ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP 312627

3:00

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

LPIN # 4639 --45 --5247

APPLICANT/OWNER: IQ Custom Construction | APPLICANT ADDRESS: 301 Watkins Farm Road

SITE ADDRESS: 113 Hawks Nest Lane, MVL 28117 | PHONE: - | ALT. PHONE 704-578-4951

SITE DIRECTIONS: Perth to Fear Hill Rd on Hawks Nest | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Woodstream Estates | SECTION: - | LOT # 3 | LOT AREA: .91 Acres | DESIGN FLOW: 480 | L.T.A.R.: .30

Septic Tank	1050	(gal)	STB	160	Date	4-28	☒ New System	☐ Repair	☐ Expansion
Pump Tank	1000	(gal)	PT	363	Date		System Type: I II III IV V VI		
Pump Make		Model			Serial #		System Description: PM - 25% Reduction		
# Nitrification Fields		# Lines			Linear Ft:		Repair System Description: LP-PPRPS - 50% Reduction		
Trench Width	36 in.	Trench Bottom Depth		17 in max	Gravel Depth	-	Maintenance Agreement Required:	☐ YES	☒ NO
								☐ GRAVITY	☒ PRESSURE

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

Comments / Conditions: 6 in of cover must be approved by ICHD prior to covering the septic system.
* Easement needed prior to A/C *

Offsite septic on 4639-45-8252 (Fear Hill Rd)
Book 52 Page 94.

INITIAL SITE SKETCH

This permit is issued pursuant to Section 11 . (C) of S.L. 2018-114 using the signed and sealed LSS Evaluation by:

The Oaks Group PA

LSS # 1313 Dated April 15, 2021

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.

11ft from H.C. to ST
left off pressure manifold
Mystery PVC pipe
Installed Quick 4 as shown
7/13/21 mo

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: Kathleen Saunders Date: 4/28/21 Installed by: Rowan Septic

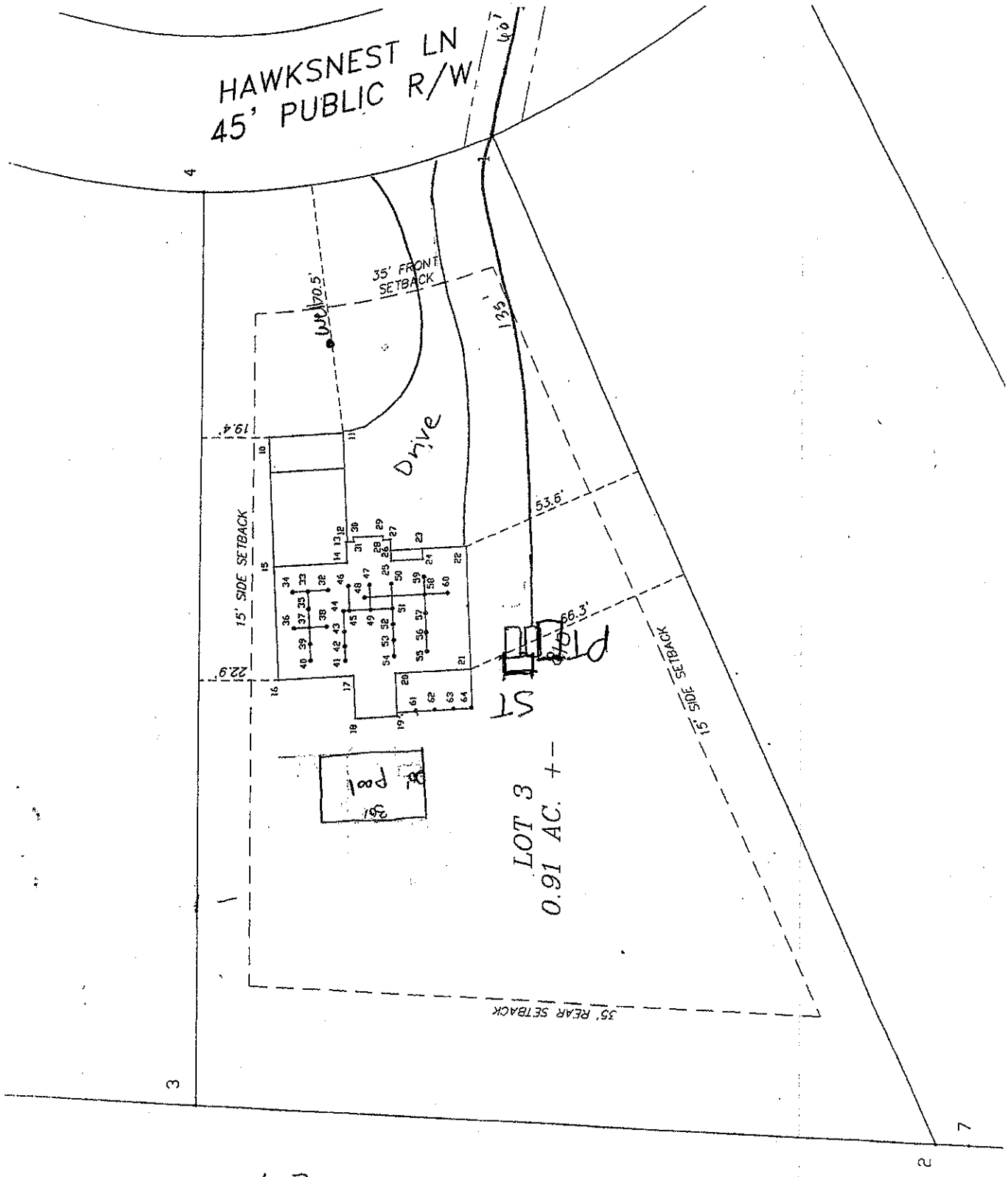
IMPROVEMENT PERMIT by: Benjamin A Botts Date: 4-26-2021 OPERATION PERMIT by: Date: 8-13-2021

AUTHORIZATION TO CONSTRUCT by: Benjamin A Botts Date: 4-28-21 Existing System Inspected by: Date:

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

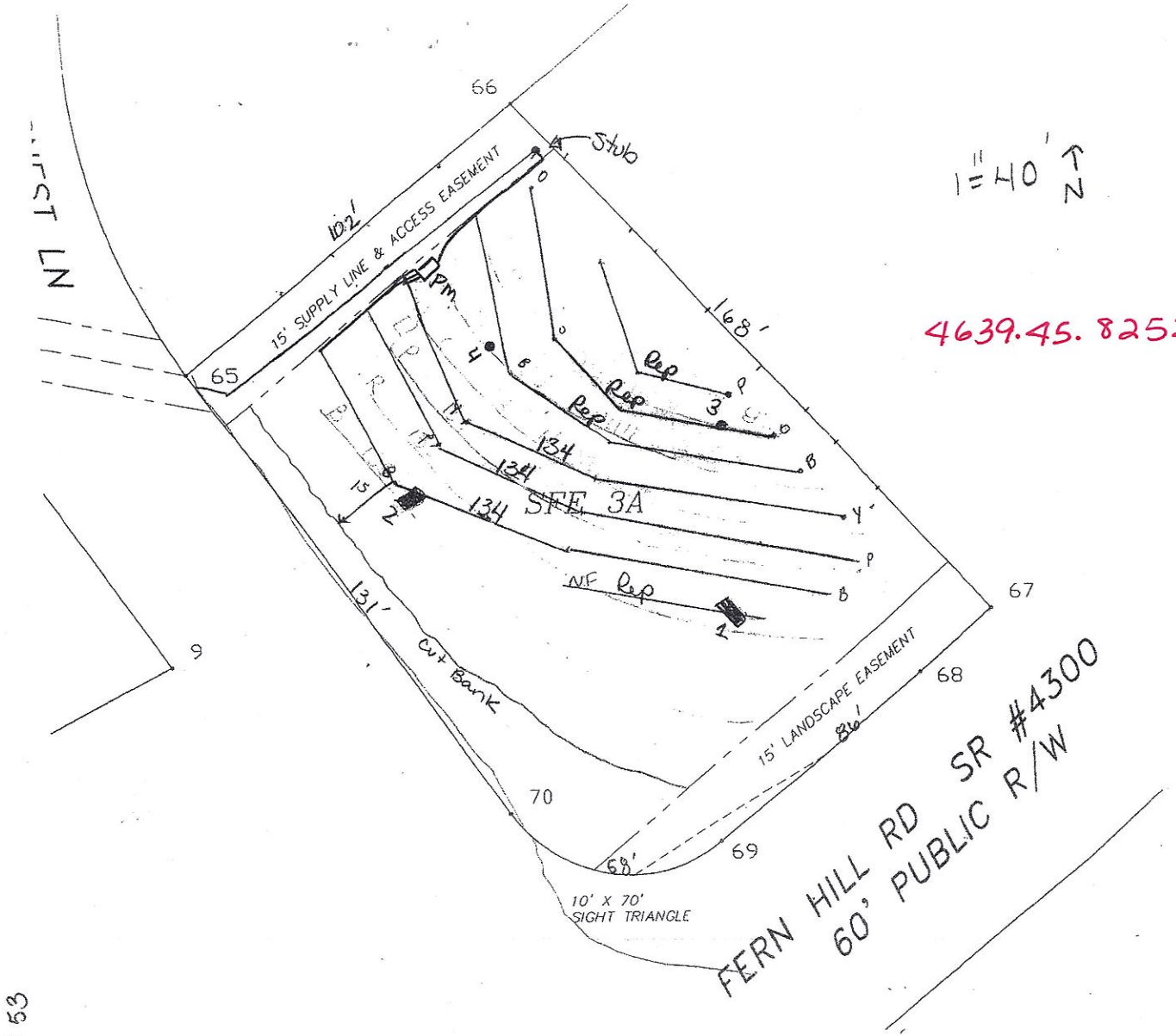
Item	Date	Initials
Drain Lines Checked	7/13/21	MD
Tanks Checked	7/13/21	MD
Pressure Manifold or Valve Box Checked	7/13/21	MD
Pressure Head Set	7/13/21	MD
Electrical Checked	8-13-20	
Floats Set	8-13-21	
Alarm Checked	8-13-21	
Maintenance Contract Needed? Y (N)		
Comments:		

Repairs Only	
	State Code
Failing System Code	
Type of Distribution	G or P
Type of Failure/Malfunction	
Primary Cause of Failure/Malfunction	
Age of System? _____	
Initial or Repair? _____	

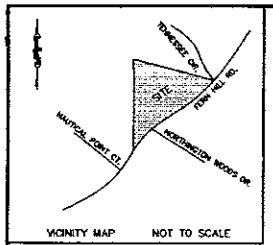

HAWKSNEST LN
45' PUBLIC R/W
35' FRONT SETBACK
70.5'
125'
Drive
19.4'
15' SIDE SETBACK
53.6'
66.3'
22.9'
15' SIDE SETBACK
35' REAR SETBACK
LOT 3
0.91 AC. +-
1
2
3
4
7

←2

1=40'


1"=40'
N
4639.45.8252
66
Stub
15' SUPPLY LINE & ACCESS EASEMENT
102'
168'
65
PM
134
SFE 3A
NF R&P
131'
Cut Bank
9
67
68
15' LANDSCAPE EASEMENT
70
69
58'
10' X 70'
SIGHT TRIANGLE
FERN HILL RD SR #4300
60' PUBLIC R/W
P - 1.55 53
O - 100
B - 125
Y - 134
P - 150
B - 150
NF - 50

52/94



VICINITY MAP NOT TO SCALE

THIS SURVEY IS OF ANOTHER CATEGORY, SUCH AS THE RECOMBINATION OF EXISTING PARCELS, A COURT ORDERED SURVEY, OR OTHER EXCEPTION TO THE DEFINITION OF SUBDIVISION.

PROFESSIONAL LAND SURVEYOR

AS OF THE DATE OF THIS RECORDING, THE LOTS REPRESENTED ON THIS PLAT HAVE NOT BEEN INSPECTED OR APPROVED BY THE IREDELL COUNTY HEALTH DEPT. UNTIL INSPECTED THERE IS NO ASSURANCE THAT A BUILDING PERMIT WILL BE ISSUED.

CURVE TABLE				
CURVE	RADIUS	LENGTH	BEARING	CHORD
C14	35.00'	57.81'	S 82°00'32" E	51.46'
C15	157.50'	193.04'	S 00°25'30" W	181.18'
C16	35.00'	42.94'	S 70°41'04" W	40.30'
C17	51.00'	74.11'	N 64°12'15" E	67.76'
C18	51.00'	35.18'	N 02°49'02" E	34.48'
C19	51.00'	48.72'	N 44°18'41" W	46.89'
C20	51.00'	42.53'	S 84°25'43" W	41.31'
C21	51.00'	22.25'	S 48°02'15" W	22.08'
C22	202.50'	26.31'	S 31°48'55" W	26.30'
C23	202.50'	94.27'	S 14°41'07" W	93.91'
C24	202.50'	84.66'	S 10°41'56" E	84.04'
C25	202.50'	42.45'	S 28°40'54" E	42.38'
C26	35.00'	56.08'	N 11°12'48" E	50.27'

STATE OF NORTH CAROLINA
COUNTY OF IREDELL

I, _____ Review Officer of Iredell County, certify that the map or plat to which this certification is affixed meets all statutory requirements for recording.

Review Officer

Date 7-26-07

FILED
BOOK Doc ID: 010670180001 Type: CRP
Recorded: 07/26/2007 at 10:57:38 AM
DATE, Fee Amt: $21.00 Page 1 of 1
Iredell County, NC
Brenda D. Bell Register of Deeds
REGIS BK 52 PG 94
REGIS
BY:
_____ AM PM
_____ PAGES
_____ COUNTY

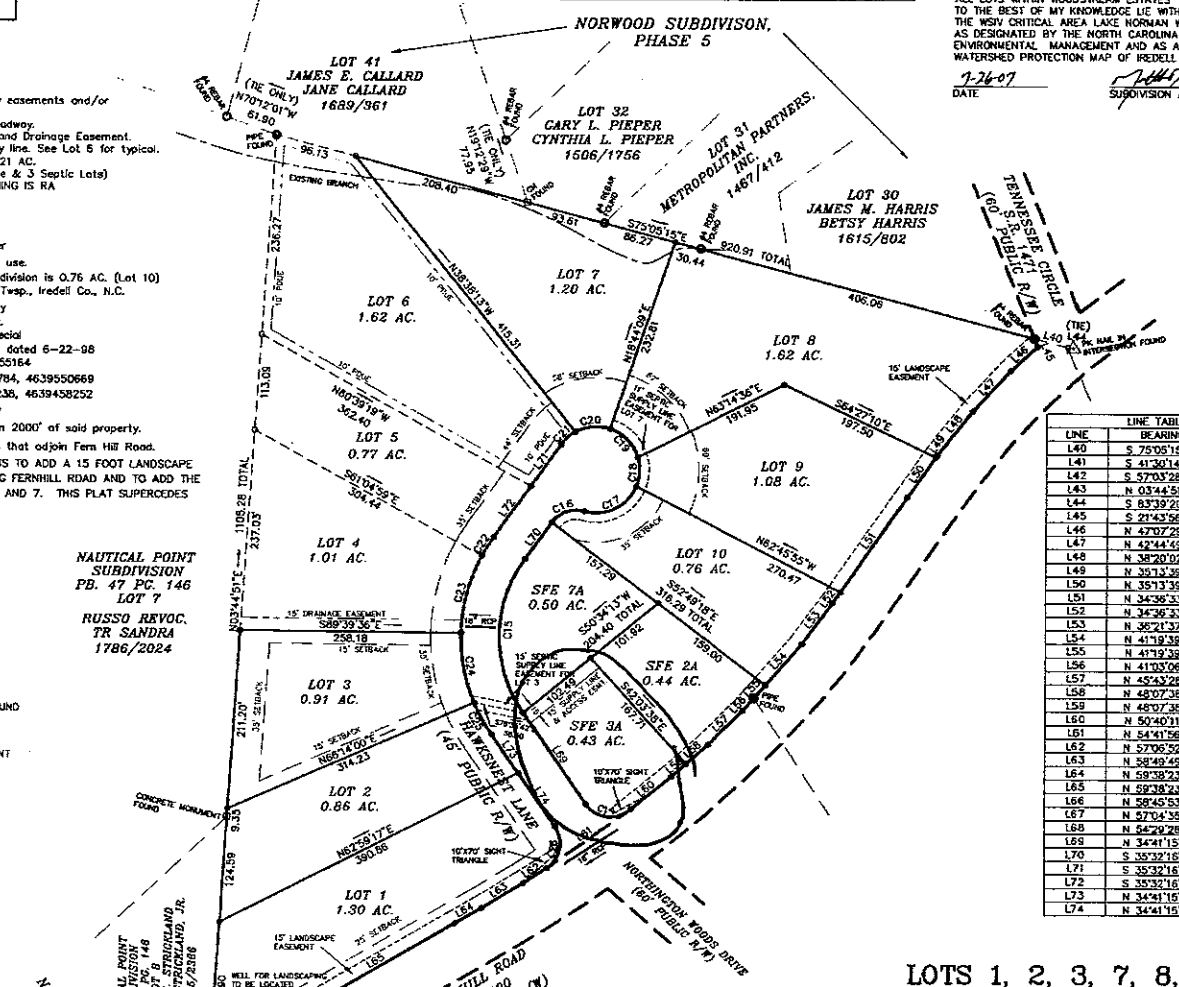
ALL LOTS WITHIN WOODSTREAM ESTATES TO THE BEST OF MY KNOWLEDGE LIE WITHIN THE WSIV CRITICAL AREA LAKE NORMAN WATERSHED AS DESIGNATED BY THE NORTH CAROLINA DIVISION OF ENVIRONMENTAL MANAGEMENT AND AS APPEARS ON THE WATERSHED PROTECTION MAP OF IREDELL COUNTY.

7-26-07
DATE

SUBDIVISION ADMINISTRATOR

NOTES:

1) This property may be subject to any easements and/or Rights-of-way of record.
2) There is 581' Linear feet of new roadway.
3) All lots are subject to a 10' Utility and Drainage Easement. 10 feet on each side of the property line. See Lot 5 for typical.
4) Total acreage to be subdivided: 13.21 AC.
5) Total lots created: 13 (10 Buildable & 3 Septic Lots)
6) Property zoned: RA , ADJOINING ZONING IS RA
7) Minimum Building Setback: 35' Front
   See Lot 3 for typical lot setbacks. 35' Rear, 15' Side, 25' Corner
8) 0.29 Total Acres dedicated as public use.
9) The smallest buildable lot in the subdivision is 0.76 AC. (Lot 10)
10) The property is located in Fallstown Twsp., Iredell Co., N.C.
11) 0.70 Acres of new road right-of-way
12) Individual wells & septic for each lot.
13) This property is not located in a special Flood hazard area. (3703I3-0150 C) dated 6-22-98
14) Tax parcel #(pin number) = 4639455164
    4639455093, 4639455247, 4639457784, 4639550669
    4639550551, 4639459460, 4639459238, 4639458252
15) Deed ref. = 1828/64 AND 1828/67
16) No geodetic monument located within 2000' of said property.
17) There is restricted access to all lots that adjoin Fern Hill Road.
18) THE SOLE PURPOSE OF THIS PLAT IS TO ADD A 15 FOOT LANDSCAPE EASEMENT ACROSS ALL LOTS ALONG FERNHILL ROAD AND TO ADD THE SEPTIC EASEMENTS FOR LOTS 2, 3, AND 7. THIS PLAT SUPERCEDES ANY PREVIOUSLY RECORDED PLATS.



LINE TABLE		
LINE	BEARING	LENGTH
L40	S 75°05'15" E	40.31'
L41	S 41°30'14" W	119.98'
L42	S 57°03'28" W	179.17'
L43	N 03°44'51" E	8.03'
L44	S 83°39'20" E	7.07'
L45	S 21°43'56" E	10.15'
L46	N 47°07'29" E	42.27'
L47	N 42°44'49" E	84.70'
L48	N 38°20'02" E	66.80'
L49	N 35°13'39" E	2.88'
L50	N 35°13'39" E	57.76'
L51	N 34°36'33" E	136.41'
L52	N 34°36'33" E	15.42'
L53	N 36°21'37" E	60.49'
L54	N 41°19'39" E	64.94'
L55	N 41°19'39" E	20.67'
L56	N 41°03'06" E	19.24'
L57	N 45°43'28" E	58.23'
L58	N 48°07'38" E	33.68'
L59	N 48°07'38" E	23.01'
L60	N 50°40'11" E	63.20'
L61	N 54°41'56" E	118.94'
L62	N 57°06'52" E	32.92'
L63	N 58°48'49" E	56.32'
L64	N 59°38'23" E	35.84'
L65	N 59°38'23" E	203.25'
L66	N 58°45'53" E	55.56'
L67	N 57°04'35" E	66.21'
L68	N 54°29'28" E	10.09'
L69	N 34°41'15" W	130.96'
L70	S 35°32'16" W	53.70'
L71	S 35°32'16" W	60.78'
L72	S 35°32'16" W	73.88'
L73	N 34°41'15" W	55.45'
L74	N 34°41'15" W	76.69'

LEGEND
E.I.P. = EXISTING IRON FOUND
I.P.S. = #4 REBAR SET
R/W = RIGHT-OF-WAY
CM = CONCRETE MONUMENT

NORTH BASED ON NAD 1983 NAD 2001

GRAPHIC SCALE
0 50 100
(IN FEET)
1 inch = 100 ft.

PROXIMITY TO VOLUNTARY FARMLAND PRESERVATION DISTRICT

THIS PROPERTY, OR PORTIONS THEREOF, IS LOCATED WITHIN 1/2 MILE OF A DESIGNATED VOLUNTARY FARMLAND PRESERVATION DISTRICT. THIS PROGRAM HAS BEEN DEVELOPED TO INFORM ALL PURCHASERS OF REAL PROPERTY THAT CERTAIN AGRICULTURAL ACTIVITIES, INCLUDING BUT NOT LIMITED TO PESTICIDE SPRAYING, MANURE SPREADING, MACHINERY AND TRUCK OPERATIONS, LIVESTOCK OPERATIONS, SAWING, AND SIMILAR ACTIVITIES MAY TAKE PLACE IN THESE DISTRICT ANY TIME DURING THE DAY OR NIGHT.

OWNER CERTIFICATE FOR EXCEPTION PLATS

KNOW ALL MEN BY THESE PRESENTS, THAT I (WE) HEREBY CERTIFY THAT I AM (WE ARE) THE OWNER(S) OF THE PROPERTY SHOWN AND DESCRIBED HEREON AND THAT I (WE) HEREBY ACKNOWLEDGE THIS PLAT AND ALLOTMENT TO BE MY FREE ACT AND DEED.

7/20/07
DATE

OWNER/MANAGER

NORTH CAROLINA
IREDELL COUNTY

I, A NOTARY PUBLIC FOR SAID COUNTY AND STATE, DO HEREBY CERTIFY THAT JOHN WILTSIE BROWN, JR. PERSONALLY APPEARED BEFORE ME THIS DAY, AND ACKNOWLEDGED THE EXECUTION OF THE FOREGOING INSTRUMENT. WITNESS MY HAND AND OFFICIAL SEAL, THIS 24 DAY OF JULY, 2007.

NOTARY PUBLIC

MY COMMISSION EXPIRES: 6/17/12

SURVEYORS CERTIFICATION

I, WILLIAM M. ALLEN CERTIFY THAT THIS MAP WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION DEED DESCRIPTION RECORDED IN BOOK ____ PAGE ____; THAT THE RATIO OF PRECISION AS CALCULATED BY LATITUDES AND DEPARTURES IS 1:10000. (THAT THE BOUNDARIES NOT SURVEYED ARE SHOWN AS BROKEN LINES PLOTTED FROM INFORMATION FOUND IN BOOK ____ PAGE ____); THAT THIS MAP WAS PREPARED IN ACCORDANCE WITH G.S. 47-30, AMENDED.

WITNESS MY HAND AND SEAL THIS 24 DAY OF JULY, 2007.

SEAL L-3499

PROFESSIONAL LAND SURVEYOR

L-3499
REGISTRATION NUMBER

I HEREBY CERTIFY THAT THE SUBDIVISION PLAT SHOWN HEREON HAS BEEN FOUND TO COMPLY WITH THE SUBDIVISION REGULATIONS OF THE COUNTY OF IREDELL, NORTH CAROLINA. I FURTHER CERTIFY THAT ALL STREETS UTILITIES, AND OTHER REQUIRED IMPROVEMENTS HAVE BEEN INSTALLED IN AN ACCEPTABLE MANNER OR OF THE INSTALLATION OF THE REQUIRED IMPROVEMENTS IN AN AMOUNT AND MANNER SATISFACTORY TO THE COUNTY OF IREDELL HAS BEEN RECEIVED, AND THAT THE FILING FEE FOR THIS PLAT, IN THE AMOUNT OF $____ HAS BEEN PAID. THIS PLAT HAS BEEN APPROVED BY THE SUBDIVISION ADMINISTRATOR FOR RECORDING IN THE OFFICE OF THE REGISTER OF DEEDS OF IREDELL COUNTY.

