310210

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 232583

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

PIN # 4638212924

APPLICANT/OWNER: Marc Niblock APPLICANT ADDRESS: 759 Concord PKWY N STE 20 Concord NC 28027

SITE ADDRESS: 115 Robinson Ridge Dr. Mooresville NC 28117 PHONE: 704-201-6701 ALT. PHONE 704-502-5588

SITE DIRECTIONS: 150 W - T/R Robinson Rd- T/R Robinson Ridge Rd - Lot on Left SAP CONTROLLED: ☐ YES ■ NO

SUBDIVISION: Robinson Ridge SECTION: 1 LOT # 6 LOT AREA: .704ac DESIGN FLOW: 360 L.T.A.R.: 0.25

Septic Tank	1000	(gal)	STB	Infiltrator	Date	Infiltrator	■ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI		■ Residence	No. Bedrooms	3	Water Supply		
Pump Tank	1000	(gal)	PT	Infiltrator	Date	Infiltrator	System Description:	LPPBPPS				☐ Business	No. Persons	6	■ Private		
Pump Make	Boulds		Model	1/3HP VLD/2305 38'4.9mA	Serial #	WE0312mo	Repair System Description:	DRIP				☐ Other	No. Employees		☐ Public		
# Nitrification Fields	1		# Lines	5	Linear Ft:	265	Maintenance Agreement Required:	■ YES	☐ NO			☐ Slab	■ Crawl Space		☐ Community		
Trench Width	24"		Max Trench Bottom Depth	36"	Gravel Depth	N/A		☐ GRAVITY	■ PRESSURE			☐ Basement w/plumbing			☐ Basement w/o plumbing		

Comments / Conditions: Per plan By Septic & Environmental Solutions
Install 50 percent reduction on contour with low pressure distribution

Use 5/32 holes and 2' of pressure head, TDH to be determined at final tank location.

INITIAL SITE SKETCH

See plan by:Septic & Environmental Solutions

AS BUILT SKETCH

1/15/2021: Tanks, drain lines, CVB and connections all checked and good. As built measurements on site sketch not to scale

	Date	Initials
Drain Lines Checked	1/15/2021	PJB
Tanks Checked	1/15/2021	PJB
Pressure Manifold or Valve Box Checked	1/15/2021	PJB
Pressure Head Set	2/3/21	MD
Electrical Checked		
Floats Set		
Alarm Checked	2/3/21	MD
Maintenance Contract (Y) N	2/9/21	MD
Comments:		

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.*

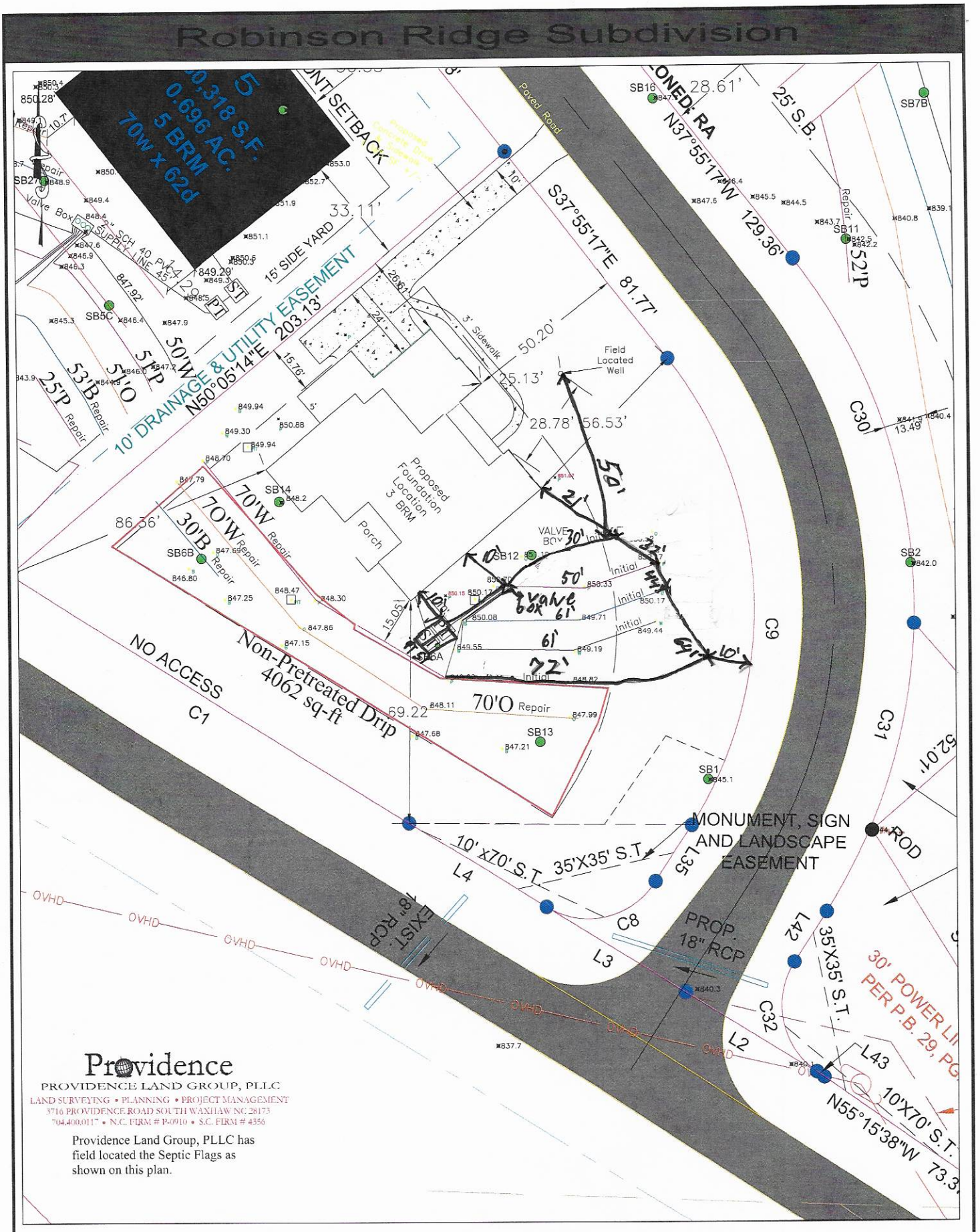
Owner / Applicant Signature: [signature] Date: 8/27/2020 Installed by: ~~Allan Hinkle~~ Larry Henkel Grading

