HS

ICHD–ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP244785

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

PIN # 4649007840

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

SITE ADDRESS: 202 Hidden meadows Dr. Mooresville NC 28117 | PHONE: 704-360-2251 | ALT. PHONE —

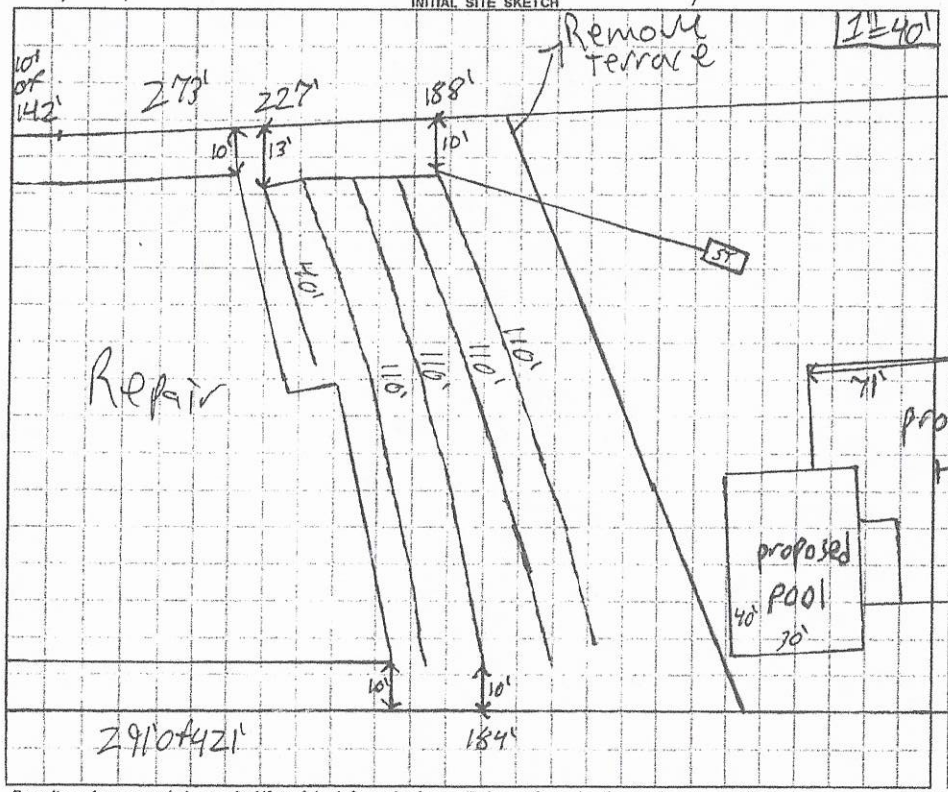
SITE DIRECTIONS: NC 115 N to Lon Connector Rd, Lon Cornelius Rd, Ron Judas, Lon Perth Rd, Lon Hidden meadows Dr, property on R | SAP CONTROLLED: ☒ YES ☐ NO

SUBDIVISION: Hidden Meadows | SECTION: — | LOT # 22 | LOT AREA: 1.239 acres | DESIGN FLOW: 480 GPD | L.T.A.R.: .25

Septic Tank	1000	(gal)	STB 760	Date 1-8-2021	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms 4	Water Supply
Pump Tank	—	(gal)	PT —	Date —	System Description: Gravity 25% Reduction				☐ Business	No. Persons 8	☒ Private
Pump Make	—	Model —		Serial # —	Repair System Description: LPPPBPS				☐ Other	No. Employees —	☐ Public
# Nitrification Fields	1	# Lines 5		Linear Ft 480'	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☒ Crawl Space	☐ Community
Trench Width	36"	Trench Bottom Depth(Low side)		36"	Gravel Depth —	☒ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing	

Comments / Conditions: Install liner On contour. DO NOT Drive on store material, or manipulate drainfield in any way. All Property lines and corners must be marked during installation and inspection. Divert Storm/Surface water away from septic.

