ICHD - ENVIRONMENTAL HEALTH DIVISION

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

Formerly 23603 10

PERMIT # AP 314425

PIN # 4664 -- 86 -- ~~8761~~ 0744

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

APPLICANT/OWNER: Peachtree Residential LLC APPLICANT ADDRESS: 9525 Birkdale Crossing Dr Ste 208 Huntersville, NC 28078

SITE ADDRESS: 118 Copper Pine Ln Davidson, NC 28036 PHONE: 704 928-9213 ALT. PHONE

SITE DIRECTIONS: Shearers Rd TL Anniston Way TR Burnell TL Walking Horse TL Broad Birch TL Copper Ridge SAP CONTROLLED: [X] YES [ ] NO

SUBDIVISION: Ridge Walk SECTION: LOT # 5 LOT AREA: 1.27 acre DESIGN FLOW: 480 gpd L.T.A.R.: .3

Septic Tank	1000 (gal)	STB Infiltrator	Date 4060	[X] New System [ ] Repair [ ] Expansion	System Type: I II III IV V VI	[X] Residence	No. Bedrooms	4	Water Supply
Pump Tank	(gal)	PT	Date	System Description: Gravity-Dist box VPPBPS		[ ] Business	No. Persons	8	[X] Private
Pump Make	Model		Serial #	Repair System Description: PPBPS		[ ] Other	No. Employees		[ ] Public
# Nitrification Fields	1 # Lines 4		Linear Ft 268	Maintenance Agreement Required:	[ ] YES [X] NO	[ ] Slab	[ ] Crawl Space		[ ] Community
Trench Width	min 24" Trench Bottom Depth(Low side) 32"		Gravel Depth N/A	[X] GRAVITY	[ ] PRESSURE	[X] Basement w/ plumbing		[ ] Basement w/o plumbing	

Comments / Conditions: Fill Drainageway where Supply line runs through it or encased Supply line in concrete or ductile iron from at least 5ft on either side of Crossing.

Installed as permitted D-Box needs to be leveled & Water Test performed prior to Op 7-1-22.

INITIAL SITE SKETCH

See attached Septic plan by Michael Athanas & Assoc (dated 3/31/22)

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.

Authorization to Construct
FOR SEPTIC FINAL INSPECTION
CALL 704-664-3703
Balance = 0

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.* [X] **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* [X] **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Date: Installed by: Abernathy Grading + Septic

IMPROVEMENT PERMIT by: Maria Dotson Date: 4/14/22 OPERATION PERMIT by: Date: 7/8/22 MW

AUTHORIZATION TO CONSTRUCT by: Maria Dotson Date: 4/19/22 Existing System Inspected by: Date:

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

ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # AP 314425

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

PIN # 4664 -- 86 -- 8764

APPLICANT/OWNER: Peachtree Residential LLC | APPLICANT ADDRESS: 9525 Birkdale Crossing Dr. Ste 208 Huntersville, NC 28078

SITE ADDRESS: 118 Copper Pine Ln. Davidson, NC 28036 | PHONE: 704 928-9215 | ALT. PHONE

SITE DIRECTIONS: Shearers Rd TL Anniston Way TR Burnell TL Walking Horse TL Broad Birch TL Copper Ridge

SAP CONTROLLED: [X] YES [ ] NO

SUBDIVISION: Ridge Walk | SECTION: | LOT # 5 | LOT AREA: 1.27 Acre | DESIGN FLOW: 480 gpd | L.T.A.R.: .3

Septic Tank	1000 (gal)	STB Infiltrator	Date 1660	[X] New System	[ ] Repair	[ ] Expansion	System Type: I II III IV V VI	[X] Residence	No. Bedrooms 4
Pump Tank	(gal)	PT	Date	System Description:	Gravity-Distbox VPPBPS			[ ] Business	No. Persons 8
Pump Make	Model		Serial #	Repair System Description:	PPBPS			[ ] Other	No. Employees
# Nitrification Fields 1	# Lines 4		Linear Ft: 268'	Maintenance Agreement Required:	[ ] YES	[X] NO		[ ] Slab	[ ] Crawl Space
Trench Width min 24"	Trench Bottom Depth(Low side) 32"		Gravel Depth N/A	[X] GRAVITY	[ ] PRESSURE			[X] Basement w/plumbing	[ ] Basement w/o plumbing

Water Supply: [X] Private [ ] Public [ ] Community

Comments / Conditions: Fill Drainageway where Supply line runs through it or encased Supply line in concrete or ductile iron from at least 5ft on either side of Crossing.

Installed as permitted D-Box needs to be Leveled & Watertest performed prior to Op 7-1-22.

INITIAL SITE SKETCH

See attached Septic plan by Michael Athanas & Assoc. (dated 3/31/22)

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.

Authorization to Construct
FOR SEPTIC FINAL INSPECTION
CALL 704-664-3703
Balance = 0

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.* [X] **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* [X] **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: | Date: | Installed by: Abernathy Grading + Septic

IMPROVEMENT PERMIT by: Maria L Dotson | Date: 4/14/22 | OPERATION PERMIT by: | Date:

AUTHORIZATION TO CONSTRUCT by: Maria L Dotson | Date: 4/19/22 | 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? _____	

MA&A
SOIL & ENVIRONMENTAL CONSULTANTS

MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
556Walden Trail
Weddington, NC 28173
(704) 576-3887
3/31/2022

Approved
4/14/22
MD

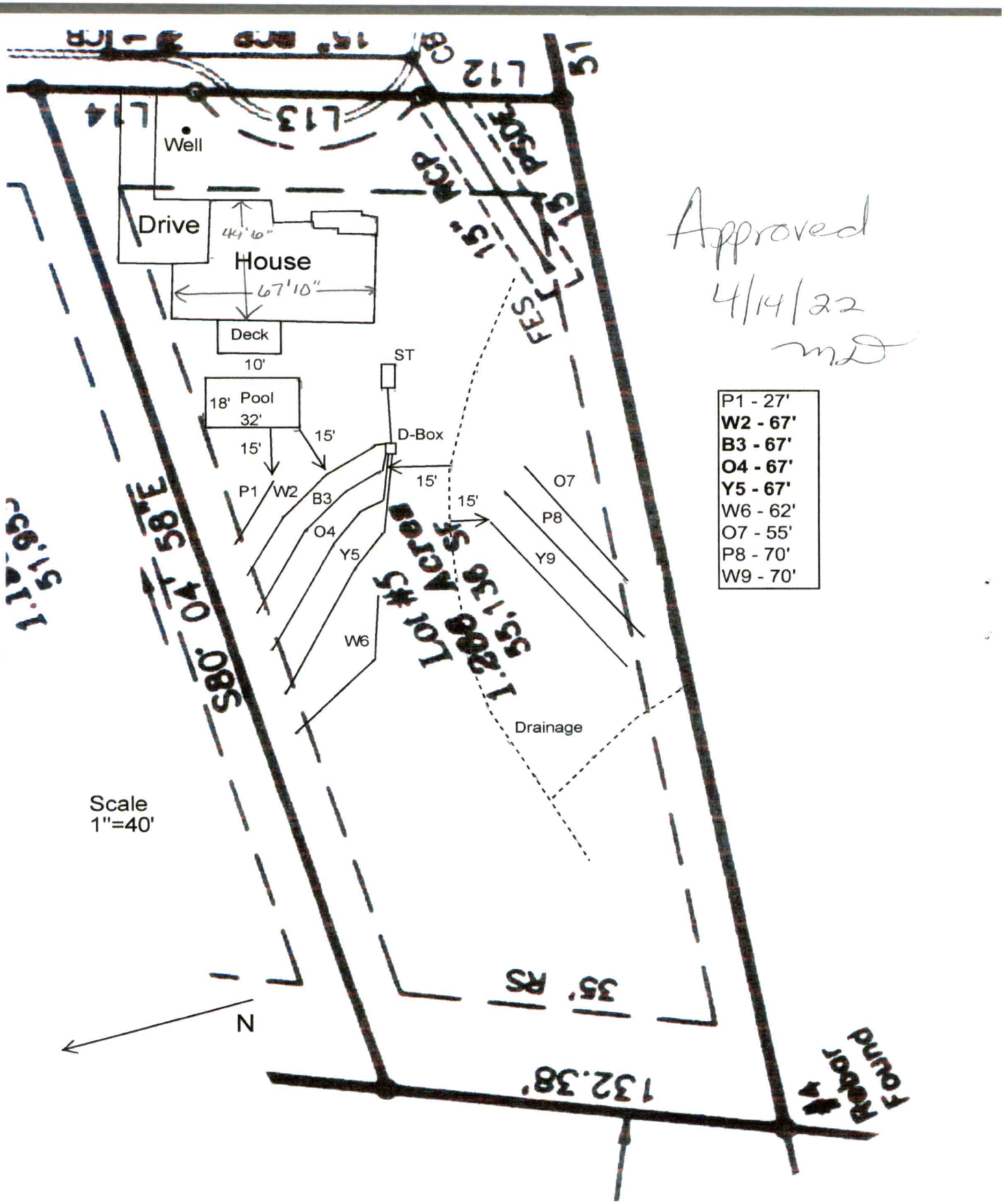
Reference: Data Sheet for 118 Copper Pine Ln, Ridgewalk Lot 5
House Footprint: See attached plan
Building Setbacks: 35' front/rear, 15' side
Water Source: Private well
Number of Bedrooms/Daily Flow: 4/480 GPD
Predetermined LTAR: 0.3 GPD/FT^2 (ICHD)
Proposed System Type: PPBPS
Proposed Repair System Type: PPBPS
Distribution: Gravity – Distribution Box
Septic Tank Size: 1000 gallons
Proposed Trench Bottom: 32"



Line	Design Length	Actual Length
Pink 1		27'
White 2	**67'**	**79'**
Blue 3	**67'**	**76'**
Orange 4	**67'**	**76'**
Yellow 5	**67'**	**76'**
White 6		62'
Orange 7		55'
Pink 8		70'
Yellow 9		70'

Initial System: 268' **Repair System:** 284'

Comments:
MA&A have redesigned the septic to accommodate a pool.
Please note this design is only intended for the use of two people per bedroom for a total design flow of 480 GPD and a total occupancy of 8 people. It is intended for residential use only, no commercial use.
Please note once a septic system reaches 80% of the designed flow you are reaching the maximum ability of the septic system. Additional occupancy could lead to premature failure of the septic system.


Well
Drive
44'6"
House
67'10"
Deck
10'
ST
18' Pool
32'
15'
15'
D-Box
15'
15'
P1
W2
B3
O4
Y5
W6
O7
P8
Y9
Drainage
Scale
1"=40'
N
Approved
4/14/22
MD
P1 - 27'
W2 - 67'
B3 - 67'
O4 - 67'
Y5 - 67'
W6 - 62'
O7 - 55'
P8 - 70'
W9 - 70'

MA&A
SOIL & ENVIRONMENTAL CONSULTANTS

MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
556Walden Trail
Weddington, NC 28173
(704) 576-3887
3/31/2022

