# ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP317599

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

PIN # 4654 -- 78 -- 1493

APPLICANT/OWNER: Lakeshore Holdings, LLC | APPLICANT ADDRESS: 637 Williamson Rd, Ste 102 Mooresville NC 28117

SITE ADDRESS: 116 Raleigh Dan Place | PHONE: | ALT. PHONE

SITE DIRECTIONS: Presbyterian Rd @ to Raleigh Dan Place Lot on Right | SAP CONTROLLED: ☐ YES ☒ NO

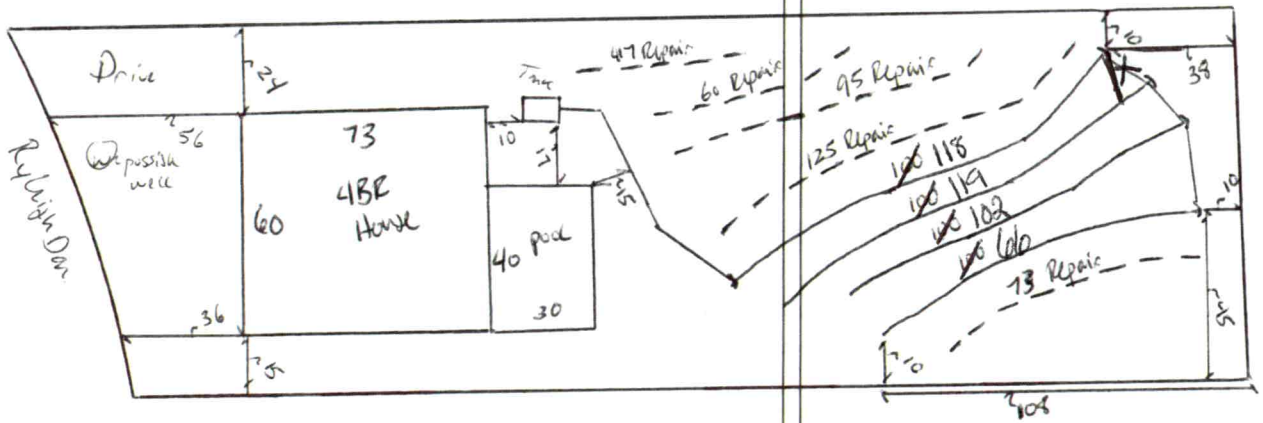
SUBDIVISION: Davidson Pond | SECTION: | LOT # 27 | LOT AREA: .79 Ac | DESIGN FLOW: 480 | L.T.A.R.: .30

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 (gal) | STB 760 | Date 6/1/22 | ☒ 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: Gravity- 25% Reduction | | ☐ Business | No. Persons 8 | ☒ Private |
| Pump Make | | Model | Serial # | Repair System Description: PM- 25% Reduction | | ☐ Other | No. Employees | ☐ Public |
| # Nitrification Fields 1 | # Lines 4 | Linear Ft 400 | | Maintenance Agreement Required: | ☐ YES ☒ NO | ☐ Slab | ☒ Crawl Space | ☐ Community |
| Trench Width 36 in | Trench Bottom Depth (Low side) 36 in (max) | | Gravel Depth - | ☒ GRAVITY | ☐ PRESSURE | ☐ Basement w/ plumbing | | ☐ Basement w/o plumbing |

Comments / Conditions: Install Drainlines on the contour of the land & utilize serial distribution. Do not exceed 36 in max. Do not park, pave, grade, drive or bury utilities in drainfield Areas

INITIAL SITE SKETCH

1=50




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.

29
29
25
16

Installed as Drawn

*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: 1-24-22 | Installed by: Stutts Grading

IMPROVEMENT PERMIT by: Benjamin D Butler | Date: 1/26/2022 | OPERATION PERMIT by: Cory Wilt | Date: 7/12/22

AUTHORIZATION TO CONSTRUCT by: Benjamin D Butler | Date: 1/26/2022 | Existing System Inspected by: | Date:

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

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Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP317599

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

PIN # -- --

APPLICANT/OWNER: Lakeshore Holdings, LLC | APPLICANT ADDRESS: 637 Williamson Rd, Ste 102 Mooresville NC 28117

SITE ADDRESS: 116 Rykeigh Dan Place | PHONE: | ALT. PHONE

SITE DIRECTIONS: Presbyterian Rd to Rykeigh Dan Place Lot on Right | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Davidson Pond | SECTION: - | LOT # 27 | LOT AREA: .79 Ac | DESIGN FLOW: 480 | L.T.A.R.: 430

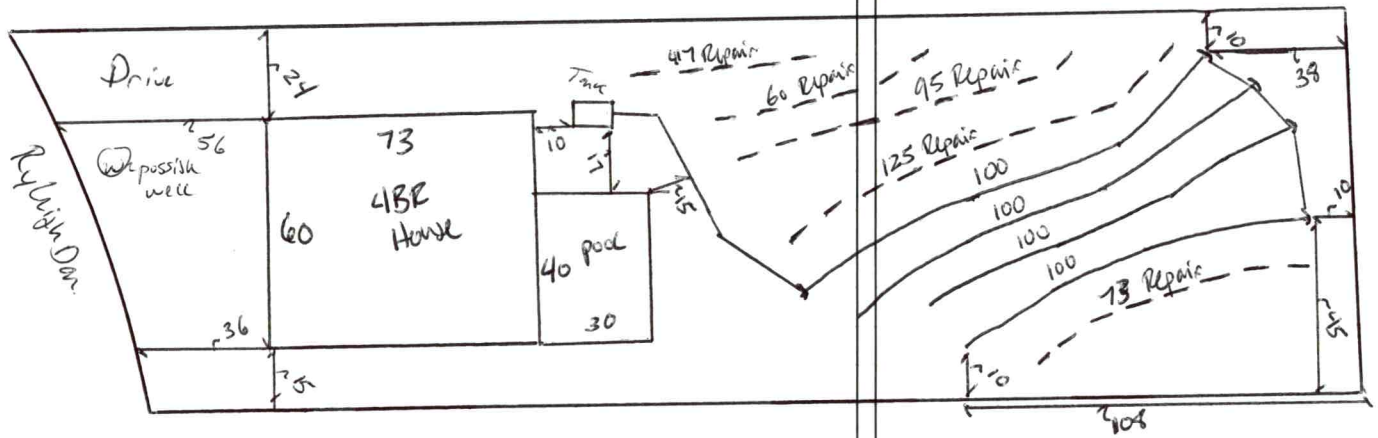
| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 (gal) | STB | | Date | | ☒ New System | ☐ Repair | ☐ Expansion | System Type: I II (III) IV V VI | ☒ Residence | No. Bedrooms 4 |
| Pump Tank | (gal) | PT | | Date | | System Description: | Gravity - 25% Reduction | | | ☐ Business | No. Persons 8 |
| Pump Make | | Model | | Serial # | | Repair System Description: | PM - 25% Reduction | | | ☐ Other | No. Employees |
| # Nitrification Fields | 1 | # Lines | 4 | Linear Ft | 400 | Maintenance Agreement Required: | ☐ YES | ☒ NO | | ☐ Slab | ☒ Crawl Space |
| Trench Width | 36 in | Trench Bottom Depth (Low Side) | | | 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 exceed 36 in max. Do not park, pave, grade, drive or bury utilities in drainfield Areas.

INITIAL SITE SKETCH

1:50




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: | Date: 1-24-22 | Installed by:

IMPROVEMENT PERMIT by: Benjamin A Butler | Date: 1/20/2022 | OPERATION PERMIT by: | Date:

AUTHORIZATION TO CONSTRUCT by: Benjamin A Butler | Date: 1/20/2022 | 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? _____ | |

* Limited Redraw *

RECEIVED JAN 1 2022

# IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

## APPLICATION FORM AP-317599 $105

**Application For:**

( ) Septic Improvement Permit (X) New Well Permit (X) 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:** ( ) 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:** Lakeshore Holdings, LLC **Address:** 637 Williamson Rd, Ste 102, Mooresville, NC **Zip:** 28117

**Applicant Email:** lakemistoperations@gmail.com **Phone:** 704-799-7609 **Alt. Phone:**

**Owner Name:** Lakeshore Holdings, LLC **Address:** PO Box 5350, Mooresville, NC **Zip:** 28117

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

**Property Information:**

**Street Address:** 116 Ryleigh Dan Place

**Subdivision Name:** Davidson Pond **Section/Phase:** **Lot Number:** 27

**Driving Directions:** NC 115 towards Davidson to left on Presbyterian Rd. Turn left on to Ryleigh Dan Place. Lot will be on your right. Ryleigh Dan Place is across from Sink Farm Rd.

**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:

( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional (X) Other: per IP

**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:** Lakeshore Holdings, LLC dba Lakemist Homes 12/13/21

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

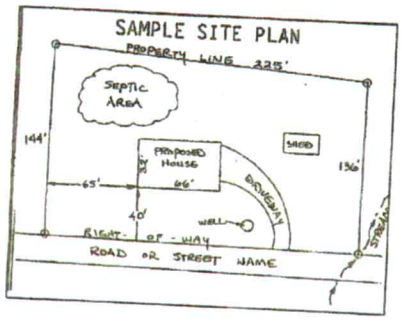
# IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

## *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:**

- ( ) **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

**Signature:** Aaron Feldman Lakeshore Holdings, LLC dba Lakemist Homes

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

12/13/2021

**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, Oak Springs, LLC, am the legal owner(s) of the property located at 116 Ryleigh Dan Place, Mooresville, NC 28117, identified as PIN (Parcel Identification Number) 4654781493, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Aaron Feldman, Lakeshore Holdings, LLC, 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.

Aaron Feldman
Signature of Owner(s) Lakeshore Holdings, LLC dba Lakemist Homes

12/13/2021
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

# ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625

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

PERMIT # AP 21-

APPLICANT/OWNER: Cabarrus LLC

APPLICANT ADDRESS: PO Box 592 Mooresville

PIN #

SITE ADDRESS: 116 Bayleigh Dr Rd

PHONE: 919 791 4004

ALT. PHONE

SITE DIRECTIONS: South on Mocksville Hwy Lt Kensington Rd Lt Bayleigh Dr Rd

SUBDIVISION: Dunbar Park

SECTION: - LOT # 37

LOT AREA: 0.71 acres

SAP CONTROLLED: ☐ YES ☒ NO

DESIGN FLOW: 480 GPD L.T.A.R.: 0.72

Septic Tank: 1000 (gal) STB Date

Pump Tank (gal) PT Date

Pump Make Model Serial #

# Nitrification Fields 1 # Lines 4 Lineal Ft 40 FT

Trench Width 36 in Trench Bottom Depth 24 in (max) Gravel Depth

☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI

System Description: 3BR

Repair System Description: 3bdrm LP

Maintenance Agreement Required: ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

☒ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing

No. Bedrooms 4 No. Persons 3 No. Employees ☒ Crawl Space

Water Supply: ☐ Private ☐ Public ☐ Community

☐ Basement w/o plumbing

Comments / Conditions: Install drain lines on center of lot. Utilize second distribution box with one leach lateral per unit. Park, lawn, or yard area.

INITIAL SITE SKETCH

See attached site plan & Report

by Paul Pennington & ICHD

Date 7-8-21

AS BUILT SKETCH

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

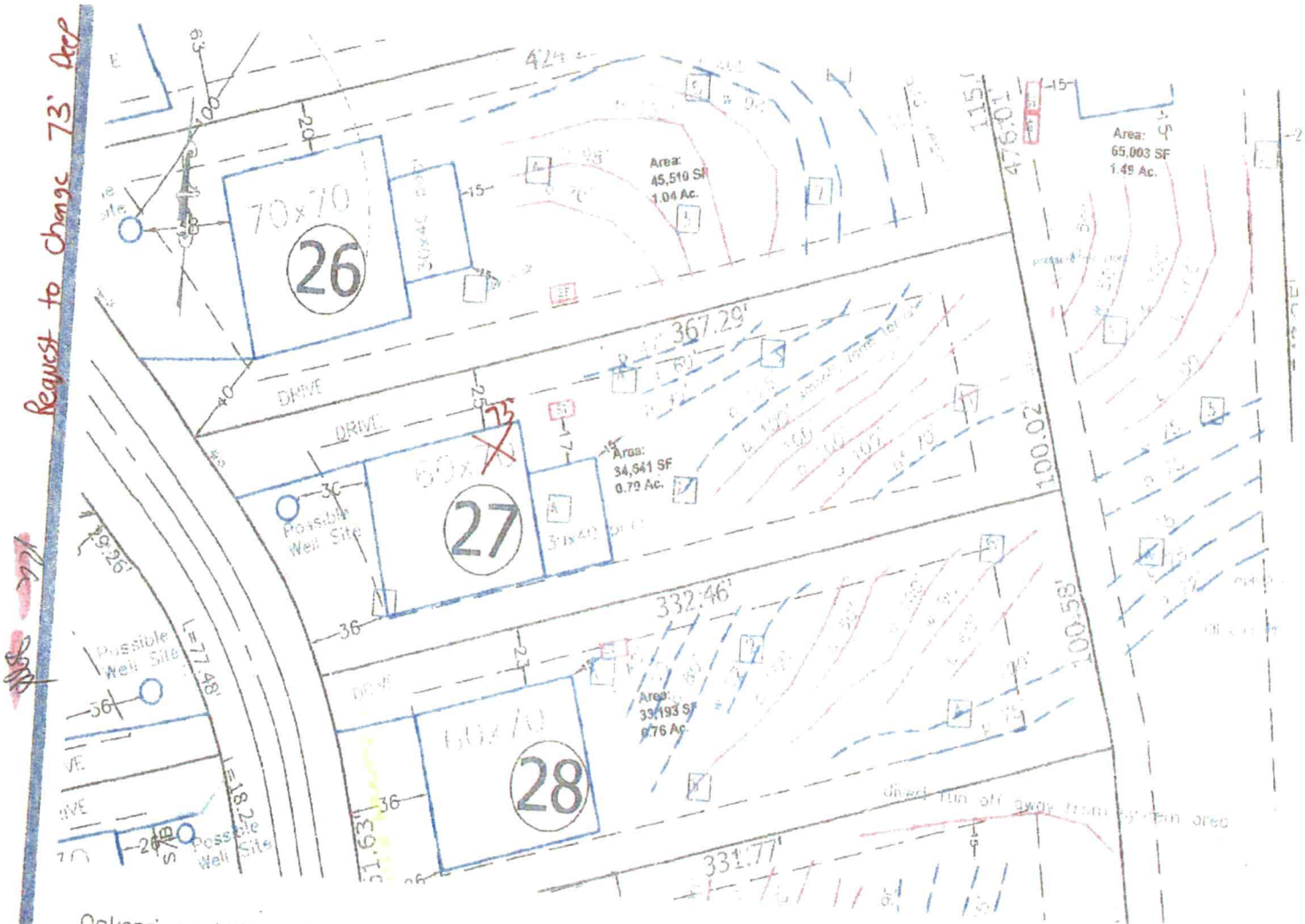
☐ IMPROVEMENT PERMIT with plat valid without expiration ☒ IMPROVEMENT PERMIT with site plan valid for 60 mos. ☐ AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT - not to exceed 60 mo.

Owner / Applicant Signature: Date: 9/23/21 Installed by:

IMPROVEMENT PERMIT by: Date: 9/23/21 OPERATION PERMIT by: Date:

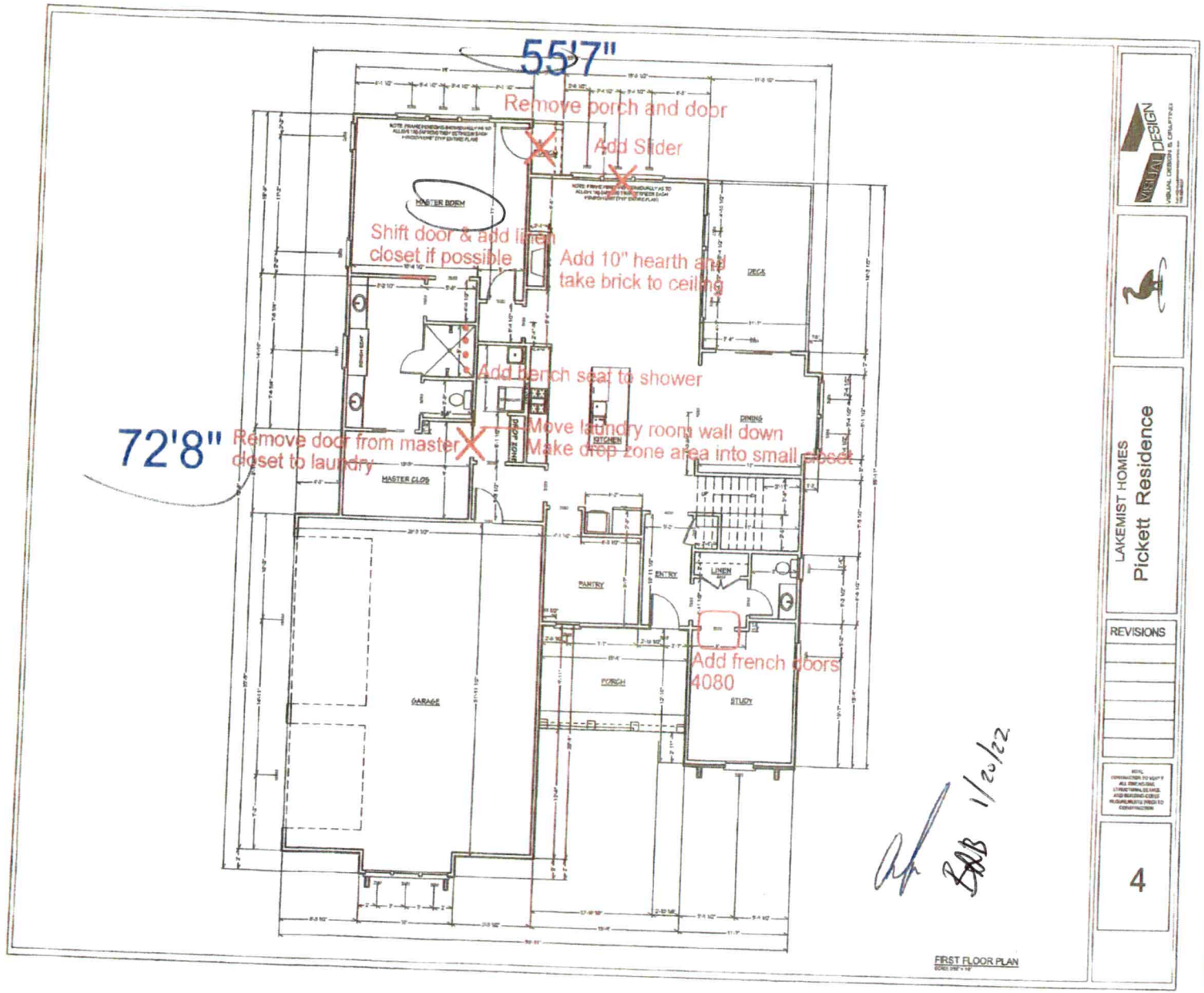
AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Date:

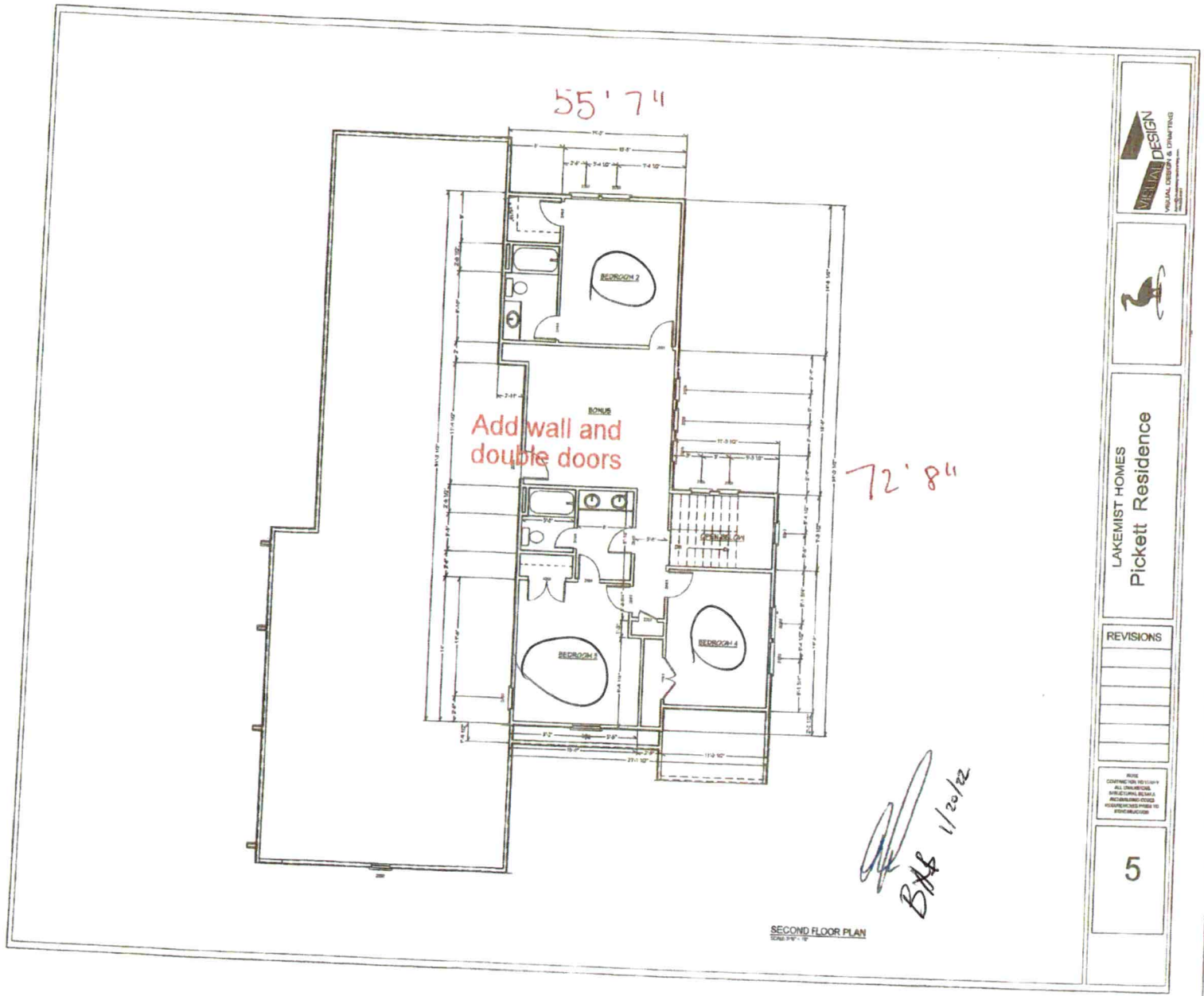
Request to change 73' drive




Oaksprings, LLC – Davidson Pond Subdivision – Lot 27 Septic Site Plan 7.2.21

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.


55'7"
Remove porch and door
Add Slider
Shift door & add linen closet if possible
Add 10" hearth and take brick to ceiling
Add bench seat to shower
72'8"
Remove door from master closet to laundry
Move laundry room wall down
Make drop zone area into small closet
Add french doors 4080
MASTER BDRM
DECK
KITCHEN
DINING
MASTER CLOS
PANTRY
ENTRY
LINEN
PORCH
STUDY
GARAGE
1/20/22
FIRST FLOOR PLAN
LAKEMIST HOMES
Pickett Residence
REVISIONS
4


55' 7"
72' 8"
Add wall and double doors
BEDROOM 2
BONUS
BEDROOM 1
BEDROOM 4
LAKEMIST HOMES
Pickett Residence
REVISIONS
5
SECOND FLOOR PLAN
1/20/22