PJB ① AP

ICHD–ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 307209

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

PIN # 4638973065

APPLICANT/OWNER: Nest Communities LLC | APPLICANT ADDRESS: 236 Race way Ste 7 Mooresville, NC

SITE ADDRESS: 200 Sagemore Rd Mooresville, NC | PHONE: 7044339947 | ALT. PHONE

SITE DIRECTIONS: US 21 N TL Cornelius on left before Perth Rd

SUBDIVISION: Harbor Landing | SECTION: | LOT # 11 (formerly 114) | LOT AREA: .61 Acre | SAP CONTROLLED: [X] YES [ ] NO | DESIGN FLOW: 480 gpd | L.T.A.R.: .3

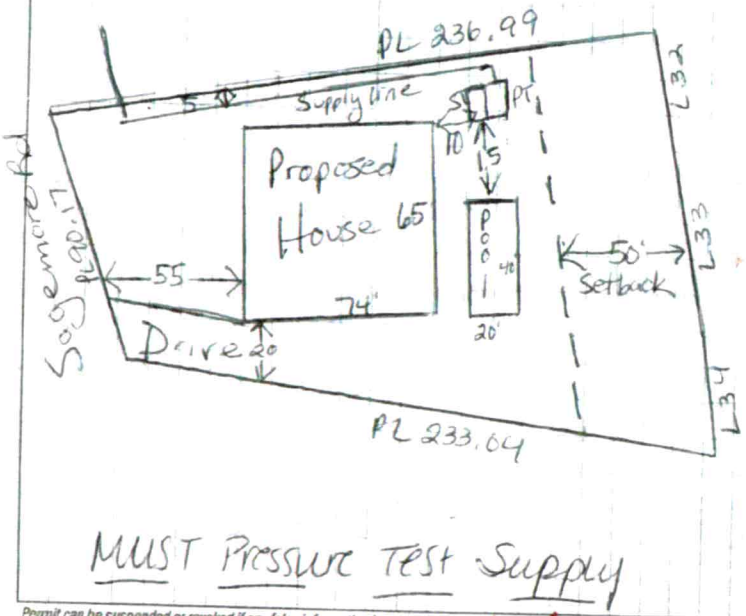
Septic Tank	1000 (gal)	STB	760	Date	6-7-22	[X] New System	[ ] Repair	[ ] Expansion	System Type: I II III IV V VI
Pump Tank	1000 (gal)	PT	323.	Date	6-7-22	System Description:	Pump-PM-25% Reduction		
Pump Make	Zoeller	Model	125	Serial #		Repair System Description:	PPBPS		
# Nitrification Fields	1	# Lines	4	Linear Ft	400	Maintenance Agreement Required:	[ ] YES	[X] NO	
Trench Width	36"	Trench Bottom Depth (Low side)	36"	Gravel Depth	N/A		[ ] GRAVITY	[X] PRESSURE	

[X] Residence	No. Bedrooms	4	Water Supply		
[ ] Business	No. Persons	8	[ ] Private		
[ ] Other	No. Employees		[ ] Public		
[ ] Slab	[X] Crawl Space		[X] Community		
[ ] Basement w/plumbing	[ ] Basement w/o plumbing				

Comments / Conditions: Divert Storm/Surface water Away from Septic
Pressure Manifold 4 - 1/2 sch 40 taps 138 gal dose

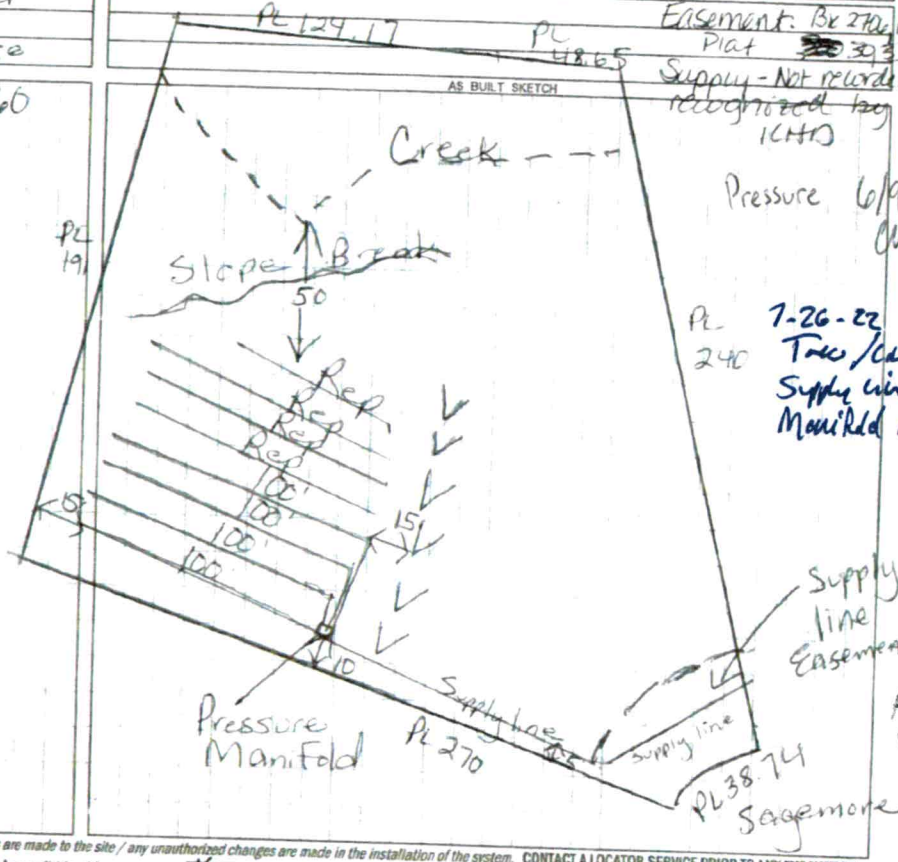
INITIAL SITE SKETCH

6.5" drawdown 2ft head Scale 1:60



MUST Pressure Test Supply

AS BUILT SKETCH



Easement: Bk 2706 Pgs 33 Plat
Supply - Not recorded recognized by ICHD

Pressure 6/9/22 CW

PL 240 7-26-22 Trac/Cond Supply Lin Manifold ✓

Alarm PH 11/17/23
Floats CW
Electrical

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.* [X] IMPROVEMENT PERMIT *with site plan valid for 60 mos.* [X] AUTHORIZATION TO CONSTRUCT *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: [signature] Date: 10/16/20 Installed by: Specialty

IMPROVEMENT PERMIT by: [signature] Date: 8/31/2020 OPERATION PERMIT by: [signature] Date: 11/18/22

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 12/2/21 Existing System Inspected by: Date:

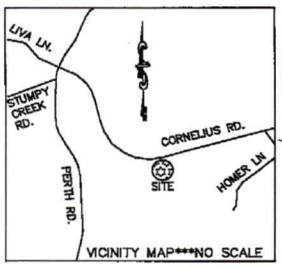
FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inspector to confirm your inspection time.

