ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP 312423

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

PIN # 4648 -- 06 -- 5913

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

SITE ADDRESS: 140 Morgan Bluff Rd, Mooresville NC 28117 | PHONE: 704-360-2251 | ALT. PHONE

SITE DIRECTIONS: NC 150 (W) → (R) Perth → (R) Cornelius → (R) Morgan Bluff → lot on (L) | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Pirates Cove | SECTION: - | LOT # 30 | LOT AREA: 0.475 ac | DESIGN FLOW: 360 gpd | L.T.A.R.: 0.3/0.15CR

Septic Tank	1000 (gal)	STB SHOAF 7160	Date 6/23/21	☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 3
Pump Tank	1000 (gal)	PT SHOAF 363	Date 6/27/21	System Description: VPPBPS - DM				☐ Business	No. Persons 6
Pump Make	Barnes	Model 1/2 hp	Serial # EH2512	Repair System Description: TS II Drip				☐ Other	No. Employees
# Nitrification Fields	1	# Lines 5	Linear Ft: 200'	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☐ Crawl Space
Trench Width	24"	Trench Bottom Depth(Low side)	31"	Gravel Depth N/A	☐ GRAVITY	☒ PRESSURE		☒ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Purpose of this permit is to redesignate repair area to accomodate change in driveway location & addition of retaining wall.

INITIAL SITE SKETCH

See attached site plan by Michael Athanas & Associates.

Approved 11/4/21

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.

System installed - check original Permit for notes

	Date	Initials
Drain Lines Checked	8/9/21	MD
Tanks Checked	8/9/21	MD
Pressure Manifold or Valve Box Checked	8/10/21	MD
Pressure Head Set	10/28/21	CW
Electrical Checked	10/28/21	CW
Floats Set	10/28/21	CW
Alarm Checked	10/28/21	CW
Maintenance Contract Y (N)	—	—

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.*

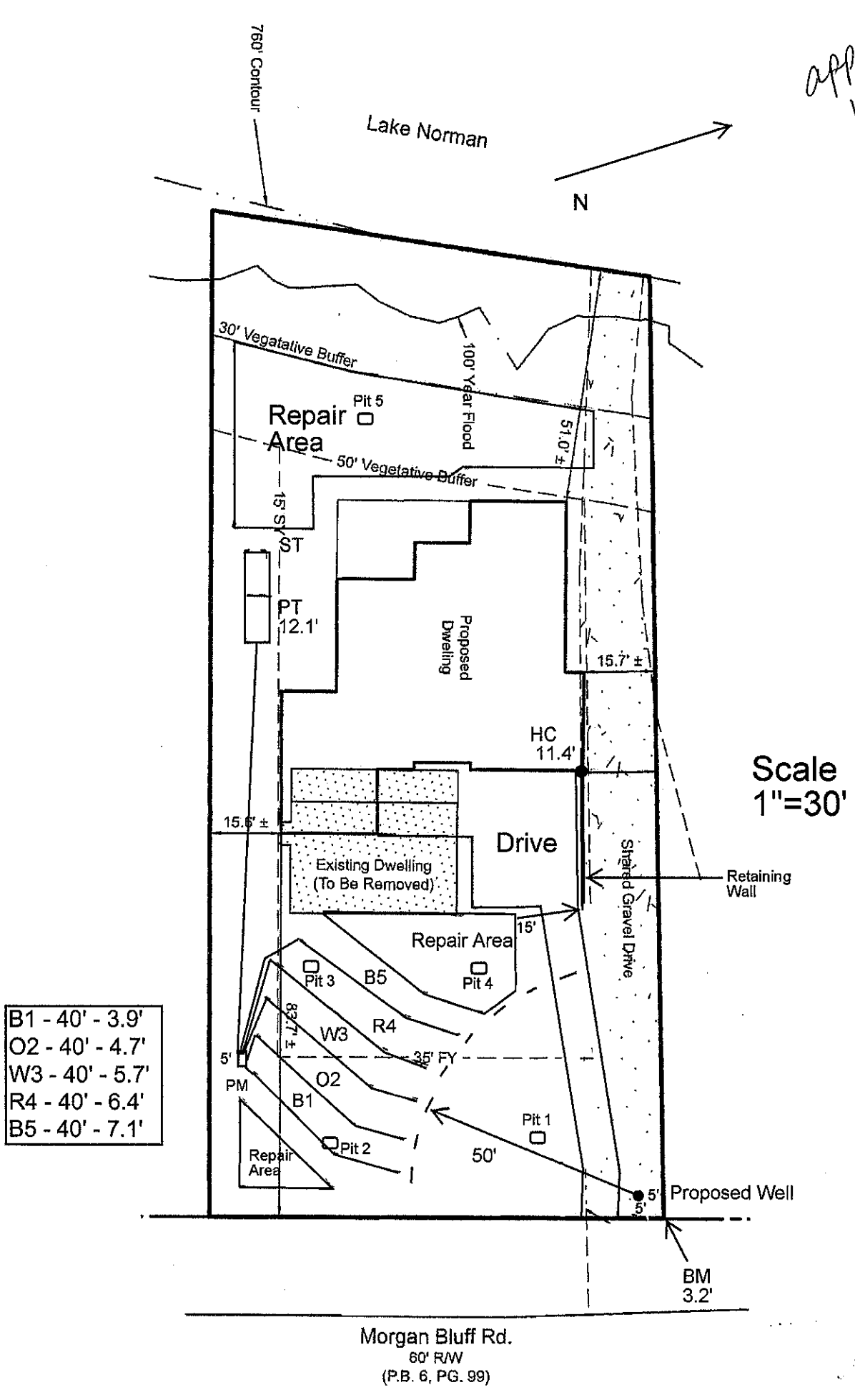
Owner / Applicant Signature: [signature] Date: 11-4-21 | Installed by: Specialty Septic

IMPROVEMENT PERMIT by: D. Meberg Date: 11/4/21 | OPERATION PERMIT by: Cory White Date: 11/12/21

AUTHORIZATION TO CONSTRUCT by: D. Meberg Date: 11/4/21 | Existing System Inspected by: Date:

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

approved
11/4/21
DW



approved
11/4/21
DW



MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887
10/28/2021

Reference: Data Sheet for 140 Morgan Bluff Rd, Pirates Cove Lot 30
House Footprint: See attached plan
Building Setbacks: 35' front/rear, 15' side
Water Source: Private Well
Number of Bedrooms/Daily Flow: 3/360 GPD
Proposed LTAR: 0.3 GPD/FT^2 (initial), 0.15 GPD/FT^2 (repair)
Proposed System Type: PPBPS
Proposed Repair System Type: TSII American Perc-Rite Drip Dispersal
Distribution: Pressure Manifold
Flow per Tap: 5.48 GPM
Tap Size and Material: ½" SCH 80
System Flow: 27.4 GPM
Dosing Volume: 162 gallons
Pump Run Time: 6 minutes
Elevation Head: 13.2'
Friction Head: 1.7'
Pressure Head: 2'
Total Dynamic Head: 16.9'
Supply Line Length: 90' of 2" PVC
Septic/Pump Tank Size: 1000/1000 gallons
Proposed Trench Bottom: 30-36"



Line	Design Length	# of Panels	Actual Length	Elevation
Blue 1	40'	9	45'	3.9'
Orange 2	40'	9	44'	4.7'
White 3	40'	9	47'	5.7'
Red 4	40'	9	50'	6.4'
Blue 5	40'	9	42'	7.1'

Initial System: 200' **Repair System:** 2585 FT^2
Pump Tank: 12.1' **House Corner:** 11.4' **Benchmark:** 3.2' (Top of Iron)

Comments:
Deeded 7/31/1961 BK/PG 6/99
10/28/2021
The initial system has been installed. MA&A are redefining the repair area due to the installation of a retaining wall.

PROPERTY ID #: 4648065913
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Daniel Van Rossen II
APPLICATION DATE
ADDRESS: 20215 Oakbranch Ln, Cornelius, NC 28031
DATE EVALUATED: 10/2020
PROPOSED FACILITY: 3 BDRM PROPOSED DESIGN FLOW (.1949): 360 GPD
PROPERTY SIZE: 0.475 AC
LOCATION OF SITE: 140 Morgan Bluff Rd, Pirates Cove Lot 30
PROPERTY RECORDED: 7/31/1961
WATER SUPPLY: X Private ☐ Public X 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)		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 6%	0-6	FILL		N/A	51"	N/A	N/A	PS 0.3
		6-13	Br SCL WSBK	FR SS SP SXP					
		13-51	R C SBK	FR SS SP SXP					
2	LS 6%	0-2	Br SCL WSBK	FR SS SP SXP	N/A	56"	F-C SAP	N/A	PS 0.3+
		2-27	R C SBK	FR SS SP SXP					
		27-56	R CL WSBK	FR SS SP SXP					
3	LS 6%	0-20	R C SBK	FR SS SP SXP	N/A	60"	C-M SAP	N/A	PS 0.3+
		20-60	R CL WSBK	FR SS SP SXP					
4	LS 6%	0-12	RBr CL WSBK	FR SS SP SXP	Few YB @ 34" CHR 2 @ 40"	40"	N/A	N/A	PS 0.3 TO 30"
		12-56	R C SBK	FR SS SP SXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	400 FT^2	2800 FT^2
System Type(s)	PPBPS	TSII DRIP
Site LTAR	0.3	0.15

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

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet)

PROPERTY ID #: 4648065913
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	
5	LS 5%	0-20	Br SCL WSBK	FR SS SP SXP	N/A	50"	N/A	N/A	PS 0.3
		20-36	RBr CL WSBK	FR SS SP SXP					
		36-50	R C SBK	FR SS SP SXP					

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

Sheet 1 of 2
PROPERTY ID #: 4648065413
COUNTY: Iredell

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

OWNER: Foundation Homes Call Michelle Backer 704-euo-e mail 1009
ADDRESS: 438 Williamson Rd suite L Mooresville NC 28117
PROPOSED FACILITY: New single fam PROPOSED DESIGN FLOW (.1949): 360GPD
LOCATION OF SITE: 140 Morsan Bluff

APPLICATION DATE 11/4/2020
DATE EVALUATED: 11/18/2020
PROPERTY SIZE: 0.475 acres
PROPERTY RECORDED: Yes

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	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	9%								In well area Not using
2	SS 8%	0-24	L SBK	FrSSSPSExP	—	50"	Litho inclusions more common at bottom	—	PS,3
		24-50	LL SBK	FrSSSPSExP					
3	SS 12%	0-4	SCL WSBK	FrSSSPSExP	—	57"	Litho inclusions more common at bottom	—	PS,3
		4-22	C SBK	FrSSSPSExP					
		22-57	CL SBK	FrSSSPSExP					
4	SS 8%	0-6	SCL WSBK	FrSSSPSExP	YBmottles to Chroma 2 sat 40" 5Y8/2	50"	—	Chroma 2 sat 40"	PS,3 to U at 40
		6-15	C SBK/ABK	FrSPSExP					
		15-50	LL SBK	FrSPSExP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	200	2800 sqft
System Type(s)	PmpPBPS	Drip
Site LTAR	.3	.15

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: Patrick B
OTHER(S) PRESENT:

COMMENTS:

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

PROPERTY ID #: 4648065913
COUNTY: Iredell

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

OWNER: Foundation Homes
ADDRESS: 438 W Williamson Rd Suite C Mooresville NC 28117
PROPOSED FACILITY: New Single Family PROPOSED DESIGN FLOW (.1949): 360 GPD
LOCATION OF SITE: 140 Morgan Block 4
APPLICATION DATE 11/4/2020
DATE EVALUATED: 11/18/2020
PROPERTY SIZE: 0.47 acres
PROPERTY RECORDED: yes

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	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
5	SS 5%	0-20	SCL WSBK	FrSSSPSoap	—	51"	few Litho inclusions	✓	PS, 3
		20-38	C SBK	FrSSSPSoap					
		38-51	CL SBK	FrSSSPSoap					
2									
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	200	2800 sq ft
System Type(s)	PMP/BPS	Drip
Site LTAR	.3	.15

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: Patrick B
OTHER(S) PRESENT:

COMMENTS:

RECEIVED NOV C 1 2021

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

Iredell County Health Department – Environmental Health Division

Intermediate Redraw AP-312423 PAGE 1: *APPLICATION FORM* AP-312423 $225.00

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: Foundation Homes Residential, LLC Address: 438 Williamson Road, Suite C, Mooresville NC Zip: 28117

Applicant Email: mitzi@foundationhomesIkn.com Phone: 704-360-2251 Alt. Phone: _____

Owner Name: Daniel & Stephanie Vanhossen Address: 20215 Oakbranch Ln Cornelius Nc Zip: 28031

Owner Email: dan.vanhossen@gmail.com Phone: 971-347-7807 Alt. Phone: —

Property Information:

Street Address: 140 Morgan Bluff Rd Mooresville Nc 28117

Subdivision Name: _____ Section/Phase: _____ Lot Number: 30

Driving Directions: NW on Williamson Rd toward 1190, Bluefield Rd, L on Cornelius Rd, L on Morgan Bluff Rd

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

CHECK FOUNDATION TYPE

(✓) New Single Family Residence — Maximum Number of Bedrooms: 3 — ( ) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: 6 — ( ) Concrete Slab Foundation
( ) Accessory Building — ( ) Swimming Pool — (✓) Basement with Plumbing
( ) Bedroom(s) Addition — ( ) Other Addition/Structure: _____ — ( ) Basement without Plumbing
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____
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.

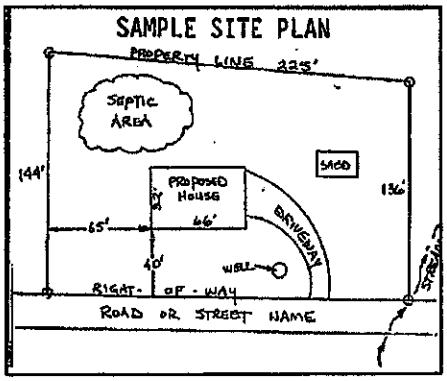
Signature: _____ 10/28/2021
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

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

✓

Signature: _____

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

11/11/2021

DATE

DocuSign Envelope ID: EFFCED1E-8609-42C7-8206-79099509C82E

Sent to Gary

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, Dan Van Rossen STEPHANIE ROSSEN, am the legal owner(s) of the property located at 140 Morgan Bluff, Mooresville, NC 28117, identified as PIN (Parcel Identification Number) 4648-06-5913, 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.

Dan Van Rossen STEPHANIE 11/3/2020

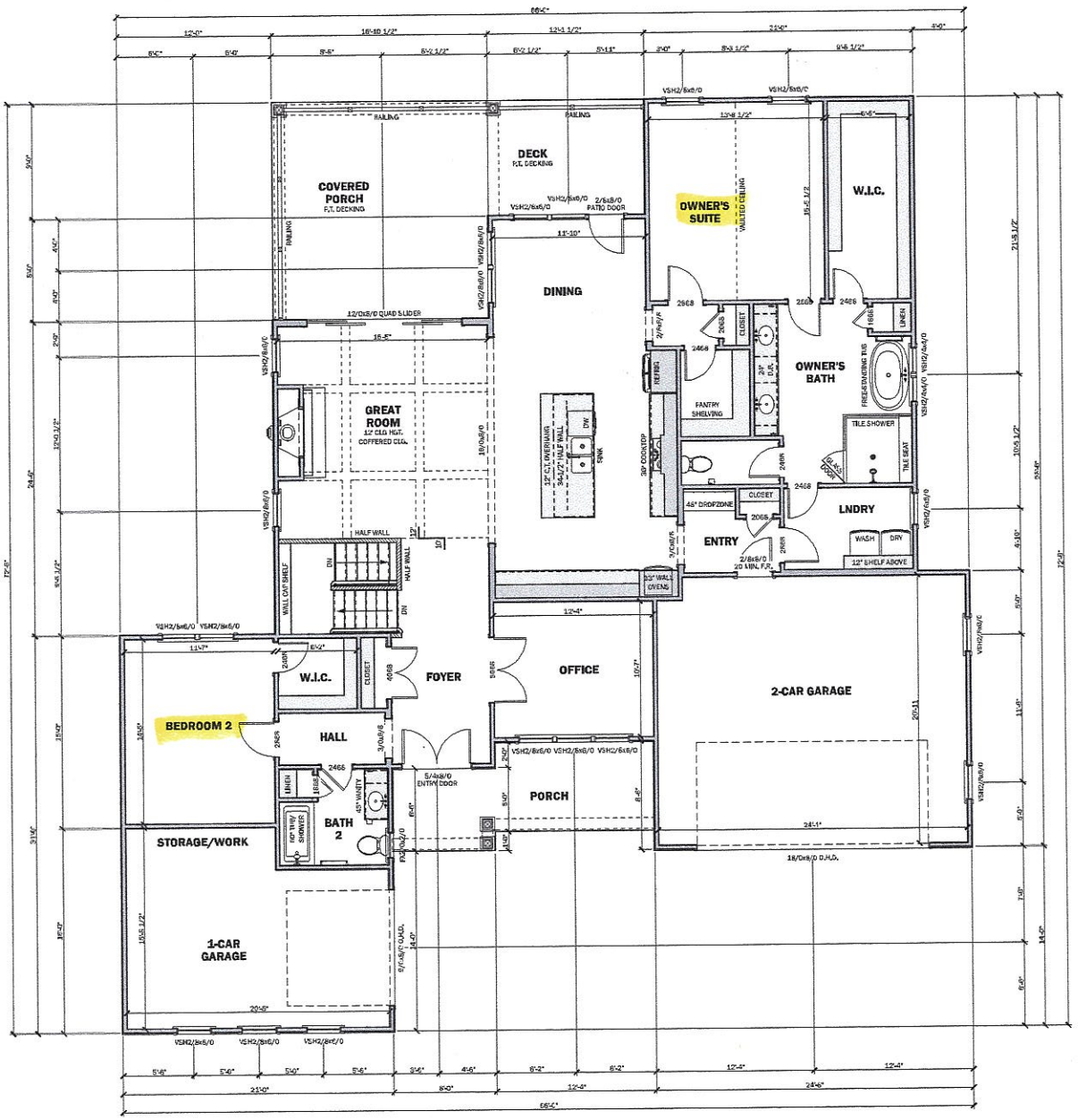
Signature of Owner(s) Date

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



SQUARE FOOTAGE	
FIRST FLOOR:	2,130 SF
LOWER LEVEL:	1,223 SF
TOTAL:	3,353 SF
1-CAR GARAGE:	306 SF
2-CAR GARAGE:	621 SF
FRONT PORCH:	136 SF
REAR PORCH:	256 SF
TOTAL UNDER ROOF:	4,614 SF
DECK:	100 SF
CRAWL SPACE:	571 SF
UNFIN. BSMNT:	346 SF

Acknowledgement Of Plans Submittal ONLY!

By [signature] Date 11-4-21

Print [illegible] Date 12/8/2020

459 Williamson Road
Suite C
Mooresville, NC 28117
704-360-2321
www.foundationhomesnc.com

Township/County: TOWNSHIP COUNTY

Engineer:
INTELLIGENT DESIGN ENGINEERING
19425 J N PEASE PLACE
#204
CHARLOTTE, NC 28262
CHAD RITTER, P.E.
CORPORATE LIC. #C-3118
704-335-7200

Stamp/Seal

Project Name/Owner:
THE MODEL NAME
COMMUNITY NAME
LOT NUMBER
SITE ADDRESS LINE 1
CITY, STATE ZIP

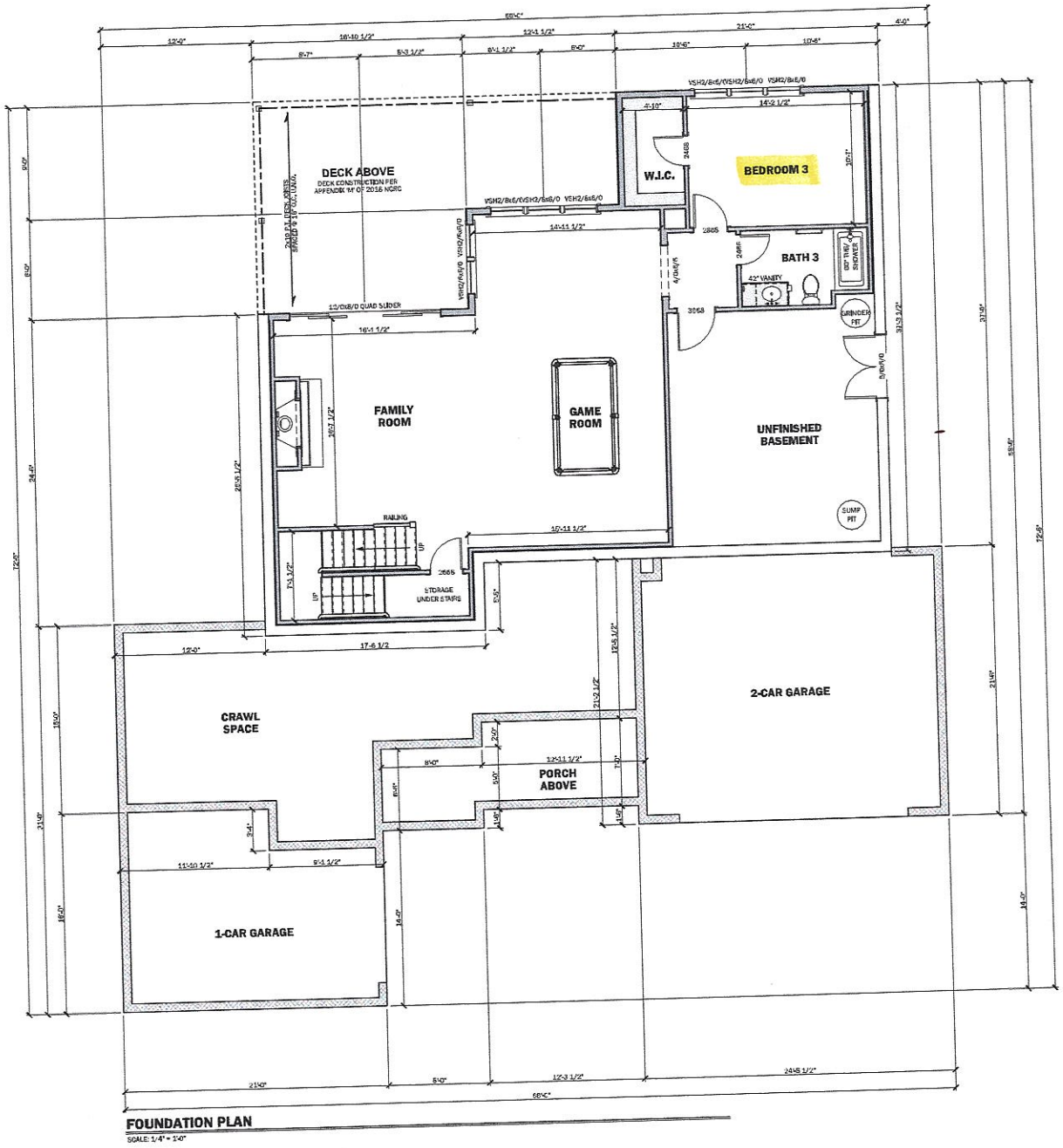
CLIENT NAME
STREET ADDRESS
CITY, STATE ZIP

PH:000-000-0000

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Date: 10/16/2020
Drawn By: RES
Reviewed By: —
Plan Set Scale: 24x36 sheet 1/4" = 1'-0" / 11x17 sheet 1/8" = 1'-0"
Project Plan Code: —
Drawing Set: FOR CONSTRUCTION
Sheet Title Description: MAIN LEVEL FLOOR PLAN
Sheet Number: A4.0
Master Plan Version: v1.0

C:\Revit\Main Graphics\Documents\My_Local Files_USA\Foundation Homes\Central Division\Revit\Projects\Model plan code 24"x36" 1/4" = 1'-0" plot date= Friday, October 16, 2020 9:21:21 AM



FOUNDATION PLAN

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

Acknowledgement Of Plans Submittal ONLY!

Date 10/29/2020

Date 12/28/2020

438 W Catawba Road
Suite C
Mooresville, NC 28117
704-360-2251
www.foundationshomebuilders.com

Township/County: TOWNSHIP COUNTY

Engineer:

INTELLIGENT DESIGN ENGINEERING
1945 J N PEASE PLACE
#204
CHARLOTTE, NC 28262
CHAD RITTER, P.E.
CORPORATE LIC. #C-2819
704-335-7200

Stamp/Seal

Project Name/Owner:

THE MODEL NAME
COMMUNITY NAME
LOT NUMBER
SITE ADDRESS LINE 1
CITY, STATE ZIP

CLIENT NAME
STREET ADDRESS
CITY, STATE ZIP

PH:000-000-0000

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Date	10/19/2020
Drawn By	RES
Reviewed By	—
Plan Set Scale	24x36 sheet 1/4" = 1'-0" 11x17 sheet 1/8" = 1'-0"
Project Plan Code	—
Drawing Set	FOR CONSTRUCTION
Sheet Title Description	LOWER LEVEL FLOOR PLAN
Sheet Number	A3.0
Master Plan Version	v1.0

IREDELL COUNTY · NC

Hawal Dewo Fraus

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

APPLICATION NUMBER
312423
Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4648065913.000	140 MORGAN BLUFF RD	Iredell County

Owner Information	Applicant Information
Name: VAN ROSSEN DANIEL M II+STEPHANIE A	Name: MICHAEL ATHANAS & ASSOCIATES
Address:	Address: 561 ENNIS RD
	WEDDINGTON, NC 28173
Phone:	Phone: (704)576-3887

Use Requested	Zone Code
Single Family Dwelling	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0	35	50	15	15	WSIV-CA Catawba/Lake Norman	YES

Remarks
SFD

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 responsiblity of the affected parties.

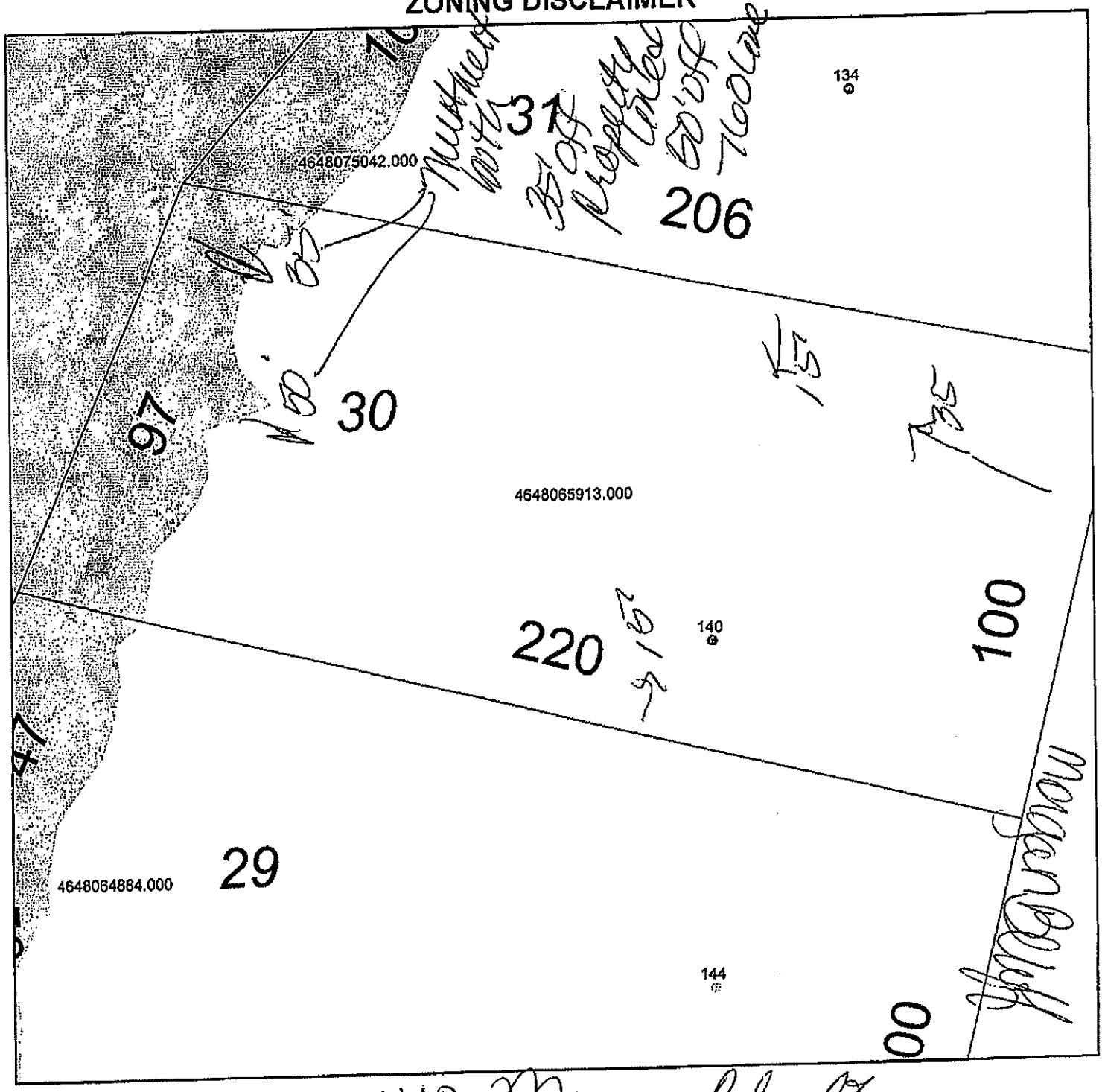
Date: 11/05/2020

Signature of Owner/Contractor

Permit Number	312423

TOTAL FEES:	$77.25

ZONING DISCLAIMER



Property Address 140 Morgan Blvd

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. Applicant further acknowledges that the 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.

11/5/2020

Date

ICHD--ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625

PERMIT # AP312423

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

PIN # 4648065913

APPLICANT/OWNER: Foundation Homes

APPLICANT ADDRESS: 438 Williamson Rd Suite L Mooresville NC 28117 (704 43

SITE ADDRESS: 140 Morgan Bluff Rd Mooresville NC 28117

PHONE: 704-650-2260 ALT. PHONE 704-576-3887 (Mike A) 979

SITE DIRECTIONS: NC 115 N to Lon Connector Rd, S on Cornelius Rd, Lon Morgan Bluff, Lot on R

SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Pirates Cove

SECTION: — LOT # 30 LOT AREA: 4 acre

DESIGN FLOW: 360GPD L.T.A.R.: .3

Septic Tank	1000 (gal)	STB	160	Date	6/23/21	☒ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI
Pump Tank	1000 (gal)	PT	363	Date	6/27/21	System Description:	PM PPBPS
Pump Make	Barnes	Model	½ hp	Serial #	EH2512	Repair System Description:	TS 2 Drip
# Nitrification Fields	1	# Lines	5	Linear Ft	200	Maintenance Agreement Required:	☐ YES ☒ NO
Trench Width	24"	Trench Bottom Depth(Low side)	31"	Gravel Depth	—	☐ GRAVITY	☒ PRESSURE

☒ Residence	No. Bedrooms	3	Water Supply
☐ Business	No. Persons	6	☒ Private
☐ Other	No. Employees		☐ Public
☐ Slab	☐ Crawl Space		☐ Community
☒ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions: Install Lines on contour. DO NOT drive on store material or manipulate drainfield in any way. All property Lines, corners and 50' Buffer must be marked.

~3ft elevation difference btw ST & PT due to rock under ST

8/9/21 Checked tanks & drain lines & supply lines

8/10/21 Checked PM by ☒

INITIAL SITE SKETCH

See Attached and Approved site plan By Michael Athanas and Associates Dated 12/28/2020 PJB

AS BUILT SKETCH

Installed PPBPS as shown

Revised

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: Brenda Smith Date: 12/29/2020 Installed by: Specialty Septic

IMPROVEMENT PERMIT by: Patrick J Boyle III Date: 12/28/2020 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Patrick J Boyle III Date: 12/28/2020 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 inspector to confirm your inspection time