ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 (Mooresville) Office (704) 660-3625 PERMIT # 309550

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

PIN # 463-620-0516 ✓

APPLICANT/OWNER: Mary + Joe Sauer — APPLICANT ADDRESS: 141 Cove Creek Loop Mooresville 28117

SITE ADDRESS: 141 Cove Creek Loop ✓ 28117 — PHONE: 704-506-9493 — ALT. PHONE 704-654-4174

SITE DIRECTIONS: Isle of Pines R to North Harbor - Cove Creek Loop House on L — SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Pine Isle ✓ — SECTION: — LOT # 13 ✓ LOT AREA: 0.67 — DESIGN FLOW: Ex — L.T.A.R.: Ex

Septic Tank 1000 (gal) STB 2071 Date INFILTRATOR — ☐ New System ☒ Repair ☐ Expansion System Type: I II III IV V VI

Pump Tank (gal) PT Date — System Description:

Pump Make Model Serial # — Repair System Description: Tank

Nitrification Fields X + # Lines Linear Ft — Maintenance Agreement Required: ☐ YES ☒ NO

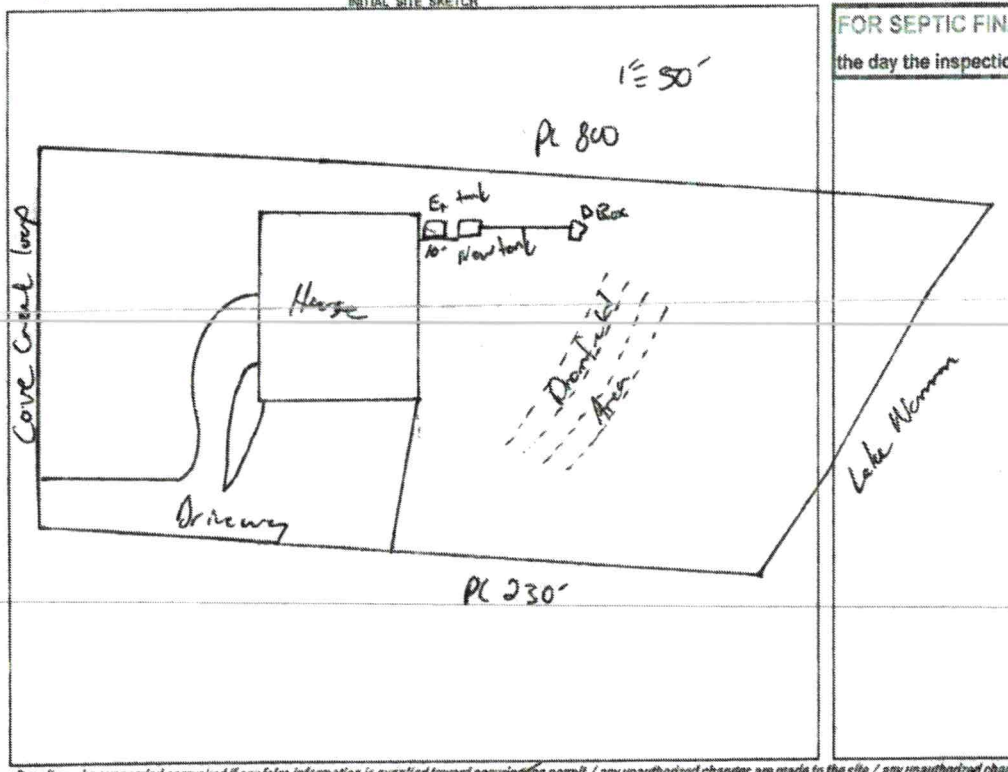
Trench Width Trench Bottom Depth(Low side) — Gravel Depth — ☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms Ex — ☐ Business No. Persons Ex — ☐ Other No. Employees — ☐ Slab ☒ Crawl Space — ☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☒ Community

Comments / Conditions: Pump Cashand fill old Septic tank, Inspect D Box and replace if needed. Maintain 5' from Deck with new ST

INITIAL SITE SKETCH



AS BUILT SKETCH

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inspector to confirm your time.

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

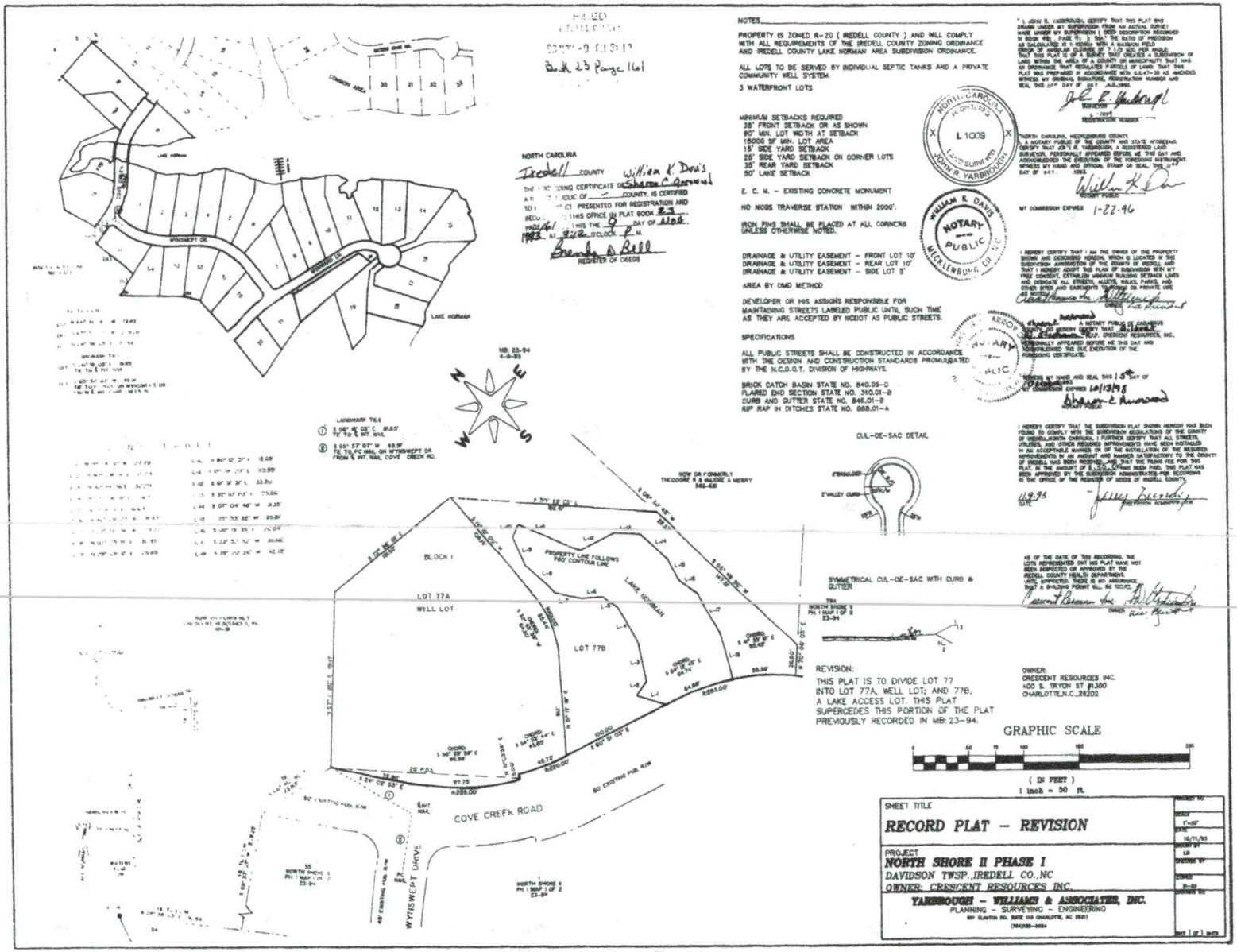
☐ IMPROVEMENT PERMIT *with plat valid without expiration.* ☐ IMPROVEMENT PERMIT *with site plan valid for 60 mos.* ☑ AUTHORIZATION TO CONSTRUCT *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