INITIAL SITE SKETCH



AS BUILT SKETCH



As built
See 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: 1/15/2021 | Installed by: Specialty Septic

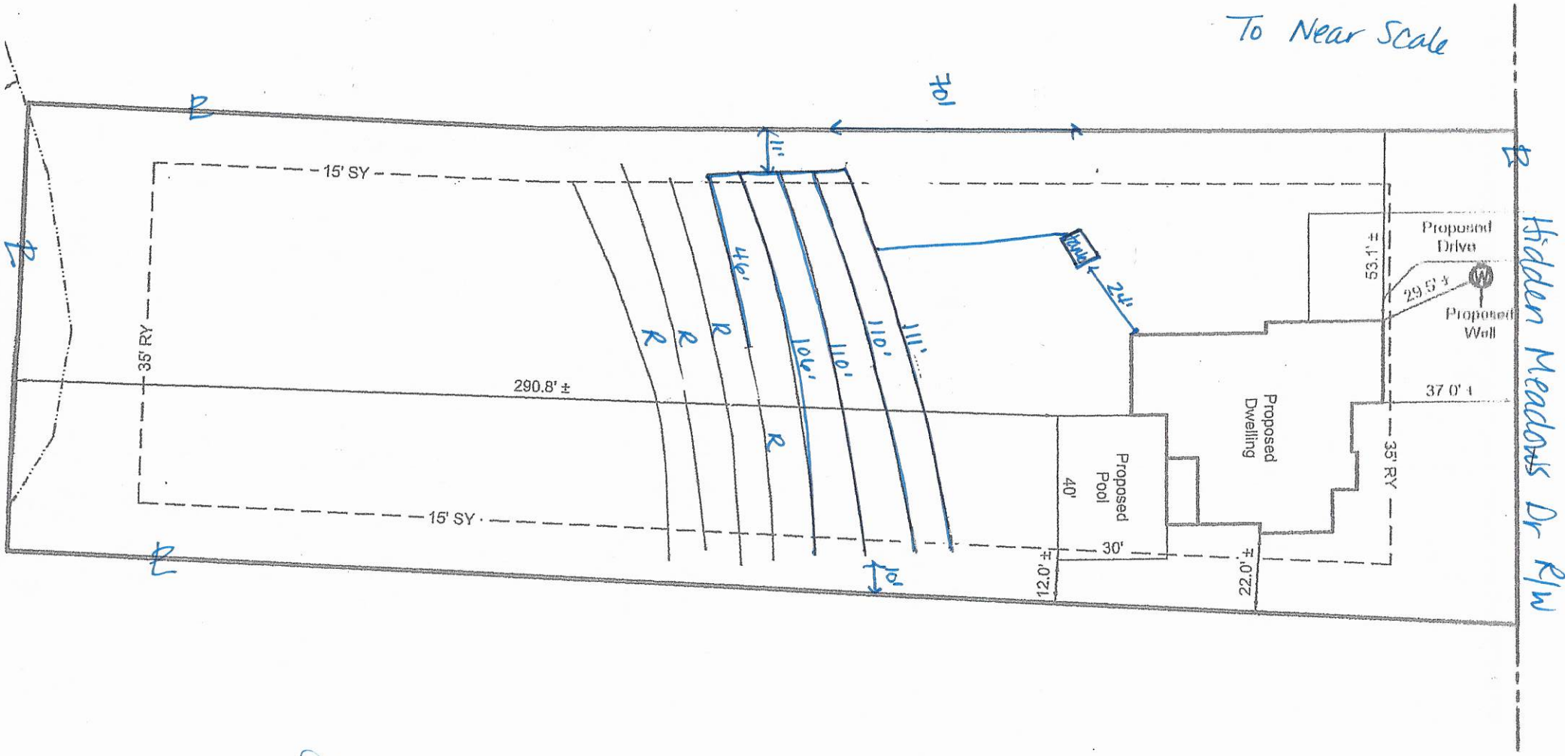
IMPROVEMENT PERMIT by: Patrick J Ryle III | Date: 1/8/2021 | OPERATION PERMIT by: D. Mebane | Date: 4/6/21

AUTHORIZATION TO CONSTRUCT by: Patrick J Ryle III | Date: 1/8/2021 | 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.

As Built

To Near Scale



D. Meberg
4/5/21

202 Hidden Meadows
4649-01-7840

REFERENCE:

BEING ALL OF LOT 22 - HIDDEN MEADOWS SUBDIVISION - AS RECORDED IN P.B. 70, PG. 132 - IREDELL COUNTY REGISTRY.

NOTES:

THE SUBJECT PROPERTY IS NOT IN A "SPECIAL HAZARD AREA" AS SHOWN ON HUD/FIA FLOOD INSURANCE RATE MAP COMMUNITY PANNEL NUMBER 3710464900J EFFECTIVE DATE 3/18/2006.

