG 68

OWNER CERTIFICATE FOR EXCEPTION PLATS

KNOW ALL MEN BY THESE PRESENTS, THAT I (WE) HEREBY CERTIFY THAT I AM (WE ARE) THE OWNER(S) OF THE PROPERTY SHOWN AND DESCRIBED HEREON AND THAT I (WE) HEREBY ACKNOWLEDGE THIS PLAT AND ALLOTMENT TO BE MY FREE ACT AND DEED.

12/6/2018
DATE

OWNER

12/6/2018
DATE

OWNER

NORTH CAROLINA
IREDELL COUNTY

I, Courtney N. Cox
A NOTARY PUBLIC FOR SAID COUNTY AND STATE
DO HEREBY CERTIFY THAT
JOHN WHITLEY & JENNIFER WHITLEY

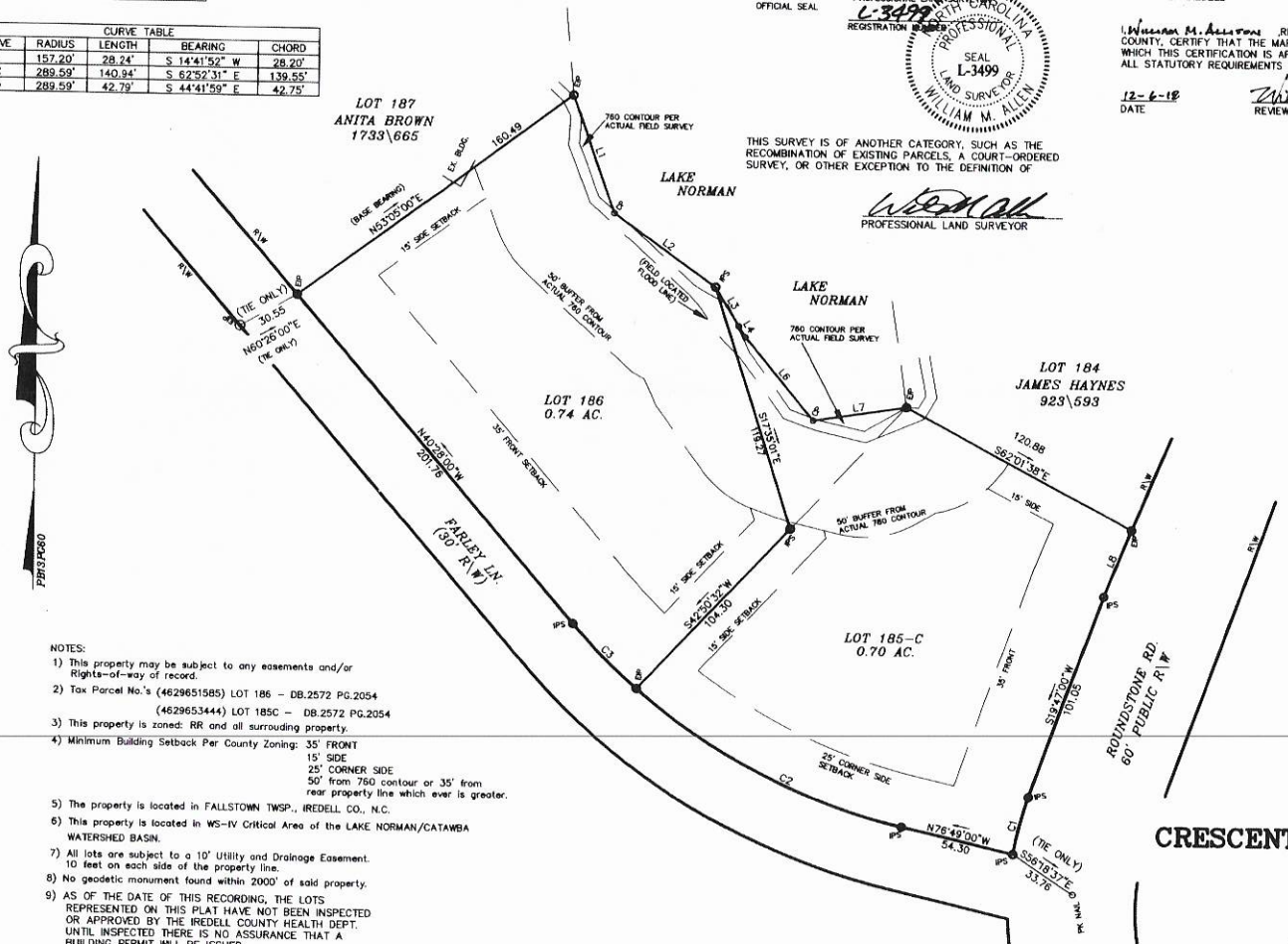
OWNER(S) PERSONALLY APPEARED BEFORE ME THIS DAY, AND ACKNOWLEDGED THE EXECUTION OF THE FOREGOING INSTRUMENT. WITNESS MY HAND AND OFFICIAL SEAL,
THIS 5 DAY OF Dec. 2018.

