Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 323945

SEPTIC: IMPROVE... / CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM

PIN # 4639-32-1012

APPLICANT/OWNER: Foundation Homes, LLC
APPLICANT ADDRESS: 438 Williamson Rd, Suite C Mooresville, NC 28117
SITE ADDRESS: 117 Trent Pines Dr., Mooresville NC 28117
PHONE: 704-300-2251
ALT. PHONE
SITE DIRECTIONS: (W) NC 150 → (R) Perth → (L) Fern Hill → (L) Trent Pines → lot on (L)
SAP CONTROLLED: ☐ YES ☒ NO
SUBDIVISION: Woodleaf
SECTION: 2A LOT # 68 LOT AREA: 1.772 ac
DESIGN FLOW: 480 gpd L.T.A.R.: 0.275

Septic Tank	1000 (gal)	STB	760	Date	12-8-22	☒ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI
Pump Tank	1000 (gal)	PT	363	Date	1-12-22	System Description:	25% Reduction - PM
Pump Make	Zoeller	Model	1/2 HP	Serial #	N155-D	Repair System Description:	HPPBPS
# Nitrification Fields	1	# Lines	6	Linear Ft	440'	Maintenance Agreement Required:	☐ YES ☒ NO
Trench Width	36"	Trench Bottom Depth(Low side)	20"	Gravel Depth	N/A		☐ GRAVITY ☒ PRESSURE

☒ Residence No. Bedrooms 4
☐ Business No. Persons 8
☐ Other No. Employees
☐ Slab ☐ Crawl Space
☒ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

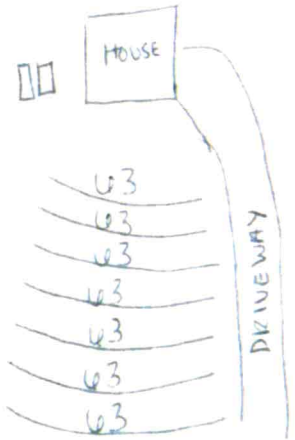
Comments / Conditions: Do not drive, pave, grade, park, or bury utilities in the drainfield area. Divert all drainage from drainfield.

INITIAL SITE SKETCH

See attached site plan & design by Michael Athanas & Associates approved 12/23/21

AS BUILT SKETCH

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 time.



Tanks Lines SH 2/14/23
Connections CW 2/15/23 SL
Pressure Head MW 2/21/23
Alarm MW 2/21/23
Floats MW 2/21/23
Electrical MW 2/21/23

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: Whitney Owens Date: 1/5/22
IMPROVEMENT PERMIT by: D. Wieberg Date: 12/23/21
AUTHORIZATION TO CONSTRUCT by: D. Wieberg Date: 12/23/21

Installed by: Specialty
OPERATION PERMIT by: Date: 2/21/23
Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 323945

SEPTIC: IMPROVEMENT PERMIT / CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM

PIN # 4639-32-1012

APPLICANT/OWNER: Foundation Homes, LLC
APPLICANT ADDRESS: 438 Williamson Rd, Suite C Mooresville, NC 28117
SITE ADDRESS: 117 Trent Pines Dr., Mooresville NC 28117
PHONE: 704-360-2251
ALT. PHONE
SITE DIRECTIONS: (W) NC 150 → (R) Perth → (L) Fern Hill → (L) Trent Pines → lot on (L)
SAP CONTROLLED: ☐ YES ☒ NO
SUBDIVISION: Woodleaf
SECTION: 2A LOT # 68 LOT AREA: 1.772 ac
DESIGN FLOW: 480 gpd L.T.A.R.: 0.275

Septic Tank	1000 (gal)	STB	760	Date	12-8-22	☒ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI
Pump Tank	1000 (gal)	PT	363	Date	12-12-22	System Description:	25% Reduction - PM
Pump Make	Zoeller	Model	7/2 HP	Serial #	N155-D	Repair System Description:	HPPBPS
# Nitrification Fields	1	# Lines	16	Linear Ft	440'	Maintenance Agreement Required:	☐ YES ☒ NO
Trench Width	36"	Trench Bottom Depth(Low side)	20"	Gravel Depth	N/A		☐ GRAVITY ☒ PRESSURE

☒ Residence No. Bedrooms 4
☐ Business No. Persons 8
☐ Other No. Employees
☐ Slab ☐ Crawl Space
☒ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

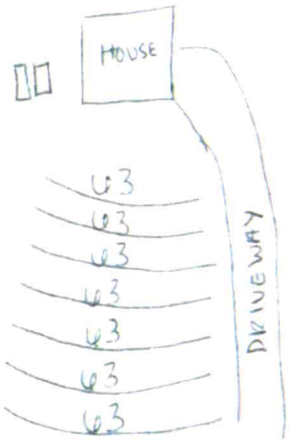
Comments / Conditions: Do not drive, pave, grade, park, or bury utilities in the drainfield area. Divert all drainage from drainfield.

INITIAL SITE SKETCH

See attached site plan & design by Michael Athanas & Associates approved 12/23/21

AS BUILT SKETCH

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 time.



Tanks Lines SH 2/14/23
Connections CW 2/15/23 SL
Pressure Head MW 2/21/23
Alarm MW 2/21/23
Floats MW 2/21/23
Electrical MW 2/21/23

