IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 224974

2:00.

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

PIN # 4639979500

APPLICANT: Adams Homes LLC APPLICANT ADDRESS: 3000 Gulf Breeze Pkwy Gulf Breeze, FL 32563

SITE ADDRESS: 141 Tall Fern Lp Mooresville, NC PHONE: 904 759-5488 ALT. PHONE:

SITE DIRECTIONS: Hwy 150 W TL Fern Hill TL Nesting Quail TL Tall Fern on left.

SUBDIVISION: Highland Ridge SECTION: - LOT # 12 LOT AREA: .57 Ac DESIGN FLOW: 360 gpd L.T.A.R.: .3

Septic Tank 1000 (gal) STB 760 Date 10/3

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines 4 Linear Ft: 200'

Trench Width 24" Max. Trench Bottom Depth 36" Gravel Depth N/A

[X] New System [ ] Repair [ ] Expansion System Type: I II (III) IV V VI

System Description: Gravity - PPBPS

Repair System Description: PPBPS

Maintenance Agreement Required: [ ] YES [X] NO

[X] GRAVITY [ ] PRESSURE

[X] Residence No. Bedrooms 3

[ ] Business No. Persons 6

[ ] Other No. Employees

[ ] Slab [X] Crawl Space

[ ] Basement w/ plumbing [ ] Basement w/o plumbing

Water Supply: [X] Private [ ] Public [ ] Community

Comments / Conditions:

INITIAL SITE SKETCH

See attached, approved Septic plan by Michael Athanas & Assoc. (dated 2-23-17)

AS BUILT SKETCH

2:00.

	Date	Initials
Drain Lines Checked	1/10	BB.
Tanks Checked	1/4	BB
Pressure Manifold or Valve Box Checked		
Pressure Head Set		
Electrical Checked		
Floats Set		
Alarm Checked		
Maintenance Contract Y / N		

#2 Drainline Checked BB 1/4

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. [X] 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: Date: 6/7/17 Installed by: Jared Lutz Workmanship

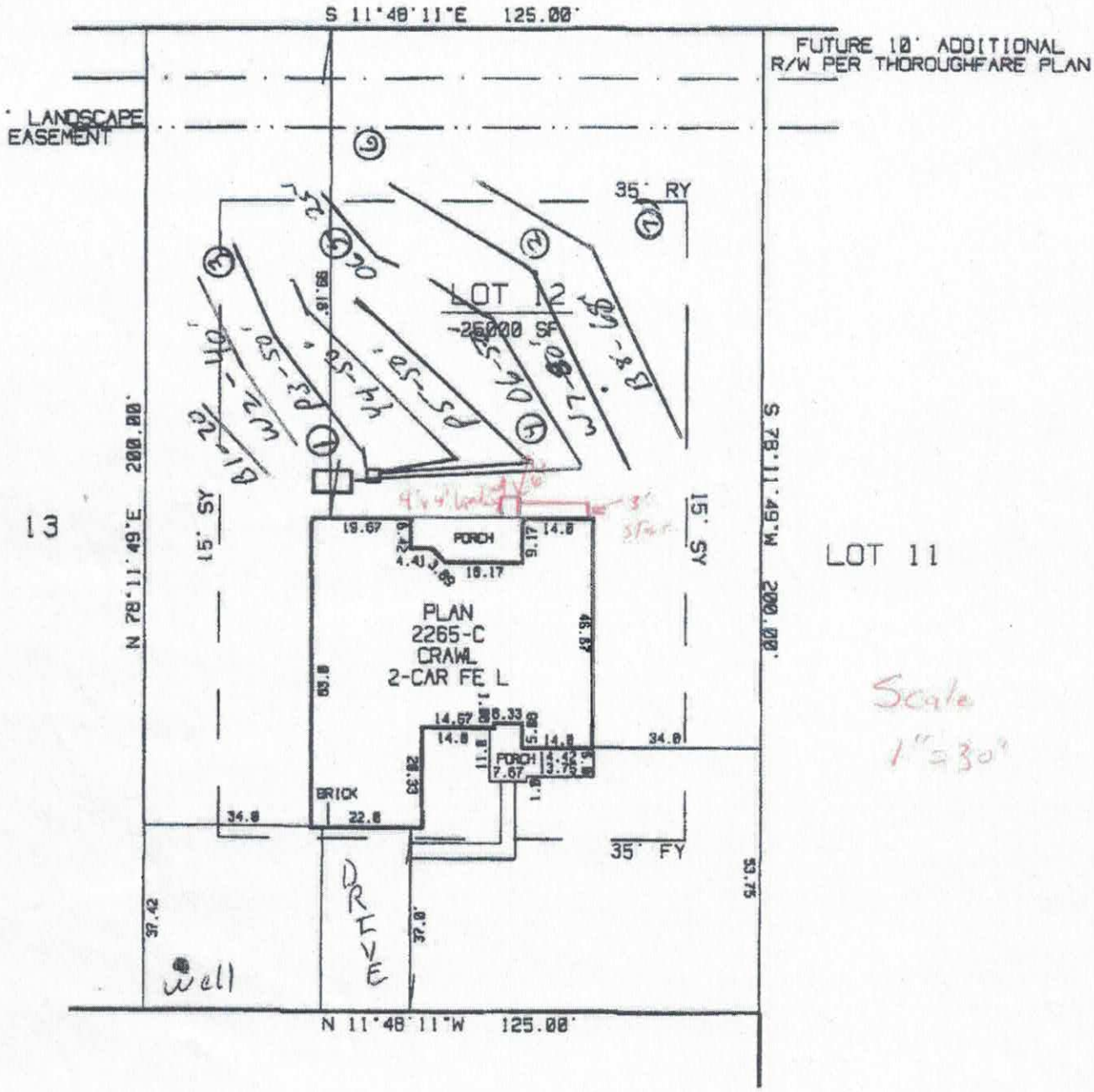
IMPROVEMENT PERMIT by: Date: 3/11/17 OPERATION PERMIT by: Benjamin Bittles Date: 1/11/2018.

