PJB

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 305969

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

PIN # 4645 -- 06 -- 2885

APPLICANT/OWNER: Titan Custom Builders APPLICANT ADDRESS: 331 Alcove Rd, Mooresville NC 28117

SITE ADDRESS: 103 Myers Port Way, Mooresville, NC 28117 PHONE: 704-528-7874 ALT. PHONE 704-201-6765

SITE DIRECTIONS: (S) US 21 → (L) Alcove → (R) Templeton → (L) Camino Real → (R) Myers Port → lot on corner SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Helms Port on Lake Norman SECTION: ___ LOT # 1 LOT AREA: 0.496 ac DESIGN FLOW: 480gpd L.T.A.R.: 0.3 (IER)

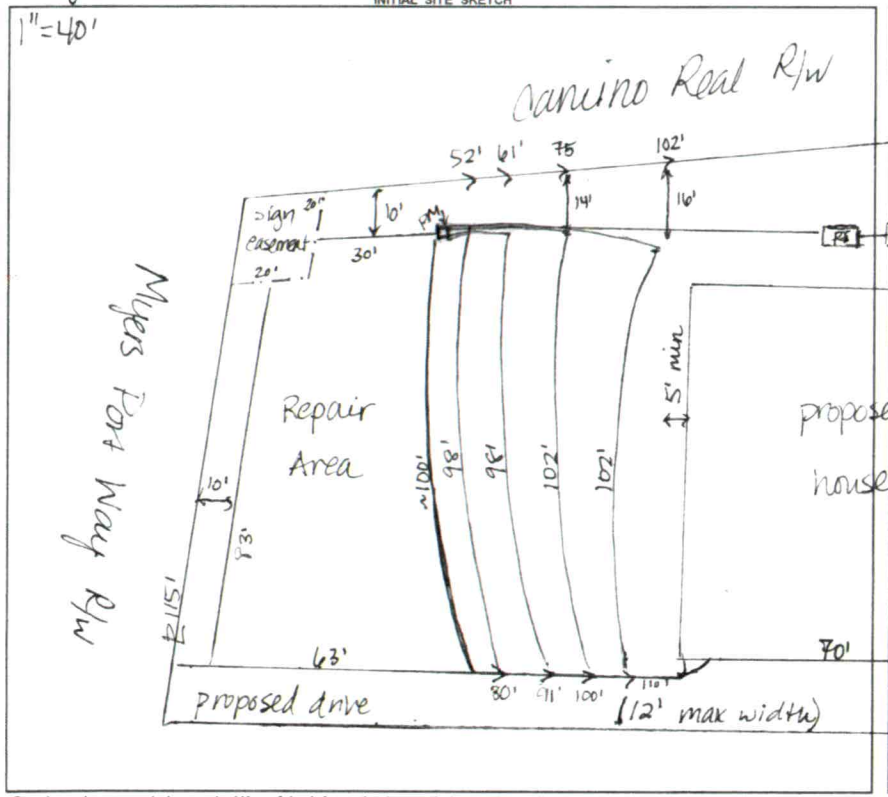
Septic Tank	1000	(gal)	STB	7160	Date	3/16/22	☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	
Pump Tank	1000	(gal)	PT	36	Date	3/5/22	System Description:	25% Reduction - PM			
Pump Make			Model		Serial #		Repair System Description:	50% Reduction - PM			
# Nitrification Fields	1	# Lines	4		Linear Ft	400'	Maintenance Agreement Required:	☐ YES	☒ NO		
Trench Width	36"	Trench Bottom Depth (~~Below Grade~~)	20" max		Gravel Depth	N/A		☐ GRAVITY	☒ PRESSURE		

☒ Residence	No. Bedrooms	4	**Water Supply**
☐ Business	No. Persons	8	☒ Private
☐ Other	No. Employees		☐ Public
☒ Slab	☐ Crawl Space		☐ Community
☐ Basement w/ plumbing		☐ Basement w/o plumbing	

Comments / Conditions: Do not exceed TB max - if system becomes SAP controlled, well must be abandoned. Do not pave, grade, park or bury utilities in drainfield

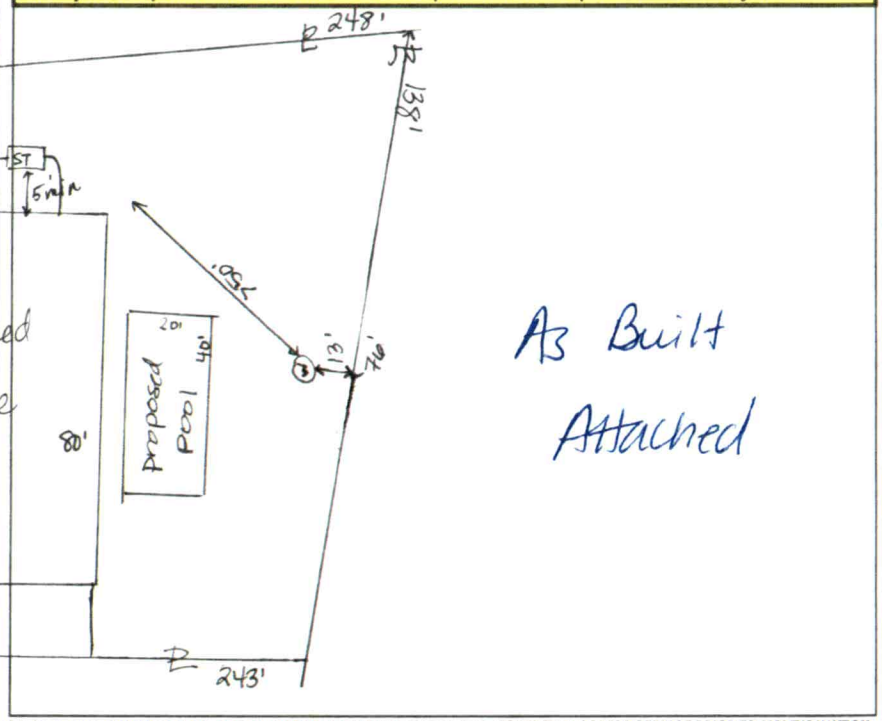
Pressure Manifold: 2" supply, 2' pressure head
Taps: 1/2 SCH 80 each line Flow = 21.92 gpm
Dose: 182g Drawdown: 8.7" Run Time: 8.3 min

