IREDELL COUNTY HEALTH DEPARTMENT KW

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 208733

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

PIN # 4636125938

APPLICANT/OWNER: True Homes APPLICANT ADDRESS: 2649 Brekon Ridge Ctr Dr Monroe, NC

SITE ADDRESS: 113 Farm Knoll Way Mooresville, NC PHONE: 704 283-4229 ALT. PHONE

SITE DIRECTIONS: Brawley School Rd TL Isle of Pines TR Rock Ridge Pt TL Farm Knoll on right SAP CONTROLLED: ☒ YES ☐ NO

SUBDIVISION: Rock Ridge Pt SECTION: LOT # 24 LOT AREA: .7Ac DESIGN FLOW 480gpd L.T.A.R.: .275

Septic Tank * 1500g (gal) STB 2111 Date 9-11-17

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines 4 Linear Ft 437'

Trench Width 36" Trench Bottom Depth ~~(Low side)~~ (max) 36" Gravel Depth N/A

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

System Description: Gravity - 25% Reduction

Repair System Description: LPPPBPS

Maintenance Agreement Required: ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 4

☐ Business No. Persons 8

☐ Other No. Employees

☐ Slab ☒ Crawl Space

☐ Basement w/ plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☒ Community

Comments / Conditions: * per plan Specs however 1000g required. Divert surface/stormwater away from Septic. ~~*~~ Must keep future pool at least 15ft from Septic tanks & drainlines & 10ft off supply line.

INITIAL SITE SKETCH

See attached approved plan by Kenny Owens (dated 1/14/18, approved 2/19/18)

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: Jackie Todd Date: 2/21/18 Installed by: Sid Gaskins (Michael)

IMPROVEMENT PERMIT by: Maria Dotson Date: 2/19/18 OPERATION PERMIT by: Kayla Watson Date: 3-23-18

AUTHORIZATION TO CONSTRUCT by: Maria Dotson Date: 2/20/18 Existing System Inspected by: Date:

CA Application

Int. Relayout HOUSE SIZE

IREDELL COUNTY HEALTH DEPARTMENT

RECEIVED FEB 12 2016

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

Pd $225.00 #208733

Application For:

( ) Septic Improvement Permit (X) New Well Permit (X) Authorization to Construct ( ) Well Repair Permit ( ) Existing System Inspection ( ) Well Abandonment ( ) 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:

Place an (X) beside whichever is submitted if applicable SEE ATTACHED

(X) Survey Plat, scaled no more than 1 inch = 60 feet

(X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information:

Applicant Name: TRUE HOMES Address: 2645 BRECKENRIDGE CENTER DR Phone: 704-253-122

Owner Name: TRUE HOMES Address: 2649 BRECKENRIDGE CENTER DR Phone: 704-253-122

Property Information: 113

Street Address: 110 FARM KNOLL WAY

Subdivision Name: ROCK RIDGE POINT Section/Phase: 1B Lot Number: 24

Driving Directions: HIGHWAY 21 SOUTH, RIGHT ONTO BRAMLEA SCHOOL RD

TRUE ON ISLE OF PINE. TRUE ONTO ROCK RIDGE POINT.

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: 8
(X) 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 ( ) Community Well ( ) City Water (X) 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:

Please answer the following to the best of your ability:

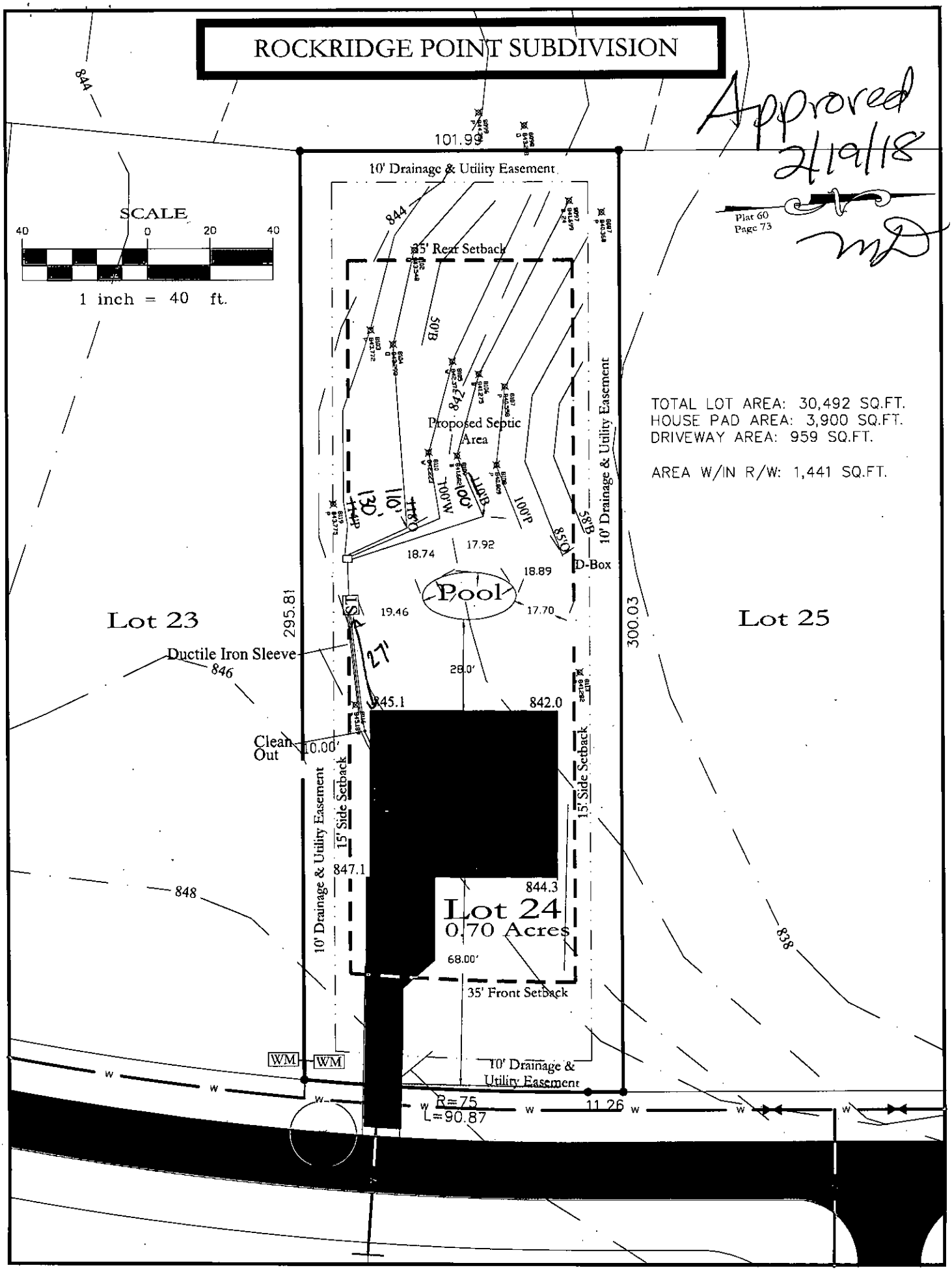
( ) Yes (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (X) No Is the site subject to approval by any other public agency?

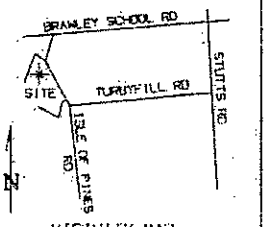
I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible 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: [signature]
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

1-14-16
DATE

ROCKRIDGE POINT SUBDIVISION



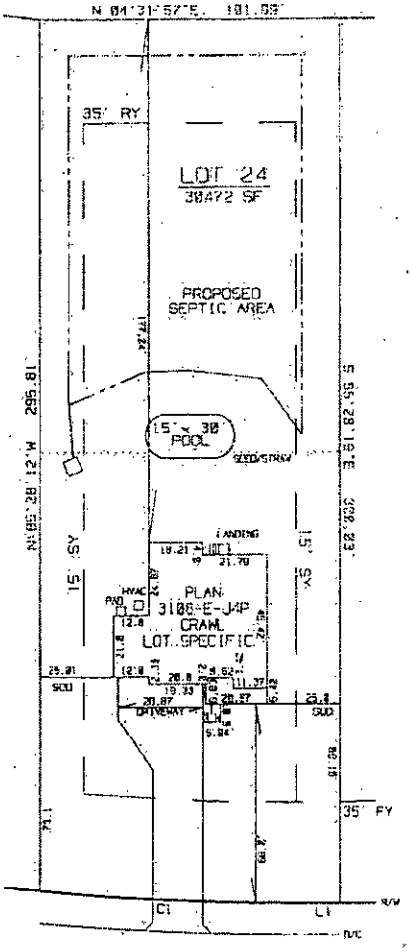


VICINITY MAP
NOT TO SCALE

IMPERVIOUS SURFACE AREA	
DESCRIPTION	AREA
LOT AREA TO DZS	31596 SF
HOUSE	2225 SF
DRIVE TO R/W	1527 SF
DRIVE APRON	198 SF
PATIO	0 SF
LEADWALK	25 SF
DECK	20 SF
5' PUBLIC WALK	N/A
TOTAL PROPOSED	4030 SF

SOD/SEEDING CALCULATIONS	
TYPE	
SOD	6730 SF
SEED/STRAW	5803 SF

N/F
RYAN S. ROSER &
KRISTINE C. HUSCH
DB: 2184 PG: 2834
LOT 80
PLAT: 48 PG: 43
CHESAPEAKE POINTE PH II



LOT 23

LOT 25

Approved
2/19/18
MD

FARM KNOLL WAY

50' PUBLIC R/W

LINE	BEARING	DISTANCE
L1	S 84°31'41"W	11.26'

CURVE	DELTA ANGLE	RADIUS	ARC	TANGENT	CHORD	CHORD BEARING
C1	5°20'24"	975.00'	90.87'	45.47'	90.84	S 82°11'53"W

THIS PROPERTY MAY BE SUBJECT TO ANY AND ALL APPLICABLE DEED RESTRICTIONS, EASEMENTS, RIGHT-OF-WAY, UTILITIES AND RESTRICTIVE COVENANTS WHICH MAY BE OF RECORD OR IMPLIED.

THIS DRAWING DOES NOT REFLECT AS-BUILT INFORMATION

PRELIMINARY PLAT
NOT FOR RECORDATION, CONVEYANCES, OR SALES

SCALE: 1" = 50'

0 25' 50 75 100

JENKINS AND LOWERY
LAND SURVEYING
PO BOX 1169
WAXHAW, NC 28173
704-821-3350
FIRM LICENSE # C-3167

HOUSE LOCATION PLOT PLAN FOR TRUE HOMES

OF

113 FARM KNOLL WAY

LOT 24 OF ROCKRIDGE POINT SUBDIVISION

DAVIDSON TOWNSHIP, IREDELL COUNTY, N.C.

AREA BY COORDINATE COMPUTATION
MAP BOOK 60
PAGE 73

REVISED: 12/18/17
DRAWN BY: ASW/JEJ/ESJ/JEJ
SERVER SED
DSK CA23B RRP24

Design Specifications Proposal Lot 24 Rock Ridge Point, Iredell North Carolina
(Revised 11-15-16)

Approved 2/19/18

Daily Design Flow:	480 gpd
Number of Bedrooms	4 bedroom
Basement or Crawlspace	Crawlspace
Septic Tank Size	1500 gal, Delliger Tank with effluent filter Poly Lock PL68
Pump Tank Size	NA
Primary System Loading Rate (LTAR)	0.275 gpd/ft^2 LTAR including Soils Evaluations were determined by Iredell County. Soils Evaluations and LTAR were not Conducted by Septic Environmental Solutions, Inc.
Primary System	25% reduction, all lines to be a minimum of 9-ft on center with 3-ft wide trench widths. Trench depth shall be maximum 36-inches. See scale map for total length.
Number and Length of Lines	4 See attached drawing.
Total foot of Primary System	requires 437-ft, provided 442
Distribution Device	Distribution Box
Maintenance Agreement Required	NA
Pump Type	NA
Dosing Volume	NA
Depth of effluent Pumped per Dose	NA
Supply Line	NA
Check Valve	NA
Siphon Break Hole	NA
Repair System Loading Rate	0.275 gpd/ft^2
Repair System	LP PPBPS, See attached drawing
Total foot of Line	requires 291, provided 290+See attached drawing.

Acknowledgement of
Plans Submittal ONLY!

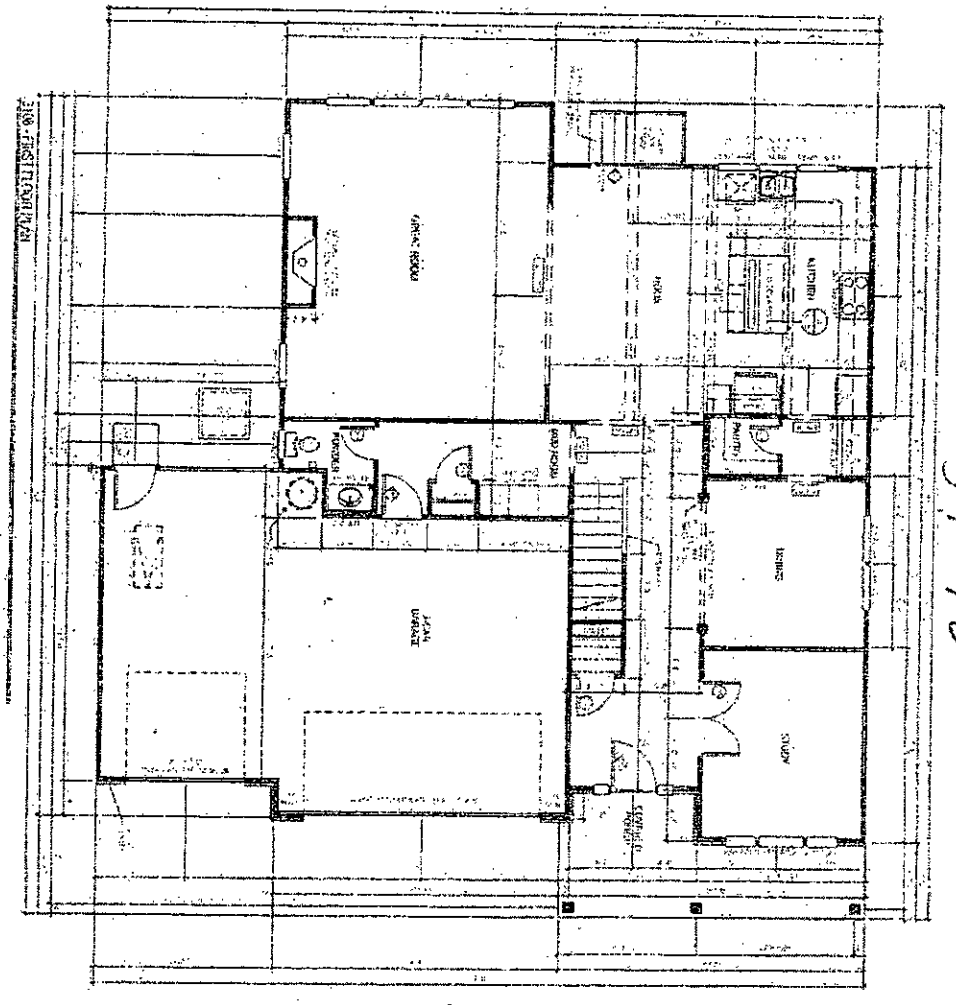
~~Date~~

~~Date~~

~~1-24-17~~

1-14-18

52'



54' 10"

54' 10"

52'

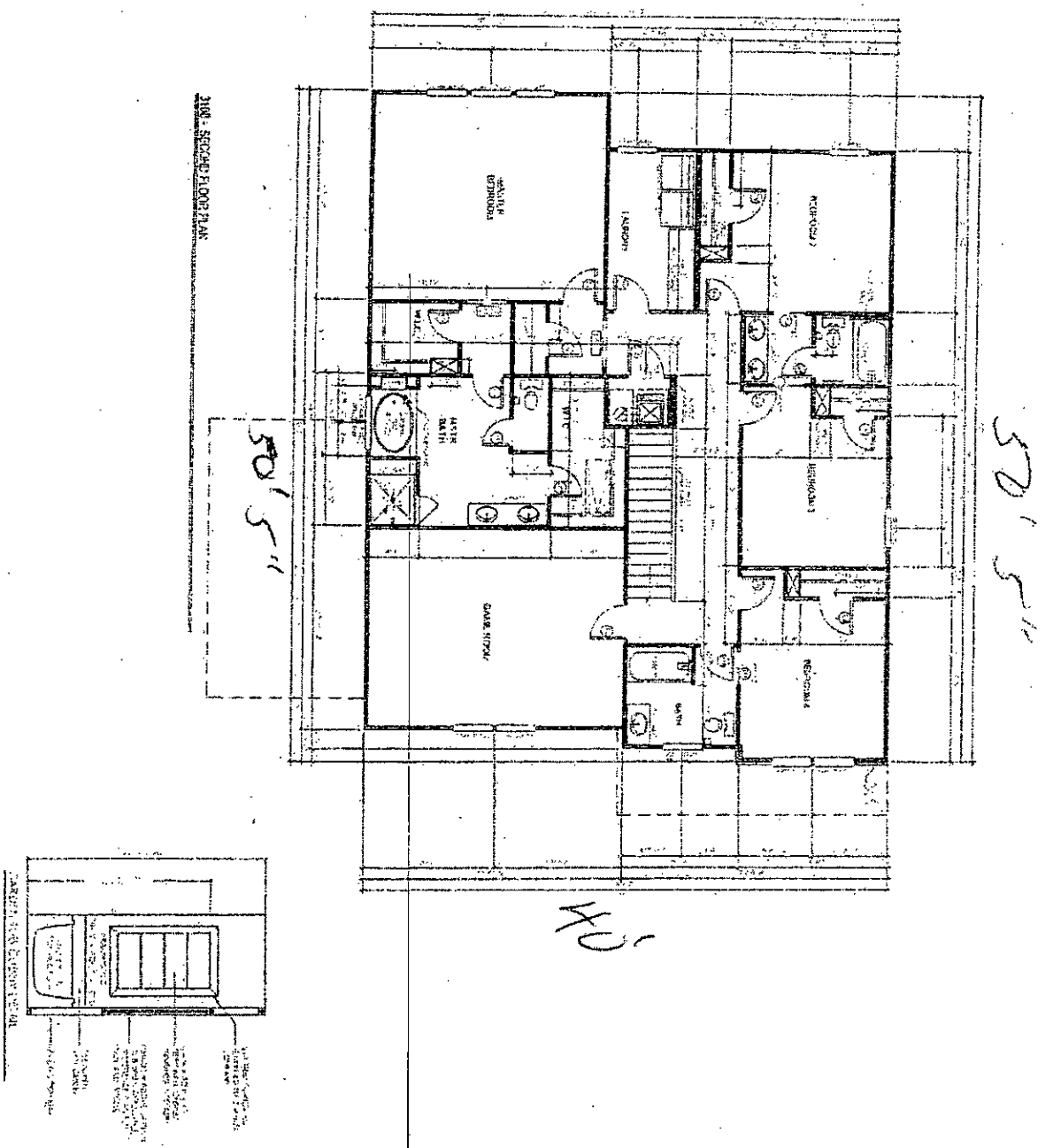
SHEET A2.1		TOWNSEND 3108	ROCKRIDGE POINT	TrueHomes IT'S ALL ABOUT U. 2849 Breckinridge Center Dr Suite 104 Monroe, N.C. 28110 704-271-1191
		IREDELL	LOT # 24	

Acknowledgement of
Plans Submittal ONLY!

_____ Date _____

_____ Date _____

1-14-18



SHEET A2.2		TOWNSEND 3108	ROCKRIDGE POINT LOT # 24	TrueHomes IT'S ALL ABOUT / 2548 Brookridge Centre Dr. Suite 104 Monroe, N.C. 28110 704-271-1151
		IREDELL		

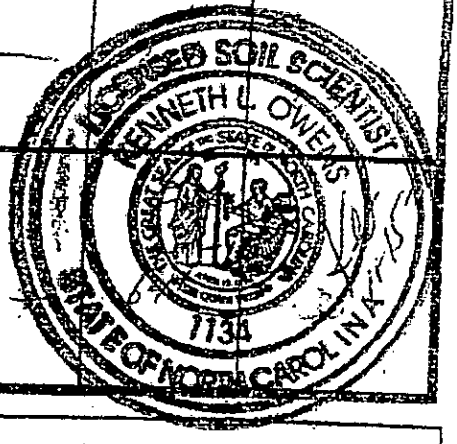
DIVISION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

PROPERTY ID #: _____
COUNTY: _____

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

Addrex
OWNER: 113 FARM KNOLL WAY LOT 24
ADDRESS: Wind Tree Homes 2649 Blackwater Ct Dr
PROPOSED FACILITY: 4 BEC
LOCATION OF SITE: LOT 24 Ko Creek Park
APPLICATION DATE: _____
PROPOSED DESIGN FLOW (.1949): 4Bd
DATE EVALUATED: 11/12/13
PROPERTY SIZE: 2.3 ac
PROPERTY RECORDED: Book 15 Page 25 Lot 24
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) STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1948 RESTR HORIZ	PROFILE CLASS & LTAR
1	BENCH Rapid Slope 4-5% LL	0-12	WK/Ap/SL FR/SL	NP/VFR/NONE	Upgraded	56+	—	56+	U.275
		12-43	SL/WK/Ap/SubAg	SS/FR/SLHA					
		43-56	C/FR/SL/GR						
2	Rapid Slope 4-5% LR	0-10	SL/FR/GR	NP/VFR/NEAP	—	64+	—	64+	U.275
		10-17	SCL/SBK	SS/FR/NEAP					
		17-44	C/SBK/FM	SS/FR/MEAP					
		44-64	FS/SBK/Coarse Loamy Lens	NP/LOF/NEAP					
3	Rapid Slope 2-5% LR	0-12	SCL/SBK/FR	NS/NP/NONE		62+	—		
		12-44	clay/FR/SBK	SS/SP/NEXP					
		44-62	FS/SBK/Loamy Lens	SS/NP/NEAP					
4	Rapid Slope 4-5%	0-4	OA			64+			
		4-10	SCL/FR	NS/NP/NEXP					
		10-50	C/clay/FR/SBK	SS/SP/NEXP					
		50-64	C/clay/FR/SBK	NS/NP/NEXP					



DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	25% Lot	30% Rear Lot
System Type(s)	4BR Bed LL/4L	3BR +
Site LTAR	0.275	0.275

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

COMMENTS: _____

AUTHORIZATION TO ACT AS AGENT FOR OWNER

Any application/document/permit requiring a signature must be signed by the property owner or their authorized agent. This form shall be provided by the owner to allow specified individuals to act as agents for the owner. This form allows the specified individuals to sign or receive any application/document/permit on behalf of the owner. This form allows the authorized agent to make decisions on behalf of the owner pertaining to modifications of permits in the field. It is the responsibility of the owner to assure that any/all permit conditions specified on permits issued by this Division are followed.

I, True Homes, am the legal owner of the property located at 113 Farm Knoll Way, identified as PIN(Parcel Identification Number) 4636125938.000, located in Iredell County, North Carolina.

I do hereby authorize (print authorized agent/company name) Kenneth Fulmer, Septic Environmental, Statesville, NC, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

1. Improvement Permit (IP)/ Authorization to Construct (AC).
2. Application for soil-site evaluation (new/repair).
3. Application/permit for water well/well abandonment.
4. Application for existing system.
5. Application for Improvement Permit (IP)/ Authorization to Construct (AC).

