# IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 273851

## SEPTIC IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM M A D. PIN # 4654547666

APPLICANT/OWNER: Brooks Henderson APPLICANT ADDRESS: PO Box 1409 Cornelius, NC

SITE ADDRESS: 246 Sink Farm Rd Mooresville, NC PHONE: 704-201-1429 ALT. PHONE —

SITE DIRECTIONS: 1155 → L on Presbyterian Rd → R on Sink Farm Rd → lot on R SAP CONTROLLED: ☑ YES ☐ NO

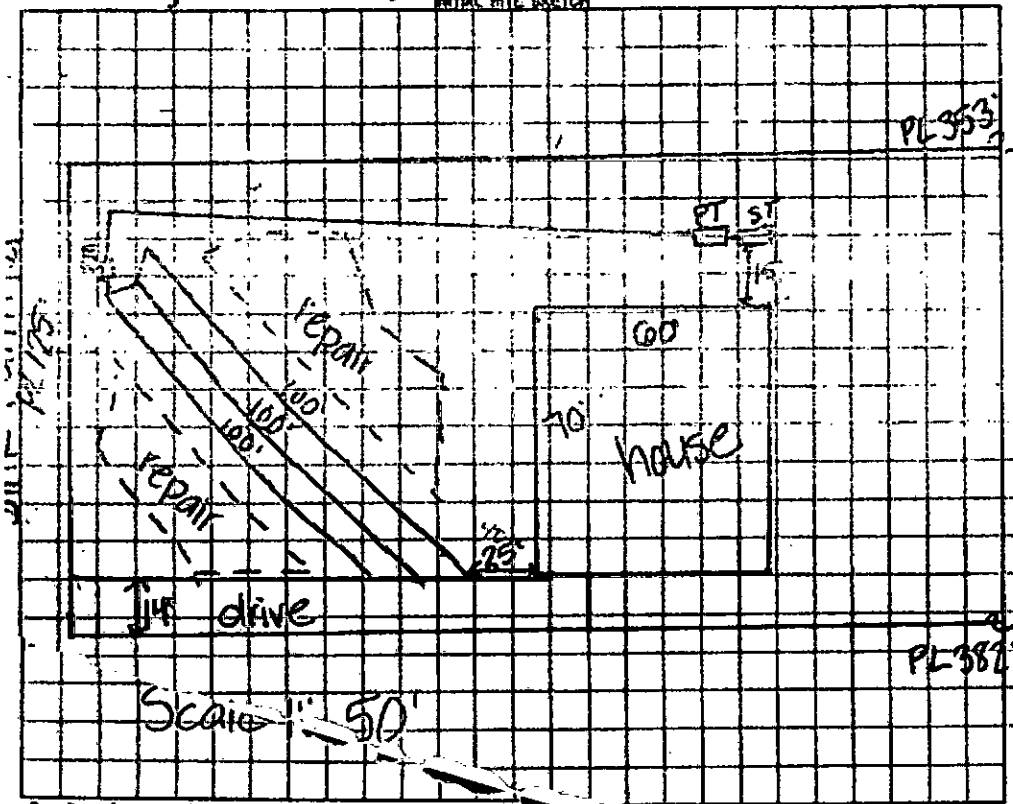
SUBDIVISION: Davidson Downs SECTION: — LOT # 141 LOT AREA: 1.04 ac DESIGN FLOW: 360 gpd L.T.A.R.: .3 (repair .3)

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 (gal) | STB | 760 | Date | 10/10/17 | ☑ New System ☐ Repair ☐ Expansion | System Type: I II III IV V VI | ☑ Residence | No. Bedrooms 3 |
| Pump Tank | 1000 (gal) | PT | 7-93 | Date | 11/27/2017 | System Description: PM 25% reduction | | ☐ Business | No. Persons 6 |
| Pump Make | Zoeller | Model | N-153-C | Serial # | 0.5 horse pump | Repair System Description: LP PPBPS | | ☐ Other | No. Employees — |
| # Nitrification Fields | 1 | # Lines | 3 | Linear Ft. | 300' | Maintenance Agreement Required: ☐ YES ☑ NO | | ☐ Slab | ☑ Crawl Space |
| Trench Width | 36" | Trench Bottom Depth(Low side) | 30" / 36" high | Gravel Depth | — | ☐ GRAVITY ☑ PRESSURE | | ☐ Basement w/ plumbing | ☐ Basement w/o plumbing |

Water Supply: ☐ Private ☐ Public ☑ Community

Comments / Conditions: Drive cannot exceed 14' from property line. Install PM 25% reduction with drain lines on contour.
Tap size: 1½" sch 40
Dosing volume: 136.5 gallons

INITIAL SITE SKETCH




AS BUILT SKETCH

11:30

| | Date | Initials |
|---|---|---|
| Drain Lines Checked | 12/28 | BB |
| Tanks Checked | 12/29 | BB. |
| Pressure Manifold or Valve Box Checked | | |
| Pressure Head Set | | |
| Electrical Checked | | |
| Floats Set | | |
| Alarm Checked | | |
| Maintenance Contract Y / N | | |
| Comments: * Tanks = 1 tank below Circulation Drain | | |

4/4/18 - Alarm float ok [10" above on float]
- on float 11" above off float [≈ 220 Gals/dose] → Raised 3" to 7.5" ≈ 150 gal/dose
- 2' of pressure head set
- Sep. & pump + alarm individual circuits

Permit can be suspended or revoked if any false information is supplied ... permit / any unauthorized changes are made to the site / any unauthorized changes are made to the installation of the system. CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

☐ IMPROVEMENT PERMIT with plat valid without expiration. ☐ ... 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: 8/2/17 Installed by: Russell Williams

IMPROVEMENT PERMIT by: Bradley Wilson Date: 8-1-17 OPERATION PERMIT by: Tom Shuck Date: 4/4/18

AUTHORIZATION TO CONSTRUCT by: Bradley Wilson Date: 8-1-17 Existing System Inspected by: — Date: —

# IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 223851

## SEPTIC IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM M A R D, PIN # 4054754766

APPLICANT/OWNER: Brooks Henderson APPLICANT ADDRESS: PO Box 1409 Cornelius, NC

SITE ADDRESS: 246 Sink Farm Rd Mooresville, NC PHONE: 704-201-1429 ALT. PHONE —

SITE DIRECTIONS: 1155 → L on Presbyterian Rd → R on Sink Farm Rd → lot on R SAP CONTROLLED: ☑ YES ☐ NO

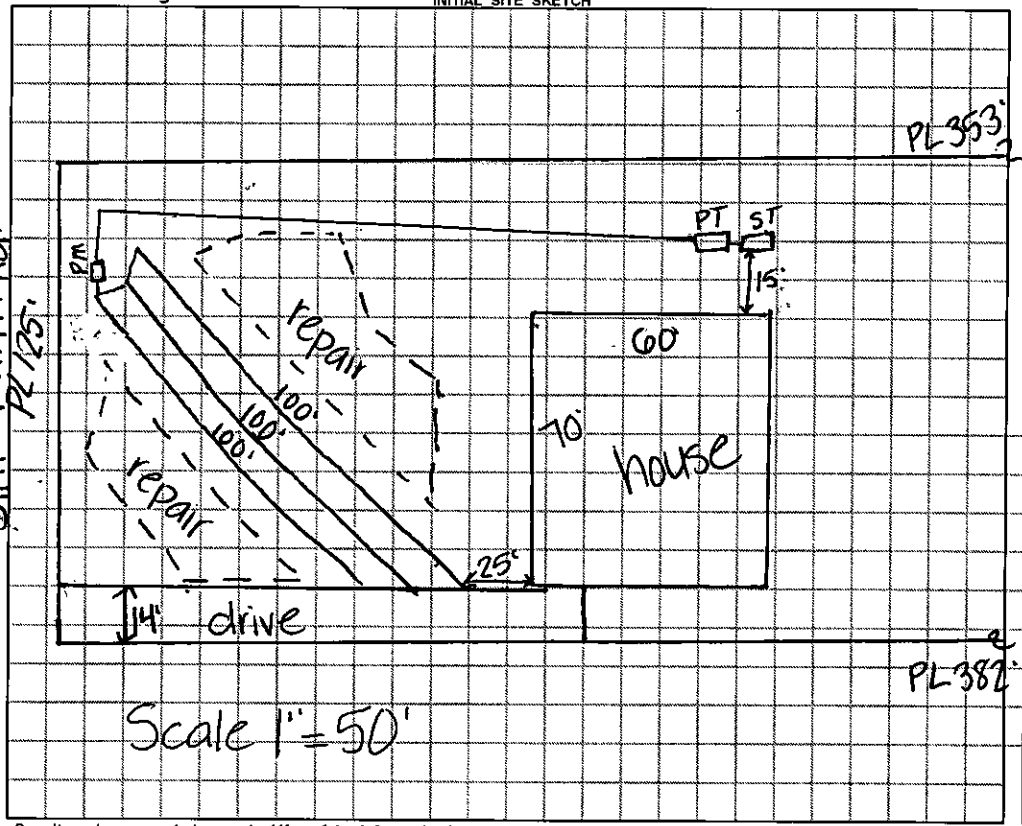
SUBDIVISION: Davidson Downs SECTION: — LOT # 141 LOT AREA: 1.04 ac DESIGN FLOW: 360 gpd L.T.A.R.: .3 (repair .3)

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 | (gal) | STB | | Date | | ☑ New System | ☐ Repair | ☐ Expansion | System Type: I II (III) IV V VI | |
| Pump Tank | 1000 | (gal) | PT | | Date | | System Description: PM 25% reduction | | | | |
| Pump Make | | | Model | | Serial # | | Repair System Description: LP PPBPS | | | | |
| # Nitrification Fields | 1 | | # Lines | 3 | Linear Ft: | 300' | Maintenance Agreement Required: | ☐ YES | ☑ NO | | |
| Trench Width | 36" | | Trench Bottom Depth(Low side) | 30" / 36" higher | Gravel Depth | — | | ☐ GRAVITY | ☑ PRESSURE | | |

| | | | | |
|---|---|---|---|---|
| ☑ Residence | No. Bedrooms | 3 | Water Supply | |
| ☐ Business | No. Persons | 6 | ☐ Private | |
| ☐ Other | No. Employees | | ☐ Public | |
| ☐ Slab | ☑ Crawl Space | | ☑ Community | |
| ☐ Basement w/plumbing | | | ☐ Basement w/o plumbing | |

Comments / Conditions: Drive cannot exceed 14' from property line. Install PM 25% reduction with drain lines on contour.
Tap size: 1/2" sch 40
Dosing volume: 136.5 gallons

INITIAL SITE SKETCH




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: 8/2/17 Installed by: _____

IMPROVEMENT PERMIT by: Angela Wilson Date: 8-1-17 OPERATION PERMIT by: _____

AUTHORIZATION TO CONSTRUCT by: Angela Wilson Date: 8-1-17 Existing System Inspected by: _____

RECEIVED JUL 3 1 2017

# IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

*(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)* Intermediate Relayout

1. APPLICATION FOR: ✓ Improvement Permit ✓ Authorization To Construct ___ Existing System Inspection

**********

2. Page 2: *Site Plan Worksheet* Form MUST Accompany This Application Paid $320.00 # 223851

The following optional attachments may also be submitted: ___Survey Plat, Scaled no more than 1 Inch = 60 Feet

*Place check ( ) beside whichever is submitted if applicable* ___Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

**********

3. **Applicant Information:**

| Applicant Name | Mailing Address | Home Phone # | Alternate Phone # |
|---|---|---|---|
| Brooks Henderson | P.O. Box 1409 Cornelius NC 28031 | | 704-201-1429 |
| Owner Name | Mailing Address | Home Phone # | Alternate Phone # |
| Jarod Sutphin | 113 Painted Turtle Lane | (980)254-2732 | |

**********

4. **Property Information:**

| Street Address | Subdivision Name | Section/Phase and Lot Number |
|---|---|---|
| 246 Sink Farm Rd. | Davidson Downes | Lot 141 |

Driving Directions: 115 South left on Presbyterian Rd. Rt on Sink Farm Rd. Lot on Right

**********

5. **RESIDENTIAL Site Development Information:** *(Check or Complete ALL that apply)*

(✓) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
( ) Repair To Failing Septic System due to _____
( ) Other _____

Maximum Number of Bedrooms 3
Maximum Number of Occupants 4
If Expansion, Current Number of Bedrooms ___

(✓) Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) Basement w/Plumbing?
( ) Basement w/out Plumbing?