DAS DON ALLEN & ASSOCIATES, P.A.
"Since 1971"
Commercial * Residential * Mortgage Surveys * Multi-Family
Construction Staking * Subdivision Design * Topographical
131 Crosslake Park Drive – Suite 102 * Mooresville * NC * 28117
(704) 664-7029 (704) 664-8041 Fax

I, certify that this map was drawn under my supervision from an actual survey made under my supervision recorded in deed book 2706, page 1073, and/or plat book 30, page 33, that the ratio of precision is 1':10,000, that this map was prepared in accordance with the General Statutes of North Carolina Chapter 89C.

my hand and seal on the 18, day of OCTOBER,
A.D. 20 21.

WILLIAM M. ALLEN, NORTH CAROLINA PROFESSIONAL SEAL L-3499 LAND SURVEYOR WILLIAM M. ALLEN



LAKE NORMAN

N28°45'58"W 46.92
N30°03'47"W 59.96
N24°41'14"W 38.70

LOT 11
0.62 AC.

50' REAR

SEPTIC

PROPOSED POOL

NIGHTINGALE

15' SIDE

15' SIDE

21.4

S65°16'19"W 237.92

N79°26'30"E 233.92

SUPPLY LINE

20.0

35' FRONT

53.7

LOT 12 SECT. 1
NEST HOMES LLC
2830/32

LOT 12 SECT. 14
EDWARD M. FAGGART
590/842

CONC. CALC.
DRIVE = 1,699 SQ. FT.
WALK = 57 SQ. FT.

LEGEND
I.P.S. = #4 REBAR SET
R/W = RIGHT-OF-WAY
CP = COMPUTED POINT

R/W S37°31'14"E 90.18 R/W

SAGEMORE ROAD
(60' PUBLIC R/W)

NOTES
1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENTS AND/OR RIGHTS OF WAY OF RECORD.
2) ACREAGE COMPUTED BY THE COORDINATE METHOD.
3) UNDERGROUND POWER
4) NO GRID MONUMENT FOUND WITHIN 2000 FEET.

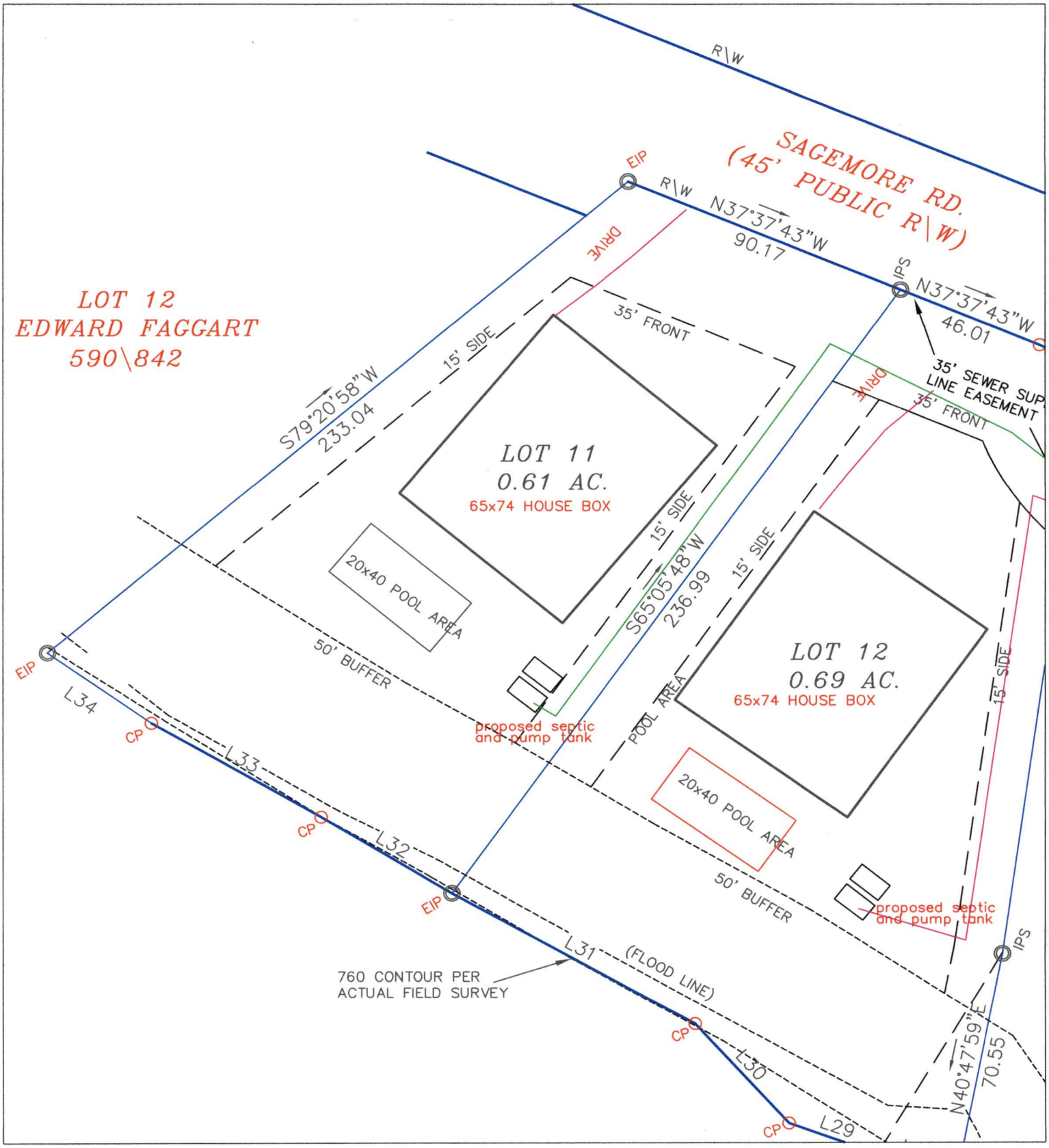
0' 15' 30' 60'
SCALE IN FEET

PLOT PLAN SURVEY

OF
17 SAGEMORE ROAD
LOT 11 HARBOR LANDING SECTION 1
DAVIDSON TWSP., IREDELL CO., N.C.