INITIAL SITE SKETCH



AS BUILT SKETCH

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



As Built Attached

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: _____ Date: 8/3/21 Installed by: Precision Excavation

IMPROVEMENT PERMIT by: D. Wieberg Date: 8/8/21 OPERATION PERMIT by: Cary Wil Date: 9/26/22

AUTHORIZATION TO CONSTRUCT by: D. Wieberg Date: 8/8/21 Existing System Inspected by: _____ Date: _____

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.

PJB 3:00

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 305969

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

PIN # 4645 -- 06 -- 2885

APPLICANT/OWNER: Titah Custom Builders APPLICANT ADDRESS: 331 Alcove Rd, Mooresville NC 28117

SITE ADDRESS: 103 Myers Port Way, Mooresville, NC 28117 PHONE: 704-528-7874 ALT. PHONE 704-201-6765

SITE DIRECTIONS: (S) US 21 → (L) Alcove → (R) Templeton → (L) Camino Real → (R) Myers Port → lot on corner SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Helms Port on Lake Norman SECTION: LOT # 1 LOT AREA: 0.696 ac DESIGN FLOW: 480gpd L.T.A.R.: 0.3 (I&R)

Septic Tank	1000	(gal)	STB	7100	Date	3/16/22	☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	
Pump Tank	1000	(gal)	PT	36	Date	3/5/22	System Description:	25% Reduction -PM			
Pump Make		Model			Serial #		Repair System Description:	50% Reduction -PM			
# Nitrification Fields	1	# Lines	4		Linear Ft	400'	Maintenance Agreement Required:	☐ YES	☒ NO		
Trench Width	36"	Trench Bottom Depth (~~Inv. Elev.~~)	20" max		Gravel Depth	N/A		☐ GRAVITY	☒ PRESSURE		

☒ Residence No. Bedrooms 4 — Water Supply: ☒ Private ☐ Public ☐ Community

☐ Business No. Persons 8

☐ Other No. Employees

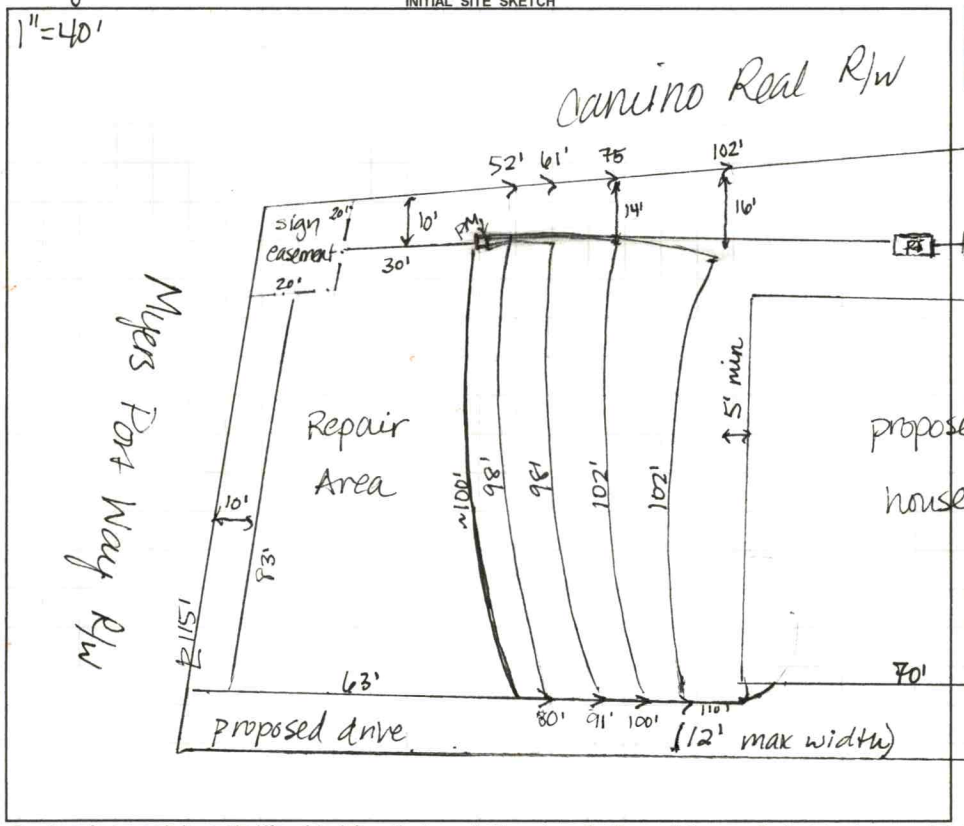
☒ Slab ☐ Crawl Space

☐ Basement w/plumbing ☐ Basement w/o plumbing

Comments / Conditions: Do not exceed TB max - if system becomes SAP controlled, well must be abandoned. Do not pave, grade, park or bury utilities in drainfield

