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 # 229405

PIN # 4655-26-6199

APPLICANT/OWNER: Shea Custom Homes

APPLICANT ADDRESS: 8008 Corporate Center Dr. Charlotte, NC 28226

SITE ADDRESS: 124 Live Oak Lane Mooresville, NC

PHONE: 704-301-3229

ALT. PHONE

SITE DIRECTIONS: Rt 115 S from Mooresville → L on Faith Rd → R on Live Oak → House on Right

SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: L G Caldwell

SECTION: — LOT # 13 LOT AREA: 5.627 acres

DESIGN FLOW: 600 GPD L.T.A.R.: 0.225

Septic Tank	Existing 1500 (gal)	STB	3000-1530	Date	Infiltrator	☒ New System ☐ Repair ☐ Expansion	System Type: I II III (IV) V VI
Pump Tank	Existing 1500 (gal)	PT	2006-1765	Date	Infiltrator	System Description:	LP-PPBPS (50% Reduction)
Pump Make		Model		Serial #		Repair System Description:	Drip
# Nitrification Fields	1	# Lines	9	Linear Ft	458	Maintenance Agreement Required:	☒ YES ☐ NO
Trench Width	24"	Trench Bottom Depth(Low side)	26"	Gravel Depth	—		☐ GRAVITY ☒ PRESSURE

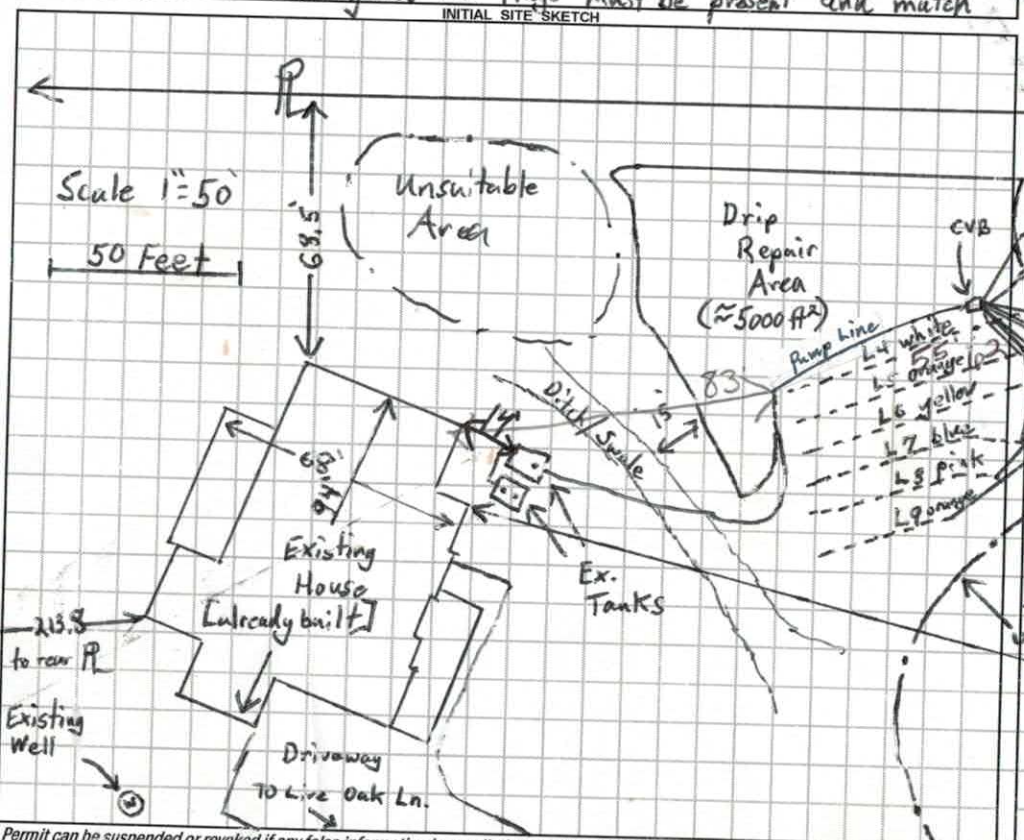
☒ Residence ☐ Business ☐ Other ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement w/o plumbing

No. Bedrooms 5 No. Persons 10 No. Employees

Water Supply: ☒ Private Existing ☐ Public ☐ Community

Comments / Conditions: Though 461 L.F. of line has been laid out, only 458 l.f. need be installed. Drainfield lines located by Lucas-Forman Surveyors. Pin flags must be present and match attached survey @ time of installation. Set control floats to dose system 270 gallons per pumping event. 6" soil cap/cover required.

