# ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) [illegible]

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

PIN # 4649 -- 85 -- 4826

APPLICANT/OWNER: Freedom Homes APPLICANT ADDRESS: 1124 Charlotte Hwy Troutman, NC 28166

SITE ADDRESS: 312 Sailwinds Rd Mooresville, NC 28115 PHONE: 704 881-2326 ALT. PHONE Ellis 980 636-7450

SITE DIRECTIONS: Hwy 115 N TL Sailwinds Rd to end. SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Windward Pt SECTION: 2 LOT # 107 LOT AREA: .75 Acre DESIGN FLOW: 360 gpd L.T.A.R.: .3 I / .25 R

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 (gal) | STB | 760 | Date | 8/30/21 | ☒ New System ☐ Repair ☐ Expansion | System Type: I II III IV V VI | ☒ Residence | No. Bedrooms 3 |
| Pump Tank | (gal) | PT | | Date | | System Description: | Gravity - 25% Reduction | ☐ Business | No. Persons 6 |
| Pump Make | | Model | | Serial # | | Repair System Description: | SPPBPS | ☐ Other | No. Employees |
| # Nitrification Fields | 1 | # Lines | 7 | Linear Ft: | min. 300' | Maintenance Agreement Required: | ☐ YES ☒ NO | ☐ Slab | ☒ Crawl Space |
| Trench Width | 36" | Trench Bottom Depth(Low side) MAX | 36" | Gravel Depth | N/A | ☒ GRAVITY | ☐ PRESSURE | ☐ Basement w/ plumbing | ☐ Basement w/o plumbing |

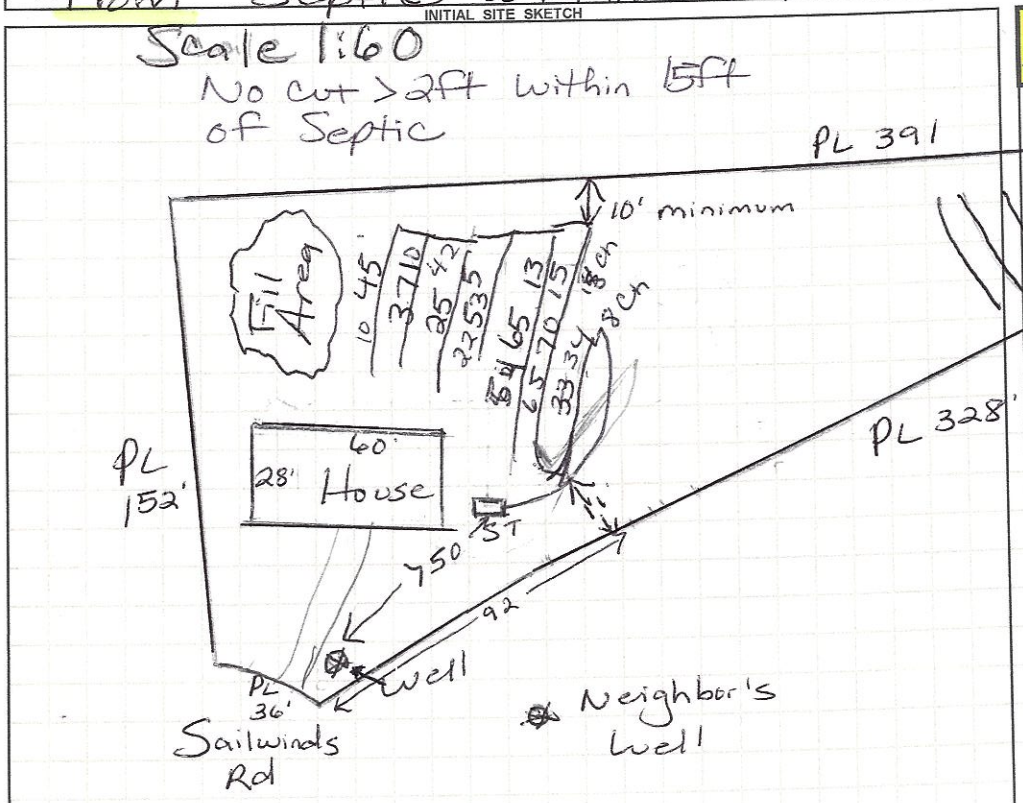
Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: *328ft Flagged out a min. 300ft required

**Divert storm/surface water away from Septic. DO Not install in fill

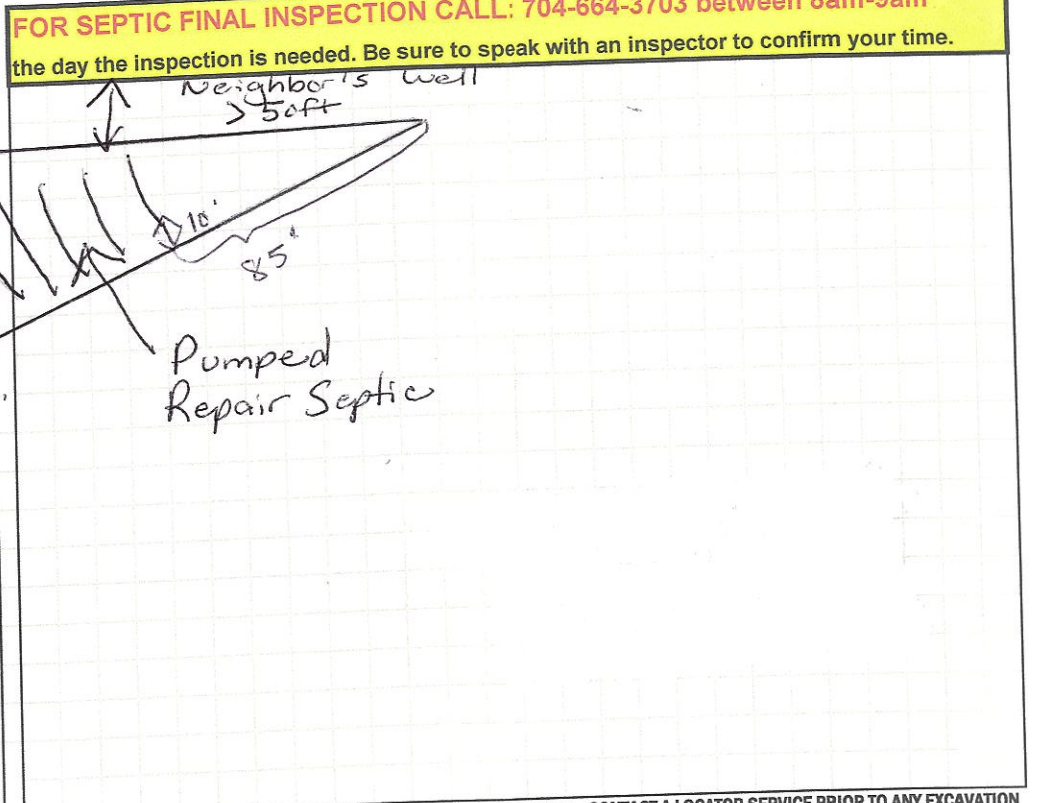
Keep deck post a minimum of 5ft from Septic.

INITIAL SITE SKETCH




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.




*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: Kimberly Long Date: 10/20/21 Installed by: Craig Thompson

IMPROVEMENT PERMIT by: Maria DeLeon Date: 10/18/21 OPERATION PERMIT by: Maria DeLeon Date: 10/25/21

AUTHORIZATION TO CONSTRUCT by: Maria DeLeon Date: 10/18/21 Existing System Inspected by: Date:

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

ARTMENT OF HEALTH AND HUMAN SERVICES
SION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
SITE WATER PROTECTION BRANCH

Sheet 1 of 2
PROPERTY ID #: 4649854826
COUNTY: Iredell

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

NER: Freedom Homes — APPLICATION DATE
DRESS: 1124 Charlotte Hwy Troutman, NC — DATE EVALUATED: 5/7/21
POSED FACILITY: House — PROPOSED DESIGN FLOW (.1949): 360 gpd — PROPERTY SIZE: .75 ac
CATION OF SITE: Winward Pt #107 — PROPERTY RECORDED: Y
TER SUPPLY: ☒ Private ☐ Public ☐ Well ☐ Spring ☐ Other
ALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut — TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

| | .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 |
|---|---|---|---|---|---|---|---|---|---|
| | 5% | 0-10 | Brw SCL | wk SBK, SS, SP, SExP, FR | | | | | PS |
| | | 10-28 | R to Rd/Brw C M | SBK SS, SP, SExP, FR | | | | | .3 |
| | | 28-51 | RC/CL | wSBK SS, SP, SExP, FR | — | 51" | — | — | |
| 2 | 4% | 0-9 | Brw SCL | wSBK SS, SP, SExP, FR | | | | | PS |
| | | 9-28 | R to Rd/Brw C M | SBK SS, SP, SExP, FR | | | | | |
| | | 28-53 | RC/CL | wSBK SS, SP, SExP, FR | — | 53" | — | — | .3 |
| 3 | 5% | 0-9 | Brw SCL | wSBK SS, SP, SExP, FR | | | | | PS |
| | | 9-31 | R to Rd/Brw C M | wSBK SS, SP, SExP, FR | | | | | |
| | | 31-54" | RC/CL | wSBK SS, SP, SExP, FR-FI | | | | | .3 |
| | | | w/ Common Mica Flakes | | — | 54" | — | — | |
| 4 | 7% | 0-8 | Brw SCL | wSBK SS, SP, SExP, FR | | | | | PS |
| | | 8-25 | RC M | SBK SS, SP, SExP, FR | | | | | |
| | | 25-46 | RC | wSBK SS, SP, SExP, FR | w/ Yel/Brw mottles, few to many | | | | .25 |
| | | 46-54 | RC | wSBK SS, SP, SExP, FR | | | | | |
| | | | SAP Indus | | — | 54" | — | — | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | PS | PS |
| System Type(s) | 25% Red | 50% Red |
| Site LTAR | .3 | .25 |

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: Maria Dotson
OTHER(S) PRESENT: Joe McIntosh
Ellis w/ Freedom Homes

COMMENTS:

# 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, John Martin McCoy, am the legal owner(s) of the property located at 312 Sentinel Dr Mooresville, NC 28115, identified as PIN (Parcel Identification Number) 4649858426, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) Freedom Homes, Kimberly Fryar, 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.

