10:00

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 325862

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

PIN # 4654 -- 68 -- 1337

APPLICANT/OWNER: Oakspring's, LLC APPLICANT ADDRESS: PO Box 5350 Mooresville NC 28117.

SITE ADDRESS: 114 Wilhere CT Mooresville NC PHONE: 704-799-7609. ALT. PHONE

SITE DIRECTIONS: Mecklenburg Hwy to Presbyterian Dan Rylugh Dan Rd on Addison Emery SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Davidson Pond SECTION: - LOT # 38 LOT AREA: - DESIGN FLOW: N/A L.T.A.R.: N/A

Septic Tank	N/A	(gal)	STB		Date		☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	
Pump Tank	N/A	(gal)	PT		Date		System Description:	Supply Line			
Pump Make			Model		Serial #		Repair System Description:				
# Nitrification Fields	N/A	# Lines	N/A		Linear Ft	N/A	Maintenance Agreement Required:	☐ YES	☐ NO		
Trench Width	N/A	Trench Bottom Depth(Low side)	N/A		Gravel Depth		☐ GRAVITY	☒ PRESSURE			

☒ Residence	No. Bedrooms		Water Supply
☐ Business	No. Persons		☒ Private
☐ Other	No. Employees		☐ Public
☐ Slab	☐ Crawl Space		☐ Community
☐ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions: * Easement needs to be Recorded prior to A/C

INITIAL SITE SKETCH

See attached site plan.
Dated 11/23/21

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: [signature] Date: 3/14/2022 Installed by: Bell Construction

IMPROVEMENT PERMIT by: [signature] Date: 3/9/2022 OPERATION PERMIT by: [signature] D. Mebey Date: 5/13/22

AUTHORIZATION TO CONSTRUCT by: [signature] D. Mebey Date: 5/13/22 Existing System Inspected by: Date:

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

Item	Date	Initials
Drain Lines Checked		
Tanks Checked		
Pressure Manifold or Valve Box Checked		
Pressure Head Set		
Electrical Checked		
Floats Set		
Alarm Checked		
Maintenance Contract Needed? Y / N		
Comments:		

Repairs Only	
	State Code
Failing System Code	
Type of Distribution	G or P
Type of Failure/Malfunction	
Primary Cause of Failure/Malfunction	
Age of System? _____	
Initial or Repair? _____	

PIEDMONT DESIGN ASSOCIATES, P.A.
125 East Plaza Drive | Suite #101
Mooresville, NC 28115
Phone: 704-664-7888 | Fax: 704-664-1778
Email: dmunday@pdapa.com

Engineering
Surveying
Planning

May 11, 2022

Iredell County Health Department
610 East Center Avenue
Mooresville, NC 28115
Attn: Danielle Wieberg, REHS

RE: Offsite Septic System Supply Lines to Serve
Lots 17 (17-A), 18 (18-A) & 35 (35-A)
Davidson Pond Subdivision, Iredell County, North Carolina

Dear Mrs. Wieberg:

ENGINEERS CERTIFICATION

I, **Donald L. Munday**, as a duly registered Professional Engineer in the State of North Carolina, having been authorized to observe periodically the construction of the referenced project, (3) Offsite Septic System Supply Lines to serve Lots 17 (17-A), 18 (18-A) & 35 (35-A) in Davidson Pond Subdivision, located in Mooresville, Iredell County, NC, hereby state that, to the best of my abilities, due care and diligence was used in the observation of the construction such that the construction was observed to be built within substantial compliance and intent of the approved plans and specifications. Please note that this certification is NOT for the actual systems themselves but for the supply lines from the individual residence(s) to the offsite easement area(s) only.

Sincerely,

PIEDMONT DESIGN ASSOCIATES, P.A.

Donald L. Munday, P.E.
N.C. Registration No. 17327

Cc: Aaron Feldman, Oaksprings, LLC



05/12/2022

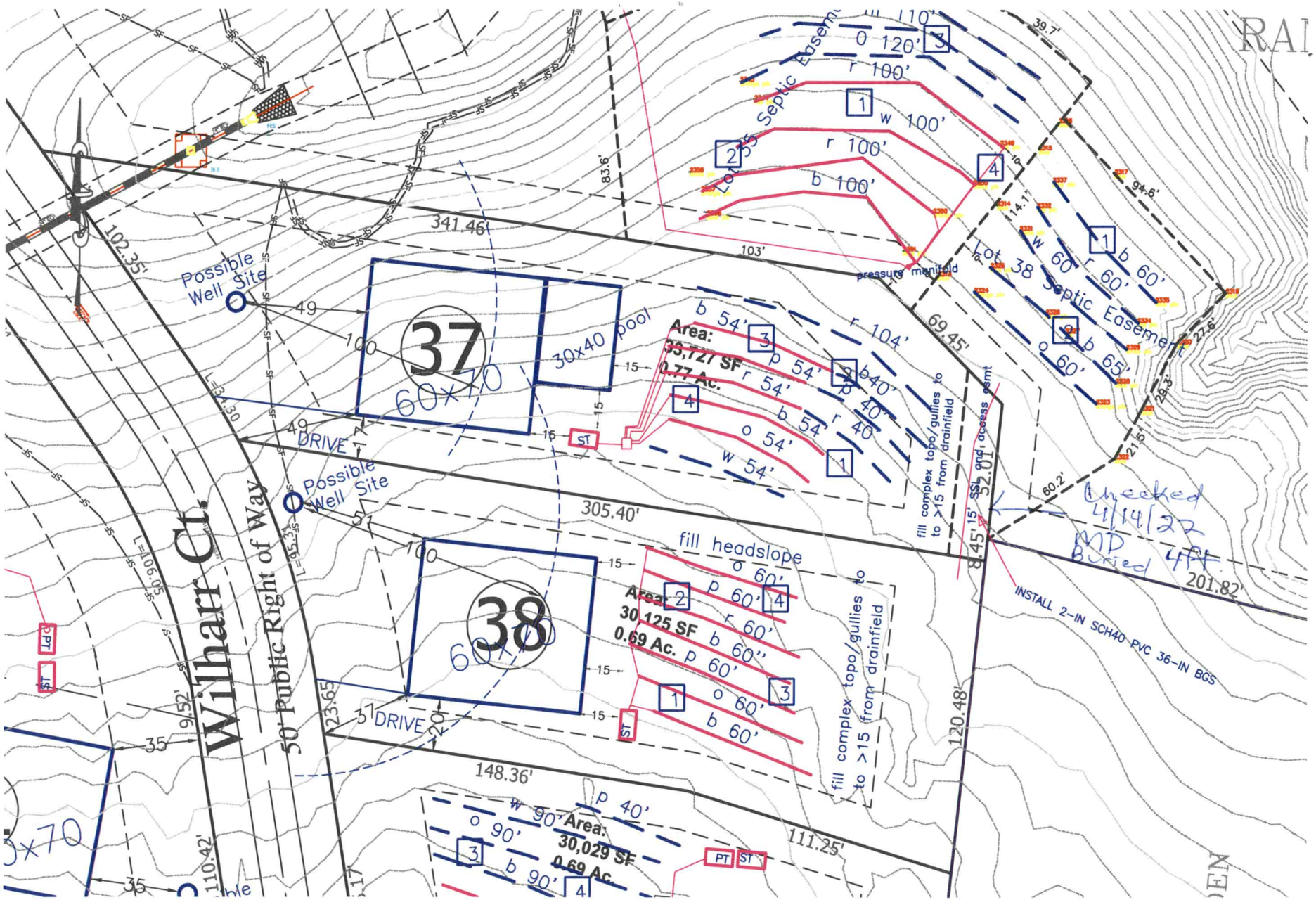
Danielle Wieberg

From: David DeCaron <ddecaron@pdapa.com>
Sent: Friday, April 22, 2022 6:58 AM
To: Danielle Wieberg
Cc: Paul Penninger ; Dwayne Bell; Aaron Feldman
Subject: Davidson Pond

Danielle,
Yesterday afternoon I visited Davidson Pond with Bell construction to witness the pressure test on the forcemains for Lots 17, 18 and 35. All were holding 150 PSI. There was a test on Lot 38 as well but was not part of our design. The gauge was reading 150 also but will not be part of our certification. I told them to wait until today so ICHD can put an eye on the gauges. If you all would like for me to be there as well, just let me know a time. Otherwise, if they are within 5 PSI of 150, you can go ahead and allow for them to blow off the lines. Please follow up with an email to let me know you all are satisfied with the pressure and we can certify them. My mobile is 704-506-0700 as I am working remotely today.

David DeCaron
Piedmont Design Associates, P.A.
125 East Plaza Drive, Suite 101
Mooresville, NC 28115
Phone 704-664-7888
Fax 704-664-1778
Email: ddecaron@pdapa.com
NCBELS License No. C-1007

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe. Report suspicious emails by clicking the "Report Phish" button.



Oaksprings, LLC – Davidson Pond Subdivision – Lot 38 Septic Site Plan 10.14.21 rev 11.23.21

Base site plan from PDAPA. House pad and lot lines staked by PDAPA. Approx. proposed septic lines sketched on site plan by Penninger Soil Consulting. Refer to flags in field. Any proposed well or septic system must be approved and permitted by the ICHD. Refer to ICHD permit for system type and specifications. Gravity distribution will have to be reviewed after final house plan approved and foundation installed.

GRAPHIC SCALE

0 25 50 100

1 inch = 50 feet

4

BB

Supply Line Easement Only

RECEIVED FEB 2 3 2022

application for septic supply line installation Lot 17, 18, 35

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM AP-325862 $1200.00

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.

Page 2: *Site Plan Worksheet* form MUST accompany this application

The following optional attachments may also be submitted: (X) **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: Oaksprings, LLC **Address:** PO Box 5350 Mooresville, NC **Zip:** 28117

Applicant Email: lakemisthomes@yahoo.com> **Phone:** 704-799-7609 **Alt. Phone:**

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

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

Property Information:

Street Address: ~~129, 133 Addison Emery Lane~~ ~~134~~ 114 Wilharr Ct 38

Subdivision Name: Davidson Pond **Section/Phase:** **Lot Number:** ~~17, 18, 35~~

Driving Directions: South on Mecklenburg Highway, TL Presbyterian Rd, L Ryleigh Dan Place, R Addison Emery
Lot 35, L Wilharr, lot on rt at end

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

SEPTIC SUPPLY LINES

( ) New Single Family Residence **Maximum Number of Bedrooms:**
( ) New Multi-Family Residence **Maximum Number of Occupants:**
( ) Accessory Building ( ) Swimming Pool
( ) Bedroom(s) Addition ( ) Other Addition/Structure:
( ) 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:**

CHECK FOUNDATION TYPE

( ) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

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: 1.19.22
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**

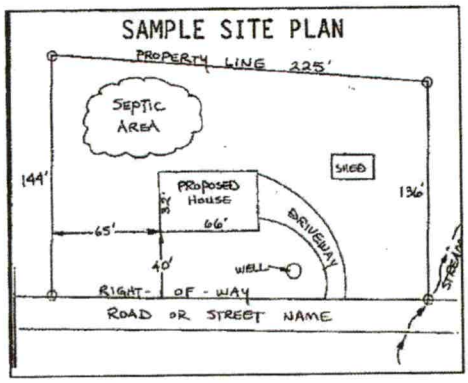
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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 site plan. — SEPTIC SURVEY LINE ADD (ENG.

Signature: _____

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

1.19.22

DATE

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, Oaksprings, LLC / Aaron Feldman, am the legal owner(s) of the property located at Lots 1-40 Davidson Pond Subdivision, identified as

PIN (Parcel Identification Number) 4654688991.000, 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.

_____ 5-7-21

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