IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 2330068

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

PIN # 4636421205

APPLICANT/OWNER: Melissa Boyle / James Hanson APPLICANT ADDRESS: 134 Preserve Way

SITE ADDRESS: 134 Preserve Way Mooresville, NC 28117 PHONE: 704-576-3887 (Michael Athanas) ALT. PHONE

SITE DIRECTIONS: Brawley School Rd → L on Isle of Pines → L on Isle Run Dr. → L on Preserve Way → lot on R SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: The Cove at Chesapeake Pointe SECTION: — LOT # 160 LOT AREA: .71 ac DESIGN FLOW: 480gpd L.T.A.R.: .3 (.3 repair)

Septic Tank 1000 (gal) STB Infiltrator Date IM-1060

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines 3 Linear Ft 210'

Trench Width 36" Trench Bottom Depth(Low side) 30"/36" highside Gravel Depth

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

System Description: 25% reduction

Repair System Description: TS II PPBPS

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: Abandon top 3 existing drain lines for pool. Install new 3 drain lines per site plan. Pump, crush, & fill existing septic tank.

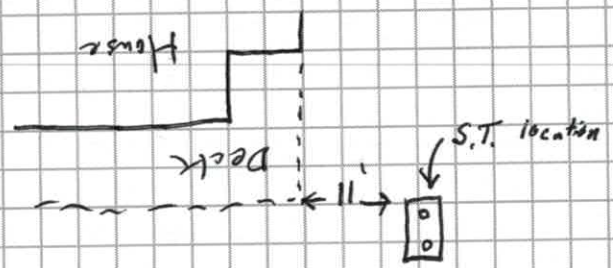
INITIAL SITE SKETCH

See attached site plan by Michael Athanas + Associates

AS BUILT SKETCH

3/5/2018: Infiltrator IM series tank

3-7-18: Drain lines installed as shown



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**

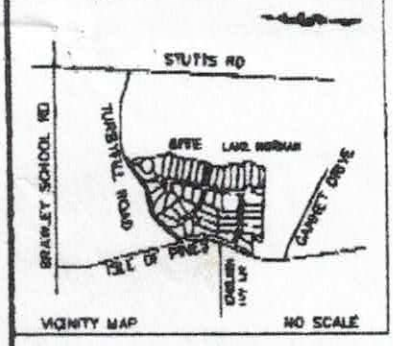
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☑ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☑ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Melissa Boyle Date: 2-20-18 Installed by: Shane Cashion

IMPROVEMENT PERMIT by: Kayla Watson Date: 2-12-18 OPERATION PERMIT by: Kayla Watson Date: 3-7-18

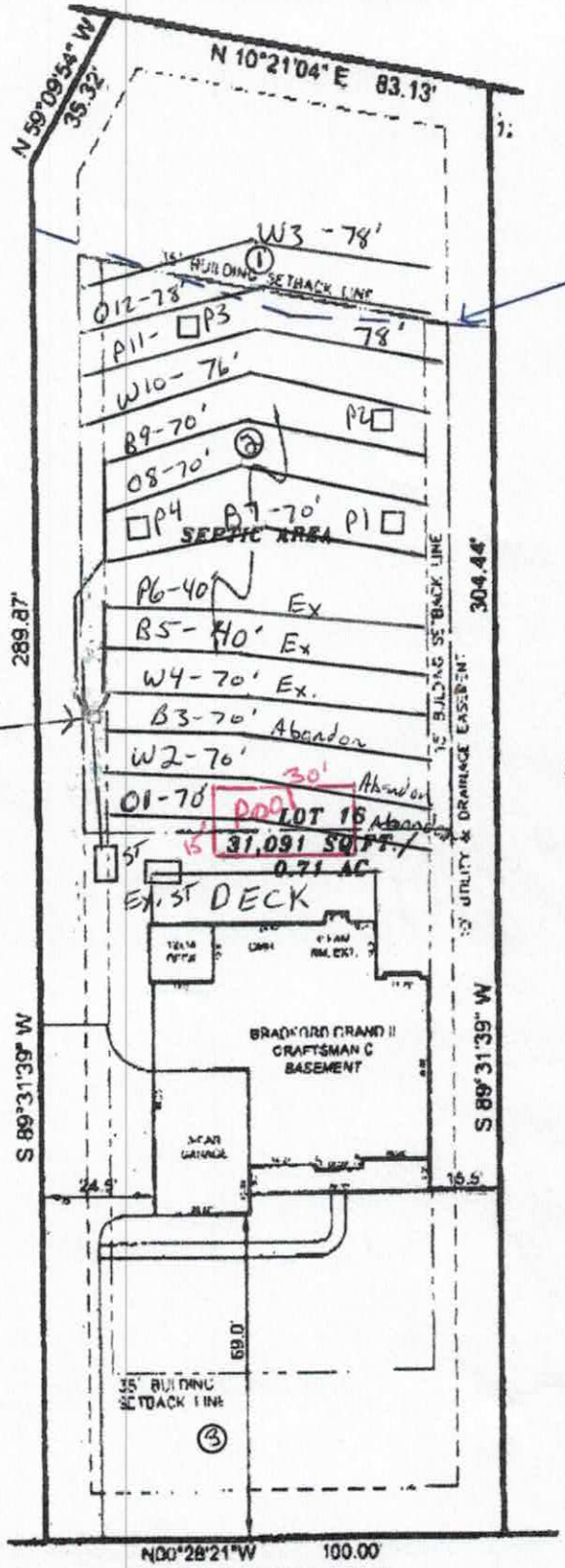
AUTHORIZATION TO CONSTRUCT by: Kayla Watson Date: 2-12-18 Existing System Inspected by: Date:

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.



LAKE NORMAN





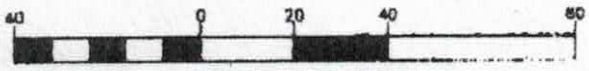
50' From 760 Contour

Minimum Building Setbacks:
35' Front, 35' Rear
25' Corner, 15' Side

All lots are subject to a 10' Utility and Drainage Easement, 10 feet on each side of the property line.

R/W = RIGHT-OF-WAY

REFERENCE: PLAT BOOK 46 PAGE 77



GRAPHIC SCALE
1 INCH = 40 FT

APPROVED FEB 12 2018
KW

PLOT PLAN

THE COVE @ CHESAPEAKE POINT
DAVIDSON TOWNSHIP, IREDELL COUNTY, NC

TAYLOR WISEMAN & TAYLOR
ENGINEERS ▮ SURVEYORS ▮ SCIENTISTS
SUBSURFACE UTILITY ENGINEERS
4101 F STUART ANDREW BLVD. CHARLOTTE, NC 28217
PHONE (704) 527-2535 FAX (704) 527-2537

LOT 16
134 PRESERVE WAY

SCALE: 1" = 40'	DATE: JANUARY 23, 2018	FILE: 70425.0005.00
DRAWN BY: JKP	CHECKED BY: JES	SHEET: 1 of 1



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

Reference: 134 Preserve Way, The Cove at Chesapeake Pt Lot 16
House Footprint: See attached plan
Building Setbacks: 35' front, 15' side, 50' lake
Water Source: Community well
Number of Bedrooms/Daily Flow: 4/480 GPD
Proposed LTAR: 0.3 GPD/FT2
Proposed System Type: 25% Reduction
Proposed Repair System Type: TS II PPBPS
Distribution: Gravity-Distribution box/End cap/Drop boxes
Septic Tank Size: 1000 gallons
Proposed Trench Bottom: 24-36"

APPROVED FEB 12 2018
KW

Line	Design Length	Actual Length
Orange 1	70'	70' (abandon)
White 2	70'	70' (abandon)
Blue 3	70'	70' (abandon)
White 4	**70'**	**70' (existing)**
Blue 5	**70'**	**70' (existing)**
Pink 6	**70'**	**70' (existing)**
Blue 7	**70'**	**70'**
Orange 8	**70'**	**70'**
Blue 9	**70'**	**70'**
White 10		76'
Pink 11		78'
Orange 12		78' (see comments)
White 13		78' (see comments)



Initial System: 420' **Repair System:** 310'

Comments:
MA&A are proposing to abandon 3 existing lines to make room for a pool. We are proposing to add 3 lines of 25% reduction back and have PPBPS repair. The existing septic tank is under the deck. It will be replaced with a new tank. Part of the PPBPS lines cross into the 50' buffer. O12 – 33' @ 50% Reduction, 45' @ 25% Reduction. W13 – 17' @ 50% Reduction, 51' @ 25% Reduction. 267' @ 50% - 204' @ 50% = 63' x 2 = 126' conv. X 75% = 94.5' @ 25% Reduction. We have 96' @ 25% Reduction.