NOTARY PUBLIC

MY COMMISSION EXPIRES:

COURTNEY N COX NOTARY PUBLIC IREDELL COUNTY, NC 12-16-19

CURVE TABLE				
CURVE	RADIUS	LENGTH	BEARING	CHORD
C1	157.20'	28.24'	S 14°41'52" W	28.20'
C2	289.59'	140.94'	S 62°52'31" E	139.55'
C3	289.59'	42.79'	S 44°41'59" E	42.75'



NOTES:

1) This property may be subject to any easements and/or Rights-of-way of record.
2) Tax Parcel No.'s (4629651585) LOT 186 – DB.2572 PG.2054
(4629653444) LOT 185C – DB.2572 PG.2054
3) This property is zoned: RR and all surrouding property.
4) Minimum Building Setback Per County Zoning: 35' FRONT
15' SIDE
25' CORNER SIDE
50' from 760 contour or 35' from rear property line which ever is greater.
5) The property is located in FALLSTOWN TWSP., IREDELL CO., N.C.
6) This property is located in WS-IV Critical Area of the LAKE NORMAN/CATAWBA WATERSHED BASIN.
7) All lots are subject to a 10' Utility and Drainage Easement. 10 feet on each side of the property line.
8) No geodetic monument found within 2000' of said property.
9) AS OF THE DATE OF THIS RECORDING, THE LOTS REPRESENTED ON THIS PLAT HAVE NOT BEEN INSPECTED OR APPROVED BY THE IREDELL COUNTY HEALTH DEPT. UNTIL INSPECTED THERE IS NO ASSURANCE THAT A BUILDING PERMIT WILL BE ISSUED.
10) The subdivision will be served by individual well and septic.
11) The sole purpose of this plat is to revise property lines between lots 186 & 185-C.

LEGEND
P.P. = POWER POLE
□ = POWER TRANS.
E.I.P. = EXISTING IRON FOUND
I.P.S. = #4 REBAR SET
R/W = RIGHT-OF-WAY
CP = COMPUTED POINT

LINE TABLE		
LINE	BEARING	LENGTH
L1	S 19°34'00" E	59.15'
L2	S 54°16'00" E	58.86'
L3	S 30°51'00" E	21.38'
L4	S 30°51'00" E	6.00'
L6	S 39°26'00" E	50.36'
L7	N 81°08'53" E	44.45'
L8	S 22°38'00" W	34.19'

RECOMBINATION PLAT
OF
CRESCENT LAND AND TIMBER CORP. SECT.17
LOTS 186 & 185-C
(PLAT BK.13 PG.60)

FALLSTOWN TWSP., IREDELL CO., N.C.
SCALE: 1" = 40'
DATE SURVEYED: NOVEMBER 15, 2018
DATE PLATTED: DECEMBER 4, 2018 (COUNTY COMMENTS)

OWNER : JOHN & JENNIFER WHITLEY
116 FARLEY LN.
TROUTMAN, NC 28166

GRAPHIC SCALE

40 0 20 40 80 160
(IN FEET)
1 inch = 40 ft.

DAS
DON ALLEN & ASSOCIATES P.A.
"Since 1971"
Commercial • Residential • Mortgage Surveys • Multi-Family
Construction Staking • Subdivision Design • Topographical
131 Crosslake Park Drive (suite 102) • Mooresville, N.C. 28117
(704) 664-7029 (704) 664-8041 Fax
DONALLENSURVEY@GMAIL.COM

file: CLT 185C-186.DWG

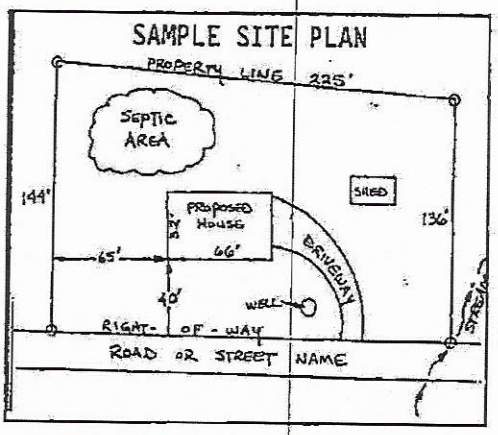
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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 OR WELL PERMIT!!!*

Place an (X) beside each item as you complete the site plan:

( ) Property Line measurements are clearly identified
( ) All proposed structures are indicated
( ) Front and side setbacks from property line
( ) Preferred driveway location
( ) Preferred well location
( ) Preferred septic system location
( ) North arrow, or other sufficient indicator of direction