Pressure Manifold: 2" supply, 2' pressure head
Taps: 1/2 SCH 80 each line Flow = 21.92 gpm
Dose: 182g Drawdown: 8.7" Run Time: 8.3 min

INITIAL SITE SKETCH



AS BUILT SKETCH

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the day the inspection is needed. Be sure to speak with an inspector to confirm your time.

As Built Attached

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Owner / Applicant Signature: Date: 8/3/21 Installed by: Precision Excavation

IMPROVEMENT PERMIT by: D. Wieberg Date: 8/8/21 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: D. Wieberg Date: 8/8/21 Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.

Item	Date	Initials
Drain Lines Checked	5/3/22	DW
Tanks Checked	5/3/22	
Pressure Manifold or Valve Box Checked	5/3/22	
Pressure Head Set	5/3/22	
Electrical Checked		
Floats Set	5/3/22	DW
Alarm Checked	5/3/22	DW
Maintenance Contract Needed? Y / (N)		
Comments:		

Repairs Only	
	State Code
Failing System Code	
Type of Distribution	G or P
Type of Failure/Malfunction	
Primary Cause of Failure/Malfunction	
Age of System? _____	
Initial or Repair? _____	

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 305969

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

PIN # 4645 -- 06 -- 2885

APPLICANT/OWNER: Titan Custom Builders APPLICANT ADDRESS: 331 Alcove Rd, Mooresville NC 28117

SITE ADDRESS: 103 Myers Port Way, Mooresville, NC 28117 PHONE: 704-528-7874 ALT. PHONE 704-201-6765

SITE DIRECTIONS: (3) US 21 → (L) Alcove → (R) Templeton → (2) Camino Real → (R) Myers Port → lot on corner SAP CONTROLLED: ☐ YES ☒ NO

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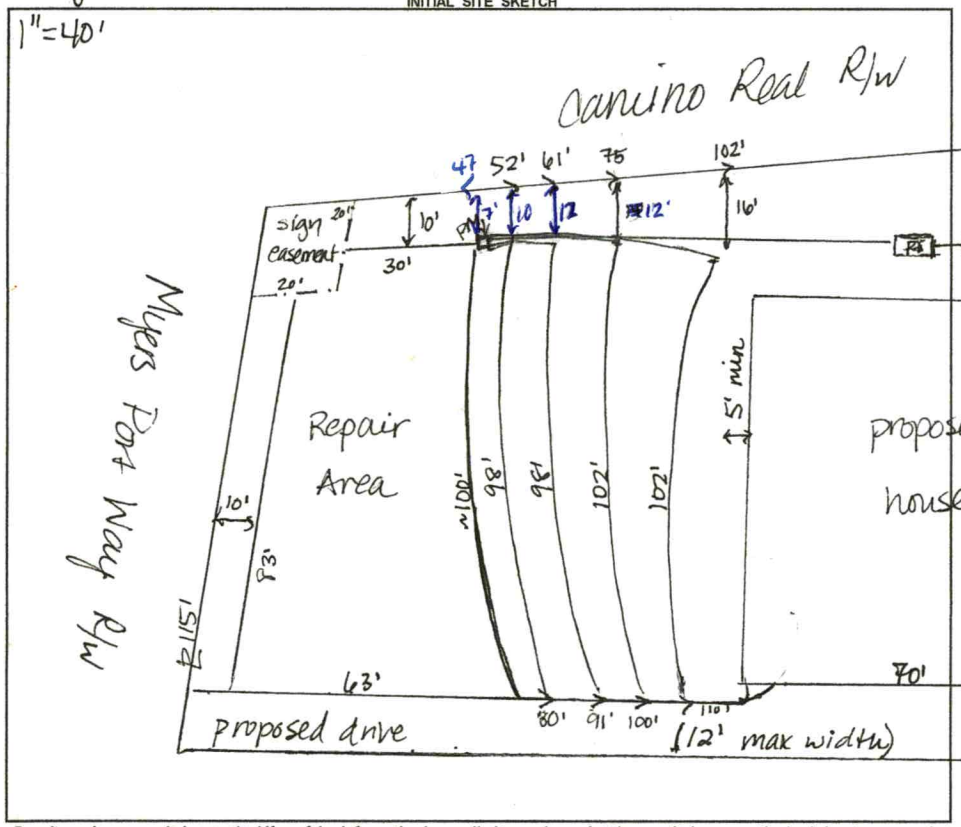
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# Nitrification Fields	1	# Lines	4		Linear Ft:	400'	Maintenance Agreement Required:	☐ YES	☒ NO		
Trench Width	36"	Trench Bottom Depth			Gravel Depth	N/A		☐ GRAVITY	☒ PRESSURE		

