IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625

PERMIT # 232554

BB

PIN # 4635151678

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

APPLICANT/OWNER: Robert Larch | APPLICANT ADDRESS: 108 Kingsbury Ct Mooresville NC

SITE ADDRESS: 108 Kingsbury Ct Mooresville NC | PHONE: 704-658-9874 | ALT. PHONE N/A

SITE DIRECTIONS: BST2 to Chatam T/L Kingsbury Ct | SAP CONTROLLED: Existing ☐ YES ☐ NO

SUBDIVISION: The point on Norman | SECTION: 1B | LOT # 10 | LOT AREA: 1.18ac | DESIGN FLOW: 600gpd | L.T.A.R.: Ex

Septic Tank	Ex	(gal)	STB		Date				
Pump Tank	Ex	(gal)	PT		Date				
Pump Make		Model			Serial #				
# Nitrification Fields	Ex	# Lines	Ex		Linear Ft	Ex			
Trench Width	Ex	Trench Bottom Depth(Low side)		Ex	Gravel Depth	Ex			

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

System Description: Existing

Repair System Description:

Maintenance Agreement Required: ☐ YES ☑ NO

☐ GRAVITY ☑ PRESSURE

☑ Residence No. Bedrooms 5

☐ Business No. Persons 10

☐ Other No. Employees

☐ Slab ☐ Crawl Space

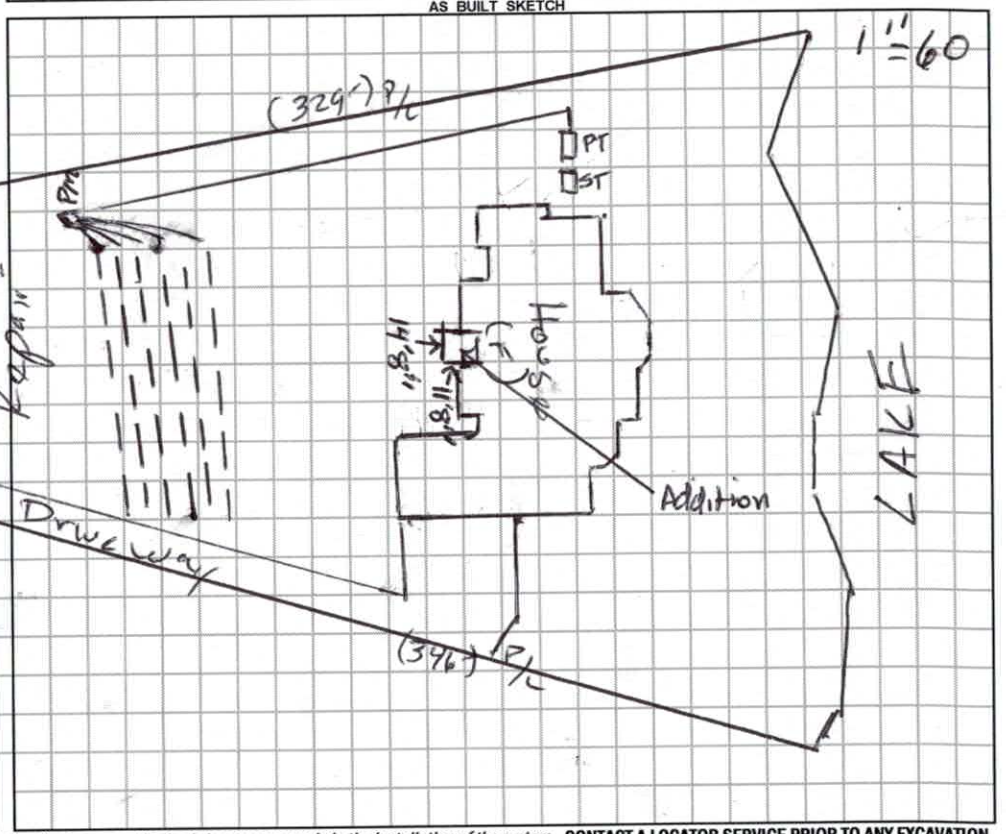
☑ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☑ Public ☐ Community

Comments / Conditions: Maintain 5' from any part of STS.

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: Adam Swanson Homes | Date: 1-30-18 | Installed by:

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

AUTHORIZATION TO CONSTRUCT by: | Date: | Existing System Inspected by: | Date: 01/24/18

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 JAN 11 2018

Please get # of bedrooms, foundation type & year septic installed if known

IREDELL COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH DIVISION

(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)

Paid $250.00 #232554

1. APPLICATION FOR: ___Improvement Permit ___Authorization To Construct X Existing System Inspection

Called 4/m 1/12
Called 4/m 1/22

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:

Robert Lorch	108 Kingsbury ct, Mooresville	704-658-9474	
Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Robert Lorch	108 Kingsbury ct, Mooresville	704-658-9474	
Owner Name	Mailing Address	Home Phone #	Alternate Phone #

4. Property Information:

108 Kingsbury Ct, Moorsville — Point — Ph 1B Lot 14
Street Address | Subdivision Name | Section/Phase and Lot Number

Driving Directions: _____

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 due to _____
(X) Other Front Entrance Expansion / No septic changes

Maximum Number of Bedrooms 3
Maximum Number of Occupants 3
If Expansion, Current Number of Bedrooms ___

For Addition only
( ) Crawl Space Foundation?
(X) 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: None

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

7. Desired Septic System Type: *(You may rank in order of preference, if any)* ( ) EXISTING SYSTEM installed Not Known (Year)

( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other_____

8. 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. industry) 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.

9. Signature: _____ 1/7/18
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) — DATE

DocuSign Envelope ID: 17FE2FE8-F938-4ED5-B201-1E4BB23AB72C

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, Robert Lorch, am the legal owner(s) of the property located at 108 Kingsbury Ct, Mooresville, NC 28115, identified as PIN (Parcel Identification Number) 4635-15-1674, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Alan Simonini Homes, 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.

Robert Lorch	1/7/2018 | 10:24 AM EST	[signature]	1/7/18
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 HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*:

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

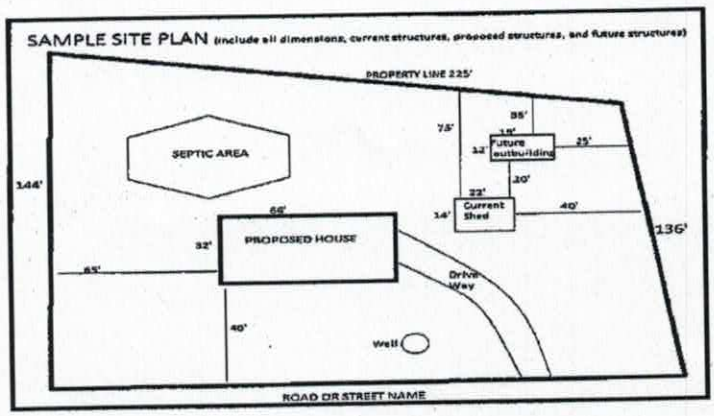
_____ Front and side setbacks from property line… **_____ Preferred driveway location and configuration, preferred well location…**

_____ 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**



USE THIS SPACE TO DRAW YOUR SITE PLAN

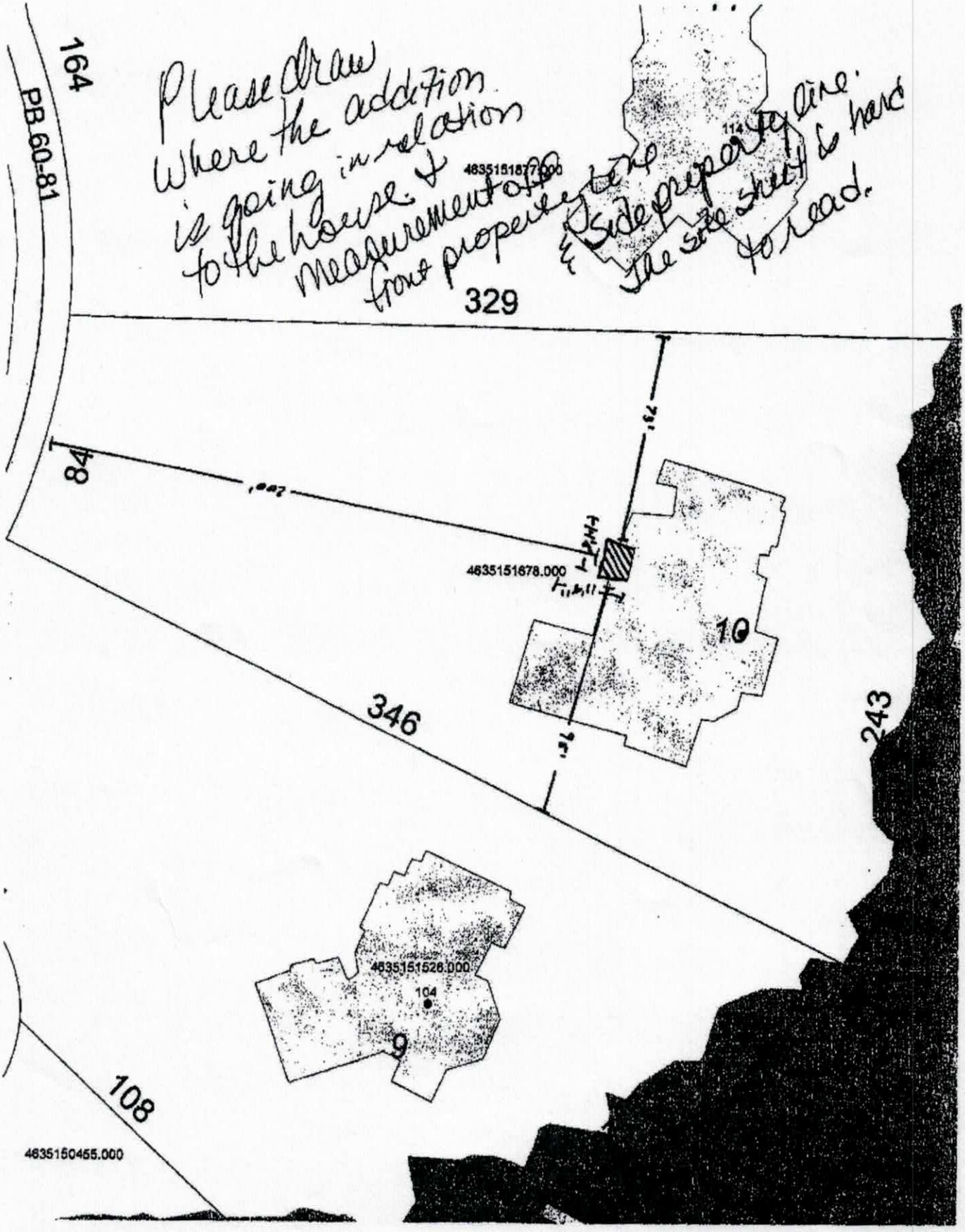
See attached

Signature: _____

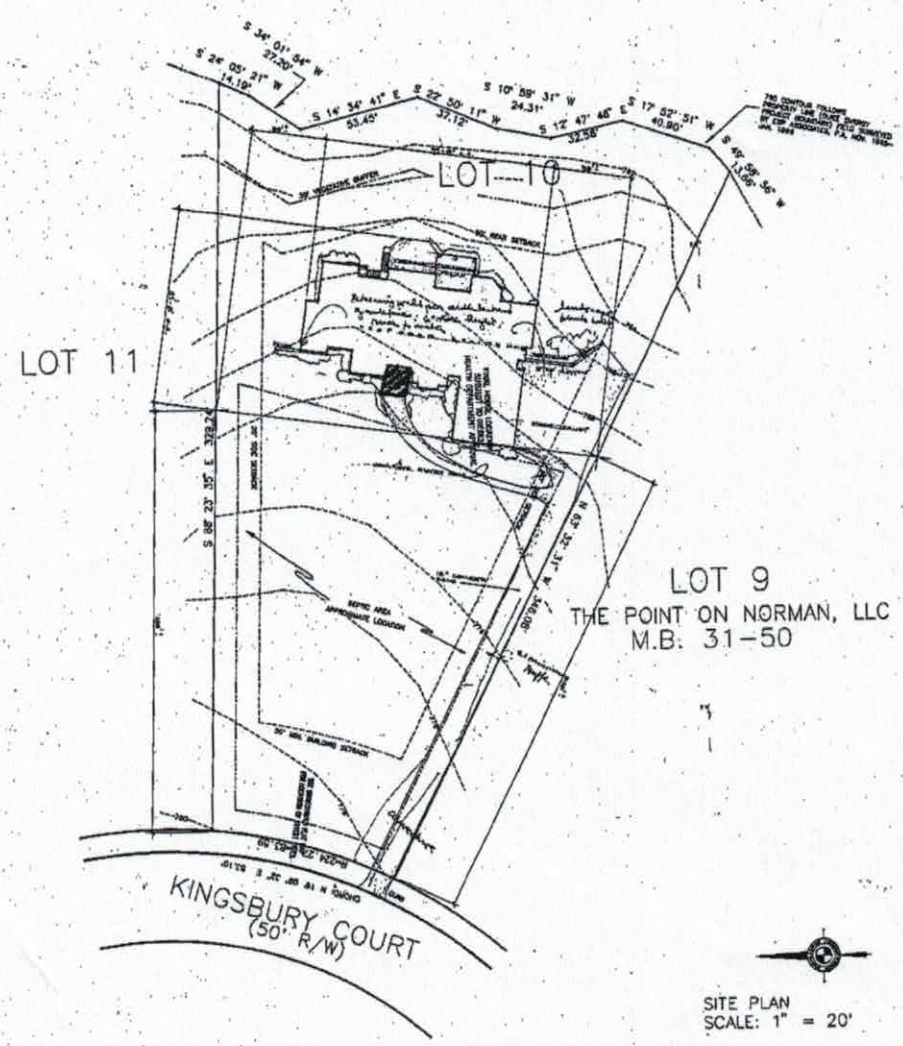
REQUIRED **property owner or owner's legal representative signature.**

1/8/17

DATE


Please draw
Where the addition
is going in relation
to the house. &
measurement of
from property line
& Side property line.
The site sheet is hard
to read.
164
PB 60-81
329
84
4635151678.000
10
346
243
4635151526.000
104
9
108
4635150455.000

LAKE NORMAN



SITE PLAN
SCALE: 1" = 20'

NOTE: ALL LOTS HAVE A 10' DRAINAGE & UTILITY EASEMENT ON ALL SIDES OF THE PROPERTY.
SEE M.B. 31-51 FOR DETAIL.

Sheet 1 Of 18

Project: The Orr Residence
Lot 11, Kingsbury Court
THE POINT

Christopher Phelps and Associates, LLC

Date: 8-8-11
Drawn By: JENNY
Approved By:
Revisions:

Structural Engineer:

IREDELL COUNTY

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

APPLICATION NUMBER
232554
Issue Date: 01/08/2018

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4635151678.000	108 KINGSBURY COURT, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: LORCH JANICE G DECL TR	Applicant: SIMONINI HOMES LLC, AL
Address: 21 EAST HURON ST APT 3303 CHICAGO, IL 60611	Address: PO BOX 1546 CORNELIUS, NC 28031
Phone:	Phone: 704-333-8999

Use Requested	Zone Code
ADDITION OF FRONT PORCH AREA	20CU

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
1.180	35.00	50.00	15.00	15.00	CACL	AE

Remarks:

Lake Lots: must meet both the 50-foot setback from the 760 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	125265	TOTAL FEES:	$ 77.25