ICHD–ENVIRONMENTAL HEALTH DIVISION PJB

Statesville Office (704) 878-5305 (Mooresville Office) (704) 660-3625 PERMIT # AP301033

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

PIN # 4659573310

APPLICANT/OWNER: Pete DeNicola APPLICANT ADDRESS: 141 Cedar Woods Dr. Mooresville, NC

SITE ADDRESS: 127 Bluff Meadow Ln. Mooresville, NC PHONE: 704-310-1832 (Gary) ALT. PHONE

SITE DIRECTIONS: NC 115 N → R on Shepherd → L on Shepherd Bluff → R on Bluff Meadow → lot at end SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: Shepherds Bluff SECTION: 5 LOT # 61 LOT AREA: .51ac DESIGN FLOW: 360gpd L.T.A.R.: .3

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	1000	(gal)	PT		Date		System Description: PM 25% reduction (offsite)									☐ Business	No. Persons	6	☑ Private				
Pump Make			Model		Serial #		Repair System Description: pretreatment drip									☐ Other	No. Employees		☐ Public				
# Nitrification Fields	1		# Lines	5 @ 60'	Linear Ft	300'	Maintenance Agreement Required:			☐ YES	☑ NO					☐ Slab	☑ Crawl Space		☐ Community				
Trench Width	36"		Trench Bottom Depth (Low side)	24" / 28" high side		Gravel Depth				☐ GRAVITY	☑ PRESSURE					☐ Basement w/plumbing			☐ Basement w/o plumbing				

Comments / Conditions: * Do not exceed max trench depth of 28". Supply line crossing the gas R/W must be properly deeded & recorded for an encroachment agreement before issuing AC. ✓ See attached encroachment agreement.

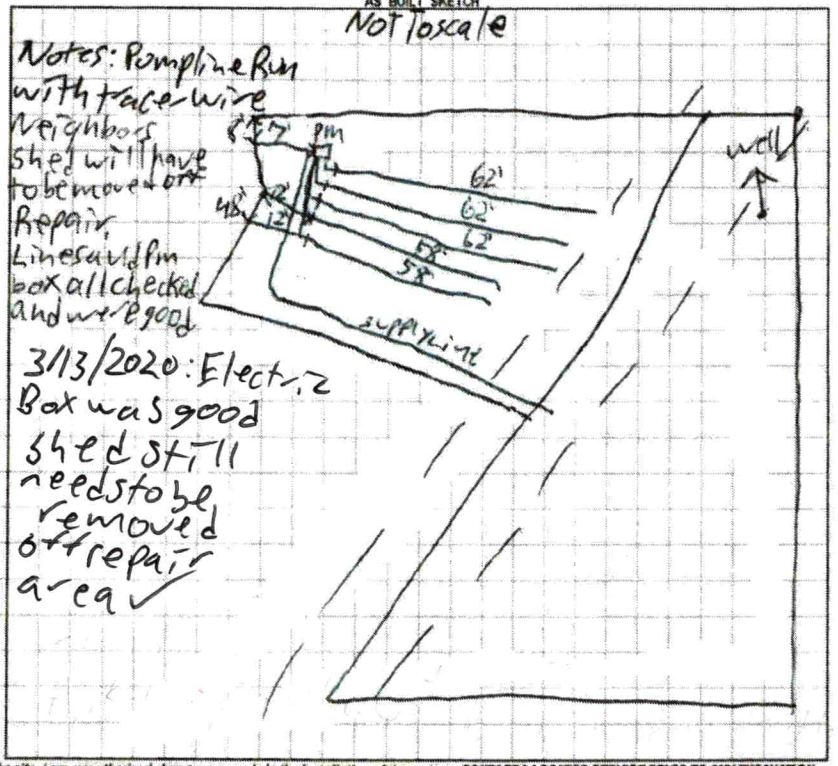
INITIAL SITE SKETCH

See attached site plan by Michael Athanas + Associates

	Date	Initials
Drain Lines Checked	02/19/2020	PJB
Tanks Checked		CN
Pressure Manifold or Valve Box Checked	02/19/20	PJB
Pressure Head Set	2-28-20	
Electrical Checked	3/13/2020	PJB
Floats Set	3/16	KW
Alarm Checked	3/13/2020	PJB
Maintenance Contract Y / N	3/13/2020	PJB

AS BUILT SKETCH

Not To scale



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: Date: 10/21/19 Installed by: Tommy Frye

IMPROVEMENT PERMIT by: Kayla Wilson Date: 9-26-19 OPERATION PERMIT by: Kayla Wilson Date: 3-16-20

AUTHORIZATION TO CONSTRUCT by: Kayla Wilson Date: 10-21-19 Existing System Inspected by: Date:

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

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SUBDIVISION: Shepherds Bluff | SECTION: 5 | LOT # 61 | LOT AREA: .51 ac | DESIGN FLOW: 360 gpd | L.T.A.R.: .3

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	1000	(gal)	PT		Date		System Description: PM 25% reduction (offsite)										☐ Business	No. Persons	6	☑ Private			
Pump Make			Model		Serial #		Repair System Description: pretreatment drip										☐ Other	No. Employees		☐ Public			
# Nitrification Fields	1		# Lines	5 @ 60'	Linear Ft	300'	Maintenance Agreement Required:		☐ YES		☑ NO						☐ Slab	☑ Crawl Space		☐ Community			
Trench Width	36"		Trench Bottom Depth (Low side)	24" / 28" high side			Gravel Depth ——		☐ GRAVITY		☑ PRESSURE						☐ Basement w/plumbing			☐ Basement w/o plumbing			

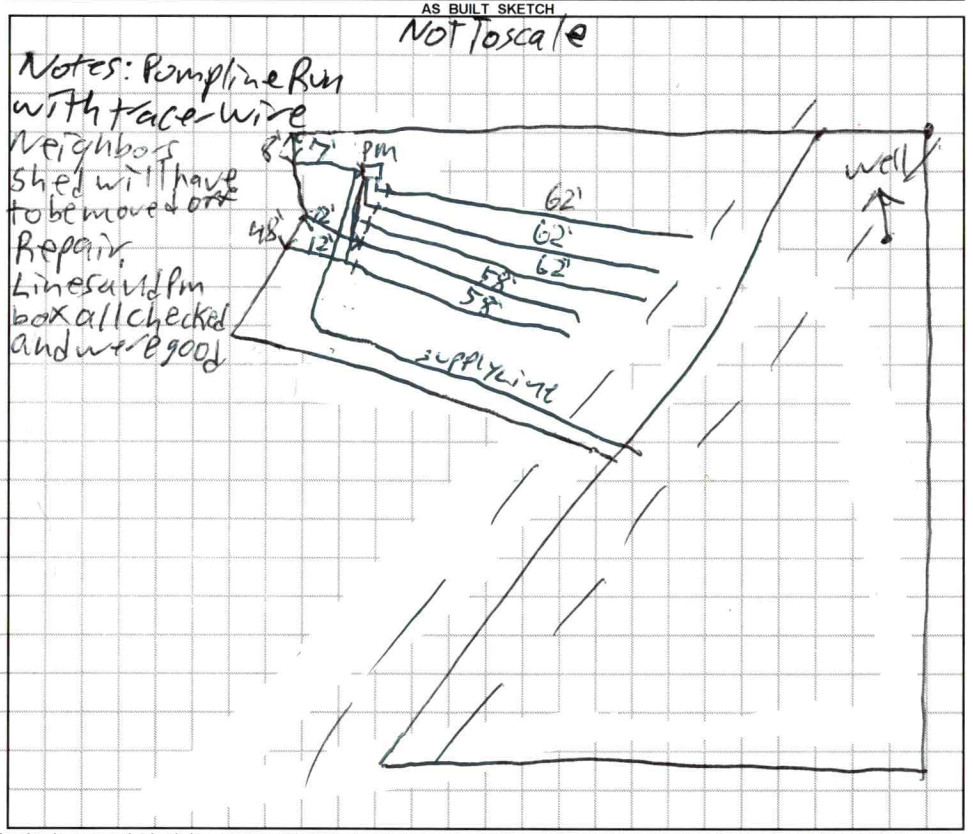
Comments / Conditions: * Do not exceed max trench depth of 28". Supply line crossing the gas R/W must be properly deeded + recorded for an encroachment agreement before issuing AC. ✓ See attached encroachment agreement.

INITIAL SITE SKETCH

See attached site plan by Michael Athanas + Associates

AS BUILT SKETCH

Not To scale



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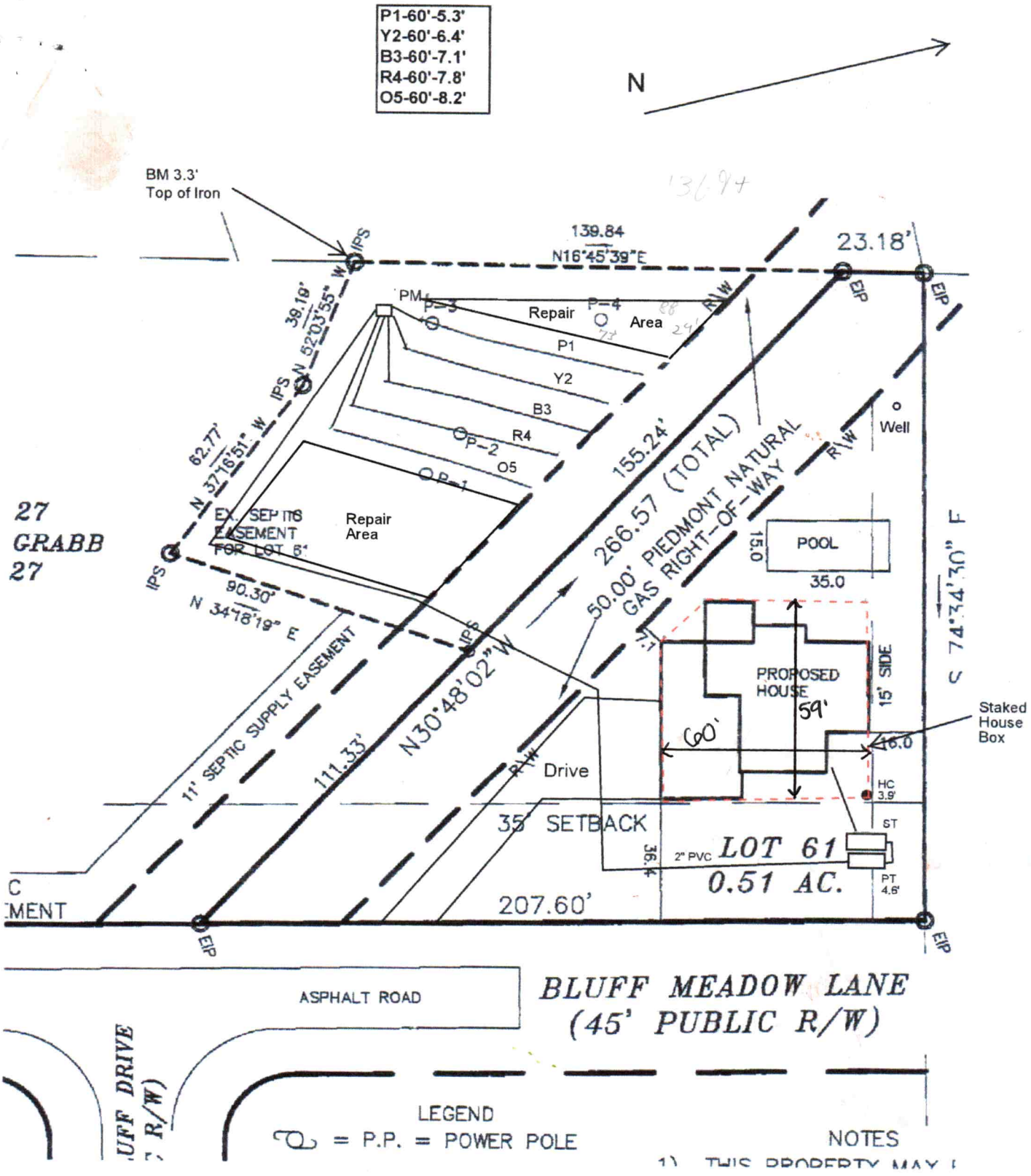
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Owner / Applicant Signature: —— Date: 10/21/19 | Installed by: Tommy Fry

IMPROVEMENT PERMIT by: Kayla Webster Date: 9-26-19 | OPERATION PERMIT by: —— Date: ——

AUTHORIZATION TO CONSTRUCT by: Kayla Webster Date: 10-21-19 | Existing System Inspected by: —— Date: ——

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



Scale
1"=~~50'~~
40'

APPROVED SEP 26 2019
KW



MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887
9/13/19

Reference: Data Sheet Bluff Meadow Ln, Shepherd's Bluff Lot 61
House Footprint: See attached plan
Building Setbacks: 35' front/rear, 15' side
Water Source: Private well
Number of Bedrooms/Daily Flow: 3/360 GPD
Proposed LTAR: 0.3 GPD/FT^2 (initial), 0.15 GPD/FT^2 (repair)
Proposed System Type: 25% Reduction
Proposed Repair System Type: Pretreatment Drip Irrigation
Distribution: Pressure Manifold
Flow per Tap: 5.48 GPM
Tap Size and Material: ½" SCH 80 PVC
System Flow: 27.4 GPM
Dosing Volume: 131.3 gallons
Pump Run Time: 4.8 minutes
Elevation Head: 11.1' (from the lowest point in the line)
Friction Head: 5.7'
Pressure Head: 2'
Total Dynamic Head: 18.8'
Supply Line Length: 310' of 2" PVC
Septic/Pump Tank Size: 1000/1000 gallons
Proposed Trench Bottom: 24" (initial), 6" (repair)



Line	Design Length	Actual Length	Elevation
Pink 1	**60'**	**76'**	**5.3'**
Yellow 2	**60'**	**70'**	**6.4'**
Blue 3	**60'**	**70'**	**7.1'**
Red 4	**60'**	**64'**	**7.8'**
Orange 5	**60'**	**64'**	**8.2'**

Initial System: 300' **Repair System:** 2700 FT^2
Pump Tank: 4.6' **House Corner:** 3.9'
Benchmark: 3.3' (top of iron)

APPROVED SEP 26 2019
KW

PROPERTY ID #: 4659573310
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Shepherds Bluff LLC
ADDRESS: 131 Crosslake Park Dr, STE 102, Mooresville, NC 28117
PROPOSED FACILITY: 3 bdrm
PROPOSED DESIGN FLOW (.1949): 360 GPD
LOCATION OF SITE: Bluff Meadow Ln, Shepherds Bluff Lot 61
APPLICATION DATE
DATE EVALUATED:
PROPERTY SIZE: 0.51 AC
PROPERTY RECORDED:

WATER SUPPLY: Ξ Private ☐ Public Ξ Well ☐ Spring ☐ Other

EVALUATION METHOD: ☐ Auger Boring Ξ Pit ☐ Cut

TYPE OF WASTEWATER: Ξ 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	LS 9%	0-4	Br CL WSBK	FR SS SP SXP	N/A	40"	F-C SAP PS	N/A	PS 0.3
		4-20	R C SBK	FR SS SP SXP					
		20-40	R CL WSBK	FR SS SP SXP					
		40-55	VER SL SAP M	FR SS SP SXP					
2	LS 9%	0-6	Br SCL WSBK	FR SS SP SXP	N/A	55"	F-C SAP	N/A	PS 0.3
		6-55	R CL SBK	FR SS SP SXP					
3	LS 9%	0-4	Br CL WSBK	FR SS SP SXP	N/A	50'	F-C SAP PS	N/A	PS 0.3
		4-18	R C SBK	FR SS SP SXP					
		18-50	R CL WSBK	FR SS SP SXP					
		50-55	VER L SAP M	FR SS SP SXP					
4	LS 9%	0-4	Br CL WSBK	FR SS SP SXP	N/A	34"	COM WR	N/A	PS 0.3
		4-34	R CL WSBK	FR SS SP SXP					
		34-54	VER L SAP M	FR SS SP SXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	900 FT^2	2700 FT^2
System Type(s)	25% Reduction	DRIP
Site LTAR	0.3	0.15

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: MA&A
OTHER(S) PRESENT:

APPROVED SEP 26 2019 KW

COMMENTS:

ER ~~Initial Review~~ AP 301033

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Pd $350

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

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

Page 2: *Site Plan Worksheet* form MUST accompany this application

The following optional attachments may also be submitted: (✓) Survey Plat, scaled no more than 1 inch = 60 feet
Place an (X) beside whichever is submitted if applicable ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: Pete DeNicola **Address:** 141 Cedar Woods Dr, Mooresville, NC **Zip:** 28117

Applicant Email: Diane@Peconicbayhomes.com **Phone:** _____ **Alt. Phone:** _____

Owner Name: Shepherds Bluff LLC **Address:** 131 Crosslake Park Dr STE 102, Mooresville, NC **Zip:** 28117

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

Property Information:

Street Address: 127 Bluff Meadow Ln

Subdivision Name: Shephers Bluff **Section/Phase:** _____ **Lot Number:** 61

Driving Directions: _____

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

CHECK FOUNDATION TYPE

(✓) 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: _____
(✓) Swimming Pool
( ) Other Addition/Structure: _____

(✓) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

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

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

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

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: _____
( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional (✓) Other: Accepted

Please answer the following to the best of your ability:

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

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

Signature: _____ 9/19/2019
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, DIANE DENICOLA, am the legal owner(s) of the property located at LOT 61 SHEPHERDS BLUFF SUBDIVISION, identified as PIN (Parcel Identification Number) 4659-57-3310.000, located in Iredell County, North Carolina.

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

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

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

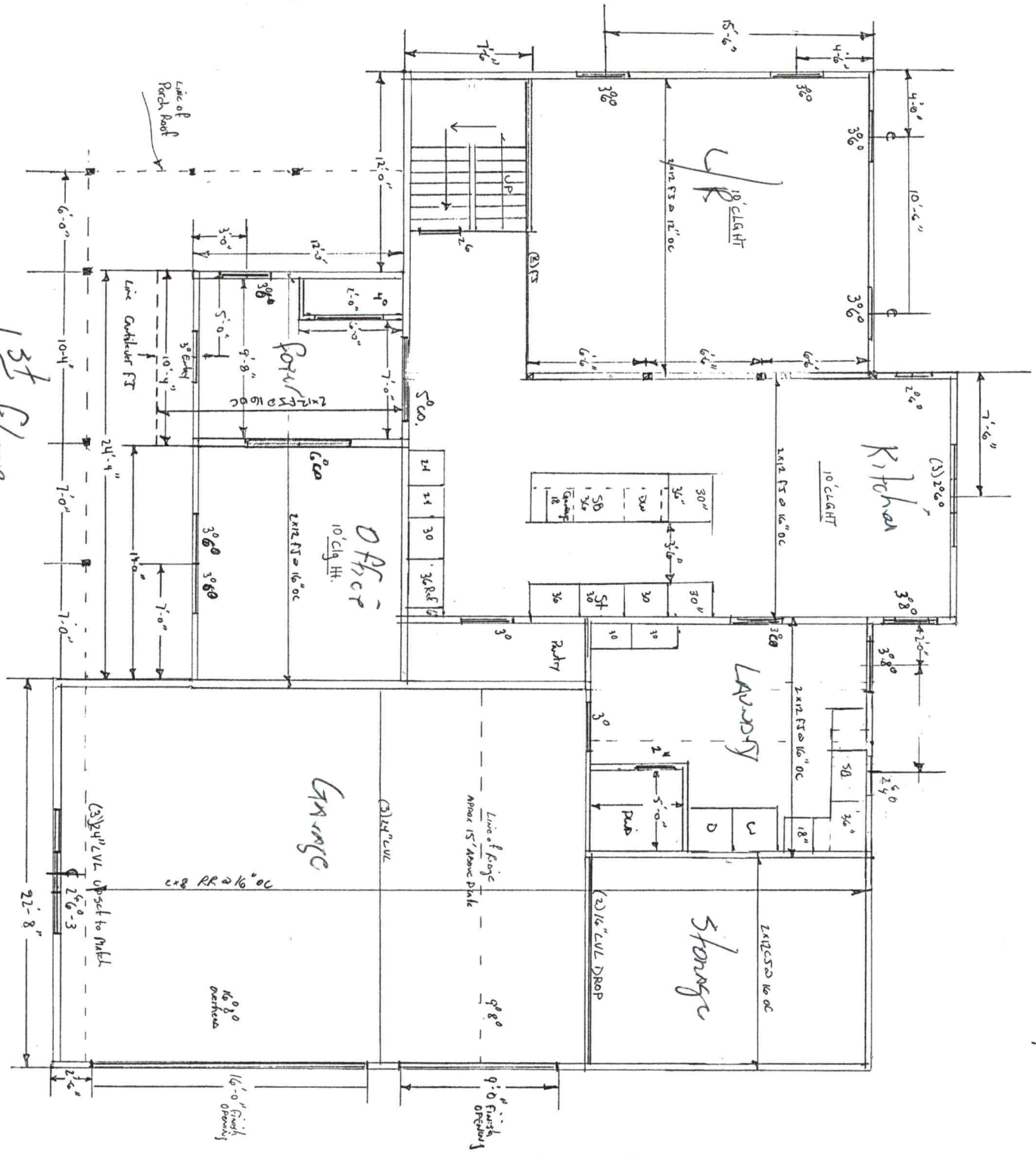
	9/13/19		9/13/19
Signature of Owner(s)	Date	Signature of Witness	Date

Please return this signed form to the appropriate office:

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

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

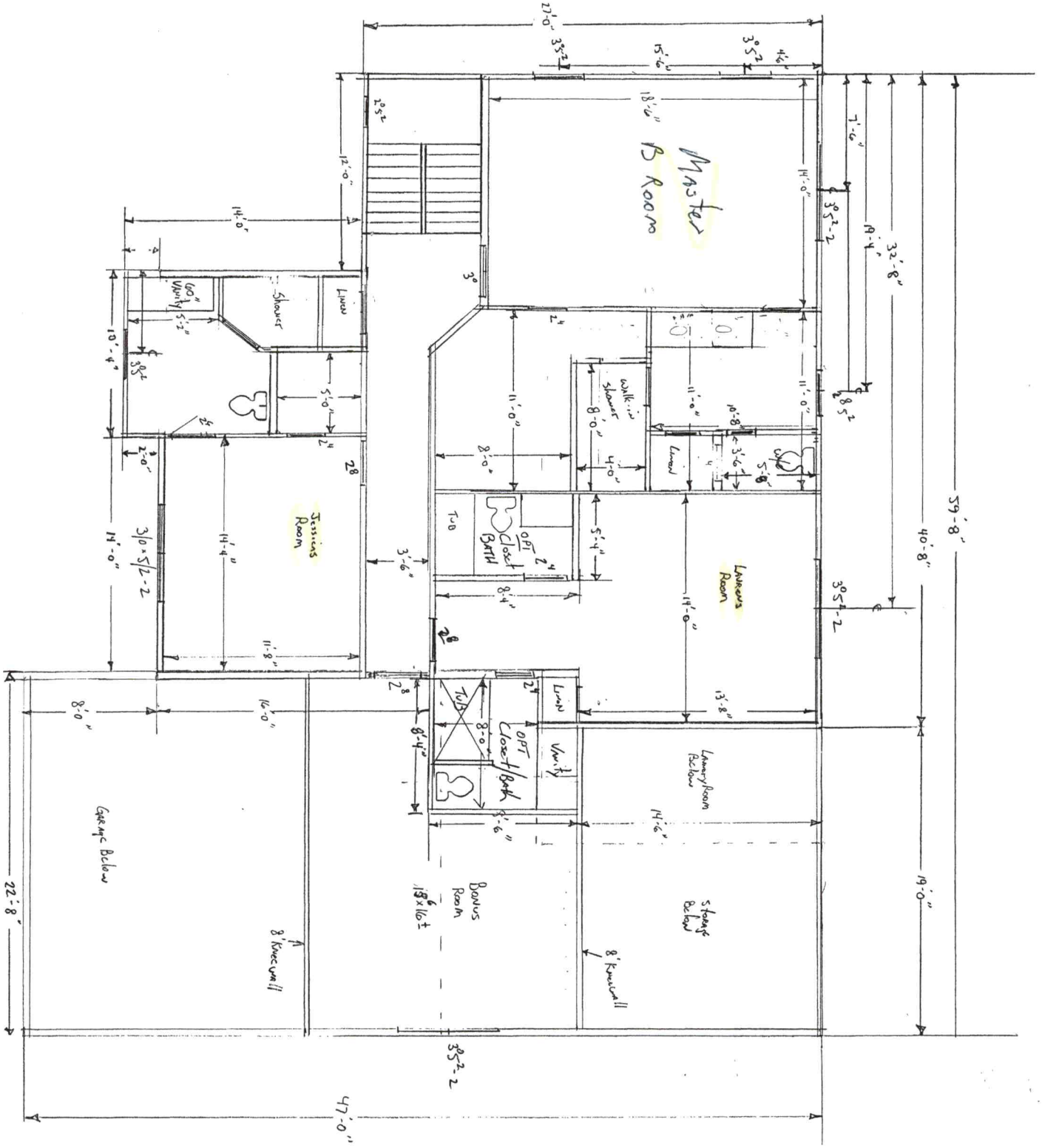
Acknowledgement Of
Plans Submittal ONLY!
Date 10/21/19
Date 10-21-19



8/12 Pitch

Lot 61 Shepherds Bluff
DeNicola Residence
8-30-19

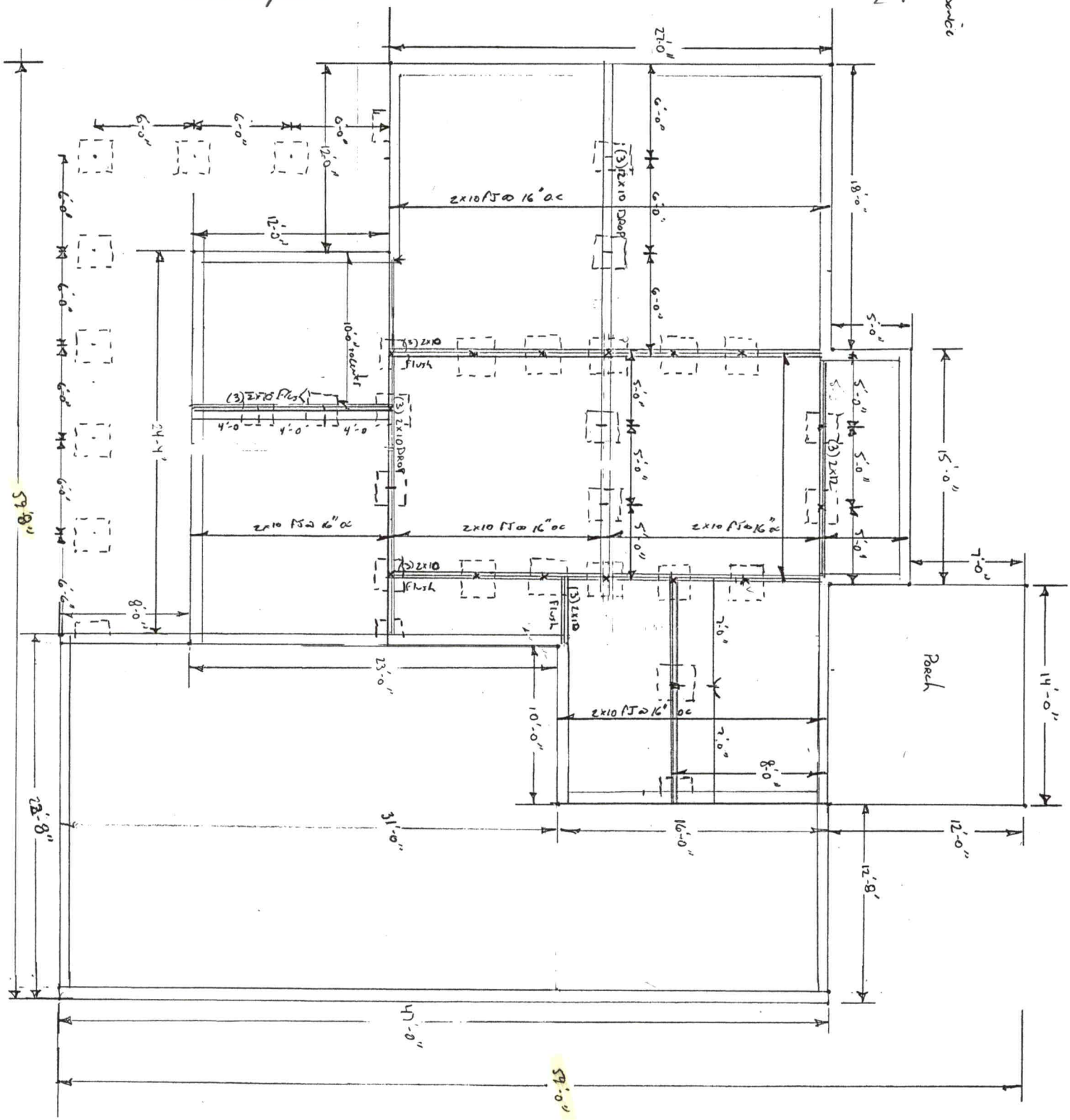
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Plans Submittal ONLY!
Date 10/21/19
Date 10-21-19



Lot 61 Shepherds Bluff
DeNicola Residence
8-30-19

Acknowledgement Of
Plans Submittal ONLY!
Date 10/21/19
Date 10-21-19

Lot 61
Shepherds Bluff
DeNicola Residence
8-30-19
Foundation



IREDELL COUNTY · NC

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

APPLICATION NUMBER
301033 Issue Date: 09/19/2019

Permit Type: ZONING RESIDENTIAL

Parcel Number	Street Address	Jurisdiction
4659573310.000	127 BLUFF MEADOW LN	

Owner Information	Applicant Information
Name: SHEPHERDS BLUFF LLC	Name: MICHAEL ATHANAS & ASSOCIATES
Address: 131 CROSSLAKE PARK DR STE 102	Address: 561 ENNIS RD
MOORESVILLE, NC 28117	WEDDINGTON, NC 28173
Phone:	Phone: (704)576-3887

Use Requested	Zone Code

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0	35	35	15	15		

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.

Date: 09/19/2019

Signature of Owner/Contractor

Permit Number	000332	TOTAL FEES:	$77.25