IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 227519 ~~212006~~

KW 1pm "

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

PIN # 4648-48-~~2117~~ 9196

APPLICANT/OWNER: Nest Homes LLC. APPLICANT ADDRESS: P.O. Box 3965 Mooresville, NC 28117

SITE ADDRESS: 138 Sisters Cove Court - Mrsvl 28117 PHONE: 980-500-1226 ALT. PHONE

SITE DIRECTIONS: Perth Rd N from Rt 150 → R on Coneline Rd → R on Sisters Cove Court SAP CONTROLLED: ☐ YES ☒ NO

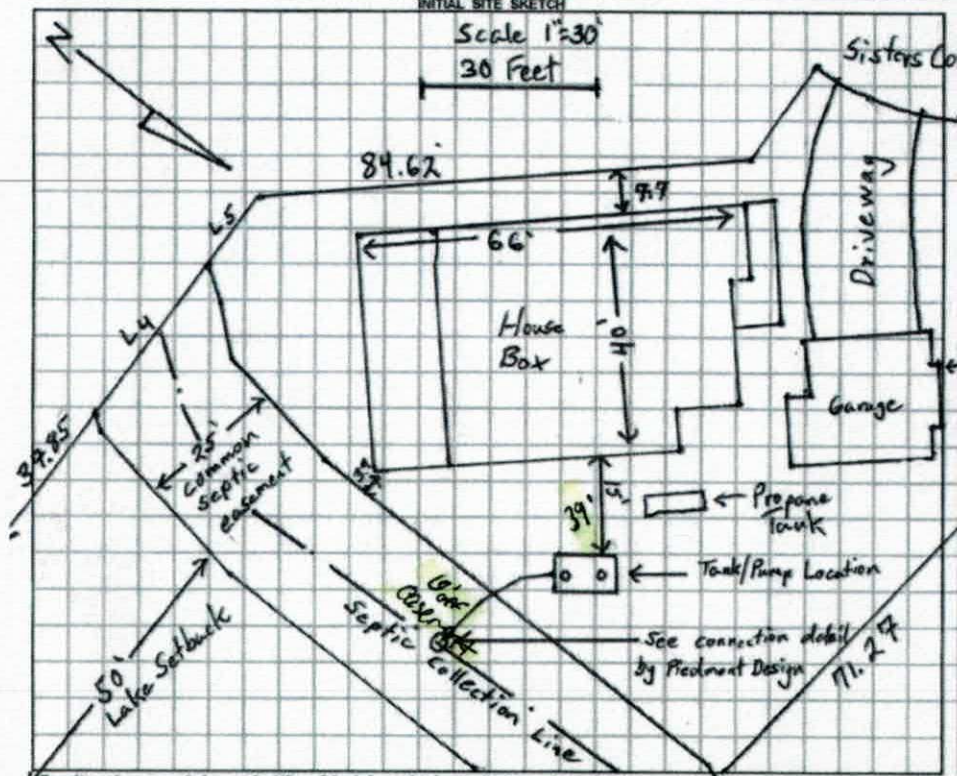
SUBDIVISION: Sisters Cove SECTION: 5 LOT # 24 LOT AREA: 0.396 DESIGN FLOW: 360 GPD L.T.A.R.: —

Septic Tank 2000 (gal)	STB ~~74-200~~	Date 12/14/17	☒ New System ☐ Repair ☐ Expansion	System Type: I II III IV (V) VI	☒ Residence	No. Bedrooms 3	Water Supply
Pump Tank (gal)	PT	Date	System Description: Community TS II Drip Irrigation		☐ Business	No. Persons 6	☐ Private
Pump Make	Model	Serial #	Repair System Description: Community TS II Drip Irrigation		☐ Other	No. Employees	☐ Public
# Nitrification Fields 1	# Lines	Linear Ft.	Maintenance Agreement Required:	☒ YES ☐ NO	☐ Slab	☒ Crawl Space	☐ Community
Trench Width	Trench Bottom Depth(Low side)	Gravel Depth		☐ GRAVITY ☒ PRESSURE	☐ Basement w/plumbing	☒ Basement w/o plumbing	

Comments / Conditions: Install pump package, control panel and connect to collection line as specified by Piedmont Design.