AUTHORIZATION TO CONSTRUCT by: Date: 5/18/17 Existing System Inspected by: Date:

Revised
Site Plan
Rec 5/18/17

PERTH ROAD

60' PUBLIC R/W



Scale
1"=30'

TALL FERN LOOP

45' PUBLIC R/W



Approved
3/11/17
MD

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

Reference: Data Sheet for 141 Tall Fern Lp., Highland Ridge Lot 12
House Footprint: See attached plan
Building Setbacks: 35' front/rear, 15' side
Water Source: Private well
Number of Bedrooms: 3/360 GPD
Proposed LTAR: 0.3 GPD/FT2
Proposed System Type: PPBPS
Proposed Repair System Type: PPBPS
Distribution: Gravity-Distribution Box
Septic Tank Size: 1000 gallons
Proposed Trench Bottom: 36" maximum
Proposed Trench Width: 24" (8' on center)



Line	Design Length	Actual Length
Blue 1		20'
White 2		40'
Pink 3	**50'**	**67'**
Yellow 4	**50'**	**68'**
Pink 5	**50'**	**51'**
Orange 6	**50'**/25' (Rep)	**85'**
White 7		80'
Blue 8		68'

Initial System: 200' **Repair System:** 233'

Comments:
The house was staked by the surveyor. The septic tank is marked with red flags.
The lot has an expired permit. The expired permit was designed at 0.25 GPD/FT2. Based on our soil observations MA&A believe 0.3 GPD/FT2 is accurate.

C24
C10
18" RCP
L16
25
45.00'
83.57'
well
DRIVE
101.00'
80'
55'
56'
N 78°11'49" E
200.00'
LOT 12
0.57 AC.
46399795.00
245.00' TOT.
200.00'
20' LANDSCAPE EASEMENT
125.00'
45'
W2-43'
B1-20'
P3-50'
Y4-50'
P5-50'
06-50'
W7-80'
B8-68'
06-25'
Scale 1"=40'
Approved
3/11/17
See revised plan.
N

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

PROPERTY ID #: 4639979500_
COUNTY: _Iredell_

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

Approved
3/11/17 MD

OWNER: Adams Homes AEC LLC_____ APPLICATION DATE_____
ADDRESS: 3000 Gulf Breeze Parkway, Gulf Breeze, FL 32563_____ DATE EVALUATED: _____
PROPOSED FACILITY: _3 bdrm_____ PROPOSED DESIGN FLOW (.1949): _360 GPD___ PROPERTY SIZE: ____0.57 AC_____
LOCATION OF SITE: 141 Tall Fern Lp, Highland Ridge Lot 12_____ PROPERTY RECORDED: _____
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	
1	LS 8%	0-3	Br SCL WSBK	FR SS SP SEXP	N/A	48"	Com SAP	N/A	PS 0.3
		3-28	R C SBK	FR SS SP SEXP					
		28-48	R CL WSBK	FR SS SP SEXP					
2	LS 8%	0-5	Br SCL WSBK	FR SS SP SEXP	N/A	48"	F-C SAP	N/A	PS 0.3
		5-40	R C SBK	FR SS SP SEXP					
		40-48	R CL WSBK	FR SS SP SEXP					
3	LS 8%	0-4	Br SCL WSBK	FR SS SP SEXP	N/A	48"	F-C SAP	N/A	PS 0.3
		4-30	R C SBK	FR SS SP SEXP					
		30-48	R CL WSBK	FR SS SP SEXP					
4	LS 8%	0-8	Br SCL WSBK	FR SS SP SEXP	N/A	48"	F-C SAP	N/A	PS 0.3
		8-32	R C SBK	FR SS SP SEXP					
		32-48	R CL WSBK	FR SS SP SEXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	400 FT2	466 FT2
System Type(s)	PPBPS	PPBPS
Site LTAR	0.3	0.3

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): ____PS_____
EVALUATED BY: _____MA&A_____
OTHER(S) PRESENT: _____

COMMENTS:_____

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

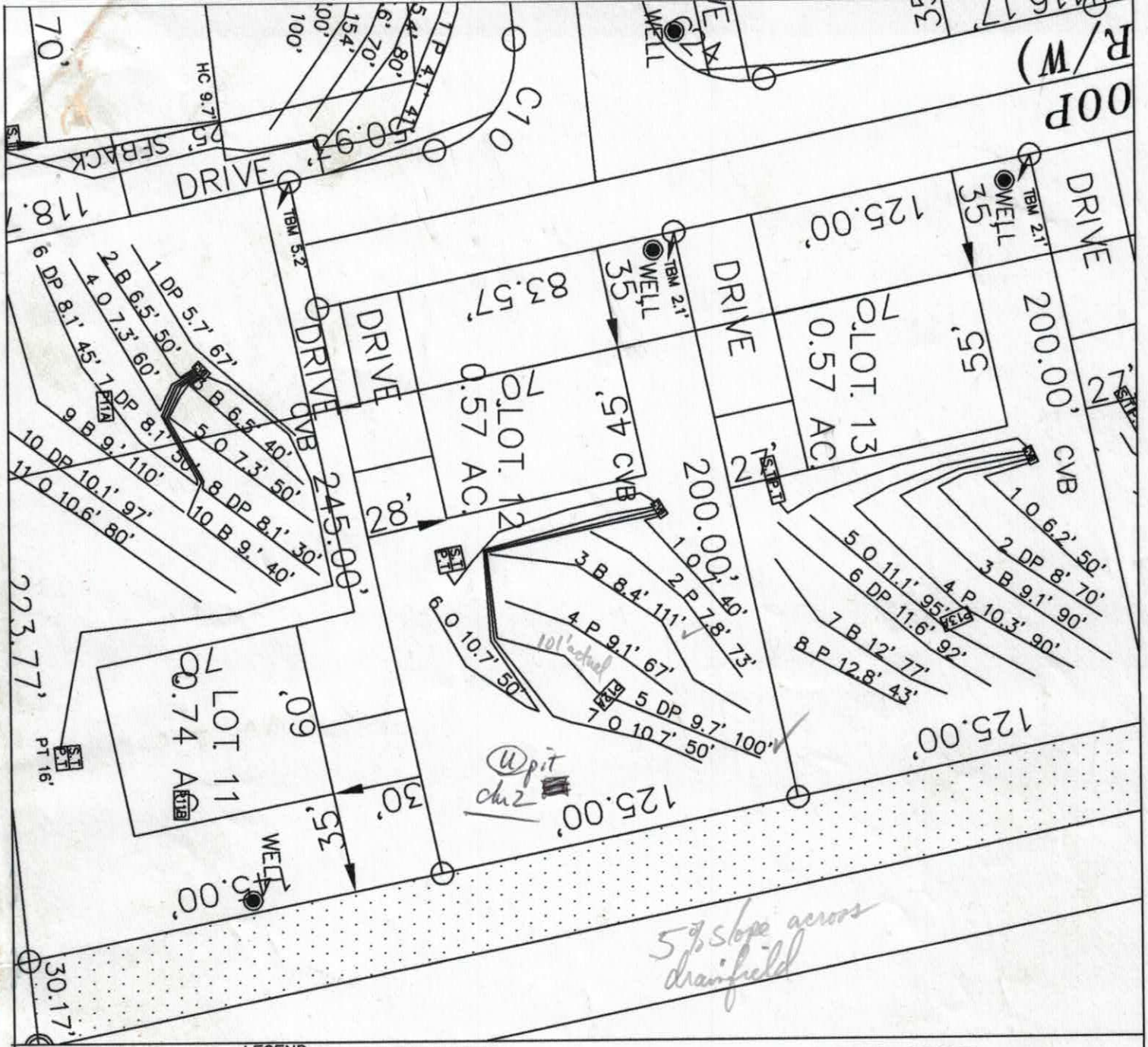
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH
ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

Approved 3/11/17 MB

PROPERTY ID #: 4639979500
DATE OF EVALUATION:
COUNTY: IREDELL

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
5	LS 8%	0-3	Br SCL WSBK	FR SS SP SEXP	N/A	48"	F-C SAP	N/A	PS 0.3
		3-24	R C SBK	FR SS SP SEXP					
		24-48	R CL WSBK	FR SS SP SEXP					
6	LS 8%	0-9	FILL		N/A	48"	Com Litho C-M Litho	N/A	DO NOT USE
		9-33	R C SBK	FR SS SP SEXP					
		33-48	R CL WSBK	FR SS SP SEXP					
7	LS 12 %	0-22	RY C SBK	FR SS SP SEXP	YB CHR 2 @ 22"	22"	N/A	N/A	US

COMMENTS:



LEGEND

House Box.

System lines.

Repair lines.

House Corner Shot.

T.B.M.

GRAPHIC SCALE
1" = 50'

50 0 50 100

FOR PRELIMINARY PLANNING PURPOSES ONLY. ALL LOTS WILL REQUIRE FINAL APPROVAL BY THE COUNTY HEALTH DEPARTMENT ON A LOT BY LOT BASIS. THIS MAP SHOULD BY USED AS A GENERAL GUIDE, SOME ADJUSTMENTS WILL BE NECESSARY IN THE FIELD DUE TO SOIL VARIABILITY AND COMPLEX TOPOGRAPHIC FEATURES. THIS MAP ONLY REFLECTS EXISTING SOIL SUITABILITY FOR ON-SITE SEPTIC TANK SYSTEMS.

PLEASE REFER TO ATTACHED SOIL REPORT FOR ADDITIONAL SITE SPECIFIC INFORMATION

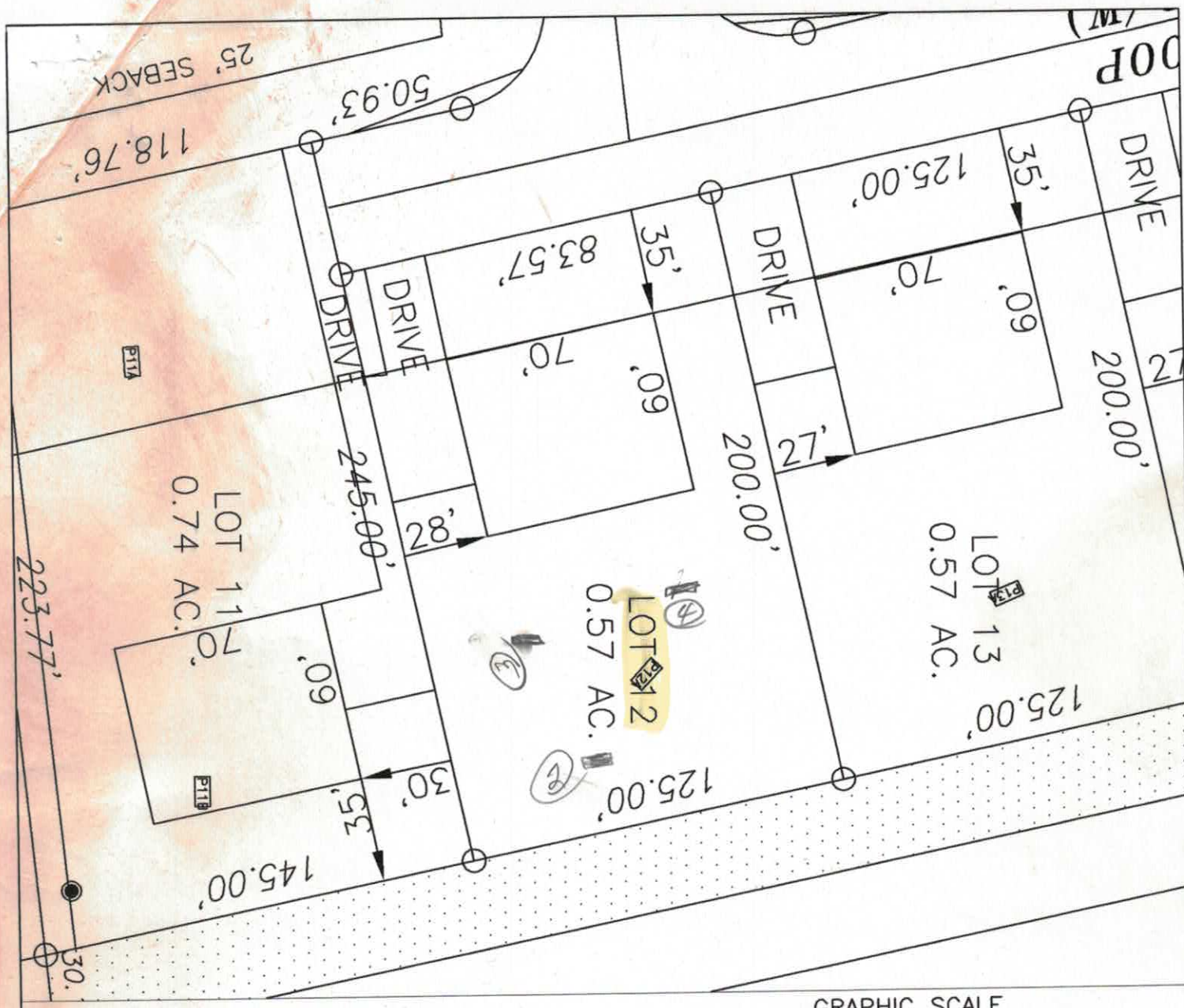
ROLLANS SOIL & ENVIRONMENTAL SERVICES
2120 GRAHAM ROAD
MOUNT ULLA, NC 28125
PHONE/FAX: (704)278-0989
ASHLEY ROLLANS, NC LICENSED SOIL SCIENTIST
MOBILE: (704)746-5046
EMAIL: ROLLANSFORTCJ@AOL.COM

MAP TITLE: SITE PLAN & DRAINFIELD AREAS

PROJECT NAME: ORCHARDS OF LLC / HIGHLAND RIDGE

LOCATION/DATE: PERTH ROAD IREDELL COUNTY, NORTH CAROLINA FEBRUARY 2007

JOB #: 01-1329
FILE: C:\JOBS\01-1329
PROJECT MGR.: C.B.F.
FIELD WORK: C.B.F. & A.L.P.
DRAWN BY: C.B.F.



LEGEND

- House Box.
- System lines.
- Repair lines.
- House Corner Shot.
- T.B.M.

GRAPHIC SCALE
1" = 50'

50 0 50 100

FOR PRELIMINARY PLANNING PURPOSES ONLY. ALL LOTS WILL REQUIRE FINAL APPROVAL BY THE COUNTY HEALTH DEPARTMENT ON A LOT BY LOT BASIS. THIS MAP SHOULD BY USED AS A GENERAL GUIDE, SOME ADJUSTMENTS WILL BE NECESSARY IN THE FIELD DUE TO SOIL VARIABILITY AND COMPLEX TOPOGRAPHIC FEATURES. THIS MAP ONLY REFLECTS EXISTING SOIL SUITABILITY FOR ON-SITE SEPTIC TANK SYSTEMS.

PLEASE REFER TO ATTACHED SOIL REPORT FOR ADDITIONAL SITE SPECIFIC INFORMATION

MAP TITLE: SITE PLAN & DRAINFIELD AREAS

PROJECT NAME: BD OF HC / HIGHLAND RIDGE

LOCATION/DATE: PERTH ROAD, IREDELL COUNTY, NORTH CAROLINA, FEBRUARY 2007

JOB # :	01-1329
FILE:	C:\JOBS\01-1329
PROJECT MGR.:	C.B.F.
FIELD WORK:	C.B.F. & A.L.P.
DRAWN BY:	C.B.F.

SOIL/SITE EVALUATION

(Continuation Sheet)

Sheet ____ of ____

DEPARTMENT OF ENVIRONMENT
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

lot 12 Highland Ridge

PROPERTY ID #: _____
DATE OF EVALUATION: 1/07
COUNTY: Pendelle

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
12A	US 5-10%	0-8	BSWL vfr	fri sssl smap	common YB's + smap				P3 .25
		8-31	RC mfAbk	fri sssl smap					
		31-60	RCL wfsbk	fri sssp smp					
				common smp					
(2)		0-20	sbk cl	frsssp	chroma 2 2pt				U
		20	abk C + sap						
(3)		0-11	g-wksbk frw	clfrssp	few fairy banks				.25
		11-39	mfmksbk	frsssp					
		39-60	wksbk tid cl + sap	frsssp					
(4)		0-6	sbk Br cl	fr ss sp	few qcl br few reli C				.25
		6-38	mf abk/sbk	RC fr ss sp					
		63	w sbk cl + sap	fr ss sp					

COMMENTS: _____

RECEIVED FEB 2 4 2017

IREDELL COUNTY HEALTH DEPARTMENT

Paid $350.00
#224974

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 ( ) 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:
Place an (X) beside whichever is submitted if applicable
(X) Survey Plat, scaled no more than 1 inch = 60 feet
( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information:

Applicant Name: Adams Homes, LLC Address: 3000 Gulf Breeze PKWY, Gulf Breeze, FL 32563 Phone: 904-759-5488 Steve

Owner Name: Same Address: _____ Phone: _____

Property Information:

Street Address: 141 Tall Fern Lp

Subdivision Name: Highland Ridge Section/Phase: _____ Lot Number: 12

Driving Directions: Perth, TL Fern Hill, TL Nesting Quail, TL Tall Fern, on LT

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

2/23/2017
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, Adams Homes ATL, LLC, am the legal owner(s) of the property located at 141 Tall Fern Loop, Mooresville, NC. 28117 lot 12, identified as PIN (Parcel Identification Number) 4636979500.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) 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.

Signature of Owner(s)	Date	Signature of Witness	Date
	2/15/2017		2.15.17

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 HEALTH DEPARTMENT

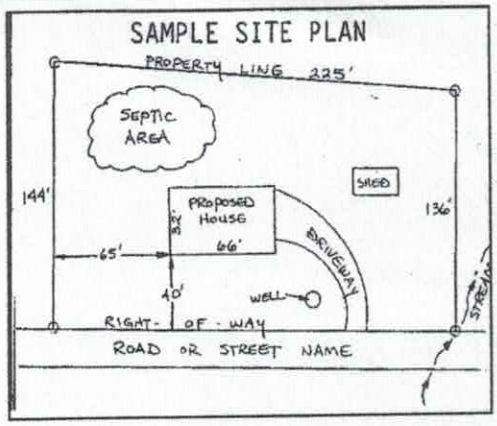
ENVIRONMENTAL HEALTH DIVISION

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:

- ( ) **Property Line measurements are clearly identified**
- ( ) **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