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Plot Plan

DRAWN B

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

Sheet ___ of ___
PROPERTY ID #: 4649016361
COUNTY: Iredell

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

OWNER: Hidden Meadows Ventures — APPLICATION DATE: 5/17/19
ADDRESS: P.O Box 4628 Mooresville NC 28117 — DATE EVALUATED: 6/3/19
PROPOSED FACILITY: House — PROPOSED DESIGN FLOW (.1949): 480gpd — PROPERTY SIZE: .833Ac
LOCATION OF SITE: Hidden Meadows #22 — PROPERTY RECORDED: N
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	L 10%	0-5	Brw	SCL w SBK SS, SP, SExP, FR					PS
		5-30	RC m-w	SBK SS, SP, SExP, FR					
				w/Few SAP Inclus					
		30-65	I/SL	SAP massive, FR	—	30"			.3
2	L 8%	0-6	Brw	SCL SS, SP, SExP, FR					PS
		6-20	RC m-w	SBK SS, SP, SExP, FR					
		20-56	RC	w SBK SS, SP, SExP, FR					.25
				w/some Yel/Brw mottles	—	56"			
		56-65"	SAP	Rock controlled					
3	L 10%	0-7	Brw	SCL w SBK SS, SP, SExP, FR					PS
		7-23	RC m-w	SBK SS, SP, SExP, FR					
		23-57	RC	w SBK SS, SP, SExP, FR					.275
				w/Few Yel/Brw & some Marg. Staining					
		57-65	L	SAP massive FR	—	57"			.25
4	L 8%	0-6	Brw	SCL SS, SP, SExP, FR					PS
		6-21	RC m-w	SBK SS, SP, SExP, FR-FR					
		21-53	RC	w SBK SS, SP, SExP, FR-FR w/Quart Inclus					.25
				few Yel/Brw mottles					
		53-54	L	SAP massive FR	—	53"			

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	25% Red	PPBPS
Site LTAR	.25	.25

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): ___
EVALUATED BY: Maria Dotson
OTHER(S) PRESENT: ___

COMMENTS:



LEGEND

Areas contain soils with 24 inches or more of useable material and have potential for conventional, modified conventional and low-pressure pipe (lpp) septic systems.

House Footprint (70'X70'); Staked by Surveyor

System lines.

Repair lines.

Temporary Bench Mark (TBM) or House Elev.

(W) Well Location. (25) Boring Location.

GRAPHIC SCALE
1" = 40'

40 0 40 40

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

SOIL & FORESTRY SERVICES OF THE CAROLINAS, PA.
P.O. BOX 832
MOORESVILLE, NC 28115
PHONE/FAX: (704) 278 - 0989
ASHLEY ROLLANS, NC LICENSED SOIL SCIENTIST
MOBILE: (704) 746 - 5046
EMAIL: ashleyrollans@gmail.com

MAP TITLE: SITE PLAN & DRAINFIELD AREAS

PROJECT NAME: RICHARD DENZLER / HIDDEN MEADOWS SUBDIVISION

LOCATION/DATE: PERTH ROAD – HIDDEN MEADOWS IREDELL COUNTY, NORTH CAROLINA FEBRUARY 2019

JOB # : 18-0108
FILE: C:\JOBS\18-0108
PROJECT MGR.: S.A.R.
FIELD WORK: S.A.R.
DRAWN BY: S.A.R.

RECEIVED DEC 07 2020

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

AP-244785
$105.00

Limited

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 **Address:** 438 Williamson Road, Mooresville, NC **Zip:** 28117
Applicant Email: laura@foundationhomesllc.com **Phone:** 704 360 2251 **Alt. Phone:** ✓
Owner Name: Foundation Homes Residential **Address:** 438 Williamson Rd, Mooresville, NC **Zip:** 28117
Owner Email: laura@foundationhomesllc.com **Phone:** 704 360 2251 **Alt. Phone:** ✓

Property Information:

Street Address: 202 Hidden Meadows Dr, Mooresville, NC 28117
Subdivision Name: Hidden Meadows **Section/Phase:** _____ **Lot Number:** 22
Driving Directions: Corner of Perth & Judea's

Site Development Information: *(check or complete ALL that apply* Please Initial **CHECK FOUNDATION TYPE**

(✓) New Single Family Residence — Maximum Number of Bedrooms: 4 — (✓) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: 8 — ( ) 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: _____ 12/2/20
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

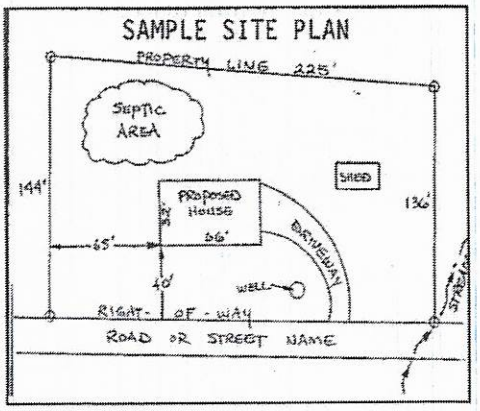
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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 OR WELL 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**
- **( ) Preferred well location**
- **( ) Preferred septic system location**
- **( ) 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

