IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 243577

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

PIN # 4649101450

APPLICANT/OWNER: Hidden Meadows Ventures | APPLICANT ADDRESS: PO Box 4628 Mooresville NC

SITE ADDRESS: 221 Hidden Meadows Dr. Mooresville, NC 28117 | PHONE: 919-6000-5852 | ALT. PHONE —

SITE DIRECTIONS: Hwy 150 W → R on Perth → R on Hidden Meadows → lot on L | SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: Hidden Meadows | SECTION: — | LOT # 15 | LOT AREA: .829 ac | DESIGN FLOW: 480 gpd | L.T.A.R.: .3 (.3 repair)

Septic Tank	1000	(gal)	STB	760	Date	9/20	☑ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI		☑ Residence	No. Bedrooms	4	Water Supply
Pump Tank	1000	(gal)	PT	363	Date	7/21	System Description: PM 25% reduction		☐ Business	No. Persons	8	☑ Private
Pump Make	Zoeller	Model	EW154		Serial #	2K20	Repair System Description: PM 25% reduction		☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	3@134'		Linear Ft	402'	Maintenance Agreement Required:	☐ YES ☑ NO	☐ Slab	☑ Crawl Space		☐ Community
Trench Width	36"	Trench Bottom Depth(Low side)	30"/32" high side		Gravel Depth	—		☐ GRAVITY ☑ PRESSURE	☐ Basement w/plumbing		☐ Basement w/o plumbing	

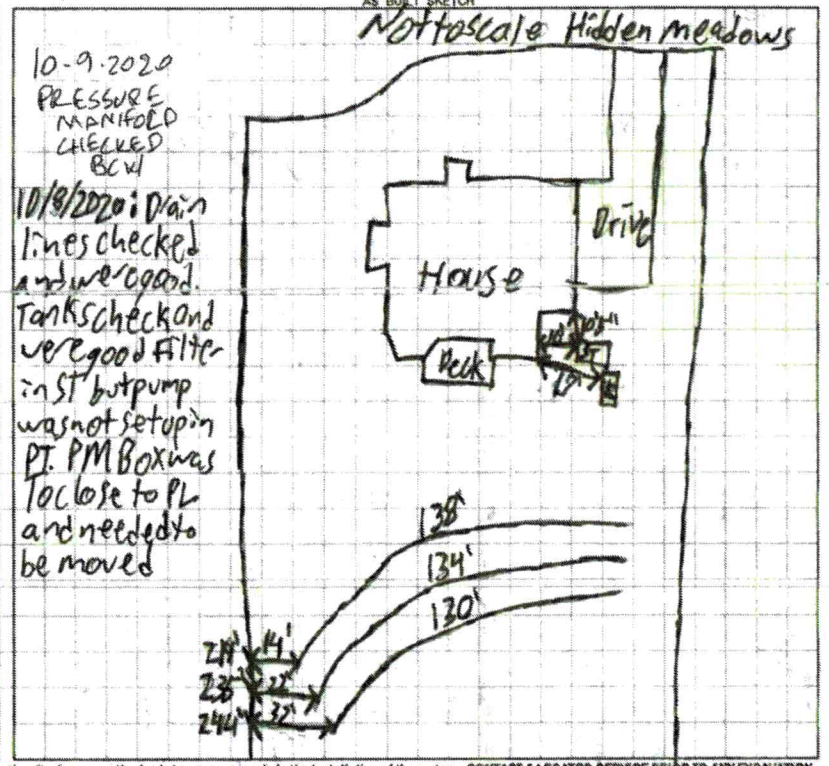
Comments / Conditions: * Lot must be recorded prior to issuing AC*