IMPROVEMENT PERMIT by: [signature] Date: 08/26/20 OPERATION PERMIT by: Maria Olson Date: 2/9/21

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 08/26/20 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.

Robinson Ridge Subdivision



Providence

PROVIDENCE LAND GROUP, PLLC

LAND SURVEYING • PLANNING • PROJECT MANAGEMENT

3716 PROVIDENCE ROAD SOUTH WAXHAW NC 28173

704.400.0117 • N.C. FIRM # P-0910 • S.C. FIRM # 4356

Providence Land Group, PLLC has field located the Septic Flags as shown on this plan.

SEPTIC ENVIRONMENTAL SOLUTIONS, INC.

3019 SPRING FANCY LANE, INDIAN TRAIL, NORTH CAROLINA, 704-502-5588

40' 0' 20' 40'

1" = 40"

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

Sheet 1 of 1
PROPERTY ID #: 4638222449
COUNTY: Iredell

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

Lot 6

OWNER: Kenny Owens
ADDRESS: 157 Robinson Ridge Dr
PROPOSED FACILITY: SFD
PROPOSED DESIGN FLOW (.1949): 480
LOCATION OF SITE: 150 to Robinson to Robinson Ridge
APPLICATION DATE 12/13/17
DATE EVALUATED: 1/24/18
PROPERTY SIZE: 1.704ac
PROPERTY RECORDED: NO

WATER SUPPLY: ☒ Private ☐ Public ☒ Well ☐ Spring ☐ Other N/A
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
1	L 4%	0-15	SBK C	fi SE	PS	PS	54"	N/A	PS .25
		15-54	WABK BC	fi/K SE					
		54-68	mass Sapl	fr N/A					
2	L	0-25	ABK C	fi SE	few yellow brown mottles	PS	N/A	N/A	PS .25
		25-64	WABK BC	fi/K SE					
3	L	0-26	ABK C	fi SE	PS	PS	N/A	N/A	PS .25
		26-63	WABK BC	fi/K SE					
4	L	0-10	Man/p	—	common rock inclusions less than 50%	PS	24"	N/A	PS .25
		10-24	WABK BC	fi fr					
		24-63	mass Sapl	fr N/A					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	TV	TV
Site LTAR	.25	.25

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

COMMENTS:

RECEIVED AUG 20 2020

AP232583

(Fees-AP-310210) $105.00

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

Iredell County Health Department – Environmental Health Division

(Limited Redraw)

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

Applicant Information: (PRINT CLEARLY)