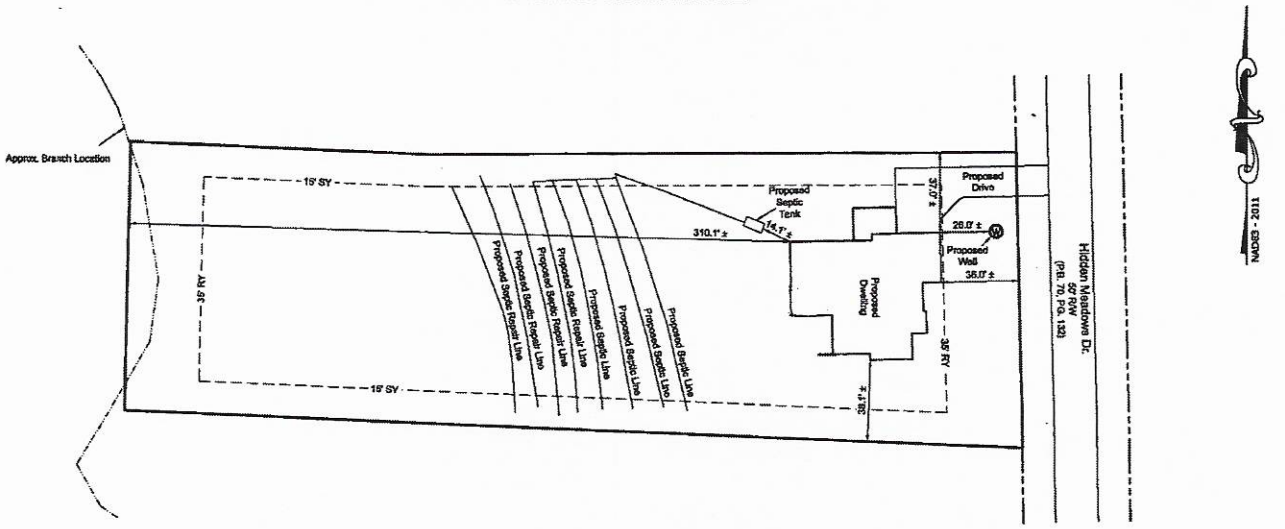
Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site

See Attached

Signature: _____ 12/2/20

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

PRELIMINARY FOR REVIEW ONLY



Total Property Area:
53,991.36 SF, 1.239 AC.
(P.B. 70, PG. 132)

LEGEND	
FY	FRONT YARD SETBACK
RY	REAR YARD SETBACK
SY	SIDE YARD SETBACK
R/W	RIGHT OF WAY
P.B.	PLAT BOOK
PG.	PAGE

REFERENCE:

BEING ALL OF LOT 22 - HIDDEN MEADOWS SUBDIVISION - AS RECORDED IN P.B. 70, PG. 132 - IREDELL COUNTY REGISTRY.

NOTES:

PROPERTY ZONED: RA (IREDELL COUNTY)

PROPERTY SUBJECT TO A 35' FRONT YARD (FY), 15' SIDE YARD (SY), & 35' REAR YARD (RY) AS RECORDED IN P.B. 70, PG. 132.

PROPERTY LIES IN THE "WS-IV CA" WATERSHED OVERLAY.

PROPOSED SEPTIC LINES, PROPOSED SEPTIC REPAIR LINES, & PROPOSED WELL LOCATION WERE COMPUTED GRAPHICALLY FROM SEPTIC PERMIT #244786.

THE SUBJECT PROPERTY IS NOT IN A "SPECIAL HAZARD AREA" AS SHOWN ON HUD/FIA FLOOD INSURANCE RATE MAP COMMUNITY PANNEL NUMBER 3710464900J EFFECTIVE DATE 3/18/2008.

0 40 80 120

JORDAN GRANT
ENGINEERING • SURVEYING • PLANNING
JORDAN GRANT & ASSOCIATES, PLLC
P.O. BOX 151 * STATESVILLE, NC 28687
mattg@jordan-grant.com (704) 928-7919
FIRM # P-1227

Plat Plan For:

Foundation Homes

DRAWN BY: JWE	CHECKED BY: MTG	SCALE: 1" = 40'
PIN NO: 4649-00-7840		
DEED REF: 2692 - 1363		
DATE OF MAP: 11-18-20	SURVEY DATE:	
REVISION: 11-24-20	DRAWING FILE: 20201134	

202 Hidden Meadows Dr, Mooresville, NC 28117
Davidson TWSP - Iredell County - North Carolina

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

(Check and sign only ONE of the options below)

1. *** APPLICANT AND OWNER ARE THE SAME. *** (*Sign here*) _____

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.

