RECEIVED OCT 1 4 2014

IREDELL COUNTY HEALTH DEPARTMENT

Paid $40.00 Statesville #206381

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

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

Applicant Name: JASON YOUNG Address: 157 leaning tower Dr. Phone: (218) 230-3786

Owner Name: JASON YOUNG Address: 157 Leaning Tower Dr Phone: (218) 230-3786

Property Information:

Street Address: 157 Leaning Tower Dr. Mooresville NC 28117

Subdivision Name: Bells Crossing Section/Phase: 2 Lot Number: 38

Driving Directions: exit 36 off I-77 go west on 150 take right on Perth Rd. Bells Crossing on the left, first right then first left onto Leaning Tower Dr.

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

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

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

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

Non-Residential Site Development:

Type of Business: _____
Square Footage of Building: 1200 sq. ft
Maximum Number of Employee: _____
Maximum Number of Seats/Beds/Other: _____

PAID

Water Supply:

( ) New Well ( ) Existing Well (X) 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: _____

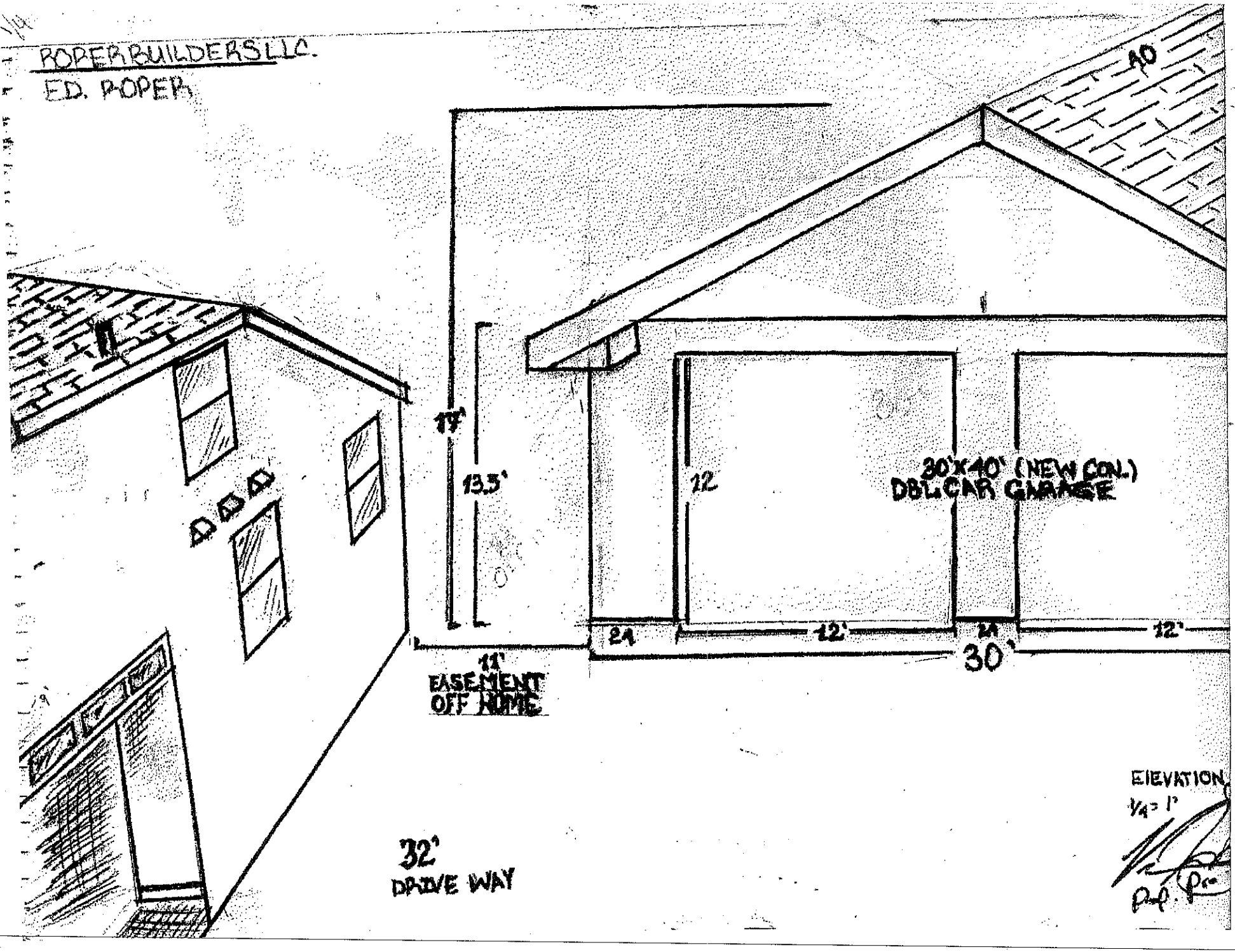
Please answer the following to the best of your ability:

