IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 223497

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

PIN # 4639319242

APPLICANT: Lakemist Homes APPLICANT ADDRESS: 132 Marketplace Ave Mooresville, NC 28117

SITE ADDRESS: 324 Kenway Lp. Mooresville, NC PHONE: ALT. PHONE: 704-746-7515

SITE DIRECTIONS: Hwy 150 TR Perth Rd TL Fern Hill TL Kenway Lp on right

SUBDIVISION: Wood leaf SECTION: — LOT # 54 LOT AREA: 1.987 Ac DESIGN FLOW: 480gpd L.T.A.R.: .25

Septic Tank	1000	(gal)	STB	760	Date	11-2-16	☒ New System	☐ Repair	☐ Expansion	System Type: I II III (IV) V VI	☒ Residence	No. Bedrooms	4	Water Supply	
Pump Tank	1000	(gal)	PT	363	Date	12-12-16	System Description:	LPPPBPS			☐ Business	No. Persons		☒ Private	
Pump Make	Goulds		Model	WE05IITH	Serial #	1/2 HP	Repair System Description:	LPPPBPS			☐ Other	No. Employees		☐ Public	
# Nitrification Fields	1		# Lines	5	Linear Ft:	320ft	Maintenance Agreement Required:	☒ YES	☐ NO		☐ Slab	☒ Crawl Space		☐ Community	
Trench Width	min 24"		Max. Trench Bottom Depth	36" high side	Gravel Depth	N/A		☐ GRAVITY	☒ PRESSURE		☐ Basement w/ plumbing		☐ Basement w/o plumbing		

Comments / Conditions:

3/7/17 Checked tanks, drainlines & supply line

INITIAL SITE SKETCH

See attached, approved plan by Penninger Soil Consulting, PLLC (dated 12/7/16)

AS BUILT SKETCH

6/16/17: 2' of head set on each of the 5 lines. 5.5" feather on the on/off float delivering ≥ 170 gallons/dose. Mastic/tar needed + installed in control box. Separate circuits for alarm/pump (inside house) OK

	Date	Initials
Drain Lines Checked	3/7/17	MD
Tanks Checked	3/7/17	MD
Pressure Manifold or Valve Box Checked	3/7/17	MD
Pressure Head Set	6/16/17	SH
Electrical Checked	6/16/17	SH
Floats Set	6/16/17	SH
Alarm Checked	6/16/17	SH
Maintenance Contract (Y) N		
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**

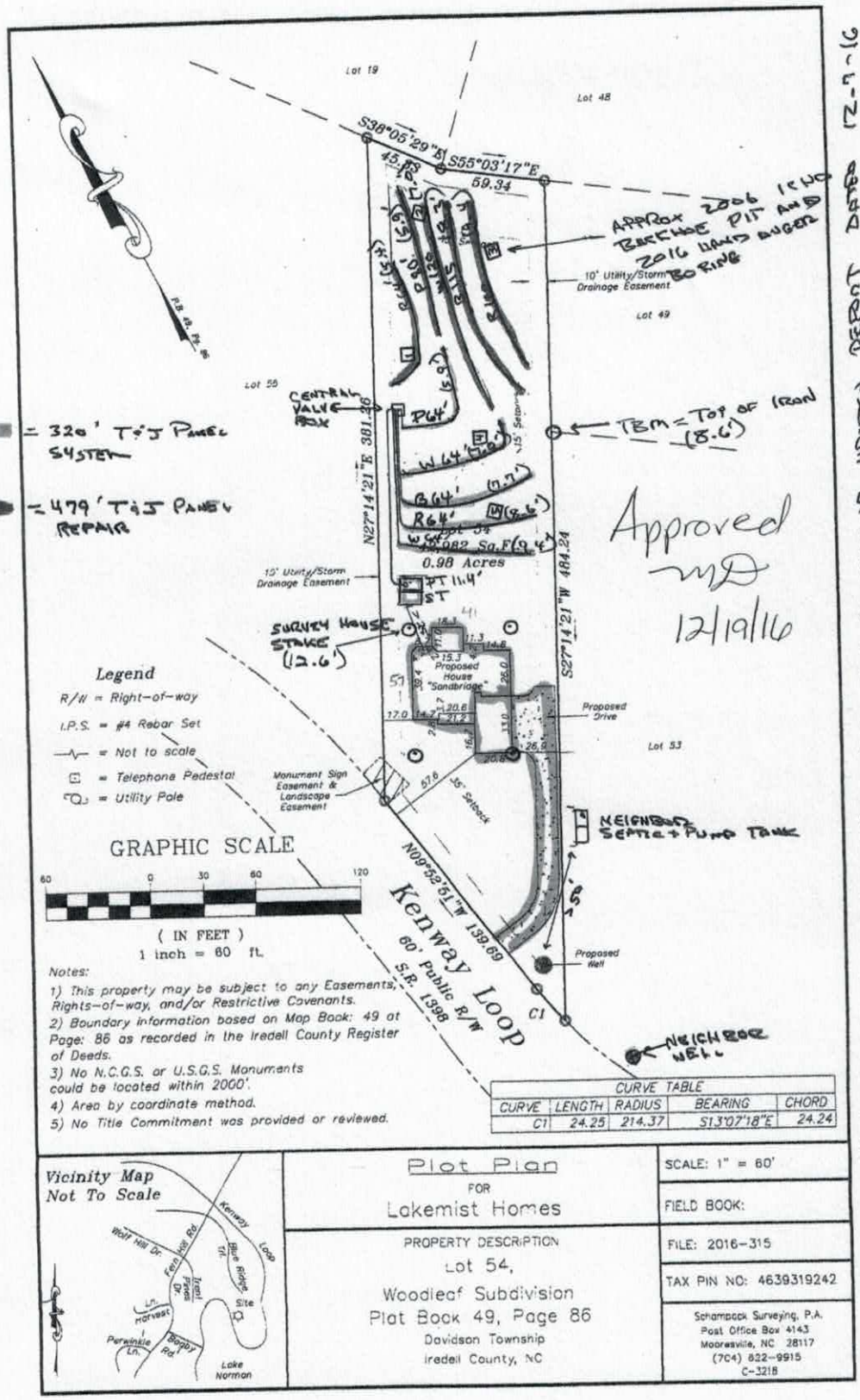
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Date: 12/2/16 Installed by: Gunter Grading