2. I, _____, am the legal owner(s) of the property located at _____, identified as

PIN (Parcel Identification Number)_____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) _____, _____, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

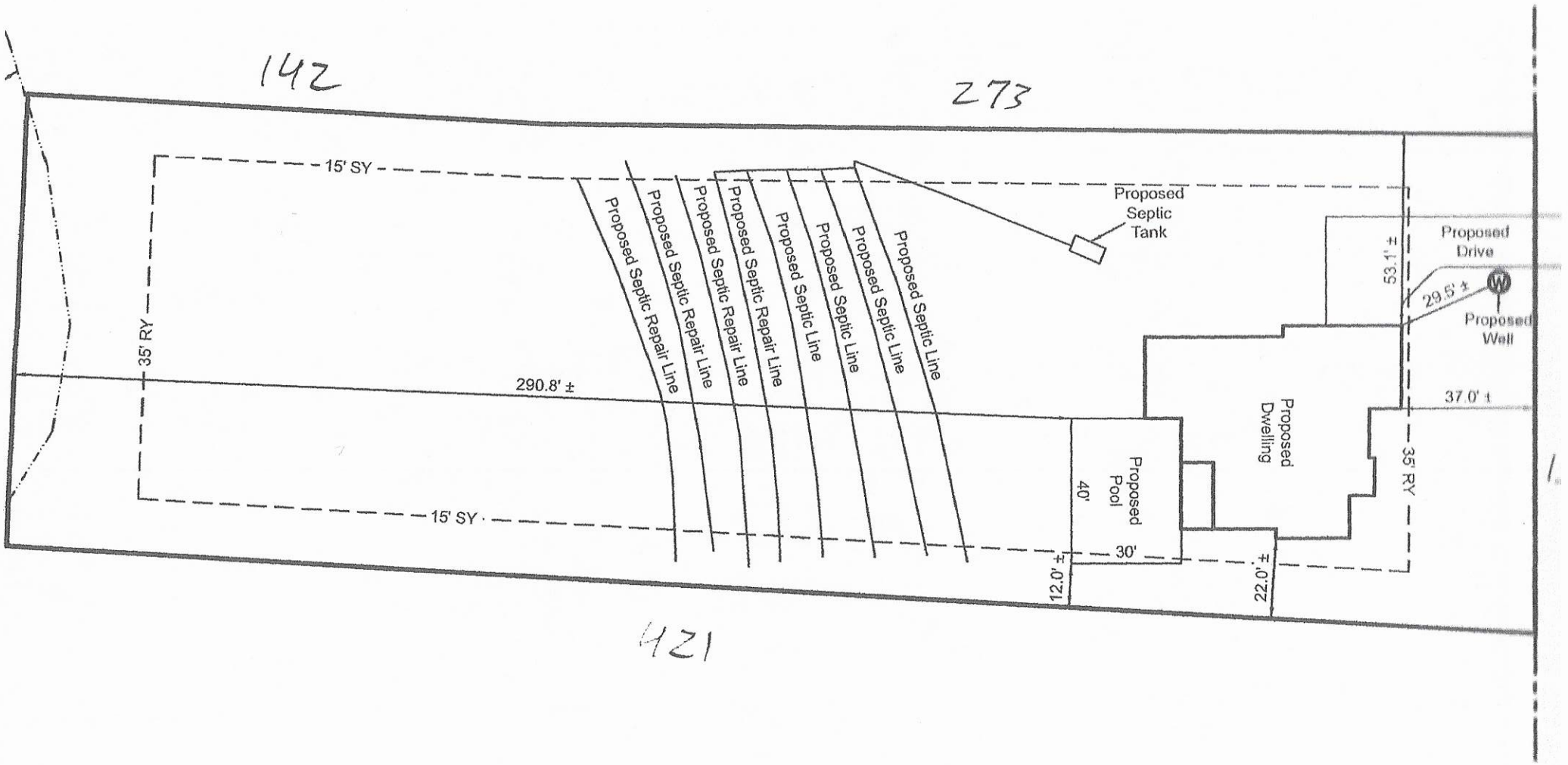
- Application for Improvement Permit (IP) / Authorization to Construct (AC)
- Improvement Permit (IP) / Authorization to Construct (AC)
- Application for soil-site evaluation (new/repair)
- Application/permit for private drinking water well/well abandonment
- Application for Compliance Inspection

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.

