IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 204723

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

PIN # 4639 ~~615556~~ 51.8099

APPLICANT: New QUEST HOMES / Tom McClellan APPLICANT ADDRESS: PO BOX 5144 MOORESVILLE NC

SITE ADDRESS: 140 SLEEPY COVE TRAIL - Mooresville PHONE: 704-275-0975 ALT. PHONE:

SITE DIRECTIONS: I-40 W (R) PERTH ROAD (L) LIVA TRAIL (L) SLEEPY COVE LOTON (R)

SUBDIVISION: BAY CROSSING SECTION: -1- LOT # 16 LOT AREA: 1.340 AC DESIGN FLOW: 600 L.T.A.R.: .25

Septic Tank 1500 (gal) STB Infiltrator
Pump Tank 1500 (gal) PT Plastic Date Tanks
Pump Make Gould Model WE1012H6 Serial #
Nitrification Fields 1 # Lines 7 Linear Ft: 602'
Trench Width 3' Max. Trench Bottom Depth 18" Gravel Depth NA

☑ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI
System Description: 25% REDUCTION PUMP
Repair System Description: 25% REDUCTION PUMP
Maintenance Agreement Required: ☐ YES ☑ NO ☐ GRAVITY ☑ PRESSURE

☑ Residence ☐ Business ☐ Other ☐ Slab ☑ Basement w/plumbing
No. Bedrooms 5 No. Persons 10 No. Employees
☐ Crawl Space ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☐ Community

Comments / Conditions: INSTALL LINES ON CONTOUR
8/12/14 Reviewed floorplans, in compliance with Septic plan.

USE DUCTILE IRON FOR SUPPLY LINE WITHIN 50' OF WELL
EMAIL FROM PAUL PENNINGER ATTACHED
NEW FP ATTACHED

APPROVED JUL 22 2015

INITIAL SITE SKETCH

SEE ATTACHED DESIGN BY S+ME
see DESIGN DATED 7-14-14
approved

AS BUILT SKETCH BA checked upper line

12/30/16 Checked lower 4 lines
1/19/17 Checked plastic tanks & pressure manifold
1-30-17 CHECKED SUPPLY LINE & DUCTILE IRON PIPE

	Date	Initials
Drain Lines Checked	12/30/16 1/19/17	MD & BA
Tanks Checked	1/19/17	MD
Pressure Manifold or Valve Box Checked	1/19/17	MD
Pressure Head Set	3-20	BA
Electrical Checked	3-21-17	BA
Floats Set	3-20	BA
Alarm Checked	3-20	BA
Maintenance Contract Y / (N)		

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: T. McClellan Date: 7-29-14 Installed by: Richard Abernathy

IMPROVEMENT PERMIT by: Sara Grey Date: 7-24-14 OPERATION PERMIT by: BA Date: 3-21-17

AUTHORIZATION TO CONSTRUCT by: [illegible] Date: 8/12/14 Existing System Inspected by: Date:

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

SITE DEVELOPMENT PLAN

PREPARED BY:

DELTA LAND SERVICES, INC.