☒ Residence	No. Bedrooms	4	Water Supply
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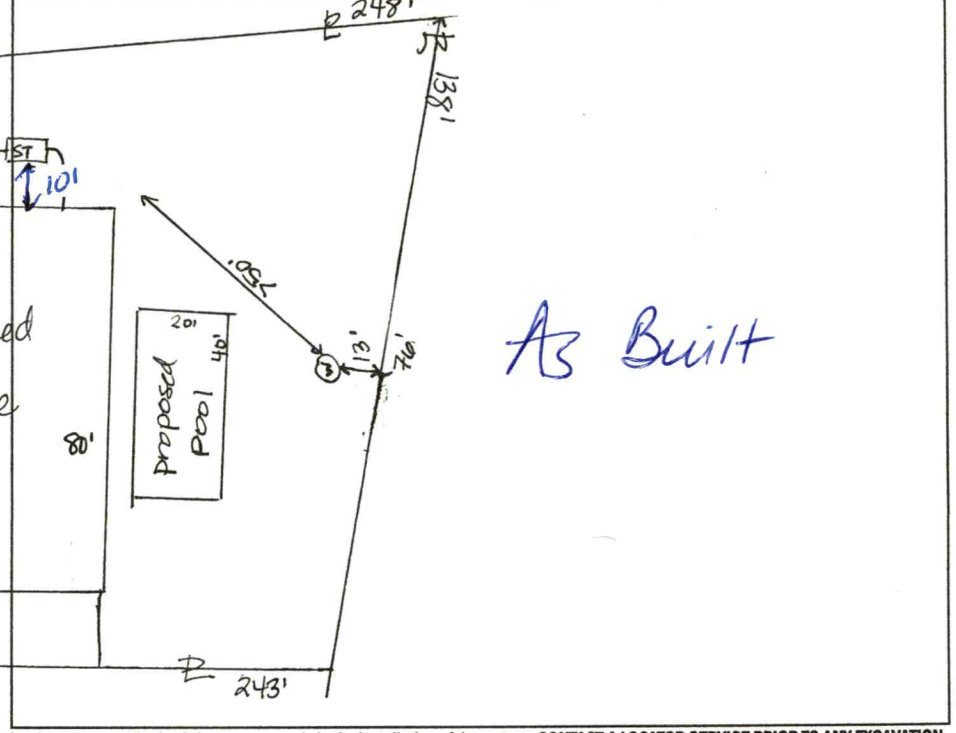
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INITIAL SITE SKETCH



AS BUILT SKETCH

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Owner / Applicant Signature: _____ Date: 8/13/21 Installed by: Precision Excavation

IMPROVEMENT PERMIT by: D. Nieberg Date: 8/8/21 OPERATION PERMIT by: _____ Date: _____

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FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.

PROPERTY ID #: _HELMS PORT 1__
COUNTY: _Iredell_____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Camino Real Holdings LLC_____ APPLICATION DATE_____
ADDRESS: PO Box 3818, Mooresville, NC 28117_____ DATE EVALUATED: __2/2020_____
PROPOSED FACILITY: _4 BDRM RES_ PROPOSED DESIGN FLOW (.1949): _480 GPD_____ PROPERTY SIZE: ____0.696 AC_____
LOCATION OF SITE: 103 Myers Port Way, Helms Port on LKN Lot 1_____ PROPERTY RECORDED: _____
WATER SUPPLY: X Private ☐ Public X Well ☐ Spring ☐ Other _____
EVALUATION METHOD: X Auger Boring X Pit ☐ Cut TYPE OF WASTEWATER: X 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	LS 5%	0-8	Br SCL WSBK	FR SS SP SXP	N/A	48"		N/A	PS 0.3
		8-22	R C SBK	FR SS SP SXP					
		22-48	R CL WSBK	FR SS SP SXP			F-C SAP		
AB 2	LS 5%	0-8	Br SCL WSBK	FR SS SP SXP	N/A	48"		N/A	PS 0.3
		8-24	R C SBK	FR SS SP SXP					
		24-48	R CL WSBK	FR SS SP SXP			F-C SAP		
PIT 1	LS 5%	0-7	Br CL WSBK	FR SS SP SXP	N/A	60"		N/A	PS 0.3
		7-32	R C SBK	FR SS SP SXP					
		32-60	R CL WSBK	FR SS SP SXP			F-C SAP		
PIT 2	LS 5%	0-4	Br CL WSBK	FR SS SP SXP	N/A	55"		N/A	PS 0.3
		4-24	R C SBK	FR SS SP SXP					
		24-55	R CL WSBK	FR SS SP SXP			Com SAP		

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	810 FT^2	804 FT^2
System Type(s)	Horz PPBPS	PPBPS
Site LTAR	0.3	0.3