IMPROVEMENT PERMIT by: Maria Dotson Date: 12/19/16 OPERATION PERMIT by: Maria Dotson Date: 6/21/17

AUTHORIZATION TO CONSTRUCT by: Maria Dotson Date: 12/20/16 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK



* SITE PLAN MUST ACCOMPANY PERMIT FOR SOIL CONSULTING WRITTEN REPORT DATED 12-7-16

Approved
MD
12/19/16

LAKEMIST HOMES SEPTIC SITE PLAN
12-7-16

Approved
12/19/16

Lakemist Homes - Lot 54 Woodleaf Expedited Review Proposal (pg 1 of 2)
December 7, 2016

Number of Bedrooms	4
Basement or Crawl	**basement/slab garage**
Design Flow (gpd)	480
Primary System LTAR (gpd/sqft)	0.25
Primary System Type	**LP PPBPS - T&J Panel Block**
No. Lines	5 (see attached site plan)
Total Linear Feet	320 ft
Trench Width	2' min.
Trench Spacing	8' min.
Trench Depth	36 inch on high side
Pump Required	Yes
Distribution Device	Gate Valve Box w/ LPP Distribution
Maintenance Agreement Required	Yes
Length and Diameter of Supply Pipe	approx. 100' of 2" SCH 40 PVC
Size of laterals	1 1/4" SCH 40 PVC
Flow Rate through the system	37.5 gpm
Elevation head	approx. 15'
Pressure head	3.0'
Friction head	approx. 4'
20% Contingency	4.4'
Total Head	26.4'
Pump Requirements	37.5 gpm @ 27' of head (To be verified by installer and ICHD after final tank placement)
Maximum Dosing Volume	270 gallons max*
Volume of water pumped per dose	Calculated to specific tank by measure or dealer engineering specifications (1 cubic ft. of water equals 7.48 gal.)
Pump Run per dose	approx. 7.2 min.
Check Valve	yes
Siphon Break hole	no
Repair System -	**LP PPBPS - T&J Panel Block**
Total Linear Feet	479' shown - 320' required
Repair LTAR (gpd/sqft)	0.25 with 36 in. trench depth on high side

***Before placement of cap block, one panel on each line near the center of the field should be observed filling to make certain that it does not overflow top chamber into air chambers of panel. If overflow occurs, reduce floats by 25 gallons and reset until no overflow is observed.**

					(ft)				
1	System	white	LPPPBPS	64	9.4	15	15	1 per panel	5/32"
2	System	red	LPPPBPS	64	8.6	15	15	1 per panel	5/32"
3	System	blue	LPPPBPS	64	7.7	15	15	1 per panel	5/32"
4	System	white	LPPPBPS	64	7.0	15	15	1 per panel	5/32"
5	System	pink	LPPPBPS	64	5.9	15	15	1 per panel	5/32"
6	Repair	red	LPPPBPS	64	5.4				
7	Repair	pink	LPPPBPS	80	5.9				
8	Repair	white	LPPPBPS	120	7.0				
9	Repair	blue	LPPPBPS	115	8.3				
10	Repair	red	LPPPBPS	100	9.4				
				Total System: 320'		Total: 75	Total:75 (1 in each panel)		

Tank		1000 gal (2 compartment)		
Pump Tank		1000 gal.		11.4
House		Front L		12.6
TBM		Lot 54 top of Iron on property line		8.6

Notes:

- **Installer and ICHD shall verify all line locations, tank locations, and elevations prior to installation.**
- System is to be installed according to any other ICHD and T&J Panel requirements or policies.
- These specifications are to satisfy the ICHD Expedited Review Checklist and are not intended to represent an Engineered System Design or Permit.
- On similar systems the ICHD has requested the central valve box be located on the upper drainfield line.
- System proposal information must accompany Penninger Soil Consulting, PLLC written report dated 12/7/16.

ICHD
223497

Penninger Soil Consulting, PLLC
Ph: 704-996-6330 Email: pgpenninger@gmail.com

December 7, 2016

Call Paul for site visit

Lakemist Homes
132 Marketplace Ave.
Mooresville, North Carolina 28117

Attention: Mr. Aaron Feldman

Reference: **Technical Assistance with Septic Permitting**
Lot 54 Woodleaf Subdivision
324 Kenway Loop
Iredell County, North Carolina
Project No. 16-160

Dear Mr. Feldman:

Penninger Soil Consulting, PLLC has provided technical assistance to obtain a possible new, 4-bedroom septic system Improvement Permit and Well Permit on the above referenced lot from the Iredell County Health Department (ICHD). The technical assistance was performed in general accordance with our written proposal / letter of authorization dated December 5, 2016.

Lot 54 was permitted for a LPPPBPS (T&J Panel) septic system for the developer on June 9, 2006. This Improvement Permit has expired and is no longer valid. We understand that you now own the lot and want to construct a new home on the lot. You have requested Penninger Soil Consulting, PLLC to assist with obtaining a new Septic Improvement Permit for a proposed 4-bedroom home.

Your surveyor staked the property corners, lot lines, and the proposed house box. Penninger Soil Consulting described five hand auger borings in the proposed septic area and flagged the proposed septic drainfield lines for the proposed 4-bedroom T&J Panel System and Repair. The proposed septic area utilizes the same septic area and a similar house location to that permitted in 2006. The hand auger borings were described at the 5 backhoe pits reviewed by the ICHD in 2006 are approximately shown on the attached site plan.

Once the septic area is permitted, it should be fenced off for protection during home construction. Access to the lot should only be by the existing drive. There shall not be cuts of 2 feet or greater within 15 feet of any part of the permitted septic system. The tanks and drainfield should be located 15 feet from a sideslope foundation drain and 25 feet from a downslope foundation drain. The proposed well must be at least 50 feet from the septic system. The tank locations can be modified as necessary and as the required setbacks allow after house pad grading.