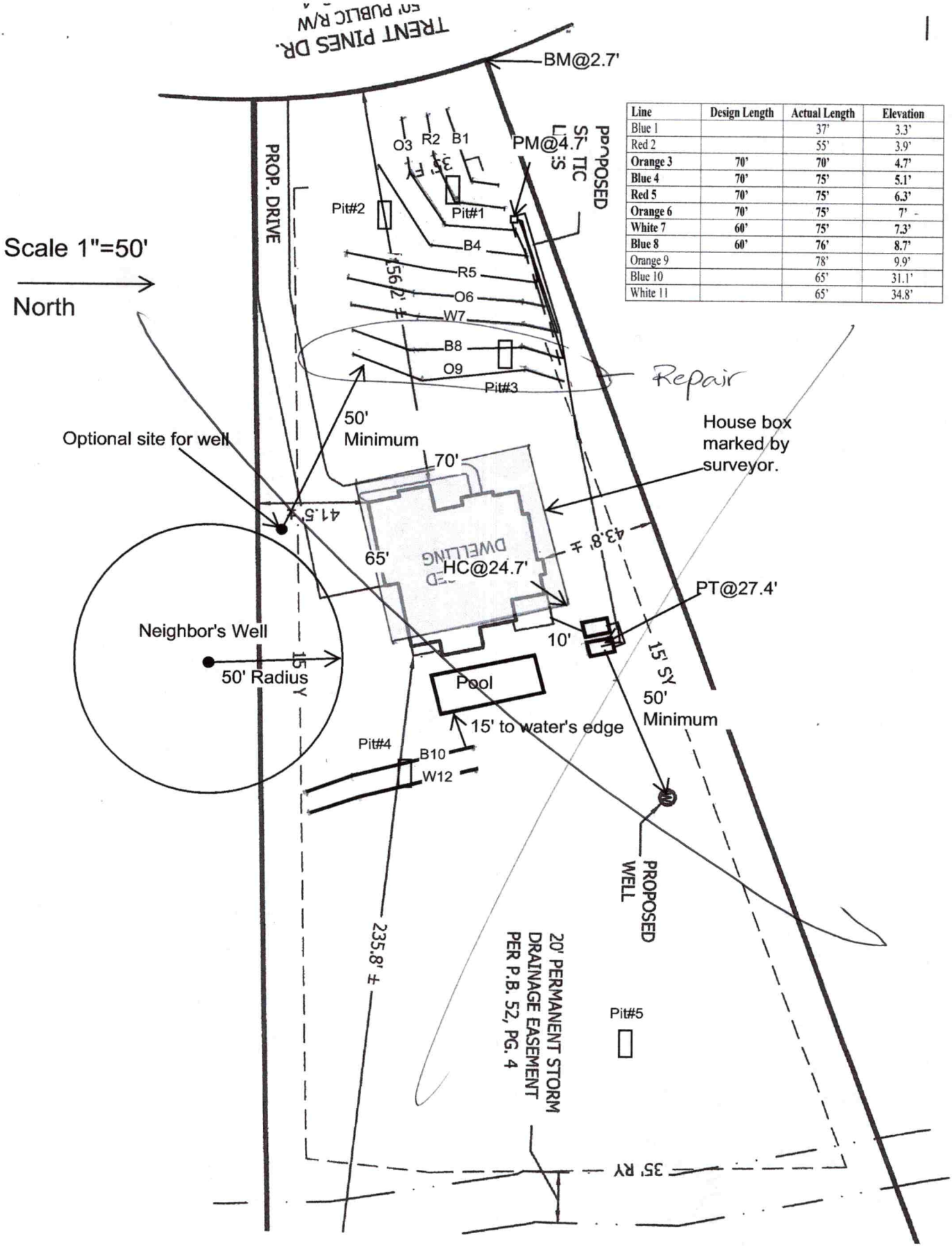
Permit can be suspended or revoked if any false information is supplied toward securing the permit / any unauthorized changes are made to the site / any unauthorized changes are made in the installation of the system. CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

☐ 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: Misty Owens Date: 1/5/22
IMPROVEMENT PERMIT by: D. Mieberg Date: 12/23/21
AUTHORIZATION TO CONSTRUCT by: D. Mieberg Date: 12/23/21

Installed by: Specialty
OPERATION PERMIT by: MW Date: 2/21/23
Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.



Line	Design Length	Actual Length	Elevation
Blue 1		37'	3.3'
Red 2		55'	3.9'
Orange 3	**70'**	**70'**	**4.7'**
Blue 4	**70'**	**75'**	**5.1'**
Red 5	**70'**	**75'**	**6.3'**
Orange 6	**70'**	**75'**	**7'**
White 7	**60'**	**75'**	**7.3'**
Blue 8	**60'**	**76'**	**8.7'**
Orange 9		78'	9.9'
Blue 10		65'	31.1'
White 11		65'	34.8'

MA&A
SOIL & ENVIRONMENTAL CONSULTANTS

approved
12/24/21
DW

MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
556 Walden Trail
Weddington, NC 28173
(704) 576-3887

Reference: Data Sheet for 117 Trent Pines Road; Lot 68 Woodleaf Subdivision
PID# 4639321012.000;
Iredell County, NC

Building Footprint: 65' x 70'
Building Setback: 35' Front; 15' Sides and 35' Rear
Water Source: Private Well
Number of Bedrooms: 4/480 GPD House
Proposed LTAR: 0.275 gpd/ft2
Suggested Initial System Type: 25% Reduction
Repair System LTAR: 0.275 gpd/ft2
Repair System Type: PPBPS; Horizontal
Distribution: Pressure Manifold
Flow per Tap: 3 @ ½" SCH 40 w/ 7.11 GPM (O3+B4, R5+O6 and W7+B8)
Tap Size and Material: 3 @ ½" SCH 40
System Flow: 23.33 GPM
Dosing Volume: 192.50 Gallons per dose
Pump Run Time: 8.25 minutes **- maximum**
Elevation Head: 27.7'
Friction Head: 2.24'
Pressure Head: 2'
Total Dynamic Head: 31.94'
Supply Line Length: 170'
Septic/Pump tank size: 1000 gallon septic tank and 1000 gallon pump tank
Trench Bottom: 20"

Line	Design Length	Actual Length	Elevation
Blue 1		37'	3.3'
Red 2		55'	3.9'
Orange 3	**70'**	**70'**	**4.7'**
Blue 4	**75'**	**75'**	**5.1'**
Red 5	**75'**	**75'**	**6.3'**
Orange 6	**75'**	**75'**	**7'**
White 7	**75'**	**75'**	**7.3'**
Blue 8	**70'**	**76'**	**8.7'**
Orange 9		78'	9.9'
Blue 10		65'	31.1'
White 11		65'	34.8'

approved
12/24/21
DW

Initial System: 440' 25% Reduction **Repair System:** 300' PPBPS
Pump Tank: 27.4' **Bench Mark:** 2.7' See Site Plan **House Corner:** 24.7' **Pressure Manifold:** 4.7'

Comments: The purpose of the evaluation is to permit this site for a 4 bedroom residence.

