ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP314068

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

PIN # 4659 -34 -9033

APPLICANT/OWNER: Foley Home Sales LLC | APPLICANT ADDRESS: 1075 Blue Spruce Drive Mooresville NC

SITE ADDRESS: 119 Country Meadows Drive Mooresville NC 28115 | PHONE: 856-404-5379 | ALT. PHONE: -

SITE DIRECTIONS: Hwy 21 to Traptown Country Meadows on Right | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Country Meadows | SECTION: - | LOT # 11 | LOT AREA: .71 Ac | DESIGN FLOW: 360 | L.T.A.R.: .275

Septic Tank 1000 (gal)	STB 360	Date 8/7/21	☑ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI	☑ Residence	No. Bedrooms 3	Water Supply
Pump Tank 1000 (gal)	PT 360	Date 8/24/21	System Description: PM - 25% Reduction	☐ Business	No. Persons 6	☑ Private
Pump Make Barnes	Model Y3 hp	Serial # SP33	Repair System Description: LP PPBS - 50% Reduction	☐ Other	No. Employees	☐ Public
# Nitrification Fields 1	# Lines 3	Linear Ft 328	Maintenance Agreement Required: ☐ YES ☒ NO	☐ Slab	☐ Crawl Space	☐ Community
Trench Width 36 in	Trench Bottom Depth 33 in MAX	Gravel Depth -	☐ GRAVITY ☒ PRESSURE	☐ Basement w/ plumbing	☐ Basement w/o plumbing	

Comments / Conditions:

INITIAL SITE SKETCH

This permit is issued pursuant to Section 11 . (C) of S.L. 2018-114 using the signed and sealed LSS Evaluation by:

Soil + Forestry Services of the Carolinas, PA

LSS # 1218 Dated July 24, 2021

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.

Floats ✓ Tanks ✓
Electrical ✓ Drainlines ✓
Alarm ✓ Pressure Manifold ✓
BCW 10/4/21

PRESSURE HEAD
BCW 11-4-2021

Permit can be suspended or revoked if any false information is supplied ... 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

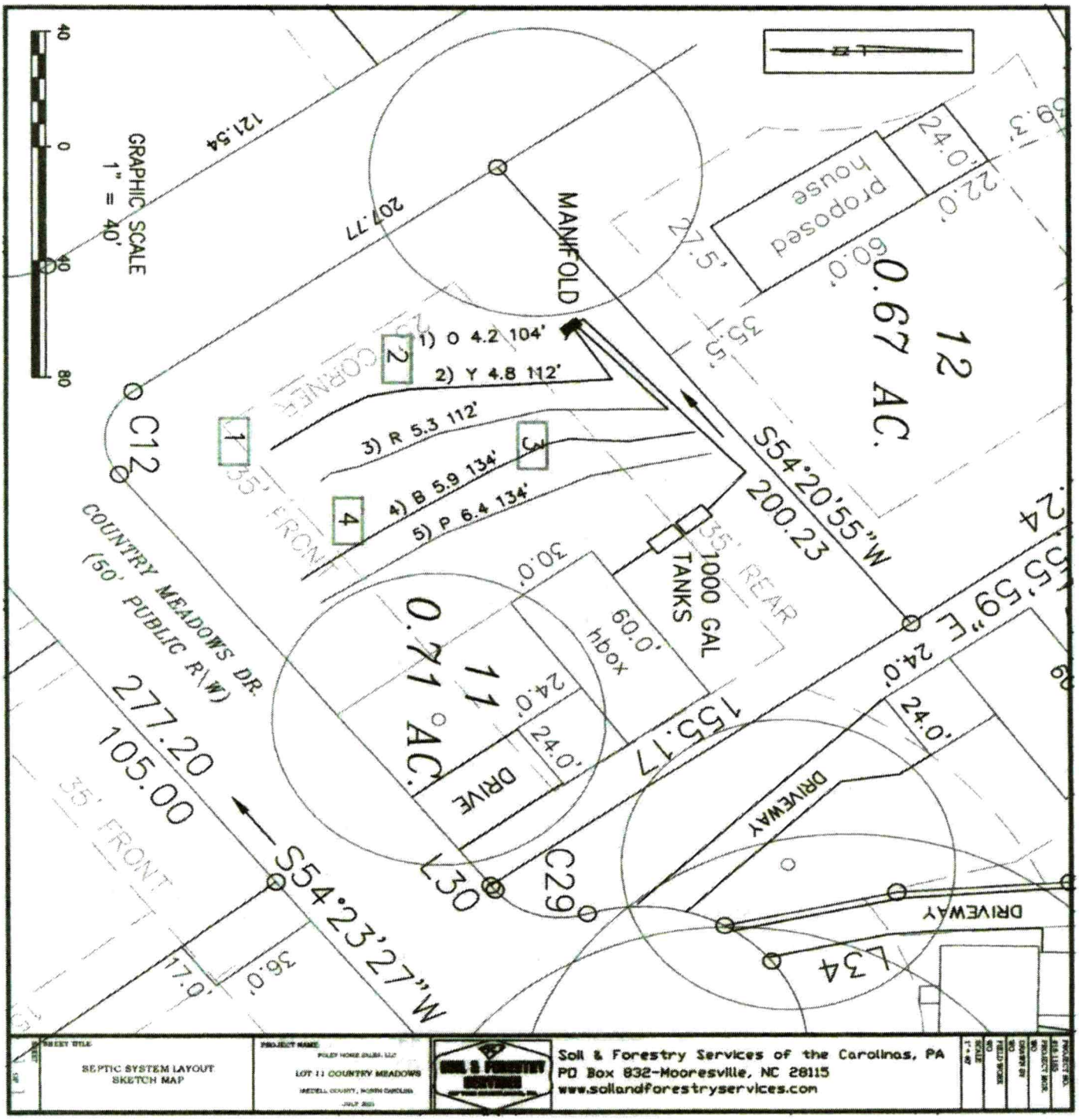
☐ IMPROVEMENT PERMIT with plat, valid without expiration. ☑ IMPROVEMENT PERMIT with site plan valid for 60 mos. ☑ AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: [signature] Date: 9/1/2021 | Installed by: Groundbreakers

IMPROVEMENT PERMIT by: [signature] Date: 9/1/2021 | OPERATION PERMIT by: Bryant Lindsey Date: 11-8-2021

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 9/1/2021 | Existing System Inspected by: Date:

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


GRAPHIC SCALE
1" = 40'
40
0
40
80
121.54
207.77
MANIFOLD
C12
1) O 4.2 104'
2) Y 4.8 112'
3) R 5.3 112'
4) B 5.9 134'
5) P 6.4 134'
1
2
3
4
5
35' FRONT
35' REAR
0.67 AC.
12
proposed house
24.0'
22.0'
60.0'
27.5'
35.5'
S54°20'55"W
200.23
1000 GAL TANKS
30.0'
0.71 AC.
11
60.0'
nbox
24.0'
DRIVE
155.17
S05°59"E
24.0'
DRIVEWAY
277.20
105.00
S54°23'27"W
C29
L30
L34
17.9'
36.0'
COUNTRY MEADOWS DR.
(50' PUBLIC R\W)
SHEET TITLE
SEPTIC SYSTEM LAYOUT
SKETCH MAP
PROJECT NAME
LOT 11 COUNTRY MEADOWS
Soil & Forestry Services of the Carolinas, PA
PO Box 832-Mooresville, NC 28115
www.soilandforestryservices.com

PRESSURE MANIFOLD DOSED SYSTEM
FOR WASTEWATER TREATMENT

Applicant:	Foley Home Sales
Phone:	856 404-5379
County:	Iredell
Location:	Country Meadows Lot 11

Source of Wastewater Flow:	3 Bedroom Single Family Residence
Estimated Daily Wastewater Production:	360 gpd
System Flow:	21.33 gpm

Design Specifications

Drainfield Size:	328 lf
Loading Rate:	0.275 gpd/ft.^{2}
Depth of Gravel in Trench:	n/a
Gravel Size:	n/a
Trench Depth:	33 in
Trench Width:	36 in.
Septic Tank Size:	1000
Pump Tank Size:	1000
Estimated Supply Line Length:	90 lf
Supply Line Diameter:	2 in. SCH 40 PVC
Supply Line Volume:	15.66 gal
Dosing Volume:	149.93 gal

Recommended Float Controls:	SJE Sensor Float Control Switches as Required for Control Panel or County Approved Equivalents
Recommended Control Panel:	SJE-Rhombus Model 112 (NEMA 4x) Control Panel or County Approved Control Panel.
Pressure Head:	2 ft.
Friction Head:	1.36 ft
Elevation Head:	7.00 ft
Total Dynamic Head:	10.56 ft
Threaded Union:	In Tank
Gate Valves:	1 in Tank: 1 @ manifold
Check Valves:	In Tank
Anti-Siphon Hole:	n/a

Country Meadows Lot 11

Manifold Design

DESIGN FLOW:	360	gpd
SOIL APPLICATION RATE:	0.275	$gpd/ft.^2$
TOTAL AREA TRENCH BOTTOM:	984	sf
TOTAL LATERAL LENGTH:	328	lf
NUMBER OF FIELDS:	1	
LATERAL LENGTH REQUIRED PER FIELD:	327	lf
SUPPLY LINE LENGTH:	90	lf
TOTAL DYNAMIC HEAD:	10.56	gpm
DOSING VOLUME:	149.93	gal
PUMP TANK DRAW DOWN*:	7.1	in
SEPTIC TANK SIZE:	1000	
PUMP TANK SIZE:	1000	

**Pump tank draw down based on a volume basis of 21 gallons per inch. Draw down may vary among pump tank manufacturers.*

Country Meadows Lot 11

Layout for a 3 bedroom home **July 2021**

LINE #	FLAG COLOR	BS	HI	FS	ELEV	FLAGGED LENGTH	DESIGN LENGTH
TBM		7.2			100.0		
INSTR. 1							
House			100.0	7.20			
Tank			100.7	6.50			
			SYSTEM				
1	Orange			4.20	103.0	104	104
2	Yellow			4.80	102.4	112	112
3	Red			5.30	101.9	112	112
			REPAIR				
4	Red			5.90	101.3	134	110
5	Blue			6.40	100.8	134	109

	LINE LENGTH	LTAR GPD/FT	SYSTEM TYPE	REDUCTION TYPE	DIST	TRENCH DEPTH
SYSTEM	328	0.275	ACCEPTED	25%	MANIFOLD	33
REPAIR	219	0.275	PPBPS	50%	LPP	32

Notes:

**TBM is assumed to be 100'
**All measures in feet
**Nitrification lines are demonstrated on contour via colored pin flags
**BS and FS indicate rod readings

Country Meadows 11

SYSTEM FLOW

DESIGN SPECIFICATIONS

Line #	Color	Elev	Length	Hole Size	Flow/Tap	Line gpd	Line Trench Area	Flow/Line
1	Orange	104.2	104	SCH 40 1/2	7.11	120.00	312	0.068
2	Yellow	104.8	112	SCH 40 1/2	7.11	120.00	336	0.063
3	Red	104.3	112	SCH 40 1/2	7.11	120.00	336	0.063
	total	feet =	328	gal/min =	21.33			

Des. Flow	360
Pump Run to Dose 360gpd=	16.88
soil LTAR	0.275

PROPERTY ID #: 4659349033
COUNTY: Iredell

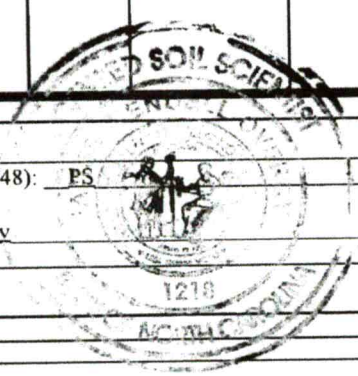
SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Foley Home Sales — APPLICATION DATE
ADDRESS: — DATE EVALUATED: 3/20/19
PROPOSED FACILITY: New Home — PROPOSED DESIGN FLOW (.1949): 360 — PROPERTY SIZE: .71
LOCATION OF SITE: Country Meadows Lot 11 119 Country Meadows Drive — PROPERTY RECORDED: 2019
WATER SUPPLY: x☐ Private ☐ Public x☐ Well ☐ Spring Other
EVALUATION METHOD: ☐ Auger Boring x☐ Pit ☐ Cut TYPE OF WASTEWATER: x ☐ 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	L / 6%	0-2	B SL WFGr	Fr SS SP	9-18" 2 chroma mottles	48	PS	N/A	PS .3 > 18"
		2-9	BR SCL WFS	Fi SS P [compacted]					
		9-18	R C WFS	Fr SS SP c Y mottle					
		18-48	R CL WMS	Fr SS SP					
		48-56	VAR SL MASS	VFr NS NP					
2	L / 6%	0-2	B SL WFGr	Fr SS SP	N/A	67	PS	N/A	PS .275
		2-9	RB SCL WFS	Fr SS SP [compacted]					
		9-27	R C WMS/A	Fi SS P [f/c Fe depl]					
		27-67	R CL WMS	Fr SS SP c sap					
3	L / 5%	0-9	B SCL WFS	Fr SS SP [compaced]	N/A	48	PS	N/A	PS .275
		9-22	R C WMS	Fi SS P f/c depletions					
		22-34	RB CL WMS	Fr SS SP few sap					
		34-48	RB L WMS	Fr SS SP com sap					
		48-66	VAR SL MASS	VFr SS SP					
4	L / 5%	0-4	B SL WFGr	VFr SS SP	N/A	53	PS	N/A	PS .275
		4-11	B SCL WFS	Fr SS P					
		11-20	R C WMA/S	Fi SS SP f Fe depl					
		20-32	BR C WMA/S	Fr SS SP f sap/f Fe					
		32-53	BR CL WMS	Fr SS SP c sap					
		53-70	VAR L MASS	VFr SS SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	328	218
System Type(s)	ACCEPTED	PPBPS
Site LTAR	.275	.275

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



COMMENTS:

SOIL & FORESTRY SERVICES
OF THE CAROLINAS, PA

July 24, 2021

Iredell County Environmental Health
Attn: Heath Snow
349 N Center Street
Statesville, NC 28677

Re: Session Law 2018-114 Submittal for Country Meadows Subdivision-Mooresville

Lot 11-119 Country Meadows Drive

Mr. Snow,

Attached please find sealed soil notes as well as site plans and design related data for a 3-bedroom accepted system using pressure manifold distribution. The design packet is submitted under Session Law 2018-114 (HB 374).

"The LSS Evaluation attached to this application is to be used to produce design and construction features for permitting in accordance with SL 2018-114 Section 11.(c)."

Owner: Doug Foley, Foley Home Sales, LLC:

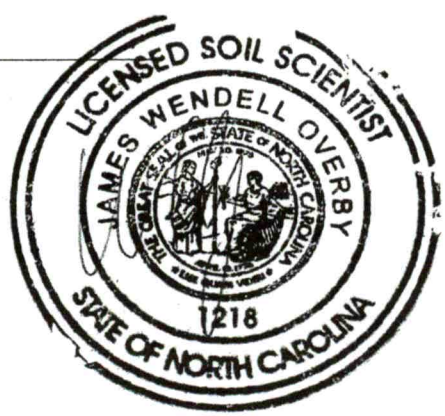
Signature: D Foley

"The LSS Evaluation is being submitted pursuant to and meets requirements of SL 2018-114 Section 11.(c)."

Wendell Overby, LSS

Signature: Wendell O

Seal:



RECEIVED JUL 2 9 2021

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

Iredell County Health Department – Environmental Health Division

S.L. PAGE 1: *APPLICATION FORM* AP- 314068 $1200.00

Application For: (X) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) 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 (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: FOLEY HOME SALES, LLC Address: 1075 BLUE SPRUCE DR MVILLE Zip: 28115

Applicant Email: FOLEY1301@GMAIL.COM Phone: 856 404-5379 Alt. Phone: _____

Owner Name: SAME Address: _____ Zip: _____

Owner Email: _____ Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 119 COUNTRY MEADOWS DRIVE MOORESVILLE

Subdivision Name: COUNTRY MEADOWS Section/Phase: _____ Lot Number: 11

Driving Directions: CENTER STREET TO N. BROAD (115) N TO HWY 21 MOORES COUNTRY MEADOWS 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: 3
Maximum Number of Occupants: 6
( ) Swimming Pool
( ) Other Addition/Structure: _____

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

Non-Residential Site Development: Type of Business: _____
Square Footage of Building: _____ Max. Number of Employees: _____ Max. Number of Seats/Beds/Other: _____

Water Supply: ( ) Replacement Well – Reason: _____
( ) Multi-connection Well Number of Houses: _____ Number of Persons: _____

(X) New Well ( ) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: _____
( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) 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: _____ 7/24/21
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

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

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

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

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, DOUG FOLEY, am the legal owner(s) of the property located at 119 COUNTRY MEADOWS DRIVE, identified as PIN (Parcel Identification Number) 4659349033, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) WENDELL OVERBY, _____, 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.

D Foley
_____
Signature of Owner(s)

7/25/21
Date

Mooresville - Environmental Health

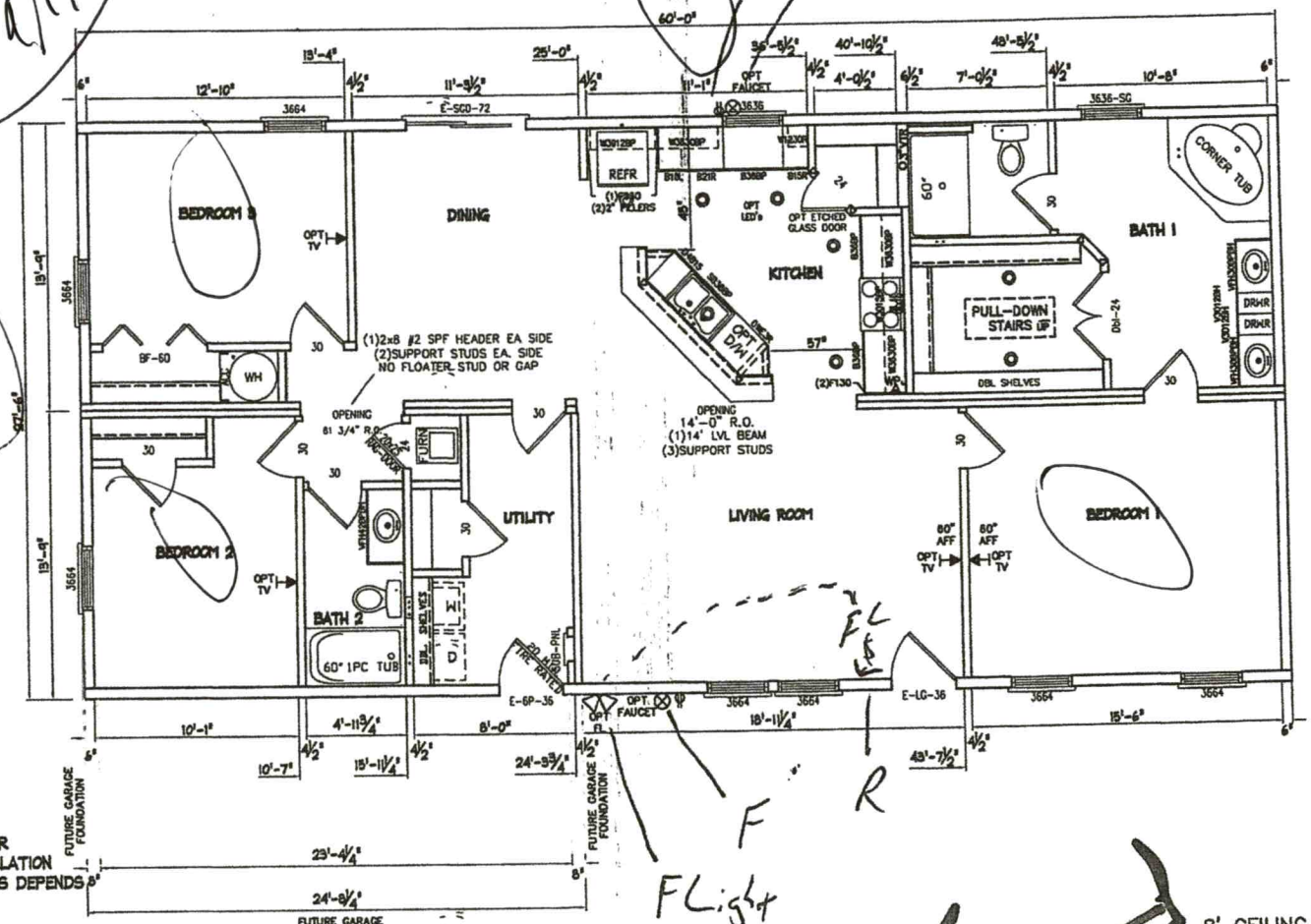
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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

Lot 11

FLIPPED

AFF=ABOVE FINISHED FLOOR



ALL APPLIANCES ARE SHOWN FOR REPRESENTATION ONLY. INSTALLATION AND/OR SHIPPING OF APPLIANCES DEPENDS ON SALES ORDER.

TOTAL AREA = 1650sf

CONDITIONED AREA = 1564sf

8' CEILING

Flipped

201

FOLEY HOME SALES/CM LOT 6

60'-0" x 27'-6"

CP-60' Foley Spec CM Lot 6

1st FLOOR ORDER

DRAWN GJH DATE 3/26/21

CK'D DATE

SCALE 3/16"=1'-0"

Manis & Crestline Custom Builders
5880 Crestline Road
Laurinburg, NC 28352
1-800-772-0195
www.crestlinecustombuilders.com
www.manisscustombuilders.com

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IREDELL COUNTY · NC

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

APPLICATION NUMBER
314068 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4659349033.000	119 COUNTRY MEADOWS DR	Iredell County

Owner Information	Applicant Information
Name: FOLEY HOME SALES LLC	Name: WENDELL OVERBY
Address: 1075 BLUE SPRUCE DR	Address: PO BOX 832
MOORESVILLE, NC 28115	MOORESVILLE, NC 28115
Phone:	Phone: (704)239-2001

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.71	35	35	25	15	N/A	NO

Remarks
SFD

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.

Signature of Owner/Contractor

Date: 01/12/2021

Permit Number	314068	TOTAL FEES:	$77.25