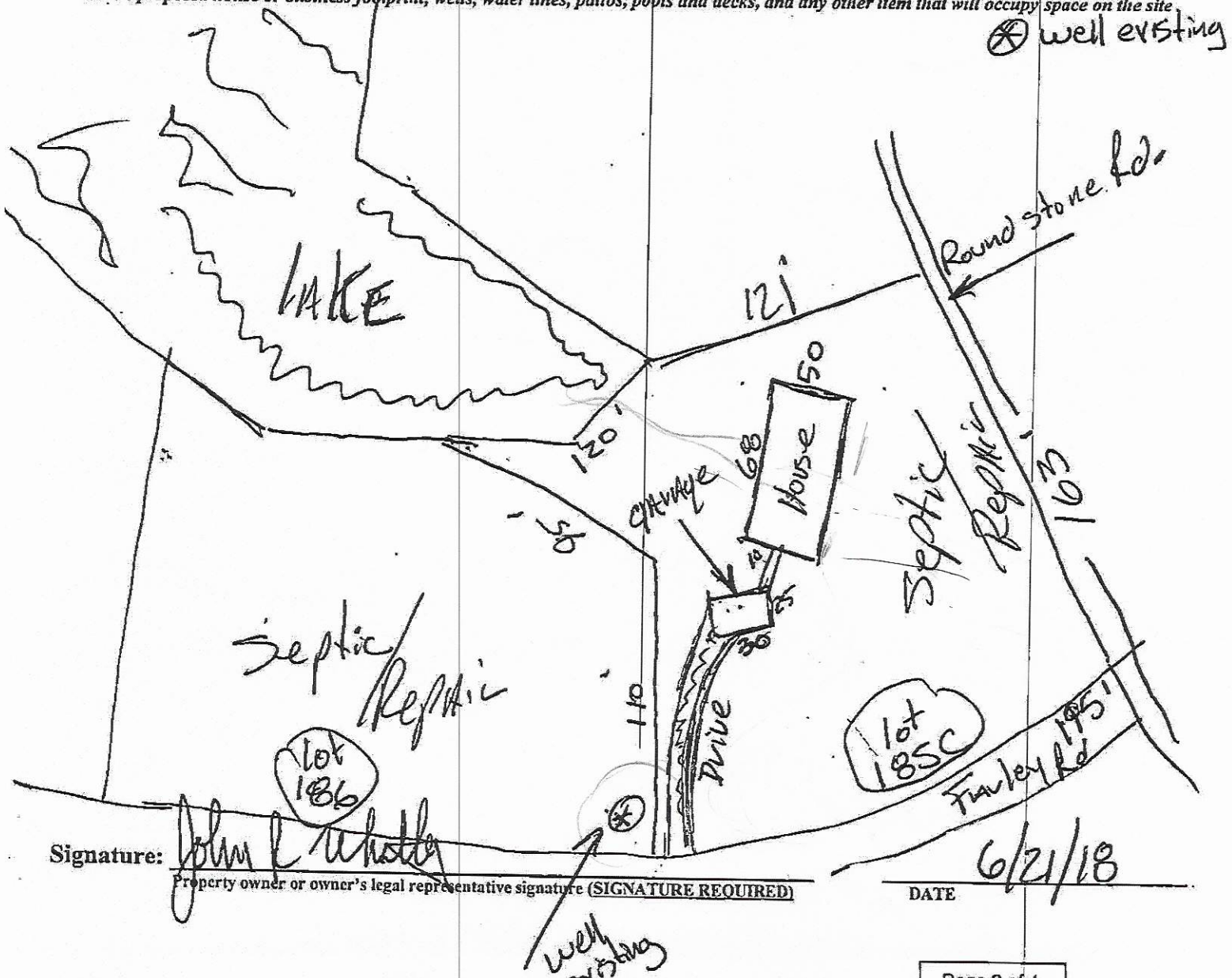


Circle N/A on the following if appropriate:

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

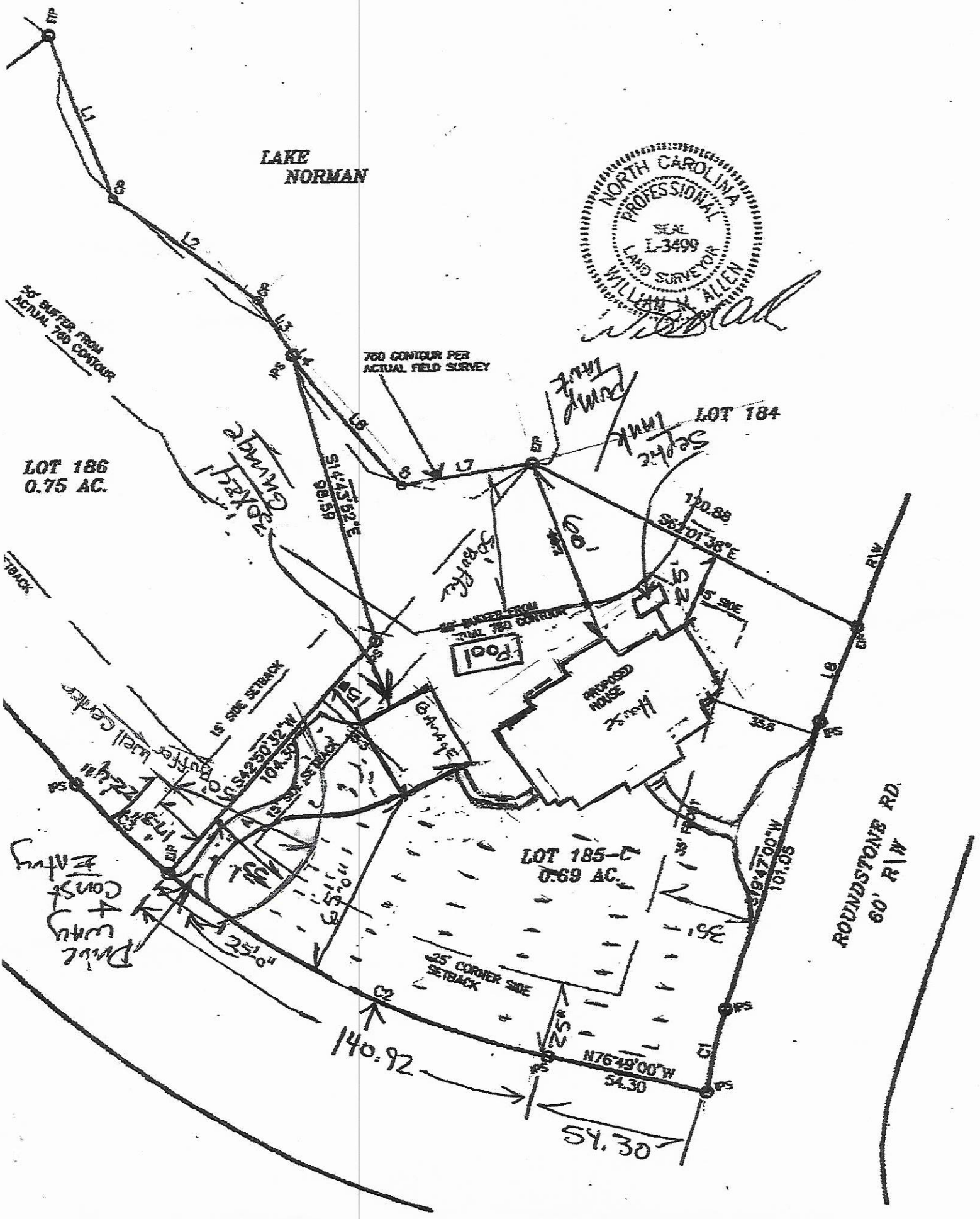
Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site.



Signature: John L Whatley

Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

DATE 6/21/18


LAKE
NORMAN
NORTH CAROLINA
PROFESSIONAL
SEAL
L-3499
LAND SURVEYOR
WILLIAM ALLEN
50' BUFFER FROM
ACTUAL 760 CONTOUR
760 CONTOUR PER
ACTUAL FIELD SURVEY
LOT 186
0.75 AC.
LOT 184
LOT 185-C
0.69 AC.
S14°43'52"E
98.59
S63°01'38"E
120.88
S42°30'32"W
104.30
S18°47'00"W
101.05
N76°49'00"W
54.30
140.92
54.30
35'-0"
25'-0"
POOL
PROPOSED
HOUSE
50' BUFFER FROM
ACTUAL 760 CONTOUR
45' CORNER SIDE
SETBACK
15' SIDE SETBACK
5' SIDE
ROUNDSTONE RD.
60' R/W
R/W
EIP
IPS
PS
L1
L2
L3
L4
L5
L6
L7
L8
L9
C1
C2

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)* John R Whitley

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, _____, am the legal owner(s) of the property located at _____, identified as

PIN (Parcel Identification Number)_____, 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.

_____ _____
Signature of Owner(s) Date

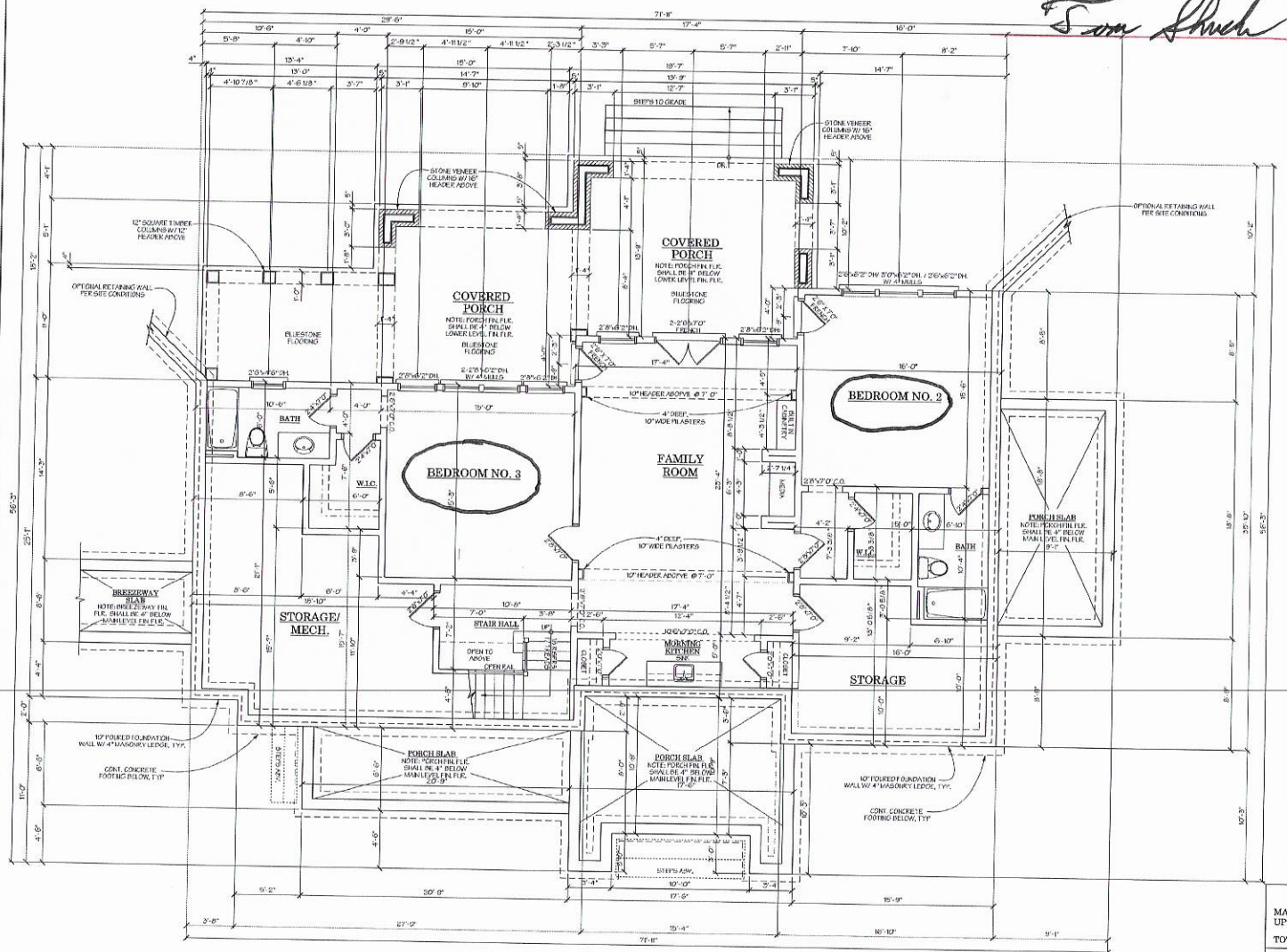
Mooresville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

Acknowledgement Of
Plans Submittal ONLY!

Date 1/18/19

Date 1/16/19



1/A1 TERRACE LEVEL FLOOR PLAN
SCALE: 1/4" = 1'-0"

FLOOR PLAN NOTES:

- SIZE OF STAIR RISERS MAY VARY ACCORDING TO SIZE OF FLOOR SYSTEM.
- ALL WALLS 2 x 6 WOOD STUDS, U.N.O.
- ALL CEILINGS 10'-0" UNLESS NOTED OTHERWISE.

AREA SUMMARY

MAIN LEVEL	1,750 SQ. FT.
UPPER LEVEL	300 SQ. FT.
TOTAL	2,050 SQ. FT.
(not included)	
TERRACE LEVEL (HTD.)	1,317 SQ. FT.
TERRACE LEVEL - STORAGE / MECH.	435 SQ. FT.

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PROJECT

2131 Douglas Pointe

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Stephen Fuller

AMERICAN HOME GALLERY

P.O. BOX 1917 ♦ NORCROSS, GA. 30091 ♦ 3079 CROSSING PARK ♦ www.stephenfullerhomeplans.com
TELEPHONE 678 775 4663 ♦ FACSIMILE 678 775 4664 ♦ www.stephenfullerhomeplans.com

Please Note:
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1. Contractor must verify ALL DIMENSIONS prior to proceeding with construction.
2. Contractor must verify compliance with ALL LOCAL BUILDING CODES in the area the home is to be built.
3. Plans indicate notations only, all engineering aspects should incorporate actual site conditions.

Customize the exercise in making any modifications to the plan.
If changes are necessary, contact the Stephen S. Fuller Design Traditions Modifications Studio

