IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 188009

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

PIN # 4636012965

APPLICANT: PEACH TREE RES PROP. Mark Benitez APPLICANT ADDRESS: 1930 CENTER PARK #3 CHARLOTTE NC 28217

PHONE: ALT. PHONE: 704 576 3887

SITE ADDRESS: 265 COVE CREEK Loop - Mrsvl.

SITE DIRECTIONS: BRAWLEY SCHOOL RD - TL ISLE OF PINES - TR COVE CREEK - ON RT

SUBDIVISION: CHESAPEAKE PT SECTION: 3 LOT # 41 LOT AREA: .875 DESIGN FLOW: 480 L.T.A.R.: .25

Septic Tank	1000 (gal)	STB	199	Date	10-11-17
Pump Tank	1000 (gal)	PT	283	Date	10-3-17
Pump Make	Liberty	Model	290	Serial #	
# Nitrification Fields	1	# Lines	7	Linear Ft:	480
Trench Width	36"	Max. Trench Bottom Depth	@ 36	Gravel Depth	12

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

System Description: Pump 25% REDUCTION

Repair System Description: LP PPBP 2

Maintenance Agreement Required: ☐ YES ☑ NO ☐ GRAVITY ☑ PRESSURE

☑ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing

No. Bedrooms 4 No. Persons 8 No. Employees ☑ Crawl Space

Water Supply: ☐ Private ☐ Public ☑ Community

☐ Basement w/o plumbing

Comments / Conditions: 11/16/17 Checked tanks, lines @ Supply line, to PM. See attached "As Built" Drawing by Michael Athanas

8/8/14 Reviewed floor plans, in compliance with Septic plan

INITIAL SITE SKETCH

SEE MICHAEL ATHANAS & ASSOCIATES PLAN

	Date	Initials
Drain Lines Checked	11/16/17	MD
Tanks Checked	11/16/17	MD
Pressure Manifold or Valve Box Checked		
Pressure Head Set 2' ok		
Electrical Checked ok		
Floats Set 6" Tether 10" Differe		
Alarm Checked ok		
Maintenance Contract Y (N)		

SJE Rhombus "1" ther off

AS BUILT SKETCH

Installed Quick 4

1/25/2018: Electrical circuit box ok (indy conduct bracing)
- 2' of pressure head set
- Alarm ok
- CSJE Rhombus Control Panel + Float tree used with on/off float + Alarm float
- 8" of difference between on/off float + alarm float [narrow angle]
- 6" tether for on/off float

1/31/2018: -3rd float added, 10" seperation between on/off floats.
- 5/32nd hole drilled below check valve [prevent vapor locking]
- Re-set pressure head (2')

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**

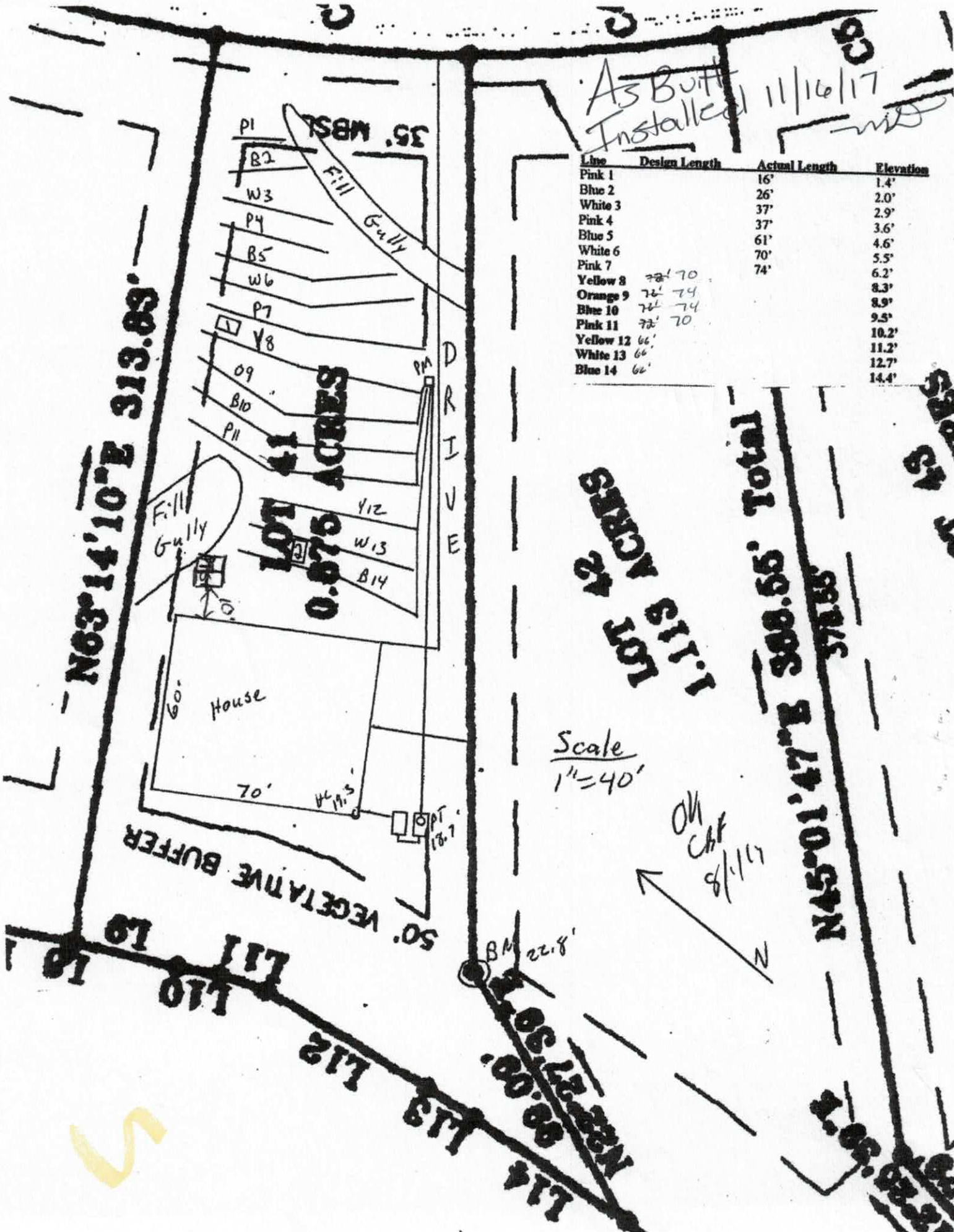
☐ **IMPROVEMENT PERMIT** *with plat* valid without expiration. ☐ **IMPROVEMENT PERMIT** *with site plan* valid for 60 mos. ☐ **AUTHORIZATION TO CONSTRUCT** valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: Date: 8/7/14 Installed by: Richard Abernathy

