...D–ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # AP 306545 / 21-127

PIN # 4655462651

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

APPLICANT/OWNER: Jose Luis Garcia | APPLICANT ADDRESS: 11215 Johnson Davis Rd Huntersville, NC 28078

SITE ADDRESS: 107 Jami Wind Mooresville, NC 28115 | PHONE: 7047077524 | ALT. PHONE

SITE DIRECTIONS: Hwy 115 S TL Faith Rd TL Jenny Marie TR Jami Wind on left | SAP CONTROLLED: ☐ YES ☒ NO

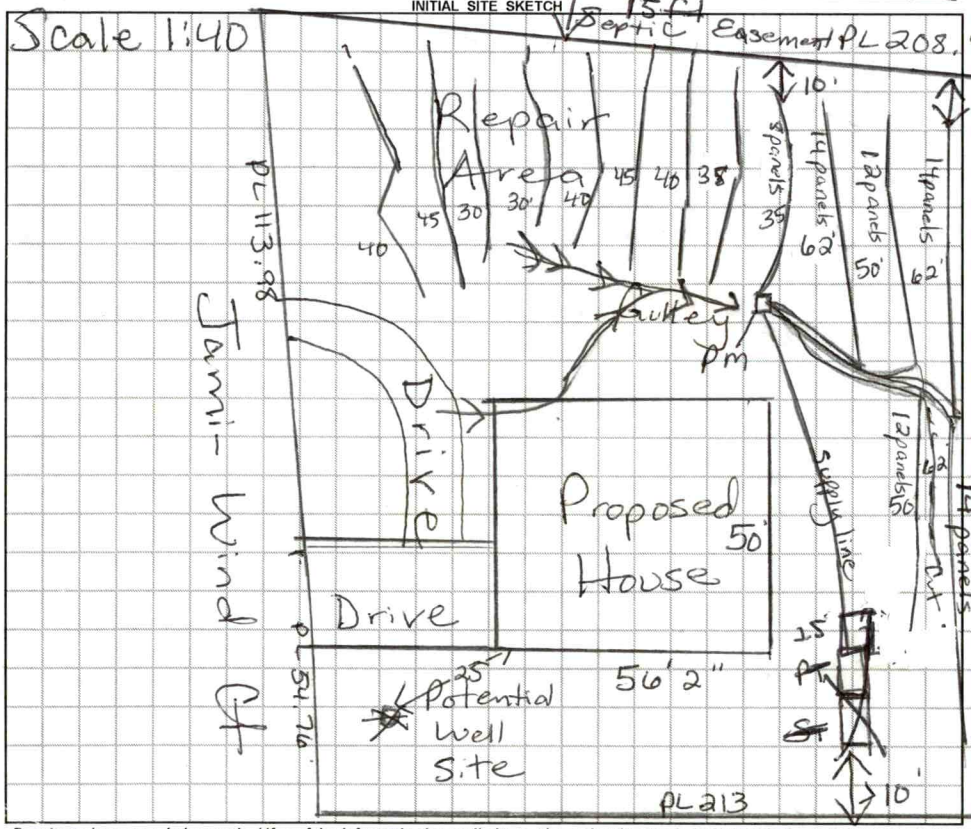
SUBDIVISION: Serene Lake | SECTION: 2 | LOT # 14 | LOT AREA: .747 Acre | DESIGN FLOW: 480 gpd | L.T.A.R.: F .25/.3 Rep

Septic Tank	1000 (gal)	STB	794	Date	8-10-21	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms 4	Water Supply
Pump Tank	1000 (gal)	PT	283	Date	7-8-21	System Description:	Pump-PM-Panel Block			☐ Business	No. Persons 8	☒ Private
Pump Make	Liberty	Model	290	Serial #		Repair System Description:	LP PPBPS			☐ Other	No. Employees	☐ Public
# Nitrification Fields		# Lines	60	Linear Ft	320' min	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☐ Crawl Space	☐ Community
Trench Width	Min 24"	Trench Bottom Depth(Low side)	33" max	Gravel Depth	N/A		☐ GRAVITY	☒ PRESSURE		☒ Basement w/plumbing	☐ Basement w/o plumbing	

Comments / Conditions: 50ft buffer must be staked at time of Septic Installation & inspection.

Must "properly" fill all gullies.
Note: Slightly grade out area near rear of lot & blend topography.

INITIAL SITE SKETCH



AS BUILT SKETCH

Red Filter installed
Pressure Manifold (PM)
Use: 3/4" sch 40 tap for 62' lines
3/4" sch 80 tap for 50' lines
1/2" sch 40 tap for 35' line
~~Drill 5/32" hole in panels~~

Crystal Lake

~~22ft from House~~ to Supply line
~~20ft from House~~ to tanks

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 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: Acceptance of Permit Rcvd | Date: 6.2.2020 | Installed by: (Carlos) Lago Vista

IMPROVEMENT PERMIT by: Maria Dotson | Date: 5/20/2020 | OPERATION PERMIT by: Cory Whitt | Date: 12/6/21

AUTHORIZATION TO CONSTRUCT by: Maria Dotson | Date: 5/26/2020 | 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.

IREDELL COUNTY HEALTH DEPARTMENT
JANE HINSON, RN BSN MS
HEALTH DIRECTOR

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

ACKNOWLEDGEMENT OF ACCEPTANCE OF PERMIT DESIGN AND CONDITIONS

Any permit requiring a signature must have this form signed by the property owner or their authorized agent. Once this form is signed and returned to Environmental Health an official copy of the permit will be emailed to the email that you provide.

I, Jose Luis Garcia, am the legal owner or the agent of the property located at 107 Jami Wild Mooresville NC, identified as PIN(Parcel Identification Number) 4655462651, located in Iredell County, North Carolina.
Permit # 214127.

I do hereby agree to the permit design and the conditions of this permit.

5/20/2020
Signature of Owner/Authorized Agent Date

5/20/2020
Signature of Witness Date

garciasdrywall5847@gmail.com
email

Central Office (Health Dept.)
318 Turnersburg Hwy
Statesville, NC 28625
704 878-5300

Mooresville – Environmental Health
610 E. Center Avenue
Mooresville, NC 28115
704 660-3625

Statesville - Environmental Health
349 N. Center Street
Statesville, NC 28677
704 878-5305 x3456

http://www.co.iredell.nc.us/Departments/Health/

JaVigarciaem1agmail

	Date	Initials
Drain Lines Checked	9/13/21	
Tanks Checked	9/13/21	
Pressure Manifold or Valve Box Checked	9/13/21	
Pressure Head Set	9/13/21	
Electrical Checked	12/6/21	AW
Floats Set	9/13/21	
Alarm Checked	12/6/21	AW
Maintenance Contract Y (N)		

~~Alarm/Elect~~ Box Only 10" above grade ✓

PT Riser not 6" above grade ✓

Fee AP- 306545 RECEIVED APR 1 4 2020

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED Paid $320.00

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM* #214127

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: Jose Luis Garcia Address: 11215 Johnson Davis rd Huntersville Zip: 28078
Applicant Email: Garciasdrywall5847@gmail.com Phone: 7047077524 Alt. Phone: _____
Owner Name: _____ Address: _____ Zip: _____
Owner Email: _____ Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 107 Jami Wind Mooresville NC
Subdivision Name: Serene Lake Section/Phase: 2 Lot Number: 14
Driving Directions: 107 Jami Wind court lot #14

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: 5
( ) 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: 3800 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: New

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: _____ 3-23-2020
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

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, Matthew Fallaw, am the legal owner(s) of the property located at 107 & 113 Jane-Wind Court, Mooresville, identified as PIN (Parcel Identification Number) 4655464610 & 4655462651, located in Iredell County, North Carolina.

Ben McGrary, Blalock Development
I do hereby authorize (print legal representative/company name)
Michael Athanas, Michael Athanas & Associates, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

- Application for Improvement Permit (IP) / Authorization to Construct (AC)
- Improvement Permit (IP) / Authorization to Construct (AC)
- Application for soil-site evaluation (new/repair)
- Application/permit for private drinking water well/well abandonment
- Application for Compliance Inspection

I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

Matthew Fallaw — 2/25/16 — Stacie Shea — 2/25/16

Signature of Owner(s) | Date | 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

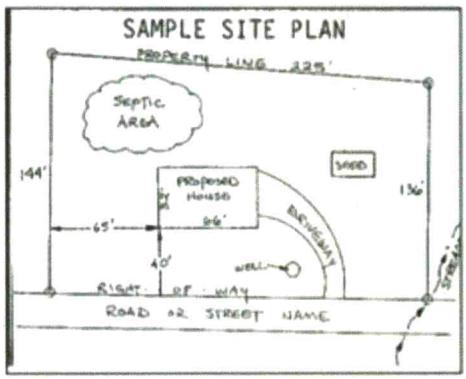
Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

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:

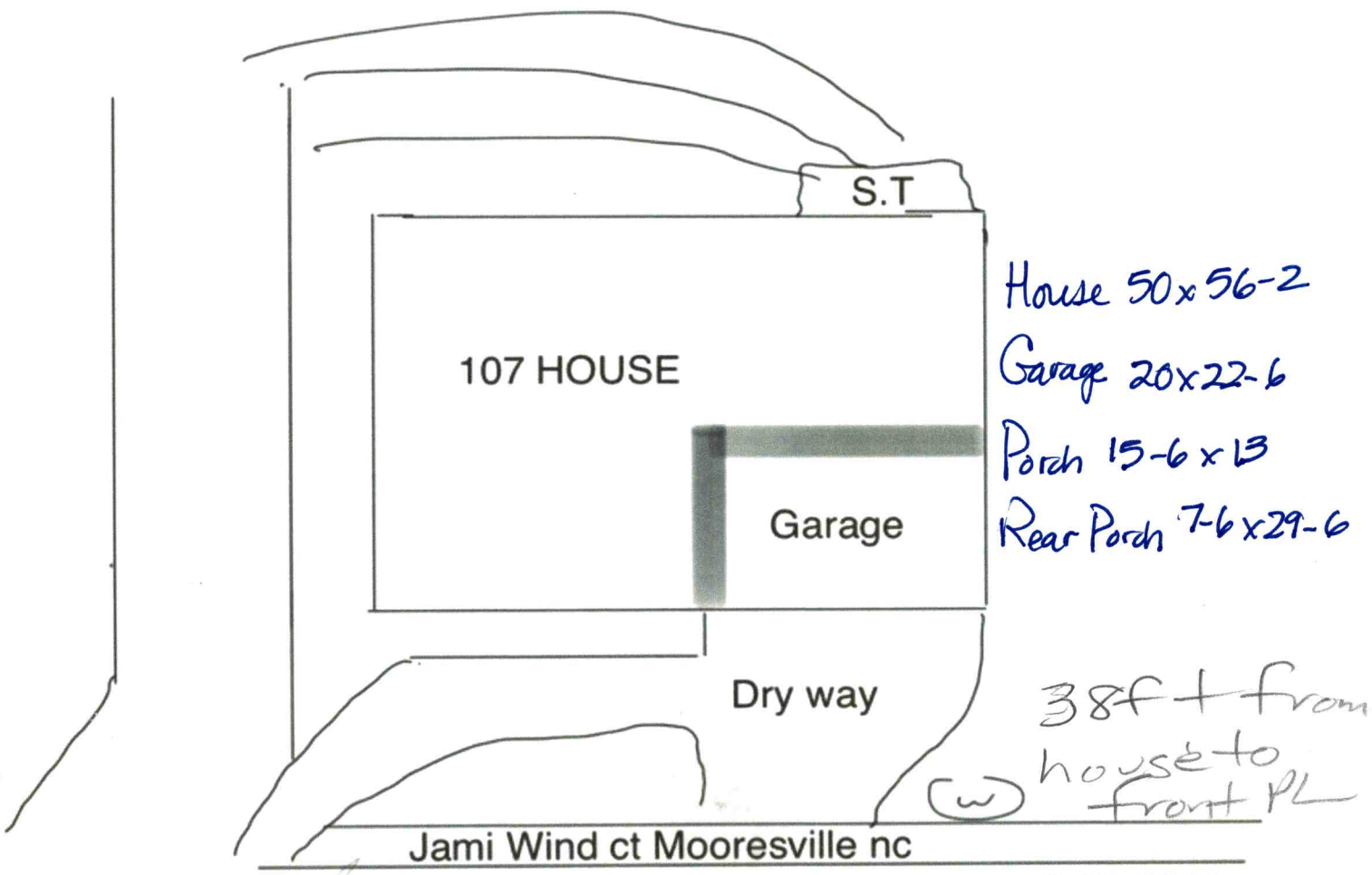
- (X) **Property Line measurements are clearly identified**
- (X) **All proposed structures are indicated**
- (X) **Front and side setbacks from property line**
- (X) **Preferred driveway location and well location**
- (X) **Area you prefer your septic system to be placed**
- (X) **North arrow, or other 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**

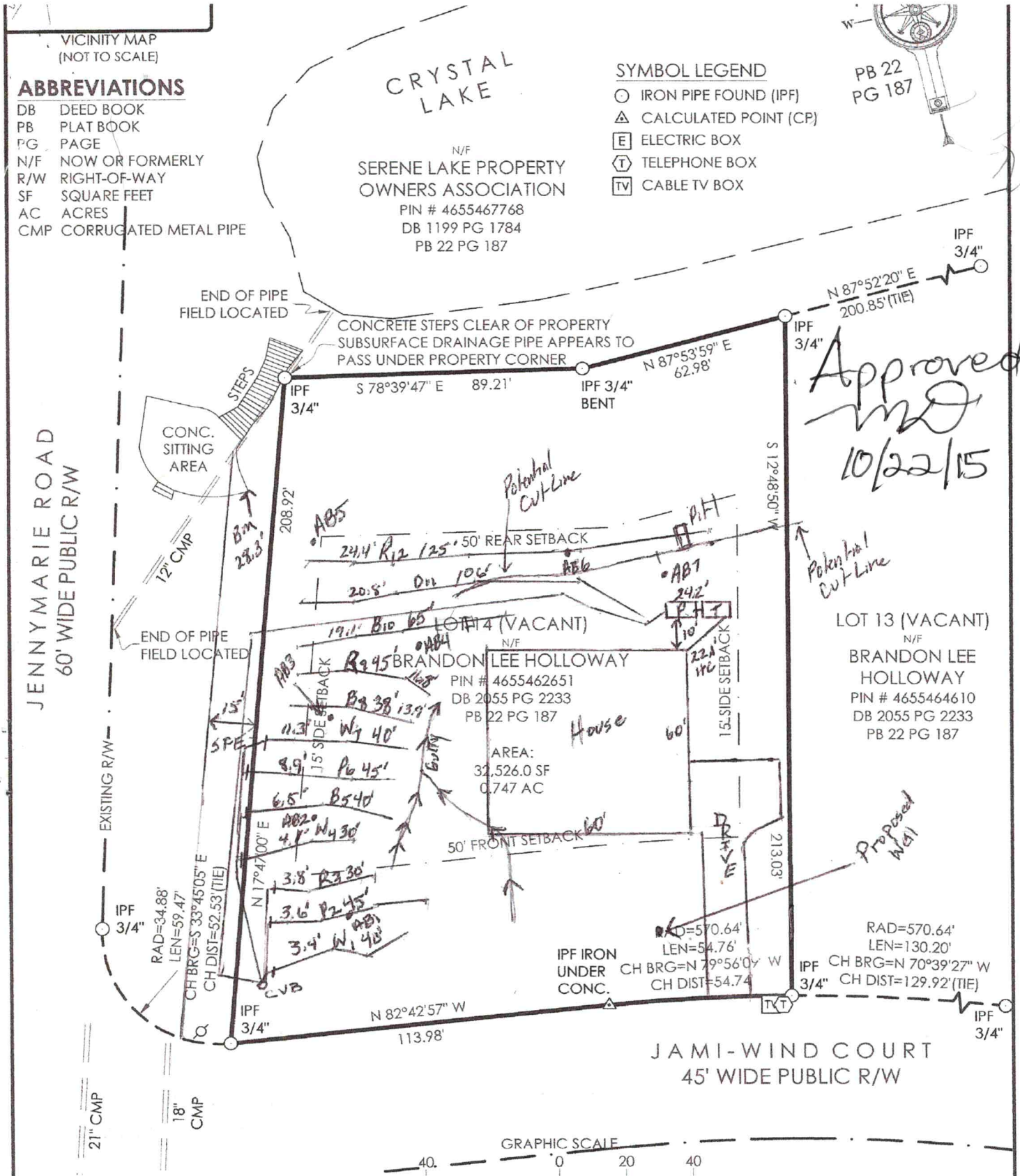
USE THIS SPACE TO DRAW YOUR SITE PLAN

Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site



Signature: _____ 3-23-2020

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



I CERTIFY THAT THIS MAP WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION (DEED DESCRIPTION RECORDED IN BOOK 2055, PAGE 2233); THAT THE BOUNDARIES NOT SURVEYED ARE INDICATED AS DRAWN FROM INFORMATION REFERENCED HEREON; THAT THE RATIO OF PRECISION AS CALCULATED EXCEEDS 1:10,000; THAT THIS MAP MEETS THE REQUIREMENTS OF THE STANDARDS OF PRACTICE FOR LAND SURVEYING IN NORTH CAROLINA (21 NCAC 56.1600).
WITNESS MY ORIGINAL SIGNATURE, REGISTRATION NUMBER

SURVEY OF PROPERTY for:
MATT GALLAGHER

107 JAMI-WIND COURT
LOT 14, SERENE LAKE - SECTION 2
CODDLE CREEK TOWNSHIP
IREDELL COUNTY, NC

Compass Geomatics, PLLC Land Survey Division of:



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

Reference: Data Sheet for Lot 14 Serene Lake; ~~113~~ 107 Jami-Wind Ct.; Iredell County, NC

House Footprint: 60'x60'
Building Setback: 50' Front, 15' Side, 50' Rear
Water Source: Private Well
Number of Bedrooms: 4/480GPD
Proposed LTAR: 0.3 gpd/ft2 Initial; 0.25 gpd/ft2 Repair
Suggested System Type: PPBPS/9' Centers
Repair System Type: PPBPS/9' Centers
Distribution: LP-CVB
Flow per Orifice: .59
Hole Size & Material: 3/16"
Number of Panels: 61
System Flow: 35.99 gal/min
Dosing Volume: 219.6 gal/dose
Pump Run Time: 6.1 min
Total Linear Footage: 270'
Trench Bottom Square Footage: 810 sq.ft
Elevation Head: 25.8'
Friction Head: 7.70'
Pressure Head: 2'
Total Dynamic Head: 35.5'
Supply Line Length: 245'
Proposed Trench Bottom Depth: 33"
Septic/ Pump tank size: 1000 ST, ~~1000~~ PT

Approved
MD
10/21/15

Line	Design Length	# of Panels	Actual Length	Elevation
White 1	**40'**	**9**	**40'**	**3.4'**
Pink 2	**45'**	**10**	**45'**	**3.6'**
Red 3	**30'**	**7**	**30'**	**3.8'**
White 4	**30'**	**7**	**32'**	**4.1'**
Blue 5	**40'**	**9**	**42'**	**6.5'**
Pink 6	**45'**	**10**	**45'**	**8.9'**
White 7	**40'**	**9**	**43'**	**11.3'**
Blue 8			38'	13.9'

Red 9			45'	16.8'
Blue 10			65'	19.1'
Orange 11			106'	20.8'
Red 12			125'	24.4'

Initial System: 270' **Repair System:** 379' **CVB**: 3.4'
Pump Tank: 24.2' **House Corner:** 22.1'
Bench Mark: 28.3' Top of bricks on concrete sitting area

Comments:
The purpose of this evaluation is to permit the property for a 4-bedroom residence.

- All gullies indicated on the site plan should be filled to allow the system to be installed as shown.
- Please note that there is a potential cut area located near the rear of the lot. It has been denoted on the site plan. If this area is deemed a cut by Iredell County Health Department, then the area will need to be slightly graded to blend the topography. This will keep the system from having to be the required 15' setback from a cut.
- Part of the system will be in the previously granted easement as shown on the site plan. Easement recording has been attached to report.
- Keep the pressure line 10' from the cut of the house site.
- The house site has been located using orange pin flags.

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

PROPERTY ID #: Lot 14; Serene Lake
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Brandon Holloway APPLICATION DATE
ADDRESS: 147 English Hills Dr. Mooresville, NC 28115 DATE EVALUATED: 9/23/2015
PROPOSED FACILITY: 4-Bedroom Residence PROPOSED DESIGN FLOW (.1949): 480 GPD PROPERTY SIZE: 0.75 Acres
LOCATION OF SITE: Lot 14; Serene Lake Subdivision; 107 Jami-Wind Court PROPERTY RECORDED: 3/26/2010
WATER SUPPLY: Ξ Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: x Auger Boring x Pit ☐ Cut TYPE OF WASTEWATER: Ξ Sewage ☐ Industrial Process ☐ Mixed

Approved MD 10/21/15

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
AB 1	L 2-3%	0"-42"	R C SBK	SS SP FR SEXP		55"	Few to common saporlite inclusions 42"-55"	None	.3+
		42"-55"	R CL WSBK	SS SP FR SEXP					
AB 2	L 12-13%	0"-43"	R C SBK	SS SP FR SEXP		55"	Few to common saporlite inclusions 43"-55"	None	.3+
		43"-55"	R CL WSBK	SS SP FR SEXP					
AB 3	L 20-21%	0"-11"	Br CL WSBK	SS SP FR SEXP		55"	Few to common saporlite inclusions 36"-55"	None	.3+
		11"-36"	R C WSBK	SS SP FR SEXP					
		36"-55"	R CL WSBK	SS SP FR SEXP					
AB 4	L 20-21%	0"-22"	RBr CL WSBK	SS SP FR SEXP		55"		None	.3+
		22"-55"	R C SBK	SS SP FR SEXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	810 ft2	1137 ft2
System Type(s)	PPBPS	PPBPS
Site LTAR	.3	.25

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: Michael Athanas and Associates
OTHER(S) PRESENT:

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet)

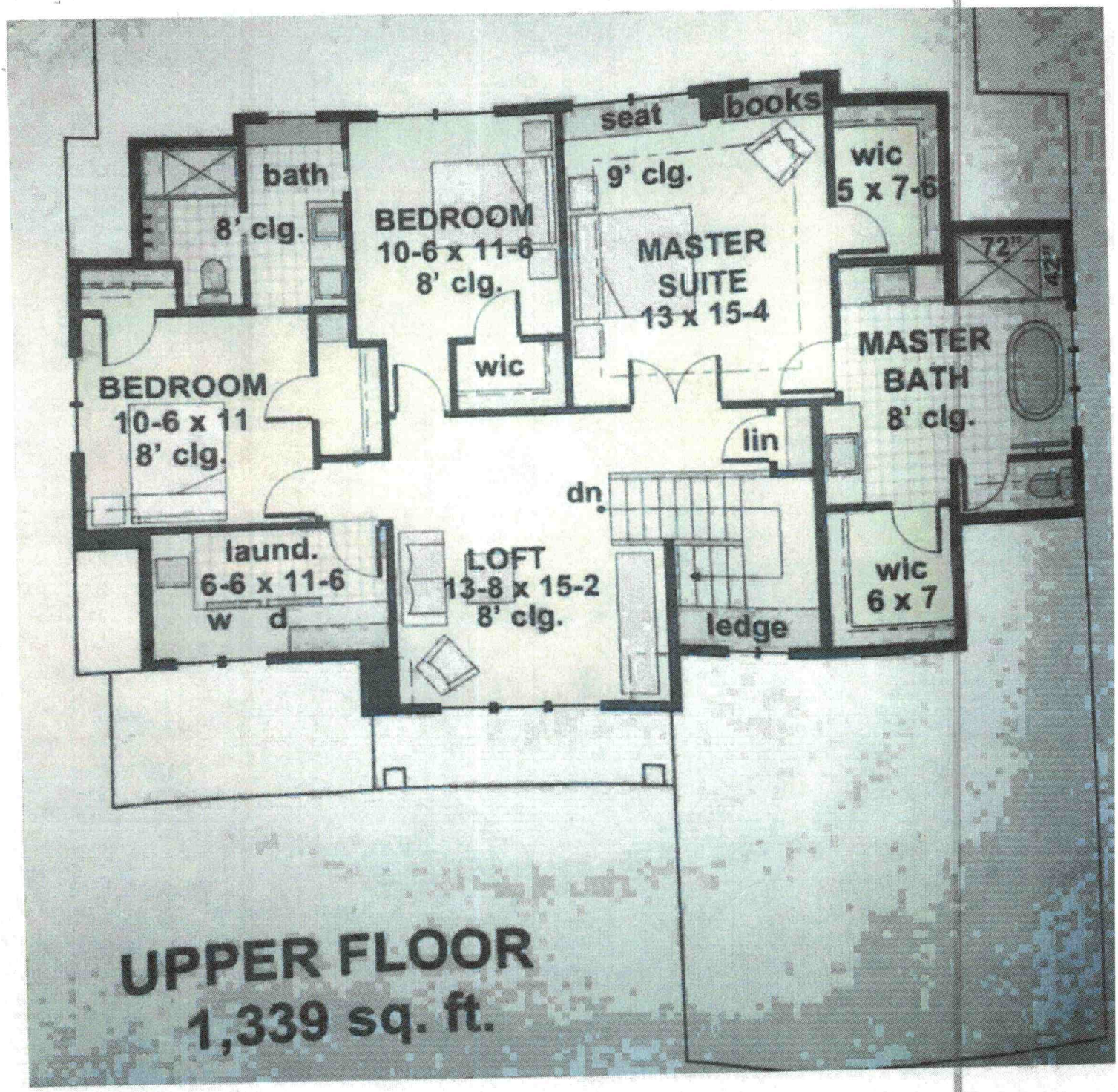
DEPARTMENT OF ENVIRONMENT
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

PROPERTY ID #: Lot 14 Serene Lake; Jami-Wind Ct.
DATE OF EVALUATION: 9/23/2015
COUNTY: Iredell

Approved MK 10/21/15

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
AB 5	L 20-21%	0"-10"	RBr CL WSBK	SS SP FR SEXP	Few YBrs 10"-20"	55"	Few to common Saporlite inclusions 40"-48"	None	.25
		10"-40"	YR C WSBK	SS SP FR SEXP					
		40"-55"	YR CL WSBK	SS SP FR SEXP					
AB 6	L 20-21%	0"-23"	RBr SCL WSBK	SS SP FR SEXP	Chr. 2 @ 62"	50"	Few to common Saporlite inclusions 38"-50". Litho colors present. PS	None	.25
		23"-38"	RBr C SBK	SS SP FR SEXP					
		38"-50"	RY CL WSBK	SS SP FR SEXP					
		50"-65"	V L Saporlite M	NS NP VFR NEXP					
AB 7	L 20-21%	0"-18"	RBr CL WSBK	SS SP FR SEXP	Few YBrs and Mn 38"-55"	55"	Few to common Saporlite inclusions 38"-55"	None	.25
		18"-38"	RBr C SBK	SS SP FR SEXP					
		38"-55"	RBr CL WSBK	SS SP FR SEXP					
Pit 1	L 20-21%	0"-39"	R C SBK	SS SP FR SEXP		55"	Few to common Saporlite inclusions 39"-56"	None	.3+
		39"-56"	R CL WSBK	SS SP FR SEXP					
		56"-80"	V L Saporlite M	NS NP VFR NEXP					

COMMENTS: _____

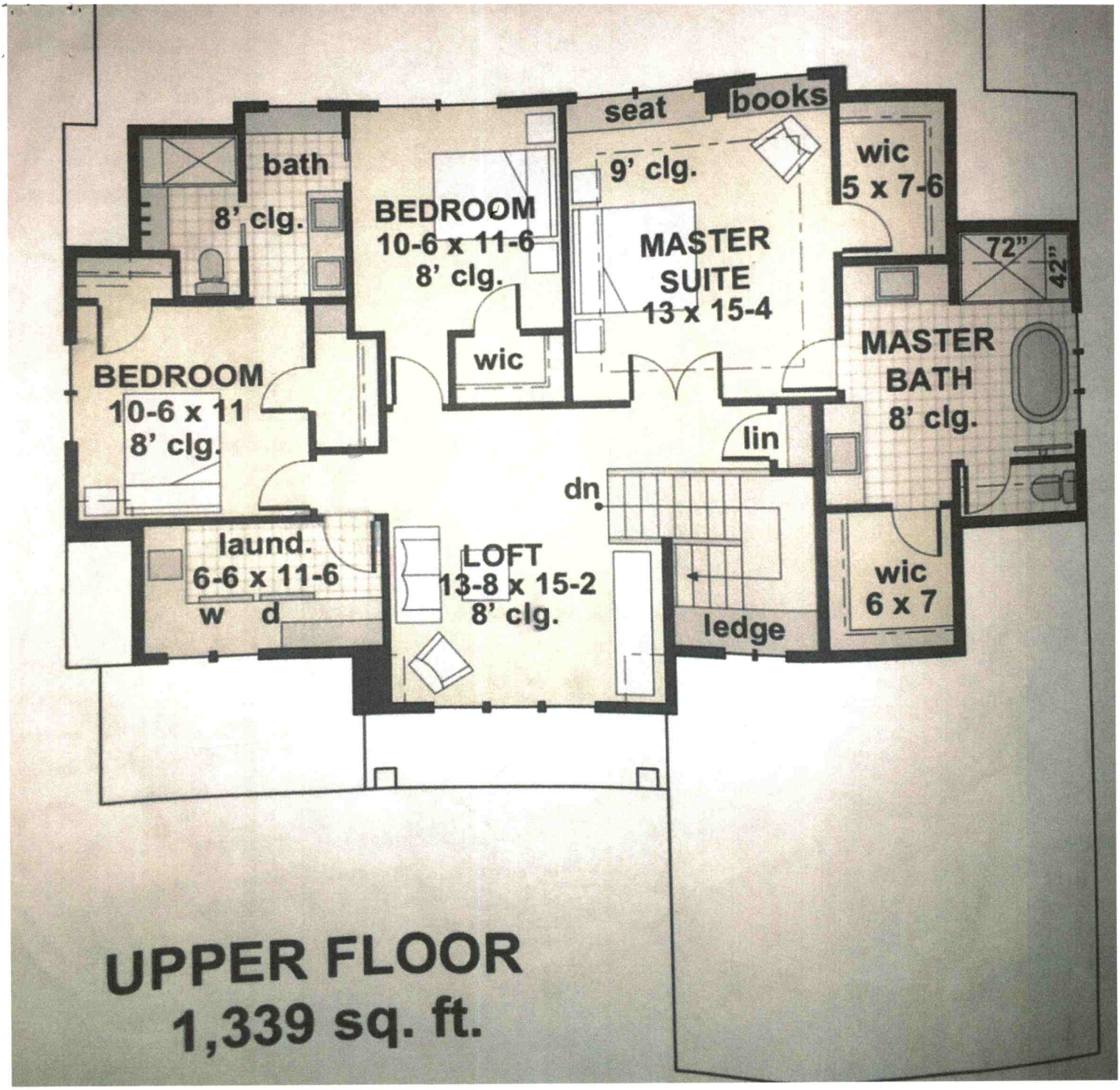


SIGN HERE

Acknowledgement Of
Plans Submittal ONLY!

Date 5/20/2020

Date 5/22/2020



Acknowledgement Of
Plans Submittal ONLY!

Date 5/20/2020

Date

IREDELL COUNTY

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

APPLICATION NUMBER
214127
Issue Date: 10/09/2015

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4655462651.000	107 JAMI WIND COURT, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: HOLLOWAY BRANDON LEE	Applicant: HOLLOWAY BRANDON L+CHR
Address: 147 ENGLISH HILLS DR MOORESVILLE, NC 28115	Address: 147 ENGLISH HILLS DR MOORESVILLE, NC 28115
Phone:	Phone:

Use Requested	Zone Code
SFD	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.747	35.00	50.00	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	51189	TOTAL FEES:	$ 77.25