IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 245673

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

PIN # 4659.43.1962

APPLICANT/OWNER: Foley Home Sales | APPLICANT ADDRESS: 1075 Blue Spruce Drive Mooresville NC 28115

SITE ADDRESS: 124 Country Meadows Drive, Mooresville NC 28115 | PHONE: 856 404-5379 | ALT. PHONE –

SITE DIRECTIONS: Hwy 115 to Hwy 21 Property on Right South of Frieze Crossing | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Country Meadows | SECTION: – | LOT # 5 | LOT AREA: 480 | DESIGN FLOW: 480 | L.T.A.R.: .275

Septic Tank	1000 (gal)	STB	760	Date	4/6	☒ New System ☐ Repair ☐ Expansion	System Type: I II III (IV) V VI
Pump Tank	1000 (gal)	PT	363	Date	4/13	System Description:	LP-PPBPS-50% Reductio
Pump Make		Model		Serial #		Repair System Description:	LP-PPBPS-50% Reduction
# Nitrification Fields	1	# Lines	4	Linear Ft	291	Maintenance Agreement Required:	☒ YES ☐ NO
Trench Width	24	Trench Bottom Depth (LowINC)	31	Gravel Depth	–	☐ GRAVITY	☒ PRESSURE

☒ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing | No. Bedrooms 4 | No. Persons 8 | No. Employees | ☒ Crawl Space

Water Supply: ☒ Private ☐ Public ☐ Community

☐ Basement w/o plumbing

Comments / Conditions:

See attached Design Proposal.

1/29/2021 Reviewed Floor plans, in Compliance with Septic plan.

INITIAL SITE SKETCH

This permit is issued pursuant to Section 11:(c) of SL 2018-114 using the signed and sealed LSS evaluation attached: Soil + Forestry Services of the Carolinas, P.A.

AS BUILT SKETCH

5/19/2021: drain lines checked and we good checked tanks and Filter was in stbut Pump was not in pt

	Date	Initials
Drain Lines Checked	5/19/2021	PJB
Tanks Checked	5/19/2021	PJB
Pressure Manifold or Valve Box Checked	5/20/21	DW
Pressure Head Set	6-1-2021	BCW
Electrical Checked		
Floats Set		
Alarm Checked		
Maintenance Contract (Y) N		
Comments:		

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**

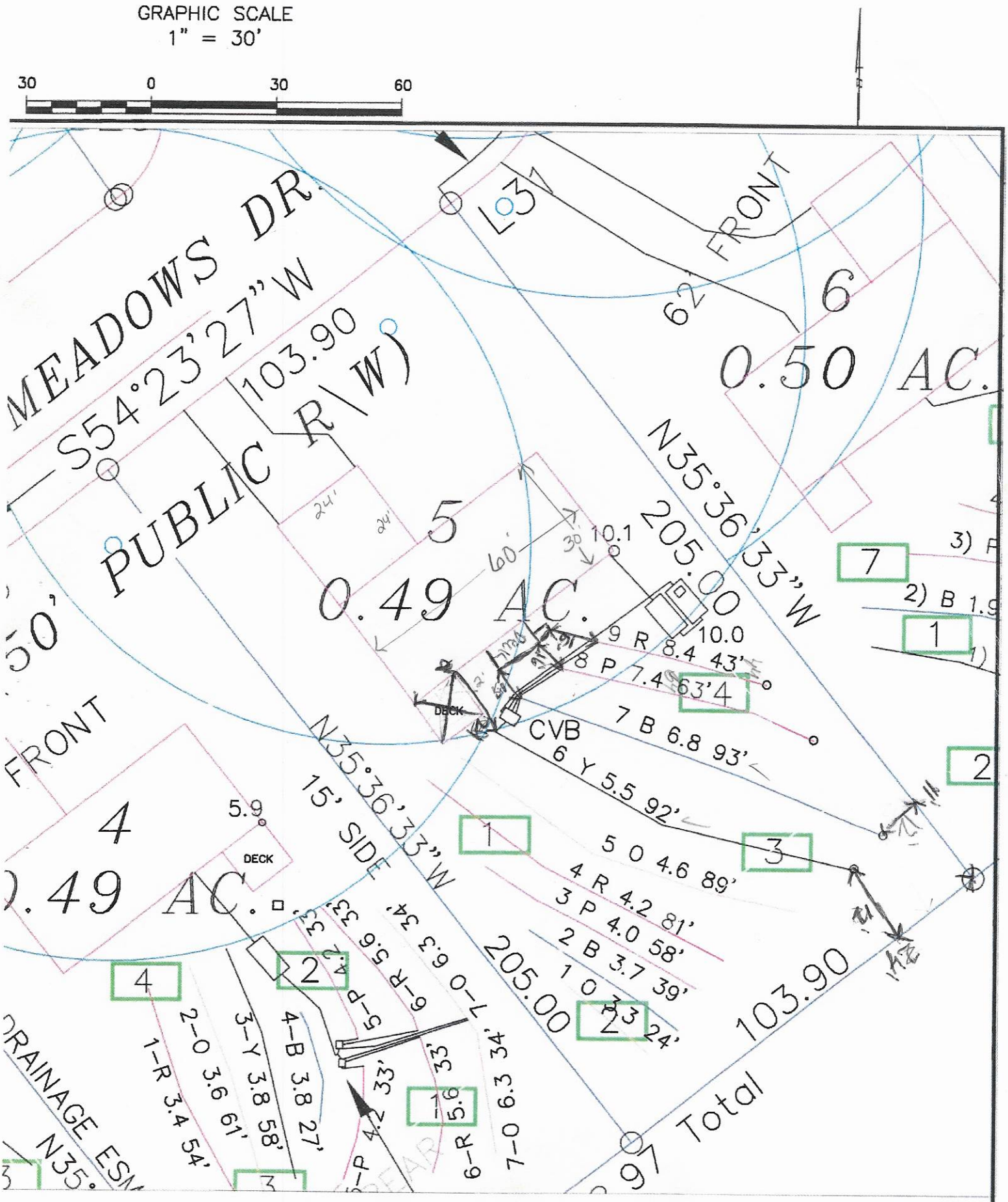
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: [signature] Date: 9/3/19 | Installed by: Ground braliers

IMPROVEMENT PERMIT by: [signature] Date: 8/9/2019 | OPERATION PERMIT by: Danielle Hiberg Date: 6/7/2021

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 1/29/2021 | 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.