FIRM LICENSE #C-735

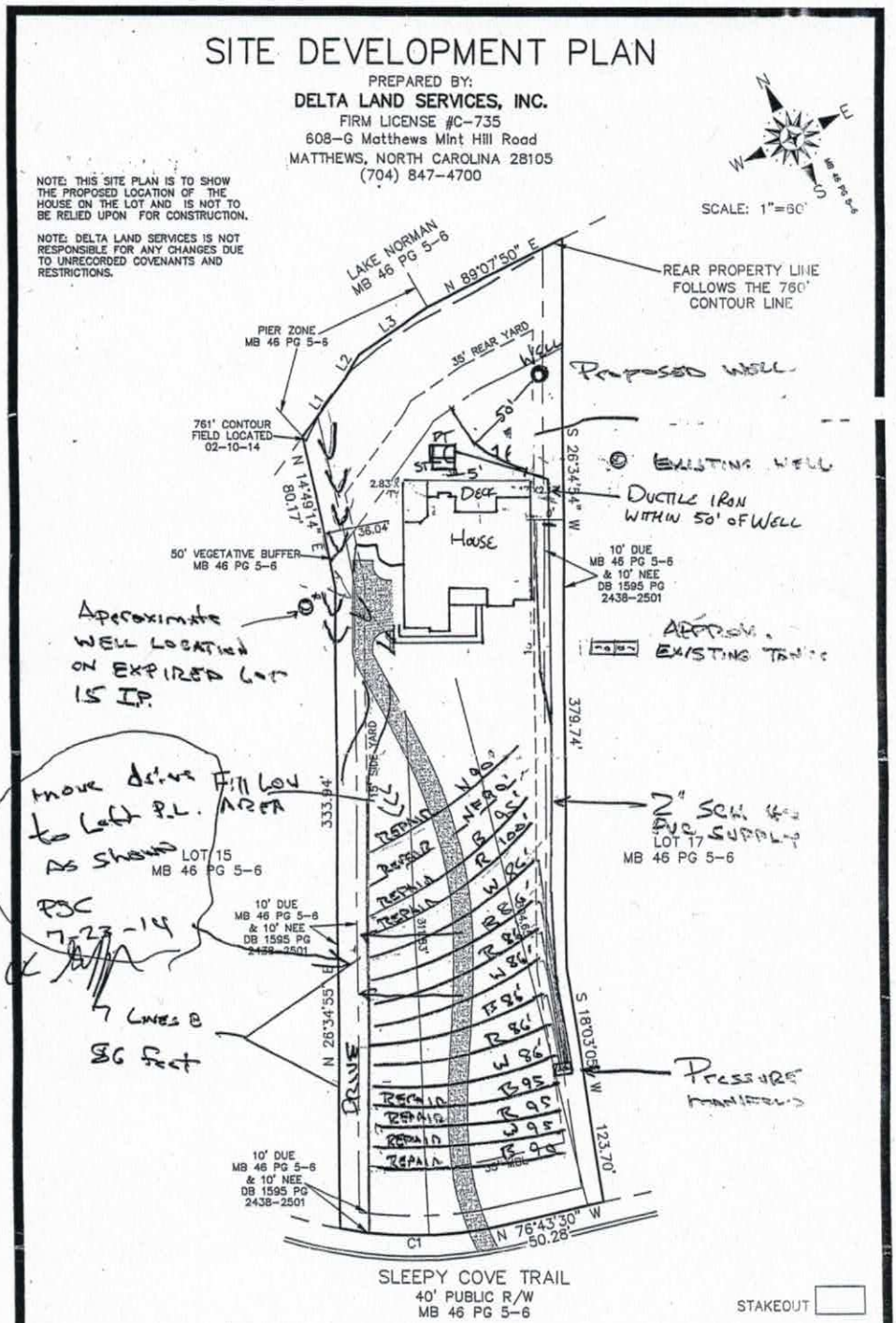
608-G Matthews Mint Hill Road

MATTHEWS, NORTH CAROLINA 28105

(704) 847-4700

NOTE: THIS SITE PLAN IS TO SHOW THE PROPOSED LOCATION OF THE HOUSE ON THE LOT AND IS NOT TO BE RELIED UPON FOR CONSTRUCTION.

NOTE: DELTA LAND SERVICES IS NOT RESPONSIBLE FOR ANY CHANGES DUE TO UNRECORDED COVENANTS AND RESTRICTIONS.



NOT FOR RECORDATION, CONVEYANCES OR SALES

Subdivision BAYCROSSING, PHASE ONE County IREDELL

Address 140 SLEEPY COVE TRAIL Owner NEW QUEST

Lot 16 Block ___ Plan CUSTOM Elevation ___ Drive (Left) SIDE (Right) ___ (Courtyard) ___ Deck X

Patio ___ Fireplace ___ Garage (1 Car) ___ (2 Car) ___ (3 Car) X Brick ___ Basement ___ Curtain Wall ___

Crawl ___ Slab ___ Other ___

REVISED: CHANGE TO PLOT PLAN DWN: JDA CKD: DATE: 07 /14 /14

Z:\Misc\BAYCROSS-0016.dwg

5 time Project 4358-14-086 7-17-14

* Site Plan must accompany written report

July 17, 2014

New Quest Homes
PO Box 5144
Mooresville, North Carolina 28117

Attention: Mr. Tom McClellan

Reference: **Technical Assistance with Fast Track Septic Permitting**
Lot 16 Bay Crossing Subdivision
Iredell County, North Carolina
S&ME, Inc. Project No. 4358-14-086

Dear Mr. McClellan:

S&ME, Inc. (S&ME) has provided technical assistance to obtain a possible five bedroom septic Improvement Permit from the Iredell County Health Department (ICHD) for the above referenced lot. The technical assistance was performed in general accordance with S&ME Proposal No. 43-1400664 dated July 10, 2014.

Attached is the Application for the Septic Improvement Permit and Well, the Environmental Health Requirements form, and the ICHD Fast Track requirements presented to the ICHD on your behalf. The lot was originally permitted by the ICHD in 2004 for a 4 bedroom 25 Percent Reduction T&J Panel System and Repair Area at a 0.25 gallons per day per square foot (gpd/sqft) Long Term Acceptance Rate (LTAR). This Improvement Permit has expired and is no longer valid.

You are now requesting a 5 bedroom Improvement Permit and Well Permit with a similar house pad and a possible future pool pad. Mr. Paul Penninger with S&ME visited the lot on July 11, 2014 to place 4 hand auger borings on the lot and on July 15, 2014 to flag the proposed system.

The property corners, property lines, and house box were staked by your surveyor. We visited the lot on July 17, 2014 to review the property lines and house locations. Because the neighbor's existing well was installed approximately 25 feet off the east property line and the drive now being proposed along the west property line, the proposed well is shown along the east property line, close to the 50 foot lake setback. If any part of the proposed septic supply line is installed between 25 and 50 feet of any well, it must be constructed of ductile iron. The supply can be installed 10 feet off the basement wall and pool and 5 feet off the property line.

We are proposing a 5 bedroom 25 Percent System in the same general location that was approved and permitted in 2004. For the primary system we are now proposing 7 lines at 86 feet instead of the 6 lines at 80 feet that were previously permitted. The 2004 permit specified a 24 inch maximum trench bottom. The ICHD can re-permit this trench bottom

or permit an 18 inch maximum trench bottom depth to maintain a 12 inch separation to the saprolite observed on the site. The 0.25 gpd/sqft LTAR proposed for the system layout is the same as permitted in 2004. 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 proposed drive. There shall not be cuts of 2 feet or greater within 15 feet of any part of the permitted septic system.

S&ME 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 and the ICHD with the Fast Track site evaluation. The attached plan is not intended to be a Professional Engineer plan. The ICHD must approve each lot and only the ICHD can issue these permits. The ICHD should verify all soils and system specifications, required setbacks, and whether a professional engineer plan is required before permitting and/or septic system installation. The ICHD may make any changes they deem necessary (tank locations, distribution device, etc.) to the proposed system on the Improvement Permit or the attached information /site plan. If necessary, you should get the homeowners association to approve the new well and septic tank locations. 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,

S&ME, Inc.

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

Rob Willcox, L.S.S.
Senior Project Manager

Attachments:

1. ICHD Improvement Permit Application and Health Department Requirements
2. Site Plan and System Specifications
3. Soil Profile Descriptions
4. 2004 ICHD Permit and Correspondence

Copy: ICHD

T:\Projects\2014\ENV\4358-14-086 New Quest Homes - Lot 16 Bay Crossing\Bay Crossing Lot 16 Summary Letter.doc

Bay Crossing Lot 16 Fast Track System Information

New Quest Homes - July 17, 2014

Number of Bedrooms	**5**
Basement or Crawl	**Basement**
Design Flow (gpd)	**600**
Primary System LTAR (gpd/ft2)	**0.25 (same as expired ICHD IP)**
Primary System Type	**Pressure Manifold 25% Reduction**
No. Lines	7 @ 86 ft.
Total Linear Feet	602
Trench Width	3' min.
Trench Spacing	9 min.
Pump Required	Yes
Distribution Device	Pressure Manifold
Maintenance Agreement Required	No
Length and Diameter of Supply Pipe	~350' of 2" SCH 40 PVC
Flow Rate through the system	38.5 gpm
Elevation head	*Approx. 38'
Pressure head	2.0'
Friction head	Approx. 10'
20% Contingency	10'
Total Head	60'
Pump Requirements	38.5 gpm @ 60' of head ***To be designed by installer.**
Maximum Dosing Volume	240 gal - 2.5 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	approx. 6.5 min.
Check Valve	Yes
Siphon Break hole	No
Repair System	**25% Reduction**
Total Linear Feet	750 shown *600' Required*
Repair Loading Rate	0.25 (same as expired ICHD IP)