55 ½" water level

INITIAL SITE SKETCH



AS BUILT SKETCH

Permit can be suspended or revoked if any false information is supplied toward securing the permit / any unauthorized changes are made to the site / any unauthorized changes are made in the installation of the system. CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

☐ IMPROVEMENT PERMIT *with plat* valid without expiration. ☐ IMPROVEMENT PERMIT *with site plan* valid for 60 mos. ☒ AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: Roberta Davis Date: 2/14/17 Installed by: R+H of Lake Norman

IMPROVEMENT PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Tom Shook Date: 6/13/2017

OPERATION PERMIT by: Carla C. Cave Date: 3/9/18

Existing System Inspected by: Date:

RECEIVED MAY 26 2017

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

Application for SEPTIC REPAIR PERMIT $500.00 EFT

(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)

#227519

1. APPLICATION FOR: ✓ Improvement Permit ✓ Authorization To Construct ✓ BOTH ___ Existing System
Inspection

****

2. 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 check ( ) beside whichever is submitted if applicable ___ Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. Applicant Information:

Nest Homes LLC	PO Box 3965 Mooresville, NC 28117	980-500-1226	
Applicant Name	**Mailing Address**	**Home Phone #**	**Alternate Phone #**
	PO Box 3965 Mooresville, NC 28117	980-500-1226	
Owner Name	**Mailing Address**	**Home Phone #**	**Alternate Phone #**

4. Property Information:

138 Sisters Cove Court	Sisters Cove Ph. 5	24
Street Address	**Subdivision Name**	**Section/Phase and Lot Number**

Driving Directions: I77 north Exit 36 R on 150 W L on Bluefield Rd L on Cornelius Rd R on Sisters Cove Court

5. RESIDENTIAL Site Development Information: *(Check or Complete ALL that apply)*

(✓) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
Repair To Failing Septic System due to _____
( ) Other _____

Maximum Number of Bedrooms 3
Maximum Number of Occupants 6
If Expansion, Current Number of Bedrooms ___

(✓) Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) Basement w/Plumbing?
(✓) Basement w/out Plumbing?

IF Non- Residential Site Development:
Type of Business _____
Square Footage of Building _____
Maximum Number of Employees _____
Maximum Number of Seats _____

6. Proposed Water Supply:

( ) New Well ( ) Existing Well (✓) Community Well ( ) City Water ( ) Other Public Water

7. Desired Septic System Type: *(You may rank in order of preference, if any)* ( ) EXISTING SYSTEM installed _____ *Year*

( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional (✓) Other _____

8. 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. industry) 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.

9. Signature: Laketa Davis — 05/26/17
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, Eric Wood, am the legal owner(s) of the property located at 138 Sisters Cove Court Mooresville, NC 28117, identified as PIN (Parcel Identification Number) 4648489136.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Laketa Davis, Nest Homes 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]	05/26/17	Laketa Davis	05/26/17
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