_____ 12/2/20
Signature of Owner(s) Date

Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
adrienne.sheal@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677



AC.

REFERENCE:

BEING ALL OF LOT 22 - HIDDEN MEADOWS SUBDIVISION - AS RECORDED IN P.B. 70, PG. 132 - IREDELL COUNTY REGISTRY.

NOTES:

THE SUBJECT PROPERTY IS NOT IN A "SPECIAL HAZARD AREA" AS SHOWN ON HUD/FIA FLOOD INSURANCE RATE MAP COMMUNITY PANNEL NUMBER 3710464900J EFFECTIVE DATE 3/18/2008.

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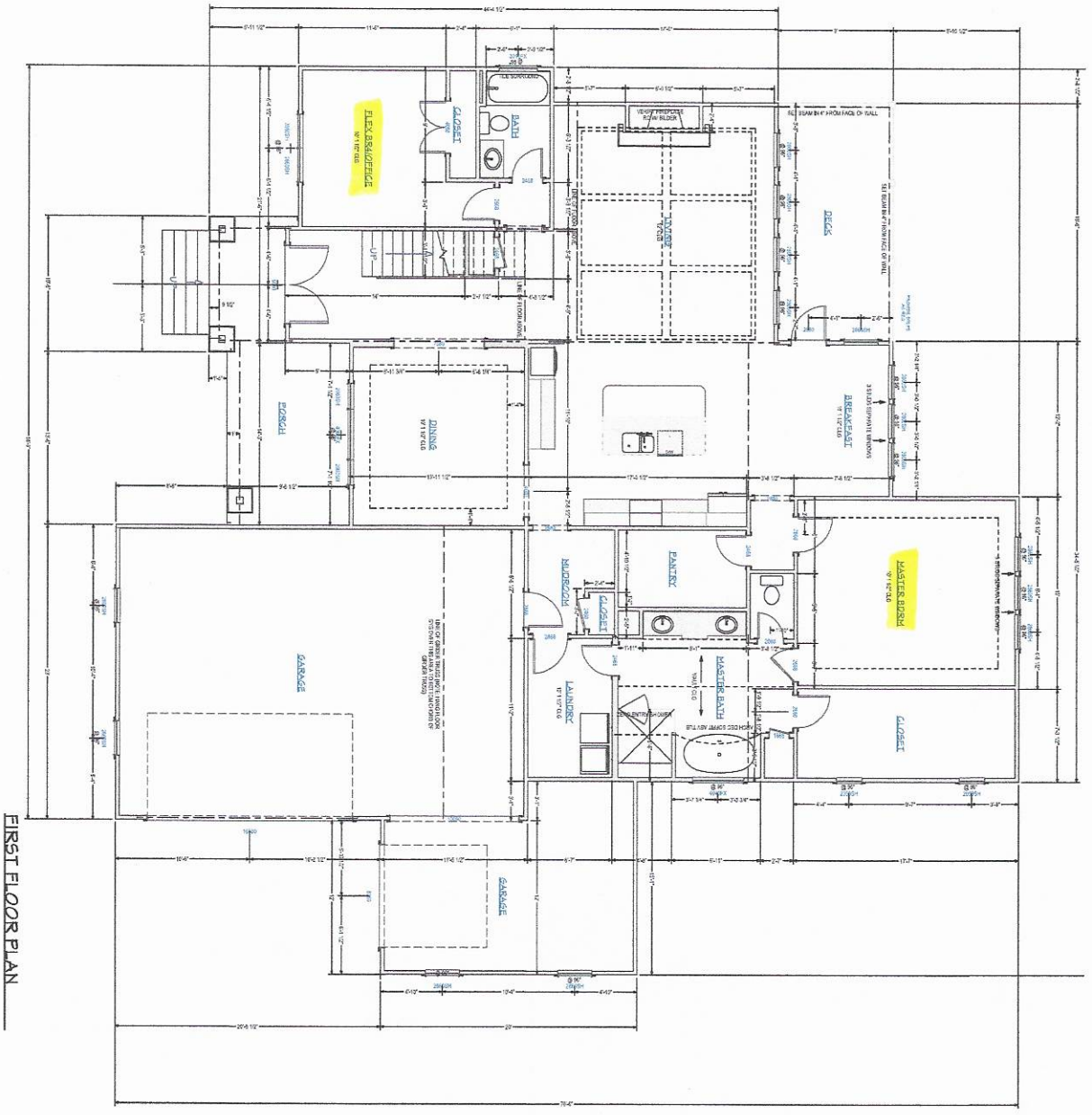
Plot Plan

