ICHD–ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625

AP

PERMIT # 3067154

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

PIN # 4638973409

APPLICANT/OWNER: K'est Communities — APPLICANT ADDRESS: 236 Knox Cay Suite 1 Mooresville, NC 28117

SITE ADDRESS: 931 Cornelius Rd Mooresville, NC — PHONE: 704 339 9417 — ALT. PHONE

SITE DIRECTIONS: Hwy 115 21 N To Cornelius Rd on left before Perth

SUBDIVISION: Harbor Landing — SECTION: 1 LOT # 586 LOT AREA: 1.34 Ac — SAP CONTROLLED: ☐ YES ☒ NO — DESIGN FLOW: 360gpd L.T.A.R. .625

Septic Tank	1000 (gal)	STB Infiltrator	Date	☒ 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	System Description:		☐ Business	No. Persons	6	☐ Private
Pump Make		Model	Serial #	Repair System Description:	Offsite Reps	☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	5 (4 reps)	Linear Ft 466	Maintenance Agreement Required: ☐ YES ☒ NO	☐ Slab	☒ Crawl Space		☒ Community
Trench Width	2'	Trench Bottom Depth(Low side)	24"	Gravel Depth N/A	☐ GRAVITY ☒ PRESSURE	☐ Basement w/ plumbing	☐ Basement w/o plumbing		

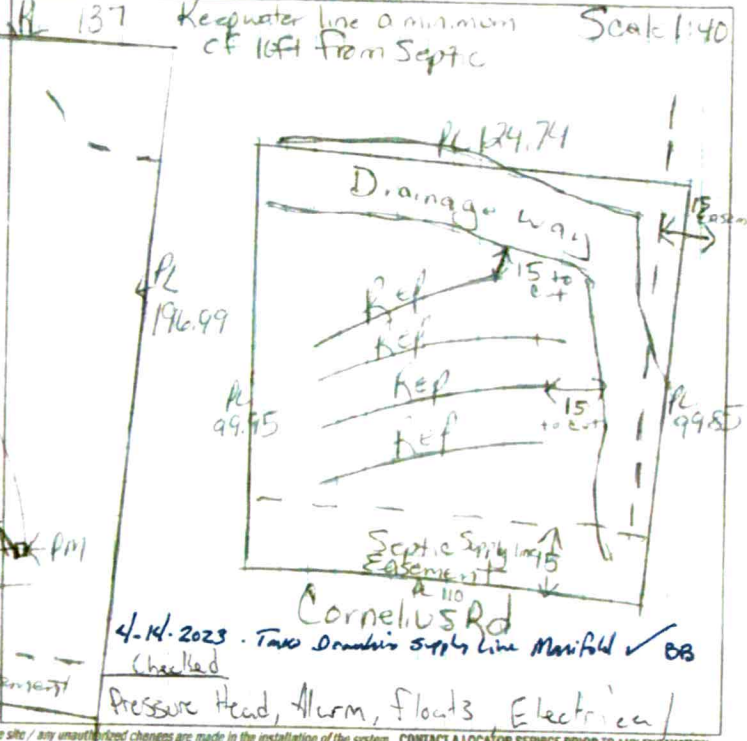
Comments / Conditions: Use 1½" Schedule 40 taps
Put 2-50ft lines on Tap
If Driveway construction damages drainfield permit will be revoked

Dose 1846 gal 2ft pressure
Drain down 8.8 inches
Septic Easements have been recorded

INITIAL SITE SKETCH Scale 1:50



AS BUILT SKETCH Scale 1:40



4-14-2023 - Two Drainage Supply Line Manifold ✓ OB Checked

Pressure Head, Alarm, floats 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 ☒ IMPROVEMENT PERMIT with site plan valid for 60 days ☐ AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

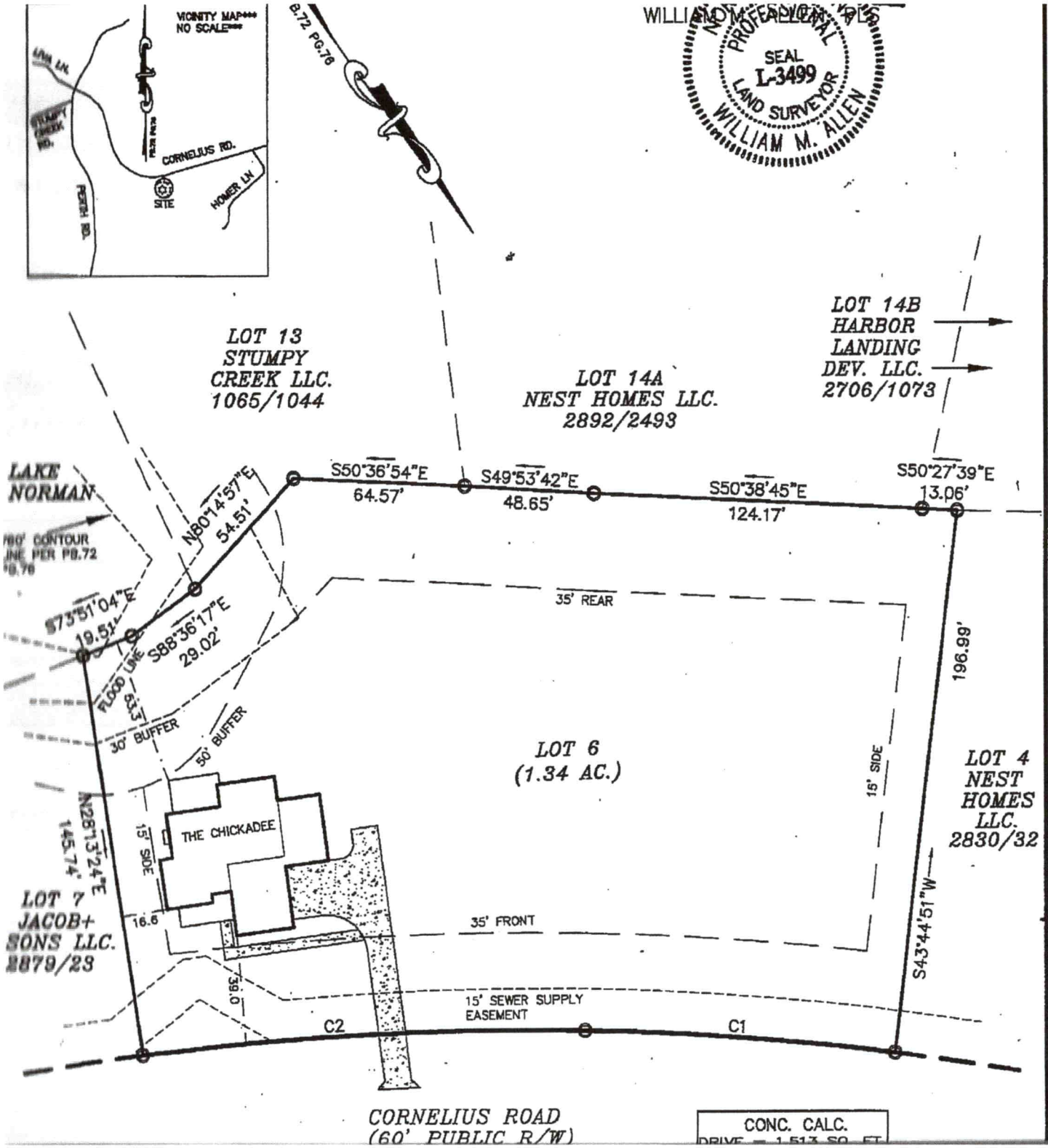
Owner / Applicant Signature: [signature] Date: 9/20/20 Installed by: Specialty Septic