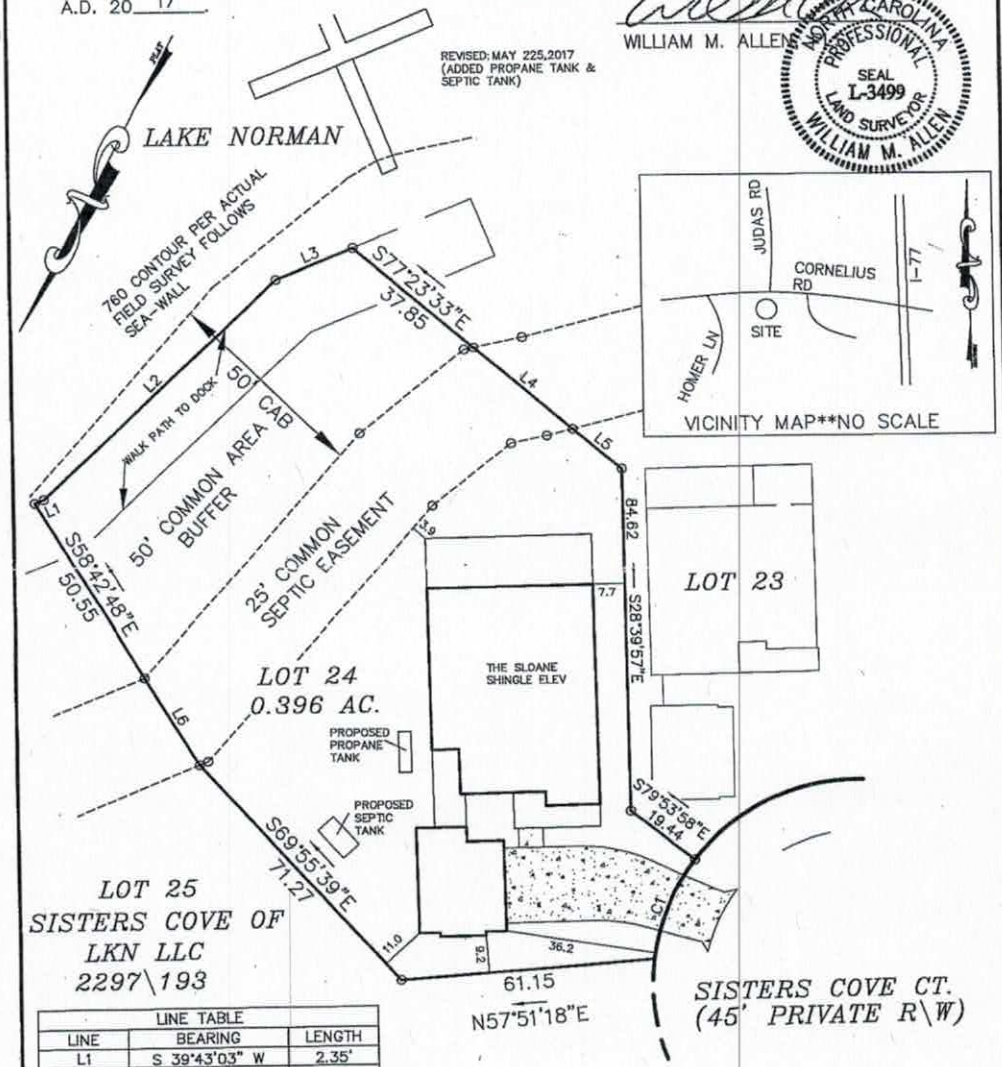
DAS DON ALLEN & ASSOCIATES, P.A.
"Since 1971"
Commercial * Residential * Mortgage Surveys * Multi-Family
Construction Staking * Subdivision Design * Topographical
131 Crosslake Park Drive – Suite 102 * Mooresville * NC * 28117
(704) 664-7029 (704) 664-8041 Fax

I, certify that this map was drawn under my supervision from an actual survey made under my supervision recorded in deed book_____, page_____, and/or plat book_____, page_____, that the ratio of precision is 1':10,000, that this map was prepared in accordance with the General Statutes of North Carolina Chapter 89C. my hand and seal on the 18, day of MAY, A.D. 20 17.

WILLIAM M. ALLEN

NORTH CAROLINA PROFESSIONAL SEAL L-3499 LAND SURVEYOR WILLIAM M. ALLEN

REVISED: MAY 225,2017
(ADDED PROPANE TANK & SEPTIC TANK)



LINE TABLE		
LINE	BEARING	LENGTH
L1	S 39°43'03" W	2.35'
L2	S 18°34'03" W	77.80'
L3	S 39°52'03" W	20.00'
L4	S 77°23'33" E	31.13'
L5	S 77°23'33" E	15.39'
L6	N 58°42'48" W	25.27'

CURVE TABLE				
CURVE	RADIUS	LENGTH	BEARING	CHORD
C1	50.00'	26.56'	N 05°06'57" W	26.25'

DRIVEWAY = 885 SF
SIDEWALK = 28 SF

PLOT PLAN SURVEY

OF

LOT 24 SISTERS COVE PHASE

SCALE 1" = 30'

DAVIDSON TWSP., IREDELL CO., N.C.