IMPROVEMENT PERMIT by: Date: 8/1/14 OPERATION PERMIT by: Tom Shuck Date: 7/31/18

AUTHORIZATION TO CONSTRUCT by: Marion Tolson RS Date: 8/8/14 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK


As Built
Installed 11/16/17
Line | Design Length | Actual Length | Elevation
Pink 1 | | 16' | 1.4'
Blue 2 | | 26' | 2.0'
White 3 | | 37' | 2.9'
Pink 4 | | 37' | 3.6'
Blue 5 | | 61' | 4.6'
White 6 | | 70' | 5.5'
Pink 7 | | 74' | 6.2'
Yellow 8 | 72' 70 | | 8.3'
Orange 9 | 72' 74 | | 8.9'
Blue 10 | 72' 74 | | 9.5'
Pink 11 | 72' 70 | | 10.2'
Yellow 12 | 66' | | 11.2'
White 13 | 66' | | 12.7'
Blue 14 | 66' | | 14.4'
P1
B2
W3
P4
B5
W6
P7
Y8
09
B10
P11
Y12
W13
B14
PM
Fill
Gully
DRIVE
0.66 ACRES
Lot 41
Fill
Gully
House
60'
70'
PT 18.7'
BM 22.8'
50' VEGETATIVE BUFFER
N03°14'10"E 313.83'
N45°01'47"E 308.55' Total
Lot 42 0.43 ACRES
Scale
1"=40'
OK Chf 8/1/17
N



As Built
Installed
11/16/17
MD

MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887

Reference: Data Sheet for 265 Cove Creek Rd, Chesapeake Point Lot 41

House Footprint: See attached plan
Building Setbacks: 35' front, 15' side, 50' lake
Water Source: Community well
Number of Bedrooms: 4/480 GPD
Proposed LTAR: 0.25 GPD/FT2
Proposed System Type: 25% Reduction
Proposed Repair System Type: PPBPS
Distribution: Pressure Manifold
Flow per Tap: 2 @ ½" SCH 80, 1 @ ½" SCH 40
Tap Size and Material: 2 @ 5.48 GPM, 1 @ 7.11 GPM
System Flow: 18.1 GPM
Dosing Volume: 210 gallons
Pump Run Time: 11.6 gallons
Elevation Head: 15.4'
Friction Head: 1.3'
Pressure Head: 2'
Total Dynamic Head: 18.7'
Supply Line Length: 150' of 2" PVC
Septic/Pump Tank Size: 1000/1000 gallons
Proposed Trench Bottom: 24-36"

Line	Design Length	Actual Length	Elevation
Pink 1		16'	1.4'
Blue 2		26'	2.0'
White 3		37'	2.9'
Pink 4		37'	3.6'
Blue 5		61'	4.6'
White 6		70'	5.5'
Pink 7		74'	6.2'
Yellow 8	~~72'~~ 70		**8.3'**
Orange 9	~~72'~~ 74		**8.9'**
Blue 10	~~72'~~ 74		**9.5'**
Pink 11	~~72'~~ 70		**10.2'**
Yellow 12	**66'**		**11.2'**
White 13	**66'**		**12.7'**
Blue 14	**62'**		**14.4'**

Initial System: 480'
Pump Tank: 18.7'
Repair System: 321'
House Corner: 19.3'
Benchmark: 22.8'

Comments:
Tap 1 – ½" SCH 80 – Y8 & O9
Tap 2 – ½" SCH 80 – B10 & P11
Tap 3 – ½" SCH 40 – Y12, W13, & B14

Approved
11/16/17

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

Sheet __1__ *of* __1__
PROPERTY ID #: 4636012965_
COUNTY: _Iredell____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM
(Complete all fields in full)

OWNER: _CP II LLC_____ APPLICATION DATE_____
ADDRESS: _3125 Presidential Pkwy Ste 200, Atlanta GA_____ DATE EVALUATED: _____
PROPOSED FACILITY: _4 bdrm_____ PROPOSED DESIGN FLOW (.1949): _480 GPD____ PROPERTY SIZE: __0.88 AC_____
LOCATION OF SITE: _Chesapeake Pt, Lot 41_____ PROPERTY RECORDED: _____
WATER SUPPLY: Ξ Private ☐ Public Ξ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☐ Auger Boring Ξ Pit ☐ Cut TYPE OF WASTEWATER: Ξ Sewage ☐ Industrial Process ☐ Mixed