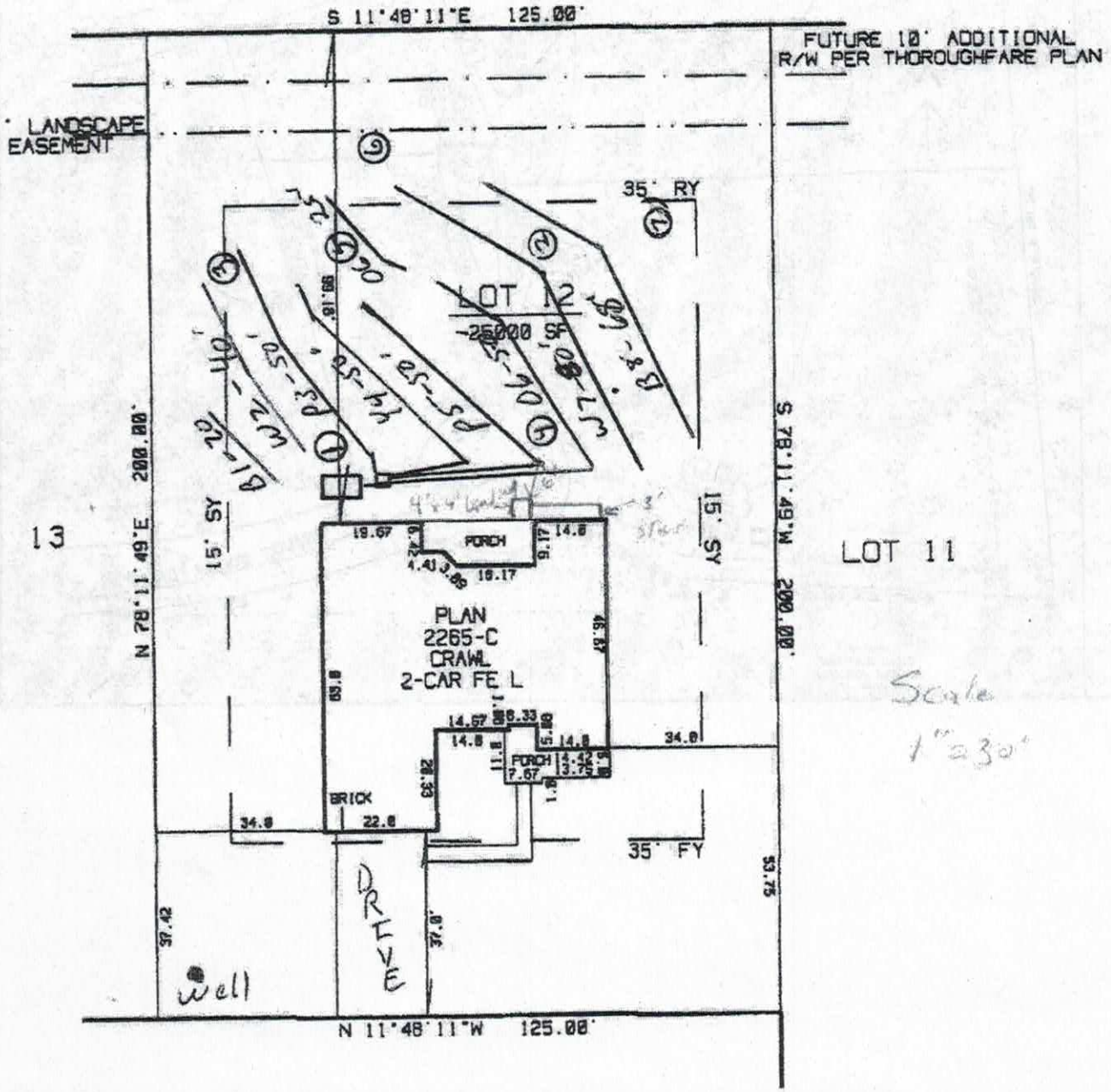
Signature: _____ 2/23/2017

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

Revised
Site Plan
Rec 5/18/17

PERTH ROAD

60' PUBLIC R/W

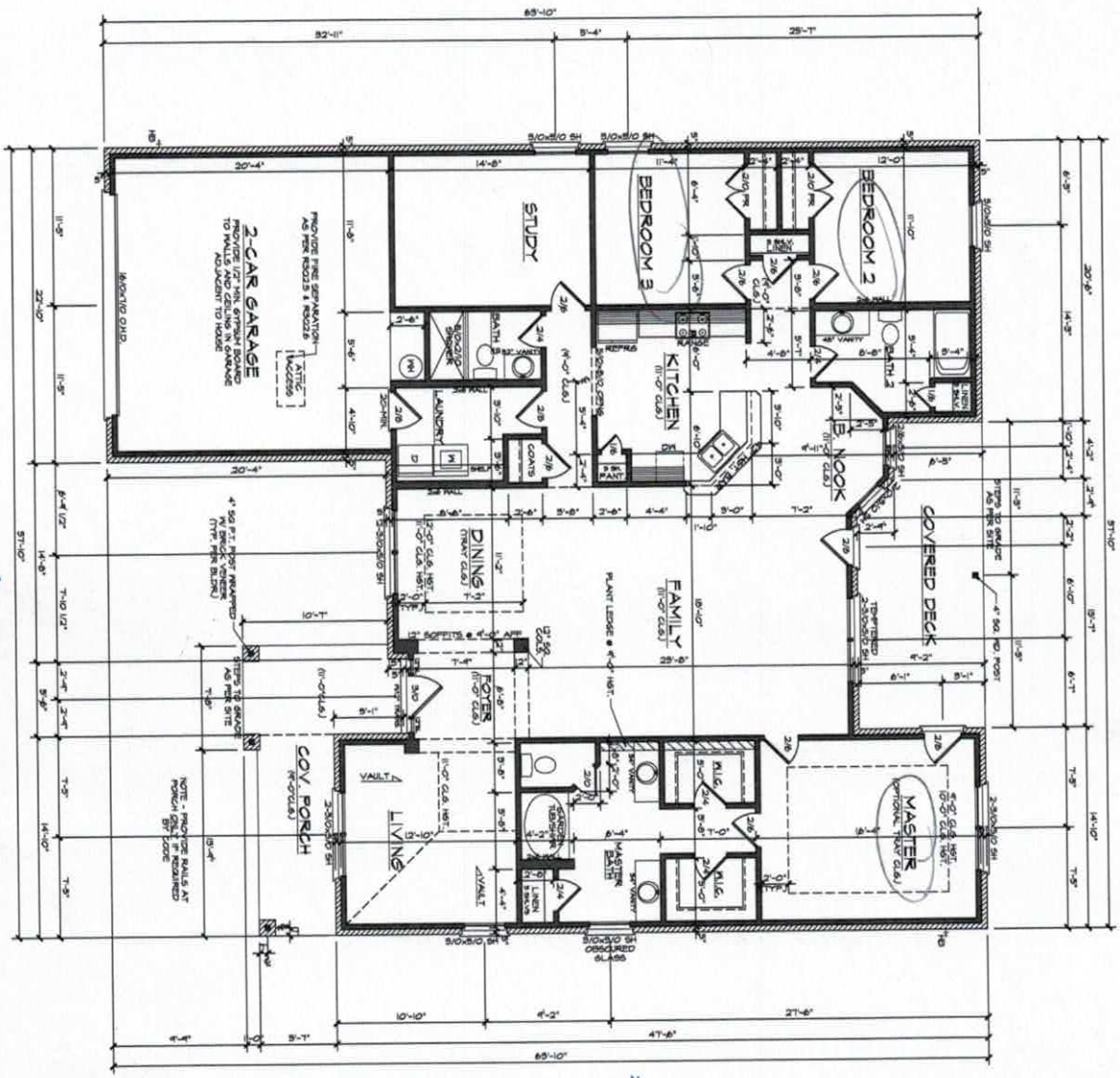


Scale
1"=30'

TALL FERN LOOP

45' PUBLIC R/W

63'-10"



57'-10"

57'-10"

63'-10"

Highland Ridge
Lot 12
141 Tall Fern Loop

Acknowledgement of
Plans Submittal ONLY!

Date 5/15/17

Date 6/7/17

FLOOR PLAN

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

SHEET 3

DATE DRAWN 5-24-2017

REVISIONS

2265 "C" FE (L) HG012

RALEIGH, NC

3252

ADAMS HOMES AEC, LLC
NL #CRC1330146
149 US HWY 70 WEST
GARNER, NC 27529
919-233-6747 (office) 919-233-6780 (fax)

IREDELL COUNTY

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

APPLICATION NUMBER
224974
Issue Date: 02/14/2017

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4639979500.000	141 TALL FERN LOOP, MOORESVILLE, NC 28117	

Owner Information	Applicant Information
Owner: ADAMS HOMES AEC LLC	Applicant: MICHAEL ATHANAS & ASSO
Address: ,	Address: 561 ENNIS RD WEDDINGTON, NC 28173
Phone:	Phone: 704-576-3887

Use Requested	Zone Code
	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.570	35.00	35.00	15.00	15.00	PACL	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	93279	TOTAL FEES:	$ 77.25