ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # AP 324479

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

PIN # 4659 -- 06 -- 5547

APPLICANT/OWNER: Freedom Homes

APPLICANT ADDRESS: 1124 Charlotte Highway, Troutman NC 28166

SITE ADDRESS: 126 Crystal Bay Dr. Mooresville NC 28115

PHONE: 704-881-2326

ALT. PHONE

SITE DIRECTIONS: (N) NC 21 → (L) Clear Springs → (R) Crystal Bay → Lot on (L)

SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Windward Point

SECTION: LOT # 35 & 36 LOT AREA: 1.22ac

DESIGN FLOW: 360 gpd L.T.A.R.: 0.275/0.1(R)

Septic Tank	1000 (gal)	STB	Date	☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 3
Pump Tank	(gal)	PT	Date	System Description:	25% Reduction			☐ Business	No. Persons 6
Pump Make		Model	Serial #	Repair System Description:	Drip 3600 ft 2			☐ Other	No. Employees
# Nitrification Fields	1	# Lines 6	Linear Ft 328'	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☑ Crawl Space
Trench Width	36"	Trench Bottom Depth(Low side)	30"	Gravel Depth	N/A	☒ GRAVITY	☐ PRESSURE	☐ Basement w/ plumbing	☐ Basement w/o plumbing

Water Supply: ☑ Private ☐ Public ☐ Community

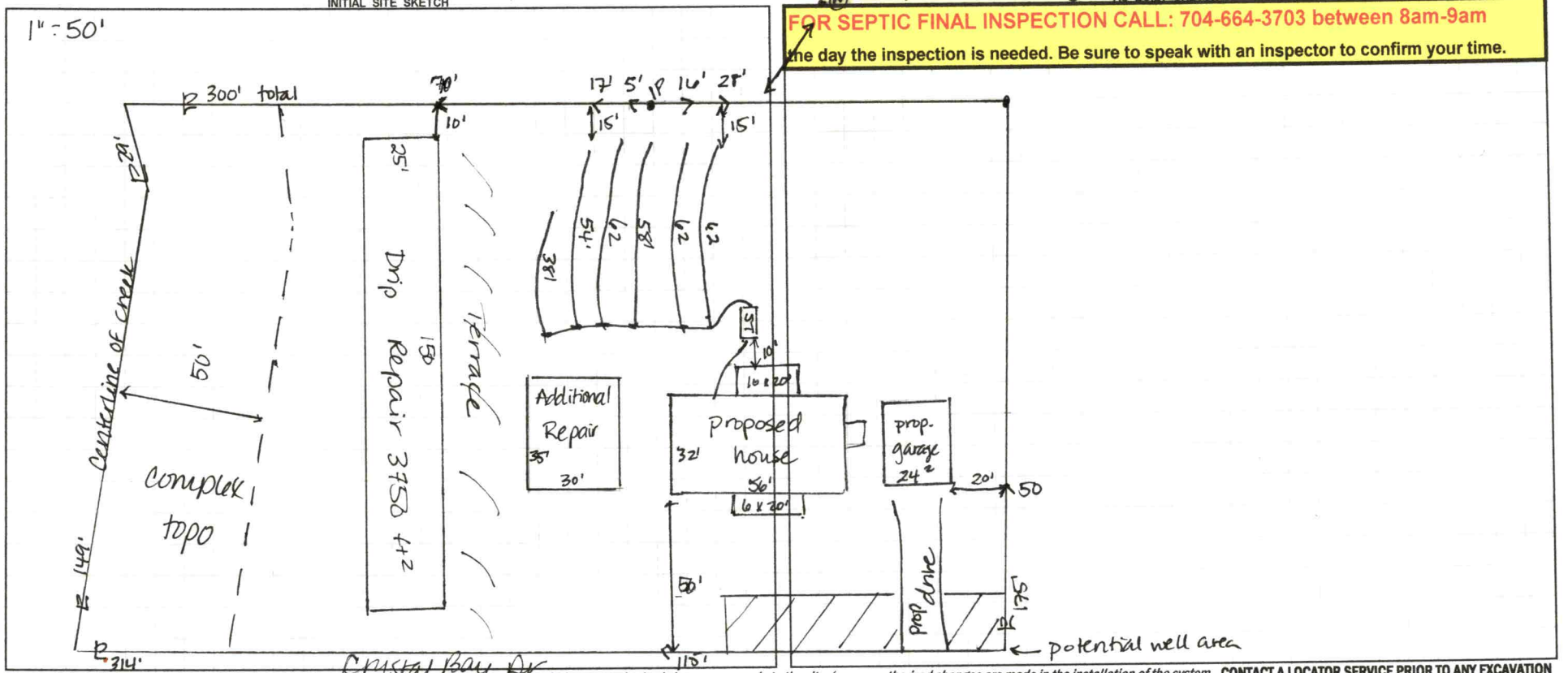
Comments / Conditions: Do not pave, grade, drive, park, or bury utilities in drainfield. Divert all drainage from drainfield. Do not exceed 36" max trench bottom - may shallow to 28".

Attached garage approved 3/14/22

Stay 50' off neighbor's well

INITIAL SITE SKETCH

AS BUILT SKETCH



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: Kimberly Knipe Date: 2/15/22

IMPROVEMENT PERMIT by: D. Mieberg Date: 2/8/22

AUTHORIZATION TO CONSTRUCT by: D. Mieberg Date: 2/8/22

Installed by:

OPERATION PERMIT by: Date:

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? _____	

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 324479

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

PIN # 4659 -- 06 -- 5547

APPLICANT/OWNER: Freedom Homes APPLICANT ADDRESS: 1124 Charlotte Highway, Troutman NC 28166

SITE ADDRESS: 126 Crystal Bay Dr. Mooresville NC 28115 PHONE: 704-881-2326 ALT. PHONE

SITE DIRECTIONS: (N) NC 21 → (L) Clear Springs → (R) Crystal Bay → lot on (L) SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Windward Point SECTION: LOT # 35 & 36 LOT AREA: 1.22ac DESIGN FLOW: 360 gpd L.T.A.R.: 0.275/0.1(R)

Septic Tank 1000 (gal)	STB Infiltrator	Date	☒ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 3	Water Supply
Pump Tank (gal)	PT	Date	System Description: 25% Reduction		☐ Business	No. Persons 6	☒ Private
Pump Make	Model	Serial #	Repair System Description: Drip 3600 ft 2		☐ Other	No. Employees	☐ Public
# Nitrification Fields 1	# Lines 6	Linear Ft 328'	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☒ Crawl Space	☐ Community
Trench Width 36"	Trench Bottom Depth(Low side) 30"	Gravel Depth N/A	☒ GRAVITY	☐ PRESSURE	☐ Basement w/plumbing	☐ Basement w/o plumbing	

Comments / Conditions: Do not pave, grade, drive, park, or bury utilities in drainfield. Divert all drainage from drainfield. Do not exceed 36" max trench bottom - may shallow to 28".

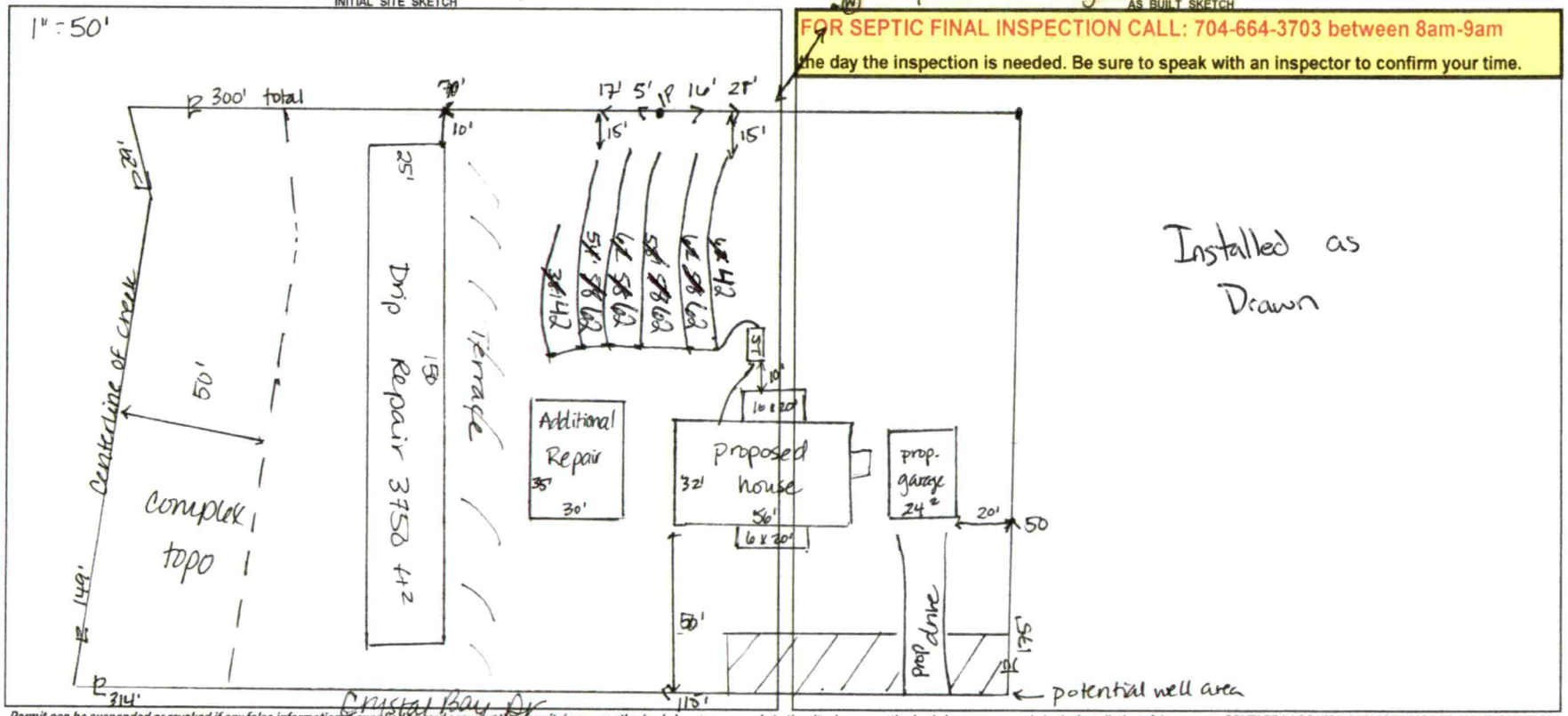
Attached garage approved 3/14/22

Stay 50' off neighbor's well

INITIAL SITE SKETCH

AS BUILT SKETCH

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



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: Kimberly Boyce Date: 2/15/22 Installed by: AJ Remodeling

IMPROVEMENT PERMIT by: D. Wieberg Date: 2/8/22 OPERATION PERMIT by: Cary Whit Date: 5/12/22

AUTHORIZATION TO CONSTRUCT by: D. Wieberg Date: 2/8/22 Existing System Inspected by: Date:

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

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

Sheet 1 of 2
PROPERTY ID #:
COUNTY: Iredell

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

OWNER: Windward Sailview LLC — APPLICATION DATE
ADDRESS: 2313 Catawba, Cornelius NC 28031 — DATE EVALUATED: 2-2-22
PROPOSED FACILITY: 3BR — PROPOSED DESIGN FLOW (.1949): 360 — PROPERTY SIZE: 1.22
LOCATION OF SITE: 126 Crystal Bay Mooresville NC 28160 — PROPERTY RECORDED: yes
WATER SUPPLY: ☒ Private ☐ Public ☒ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring ☑ Pit ☐ Cut — TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	8%	0-3	CL/SBK	SSSP-FR-SEXP	Min. YIB Mottles & some Mn & Litho @ 29"+	48"	N/A	N/A	P.S .275
		3-29	C/SBK	↓					
		29-48	CL/SBK						
2	20%	0-5	CL/SBK	SSSP-FR-SEXP	10YR7/3 @22" 2.5Y7/2 @32" 5Y8/1 @ 37" ~~42"~~+	52" YIB Mottles @ 21"+	N/A	N/A	P.S .1 Drip
		5-52	C/SC/SBK	S/SP-FR-SEXP					
3	15%	0-5	CL-SBK	SSSP-FR SEXP	- Chroma 3's & Organic stain @ 25" - YB Mottles 25"+ Gley 1 N/5 30"+	(52")	N/A	N/A	PS 0.15
		5-25	C/SC-SBK	S/SP-FR-SEXP					
		25-52	C/SC-SBK	"					
4	20%	0-6	CL-SBK	SSSP-FR-SEXP	YIB models & Chroma 3's 6"-36" YIB & Litho 36"+	(50")	N/A	N/A	P.S .225/ 25
		6-36	C/ABK/SBK	SSSP-FR/FI-SEXP					
		36-50	CL-SBK	"					
		Some Peds > 1" 6-36"							

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	328'	3600
System Type(s)	25%	Drip
Site LTAR	0.275	0.1

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: D. Meberg
OTHER(S) PRESENT: S. Holland

COMMENTS:
5 0-6 6-24 24-52 {See Pit 2 For Notes} 6 0-5 5-22 SBK/ABK 22-52 CL Minor YB 22"+ 0.275