SCALE 1" = 30'
ACQUIRED BY: NEST HOMES LLC

FIELD BOOK:
FILE: HARBOR LANDING 11 S1
DC FILE:
TAX MAP NO: 4638973065



Harbor Landing Lot 11 – Nest Homes Septic Site Plan rev. 7.7.20

Base site plan from DAS.

Septic system must be approved and permitted by ICHD.

1" = 60'

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

Sheet ____ of ____
PROPERTY ID #: ____
COUNTY: Iredell

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

OWNER: Nest Communities LLC — APPLICATION DATE: 4/12/20
ADDRESS: 236 Rafeway Suite 7 Mooresville NC — DATE EVALUATED: 5/26/2020
PROPOSED FACILITY: House — PROPOSED DESIGN FLOW (.1949): ____ — PROPERTY SIZE: ____
LOCATION OF SITE: Lot #1A Harbor Landing — 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) .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
1	Pit 10%	0-4	Brw SCL	w/SBK SS, SP, SEXP, FR					PS
		4-26	RCm-F	SBK/ABK FR S, P					
		26-46	blC C	F-C SAP Inclus FR SS, SP					
		46-60	mutti Color FR,	massive					.3
			L/SL	SAP	—	46"	PS	—	
2	Pit 2%	0-5	Brw	SCL w SBK SS, SP, SEXP, FR					PS
		5-19	RCm-f	SBK SS, SP, SEXP, FR					
		19-44	RCL w	SBK SS, SP, SEXP, FR					
			w/ many	SAP Inclus	—	44"	PS	—	.3
		44-60	L/SL	SAP massive, FR					
3	Pit 3%	0-5	Brw	SCL w SBK SS, SP, SEXP, FR					PS
		5-20	RCm-f	SBK SS SP, SEXP, FR					
		20-45	R CL w	SBK SS SP, SEXP, FR					
			w/ few to many	SAP Inclus					.3
		45	L/SL	SAP massive FR	—	45"	—	—	
4	8%	0-4	Brw	SCL w SBK SS, SP, SEXP, FR					PS
		4-27	RCm-f	SBK FR SS, SP SEXP					
		27-40	R CL w	SBK SS, SP, SEXP, FR					
			w/	SAP Inclus	—	40"	—	—	.4
		40-60	L/SL	SAP massive FR					

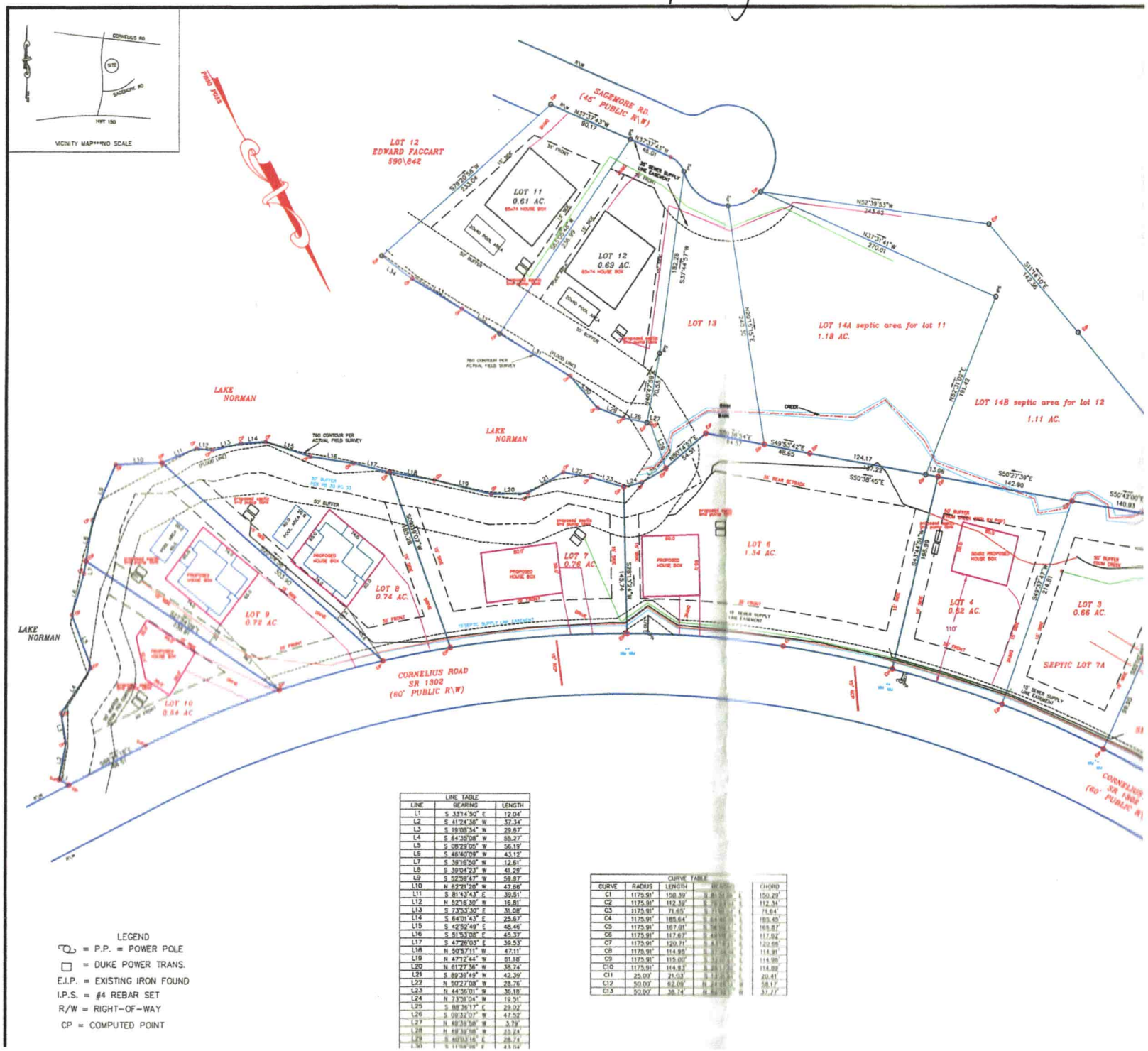
DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	25% Red.	Panel BLK
Site LTAR	.3	.3

OTHER FACTORS (.1946): ____
SITE CLASSIFICATION (.1948): ____
EVALUATED BY: Maria Dotson
OTHER(S) PRESENT: Paul Penninger, David Bean