ACQUIRED BY: NEST HOMES

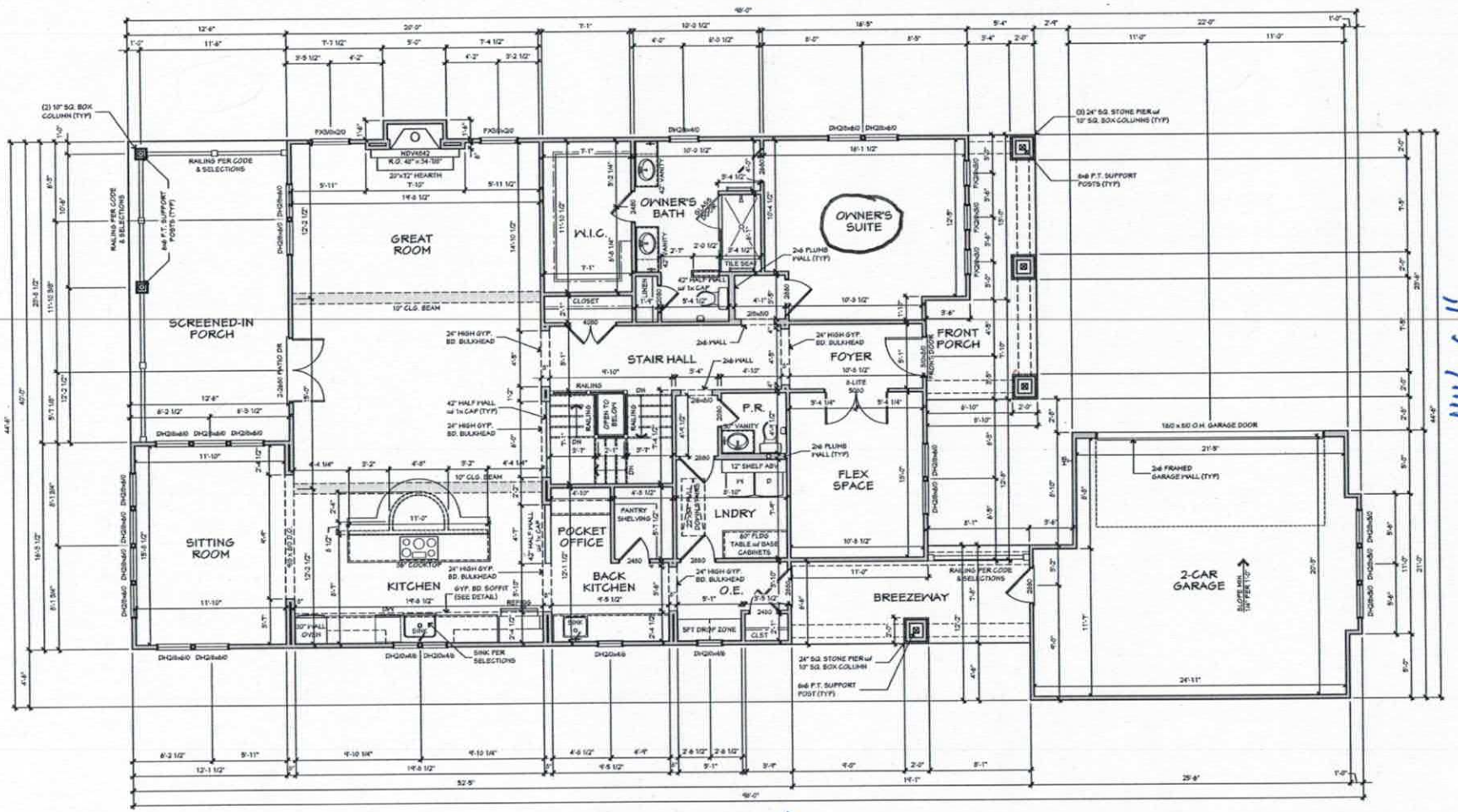
FIELD BOOK:
FILE: SISTERS COVE 24
DC FILE:
TAX MAP NO:

Acknowledgement of Plans Submittal ONLY!