DRAWN

JORDAN

SQUARE FOOTAGE	
1ST FLOOR HEATED	2170
2ND FLOOR HEATED	756
TOTAL HSF	2926
BONUS	362
PORCHES	336
GARAGE	441
TOTAL UNDER ROOF	4623

Acknowledgment Of
Plan
ONLY
Date 1/15/2021
Patrick J Byrne III Date 1/8/2021



FIRST FLOOR PLAN

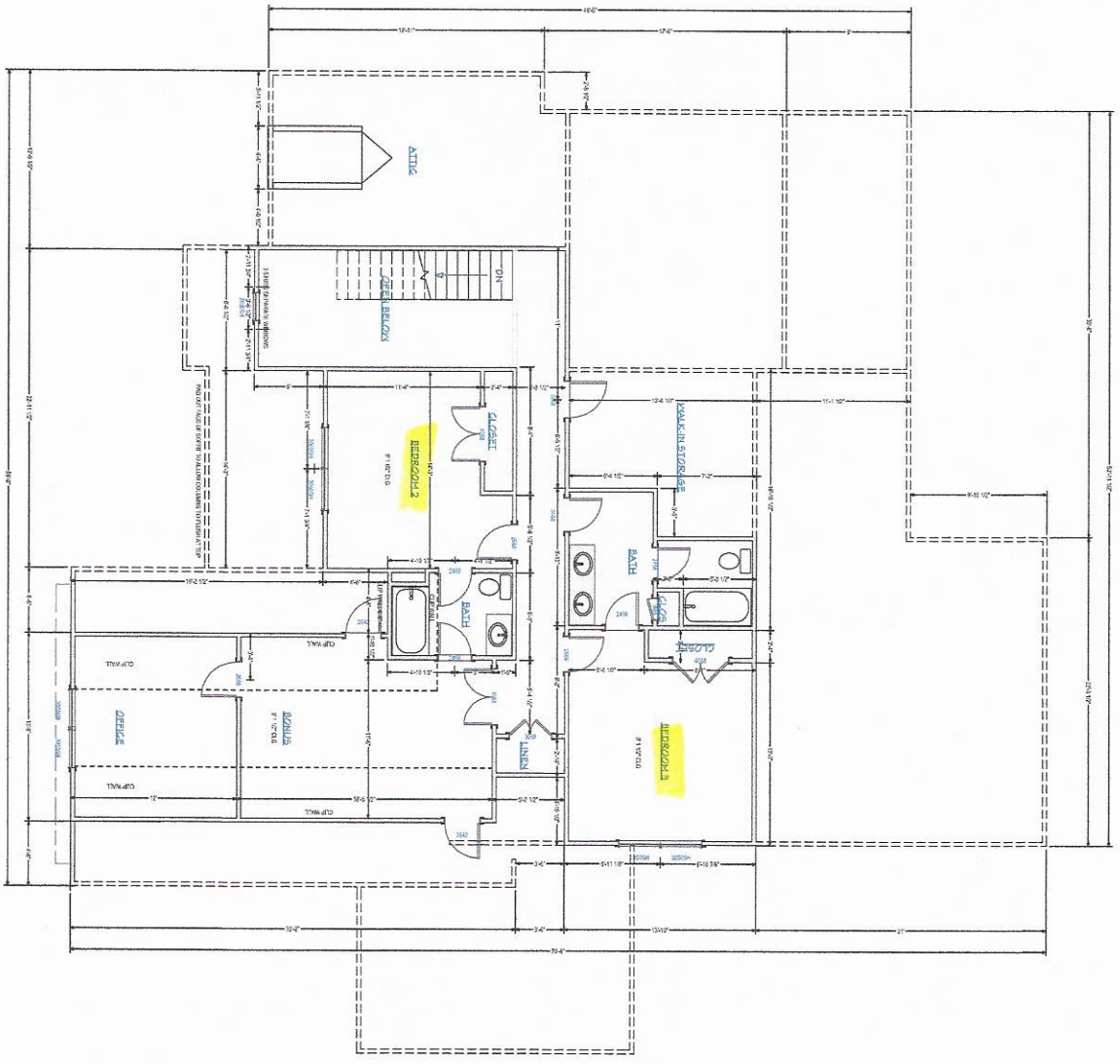
SCALE 1/4" = 1'-0"

A-6	SHEET:		SCALE:	12/1/2020	DATE:	VISUAL DESIGN & DRAFTING — VisualDesignAndDrafting@gmail.com — Justin Travis 704-363-0507	PROJECT DESCRIPTION: FOUNDATION HOMES LOT 22 HM	FOUNDATION HOMES