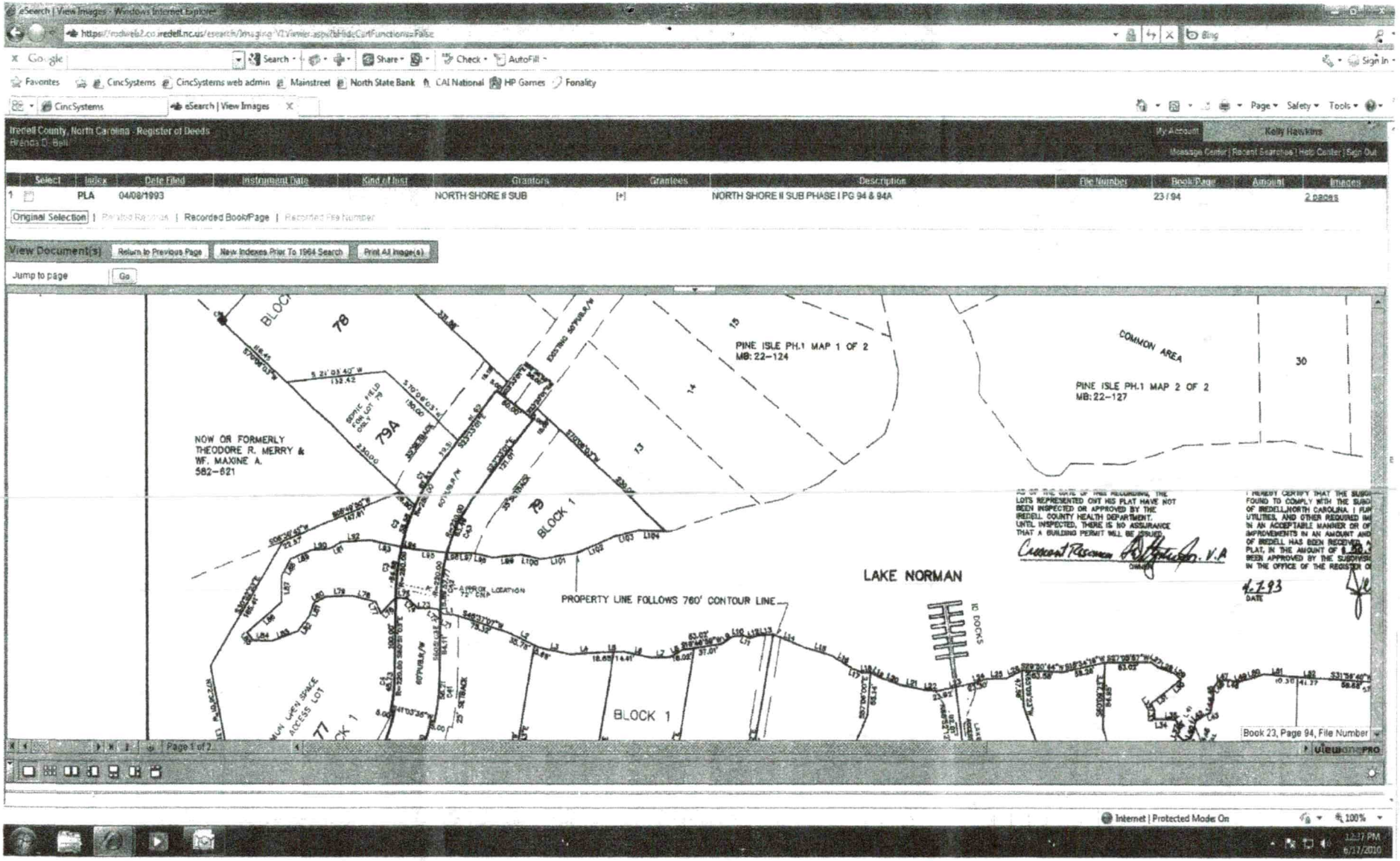
Owner / Applicant Signature: Mary A Sauer — Date: 8-10-20 — Installed by: LENTZ

IMPROVEMENT PERMIT by: — Date: 8-6-2020 — OPERATION PERMIT by: Burgent C. White — Date: 10-9-2020

AUTHORIZATION TO CONSTRUCT by: — Date: 8-6-2020 — Existing System Inspected by: — Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.