- MA&A is proposing to use a 25% Reduction system with a trench bottom of 20".
- MA&A is proposing that O3 and B4 be fed from the same tap. R5 and O6 should also be fed from the same tap. 4 total taps should be utilized. See above for tap specifications.
- A second alternative well site has been shown on the site plan.
- **All utilities should be installed outside of the septic area. Failure to do so will result in the permit being revoked.**
- **A fence should be constructed and maintained around the septic area to keep vehicular traffic off of the site. Failure to do so will result in the permit being revoked.**
- The proposed pool should be kept 15' from all parts of the system including the repair area.
- The proposed house has been marked by the surveyor.

DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES
ON-SITE WASTEWATER SECTION

117 Trent Pines Road.; Lot 68 Woodleaf; PIN 4639321012.000
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Foundation Homes APPLICATION DATE: _____
ADDRESS: 438 Williamson Road Mooresville, NC 28117 DATE EVALUATED: 11/2021
PROPOSED FACILITY: 4-Bedroom Residence PROPOSED DESIGN FLOW (.1949): 480 GPD PROPERTY SIZE: 1.77 Acres
LOCATION OF SITE: 117 Trent Pines Road Mooresville, NC 28117 PROPERTY RECORDED: 5/23/2007
WATER SUPPLY: ☐ Private ☐ Public Ξ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☐Auger Boring X Pit ☐ Cut TYPE OF WASTEWATER: Ξ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
Pit 1	L 8-9%	0"-22"	R C SBK	SS SP FR SEXP	Sap @ 41"	~~53~~ 41"	L/SL Few to common saprolite inclusions 22"-53".		0.3
		22"-~~58~~" 41	R CL WSBK C/L	SS SP FR SEXP					
		41-53	SAP - L/SL - M						
Pit 2	L 8-9%	0"-24"	R C SBK	SS SP FR SEXP		59"	Few to common saprolite inclusions 24"-59"		0.3
		24"-~~59~~"45"	R CL WSBK	SS SP FR SEXP					
		45-59	R-L-WSBK	SSMP-FR-SEXP					
Pit 3	L 8-9%	0"-8"	RBr CL WSBK	SS SP FR SEXP	few YB to 35"	62"	Few to common saprolite inclusions 35"-62"		~~0.3~~ 0.275
		8"-35"	R C SBK / ABK	SS SP FR SEXP					
		35"-62"	R CL WSBK	SS SP FR SEXP					
Pit 4	L 8-9%	0"-24"	R C SBK	SS SP FR SEXP		~~56~~ 48"	Few to common saprolite inclusions 24"-56"		0.3
		24"-~~56~~"	R CL WSBK	SS SP FR SEXP					
		48-56"	SAP - L/SL - M						
Pit 5	L 8-9%	0"-20"	RBr CL WSBK	SS SP FR SEXP	Chroma 2 at 20"	20"			0.1+ Drip

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	1320 Ft2	900 Ft2
System Type(s)	25% Reduction	PPBPS
Site LTAR	~~0.3~~ 0.275	0.3

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____

EVALUATED BY: Michael Athanas and Associates
OTHER(S) PRESENT: _____

Comments:

DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES
ON-SITE WASTEWATER SECTION

117 Trent Pines Road.; Lot 68 Woodleaf; PIN 4639321012.000
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Foundation Homes APPLICATION DATE: _____
ADDRESS: 438 Williamson Road Mooresville, NC 28117 DATE EVALUATED: 11/2021
PROPOSED FACILITY: 4-Bedroom Residence PROPOSED DESIGN FLOW (.1949): 480 GPD PROPERTY SIZE: 1.77 Acres
LOCATION OF SITE: 117 Trent Pines Road Mooresville, NC 28117 PROPERTY RECORDED: 5/23/2007
WATER SUPPLY: ☐ Private ☐ Public ☒ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☐Auger Boring X 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
Pit 1	L 8-9%	0"-22"	R C SBK	SS SP FR SEXP	Sap @ 41"	53"	Few to common saprolite inclusions 22"-53".		0.3
		22"-53"41	R CL/C WSBK	SS SP FR SEXP					
		41-53	SAP-L/LS M						
Pit 2	L 8-9%	0"-24"	R C SBK	SS SP FR SEXP		59"	Few to common saprolite inclusions 24"-59"		0.3
		24"-59"45	R CL WSBK	SS SP FR SEXP					
		45-59	R L WSBK	SSSP-FR-SEXP					
Pit 3	L 8-9%	0"-8"	RBr CL WSBK	SS SP FR SEXP	2.5Y 4/3 @ 24" YB	62"	Few to common saprolite inclusions 35"-62"		0.3 0.25
		8"-35"	R C SBK/ABK	SS SP FR SEXP					
		35"-62"	R CL WSBK	SS SP FR SEXP					
Pit 4	L 8-9%	0"-24"	R C SBK	SS SP FR SEXP		56"	Few to common saprolite inclusions 24"-56"		0.3
		24"-56"48	R CL WSBK	SS SP FR SEXP					
		48-56	SAP L/LS						
Pit 5	L 8-9%	0"-20"	RBr CL WSBK	SS SP FR SEXP	Chroma 2 at 20"	20"			0.1+ Drip

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	1200 Ft2	900 Ft2
System Type(s)	25% Reduction	PPBPS
Site LTAR	0.3	0.3

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: Michael Athanas and Associates
OTHER(S) PRESENT: _____

Comments:

IREDELL COUNTY HEALTH DEPARTMENT
JANE MURRAY, RN BSN MS
HEALTH DIRECTOR

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

Voluntary Relinquishment of Administrative Appeal Rights
(Completion of Form by Property Owner)

10/26/2021 (Date)

Owner: Foundation Homes Developing, LLC
Address: 438 Williamson Road, Suite C
Mooresville, NC 28117

Subject: Voluntary Relinquishment of Administrative Appeal Rights

(specify Permit ID/owner's name/property location/site legal description):
Lot 68 - Woodleaf
117 Trent Pines Dr Mooresville NC 28117
Parcel No. 4639 32 1012

I, Jonathan Smith, voluntarily relinquish my rights to pursue a formal appeal through the Office of
(print full name)

Administrative Hearings pursuant to NC General Statute 130A-24 and 150B-23 and all other applicable provisions of Chapter 150B for the above referenced permit in order for the authorized agent/local health department to issue the applicable permit (new IP and/or CA) for the site. I understand by completing this form the previous permit issued on _____ for a system
(date)

_____
(system name)

for the site will be "revoked" immediately by the authorized agent/local health department.

_____
Signature of Property Owner

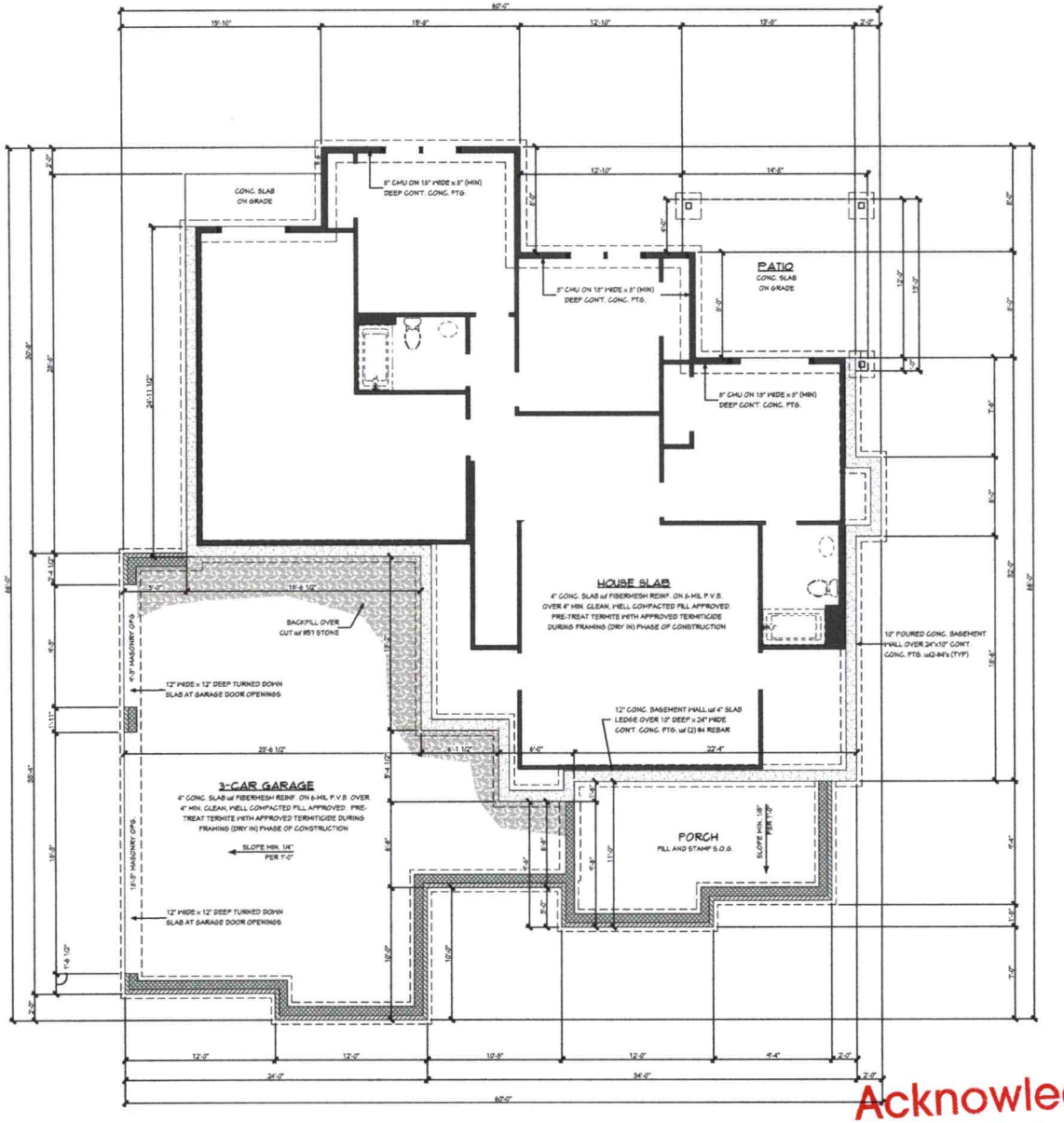
Central Office
318 Turnersburg Hwy
Statesville, NC 28625
704 878-5300

Mooresville Office
610 E. Center Avenue
Mooresville, NC 28115
704 664-5281

Environmental Health
349 N. Center Street
Statesville, NC 28677
704 878-5358

http://www.co.iredell.nc.us/Departments/Health/

Woodleaf lot 68



1 F1.0 FOUNDATION PLAN

SCALE: 1/4" = 1'-0"
WALL HEIGHT: 10'-0" U.N.O.
WINDOW HEADERS: 8'-0" U.N.O.

BASEMENT CONCRETE NOTES

FOUNDATION NOTES:

1. ALL PERIMETER WALL FOOTINGS SHALL BE CONTINUOUS 24"x10" MINIMUM WITH (2) # 4 REBAR, 3000 PSI CONCRETE U.N.O.
2. ALL INTERIOR THICKENED SLABS SHALL BE 10"DX18"W.
3. BASEMENT FOUNDATION WALLS TO BE 10" THICK POURED IN PLACE REINFORCED PER PLAN DETAILS. TOP OF BASEMENT WALL IS NOT TO BE 'STEPPED DOWN' UNLESS UNBALANCED BACKFILL IS LESS THAN 48".
4. "SLAB ON GRADE" SHALL CONSIST OF 4" THICK, 3000 PSI CONCRETE WITH FIBERMESH REINFORCEMENT OR 6X6 W1.4XW1.4 WWF. OVER 4" CLEAN STONE OVER 6 MIL VAPOR BARRIER OVER COMPACTED FILL. IN GARAGES AND DRIVEWAYS INSTALL TOOTHED CONTROL JOINTS NO GREATER THAN 15 FEET IN EACH DIRECTION. ALL SLABS TO HAVE 1/2" EXPANSION JOINT BETWEEN SLAB AND FOUNDATION WALLS.
5. ALL SOILS AND FILL UNDER FLOORS WITHIN AND/OR UNDER BUILDINGS SHALL HAVE PRECONSTRUCTION SOIL TREATMENT FOR PROTECTION AGAINST TERMITES. CERTIFICATION OF COMPLIANCE SHALL BE ISSUED TO THE BUILDING DEPARTMENT BY A LICENSED PEST CONTROL COMPANY.
6. RETAINING WALLS TO BE 10" THICK POURED IN PLACE CONCRETE REINFORCED PER PLAN DETAILS BASED ON RETAINED SOIL HEIGHT.

BASEMENT FRAMING NOTES

BRACED WALL LINE NOTE:

THIS STRUCTURE HAS BEEN ANALYZED FOR LATERAL LOADING USING CONTINUOUSLY SHEATHED WALL SHEATHING AS INDICATED IN THE GENERAL NOTES. WHERE BRACED WALLS DO NOT MEET THE PRESCRIPTIVE REQUIREMENTS OF SECTION R602.10 OF THE CODE, IT HAS BEEN ANALYZED BY ENGINEERING ANALYSIS INCORPORATING ENGINEERED LATERAL BRACING ELEMENTS WHERE NEEDED TO MEET THE INTENT OF THE CODE.

1. RIM BOARDS OR BANDS PARALLEL TO FLOOR FRAMING TO BE DOUBLED.
2. ALL LOAD- BEARING HEADERS SHALL BE (2)2X8 SPF#2 UNLESS OTHERWISE NOTED ON THE PLAN.
3. WHERE DIMENSIONS ARE NOT INDICATED, BEAMS THAT RUN PARALLEL TO FLOOR JOISTS ARE INTENDED TO ALIGN UNDER LOAD BEARING WALLS. SEE THE ARCHITECTURAL PLANS FOR DIMENSIONS TO WALLS.
4. ALL WALLS UP TO 10'-11" TALL SHALL BE 2X4 SPF#2 @ 16" O.C. UNLESS NOTED OTHERWISE ON THE PLAN. TALLER WALLS SHALL COMPLY WITH TABLE R602.3(4) OF THE CODE OR AS NOTED ON THE PLAN.
5. WOOD BEAMS SHALL BE SUPPORTED BY METAL HANGERS OF ADEQUATE CAPACITY WHERE FRAMING INTO BEAMS OR LEDGERS. THE FOLLOWING HANGER SCHEDULE MAY BE USED UNLESS NOTED OTHERWISE ON THE PLAN:

MEMBER SIZE	SIMPSON HANGERS
(2) 2X6	LUS 26-2
(2) 2X10	LUS 210-2
(2) 2X12	LUS 210-2
(2) 1314" X 9 1/4" LVL	HUS 410
(2) 1314" X 11 7/8" LVL	HUS 412
(2) 1314" X 14" LVL	HUS 412
ALL TRIPLE LVLs	HHUS 5.50/10

6. NOTE: FILL ALL OF THE HOLES IN HANGERS WITH 16d x 3 1/2" COMMON NAILS (3 1/2"x 0.162") OR 16d x 2 1/2" (2 1/2"x 0.162") NAILS UNLESS OTHERWISE SPECIFIED BY THE MANUFACTURER. DO NOT BEND OR MODIFY THE HANGER OR USE INAPPROPRIATE FASTENERS. DO NOT USE 10dX 1 1/2" "HANGER NAILS" UNLESS OTHERWISE NOTED ON THE PLANS OR IN SITUATIONS WHERE ONLY 1314" OR LESS OF WOOD IS PROVIDED TO NAIL INTO.
7. "LVL" AND GLU-LAM BEAMS MUST HAVE ENOUGH STUDS TO SUPPORT ALL PLIES AT EACH END WITH A MINIMUM OF (3)-2X6 OR (2)-2X8 STUDS UNDER EACH END UNLESS NOTED OTHERWISE.
8. ALL POINT LOADS FROM ROOF BRACES, JACK STUDS, BEAM SUPPORTS -WHETHER WOOD OR STEEL-CANNOT BEAR ON SHEATHING ALONE. BLOCKING EQUAL TO OR BETTER THAN THE POINT LOAD SUPPORTS ABOVE MUST BE CARRIED THROUGH ALL CONSTRUCTION TO THE FOUNDATION. INSTALL 2X4 SQUASH BLOCKS (S.B.) OF EQUAL NUMBER TO COLUMN ABOVE BETWEEN SUBFLOOR AND FOUNDATION WALL OR LOWER PLATE. RIM BOARDS AND I-JOIST BLOCKING SHALL NOT BE CONSIDERED AS AN ACCEPTABLE MEANS OF SUPPORT UNDER CONCENTRATE POINT LOADS FROM LVL AND STEEL BEAMS OR WHERE "S.B" IS INDICATED ON THE PLAN.
9. FASTEN ALL TRIPLE PLY LVLs TOGETHER WITH TWO ROWS OF 5" LONG TRUSSLOK OR SIMPSON SDS SCREWS @ 16" O.C. AND FOUR PLY LVLs WITH TWO ROWS OF 6314" TRUSSLOK SCREWS @ 16" O.C. UNLESS NOTED OTHERWISE ON THE PLANS. THE SCREWS SHALL BE LOCATED A MINIMUM OF 2" AND A MAXIMUM OF 3" FROM THE TOP OR BOTTOM OF THE BEAM.

FOOTING SCHEDULE

ID	FOOTING SIZE	REINFORCING
1	24"x24"x12" DEEP	3 - #4's EACH DIRECTION
2	30"x30"x12" DEEP	4 - #4's EACH DIRECTION
3	36"x36"x12" DEEP	4 - #4's EACH DIRECTION
4	42"x42"x12" DEEP	5 - #4's EACH DIRECTION
5	48"x48"x12" DEEP	6 - #4's EACH DIRECTION

FOUNDATION NOTES:
1. ALL DIMENSIONS SHALL BE VERIFIED AGAINST ARCHITECTURAL FLOOR PLANS FOR ACCURACY
2. TRANSFER ALL POINT LOADS FROM FIRST AND SECOND FLOOR TO BEAM AND ROOF TRUSS BEARING ABOVE FOUNDATION WITH EQUAL AMOUNT OF STUDS.
3. ALL CONCRETE TO BE A MIN. OF 3,000 PSI U.N.O.
4. SOIL TO HAVE A MIN. OF 2,000 PSF BEARING CAPACITY

Acknowledgement Of
Plans Submittal ONLY!
Date 1/5/22
Date 12/23/21

458 WILLIAMSON ROAD
SUITE C
MOORESVILLE, NC 28117
704-360-2251
FOUNDATIONHOMESLLC.COM

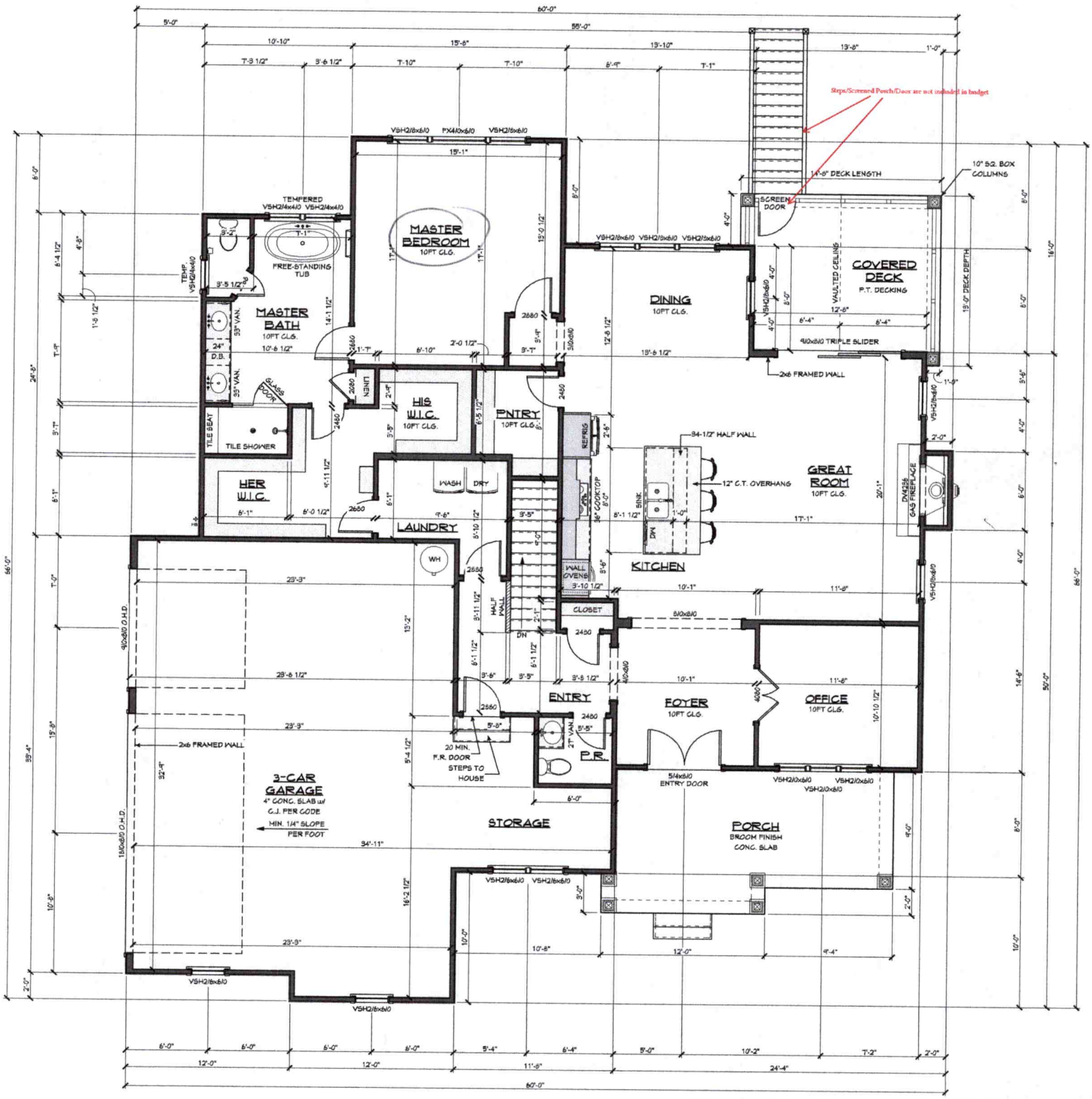
Township/County: TOWNSHIP COUNTY
Engineer:
Stamp/Seal:

Project Name/Owner:
THE CAROLINE
BRISHAM & SHELBY WRIGHT RESIDENCE
117 TRENT PINE DR.
MOORESVILLE, NC 28117

© 2021 copyright notice Foundation Homes Residential. All rights reserved. These plans are the property of Foundation Homes Residential. Any use, reproduction, licensing, or distribution of these drawings is strictly prohibited. This document contains confidential and proprietary information that cannot be reproduced or divulged, in whole or in part, without written authorization from Foundation Homes Residential