I agree to abide by any and all decisions and/or conditions between the agent acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division. This form must be fully executed before the individual's specified above will be recognized as the authorized agent.

Melody K. Patrick — 3/6/15
Signature of Owner — Date

[signature] — 3-6-15
Signature of Witness — Date

DIVISION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

RECEIVED NOV 15 2016

PROPERTY ID #: 1 / 1
COUNTY: Brunswick

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

Approved MD 11/29/16

OWNER: Address 113 FARM KNOLL WAY LOT 24
ADDRESS: Ashton True Homes 2649 Blickenridge Ctr Dr
APPLICATION DATE
PROPOSED FACILITY: 4 BRM PROPOSED DESIGN FLOW (.1949): 480 DATE EVALUATED: 11/15/16
LOCATION OF SITE: Lot 24 Rockridge Point PROPERTY SIZE: 2.3
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other PROPERTY RECORDED: After 1993 Map Book, Pg 2410
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	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
3	Bln Repair Septic <5% LL	0-10	WK, Rad/Pl, Vcourse Fr	NS/NP/MEMP	compacted	56+	—	56+	0.27
		10-43	S, WK/Rad/Pl	SS/SP/SEMP					
		43-56	C/FR/Pl/WK/Rad						
4	Repair Septic <5% LL	0-16	SL/FR/Rad sandy loam	NS/NP/MEMP	—	64+	—	64+	0.275
		16-17		NS/NP/MEMP					
		17-41	C/Pl/Rad/FR/Pl/VFR	SS/SP/MEMP					
		41-64	FR, SPB/Rad sandy clay loam WK	NS/NP/MEMP					
2B	Dnhl Septic <5%	0-12	Sandy Loam/FR/Rad	NS/NP/MEMP		62+	—		
		12-44	clay/FR/Rad/SPB	SS/SP/MEMP					
		44-62	FR/SPB/Rad sandy clay loam WK	NS/NP/MEMP					
1	Dnhl Septic	4-0 OA	THL ORGANIC MATT						
		4-10	sandy loam/FR	NS/NP/MEMP					
		10-50	C/clay/FR/SPB/Rad	SS/SP/MEMP		64+			
		50-64	clay/loam/FR/SPB/WK	NS/NP/MEMP					

LICENSED SOIL SCIENTIST KENNETH L. OWENS 113A STATE OF NORTH CAROLINA

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	25% Ledge	30% Ledge
System Type(s)	4BR Bedroom	4BR 2BR
Site LTAR	0.275	0.275

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): S. Hable
EVALUATED BY:
OTHER(S) PRESENT:

COMMENTS:

Updated February 2014

[redacted] OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
[redacted] OF ENVIRONMENTAL HEALTH
[redacted] WASTEWATER SECTION

Sheet ___ of ___
PROPERTY ID #: _____
COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Rocky Ridge APPLICANT: _____
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: 1/10/06
PROPOSED FACILITY: House PROPOSED DESIGN FLOW (.1949): 480 PROPERTY SIZE: _____
LOCATION OF SITE: Lot 24 PROPERTY RECORDED: _____
WATER SUPPLY: ☐ Private ☒ Public ☒ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☒ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1948 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
AH 1	L	0-12	Mo SBK C	FR SS/SP	Red				
		12-48	WK SBK CL	FR SS/SP	Red; C	sap			.3 to 48"
19	L	0-48	Mo SBK C-CL	FR SS/SP	Red; F	sap			.3
3	2-6-06 8% ± S/L	0-3	gr [illegible] fr						
		3-17	SBK Red'o/ol	fr ss sp stk°					.3
		1755	WK SBK ol	fr ss sp					
4		0-21	WSBK Red'o	fr ss sp SBK					
		21-38	WSBK Red'o	fr ss sp common sap					.3
		38-55	Massive L Sap	fr ss sp					
			4 bm	"					

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

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: _____