FILED
COUNTY
Book 23 Page 161
NOTES
PROPERTY IS ZONED R-20 (IREDELL COUNTY) AND WILL COMPLY WITH ALL REQUIREMENTS OF THE IREDELL COUNTY ZONING ORDINANCE AND IREDELL COUNTY LAKE NORMAN AREA SUBDIVISION ORDINANCE.
ALL LOTS TO BE SERVED BY INDIVIDUAL SEPTIC TANKS AND A PRIVATE COMMUNITY WELL SYSTEM.
3 WATERFRONT LOTS
MINIMUM SETBACKS REQUIRED
35' FRONT SETBACK OR AS SHOWN
90' MIN. LOT WIDTH AT SETBACK
18000 SF MIN. LOT AREA
15' SIDE YARD SETBACK
25' SIDE YARD SETBACK ON CORNER LOTS
35' REAR YARD SETBACK
50' LAKE SETBACK
E. C. M. - EXISTING CONCRETE MONUMENT
NO NCGS TRAVERSE STATION WITHIN 2000'.
IRON PINS SHALL BE PLACED AT ALL CORNERS UNLESS OTHERWISE NOTED.
DRAINAGE & UTILITY EASEMENT - FRONT LOT 10'
DRAINAGE & UTILITY EASEMENT - REAR LOT 10'
DRAINAGE & UTILITY EASEMENT - SIDE LOT 5'
AREA BY DMD METHOD
DEVELOPER OR HIS ASSIGNS RESPONSIBLE FOR MAINTAINING STREETS LABELED PUBLIC UNTIL SUCH TIME AS THEY ARE ACCEPTED BY NCDOT AS PUBLIC STREETS.
SPECIFICATIONS
ALL PUBLIC STREETS SHALL BE CONSTRUCTED IN ACCORDANCE WITH THE DESIGN AND CONSTRUCTION STANDARDS PROMULGATED BY THE N.C.D.O.T. DIVISION OF HIGHWAYS.
BRICK CATCH BASIN STATE NO. 840.03-C
FLARED END SECTION STATE NO. 310.01-2
CURB AND GUTTER STATE NO. 846.01-8
RIP RAP IN DITCHES STATE NO. 868.01-A
NORTH CAROLINA
Iredell COUNTY
William K. Davis
Sharon C. Harwood
REGISTER OF DEEDS
L 1009
JOHN R. YARBROUGH
WILLIAM K. DAVIS
NOTARY PUBLIC
MECKLENBURG CO. N.C.
MY COMMISSION EXPIRES 1-22-96
Sharon C. Harwood
MY COMMISSION EXPIRES 10/13/95
11-9-93
OWNER:
CRESCENT RESOURCES INC.
400 S. TRYON ST #1300
CHARLOTTE,N.C.,28202
REVISION:
THIS PLAT IS TO DIVIDE LOT 77 INTO LOT 77A, WELL LOT; AND 77B, A LAKE ACCESS LOT. THIS PLAT SUPERCEDES THIS PORTION OF THE PLAT PREVIOUSLY RECORDED IN MB: 23-94.
GRAPHIC SCALE
(IN FEET)
1 inch = 50 ft.
SHEET TITLE
RECORD PLAT - REVISION
PROJECT
NORTH SHORE II PHASE I
DAVIDSON TWSP.,IREDELL CO.,NC
OWNER: CRESCENT RESOURCES INC.
YARBROUGH - WILLIAMS & ASSOCIATES, INC.
PLANNING - SURVEYING - ENGINEERING
10/11/93
LB
R-20
Sheet 1 of 1 sheets
LAKE NORMAN
WYNSWEPT DR.
COVE CREEK ROAD
LOT 77A
WELL LOT
LOT 77B
BLOCK I
LAKE NORMAN
PROPERTY LINE FOLLOWS MID CONTOUR LINE
NOW OR FORMERLY THEODORE R & MAXINE A HENRY 562-420
CUL-DE-SAC DETAIL
SYMMETRICAL CUL-DE-SAC WITH CURB & GUTTER
NORTH SHORE II PH. I MAP 1 OF 2 23-94
NORTH SHORE I PH. I MAP 1 OF 2 23-94
LANDMARK TIES
MB: 23-94 4-8-93