IF Non-Residential Site Development: Type of Business _____
Square Footage of Building _____
Maximum Number of Employees _____
Maximum Number of Seats _____

**********

6. **Proposed Water Supply:**

( ) New Well ( ) Existing Well (✓) Community Well ( ) City Water ( ) Other Public Water

**********

7. **Desired Septic System Type:** *(You may rank in order of preference, if any)* ( ) EXISTING SYSTEM installed _____ *Year*

( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other _____

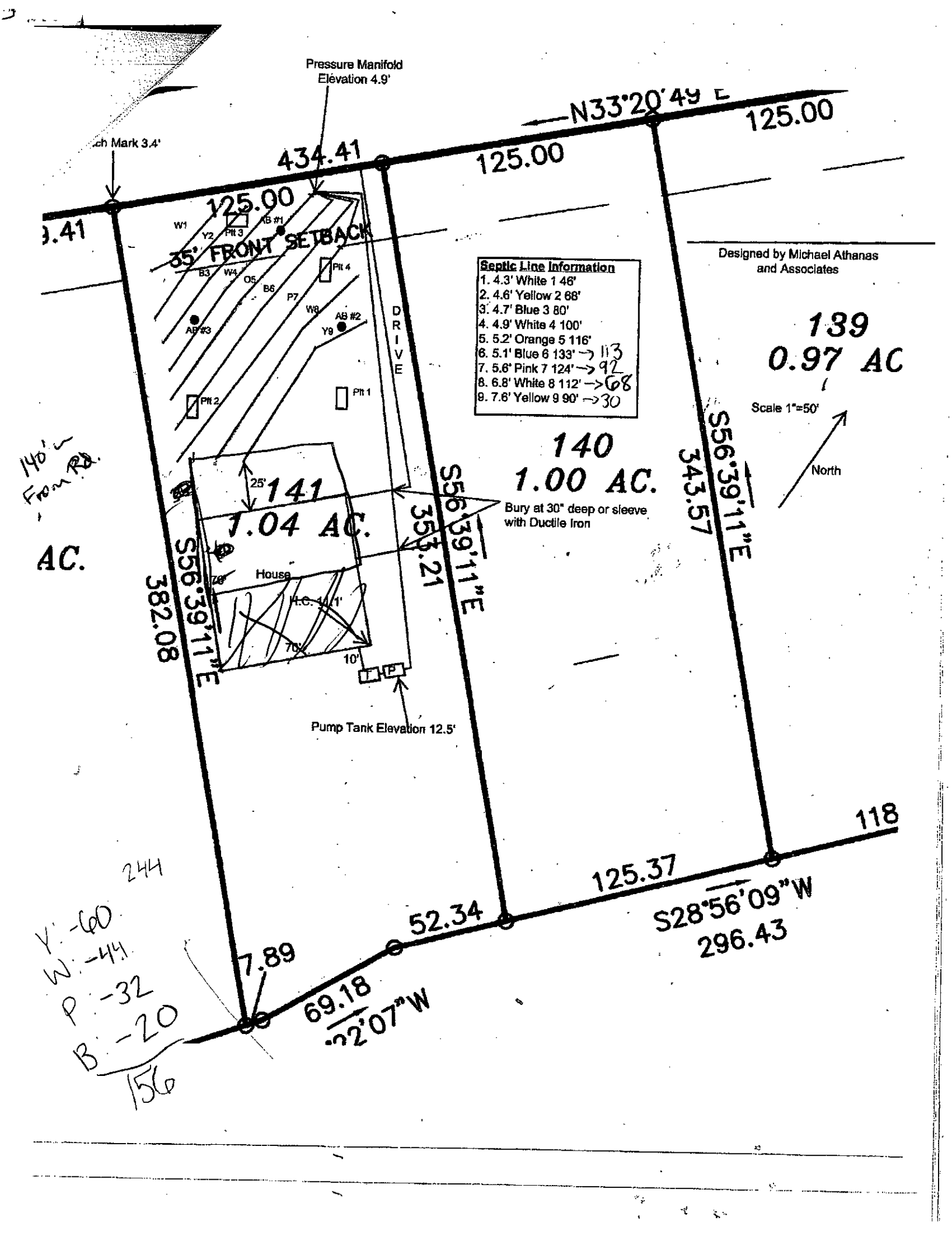
8. **Please Answer The Following** ( ) Yes (✓) No Does the site contain any jurisdictional wetlands?
**To The Best of Your Ability:** ( ) Yes (✓) No Is any non-domestic sewage (i.e. industry) to be generated?
( ) Yes (✓) No Is the site subject to approval by any other public agency?

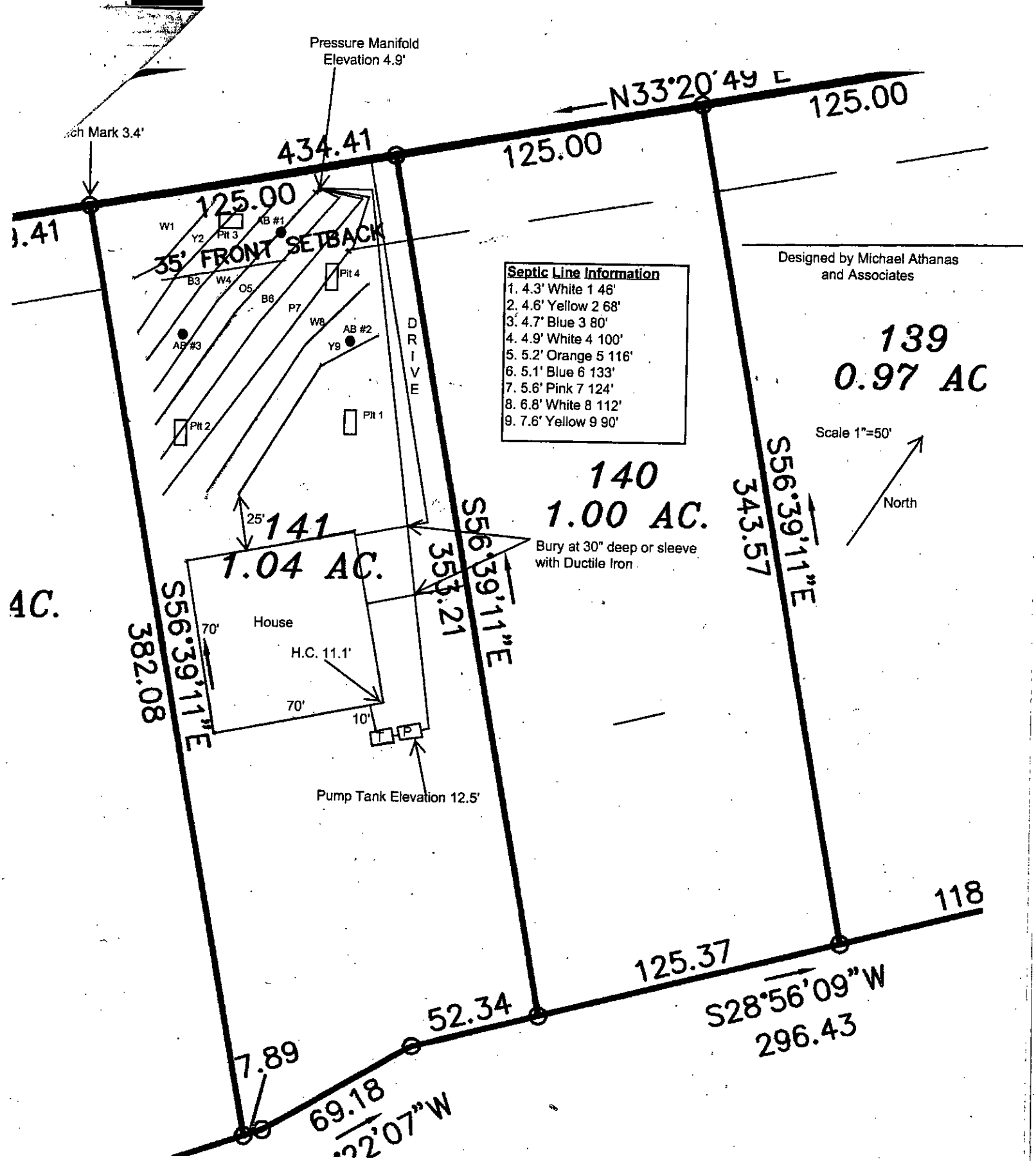
**********

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.

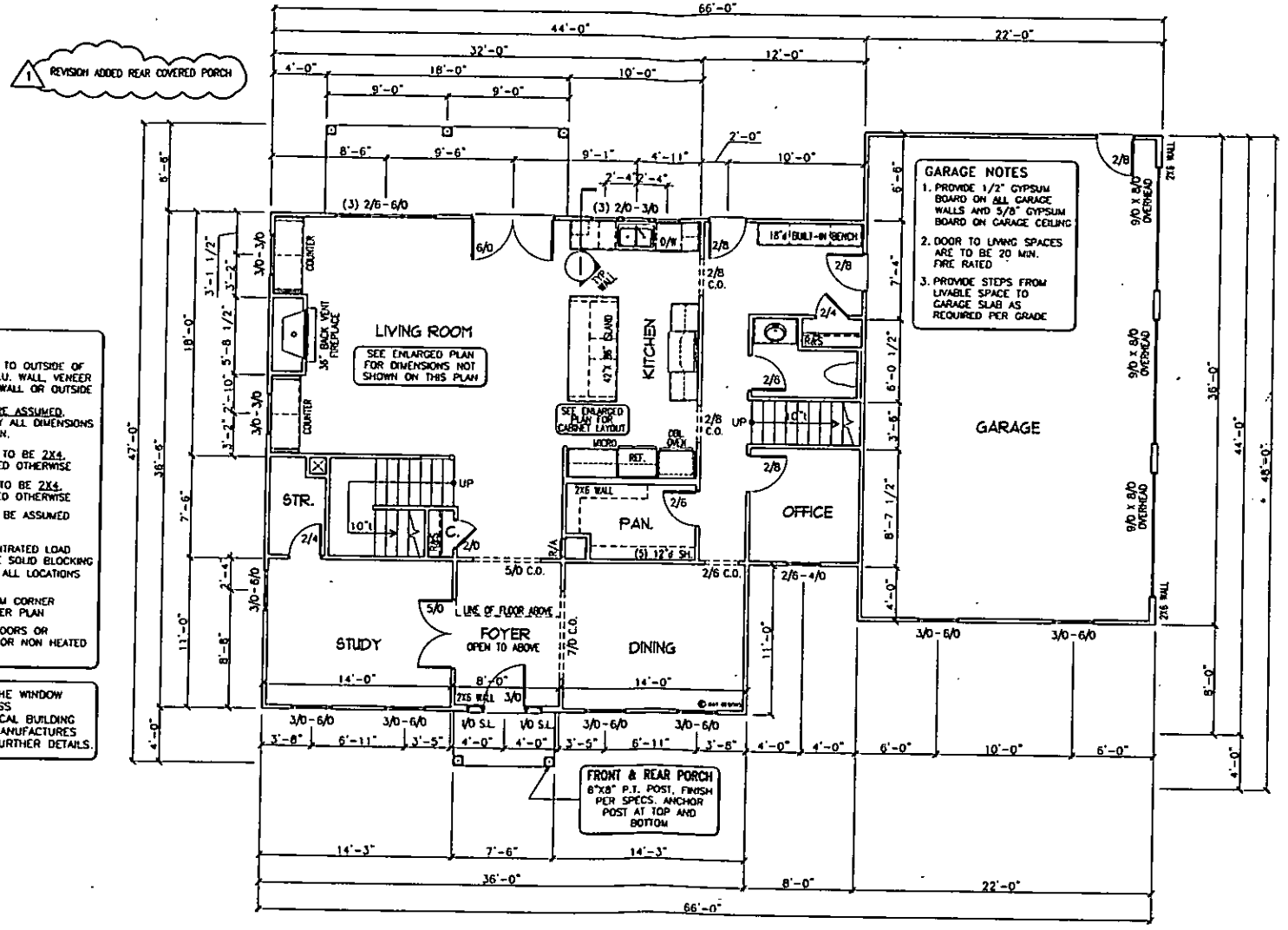
9. **Signature:** _____ 7/31/17

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


Pressure Manifold
Elevation 4.9'
ch Mark 3.4'
434.41
125.00
N33°20'49"E
125.00
125.00
35' FRONT SETBACK
W1
Y2
Plt 3
AB #1
B3
W4
O5
B6
P7
Plt 4
W8
AB #2
Y9
AB #3
Plt 2
Plt 1
DRIVE
Septic Line Information
1. 4.3' White 1 46'
2. 4.6' Yellow 2 68'
3. 4.7' Blue 3 80'
4. 4.9' White 4 100'
5. 5.2' Orange 5 116'
6. 5.1' Blue 6 133' → 113
7. 5.6' Pink 7 124' → 92
8. 6.8' White 8 112' → 68
9. 7.6' Yellow 9 90' → 30
Designed by Michael Athanas and Associates
139
0.97 AC
Scale 1"=50'
North
140
1.00 AC.
Bury at 30" deep or sleeve with Ductile Iron
140' ± From RD.
AC.
25'
141
1.04 AC.
S56°39'11"E
353.21
S56°39'11"E
343.57
S56°39'11"E
382.08
House
F.F. 14.1'
70'
10'
T
P
Pump Tank Elevation 12.5'
118
125.37
S28°56'09"W
296.43
52.34
7.89
69.18
°22'07"W
244
Y: -60
W: -44
P: -32
B: -20
156


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P
Pump Tank Elevation 12.5'
118
125.37
S28°56'09"W
296.43
52.34
7.89
69.18
°2'07"W

ISSUED FOR CONSTRUCTION




PLAN NOTES

1. ALL DIMENSIONS ARE TO OUTSIDE OF CONCRETE WALL, C.M.U. WALL, VENEER OF PIER & CURTAIN WALL OR OUTSIDE FACE OF STUD. NO WALL FINISHES ARE ASSUMED. TYPICAL U.N.O. VERIFY ALL DIMENSIONS BEFORE CONSTRUCTION.
2. EXTERIOR WALLS ARE TO BE 2X4, TYPICAL UNLESS NOTED OTHERWISE
3. INTERIOR WALLS ARE TO BE 2X4, TYPICAL UNLESS NOTED OTHERWISE
4. ANGLES IN WALLS TO BE ASSUMED 45°, TYP. U.N.O.
5. ■ INDICATES CONCENTRATED LOAD FROM ABOVE. PROVIDE SOLID BLOCKING (JOIST OR STUDS) AT ALL LOCATIONS FOR LOAD TRANSFER
6. PLACE DOORS 5" FROM CORNER WHERE APPLICABLE, PER PLAN
7. WEATHER STRIP ALL DOORS OR OPENINGS INTO ATTIC OR NON HEATED SPACES

E INDICATES THAT THE WINDOW MUST MEET EGRESS REQUIREMENTS PER LOCAL BUILDING CODES. SEE WINDOW MANUFACTURES DESIGN MANUAL FOR FURTHER DETAILS.

D&T DESIGNS

© COPYRIGHT 2017

Sutphin Residence
SINK FARM ROAD ◆ MOORESVILLE, NC

MAIN LEVEL PLAN

| SQUARE FOOTAGE | |
|---|---|
| MAIN LEVEL | 1,275 S.F. |
| UPPER LEVEL | 1,193 S.F. |
| BONUS LEVEL | 483 S.F. |
| GARAGE | 784 S.F. |
| FRONT PORCH | 30 S.F. |
| REAR PORCH | 117 S.F. |
| TOTAL HEATED - | 3,201 S.F. |

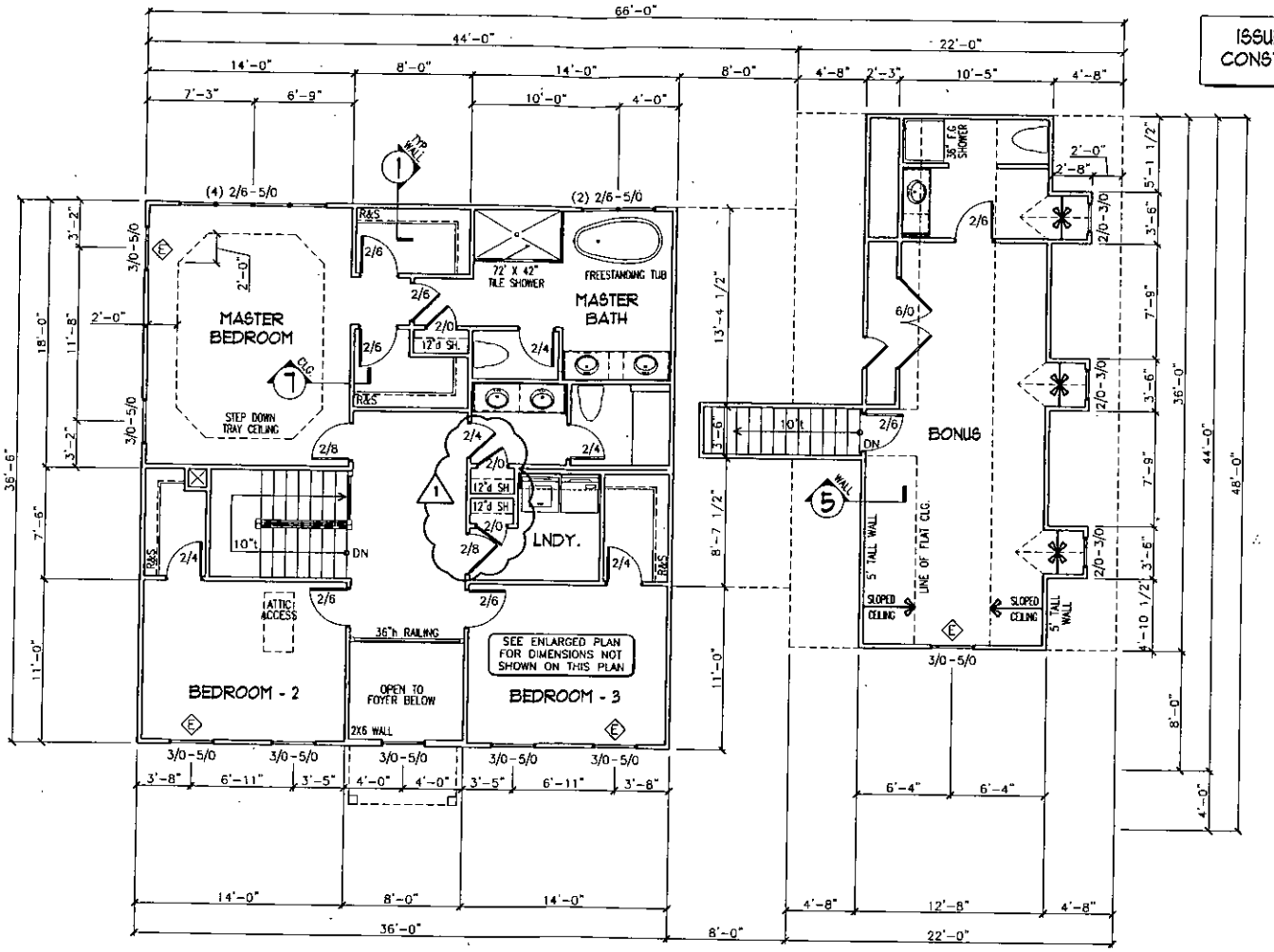
DRAWN BY: DOUG GAITHER
DESIGN NO: R-2017-115
SCALE: 1/8" = 1'-0"
BASE PLAN:
REVISION: 06/28/17 MANAGER
DATE DRAWN: 05/16/17

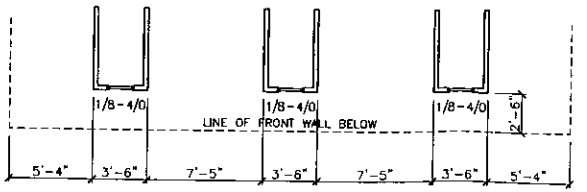
B2.2

~~Acknowledgement of~~
Plans Submittal ONLY!

Date 7/31/17
Date 8-1-17

ISSUED FOR CONSTRUCTION




DORMER PLAN

## PLAN NOTES

1. ALL DIMENSIONS ARE TO OUTSIDE OF CONCRETE WALL, C.M.U. WALL, VENEER OF PIER & CURTAIN WALL OR OUTSIDE FACE OF STUD
   NO WALL FINISHES ARE ASSUMED.
   TYPICAL U.N.O. VERIFY ALL DIMENSIONS BEFORE CONSTRUCTION.
2. EXTERIOR WALLS ARE TO BE 2X4, TYPICAL UNLESS NOTED OTHERWISE
3. INTERIOR WALLS ARE TO BE 2X4, TYPICAL UNLESS NOTED OTHERWISE
4. ANGLES IN WALLS TO BE ASSUMED 45°, TYP. U.N.O.
5. ■ INDICATES CONCENTRATED LOAD FROM ABOVE. PROVIDE SOLID BLOCKING (JOIST OR STUDS) AT ALL LOCATIONS FOR LOAD TRANSFER
6. PLACE DOORS 5" FROM CORNER WHERE APPLICABLE, PER PLAN
7. WEATHER STRIP ALL DOORS OR OPENINGS INTO ATTIC OR NON HEATED SPACES

Ⓔ INDICATES THAT THE WINDOW MUST MEET EGRESS REQUIREMENTS PER LOCAL BUILDING CODES. SEE WINDOW MANUFACTURES DESIGN MANUAL FOR FURTHER DETAILS.