Applicant Name: Niblock Homes, LLC Address: 159 Concord Parkway S. Ste 20 Concord, NC Zip: 28027

Applicant Email: blivengood@niblockhomes.com Phone: 704-920-7104 Alt. Phone: 704-788-4918

Owner Name: (same) Address: _____ Zip: _____

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

Property Information:

Street Address: 115 Robinson Ridge Dr. Mooresville, NC 28117

Subdivision Name: Robinson Ridge Section/Phase: _____ Lot Number: 6

Driving Directions: Hwy 150 W, R- Robinson Rd, R- Robinson Ridge

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

CHECK FOUNDATION TYPE

(X) New Single Family Residence Maximum Number of Bedrooms: 3 (X) 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: _____
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 (X) 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 (X) 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?

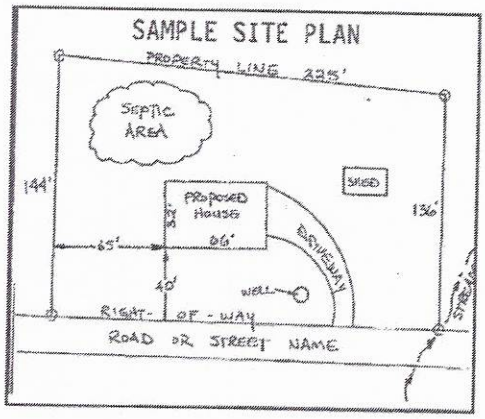
I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible 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: _____ 8-19-2020
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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 OR WELL 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
- (X) Preferred well location
- (X) Preferred septic system location
- (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

-see attached-

Signature: _____ 8-19-2020

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

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public Health
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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*) Marc C. Niblock

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, Marc Niblock, am the legal owner(s) of the property located at 115 Robinson Ridge Dr. Mooresville, NC, identified as

PIN (Parcel Identification Number) 4638-21-2924, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Beth Livengood, _____, 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

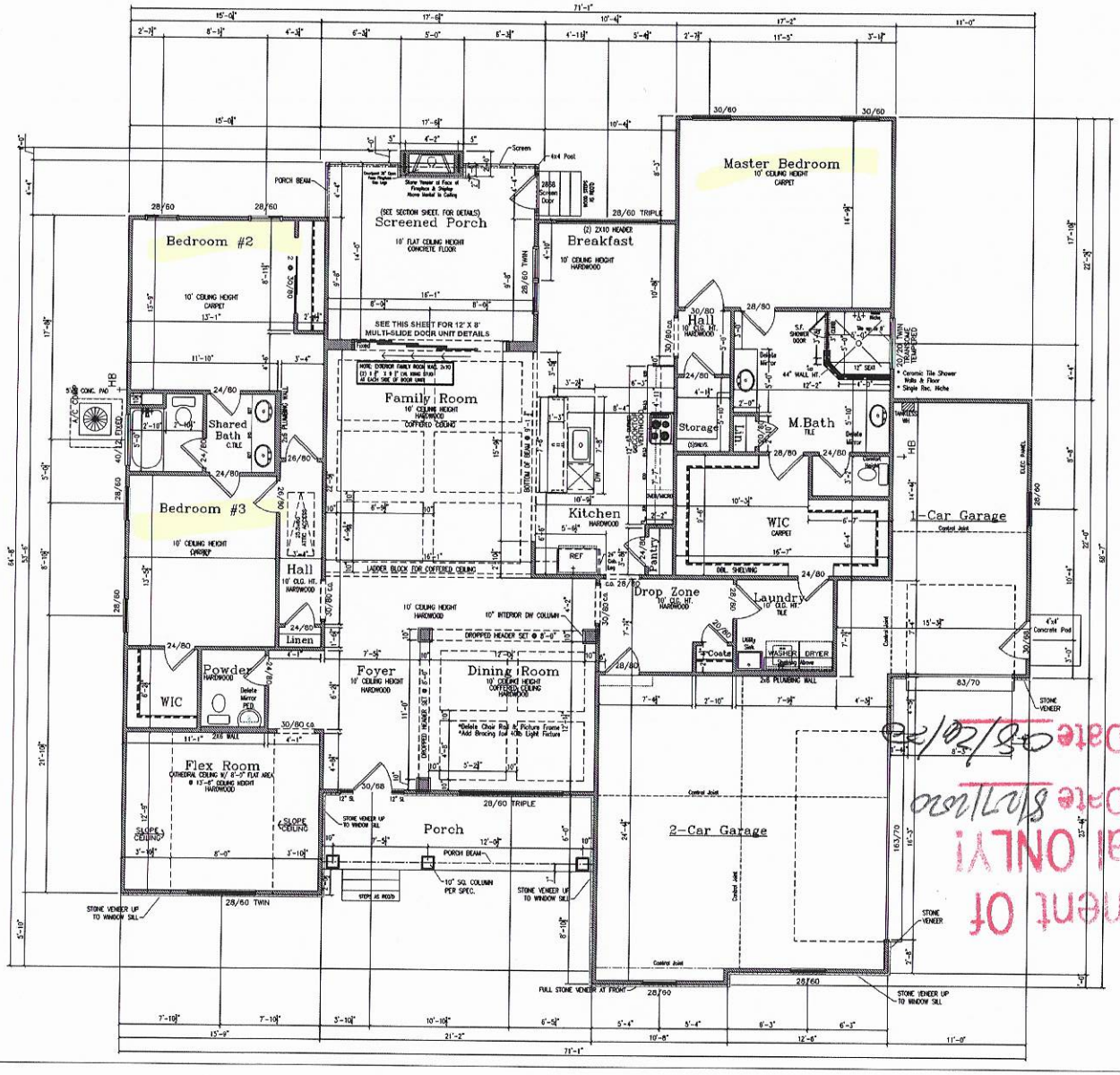
I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

Marc C. Niblock
Signature of Owner(s)

8-26-2020
Date

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



DOOR SCHEDULE					
QUANTITY	MARK	DOOR SIZE W x H	TYPE	SWING	ROUGH OPENING
1	28/80	32 x 96	CASED OPENING	NA	34" x 98 1/2"
4	30/80	36 x 96	CASED OPENING	NA	38" x 98 1/2"
1	120/80	144 x 96	CASED OPENING	NA	148" x 98 1/2"
1	28/80	32 x 96	EXTERIOR	Left	34" x 98 1/2"
1	30/68	36 x 80	EXTERIOR	Left	38" x 82 1/2"
1	30/68	36 x 80	EXTERIOR	Right	38" x 82 1/2"
2	20/80	24 x 96	INTERIOR	Right	30" x 98 1/2"
5	24/80	28 x 96	INTERIOR	Left	30" x 98 1/2"
5	24/80	28 x 96	INTERIOR	Right	30" x 98 1/2"
2	28/80	30 x 96	INTERIOR	Right	32" x 98 1/2"
1	28/80	32 x 96	INTERIOR	Left	34" x 98 1/2"
1	28/80	32 x 96	INTERIOR	Right	34" x 98 1/2"
1	30/80	36 x 96	INTERIOR	Left	38" x 98 1/2"
1	2 @ 30/80	2 @ 36 x 96	INTERIOR - BYPASS	Right	73" x 97 1/4"
1	83/70	99 x 84	OVERHEAD	NA	99" x 84"
1	163/70	195 x 84	OVERHEAD	NA	195" x 84"

SEE SUPERINTENDENT FOR R.O. FRAMING ON POCKET DOORS

SQUARE FOOTAGES FRAME	
	SQ. FT.
1ST FLOOR	2594
TOTAL LIVING	2594
GARAGES	824
FRONT PORCH	127

REVISION DATES:

Date 08/20/20

Date 8/21/2020

Acknowledgement of Plans Submittal ONLY!

BLOCK DEVELOPMENT CORPORATION
759 CONCORD PARKWAY NORTH
CONCORD, NC
(704) 788-4818 FAX (704) 784-3720

Robinson Ridge Lot #6
VanHoveln Residence

FIRST FLOOR PLAN
SCALE: 1/4" = 1'-0" (34X22)
SCALE: 1/8" = 1'-0" (17X11)

DATE: 07/02/2020
PLAN: GRAYSON-B
DRAWN BY: BL
ESTIMATED BY: AK
CHECKED BY: MN/GE

IREDELL COUNTY

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

APPLICATION NUMBER
232583
Issue Date: 01/09/2018

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4638222491.000	115 ROBINSON RIDGE DRIVE, MOORESVILLE, NC 28117	

Owner Information	Applicant Information
Owner: WILLIAMS RANDY P+KIMBERLY S	Applicant: ROBINSON WOODS DEVELOP
Address: 486 IREDELL CO, NC 28625	Address: PO BOX 4628 MOORESVILLE, NC 28117
Phone:	Phone: 919-606-5852

Use Requested	Zone Code

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
18.000	35.00	35.00	25.00	15.00	CA	AE

Remarks:

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	125274	TOTAL FEES:	$ 77.25