COMMENTS: ____


SEPTIC SUPPLY LINE EASEMENT
LOT 13
LOT 14
4 lines @ 100' 25% Red. PRBPB Repair 36" TB
10' RL
P1
P2
P3
P4
35' REAR SETBACK
EIP
N80°14'57"E
54.51
S50°36'54"E
64.57
S49°53'42"E
48.65
S50°38'45"E
137.22
70.0'
Pit locations
Lot #11

Supply Line



LINE TABLE		
LINE	BEARING	LENGTH
L1	S 33°14'50" E	12.04'
L2	S 41°24'36" W	37.34'
L3	S 19°08'34" W	29.67'
L4	S 64°35'08" W	55.27'
L5	S 08°29'09" W	56.19'
L6	S 46°40'09" W	43.12'
L7	S 39°16'50" W	12.61'
L8	S 39°04'23" W	41.29'
L9	S 52°59'47" W	59.97'
L10	N 62°21'20" W	47.66'
L11	S 81°43'43" E	39.51'
L12	N 52°16'30" W	16.81'
L13	S 73°53'30" E	31.08'
L14	S 64°01'43" E	25.67'
L15	S 42°52'49" E	48.46'
L16	S 51°53'08" E	45.37'
L17	S 47°26'03" E	39.53'
L18	N 50°57'11" W	47.11'
L19	N 47°12'44" W	81.18'
L20	N 61°27'36" W	38.74'
L21	S 89°36'49" W	42.39'
L22	N 50°27'08" W	28.76'
L23	N 44°36'01" W	36.18'
L24	N 73°31'04" W	19.91'
L25	S 88°36'17" E	29.02'
L26	S 08°33'07" W	47.52'
L27	N 49°39'36" W	3.79'
L28	N 49°39'36" W	25.24'
L29	S 40°03'15" E	28.74'
L30	S 11°09'09" E	43.04'

CURVE TABLE				
CURVE	RADIUS	LENGTH	BEARING	CHORD
C1	1175.91'	150.39'	S 48°51'54" E	150.29'
C2	1175.91'	112.39'	S 73°03'41" E	112.34'
C3	1175.91'	71.65'	S 71°16'[illegible]" E	71.64'
C4	1175.91'	185.64'	S 64°[illegible]" E	185.45'
C5	1175.91'	167.01'	S 56°[illegible]" E	166.87'
C6	1175.91'	117.67'	S 49°[illegible]" E	117.62'
C7	1175.91'	120.71'	S 43°[illegible]" E	120.66'
C8	1175.91'	114.95'	S 37°[illegible]" E	114.91'
C9	1175.91'	115.00'	S 31°[illegible]" E	114.95'
C10	1175.91'	114.93'	S 25°[illegible]" E	114.89'
C11	25.00'	21.03'	S 13°[illegible]" E	20.41'
C12	50.00'	52.09'	S 30°[illegible]" E	58.17'
C13	50.00'	38.74'	N 84°[illegible]" E	37.77'

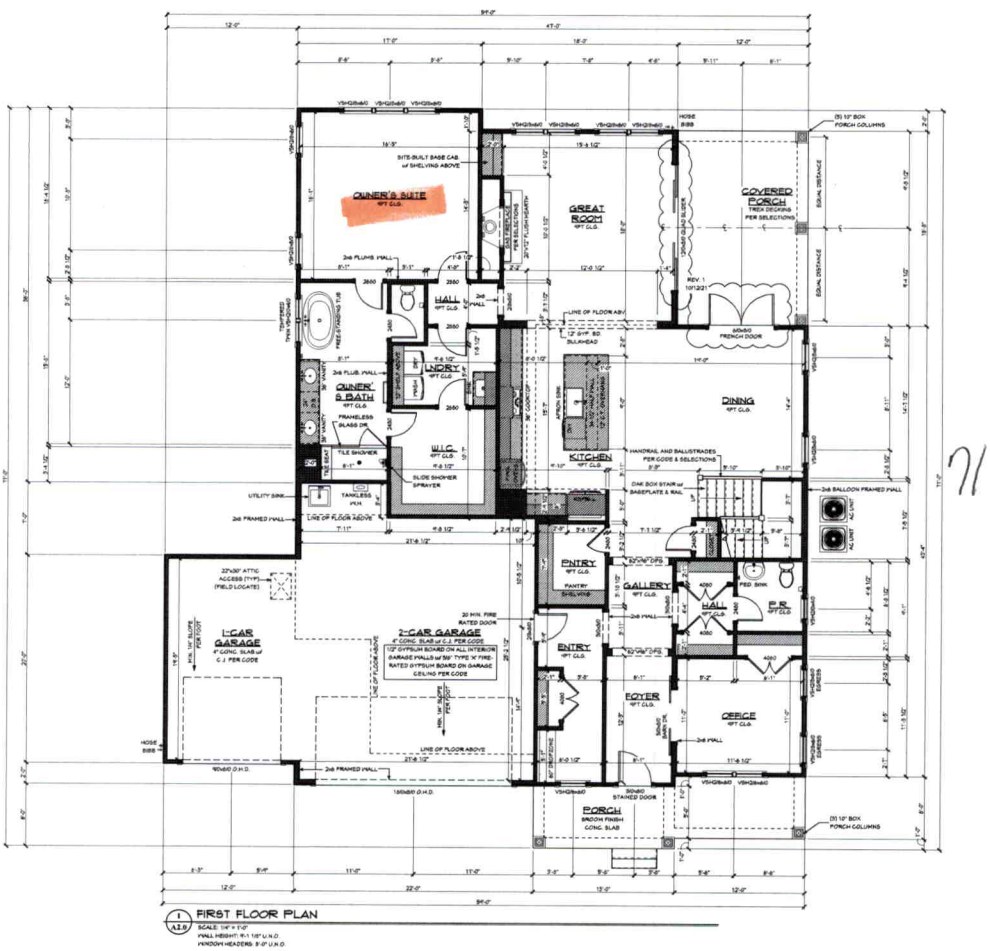
Acknowledgement Of Plans Submittal ONLY!