## Acknowledgement of Plans Submittal ONLY!

Date 7/31/17

Date 8-1-17

D&T DESIGNS

© COPYRIGHT 2017

# Sutphin Residence

SINK FARM ROAD ◆ MOORESVILLE, NC

## UPPER LEVEL PLAN

| SQUARE FOOTAGE | |
|---|---|
| MAIN LEVEL | 1,525 S.F. |
| UPPER LEVEL | 1,193 S.F. |
| BONUS LEVEL | 483 S.F. |
| GARAGE | 784 S.F. |
| FRONT PORCH | 30 S.F. |
| REAR PORCH | 117 S.F. |
| TOTAL HEATED = | 3,201 S.F. |

DRAWN BY: DOUG GAITHER
DESIGN NO: R-2017-115
SCALE: 1/8" = 1'-0"
BASE PLAN:
REVISION: 06/28/17 MANAGER
DATE DRAWN: 05/16/17

B2.5

# 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, Jarod Sutphin & Jessie Sutphin am the legal owner(s) of the property located at Lot [redacted] 141 Sink Farm Rd Mooresville, NC 28115, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina. QS

I do hereby authorize (**print legal representative/company name**) Brooks Henderson/ Henderson Building Group, 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) 7/28/17 Date

Signature of Witness 7/28/17 Date

7/28/17

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

# IREDELL COUNTY HEALTH DEPARTMENT

203851

*ENVIRONMENTAL HEALTH DIVISION*

Pd $500 3-16-17 Pd $350 2/28/17

**PAGE 1: *APPLICATION FORM***

**Application For:**

(X) Septic Improvement Permit ( ) New Well Permit ( ) Authorization to Construct ( ) Well Repair Permit ( ) Existing System Inspection ( ) Well Abandonment ( ) 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* ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

**Applicant Information:**

Chris ~~Ricky~~ 980

**Applicant Name:** Davidson Downs LLC **Address:** 4542 Ivy Run Ln. Denver NC 28037 **Phone:** 297-2787

**Owner Name:** Same **Address:** _____ **Phone:** _____

**Property Information:**

**Street Address:** 246 Sink Farm Rd

**Subdivision Name:** Davidson Downs **Section/Phase:** _____ **Lot Number:** 141

**Driving Directions:** 115, TL Presbyterian, TR Sink Farm

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

(X) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

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

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

**Non-Residential Site Development:**

**Type of Business:** _____
**Square Footage of Building:** _____
**Maximum Number of Employee:** _____
**Maximum Number of Seats/Beds/Other:** _____

**Water Supply:**

( ) New Well ( ) Existing Well (X) 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 (X) Other: Accepted

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

2/28/2017
DATE

DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION


PROPERTY ID #: Lot 141 Davidson Downs; Sink Farm Road
COUNTY: Iredell

# SOIL/SITE EVALUATION
## *for* ON-SITE WASTEWATER SYSTEM

OWNER: Ray Development LLC
ADDRESS: _____
PROPOSED FACILITY: 4-Bedroom Residence PROPOSED DESIGN FLOW (.1949): 480 GPD
LOCATION OF SITE: Lot 141 Davidson Downs; Sink Farm Road

APPLICATION DATE: _____
DATE EVALUATED: 12/2016
PROPERTY SIZE: 1.04 Acres
PROPERTY RECORDED: Not Recorded

WATER SUPPLY: Private Ξ Public □Well Spring Other: _____
EVALUATION METHOD: Ξ Auger Boring Ξ Pit Cut TYPE OF WASTEWATER: Ξ 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 | |
| AB 1 | LS 3-4% | 0"-36" | R C SBK | SS SP FR SEXP | | 36" | Few to common Saporlite Inclusions 0"-36" PS | | 0.3 |
| | | 36"-48" | V L Saprolite M | NS NP VFR NEXP | | | | | |
| AB 2 | LS 3-4% | 0"-24" | R C SBK | SS SP FR SEXP | | 36" | Few to common Saporlite Inclusions 24"-36" PS | None | 0.3 |
| | | 24"-36" | R CL WSBK | SS SP FR SEXP | | | | | |
| | | 36"-48" | V L Saprolite M | NS NP VFR NEXP | | | | | |
| AB 3 | LS 3-4% | 0"-18" | Br SCL WSBK | SS SP FR SEXP | | 34" | Few to common Saporlite Inclusions 27"-40" PS | None Hit a floater rock at 34" | 0.3 |
| | | 18"-24" | R SCL WSBK | SS SP FR SEXP | | | | | |
| | | 24"-34" | R C SBK | SS SP FR SEXP | | | | | |
| Pit 1 | LS 3-4% | 0"-30" | R C WSBK | SS SP FR SEXP | | 48" | Few Saporlite Inclusions 24"-30" | None | 0.3-0.4 |
| | | 30"-62" | V SL Saprolite M | NS NP VFR NEXP | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | 1200 ft2 | 1188 ft2 |
| System Type(s) | 25% Reduction | PPBPS |
| Site LTAR | .3 | .3 |

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____

EVALUATED BY: Michael Athanas and Associates
OTHER(S) PRESENT: _____

COMMENTS: _____

# SOIL/SITE EVALUATION

*(Continuation Sheet)*



DEPARTMENT OF ENVIRONMENT
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

PROPERTY ID #: Lot 141 Davidson Downs; Sink Farm Road
DATE OF EVALUATION: 12/2016
COUNTY: Iredell

| 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 | OTHER PROFILE FACTORS .1943 SOIL DEPTH | OTHER PROFILE FACTORS .1956 SAPRO CLASS | OTHER PROFILE FACTORS .1944 RESTR HORIZ | PROFILE CLASS & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| Pit 2 | LS 3-4% | 0"-16" | Br SCL WSBK | SS SP FR SEXP | | 63" | Few Saporlite Inclusions 44"-63" | None | 0.3+ |
| | | 16"-44" | R C SBK | SS SP FR SEXP | | | | | |
| | | 44"-63" | R CL WSBK | SS SP FR SEXP | | | | | |
| | | | | | | | | | |
| Pit 3 | LS 3-4% | 0"-8" | Br SCL WSBK | SS SP FR SEXP | | 38" | Few Saporlite Inclusions 31"-38" PS | None | 0.3 |
| | | 8"-38" | R C SBK | SS SP FR SEXP | | | | | |
| | | 38"-63" | V SL Saprolite M | NS NP VFR NEXP | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Pit 4 | LS 3-4% | 0"-8" | Br SCL WSBK | SS SP FR SEXP | | 40" | PS w/ few clay inclusions. | None | 0.3 |
| | | 8"-40" | R C SBK | SS SP FR SEXP | | | | | |
| | | 40"-65" | V SL/L Saprolite M | NS NP VFR NEXP | | | | | |
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COMMENTS:

Public Health

# IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public 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, Chris Mozely, am the legal owner(s) of the property located at 246 Sink Farm Rd Davidson Downs Lot 141, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize **(print legal representative/company name)** Michael Athanas + Associates, 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) | Date | Signature of Witness | Date |
|---|---|---|---|
| [signature] | 12-29-16 | | |

Please return this signed form to the appropriate office:

**Mooresville - Environmental Health**

Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

**Statesville - Environmental Health**

Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

# IREDELL COUNTY

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

| APPLICATION NUMBER |
|---|
| 223851 |
| Issue Date: 12/15/2016 |

## ZONING PERMIT

| Parcel Number | Street Address | Jurisdiction |
|---|---|---|
| 4654754941.000 | 246 SINK FARM ROAD, MOORESVILLE, NC 28115 | |

| Owner Information | Applicant Information |
|---|---|
| Owner: RAY DEVELOPMENT LLC | Applicant: RAY DEVELOPMENT LLC |
| Address: C/O R C MOZELEY<br>4542 IVY RUN LN<br>DENVER, NC 28037 | Address: C/O R C MOZELEY<br>4542 IVY RUN LN<br>DENVER, NC 28037 |
| Phone: | Phone: |

| Use Requested | Zone Code |
|---|---|
| SFD | |

| Lot Acreage | F Setback | B Setback | L Setback | R Setback | Watershed | Flood Zone |
|---|---|---|---|---|---|---|
| | 35.00 | 35.00 | 15.00 | 15.00 | NOT | 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: _____

| Permit Number | 88407 | TOTAL FEES: | $ 77.25 |
|---|---|---|---|

Type: CONSOLIDATED REAL PROPERTY
Recorded: 6/2/2017 2:02:40 PM
Fee Amt: $192.00 Page 1 of 3
Revenue Tax: $166.00
Iredell County, NC
Ronald N. Wyatt Register of Deeds

**BK 2493 PG 337 - 339**

Excise Tax **$ 166.00**

Recording Time, Book and Page

Tax Lot No. _____ Parcel Identifier No. 4654-75-4766-0000
Verified by _____ County on the ____ day of _____, 2017

Mail after recording to: Grantee at Address Below
This instrument was prepared by **Lutzel, Broadway & Associates, PC, 542 Williamson Road, Suite A, Mooresville, NC 28117**

| Brief Description for the index | Lot 141 of Davidson Downes, Phase III Subdivision: Iredell County |
|---|---|

## NORTH CAROLINA GENERAL WARRANTY DEED

THIS DEED made this 2nd day of JUNE, 2017, by and between:

| GRANTOR | GRANTEE |
|---|---|
| **Ray Development, LLC**<br>**A North Carolina**<br>**Limited Liability Company** | **Jarod Ray Sutphin**<br>**And Spouse,**<br>**Jessie Nichole Sutphin** |
| **Seller(s) Forwarding Address:**<br>4542 Ivy Run Lane<br>Denver, NC 28037 | **Property Address:**<br>Lot 141 Sink Farm Road<br>Mooresville, NC 28115 |

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

Submitted electronically by "Lutzel Broadway & Associates PC"
in compliance with North Carolina statutes governing recordable documents
and the terms of the submitter agreement with the Iredell County Register of Deeds.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated in the County of Iredell, State of North Carolina and more particularly described as follows:

**BEING all of Lot 141 of Davidson Downes, Phase III Subdivision, as same is platted, planned and recorded in Plat Book 66, at Page 94 in the Office of the Register of Deeds for Iredell County.**

Subject to the Declaration of Covenants, Conditions and restrictions for Davidson Downes, Phase III as recorded in Book 2490, at Page 2330 in the Office of the Register of Deeds for Iredell County.

All or a portion of this property herein conveyed ____ includes or X **does not** include the primary residence of a Grantor.

A map showing the above described property is recorded in **Plat Cabinet/Map 66 at File/Cabinet/Page 94.**

BEING the identical property acquired by the Grantor(s) by instrument recorded in Book 2490 at Page 2330-2340 in the Iredell County Public Registry, North Carolina.

TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the Grantee in fee simple.

And the Grantor covenants with the Grantee, that Grantor is seized of the premises in fee simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever, except for the exceptions hereinafter stated.

Title to the property hereinabove described is subject to the following exceptions:

Enforceable easements, restrictions and rights of way of record.
Current Year Ad Valorem Taxes
All matters revealed by an accurate survey of the property

**IN WITNESS WHEREOF,** the Grantor has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, the day and year first above written.

**GRANTOR(S):**

**Ray Development, LLC**
**A North Carolina**
**Limited Liability Company**

X _____(SEAL)
By: R CHRISTOPHER MOZELEY JR.,
Member Manager

X _____(SEAL)
By: ANN MOZELEY GOODE
Member Manager

STATE OF North Carolina
COUNTY OF Iredell

I, Richard J. Wtzel, a Notary Public of the State of NC, County of Mecklenburg certify that Ray C Mozeley Jr and Ann Mozeley Goode, Member Managers (Title) for RAY DEVELOPMENT LLC, A North Carolina Limited Liability Company personally came before me this day and acknowledged that he/she is Member Managers (Title), and being authorized to do so, executed this foregoing instrument for the purposed therein expressed for and in behalf of RAY DEVELOPMENT LLC. The Signatory acknowledged to me that he voluntarily signed the foregoing document for the purpose stated therein and in the capacity indicated. I certify that the Signatory personally appeared before me this day, and I have personal knowledge of the identity of the Signatory.

Witness my hand and official stamp or seal, this 2 day of JUNE, 2017

_____
Notary Public
My commission expires: 6/22/21

RICHARD J. WTZEL
Notary Public
Mecklenburg
County
NORTH CAROLINA