ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 304729

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

PIN # 4664 - 86 - 6601

APPLICANT/OWNER: Peachtree Residential LLC | APPLICANT ADDRESS: 9525 Bradale Crossing Drive STE 208 Huntsville NC

SITE ADDRESS: 128 Broad Birch Drive Davidson NC 28036 | PHONE: 7049289215 | ALT. PHONE —

SITE DIRECTIONS: Shearers Rd to Dunlap Way to Burnett to Broad Birch. | SAP CONTROLLED: ☒ YES ☐ NO

SUBDIVISION: Ridge Walk Sub | SECTION: — | LOT # 9 | LOT AREA: .705 Acres | DESIGN FLOW: 480 | L.T.A.R.: .30

Septic Tank 1000 (gal) STB 760 Date 4-19-21 | ☒ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI | ☒ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing | No. Bedrooms 4 | No. Persons 8 | No. Employees — | ☒ Crawl Space | ☐ Basement w/o plumbing | Water Supply: ☒ Private ☐ Public ☐ Community

Pump Tank (gal) PT Date | System Description: Gravity - PPBPS - 50% Reduction

Pump Make Model Serial # | Repair System Description: CD - PPBPS - 50% Reduction

Nitrification Fields 1 # Lines 6 Linear Ft: 270' | Maintenance Agreement Required: ☐ YES ☒ NO

Trench Width 24 Trench Bottom Depth (~~Low side~~) 36 max Gravel Depth — | ☒ GRAVITY ☐ PRESSURE

Comments / Conditions: House must be built within site shown on Septic ST 10ft off PL

6/2/21 Checked 5 of 6 drainlines. 1-middle line could not be installed due to rock. Installed PPBPS, Red Potter installed in ST

INITIAL SITE SKETCH

14' 9" from HC to ST
32' from House Steps to D-box
See attached Proposal
From Michael Athanas & Associates
LSS

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.

6/3/21 Checked Extra PPBPS line
See "As Built" dated 6/18/21

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: 4-20-21 Installed by: Richard Abernathy

IMPROVEMENT PERMIT by: _____ Date: 2-5-2021 OPERATION PERMIT by: _____ Date: 6/25/21

AUTHORIZATION TO CONSTRUCT by: _____ Date: 4/28/21 Existing System Inspected by: _____ Date: _____

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

Total
143.05'
35' RS
L20
128.82'
N54° 26' 09"W
Well
35' RS
20' Pool
40'
14'
12'
70'
50'
Lot #9
0.705 Acres
30,691 SF
N39° 32' 57"E
218.88'
Drive
ST
177.00'
N41° 03' 52"E
35' RS
N41°
196.1'
W1 - 40'
O2 - 65'
B3 - 52'/45'
P4 - 45'/45'
W5 - 25'/45'
O6 - 45'/45'
B7 - 64'
W8 - 44'
Pit 2
B3
O2
D-Box
B3
Pit 1
P4
W1
W5
Rock
O6
Rock
W5
Pit 3
B7
35' FS
O6
Pit 4
100'
W8
85'
100'
Well
Well
L6
C19
L5
15" RCP
CB
CB
15" RCP
L4
FS
Scale
1"=40'
N
Approved
12/5/21
As Built

As Built



MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887
6/18/2021

Approved
6/25/21
MA

Reference: Data Sheet for 128 Broad Birch Dr, Ridgewalk Lot 9
House Footprint: See attached plan
Building Setbacks: 35' front/rear, 15' side
Water Source: Private well
Number of Bedrooms/Daily Flow: 4/480 GPD
Proposed LTAR: 0.3 GPD/FT^2
Proposed System Type: PPBPS
Proposed Repair System Type: PPBPS
Distribution: Distribution Box
Septic Tank Size: 1000 gallons
Proposed Trench Bottom: 36"

Line	Design Length	Actual Length
White 1		40'
Orange 2		65'
Blue 3	52'/45'	**105'**
Pink 4	**45'/45'**	**102'**
White 5	25'/45'	**101'**
Orange 6	**45'45'**	**101'**
Blue 7		64'
White 8		44'

Initial System: 270' **Repair System:** 290'

Comments:
There is a vein of rock in the upper lines of the repair area. When the repair is installed, this area should be crossed with a solid pipe.