IMPROVEMENT PERMIT by: Diana Robertson Date: 9/5/2020 OPERATION PERMIT by: [signature] Date: 5/15/23

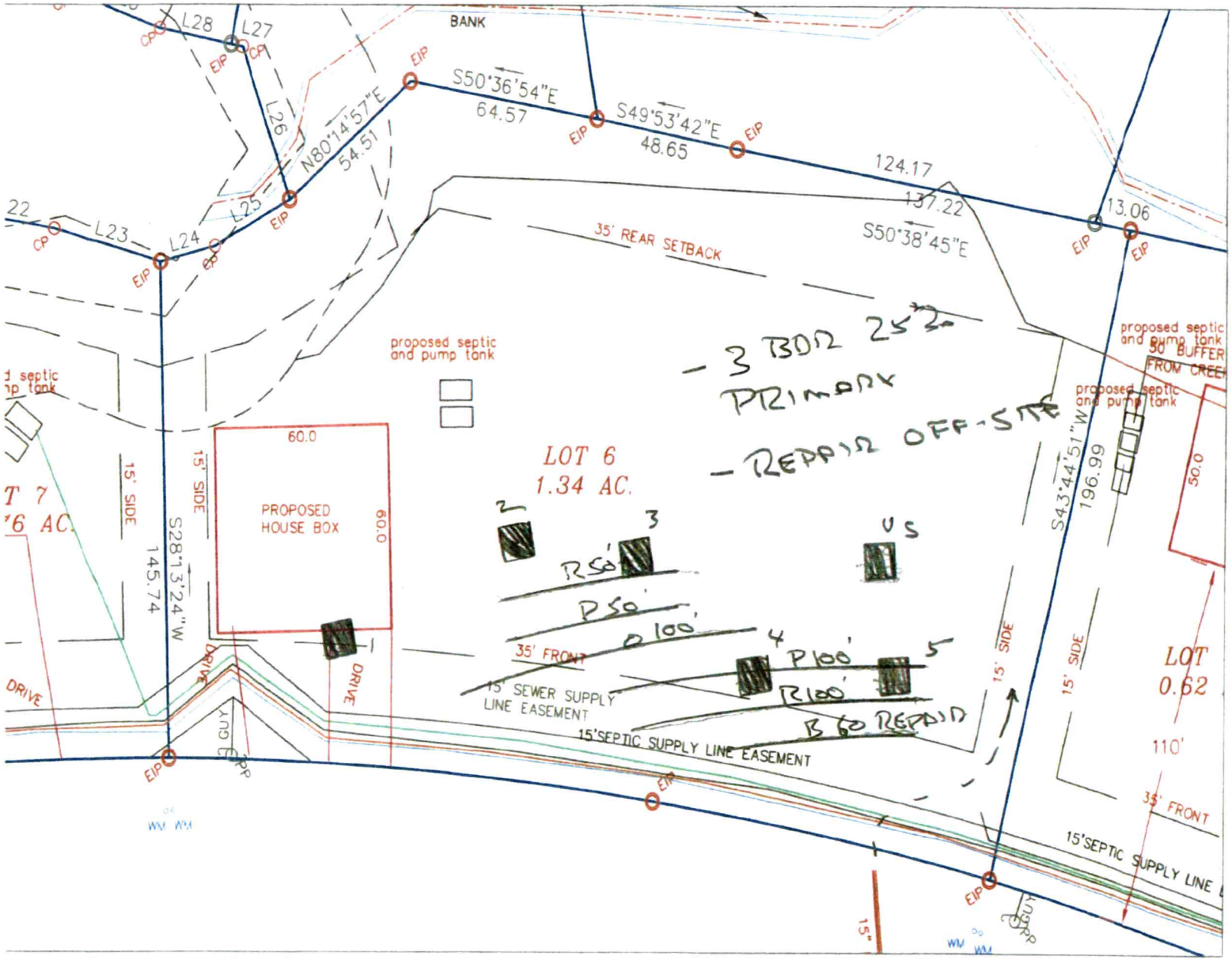
AUTHORIZATION TO CONSTRUCT by: [signature] Date: 5/15/22 Existing System Inspected by: Date:

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

* Sign off when culvert has been fixed to where water is not exposing system.



Acknowledgement Of
Plans Submittal ONLY!
Heather Poch Date 5/16/22
Date 5/16/22



Harbor Landing Lot 6 – Nest Homes Septic Site Plan – rev. 7.7.20

Base site plan from DAS.

Septic system must be approved and permitted by ICHD.

1" = 40'

RECEIVED MAY 10 2022

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM AP-306754

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:** 980-500-1238 **Alt. Phone:** _____

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

Owner Email: hposton@nesthomes.com **Phone:** 980-500-1238 **Alt. Phone:** _____

Property Information:

Street Address: 931 Cornelius Road , Mooresville, 28117

Subdivision Name: Harbor Landing **Section/Phase:** S1 **Lot Number:** 6

Driving Directions: Hwy 150& Bluefield Road, right on Bluefield, travel Bluefield to Cornelius Rd, left on Cornelius Rd travel on Cornelius Rd, 1.3 miles to parcel on left

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: 6 — ( ) 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 (X) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: _____
( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative (X) 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?
(X) 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 — May 6, 2022
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**

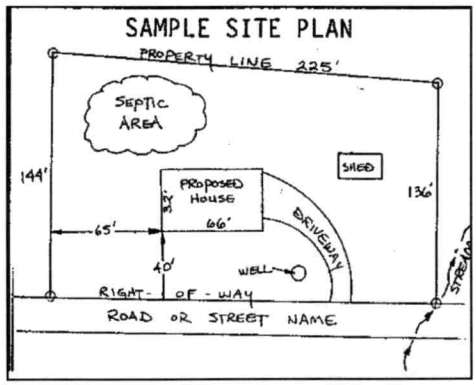
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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

**** Please see attached plot plan ****

Signature: Heather Poston

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

May 6, 2022

DATE

ICHD–ENVIRONMENTAL HEALTH DIVISION

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

AP

PERMIT # 3067754

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

PIN # 4638913409

APPLICANT/OWNER: Nest Communities

APPLICANT ADDRESS: 236 Raceway Suite 1 Mooresville, NC 28117

SITE ADDRESS: 931 Cornelius Rd Mooresville, NC

PHONE: 7044339947

ALT. PHONE

SITE DIRECTIONS: Hwy 115 21 N TL Cornelius Rd on left before Perth

SUBDIVISION: Harbor Landing

SECTION: | LOT # 596 | LOT AREA: 1.34Ac

SAP CONTROLLED: ☐ YES ☒ NO

DESIGN FLOW: 360gpd | L.T.A.R.: 0.25

Septic Tank	1000 (gal)	STB	Date		
Pump Tank	1000 (gal)	PT	Date		
Pump Make		Model	Serial #		
# Nitrification Fields	1	# Lines	5 (4 tops)	Linear Ft	460'
Trench Width	36"	Trench Bottom Depth(Low side)	24"	Gravel Depth	N/A