Bay Crossing Lot 16 Fast Track System Information

New Quest Homes - July 17, 2014

Table 1: Summary of Primary Drainfield Lines

Line No.	Use	Line Color	System Type	Line Length (Ft.)	Rod Reading (Ft.)
1	System	white	25% Red.	86	6.9
2	System	red	PM PPBPS	86	8.0
3	System	blue	PM PPBPS	86	9.2
4	System	white	PM PPBPS	86	10.1
5	System	red	PM PPBPS	86	11.8
6	System	blue	PM PPBPS	86	12.8
7	System	white		86	13.8
				Total System: 602'	

Tank		1500 gal (2 compartment)	*Rod Reading (ft)
Pump Tank		1500 gal.	36.9
House		Left Rear Corner	36.9

Manifold Information	
Tap Size (In.)	1/2
Tap Material	SCH 80 PVC
No. Taps	7
Barrel Size (In.)	4
Barrel Material	SCH 80 PVC
Flow (gpm)/Tap	5.5

NOTES:

***Elevations must be verified by installer or surveyor before installation and after final tank placement.**

DENR/DEH

ON-SITE WASTEWATER SECTION

Sheet 1 of 1
PROPERTY ID #:
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: NEW QUEST Homes — APPLICATION DATE:
ADDRESS: 140 Sleepy Cove Ct — DATE EVALUATED: 7-11-14
PROPOSED FACILITY: Home — PROPOSED DESIGN FLOW (.1949): 600 — PROPERTY SIZE: 1.34 ac
LOCATION OF SITE: → — PROPERTY RECORDED: 2004
WATER SUPPLY: • Private • Public (Well) • Spring • Other
EVALUATION METHOD: • Auger Boring (Pit) • Cut — TYPE OF WASTEWATER: • Sewage • Industrial Process • Mixed

→ 2004 Pits or Lots w/ Notice Attached

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 ~10%	0-5	WSBK scl	fr ss/ss	br				PS .25-.3
		5-34	mSBK C	fi s/p	red w/	f 10YR 6/6			
		34-48	WSBK scl	fr ss/ss	red;	f sap; wd			
					—	48	ind	—	
2	L ~10%	0-10	WSBK scl	fr ss/sl	br				PS .3
		10-24	mSBK C	fi s/p	rw: f sap,		feldspar ind		
		24-45	WSBK scl	fr ss/sp	y-ll-rd, C		sap		
		45-55	mABS scl	SAP fr	ss/sp				
		layer of sap old path			—	45	PS	—	
3	L ~10%	0-6	WSBK scl	fr ss/sp	br				PS .3
		6-28	mSBK C	fr ss/sl	red; f yel/	l. rhodochrosite			
		28-35	WSBK cl	fr ss/sl	red yel? C	sap			
		35-48	mABS l	SAP fr ss/sp	yellowish				
					—	55	PS	—	
4	L ~10%	0-12	WSBK scl	fr ss/sl	br				PS .25
		12-24	WSBK scl	fr ss/sl	red br				
		24-42	mSBK/BK C		red f. s/p	f 10YR 6/6 5/8			
						drastic lith change 32-42"			
		42-48	WSBK scl	fr ss/sl	—				
						48	—	—	

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

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: RP Trought LS
OTHER(S) PRESENT: reviewed by ICNO

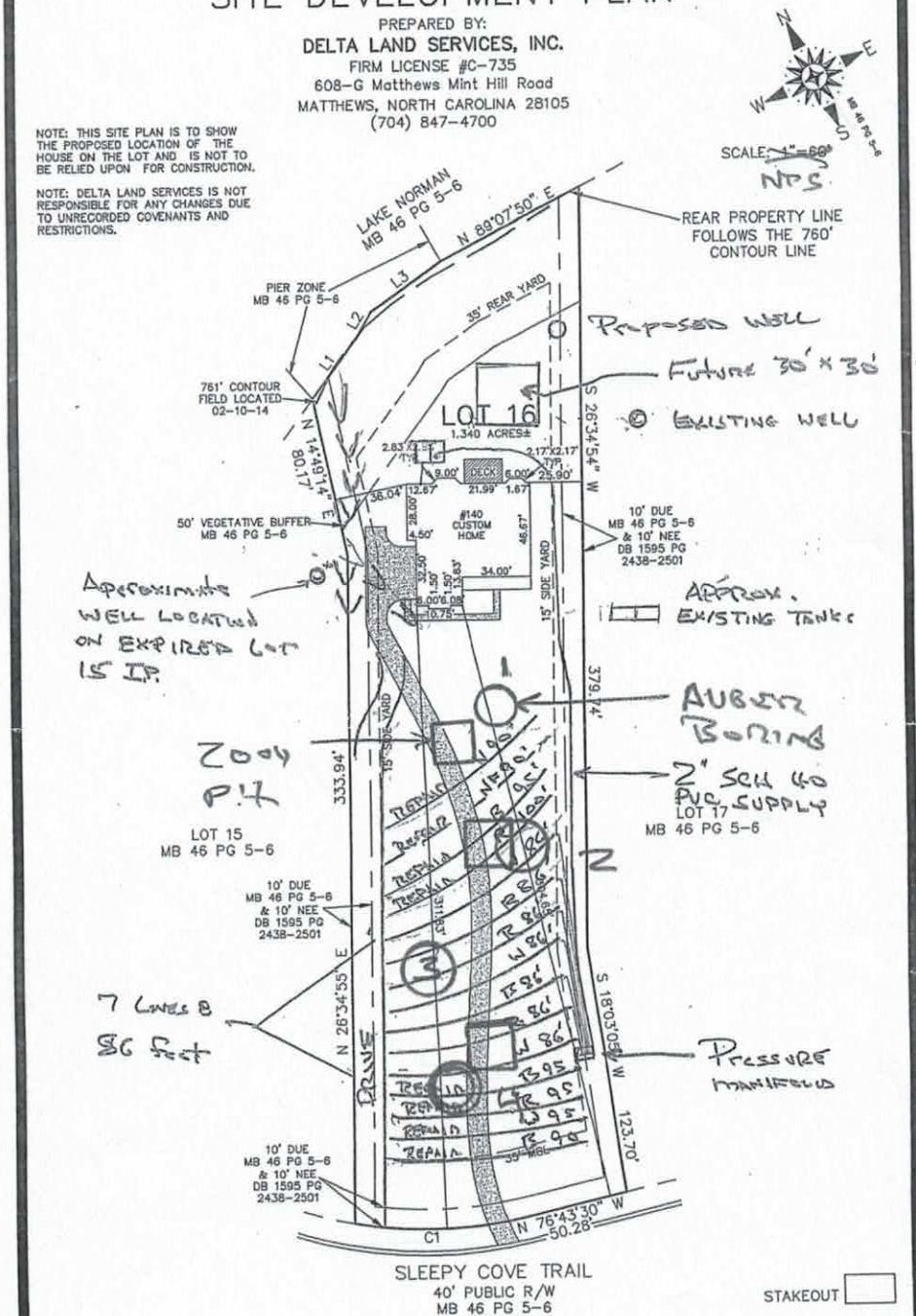
COMMENTS: Use 18" TB if well setback C 100'

SITE DEVELOPMENT PLAN

PREPARED BY:
DELTA LAND SERVICES, INC.
FIRM LICENSE #C-735
608-G Matthews Mint Hill Road
MATTHEWS, NORTH CAROLINA 28105
(704) 847-4700

NOTE: THIS SITE PLAN IS TO SHOW THE PROPOSED LOCATION OF THE HOUSE ON THE LOT AND IS NOT TO BE RELIED UPON FOR CONSTRUCTION.

NOTE: DELTA LAND SERVICES IS NOT RESPONSIBLE FOR ANY CHANGES DUE TO UNRECORDED COVENANTS AND RESTRICTIONS.



NOT FOR RECORDATION, CONVEYANCES OR SALES

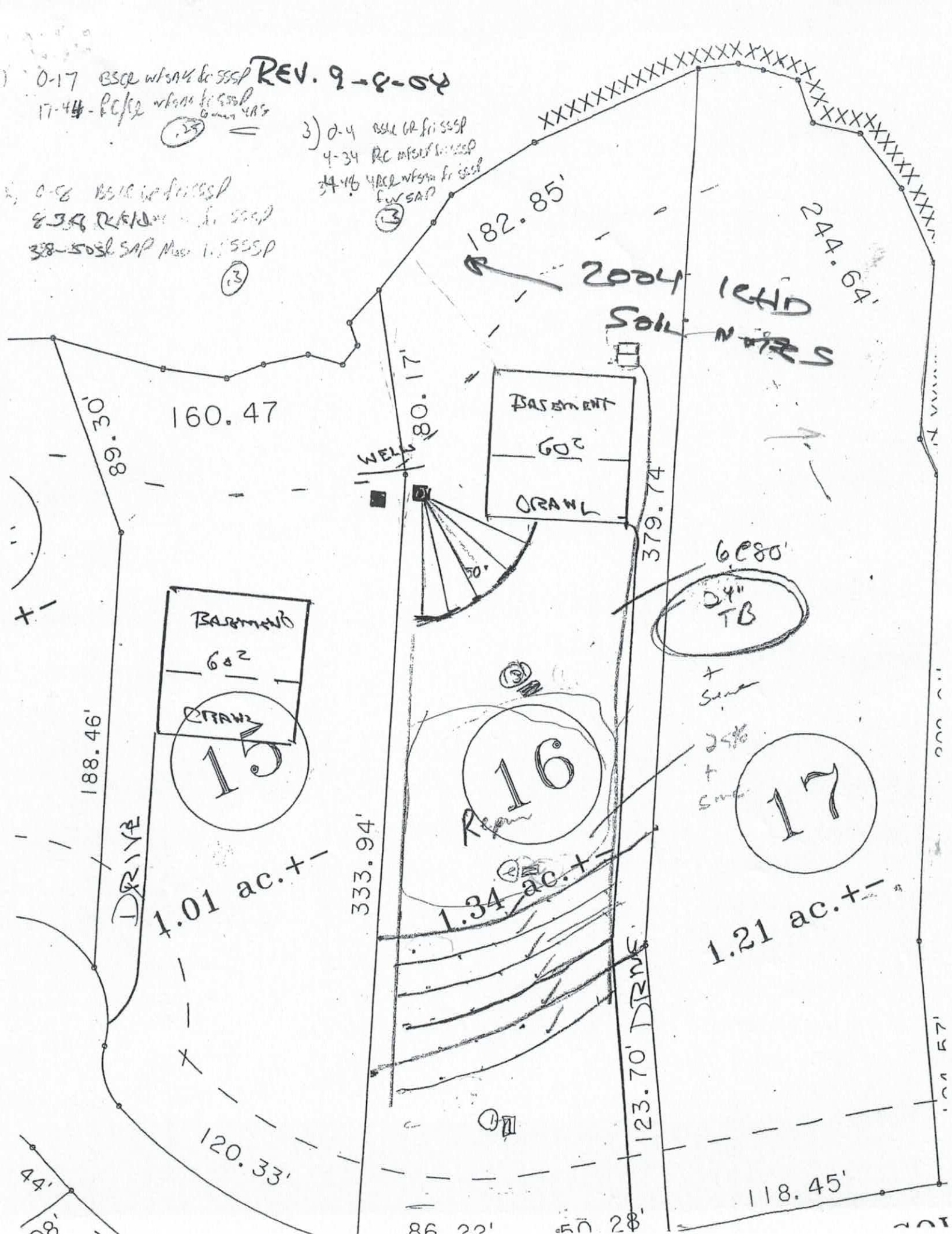
Subdivision BAYCROSSING, PHASE ONE County IREDELL
Address 140 SLEEPY COVE TRAIL Owner NEW QUEST
Lot 16 Block ___ Plan CUSTOM Elevation ___ Drive (Left) SIDE (Right) ___ (Courtyard) ___ Deck X
Patio ___ Fireplace ___ Garage (1 Car) ___ (2 Car) ___ (3 Car) X Brick ___ Basement ___ Curtain Wall ___
Crawl ___ Slab ___ Other ___

REVISED: CHANGE TO PLOT PLAN DWN: JDA CKD: DATE: 07 /14 /14

7-17-14

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2004 Pit Locations and
2014 Auger Borings


REV. 9-8-04
0-17 BSCR w/SAP & SSSP
17-44 RC/SC w/SAP & SSSP
3) 0-4 BSCR GR fr SSSP
4-34 RC w/SAP fr SSSP
34-46 YRCR w/SAP fr SSSP
182.85'
244.64'
2004 IGHD
Soil
160.47
89.30'
80.17'
WELL
BASEMENT
60'
CRAWL
379.74'
60'
24" TB
+ Sewer
24% + Sewer
15
16
17
188.46'
DRIVE
1.01 ac.+-
333.94'
1.34 ac.+-
1.21 ac.+-
123.70' DRIVE
120.33'
118.45'

Paid $350.00 7-17-14
Paid $500.00 7-29-14

RECEIVED JUL 18 2014

704-996-6330
PAUL

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

Application for IMPROVEMENT PERMIT , AUTHORIZATION TO CONSTRUCT, or EXISTING SYSTEM INSPECTION

(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)

1. **APPLICATION FOR:** X **Improvement Permit** ___ **Authorization To Construct** ___ **BOTH** ___ **Existing System Inspection**

2. **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**
   ___ **Custom Site Plan, Scaled no more than 1 Inch = 60 Feet**
   Place check ( ) beside whichever is submitted if applicable

3. **Applicant Information:**

NEW QUEST HOMES	P.O. Box 5144 Mooresville, NC	—	704-252-097
Applicant Name	**Mailing Address**	**Home Phone #**	**Alternate Phone #**
SAME			
Owner Name	**Mailing Address**	**Home Phone #**	**Alternate Phone #**

4. **Property Information:**

140 SLEEPY COVE TR. | BAY Crossing | Lot 16
Street Address | **Subdivision Name** | **Section/Phase and Lot Number**

Driving Directions: PERTH RD, TL LIVA, TR BAYCROSSING, TL SLEEPY COVE, Lot on RT IN WOODS

5. **RESIDENTIAL Site Development Information:** *(Check or Complete ALL that apply)*

(X) **New, Single Family Residence**
( ) **New, Multi-Family Residence**
( ) **Expansion of Existing Septic System**
( ) **Repair To Failing Septic System**
( ) **Other** _____

Maximum Number of Bedrooms 5
Maximum Number of Occupants 10
If Expansion, Current Number of Bedrooms ___

( ) **Crawl Space Foundation?**
( ) **Concrete Slab Foundation?**
( ) **Basement w/Plumbing?**
(X) **Basement w/out Plumbing?**

IF Non- Residential Site Development:
Type of Business _____
Square Footage of Building _____
Maximum Number of Employees _____
Maximum Number of Seats _____

6. **Proposed Water Supply:**

X **New Well** ( ) **Existing Well** ( ) **Community Well** ( ) **City Water** ( ) **Other Public Water**

7. **Desired Septic System Type:** *(You may rank in order of preference, if any)*

( ) **Alternative** ( ) **Conventional** ( ) **Innovative** ( ) **Modified Conventional** ( ) **Other** 252 ( ) **No Preference**

8. **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. industry) 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.

9. **Signature:** _____ 7-17-14
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**

RECEIVED JUL 17 2014

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

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 whicheyer is submitted if applicable ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information:

Applicant Name: Tom McClellan Address: 243 Corona Circle, Mooresville, NC 28117 Phone: 704-252-0975
Owner Name: VentureCommUC New Quest Homes DC Address: P.O. Box 5744 Mooresville NC 28117 Phone: 704-752-0975

Property Information:

Street Address: 140 Sleepy Cove Trail, Mooresville, NC 28117

Subdivision Name: Bay Crossing Section/Phase: _____ Lot Number: 14

Driving Directions: _____

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

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

Maximum Number of Bedrooms: #5
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: _____
Maximum Number of Employee: _____
Maximum Number of Seats/Beds/Other: _____

Water Supply:

( ) 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: T. J. McClellan 7-7-14
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

PAID
#1014 MH 7/17

Paul Penninger
to Benjamin Aldridge

Wed, Jul 22 9:25 AM

Re: Bay Crossing 16

I am OK with you changing our fast track plan for the new house as long as the permit meet all the rule and ICHD requirements. Paul

On Jul 22, 2015 9:13 AM, "Benjamin Aldridge" <BAldridge@co.iredell.nc.us> wrote:

> Paul,
>
> As we discussed on the phone, the pool will be removed from the site plan and the tanks will be placed behind the house, no closer than 50' to the well. The drain field will need to be a max of 18" deep to avoid saprolite. I've noted the changes on the site plan and changed the max trench bottom depth on the permit.
>
> Thanks,
>
> Ben Aldridge, REHS
> Iredell County
> On Site Waste Water
> Private Water Wells
> 704-660-3632

IREDELL COUNTY HEATLH 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:

- X Property Line measurements are clearly identified…
- X 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
- X Front and side setbacks from property line…
- X Preferred driveway location and configuration, preferred well location…
- X Area you prefer your septic system to be placed…
- X North arrow, or other sufficient indicator of direction…

Circle N/A on the following if appropriate:

- X 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

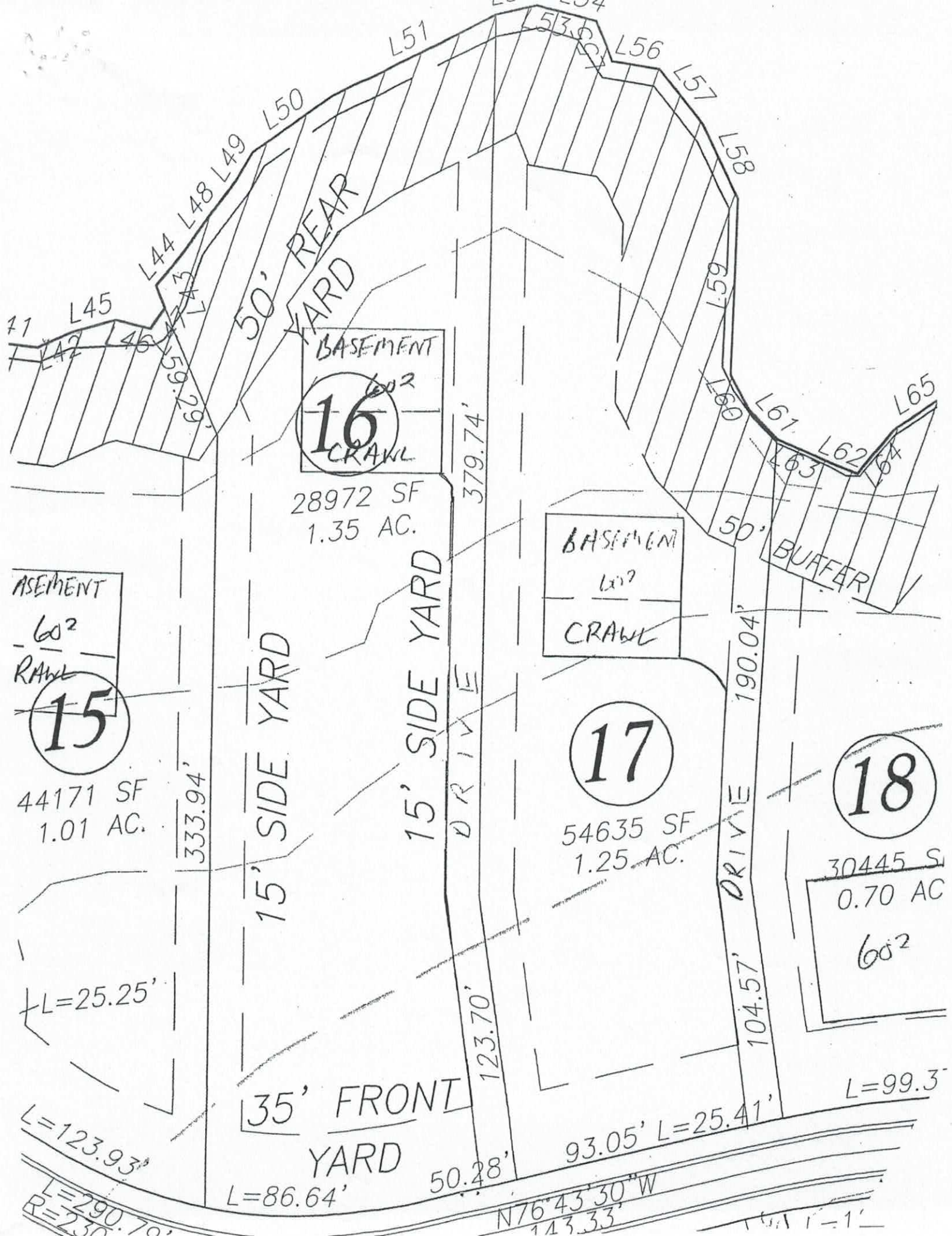
check your points

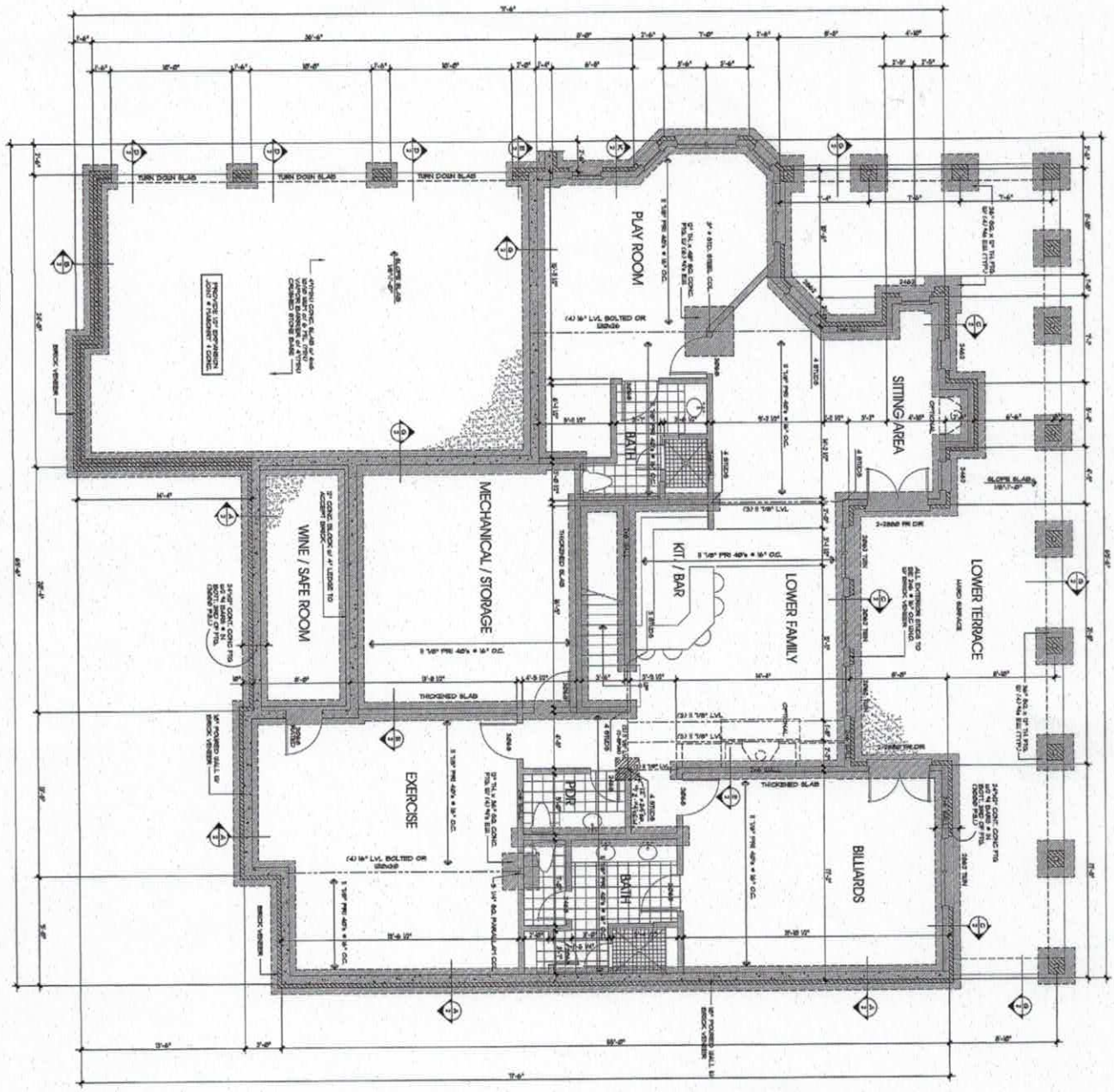
Signature: _____ DATE 7-17-14

REQUIRED property owner or owner's legal representative signature.

USE THIS SPACE TO DRAW YOUR SITE PLAN

SEE Attached


L51
L50
L49
L48
L44
L45
L42
L46
L43
L59
50' REAR YARD
BASEMENT
60²
16
CRAWL
28972 SF
1.35 AC.
379.74'
L53
L54
L56
L57
L58
L59
L60
L61
L62
L63
L64
L65
50' BUAFER
BASEMENT
60²
CRAWL
ASEMENT
60²
RAWL
15
44171 SF
1.01 AC.
333.94'
15' SIDE YARD
15' SIDE YARD
DRIVE
17
54635 SF
1.25 AC.
190.04'
