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#206885

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAGE 1: *APPLICATION FORM*

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) 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

0803 727

Applicant Information:

Applicant Name: Leon Rodkewitz Address: 113 E 1ST St Waxhaw NC 28173 Phone: 973-727-0803

Owner Name: Leon Rodkewitz Address: 113 E 1ST St Waxhaw, NC 28173 Phone: 973-727-0803

Property Information:

Street Address: 230 Commodore Loop Mooresville NC

Subdivision Name: Commodore Peninsula Section/Phase: [redacted] Lot Number: 176

Driving Directions: OFF Brawley School Rd To STOTTS Rd

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

( ) New Single Family Residence
( ) New Multi-Family Residence
(X) Accessory Building 32x48
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: _____
Maximum Number of Occupants: _____
( ) 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: _____
Maximum Number of Employee: _____
Maximum Number of Seats/Beds/Other: _____

Water Supply:

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

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: _____
( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other: _____

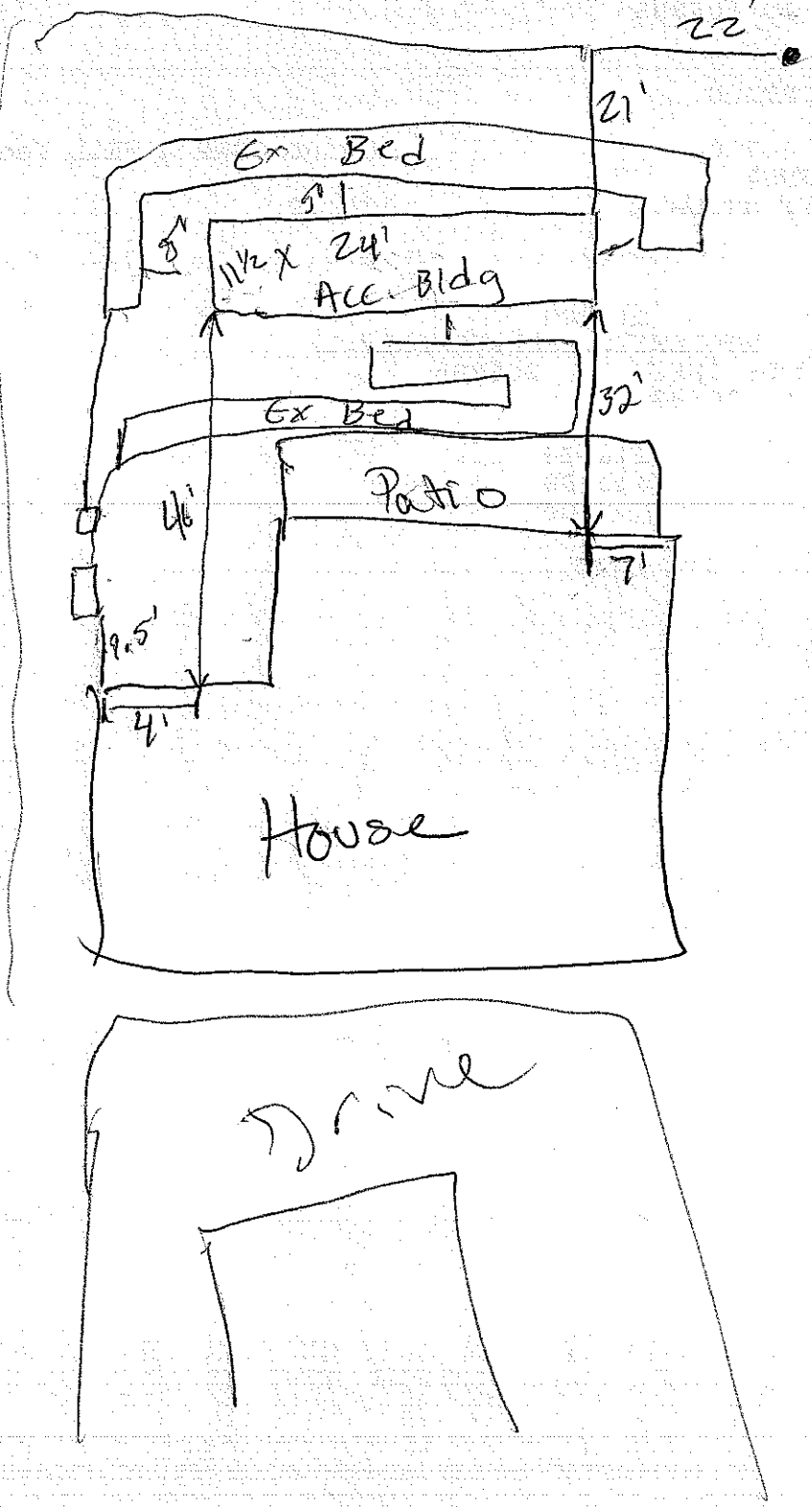
Please answer the following to the best of your ability:

( ) 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: Leon Rodkewitz 10/27/14
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

2906
11-12-14


22'
21'
Ex Bed
1'
8'
11½ x 24'
Acc. Bldg
32'
Ex Bed
Patio
46'
7'
9.5'
4'
House
Drive

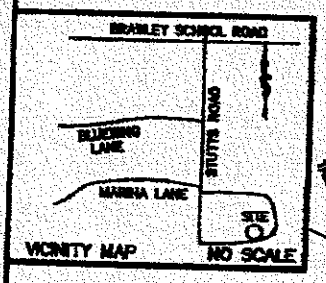
DAS DON ALLEN & ASSOCIATES, P.A.

"Since 1971"

Commercial * Residential * Mortgage Surveys * Multi-Family
Construction Staking * Subdivision Design * Topographical
111-D Raceway Drive * Mooresville * NC * 28117
(704) 664-7028 (704) 664-8041 Fax

I, certify that this map was drawn under my supervision from an actual survey made under my supervision recorded in deed book 2185, page 2258, and/or plat book 7, page 3A, that the ratio of precision is 1':10,000, that this map was prepared in accordance with the General Statutes of North Carolina, 1950, Sec. 89C. my hand and seal on the 8 day of AUG. A.D. 20[illegible]

NORTH CAROLINA
WILLIAM M. ALLEN, PLS
L-3886
LAND SURVEYOR
WILLIAM M. ALLEN



NOTES

1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENTS AND/OR RIGHTS OF WAY OF RECORD.
2) ACREAGE COMPUTED BY THE COORDINATE METHOD.
3) NO GRID MONUMENT FOUND WITHIN 2000 FEET.

0' 15' 30' 60'
SCALE IN FEET

LEGEND

- P.P. = POWER POLE
- DUKE POWER TRANS.
- E.I.P. = EXISTING IRON FOUND
- I.P.S. = #4 REBAR SET
- R/W = RIGHT-OF-WAY
- W = WELL

PHYSICAL SURVEY

OF

230 COMMODORE LP

LOT 176 COMMODORE PENINSULA

1" = 30'

IREDELL COUNTY HEALTH DEPARTMENT 4635 79 6715

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR C.W. Brewer, Const. DATE 8-16-83 PERMIT NO. 277

PHONE: Business Brawley School → Stutts Rd. → Commodore Loop Home

LOCATION 1100 TL 1112 TL 2nd 1212 ~3/4 mile on left S. R. No.

SUBDIVISION NAME Commodore Peninsula LOT NO. 176 SECTION OR BLOCK NO.

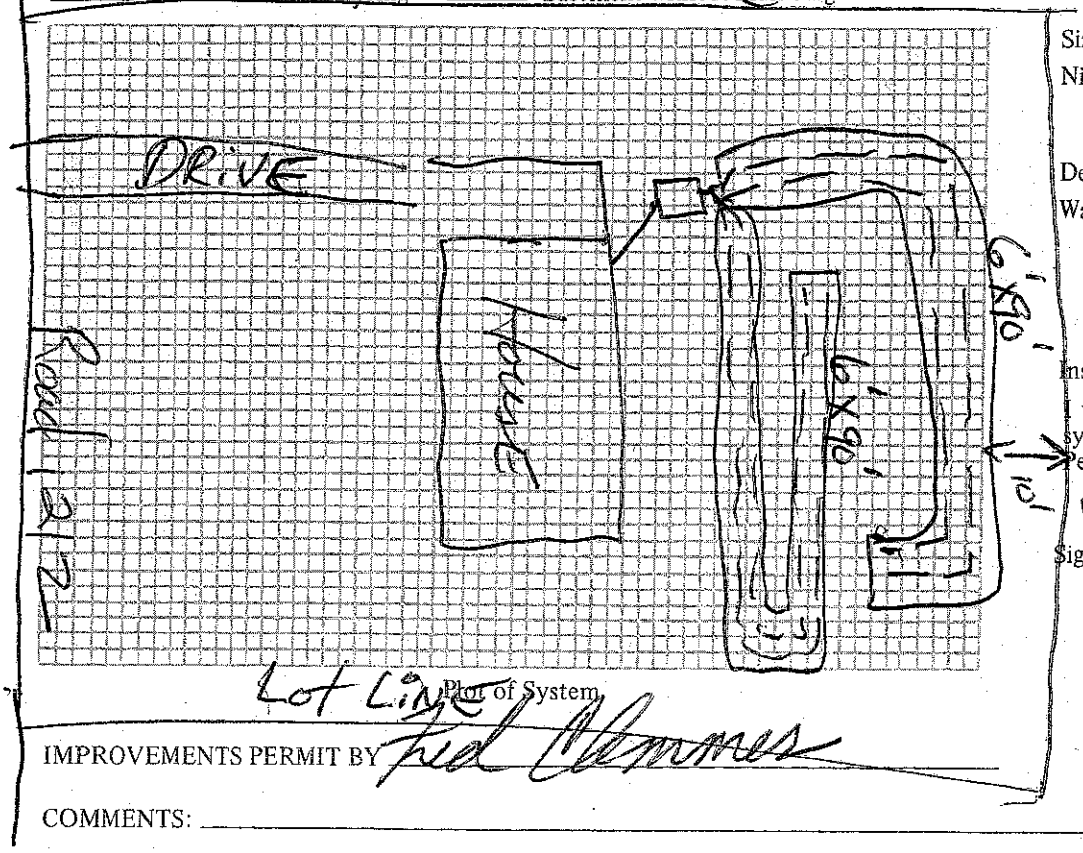
House (X) Mobile Home ( ) Business ( ) Other

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (X)
Auto. Dishwasher Yes (X) No ( )
Auto. Wash. Machine Yes (X) No ( )
Site Suitable Yes (X) No ( )
Lot Area Existing

Character & Porosity of Soil Clay loam
Percolation Rate ~.5 gal/ft²/day
Topography 2-6%
Depth to Water Table 4'+
Rock or other impervious formations NONE observed

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2x2
Sq. Ft. 1080 Linear Ft. 360
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public (X)

Installed by Bill Woodridge

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed:

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS:

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 8-16-83

EXISTING SYSTEM CHECKED BY: DATE

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.
Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Improvements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold