ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP 2022-10381

MW

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

PIN # 4654 -- 69 -- 9566

APPLICANT/OWNER: Lakeshore Holdings | APPLICANT ADDRESS: PO Box 5350, Mooresville, NC 28036

SITE ADDRESS: 154 Ryleigh Dan Pl, Mooresville 28115 | PHONE: 704-799-7609 | ALT. PHONE

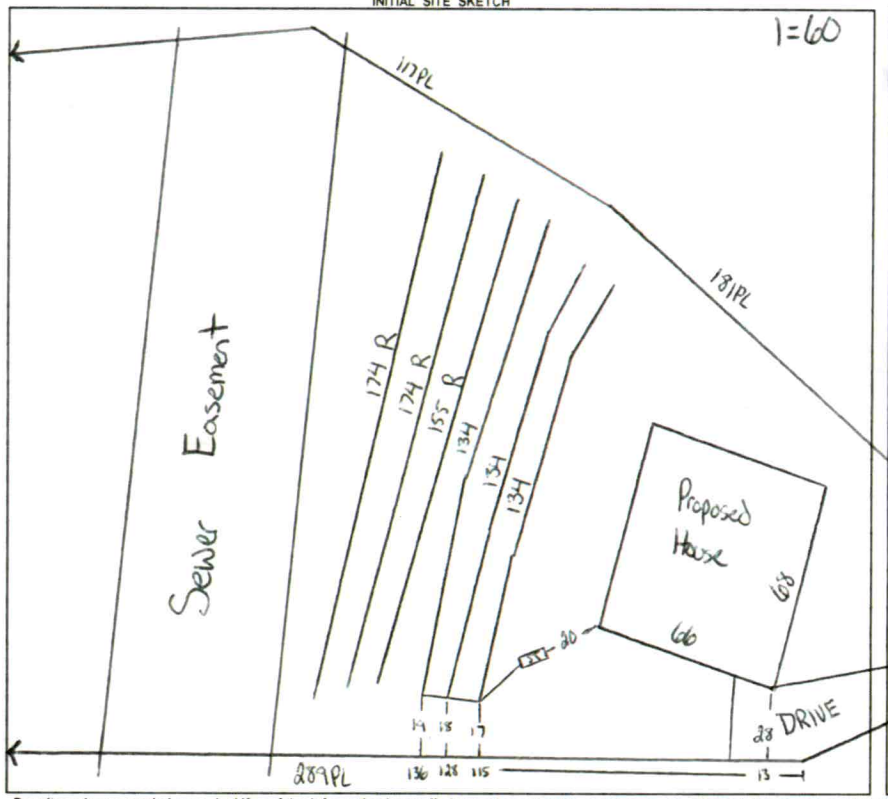
SITE DIRECTIONS: Mecklenburg - Presbyterian - Ryleigh Dan | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Davidson Pond | SECTION: - | LOT # 12 | LOT AREA: 4.07 acres | DESIGN FLOW: 480 gpd | L.T.A.R.: 0.3

Septic Tank	1000 (gal)	STB	760	Date	1-15-23	☒ 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:	25% reduction	☐ Business	No. Persons 8	☒ Private
Pump Make		Model		Serial #		Repair System Description:	25% reduction	☐ Other	No. Employees	☐ Public
# Nitrification Fields	1	# Lines	3	Linear Ft	400	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☒ Crawl Space	☐ Community
Trench Width	36"	Trench Bottom Depth ~~(Low side)~~	36" max	Gravel Depth	-	☒ GRAVITY	☐ PRESSURE	☐ Basement w/plumbing	☐ Basement w/o plumbing	

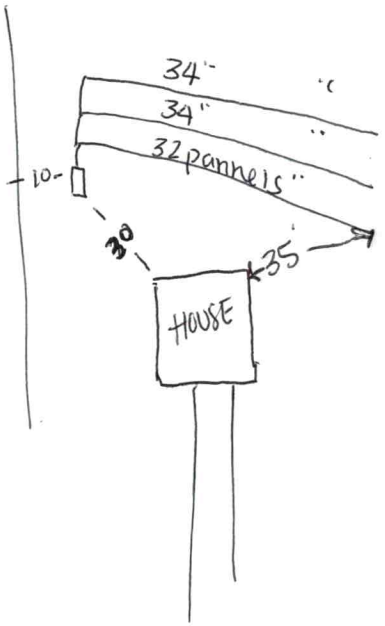
Comments / Conditions: Install lines on contour with the land. Utilize serial distribution Do not drive, park, or grade septic area.

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**

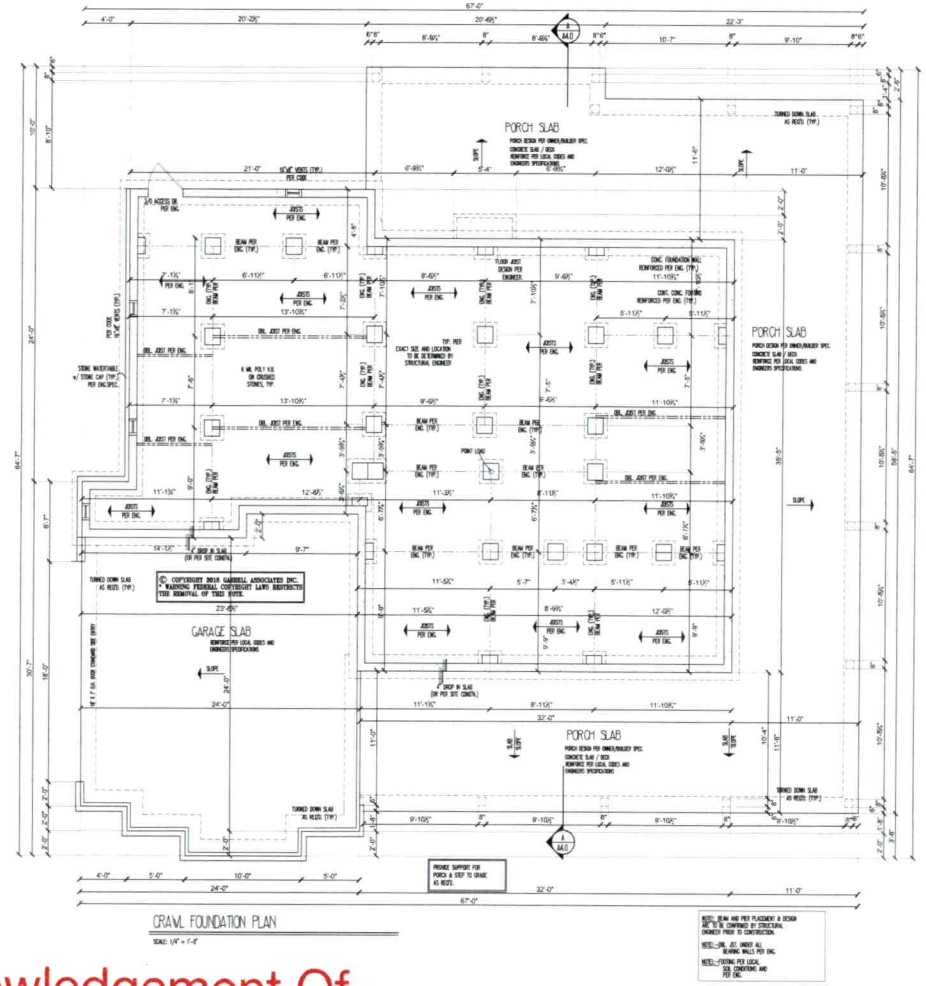
☐ **IMPROVEMENT PERMIT** ***with plat*** *valid without expiration.* ☒ **IMPROVEMENT PERMIT** ***with site plan*** *valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Online Signature | Date: | Installed by: Neill Stutts

IMPROVEMENT PERMIT by: Cory Hill | Date: 12/9/22 | OPERATION PERMIT by: Sydney Holland | Date: 3/24/23

AUTHORIZATION TO CONSTRUCT by: Cory Hill | Date: 12/9/22 | Existing System Inspected by: | Date:

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



CRAWL FOUNDATION PLAN

SCALE: 1/4" = 1'-0"

GENERAL NOTES

1. ALL WORK SHALL BE PERFORMED IN ACCORDANCE WITH ALL NATIONAL AND LOCAL CODES, REGULATIONS, AND LATEST INTERNATIONAL RESIDENTIAL BUILDING CODE WITH CURRENT ADDENDA.
2. CONTRACTOR SHALL VERIFY ALL CONDITIONS AND DIMENSIONS AT THE SITE BEFORE BEGINNING CONSTRUCTION. ANY DISCREPANCIES SHALL BE REPORTED TO GARRELL ASSOCIATES, INC. FOR JUSTIFICATION OR CORRECTION BEFORE PROCEEDING WITH THE WORK. CONTRACTOR SHALL ASSUME RESPONSIBILITY FOR ERRORS THAT ARE NOT REPORTED.
3. ALL DIMENSIONS SHALL BE READ OF CALCULATED AND NEVER SCALED.
4. ALL PORTIONS OF FOOTINGS ARE TO BE BELOW LOCAL FROST LINES AND MUST REST ON UNDISTURBED SOIL WITH ADEQUATE BEARING CAPACITY TO SUPPORT THE STRUCTURE. A LOCAL ENGINEER MUST BE CONSULTED FOR PROPER FOOTING AND REINFORCEMENT SIZES.
5. CONTRACTOR TO ENSURE COMPATABILITY OF THE BUILDING WITH ALL SITE REQUIREMENTS.
6. REINFORCED FOUNDATION WALLS PER LOCAL CODES.
7. ALL FOUNDATION AND STRUCTURAL MEMBERS SHALL BE DESIGNED AND STAMPED BY AN ENGINEER. THE CONTRACTOR IS RESPONSIBLE FOR THE ADJUSTMENT AND VERIFICATION OF ALL STRUCTURAL DETAILS AND CONDITIONS TO MEET ALL LOCAL CODES AND TO INSURE A WELL CONSTRUCTED AND SAFE STRUCTURE.
8. ALL WOOD, CONCRETE AND STEEL STRUCTURAL MEMBERS ARE TO MEET NATIONAL, STATE AND LOCAL BUILDING CODES.
9. ALL COLUMNS OF SOLID FRAMING SHALL BE DESIGNED TO CARRY AND TERMINATE LOADS THROUGH THE STRUCTURE TO FOUNDATION ELEMENTS THAT DETERMINE THE LOADS TO FULL CAPACITY LOADS.
10. GARRELL ASSOCIATES ASSUMES NO LIABILITY FOR ANY HOME CONSTRUCTED FROM THIS PLAN.
11. THIS DESIGN LICENSE IS RELEASED FOR ONE (1) BUILT STRUCTURE ONLY AND IS NOT TRANSFERABLE TO ANOTHER INDIVIDUAL OR COMPANY.
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14. THE DRAWINGS PREPARED BY GARRELL ASSOCIATES INC. ARE ARCHITECTURAL IN NATURE. STRUCTURAL DRAWINGS SHALL BE PREPARED BY A LOCAL ENGINEER PER LOCAL CODES.
15. WINDOW NOTES: PER THE 2012 INTERNATIONAL BUILDING CODE, ALL OPERABLE WINDOWS MUST BE MOUNTED GREATER THAN OR EQUAL TO 24" FROM BOTTOM OF WINDOW TO FINISHED FLOOR. WHEN TH EWINDOW IS GREATER THAN OR EQUAL TO 72" FROM THE GRADE IN LIEU OF DECKING SYSTEMS, STOPS ETC. WITH RAILINGS.
ALTERNATE WINDOW FALL DEVICES CONFORMING TO ASTM 2090 MAY BE USED IF OPERABLE WINDOW IS MOUNTED CLOSER THAN 24" AFF.

Acknowledgement Of
Plans Submittal ONLY!

Tony White Date 12/9/22

Date

Date

ReDesign HP
Designing for tomorrow

CUSTOM CHANGES
ReDesign HP

ORIGINAL DESIGN
GARRELL ASSOCIATES INC.
795 PEACHTREE IND. BLVD.
SUITE 800, DUNWOODY, GA 30084

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*Final selections of materials are the responsibility of the homeowner and or builder, including, but not limited to proper installation of materials, nailing, gluing, caulking, insulating, flashing, roofing, weatherproofing and many other small items and details not necessarily indicated on the plans, and over which ReDesign HP and Garrell Associates INC., has no control or responsibility. ReDesign HP and Garrell Associates INC., shall not be held liable for any errors, omissions, or deficiencies in any items by any party whatsoever.

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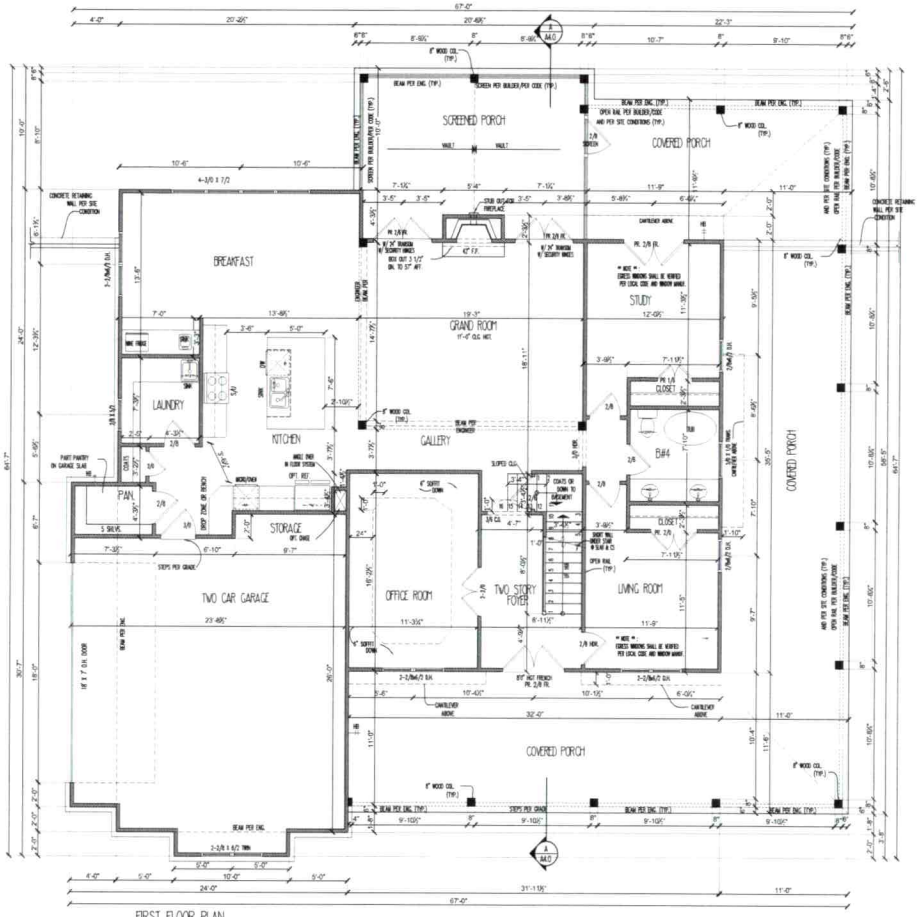
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The framing notes are a carry over from the original drawings and need to be coordinated and reviewed with a local licensed structural engineer to comply with local codes.

Christy Wilbanks
104 Caldwell Lane
Davidson, NC 28036

DATE	NOV/23/2022
SCALE	AS NOTED
DRAWN BY	———
PROJECT	Christy Wilbanks
SHEET	A1.0



FIRST FLOOR PLAN

GENERAL NOTES

1. ALL WORK SHALL BE PERFORMED IN ACCORDANCE WITH ALL NATIONAL AND LOCAL CODES, REGULATIONS, AND LASTEST INTERNATIONAL RESIDENTIAL BUILDING CODE WITH CURRENT ADDENDUM.
2. CONTRACTOR SHALL VERIFY ALL CONDITIONS AND DIMENSIONS AT THE SITE BEFORE BEGINNING CONSTRUCTION. ANY DISCREPANCIES SHALL BE REPORTED TO GARRELL ASSOCIATES, INC. FOR CLARIFICATION OR CORRECTION BEFORE PROCEEDING WITH THE WORK. CONTRACTOR SHALL ASSUME RESPONSIBILITY FOR ERRORS THAT ARE NOT REPORTED.
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*SQUARE FOOTAGES	
FIRST FLOOR (HEATED)	1,771 S.F.
2ND FLOOR (HEATED)	1,968 S.F.
SUBTOTAL (HEATED)	3,739 S.F.
COVERED FRONTER REAR PORCH	1,087 S.F.
SCREEN PORCH	765 S.F.
2-CAR GARAGE	855 S.F.
GROSS TOTAL	5,631 S.F.

*CALCULATED PER U.H.L.C. INDUSTRY STD. TO OUTSIDE FACE OF STUD. STAIRS @ 2-STORY COUNTED ONCE.

Acknowledgement Of
Plans Submittal ONLY!

Cary Wilbanks Date 12/9/22

Date

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CUSTOM CHANGES
ReDesign HP

ORIGINAL DESIGN
GARRELL ASSOCIATES INC.
790 PEACHTREE IND. BLVD.
SUITE 500, DULUTH, GA 30096

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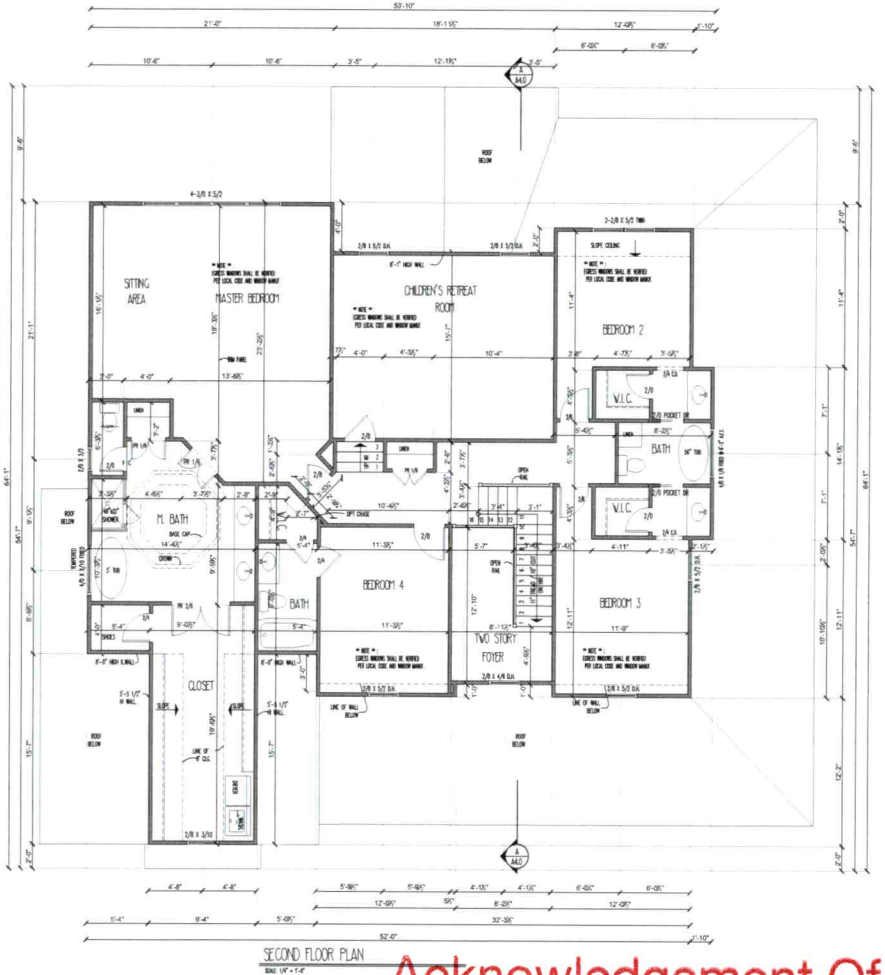
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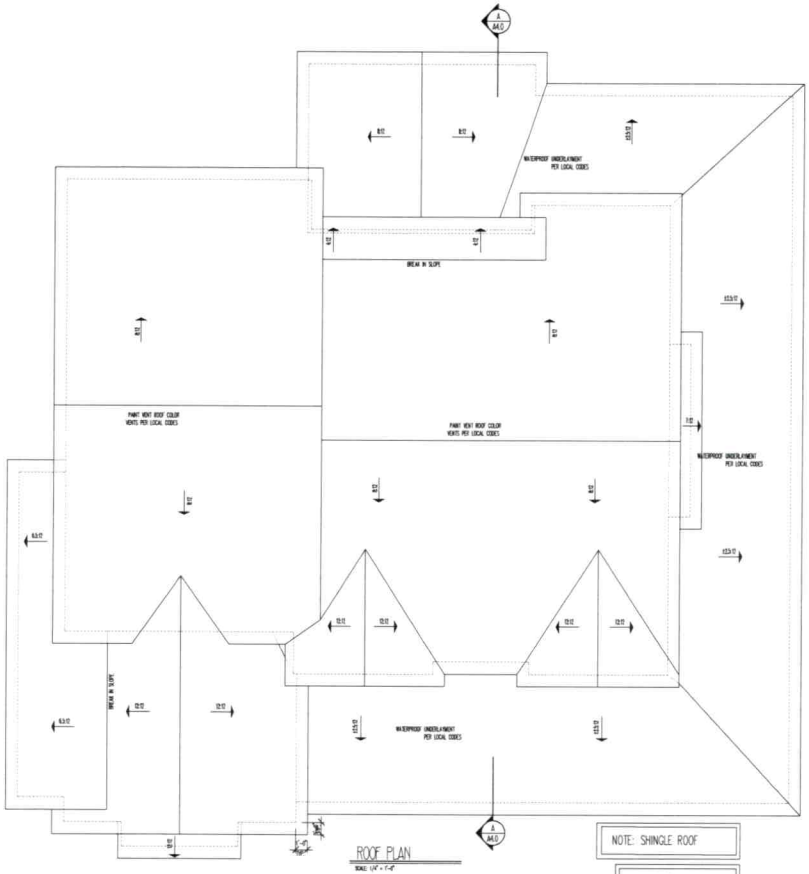
Christy Wilbanks
104 Caldwell Lane
Davidson, NC 28036

DATE : NOV/23/2022
SCALE : AS NOTED
DRAWN BY: ----------
PROJECT : Christy Wilbanks
SHEET

A1.1



SECOND FLOOR PLAN



ROOF PLAN

NOTE: SHINGLE ROOF

NOTE: 1'-0" O.H., TYP.

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ALTERNATE WINDOW FALL DEVICES CONFORMING TO ASTM 2090 MAY BE USED IF OPERABLE WINDOW IS MOUNTED CLOSER THAN 24" A.F.F.

Acknowledgement Of Plans Submittal ONLY!

Cary Whit Date 12/9/22

Date

Date

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CUSTOM CHANGES
ReDesign HP

ORIGINAL DESIGN
GARRELL ASSOCIATES INC.
790 PEACHTREE IND. BLVD.
SUITE 800, DUNWOODY, GA 30004

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Christy Wilbanks
104 Caldwell Lane
Davidson, NC 28036

DATE	NOV/23/2022
SCALE	AS NOTED
DRAWN BY	----------
PROJECT	Christy Wilbanks
SHEET	A1.2

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 319373

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

PIN # -- --

APPLICANT/OWNER: Oak Springs APPLICANT ADDRESS: PO Box 5350 Mooresville NC 28117.

SITE ADDRESS: 154 Rylejh Dan Pl Mooresville NC PHONE: 704-799 7609 ALT. PHONE —

SITE DIRECTIONS: Mecklenburg Hwy @ Presbyterio Rd @ Rylejh Dan SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Davidson Pond SECTION: LOT # 12 LOT AREA: 4.07Ac DESIGN FLOW: 480 L.T.A.R.: .30

Septic Tank	1000	(gal)	STB	Date	☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms	4
Pump Tank		(gal)	PT	Date	System Description:	Gravity - 25% Reduction			☐ Business	No. Persons	8
Pump Make		Model		Serial #	Repair System Description:	Gravity 25% Reduction			☐ Other	No. Employees	
# Nitrification Fields	1	# Lines	3	Linear Ft 400	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☒ Crawl Space	
Trench Width	36 in	Trench Bottom Depth	36 in max	Gravel Depth	☒ GRAVITY	☐ PRESSURE			☐ Basement w/ plumbing	☐ Basement w/o plumbing	

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Install Drainlines on the contour of the Land - Utilize Serial Distribution. Do not Drive, park, pave, grade or bury utilities in drainfield.

INITIAL SITE SKETCH

See attached Site Plan by Paul Penninger LSS & ICHD Rev. 9-22-2021

---IMPROVEMENT PERMIT ONLY---

DO NOT ISSUE BUILDING PERMIT!
Lot Recorded
FLOOR PLAN STILL NEEDED!

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.

REVOKED

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**

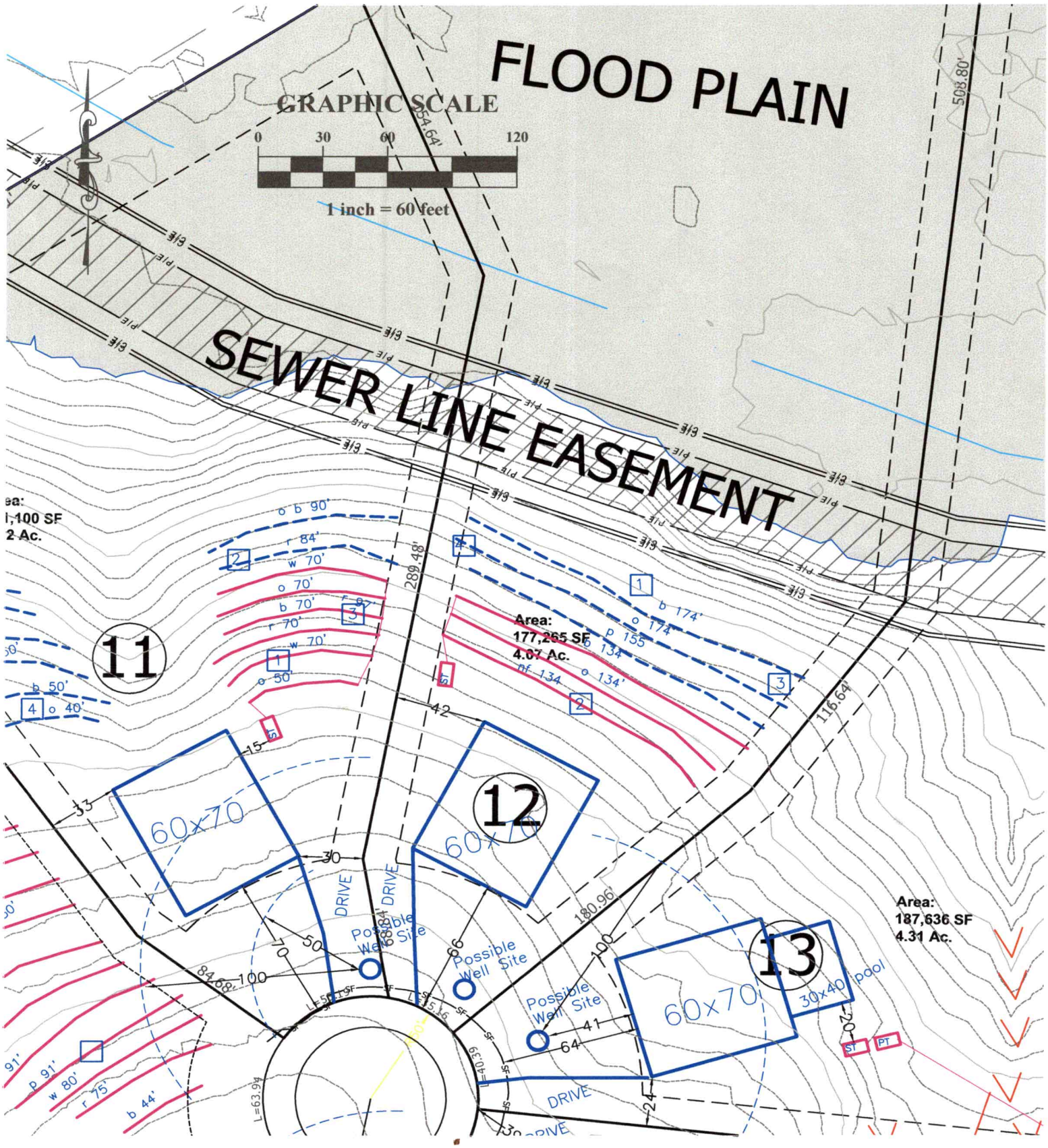
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Date: 10/20/2021 Installed by:

IMPROVEMENT PERMIT by: Date: 10-4-2021 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Date:

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



Oaksprings, LLC – Davidson Pond Subdivision – Lot 12 Septic Site Plan 9.7.21 rev. 9.22.21

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.

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

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

Lot 12 Dunbar Downs

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

OWNER: Dark Downs LLC
ADDRESS: PO Box 5380 MVL
PROPOSED FACILITY: 4BL
LOCATION OF SITE: 154 Rylee Dr Dun MVL
APPLICATION DATE 9-7-21
DATE EVALUATED: 9-21
PROPOSED DESIGN FLOW (.1949): 480 gpd.
PROPERTY SIZE: 4.07 AC.
PROPERTY RECORDED: NO

WATER SUPPLY: ☑ Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring ☑ Pit ☐ Cut
TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

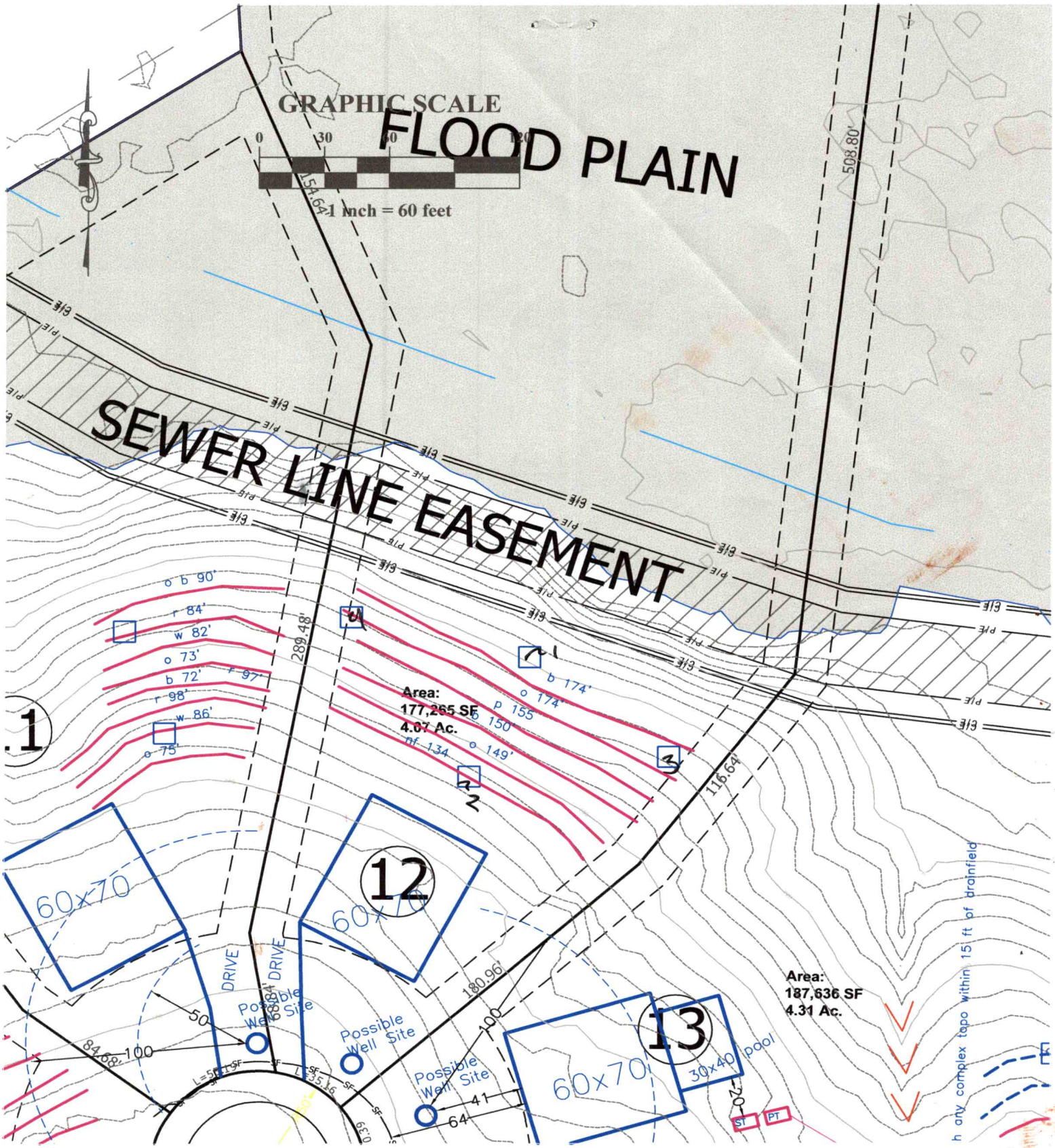
PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LSS 10-15	0-39	C SBK	SS Sp FR SPAP	2.5YR 6/1	52	–	Mica.	PS .30.
		39-52	CL WSBK	SS Sp VFR					
2	LSS 10-15	0-40	C SBK	SS Sp FR SPAP	2.5YR 4/6	61	–	Mica	PS .30.
		40-61	CL WSBK	SS Sp FR					
3	LSS 10-15	0-24	C SBK	SS Sp FR SPAP	2.5YR 4/6	61	–	Mica	PS .30
		24-61	CL WSBK	SS Sp FR					
4	LSS. 10-15	0-33	C SBK	SS Sp FR SPAP	2.5YR 4/6	65	–	–	PS .30
		33-55	CL WSBK	SS Sp FR					
		55-65	LSAP. M	NS Sp VFR					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	100	100
System Type(s)	25%	25%
Site LTAR	.30	.30

OTHER FACTORS (.1946): –
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Boteler / Pennington CSS / Wilkinson
OTHER(S) PRESENT:

COMMENTS: * See Site Plan.

Updated February 2014



Oaksprings, LLC – Davidson Pond Subdivision – Lot 12 Septic Site Plan 9.7.21

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.

call Paul Penninger for site visit 704.996.6330 RECEIVED SEP 07 2021

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM AP-319373 $500.00

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: 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: 154 Ryleigh Dan PL

Subdivision Name: Davidson Pond **Section/Phase:** _____ **Lot Number:** 12

Driving Directions: South on Mecklenburg Highway, TL Presbyterian Rd, L Ryleigh Dan Place, Lot at cul de sac

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

(X) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 8
( ) Swimming Pool
( ) Other Addition/Structure: _____

CHECK FOUNDATION TYPE
(X) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

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: _____
(X) 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: _____ 9-7-21
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

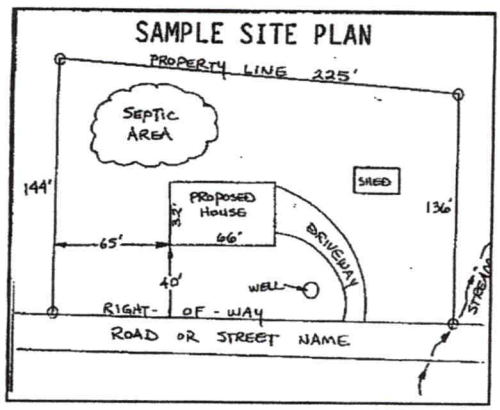
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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:

- (X) Property Line measurements are clearly identified
- (X) All proposed structures are indicated
- (X) Front and side setbacks from property line
- (X) Preferred driveway location
- (X) Preferred well location
- (X) Preferred septic system location
- (X) 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.

Signature: _____

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

9-7-21

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

ENVIRONMENTAL HEALTH REQUIREMENTS for SEPTIC and WELL PERMITS

The following items must be completed *PRIOR* to the *SUBMITTAL* of any Environmental Health Application. Incomplete applications will be returned to the applicant and cannot be processed or placed on the work list.

*** Initial all lines below to indicate you have submitted each form and completed every site requirement ****

___ **Complete all Environmental Health forms**:
- ___ Application
- ___ Site Plan with dimensions of proposed structure, addition, pool etc.
- ___ Documentation to Authorize Owner Agent (if the property owner is not the applicant)
- ___ Copy of Zoning Permit when applicable
- ___ Sign this sheet after you have completed all items

___ **Lot must be cleared of heavy undergrowth.** In order to evaluate the lot, the footprint of the proposed structure must be visible. Adequate area for the septic drain field and repair area must be sufficiently cleared of heavy undergrowth, with **50 feet of visibility** in all directions. Inspectors must be able to evaluate the property, shoot laser level elevations, layout the drain field, do soils work, etc. **If the lot is not cleared sufficiently, then a $100 site revisit fee will be charged and the evaluation will be put on HOLD until the requirement is met.**

___ **Clearly mark all property corners by locating existing iron or concrete markers**. Flag all property lines every 25 feet if adjacent corners are not visible when standing on any given corner. Property lines must be flagged by a licensed NC surveyor & easily identified **prior to application submittal** (exception may apply for septic repair evaluations only).
'Mow lines' and/or fence lines do NOT constitute marked lines. **If the property lines are not properly marked when the lot is ready to be evaluated, then the application will be put on HOLD and a $100 site re-visit fee charged**.

___ **Stake or flag the footprint of the proposed structure, addition, pool etc. to match the site plan submitted.** The proposed structure, etc. **must be staked** out on the property as per the site plan.

___ If an **Authorization to Construct (AC) is desired**, submit a recorded copy of the plat for newly created or subdivided lot(s) and a LEGIBLE copy of the basic floor plan no larger than 8 ½" x 14" for each floor of the structure including decks, porches, etc. **The overall dimensions must be clearly noted & the rooms labeled.**

Any site not meeting the above requirements when staff arrives for the evaluation will result in a $100 site revisit fee being charged and the request being placed on HOLD. This will delay the processing of the application.
Once work by Environmental Health staff begins, the up-front fees paid toward securing any health department permit are non-refundable. Refunds for work not started, due to a customer changing their mind or plans, are subject to an administrative fee of $50 to defray a portion of the costs of processing the refund.

Backhoe pits are required for all applications that require a soils evaluation.
DO NOT DIG PITS UNTIL THE EH SPECIALIST HAS AUTHORIZED AND SCHEDULED YOUR EVALUATION TIME.
- **All utilities shall be marked before pits are dug. Call NC 811 for this service.**
- **The applicant/agent is responsible for securing these services**
- **Backhoe pits are to be dug at the locations and depths determined by the Environmental Health Specialist or a NC Licensed Soil Scientist. A minimum of four pits must be dug.**
- **The EH specialist will contact you when your application is ready to be processed for pit scheduling.**
- **Your backhoe operator must be on site during the EH Specialist's evaluation to prevent your operator from having to return to the property for additional work.**

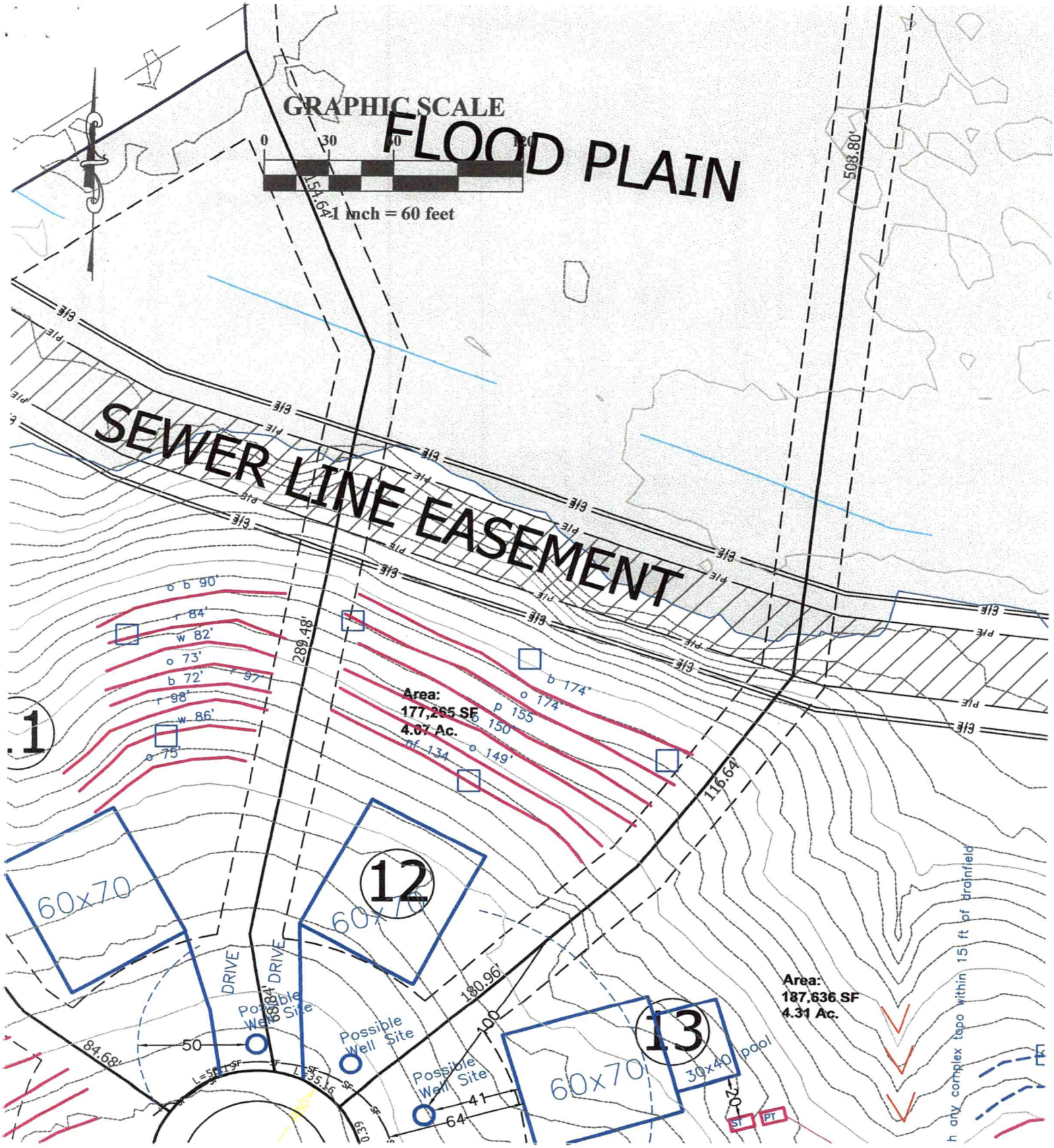
By signing below I am acknowledging the above specifications have been met and the site is READY to be evaluated AND I understand the backhoe pit requirement and will secure those services (if applicable).

Signature _____ **Date** 9-7-21

Questions? Contact the Environmental Health Offices below:

Statesville Office
349 North Center Street (2nd Floor Building Standards)
Statesville, NC 28677-4063
Phone: (704)878-5305 ext. 3456

Mooresville Office
610 East Center Avenue (2nd Floor Govt. Center South)
Mooresville, NC 28115-2548
Phone: (704)660-3625



Oaksprings, LLC – Davidson Pond Subdivision – Lot 12 Septic Site Plan 9.7.21

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.