DRIVE
104.57'
18
30445 S
0.70 AC
60²
L=25.25'
35' FRONT YARD
123.70'
L=86.64'
50.28'
93.05'
L=25.41'
L=99.3
L=123.93'
L=290.
R=230.
N76°43'30"W
143.33'



Acknowledgement of
Plans Submittal ONLY!

Date 7-20-15

Date APPROVED JUL 22 2015

NOTES:

PLAN NO.	PLAN INFO.		Ratliff residential DESIGNS
REVISIONS	A New Basement For *The Dally Residence* Mocksville, NC 28117		704.631.6031 www.ratliffresidentialdesigns.com

DRAWING TITLE: NEW LOWER LEVEL PLAN

SHEET NO. S1 OF 2 SHEETS

DATE 07.06.15

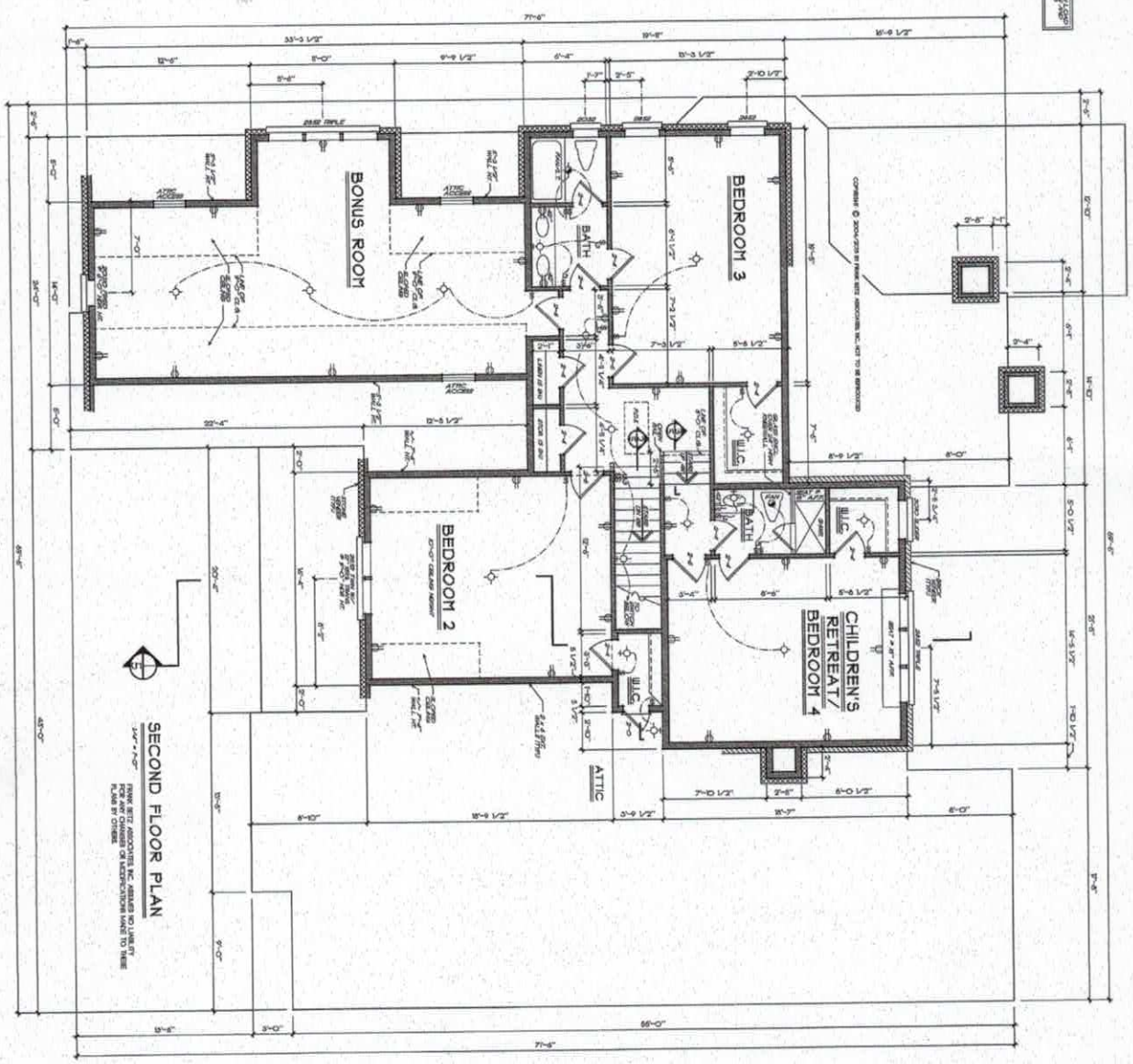
DRAWN BY DR. CHECKED BY

SEAL

Acknowledgement of
Plans Submittal ONLY!