LOT RECORDED IN PLAT BOOK 20 PAGE 132

INITIAL SITE SKETCH

See attached site plan by Soil + Forestry Services of the Carolinas, PA

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: [signature] Date: 5/3/19

IMPROVEMENT PERMIT by: Krista Watson Date: 4-16-19

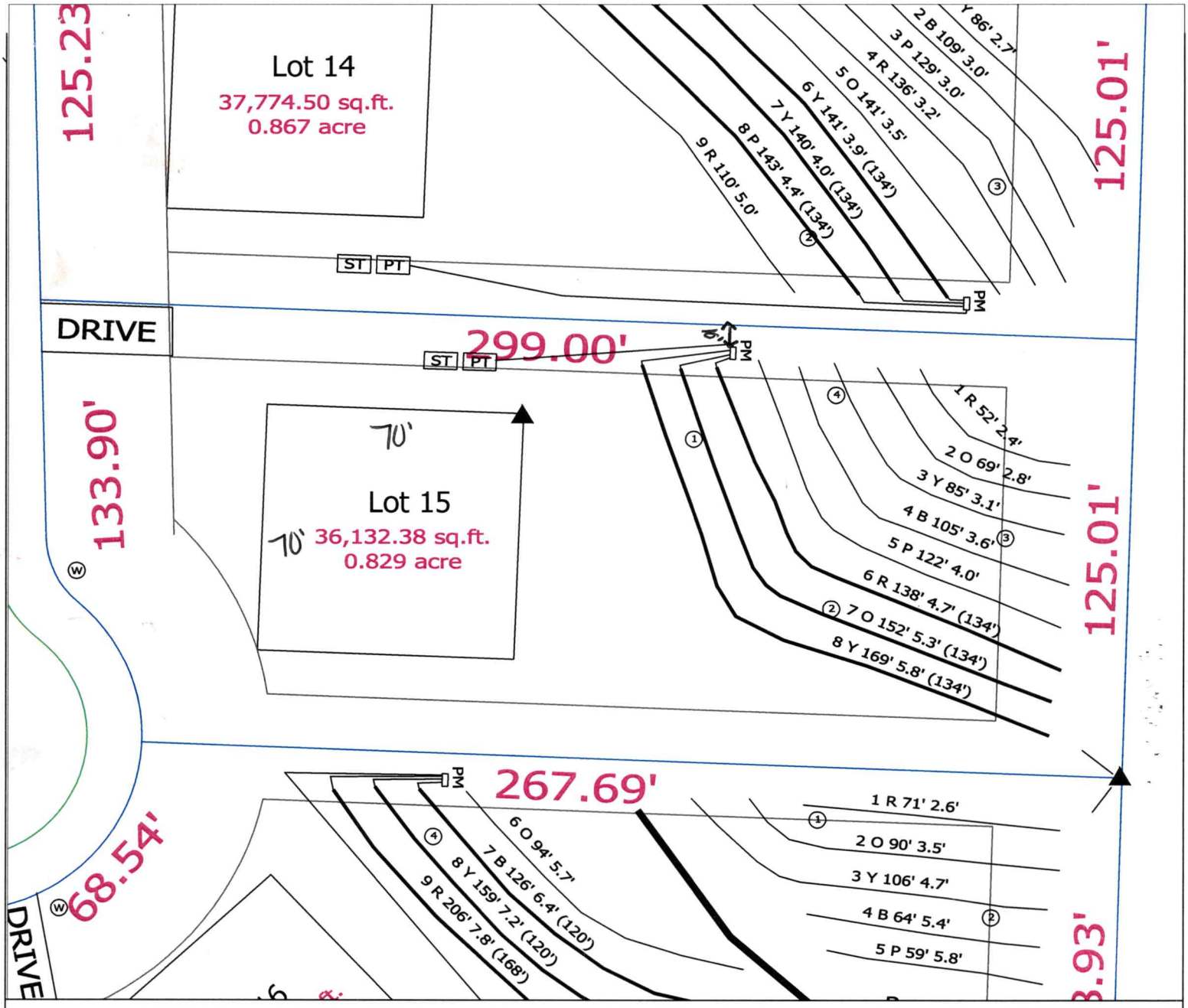
AUTHORIZATION TO CONSTRUCT by: Bryant C. Mirica Date: 4-24-2020

Installed by: Stutts

OPERATION PERMIT by: [signature] Date: 11/5/20

Existing System Inspected by: Date:

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



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.

APPROVED APR 1 3 2019
KW

GRAPHIC SCALE
1" = 40'

40 0 40 80

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.