DATE SUBDIVISION ADMINISTRATOR

I, HEREBY CERTIFY THAT THIS PLAT FOR RECORDATION IS AN EXCEPTION TO THE SUBDIVISION ORDINANCE OF IREDELL COUNTY, NORTH CAROLINA.

SUBDIVISION ADMINISTRATOR IREDELL COUNTY, NORTH CAROLINA

7-26-07
DATE

REVISION PLAT OF

LOTS 1, 2, 3, 7, 8, 9, 10, SFE 2A, AND SFE 3A WOODSTREAM ESTATES (PB. 52 PG. 29)

FALLSTOWN TWSP., IREDELL CO., N.C.
SCALE: 1" = 100' DATE SURVEYED: JANUARY 15, 2007
DATE PLATTED: JULY 24, 2007

OWNER OF ALL LOTS: TEGLAND – BROWN CONSTRUCTION, INC.
116 GASOLINE ALLEY, SUITE 107
MOORESVILLE, N.C. 28117

DAS
DON ALLEN & ASSOCIATES P.A.
"Since 1971"
Commercial * Residential * Mortgage Surveys * Multi-Family Construction Staking * Subdivision Design * Topographical
113-B Raceway Drive * Mooresville, N.C. 28117
(704) 664-7029 (704) 664-8041 Fax

FILE NAME: 11560 REC2.DWG

Woodstream Estates Lot 3 Septic Spec Sheet

Number of Bedrooms	**4**
Basement or Crawl	**Crawl Space**
Design Flow (gpd)	**480**
Primary System LTAR (gpd/ft2)	**0.3**
Primary System Type	**25% Reduction**
No. Lines	3 (See Table)
Total Linear Feet	402
Trench Width	3' min.
Trench Spacing	9' min.
Max Trench Depth	17"
Pump Required	Yes
Distribution Device	Pressure Manifold
Maintenance Agreement Required	No
Length and Diameter of Supply Pipe	345' of 2" SCH 40 PVC
Flow Rate through the system	22 gpm
Elevation head	Approx. 34'
Pressure head	2.0'
Friction head	2.9'
20% Contingency	7.8'
Total Head	46.7'
Pump Requirements	22 gpm @ 46.7' of head To be designed by installer.
Maximum Dosing Volume	180 gal -2.0 doses/day @ design flow
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	8.2
Repair System	**LP PPBPS**
Total Linear Feet	330
Repair Loading Rate	0.3

Table: Summary of Primary and Repair Nitrification Line Specifications

Line No.	Use	Line Color	System Type	Line Length (Ft.)	Elevation (Ft.)
1	Repair	Pink	LP PPBPS	55	838
2	Repair	Orange	LP PPBPS	100	
3	Repair	Blue	LP PPBPS	125	
4	System	Yellow	25% Reduction	134 endfed	
5	System	Pink	25% Reduction	134 endfed	
6	System	Blue	25% Reduction	134 endfed	
7	System	NF	LP PPBPS	50	
				Total System: 402'	
				Total Repair: 330'	

Tank	Red	1000 gal (2 compartment)	810.00
Pump Tank	Red	1000	
House	blue		

Manifold Information	
Tap Size (In.)	1/2
Tap Material	SCH 40 PVC
No. Taps	3
Barrel Size (In.)	4
Barrel Material	SCH 80 PVC
Flow (gpm)/Tap	7.1

Note: **All rod readings should be verified by installer prior to installation**
Tank Locations and distribution devices may be altered at the discretion of the LHD
Portions of the supply line from top of the lot to the septic easemnet appear t0 be installled and stubbed up.
3 inches of cover needed over system area

The LSS evaluation attached is being submitted pursuant to and meets the requirements of SL 2018-114 Section 11.(c).

Sheet ___ of ___
PROPERTY ID #: _____
COUNTY: _____

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

OWNER: IQ Custom Const
ADDRESS: 301 WATKINS Farm Rd
PROPOSED FACILITY: SFR
LOCATION OF SITE: HAWKS NEST LN
APPLICATION DATE
DATE EVALUATED: 9/8/2020
PROPOSED DESIGN FLOW (.1949): 480
PROPERTY SIZE: 0.91 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
3A-1	L 5-10%	0-29	WK SBK CL	FR SS/SP	R; C SAP MULTI	29"	PS	N/A	0.35
		29-48	MA L SAP	↓					
3A-2	L 5-10%	0-10	MO GR SL	FR NS/NP	Br	33"	PS	N/A	0.3
		10-23	MO SBK C	FR SS/SP	R				
		23-33	WK SBK CL	↓	R; C SAP MULTI				
		33-40	MA L SAP	↓					
3A-3	L 5-10%	0-41	MO SBK CL	FR SS/SP	R; F SAP	52+	N/A	N/A	0.35
		41-52	WK SBK CL	↓	R, C SAP				
3A-4	L 5-10%	0-8	MO GR SL	FR NS/NP	Br	48+	N/A	N/A	0.3
		8-32	MO SBK C	FR SS/SP	R				
		32-48	WK SBK CL	↓	R; C SAP				

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	IIIb	IV
Site LTAR	0.3	0.3

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

LICENSED SOIL SCIENTIST
KATHLEEN M. SAUNDERS
THE GREAT SEAL OF THE STATE OF NORTH CAROLINA
1313
STATE OF NORTH CAROLINA

COMMENTS: 3" cover needed over system

Kathleen Saunders

Updated February 2014

THE OAKS GROUP, PA

To: Iredell County Environmental Health Department (ICHD)

From: Kathleen Saunders, LSS

RE: 113 Hawks Nest Lane

Date: April 15, 2021

Attached is the septic specification information required to permit 113 Hawks Nest Lane for an Improvement Permit and/or Construction Authorization Permit in Iredell County via the Session Law 14 permitting process.

The attached information is not an Improvement Permit or an Authorization to Construct, and is only to assist the Iredell with permitting. The ICHD has to approve each lot and only the ICHD can issue these permits. The system should be installed according to the ICHD permits, policies, and NC Rules, which these specifications are in accordance with. If the ICHD wishes to change tank locations, distribution devices, etc they may do so at their discretion.

All information and specifications have been prepared in conjunction with ICHD permitting guidelines for the current lot owners to acquire an Improvement Permit and/or Authorization to Construct on this lot. It is ultimately the ICHD's responsibility to verify all specifications before permitting and/or septic system installation. The site contains highly variable soils; there may be soil features present that were not encountered during the evaluation.