John Martin McCoy 2/27/20
Signature of Owner(s) Date

Kimberly Fryar 2/27/20
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

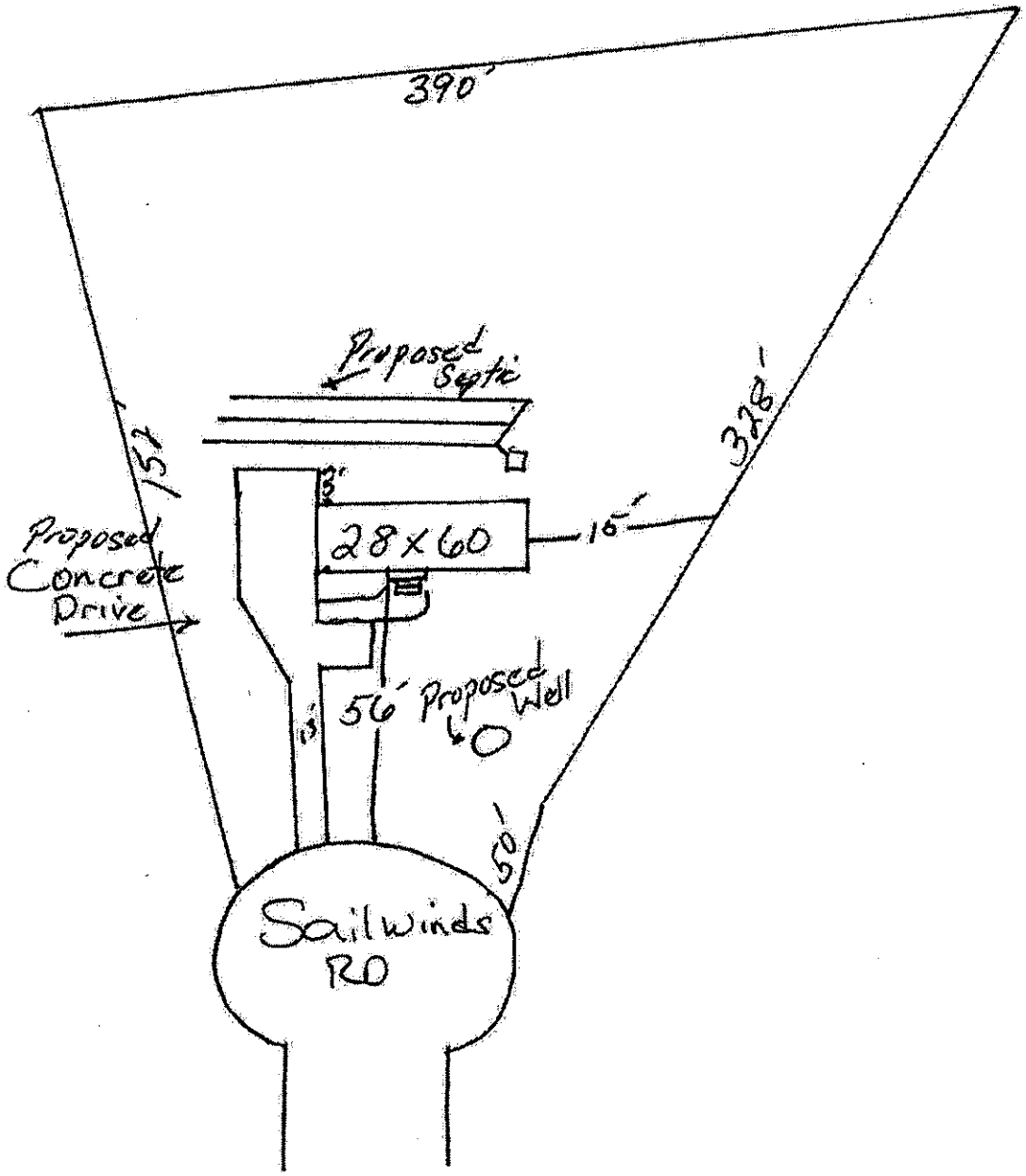
**Statesville - Environmental Health**
adrienne.shea@co.iredell.nc.us
Fax 704-871-3483
349 N. Center Street, Statesville, NC 28677

# PLOT PLAN

N.T.S.

## WINTON

TBD SAILWINDS RD.
MOORESVILLE, NC



FREEDOM HOMES

1124 Charlotte Highway
Troutman, NC 28166
freedomhomestroutman.com

Find us on Facebook

Fax: 704.528.7355
Office: 704.528.7960

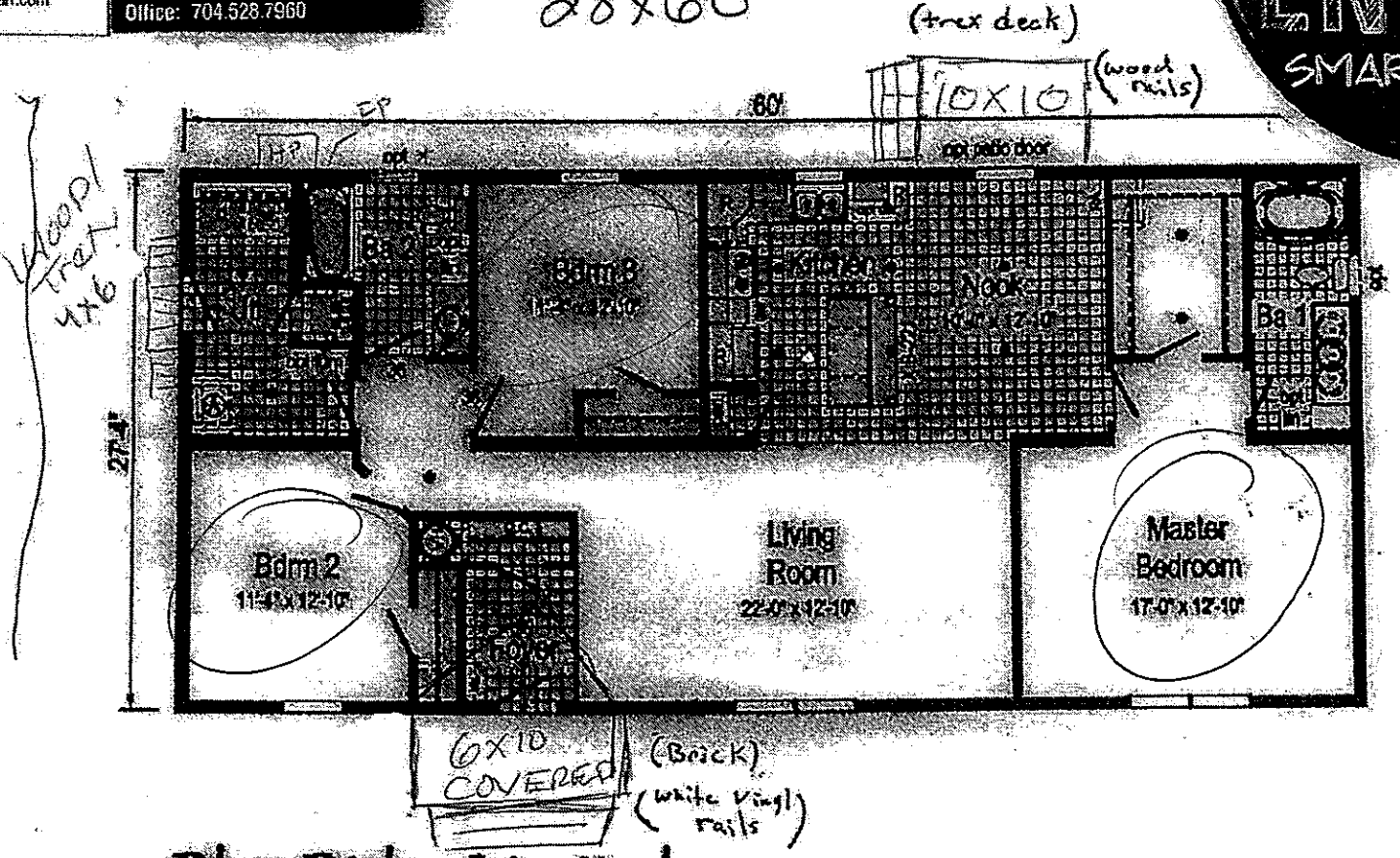
APPROVED

SIGNATURE:

DATE: 1/9/21

28x60

ASK ABOUT THE ENERGY SMART HOME




Blue Ridge Limited

APPROVED

SIGNATURE:

DATE: 1/9/21

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Builder: R-Anell Housing Group, LLC - Subsidiary of The Commodore Corp. | Order #: 2660 | Revisions: Date / Number | 45/16 | Scale: 1/8" = 1'-0" | Date: 1/3/19 | Cust: - | Drawing No.: 1BL1002-R |
| Title: Literature | | 1/3/19 | | Drawn By: CY | Reference: BL2601-A | Dlr: - | Pg: LIT |
| | | 5/7/19 | | | | Init: - | |

Maria Doba
5/14/21

IREDELL COUNTY · NC

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

| APPLICATION NUMBER |
|---|
| 315573 |
| Issue Date: |

**Permit Type: ZONING**

| Parcel Number | Street Address | Jurisdiction |
|---|---|---|
| 4649854826.000 | 312 SAILWINDS RD | IREDELL COUNTY |

| Owner Information | Applicant Information |
|---|---|
| Name: WINDWARD SAILVIEW LLC | Name: FREEDOM HOMES-TROUTMAN #667- USE THIS ONE |
| Address: 21313 CATAWBA AVE | Address: 1124 CHARLOTTE HWY |
| CORNELIUS, NC 28031 | TROUTMAN, NC 28166 |
| Phone: | Phone: (704)528-7960 |

| Use Requested | Zone Code |
|---|---|
| Modular | RA |

| Lot Acreage | F Setback | B Setback | L Setback | R Setback | Watershed | Flood Zone |
|---|---|---|---|---|---|---|
| 0.76 | 35 | 35 | 15 | 15 | WSIV-PA Coolemee | NO |

| Remarks |
|---|
| MODULAR//NEED 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. 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.

Signature of Owner/Contractor

**Date:** 03/08/2021

| Permit Number | 315573 |
|---|---|

| TOTAL FEES: | $77.25 |
|---|---|