APPROVED FEB 1 2 2018 PROPERTY ID #: 4636421265_
KW
COUNTY: _Iredell____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: James Hanson_____ APPLICATION DATE_____
ADDRESS: 134 Preserve Way, Mooresville, NC 28117_____ DATE EVALUATED: _____
PROPOSED FACILITY: _4 bdrm_____ PROPOSED DESIGN FLOW (.1949): _480 GPD__ PROPERTY SIZE: _0.71 AC_____
LOCATION OF SITE: 134 Preserve Way, The Cove at Chesapeake Pt Lot 16_____ PROPERTY RECORDED: _____
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)		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	
PIT 1	LS 15%	0-6	Br SCL WSBK	FR SS SP SEXP	N/A	60"	N/A	N/A	PS 0.3
		6-38	R C SBK	FR SS SP SEXP					
		38-60	R CL WSBK	FR SS SP SEXP					
PIT 2	LS 15%	0-4	Br SCL WSBK	FR SS SP SEXP	N/A	52"	F-C SAP PS	N/A	PS 0.3
		4-26	R C SBK	FR SS SP SEXP					
		26-52	R CL WSBK	FR SS SP SEXP					
		52-62	VER SL SAP M	VFR SS SP SEXP					
PIT 3	LS 20%	0-9	Br SCL WSBK	FR SS SP SEXP	N/A	60"	F-C SAP	N/A	PS 0.3
		9-51	R C SBK	FR SS SP SEXP					
		51-60	R CL WSBK	FR SS SP SEXP					
PIT 4	LS 15%	0-3	Br SCL WSBK	FR SS SP SEXP	N/A	48"	F-C SAP PS	N/A	PS 0.3
		3-27	R C SBK	FR SS SP SEXP					
		27-48	R CL WSBK	FR SS SP SEXP					
		48-65	VER SL SAP M	VFR SS SP SEXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	1260 FT2	930 FT2
System Type(s)	25% Reduction	PPBPS
Site LTAR	0.3	0.3

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): ___PS_____
EVALUATED BY: _____MA&A_____
OTHER(S) PRESENT: _____

COMMENTS:_____

SOIL/SITE EVALUATION

(Continuation Sheet)

PROPERTY ID #: 4636421265

APPROVED FEB 1 2 2018 DATE OF EVALUATION: _____

KW

COUNTY: IREDELL

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	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
AB 1	LS 20%	0-6	Br SCL WSBK	FR SS SP SEXP	N/A	48"	N/A	N/A	PS 0.3
		6-48	R C SBK	FR SS SP SEXP					
AB 2	LS 15%	0-6	Br SCL WSBK	FR SS SP SEXP	N/A	36"	F-C SAP	N/A	PS 0.3
		6-24	R C SBK	FR SS SP SEXP					
		24-36	R CL WSBK	FR SS SP SEXP					
		36-48	VER SL SAP M	FR SS SP SEXP					
AB 3	LS 12%	0-6	FILL		N/A	48"	F-C SAP	N/A	PS 0.3
		6-36	R C SBK	FR SS SP SEXP					
		36-48	R CL WSBK	FR SS SP SEXP					

COMMENTS: _____

RECEIVED JAN 3 1 2018

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM Paid $350.00 # 233068

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

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: Melissa Boyle **Address:** Huntersville, NC **Zip:** 28078

Applicant Email: melissa.depaul@gmail.com **Phone:** _____ **Alt. Phone:** _____

Owner Name: James Hanson **Address:** 134 Preserve Way, Mooresville, NC **Zip:** 28117

Owner Email: _____ **Phone:** _____ **Alt. Phone:** _____

Property Information:

Street Address: 134 ~~Barber Lp~~ Preserve Way

Subdivision Name: The Cove at Chesapeake Pt **Section/Phase:** _____ **Lot Number:** 16

Driving Directions: _____

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

( ) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____

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

CHECK FOUNDATION TYPE
( ) Crawl Space Foundation
( ) Concrete Slab Foundation
(X) Basement with Plumbing
( ) Basement without Plumbing

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 (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) DATE

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, Melissa Boyle, am the legal owner(s) of the property located at 134 Preserve Way, The Cove @ Chesapeake Pt Lot 16, identified as PIN (Parcel Identification Number) 4636421265, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Michael Athanas & Associates, _____, 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.

Melissa Boyle 1-25-18

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

3100

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PERMIT# 121303 PIN# ~~4636-32-8692.0116~~ 4636-42-1265 DATE Oct 4, 04

OWNER OR CONTRACTOR Dienst Enterprises (Pine Isle, LLC) Orleans Builders Phone Home

ADDRESS 125 Easton Dr. Mooresville, N.C. 28117

LOCATION Brawley Sch Rd. TL Isle of Pines TL Isle Run Dr. TL Sunset View Dr. on Right Preserve Way

SUBDIVISION The Cove at Chesapeake Pt BLOCK / SECTION LOT 16 LOT AREA .71Ac SITE CLASS PS DESIGN FLOW 4Bdrm L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 794 Date 6-27-06
Pump Tank: Gallons: PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 2 Square Feet 1200 Linear Feet 400
No Lines 3+3 Trench Width 36" Max Trench Bottom Depth 36"