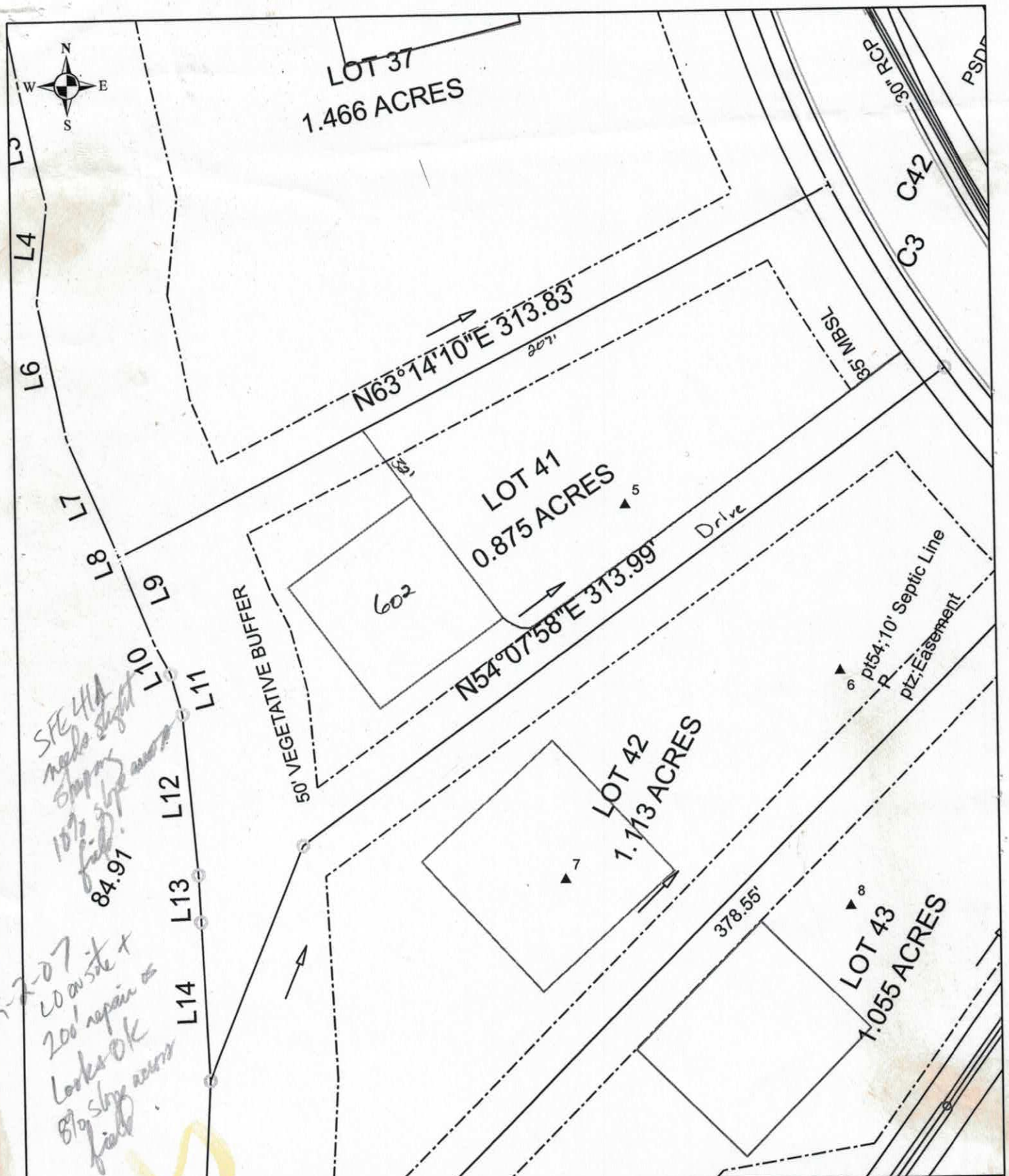
PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
1	LS 10%	0-27	R C SBK	FR SS SP	N/A	59"	PS	N/A	PS 0.3
		27-59	R CL WSBK	FR SS SP					
		59-65	L SAP M	VFR SS SP					
2	LS 12%	0-19	R C ABK	FR SS SP	N/A	32"	F-C SAP PS	N/A	PS 0.3
		19-32	R C SBK	FR SS SP					
		32-78	L SAP M	VFR SS SP					
3								Soils ok CAF 8/1/14	
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	1440 FT2	963 FT2
System Type(s)	25% Reduction	PPBPS
Site LTAR	0.25 ICHD	0.25 ICHD

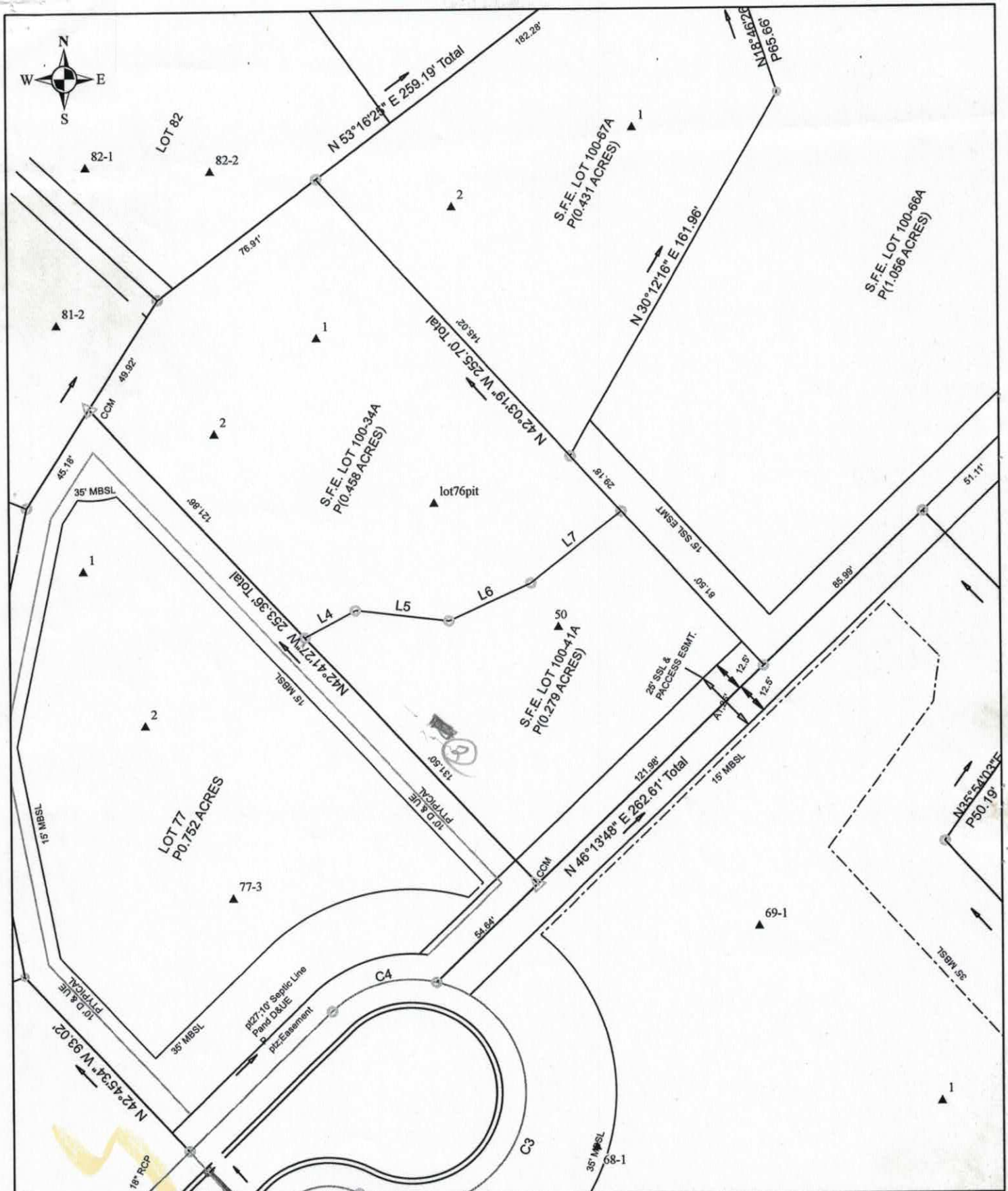
OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____PS_____