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

System Description: Pump -25% Reduction

Repair System Description: Offsite PWBPS

Maintenance Agreement Required: ☐ YES ☒ NO

☐ GRAVITY ☒ PRESSURE

☒ Residence No. Bedrooms 3

☐ Business No. Persons 6

☐ Other No. Employees

☐ Slab ☒ Crawl Space

☐ Basement w/ plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☒ Community

Comments / Conditions: Use 1½" schedule 40 tops

Put 2-50ft lines on Hap

Dose 184.6 gal 2ft pressure

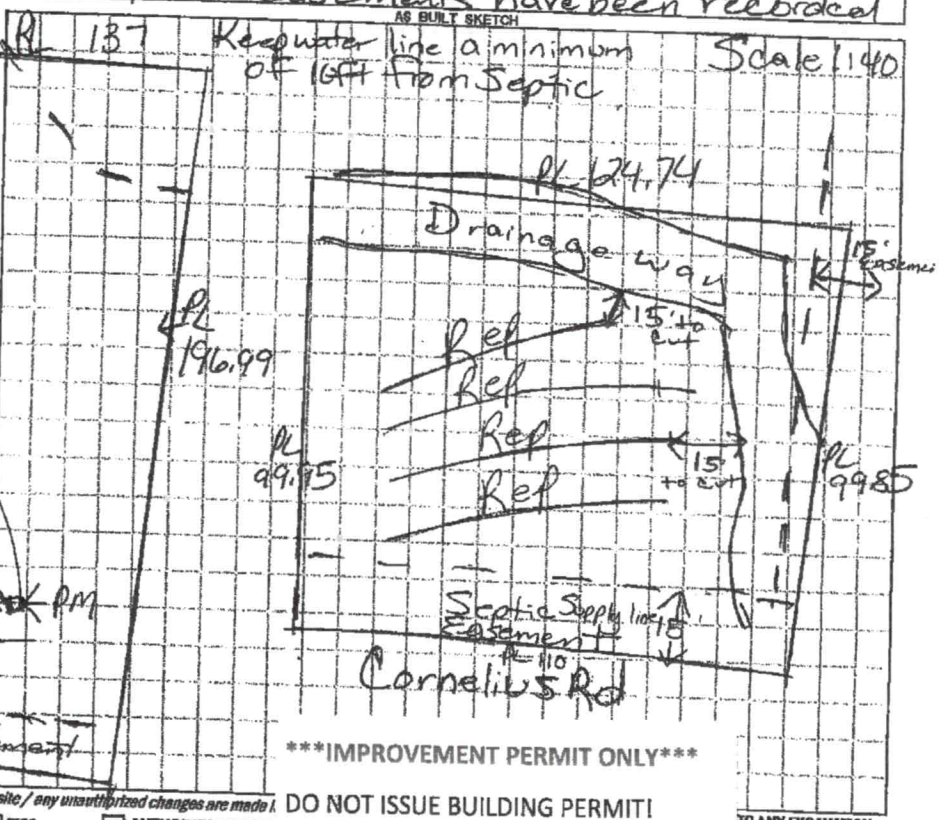
Draw down 8.8 inches

Septic Easements have been recorded

INITIAL SITE SKETCH Scale 1:50



AS BUILT SKETCH Scale 1:40



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 to

☐ IMPROVEMENT PERMIT with plat valid without expiration ☒ IMPROVEMENT PERMIT with site plan valid for 60 mos. ☐ AUTHORIZATION TO ... TO ANY EXCAVATION not to exceed 60 mo.

IMPROVEMENT PERMIT ONLY

DO NOT ISSUE BUILDING PERMIT!

FLOOR PLAN STILL NEEDED!

Owner / Applicant Signature: [signature] Date: 9/23/20

IMPROVEMENT PERMIT by: Maria Dotson Date: 9/5/2020

AUTHORIZATION TO CONSTRUCT by: Date:

Installed by:

OPERATION PERMIT by: Date:

Existing System Inspected by: Date:

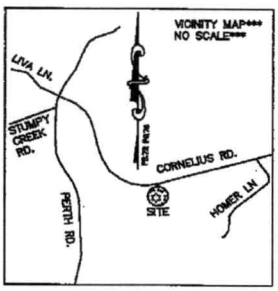
FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 7am-9am the day the inspection is needed. Be sure to speak with an inspector to confirm your inspection time.

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 72, page 76, 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 26, day of APRIL,
A.D. 20 22.

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



PB.72 PG.76

LOT 13
STUMPY CREEK LLC.
1065/1044

LOT 14A
NEST HOMES LLC.
2892/2493

LOT 14B
HARBOR LANDING DEV. LLC.
2706/1073

LAKE NORMAN

760' CONTOUR LINE PER PB.72 PG.76

N80°14'57"E 54.51'

S50°36'54"E 64.57'

S49°53'42"E 48.65'

S50°38'45"E 124.17'

S50°27'39"E 13.06'

S73°51'04"E 19.51'

S88°36'17"E 29.02'

35' REAR

196.99'

FLOOD LINE

50' BUFFER

30' BUFFER

LOT 6
(1.34 AC.)

15' SIDE

LOT 4
NEST HOMES LLC.
2830/32

N28°13'24"E 145.74'

15' SIDE

THE CHICKADEE

16.6

35' FRONT

S43°44'51"W

LOT 7
JACOB+ SONS LLC.
2879/23

9.6'

15' SEWER SUPPLY EASEMENT

C2

C1

CORNELIUS ROAD
(60' PUBLIC R/W)

CONC. CALC.
DRIVE = 1,513 SQ. FT.
WALK = 249 SQ. FT.

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

CURVE TABLE				
CURVE	RADIUS	LENGTH	BEARING	CHORD
C1	1175.91'	117.67'	S 49°09'30" E	117.62'
C2	1175.91'	167.01'	S 56°02'47" E	166.87'

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.
5) SETBACKS SHOWN PER PLAT (PB.72 PG.76)

0' 25' 50' 100'
SCALE IN FEET

PLOT PLAN SURVEY

OF
931 CORNELIUS ROAD
LOT 6 HARBOR LANDING SECTION 1

SCALE 1" = 50'
DAVIDSON TWSP., IREDELL CO., N.C.
ACQUIRED BY: NEST HOMES LLC.

FIELD BOOK: N/A
FILE: HARBOR LANDING 6.DWG
DC FILE:
TAX MAP NO: 4638973409

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 of Harbor Landing Dev LLC, am the legal owner(s) of the property located at 931 Cornelius Road , Mooresville, 28117, identified as

PIN (Parcel Identification Number) 4638973409.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Heather Poston, Permitting Coordinator 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
- 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.

Eric Wood
_____
Signature of Owner(s)

May 6, 2022
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**:
- ✓ Application
- ✓ Site Plan with dimensions of proposed structure, addition, pool etc.
- ✓ Documentation to Authorize Owner Agent (if the property owner is not the applicant)
- ✓ Copy of Zoning Permit when applicable
- ✓ 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.**

HP **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**.

HP **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.

HP 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 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.
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 Heather Poston **Date** May 6, 2022

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

RECEIVED APR 2 0 2020

AP-306754
$ 500.00

call Paul Penninger for site visit 704.996.6330

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

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(l) 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 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: 931 Cornelius Road
Subdivision Name: Harbor Landing Section/Phase: 1 Lot Number: 5+6
Driving Directions: Highway 21 North, L Cornelius, on left before Perth Road

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: 3
Maximum Number of Occupants: 6
( ) Swimming Pool
( ) Other Addition/Structure: _____

Non-Residential Site Development: Type of Business: _____
Square Footage of Building: _____ Max. Number of Employees: _____ Max. Number of Seats/Beds/Other: _____

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

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 ( ) Other: _____

Please answer the following to the best of your ability:
( ) Yes (X) No Does the site contain any jurisdictional wetlands? NONE ON SURVEY
( ) 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: _____ 4.12.20
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

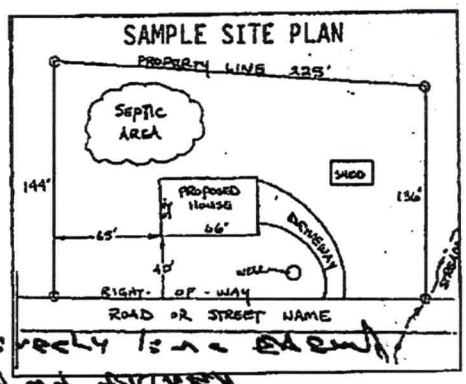
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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
- (N/A) 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

