# ICHD–ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3825

PIN # 4646-32-4653

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

APPLICANT/OWNER: Foundation Homes APPLICANT ADDRESS: 438 Williamson Rd. Suite C Mooresville, NC 28117

SITE ADDRESS: 128 Barrister Bay Lane Mooresville, NC 28117 PHONE: Jonathon: 704-650-2260 ALT. PHONE

SITE DIRECTIONS: Williamson Rd S from BSR → R on Alcove → R on Catalina → R on Barrister Bay → Hse in L SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Barrister Bay SECTION: — LOT # 6 LOT AREA: 0.90 acres DESIGN FLOW: 480 GPD L.T.A.R.: 0.25

Septic Tank 1000 (gal) STB Infiltrator Date Infiltrator

Pump Tank 1000 (gal) PT Infiltrator Date Infiltrator

Pump Make Geotech Model WE05HH Serial # [redacted]

# Nitrification Fields 1 # Lines 5 Linear Ft 320

Trench Width 36" Trench Bottom Depth(Low side) 18" Gravel Depth —

☒ New System ☐ Repair ☐ Expansion System Type: I II III (IV) V VI

System Description: LP-PPBPS: Horizontal (50% Reduction)

Repair System Description: Drip + TS II

Maintenance Agreement Required: ☒ YES ☐ NO

☐ GRAVITY ☒ PRESSURE

☒ Residence ☐ Business ☐ Other ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement w/o plumbing

No. Bedrooms 4 No. Persons 8 No. Employees

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: 2" of approved cover (type 2 or 3 soil) required Please provide a sample to the health department prior to construction to ensure proper texture (loam, etc.) 50' Lake Buffer must be staked by licensed surveyor, prior to installation and visible @ time of inspection. Install system during dry periods. Do not stockpile materials or drive across primary/repair areas. Use low ground pressure equipment during installation + hand clear any vegetation

INITIAL SITE SKETCH

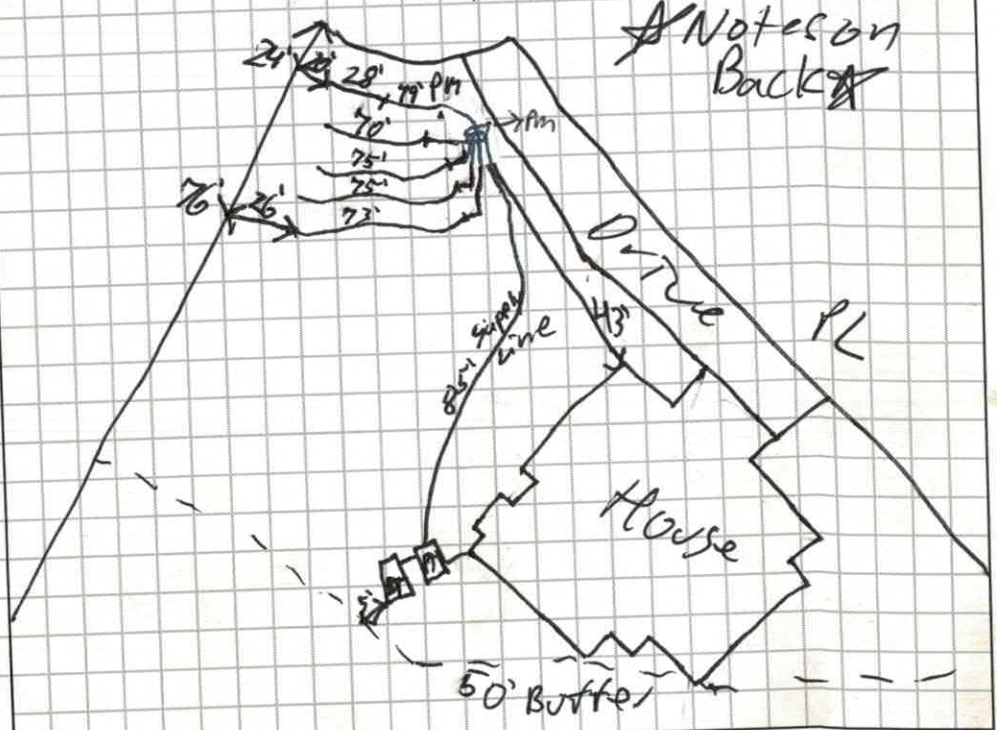
See attached design information from Michael Athanas + Associates

*As of 9/10/19, house is already built*

- Recommend setting pump to dose system 200 gallons per pumping event. Also recommend a timer control panel + floats be used to limit pumping to system. (336 gallons per 24-hr period with no automatic override)

AS BUILT SKETCH

Not to scale




*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: Justin Smith Date: 9/10/19

IMPROVEMENT PERMIT by: Tom Shuck Date: 9/10/19

AUTHORIZATION TO CONSTRUCT by: Tom Shuck Date: 9/10/19

Installed by: Specialty Septic

OPERATION PERMIT by: Patrick J. Boyce III Date: 10/24/19

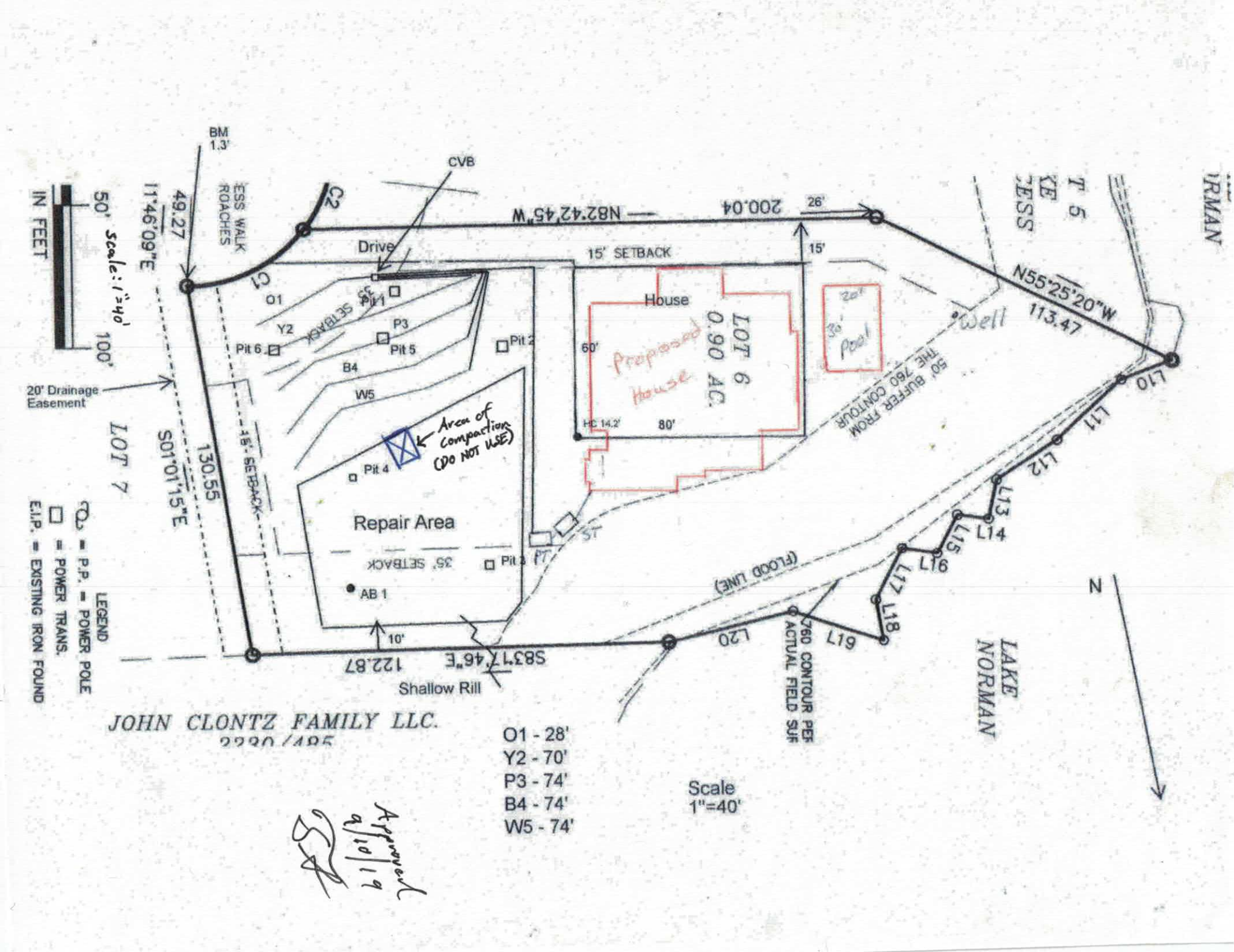
Existing System Inspected by: Date:

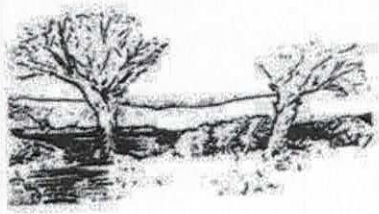
**FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inpsector to confirm your inspection time.**

Notes on Back

| | Date | Initials |
|---|---|---|
| Drain Lines Checked | 9/23/19 | PJB |
| Tanks Checked | 9/23/19 | PJB |
| Pressure Manifold or Valve Box Checked | 9/23/19 | PJB |
| Pressure Head Set | 10/22/19 | MD |
| Electrical Checked | 10/22/19 | MD |
| Floats Set | 10/22/19 | MD |
| Alarm Checked | 10/22/19 | MD |
| Maintenance Contract (Y) N | 10/24/19 | PJB |

As of 10/22/19 just needs Maint. Contract


BM
1.3'
CVB
C2
C1
Drive
15' SETBACK
15'
26'
200.04
N82°42'45"W
N55°25'20"W
113.47
House
Proposed House
LOT 6
0.90 AC.
20'
30' pool
Well
50' BUFFER FROM THE 760 CONTOUR
O1
Y2
P3
B4
W5
Pit 1
Pit 2
Pit 3
Pit 4
Pit 5
Pit 6
35' SETBACK
Area of Compaction (DO NOT USE)
Repair Area
AB 1
10' SETBACK
10'
20' Drainage Easement
LOT 7
S01°01'15"E
130.55
49.27
11°46'09"E
S83°17'46"E
122.87
Shallow Rill
L10
L11
L12
L13
L14
L15
L16
L17
L18
L19
L20
760 CONTOUR PER ACTUAL FIELD SUR
(FLOOD LINE)
LAKE NORMAN
N
50' scale: 1"=40'
100'
IN FEET
LEGEND
P.P. = POWER POLE
= POWER TRANS.
E.I.P. = EXISTING IRON FOUND
JOHN CLONTZ FAMILY LLC.
2220/485
O1 - 28'
Y2 - 70'
P3 - 74'
B4 - 74'
W5 - 74'
Scale
1"=40'
Approved
9/10/19



**MICHAEL ATHANAS & ASSOCIATES**
**LICENSED SOIL SCIENTIST**
**561 Ennis Rd.**
**Weddington, NC 28173**
**(704) 576-3887**
**8/26/2019**

**Reference: Data Sheet for Barrister Bay Lot 6**
**House Footprint:** See attached plan
**Building Setbacks:** 35' front, 15' side, 50' lake
**Water Source:** Private well
**Number of Bedrooms/Daily Flow:** 4/480 GPD
**Proposed LTAR:** 0.25 GPD/FT$^2$ (initial), 0.125 GPD/FT$^2$ (repair)
**Proposed System Type:** Horizontal PPBPS
**Proposed Repair System Type:** Pretreatment Drip Irrigation
**Distribution:** Low Pressure-CVB
**Flow per Orifice:** 0.59 GPM
**Orifice Size:** 3/16"
**System Flow:** 43.1 GPM
**Dosing Volume:** 262.8 gallons
**Pump Run Time:** 6.1 minutes
**Elevation Head:** 16.5'
**Friction Head:** 5.9'
**Pressure Head:** 2'
**Total Dynamic Head:** 24.4'
**Supply Line Length:** 150' of 2" PVC
**Septic/Pump Tank Size:** 1000/1000 gallons
**Proposed Trench Bottom:** 18" per ICHD (initial), 6" (repair)

Approved
9/10/19

| Line | Design Length | # of Panels | Actual Length | Elevation |
|---|---|---|---|---|
| Orange 1 | 28' | 6 | 28' | 3.0' |
| Yellow 2 | 70' | 16 | 73' | 4.3' |
| Pink 3 | 74' | 17 | 75' | 5.3' |
| Blue 4 | 74' | 17 | 75' | 6.2' |
| White 5 | 74' | 17 | 75' | 7.5' |

**Initial System:** 320' **Repair System:** 4900+ FT$^2$
**Pump Tank:** 14.5' **House Corner:** 14.2' **Benchmark:** 1.3'

**Comments:**
Due to revocation of the permit, MA&A have redesigned the repair area to exclude the area compromised by the dumpster (shown in blue on the site plan). ICHD is recommending the trench bottom of the initial system to be changed from 14" to 18" due to compaction. Initial system will need 2" of stable cover added.

# SOIL/SITE EVALUATION
## *for* ON-SITE WASTEWATER SYSTEM

OWNER: Jay Kevin White
ADDRESS: 120 Barrister Bay Ln, Mooresville, NC 28117
PROPOSED FACILITY: 4 BDRM
PROPOSED DESIGN FLOW (.1949): 480 GPD
LOCATION OF SITE: Barrister Bay Lot 6
APPLICATION DATE
DATE EVALUATED:
PROPERTY SIZE: 0.691 AC
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 | |
| PIT 1 | LS 4% | 0-15 | Br SCL WSBK | FR SS SP SXP | Chr 2 @47" | 47" | Few SAP | N/A | PS 0.3 |
| | | 15-39 | R C SBK | FR SS SP SXP | | | | | |
| | | 39-47 | R CL WSBK | FR SS SP SXP | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| PIT 2 | LS 4% | 0-10 | Br SCL WSBK | FR SS SP SXP | N/A | 58" | F-C SAP | N/A | PS 0.3 |
| | | 10-42 | R C WSBK | FR SS SP SXP | | | | | |
| | | 42-58 | R CL WSBK | FR SS SP SXP | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| PIT 3 | LS 4% | 0-7 | Br SCL WSBK | FR SS SP SXP | LITHO | 48" (ICHD 40") | N/A | N/A | PS 0.25 |
| | | 7-24 | R C SBK | FR SS SP SXP | | | | | |
| | | 24-48 | R CL WSBK | FR SS SP SXP | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| PIT 4 | LS 4% | 0-4 | Br SCL WSBK | FR SS SP SXP | LITHO Chr 2 @ 24" | 47" | F-C SAP | N/A | PS 0.3 |
| | | 4-24 | R C SBK | FR SS SP SXP | | | | | |
| | | 24-47 | R CL WSBK | FR SS SP SXP | | | | | |
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| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | 960 FT$^2$ | 4100 FT$^2$ |
| System Type(s) | HORZ. PPBPS | DRIP |
| Site LTAR | 0.25 | 0.125 |

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

COMMENTS:

# SOIL/SITE EVALUATION

*(Continuation Sheet)*



PROPERTY ID #: 4646324653____
DATE OF EVALUATION: _____
COUNTY: _IREDELL_____

| 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 | |
| PIT 5 | LS 4% | 0-6 | Br SCL WSBK | FR SS SP SXP | Com LITHO | 53" (ICHD 30" Avg) | N/A | N/A | PS 0.25 |
| | | 6-36 | R C SBK | FR SS SP SXP | | | | | |
| | | 36-53 | R C ABK | FR SS SP SXP | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| PIT 6 | LS 4% | 0-3 | Br SCL WSBK | FR SS SP SXP | LITHO | 58" | N/A | N/A | PS 0.3 |
| | | 3-40 | R C ABK | FR SS SP SXP | | | | | |
| | | 40-58 | R CL WSBK | FR SS SP SXP | | | | | |
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| | | | | | | | | | |
| AB 1 | LS 8% | 0-16 | Br CL WSBK | FR SS SP SXP | CHR 2 @ 30" | 30" | N/A | N/A | DRIP 0.125 |
| | | 16-25 | R C SBK | FR SS SP SXP | | | | | |
| | | 25-30 | YB C/CL WSBK | FR SS SP SXP | | | | | |
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COMMENTS: _____

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## *for* ON-SITE WASTEWATER SYSTEM

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APPLICATION DATE
ADDRESS: 120 Barrister Bay Ln, Mooresville, NC 28117
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PROPOSED DESIGN FLOW (.1949): 480 GPD
PROPERTY SIZE: 0.691 AC
LOCATION OF SITE: Barrister Bay Lot 6
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 | |
| PIT 1 | LS 4% | 0-15 | Br SCL WSBK | FR SS SP SXP | Compacted | 47" | | N/A | PS 0.3 |
| | | 15-39 | R C SBK | FR SS SP SXP | | | | | |
| | | 39-47 | R CL WSBK | FR SS SP SXP | Chr 2 @47" | | Few SAP | | |
| | | | | | | | | | |
| | | | | | | | | | |
| PIT 2 | LS 6% | 0-10 | Br SCL WSBK | FR SS SP SXP | N/A | 58" | | N/A | PS 0.3 |
| | | 10-42 | R C WSBK | FR SS SP SXP | | | | | |
| | | 42-58 | R CL WSBK | FR SS SP SXP | | | F-C SAP | | |
| | | | | | | | | | |
| | | | | | | | | | |
| PIT 3 | LS 6% | 0-7 | Br SCL WSBK | FR SS SP SXP | | 48" | N/A | N/A | PS 0.3 |
| | | 7-24 | R C SBK | FR SS SP SXP | | | | | |
| | | 24-48 | R CL WSBK | FR SS SP SXP | LITHO | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| PIT 4 | LS 6% | 0-4 | Br SCL WSBK | FR SS SP SXP | | 47" | | N/A | PS 0.3 |
| | | 4-24 | R C SBK | FR SS SP SXP | LITHO | | | | |
| | | 24-47 | R CL WSBK | FR SS SP SXP | Chr 2 @ 47" | | F-C SAP | | |
| | | | | | *30' Cwavy J | | | | |
| | | | | | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | 876 FT$^2$ | 981 FT$^2$ |
| System Type(s) | PPBPS | PPBPS |
| Site LTAR | 0.275 | 0.275 |

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

COMMENTS:

# SOIL/SITE EVALUATION

*(Continuation Sheet)*



PROPERTY ID #: 4646324653____
DATE OF EVALUATION: _____
COUNTY: _IREDELL_____

| 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 | |
| PIT 5 | LS 6% | 0-6 | Br SCL WSBK | FR SS SP SXP | Com LITHO | 53" | N/A | N/A | PS 0.3 TO 36" 0.25 >36" |
| | | 6-36 | R C SBK | FR SS SP SXP | | | | | |
| | | 36-53 | R C ABK | FR SS SP SXP | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| PIT 6 | LS 6% | 0-3 | Br SCL WSBK | FR SS SP SXP | LITHO | 58" | N/A | N/A | PS 0.3 |
| | | 3-40 | R C ABK | FR SS SP SXP | | | | | |
| | | 40-58 | R CL WSBK | FR SS SP SXP | | | | | |
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**APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED**

AP240214
$320 pd

# 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 (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:** (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:** (PRINT CLEARLY)

**Applicant Name:** Foundation Homes **Address:** 438 Williamson Rd Mooresville **Zip:** 28117

**Applicant Email:** _____ **Phone:** 704 360 2251 **Alt. Phone:** _____

**Owner Name:** Same **Address:** _____ **Zip:** _____

**Owner Email:** _____ **Phone:** _____ **Alt. Phone:** _____

**Property Information:**

**Street Address:** 128 Barrister Bay Ln

**Subdivision Name:** Barrister Bay **Section/Phase:** _____ **Lot Number:** 6

**Driving Directions:** _____

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

(X) 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: _____
( ) Swimming Pool
( ) Other Addition/Structure: _____

**CHECK FOUNDATION TYPE**

(X) Crawl Space Foundation
( ) 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: _____

(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:** _____ 8/30/2019
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

290219

# IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

*APPLICATION FORM*

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

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*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:** Foundation Homes **Address:** 438 Williamson Rd, Suite C, Mooresville, NC **Zip:** 28117

**Applicant Email:** _____ **Phone:** Jonathan-704-650-2260 **Alt. Phone:** _____

**Owner Name:** Kevin White **Address:** 120 Barrister Bay Ln, Mooresville, NC **Zip:** 28117

**Owner Email:** _____ **Phone:** _____ **Alt. Phone:** _____

**Property Information:**

**Street Address:** 128 Barrister Bay Ln

**Subdivision Name:** Barrister Bay **Section/Phase:** _____ **Lot Number:** 6

**Driving Directions:** _____

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

**CHECK FOUNDATION TYPE**

(✓) New Single Family Residence
( ) New Multi-Family Residence
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**Non-Residential Site Development:** Type of Business: _____
Square Footage of Building: _____ Max. Number of Employees: _____ Max. Number of Seats/Beds/Other: _____

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( ) 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 ( ) 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:** _____ 2/8/2019
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

29029

# IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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**Owner Email:** _____ **Phone:** _____ **Alt. Phone:** _____

**Property Information:**

**Street Address:** 128 Barrister Bay Ln

**Subdivision Name:** Barrister Bay **Section/Phase:** _____ **Lot Number:** 6

**Driving Directions:** _____

**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: _____
( ) 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:** _____ 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 ( ) 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:** _____ 11/9/2018
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) 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, Jay K. White, am the legal owner(s) of the property located at Lot 6 - Barrister Bay Ln, Mooresville, identified as PIN (Parcel Identification Number) 4646-32-4653, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Michael Athanas + Assoc, Jonathan Smith, Foundation 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.

Jay Kevin White dotloop verified 11/08/18 9:33AM EST 4ULA-YXT0-TKZT-O43J

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

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:

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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, Adam Barish, am the legal owner(s) of the property located at 128 Barrister Bay, Mooresville NC 28117, identified as PIN (Parcel Identification Number) 4646-32-4653, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Jonathan Smith, Foundation Homes Residential LLC 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 2-8-19 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

| SQUARE FOOTAGE | |
|---|---|
| 1ST FLOOR HEATED | 5059 |
| 2ND FLOOR HEATED | 1241 |
| TOTAL HEATED | 6301 |
| GARAGES | 459 |
| PORCHES | 410 |
| TOTAL UNDER ROOF | 7115 |

FIRST FLOOR PLAN

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

| | |
|---|---|
| SHEET: | A-5 |
| DATE: | 1/15/2019 |
| SCALE: | |

VISUAL DESIGN
VISUAL DESIGN & DRAFTING

PROJECT DESCRIPTION:
Adam and Kim Barish

| NO. | DESCRIPTION | BY | DATE |
|---|---|---|---|

DEV

SECOND FLOOR PLAN

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

| SQUARE FOOTAGE | |
|---|---|
| 1ST FLOOR HEATED | 3265 |
| 2ND FLOOR HEATED | 1264 |
| TOTAL HEATED | 4529 |
| GARAGES | 918 |
| PORCHES | 418 |
| TOTAL UNDER ROOF | 5115 |

| NO. | DESCRIPTION | BY | DATE |
|---|---|---|---|
| | | | |

DEV

PROJECT DESCRIPTION:
Adam and Kim Barish

VISUAL DESIGN & DRAFTING

DATE: 1/15/2019

SCALE:

SHEET: A-6

# IREDELL COUNTY

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

| APPLICATION NUMBER |
|---|
| 240214 |
| Issue Date: 11/09/2018 |

## ZONING PERMIT

Open Space

| Parcel Number | Street Address | Jurisdiction |
|---|---|---|
| 4646324653.000 | 128 BARRISTER BAY LANE, MOORESVILLE, NC 28117 | |

| Owner Information | Applicant Information |
|---|---|
| Owner: WHITE JAY KEVIN | Applicant: MICHAEL ATHANAS & ASSO |
| Address: 167 | Address: 561 ENNIS RD |
| IREDELL CO, NC 28625 | WEDDINGTON, NC 28173 |
| Phone: | Phone: 704-576-3887 |

| Use Requested | Zone Code |
|---|---|
| | |

| Lot Acreage | F Setback | B Setback | L Setback | R Setback | Watershed | Flood Zone |
|---|---|---|---|---|---|---|
| .900 | 35.00 | 50.00 | 15.00 | 15.00 | CA | AE |

**Remarks:**

Lake Lots: Must meet both the 50-foot setback from the 760 Æ contour line and the 35-foot setback from the rear property line for any structure.

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 | 158580 | TOTAL FEES: | $ 77.25 |
|---|---|---|---|