ICHD–ENVIRONMENTAL HEALTH DIVISION

PJB 2.00

Statesville Office (704) 878-5305 (Mooresville Office) (704) 660-3625 PERMIT # AP-243320

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

PIN # 4649111155

APPLICANT/OWNER: Foundation Homes APPLICANT ADDRESS: 438 Williamson Rd Ste C Mooresville, NC

SITE ADDRESS: 185 Hidden Meadows Dr. Mooresville, NC PHONE: 704-360-2251 ALT. PHONE —

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

SUBDIVISION: Hidden Meadows SECTION: — LOT # 9 LOT AREA: .967ac DESIGN FLOW: 480gpd L.T.A.R.: .25

Septic Tank	1000	(gal)	STB		Date		☑ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI		☑ Residence	No. Bedrooms	4	Water Supply		
Pump Tank		(gal)	PT		Date	Installed	System Description:	25% reduction				☐ Business	No. Persons	8	☑ Private		
Pump Make		Model			Serial #	482	Repair System Description:	LP PPBPS				☐ Other	No. Employees		☐ Public		
# Nitrification Fields	1	# Lines	4@120'		Linear Ft	480'	Maintenance Agreement Required:	☐ YES	☑ NO			☐ Slab	☑ Crawl Space		☐ Community		
Trench Width	36"	Trench Bottom Depth(Low side)			30"		Gravel Depth —	☑ GRAVITY	☐ PRESSURE			☐ Basement w/plumbing			☐ Basement w/o plumbing		

Comments / Conditions: Install 25% reduction with serial distribution and drain lines on contour. Pool must maintain 15' from septic.

~~14ft from house corner~~
33, 33, 32, 20

INITIAL SITE SKETCH

See attached site plan

AS BUILT SKETCH

Installed Quick 4 as drawn (see site map)

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**

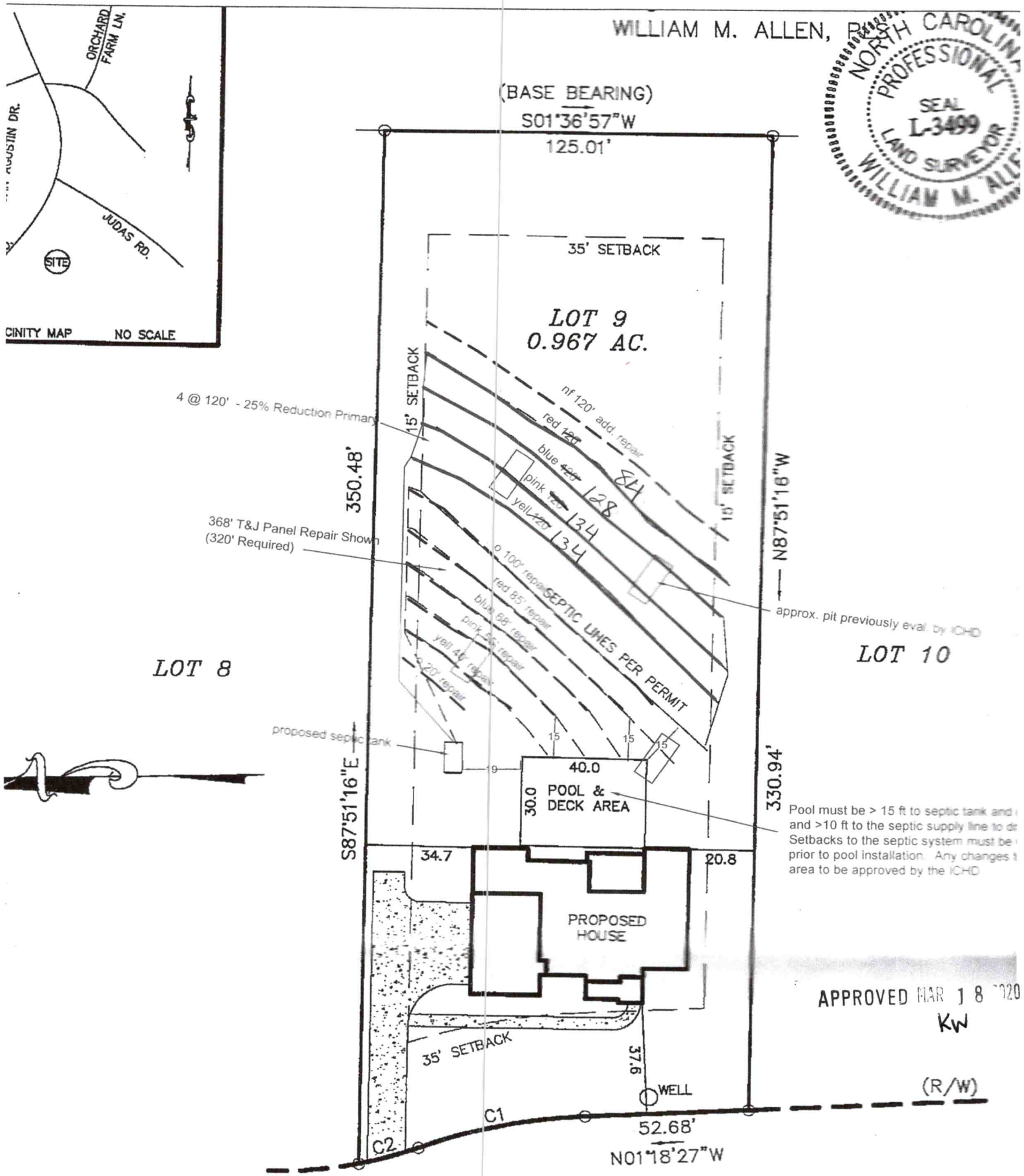
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration* ☑ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☑ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Brenda Smith Date: 3-19-20 Installed by: Specialty Septic

IMPROVEMENT PERMIT by: Kayla Watson Date: 3-18-20 OPERATION PERMIT by: Maria Dotson Date: 6/26/2020

AUTHORIZATION TO CONSTRUCT by: Kayla Watson Date: 3-18-20 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.


WILLIAM M. ALLEN,
NORTH CAROLINA
PROFESSIONAL
SEAL
L-3499
LAND SURVEYOR
WILLIAM M. ALLEN
ORCHARD FARM LN.
JUDAS RD.
SITE
CINITY MAP NO SCALE
(BASE BEARING)
S01°36'57"W
125.01'
35' SETBACK
LOT 9
0.967 AC.
15' SETBACK
15' SETBACK
4 @ 120' - 25% Reduction Primary
nf 120' add. repair
red 120'
blue 120'
pink 120'
yell 120'
84
128
134
134
368' T&J Panel Repair Shown
(320' Required)
o 100' repair
red 85' repair
blue 68' repair
pink 52' repair
yell 40' repair
o 20' repair
SEPTIC LINES PER PERMIT
approx. pit previously eval. by ICHD
N87°51'16"W
350.48'
LOT 8
LOT 10
proposed septic tank
15
15
15
9
40.0
30.0
POOL &
DECK AREA
330.94'
S87°51'16"E
Pool must be > 15 ft to septic tank and
and >10 ft to the septic supply line to dr
Setbacks to the septic system must be
prior to pool installation. Any changes t
area to be approved by the ICHD
34.7
20.8
PROPOSED
HOUSE
APPROVED MAR 1 8 2020
KW
35' SETBACK
37.6
WELL
(R/W)
C1
C2
52.68'
N01°18'27"W
END
OWER POLE
HIDDEN MEADOWS DRIVE
(50' PUBLIC R/W)

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

Sheet 1 of 1
PROPERTY ID #: —
COUNTY: Iredell

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

Lot 9

OWNER: Hidden Meadows Partners
ADDRESS: PO Box 4628 Mooresville NC
PROPOSED FACILITY: 4BR Home
LOCATION OF SITE: 185 Hidden Meadows Mooresville NC
APPLICATION DATE: 3/29/19
DATE EVALUATED: 4/17/19
PROPOSED DESIGN FLOW (.1949): 480
PROPERTY SIZE: .9 AC
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) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	Side 8-10%	0-10	SC WABK/WSBK	SS SP FR SE/P	2.5Y 4/6	55	—	—	PS .275
		10-37	C SBK	SS SP FR SE/P					
		37-55	CL WSBK	SS SP FR					
2	Side 10%	0-8	SL WSBK/GR	SS SP FR	2.5Y 6/6	60	-	Minor H2O Bleeding 15 inches	PS .25
		8-27	C SBK	SS SP FR SE/P					
		27-60	CL WSBK	SS SP FR					
3	Side 10%	0-10	SC WABK	SS SP FR SE/P	" "	50	-	H2O Bleeding @ 24 inches	PS .25
		10-36	C ABK	SS SP FR					
		36-50	CL WABK	SS SP FR					
4	Side 10%	0-9	SC WABK/WSBK	SS SP FR SE/P	" "	60	-	—	PS .275
		9-36	C ABK/SBK	SS SP FR					
		36-60	CL WSBK	SS SP FR					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	480	480
System Type(s)	III 25% red	III 25% red.
Site LTAR	.25	.25

OTHER FACTORS (.1946): —
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Botkins
OTHER(S) PRESENT:

COMMENTS:

Call Paul Roofing for [illegible] RECEIVED MAR 12 2020 AP-300886 $320.00

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM 704-876-6330

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.

Revised Print

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)** RELATED FOR POD

Applicant Name: Foundation Homes, LLC **Address:** 438 Williamson Road, Suite C Mooresville **Zip:** 28117

Applicant Email: justin@foundationhomeslkn.com **Phone:** 704-360-2251 **Alt. Phone:**

Owner Name: same as above **Address:** **Zip:**

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

Property Information:

Street Address: 185 Hidden Meadows Drive

Subdivision Name: Hidden Meadows **Section/Phase:** **Lot Number:** 9

Driving Directions: 150W, TR Perth, TR Hidden Meadows, Lot on Left

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

HOUSE UNDER CONST.

CHECK FOUNDATION TYPE

(X) New Single Family Residence — Maximum Number of Bedrooms: 4 — ( ) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: 8 — (X) Concrete Slab Foundation
( ) Accessory Building — (X) 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:**

(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 ( ) Modified Conventional ( ) Other:

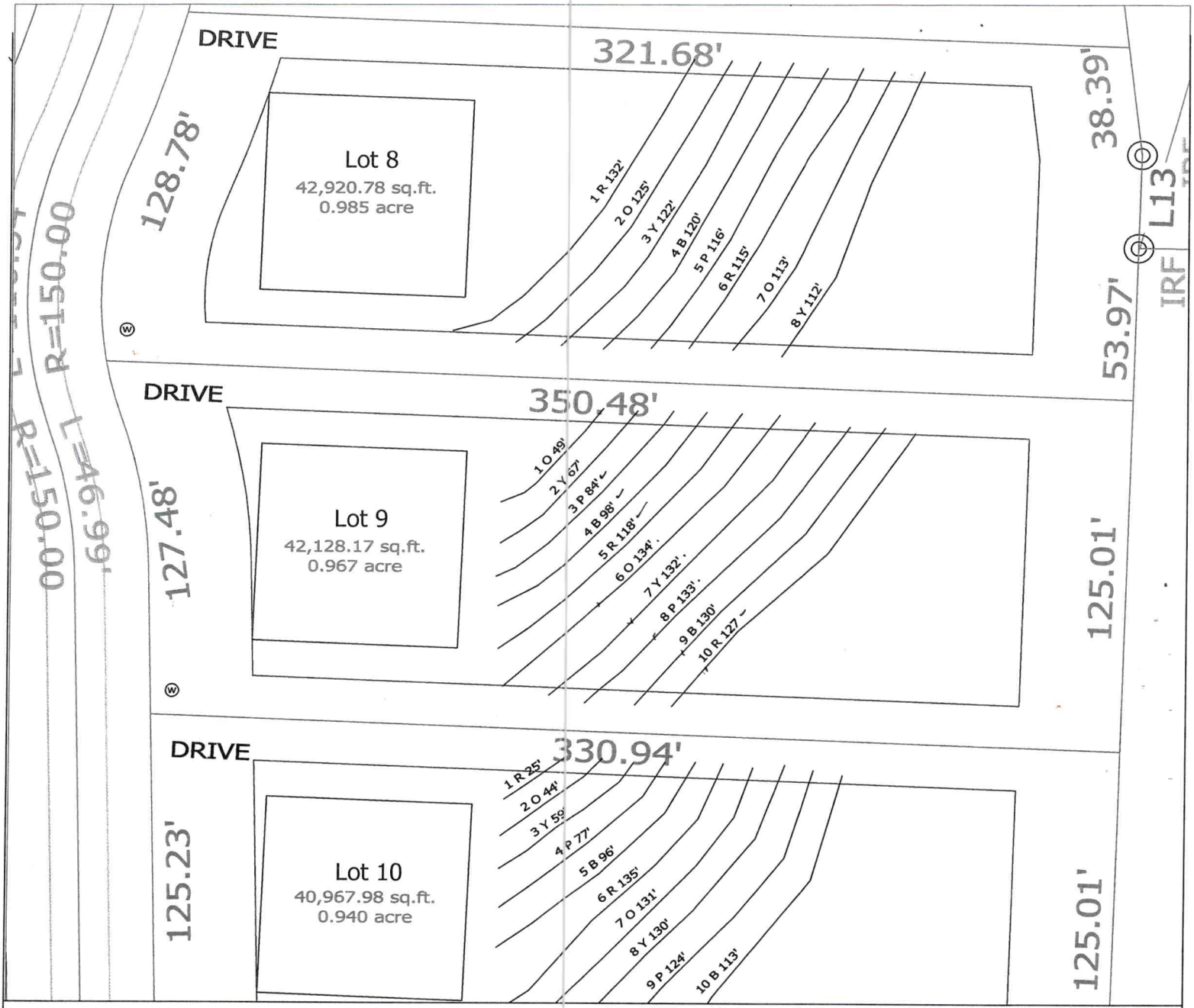
Please answer the following to the best of your ability:

( ) 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: 3.12.20

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



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')

System lines.

Repair lines.

Temporary Bench Mark (TBM)

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

GRAPHIC SCALE
1" = 50'

500 0 50 100

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

24/3320 185 Hidden Meadows

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.

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, Foundation Homes Residential, LLC, am the legal owner(s) of the property located at 185 Hidden Meadows Drive, identified as

PIN (Parcel Identification Number) 4649111155.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Paul Penninger/Penninger Soil Consulting _____, 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.

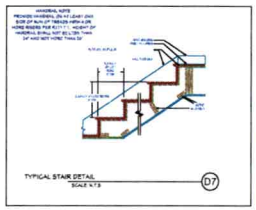
Josh SR
Signature of Owner(s)

3/2/20
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.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

SQUARE FOOTAGE	
1ST FLOOR HEATED	2099
2ND FLOOR HEATED	1155
TOTAL HEATED	3254
GARAGES	731
PORCHES	368
TOTAL UNDER ROOF	4353

