ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP 239832

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

PIN # 4654 --76 --3375

APPLICANT/OWNER: Mark Morgan / Scott Prowler | APPLICANT ADDRESS: PO Box 1801, Denver NC 28037

SITE ADDRESS: 121 Castleview Ln, Mooresville, NC 28115 | PHONE: 704-582-3818 | ALT. PHONE 704-517-3140

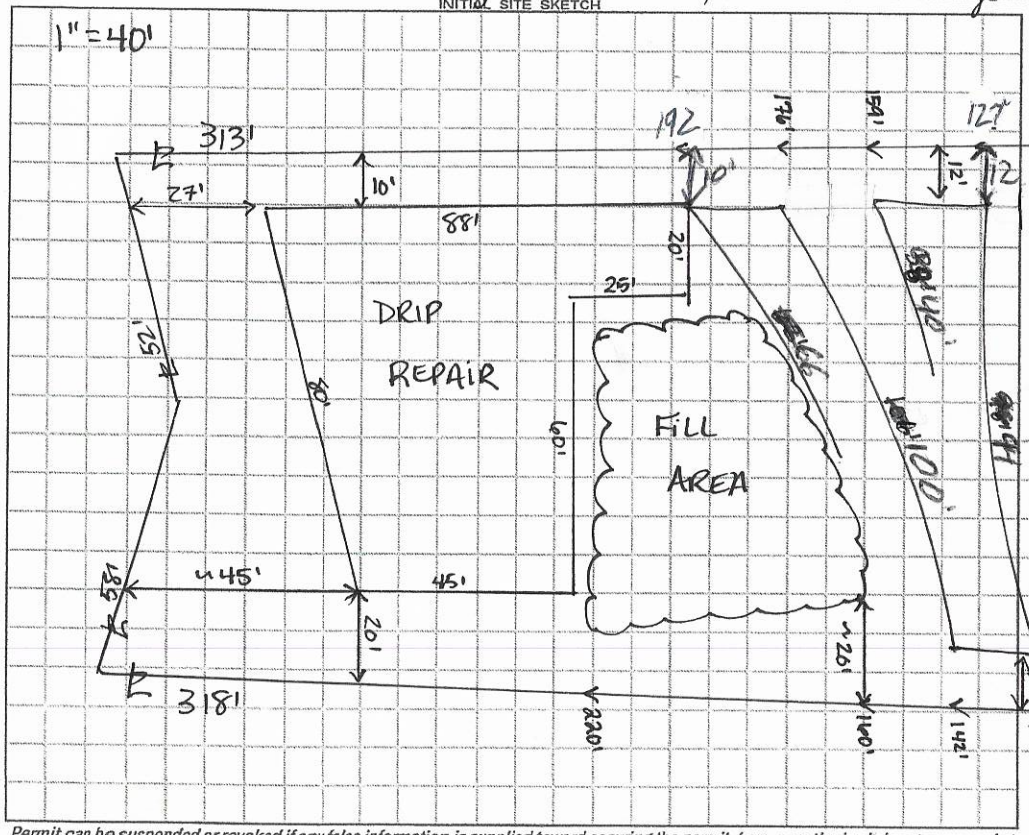
SITE DIRECTIONS: (S) NC 115 → (L) Presbyterian → (R) Sink Farm → (R) Manorly → (L) Castleview → lot on (L)

SUBDIVISION: Davidson Downes | SECTION: 4 | LOT# 149 | LOT AREA: 0.82 ac | SAP CONTROLLED: ☐ YES ☒ NO | DESIGN FLOW: 480 gpd | L.T.A.R.: 0.25(I) / 0.125(R)

Septic Tank	1000 (gal)	STB 760	Date 3/19	☒ 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: Drip		☐ Other	No. Employees	☐ Public
# Nitrification Fields	1	# Lines 7	Linear Ft 480'	Maintenance Agreement Required: ☐ YES ☒ NO		☐ Slab	☐ Crawl Space	☐ Community
Trench Width	36"	Trench Bottom Depth (redacted)	36" max	Gravel Depth N/A	☒ GRAVITY ☐ PRESSURE	☐ Basement w/plumbing		☐ Basement w/o plumbing