Penninger Soil Consulting, PLLC appreciates the opportunity to provide these services to you. The attached information is not an Improvement Permit or Authorization to Construct, and is only to assist you with the Expedited Review site evaluation. The ICHD may show any changes or modifications they deem necessary to the proposed system on the ICHD Permits or attached site plan. The ICHD must approve each lot and only the ICHD can issue these permits. The ICHD should verify all soil suitability and system specifications, required setbacks, and whether a professional engineer plan is required before permitting and/or septic system installation. Soil evaluations and system layouts are done based on interpretations of the rules governing wastewater treatment and disposal systems and are not guarantees for site approval or future septic system performance.

If you have any questions or require additional information please contact us at your convenience.

Sincerely,

Penninger Soil Consulting, PLLC

Paul G. Penninger, L.S.S.
Soil Scientist



Attachments:

1. ICHD Septic Improvement Permit and Well Application
2. Proposed Site Plan and System Information
3. 2006 ICHD IP

Copy: ICHD

C:\Users\Paul G. Penninger\Documents\2016 Projects\16-160 Lakemist Homes - Lot 54 Woodleaf\Woodleaf Lot 54 FT Summary Letter.doc

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

Sheet 1 of 5
PROPERTY ID #:
COUNTY:

Approved MD 12/19/16

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

OWNER: Lakemist Homes
ADDRESS: 329 Kenny
PROPOSED FACILITY: 4BR PROPOSED DESIGN FLOW (.1949): 480
LOCATION OF SITE: Lot 54 Woodlands

APPLICATION DATE: 12-7-16
DATE EVALUATED: 12-6-16
PROPERTY SIZE: 2.58 ac
PROPERTY RECORDED: Yes

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	L/N ~25%	0-4	WSBK SCL	fr SS/SP	wet br				PS .3
		4-29	SBK/ABK C	fr S/P	wet				
		29-48	SBK CL	fr SS/SC	4-RN	fc	sap	wet	
						48			
2	L ~10%	0-8	WSBK SCL	fr SS/SP	red br				PS .3
		8-28	SBK C	fr S/P	red				
		28-48	SBK CL	fr SS/SC	red/gry-wet	f	SAP		
						48			
3	L ~10%	0-4	WSBK SCL	fr SS/SP	red br				PS .3
		4-24	MSBK C	fr SS/SP	red	f	4-11	light	
		24-48	WSBK CL	fr SS/SC	4-wet	f-c	SAP		
						48			
4	L/N ~10%	0-4	WSBK SCL	fr SS/SP	red br	50			PS .3
		4-27	MSBK/ABK C	fr S/P	red				
		27-50	SBK CL	fr SS/SC	f SAP				
						50			

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	T/S	T/S
Site LTAR	.3	.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: PGP
OTHER(S) PRESENT: must be reviewed and approved by ICAO

COMMENTS: 1- System Designed at 0.25 AC (~ 2nd ICA
2- must Accompany Permit; Soil Cor Neither

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

Sheet 2 of 2
PROPERTY ID #:
COUNTY:

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

Approved 12/19/14 mo

OWNER: Lakemist Lot 54 Woodlands
APPLICATION DATE
ADDRESS:
DATE EVALUATED: 12-6-14
PROPOSED FACILITY:
PROPOSED DESIGN FLOW (.1949):
PROPERTY SIZE:
LOCATION OF SITE:
PROPERTY RECORDED:

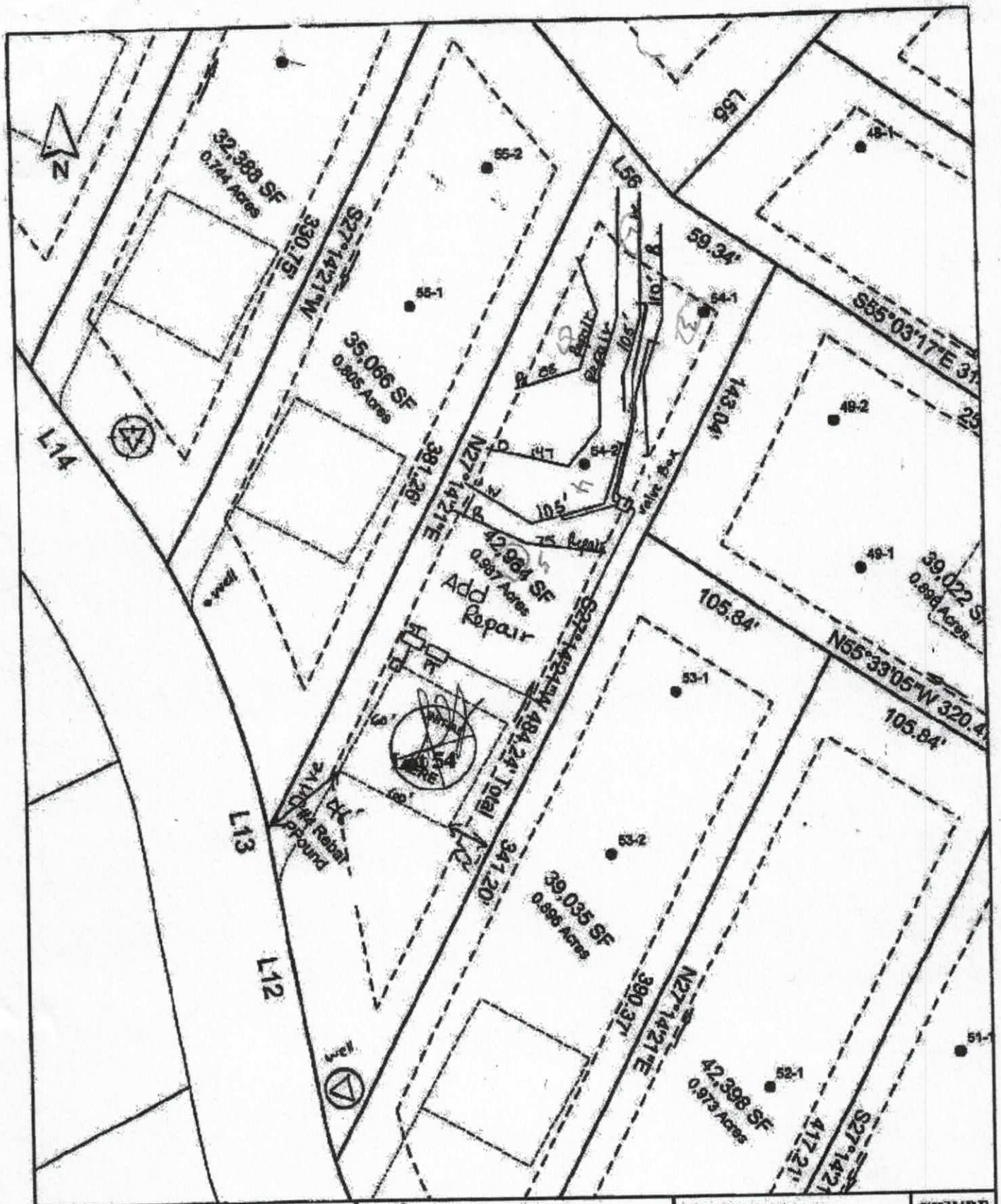
WATER SUPPLY: ☒ Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☒ Auger Boring ☒ Pit ☐ Cut
TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