Sheet 1 of 1

APPROVED APR 1 3 2019 KW

PROPERTY ID #: 4649016361
COUNTY: Iredell

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

OWNER: Hidden Meadows Ventures
ADDRESS: PO Box 4628 Mooresville NC 28117
PROPOSED FACILITY: 4BR Single Family
LOCATION OF SITE: 221 Hidden Meadows Dr. Lot 15

APPLICATION DATE
DATE EVALUATED: 4/3/19
PROPOSED DESIGN FLOW (.1949): 480gpd
PROPERTY SIZE: .829ac
PROPERTY RECORDED: NO

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	
B 1	L/3%	0-5	BRCL wmsbk	Fr SS SP	Few to C. SHP	48"			PS .3
		5-34	RC wmsbk	Fr SS SP					
		34-48	RBCL wfsbk	Fr SS SP					
B 2	L/3%	0-32	RC wmsbk	Fr SS SP		48"			PS .3
		32-48	RBCL wfsbk	Fr SS SP					
B 3	L/3%	0-34	RC wmsbk	Fr SS SP		48"			PS .3
		34-48	RBCL wfsbk	Fr SS SP					
B 4	L/3%	0-40	BRCL wmsbk	Fr SS SP	Wtr. Rock Vein Few to C. SHP	48"			PS .3
		40-48	BRCL wfsbk	Fr SS SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	Accepted	Accepted
Site LTAR	.3	.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: S. Ashley Rollans
OTHER(S) PRESENT:

COMMENTS:

Updated February 2014

Pit I: 0-26 SBKC 26-54 WSBKCL } few quartz veins
Pit R: 0-35 SBKC 35-60 WSBKCL 35-60 few RC SHPINC

RECEIVED APR 10 2019

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM # 243577 $850.00

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) 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 (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: **(PRINT CLEARLY)**

Applicant Name: Hidden Meadows Ventures **Address:** P.O. Box 4628 Mooresville NC **Zip:** 28117
Applicant Email: rdenzler06130@roadrunner.com **Phone:** 919-606-5852 **Alt. Phone:**
Owner Name: Same **Address:** Same **Zip:** Same
Owner Email: rdenzler06130@roadrunner.com **Phone:** 919-606-5852 **Alt. Phone:**

Property Information:

Street Address: 221 Hidden Meadows Dr.
Subdivision Name: Hidden Meadows **Section/Phase:** **Lot Number:** 15
Driving Directions: From Highway 150 take Perth Rd (North) towards Troutman.
Subdivision is past Rocky Mt. Methodist Church on right.

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

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: Accepted

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: _____ 4/8/19
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public Health
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Iredell County Health Department

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, Richard Denzler, am the legal owner(s) of the property located at Hidden Meadows Ventures - 221 Hidden Meadows Dr. Lot 15, identified as PIN (Parcel Identification Number) 4649016361, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Ashley Rollans, _____, 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.