T. Mollo Date 7-20-15

BJ Date APPROVED JUL 22 2015



SECOND FLOOR PLAN

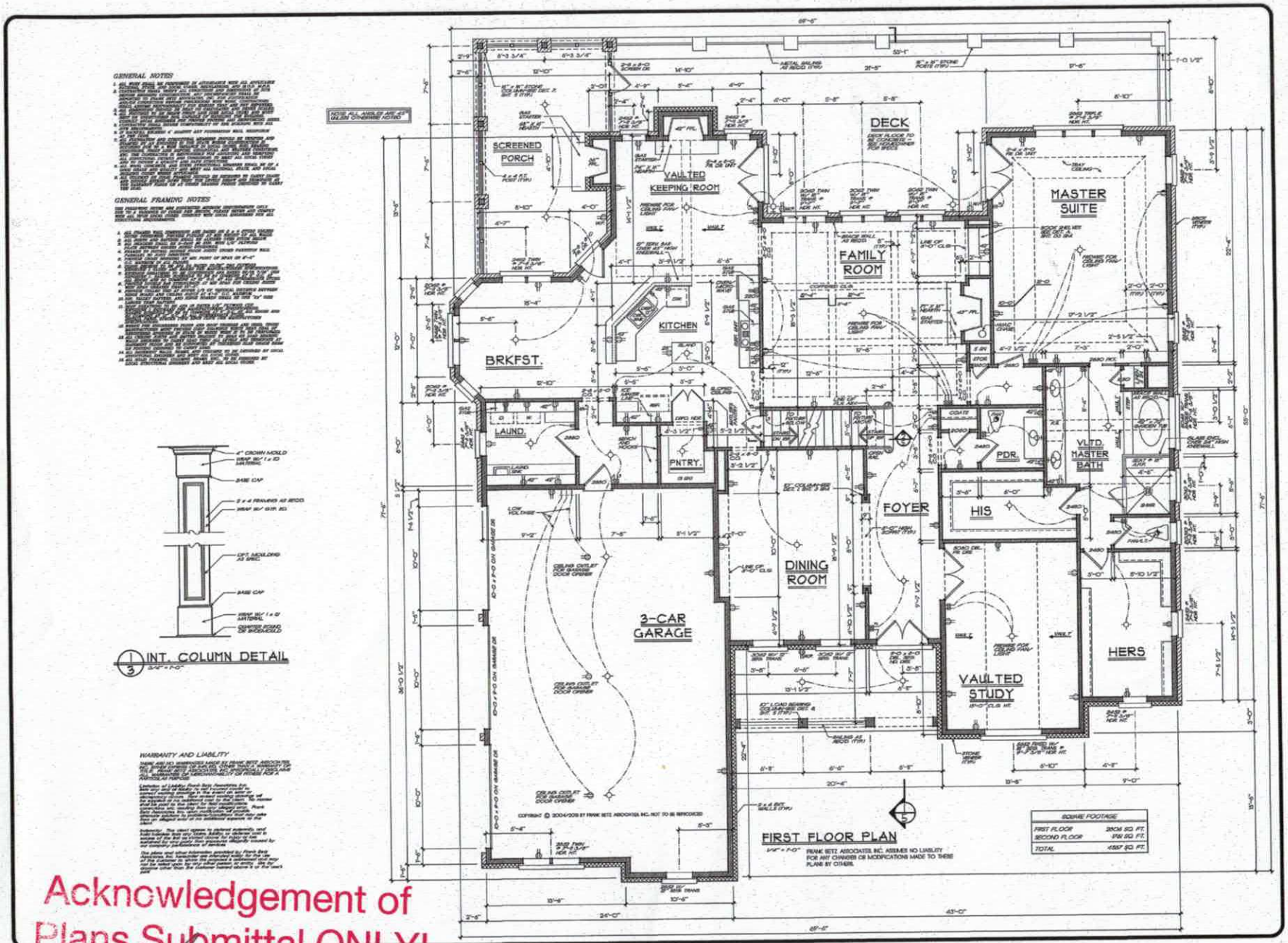
SHT 4 OF 5

FRANK BETZ ASSOCIATES, INC.
DESIGNERS OF CUSTOM AND STOCK HOMEPLANS
3550 GEORGE BUSBEE PARKWAY
SUITE 190
KENNESAW, GEORGIA 30144
770-431-0888 888-717-3003

SECOND FLOOR PLAN

THE GREYWELL

THE DALLY RESIDENCE
MOORESVILLE, NC



GENERAL NOTES

GENERAL FRAMING NOTES

3 INT. COLUMN DETAIL
3/4" = 1'-0"

WARRANTY AND LIABILITY

Acknowledgement of Plans Submittal ONLY!

Date 7-20-15

APPROVED Date JUL 22 2015

REVISIONS	DATE	BY

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THE DALLY RESIDENCE
MOORESVILLE, NC

FIRST FLOOR PLAN / DETAIL

THE GREYWELL

FRANK BETZ ASSOCIATES, INC.
DESIGNERS OF CUSTOM AND STOCK HOMEPLANS
3550 GEORGE BUSBEE PARKWAY
SUITE 190
KENNESAW, GEORGIA 30144
770-431-0880
888-717-3003

BY: CSC CHK: KDF
JLB JDH

DATE: 6/20/2014
05/20/15

SHEET: 3
OF: 5

IREDELL COUNTY

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

APPLICATION NUMBER
204723
Issue Date: 07/17/2014

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4639518099.000	140 SLEEPY COVE TRAIL, MOORESVILLE, NC 28117	MOORESVILLE

Owner Information	Applicant Information
Owner: BISHOP M C FAMILY TRUST	Applicant: VENTURE COMMERCIAL LLC
Address: 24355 VIA ISABELLA MURRIETA, CA 92562	Address: PO BOX 5144 MOORESVILLE, NC 28117
Phone:	Phone: 704-799-8489

Use Requested	Zone Code
SFD	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
1.340	35.00	50.00	15.00	15.00	CACL	AE

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: J-J Medd Date: 12-17-14

Permit Number	17444	TOTAL FEES:	$ 77.25