Heather Pooler Date 12/6/21

Date 12/2/21

59'

71'

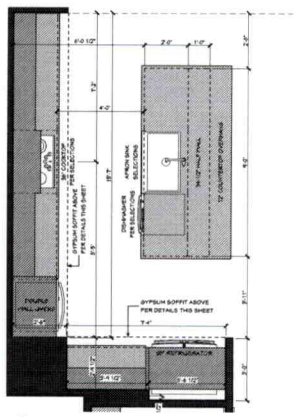


1 A2.0 FIRST FLOOR PLAN

SCALE: 1/4" = 1'-0"

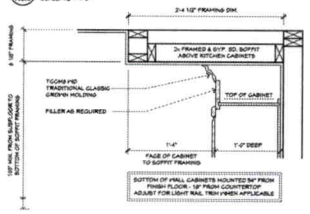
WALL HEIGHT: 9'-1 1/8" U.N.O.

WINDOW HEADERS: 8'-0" U.N.O.



1 A2.0 KITCHEN LAYOUT

SCALE: 1/2" = 1'-0"

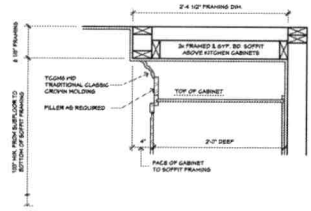


A A2.0 KITCHEN SOFFIT CROWN MOLDING

SCALE: 1-1/2" = 1'-0"

12" DEEP WALL CABINETS

9FT CEILING HEIGHT



B A2.0 KITCHEN SOFFIT CROWN MOLDING

SCALE: 1-1/2" = 1'-0"

24" DEEP WALL CABINETS

9FT CEILING HEIGHT

236 BACKHAUL DRIVE
SUITE 7
MOORESVILLE, NC 28117
704-908-4251
www.nexthomes.com

TOWNSHIP/COUNTY
TOWNSHIP
COUNTY

Engineer
IDE
INTELLIGENT DESIGN ENGINEERING
1940 J N PEASE PLACE
#204
CHARLOTTE, NC 28262
CHAD RITTER, P.E.
CORPORATE I.D. NC-3118
704-559-7230

Consultant

Project Name/Owner
THE NIGHTINGALE
SPEC HOME
HARBOR LANDING
LOT 11
200 BADEMORE ROAD
MOORESVILLE, NC 28117
MICHAEL & WENDY
BELLHOFF
600 BENNET ORCHARD TRAIL
CHAPEL HILL, NC 27516
732-713-0979

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Date
10/29/2021

Drawn By
RSS

Reviewed By
—

Plan Set Scale
24x36 sheet
1/4" = 1'-0"
11x17 sheet
1/8" = 1'-0"

Project Plan Code
—

Drawing Set
FOR CONSTRUCTION

Sheet Title Description
FIRST FLOOR PLAN

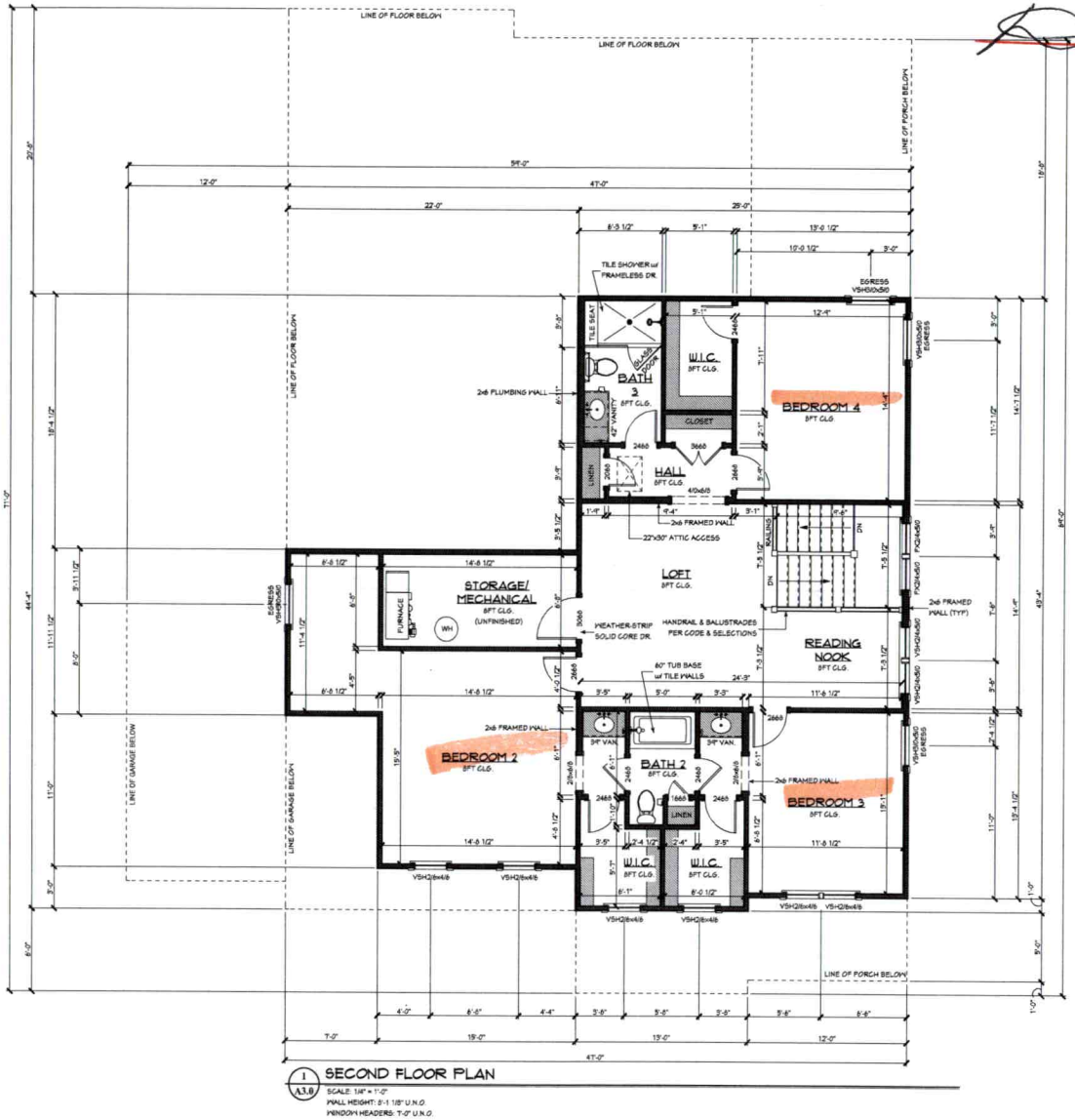
Sheet Number
A2.0

Master Plan Version
v1.8

Acknowledgement Of Plans Submittal ONLY!