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: 6 cavity 25% Reduction LP PPBP
Repair System Description:
Maintenance Agreement Required: ☐ Yes ☑ No initially
Gravel Depth N/A ☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

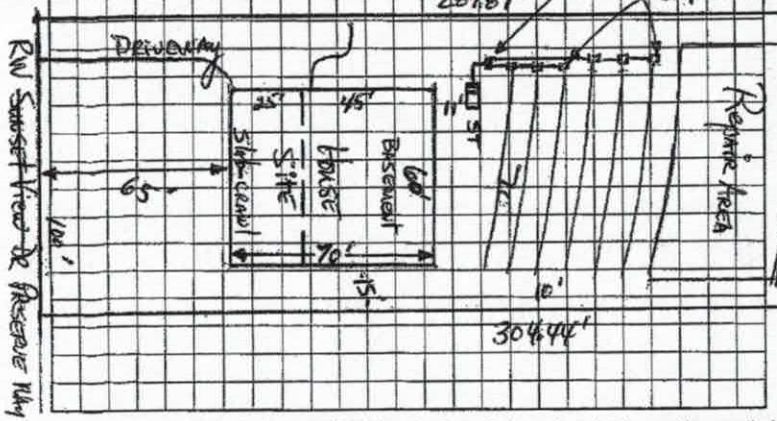
☑ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms
☐ Business No. Employees
☐ Other

Water Supply: ☐ Individual ☑ Public ☑ Community

Comments/Conditions:

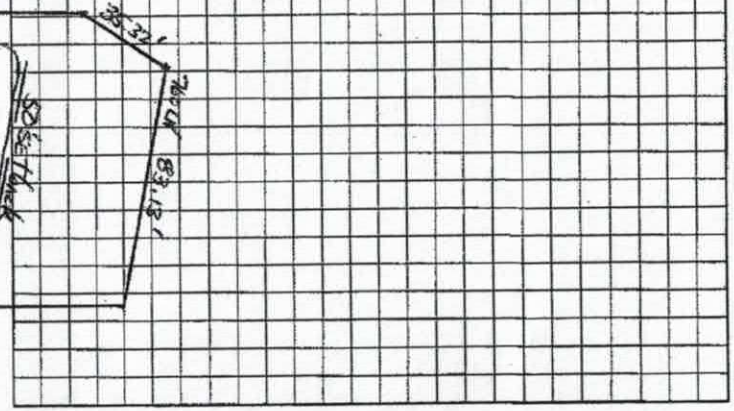
Comments/Conditions: (Partial) Checked lines 8/22/06

1"=50' INITIAL SITE SKETCH



AS BUILT SKETCH

Installed Quick 4 Plastic Chambers



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. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: R. Bryan Freal date 10/28/04 Installed by: Willie Christenbury

Improvement Permit by: R. Bryan Freal, RS date 10-1-04 Operation Permit by: Maria H. Dotson, RS date 8/24/06

Authorization to Construct by: Wesley Sparks RS date 1/25/06 Existing System Inspection by: date

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK

IREDELL COUNTY

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

APPLICATION NUMBER
233068
Issue Date: 01/30/2018

ZONING PERMIT

Parcel Number	Street Address	Jurisdiction
4636421265.000	134 PRESERVE WAY, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: HANSON JAMES V+KATHY	Applicant: MICHAEL ATHANAS & ASSO
Address: 134 PRESERVE WAY MOORESVILLE, NC 28117	Address: 561 ENNIS RD WEDDINGTON, NC 28173
Phone:	Phone: 704-576-3887

Use Requested	Zone Code
IN GROUND POOL	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.710	35.00	50.00	10.00	10.00	CACL	AE

Remarks:

Pools shall be located to comply with minimum setbacks requirements for accessory buildings and structures of the district in which located. Pools that are not an integral part of the principal building shall be located at least the minimum distance from the principal building necessary to comply with N. C. Building Code requirements. Pools shall be protected by a fence of equal enclosure, a minimum of four feet in height, and equipped with self-closing and positive self-latching gate to provide with hardware for permanent locking. Fencing Is NOT required for above ground pools if they are at least four (4) in height, the ladder is removed, or when NOT in use have a gate to the ladder as described above. SETBACK FROM HOUSE COULD BE MORE OR LESS DEPENDING UPON THE BUILDING CODE; HOWEVER, THERE IS A 10 FT SET BACK FROM THE PROPERTY LINE.

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	127114	TOTAL FEES:	$ 77.25