Approved
4/14/22
MD

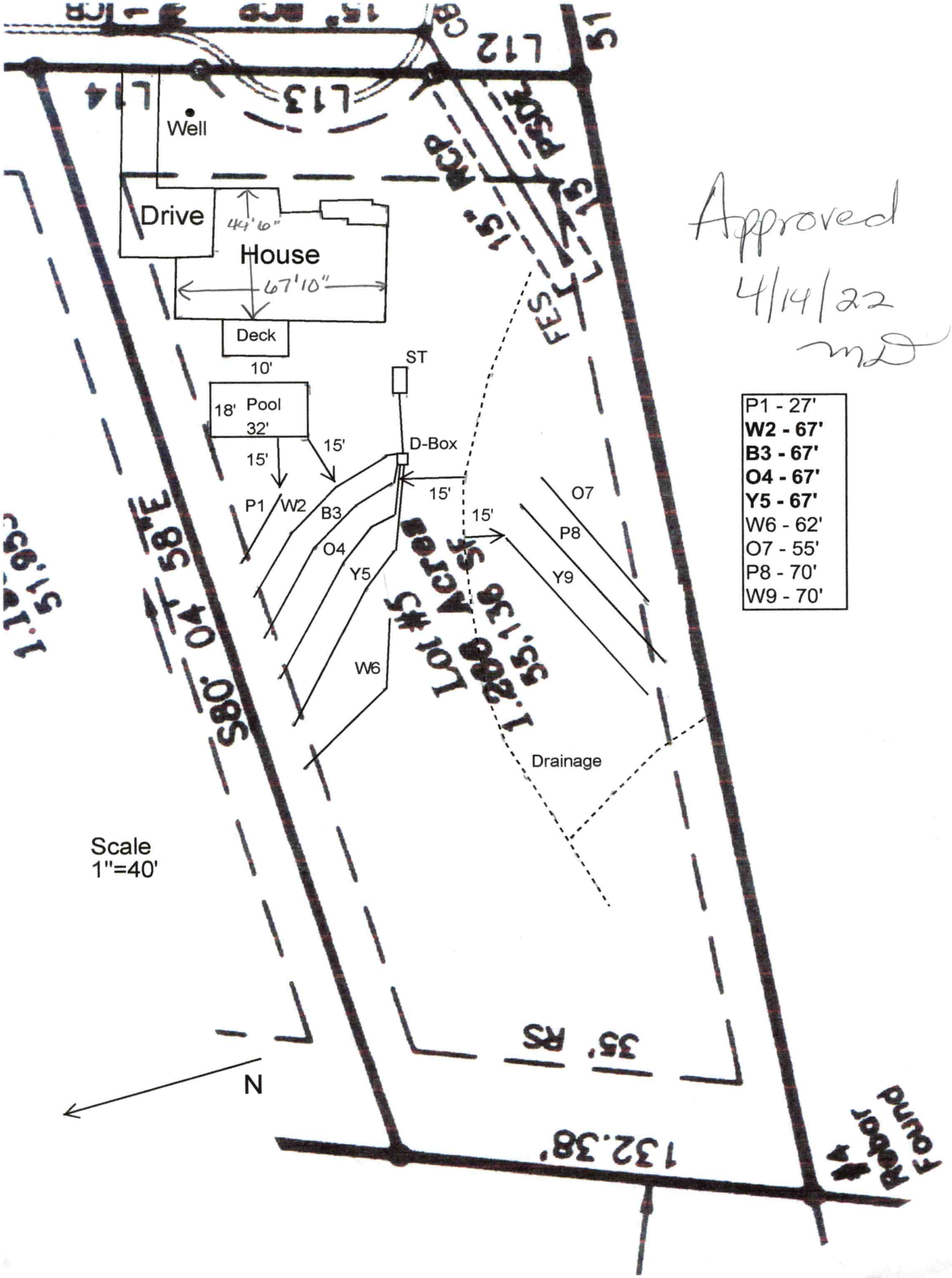
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Approved
4/14/22
MD

RECEIVED APR 1 - 2022

MD

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Paid $225.00 Int. Redraw - EXP

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

AP- 314425

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: Peachtree Residential LLC **Address:** 9525 Birkdale Crossing Dr, STE 208, Huntersville, NC **Zip:** 28078

Applicant Email: _____ **Phone:** Mark-704-928-9215 **Alt. Phone:** _____

Owner Name: Same **Address:** _____ **Zip:** _____

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

****

Property Information:

Street Address: 118 Copper Pine Ln

Subdivision Name: Ridge Walk **Section/Phase:** _____ **Lot Number:** 5

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: 4
Maximum Number of Occupants: 8
(✓) 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: _____

****

Please answer the following to the best of your ability:

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

****

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

Signature: _____ 3/31/2022
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**

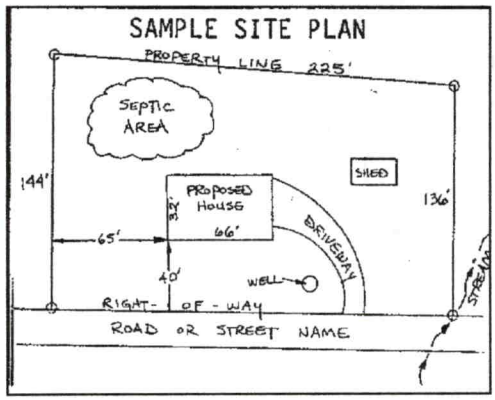
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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:

- ( ) **Property Line measurements are clearly identified**
- ( ) **All proposed structures are indicated**
- ( ) **Front and side setbacks from property line**
- ( ) **Preferred driveway location**
- ( ) **Preferred well location**
- ( ) **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

See attached plan

Signature: _____

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

3/31/2022

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, Mark Benitez, am the legal owner(s) of the property located at 118 Copper Pine Ln Ridgewalk Lot 5, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Michael Athanas & Associates_, Mark Benitez - Peachtree, 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.

3/31/2022

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