PROPERTY ID #: 4664866601
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Ridgewalk LLC
ADDRESS: PO Box 39, Cornelius, NC 28031
PROPOSED FACILITY: 4 BDRM PROPOSED DESIGN FLOW (.1949): 480 GPD
LOCATION OF SITE: 128 Broad Birch Dr, Ridgewalk Lot 9
APPLICATION DATE
DATE EVALUATED: 7/2020
PROPERTY SIZE: 0.72 AC
PROPERTY RECORDED:

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	LS 10%	0-7	Br CL WSBK	FR SS SP SXP	N/A	52"	F-C SAP	N/A	PS 0.3-0.325
		7-26	R C SBK	FR SS SP SXP					
		26-52	R SCL WSBK	FR SS SP SXP					
2	LS 10%	0-8	MULCH		N/A	60"	F-C SAP	N/A	PS 0.3
		8-10	Br CL WSBK	FR SS SP SXP					
		10-34	R C SBK	FR SS SP SXP					
		34-60	R CL WSBK	FR SS SP SXP					
3	LS 10%	0-10	FILL/MULCH		N/A	48"	F-C SAP PS	N/A	PS 0.35
		10-48	R CL WSBK	FR SS SP SXP					
		48-54	VER SL SAP M	VFR SS SP SXP					
4	LS 10%	0-14	FILL/MULCH		N/A	44"	F-C SAP PS	N/A	PS 0.35
		14-44	R CL WSBK	FR SS SP SXP					
		44-55	VER SL SAP M	FR SS SP SXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	810 FT^2	867 FT^2
System Type(s)	Horz PPBPS	Horz PPBPS
Site LTAR	0.3	0.3

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

COMMENTS:

RECEIVED APR 20 2021

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

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM* AP-309727

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: Peach Tree Residential LLC Address: 9525 Birkdale Crossing Dr STE 208 Zip: 28078
Applicant Email: kmiller@peachtreeres.com Phone: work - 704-928 9305 Alt. Phone: _____
Owner Name: same Address: _____ Zip: _____
Owner Email: _____ Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 178 Broad Birch
Subdivision Name: Rutherwell Section/Phase: _____ Lot Number: 9
Driving Directions: _____

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

(✓) New Single Family Residence Maximum Number of Bedrooms: 4 (✓) 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: _____

(✓) 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: _____ _____
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, _____, am the legal owner(s) of the property located at _____, identified as PIN (Parcel Identification Number)_____, 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.