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

APPROVED MAR 2 0 2020
KW

COMMENTS:_____

SOIL/SITE EVALUATION

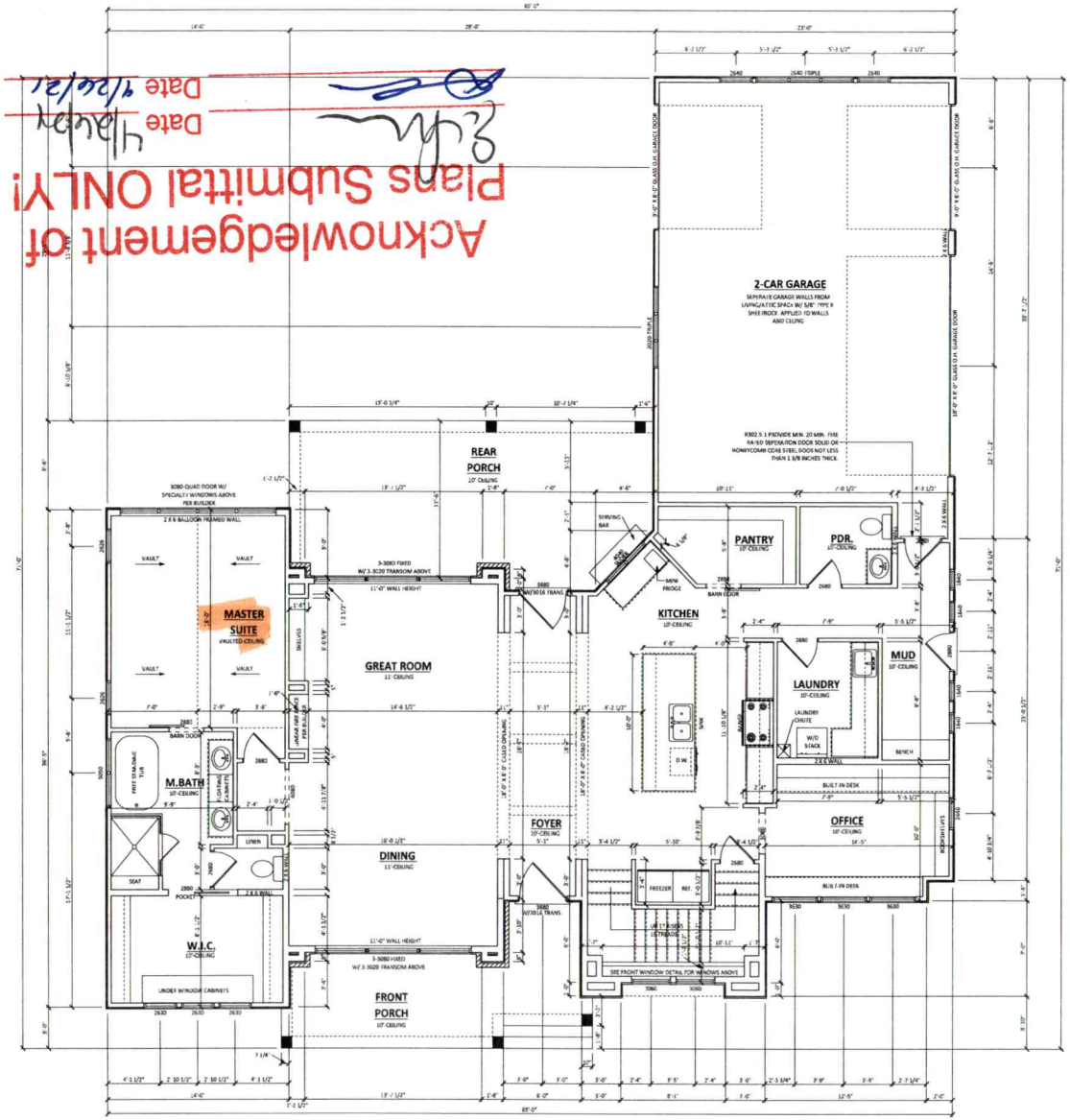
(Continuation Sheet)

PROPERTY ID #: _HELMS PORT 1_
DATE OF EVALUATION: _____
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	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
PIT 3	LS 5%	0-10	Br CL WSBK	FR SS SP SXP	N/A	36"	SAP Inc @ 28" PS	N/A	PS 0.3-0.4
		10-36	R C SBK	FR SS SP SXP					
		36-63	VER SL/LS SAP	VFR SS SP SXP					
PIT 4	LS 5%	0-7	Br CL WSBK	FR SS SP SXP	N/A	60"	F-C SAP	N/A	PS 0.3
		7-30	R C SBK	FR SS SP SXP					
		30-60	R CL WSBK	FR SS SP SXP					

COMMENTS:_____

APPROVED MAR 2 0 2020
KW



FIRST FLOOR PLAN
SCALE: 1/4" = 1'-0"
HEATED SQUARE FOOTAGE: 1,993 SQ. F.T

FIRST FLOOR HEATED: 1,993 SQ. FT.
SECOND FLOOR HEATED: 1,843 SQ. FT.
TOTAL HEATED SQ. FT.: 3,836 SQ. FT.

GARAGE: 724 SQ. FT.
FRONT COVERED PORCH: 172 SQ. FT.
REAR COVERED PORCH: 321 SQ. FT.
REAR UPPER DECK: 321 SQ. FT.

TOTAL SQUARE FOOTAGE UNDER ROOF: 5,374 SQ. FT.