NO.	DESCRIPTION	BY	DATE

FIELD

Ack[illegible] Of
Plan[illegible] ONLY
Date 1/15/2021
Patrick Bagley III Date 1/8/2021



SECOND FLOOR PLAN

SCALE 1/4" = 1'-0"

SHEET:	SCALE:	DATE:		PROJECT DESCRIPTION:		NO.	DESCRIPTION	BY	DATE	
A-7		12/1/2020	VISUAL DESIGN & DRAFTING VisualDesignAndDrafting@gmail.com Justin Trevis 704-393-0537	FOUNDATION HOMES LOT 22 HM	FOUNDATION HOMES					FIELD

IREDELL COUNTY

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

APPLICATION NUMBER
244785
Issue Date: 05/17/2019

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4649016361.000	202 HIDDEN MEADOWS DRIVE, MOORESVILLE, NC 28117	

Owner Information	Applicant Information
Owner: ROBINSON WOODS DEVELOPMENT CO LLC	Applicant: ROLLANS SOIL & ENVIRON
Address: PO BOX 4628	Address: 470 NORTH BROAD STREET SUITE D
MOORESVILLE, NC 28117	MOORESVILLE, NC 28115
Phone:	Phone: 704-658-1723

Use Requested	Zone Code
SFD LOT 22	

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
43.460	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: _____

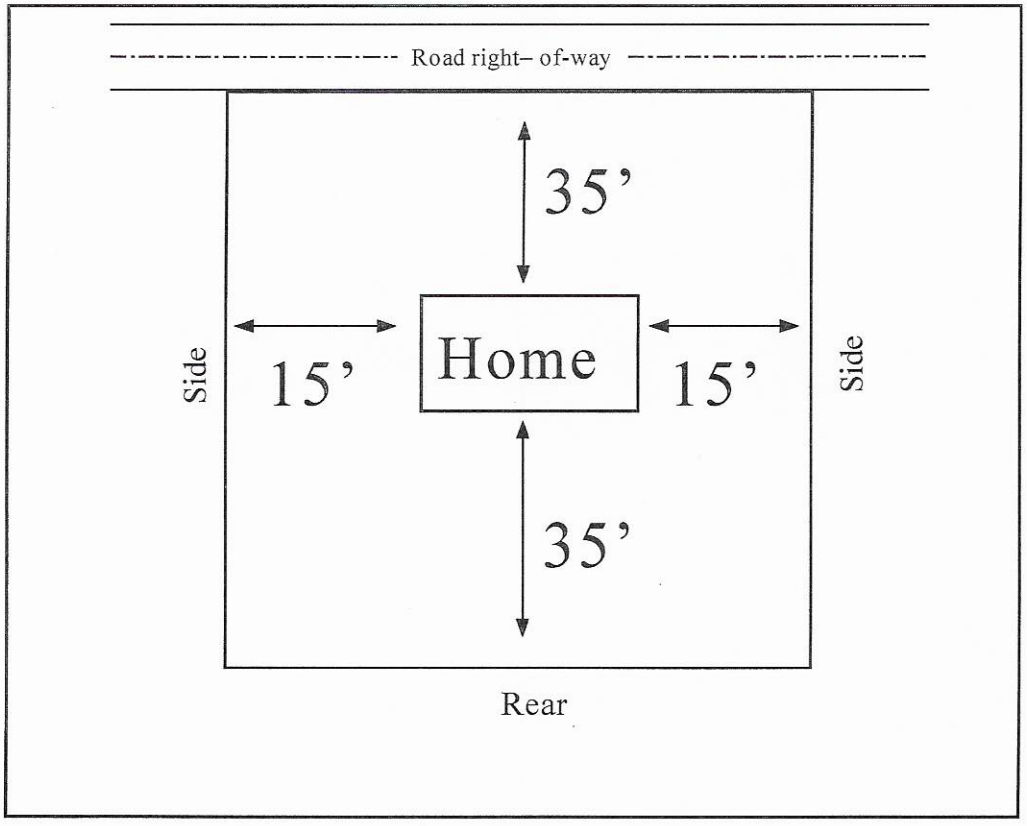
Permit Number	177937	TOTAL FEES:	$ 77.25

ZONING DISCLAIMER

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.

Applicant Date

STREET NAME: 202 HIDDEN MEADOWS DR



In the box above indicate the location of the building's or structure's, their orientation to the front of the lot as indicated, and the setback distances to all property lines and the distances to any other building's or structure's on the lot. Also indicate the size/shape of the lot and the corresponding dimensions when necessary. The front of the lot is the portion which abuts a public right of way or easement.