GRAPHIC SCALE
1" = 30'
30 0 30 60
MEADOWS DR.
S54°23'27"W
103.90
PUBLIC R/W
0.49 AC.
0.50 AC.
FRONT
62'
L37
N35°36'33"W
205.00
10.1
10.0
9 R 8.4 43'
8 P 7.4 63'
7 B 6.8 93'
6 Y 5.5 92'
5 0 4.6 89'
4 R 4.2 81'
3 P 4.0 58'
2 B 3.7 39'
1 0 3.3 24'
DECK
CVB
15' SIDE
5.9
2-0 3.6 61'
1-R 3.4 54'
3-Y 3.8 58'
4-B 3.8 27'
5-P 4.2 33'
6-R 5.6 33'
7-0 6.3 34'
7-0 6.3 34'
6-R 5.6 33'
5-P 4.2 33'
4-B 3.8 27'
3-Y 3.8 58'
2-0 3.6 61'
1-R 3.4 54'
205.00
103.90
24'
Total
DRAINAGE ESM
N35°
SHEET TITLE:
SEPTIC LAYOUT / SITE PLAN
SKETCH MAP
PROJECT NAME:
FOLEY HOME SALES, LLC
COUNTRY MEADOWS LOT 5
IREDELL COUNTY, NORTH CAROLINA
AUG 2019
SOIL & FORESTRY SERVICES
Soil & Forestry Services of the Carolinas, PA
PO Box 832-Mooresville, NC 28115
www.soilandforestryservices.com
SCALE
1" = 30'
FIELD WORK
WR
DRAWN BY
WD
PROJECT MGR.
WD
PROJECT NO.
815

PPBPS LPP DOSED SYSTEM
FOR WASTEWATER TREATMENT

Applicant:	Foley Home Sales, LLC
Phone:	856 404-5379
County:	Iredell
Location:	Country Meadows Lot 5

Source of Wastewater Flow:	4 Bedroom Single Family Residence
Estimated Daily Wastewater Production:	480 gpd
System Flow:	27.44 gpm

Design Specifications

Drainfield Size:	291 lf
Loading Rate:	0.275 gpd/ft.^{2}
Depth of Gravel in Trench:	n/a
Gravel Size:	n/a
Trench Depth:	31 in
Trench Width:	24 in.
Septic Tank Size:	1000
Pump Tank Size:	1000
Estimated Supply Line Length:	52 lf
Supply Line Diameter:	2 in. SCH 40 PVC
Supply Line Volume:	9.05 gal
Dosing Volume:	241.20 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:	0.79 ft
Elevation Head:	10.00 ft
Total Dynamic Head:	12.90 ft
Threaded Union:	In Tank
Gate Valves:	1 in Tank: 1 per lateral
Check Valves:	In Tank
Anti-Siphon Hole:	n/a
Recommended Pump:	

Country Meadows Lot 5
LPP PPBPS System

DESIGN FLOW:	480	gpd
SOIL APPLICATION RATE:	0.275	gpd/ft.^{2}
TOTAL AREA TRENCH BOTTOM:	582	sf
TOTAL LATERAL LENGTH:	291	lf
NUMBER OF FIELDS:	1	
LATERAL LENGTH REQUIRED PER FIELD:	291	lf
SUPPLY LINE LENGTH:	52	lf
TOTAL DYNAMIC HEAD:	12.90	gpm
DOSING VOLUME:	241.20	gal
PUMP TANK DRAW DOWN*:	11.5	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 5

Layout for a 4 bedroom home **Aug 2019**

LINE #	FLAG COLOR	BS	HI	FS	ELEV	FLAGGED LENGTH	DESIGN LENGTH
TBM			110.0		100.0		
INSTR. 1							
HOUSE					99.9		
TANK				10.00	100.0		
			REPAIR				
1	Orange			3.30	106.7	24	24
2	Blue			3.70	106.3	39	39
3	Pink			4.00	106.0	58	58
4	Red			4.20	105.8	81	81
5	Orange			4.60	105.4	90	89
			SYSTEM				
6	Yellow			5.50	104.5	92	92
7	Blue			6.80	103.2	96	93
8	Pink			7.40	102.6	73	63
9	Red			8.40	101.6	47	43

	LINE LENGTH	LTAR GPD/FT²	SYSTEM TYPE	REDUCTION TYPE	DIST	TRENCH DEPTH
SYSTEM	291	0.275	PPBPS	50%	LPP	31
REPAIR	291	0.275	PPBPS	50%	LPP	30

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 Lot 5

SYSTEM FLOW

DESIGN SPECIFICATIONS

Line #	Color	Elevation	Length	Hole Size	Flow/hole	Trench A	Number of Panels
6	YELO	104.5	92	0.156	0.41	184	21
7	BLUE	103.2	93	0.156	0.41	186	21
8	PINK	102.6	63	0.156	0.41	126	15
9	RED	101.6	43	0.156	0.41	86	10
							67
	total	**feet =**	**291**	**gal/min =**	**27.53**		
			Des. Flow	**480**			
			Pump Run=	**8.78**			
			soil LTAR	**0.275**			
			LTAR with mod.	**0.55**			

.156 equals 5/32 inch hole

CALCULATIONS

Location	Country Meadows	
Project Number	18-1085	
Lot No:	5	
No. of Bedrooms	4	
Design Flow	480	$^{gal}/_{day}$
LTAR	0.275	$^{gal}/_{ft^2\ day}$
Accepted? (YES OR NO)	No	
Supply Line Length	52	ft.
Supply Line Volume	9.048	gal.
Required Feet of Line	291	ft.
Amount of Line from Layout	291	ft.
Gallons per Minute	27.53	$^{gal}/_{min}$
Required Septic Tank Capacity	1000	gal.
Minimum Standard Tank Size	1000	
Panel Volume	3.6	gal.
# of Panels	67	
Dosing Volume	241.20	gal.

Note: Dosing volume based on # of panels x 3.6 gal/panel

Tank Draw Down	11.5	in.
	Generic Draw Down of 21 gal.per in.	
Pump Run Time	8.76	minutes
Elevation Head	10	ft.
Pressure Head	2	ft.
Friction Factor	1.51	ft./100 ft. *(From the interpolater.)*
Friction Head	0.79	ft.
Friction Head +15%	0.90298	
Total Dynamic Head	12.90	ft.

FRICTION FACTOR INTERPOLATER
2" SCH 40 PVC

GPM	*f*
20	0.84
	-0.88
25	1.27
27.4	1.51
30	1.78
	-1.76
35	2.37
37	2.63
40	3.03
42.7	3.43
45	3.77
46.51	4.01
50	4.58
57.11	5.89
60	6.42

SOIL & FORESTRY SERVICES
OF THE CAROLINAS, PA

July 1, 2019

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 5-124 Country Meadows Drive

Mr. Snow,

Attached please find sealed soil notes as well as site plans and design related data for a 4-bedroom vertical panel block system using LPP 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, Inc.:

Signature: O Foley

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

Wendell Overby, LSS

Signature: Wendell Overby 7-1-19

Seal:



Four (4) Bedroom PPBPS Septic System Design using
LPP Distribution for Lot 5 of Country Meadows Subdivision
124 Country Meadows Drive, Mooresville, NC 28115

Contents: **Page**

Information for the Installer---------- 1

Design Information
- Design Specifications---------- 2-3
- Layout Specifications---------- 4
- System Flow---------- 5

Site Plan---------- 6

Calculations---------- 7

LPP Trench Schematic__---------- 8

Profile Descriptions---------- 9

Iredell County Septic Application---------- 10-11

Iredell County Zoning Permit---------- 12

Environmental Health Requirements---------- 13

Agent Authorization---------- 14

Owner: Foley Home Sales, LLC
856.404.4379

Revised 8/13/2019
Job #18-1185

Design By: Soil & Forestry Services of the Carolinas, PA

INFORMATION FOR THE INSTALLER:

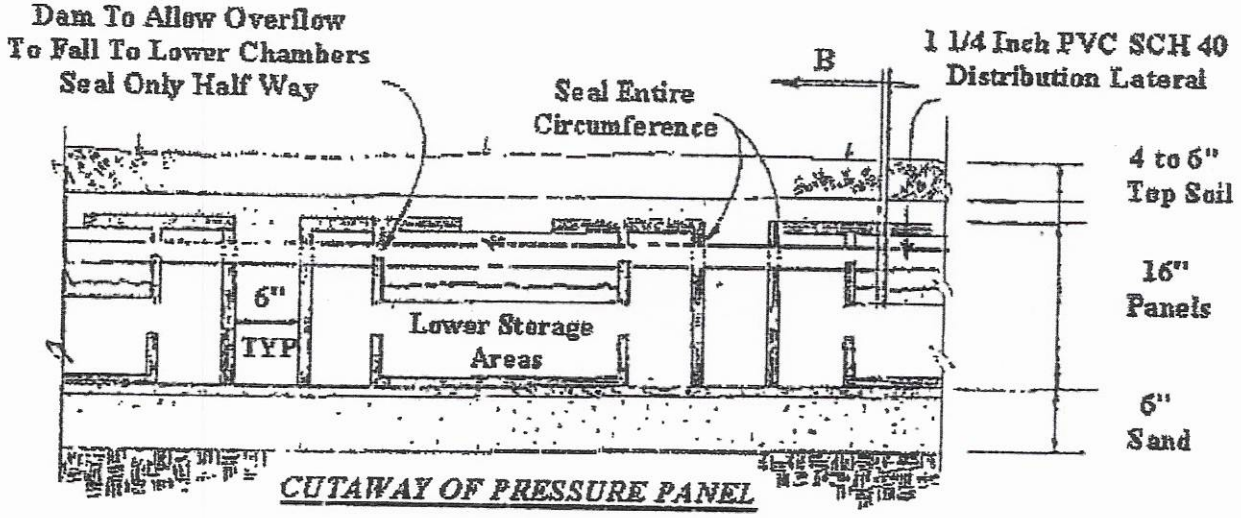
- The permit should be read very carefully prior to bidding. The following are details that must be considered along with all other considerations.
- Tanks shall be approved by DHH, and certification supplied by the manufacturer.
- The installer shall be responsible to the owner for placement of the tanks and to insure that final grades are returned to the original natural grade, with exception of added structural features.
- The supply trench shall be compacted to eliminate cavities left during initial fill placement.
- Installation of the system shall be during dry conditions in order to protect the soil
- All fittings shall be pressure rated fittings.
- All joints shall be cleaned with PVC pipe cleaner and a heavy bodied glue applied to weld all joints.
- Where required by the county health department, post installation inspections by the designer must be scheduled 5 week days in advance.
- Trenches shall be carefully excavated so the bottom is within 2" from the highest to . the lowest points of elevation within the trench. If the bottom elevation needs adjusting after it has been trenched, it will be done by removing high points rather than filling low points. It is extremely important to insure that trenches are not over excavated during initial trenching. All fine grading within the trench will be hand done with a shovel. No loose material will be left in the trench
- All pipe openings in the tanks shall be properly grouted. This also applies to the joints around the riser.
- All tanks shall be properly back filled and compacted to prevent slump at a later date.
- Earth dams, constructed of relatively impervious material, shall be installed at the beginning and end of each lateral.
- No heavy equipment shall be used on the field during or after installation. The use of a small loader (i.e. Bobcat) or a trencher (i.e. Ditch Witch 2300/2310) may be used.
- Elevations at pinflag locations should be checked by the installer prior to beginning
- Pump tank riser should be 6" above grade, control panel should be 12" above grade.
- Septic tank riser shall be a minimum of 6" above finished grade.
- **System specified as LPP PPBPS type**
- **Repair specified as LPP PPBPS type**
- **System trench depth specified at 31"**
- **System trenches installed on 8' minimum; 2' wide trenches**
- **Site plan, septic layout on 9' centers; 3' trenches**

Panels With Pressure Distribution

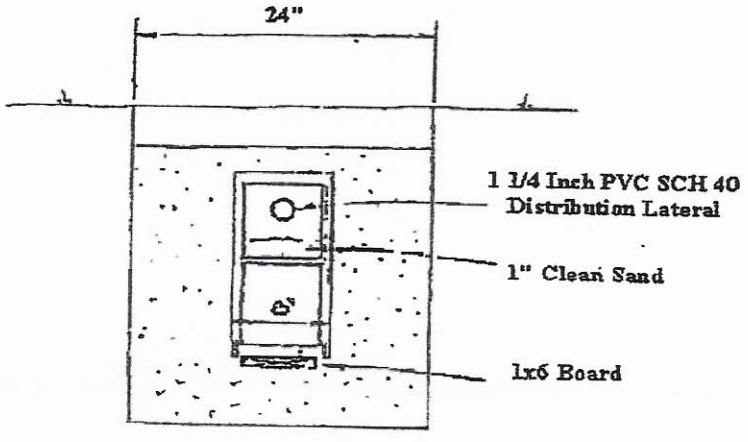
The LP Panel uses technology similar to that of Low Pressure Pipe (LPP) Systems. The tables and distribution design described in the LPP manual is applicable to the pressure Panel System. The system should be used with two to four feet of head. In many respects a LP Panel is similar to a LPP with the holes discharging into the panels.

The dosing cycle for the Panel System is designed to pump enough effluent to fill the top chambers of all the panels in the system. The top chamber of a 16 inch panel holds 3.6 gallons. When the system has 34 panels and all holes are the same size, then you would multiply 34 X 3.6 to get 122 gallons per dose cycle. The holes are drilled in the distribution pipe at the 10 and the 2 o'clock position. These are then placed so that the effluent is pumped into the top chamber of the panel. If the hole sizing changes in the system the pump cycle is set by the hole that is discharging the fastest.

All valves and turn-ups should be neatly capped, covered and labeled for future service. Pump tanks should be constructed as shown in the drawing on page 12 to allow for service and repairs.



CUTAWAY OF PRESSURE PANEL



PROPERTY ID #: 4659349026
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Foley Home Sales, LLC APPLICATION DATE
ADDRESS: 1571 Charlotte Hwy Mooresville NC 28115 DATE EVALUATED: 3/20/19
PROPOSED FACILITY: New Home PROPOSED DESIGN FLOW (.1949): 480 PROPERTY SIZE: .49
LOCATION OF SITE: Country Meadows Lot 5-124 Country Meadows Drive PROPERTY RECORDED: No
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)		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	L / 4%	0-9	RB SL WFGr	Fr SS SP	N/A	45	PS	N/A	PS .275
		9-30	R C WFA/S	Fr SS SP					
		30-45	RB CL WFS	Fr SS SP f/c sap	Y parent material				
		45-62	VAR SL MASS	VFr SS SP					
2	L / 5%	0-6	B SL WFGr	Fr SS SP	N/A	68	PS	N/A	PS .3
		6-21	R C WMS	Fi SS SP					
		21-68	BR CL WFS	Fr SS SP f/c sap					
3	L / 10%	0-10	B SL WFGr	VFr SS SP	N/A	48	PS	N/A	PS .3
		10-34	R C WFS	Fr SS SP					
		34-48	BR CL WFS	Fr SS SP c sap					
		48-72	VAR SL MASS	VFr SS SP					
4	L / 11%	0-6	B SL WFGr	Fr SS SP	N/A	47	PS	N/A	PS .3
		6-17	R C WMS	Fr SS SP					
		17-31	R CL WFS	Fr SS SP few sap					
		31-47	R CL WFS	Fr SS SP c sap					
		47-70	VAR SL Mass	VFr NS NP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	290	290
System Type(s)	PPBPS	PPBPS
Site LTAR	.275	.275

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS

EVALUATED BY: Overby
OTHER(S) PRESENT:

COMMENTS:

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*

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 ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: FOLEY HOME SALES Address: 1075 Blue Spruce Dr. Mooresville Zip: 28115
Applicant Email: Foley1301@GMAIL.COM Phone: 856-404-5379 Alt. Phone: 704-677-8482
Owner Name: DOUG FOLEY Address: 1075 Blue Spruce Dr. Mooresville Zip: 28115
Owner Email: Foley1301@gmail.com Phone: 856-404-5379 Alt. Phone: 704-677-8482

Property Information:

Street Address: 124 Country Meadows Drive Mooresville, NC 28115
Subdivision Name: Country Meadows Section/Phase: _____ Lot Number: 5
Driving Directions: Charlotte Hwy to Country Meadows Drive

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: _____ 1/27/2021
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

(Check and sign only ONE of the options below)

1. *** APPLICANT AND OWNER ARE THE SAME. *** *(Sign here)* _____

Applications for permits require the "signature of the owner or owner's legal representative" (15A NCAC 18A .1937). If the owner does not sign the application himself or herself, they can submit any one of the following documents to designate their legal representative: *Power of Attorney; Real Estate Contract; Estate executor; Bankruptcy trustee; Court ordered guardianship*
In the absence of the above documentation, the property owner may provide the local health department with documentation that designates a legal representative. A property owner may:
Complete this form to document his or her legal representative, or provide his or her own form that contains the information in this form. If there are multiple property owners, then all property owners must sign the form that designates a legal representative.

By signing a form that designates a legal representative for purposes of 15A NCAC 18A .1937, the property owner authorizes that representative to act on their behalf in matters pertaining to the application and permitting process, including signing or receiving any application, document or permit. The owner retains full responsibility to meet all permit conditions specified by the local health department.

2. I, Foley Home Sales, Doug Foley, am the legal owner(s) of the property located at 124 Country Meadows Dr Mooresville 28115, identified as

PIN (Parcel Identification Number) 4659431962.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) _____

_____, 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)

1/27/2021
Date

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

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

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH #245673

8.5.19
$1,200.00

APPLICATION FORM

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

THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED. APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS.

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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 **Address:** 1075 BLUE SPRUCE DRIVE **Zip:** 28115

Applicant Email: FOLEY1301C GMAIL.COM **Phone:** 856 404-5379 **Alt. Phone:** _____

Owner Name: SAME **Address:** _____ **Zip:** _____

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

Property Information:

Street Address: 124 COUNTRY MEADOWS DRIVE, MOORESVILLE NC 28115

Subdivision Name: COUNTRY MEADOWS **Section/Phase:** _____ **Lot Number:** 5

Driving Directions: STATESVILLE AVENUE NORTH (HWY 115) PAST HWY 150. CONTINUE ON HWY 21. PROPERTY ON RIGHT JUST SOUTH OF FREEZE CROSSING.

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

CHECK FOUNDATION TYPE

(X) New Single Family Residence — Maximum Number of Bedrooms: 4 — (X) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: 8 — ( ) Concrete Slab Foundation
( ) Accessory Building — ( ) Swimming Pool — ( ) Basement with Plumbing
( ) Bedroom(s) Addition — ( ) Other Addition/Structure: _____ — ( ) Basement without Plumbing
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____
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 (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: Wendell G _____ 5/30/19
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

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, DOUG FOLEY, am the legal owner(s) of the property located at 1571 CHARLOTTE HWY, MOORESVILLE, NC 28115, identified as PIN (Parcel Identification Number) 4659-34-9026-000, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) SOIL & FORESTRY 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)	Date	Signature of Witness	Date
	5/17/19		5/17/19

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

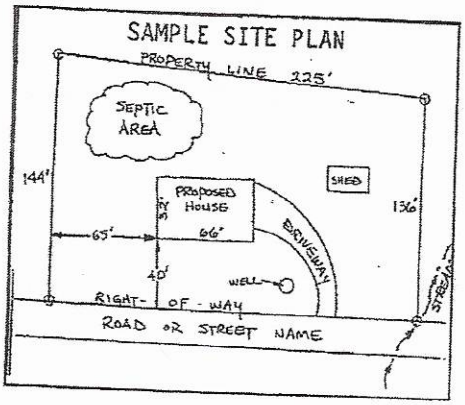
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

SITE PLAN WORKSHEET

SEE THE "SAMPLE SITE PLAN" BELOW. *INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM OR WELL PERMIT!!!*

Place an (X) beside each item as you complete the site plan:

- (X) Property Line measurements are clearly identified
- (X) All proposed structures are indicated
- (X) Front and side setbacks from property line
- (X) Preferred driveway location
- (X) Preferred well location
- (X) Preferred septic system location
- ( ) North arrow, or other sufficient indicator of direction

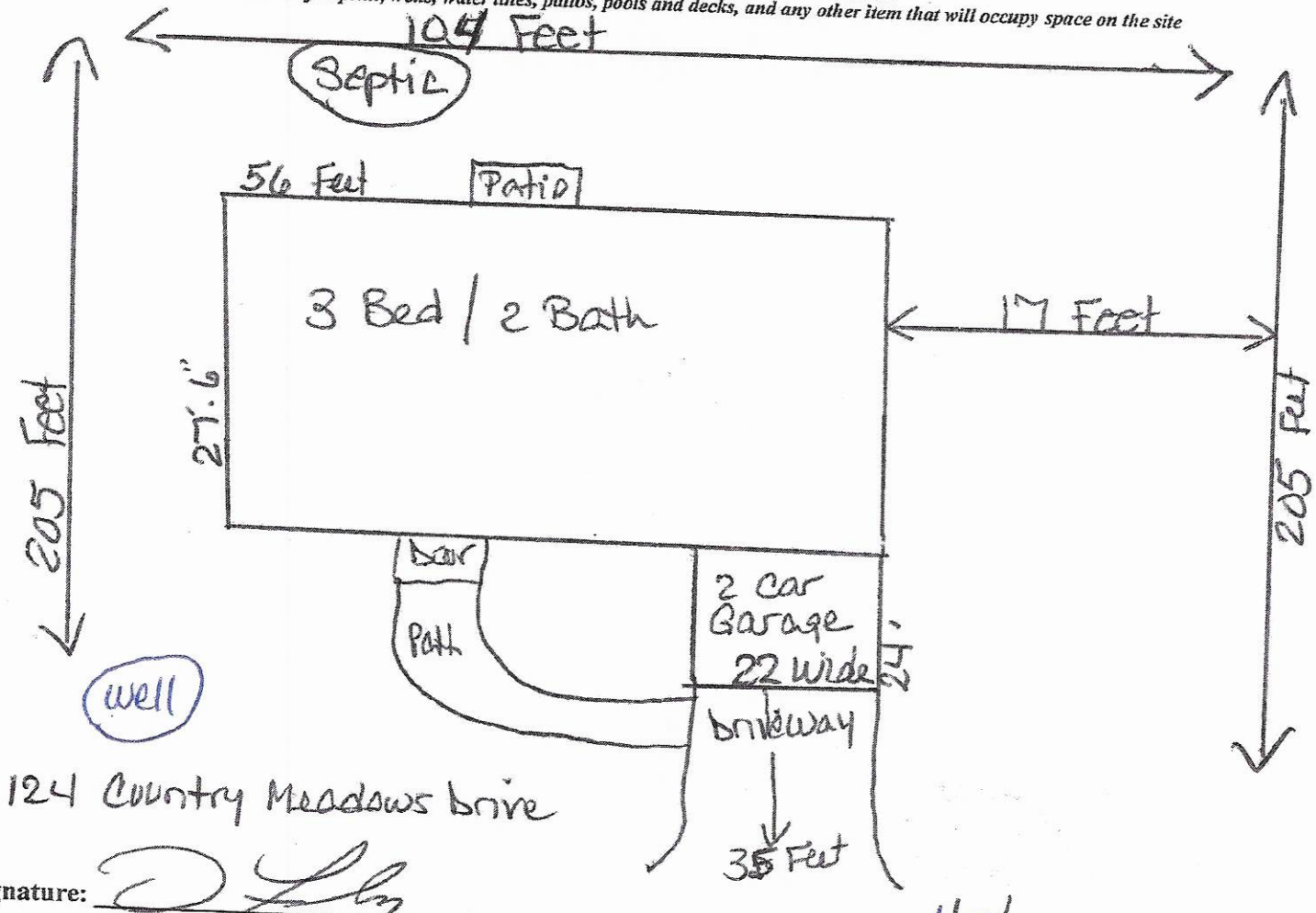


Circle N/A on the following if appropriate:

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: _____

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

1/20/2021

DATE

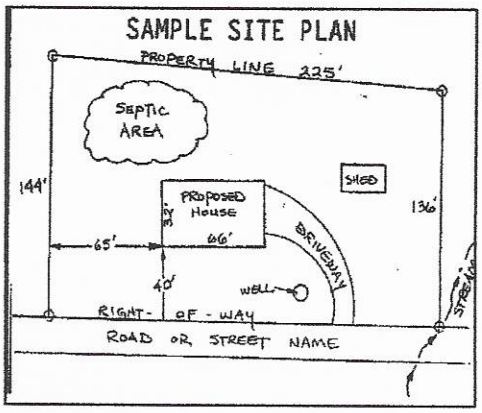
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

SITE PLAN WORKSHEET

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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**
- (X) **Preferred well location**
- (X) **Preferred septic system location**
- (X) **North arrow, or other sufficient indicator of direction**



Circle N/A on the following if appropriate:

Location of septic systems and wells within 100' of your property	**N/A**
Location of easements and rights of ways on your property	**N/A**
Location of any designated wetlands on the property	**N/A**

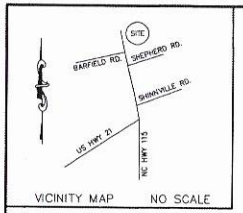
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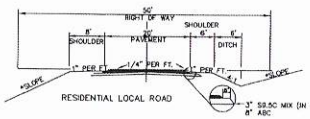
SEE ATTACHED

Signature: Wendell G — 5/30/19

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



VICINITY MAP NO SCALE



RESIDENTIAL LOCAL ROAD

3" S8.5C MIX (IN TWO 1.5" LIFTS)
8" ABC

All roads in this subdivision are hereby declared public. The maintenance of all streets and roads in this subdivision shall be the responsibility of the Developer of this phase and, it shall be their responsibility to bring the roads up to the standards of the North Carolina Department of Transportation Secondary Roads Council before any public streets or roads on this plat are included, at any time after the approval of this plat, into the North Carolina System Maintained Road System.

Owner

DEPARTMENT OF TRANSPORTATION
DIVISION OF HIGHWAYS
PROPOSED SUBDIVISION ROADS
CONSTRUCTION DESIGN STANDARDS CERTIFICATION
APPROVED BY: DISTRICT ENGINEER
DATE: 8/27/19

NOTES:
1) This property may be subject to any easements and/or Rights-of-way of record.
2) All lots are subject to a 10' Utility and Drainage Easement 10 feet on each side of the property line.
3) Total acreage to be subdivided: 12.13 AC.
4) Total lots created: 16 LOTS
5) Property zoned: RA , ADJOINING ZONING IS RA
6) Minimum Building Setback: 35' Front
35' Rear
15' Side
25' Corner
SEE LOT 4 TYPICAL
7) Minimum Lot width: 100'
8) Minimum Lot size: 20,000 Sq.Ft. (0.46 ac.)
9) The smallest Lot in this subdivision is Lot 15 = 0.47 AC.
10) The largest Lot in the Subdivision is Lot 7 = 1.28 ac.
11) The property is located in Barringer Twsp., Iredell Co., N.C.
12) Based upon review of flood insurance rate map, community panel number 3710483700J, 3\18\2008 This property is located in zone "X"
13) Tax parcel (pin number) = 4658349026
14) Deed ref. = 2614\2106
15) There is 915.51 linear feet of new roadway.
16) No geodetic monument located within 2000' of said property.
17) All lots to be served with Individual septic systems & individual wells.
18) FIRE SUPPRESSION : Fire hydrant located 1.2 miles from this site.
19) AS OF THE DATE OF THIS RECORDING, THE LOTS REPRESENTED ON THIS PLAT HAVE NOT BEEN INSPECTED OR APPROVED BY THE IREDELL COUNTY HEALTH DEPT. UNTIL INSPECTED THERE IS NO ASSURANCE THAT A BUILDING PERMIT WILL BE ISSUED.
20) LOT 17 WILL NOT HAVE ANY ACCESS ONTO COUNTRY MEADOWS DRIVE. DRIVE ACCESS HAS TO BE FROM GRASSLAND DRIVE

I HEREBY CERTIFY THAT THE SUBDIVISION PLAT SHOWN HEREON HAS BEEN FOUND TO COMPLY WITH THE SUBDIVISION REGULATIONS OF THE COUNTY OF IREDELL, NORTH CAROLINA AND THAT THIS PLAT HAS BEEN APPROVED BY THE SUBDIVISION ADMINISTRATOR FOR RECORDING IN THE OFFICE OF REGISTER OF DEEDS OF IREDELL COUNTY.

SUBDIVISION ADMINISTRATOR
IREDELL CO., NORTH CAROLINA

8-27-19
DATE

STATE OF NORTH CAROLINA
COUNTY OF IREDELL

I, [illegible], REVIEW OFFICER OF IREDELL COUNTY, CERTIFY THAT THE MAP OR PLAT TO WHICH THIS CERTIFICATION IS AFFIXED MEETS ALL STATUTORY REQUIREMENTS FOR RECORDING.

8-27-19
DATE

REVIEW OFFICER

IREDELL COUNTY, NORTH CAROLINA

A PORTION OF LOTS 1,16-18 SHOWN ON THIS PLAT TO THE BEST OF MY KNOWLEDGE LIES WITHIN THE WS-IV PROTECTED AREA OF THE LAKE NORMAN/CATAWBA RIVER WATERSHED AS DESIGNATED BY THE NORTH CAROLINA DIVISION OF ENVIRONMENTAL MANAGEMENT AND AS APPEARS ON THE WATERSHED PROTECTION MAP OF IREDELL COUNTY.

8-27-19
DATE

SUBDIVISION ADMINISTRATOR

Doc ID: 006578390003 Type: CRP
Recorded: 09/27/2019 at 12:06:08 PM
Fee Amt: $21.00 Page 1 of 3
Iredell County, NC
Ronald R. Wyatt Register of Deeds
BK 70 PG 105

OWNERS CERTIFICATE AND NOTARIZATION

I HEREBY CERTIFY THAT I AM THE OWNER OF THE PROPERTY SHOWN AND DESCRIBED HEREON, WHICH IS LOCATED IN THE SUBDIVISION JURISDICTION OF THE COUNTY OF IREDELL AND THAT I HEREBY ADOPT THIS PLAN OF SUBDIVISION WITH MY FREE CONSENT AND ESTABLISH MINIMUM BUILDING SETBACKS AS NOTED, AND DEDICATE ALL ROADS, ALLEYS, WALKS, PARKS, AND OTHER SITES AND EASEMENTS TO PUBLIC OR PRIVATE USE AS NOTED.

I FURTHER CERTIFY THAT:
A: THERE ARE NO DEED RESTRICTIONS WHICH WILL BE VIOLATED BY THE REQUESTED SUBDIVISION; AND
B: THERE ARE NO GOVERNMENTAL REGULATIONS OF ANY KIND, OTHER THAN THOSE FOR WHICH A VARIANCE HAS BEEN APPLIED FOR UNDER IREDELL COUNTY SUBDIVISION ORDINANCE REGULATIONS, WHICH WILL BE VIOLATED BY THE REQUESTED SUBDIVISION; AND
C: I UNDERSTAND THAT ENFORCEMENT OF DEED RESTRICTIONS AND ANY OTHER CONTRACTUAL AGREEMENTS IS NOT THE RESPONSIBILITY OF IREDELL COUNTY, WILL NOT BE UNDERTAKEN BY IREDELL COUNTY, AND IS THE SOLE RESPONSIBILITY OF THE PARTIES AFFECTED BY VIOLATIONS OF SUCH DEED RESTRICTIONS AND CONTRACTUAL AGREEMENTS.

8/26/19
DATE

MEMBER/MANAGER

8-26-19
DATE

OWNER

NORTH CAROLINA
IREDELL COUNTY

I, Courtney N. Cox
A NOTARY PUBLIC FOR SAID COUNTY AND STATE
DO HEREBY CERTIFY THAT DOUG FOLEY
& MICHAEL R. NICHOLSON
OWNER(S) PERSONALLY APPEARED BEFORE ME THIS DAY AND ACKNOWLEDGED THE EXECUTION OF THE FOREGOING INSTRUMENT. WITNESS MY HAND AND OFFICIAL SEAL,
THIS 26 DAY OF August, 2019.

NOTARY PUBLIC
MY COMMISSION EXPIRES: 11/14/2022

COURTNEY N. COX
NOTARY PUBLIC
IREDELL COUNTY, NC
11-14-22

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 2614 PAGE 2106; 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 2072 PAGE 291.); THAT THIS MAP WAS PREPARED IN ACCORDANCE WITH G.S. 47-30, AS AMENDED.

WITNESS MY HAND AND SEAL THIS 26 DAY OF August A.D. 2019.

OFFICIAL SEAL

PROFESSIONAL LAND SURVEYOR
L-3499
REGISTRATION NUMBER

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

THIS SURVEY CREATES A SUBDIVISION OF LAND WITHIN THE AREA OF A COUNTY OR MUNICIPALITY THAT HAS AN ORDINANCE THAT REGULATES PARCELS OF LAND.

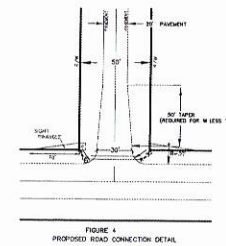
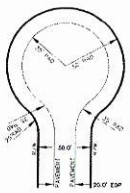
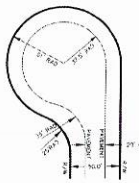


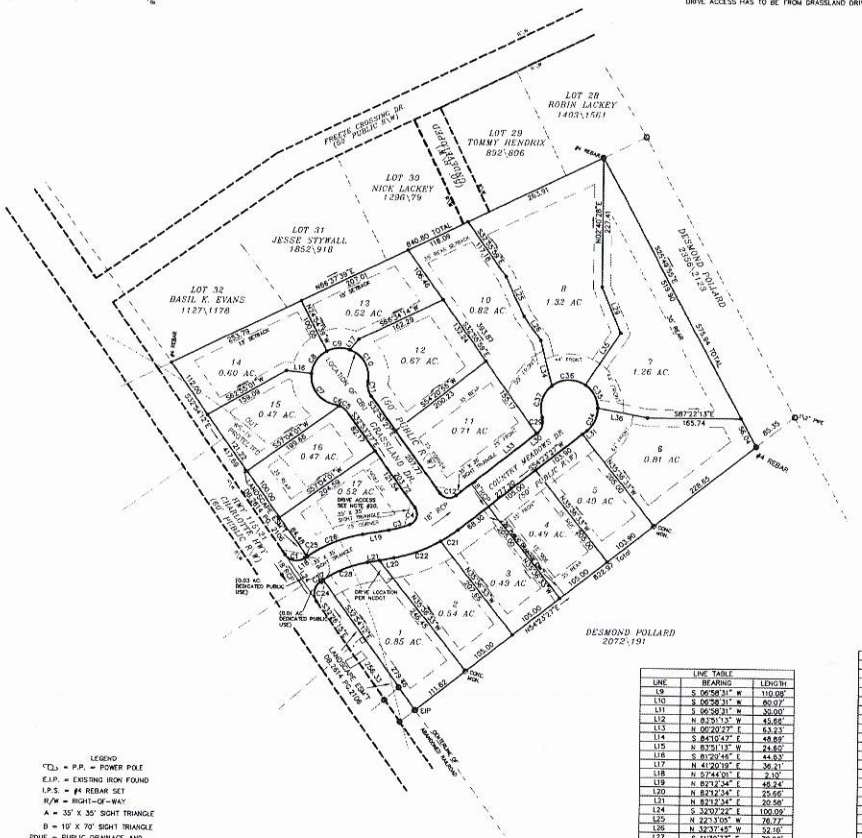
FIGURE 4
PROPOSED ROAD CONNECTION DETAIL



CUL-DE-SAC DETAIL



CUL-DE-SAC DETAIL



LEGEND
"□" = P.P. = POWER POLE
E.I.P. = EXISTING IRON FOUND
I.P.S. = #4 REBAR SET
R/W = RIGHT-OF-WAY
A = 35' X 35' SIGHT TRIANGLE
B = 10' X 70' SIGHT TRIANGLE
PDUE = PUBLIC DRAINAGE AND UTILITY EASEMENT
CL = CENTER LINE
RCP = REINFORCED CONCRETE PIPE
CM = CONCRETE CONTROL MONUMENT

LINE TABLE		
LINE	BEARING	LENGTH
L9	S 06°58'31" W	110.08'
L10	S 06°58'31" W	60.07'
L11	S 06°58'31" W	30.00'
L12	N 83°01'13" W	45.86'
L13	N 00°20'27" E	63.23'
L14	S 84°10'47" E	48.89'
L15	N 83°01'13" W	24.82'
L16	S 81°20'46" E	44.63'
L17	N 41°20'09" E	36.21'
L18	N 57°44'05" E	36.79'
L19	N 82°12'34" E	45.24'
L20	N 82°12'34" E	25.56'
L21	N 82°12'34" E	20.56'
L24	S 32°07'22" E	100.09'
L25	N 22°13'05" W	76.77'
L26	N 32°37'45" W	52.16'
L27	S 11°39'37" E	78.96'
L28	S 36°16'36" W	106.87'
L29	N 19°39'02" W	87.88'
L30	S 54°20'55" W	0.52'
L31	S 54°20'55" W	8.54'
L32	S 76°59'22" E	86.60'
L33	S 54°20'55" W	181.12'
L34	S 11°39'37" E	82.14'
L35	S 36°16'36" W	109.98'
L36	S 76°59'22" E	86.99'

CURVE TABLE				
CURVE	RADIUS	LENGTH	BEARING	CHORD
C1	25.00'	39.27'	S 77°13'59" E	35.36'
C3	205.00'	37.83'	N 76°35'24" E	37.77'
C4	20.00'	30.48'	N 18°22'24" E	27.63'
C5	35.00'	18.70'	N 46°11'56" W	18.48'
C6	35.00'	8.85'	N 70°44'36" W	8.82'
C7	50.00'	75.25'	S 24°52'36" E	68.24'
C8	50.00'	49.61'	S 36°38'45" W	47.60'
C9	50.00'	41.74'	S 89°06'15" W	40.54'
C10	50.00'	69.19'	N 27°38'19" E	63.80'
C11	35.00'	27.52'	S 10°28'28" E	26.84'
C12	20.00'	32.36'	S 76°15'00" E	28.95'
C21	255.00'	36.82'	N 50°31'40" E	36.79'
C22	255.00'	86.99'	N 72°26'13" E	86.56'
C24	20.00'	39.01'	S 12°15'45" W	33.17'
C25	255.00'	3.18'	S 36°02'26" W	3.18'
C26	255.00'	105.75'	S 70°17'12" W	105.00'
C27	205.00'	6.46'	S 57°48'22" W	6.46'
C28	205.00'	83.87'	S 70°26'47" W	83.30'
C29	25.00'	31.24'	N 18°37'11" E	29.24'
C30	51.00'	64.56'	N 19°01'02" W	60.30'
C31	51.00'	64.12'	N 85°41'19" W	59.98'
C32	51.00'	49.19'	N 25°01'15" W	47.31'
C33	51.00'	46.00'	N 28°28'51" E	44.50'
C34	50.00'	46.00'	N 27°59'25" E	44.40'
C35	50.00'	48.31'	N 26°01'44" W	46.45'
C36	50.00'	62.80'	N 89°43'18" W	58.75'
C37	50.00'	61.52'	S 19°04'01" W	57.71'

RECORD PLAT
OF
COUNTRY MEADOWS
BARRINGER TWSP., IREDELL CO., N.C.

SCALE: 1" = 100'
DATE SURVEYED: JAN. 14, 2019
DATE PLATTED: JUNE 4, 2019
REVISED DATE PLATTED: JULY 30, 2019
REVISED DATE PLATTED: AUG. 26, 2019 (NCDOT COMMENTS)

OWNER: FOLEY HOME SALES LLC
165 RED CEDAR RD.
MOORESVILLE NC 28115

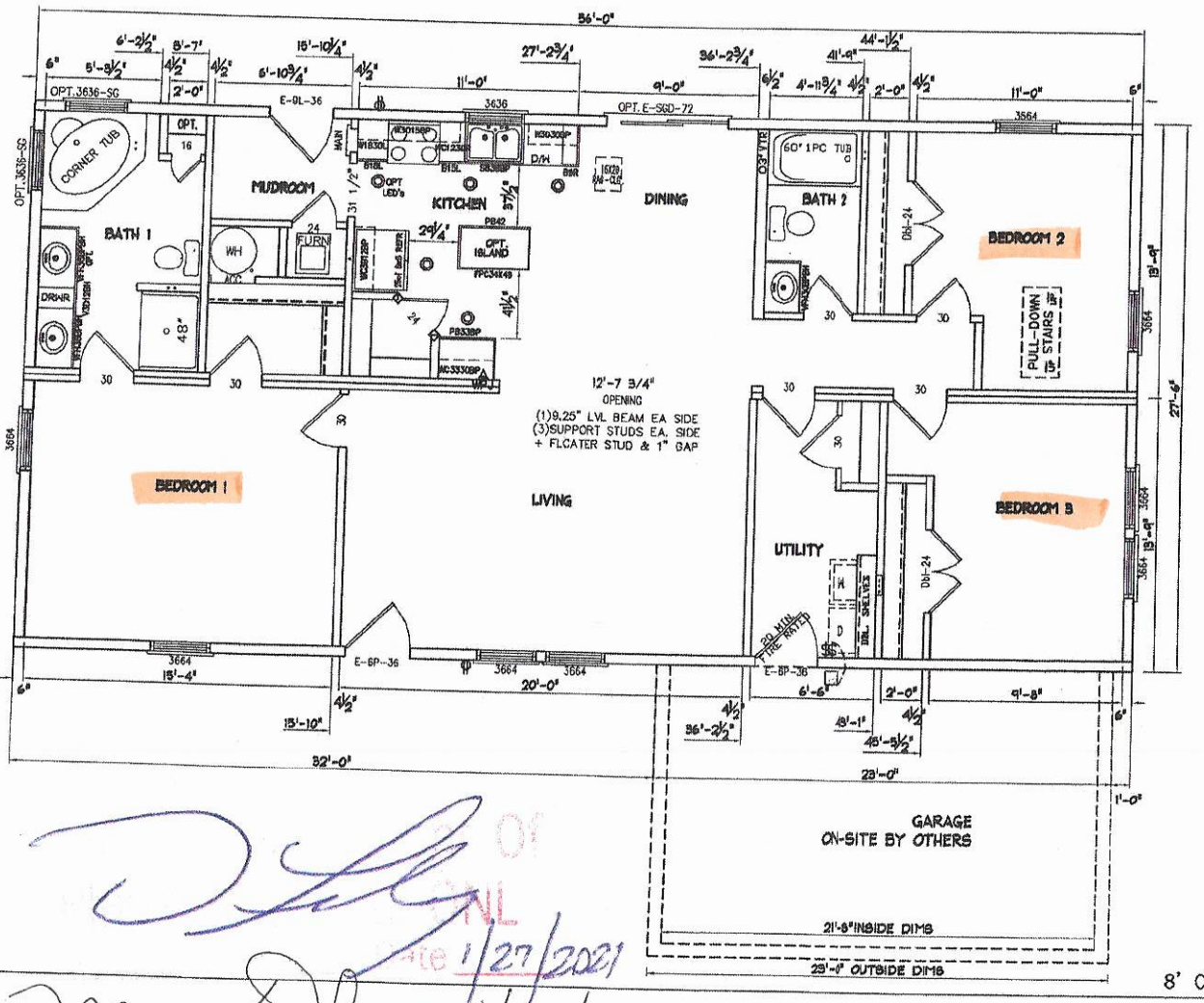
OWNER(SMALL PORTION: MICHAEL R. NICHOLSON
LOCATED IN R\W) 810 CANNON ST.
ROCKWELL, NC 28138

GRAPHIC SCALE

100 0 50 100 200 400
(IN FEET)
1 inch = 100 ft.

FILE NAME: COUNTRY MEADOWS -- 13540.DWG

DAS
DON ALLEN & ASSOCIATES P.A.
"Since 1971"
Commercial * Residential * Mortgage Surveys * Multi-Family Construction Staking * Subdivision Design * Topographical
131 Crescent Park Drive - Suite 102 * Mooresville N.C. 28115
(704) 664-7028 (704) 664-8041 Fax
donallensurvey@gmail.com



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

TOTAL AREA = 1540sf

Date 1/27/2021

Date 1/29/2021

201

Foley Homes / Spec
56'-0" x 27'-6"
CP-A-501 Flipped Foley Spec

1st FLOOR ORDER

DRAWN RWL DATE 11/04/20
REV. DATE
SCALE 3/16" = 1'-0"

Maris Custom Builders, Inc.
5890 Crestline Road
Lawrenburg, NC 28352
1-800-772-0155
www.marischristombuilders.com
All Plans © copyright Maris Custom Builders, Inc.

SHEET 1.0

IREDELL COUNTY

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

APPLICATION NUMBER
245673
Issue Date: 06/13/2019

ZONING PERMIT

Parcel Number	Street Address	Jurisdiction
4659349026.000	124 COUNTRY MEADOWS DRIVE, MOORESVILLE, NC 28115	IREDELL COUNTY

Owner Information	Applicant Information
Owner: FOLEY HOME SALES LLC	Applicant: FOLEY HOME SALES LLC
Address: 1075 BLUE SPRUCE DRIVE	Address: 1075 BLUE SPRUCE DRIVE
MOORESVILLE, NC 28115	MOORESVILLE, NC 28115
Phone: 856-404-5379	Phone: 856-404-5379

Use Requested	Zone Code
MODULAR LOT 5 ADDRESS SHOULD BE 124 COUNTRY MEADOWS	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
12.030	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: _____

Permit Number	181180	TOTAL FEES:	$ 77.25