ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 317532

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

PIN # 4654--78--2262

APPLICANT/OWNER: Oaksprings LLC APPLICANT ADDRESS: PO Box 5358 Mooresville

SITE ADDRESS: 104 Bylergh Dan Place PHONE: 704-799-7609 ALT. PHONE

SITE DIRECTIONS: South on Mecklenburg Hwy - Lt Presbyterian Rd - Lt Bylergh Dan Place SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Davidson Pond SECTION: - LOT # 29 LOT AREA: 0.96 acres DESIGN FLOW: 480 GPD L.T.A.R.: 0.25

Septic Tank	1000 (gal)	STB	760	Date	11-28-2022	☒ 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:	50% Reduction - LP	☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	5	Linear Ft	480 FT	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 contour of land. Do not exceed max of 36 inch trench bottom. Utilize serial distribution. Do not park, drive, or grade septic area.

Keep house in footprint shown on Septic plan

INITIAL SITE SKETCH

Divert water away from system as shown on Plan.

See attached Site Plan & Design by Paul Pennington & ICHD Rite 7-2-21

AS BUILT SKETCH

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inspector to confirm your time.

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

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

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

IMPROVEMENT PERMIT by: Benjamin A Batts Date: 9/23/21 OPERATION PERMIT by: Brent C. White Date: 1-11-2022

AUTHORIZATION TO CONSTRUCT by: Date: 6/26/22 Existing System Inspected by: Date:

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

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # **AP** 317582

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

PIN # -- --

APPLICANT/OWNER: Oaksprings LLC APPLICANT ADDRESS: PO Box 5350 Mooresville

SITE ADDRESS: 104 Ryleigh Dan Place PHONE: 704-799-7609 ALT. PHONE

SITE DIRECTIONS: South on Mecklenburg Hwy - Lt Presbyterian Rd - Lt Ryleigh Dan Place SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Davidson Pond SECTION: - LOT # 29 LOT AREA: 0.96 acres DESIGN FLOW: 480 GPD L.T.A.R.: 0.25

Septic Tank	1000	(gal)	STB		Date	☒ 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:	50% Reduction - LP			☐ Other	No. Employees		☐ Public		
# Nitrification Fields	1	# Lines	5		Linear Ft: 480 FT	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☒ Crawl Space		☐ Community		
Trench Width	36 in	Trench Bottom Depth(Lowside)			36 in (max) Gravel Depth -		☒ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing			☐ Basement w/o plumbing		

Comments / Conditions: Install drainlines on contour of land. Do not exceed max of 36 inch trench bottom. Utilize serial distribution. Do not park, drive, or grade septic area.

Keep house in footprint shown on Septic plan

INITIAL SITE SKETCH

Direct water Away from system as shown on Plan.

See attached Site Plan & Design

by Paul Penninger & ICHD

Date 7-2-21

AS BUILT SKETCH

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 between 8am-9am

the day the inspection is needed. Be sure to speak with an inspector to confirm your time.

1/11 BW

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**

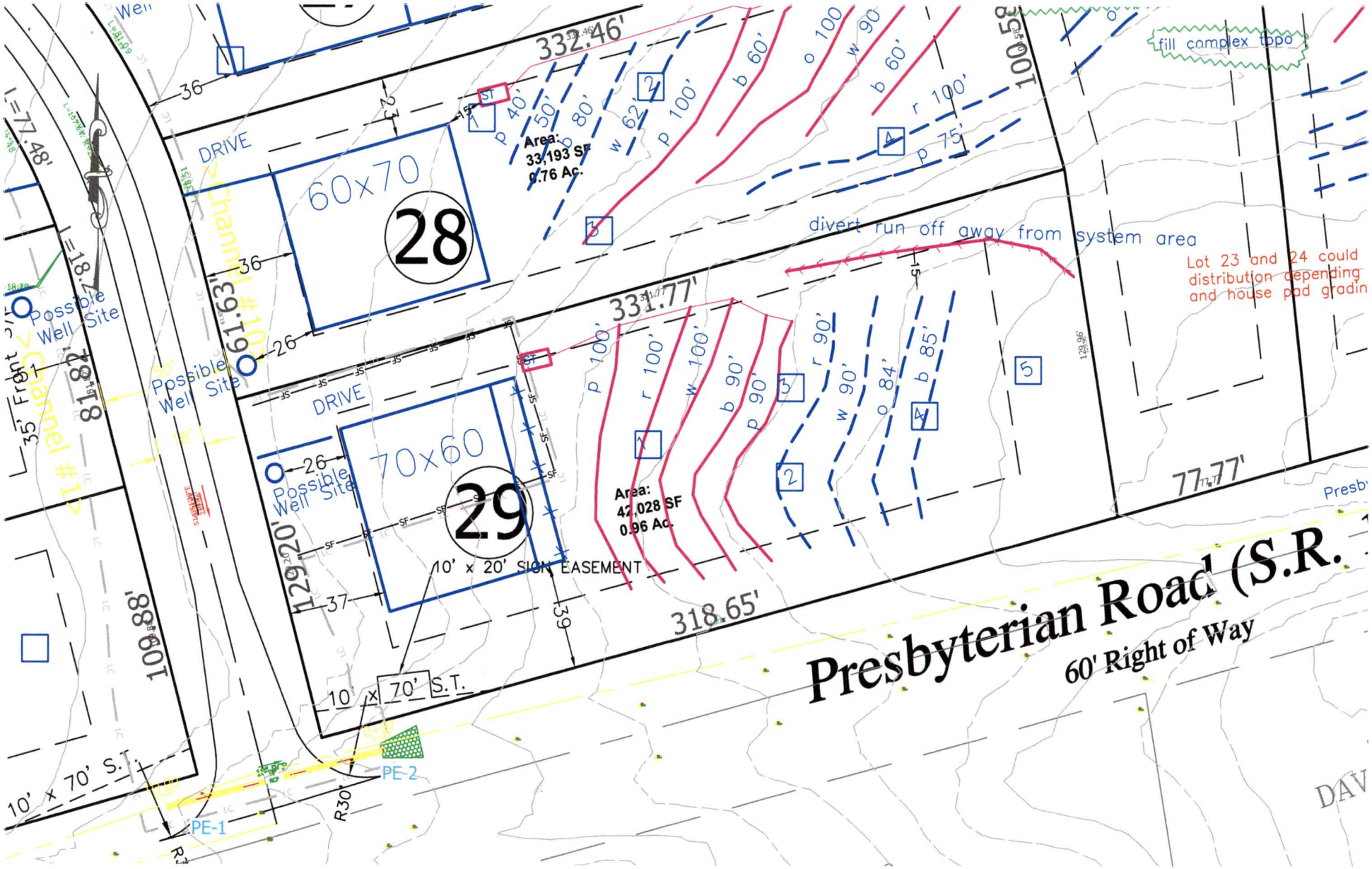
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

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

IMPROVEMENT PERMIT by: Benjamin A Batts Date: 9/23/21 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: 6/26/22 Existing System Inspected by: Date:

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



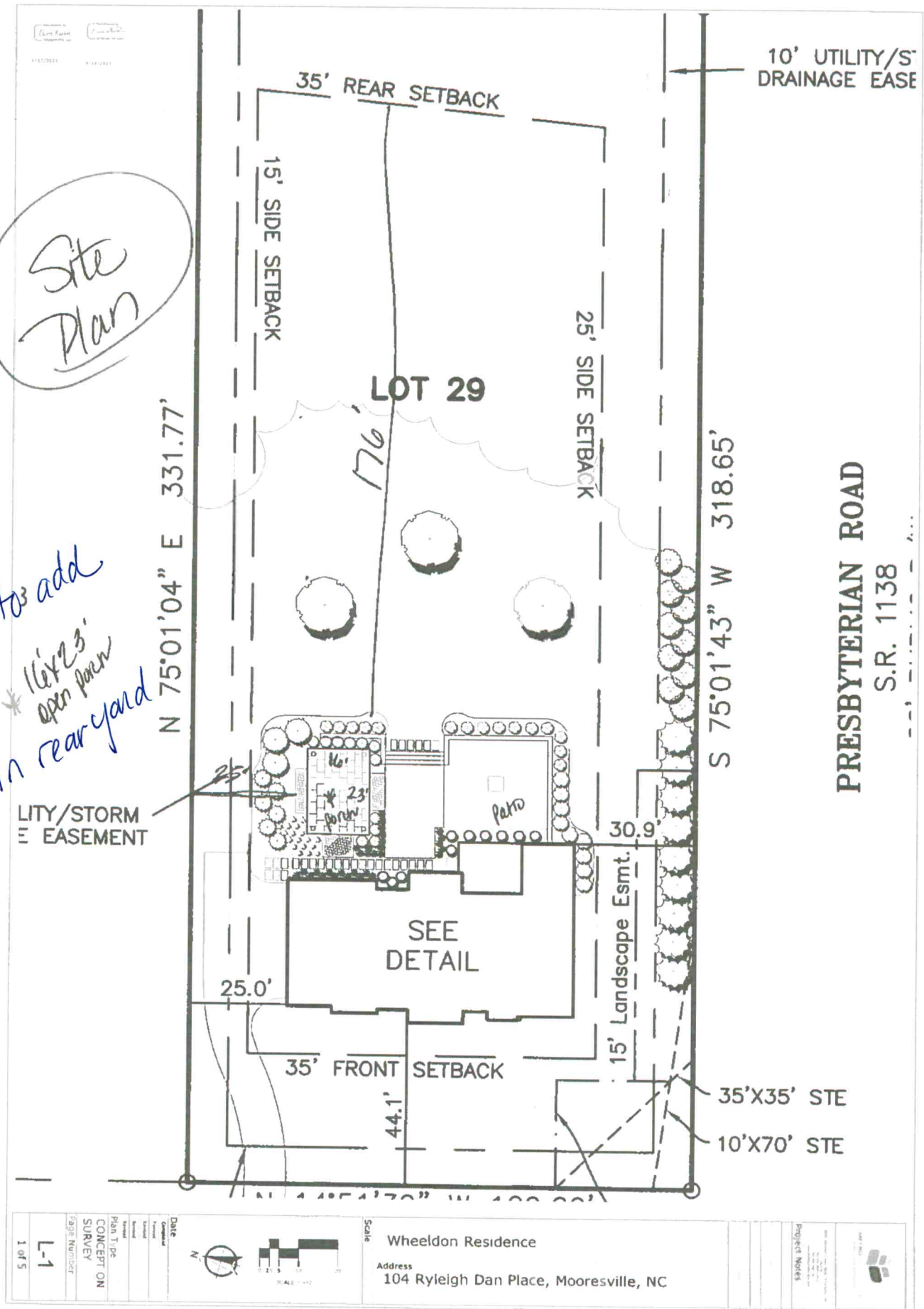
Oaksprings, LLC – Davidson Pond Subdivision – Lot 29 Septic Site Plan 7.2.21

GRAPHIC SCALE

0 25 50 100

1 inch = 50 feet

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.


Site Plan
Wants to add
16'x23' open porch in rear yard
35' REAR SETBACK
15' SIDE SETBACK
25' SIDE SETBACK
10' UTILITY/S
DRAINAGE EASE
LOT 29
176'
N 75°01'04" E 331.77'
S 75°01'43" W 318.65'
PRESBYTERIAN ROAD
S.R. 1138
LITY/STORM
E EASEMENT
25'
16'
23'
Porch
Patio
30.9'
SEE DETAIL
25.0'
35' FRONT SETBACK
44.1'
15' Landscape Esmt.
35'X35' STE
10'X70' STE
Wheeldon Residence
104 Ryleigh Dan Place, Mooresville, NC
L-1
1 of 5
CONCEPT ON SURVEY

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

L-129

Sheet 1 of 1
PROPERTY ID #:
COUNTY: Iredell

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

OWNER: Oakspring LLC
ADDRESS: PO Box 5350 Mooresville
PROPOSED FACILITY: 4 bdr Home
PROPOSED DESIGN FLOW (.1949): 480 GPD
LOCATION OF SITE: 104 Ryleigh Dan Place

APPLICATION DATE 5/21/21
DATE EVALUATED: June 21
PROPERTY SIZE: 0.96 acres
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	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	Side	0-5	SCL WSBK	SS SP FR SE+P	2.5YR 4/6 Mn Inclusions	59	-	Some Mn in clay Layer	PS .25
		5-41	C SBK	SS SP FR SE+P					
		41-59	CL WSBK	SS SP FR SE+P					
2	Side	0-7	SCL WSBK	SS SP FR SE	2.5 yr 4/6 Manganese Inc	64	-	Yellow/Brown at 46	PS .25
		7-46	C SBK	SS SP FR SE					
		46-64	CL WBK	SS SP FR SE					
3	Head	0-5	SCL WSBK	SS SP VFR SE+P	BR Yellow Red	57		Colluvial Soil 0-29 Mn in clay Layer	PS .25
		5-16	SCL WMSBK	SS SP VFR SE+P					
		16-29	SC WSBK	SS SP FR SE+P					
		29-57	C MSBK	SS SP FR SE+P					
4	Long Head Slope	0-6	SC WSBK	SS SP FR SE+P	BR	63		Colluvial Some Mn	PS .25
		6-30	SCL SBK	SS SP FR					
		30-63	C MSBK	SS SP FR					

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

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Cory Whicker, Ben Bottkins, Paul Pennington
OTHER(S) PRESENT:

Acknowledgement Of Plans Submittal ONLY!

Date 7/21/22

Date 6/26/22

73'3"

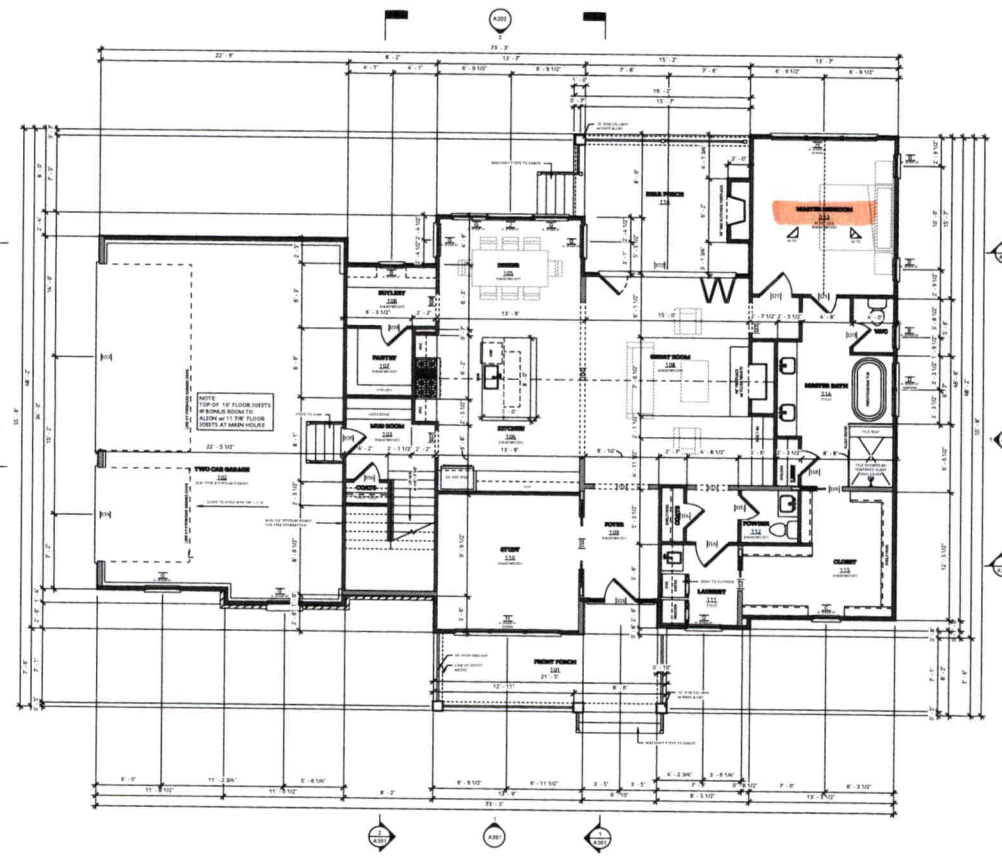
55'8"

Floor Plan General Notes

1. The contractor shall examine and become familiar with all documents in their entirety, survey the site and become familiar with existing conditions and scope of work. If any discrepancy and/or lack of clarity as to what material or product is to be used, verify with the owner or consultant.
2. All dimensions shown to exterior face of stud (U.N.O.). If any discrepancy and/or uncertainty is found in field, consult designer.
3. Ceiling heights are as shown on elevations (U.N.O.)
4. Provide Attic Access to meet IRC 2018 R807.1 (Final locations to be determined in field)
5. Header heights shown from top of subfloor (U.N.O.)

Diagonal Hatch Indicates 2x6 Stud Wall @ 16" O.C.

Solid Hatch Indicates 2x6 Stud Wall @ 16" O.C.



vin-yet designs, llc
117 pendleton street
rock hill, south carolina 29730
803.370.5926
www.vin-yet.com

- FINAL -
released for construction

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Vin-Yet Designs, LLC

COPPER BUILDERS

Lot 29 Davidson Pond

Davidson, North Carolina

First Floor Plan

Revision Date:

Project Number: D22034
Date: 06.09.22
Scale: 1/4" = 1'-0"

Sheet
A101

104 Rayleigh Dam

Acknowledgement Of Plans Submittal ONLY!

Date 7/27/22

Date 6/26/22

Floor Plan General Notes

1. The contractor shall examine and become familiar with all documents in their entirety, survey the project, and become familiar with existing conditions and scope of work. If any discrepancy and/or uncertainty as to what material or product is to be used, verify with the owner or architect.
2. All dimensions shown to exterior face of stud (U.N.O.). If any discrepancy and/or uncertainty is found in field, consult designer.
3. Ceiling heights are as shown on elevations (U.N.O.).
4. Provide Attic Access to meet IRC 2018 R807.1 (Final locations to be determined in field)
5. Header heights shown from top of subfloor (U.N.O.)

Diagonal Hatch Indicates 2x4 Stud Wall @ 16" O.C.

Solid Hatch Indicates 2x6 Stud Wall @ 16" O.C.



vin-yet designs, llc
111 pendleton street
rock hill, south carolina 29730
803.374.5531
www.vin-yet.com

- FINAL -
released for construction

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COPPER BUILDERS

Lot 29 Davidson Pond

Davidson, North Carolina

Second Floor Plan

Revision Date:

Project Number: D22034
Date: 06.09.22
Scale: 1/4" = 1'-0"

Sheet
A102

RECEIVED MAY 2 1 2021

call Paul Penninger for site visit 704.996.6330

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM AP- 317082 $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: 104 Ryleigh Dan Place
Subdivision Name: Davidson Pond **Section/Phase:** **Lot Number:** 29
Driving Directions: South on Mecklenburg Highway, TL Presbyterian Rd, Ryleigh Dan Place on Left

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? NONE ON SURVEY
( ) 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: _____ 5-20-21
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

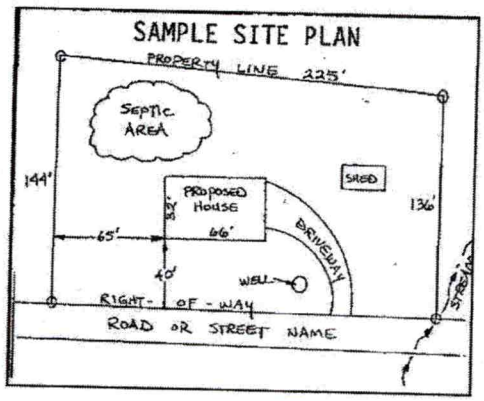
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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**
- ( ) **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)

5-20-21

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.

N/A 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** 5-20-21

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