IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 216171

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

PIN # 4639-62-3293

APPLICANT: Chuck Twilley APPLICANT ADDRESS: 138 Rehoboth Lane Mooresville, NC 28117

SITE ADDRESS: 162 Bay Shore Loop Mooresville, NC PHONE: unavailable ALT. PHONE:

SITE DIRECTIONS: Perth Rd North from Rt. 150 → TL onto Liva Drive → TR onto Bay Crossing → TL onto Bay Shore Loop → On Right

SUBDIVISION: Bay Crossing SECTION: 2 LOT # 96 LOT AREA: 0.72 acres DESIGN FLOW: 360 gal/day L.T.A.R.: 0.30

Septic Tank	1000 (gal)	STB	338	Date	3-16-17
Pump Tank	— (gal)	PT	—	Date	—
Pump Make	—	Model	—	Serial #	—
# Nitrification Fields	1	# Lines	4	Linear Ft:	300
Trench Width	36"	Max. Trench Bottom Depth	36"	Gravel Depth	—

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

System Description: 25% Reduction

Repair System Description: LP-PPBPS

Maintenance Agreement Required: ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

☒ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing

No. Bedrooms 3 No. Persons 6 No. Employees ____ ☒ Crawl Space

Water Supply: ☒ Private ☐ Public ☐ Community

☐ Basement w/o plumbing

Comments / Conditions: Follow all N.C. septic rules. Direct house downspout drains away from sewage disposal system area. Recommend pumping septic tank every 3-5 years. The small 8"-12" undulating berms crossing the drainfield area are to be removed / graded away @ time of construction.

INITIAL SITE SKETCH

See Attached Design by Michael Athanas + Associates

Dated 1-21-16
Approved 2-3-16

AS BUILT SKETCH

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

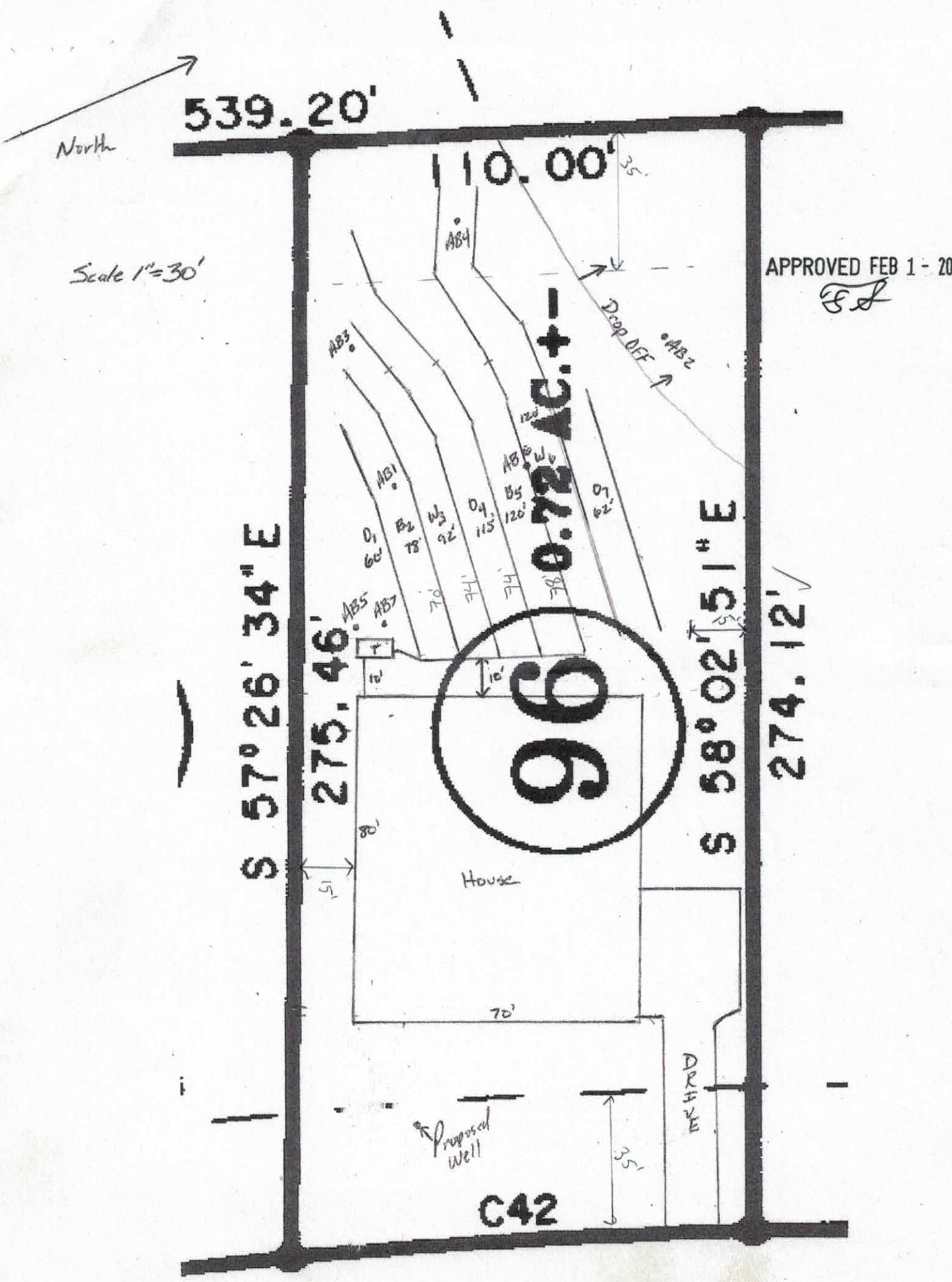
☐ IMPROVEMENT PERMIT with plat valid without expiration. ☒ IMPROVEMENT PERMIT with site plan valid for 60 mos. ☑ AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

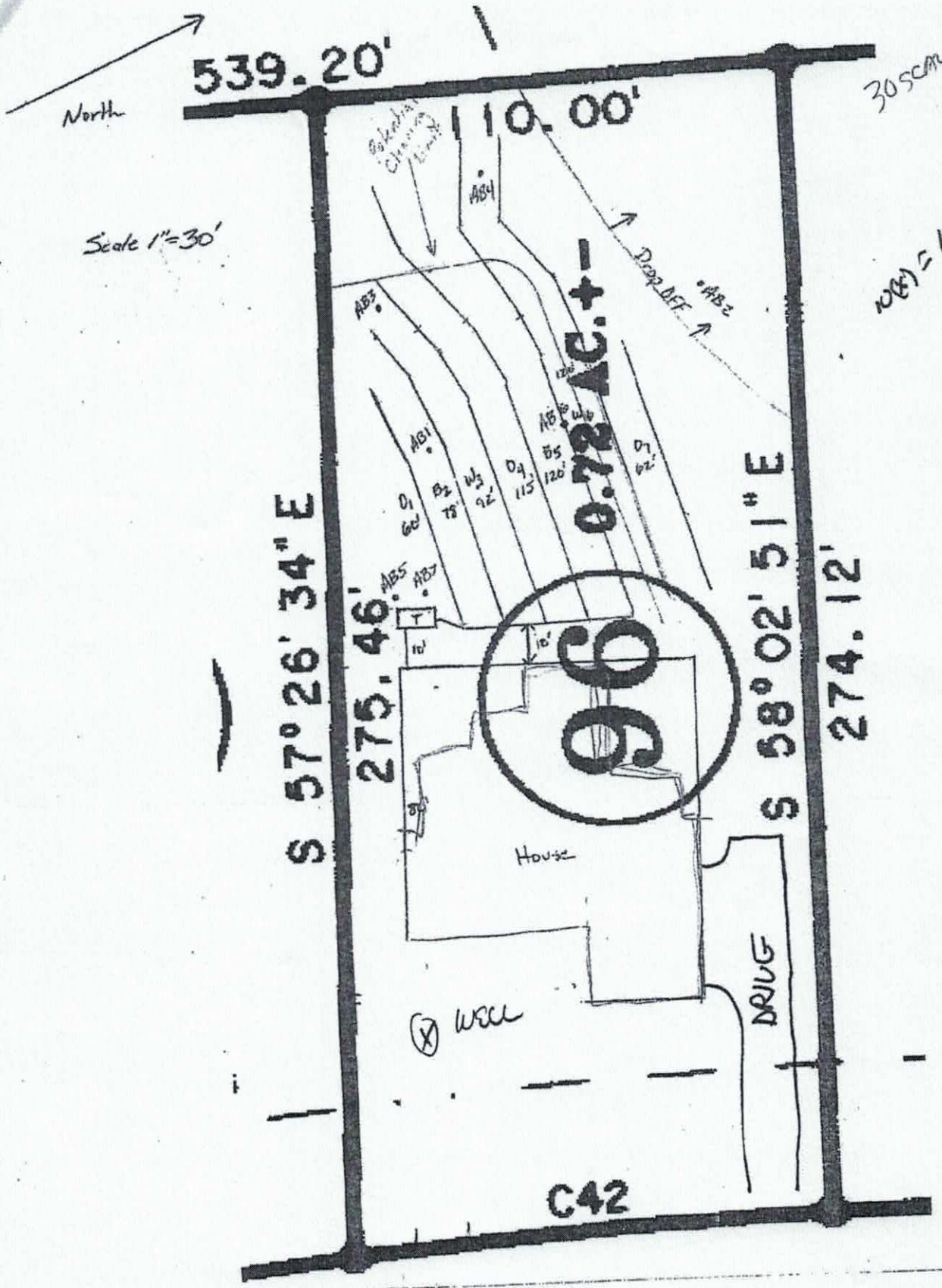
Owner / Applicant Signature: Chuck Twilley Date: 2-4-16 Installed by: ABERNATHY

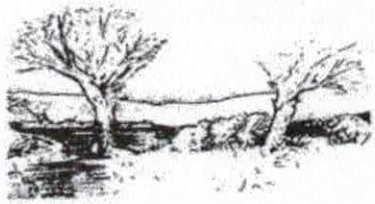
IMPROVEMENT PERMIT by: Thomas D. Shuck Date: 2-3-16 OPERATION PERMIT by: RA-005 Date: 4-18-17

AUTHORIZATION TO CONSTRUCT by: RA-005 Date: 7-8-16 Existing System Inspected by: _____ Date: _____

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


North
539.20'
110.00'
Scale 1"=30'
APPROVED FEB 1 - 2016
AB4
AB3
AB2
Drop Off
AB1
AB5
AB6
AB7
0.72 AC.+/-
96
S 57° 26' 34" E
275.46'
S 58° 02' 51" E
274.12'
House
Proposed Well
DRIVE
C42


North
539.20'
110.00'
Scale 1"=30'
0.72 Ac.+/-
S 57° 26' 34" E
275.46'
S 58° 02' 51" E
274.12'
House
DRIVE
C42
ABS
AB1
AB2
AB3
AB4
AB5
AB6
Drop Off
30 SCALE



MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887

APPROVED FEB 1 - 2016

Reference: Data Sheet for 162 Bay Shore Loop; Lot 96 Bay Crossing; Iredell County NC

Addition Footprint: 80'x70'
Building Setback: 35' Front/Rear, 15' Side,
Water Source: Private Well
Number of Bedrooms: 3/360 gpd
Proposed LTAR: 0.3 gpd/ft2
Suggested System Type: 25% Reduction
Suggested Repair System Type: PPBPS
Distribution: Gravity; Endcaps/D Boxes
Proposed Trench Bottom Depth: 36"
Septic/ Pump tank size: 1000 Septic Tank

Line	Actual Length	Design Length
Orange 1	60'	
Blue 2	**78'**	**75'**
White 3	**92'**	**75'**
Orange 4	**115'**	**75'**
Blue 5	**120'**	**75'**
White 6	120'	
Orange 7	62'	

Initial System: 300' 25% Reduction **Repair System:** 242' PPBPS

Comments: The purpose of the evaluation is to have the property permitted for a 3-bedroom system.

- The property was previously permitted by the Iredell County Health Department. The permit has expired.
- MA&A is proposing the system to go in the same area as the previous permit. MA&A extended the area slightly to the rear of the property. Additional auger boring were evaluated in this area.
- AB#5 had an auger refusal at 25". Another boring was dug less than 10' away and no restrictions were found. MA&A believe that this was a floater rock and not an indication of a restrictive horizon.

Client Contact Information: Chuck Twilley
138 Rehoboth Lane
Mooresville, NC 28117

DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

PROPERTY ID #: Lot 96 Bay Crossing; 162 Bayshore Loop
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

APPROVED FEB 1 - 2016

OWNER: David Newins
APPLICATION DATE
ADDRESS: 27 Bauer Ave. Manorville, NY 11949
DATE EVALUATED: 12/22/2015
PROPOSED FACILITY: 3-Bedroom Residence
PROPOSED DESIGN FLOW (.1949): 360 GPD
PROPERTY SIZE: 0.72 Acres
LOCATION OF SITE: Lot 96; Bay Crossing Subdivision; 162 Bayshore Loop
PROPERTY RECORDED: 7/18/2008

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)		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	
AB 1	L 3-5%	0"-11"	RBr SCL WSBK	SS SP FR NEXP		48"	Few to common saporlite inclusions 36"-48"	None	.3
		11"-36"	R C SBK	SS SP FR NEXP					
		36"-48"	R CL WSBK	SS SP FR NEXP					
AB 2	L 8-10%	0"-3"	RBr SCL WSBK	SS SP FR NEXP		48"	Few to common saporlite inclusions 41"-48".	None	.3
		3"-41"	R C SBK	SS SP FR NEXP					
		41"-48"	R CL WSBK	SS SP FR NEXP					
AB 3	L 3-5%	0"-3"	Br SCL WSBK	SS SP FR NEXP		48"		None	.3
		3"-48"	R C SBK	SS SP FR NEXP					
AB 4	L 3-5%	0"-14"	RBr SCL WSBK	SS SP FR NEXP		48"	Few to common saporlite inclusions 34"-48".	None	.3
		14"-34"	R C SBK	SS SP FR NEXP					
		34"-48"	R CL SBK	SS SP FR NEXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	900 FT2	726 FT2
System Type(s)	25% Reduction	PPBPS
Site LTAR	.3	.3

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

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet)

DEPARTMENT OF ENVIRONMENT
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

PROPERTY ID #: Lot 96 Bay Crossing; 162 Bayshore Loop
DATE OF EVALUATION: 12/22/2015
COUNTY: Iredell

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
AB 5	L 3-5%	0"-3"	RBr SCL WSBK	SS SP FR NEXP		25"		AR @25"	.3
		3"-25"	R C SBK	SS SP FR NEXP					
			See notes below.						
AB 6	L 3-5%	0"-10"	R SL WSBK	SS SP FR NEXP		48"			.3
		10"-35"	R C SBK	SS SP FR NEXP					
		35"-48"	R CL WSBK	SS SP FR NEXP					
AB 7	L 3-5%	0"-3"	R SL WSBK	SS SP FR NEXP		48"			.3
		3"-35"	R C SBK	SS SP FR NEXP					
		35"-48"	R CL WSBK	SS SP FR NEXP					

COMMENTS: AB#5 is not indicative of the site. MA&A believe that it was a floater rock. AB#7 was dug within 10' and no rock was encountered.

APPROVED FEB 1 - 2016

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

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

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

OWNER: David Newins — APPLICATION DATE: 1-21-16
ADDRESS: 27 Bauer Ave, Manorville, NY 11949 — DATE EVALUATED: 1-29-16
PROPOSED FACILITY: 3 BR House (for LSS) PROPOSED DESIGN FLOW (.1949): 360 gal/day — PROPERTY SIZE: 0.72 acres
LOCATION OF SITE: 162 Bay Shore Mooresville — PROPERTY RECORDED: Yes
WATER SUPPLY: ☒ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☒ Auger Boring ☐ Pit ☐ Cut — TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1 Adjusted "ABI" of LSS	Shoulder 7%	0-6	Sandy Loam weak SBK	Very Friable, SS, Sp, Sexp	—	48	—	—	0.3 PS
		6-8	Sandy clay Loam weak SBK	Friable, Ss, Sp, Sexp					
		8-14	clay Loam weak SBK	Slightly Friable, SS, Sp, Sexp					
		14-32	Clay weak SBK	Slightly Firm, SS, Sp, Sexp					
		32-48	Clay Loam medium SBK	Friable SS, Sp, Sexp					
2	Shoulder 7%	0-8	Sandy Clay Loam weak SBK	Very Friable, SS, Sp, Sexp	—	48	—	—	0.3 PS
		8-14	clay Loam weak SBK	Slightly Friable, SS, Sp, Sexp					
		14-33	clay medium SBK	Slightly Firm, SS, Sp, Sexp					
		33-	clay Loam weak SBK	Slightly Friable, SS, Sp, Sexp					
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	Yes	Yes
System Type(s)	25% Reduction	LP PPBWS 30%
Site LTAR	0.7	0.3

OTHER FACTORS (.1946): —
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Tom Shuck
OTHER(S) PRESENT: —

COMMENTS: Good topography! may need to shave down some micro-berms on install

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

Applicant Information:

Applicant Name: Bluefield Builders Address: 127 Promenade Dr. Suite B Mooresville NC 28117 Phone: 704 746 358

Owner Name: Charles Twilley Address: 105 Joselyn Lane Apt 303 Mooresville NC 28117 Phone: 704 340 8982

Property Information:

Street Address: 162 Bayshore Loop

Subdivision Name: Bay Crossing Section/Phase: _____ Lot Number: 96

Driving Directions: Perth Road to West on Liva Lane, Right turn onto (Bay Crossing). Left on (Bay Shore Loop. Lot on the right

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: 3
Maximum Number of Occupants: 4
( ) Swimming Pool
( ) Other Addition/Structure: _____

(X) 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 (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: _____ 6/23/16
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

Public Health

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public 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, Charles & Jean Twilley, am the legal owner(s) of the property located at 162 Bayshore Loop Mooresville NC 28117 (Lot 96), identified as PIN (Parcel Identification Number) 4639-62-3293, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) Down Hardy, Bluefield Builders, 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.

Charles Twilley Jean Twilley 6-14-16 — 6/14/16

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

RECEIVED JAN 21 2016

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

Paid $350.00
#21617

Application For:
( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) Septic Improvement Permit ( ) Authorization to Construct ( ) Existing System Inspection ( ) Septic System Repair

THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS.

Page 2: *Site Plan Worksheet* form MUST accompany this application

The following optional attachments may also be submitted: (X) 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:

Applicant Name: Chuck Twilley **Address:** 138 Rehoboth Ln Mooresville NC 28117 **Phone:**

Owner Name: David Newins **Address:** 27 Bauer Ave. Manorville NY 11949 **Phone:**

Property Information:

Street Address: 162 Bay Shore

Subdivision Name: Bay Crossing **Section/Phase:** **Lot Number:** 96

Driving Directions: Path, TL Liva TR Bay Crossing, TL Bay Shore, on Rt

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

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

Maximum Number of Bedrooms: 3 cert
Maximum Number of Occupants:
( ) Swimming Pool
( ) Other Addition/Structure:

(X) 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:

(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 (X) Other: Accepted

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

1/21/2016
DATE

Public Health
Iredell County Health Department

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public Health
Iredell County Health Department

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

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

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

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

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

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

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

I, CHARLES E. & JEAN D. TWILLEY, am the legal owner(s) of the property located at L96-BAY CROSSING-PH2-PB 47 33 / LOT 96 BAY SHORE LOOP, identified as PIN (Parcel Identification Number) 4639623293, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) MICHAEL ATHANAS, MICHAEL ATHANAS & ASSOCIATES, 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.

Charles E. Twilley Twilley 1/3/16 — 1/3/14

Signature of Owner(s) Date Signature of Witness Date

Please return this signed form to the appropriate office:

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

Statesville - Environmental Health
[redacted]
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

IREDELL COUNTY HEALTH DEPARTMENT

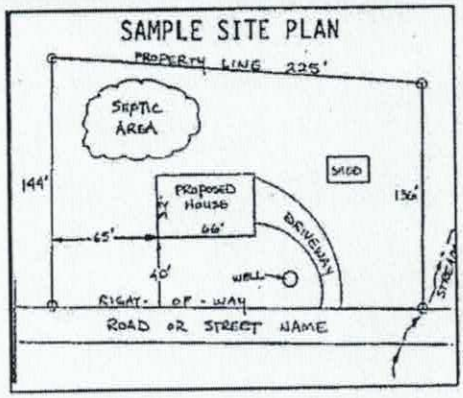
ENVIRONMENTAL HEALTH DIVISION

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:

- (X) Property Line measurements are clearly identified
- (X) All proposed structures are indicated
- (X) Front and side setbacks from property line
- (X) Preferred driveway location and 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:

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

See attached

Signature: _____ 6/23/16

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

IREDELL COUNTY HEALTH DEPARTMENT

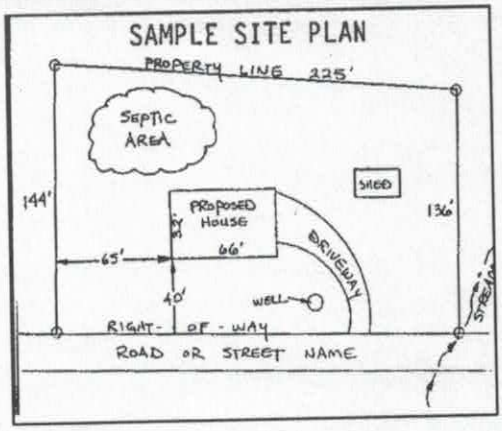
ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *SITE PLAN WORKSHEET*

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

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- **( ) 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

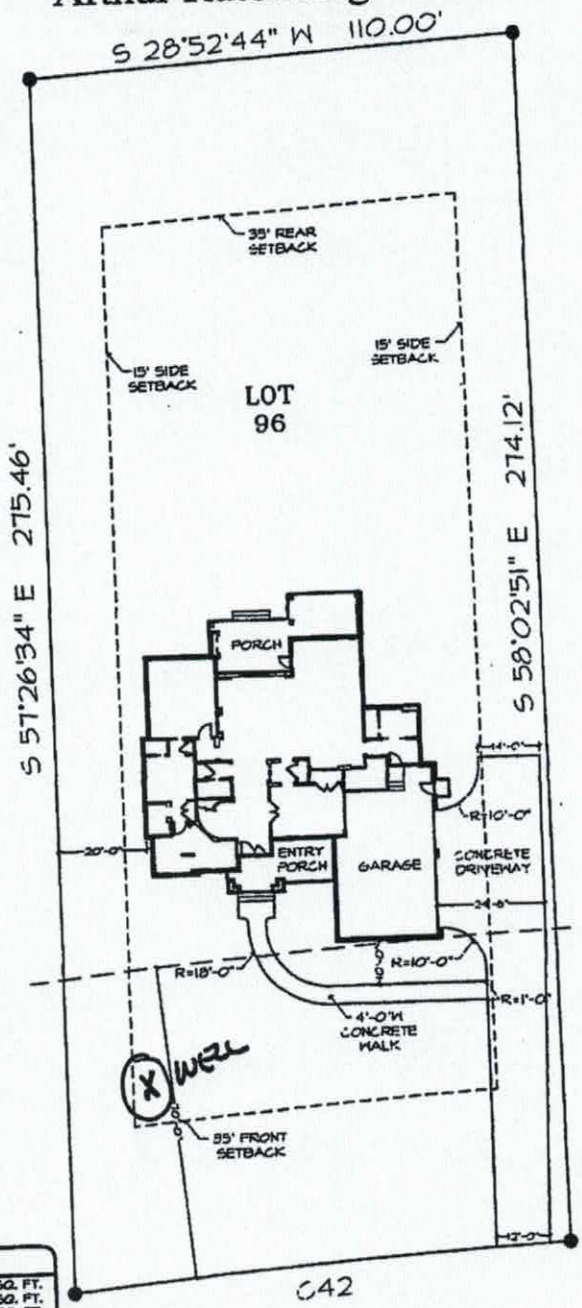
Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site

See Attached Plan

Signature: _____ 1/21/2016

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

Arthur Rutenberg Homes



LOT AREAS:	
HOUSE	3,893 SQ. FT.
DRIVEWAY (TO PROPERTY LINE)	1,771 SQ. FT.
WALKWAY	284 SQ. FT.
PERVIOUS	24,553 SQ. FT.
TOTAL	30,542 SQ. FT.

CURVE DATA:					
CURVE	RADIUS	LENGTH	CHORD	DELTA	CHORD BRNG
C42	1,737.5'T	113.00'	112.98'	N/A	N 28°17'15" E

SCALE: 1" = 40'

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Note: Plan information is conceptual only. Certain items may be changed at production stage.

Franchise: #98 Bluefield Builders, LLC 1131F-R-01-3S-"C"
File #: Twilley-A
Drawn By: WGC
Date: December 22, 2015

A Custom Residence for:

Mr. and Mrs. Twilley

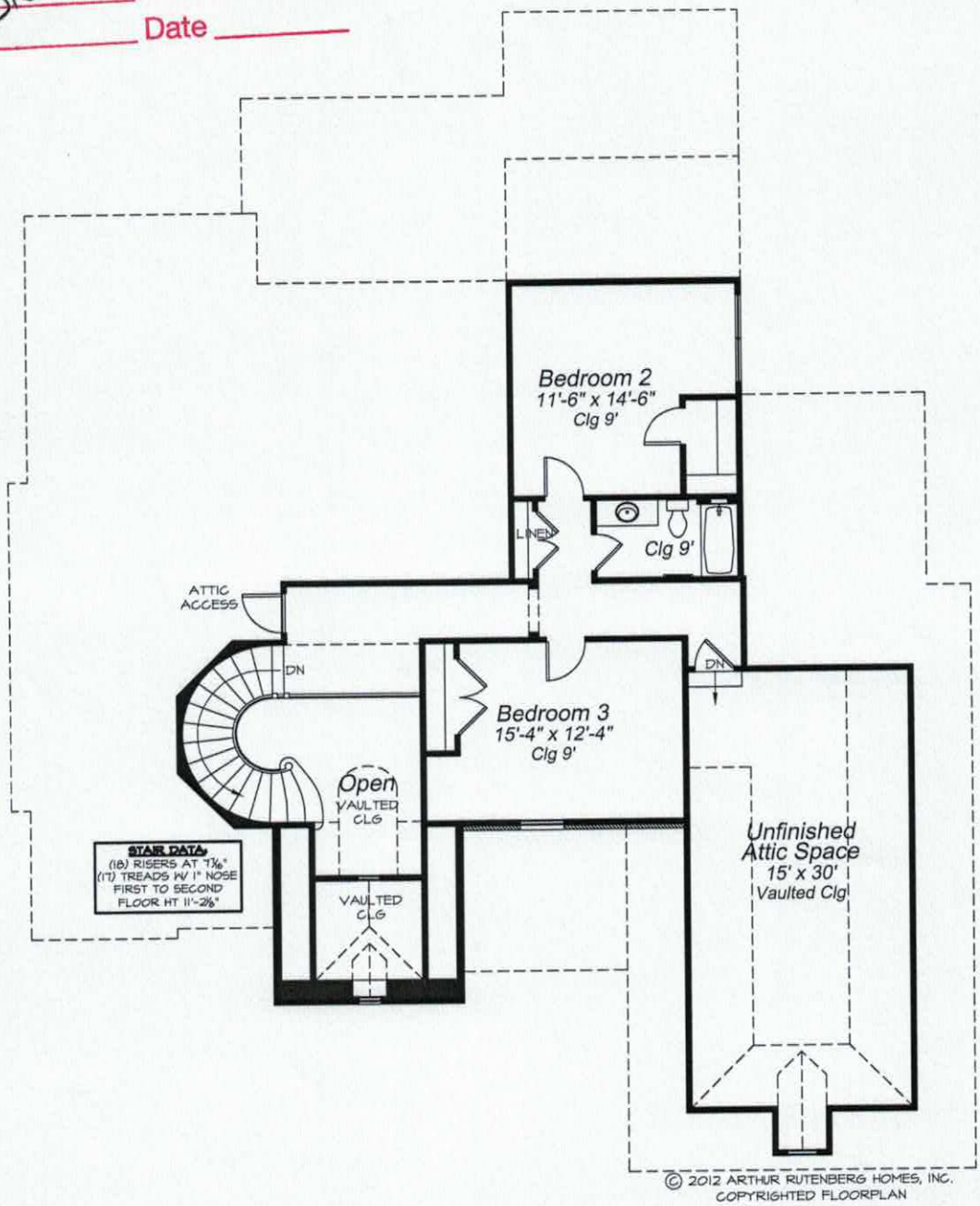
Bay Crossing, Phase 2, Lot 96

Arthur Rutenberg Homes

Acknowledgement of Plans Submittal ONLY!

BA Date 7-8-16

Date



MEASUREMENT IN FEET

0 5 10 15 20 25 30 35 40 45 50 55 60 65 70 75

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Franchise: #98 Bluefield Builders, LLC
File # : Twilley-B 1131F-R-01-3S-"C"
Drawn By: MDF
Date: May 17, 2016

A Custom Residence for:

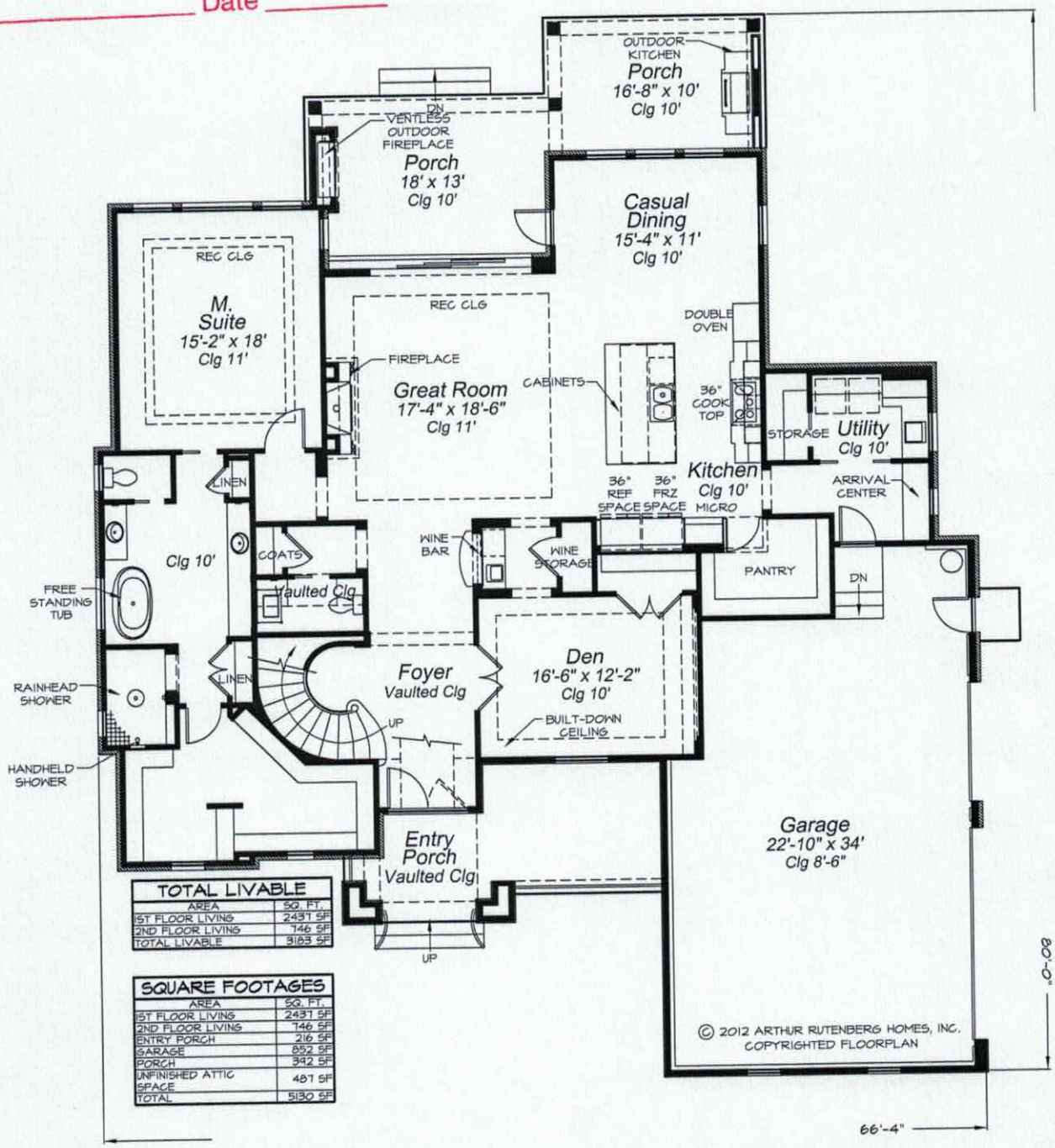
Mr. and Mrs. Twilley

Acknowledgement of Plans Submittal ONLY!

BA Date 7-8-16

Date

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TOTAL LIVABLE AREA	SQ. FT.
1ST FLOOR LIVING	2437 SF
2ND FLOOR LIVING	746 SF
TOTAL LIVABLE	3183 SF

SQUARE FOOTAGES AREA	SQ. FT.
1ST FLOOR LIVING	2437 SF
2ND FLOOR LIVING	746 SF
ENTRY PORCH	216 SF
GARAGE	852 SF
PORCH	342 SF
UNFINISHED ATTIC SPACE	481 SF
TOTAL	5130 SF

MEASUREMENT IN FEET

0 5 10 15 20 25 30 35 40 45 50 55 60 65 70 75

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Franchise: #98 Bluefield Builders, LLC
File # : Twilley-A 1131F-R-01-3S-"C"
Drawn By: MDF
Date: December 16, 2015

A Custom Residence for:

Mr. and Mrs. Twilley

IREDELL COUNTY

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

APPLICATION NUMBER
216171
Issue Date: 01/21/2016

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4639623293.000	162 BAY SHORE LOOP, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: NEWINS DAVID W+LISAGENE	Applicant: MICHAEL ATHANAS & ASSO
Address: 27 BAUER AVENUE MOORESVILLE, NY 11949	Address: 561 ENNIS RD WEDDINGTON, NC 28173
Phone:	Phone: 704-576-3887

Use Requested	Zone Code
SFD	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.720	35.00	35.00	15.00	15.00	CACL	X

Remarks:

The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions, plat conditions and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

Applicant: _____ Date: _____

Permit Number	58591	TOTAL FEES:	$ 77.25