Date: 10/21/2021
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: FOUNDATION PLAN
Sheet Number: F1.0
Master Plan Version: v1.3

C:\Users\res\Dropbox (Personal)\FH_CAD FILES\1_CUSTOMER\BRISHAM HOMES\PERSONAL RESIDENCE\PERSONAL RESIDENCE\Drawing Set - plot scale: 1"=1'-0" ; 1/4" = 1'-0" 24"x36" ; 1/8" = 1'-0" plot date: Thursday, October 21, 2021 1:33:33 PM



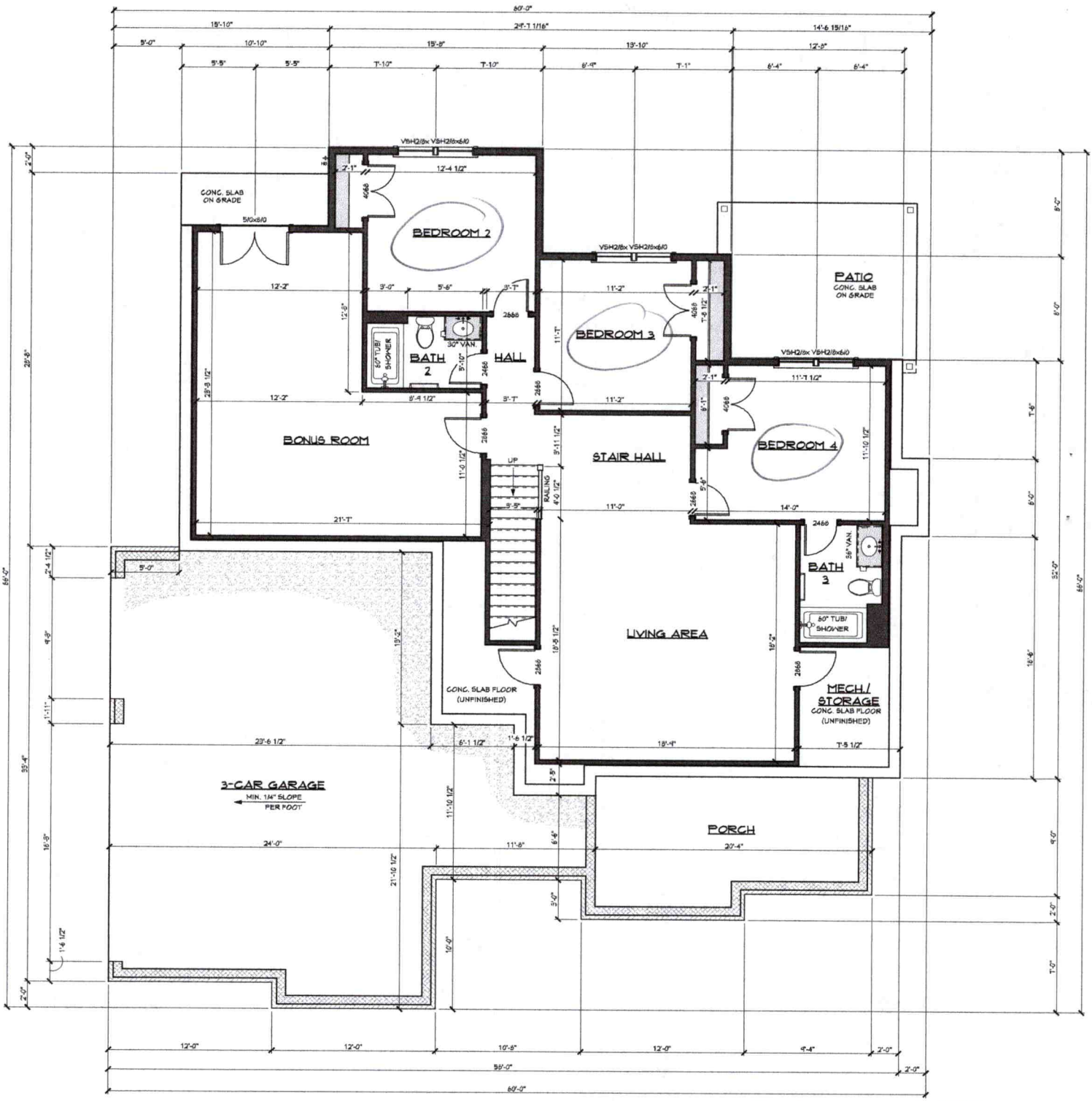
1 A3.0 MAIN LEVEL FLOOR PLAN

SCALE: 1/4" = 1'-0"
WALL HEIGHT: 10'-1 1/8" U.N.O.
WINDOW HEADERS: 8'-0" U.N.O.

Acknowledgement Of Plans Submittal ONLY!

Mitzi Owens Date 1/5/22

Date 1/23/21



1 A2.0 LOWER LEVEL FLOOR PLAN

SCALE: 1/4" = 1'-0"
WALL HEIGHT: 10'-0" U.N.O.
WINDOW HEADERS: 8'-0" U.N.O.

Acknowledgement Of Plans Submittal ONLY!

Date 1/4/22

Date 12/23/21

RECEIVED DEC 15 2021

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

Iredell County Health Department – Environmental Health Division

$350.00

Expedited Review

PAGE 1: *APPLICATION FORM*

AP-323945

Application For: (✓) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) 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

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

Applicant Information: (PRINT CLEARLY)

Applicant Name: Foundation Homes Residential, LLC **Address:** 438 Williamson Road, Suite C, Mooresville NC **Zip:** 28117

Applicant Email: mitzi@foundationhomesIkn.com **Phone:** 704-360-2251 **Alt. Phone:** _____

Owner Name: Foundation Homes Developing LLC **Address:** 438 Williamson Road Ste C Mooresville **Zip:** 28117

Owner Email: _____ **Phone:** 704-360-2251 **Alt. Phone:** _____

Property Information:

Street Address: 117 Trent Pines Dr

Subdivision Name: Woodleaf **Section/Phase:** _____ **Lot Number:** 68

Driving Directions: Perth Rd N, L on Fern Hill, L on Trent Pines

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

CHECK FOUNDATION TYPE

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

( ) 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 ( ) 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: _____

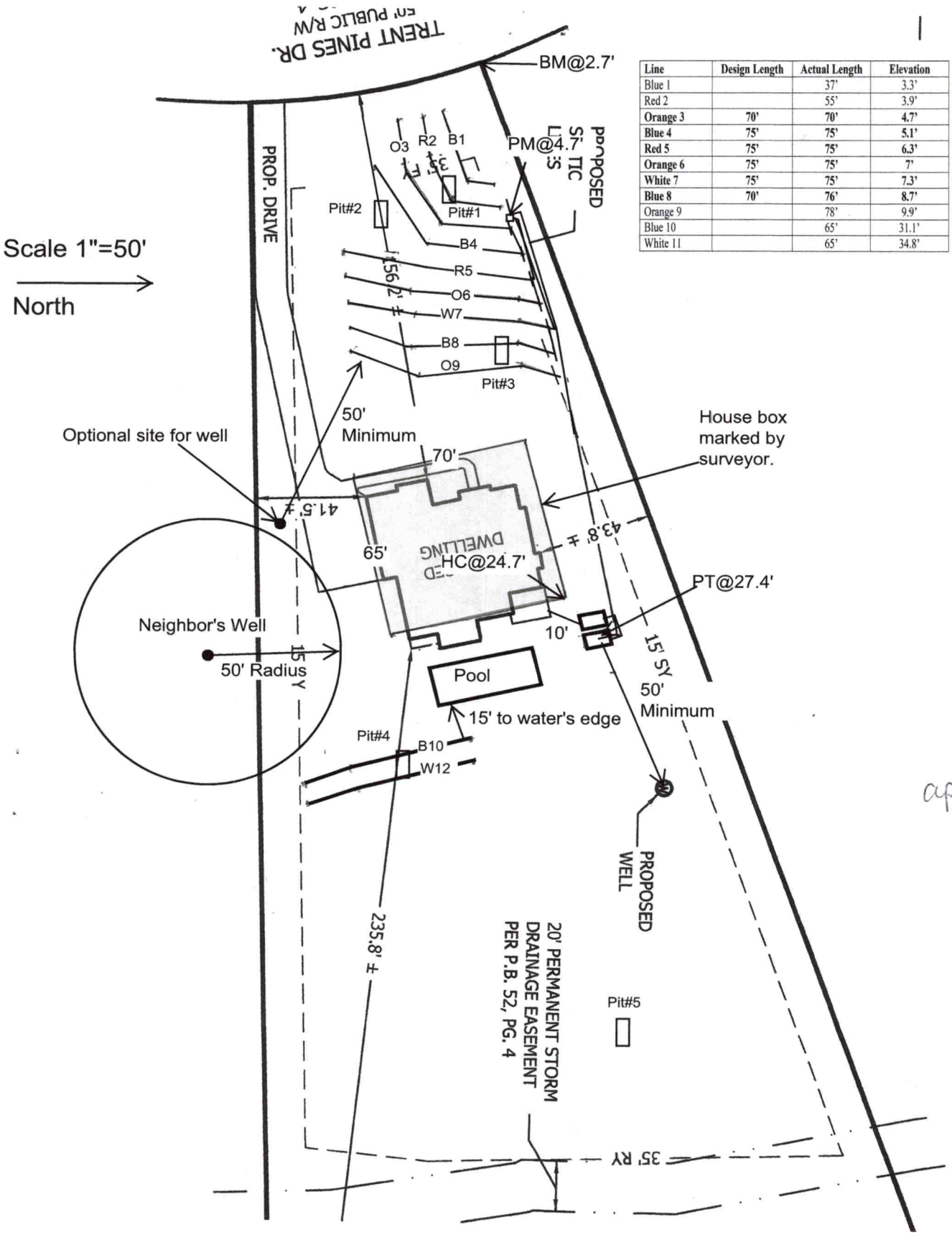
Please answer the following to the best of your ability:

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

10/26/2021
DATE



Line	Design Length	Actual Length	Elevation
Blue 1		37'	3.3'
Red 2		55'	3.9'
Orange 3	**70'**	**70'**	**4.7'**
Blue 4	**75'**	**75'**	**5.1'**
Red 5	**75'**	**75'**	**6.3'**
Orange 6	**75'**	**75'**	**7'**
White 7	**75'**	**75'**	**7.3'**
Blue 8	**70'**	**76'**	**8.7'**
Orange 9		78'	9.9'
Blue 10		65'	31.1'
White 11		65'	34.8'

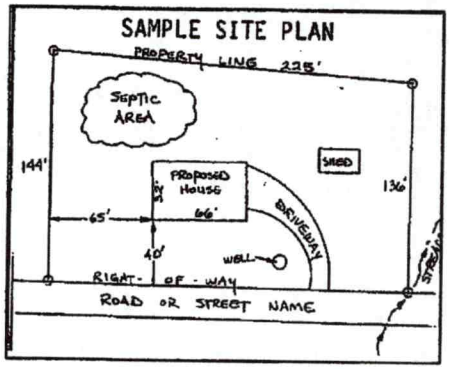
approved
12/23/21
DW

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *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**
- ( ) **Front and side setbacks from property line**
- ( ) **Preferred driveway location and 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**
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: _____

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, Jonathan Smith - Foundation Homes Developing, LLC, am the legal owner(s) of the property located at 117 Trent Pines Dr, Mooresville NC 28117, identified as PIN (Parcel Identification Number) 4639321012, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Mitzi Owens, Foundation Homes Residential, 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.

_____ 10/26/2021
Signature of Owner(s) Date

Mooresville - Environmental Health
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
ronda.hart@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 ***

MCO **Complete all Environmental Health forms**:

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

MCO **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.**

MCO **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**.

MCO **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.

MCO **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 nonrefundable. 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** 10/26/2021

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