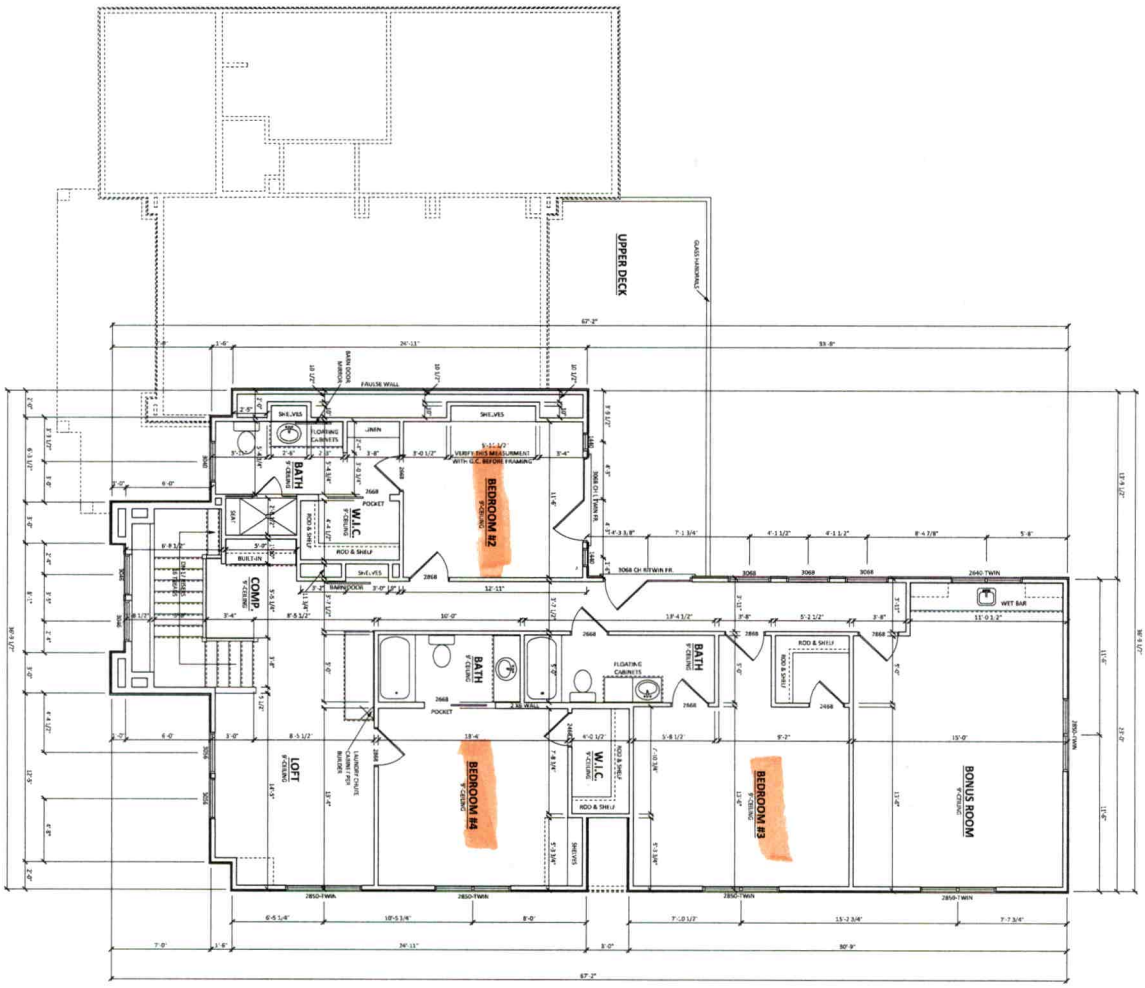
Acknowledgement of Plans Submittal ONLY!
Date 9/26/21
Date 9/26/21

TITAN CUSTOM BUILDERS

Titan Custom Builders
Model Home 103 Myers Port

T&M HOME DESIGN, LLC.
1728 Maybrook Blvd.
Hickory, NC 28601
Tracy Sipe: 704-200-3811 Marie Sipe: 704-200-3808

First Floor Plan
Date 9-2-21
Project # 210910
Scale 1/4" = 1'-0"
Sheet: A-2
Drawn By: TTS