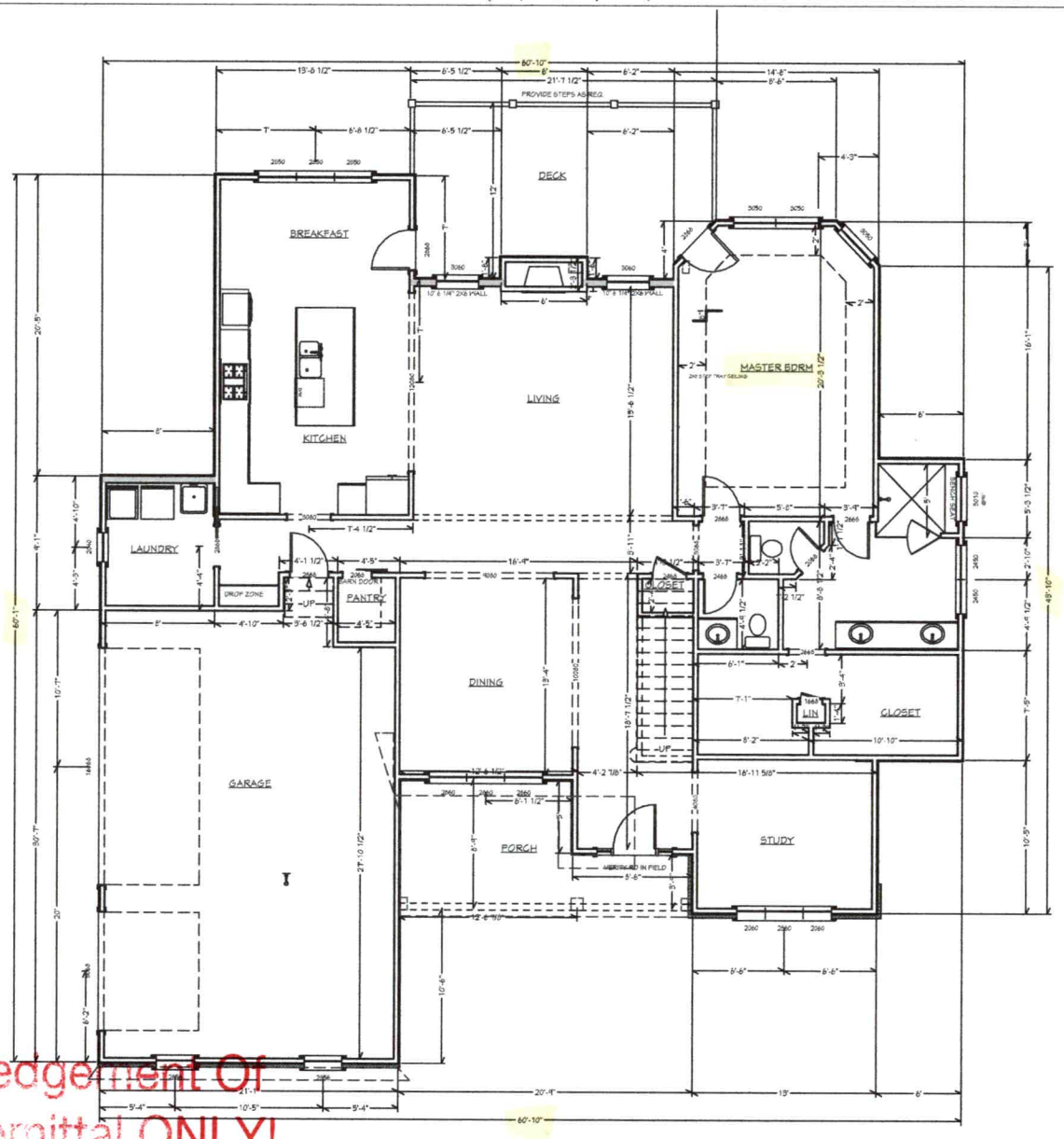
Signature of Owner(s) 3/11/19 Date

Signature of Witness 3/11/19 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



FIRST FLOOR PLAN
SCALE 3/16" = 1'0"

Acknowledgement Of
Plans Submittal ONLY!

Date 4/27/2020

Date 4-24-2020

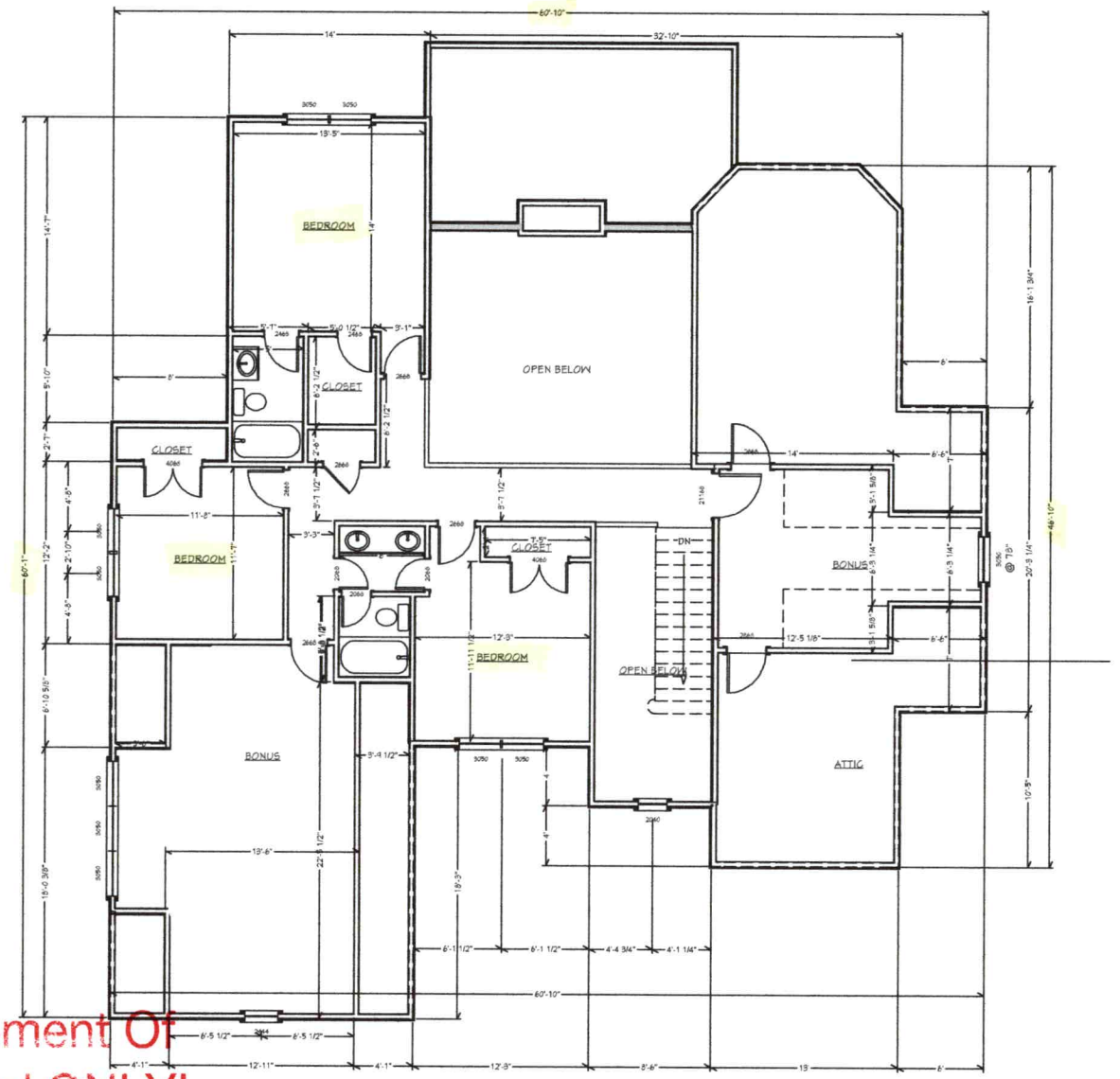
VISUAL DESIGN & DRAFTING

LAKEMIST HOMES
Waylett Residence
3 CAR REVERSE EXT BONUS

REVISIONS
7-3-14
9-28-17

NOTE:
CONTRACTOR TO VERIFY ALL DIMENSIONS, STRUCTURAL DETAILS, AND BUILDING CODES REQUIREMENTS PRIOR TO CONSTRUCTION.

3



SECOND FLOOR PLAN
SCALE 3/16" = 1'0"

Acknowledgement Of
Plans Submittal ONLY!

Date 4/27/2020

Date 4-24-2020

VISUAL DESIGN
VISUAL DESIGN & DRAFTING

LAKEMIST HOMES
Waylett Residence
3 CAR REVERSE EXT BONUS

REVISIONS
7-3-14
9-28-17

NOTE:
CONTRACTOR TO VERIFY ALL DIMENSIONS, STRUCTURAL DETAILS, AND BUILDING CODES REQUIREMENTS PRIOR TO CONSTRUCTION.

4

IREDELL COUNTY

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

APPLICATION NUMBER
243577
Issue Date: 04/09/2019

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4649016361.000	221 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 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: Sam Rollans Date: 4/10/19

Permit Number	173390	TOTAL FEES:	$ 77.25