( ) 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: _____ 10/14/14
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

ROPER BUILDERS LLC.
ED. ROPER



ELEVATION
1/4" = 1'

IREDELL COUNTY

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

APPLICATION NUMBER
206381
Issue Date: 10/14/2014

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4639955462.000	157 LEANING TOWER DRIVE, MOORESVILLE, NC 28117	MOORESVILLE

Owner Information	Applicant Information
Owner: YOUNG, JASON	Applicant: YOUNG, JASON
Address: 157 LEANING TOWER DRIVE MOORESVILLE, NC 28117	Address: 157 LEANING TOWER DRIVE MOORESVILLE, NC 28117
Phone: 218-230-3986	Phone: 218-230-3986

Use Requested	Zone Code
DET GARAGE 30*40	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
39.150		10.00	10.00	10.00	PACL	X

Remarks:

Accessory Buildings and Structures Zoning Permit: Shall not be erected in front building line of the principal structure. Shall not be erected within 25 ft of any side street or corner lot. Shall not be erected within 10 ft of any line not a street line or within 10ft of any other building on the same lot. Shall not be erected within the 50ft buffer zone on lake front properties. Shall not exceed the height limitation of the principal structure. Exceptions to the front building line location: if the lot equals 1 acre or greater, and is double frontage lake lot or the location of the building/structure is 150 feet or greater than from the frontage street right of way line than the structure can be located in front of home. Any accessory building or structure over 1200 sq/ft shall be setback a minimum of fifty (50) feet from any property line.

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	23991	TOTAL FEES:	$ 77.25

LOT 38 BELLS CROSSING SUBDIVISION

4-BEDROOM ACCEPTED STATUS GRAVITY SYSTEM
LINES 1-5A TOTAL 444 LINEAR FEET
EZFLOW OR CHAMBER
LTAR 0.275
25% REDUCTION
24" TRENCH DEPTH MAX