EVALUATED BY: _M A & Associates_____
OTHER(S) PRESENT: _____

COMMENTS



Scale: 1 inch equals 50 feet	S&ME	Lot 41 Chesapeke Point	FIGURE
Drawn by: JBP		Detailed, Scaled Site Plan	1
Reviewed by: KS		Iredell County, NC	
Date: December, 2006	ENVIRONMENTAL SERVICES • ENGINEERING • TESTING	S&ME Project #1588-04-011	



Scale: 1 inch equals 50 feet	S&ME	S.F.E. Lot 100-41A Chesapeke Point	FIGURE
Drawn by: JBP		Detailed, Scaled Site Plan	1
Reviewed by: KS		Iredell County, NC	
Date: December, 2006	ENVIRONMENTAL SERVICES • ENGINEERING • TESTING	S&ME Project #1588-04-011	

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

PROPERTY ID #: _____
COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

APPLICATION DATE _____
DATE EVALUATED: 9/7/06

OWNER: _____
ADDRESS: _____
PROPOSED FACILITY: Chrs. Pl. PROPOSED DESIGN FLOW (.1949): _____
PROPERTY SIZE: _____
PROPERTY RECORDED: _____
LOCATION OF SITE: _____

WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____
TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

EVALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut

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
60 1	L 4-6%	0-11	wsbk sc	FR ss/sp	RS				PS 0.25
		11-22	msbk c	FR ss/sp	C				
		22-50	wsbk c	FR ss/sp	R F:C	YB throughout			
61 2	L 4-6%	0-28	msg sl	FR ns/np	R				PS 0.3
		28-36	mgr sl	FR ns/np	BX				
		36-50	wsbk scl	FR ss/sp	BR F: m staining				
					F: RB mottles				
50 3	L 4-6%	0-21	msbk c	FR ss/sp	RS F: C sap				PS 0.3
		21-52	MA 5Y/6/0	FR ns/np					
51 4	L 4-6%	0-18	wsbk cl	FR ss/sp	R C: faint in clay				PS 0.3
		18-48	MA 5Y/6/0	FR ns/np	R				

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

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: Martin Mabe
OTHER(S) PRESENT: _____

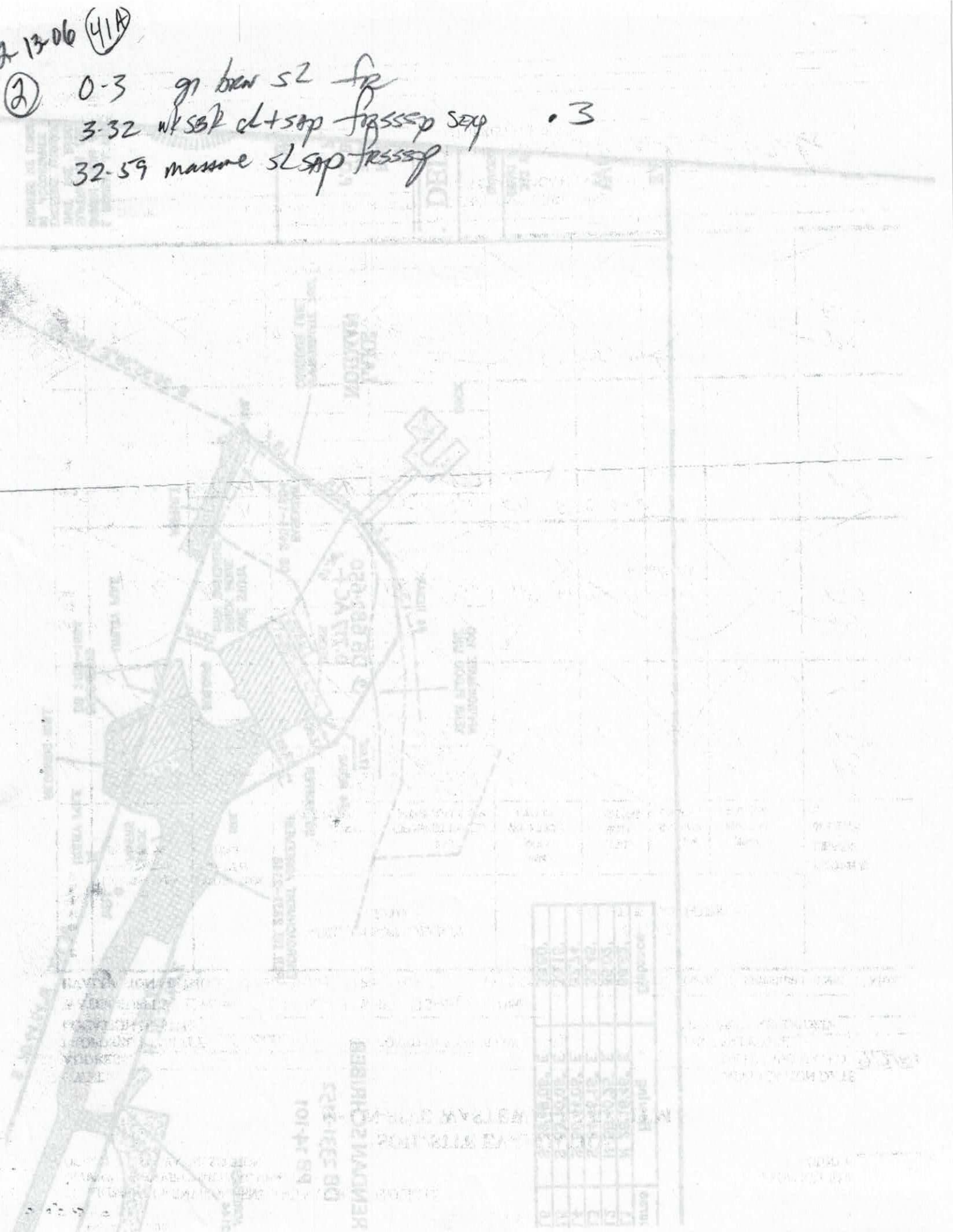
COMMENTS: _____

2-13-06 (41A)

(2) 0-3 gr brown sl fr

3-32 wk sbk cl+sap fr sss sp sep .3

32-59 massive sl sap fr sss sp



SITE/SOIL EVALUATION

Project No. 1588-04-011 **Phone No.** _____ **Date:** 2/23/04
Location Ches Point **Pin** _____ **County:** Iredell **Property Size** _____