Tom Shuck Date

Date 6/13/2017

98'-0"



98'-0"

44'-6"

44'-6"

MAIN FLOOR PLAN - SLOANE SHINGLE ELEVATION

SCALE: 1/8" = 1'-0"

10'-1 1/8" FRAMED WALL HEIGHT

WINDOW HEADERS @ 8'-0" A.F.F.

Plot Date: Friday, May 26, 2017 3:20:11 PM Plot Scale: 1'1-1/2" = 1'-0" 22.50" x 11'-0"

Plotted by: Robert Smith

C:\Users\Robert Smith\Dropbox (Nest Homes)\NEST HOMES - HOME\BUILDING\ARCHITECTURAL SERVICES\02_PRODUCTION\SISTERS COVE\LOT 24\SISTERS COVE LOT 24.dwg

NEST HOMES

916 Pineberry Drive Suite 7
Mooresville, NC 28117
PH: 704-658-0021
www.nesthomes.com

Township/County:
TOWNSHIP
COUNTY

Engineer:
INTELLIGENT DESIGN ENGINEERING
1945 J N PEASE PLACE
#204
CHARLOTTE, NC 28262
CHAD RITTER, P.E.
704-335-7200

Stamp/seal

Project name/owner:
THE SLOANE SHINGLE ELEVATION
SISTERS COVE LOT 24
OWNER NAME/TITLE
ADDRESS LINE 1
ADDRESS LINE 2
PH: 000-000-0000
PH: 000-000-0000

(c) 2016 copyright notice Nest Homes, Inc. All rights reserved. These plans are the property of Nest Homes. Any use, reproduction, licensing, or distribution of these drawings is strictly prohibited. This document contains confidential and proprietary information that cannot be reproduced or divulged, in whole or in part, without written authorization from Nest Homes.

Date: May 26, 2017

Drawn by: RES

Reviewed by: INITIALS

Plan set scale:
24x36 sheet
1/4" = 1'-0"
11x17 sheet
1/8" = 1'-0"