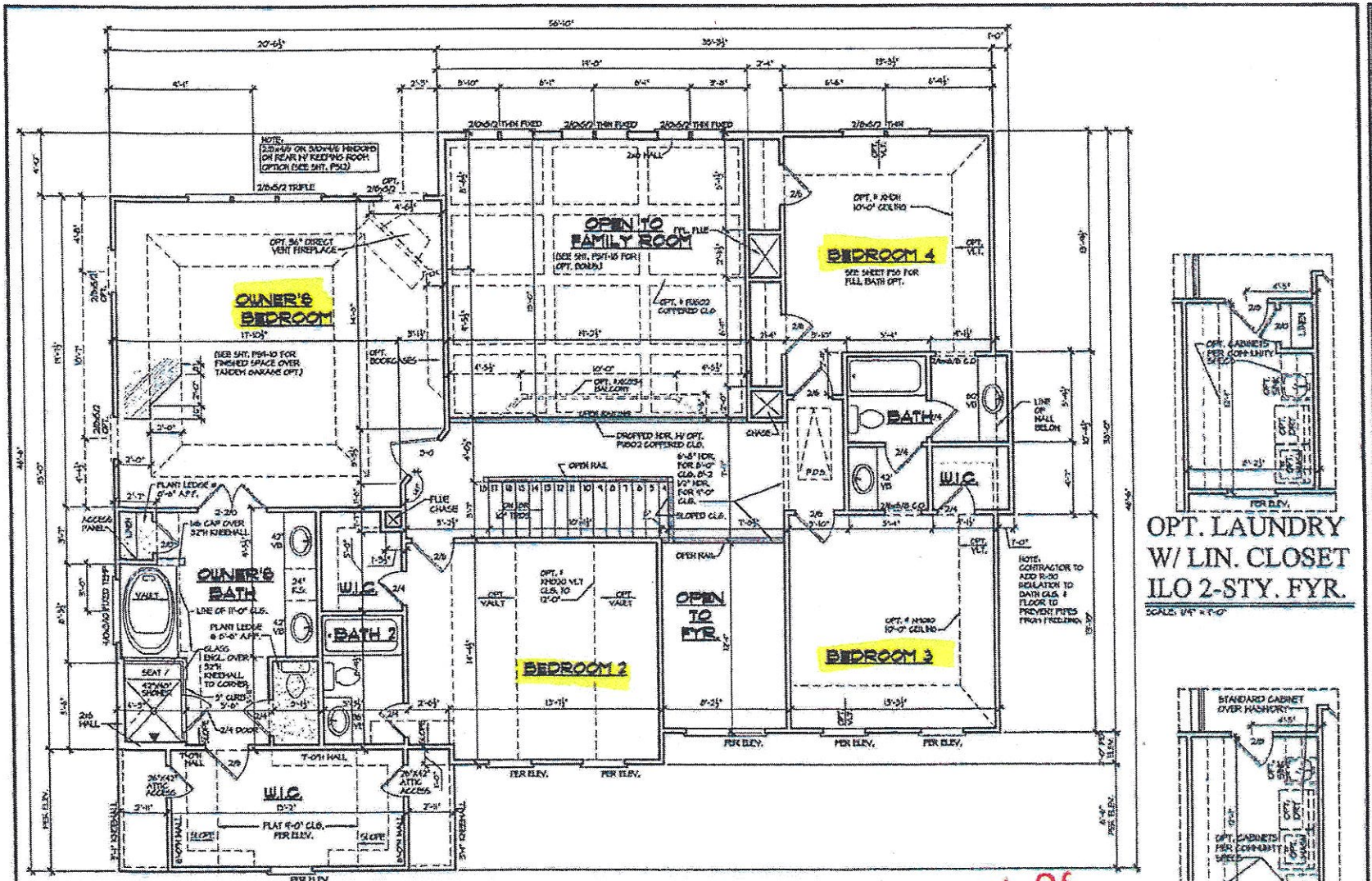
- Application for Improvement Permit (IP) / Authorization to Construct (AC)
- Improvement Permit (IP) / Authorization to Construct (AC)
- Application for soil-site evaluation (new/repair)
- Application/permit for private drinking water well/well abandonment
- Application for Compliance Inspection

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) 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