Heather Poston Date 12/6/21

Date 12/2/21



236 RACEWAY DRIVE
SUITE 7
MOORESVILLE, NC 28117
704-208-4231
www.nestkomes.com

Township/County: TOWNSHIP COUNTY

Engineer: INTELLIGENT DESIGN ENGINEERING
1945 J N PEASE PLACE
#204
CHARLOTTE, NC 28262
CHAD RITTER, P.E.
CORPORATE LIC. #C-3118
704-335-7200

Stamp/Seal

Project Name/Owner: THE NIGHTINGALE SPEC HOME
HARBOR LANDING
LOT 11
200 SAGEMORE ROAD
MOORESVILLE, NC 28117
MICHAEL & WENDY BELIKOFF
500 BENNET ORCHARD TRAIL
CHAPEL HILL, NC 27516
732-713-5979

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Date: 10/20/2021
Drawn By: RES
Reviewed By: —
Plan Set Scale: 24x36 sheet 1/4" = 1'-0" 11x17 sheet 1/8" = 1'-0"
Project Plan Code: —
Drawing Set: FOR CONSTRUCTION
Sheet Title Description: SECOND FLOOR PLAN
Sheet Number: **A3.0**
Master Plan Version: v1.0

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 (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: Nest Homes LLC **Address:** PO Box 3965 , Mooresville NC **Zip:** 28117

Applicant Email: hposton@nesthomes.com **Phone:** 704-208-4251 **Alt. Phone:**

Owner Name: Harbor Landing Development LLC **Address:** PO Box 3965, Mooresville NC **Zip:** 28117

Owner Email: hposton@nesthomes.com **Phone:** 704-208-4251 **Alt. Phone:**

****

Property Information:

Street Address: 200 Sagemore Rd

Subdivision Name: Harbor Landing **Section/Phase:** S1 **Lot Number:** 11

Driving Directions: I-77 SB, to exit 36 (Hwy 150), west on Hwy 150(River Hwy) to Right on Perth Rd, Continuing on Perth Rd , Sagemore is on right after crossing Lake Norman Bridge.

****

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

CHECK FOUNDATION TYPE

(X) New Single Family Residence — Maximum Number of Bedrooms: 4 — (×) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: 8 — ( ) 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 ( ) 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.

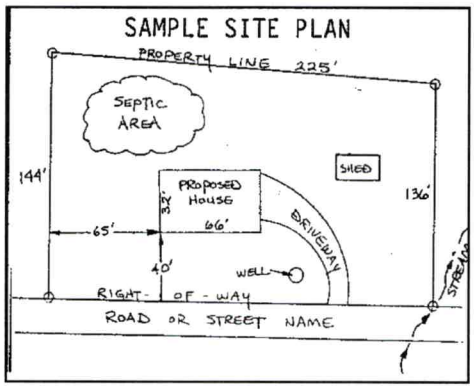
Signature: Heather Poston — 10/20/2021

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:

- ( ) **Property Line measurements are clearly identified**
- ( ) **All proposed structures are indicated**
- ( ) **Front and side setbacks from property line**
- ( ) **Preferred driveway location**
- ( ) **Preferred well location**
- ( ) **Preferred septic system location**
- ( ) **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: Heather Poston — 10/20/2021

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*) _____

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, Eric Wood, am the legal owner(s) of the property located at 200 Sagemore Rd, identified as

PIN (Parcel Identification Number) 4638973065.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Heather Poston & Jenna DuBois, Nest Homes LLC, 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
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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.

Eric Wood
Signature of Owner(s)

10/20/2021
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

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 *****

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

HP **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.**

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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 non-refundable. 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.
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- **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 Heather Poston **Date** 10/20/2021

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

call Paul Penninger for site visit 704.996.6330

RECEIVED MAY 1 4 2020

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Paid $500.00

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 AP-307209

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: Nest Communities, LLC **Address:** 236 Raceway, Suite 7, Mooresville, NC **Zip:** 28117

Applicant Email: mwetter@nesthomes.com **Phone:** 704.433.9947 **Alt. Phone:**

Owner Name: Stanley F. Goodman **Address:** 275 Cornelius Rd, Mooresville, NC **Zip:** 28117

Owner Email: 504carolinabeach@gmail.com **Phone:** 704-657-6152 **Alt. Phone:**

Property Information:

Street Address: 200 Sagemore Rd

Subdivision Name: Harbor Landing **Section/Phase:** 1 **Lot Number:** 11

Driving Directions: Highway 21 North, L Cornelius, ~~on~~ left ~~before~~ Perth Road, L SAGEMORE, AT END

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

(X) 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: 8
( ) Swimming Pool
( ) Other Addition/Structure:

CHECK FOUNDATION TYPE
(X) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) 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:
(X) No Preference ( ) Alternative ( ) 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? CAFE
( ) 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: _____ 5.5.20
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

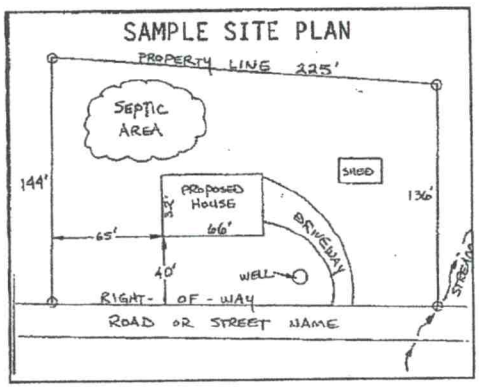
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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