Proposed Facility: Houses **Water Supply:** On-Site Well ☐ Community ☒ Public ☐ **Evalulation:** Auger Boring ☐ Pit ☒ Cut ☐

Weather: 50°F PCloudy Rain in AM only **Antecedent Moisture** LOT-39 FRONT LOT 41 **Surface Water:** LOT 43 BACK

FACTORS	PROFILE 1 - AM	PROFILE 3	PROFILE 5	PROFILE 8
Landscape Position %	L	L	L	L
Horizon Depth I	0-6	0-14	0-11	0-8
Color Munsell	Br	Br	4 Red Br	Red Br
Texture	SL/SCL	SCL	SCL	SL
Structure	WK SBK	WK SBK	WK SBK	MO GR
Consistence	FR SS/SP	FR SS/SP	FR SS/SP	FR SS/SP
Boundary				
Horizon Depth II	6-20	14-33	11-36	8-23
Color – Munsell	Red	Red	Red	Br
Texture	C	C	C	SL
Mottles	F Mica	FF Mn	F Vel Br	—
Structure	Mo SBK	Mo SBK	Mo SBK	WK SBK
Consistence	FR SS/SP	FR SS/SP	FR SS/SP	FR SS/SP
				F Rocks
Boundary				
Horizon Depth III	20-24	33-48	36-50	23-28
Color – Munsell	Red	Red	Red	Br
Texture	C	CL	SCL	SCL
Mottles	C Vel/Pale Br	F/C Mica	F Mica/F Sap	F Mn
Structure	MO SBK	WK/MO SBK	WK SBK	WK SBK
Consistence	FR SS/SP	FR SS/SP	FR SS/SP	FR SS/SP
				F Rocks
Boundary				
Horizon Depth IV	24-38			28-36
Color – Munsell	Red			Red
Texture	C			SC
Mottles	C Vel Br Ch 2's			F Vel Br
Structure	Mo ABK			MO SBK
Consistence	FR SS/SP			FR SS/SP
Boundary	38-48			36-48
Soil Wetness	Vel Br			Red
Restrictive Horizon	SCL			SC
Saprolite	C Chr. 2's			C Chroma 2/Vel Br
LTAR	WK SBK			MO SBK
Classification	FR SS/SP			FR SP
	.2 to 24"	.3 to 48"	.25-.3 to 48"	.25 to 36"

LEGEND

LANDSCAPE POSITION

R	Ridge Interfluve
S	Shoulder
L	Linear Slope
S	Foot Slope
N	Nose Slope
H	Head Slope
Cc	Conclave Slope
Cv	Convex Slope
T	Terrace
P	Flood Plain

TEXTURE

s	sand
ls	Loamy sand
sl	sandy loam
l	loam
si	silt
sil	silt loam
sicl	silty clay loam
cl	clay loam
scl	sandy clay loam
sc	sandy clay
sic	silty clay
c	clay

CONSISTENCE WET

Ns	non-sticky
Ss	slightly sticky
S	sticky
Vs	very sticky
Np	non-plastic
Sp	slightly plastic
P	plastic
Vp	very plastic

MOIST

vfr	Very friable
fr	friable
fi	firm
vfi	Very firm

STRUCTURE

sg	single grain
m	massive
cr	crumb
gr	granular
sab	subangular blocky
ab	agular blocky
pl	platy
pr	prismatic

(OVER)