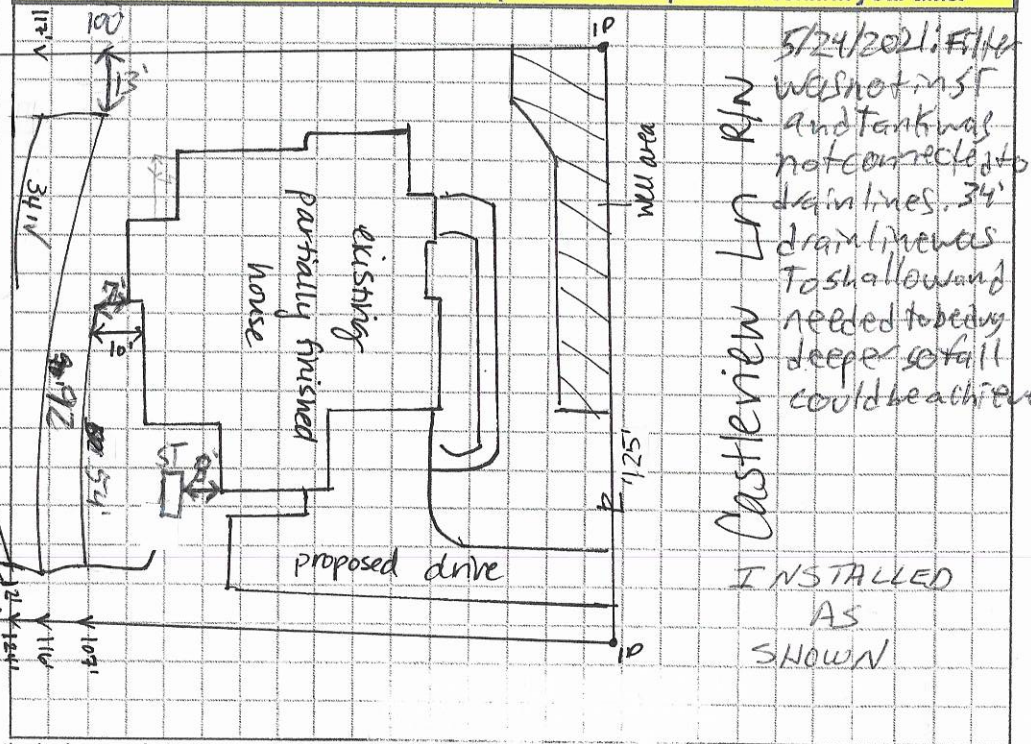
Comments / Conditions: Do not park, pave, grade, drive, or bury utilities in drainfield. Install on contour of land, use serial distribution. Keep lines 5' off deck, NO FOUNDATION DRAINS along back of house, divert all drainage away from system. Purpose of this permit is to change from a LPP33PS system to 25% reduction graivty.

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.



5/24/2021: Filter washer inst and tanks not connected to drainlines. 34' drainlines to shallow and needed to be deeper so all could be achieved

INSTALLED AS SHOWN

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 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 stated on IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: K. M. Morgan Date: 5/4/21

IMPROVEMENT PERMIT by: D. Wieberg Date:

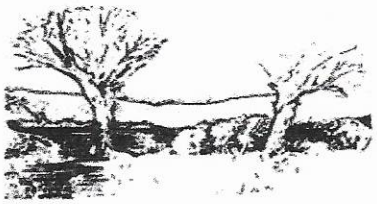
AUTHORIZATION TO CONSTRUCT by: D. Wieberg Date:

Installed by: Craig Thompson Grading

OPERATION PERMIT by: Bryant C. White Jr Date: 5-25-2021

Existing System Inspected by: Date:

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



MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887
4/13/2020

Approved
4/30/2020
MD

Reference: Data Sheet for 121 Castleview Dr, Davidson Downs Lot 149
House Footprint: See attached plan
Building Setbacks: 35' front/rear, 15' side
Water Source: Private well
Number of Bedrooms/Daily Flow: 4/480 GPD
Proposed LTAR: 0.25 GPD/FT^2 (initial), 0.125 GPD/FT^2 (repair)
Proposed System Type: PPBPS
Proposed Repair System Type: Drip dispersal
Distribution: Low Pressure-CVB
Flow per Orifice: 0.41 GPM
Orifice Size: 5/32"
System Flow: 30.8 GPM
Dosing Volume: 270 gallons
Pump Run Time: 8.8 minutes
Elevation Head: 9.7'
Friction Head: 0.5'
Pressure Head: 2'
Total Dynamic Head: 12.2'
Supply Line Length: 20' of 2" PVC
Septic/Pump Tank Size: 1000/1000 gallons
Proposed Trench Bottom: 36" (initial), 6" (repair)
Proposed Trench Width: 24" (8' on center)



Line	Design Length	# of Panels	Actual Length	Elevation
Orange 1	90'	21	90'	3.6'
White 2	90'	21	90'	5.7'
Pink 3	85'	20	85'	7.6'
Orange 4	55	13	55'	9.1'

Initial System: 320' **Repair System:** 4500+ FT^2
Pump Tank: 8.3' **House Corner:** 2.2' **Benchmark:** 3.2'

Comments:
The grader on the neighboring lot pushed fill onto the approved septic area. MA&A have redesigned the system.

PROPERTY ID #: 4654763375
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Approved
4/30/2020

OWNER: Ray Development LLC
ADDRESS: Denver, NC 28037
PROPOSED FACILITY: 4 BDRM PROPOSED DESIGN FLOW (.1949): 480 GPD
LOCATION OF SITE: 121 Castleview Dr, Davidson Downs Lot 149
WATER SUPPLY: X Private ☐ Public X Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring X Pit ☐ Cut

APPLICATION DATE
DATE EVALUATED: 4/2020
PROPERTY SIZE: 0.82 AC
PROPERTY RECORDED:
TYPE OF WASTEWATER: X 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	
PIT 1	LS 5%	0-9	Br CL WSBK	FR SS SP SXP	Few YB Mn	48"	N/A	N/A	PS 0.25
		9-30	R C SBK	FR SS SP SXP					
		30-48	R CL WSBK	FR SS SP SXP					
PIT 2	LS 5%	0-10	Br SCL WSBK	FR SS SP SXP	Com Mn	48"	N/A	N/A	PS 0.25
		10-24	R C SBK	FR SS SP SXP					
		24-48	R CL WSBK	FR SS SP SXP					
PIT 3	LS 9%	0-12	Br CL WSBK	FR SS SP SXP	Mn	56"	N/A	N/A	PS 0.25
		12-24	R C SBK	FR SS SP SXP					
		24-56	R CL WSBK	FR SS SP SXP					
		56-62	VER SL SAP M	FR SS SP SXP					
PIT 4	LS 5%	0-3/12	FILL (VARIES)		N/A	31"	F-C SAP PS	N/A	PS 0.3+
		3/12-31	R CL WSBK	FR SS SP SXP					
		31-56	VER SL SAP M	VFR SS SP SXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	640 FT^2	4540 FT^2
System Type(s)	PPBPS	DRIP
Site LTAR	0.25	0.125

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: MA&A
OTHER(S) PRESENT:

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet)

PROPERTY ID #: 4654763375

DATE OF EVALUATION: Approved 4/30/2020

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 5	LS 6%	0-6	Br CL WSBK	FR SS SP SXP	N/A	43"	F-C SAP PS	N/A	PS 0.3
		6-24	R C SBK	FR SS SP SXP					
		24-43	R CL WSBK	FR SS SP SXP					
		43-62	VER SL SAP M	FR SS SP SXP					
PIT 6	LS 8%	0-4	Br SCL WSBK	FR SS SP SXP	Few YB CHR 2 @ 22"	22"	N/A	N/A	DRIP 0.125
		4-22	R C SBK	FR SS SP SXP					
PIT 7	LS 6%	0-36	FILL						US
PIT 8	LS 6%	0-32	FILL						US
PIT 9	LS 6%	0-8/17	FILL (VARIES)		Mn/YB	48"	SAP INC @ 34"		Prefer not to use
		8/17-48	R C SBK	FR SS SP SXP					

COMMENTS:

PROPERTY ID #: _____
COUNTY: _Iredell____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

APPROVED NOV 29 2018 KW

OWNER: Ray Development
ADDRESS: Denver, NC
PROPOSED FACILITY: _4 bdrm_____ PROPOSED DESIGN FLOW (.1949): _480 GPD___
LOCATION OF SITE: Davidson Downs Lot 149
WATER SUPPLY: Ξ Private ☐ Public Ξ Well ☐ Spring ☐ Other
EVALUATION METHOD: Ξ Auger Boring Ξ Pit ☐ Cut

APPLICATION DATE_____
DATE EVALUATED: _____
PROPERTY SIZE: ____0.67 AC_____
PROPERTY RECORDED: _____

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	
PIT 1	LS 8%	0-8	Br SCL WSBK	FR SS SP SXP	Mn, YB	60"	N/A	N/A	PS 0.25
		8-60	R C SBK	FR SS SP SXP					
PIT 2	LS 6%	0-5	Br SCL WSBK	FR SS SP SXP	CHR 2 @ 46"	46"	N/A	N/A	PS 0.25
		5-30	YR C SBK	FR SS SP SXP					
		30-46	RY SCL WSBK	FR SS SP SXP					
PIT 3	LS 6%	0-8	Br CL WSBK	FR SS SP SXP	N/A	45"	C-M SAP PS	N/A	PS 0.3
		8-29	R C SBK	FR SS SP SXP					
		29-45	R CL WSBK	FR SS SP SXP					
		45-54	VER SL SAP M	FR SS SP SXP					
PIT 4	LS 8%	0-4	Br CL WSBK	FR SS SP SXP	N/A	57"	C-M SAP PS	N/A	PS 0.3
		4-20	R C SBK	FR SS SP SXP					
		20-38	R CL WSBK	FR SS SP SXP					
		38-58	VER SL SAP M	FR SS SP SXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	960 FT^2	3840+ FT^2
System Type(s)	PPBPS	DRIP
Site LTAR	0.25	0.125

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

EVALUATED BY: _____MA&A_____
OTHER(S) PRESENT: _____

COMMENTS: _____

SOIL/SITE EVALUATION

(Continuation Sheet)

PROPERTY ID #: _DD 149_____
DATE OF EVALUATION: _____
COUNTY: _IREDELL_____

APPROVED NOV 29 2018 KW

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
AB 31	LS 8%	0-6	Br CL WSBK	FR SS SP SXP	N/A	33"	F-C SAP	N/A	PS 0.3
		6-40	R C WSBK	FR SS SP SXP					
		40-48	R CL WSBK	FR SS SP SXP					

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

Sheet 1 of 1
PROPERTY ID #: 4654963375
COUNTY: Iredell

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

OWNER: Scott Prowler
ADDRESS: 121 Castleview Mooresville NC 28115
PROPOSED FACILITY: 4BR
PROPOSED DESIGN FLOW (.1949): 480 gpd
LOCATION OF SITE: 121 Castleview Mooresville 28115
APPLICATION DATE 3/23/21
DATE EVALUATED: 4/21/21
PROPERTY SIZE: 0.82
PROPERTY RECORDED: yes

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	LS 8%	0-23	FILL - sandy/mixed horizon		Heavy Mn, wetter in 38-48" Light brown mottling in 23-38	48"	N/A	N/A	PS 0.25
		23-38	C/CL - SBK	SSSP-F/FR-SLSP					
		38-48	CL - SBK	SSSP-FR-SLSP					
2									
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	480'	See initial
System Type(s)	25% red	eval
Site LTAR	0.25	

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: D. McBerry
OTHER(S) PRESENT: M. Morgan

COMMENTS: Change from 50%, LP to 25% red gravity

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope) CV (Convex Slope) D (Drainage Way) DS (Debris Slump) FP (Flood Plain) FS (Foot Slope) H (Head Slope) L (Linear Slope) N (Nose Slope) R (Ridge) S (Shoulder Slope) T (Terrace)	I	S (Sand) LS (Loamy Sand)	1.2 - 0.8	0.6 - 0.4	SEXP (Slightly Expansive) EXP (Expansive)	G (Single Grain) M (Massive) CR (Crumb) GR (Granular) SBK (Subangular Blocky) ABK (Angular Blocky) PL (Platy) PR (Prismatic)
	II	SL (Sandy Loam) L (Loam)	0.8 - 0.6	0.4 - 0.3		
	III	Si (Silt) SiCL (Silty Clay Loam) CL (Clay Loam) SCL (Sandy Clay Loam) SiL (Silt Loam)	0.6 - 0.3	0.3 - 0.15		
	IV	SC (Sandy Clay) SiC (Silty Clay) C (Clay)	0.4 - 0.1	0.2 - 0.05		
		O (Organic)	None	None		

MOIST	WET
VFR (Very Friable)	NS (Non-sticky)
FR (Friable)	SS (Slightly Sticky)
FI (Firm)	S (Sticky)
VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
EFI (Extremely Firm)	NP (Non-plastic)
	SP (Slightly Plastic)
	P (Plastic)
	VP (Very Plastic)

*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

NOTES

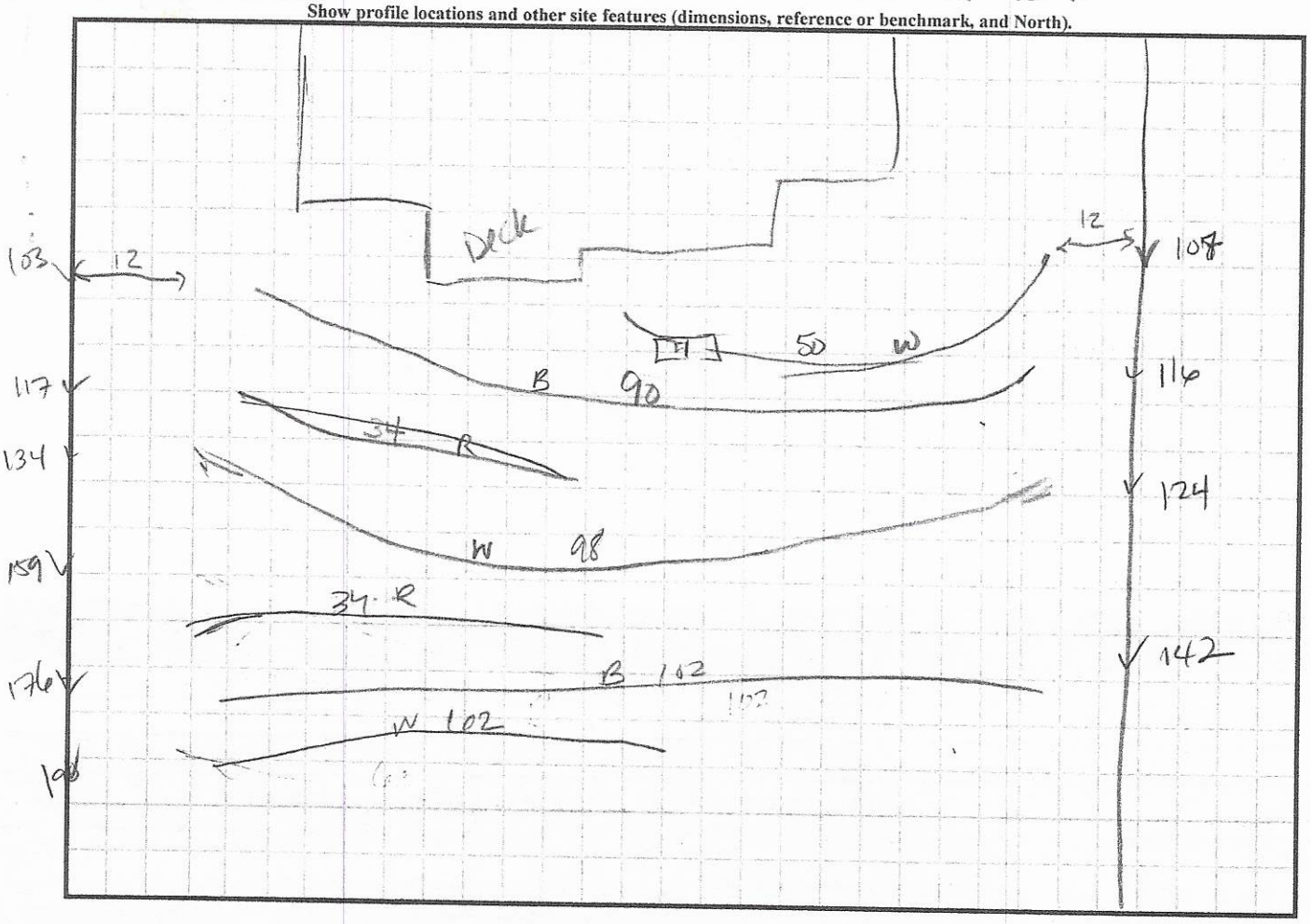
HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
CLASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

NO FOUNDATION DRAINS ALONG BACK

Evaluation of saprolite shall be by pits.

Long-term Acceptance Rate (LTAR): gal/day/ft²

Show profile locations and other site features (dimensions, reference or benchmark, and North).



RECEIVED MAR 3 1 2021

Dits?

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM* AP-239832 AP-306844 fees only

Application For: Immediate Redraw
( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(✓) 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 ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: Mark Morgan Address: PO Box 1801 Denver, NC Zip: 28037
Applicant Email: mark@RMorganHomes.com Phone: 704-582-3818 Alt. Phone: _____
Owner Name: Scott Prowler Address: 145 Beacon Dr. Mooresville, NC Zip: 28117
Owner Email: sprowler2000@yahoo.com Phone: 704-517-3140 Alt. Phone: _____

Property Information:

Street Address: 121 Castleview Ln. Mooresville, NC 28115
Subdivision Name: Davidson Downes Section/Phase: IV Lot Number: 149
Driving Directions: 115S, L on Presbyterian, R on State Farm, on R

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

(✓) 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: 4
( ) Swimming Pool
( ) Other Addition/Structure: _____

CHECK FOUNDATION TYPE
(✓) 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: 1 Number of Persons: 4

(✓) 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 (✓) No Does the site contain any jurisdictional wetlands?
( ) Yes (✓) No Is any non-domestic sewage (i.e. industrial) 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.

Signature: _____ 3/23/21
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) 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, Mark Morgan Scott Prowler, am the legal owner(s) of the property located at 121 Castleview Ln, identified as PIN (Parcel Identification Number) 4654763375, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Mark Morgan (R. Morgan Homes), 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.

_____ 3-23-21
Signature of Owner(s) Date

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

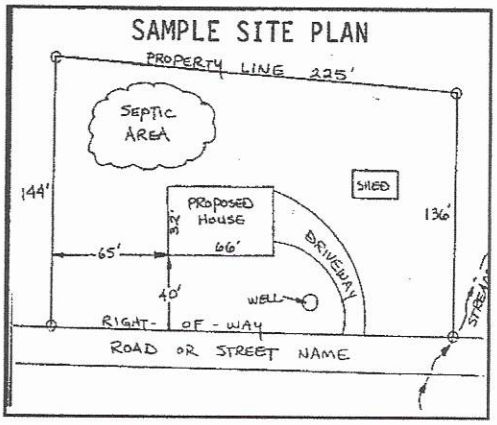
Statesville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *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 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 and well location**
- ( ) **Area you prefer your septic system to be placed**
- ( ) **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

Site Plan Attached

Robert Mark Morgan

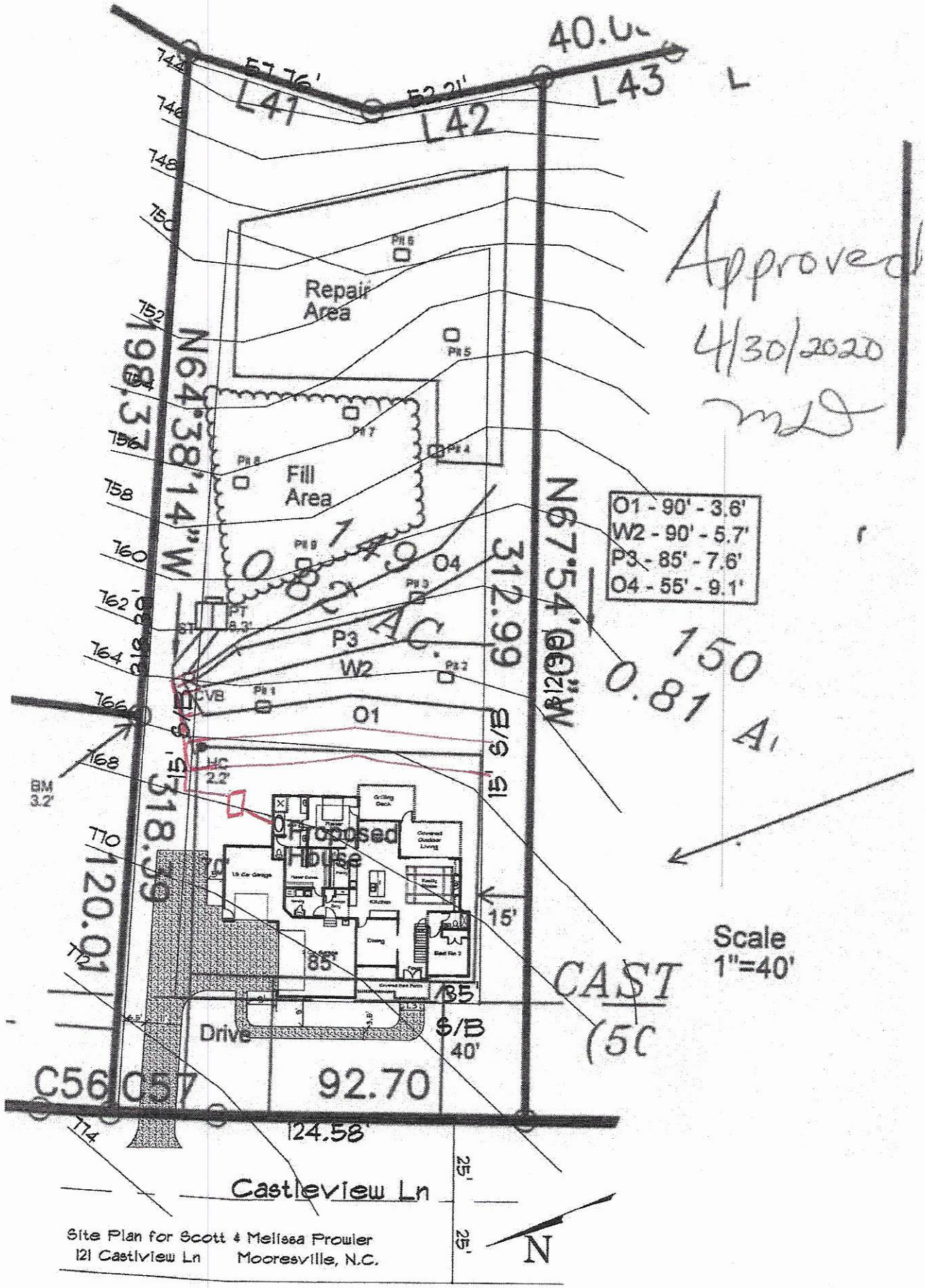
3/23/21

Signature: Robert Mark Morgan

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

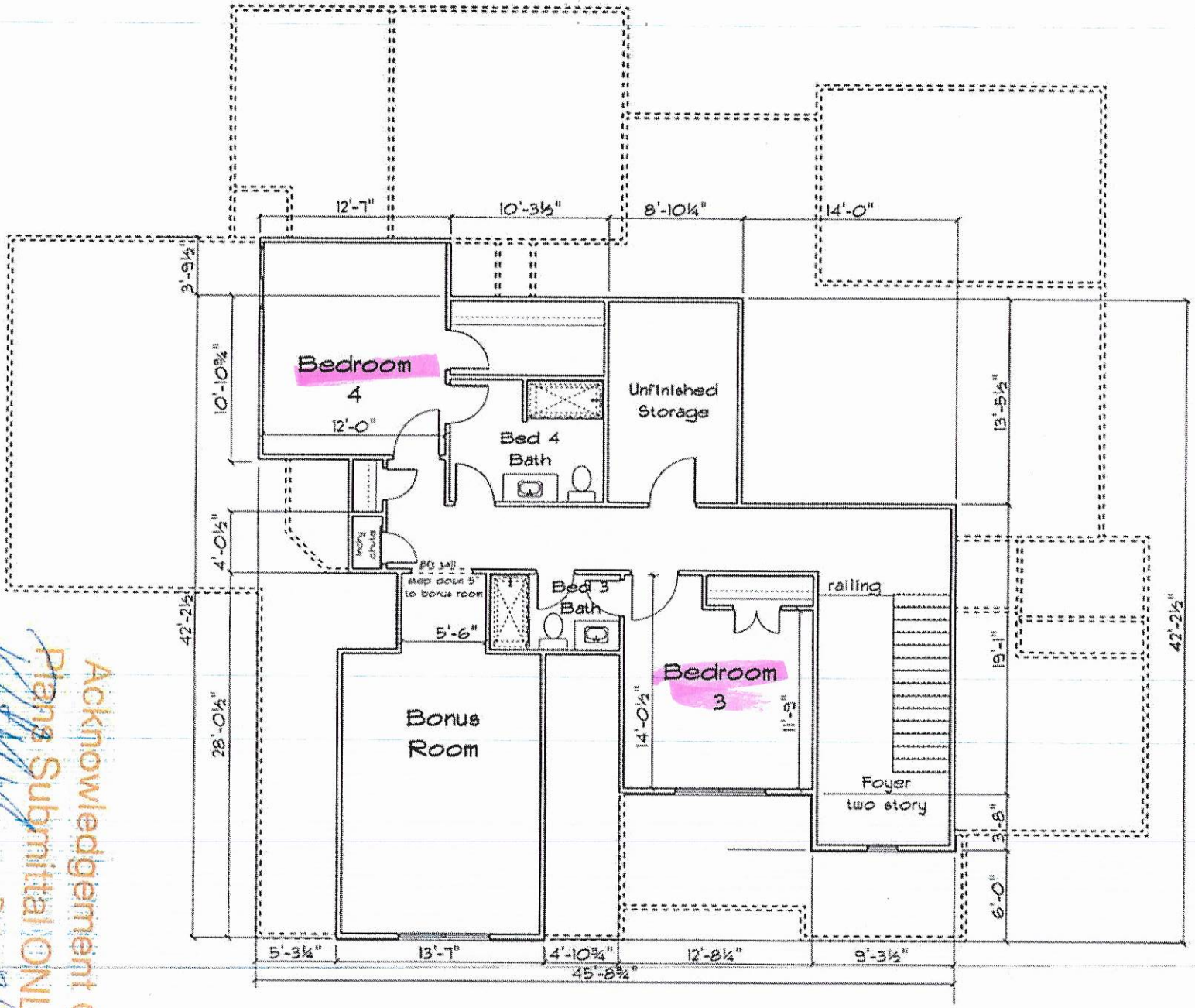
3/23/21

DATE



Site Plan for Scott & Melissa Prowler
121 Castlview Ln Mooresville, N.C.

PIN 4649007637.000 0.82 ac
Scale: 1" = 40'
Date: 11/15/20



Upper Floor
New Residence - Scott & Melissa Prowler
Lot 149 In Davidson Downes Phase IV subdivision
121 Castleview Ln. Mooresville, NC 28115

Upper Floor Sq Footages

Heated	1112
Unfinished Storage	120

Acknowledgement Of Plans Submittal ONLY!

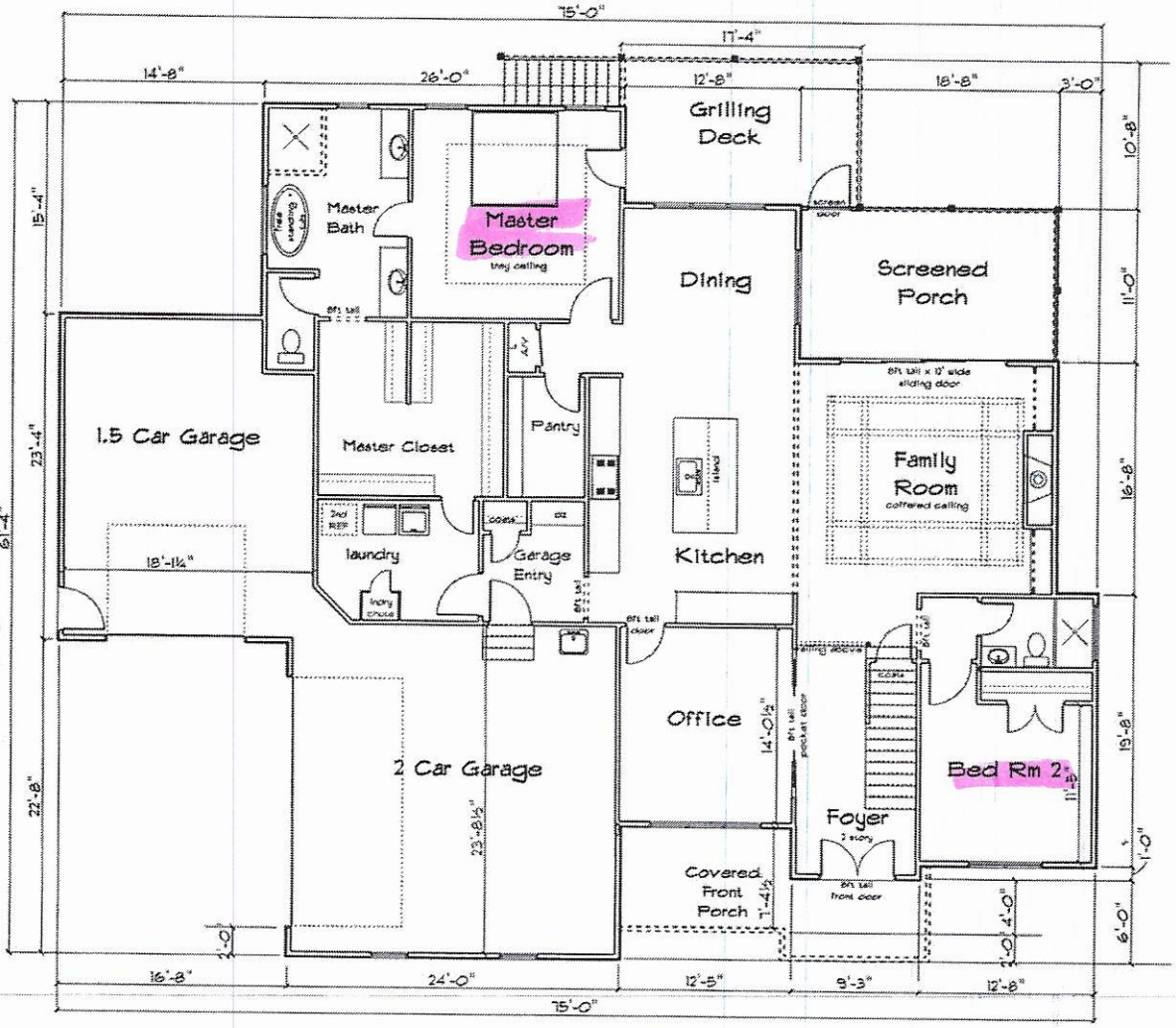
Date 12/10/20

Date 12/10/20

Date 12/12/20

75'

61'-4"



Main Floor
New Residence - Scott & Melissa Prowler
Lot 149 in Davidson Downes Phase IV subdivision
121 Castleview Ln. Mooresville, NC 28115

Square Footages

Main Floor Heated	2230
Covered Front Porch	154
Covered Rear Porch	206
Grilling Deck	183
Attached 3.5 Car Garage	1018
Upper Floor Heated	1100
Upper Floor Unfinished Storage	310
Total Heated	3330

Acknowledgement Of Plans Submittal ONLY!
Signature
Date 12/14/2020

12/8/20

IREDELL COUNTY

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

APPLICATION NUMBER
239832
Issue Date: 10/26/2018

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4654754930.000	121 CASTLEVIEW LANE, MOORESVILLE, NC 28115	

Owner Information	Applicant Information
Owner: RAY DEVELOPMENT LLC	Applicant: MICHAEL ATHANAS & ASSO
Address: 4643 MARINER LANE	Address: 561 ENNIS RD
DENVER, NC 28037	WEDDINGTON, NC 28173
Phone:	Phone: 704-576-3887

Use Requested	Zone Code

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	156936	TOTAL FEES:	$ 77.25