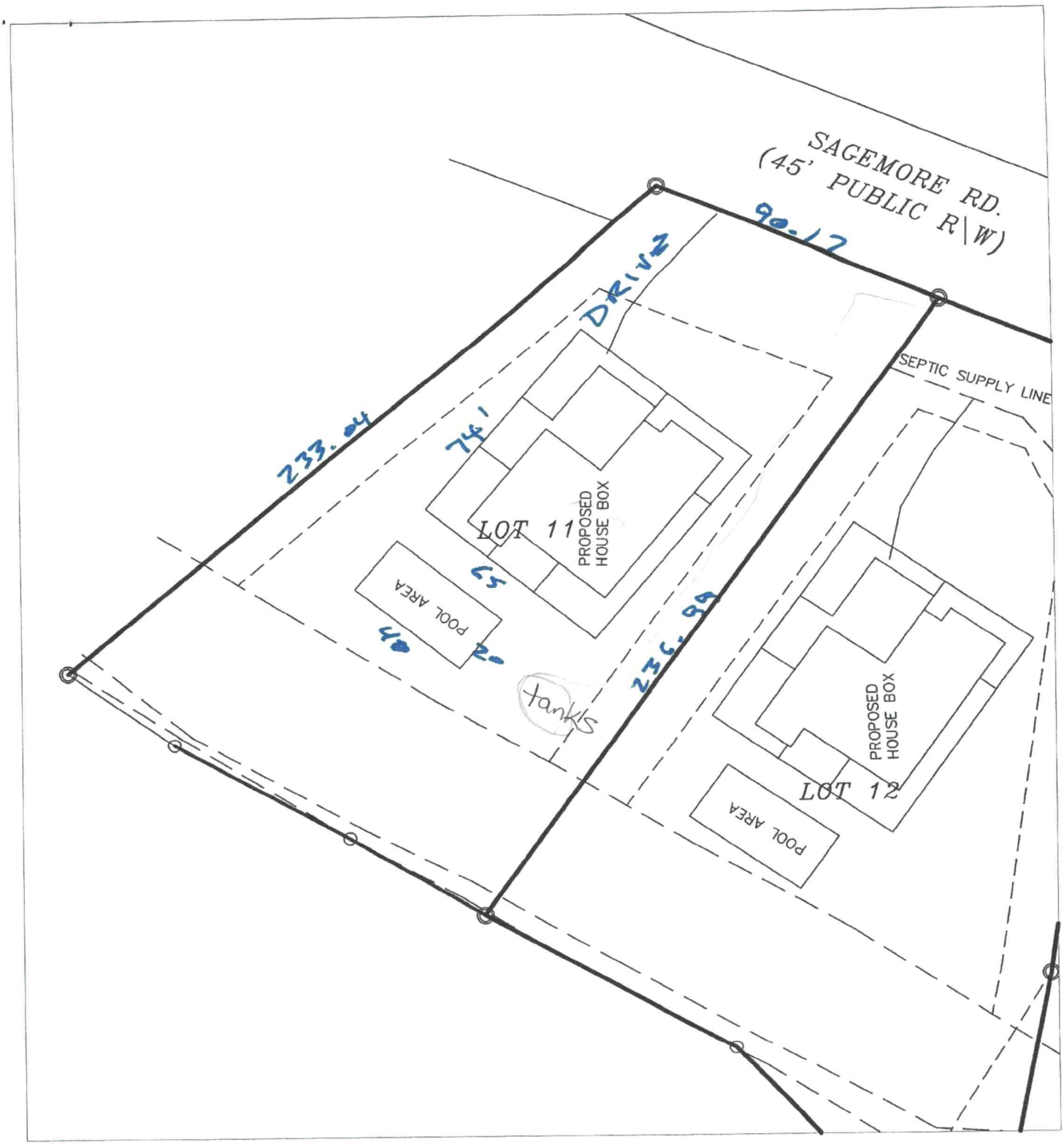
See attached site plan.

Signature: _____

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

5.5.20

DATE

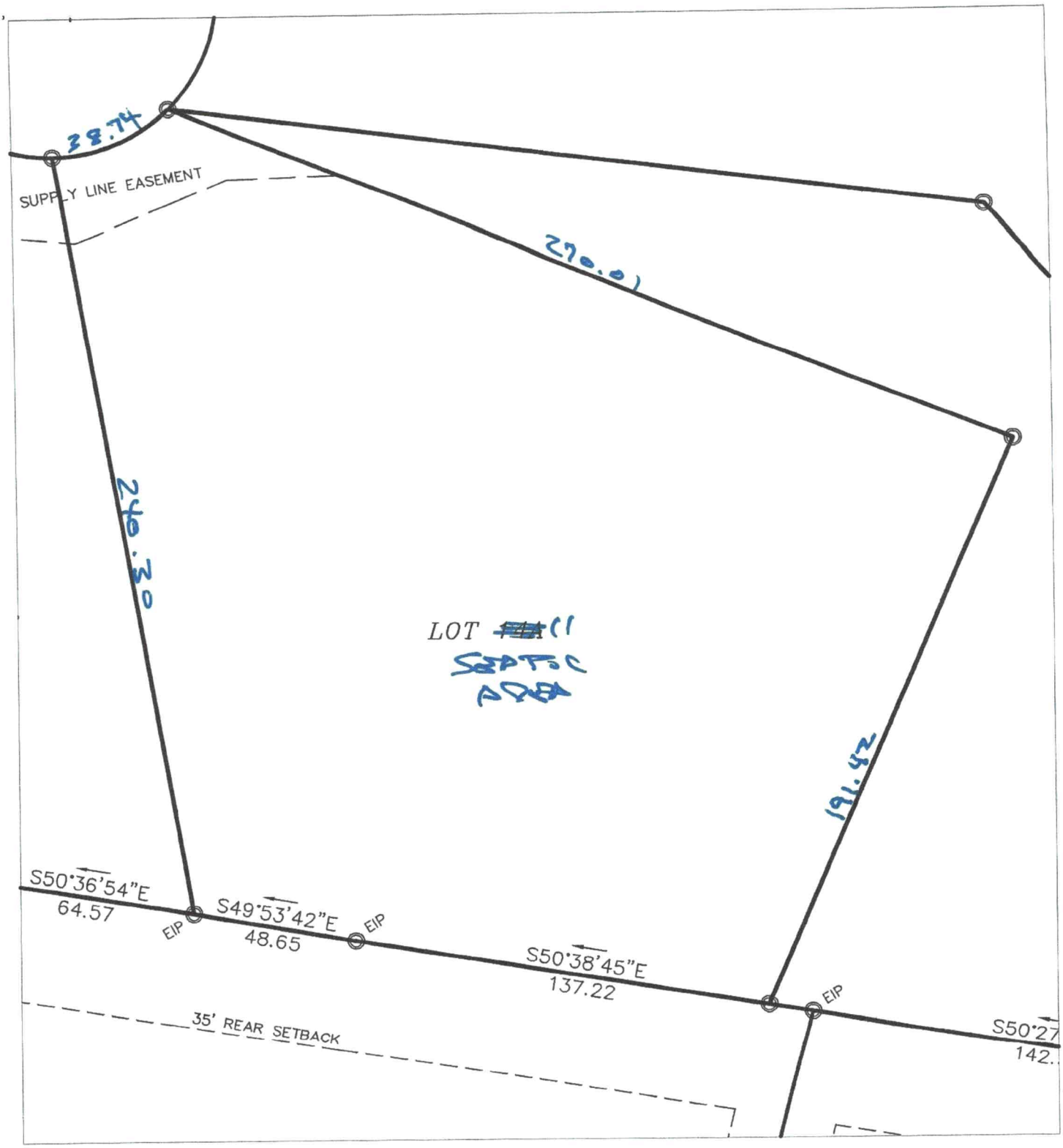


Harbor Landing Lot 11 – Nest Homes Septic Site Plan 5.5.20

Base site plan from DAS.