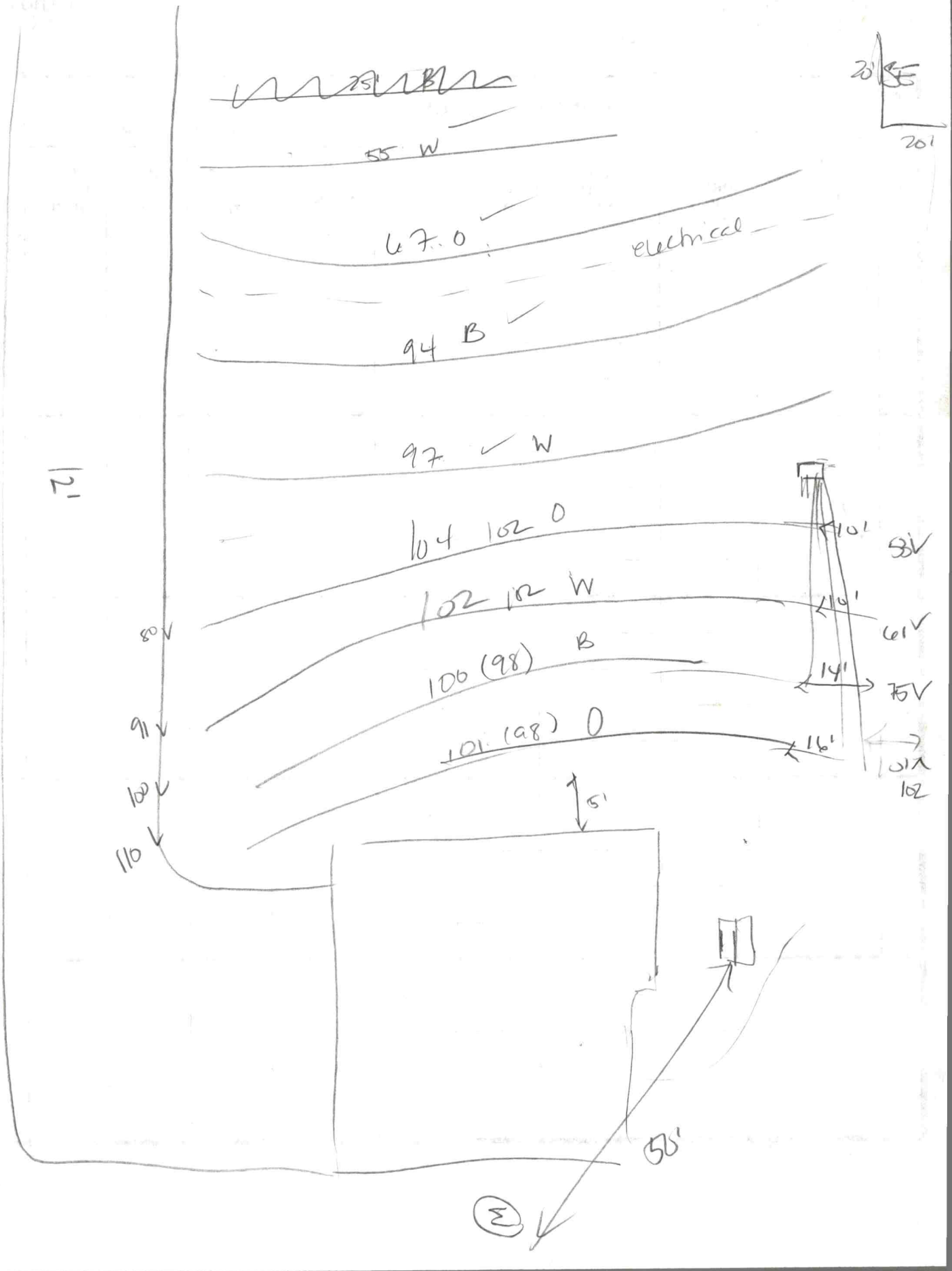
SECOND FLOOR PLAN
SCALE: 1/4" = 1'-0"
HEATED SQUARE FOOTAGE: 1,843 SQ. F.T

Acknowledgement of Plans Submittal ONLY!

Date 4/26/24

Date 4/24/24

Second Floor Plan	T&M HOME DESIGN, LLC. 1728 Maybrook Blvd. Hickory, NC 28601 Tracy Sipe: 704-200-3811 Marie Sipe: 704-200-3808	Titan Custom Builders Model Home 103 Myers Port	Tracy T. Sipe and T & M Home Design assumes no liability for any home constructed from this plan. Release of these plans commences further cooperation among the owner and his contractor. Changes made from these plans without consent of the Tracy T. Sipe or T & M Home Design is unauthorized and shall relieve the designer of responsibility for all consequences arising out of such changes. Written dimensions on these drawings shall have precedence over scaled dimensions, contractor shall verify and be responsible for all dimensions and conditions on the job.
A-4			TITAN CUSTOM BUILDERS


75
55 W
67.0
electrical
94 B
97 W
104 102 O
102 102 W
100 (98) B
101 (98) O
80
91
102
110
5'
50'
(3)
20'
20'
10'
10'
14'
16'
85V
61V
75V
102

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

Sheet ____ of ____

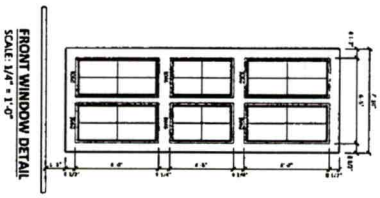
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH
ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

PROPERTY ID #: _____
DATE OF EVALUATION: _____
COUNTY: _____

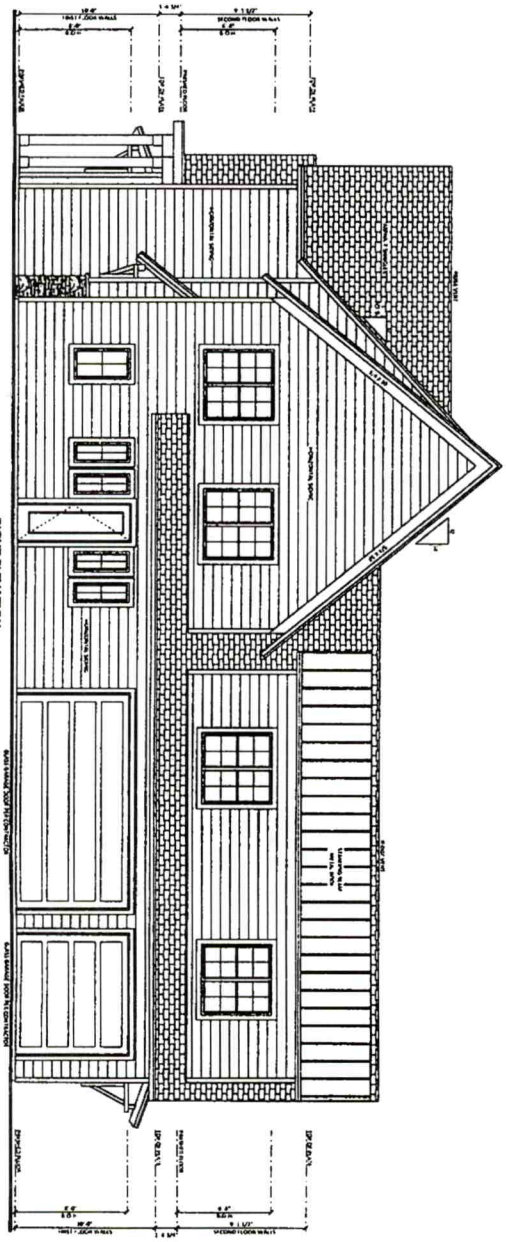
PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
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COMMENTS: _____

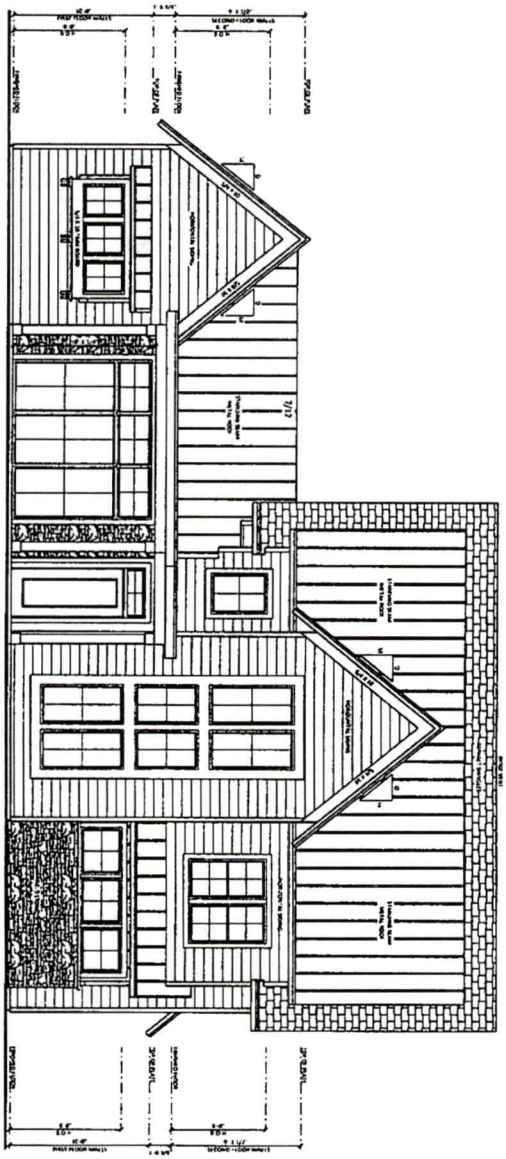
Updated February 2014



FRONT WINDOW DETAIL
SCALE: 1/4" = 1'-0"



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



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

A-7

T&M HOME DESIGN, LLC.
1728 Maybrook Blvd.
Hickory, NC 28601
Tracy Sipe: 704-200-3811 Marie Sipe: 704-200-3808

Titan Custom Builders
Model Home 103 Myers Port

Tracy T. Sipe and T & M Home Design assumes no liability for any home constructed from this plan. Release of these plans authorizes further interpretation among the owner and his contractor. Changes made from these plans without consent of the Tracy T. Sipe or T & M Home Design is unauthorized and shall relieve the designer of responsibility for all consequences arising out of such changes. Written dimensions on these drawings shall have precedence over scaled dimensions. contractor shall verify and be responsible for all dimensions and conditions on the job.

TITAN

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE
OR IT WILL NOT BE PROCESSED RECEIVED JUL 27 2021

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM* AP-305969 $320.00

Intermediate

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: (PRINT CLEARLY)

Applicant Name: Titan Custom Builders Address: 331 Alcove Rd. Ste 103 Zip: 28117
Applicant Email: titanbuildersinvoice@gmail.com Phone: 704-528-7874 Alt. Phone: 704-201-6705
Owner Name: Titan Custom Builders Address: 331 Alcove Rd. Ste 103 Zip: 28117
Owner Email: titanbuildersinvoice@gmail.com Phone: 704-528-7874 Alt. Phone: 704-201-6705

Property Information:

Street Address: 103 Myers Port Way Mooresville, NC 28117
Subdivision Name: Helms Port on Lake Norman Section/Phase: _____ Lot Number: 1
Driving Directions: US21 → (L) on Alcove Rd → (R) on Templeton → (L) on Camino Real → (R) on Myers Port → Lot on (L)

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

CHECK FOUNDATION TYPE

( ) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 8
( ) 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: _____ 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 ( ) Modified Conventional (X) Other: Change to 350 Reduction

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: _____ 7/20/21
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE