ICHD–ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP-303006

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

PIN # 4639-93-3750

APPLICANT/OWNER: Meritage Homes / Gregory D'Amore | APPLICANT ADDRESS: 13925 Ballantyne Corporate Place #300 Charlotte, NC

SITE ADDRESS: 137 Abbeville Lane Mooresville, NC | PHONE: 704-944-8955 | ALT. PHONE

SITE DIRECTIONS: Perth Rd → Bells Crossing Dr → L on S. San Augustine → Abbeville → | SAP CONTROLLED: ☐ YES ☒ NO

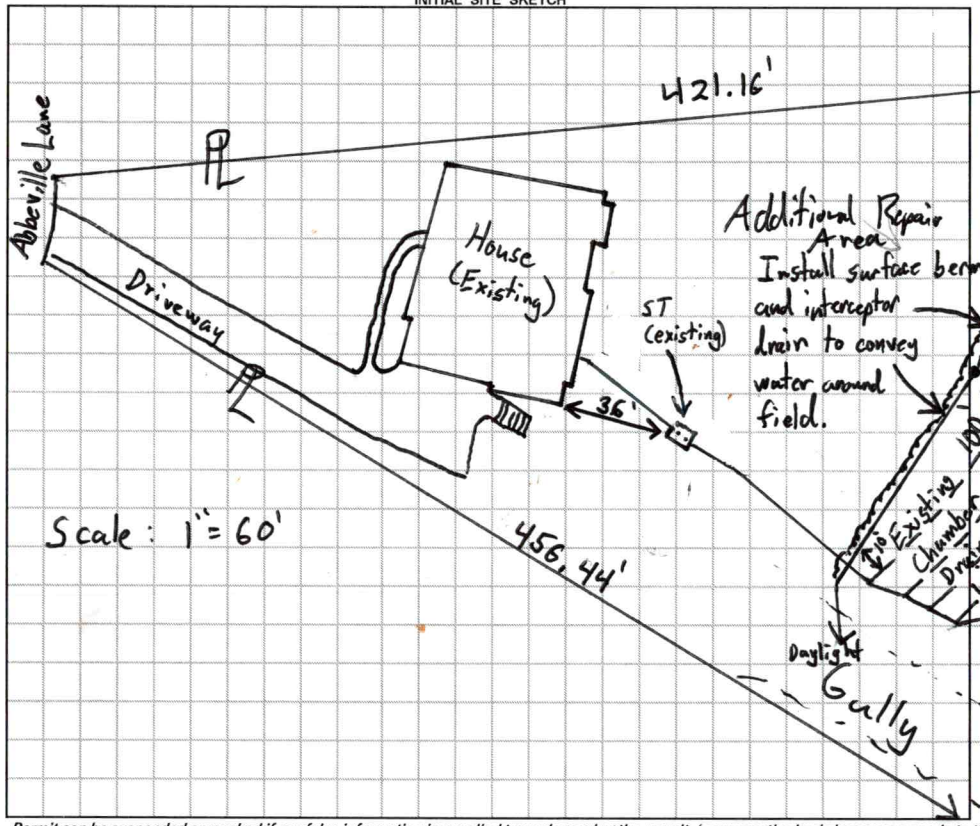
SUBDIVISION: Bells Crossing | SECTION: 3 | LOT # 116 | LOT AREA: 2.04 acres | DESIGN FLOW: 600 | L.T.A.R.: 0.30

Septic Tank	1500 (Existing) (gal)	STB	Existing	Date	Existing	☐ New System ☒ Repair ☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 5
Pump Tank	— (gal)	PT	—	Date	—	System Description:		☐ Business	No. Persons 10
Pump Make	—	Model	—	Serial #	—	Repair System Description:	25% Reduction + terminate existing laterals	☐ Other	No. Employees
# Nitrification Fields		# Lines	1	Linear Ft	88'	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☐ Crawl Space
Trench Width	36"	Trench Bottom Depth(Low side)	24"	Gravel Depth	—	☒ GRAVITY	☐ PRESSURE	☒ Basement w/plumbing	☐ Basement w/o plumbing

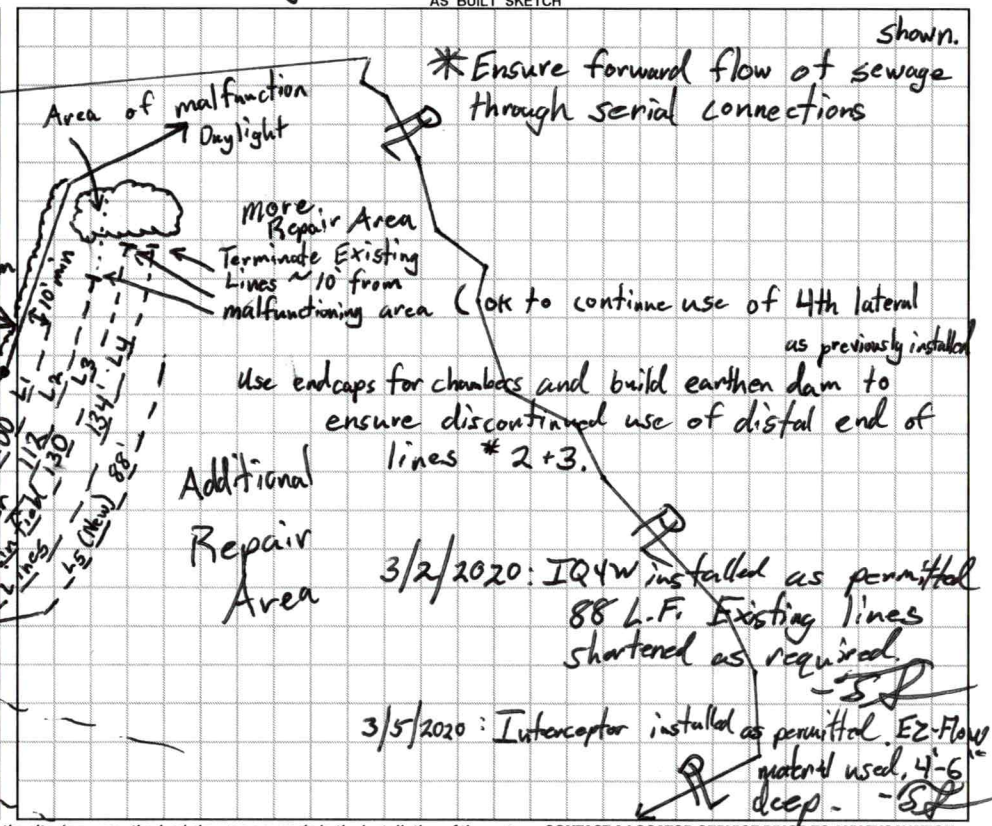
Water Supply: ☐ Private ☒ Public ☐ Community

Comments / Conditions: Install surface berm and interceptor drain a minimum of 10' upslope from existing to drainfield lateral. Interceptor to be minimum of 4" (48") deep. Drainfield lines to be terminated ≈10' short of malfunctioning location. Construct earthen berm to ensure discontinued use of distal ends of lines 2+3. Ensure that septic tank is water-tight. Install 88 l.f. of new drainfield line as shown.

INITIAL SITE SKETCH



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: [signature] Date: 1/13/2020 Installed by: Sid Gaskins

IMPROVEMENT PERMIT by: Tom Shuck Date: 1/10/2020 OPERATION PERMIT by: Tom Shuck Date: 3/6/2020

AUTHORIZATION TO CONSTRUCT by: Tom Shuck Date: 1/10/2020 Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inpsector to confirm your inspection time.

LINE SCHEDULE

LINE NUMBER	COLOR	FIELD ELEVATION	LENGTH (FT)
1	ORANGE	6.7	100
2	PINK	8.5	160
3	BLUE	10.2	160
4	ORANGE	12.2	159
5	YELLOW	14.2	84 NOT USED
6	PINK	17.3	83 NOT USED
7	RED	20.0	44 NOT USED

APPROVED FEB 12 2015

LOT 116 BELLS CROSSING SUBDIVISION

5-BEDROOM ACCEPTED STATUS GRAVITY SYSTEM
LINES 1-4 TOTAL 579 LINEAR FEET (USE 500FT)
EZFLOW OR CHAMBER
LTAR 0.3
25% REDUCTION
22" TRENCH DEPTH

5-BEDROOM DRIP IRRIGATION REPAIR
AREA REQUIRED 6000 SF
LTAR 0.1
6" TRENCH DEPTH

ABBEVILLE LANE

PROPOSED DRIVEWAY

CTS

TEMPORARY SEDIMENT BASIN

120.1'

PROPOSED HOUSE

82.0'

60.0'

16.0'

35.9'

N71°34'14"W 456.44'

S73°06'49"W 421.16'

N52°12'20"E 173.06'

OLD FARM ROAD

ADDITIONAL REPAIR AREA

SOIL LINE

DRIP AREA
6000 SF

116
88,656 Sq Ft
2.04 Ac.

L43 L44 L45 L46 L47 L48 L49 L50 L51 L52 L53 L54

SCALE:
1" = 60 ft.

FOR GENERAL USE NOT A SURVEY
PRELIMINARY NOT FOR CONSTRUCTION

SOIL PROFILES AND ANALYSIS PROVIDED BY
PRICE ENVIRONMENTAL RESOURCE CONSULTING, PC

PRIMARY SYSTEM

REPAIR SYSTEM

REPAIR LINES (NOT USED)

PIT OR AUGER BORING A

Bateman Civil Survey Company
Engineers • Surveyors • Planners

MeritageHomes

LOT 116
BELLS CROSSING SUBDIVISION
MOORESVILLE, NC
IREDELL COUNTY

DATE: 10/7/14 DRAWN BY: MB CHECKED BY:

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

Sheet ___ of ___
PROPERTY ID #: 9639-73-3950
COUNTY: Iredell

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

OWNER: Gregory D' Amore
ADDRESS: 137 Abbeville Lane Mooresville, NC
PROPOSED FACILITY: 5 BR SFR
LOCATION OF SITE: 137 Abbeville Lane Mooresville, NC
APPLICATION DATE: 12/9/19
DATE EVALUATED: 12/20/19
PROPERTY SIZE: 2.04 acres
PROPERTY RECORDED: Yes
PROPOSED DESIGN FLOW (.1949): _____
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	Distal LSS	0-6	SCL V.W.SBK Some Gravels						
		6-23	Clay m. ABK some mica	Sl. Firm, Sticky, Sp, Sep					
		23-46	Clay Loam W.SBK	Friable, SS, Sp, Sep	-	48	-	-	0.325 PS
			Some Saprolite 44-48"						
2	Mid LS	0-8	SCL V.W.SBK	Sl. Friable, SS, Sp, Sep					
		8-38	Clay m. SBK	Sl. Firm, Sticky, Sp, Sep					
		38-48	Clay Loam W.SBK	Sl. Friable, SS, Sp, Sep	-	48	-	-	0.30 PS
3									
4			134 6.86						
			130	Ly 88	8.36				
			112	Lp 22	10.69				
			100 476						

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		102 (88 use)
System Type(s)		25% Reduction
Site LTAR		0.30

100
160
160
159

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Tom Shuck
OTHER(S) PRESENT: _____
Use interceptor as well

sid Gastins

Repair Evaluation

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

AP-303006
12-9-19

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM*

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(x) Septic Improvement Permit ( ) Authorization to Construct ( ) Existing System Inspection (X) 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(l) 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 (x)
Place an (X) beside whichever is submitted if applicable Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY) Ed Caffey 980-269-5242 customer care Carla Johns

Applicant Name: Meritage Homes **Address:** 13925 Ballantyne Corporate Place #300, Charlotte NC

Zip: 29877 **Applicant Email:** Sharlene.Batista@Meritagehomes.com **Phone:** 704.944.8955 **Alt. Phone:**

Owner Name: Gregory D'Amore **Address:** 137 Abbeville Lane, Mooresville NC **Zip:** 28117 **Owner Email:** redright28@msn.com **Phone:** 732-762-0325 **Alt. Phone:**

Property Information:

Street Address: 137 Abbeville Lane Mooresville NC

Subdivision Name: Bells Crossing **Section/Phase:** 3 **Lot Number:** 116

Driving Directions:

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

CHECK FOUNDATION TYPE

(x) New Single Family Residence — Maximum Number of Bedrooms: 6 — ( ) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: 6 — ( ) Concrete Slab Foundation
( ) Accessory Building — ( ) Swimming Pool — (X) Basement with Plumbing
( ) Bedroom(s) Addition — ( ) Other Addition/Structure: — ( ) Basement without Plumbing
( ) Repair to failing septic system ___ Tank X Drain lines **Describe Problem:** Distribution problem
Non-Residential Site Development: **Type of Business:**
Square Footage of Building: 2,887 **Max. Number of Employees:** **Max. Number of Seats/Beds/Other:**

Water Supply: ( ) Replacement Well – Reason:
( ) Multi-connection Well **Number of Houses:** **Number of Persons:**
( ) New Well ( ) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

Desired Septic System Type: ***(you may rank in order of preference)*** **Year existing system installed:**
( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative (x) 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: _____ 12/9/19
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**

* 5BP

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

(Check and sign only ONE of the options below)

1. * APPLICANT AND OWNER ARE THE SAME. * (*Sign here*) _____

Applications for permits require the "signature of the owner or owner's legal representative" (15A NCAC 18A .1937). If the owner does not sign the application himself or herself, they can submit any one of the following documents to designate their legal representative: *Power of Attorney; Real Estate Contract; Estate executor; Bankruptcy trustee; Court ordered guardianship* In the absence of the above documentation, the property owner may provide the local health department with documentation that designates a legal representative. A property owner may:
Complete this form to document his or her legal representative, or provide his or her own form that contains the information in this form. If there are multiple property owners, then all property owners must sign the form that designates a legal representative.
By signing a form that designates a legal representative for purposes of 15A NCAC 18A .1937, the property owner authorizes that representative to act on their behalf in matters pertaining to the application and permitting process, including signing or receiving any application, document or permit. The owner retains full responsibility to meet all permit conditions specified by the local health department.

2. I, Greg D Amore, am the legal owner(s) of the property located at 137 Abbeville Lane, identified as

PIN (Parcel Identification Number)_____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Meritage Homes, _____, 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 of Owner(s) _____ Date 11/15/19