1" = 40'

Septic system must be approved and permitted by ICHD.



Harbor Landing Lot 11 – Nest Homes Septic Site Plan 5.5.20

Base site plan from DAS.

Septic system must be approved and permitted by ICHD.

1" = 40'

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 072065 PIN# 4639 73 4550 (pt.) DATE May 4, '98

OWNER OR CONTRACTOR Stumpy Creek LLC PHONE: Business 633-6124 Home

ADDRESS 614 N. Main St Salisbury

LOCATION Peth Rd. N. TR Sagemore on Right At/Near end

SUBDIVISION Harbor Landing BLOCK / SECTION II LOT 11 LOT AREA 26,776 sf +/- SFE SITE CLASS. PS DESIGN FLOW 480 gpd L.T.A.R. .03

Septic Tank: 1000 Gallons; STB Date

Pump Tank: 1000 Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 4 @ 100' Trench Width 36" Max Trench Bottom Depth ~24" Gravel Depth NA

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

System Description: pumped-pm- MOA- 25% Red.

Repair System Description: LPP MOA / Panel Block

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees

☐ Other

☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

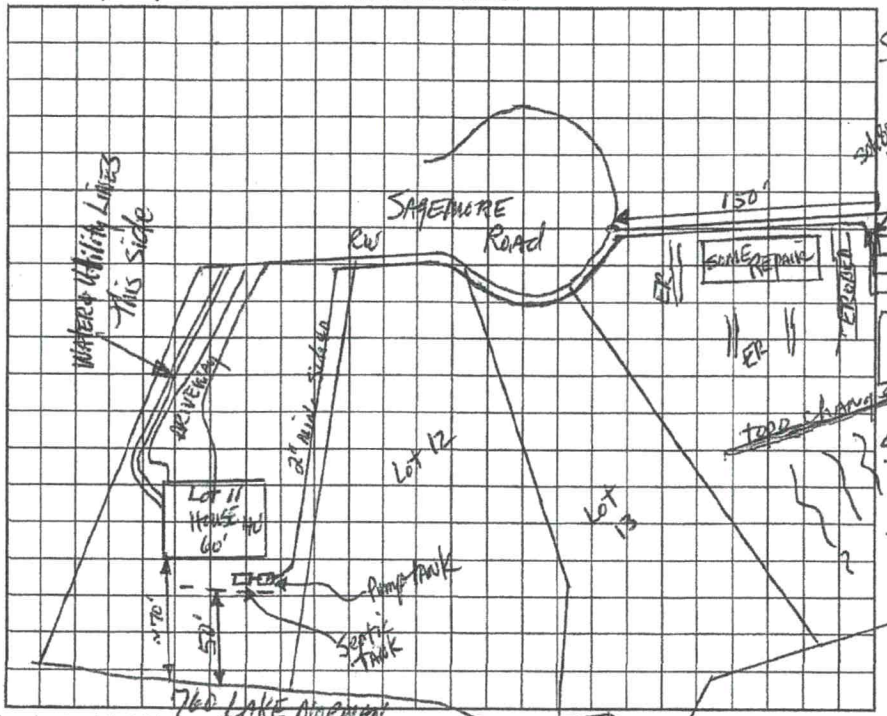
Water Supply:
☐ Individual
☐ Public
☒ Community

Comments:/Conditions:

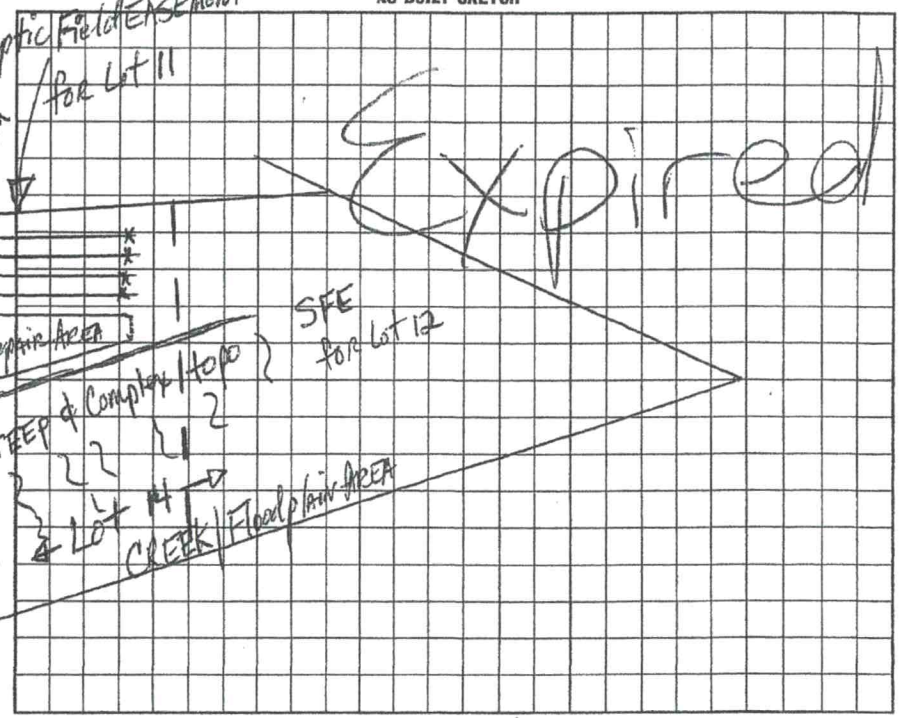
Comments:/Conditions:

1" = 100'

INITIAL SITE SKETCH



AS BUILT SKETCH



I understand that this 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: date 5/5/98 Installed by:

Improvement Permit by: date 5-4-98 Operation Permit by: date

Authorization to Construct by: date Existing System Inspection by: date

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

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*) Stanley F. Goodman

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, Stanley F. Goodman, am the legal owner(s) of the property located at Harbor Landing Lots 4-12, Cornelius Road and Sagemore Rd, identified as PINS: 4638979236, 4638978159,4638976296, 4638975347, 4638973409, 4638971643, 4638973065, 4638973116 PIN (Parcel Identification Number)_____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Paul Penninger/Penninger Soil Consulting M. Wetter, E. Wood/ Nest Homes, 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)
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Stanley F. Goodman — Signature of Owner(s)

3/30/20 — Date

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ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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Signature _____ **Date** 5.5.20

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