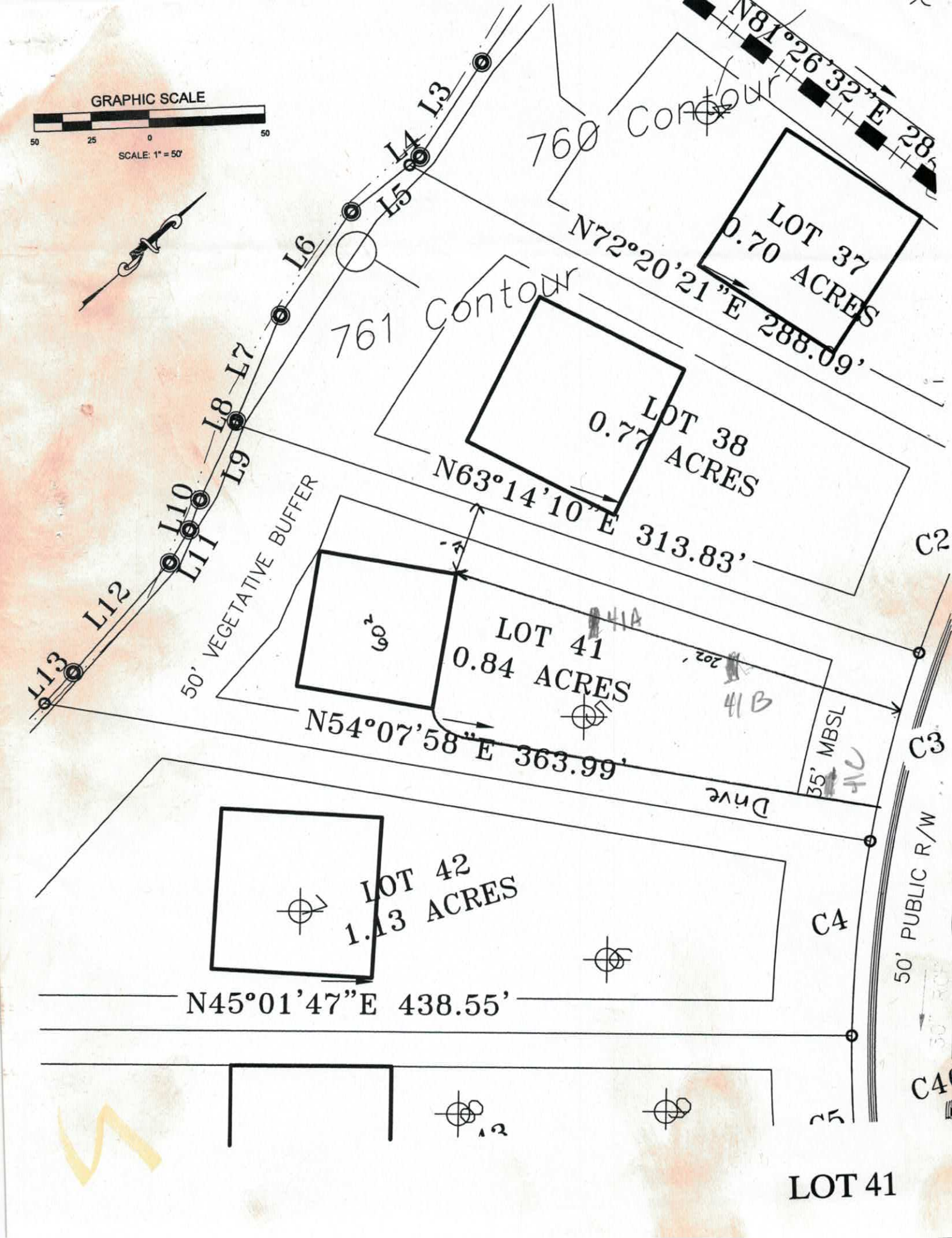
Pit 41A
7-26-06

0-8 wk sbk red scl frsssp
8-30 sbk red c frsssp sxp .25 - .3
30-51 m ABK gravelly c frSSSp common sxp
few manganese conc.
few w. rock

41B
0-6 wk sbk scl frsssp
6-22 mf sbk red c frsssp sxp .3
22-53 wk sbk red cl frsssp

41C
0-5 wk sbk rdbrn scl frsssp
5-27 mf sbk red c frsssp sxp .3
27-51 wk sbk red cl frsssp
few red sxp

70'
74'
74
70
64
62


GRAPHIC SCALE
50 25 0 50
SCALE: 1" = 50'
760 Contour
761 Contour
N81°26'32"E 28
N72°20'21"E 288.09'
N63°14'10"E 313.83'
N54°07'58"E 363.99'
N45°01'47"E 438.55'
LOT 37
0.70 ACRES
LOT 38
0.77 ACRES
LOT 41
0.84 ACRES
LOT 42
1.13 ACRES
50' VEGETATIVE BUFFER
35' MBSL
50' PUBLIC R/W
L3
L4
L5
L6
L7
L8
L9
L10
L11
L12
L13
C2
C3
C4
41A
41B
41C
LOT 41

RECEIVED JUL 17 2014

IREDELL COUNTY HEALTH DEPARTMENT

Paid $195.00
Int. Relayout

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

Application For:

( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) 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: (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:

Applicant Name: Peachtree Res. Prop **Address:** 1930 Centre Park Dr #3 Charlotte, NC 28217 **Phone:**

Owner Name: Same **Address:** **Phone:**

Property Information:

Street Address:

Subdivision Name: Chesapeake Pt **Section/Phase:** **Lot Number:** 41

Driving Directions: BSR, TL Isle of Pines, TR Cove Crk, on RT

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

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

Maximum Number of Bedrooms: 4
Maximum Number of Occupants:
( ) Swimming Pool
( ) Other Addition/Structure:

(X) 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 (X) Other: Accepted

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

7/17/2014
DATE

LOT #41

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAGE 1: *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: ( ) 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:

Applicant Name: Mark Benitez **Address:** 516-D River Hilway Suite 301 Mooresville, NC 28117 **Phone:** 704-928-9

Owner Name: Peach Tree **Address:** Same as above **Phone:**

Property Information:

Street Address: 265 Cove Creek Loop, Mooresville, NC 28117

Subdivision Name: Chesapeake Point **Section/Phase:** _____ **Lot Number:** 41

Driving Directions: Brawley School Road, left on Isle of Pines, Right on Cove Creek Loop, lot on right

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

(√) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 4
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 (√) 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 (√) No **Does the site contain any jurisdictional wetlands?**
( ) Yes (√) No **Is any non-domestic sewage (i.e. industrial) 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.

Signature: _____ 4/23/14
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

Lot 41

IREDELL COUNTY HEALTH DEPARTMENT

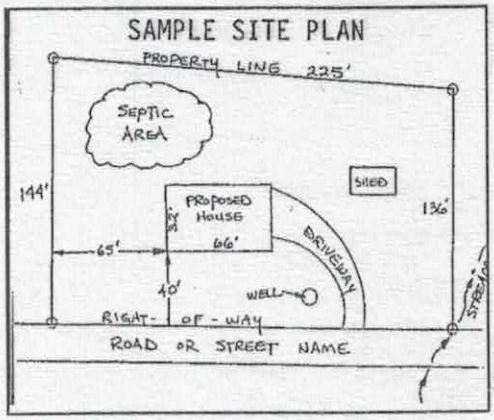
ENVIRONMENTAL HEALTH DIVISION

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:

- **(X) Property Line measurements are clearly identified**
- **( ) All proposed structures are indicated**
- **( ) Front and side setbacks from property line**
- **( ) Preferred driveway location and well location**
- **( ) Area you prefer your septic system to be placed**
- **( ) North arrow, or other sufficient indicator of direction**