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

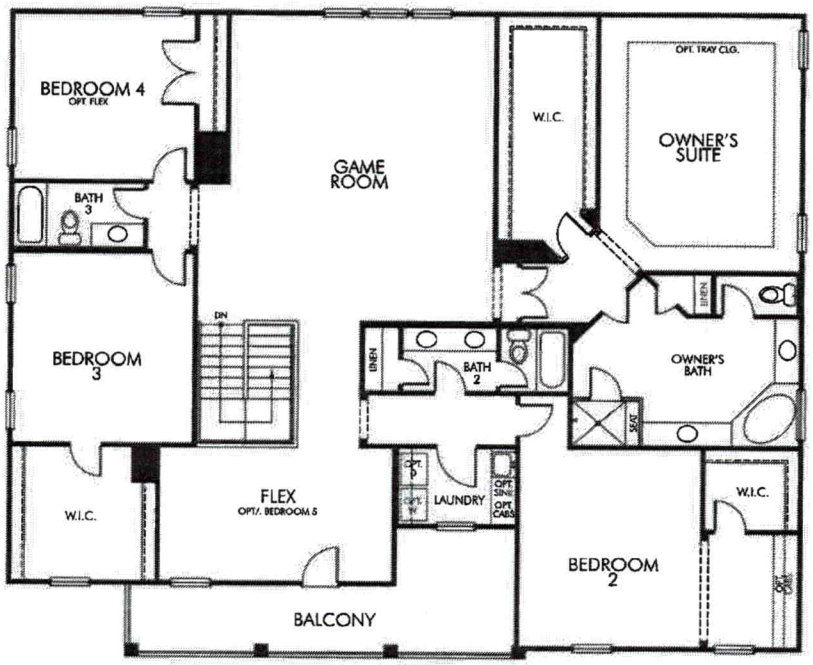
Bells Crossing: Pamlico

Floorplan for home located at 137 Abbeville Lane.



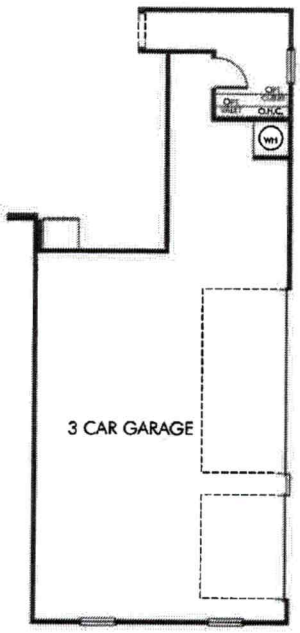
FIRST FLOOR

Bells Crossing: Pamlico

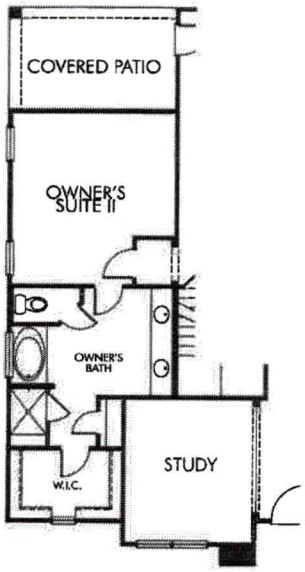


SECOND FLOOR

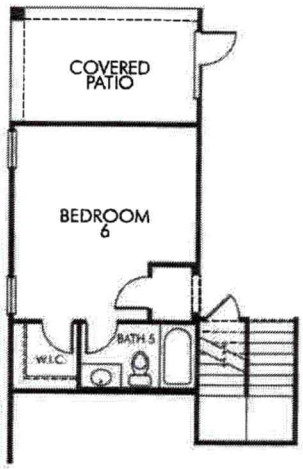
Bells Crossing: Pamlico



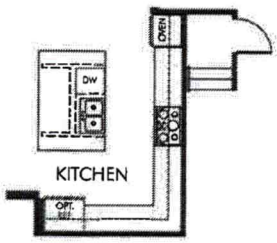
OPT. 3 CAR SIDELOAD GARAGE



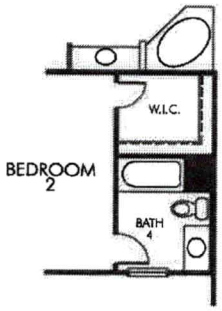
OPT. PETITE OWNERS SUITE



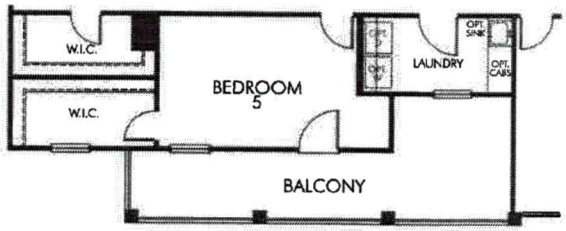
OPT. BEDROOM 6 BATH 5



OPT. GOURMET KITCHEN



OPT. BATH 4 @ BEDROOM 2



OPT. BEDROOM 5

ENERGY STAR AWARD 2011 PARTNER OF THE YEAR