The LSS Evaluation attached to this application is to be used to produce design and construction features for permitting in accordance with SL 2018-114 Section 11.(c). The LSS Evaluation is being submitted pursuant to and meets the requirements of SL 2018-114 11.(c). The LSS Evaluation contains sufficient information to produce design and construction features for an IP/CA, and the LSS contains the proper insurance with the proper coverage.

LICENSED SOIL SCIENTIST
KATHLEEN M. SAUNDERS
1313
STATE OF NORTH CAROLINA

Kathleen Saunders

RECEIVED APR 15 2021

Session Law

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

AP-312627 $000.00

Application For:
( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) 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 ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: IQ Custom Const Address: 301 Watkins Farm Rd Zip: _____
Applicant Email: _____ Phone: _____ Alt. Phone: _____
Owner Name: Same Address: _____ Zip: _____
Owner Email: _____ Phone: _____ Alt. Phone: 704-578-4951 (Jess)

Property Information:

Street Address: 113 Hawks Nest Ln 28117
Subdivision Name: Woodstream Estates Section/Phase: _____ Lot Number: 3
Driving Directions: Perth, Fern Hill, R Hawks Nest. Septic Easement on R, Lot on L

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

(X) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____
Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 8
(X) Swimming Pool
( ) Other Addition/Structure: _____

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

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

Water Supply: ( ) Replacement Well – Reason: _____
( ) Multi-connection Well Number of Houses: _____ Number of Persons: _____
(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: _____

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: Kathleen Saunders 4.15.21
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

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, IQ Custom Construction, am the legal owner(s) of the property located at 113 Hawks Nest LN, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize **(print legal representative/company name)** The Oaks Group, 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]	4/15/21	[signature]	4/15/21
Signature of Owner(s)	Date	Signature of Witness	Date

Please return this signed form to the appropriate office:

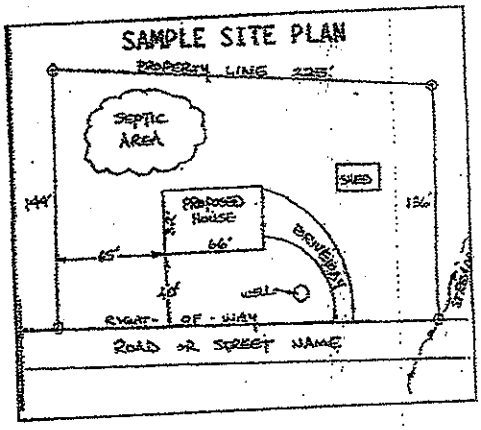
Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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

IREDELL COUNTY 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)

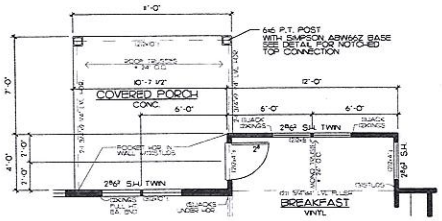
USE THIS SPACE TO DRAW YOUR SITE PLAN

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

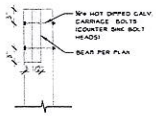
Signature: Kathleen Saunders 4.15.21

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



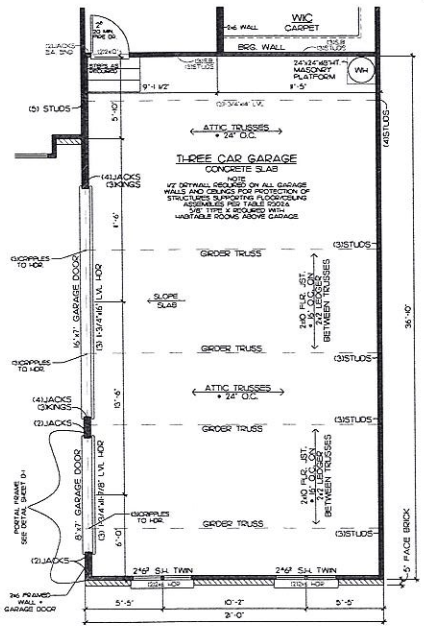
OPT. COVERED PORCH

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



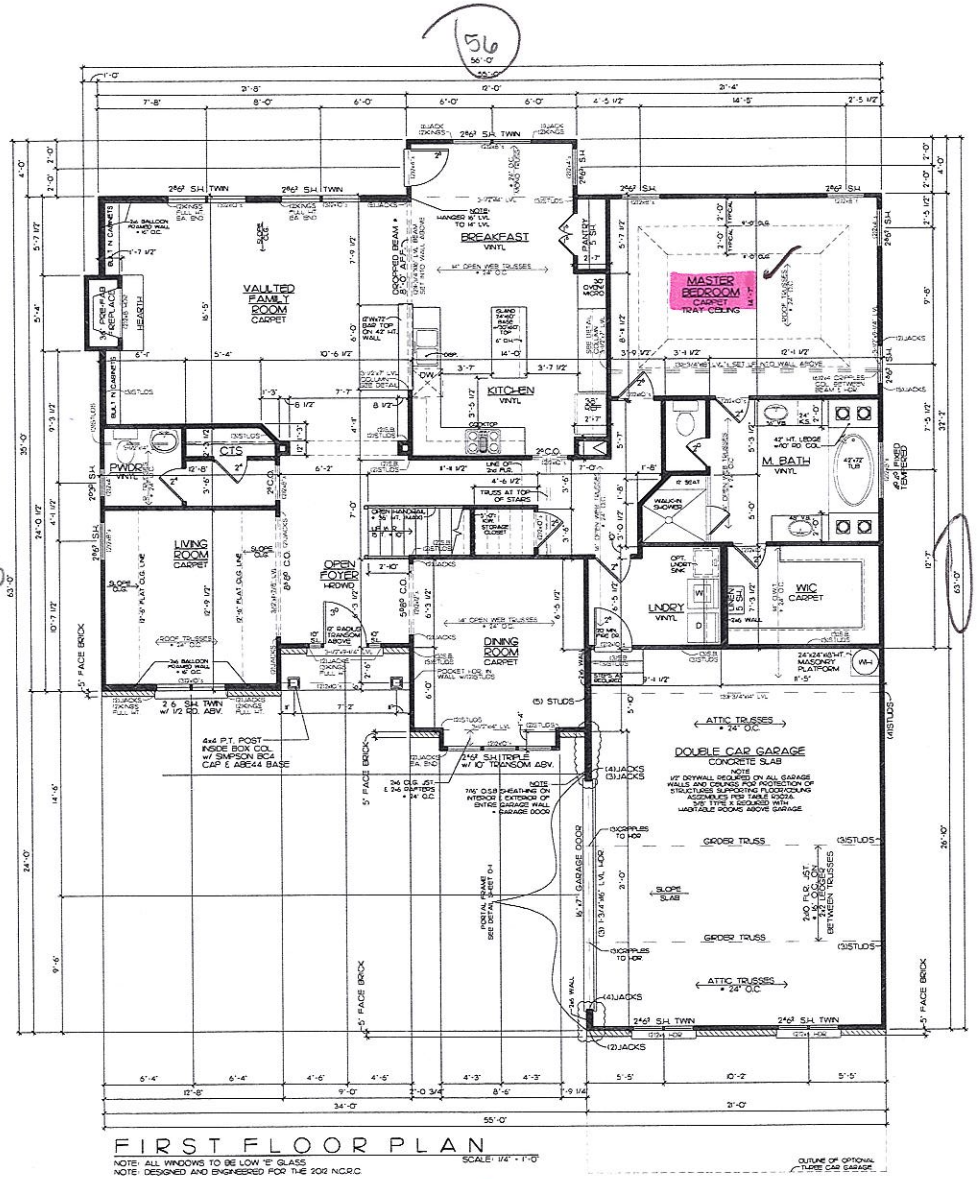
6x6 COLUMN

SCALE: 1" = 1'-0"



OPT. 3 CAR GARAGE

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

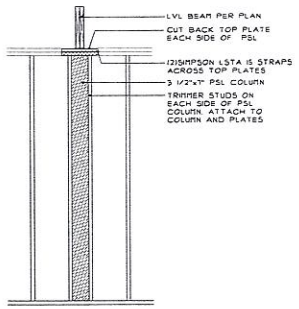


FIRST FLOOR PLAN

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

NOTE: ALL WINDOWS TO BE LOW "E" GLASS
NOTE: DESIGNED AND ENGINEERED FOR THE 2012 N.C.R.C.

WALL BRACING NOTES:
1. THE LATERAL BRACING REQUIREMENTS FOR THIS PLAN HAVE BEEN ACCOMPLISHED FOR UTILIZING AN ENGINEERED DESIGN AS PERMITTED IN R602.10.4 OF THE 2012 NORTH CAROLINA RESIDENTIAL CODE WITH SEPTEMBER 1, 2013 AMENDMENTS.
2. ALL PERIMETER WALLS ARE TO BE FULLY SHEATED WITH A MINIMUM 7/16" O.S.B. AND ATTACHED TO THE WALL FRAMING STUDS WITH 8d (2.5"x0.131") NAILS AT 6" O.C. SPACING AT PANEL EDGES AND 12" O.C. AT INTERMEDIATE SUPPORTS.
3. INSTALL BLOCKING ALONG O.S.B. PANEL EDGES. FASTEN PANEL EDGES TO BLOCKING AT 2" O.C. AND 8" O.C. AT INTERMEDIATE FRAMING WHEN LESS THAN 50% BUT GREATER THAN 25% OF THE WALL IS SHEATHED.
4. SHEATH ALL GABLE END WALLS WITH 7/16" O.S.B.



TYPICAL PSL COLUMN DETAIL

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

HANGER SCHEDULE FOR JOISTS AND BEAMS	
MEMBER (NUMBER OF PLY'S)	HANGER
2X8	LUS28
2X10	LUS210
2X12	LUS210
2-2X8	HUS28-2
2-2X10	HUS210-2
2-2X12	HUS212-2
3-2X8	LUS28-3
3-2X10	LUS210-3
3-2X12	HU212-3 FIN
2-1 3/4" x 9 1/4" LVL	HGUS410
2-1 3/4" x 11 7/8" LVL	HGUS412
2-1 3/4" x 14" LVL	HGUS414
2-1 3/4" x 16" LVL	HGUS414
2-1 3/4" x 18" LVL	HGUS414
3-1 3/4" x 9 1/4" LVL	HGUS5.50/10
3-1 3/4" x 11 7/8" LVL	HGUS5.50/12
3-1 3/4" x 14" LVL	HGUS5.50/14
3-1 3/4" x 16" LVL	HGUS5.50/14
3-1 3/4" x 18" LVL	HGUS5.50/14
4-1 3/4" x 9 1/4" LVL	HGUS7.25/10
4-1 3/4" x 11 7/8" LVL	HGUS7.25/12
4-1 3/4" x 14" LVL	HGUS7.25/14
4-1 3/4" x 16" LVL	HGUS7.25/14
4-1 3/4" x 18" LVL	HGUS7.25/14

NOTE:
PROVIDE FIRE BLOCKING AND DRAFTSTOPPING AT ALL CONCEALED FLOOR & WALL SPACES TO COMPLY W/2012 N.C.R.C. R302.11 & R302.12

GENERAL NOTES:
1. ALL FRAMED WALLS THAT FORM THE THERMAL BARRIER OF A HOUSE SHALL HAVE INSULATION INSTALLED FREE FROM GAPS, VOIDS, OR COMPRESSION AND SHALL BE ENCLOSED ON ALL SIDES WITH A RIGID MATERIAL OR AN APPROVED AIR BARRIER MATERIAL. THESE AREAS SHALL INCLUDE BUT NOT LIMITED TO TUBS, SHOWERS, STAIRS, FIREPLACE UNITS, AND THE UNHEATED SIDE OF ALL KNEE WALLS.
2. ALL SILLS OF OPERABLE WINDOWS GREATER THAN 72" ABOVE GRADE OR WALKING SURFACE BELOW MUST HAVE A SILL HT. OF 24" MINIMUM ABOVE THE FINISHED FLOOR OF THE ROOM IN WHICH THE WINDOW IS LOCATED. IF THE SILL HT. IS LESS THAN 24" THE WINDOW MUST MEET THE REQUIREMENTS OF SECTION R612.3 OR R612.4.

SQUARE FOOTAGE	
(HEATED)	
FIRST FLOOR:	1943 SF
SECOND FLOOR:	908 SF
TOTAL HEATED:	2341 SF
2 CAR BONUS RM:	362 SF
OPT. 3 CAR BONUS RM:	547 SF
2 CAR GARAGE:	561 SF
3 CAR GARAGE	771 SF

Acknowledgement Of Plans Submittal ONLY!