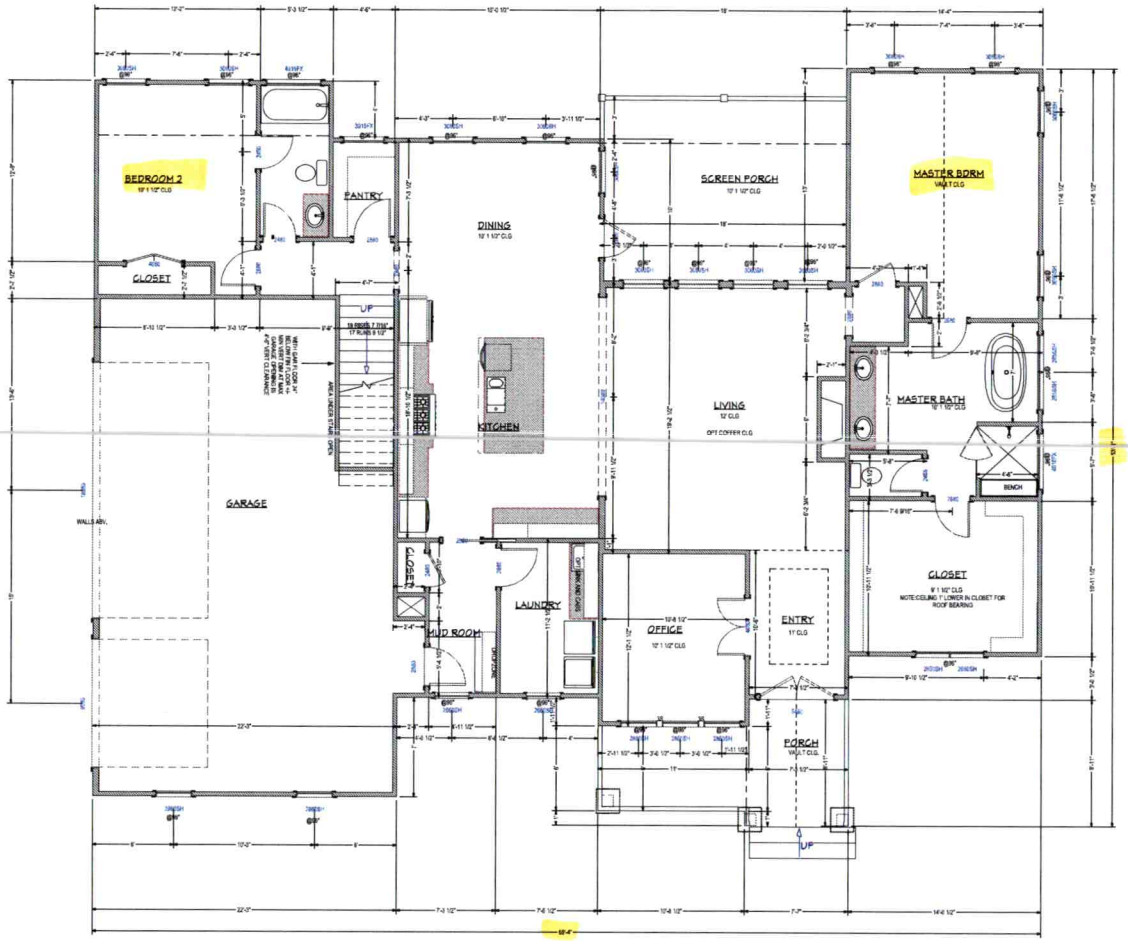


WINDOWS AND GLAZING NOTE:

ALL WINDOWS TO COMPLY WITH R612. ANY WINDOW OPENING GREATER THAN 72" ABOVE FINISHED GRADE AND LESS THAN 24" ABOVE FINISHED FLOOR SHALL HAVE FALL PROTECTION DEVICES PER R612.3 OR UTILIZE OPENING LIMITING DEVICES PER R312.4

ALL GLAZING TO COMPLY WITH R308.

PROVIDE FOR EGRESS REQUIREMENTS PER R310 AND R311.



FIRST FLOOR PLAN

SCALE 1/4" = 1' - 0"

Ack[illegible]nt Of
Plans [illegible] ONL
Patrick & Bobbie Date 3/9/2020
Brenda Smith Date 3-9-2020

NO.	DESCRIPTION	BY	DATE

FIELD

PROJECT DESCRIPTION:
FOUNDATION HOMES

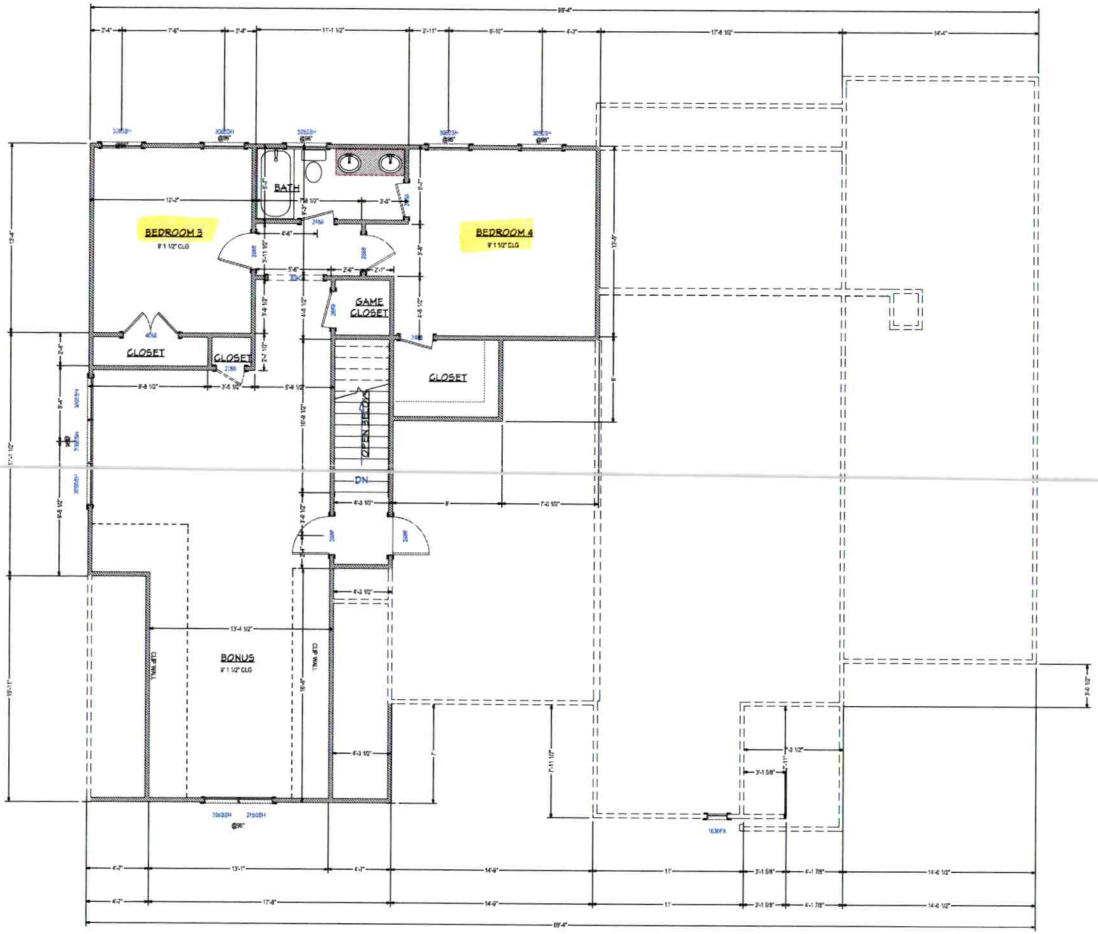
VisualDesignAndDrafting@gmail.com
Justin Trone
706-540-2882
VISUAL DESIGN & DRAFTING

DATE: 2/24/2020

SCALE:

SHEET: A-6

SQUARE FOOTAGE	
1ST FLOOR HEATED	2099
2ND FLOOR HEATED	1155
TOTAL HEATED	3254
GARAGES	731
PORCHES	368
TOTAL UNDER ROOF	4353



SECOND FLOOR PLAN

SCALE 1/4" = 1' - 0"

Ack[illegible]nt Of Plans [illegible] ONL

Patrick E Bagley III Date 3/9/2020

Brenda Smith Date 3-9-2020

NO.	DESCRIPTION	BY	DATE

FIELD

PROJECT DESCRIPTION: FOUNDATION HOMES

FOUNDATION HOMES

VISUAL DESIGN & DRAFTING

Justin Thorne
706-340-8880
VisualDesignAndDrafting@gmail.com

DATE: 2/24/2020

SCALE:

SHEET: A-7

IREDELL COUNTY

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

APPLICATION NUMBER
243320
Issue Date: 04/01/2019

ZONING PERMIT
Residential

Parcel Number	Street Address	Jurisdiction
4649016361.000	185 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 HOLD BUILDING PERMIT TILL PLAT IS RECORDED	

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: 4/1/19

Permit Number	172432	TOTAL FEES:	$ 77.25