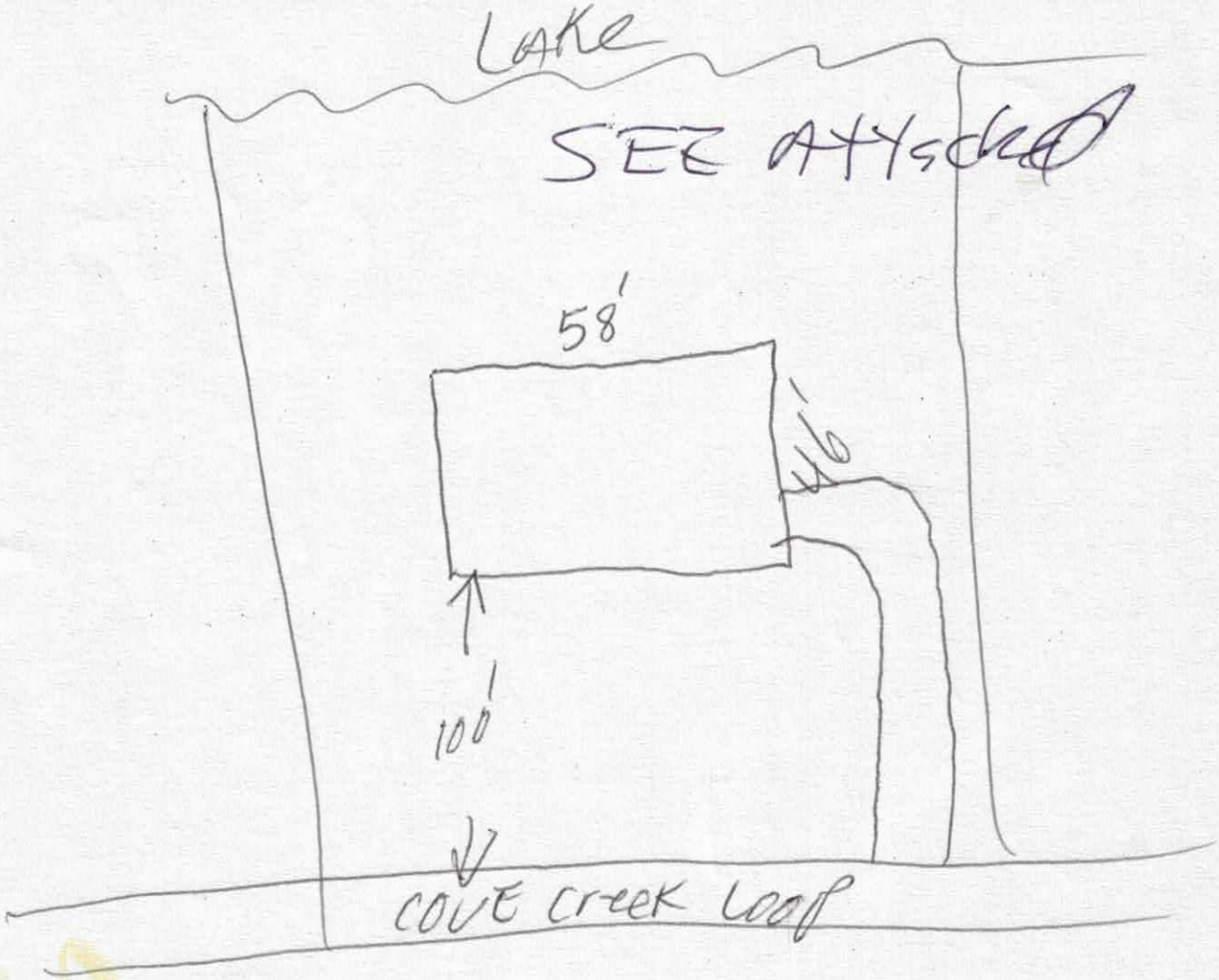


Circle N/A on the following if appropriate:

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

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: _____ _____

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

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...

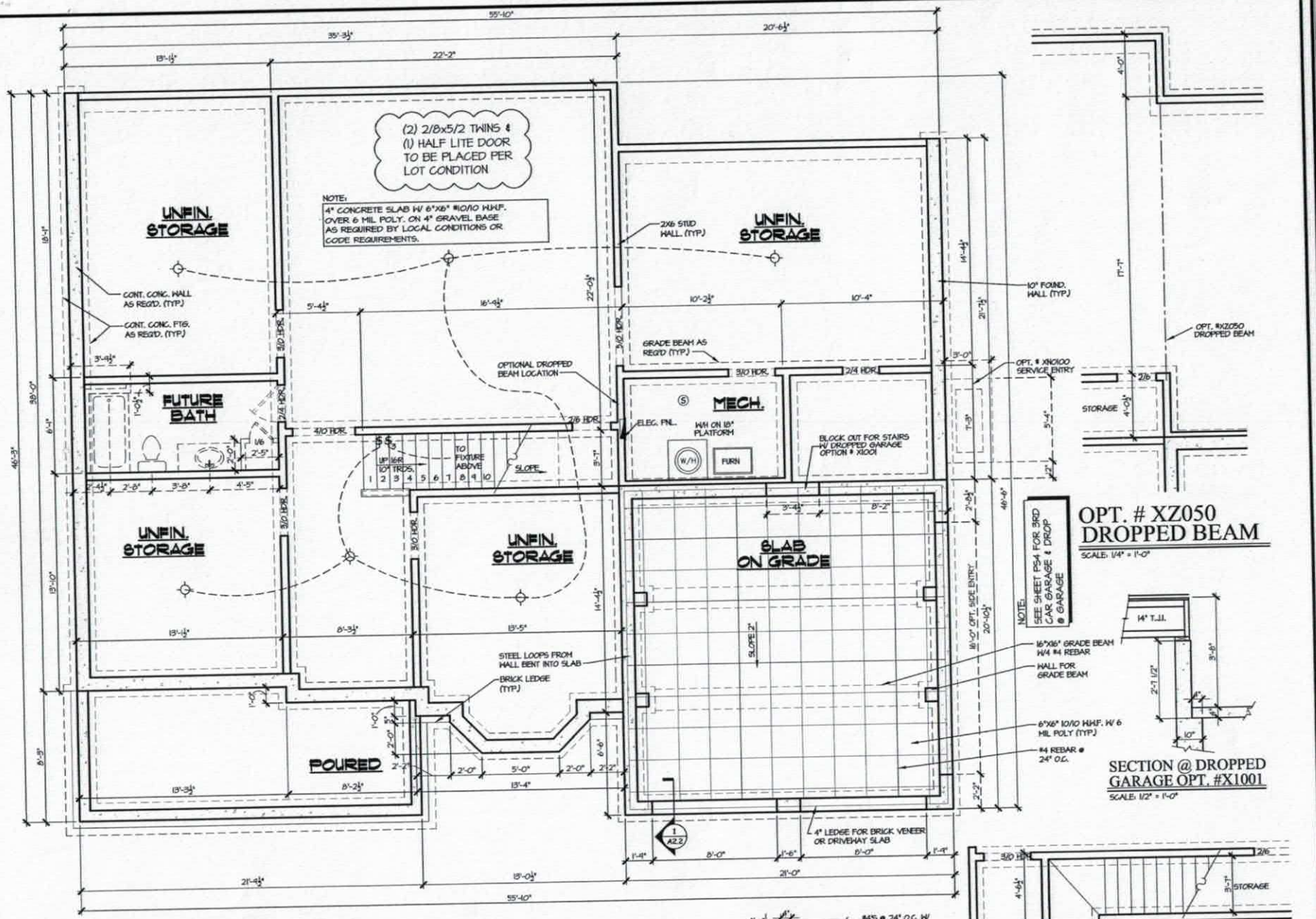
Circle N/A on the following if appropriate:

____ 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: _____ 7/17/2014
REQUIRED property owner or owner's legal representative signature. DATE

USE THIS SPACE TO DRAW YOUR SITE PLAN

See Attached Plan



NOTE:
DROP GARAGES REQUIRE STEPS WHICH MAY IMPEDE FIT FOR VEHICLE. STRATEGIZE EXTENSION FOR FIT.