Zoomed in on Plat Map Book 23, Page 94

RECEIVED JUL 3 0 2020

AP-304000 Repair Eval

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED

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 (X) 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: Mary + Joe Sauer **Address:** 141 Cove Creek Loop Mooresville NC **Zip:** 28117
Applicant Email: mary.sauer@icloud.com **Phone:** 704-506-9493 **Alt. Phone:**
Owner Name: Mary & Joe Sauer **Address:** 141 Cove Creek Lap Mooresville NC **Zip:** 28117
Owner Email: mary.sauer@icloud.com **Phone:** 704-506-9493 **Alt. Phone:** 704-654-1474 (Joe)

Property Information:

Street Address: 141 Cove Creek Loop Mooresville NC 28117
Subdivision Name: Isle of Pines **Section/Phase:** **Lot Number:**
Driving Directions: Isle of Pines - turn right into North Harbor - Cove Creek Lap

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

CHECK FOUNDATION TYPE

( ) New Single Family Residence — Maximum Number of Bedrooms: — ( ) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: — ( ) Concrete Slab Foundation
( ) Accessory Building — ( ) Swimming Pool — ( ) Basement with Plumbing
( ) Bedroom(s) Addition — ( ) Other Addition/Structure: — ( ) Basement without Plumbing
(✓) Repair to failing septic system — ✓ Tank — ___ Drain lines — Describe Problem: tank replacement
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 ( ) Existing Well (✓) Community Well ( ) City Water ( ) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: 1993
( ) 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.

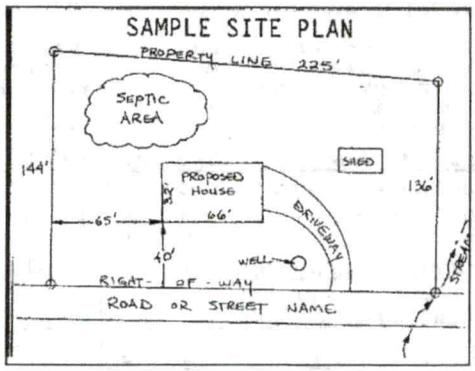
Signature: Mary Sauer / Joe Sauer — 7-15-2020
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) — DATE

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

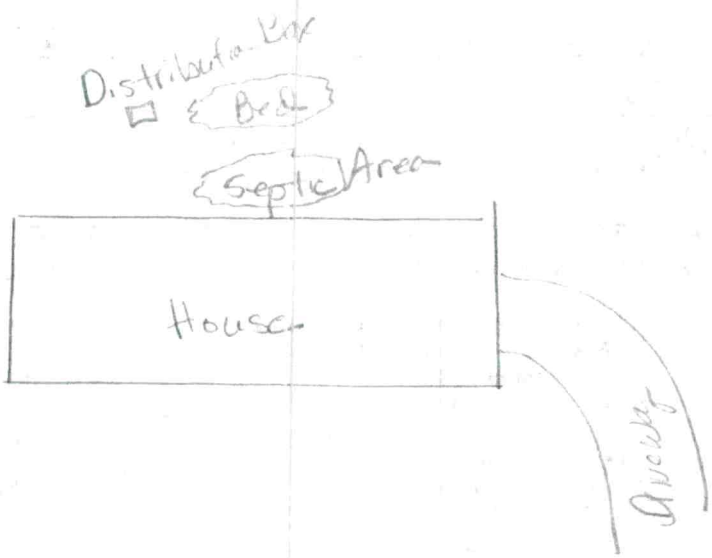
Circle N/A on the following if appropriate:

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

Plat Attached



Signature: _____ _____

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

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*) Joe Sauer

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, Joe Sauer (Owner), am the legal owner(s) of the property located at 141 Cove Creek Loop Mooresville NC 28117, identified as PIN (Parcel Identification Number) Lot 13 Lot on Plat 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.