Kathleen Saunders Date 12-9-2020

Bradford C. Miller Date 12-9-2020

Southern Dynamic Engineering and Design, PLLC
P.O. Box 83
Waxhaw, NC 28173
NC Cert. of Licensure P-0715
Seal for Structural Only

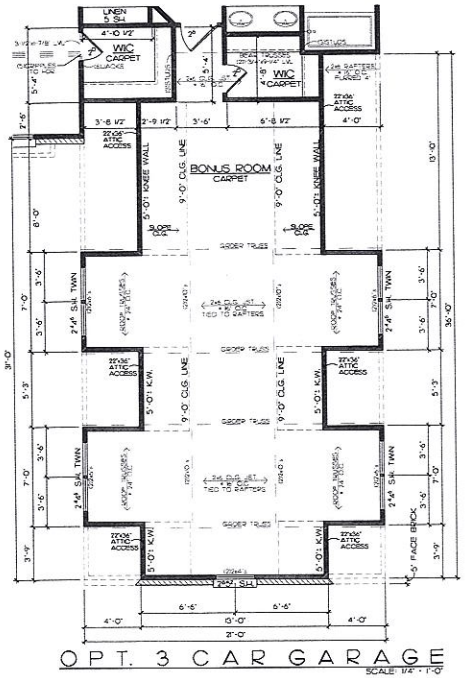
I.Q. CUSTOM CONSTRUCTION
840 Edminston Rd.
MT. Ulla, NC 28125 Ph. 704-660-5738

Project: THE BURNSIDE HOUSE PLAN
Sheet Title: FIRST FLOOR PLAN

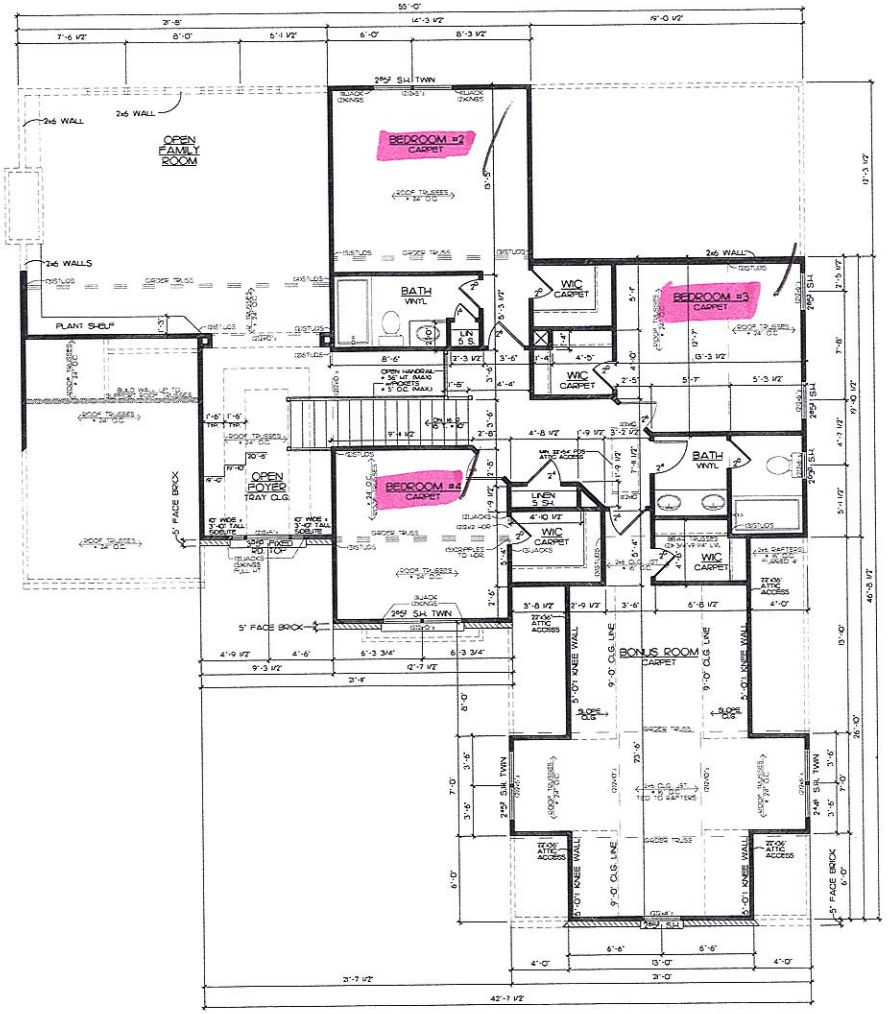
Drawn By: JR
Date: 02-21-15
REV: 06-01-16, 10-21-16
Site:

Sheet: 3

Acknowledgement Of
Plans Submittal ONLY!
Kathleen Samuels Date 12-9-2020
Bryant C. White Date 12-9-2020



OPT. 3 CAR GARAGE
SCALE: 1/4" = 1'-0"



SECOND FLOOR PLAN
SCALE: 1/4" = 1'-0"
NOTE: ALL WINDOWS TO BE LOW 'E' GLASS
NOTE: DESIGNED AND ENGINEERED FOR THE 2012 N.C.R.C.

Southern Dynamic Engineering and Design, P.L.L.C
P.O. Box 87
Waxhaw, NC 28173
NC Cert. of Licensure P-0711
Seal for Structural Only

I.Q. CUSTOM CONSTRUCTION
840 Edminston Rd.
MT. Ulla, NC 28125 Ph. 704-660-5738

Project: THE BURNSIDE HOUSE PLAN
Sheet Title: SECOND FLOOR PLAN

Drawn By: J.R.
Date: 9-02-05
REV: 06-09-16
06-09-16

IQBRN2nd
Sheet 4

IREDELL COUNTY · NC

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

APPLICATION NUMBER
312627 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4639455247.000	113 HAWKSNEST LN	Iredell County

Owner Information	Applicant Information
Name: VERNON LIV TR	Name: THE OAKS GROUP
Address:	Address: 121 HOLT LN MOORESVILLE, NC 28117
Phone:	Phone: (704)578-4951

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.91	35	35	15	15	WSIV-CA Catawba/Lake Norman	NO

Remarks
SFD

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.

Date: 11/13/2020

Signature of Owner/Contractor

Permit Number	312627

TOTAL FEES:	$77.25