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	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
S 1	L/N 1-10%	0-2	wsbk sl	fr sf/ss	mhc				PS .2
		2-28	msbk c	fr sl/p - ss/sc	mcl				
		28-48	wsbk cl	fr ss/ss	mcl M	L < SAP			
					0	UR	0	0	
2									
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)	SOB	PR65
Site LTAR		

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: 1
OTHER(S) PRESENT:

COMMENTS:



Scale: 1 inch equals 60 feet	S&ME	Woodleaf - Phase 1	FIGURE 1
Drawn by: JBP	ENVIRONMENTAL SERVICES · ENGINEERING · TESTING	Lot 54	INITIAL HERE
Reviewed by: PGP		Iredell County, NC	
Date: May, 2006		S&ME Project #1588-05-121	

SOIL/SITE EVALUATION
(Continuation Sheet)

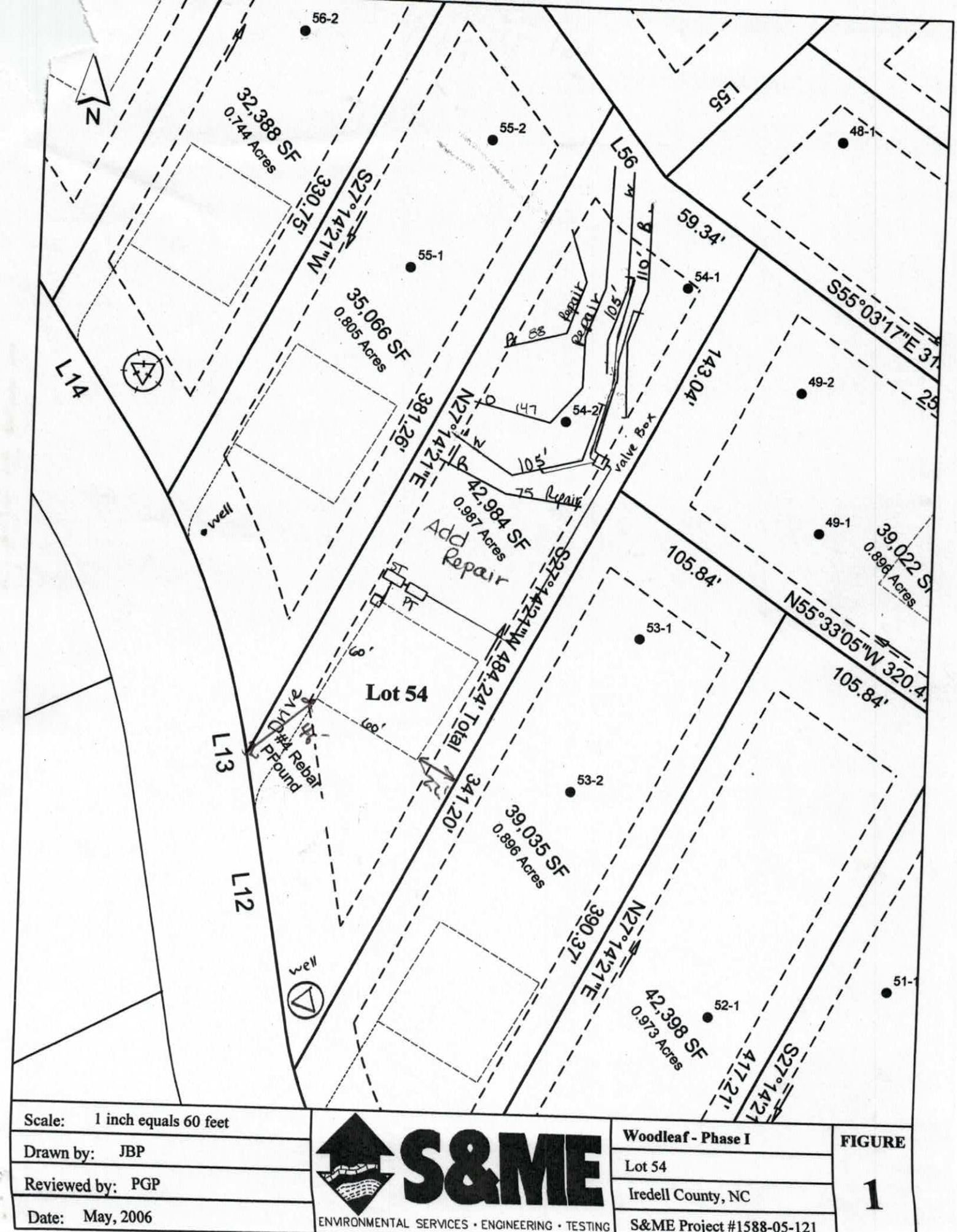
Sheet of

DEPARTMENT OF ENVIRONMENT
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

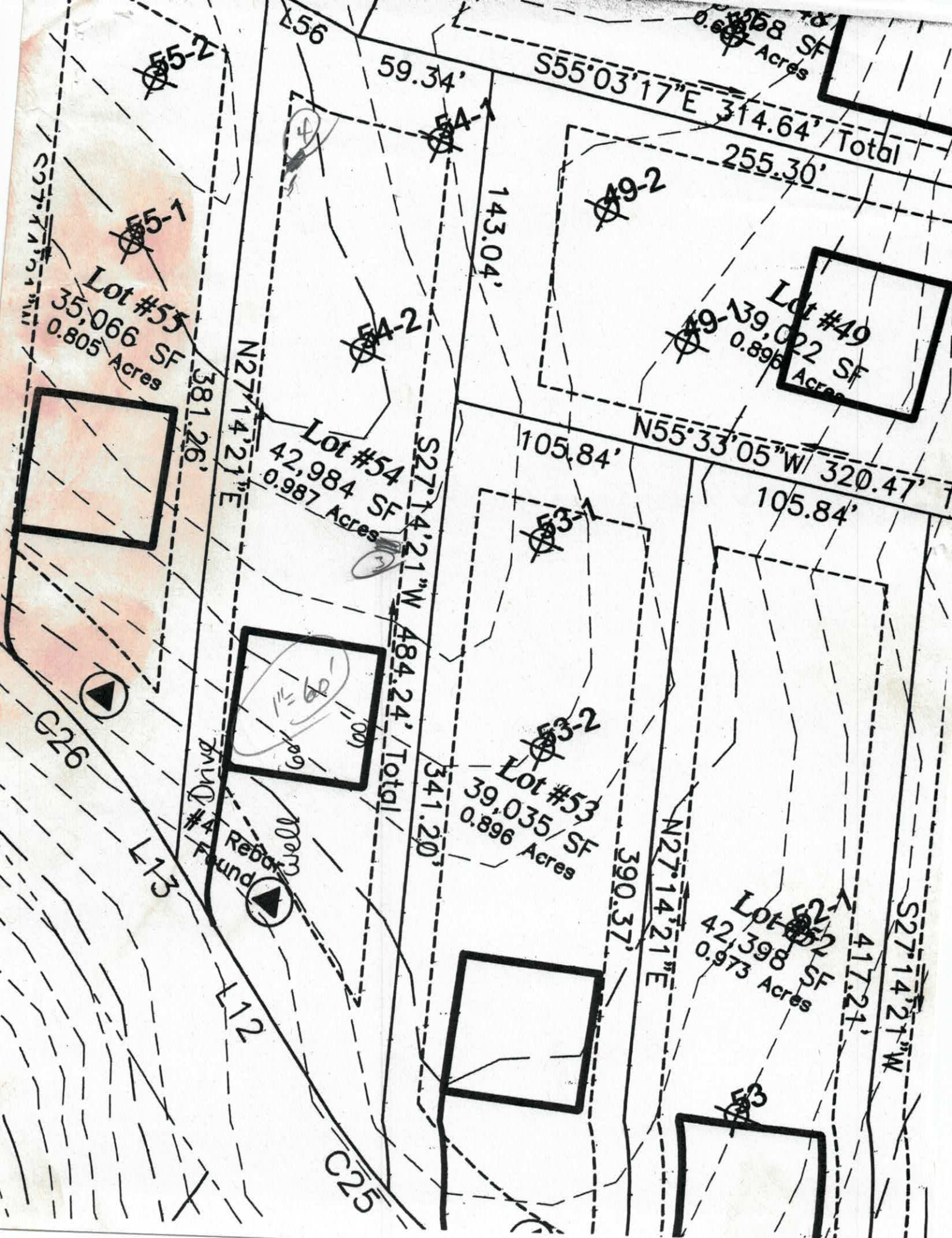
PROPERTY ID NO.: Lot #54
DATE OF EVALUATION:
COUNTY:

PROFILE #	1940 LANDSCAPE POSITION/ SLOPE %	HORIZON ON DEPTH (IN.)	SOIL MORPHOLOGY .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
Pit 1	side slope 3-6%	0-12 A	Wk sbk CL	fr ss sp	light red	—	—	—	0.3
		12-46 Bt	mo sbk c	fr ss sp	red	few sap inc			
		46-58 BC	wk sbk CL	fr ss sp	red	common sap			
pit 2	opposite wall 31-42 common yellow/brown mottles @ root channels.	0-8	Wk sbk - sgr	SL fr ss sp	red (brown)				0.25
		8-18	mo sbk C	fr ss sp	red				
		18-53 BC	mo-wk sbk CL	fr ss sp	red	few to common sap			
3	4% ± S	0-6	wk sbk SiCL	fr ss sp					.3
		6-34	wk sbk-sgr c	fr ss sp	sap				
		34-54	wk sbk CL	fr ss sp	few sap/w worked				
		0-3	gr brk sl	fr					.3
		3-23	wk sbk red c	fr ss sp sap					
		23-50	wk sbk yred	fr ss sp	few sap				

COMMENTS: Eval by Kathleen/Melanie



Scale: 1 inch equals 60 feet	S&ME	Woodleaf - Phase I	FIGURE
Drawn by: JBP		Lot 54	1
Reviewed by: PGP		Iredell County, NC	
Date: May, 2006	ENVIRONMENTAL SERVICES • ENGINEERING • TESTING	S&ME Project #1588-05-121	


L56
59.34'
S55°03'17"E 314.64' Total
255.30'
143.04'
N55°33'05"W 320.47'
105.84'
105.84'
Lot #55
35,066 SF
0.805 Acres
Lot #54
42,984 SF
0.987 Acres
Lot #49
39,022 SF
0.896 Acres
Lot #53
39,035 SF
0.896 Acres
Lot #52
42,398 SF
0.973 Acres
381.26'
N27°14'21"E
S27°14'21"W 484.24' Total
341.20'
390.37'
N27°14'21"E
417.21'
S27°14'21"W
C26
L13
L12
C25
Rebar
Found

IREDELL COUNTY HEALTH DEPARTMENT

RECEIVED DEC 7 - 2016

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

Application For:

- (X) Septic Improvement Permit
- (X) New Well Permit
- (X) Authorization to Construct
- ( ) Well Repair Permit
- ( ) Existing System Inspection
- ( ) Well Abandonment
- ( ) Septic System Repai

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:

Place an (X) beside whichever is submitted if applicable

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

Applicant Information:

Applicant Name: Lakemist Homes/ Lakeshore Holdings **Address:** 132 Marketplace Ave, Mooresville, NC 28117 lakemisthomes@yahoo.com **Phone:** 704-746-7515

Owner Name: same as above **Address:** same - Aaron Feldman Owner/Applicant contact **Phone:**

Property Information:

Street Address: 324 Kenway Loop

Subdivision Name: Woodleaf **Section/Phase:** _____ **Lot Number:** 54

Driving Directions: Perth Rd, TL Fern Hill, TL Kenway, at 324 Kenway Loop across from Lake Norman

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

- (X) New Single Family Residence
- ( ) New Multi-Family Residence
- ( ) Accessory Building
- ( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 8

- ( ) Swimming Pool
- ( ) Other Addition/Structure: _____

Garage

- (X) Crawl Space Foundation
- (X) Concrete Slab Foundation
- ( ) Basement with Plumbing
- ( ) Basement without Plumbing

Non-Residential Site Development:

Type of Business: _____
Square Footage of Building: _____
Maximum Number of Employee: _____
Maximum Number of Seats/Beds/Other: _____

Water Supply:

(X) 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: 1 & 1 Trench

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: _____ 12-7-16

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

Public Health
Iredell County Health Department

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public Health
Iredell County Health Department

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

Applications for permits require the "signature of the owner or owner's legal representative" (15A NCAC 18A .1937). If the owner does not sign the application himself or herself, they can submit any one of the following documents to designate their legal representative:

Power of Attorney; Real Estate Contract; Estate executor; Bankruptcy trustee; Court ordered guardianship

In the absence of the above documentation, the property owner may provide the local health department with documentation that designates a legal representative. A property owner may:

Complete this form to document his or her legal representative, or provide his or her own form that contains the information in this form.

If there are multiple property owners, then all property owners must sign the form that designates a legal representative.

By signing a form that designates a legal representative for purposes of 15A NCAC 18A .1937, the property owner authorizes that representative to act on their behalf in matters pertaining to the application and permitting process, including signing or receiving any application, document or permit. The owner retains full responsibility to meet all permit conditions specified by the local health department.

I, Lakeshore Holdings, am the legal owner(s) of the property located at 324 Kenway Loop - Lot 54 Woodleaf, identified as PIN (Parcel Identification Number) 4639319242, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Paul Penninger, Penninger Soil Consulting, 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.

Signature of Owner(s)	Date	Signature of Witness	Date
	12-6-17		12-6-17

Please return this signed form to the appropriate office:

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

Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION:*

SITE PLAN WORKSHEET

SEE THE "SAMPLE SITE PLAN" BELOW. ***INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!***

Place an (X) beside each item as you complete the site plan:

____ Property Line measurements are clearly identified... **____ All proposed structures are indicated...**

SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site

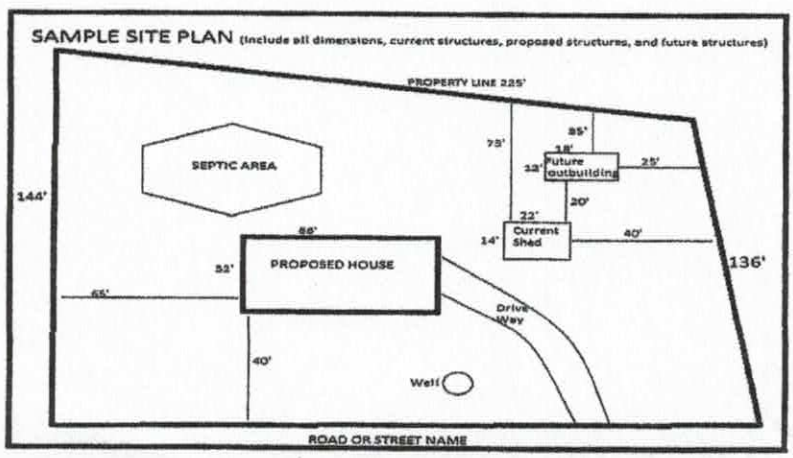
____ Front and side setbacks from property line... **____ Preferred driveway location and configuration, preferred well location...**

____ Area you prefer your septic system to be placed... **____ 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 CK your permits

____ 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

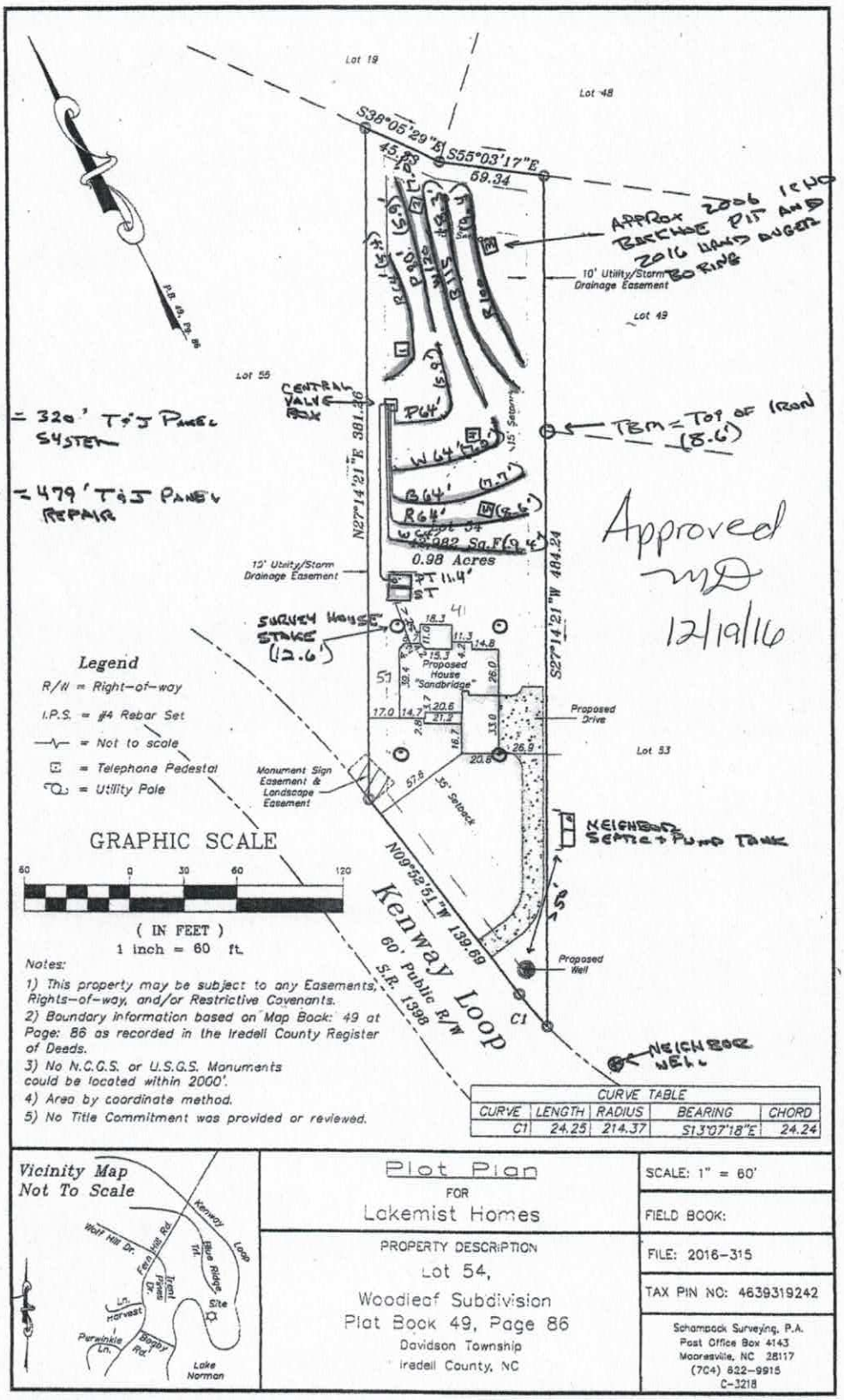
SEE ATTACHED

Signature: _____

REQUIRED **property owner or owner's legal representative signature.**

12-7-12

DATE



= 320' T&J Panel System

= 479' T&J Panel Repair

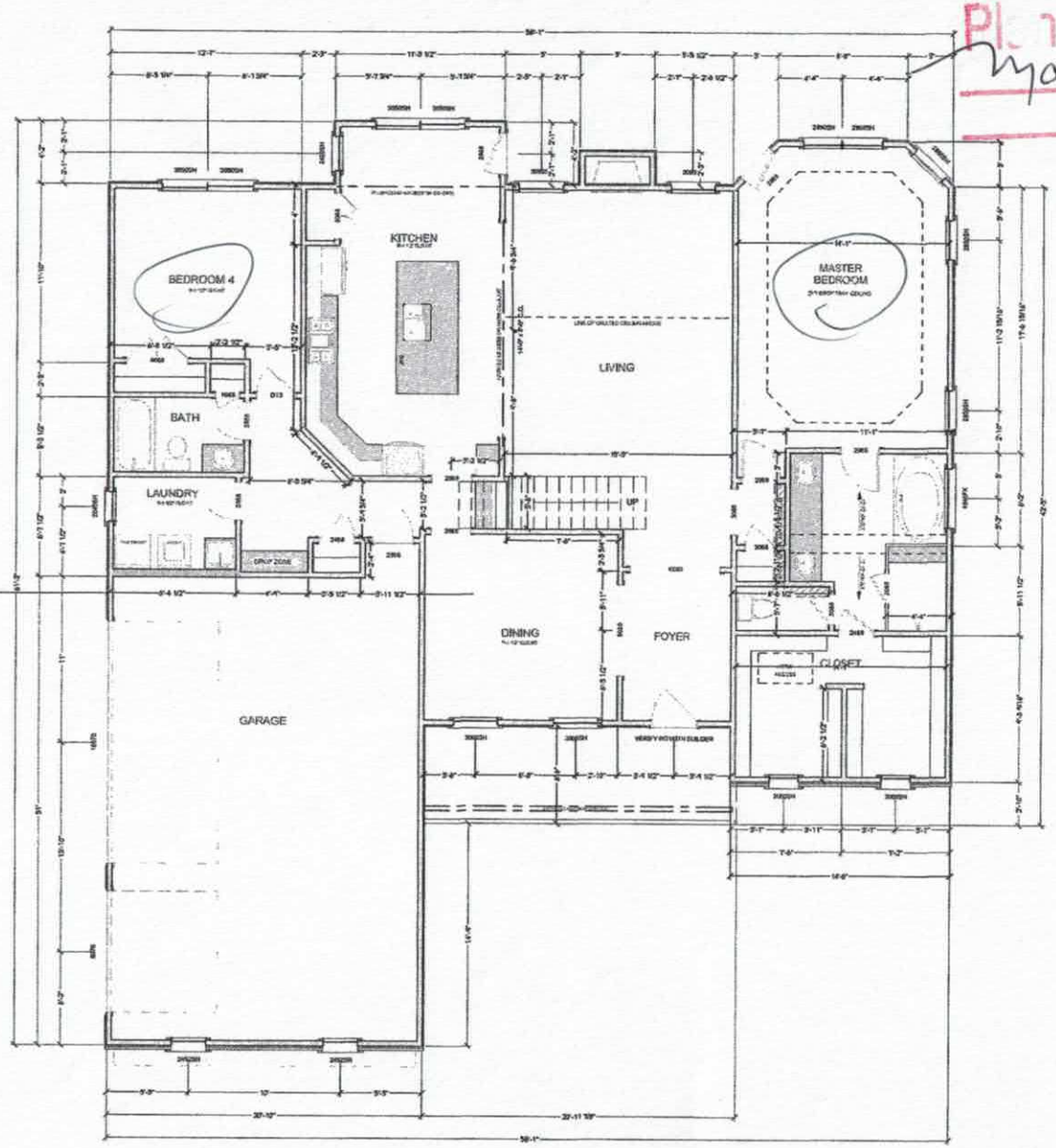
Approved MD 12/19/16

4 SITE PLAN MUST ACCOMPANY PENNINGTON SOIL CONSULTING WRITTEN REPORT DATED 12-7-16

LAKEMIST HOMES SEPTIC SITE PLAN

12-7-16

Acknowledgement Of
Plans Submitted ONLY!
Maiya Olson 12/20/16
Date 12/21/16



FIRST FLOOR PLAN
SCALE 3/16" = 1'0"

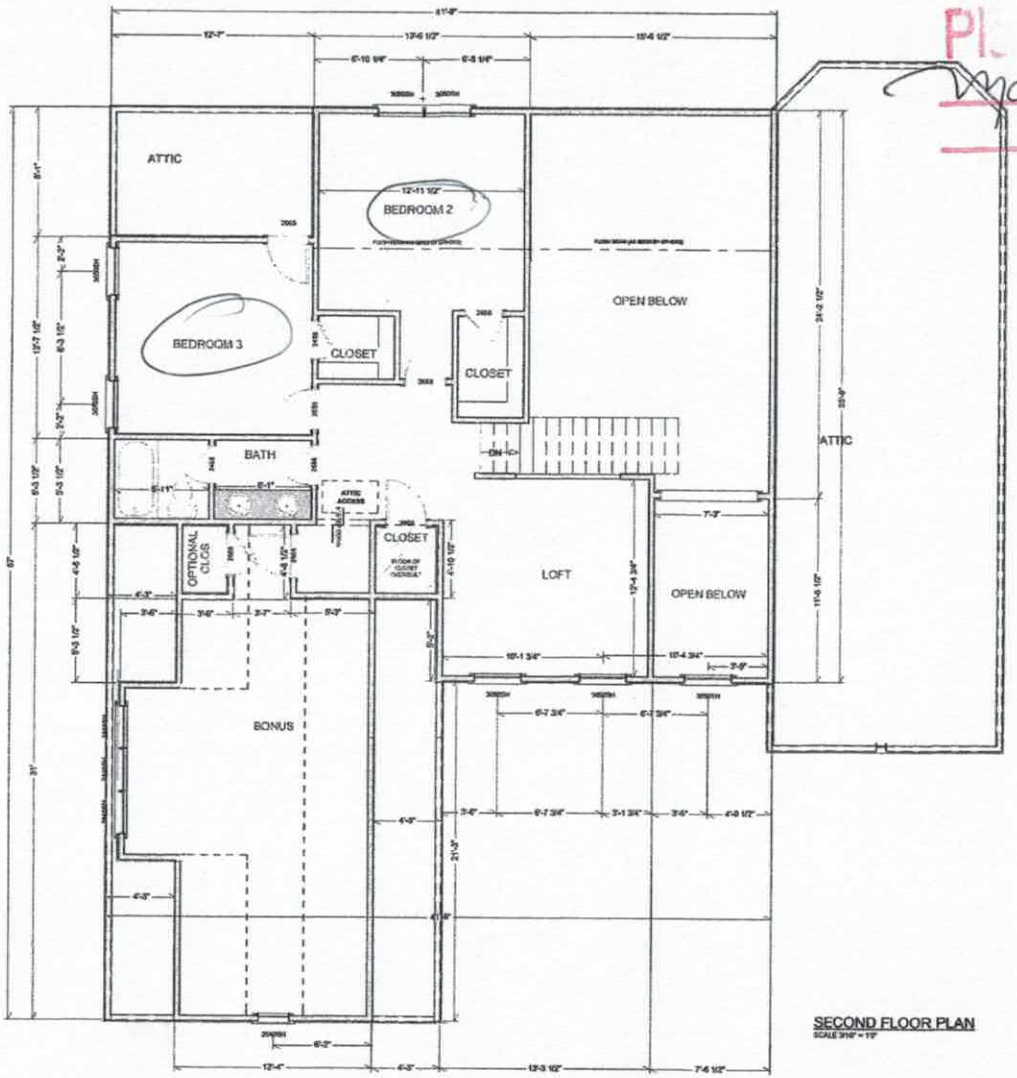
VISUAL DESIGN
VISUAL DESIGN & DRAFTING

LAKEMIST HOMES
Sandbridge 3 car
Reverse

REVISIONS

NOTE:
CONTRACTOR TO VERIFY ALL DIMENSIONS, STRUCTURAL DETAILS, AND BUILDING CODES REQUIREMENTS PRIOR TO CONSTRUCTION.

3



SECOND FLOOR PLAN
SCALE 3/16" = 1'0"

Acknowledgement Of
Plans Submitted ONLY!
Date: 12/20/16
Date: 12/21/16

VISUAL DESIGN & DRAFTING

LAKEMIST HOMES
Sandbridge 3 car
Reverse

REVISIONS

NOTE:
CONTRACTOR TO VERIFY ALL DIMENSIONS, STRUCTURAL DETAILS AND BUILDING CODES REQUIREMENTS PRIOR TO CONSTRUCTION.

4

Pull in closer

Covered porch extends 9'0" max (total 14' out

FOUNDATION PLAN

SCALE: 3/16" = 1'-0"

TYPICAL CRAWL W/ CULTURED STONE VENEER

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

F

REVISIONS

LAKEMIST HOMES

Sandbridge 3 car

Reverse

VISUAL DESIGN

VISUAL DESIGN & DRAFTING

IREDELL COUNTY

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

APPLICATION NUMBER
223497
Issue Date: 12/01/2016

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4639319242.000	324 KENWAY LOOP, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: DREAM WORKS ENTERPRISES INC	Applicant: LAKESHORE HOLDINGS LLC
Address: C/O SANDRA GAUSE 145 BAY SHORE LP MOORESVILLE, NC 28117	Address: P. O. BOX 5350 MOORESVILLE, NC 28117
Phone:	Phone: 704-799-0634

Use Requested	Zone Code
SFD	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.987	35.00	35.00	15.00	15.00	CACL	X

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	87052	TOTAL FEES:	$ 77.25