DATE	REVISED

Drawn/Checked: AHG

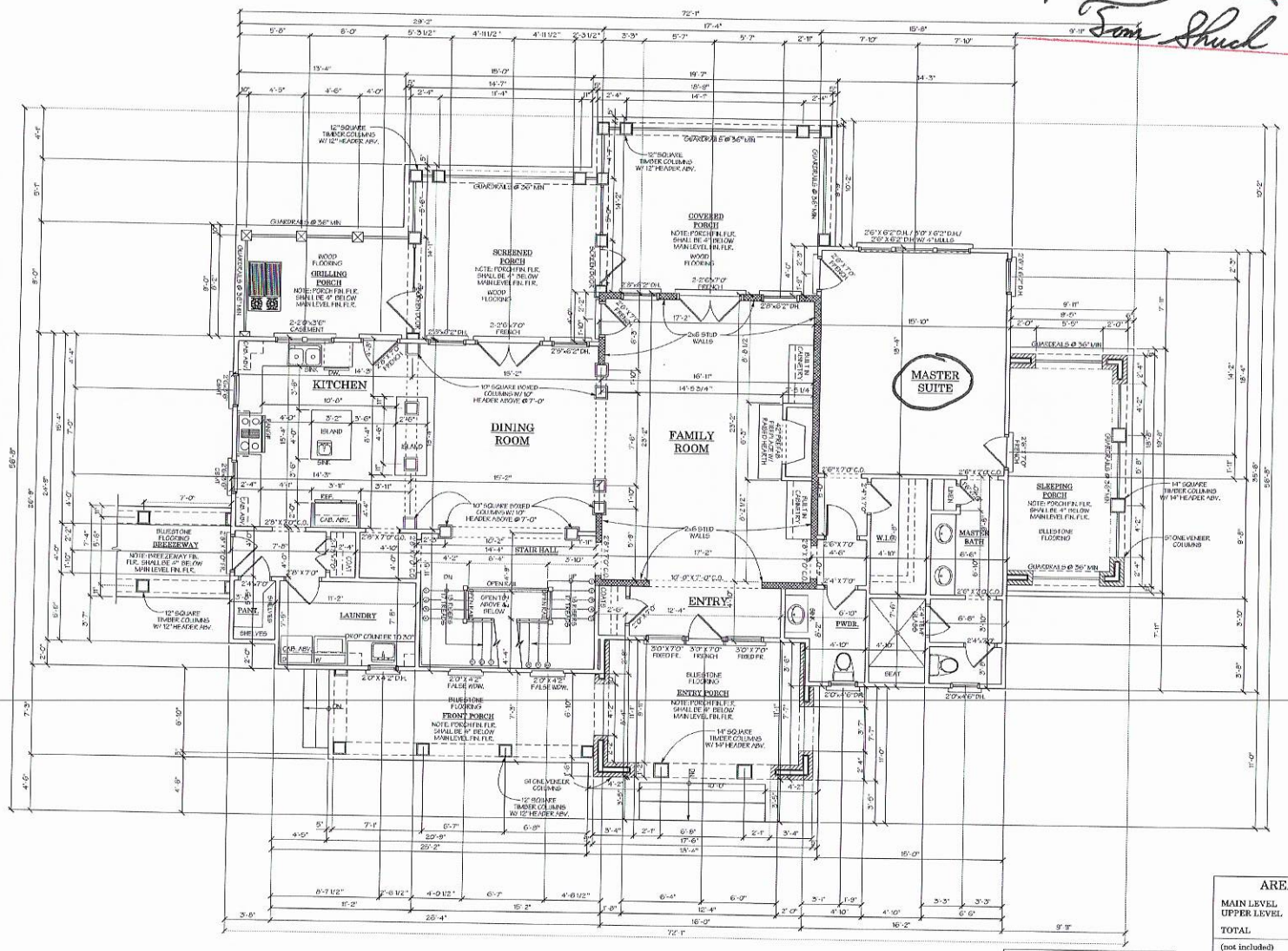
PROJECT NUMBER: 2131

TRUE REVERSE

SHEET TITLE: Terrace Level Floorplan

SHEET: A1 of 9

Acknowledgement Of
Plans Submittal ONLY!
Date 1/16/19
Date 1/16/19



1 A2 MAIN LEVEL FLOOR PLAN
SCALE: 1/4" = 1'-0"

FLOOR PLAN NOTES:

- SIZE OF STAIR RISERS MAY VARY ACCORDING TO SIZE OF FLOOR SYSTEM.
- ALL WALLS 2 x 4 WOOD STUDS, U.N.O.
- ALL CEILINGS 9'-0" UNLESS NOTED OTHERWISE.

AREA SUMMARY

MAIN LEVEL	1,750 SQ. FT.
UPPER LEVEL	300 SQ. FT.
TOTAL	2,050 SQ. FT.
(not included)	
TERRACE LEVEL (HTD.)	1,317 SQ. FT.
TERRACE LEVEL - STORAGE / MECH.	435 SQ. FT.

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PROJECT
2131 Douglas Pointe

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1. Contractor must verify ALL DIMENSIONS prior to processing with construction.
2. Contractor must verify compliance with ALL LOCAL BUILDING CODES in the area the home is to be built.
3. Plans indicate locations only, all engineering aspects should incorporate actual site conditions.

Customer need be reminded in making any modifications to this plan. Revisions are necessary, contact the Stephen S. Fuller Design Traditions Modification Staff.

P.O. BOX 1917 ♦ NORCROSS, GA. 30091 ♦ 3079 CROSSING PARK ♦ www.stephenfullerhouseplans.com.
TELEPHONE 678.775.4663 ♦ FACSIMILE 678.775.4664 ♦ www.stephenfullerhouseplans.com.

DATE	REVISED

Drawn/Checked: AHG

PROJECT NUMBER: 2131

TRUE REVERSE

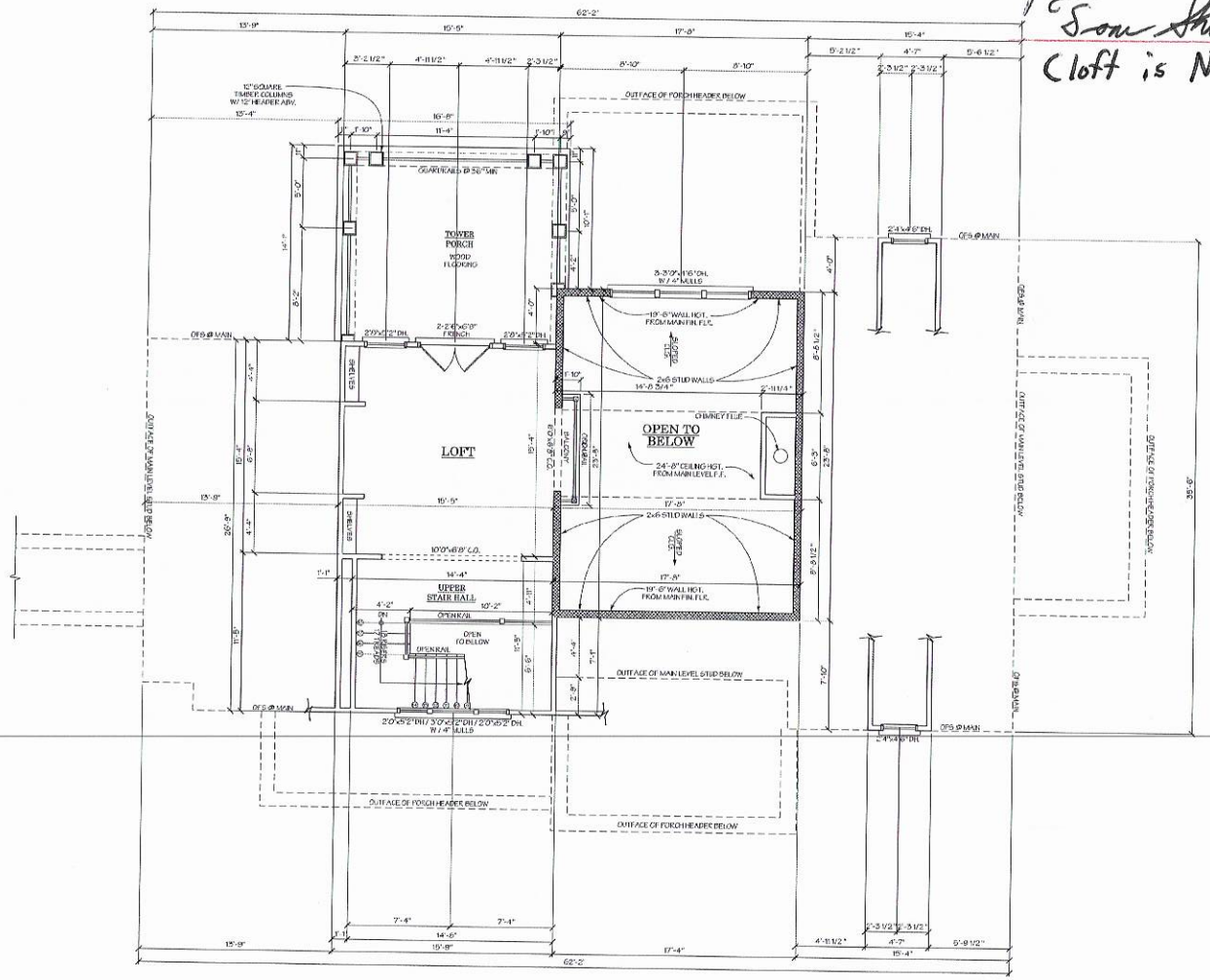
SHEET TITLE: Main Level Floorplan

SHEET: A2 of 9

Acknowledgement Of
Plans Submittal ONLY!

Date 1/16/19

Date 1/16/19
(Loft is Not a bedroom)



1 A3 UPPER LEVEL FLOOR PLAN
SCALE: 1/4" = 1'-0"

FLOOR PLAN NOTES:

- SIZE OF STAIR RISERS MAY VARY ACCORDING TO SIZE OF FLOOR SYSTEM.
- ALL WALLS 2 x 4 WOOD STUDS, U.N.O.
- ALL CEILINGS 8'-0" UNLESS NOTED OTHERWISE.

AREA SUMMARY

MAIN LEVEL	1,760 SQ. FT.
UPPER LEVEL	300 SQ. FT.
TOTAL	2,050 SQ. FT.
(not included)	
TERRACE LEVEL (HTD.)	1,317 SQ. FT.
TERRACE LEVEL - STORAGE / MECH.	435 SQ. FT.

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PROJECT
2131 Douglas Pointe

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1. Contractor must verify ALL DIMENSIONS prior to proceeding with construction.
2. Contractor must verify compliance with ALL LOCAL BUILDING CODES in the area the home is to be built.
3. Plans indicate options only, all engineering must be based on proper actual site conditions.

Caution must be exercised in making any modifications to the plan. If changes are necessary, contact the Stephen S. Fuller Design Traditions Modifications Studio.

DATE	REVISED

Drawn/Checked: AHG

PROJECT NUMBER: 2131

TRUE REVERSE

SHEET TITLE: Upper Level Floorplan

SHEET: A3 of 9

IREDELL COUNTY

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

APPLICATION NUMBER
236684
Issue Date: 06/21/2018

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4629651585.000	116 FARLEY LANE, TROUTMAN, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: FALLS BOYD P IRREVOCABLE TRUST	Applicant: WHITLEY, JOHN
Address: 114 W BLAND ST	Address: 116 FARLEY LN
TROUTMAN, NC 28203	TROUTMAN, NC 28166
Phone:	Phone:

Use Requested	Zone Code
SFD	RR

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.800	35.00	50.00	15.00	15.00	CACL	AE

Remarks:

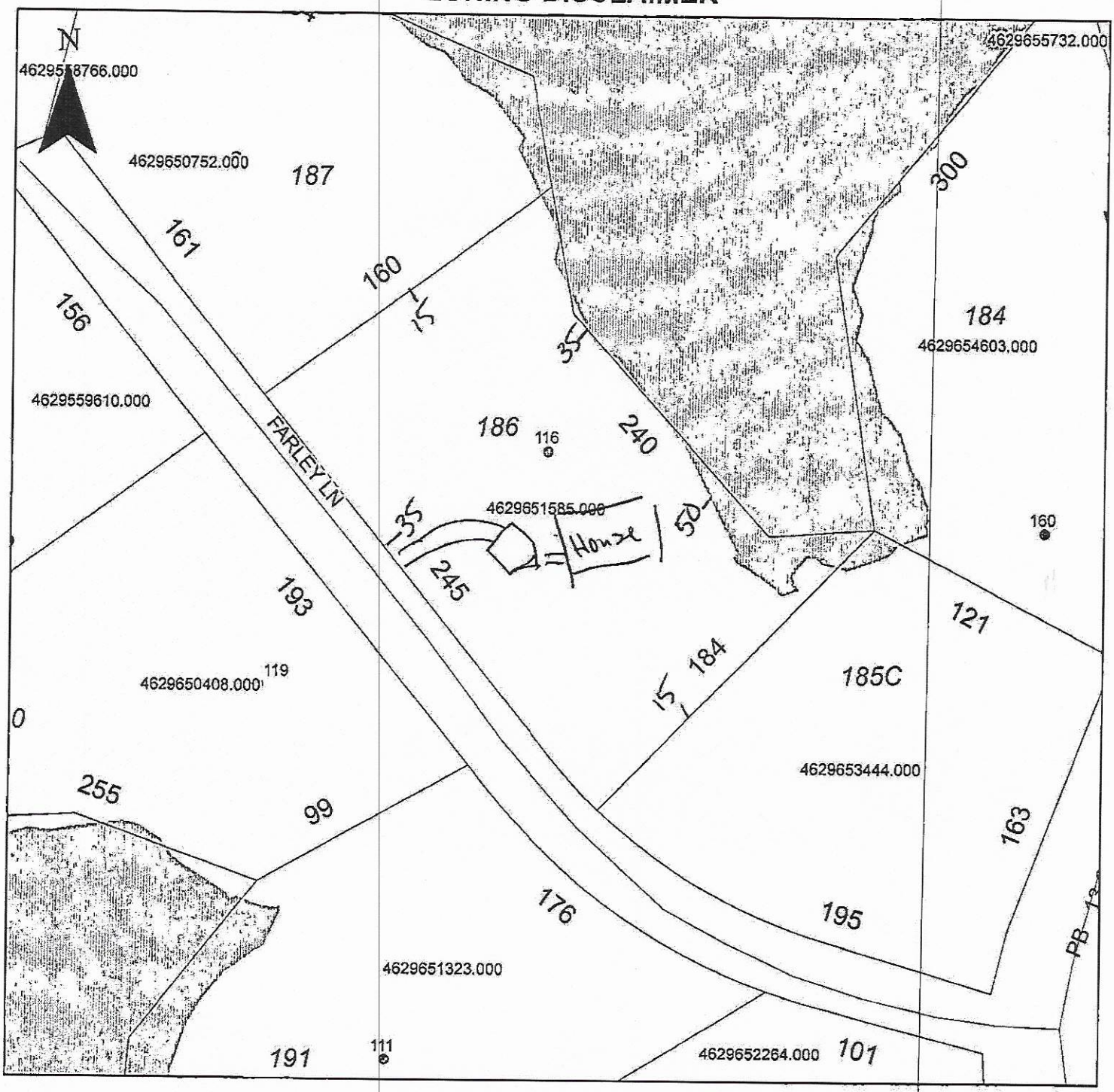
Must meet both the 50-foot setback from the 760 Æ contour line and the 35-foot setback from the rear property line for any structure.

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.

Applicant: _____ Date: _____

Permit Number	143077	TOTAL FEES:	$ 77.25

ZONING DISCLAIMER



Property Address 116 Farley

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. Applicant further acknowledges that the 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.

X _____

Applicant

X _____

Date