NOTE:
10" POURED CONC. WALL W/ BRICK LEDGE WHERE NEEDED.

NOTE:
ALL DIMENSIONS TO FRAME. ADD FOR BRICK.

BASEMENT FLOOR PLAN
SCALE: 1/4" = 1'-0"

OPT. # XZ050 DROPPED BEAM
SCALE: 1/4" = 1'-0"

SECTION @ DROPPED GARAGE OPT. #X1001
SCALE: 1/2" = 1'-0"

OPT. #A3105 12'-0" BSMNT.
SCALE: 1/4" = 1'-0"

1 SECTION @ GARAGE
SCALE: 1/2" = 1'-0"

PEACHTREE RESIDENTIAL PROPERTIES
The Builder Who Listens
7380 McGinnis Ferry Rd. • Suwanee, Georgia 30174
Voice (770) 622-2822 • Fax (770) 622-9171

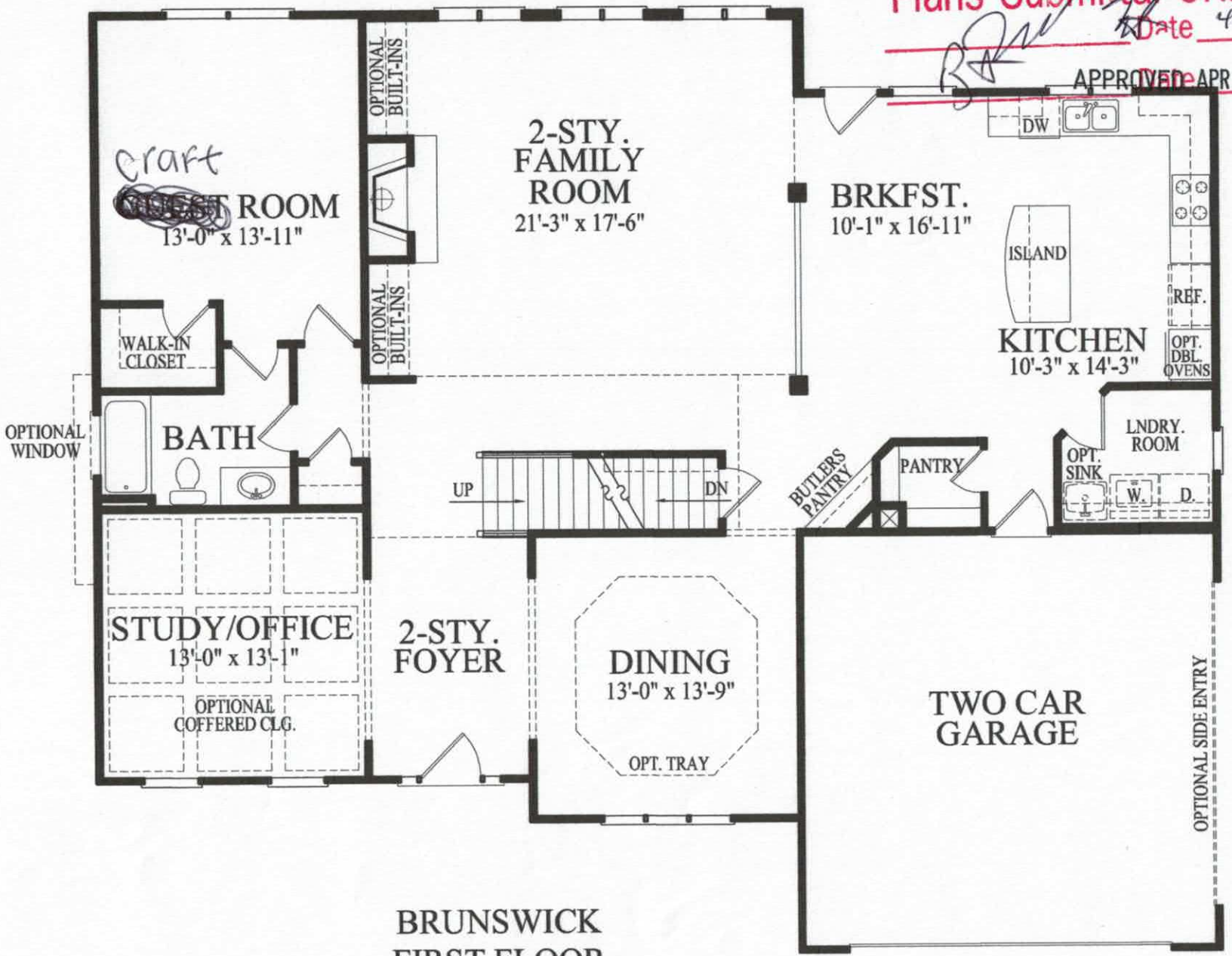
This drawing is the property of Peachtree Residential Properties and may not be copied or reproduced without the written permission of Peachtree Residential Properties.

Drawn By: AMH
Date: 10/22/10
Plan No:

Revision: 05/31/11-3467, 08/01/13-4420

Model Name: BRUNSWICK "N"
Sheet Title: BASEMENT FOUNDATION PLAN
SHEET NO. A2.2N

Acknowledgement Of
Plans Submittal ONLY!
Date 4-28-14
APPROVED APR 2 8 2014



BRUNSWICK
FIRST FLOOR
04/13/11

5

Acknowledgement Of
Plans Submittal ONLY!

APPROVED Date APR 2 8 2014

Date 4-28-14



BRUNSWICK
SECOND FLOOR
04/13/11

5

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 #:	138030ZO	Subdivision:	Chesapeake Point Ph 2
Proposed Use:	Single Family	Township:	1700 Davidson
Location of Property:	000 Cove Creek Rd. Mooresville NC 28117		
Parcel #:	4636120237.041	Zoning:	R-20
Lot #:	41 Size: ~~1.130~~ .845	Flood Plain:	No Watershed: WSIV-CA
Applicant:	S&ME INC. ENGINEERING (Toney Jacobs)	Owner:	Chesapeake Pointe LLC
Address:	105D DENVER BUSINESS PARK DR Mooresville NC 28115	Address:	7380 McGinnis Ferry Road Suwanee, GA 30024
Phone:	704-662-8625	Phone:	
Property Recorded:	Yes Site Plan Reviewed:	Community Water:	No Community Sewer:

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: 30000	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:

DEVELOPER PERMIT

Directions:

Brawley School Road, left Isle of Pines, right Cove Creek, on right

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.

DEBBIE WILLIAMS Printed: 9/8/2006