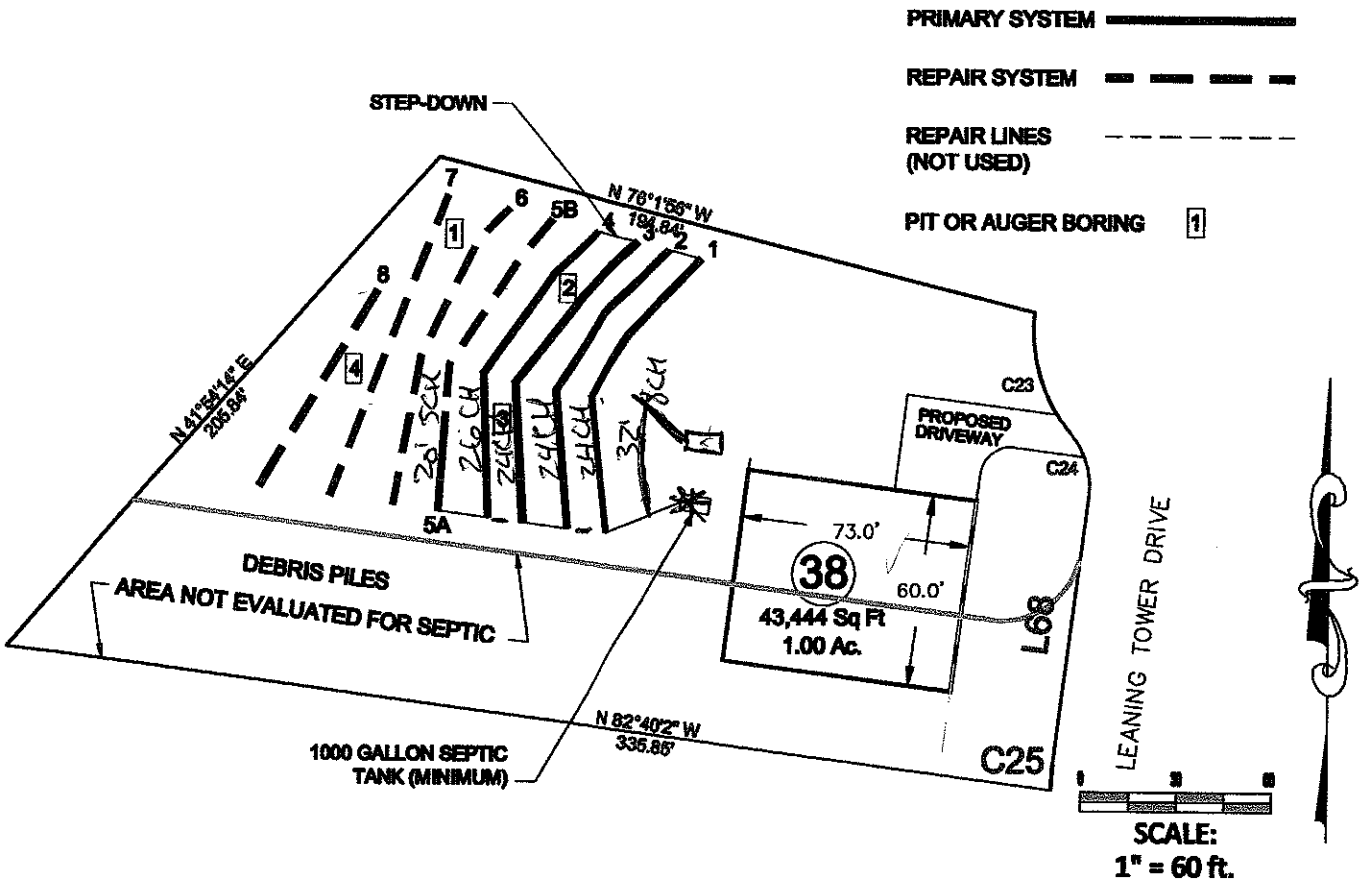
4-BEDROOM LPP FED PANEL BLOCK REPAIR
LINES 5B-8 TOTAL 363 LINEAR FEET
LTAR 0.3
50% REDUCTION
28" TRENCH DEPTH MAX

FOR GENERAL USE NOT A SURVEY
PRELIMINARY NOT FOR CONSTRUCTION

SOIL PROFILES AND ANALYSIS PROVIDED BY
CENTRAL CAROLINA SOIL CONSULTING PLLC

LINE SCHEDULE

LINE NUMBER	COLOR	FIELD ELEVATION	LENGTH (FT)
1	YELLOW	4.4	99
2	ORANGE	5.8	103
3	BLUE	8.8	109
4	RED	9.6	113
5A	YELLOW	12.0	20
5B	YELLOW	12.0	85
6	ORANGE	13.4	106
7	BLUE	15.0	100
8	RED	16.1	70



Bateman Civil Survey Company
Engineers • Surveyors • Planners
250 N. Main Street, Holly Springs, NC 27540 Ph: 919.577.1080 Fax: 919.577.1081
www.batemancivilsurvey.com info@batemancivilsurvey.com
NCBELS Firm No. C-2579

MeritageHomes

LOT 38
BELLS CROSSING SUBDIVISION
MOORESVILLE, NC
IREDELL COUNTY

DATE: 11/10/13 DRAWN BY AH CHECKED BY: TMB

Fast Track Fee Pd. Statesville $350.00 PA 1-6-14

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

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(✓) Septic Improvement Permit ( ) Authorization to Construct ( ) Existing System Inspection ( ) Septic System Repair

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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: 11605 N Community Rd ste 250

Applicant Name: Meritage Homes **Address:** Charlotte NC 28277 **Phone:** 704-307-6577

Owner Name: 11 **Address:** 11 **Phone:**

Property Information:

Street Address: 157 Leaning Tower Lane

Subdivision Name: Bells Crossing **Section/Phase:** **Lot Number:** 38

Driving Directions: 150 W - R onto Perth Rd - L into Bells Crossing - R onto N San Agustine Dr, L onto Leaning Tower In 9th lot on the R.

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: 4
Maximum Number of Occupants: 8
( ) 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: [signature] 1-3-14
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

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:

- ____ 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)

Signature: _____ 1-3-14

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

USE THIS SPACE TO DRAW YOUR SITE PLAN

IREDELL COUNTY

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

APPLICATION NUMBER
200908
Issue Date: 12/31/2013

Permit Type: IMPROVEMENT PERMIT APPLICATION

Parcel Number	Street Address	Jurisdiction
4639955462.000	157 LEANING TOWER DRIVE	MOORESVILLE

Owner Information	Applicant Information	Contractor Information
Owner: MERITAGE HOMES OF NC INC	Applicant: MERITAGE HOMES	Contractor: MERITAGE HOMES
Address: 17851 N 85TH ST SCOTTSDALE, AZ 85255	Address: 7761 BALLANTYNE COMMONS CHARLOTTE, NC 28277	Address: 7761 BALLANTYNE COMMONS PK PKWY SUITE CHARLOTTE, NC 28277
Phone:	Phone: 704-944-8903	Phone: 704-944-8903 License Type: BLDG License Number: 70995

Project Description

NEW SINGLE FAMILY - IREDELL

Scope of Work

SFD

Permit Details:

	IMPROVEMENT PERMIT FEE	Amount:	350.00
		Amount:	
		Amount:	
		Amount:	
		Amount:	
		Amount:	
		Amount:	

I hereby certify that all information in this application is correct and all work will comply with the state code and all other applicable state and local laws, ordinances and regulations. The respective department will be notified of any changes in the approved plans, a change of contractor, and/or specifications for the project permitted herein. This application becomes a permit only when validated and approved.

Signature of Owner/Contractor

Date: 12/31/2013

ANY PERMIT ISSUED EXPIRES SIX (6) MONTHS AFTER ISSUANCE IF NO INSPECTIONS HAVE BEEN MADE. ANY PERMIT ISSUED SHALL EXPIRE TWELVE (12) MONTHS AFTER LAST INSPECTION IF THE WORK IS DISCONTINUED.

Permit Number	3920	TOTAL FEES:	$ 350.00

Sheet: 1 of 2
Property ID: 4639-95-5462
Lot #: 38
File #:
AppID:

CCSC SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: Meritage Homes
Address: 11605 North Community House Road, Charlotte NC 28277
Proposed Facility: Single Family Design Flow (.1949) 480 gpd
Location of Site: Lot 38 Bells Crossing
Applicant: Same
Date Evaluated: 10-2-2013
Property Size: 1.0 ac
Property Recorded: 2013

Water Supply: [X] Public [ ] Individual [ ] Well [ ] Spring [ ] Other
Evaluation Method: [ ] Auger Boring [X] Pit [ ] Cut
Type of Wastewater: [X] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	.1940 Landscape Position/ Slope%	Horizon	Depth (IN.)	SOIL MORPHOLOGY .1941 Structure/ Texture	.1941 Consistence Mineralogy	b PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	LS	A	0-3	GR SL	VFR NS NP	10YR 3/2				
		E	3-10	GR SL	VFR NS NP	10YR 6/6				
		BT1	10-35	SBK Clay	FI SS SP	2.5YR 4/8	PS			PS 0.3
		BC	35-40"	WK SBK CL	FI SS SP	2.5YR 4/8	PS			PS 0.3
						20% 7.5YR 6/6				
		C	40-56	SE Loam	FR SS SP	5YR 5/8				
						15% 7.5YR 7/6				
2	LS	A	0-5	GR SL	VFR NS NP	10YR 3/2				
		BT1	5-11	SBK SCL	FI SS SP	7.5YR 5/8				
		BT2	11-23	SBK Clay	FI SS SP	5YR 5/8	PS			PS 0.3
		BT3	23-37	SBK Clay	FI SS SP	5YR 5/8	PS			PS 0.275
						15% 10YR 6/6				
		BC	37-46	WK SBK Clay	FI SS SP	5YR 6/8	PS			PS 0.275
						20% 10YR 7/8				
3	LS	A	0-3	GR SL	VFR NS NP	10YR 3/2				
		E	3-6	GR SL	VFR NS NP	10YR 6/6				
		BT1	6-12	SBK SCL	FI SS SP	10YR 6/6				
		BT2	12-28"	SBK Clay	FI SS SP	5YR 5/8				PS 0.275
		BC	28-34"	WK SBK SCL	FI SS SP	7.5YR 4/8				
		C	34-	M SCL	FI SS SP	15% 5YR 5/8				
						30% 10YR 8/4				
						10% 10YR 5/1				

Description	Initial System	Repair System
Available Space (.1945)	Yes	Yes
System Type(s)	Accepted Gravity	LPP PANEL
Site LTAR	0.275	0.3

Other Factors (.1946):
Soil Evaluation By: J. Hall
Others Present: M. Rose
Site Classification (.1948):
Site Evaluation By: Same
Others Present:

LICENSED SOIL SCIENTIST
JASON M. HALL
SEAL OF THE STATE OF NORTH CAROLINA
1248
STATE OF NORTH CAROLINA

Sheet: 2 of 2
Property ID:
Lot #: 38
File #:
AppID:

CCSC SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: Meritage Homes
Address: 11605 North Community House Rd, Charlotte NC 28277
Proposed Facility: Single Family Design Flow (.1949) 480 gpd
Location of Site: Lot 38 Bells
Applicant: Same
Date Evaluated: 10-2-2013
Property Size: 1.0 ac
Property Recorded: 2013

Water Supply: [X] Public [ ] Individual [ ] Well [ ] Spring [ ] Other
Evaluation Method: [ ] Auger Boring [X] Pit [ ] Cut
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PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 Structure/ Texture	.1941 Consistence Mineralogy	PROFILE FACTORS[b] .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
4	SS A	0-3	GR SL	VFR NS NP	10YR 3/2				
	BT1	3-21	SBK Clay	FI SS SP	2.5YR 4/8				PS 0.3
	BT2	21-35	SBK Clay	FI SS SP	5YR 5/8				PS 0.3
	C	35-51	GR Loam		5% 7.5YR 6/8 7.5YR 4/8				

Description	Initial System	Repair System
Available Space (.1945)	yes	yes
System Type(s)	Pumped Gravity	LPP Panel
Site LTAR	0.275	0.3

Other Factors (.1946):
Soil Evaluation By: J. Hall M. Burdette
Others Present:
Site Classification (.1948):
Site Evaluation By:
Others Present:

LICENSED SOIL SCIENTIST
JASON M. HALL
1248
STATE OF NORTH CAROLINA