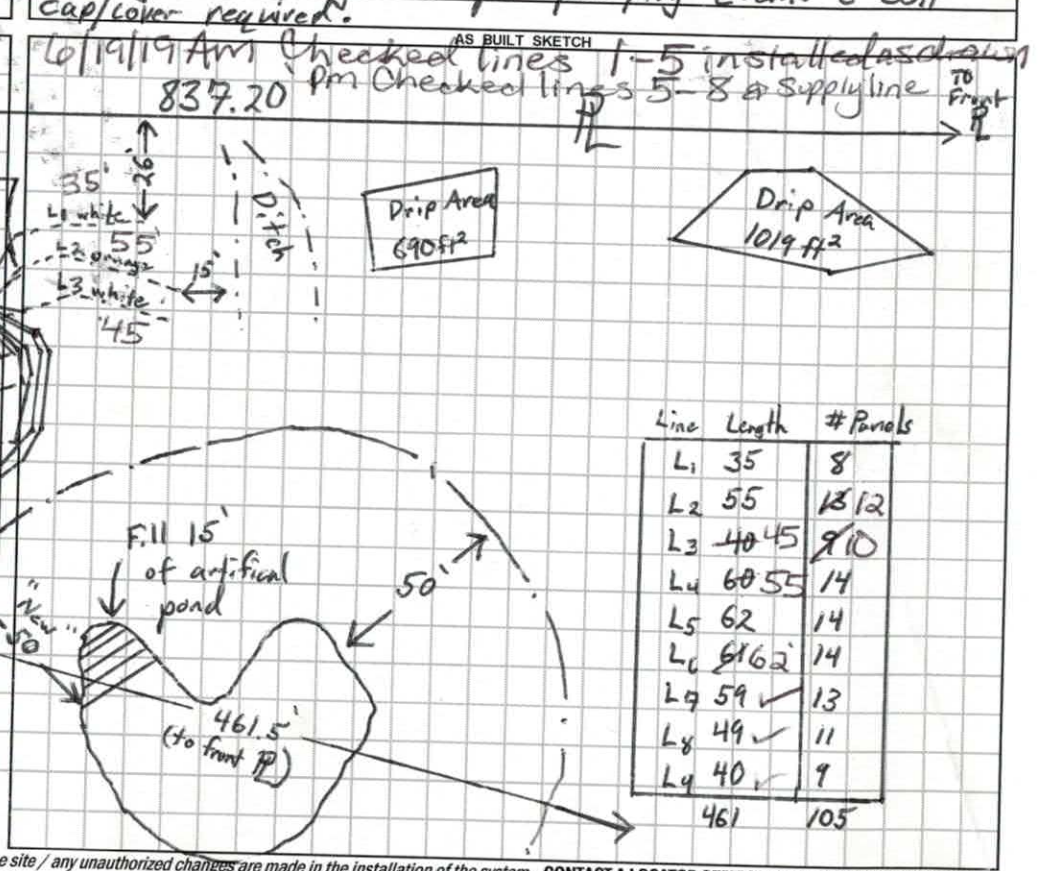
INITIAL SITE SKETCH



AS BUILT SKETCH

6/19/19 AM Checked lines 1-5 installed as shown
PM Checked lines 5-8 & supply line

837.20



Line	Length	# Panels
L1	35	8
L2	55	12 12
L3	40 45	9 10
L4	60 55	14
L5	62	14
L6	6162	14
L7	59	13
L8	49	11
L9	40	9
	461	105

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:

IMPROVEMENT PERMIT by: Tom Shuck Date: 6/11/2019

AUTHORIZATION TO CONSTRUCT by: Tom Shuck Date: 6/11/2019

Installed by: Specialty Septic

OPERATION PERMIT by: Kayla Wilson Date: 6-25-19

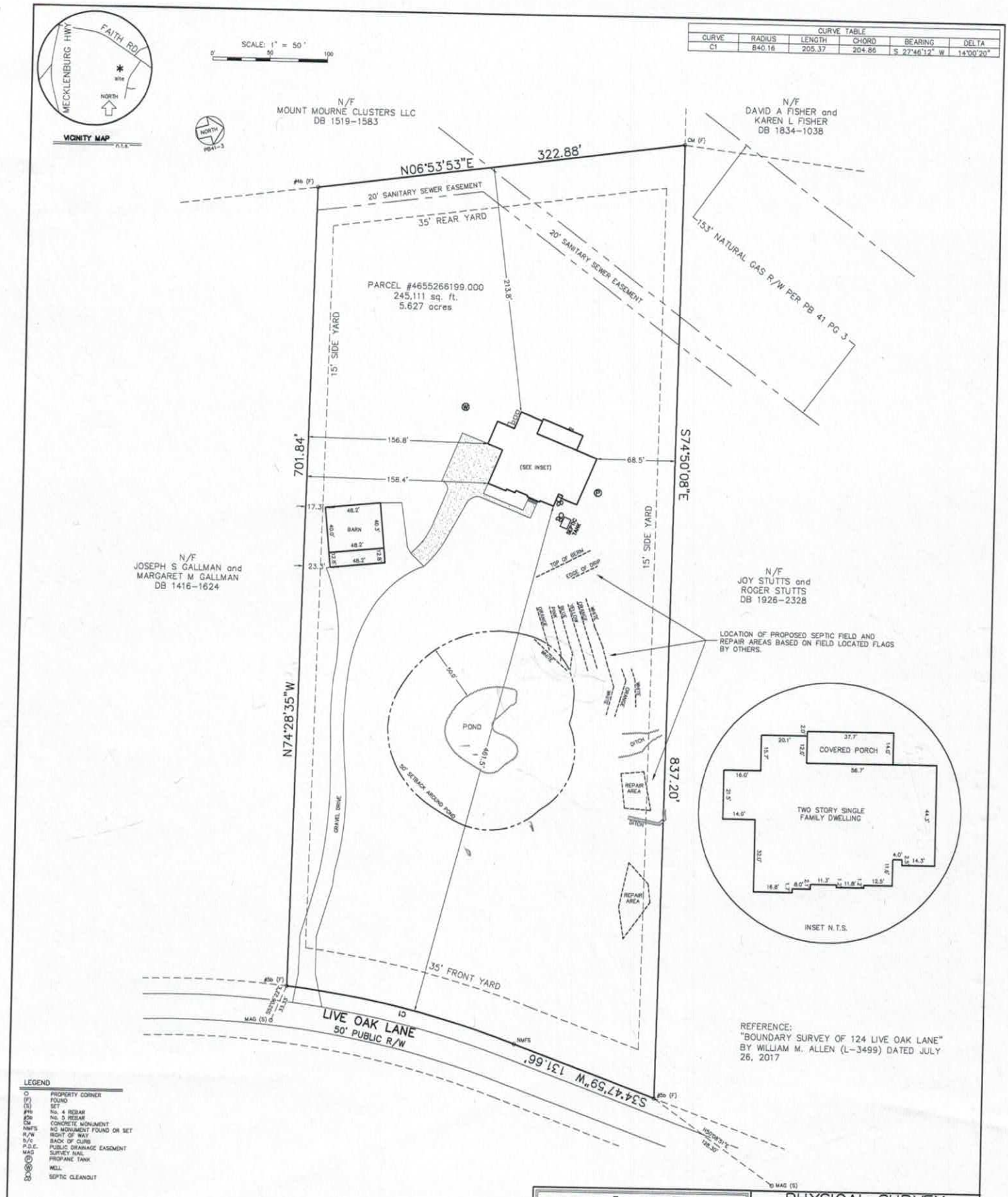
Existing System Inspected by: Date:

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

6/20/19 - last line and all was good

	Date	Initials
Drain Lines Checked 1-8	6/19/19	MD
Tanks Checked		TS
Pressure Manifold or Valve Box Checked	6/20/19	PJB
Pressure Head Set	6/20/19	PJB
Electrical Checked	06/20/19	PJB
Floats Set	6/20/19	PJB
Alarm Checked	06/20/19	PJB
Maintenance Contract (Y) N	6/25	KW

6/19/19 Checked Supply lines to trenches & upper 8 drainlines


VICINITY MAP
FAITH RD
MECKLENBURG HWY
site
NORTH
SCALE: 1" = 50'
0' 50' 100'
CURVE TABLE
CURVE | RADIUS | LENGTH | CHORD | BEARING | DELTA
C1 | 840.16 | 205.37 | 204.86 | S 27°46'12" W | 14°00'20"
N/F
MOUNT MOURNE CLUSTERS LLC
DB 1519-1583
N/F
DAVID A FISHER and
KAREN L FISHER
DB 1834-1038
N06°53'53"E
322.88'
20' SANITARY SEWER EASEMENT
35' REAR YARD
20' SANITARY SEWER EASEMENT
153' NATURAL GAS R/W PER PB 41 PG 3
PARCEL #4655266199.000
245,111 sq. ft.
5.627 acres
213.8'
15' SIDE YARD
701.84'
156.8'
158.4'
17.3'
23.4'
68.5'
(SEE INSET)
BARN
S74°50'08"E
837.20'
15' SIDE YARD
N/F
JOSEPH S GALLMAN and
MARGARET M GALLMAN
DB 1416-1624
N/F
JOY STUTTS and
ROGER STUTTS
DB 1926-2328
TOP OF BERM
EDGE OF POND
LOCATION OF PROPOSED SEPTIC FIELD AND
REPAIR AREAS BASED ON FIELD LOCATED FLAGS
BY OTHERS.
POND
50' SETBACK AROUND POND
DITCH
REPAIR AREA
REPAIR AREA
N74°28'35"W
GRAVEL DRIVE
COVERED PORCH
TWO STORY SINGLE
FAMILY DWELLING
INSET N.T.S.
35' FRONT YARD
LIVE OAK LANE
50' PUBLIC R/W
S34°47'59"W 131.66'
REFERENCE:
"BOUNDARY SURVEY OF 124 LIVE OAK LANE"
BY WILLIAM M. ALLEN (L-3499) DATED JULY
26, 2017
LEGEND
PROPERTY CORNER
FOUND
SET
No. 4 REBAR
No. 5 REBAR
CONCRETE MONUMENT
NO MONUMENT FOUND OR SET
RIGHT OF WAY
BACK OF CURB
PUBLIC DRAINAGE EASEMENT
SURVEY NAIL
PROPANE TANK
WELL
SEPTIC CLEANOUT
F.E.M.A. - F.I.R.M. INFORMATION
COMMUNITY NUMBER: 370313 MAP NUMBER: 3710465500J
EFFECTIVE DATE: 3/18/2008 ZONE: X (OUT)
THIS PROPERTY MAY BE SUBJECT TO EASEMENTS AND/OR RIGHTS-OF-WAY EITHER RECORDED OR IMPLIED.
NORTH CAROLINA
SEAL
L-3141
LAND SURVEYOR
ARTHUR F. FORMAN
Lucas-Forman
Incorporated
Land Surveying
Planning & Engineering
4000 Stuart Andrew Boulevard
Charlotte, North Carolina 28217
P.O. Box 11386 28220-1386
(704) 527-6626 Fax 527-9640
PHYSICAL SURVEY
of
124 LIVE OAK LANE
MOORESVILLE, IREDELL COUNTY, N.C.
LOT 13, MAPBOOK 41 PAGE 3
L.G. CALDWELL ESTATE
DEED REFERENCE: 2513-1996
SURVEYED FOR:
SHEA HOMES
SURVEYED BY: D.M. MELVIN
DESIGNED BY:
DRAWN BY: J.T. EASTERWOOD
DATE: 05/15/2019
CHECKED BY: A.F. FORMAN
JOB NUMBER: CUS0258
FILE NUMBER: IRE
SHEET: 1 OF 1

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

W 35
O 55
P 65
O 22
Y 13
B 14
P 6

Sheet 1 of 2
PROPERTY ID #: 4655-26-8199
COUNTY: Iredell

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

OWNER: Shea Custom Homes
ADDRESS: 8008 Corporate Center Dr. Charlotte, NC
PROPOSED FACILITY: 5BR SFR
PROPOSED DESIGN FLOW (.1949): 600
LOCATION OF SITE: 124 Live Oak Ln. Mooresville
APPLICATION DATE 5/3/19
DATE EVALUATED: 5/9/19
PROPERTY SIZE: 5.627 acres
PROPERTY RECORDED: Yes

WATER SUPPLY: ☒ Private ☐ Public ☐ Well ☐ Spring ☐ Other Existing
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	Below Existing System	10-0	Mixed Loamy Fill	XX					
		0-9	SCL V.W. SBK	SI Friable, SS, Sp, Sap	17" @ 2.5YR 7/2		—	—	U
		9-17	Clay M. ABK/SBK	SI Firm, Sticky, Sp, Sap					
		17-53	Clay Strong ABK SBK + manganese saprolite	Firm, very sticky, Plastic, Sap					
2	Drip Area #2 [corner] ≈1600 ft²	0-7	SCL V.W. SBK	SI Friable, SS, Sp, Sap	mixed mineralogy @ 35"-60"	26"	1	—	Drip 0.125
		7-26	Clay M. ABK/SBK	Firm, Sticky, Sp, Sap					
		26-60	MA Loamy Saprolite	Friable + Poorly Derived					
			[some clay plugs]	35"+ to 60"					
3	Drip Area #3 side ≈900 ft²	0-6	SCL V.W. SBK	SI Friable, SS, Sp, Sap	—	31"	—	—	Drip 0.125
		8-31	Clay M. ABK/SBK to Loam	Firm, Sticky, Sp, Sap					
		31-60	MA Saprolite contrasted Rock	very Poorly Derived					
4	2 New Lines	0-7	SCL V.W. SBK	SI Friable, SS, Sp, Sap					
		7-41	Clay M. SBK/ ABK manganese	SI Firm, Sticky, Sp, Sap	2.5YR 6/1 @ 40"	51"	—	41	PS 0.225
		41-51	Clay MA	Very very very Firm, Sticky, Plastic, Expansive					
	Primary Area								

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	5TH L.F	6000+ ft²
System Type(s)	50% Red	Drip
Site LTAR	0.225	0.125

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Tom Shuck
OTHER(S) PRESENT: Ashley Rollins

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

Sheet 2 of 2
PROPERTY ID #:
COUNTY:

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

OWNER: See Page 1 APPLICATION DATE
ADDRESS: DATE EVALUATED: 5/9/19
PROPOSED FACILITY: PROPOSED DESIGN FLOW (.1949): PROPERTY SIZE:
LOCATION OF SITE: 124 Live Oak Ln. Mooresville PROPERTY RECORDED:
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)		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	
1	Front yard middle woodline	0-7"	SCL V.W.SBK	SFriable, SS, SP, SaP	—	40"	—	—	4
		7-40"	Clay MA	Very Firm, Plastic, Expansive, Very sticky					
2	Front Yard middle 50' below woodline	0-12"	SCL V.W. SBK	SFriable, SS Sp Sap	—	12"	—	—	4
		12-38"	MA Rock Controlled SAP	Very Firm + Poorly Drained					
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY:
OTHER(S) PRESENT:

[redacted]
[redacted]
[redacted]

Sheet 1 of 4
PROPERTY ID #: 4655269999
COUNTY: Iredell

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

OWNER: Roger & Kelli McGuffey
ADDRESS: 196 Hazelton Loop Mooresville NC 28117 APPLICATION DATE: [illegible]
PROPOSED FACILITY: SDR PROPOSED DESIGN FLOW (.1949): 600 gpd DATE EVALUATED: 6-27-17
LOCATION OF SITE: 124 Live Oak Lane Mooresville NC 28115 PROPERTY SIZE: 5.63
WATER SUPPLY: ☑ Private ☐ Public ☑ Well ☐ Spring ☐ Other PROPERTY RECORDED: YES
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	Lower P/A (1)	0-12	Br SL GR fi	fr ss po sl sp		(47")			10" 60% .25
		12-47	B/R clay wk fi	sbk/ash fr ss po sl sp	mangane cleaner iron 47" Chroma 2	29-47" fine iron depletions / manganese secretions			
		47-56"	B/R C fr sbk	fi sl sp sl sp					
		56-62"	R/Y clay massive/wk sbk fi sl sp mixed						
4	Upper P/A (1)				37" to mixed Soil wetness Chroma 2	(37") mangane secretions			
2	(2)	0-6	Br SL GR fi	fr sp po sl sp		(48")			8% .225 .2
		6-20	B/R Cl/wk sbk	fr ss sp sl sp	mangane secretions common iron/manganese secretions/yellow mottles Chroma 2 Chroma 2 iron depletions				
		20-48	B/R clay fi sbk	fi ss sp sl sp					
		48-55	R/Y clay wk mod sbk	sbk/stky fi ss sp sl sp		48"			
3	(3)	0-7	Brown Cl WE fi sbk	fr ss sp sl sp		(25")			6% .1/.125 to 25"
		7-19	B/R clay wk fi sbk	fr ss sp sl sp					
		19-32	B/R C wk sbk	fr ss sp sl sp	common manganese/iron depletions Chroma 2 @ 25" common manganese/iron/Chroma 2				
		32-64	Y/R C wk mod sbk/sbk	fr ss p sl sp					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	PPBPS	1) No. DRIP(SUB) w/TS I Pretx.
Site LTAR	0.225	0.1

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: S. Ashley Rollins
OTHER(S) PRESENT: A. Lorne Cook

COMMENTS: Keep Primary System Shallow, bring in Soil Cap of 6" (Group II Material) and divert surface water

Updated February 2014

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

Sheet 2 of 4

[redacted]

PROPERTY ID #: 9655266199

DATE OF EVALUATION: 6/27/17

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
	(4) 6%D	0-5	B CL wk fi sbk	fr ss sp smp		(54")			
		5-23	B/B C wk med sbk/sbk	fr ss sp smp					.225
		23-42	B/R C wk f sbk	fr ss, p, smp	iron depletions @ 23" few-42				.
		42-62	R/B C wk f sbk	fr, ss, p smp	yellow mottles/ masses	many 42-62			.25
					Croma 2 @ 54"				
	(5) 6%L	0-15	B CL wk fi sbk	fr ss sp smp					
		15-39	B/R C wk f sbk	fr ss sp smp	few to comm masses/ 15"-39"				.225
		39-52	R/B C wk f sbk	fr ss p smp	Comm iron depletions/ few masses 39-52"				-
					Croma 2 @ 39"				.25
						(39")			
	(6) 6%L	0-7	B/R SL gr	fr ss sp smp	X BLUE FLAG				
		7-24	R/B brown loam gr	fr ss sp smp		(48")	Above this pit OLD 40		.25
		24-30	brown CL wk fi	fr ss sp smp					-
		30-48	B/R Clay wk med sbk/abk	fr ss p smp	few to comm masses/ iron secretions				48"
		48-58	Yellow/brown C massive vf	vfr vp exp/massive	Croma 2 masses/ iron 48"				
	(7) 6%D	0-17"	B/R SL SL	fr ss po smp		(17")			
		17-36	U/S Layer		>USE 17" Layer Croma 2/ rock like structure				
		36-60'			X This pit between 2 gullys no space				
	(8) 6%D	0-7	R/SL wk fi	fr ss sp smp					
		7-12	R/B CL wk fi sbk	fr ss po smp		(42")			
		12-35"	B/R C wk f abk/sbk	fr ss po smp	few comm masses/ few iron depletions 12-35"				.225
		35-42"	R/B C wk f abk	fr ss p smp	comm iron depletions 35-42" few masses				
		42-54"	yellow C massive	vfr, s, vp, exp	few, croma 2 @ 42"				

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

PROPERTY ID #: 4655266199
DATE OF EVALUATION: 6/27/17
COUNTY: Iredell

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	
9	4/5%	0-3	BSlgr	FrSSSPSEXP	- f[mn]; f[Fe] depl - c[Fe] depl. Chr 2s @ 24" - chr 2's	54	-	-	PS-34" 0.225
		3-7	BClwfsbk	" " " "					
		7-22	RBcwfAbk/sbk	" " P "					
		22-40	BRcwfAbk	" " " "					
		40-54	vwmsbk/mass	F/VF/S/VP Exp					
10	4/3%	0-6	BClwfsbk	FrSSSPSEXP	- f[Fe]depl.	30	-	-	PS-20" 0.1
		6-20	RBcwfAbk	FrSSPSEXP					
		20-30	YBcmass	VF S VP Exp					
11	4/8%	0-3	BClmmsbk	FrSSPSEXP	- c[Fe] depl - lenses of exp clay	16	-	-	VN
		3-16	RBCmass	VF VS VP EXP					
		16-60	varsl/mass	H SSSP<EXP					
12	4/5%	0-10	Bsl gr	FrSSSPSEXP	- chr 2's	60	-	-	VN
		10-15	RBcwmAbk	" " " "					
		15-60	YBCmass	F VS VP Exp					
13	4/10%	0-8	Bsl gr	FrSSSPSEXP	- f[mn] - c[mn] c[Fe]depl.	48	-	-	PS 0.25
		8-40	BRcwmAbk/sbk	" " P "					
		40-48	RYcwmsbk	" " " "					

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

Sheet 4 of 4

PROPERTY ID #: 4655266199

DATE OF EVALUATION: 6/27/17

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	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
14	4/11%	0-5	B scl/sl/gr	FrSSSPSE/vp	- Csap - Poss mixed - Chr 2.5@48	32	UN	—	PS-20 0.1
		5-20	RBCwmsbk	" " P "					
		20-32	RYCl/wmsbk	" " " "					
		32-65	var cl/sap mass	" " SP "					
15	4/10%	0-15	YBC wmsbk	F SP mixed	- Rock contr.	15	UN	42	UN
		15-42	var sl mass	H SS NP NEXP					
		42	Rock						
16	4/10%	0-17	YBC wmsbk	F SP mixed	- Rock contr.	17	UN	44	UN
		17-44	var sl mass	H SS NP NEXP					
		44	Rock						

COMMENTS:

#229405
$500.00
5-6-19

* REDRAW * RELAYOUT * SEPTIC *

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Application For: ( ) 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: SHEA CUSTOM Address: 8008 CORPORATE CENTER DR. Zip: 28226
Applicant Email: STAN@CORNERSTONE3P.COM Phone: 704 301 3229 Alt. Phone: _____
Owner Name: SHEA BUILDERS Address: 8008 CORPORATE CENTER DR Zip: _____
Owner Email: _____ Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 124 LIVE OAK LN.
Subdivision Name: N/A Section/Phase: _____ Lot Number: 13
Driving Directions: TAKE MECKLENBURG HWY NORTH / RIGHT ONTO FAITH RD / RT ONTO LIVE OAK LN.

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: 5
Maximum Number of Occupants: 6
( ) 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: _____ Number of Persons: _____
( ) 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: Stan W. Pauly 5/3/19
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) Septic Improvement Permit (X) 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: (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: (PRINT CLEARLY)

Applicant Name: Robert Price Address: 8008 Corporate Center Dr Zip: 28226
Applicant Email: robert.price@shechomes.com Phone: 980 722 6715 Alt. Phone: 704 543 6237
Owner Name: Todd & Sony Hendrickson Address: PO Box 832 Mooresville NC Zip: 28115
Owner Email: Sony.seamless@yahoo.com Phone: 704 280 5442 Alt. Phone: _____

Property Information:

Street Address: 124 Live Oak Lane Mooresville NC
Subdivision Name: LG Caldwell East Section/Phase: _____ Lot Number: 13
Driving Directions: 77N to exit 31, right onto Langtree Rd, left onto Mecklenburg Hwy right onto Faith Rd, destination is on right

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: 5
Maximum Number of Occupants: 10
( ) Swimming Pool
( ) Other Addition/Structure: _____
Non-Residential Site Development: Type of Business: _____
Square Footage of Building: 5164 Max. Number of Employees: ____ Max. Number of Seats/Beds/Other: ____

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

Water Supply: ( ) Replacement Well – Reason: _____
( ) Multi-connection Well Number of Houses: 1 Number of Persons: 5
(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 (X) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other: _____

Please answer the following to the best of your ability:
( ) Yes (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (X) No Is the site subject to approval by any other public agency?

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

Signature: Robert Price 7/17/18
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

8/21/17 @ 10:00

RECEIVED AUG 16 2017

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

Paid $500.00
229405

Application For:

( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) Septic Improvement Permit ( ) Authorization to Construct ( ) Existing System Inspection ( ) Septic System Repai

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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:

Applicant Name: Rollans Soil **Address:** P.O. Box 832 Mooresville NC 28115 **Phone:** 7047465046

Owner Name: Roger & Kelli McGuffey **Address:** 196 Hazelton Loop Mooresville NC 28117 **Phone:**

Property Information:

Street Address: 124 Live Oak Lane Mooresville NC 28115

Subdivision Name: LG Caldwell **Section/Phase:** **Lot Number:** 13

Driving Directions: Mack Hwy S., L on Faith, R on Live Oak, lot on Rt.

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: 5
Maximum Number of Occupants: 10
( ) Swimming Pool
( ) Other Addition/Structure:

( ) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) 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:

(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 (X) Innovative (X) Modified Conventional ( ) Other:

Please answer the following to the best of your ability:

( ) Yes (X) No **Does the site contain any jurisdictional wetlands?**
( ) Yes (X) No **Is any non-domestic sewage (i.e. industrial) to be generated?**
( ) Yes (X) No **Is the site subject to approval by any other public agency?**

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

Signature: _____ 8/14/17

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

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, Todd Hendrickson, am the legal owner(s) of the property located at 104 Live Oak Ln., identified as PIN (Parcel Identification Number) 4655266199, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Shea Building/Stan Pressley, 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.

Todd Hendrickson — Signature of Owner(s) — Date

Chris Hendrickson 5/3/18 — Signature of Witness — Date

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

DocuSign Envelope ID: 421A90CD-6B53-4020-9B6E-BC0F0826D53D

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.

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2. I, Todd Hendrickson, am the legal owner(s) of the property located at 124 Live Oak Lane, identified as PIN (Parcel Identification Number) 4655266199, located in Iredell County, North Carolina. I do hereby authorize **(print legal representative/company name)** Shea Custom 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.

DocuSigned by: _____ 7/17/2018

Signature of Owner(s) Date

Mooresville - Environmental Health
adrienne.shea@co.iredell.nc.us
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

Public Health
Prevent. Promote. Protect
Iredell County Health Department

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public Health
Prevent. Promote. Protect
Iredell County Health Department

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, Roger McGuffey, am the legal owner(s) of the property located at 124 Live Oak, Mooresville, NC. 28115, identified as PIN (Parcel Identification Number) 4655-26-6199.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Samuel Ashley Rollins Rollins Soils Environmental Services, 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.

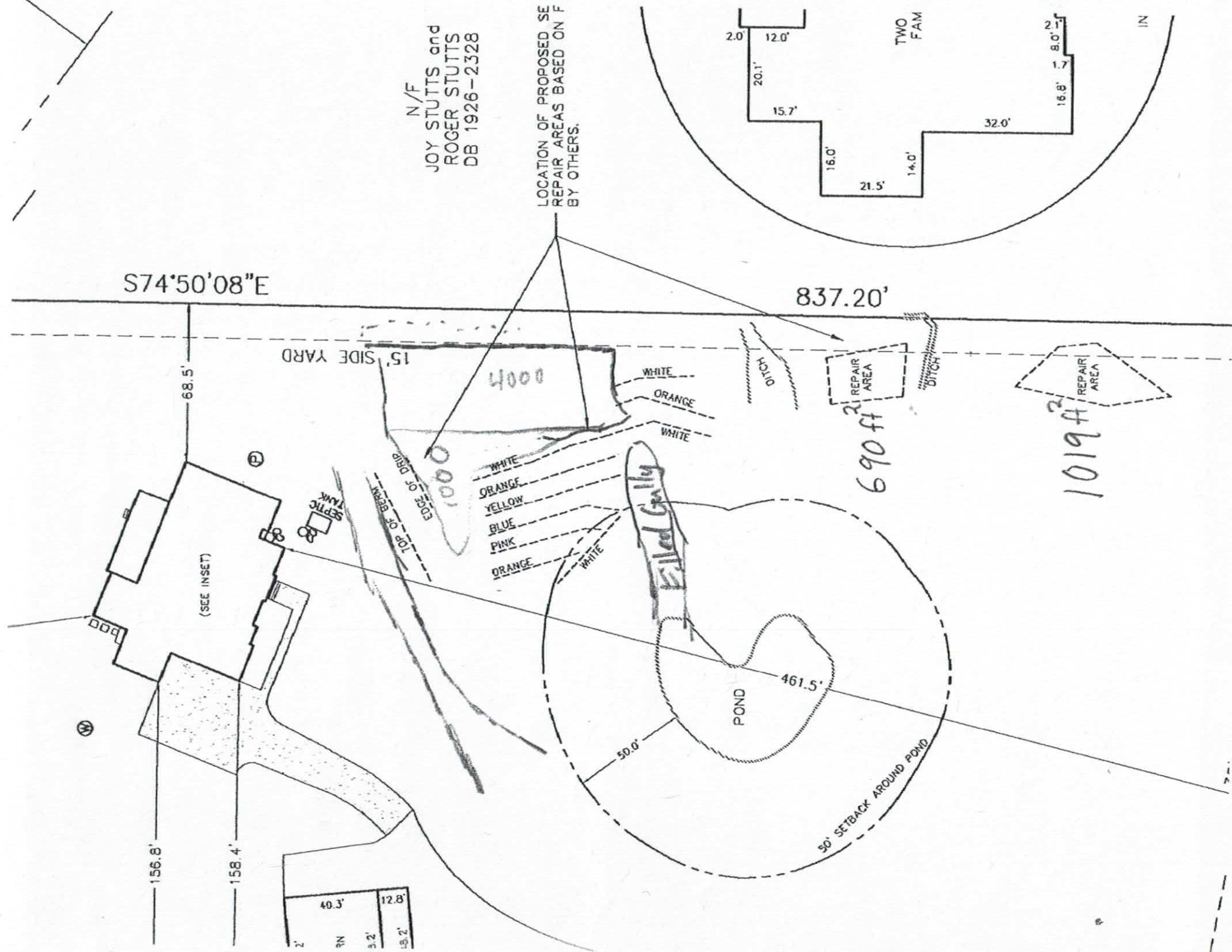
Signature of Owner(s) 8/2/2017 Date

Kelli C. McGuffey 8/2/17
Signature of Witness Date

Please return this signed form to the appropriate office:

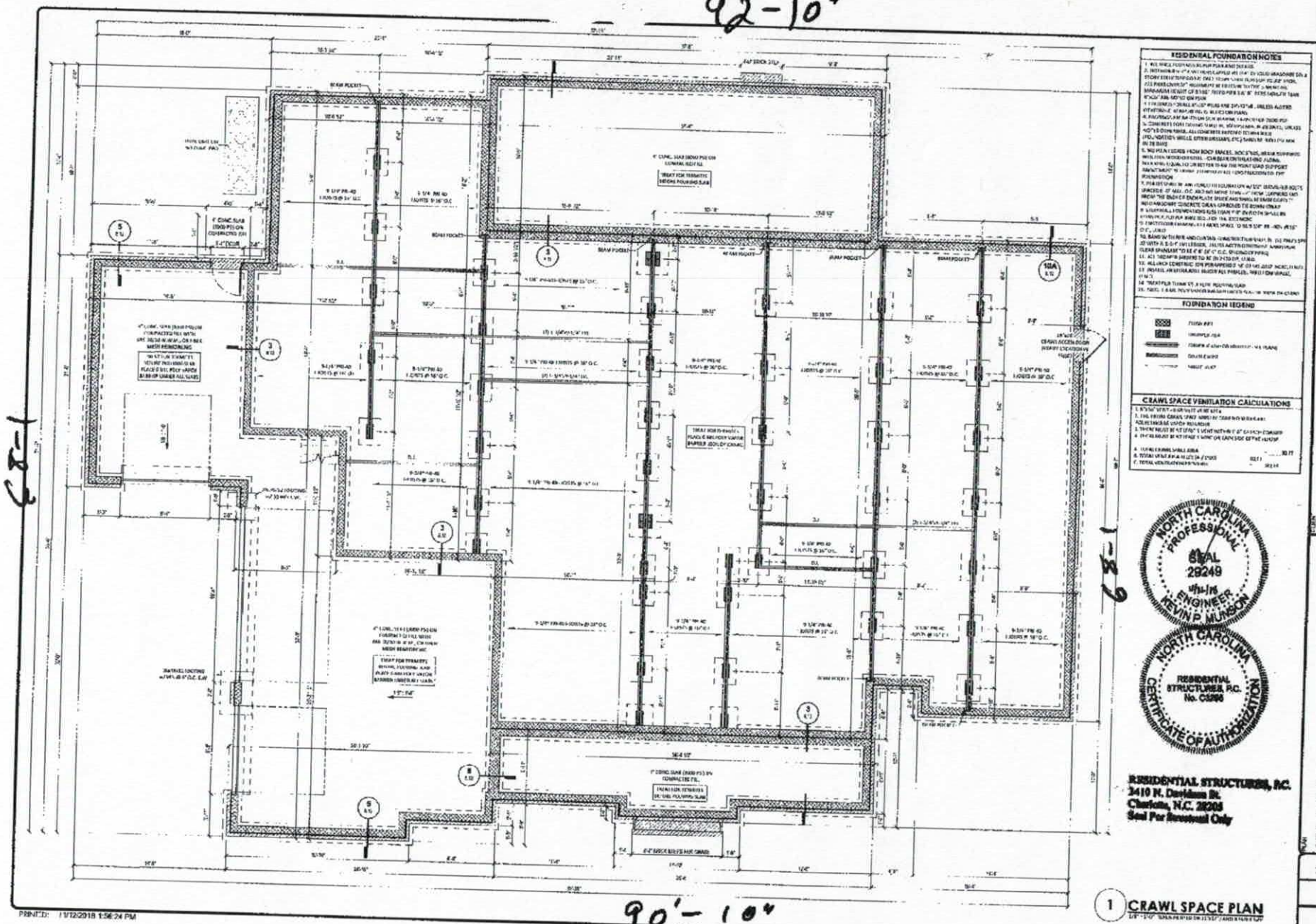
Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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


N/F
JOY STUTTS and
ROGER STUTTS
DB 1926-2328
LOCATION OF PROPOSED SE
REPAIR AREAS BASED ON F
BY OTHERS.
TWO
FAM
2.0'
12.0'
20.1'
15.7'
16.0'
21.5'
14.0'
32.0'
16.8'
8.0'
1.7
2.
S74°50'08"E
837.20'
15' SIDE YARD
68.5'
4000
WHITE
ORANGE
WHITE
WHITE
ORANGE
YELLOW
BLUE
PINK
ORANGE
WHITE
TOP OF BEBB
EDGE of DRIP
1000
DITCH
REPAIR AREA
690 ft²
DITCH
REPAIR AREA
1019 ft²
SEPTIC TANK
(SEE INSET)
Filled Gully
POND
461.5'
50.0'
50' SETBACK AROUND POND
156.8'
158.4'
40.3'
12.8'

124 LIVE OAK LN,

92'-10"



C.S.-1

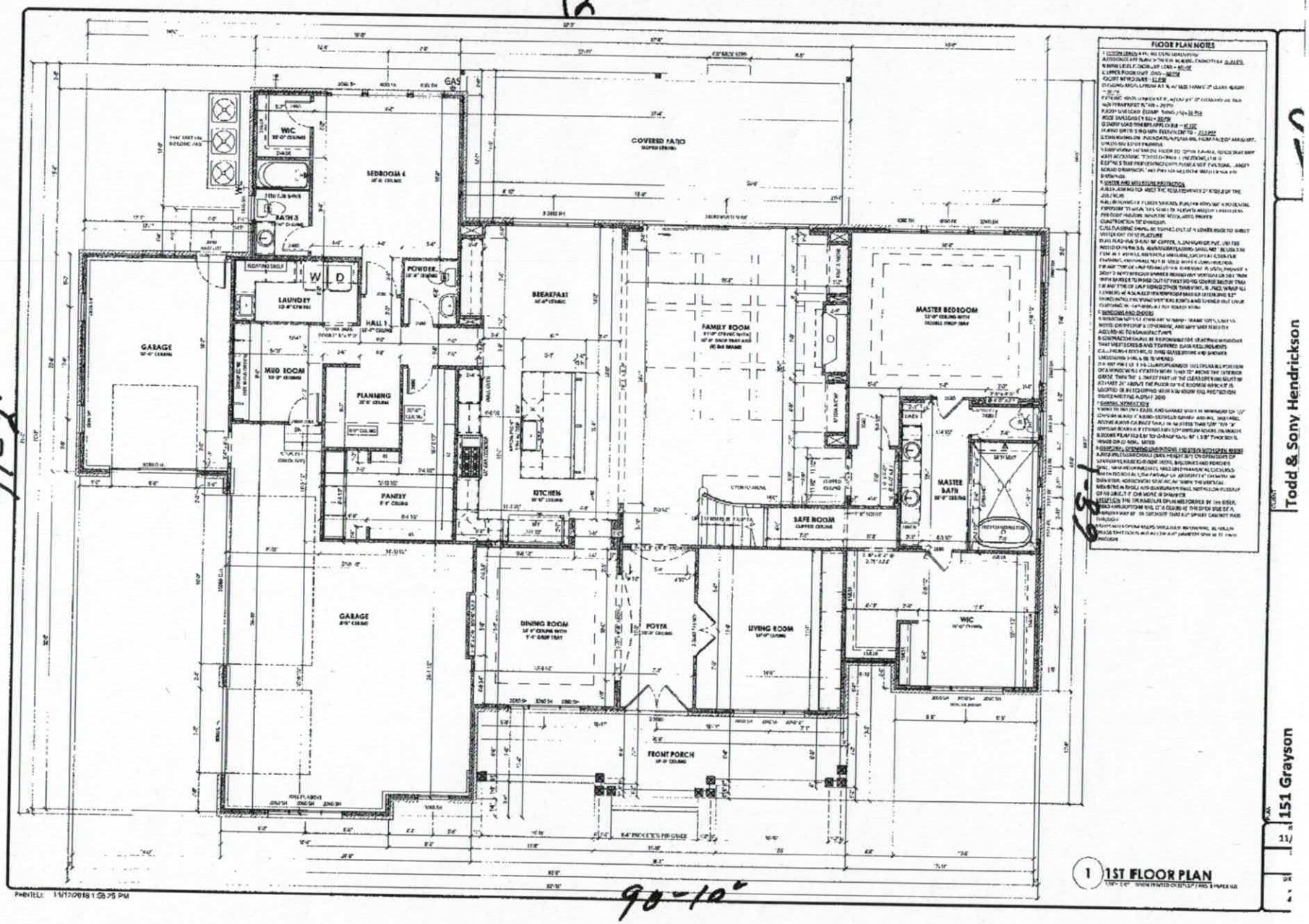
C.S.-1

90'-10"

PRINTED: 11/12/2018 1:56:24 PM

124 LIVE OAK LN,

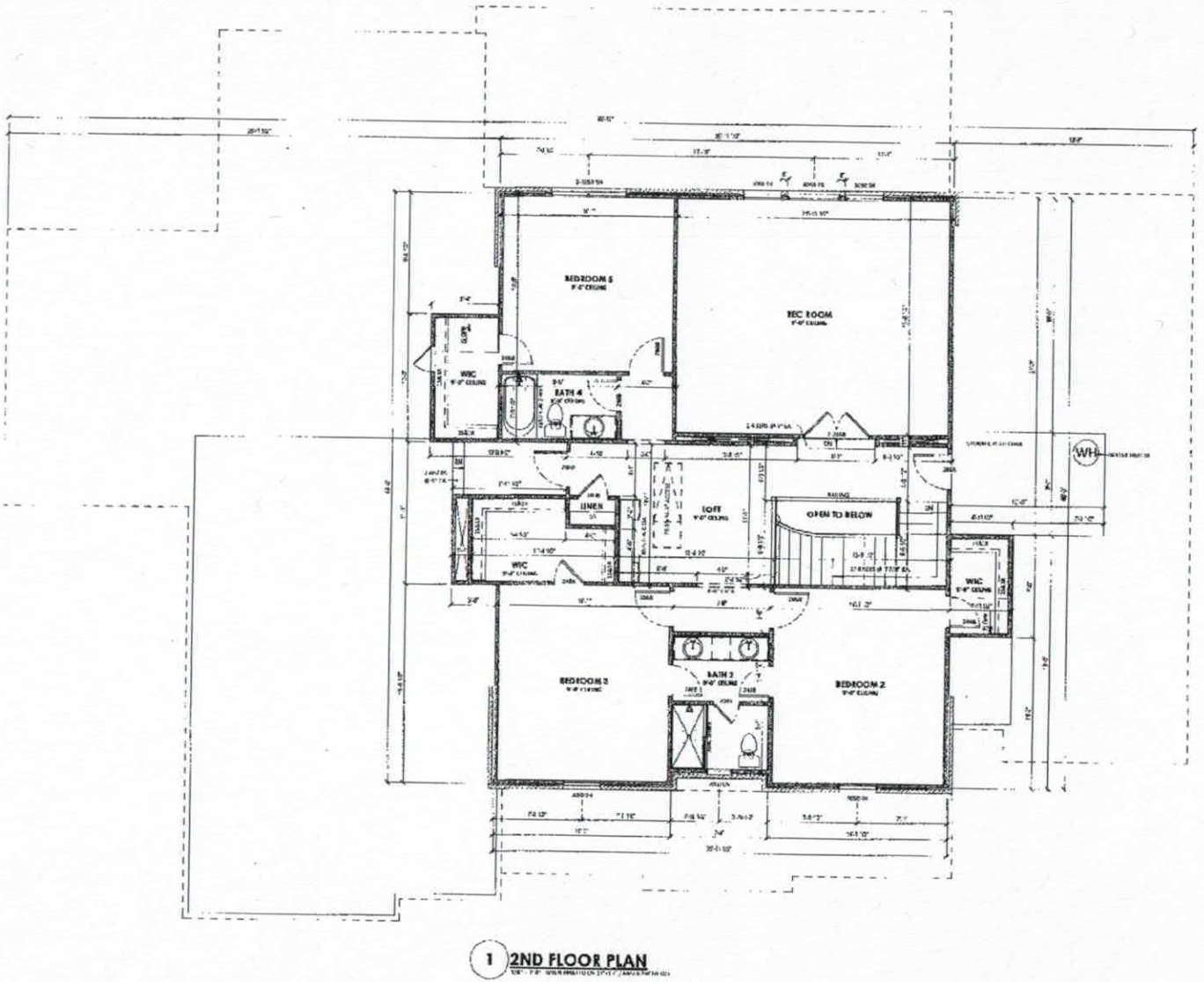
92'



Todd & Sony Hendrickson

151 Grayson

* 124 Live Oak Ln *



1 2ND FLOOR PLAN

FLOOR PLAN NOTES

Shea CUSTOM

PLAN: 151 Grayson
SERIES: 150 Series
SHEET: SECOND FLOOR PLAN

SUBDIVISION: Todd & Sony Hendrickson
ADDRESS: 124 Live Oak Lane Mooresville, NC
LOT NO.:
JOB NO.: CU50258-151AD-LH

ISSUE DATE: 11/12/2018
DRAWN BY: SKC
SHEET NUMBER: 2.20

PRINTED: 11/12/2018 1:56:27 PM

IREDELL COUNTY

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

APPLICATION NUMBER
229405
Issue Date: 08/14/2017

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4655266199.000	124 LIVE OAK LANE, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: MCGUFFEY ROGER D+KELLI C	Applicant: ROLLANS SOIL & ENVIRON
Address: 196 HAZELTON LOOP MOORESVILLE, NC 28117	Address: 470 NORTH BROAD STREET SUITE D MOORESVILLE, NC 28115
Phone:	Phone: 704-658-1723

Use Requested	Zone Code
SFD REPLACING PERMIT 139921	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
5.630	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: 8/14/17

Permit Number	111953	TOTAL FEES:	$ 77.25