~ Survey is a good

non of survey

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

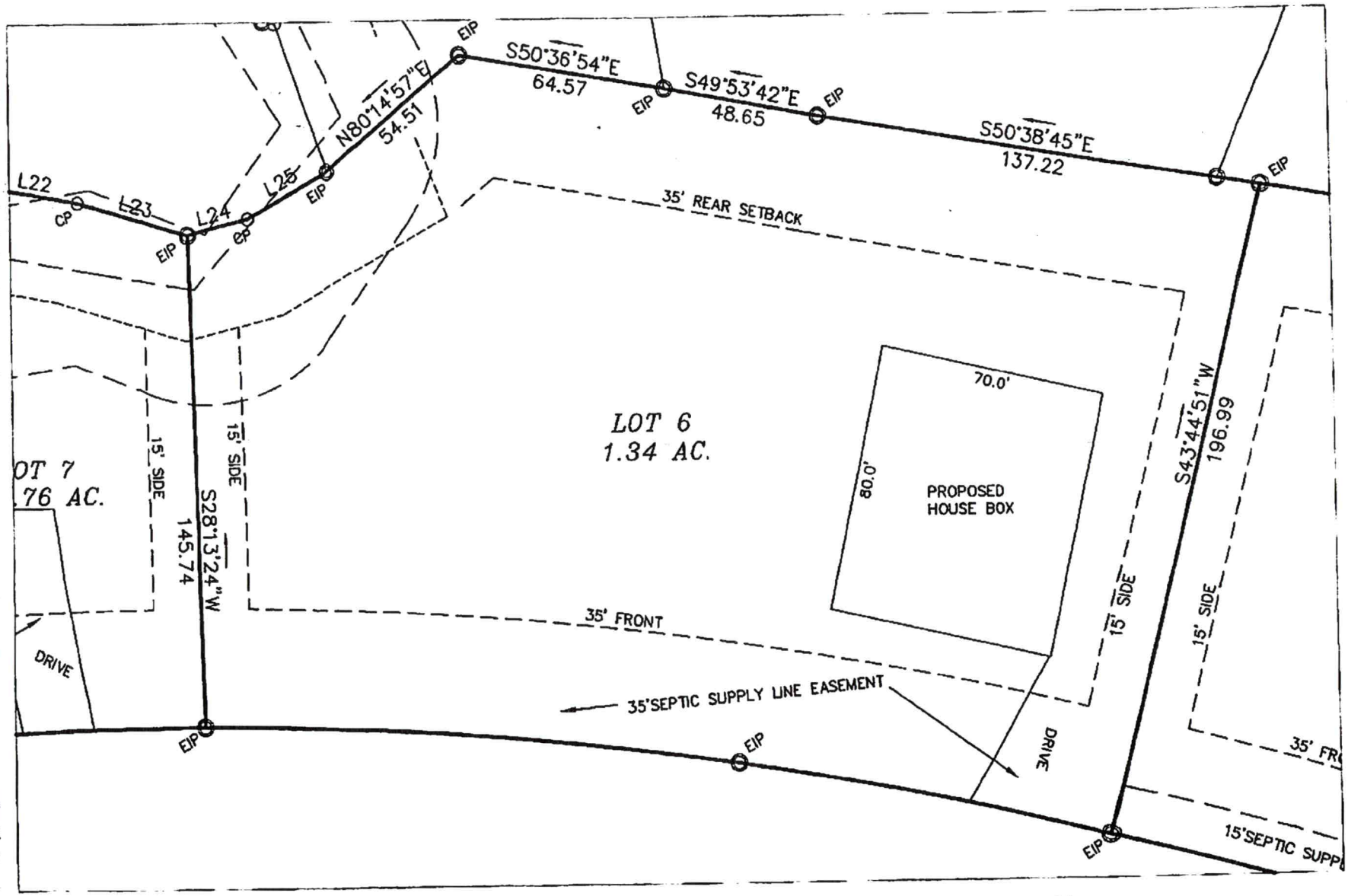
See attached site plan.

Signature: _____

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

4.12.20

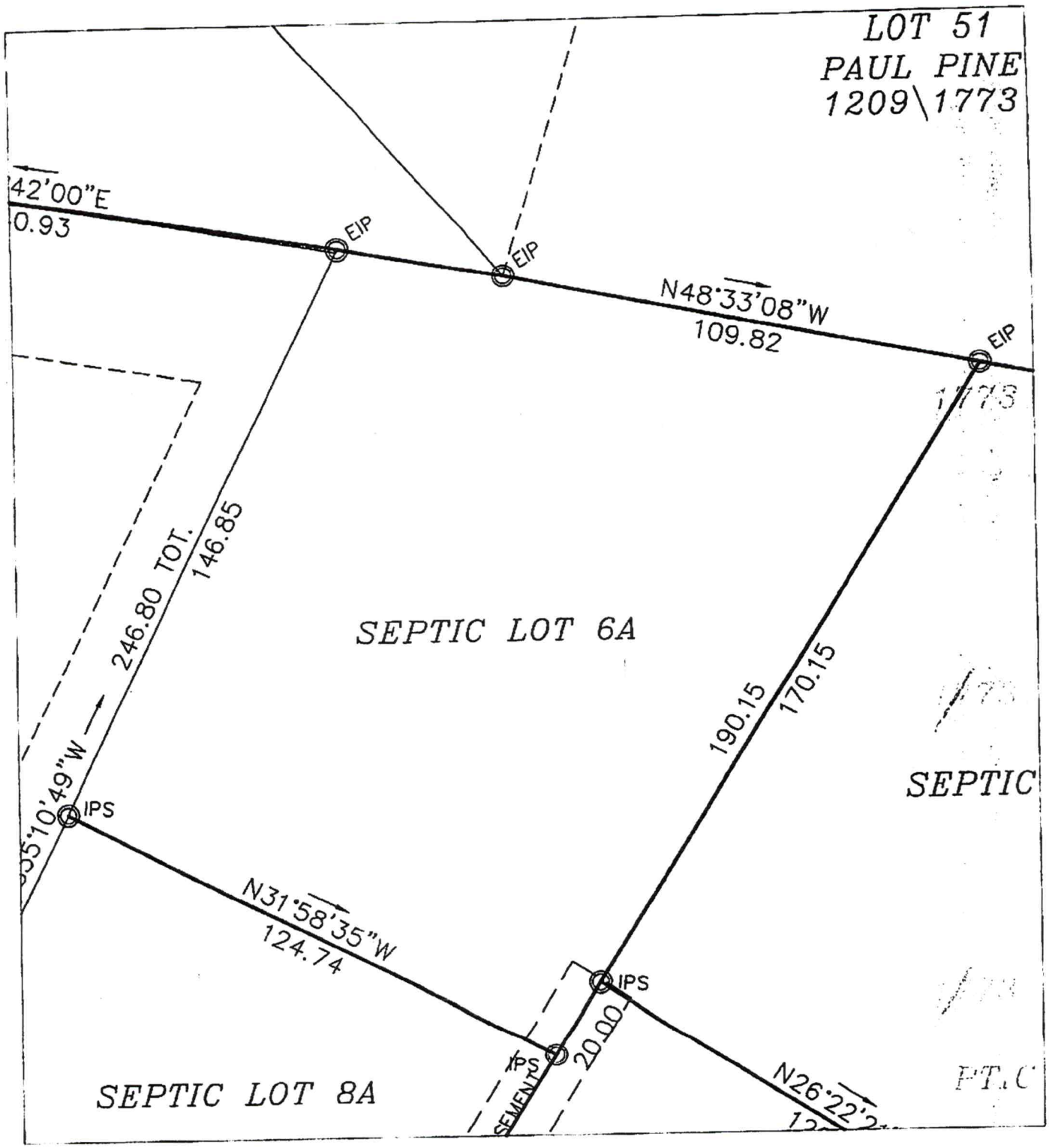
DATE



Harbor Landing Lot 6 – Nest Homes Septic Site Plan 4.9.20 1" = 40'

Base site plan from DAS.

Septic system must be approved and permitted by ICHD.



Harbor Landing Lot 6 – Nest Homes Septic Site Plan 4.9.20

Base site plan from DAS.

Septic system must be approved and permitted by ICHD.

1" = 30'

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 072041 PIN# 4639 73 4550 DATE May 1, 98

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

ADDRESS 614 N. Main Salisbury

LOCATION Perth Rd. to TR Cornelius 5th+6th to last on right

SUBDIVISION Historic Linwin BLOCK / SECTION 1 LOT 5+6 combined LOT AREA 58,273 +SITE 2B SITE CLASS. RS DESIGN FLOW 360 gpd L.T.A.R. .2-.25

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 3 @ 133' Trench Width 36" Max Trench Bottom Depth 24"

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

System Description: pumped-pm-1000-25% Red

Repair System Description: OFFSITE SFE #2B

Maintenance Agreement Required: ☐ Yes ☑ No

Gravel Depth AIA ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

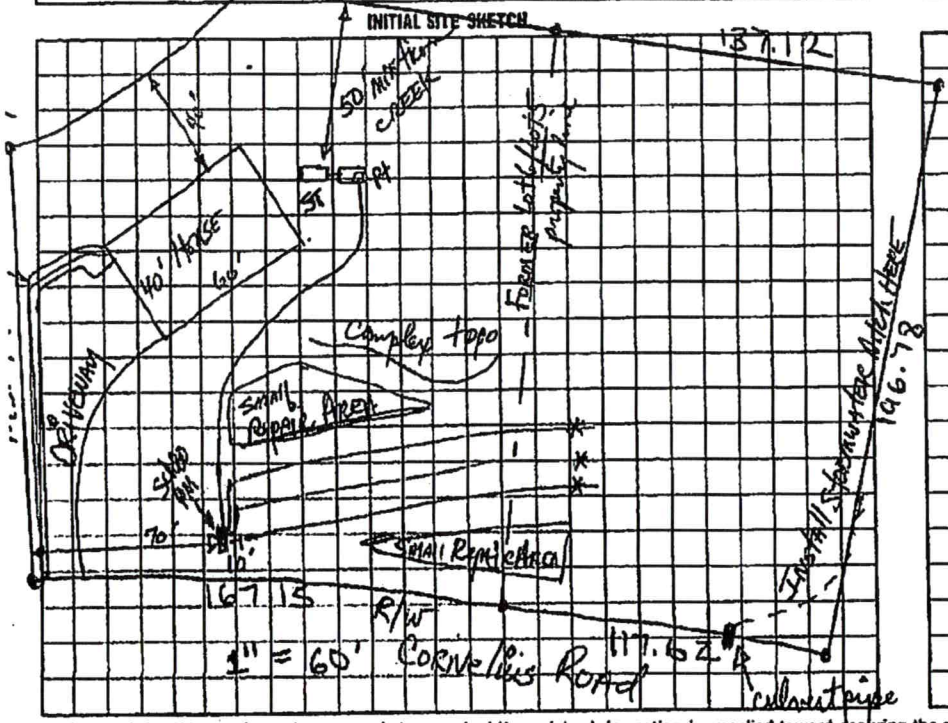
☐ Other

Water Supply: ☐ Individual ☐ Public ☑ Community

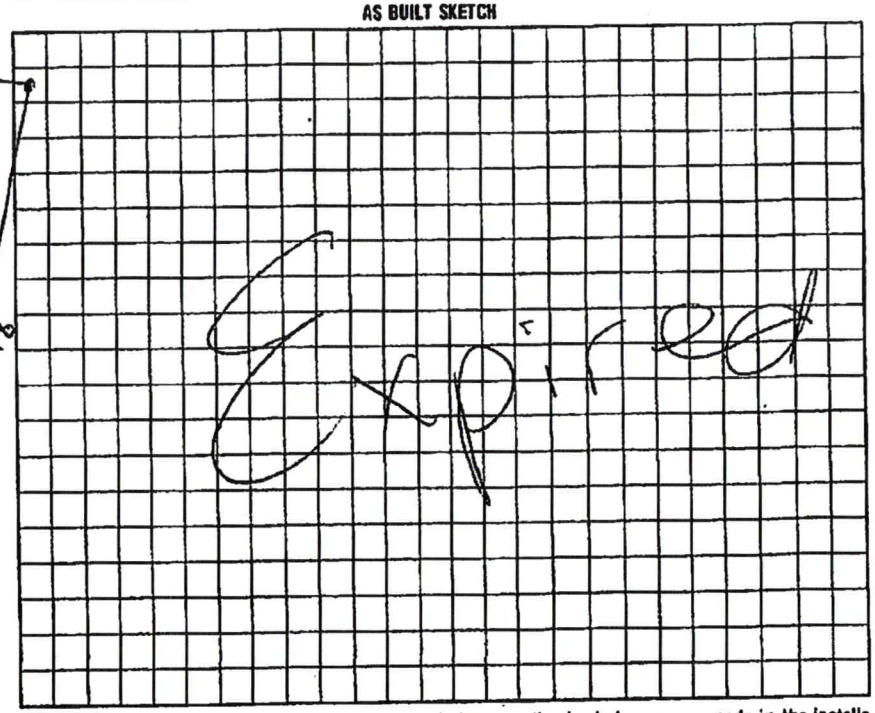
Comments:/Conditions: * ONE inspection (observation) port per Lateral
Remove old Burns / TERRACES . Install Stormwater Ditch along property Line.

Comments:/Conditions:

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: Walter R. Lemon, RS date 5-1-98 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)
- 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.

Stanley F. Goodman
Signature of Owner(s)

3/30/20
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 ***

Complete all Environmental Health forms:
- Application
- Site Plan with dimensions of proposed structure, addition, pool etc.
- Documentation to Authorize Owner Agent (if the property owner is not the applicant)
- Copy of Zoning Permit when applicable
- Sign this sheet after you have completed all items

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.

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.

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 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.
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 _____ **Date** 4.12.20

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

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

Sheet ___ of ___
PROPERTY ID #: 4638973409
COUNTY: Iredell

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

OWNER: Nest Communities LLC
APPLICATION DATE: 4/12/2020
ADDRESS: 236 Rogerway Suite 7 Mooresville NC
DATE EVALUATED: 4/27/2020
PROPOSED FACILITY: House
PROPOSED DESIGN FLOW (.1949): 360 gpd
PROPERTY SIZE: .62 Acre
LOCATION OF SITE: Harbor Landing Lot 6
PROPERTY RECORDED: Y
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	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	L 12%	0-8	Rd Brw SBK	SS, SP, SExP					PS
		8-26	RCm-w SBK	SS, SP, SExP					
		26-55	RCl w SBK	SS, SP, SExP					
			w/ Litho. Inclus		10YR/6	55"	—	—	.3
2	L 12% B/C	0-9	Brw SCl w SBK	SS, SP, SExP					
		9-39	RCm-f ABK/SBK	FR, S, P few Quartz Tacks	10YR/6 8 - 10YR 7/1				PS
		39-63	RCl w SBK	SS, SP, FR, SExP		63"	—	—	.25
			Common Inclus of SAP						
3	L 10%	0-8	Brw SCl w SBK	SS, SP, SExP, FR					
		8-27	RCm SBK	SS, SP, SExP, FR					PS
		27-46	RCl w SBK	SS, SP, SExP, FR					
			Litho Inclus/ Some Quartz						.25
		46-56	SL SAP massive	FR	—	46"	PS	—	
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	25% Red	PPBPS
Site LTAR	.225	

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

COMMENTS:

ON-SITE WASTEWATER SECTION

PROPERTY ID #: 4638973409
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: West Communities LLC
ADDRESS: 236 Raceway Ste 7 Mooresville NC
PROPOSED FACILITY: House
LOCATION OF SITE: Lot 5/6
PROPOSED DESIGN FLOW (.1949): 360gpd
APPLICATION DATE: 4/2/20
DATE EVALUATED: 6/9/20
PROPERTY SIZE: .62Ac
PROPERTY RECORDED: Y

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	4 12%	0-13	Brw/Rd/Brw CL	W SBK		SS, SP, SEXP, FR			PS .25
		13-44	RC	SBK/ABK FI-FR		S, P			
		44-58	Yel/Rd CL	W SBK		FR SS, SP		few	
		SAP	Inclus		—	58"	—	—	
2	5 12%	0-15	Brw/Rd-Brw CL	W SBK		SS, SP, SEXP, FR			PS .25
		15-60	R to Yel/Rd CL	W SBK		SS, SP, SEXP, FR			
					—	60"	—	—	
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	25% Red	PP BPS
Site LTAR	.25	.25

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

COMMENTS:

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

Sheet ___ of ___
PROPERTY ID #: 4638973099
COUNTY: Iredell

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

OWNER: Nest Communities LLC
ADDRESS: 236 Raceway Suite 7 Mooresville, NC
PROPOSED FACILITY: House
LOCATION OF SITE: Harbor Landing Lot 64

APPLICATION DATE: 4/12/20
DATE EVALUATED: 4/27/20
PROPOSED DESIGN FLOW (.1949): ___
PROPERTY SIZE: .62 ac
PROPERTY RECORDED: Y

WATER SUPPLY: ☐ Private ☒ Public ☐ Well ☐ Spring ☐ Other ___

EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut

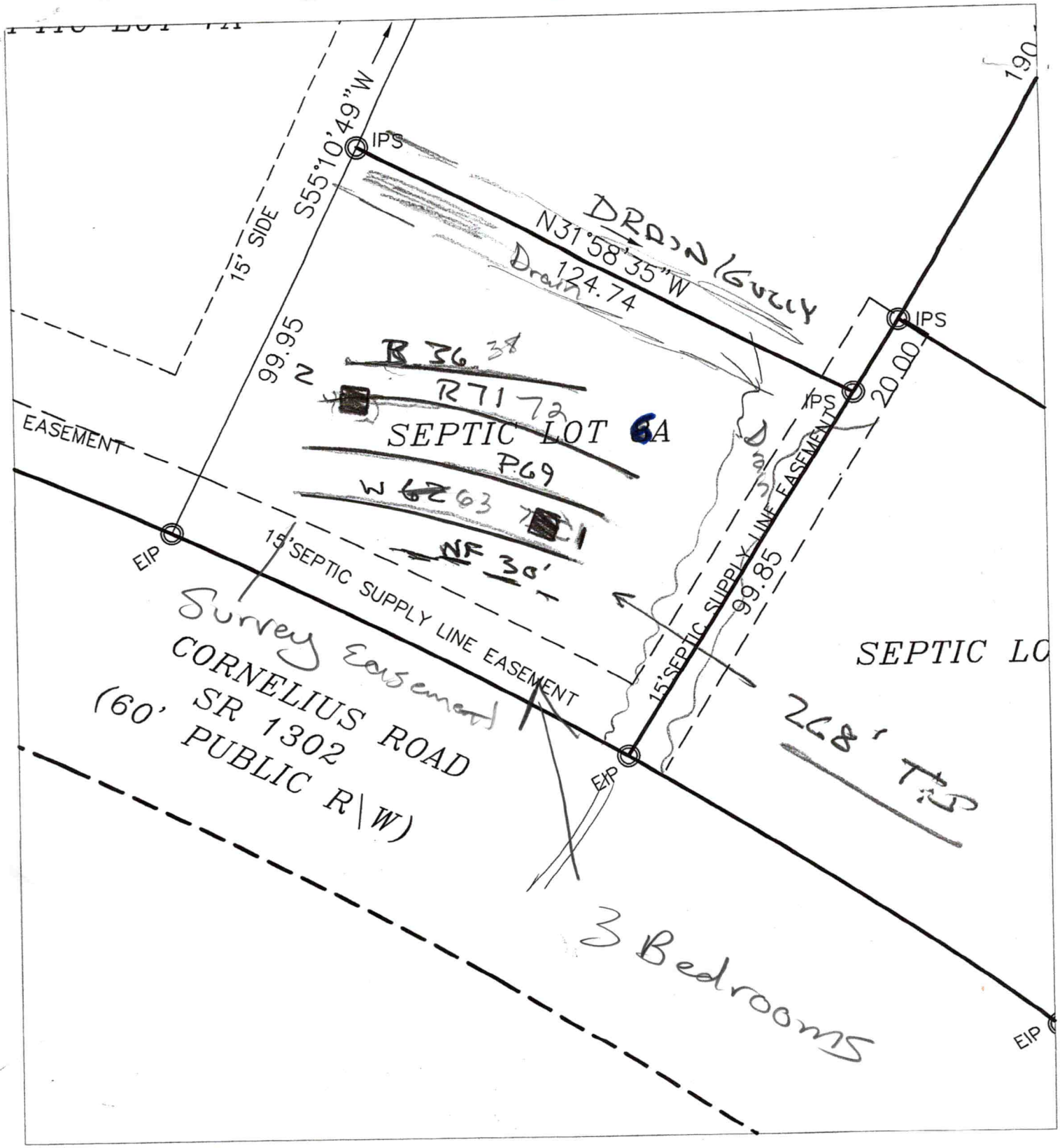
TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	10%	0-8	Brw SCL						PS .25
		8-24	RC m-w SBK						
		24-55	Rd/Brw C w SBK	SS, SP, SExP				Fi-FR	
2	12%	0-7	Brw SCL w SBK						PS .3
		7-35	RC m-f SBK/ABK, FR, SS SP						
		35-70	Yel/Rd C w SBK SS, SP, SExP w/ few Sil Fnclos						
3									
4									

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

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): ___
EVALUATED BY: Maria Dotson
OTHER(S) PRESENT: Paul Pennington & David Boan

COMMENTS:



Harbor Landing Lot 6 – Nest Homes Septic Site Plan 4.9.20

Base site plan from DAS.

Septic system must be approved and permitted by ICHD.

1" = 30'

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 07204I PIN# 4639 73 4550 DATE May 4, '98

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

ADDRESS 614 N. main Salisbury

LOCATION Perth Rd N TR Cornelius 5th+6th to last on Right

SUBDIVISION Harbor Landing BLOCK / SECTION 1 LOT 5+6 combined LOT AREA 58,273 +SITE 2B SITE CLASS. RS DESIGN FLOW 360gpd L.T.A.R. .2-.25

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 3@133 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-MOD-25%Red

Repair System Description: offsite SFE #2B

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

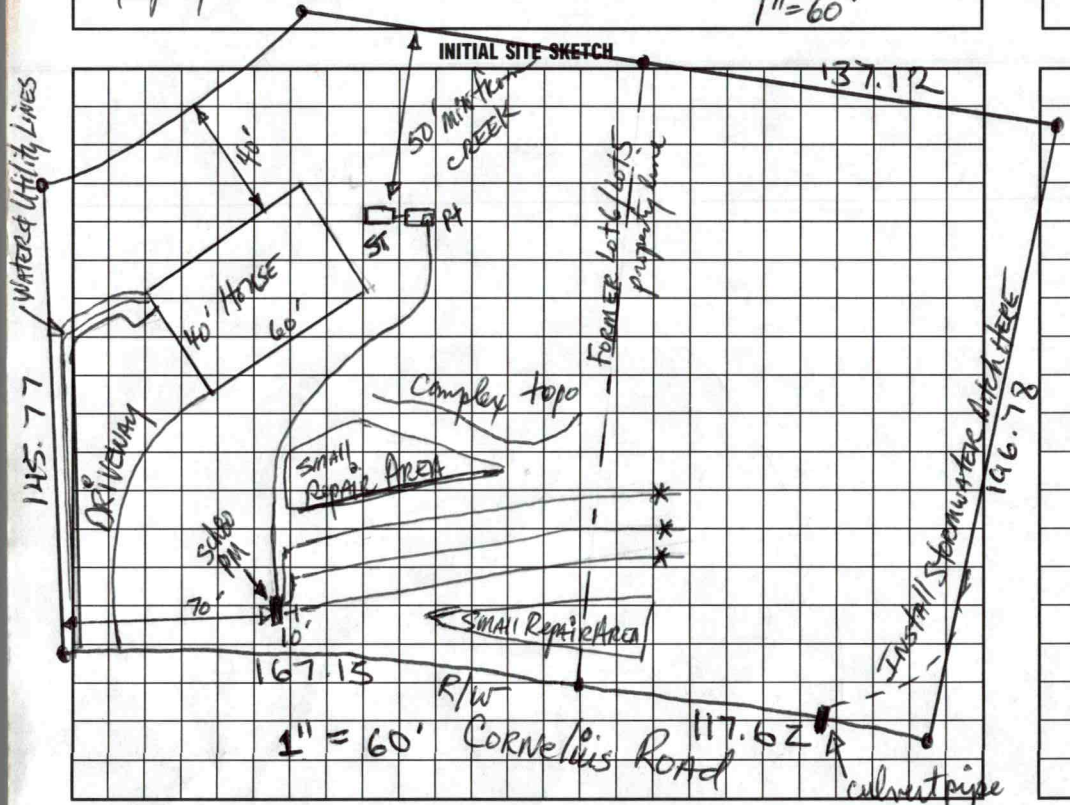
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☑ Community

Comments:/Conditions: * ONE inspection/observation port per Lateral
Remove old Berms/Terraces. Install Stormwater Ditch along property lines.
1"=60'

Comments:/Conditions:

INITIAL SITE SKETCH



AS BUILT SKETCH

Expired

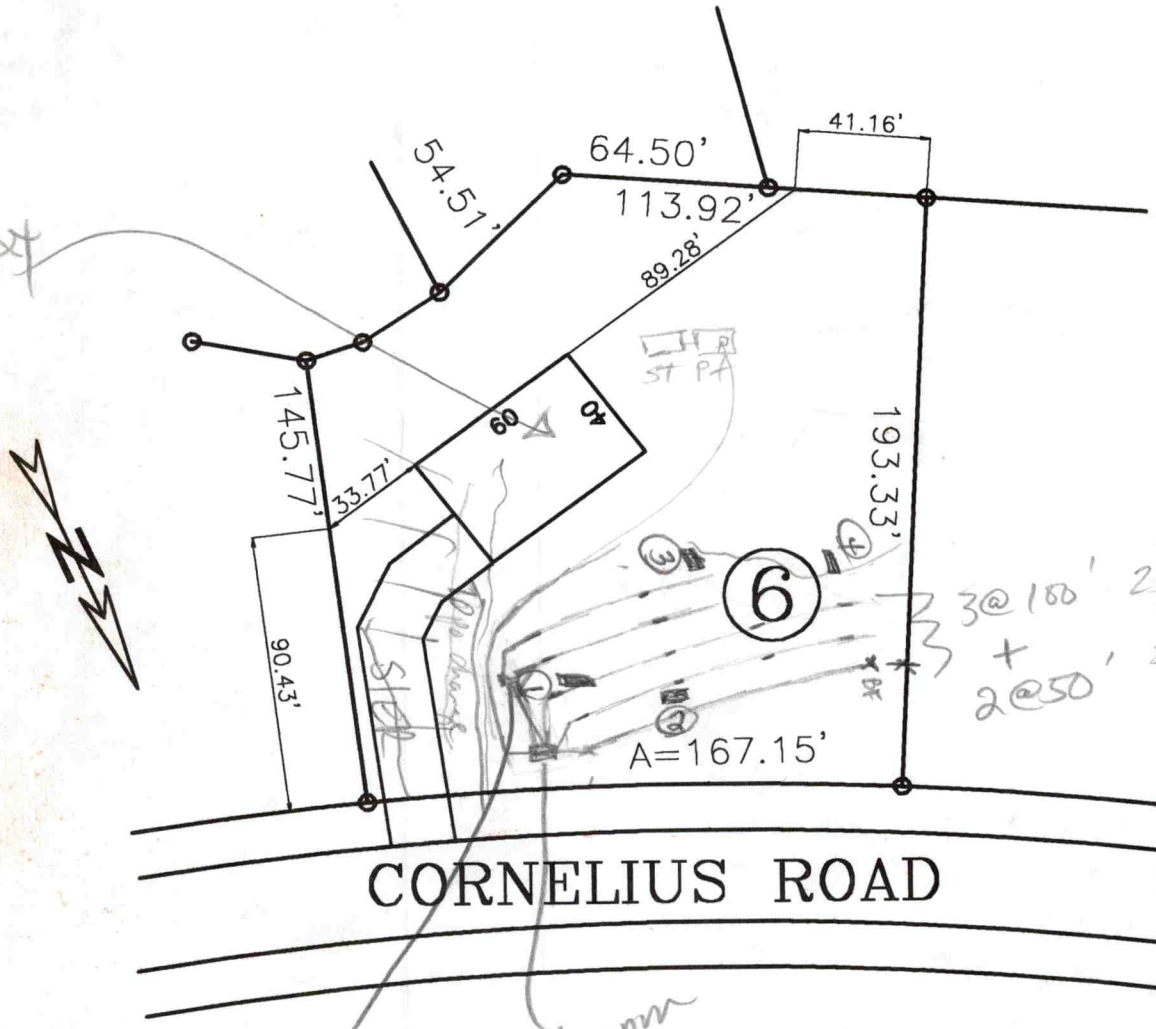
I understand that this permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system. Improvement Permit with plat valid without expiration. Improvement 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: Mark R Hinson, RS date 5-1-98 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



LOT #6
HARBOR LANDING

DAVIDSON TOWNSHIP
FEBRUARY 18, 1998

IREDELL COUNTY, NC
SCALE: 1" = 60'

ON-SITE WASTEWATER SECTION

COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Stumpy Creek LLC APPLICANT: _____

ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: 3-4-98

PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____

LOCATION OF SITE: Lot 6 Taylor Landing PROPERTY RECORDED: _____

WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____

EVALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut

TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

Need more pits farther downslope and near S/6 pt

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 2-6%	0-5	sa b brn c sp sexp/mixed fi						PS .25 @ < 39"
		5-23	sa b brn c/cl fr sp-ss sp sexp						
		23-39	wk f sa b brn cl fi sp sexp/mixed						
			few relic mottles						
2	L 2-6%	0-9	sa b brn cl fi						PS .25 @ < 40"
		9-25	sa b brn c fr sp sexp						
		25-40"	wk f sa b/massive brn cl fi ss sp sexp						
			few gry brn relic mottles						
3		0-7	sa b brn cl						PS .25 @ < 42"
		7-42	sa b brn/gry cl						
			few gry brn mottles						
			reduced colors more w/ depth						
			lighter colors in trench bottom						
4		0-8	sa b brn cl						(.1 LAP) depth
		8-25	sa b brn c						
		25-43	wk massive brn c vfi s-vs, p-vp mixed						
			ind gravelly rock						

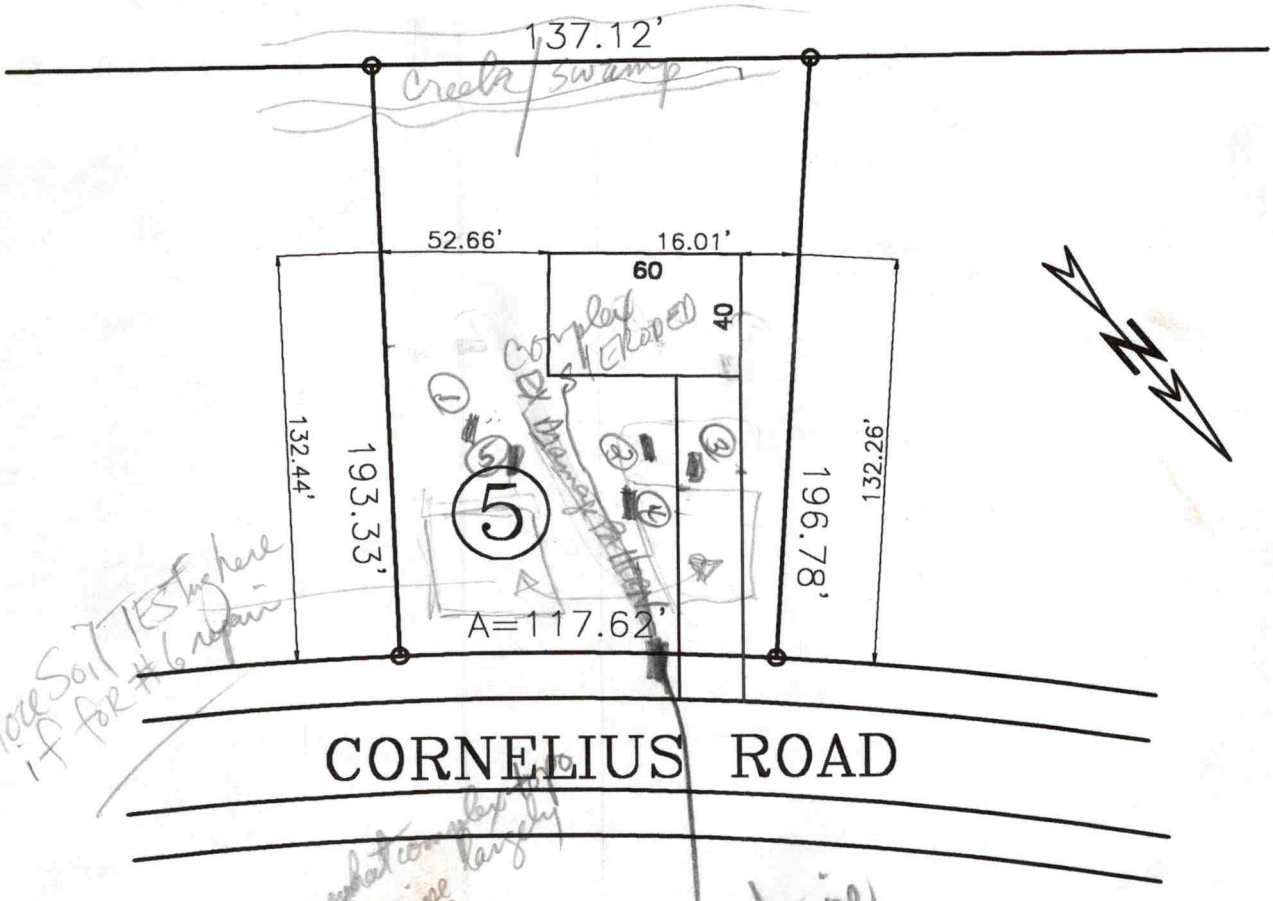
DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): _____

SITE CLASSIFICATION (.1948): _____

EVALUATED BY: _____

OTHER(S) PRESENT: _____



LOT #5
HARBOR LANDING

DAVIDSON TOWNSHIP
FEBRUARY 18, 1998

IREDELL COUNTY, NC
SCALE: 1" = 60'

ON-SITE WASTEWATER SECTION

COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Stumpy Creek LLC APPLICANT: _____

ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: 3-4-98

PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____

LOCATION OF SITE: lot 5 Harbor Landing PROPERTY RECORDED: _____

WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____

EVALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut Need pits upslope

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		0-7	brn cl	fr	23"+	4			4
		7-23	SAB R brn c/cl	fr sp sey/p					
		23-45	stress-mainey brn gleyed cl	fr sp mica	4				
2		0-20	SAB brn cl	fr sssp sey/p	36"+				PS .25 @ 36"
		20-36	SAB R brn c/cl	fr sp sssp sey/p					
		36-48	granite rock & rbrn cl						
			few relic mottles, few dk mottles						
3		0-7	brn cl						
		7-24	SAB R brn c/cl	fr sp sey/p	24"+ 4	4			4
		24-43	stress mainey brn c sp mica						
			numerous y-brn mottles, few dk mottles						
4		0-40	SAB R brn c/cl	fr sp sey/p					PS .25 @ 40"

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

OTHER FACTORS (.1946): _____

SITE CLASSIFICATION (.1948): _____

EVALUATED BY: _____ .175 LPP

OTHER(S) PRESENT: _____

#5 0-10 SAB brn sand cl

10-26 SAB R brn, R cl fr sssp sey/p, 26-38 - NK SAB stress p brn c/cL few dk mottles 30"+ numerous y-brn mottles, incl granite rock 4

ON-SITE WASTEWATER SECTION COUNTY:

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: _____ APPLICANT: _____

ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: 3-5-98

PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____

LOCATION OF SITE: Lot 2 continued 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 LAND SCAPE 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
S1 X		0-40	SAbR, a-brn c/L fr sp-ss psosp few y brn mottles near pit bottom						Bs 13 @ L409
6/2									
7/3									
8/4									

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

OTHER FACTORS (.1946): _____

SITE CLASSIFICATION (.1948): _____

EVALUATED BY: _____

OTHER(S) PRESENT: _____

ON-SITE WASTEWATER SECTION

COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: _____ APPLICANT: _____

ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: 3-5-98

PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____

LOCATION OF SITE: lot 2 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	1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS 1942 SOIL WETNESS/ COLOR	1943 SOIL DEPTH	1956 SAPRO CLASS	1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	L 10-12%	0-5	brn cL	fr					PS .3 @ ≤ 40"
		5-40	SAB RC/cL	fr-fi sp sss ps exp					
2	L 10-12%	0-7	gr brn sL	fr					PS .3 @ ≤ 40"
		7-17	gr-wksab RBRN sL/cL	fr sss ps exp					
		17-30	SAB R c/cL	fr sp s exp					
		30-40	wksab R cL	fi sss ps exp					
3		0-6	gr brn sL	fr					PS .3 @ ≤ 42"
		6-42	SAB RC/cL few y-brn mottles	fr-fi sp sss ps exp					
4		0-41	m-wksab RBRN cL/fr	sss ps exp					PS .3 @ ≤ 41"

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

OTHER FACTORS (.1946): _____

SITE CLASSIFICATION (.1948): _____

EVALUATED BY: _____

OTHER(S) PRESENT: _____