Updated February 2014

LEGEND

use the following standard abbreviations

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

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

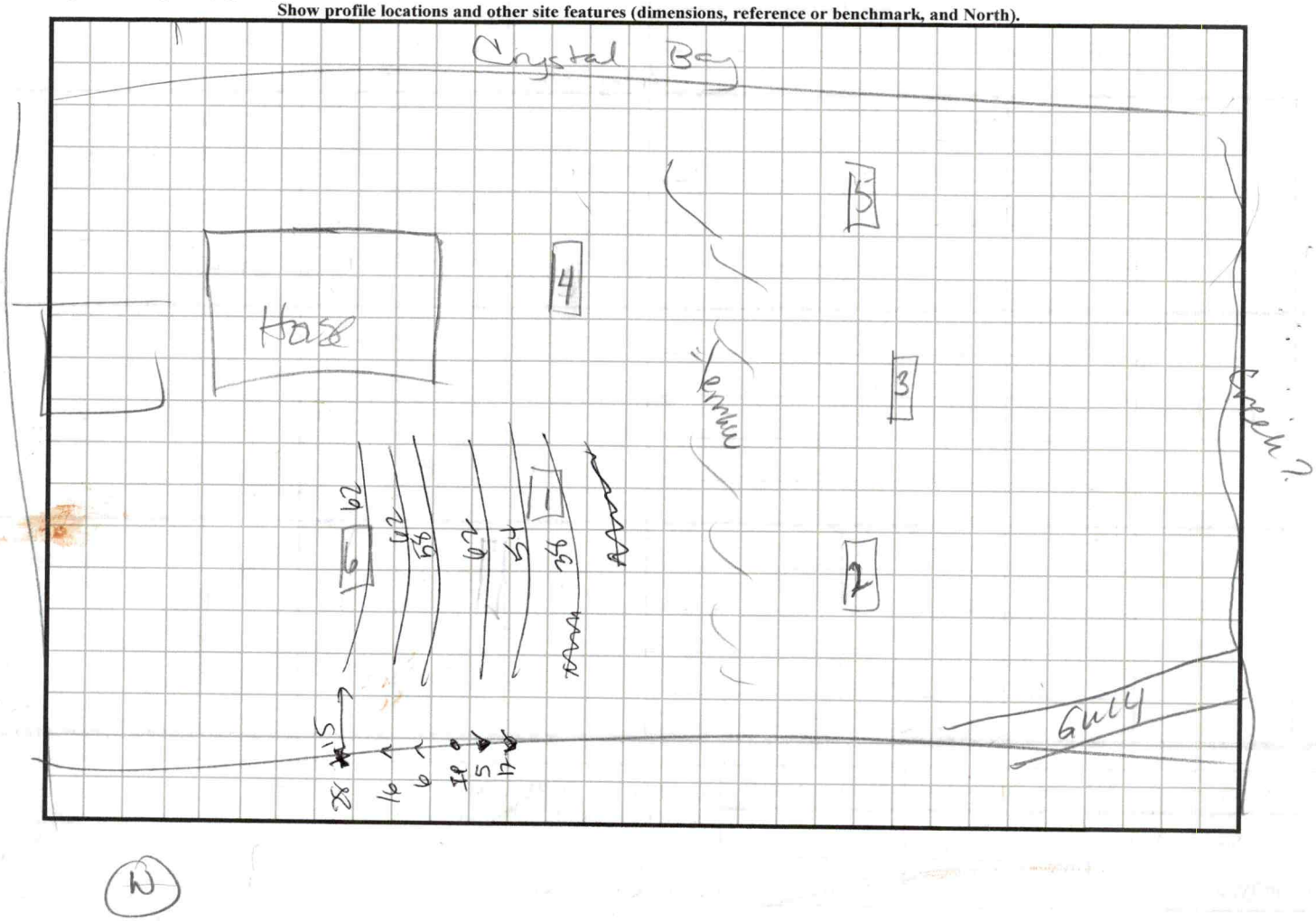
NOTES

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

Evaluation of saprolite shall be by pits.

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

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



SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

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

PROPERTY ID #:
DATE OF EVALUATION: 2/2/22
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
5	LS 12	0-6	CL - SBK	SSSP - FR - SEXP	Chroma 3+ organic stain 6-24 YB mottles 24"+ Gleys / Chroma 2	52"	N/A	N/A	0.1 PS
		6-24	C/SC - WSBK	S/SP - FR - SEXP					
		24-52	C/SC WSBK	S/SP - FR SEXP					
6	LS 10	0-5	CL - SBK	SSSP - FR - SEXP	minor YB 22"+ sap incl	52"	N/A	N/A	PS 0.275
		5-22	C - SBK/ABK	SSSP - FR - SEXP					
		22-52	CL - SBK	SSSP - FR/FI - SEXP					
			Light						

COMMENTS:

DW

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

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM* AP-324479 $500.00

Application For: (X) 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: ( ) 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: Freedom Homes/Kimberly Frye **Address:** 1124 Charlotte Hwy Troutman **Zip:** 28166
Applicant Email: Kimsnead.Sneed04@gmail **Phone:** 704-881-2326 **Alt. Phone:** _____
Owner Name: Windward Sailview LLC **Address:** 21313 Catawba Avenue, Cornelius NC **Zip:** 28031
Owner Email: _____ **Phone:** _____ **Alt. Phone:** _____

Property Information:

Street Address: 126 Crystal Bay DR Mooresville NC 28115
Subdivision Name: Windward point **Section/Phase:** _____ **Lot Number:** Lot 35 & 36
Driving Directions: I-77 toward Charlotte, Exit 42 turn (R), 1.96 miles (R) onto Sailwinds Rd, (L) onto Crystal Bay DR, Lot on Right

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

CHECK FOUNDATION TYPE

(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: 3
Maximum Number of Occupants: 2
( ) Swimming Pool
( ) Other Addition/Structure: _____

(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 (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: Kimberly Frye 12-22-21
Property owner or authorized legal representative signature **(SIGNATURE REQUIRED)** **DATE**

$\frac{1}{4}$

$\frac{3}{4}$ $\frac{2}{3}$

$\frac{1}{2}$

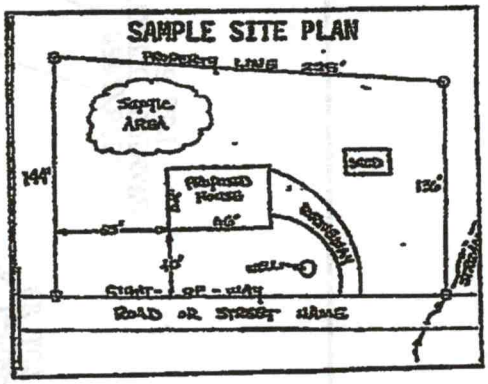
Holy Crystal Bowl Tour

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
- ( ) 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

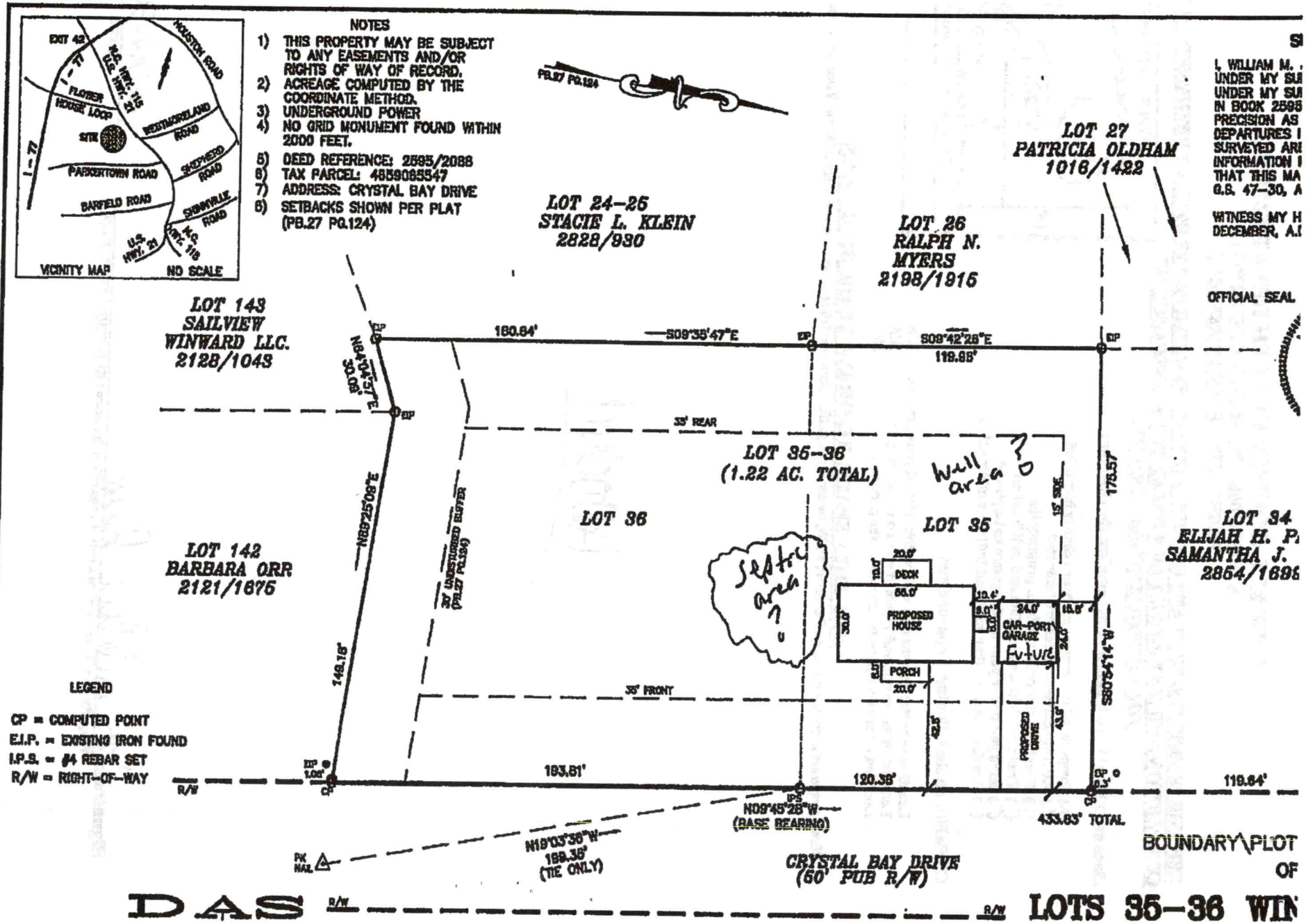
USE THIS SPACE TO DRAW YOUR SITE PLAN

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

Attached

Signature: Kimberly Bayne
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

12-22-21
DATE


VICINITY MAP
NO SCALE
EXIT 43
I - 77
HOUSTON ROAD
FLOWER HOUSE LOOP
SITE
WESTMORELAND ROAD
PARKERTOWN ROAD
SHEPHERD ROAD
BARFIELD ROAD
SHERRILLS FORD ROAD
U.S. HWY. 21
N.C. HWY. 115
NOTES
1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENTS AND/OR RIGHTS OF WAY OF RECORD.
2) ACREAGE COMPUTED BY THE COORDINATE METHOD.
3) UNDERGROUND POWER
4) NO GRID MONUMENT FOUND WITHIN 2000 FEET.
5) DEED REFERENCE: 2595/2088
6) TAX PARCEL: 4859085547
7) ADDRESS: CRYSTAL BAY DRIVE
8) SETBACKS SHOWN PER PLAT (PB.27 PG.124)
PB.27 PG.124
LOT 27
PATRICIA OLDHAM
1016/1422
LOT 24-25
STACIE L. KLEIN
2828/930
LOT 26
RALPH N.
MYERS
2198/1915
LOT 143
SAILVIEW
WINWARD LLC.
2128/1043
LOT 142
BARBARA ORR
2121/1675
LOT 34
ELIJAH H. P
SAMANTHA J.
2864/1698
OFFICIAL SEAL
N84°04'57"E
100.00'
160.84'
S09°35'47"E
S09°42'28"E
119.88'
35' REAR
LOT 35-36
(1.22 AC. TOTAL)
Well area
LOT 36
LOT 35
septic area
N89°25'08"E
30' UNDISTURBED BUFFER (PB.27 PG.124)
148.18'
175.57'
15' SWE
DECK
20.0'
10.0'
56.0'
PROPOSED HOUSE
30.0'
10.4'
8.0'
24.0'
18.6'
CAR-PORT GARAGE
Future
24.0'
PORCH
20.0'
35' FRONT
42.5'
43.5'
PROPOSED DRIVE
S80°54'14"W
193.81'
120.38'
119.84'
433.83' TOTAL
N09°45'28"W
(BASE BEARING)
N19°03'36"W
169.36'
(TIE ONLY)
PK NAIL
CRYSTAL BAY DRIVE
(50' PUB R/W)
R/W
LEGEND
CP = COMPUTED POINT
E.I.P. = EXISTING IRON FOUND
I.P.S. = #4 REBAR SET
R/W = RIGHT-OF-WAY
I, WILLIAM M.
UNDER MY SU
UNDER MY SU
IN BOOK 2595
PRECISION AS
DEPARTURES
SURVEYED AR
INFORMATION
THAT THIS MA
G.S. 47-30, A
WITNESS MY H
DECEMBER, A.
BOUNDARY PLOT
OF
DAS
LOTS 35-36 WIN

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

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, John Martin McCoy, am the legal owner(s) of the property located at Crystal Bay Dr., identified as PIN (Parcel Identification Number) 4659-06-5547, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) Kimberly Frye, 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:
[signature]
Signature of Owner(s) — 12/21/2021 Date

[signature]
Signature of Witness — 12-21-21 Date

Please return this signed form to the appropriate office:

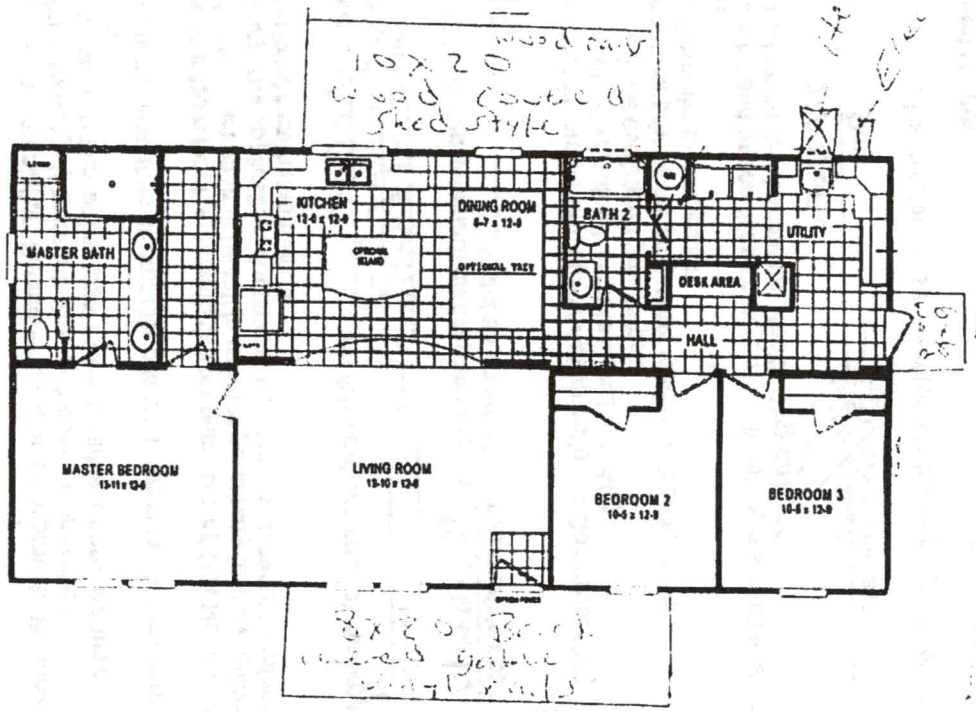
Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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

APPROVED

SIGNATURE: Vanessa K Patterson

DATE: 11/2/2021



Concrete Driveway 40' x 20'

* Brick = Old Plantation Brown No White

IREDELL COUNTY · NC

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

APPLICATION NUMBER
324479 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4659065547.000	126 CRYSTAL BAY DR	IREDELL COUNTY

Owner Information	Applicant Information
Name: WINDWARD SAILVIEW LLC	Name: FREEDOM HOMES-TROUTMAN #667- USE THIS ONE
Address: 21313 CATAWBA AVE CORNELIUS, NC 28031	Address: 1124 CHARLOTTE HWY TROUTMAN, NC 28166
Phone:	Phone: (704)528-7960

Use Requested	Zone Code
Modular	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
1.21	35	35	15	15	WSIV-PA Catawba/Lake Norman	NO

Remarks
MODULAR

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.

Date: 01/07/2022

Signature of Owner/Contractor

Permit Number	324479

TOTAL FEES:	$77.25

IREDELL COUNTY PLANNING & DEVELOPMENT
PO BOX 788, STATESVILLE NC 28687-0788
349 N. Center Street / Building Standards Center
(704) 878-3118 / FAX (704)878-3171

Residential Zoning Permit Application

What are you building?(Please check) *No building or addition shall be used for commercial, business, or other non-residential use unless appropriate permits and approval are obtained from Iredell County for commercial use.

Stick built___ Modular √ Duplex___ Singlewide___ Doublewide___ Pier___ Addition___ Bedroom addition___

Accessory dwelling (ie: M-I-L Suite, guest house) ___ Accessory building (ie: garage, shed)___ Swimming pool___

Are there any other structures currently on the property such as dwellings, sheds, garages? (Please list type below)

Is there a septic tank on the property? Yes (No) If residence how many bedrooms? ___ and stories?___

Please describe project (Details, Purpose, or Use): _____

Please list square footage of project (Pier, Addition, Accessory Dwelling, Accessory Building only): _____

Does the property have community water? Yes (No) If yes, please list who provides it: _____

Does the property have community sewer? Yes (No) If yes, please list who provides it: _____

Owner Information

Property Owner's Name Windward Sailview LLC Phone # _____

Owner's Current Address 21313 Catawba Ave Cornelius NC 28031

Property Information

Property Address 126 Crystal Bay DR Mooresville, NC Parcel # 4659-06-5547

Subdivision: _____ Lot: ___ Zoning: ___ Watershed: Y / (N) Flood Plain: Y / (N) Township: _____

Directions to property (from a MAIN ROAD) I-77 toward Charlotte, Exit 42 turn (R) 1.96 miles, (R) onto Sailwinds Rd, (L) onto Crystal Bay DR, Lot on Right

Application Information

Applicant's Name or Company Freedom Homes Applicant's Phone # 704-528-7966

Applicant's Address 1124 Charlotte Hwy Troutman, NC 28166

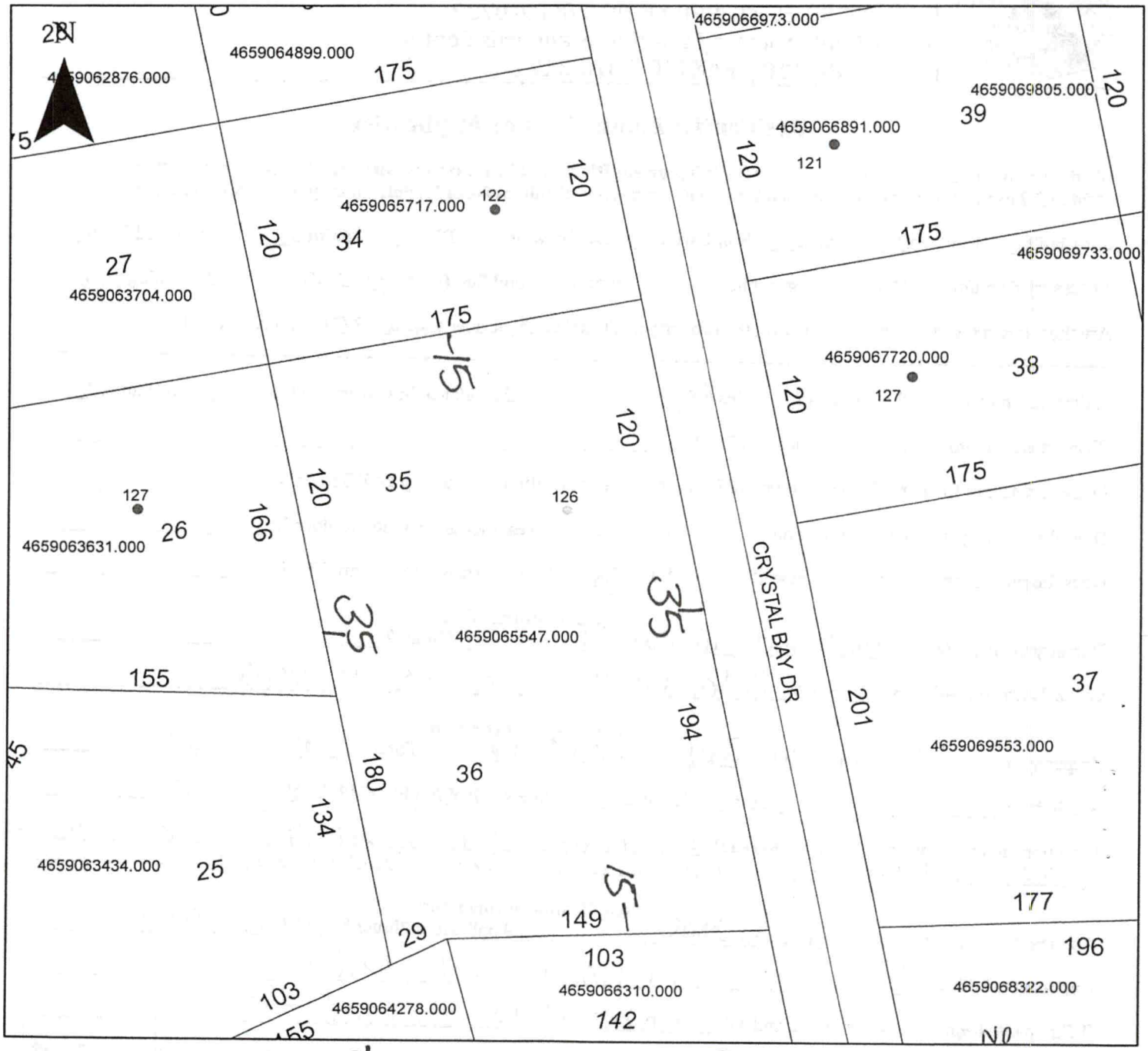
If Company, Representative's Name and Title Kimberly Frye / Site Coordinator

IN APPLYING FOR A ZONING PERMIT I CERTIFY THAT ALL INFORMATION ON THIS APPLICATION IS CORRECT AND THAT ALL WORK WILL COMPLY WITH IREDELL COUNTY ZONING REGULATIONS. THE IREDELL COUNTY PLANNING & DEVELOPMENT DEPARTMENT WILL BE NOTIFIED OF ANY CHANGES THAT ARE MADE TO THIS PROJECT. I AM AWARE THAT THIS IS AN APPLICATION ONLY - NOT A PERMIT - AND DOES NOT CONSTITUTE APPROVAL OF THIS PROJECT. HOWEVER, IF THIS PROJECT IS APPROVED, THIS SIGNATURE IS VALID FOR MY PERMIT.

SIGNATURE OF APPLICANT Kimberly Frye DATE 12-22-21

RA
1.21
WS-IV-PA
NO

ZONING DISCLAIMER



Property Address 126 Crystal Bay Dr.

1.21
R/A
WS-IV-PA

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. Applicant further acknowledges that the 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.

Kimberly Large
Applicant

1-7-22
Date

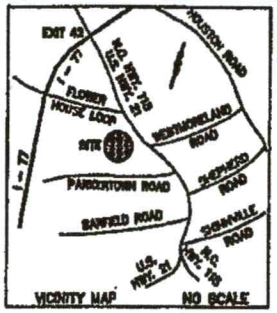
Patterson

126 Crystal Bay Dr

Acknowledgement Of Plans Submittal ONLY!

Date 4/1/22

Date



NOTES

1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENTS AND/OR RIGHTS OF WAY OF RECORD.
2) ACREAGE COMPUTED BY THE COORDINATE METHOD.
3) UNDERGROUND POWER
4) NO GRID MONUMENT FOUND WITHIN 2000 FEET.
5) DEED REFERENCE: 2595/2068
6) TAX PARCEL: 4859085547
7) ADDRESS: CRYSTAL BAY DRIVE
8) SETBACKS SHOWN PER PLAT (PB.27 PG.124)

PB.27 PG.124

SURVEYORS CERTIFICATION

I, WILLIAM M. ALLEN CERTIFY THAT THIS MAP WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION DEED DESCRIPTION RECORDED IN BOOK 2595, PAGE 2068) THAT THE RATIO OF PRECISION AS CALCULATED BY LATITUDES AND DEPARTURES IS 1:10000, (THAT THE BOUNDARIES NOT SURVEYED ARE SHOWN AS BROKEN LINES PLOTTED FROM INFORMATION FOUND IN BOOK 27, PAGE 124); THAT THIS MAP WAS PREPARED IN ACCORDANCE WITH G.S. 47-30, AS AMENDED.

WITNESS MY HAND AND SEAL THIS 3RD DAY OF DECEMBER, A.D. 2021.

PROFESSIONAL LAND SURVEYOR

OFFICIAL SEAL

L-3499

REGISTRATION NUMBER

NORTH CAROLINA PROFESSIONAL SEAL L-3499 LAND SURVEYOR WILLIAM M. ALLEN

LOT 27
PATRICIA OLDHAM
1016/1422

LOT 24-25
STACIE L. KLEIN
2828/930

LOT 26
RALPH N. MYERS
2198/1915

LOT 143
SAILVIEW WINWARD LLC.
2128/1043

LOT 142
BARBARA ORR
2121/1675

LOT 36-36
(1.22 AC. TOTAL)

LOT 36

LOT 35

LOT 34
ELIJAH H. PRUITT
SAMANTHA J. LAMBERT
2854/1689

180.84'
S09°35'47"E
S09°42'26"E
119.95'
30' REAR
175.57'
N89°25'09"E
149.16'
30' FRONT
193.81'
120.36'
119.64'
433.83' TOTAL
N09°48'25"W
(BASE BEARING)
S80°54'47"W
N19°03'36"W
199.35'
(TIE ONLY)
CRYSTAL BAY DRIVE
(60' PUB R/W)
UNDISTURBED BUFFER (FILL PLAN)
DECK
PROPOSED HOUSE
PORCH
15x24 Attached Garage

LEGEND

CP = COMPUTED POINT
E.I.P. = EXISTING IRON FOUND
I.P.S. = #4 REBAR SET
R/W = RIGHT-OF-WAY

BOUNDARY\PLOT PLAN SURVEY OF

LOTS 35-36 WINDWARD POINTE PHASE 1 SHEET 2

BARRINGER TWSP., IREDELL CO., N.C.

SCALE: 1" = 40'

DATE: 12/3/2021

ACQUIRED BY: ANEISSA PATTERSON

FILE NAME: WINDWARD POINTE 35-36.DWG

DAS

DON ALLEN & ASSOCIATES P.A.

"Since 1971"

Commercial • Residential • Mortgage Surveys • Multi-Family
Construction Staking • Subdivision Design • Topographical

131 Crosslake Park Drive -- Suite 102 • Mooresville, N.C. 28117

(704) 664-7029 (704) 664-8041 Fax

donallensurvey@gmail.com

0' 20' 40' 100'

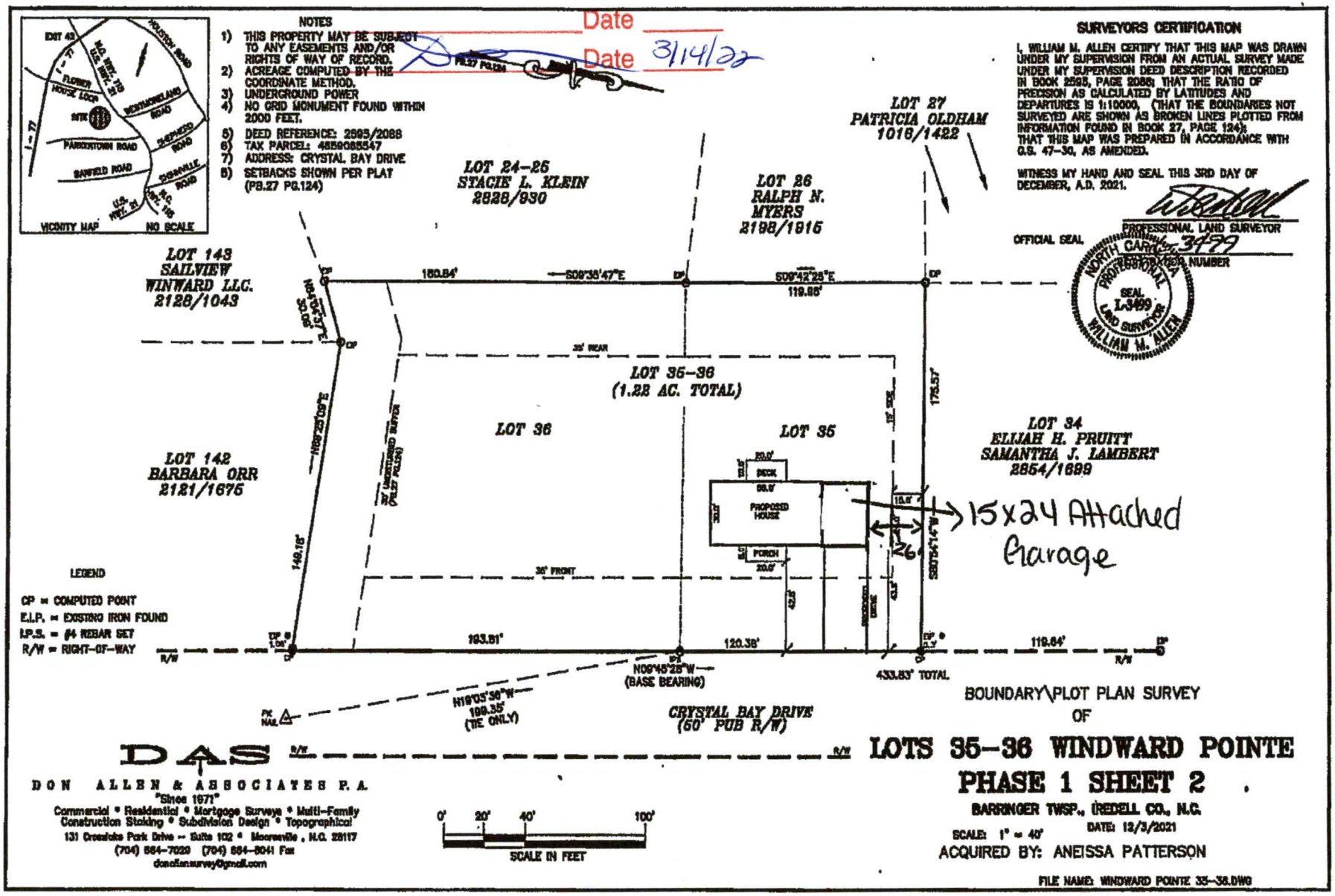
SCALE IN FEET

Acknowledgement Of Plans Submittal ONLY!

Patterson
126 Crystal Bay DR

Date _____

Date 3/14/22



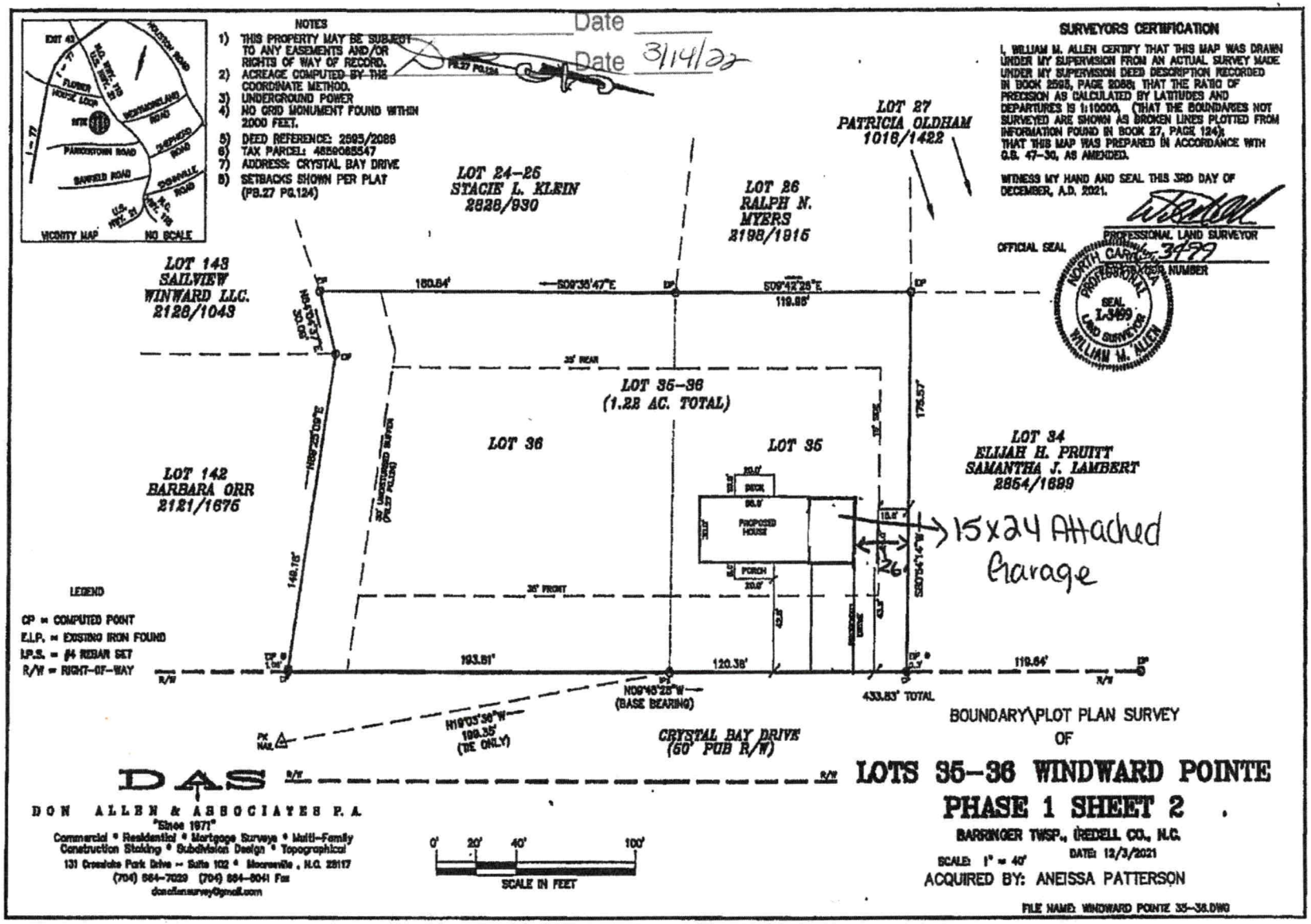
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(704) 664-7029 (704) 664-8041 Fax
donallensurvey@gmail.com

Acknowledgement Of Plans Submittal ONLY!

Patterson
126 Crystal Bay DR

Date _____

Date 3/14/22



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donallensurvey@gmail.com

BOUNDARY\PLOT PLAN SURVEY
OF
LOTS 35-36 WINDWARD POINTE
PHASE 1 SHEET 2
BARRINGER TWSP., IREDELL CO., N.C.
SCALE: 1" = 40' DATE: 12/3/2021
ACQUIRED BY: ANEISSA PATTERSON
FILE NAME: WINDWARD POINTE 35-36.DWG

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 324479

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

PIN # 4659 -- 06 -- 5547

APPLICANT/OWNER: Freedom Homes APPLICANT ADDRESS: 1124 Charlotte Highway, Troutman NC 28166

SITE ADDRESS: 126 Crystal Bay Dr. Mooresville NC 28115 PHONE: 704-881-2326 ALT. PHONE

SITE DIRECTIONS: (N) NC 21 → (L) Clear Springs → (R) Crystal Bay → lot on (L) SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Windward Point SECTION: LOT # 35 & 36 LOT AREA: 1.22 ac DESIGN FLOW: 360 gpd L.T.A.R.: 0.275 / 0.11(R)

Septic Tank	1000	(gal)	STB	Date	☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms	3	Water Supply
Pump Tank		(gal)	PT	Date	System Description:	25% Reduction			☐ Business	No. Persons	6	☒ Private
Pump Make		Model		Serial #	Repair System Description:	Drip 3600 ft 2			☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	6	Linear Ft 328'	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☒ Crawl Space		☐ Community
Trench Width	36"	Trench Bottom Depth(Low side)	30"	Gravel Depth N/A	☒ GRAVITY	☐ PRESSURE			☐ Basement w/ plumbing	☐ Basement w/o plumbing		

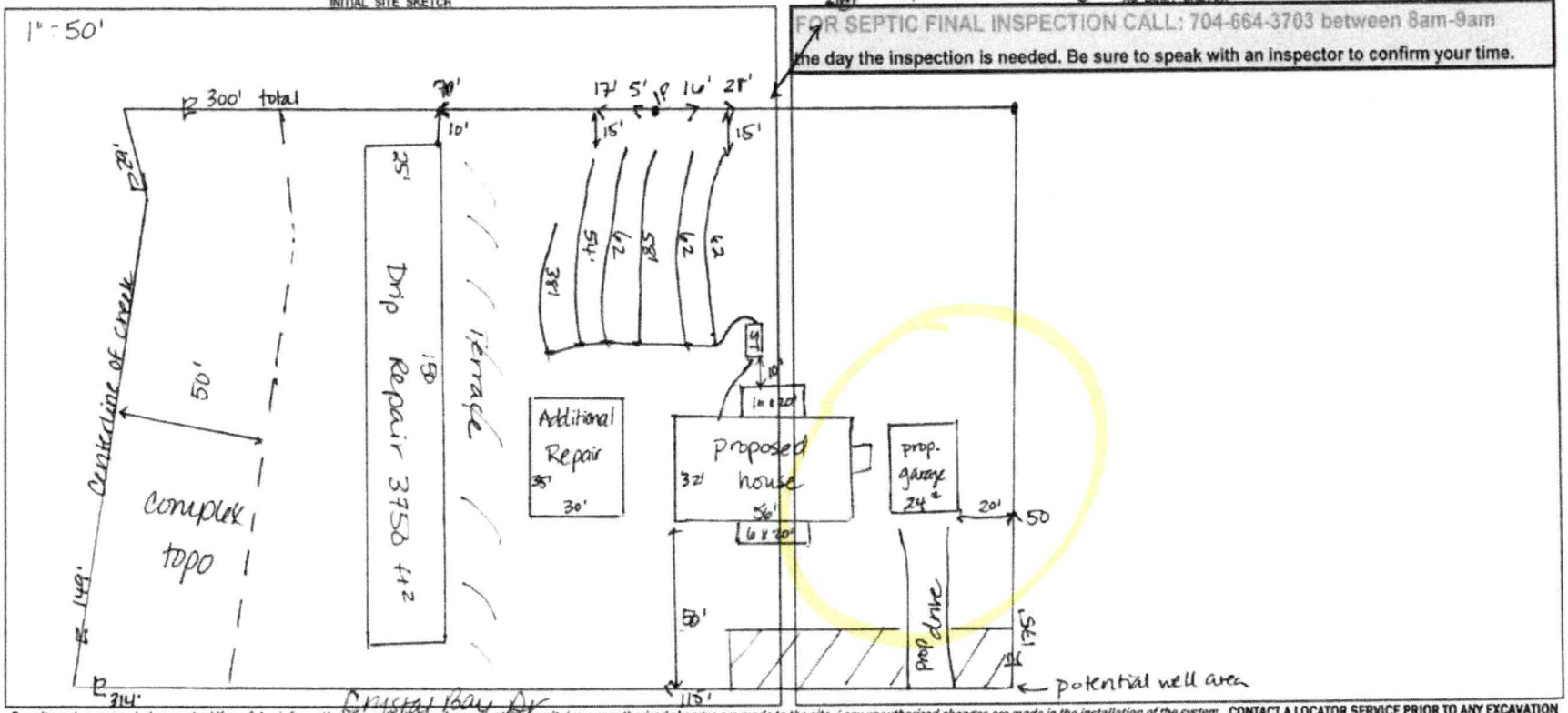
Comments / Conditions: Do not pave, grade, drive, park, or bury utilities in drainfield. Divert all drainage from drainfield. Do not exceed 36" max trench bottom - may shallow to 28".

Attached garage approved 3/14/22

Stay 50' off neighbor's well

INITIAL SITE SKETCH

AS BUILT SKETCH



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

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**

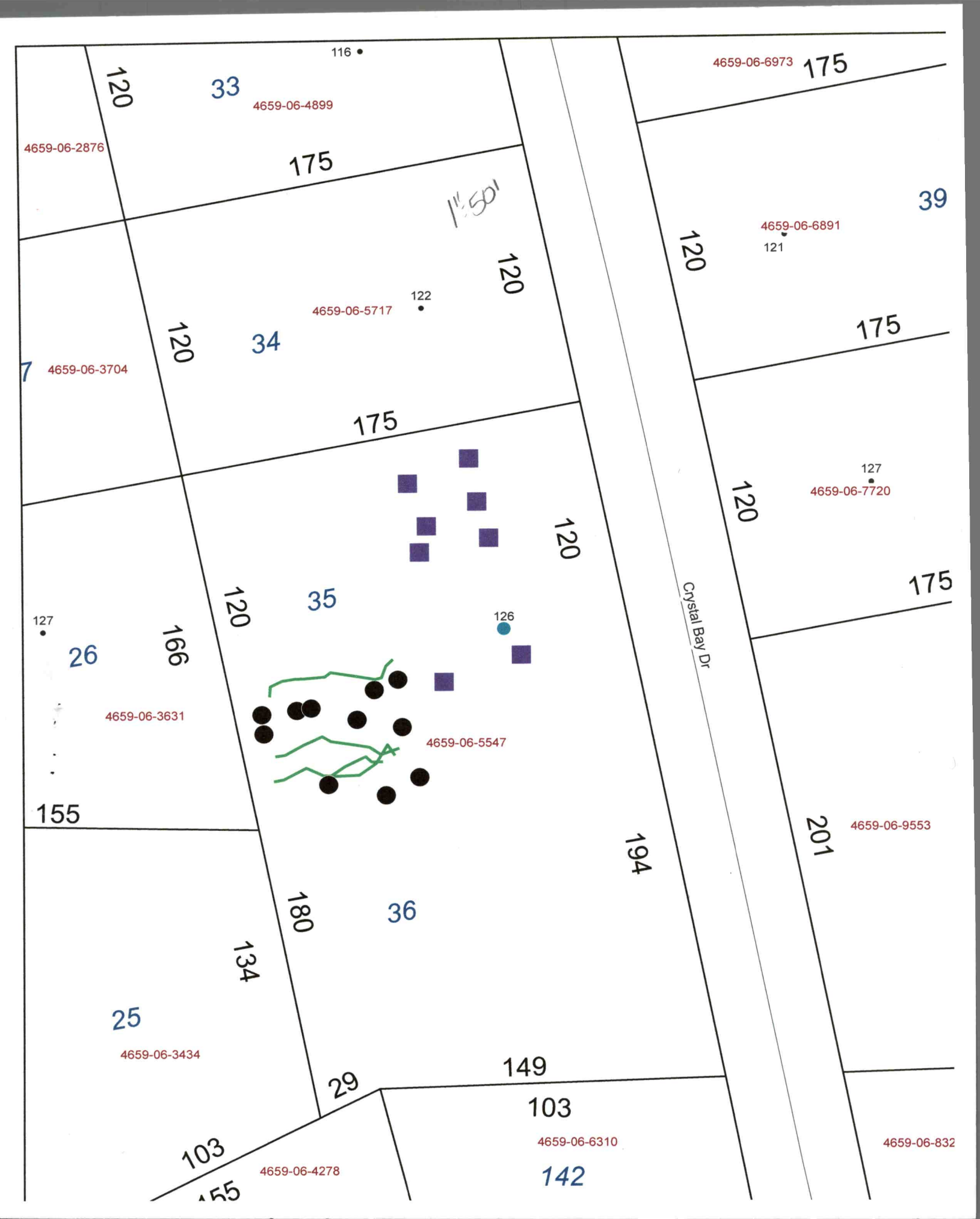
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Kimberly Bryce Date: 2/15/22 Installed by:

IMPROVEMENT PERMIT by: T. Wiebers Date: 2/8/22 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: T. Wiebers Date: 2/8/22 Existing System Inspected by: Date:

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


116
33
4659-06-4899
120
4659-06-2876
175
1":50'
4659-06-6973
175
39
4659-06-6891
121
120
122
4659-06-5717
120
34
175
7
4659-06-3704
175
127
4659-06-7720
120
175
120
35
126
127
26
166
4659-06-3631
4659-06-5547
Crystal Bay Dr
155
194
201
4659-06-9553
180
36
134
25
4659-06-3434
149
29
103
4659-06-6310
103
4659-06-4278
142
4659-06-832