Project/plan code: 1231

Drawing set: FOR CONSTRUCTION

Sheet title/description: SECOND FLOOR PLAN FARMHOUSE ELEVATION

Sheet no.: A4.0

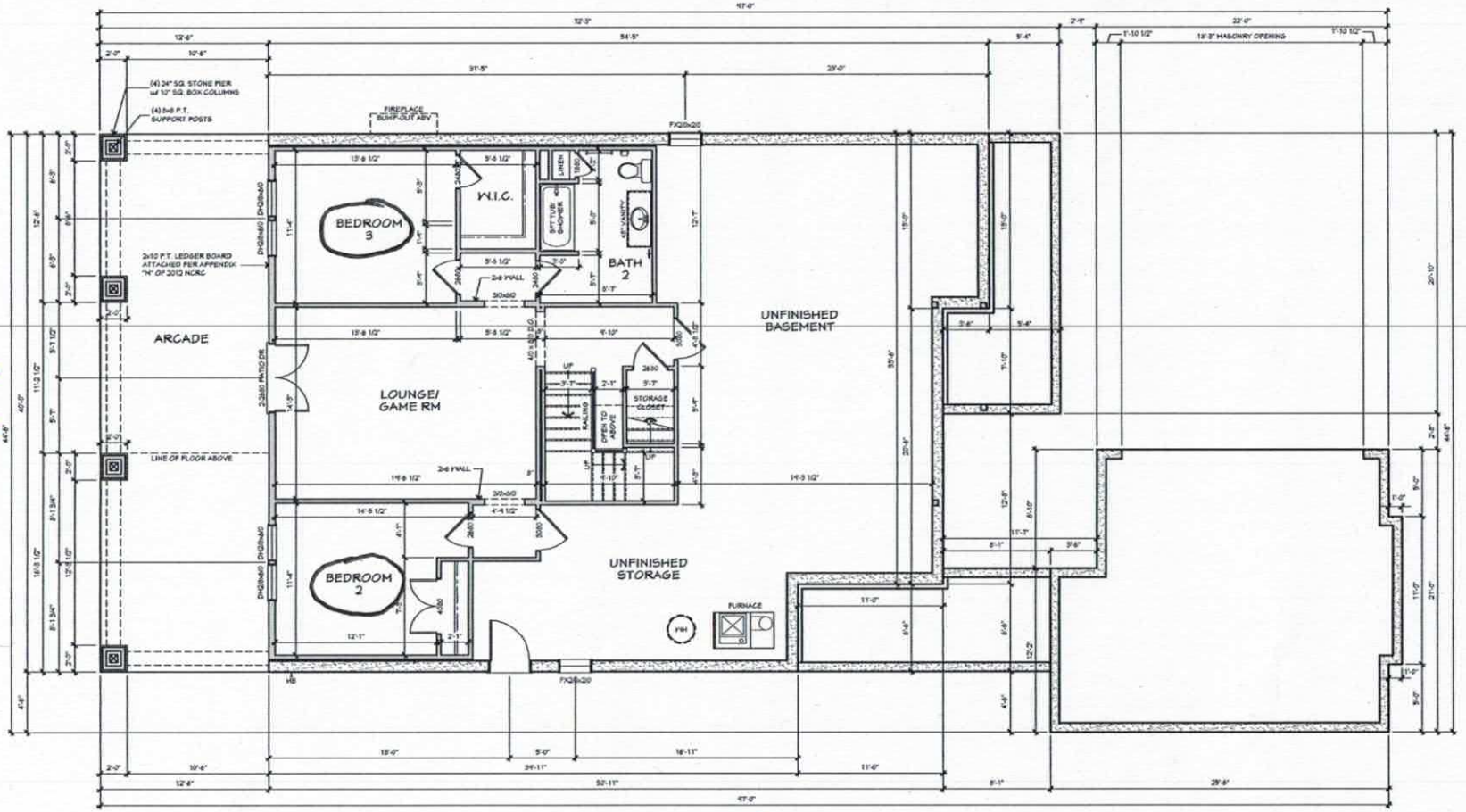
Master plan version: v1.0

Acknowledgement of
Plans Submittal ONLY!

Tom Shuck Date

Date 6/13/2017

97'-0"



LAKE LEVEL FLOOR PLAN - SLOANE SHINGLE ELEVATION

SCALE: 1/4" = 1'-0"
9'-0" FRAMED WALL HEIGHT
WINDOW HEADERS @ 8'-0" A.F.F.

Township/County
TOWNSHIP
COUNTY

Engineer
INTELLIGENT DESIGN ENGINEERING
1945 J N PEASE PLACE
#204
CHARLOTTE, NC 28262
CHAD RITTER, P.E.
704-535-7200

Stamp/Seal

Project name/Number
THE SLOANE
SHINGLE ELEVATION
SISTERS COVE
LOT 24

OWNER NAME/TITLE
ADDRESS LINE 1
ADDRESS LINE 2
PH: 000-000-0000
PH: 000-000-0000

(c) 2016 copyright notice Neat Homes, Inc. All rights reserved. These plans are the property of Neat Homes. Any use, reproduction, licensing, or distribution of these drawings is strictly prohibited. This document contains confidential and proprietary information that cannot be reproduced or divulged, in whole or in part, without written authorization from Neat Homes.

Date
May 26, 2017

Drawn by
RES

Reviewed by
INITIALS

Plan set scale
24x36 sheet
1/4" = 1'-0"
11x17 sheet
1/8" = 1'-0"

Project/plan code
1231

Drawing set
FOR CONSTRUCTION

Sheet title/description
FIRST FLOOR PLAN
FARMHOUSE ELEVATION

Sheet no.
A3.0

Master plan version
v1.0

C:\Users\Robert Smith\Dropbox (Neat Homes)\NEAT HOMES - HOME\BUILDING\ARCHITECTURAL SERVICES\2_PRODUCTION\SISTERS COVE\LOT 24\SISTERS COVE LOT 24.dwg Plot Date/Time: Friday, May 26, 2017 3:06:16 PM Plot Scale: 1'1"x17" = 1'0" • 1'0"x1'-0" 22"x36" = 1/4"=1'-0" Plotted By: Robert Smith