Joe Sauer (Owner) — Signature of Owner(s)

7-15-2020 — Date

Mooresville - Environmental Health

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

ENVIRONMENTAL HEALTH REQUIREMENTS for SEPTIC and WELL PERMITS

The following items must be completed *PRIOR* to the *SUBMITTAL* of any Environmental Health Application. Incomplete applications will be returned to the applicant and cannot be processed or placed on the work list.

*** Initial all lines below to indicate you have submitted each form and completed every site requirement ****

GS **Complete all Environmental Health forms**:

- GS Application
- GS Site Plan including the dimensions of proposed structure, addition, pool etc.
- GS Documentation to Authorize Owner Agent (even if the property owner is the applicant – complete section 1 or 2)
- GS Copy of Zoning Permit when applicable
- GS Sign this sheet after you have completed all items

GS **Lot must be cleared of heavy undergrowth**. In order to evaluate the lot, the footprint of the proposed structure must be visible. Adequate area for the septic drain field and repair area must be sufficiently cleared of heavy undergrowth, with 50 feet of visibility in all directions. Inspectors must be able to evaluate the property, shoot laser level elevations, layout the drain field, do soils work, etc. **If the lot is not cleared sufficiently, then a $100 site revisit fee will be charged and the evaluation will be put on HOLD until the requirement is met.**

GS **Clearly mark all property corners by locating existing iron or concrete markers.** Flag all property lines every 25 feet if adjacent corners are not visible when standing on any given corner. Property lines must be flagged by a licensed NC surveyor & easily identified **prior to application submittal** (exception may apply for septic repair evaluations only). 'Mow lines' and/or fence lines do NOT constitute marked lines. **If the property lines are not properly marked when the lot is ready to be evaluated, then the application will be put on HOLD and a $100 site re-visit fee charged**.

GS **Stake or flag the footprint of the proposed structure, addition, pool etc. to match the site plan submitted**. The proposed structure, etc. must be staked out on the property as per the site plan.

N/A **If an Authorization to Construct (AC) is desired,** submit a recorded copy of the plat for newly created or subdivided lot(s) and a LEGIBLE copy of the basic floor plan no larger than 8 ½" x 14" for each floor of the structure including decks, porches, etc. **The overall dimensions must be clearly noted & the rooms labeled.**

Any site not meeting the above requirements when staff arrives for the evaluation will result in a $100 site revisit fee being charged and the request being placed on HOLD. This will delay the processing of the application. *Once work by Environmental Health staff begins, the up-front fees paid toward securing any health department permit are nonrefundable. Refunds for work not started, due to a customer changing their mind or plans, are subject to an administrative fee of $50 to defray a portion of the costs of processing the refund.*

Backhoe pits are required for all applications that require a soils evaluation.
DO NOT DIG PITS UNTIL THE EH SPECIALIST HAS AUTHORIZED AND SCHEDULED YOUR EVALUATION TIME.

- **All utilities shall be marked before pits are dug. Call NC 811 for this service.**
- The applicant/agent is responsible for securing these services
- Backhoe pits are to be dug at the locations and depths determined by the Environmental Health Specialist or a NC Licensed Soil Scientist. A minimum of four pits must be dug.
- The EH specialist will contact you when your application is ready to be processed for pit scheduling.
- Your backhoe operator must be on site during the EH Specialist's evaluation to prevent your operator from having to return to the property for additional work.

By signing below, I am acknowledging the above specifications have been met and the site is READY to be evaluated AND I understand the backhoe pit requirement and will secure those services (if applicable).

Signature Jon Saw (Owner) **Date** 7-15-2020

Questions? Contact the Environmental Health Offices below:

Statesville Office
349 North Center Street (2nd Floor Building Standards)
Statesville, NC 28677-4063
Phone: (704)878-5305 ext. 3456

Mooresville Office
610 East Center Avenue (2nd Floor Govt. Center South)
Mooresville, NC 28115-2548
Phone: (704)660-3625