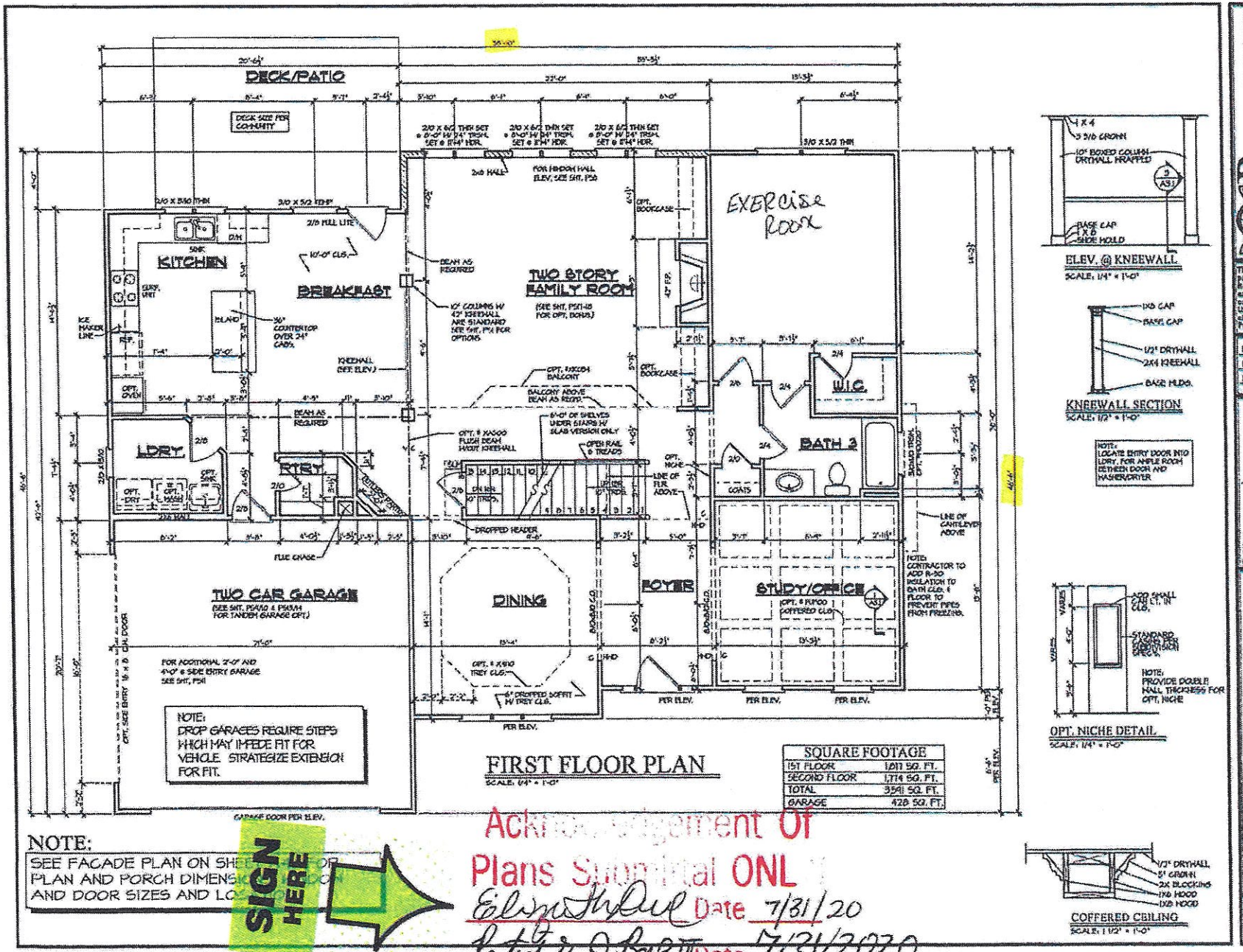
PEACHTREE RESIDENTIAL PROPERTIES
The Builder Who Listens

This drawing is the property of Peachtree Residential Properties and may not be copied or reproduced without the written permission of Peachtree Residential Properties.

Drawn By: J.S
Date: 11/19/04
Plan No:

Initial	Date	Revision
DPOOR-3523	10/07/2020	
DPOOR-3572	10/16/2020	
DPOOR-3661	01/04/2021	
DPOOR-3667	01/22/2021	
DPOOR-3668	01/22/2021	
DPOOR-3440	02/03/2021	
DPOOR-3669	02/03/2021	
DPOOR-3670	02/03/2021	
DPOOR-3671	02/03/2021	
DPOOR-3672	02/03/2021	
DPOOR-3667	02/10/2021	
DPOOR-3668	02/10/2021	
DPOOR-3669	02/10/2021	
DPOOR-3670	02/10/2021	
DPOOR-3671	02/10/2021	
DPOOR-3672	02/10/2021	
DPOOR-3667	02/18/2021	
DPOOR-3668	02/18/2021	
DPOOR-3669	02/18/2021	
DPOOR-3670	02/18/2021	
DPOOR-3671	02/18/2021	
DPOOR-3672	02/18/2021	
DPOOR-4370	02/10/2021	

Model Name: BRUNSWICK
Sheet Title: SECOND FLOOR PLAN
SHEET NO. A3.2



SQUARE FOOTAGE	
1ST FLOOR	1,011 SQ. FT.
SECOND FLOOR	1,774 SQ. FT.
TOTAL	3541 SQ. FT.
GARAGE	428 SQ. FT.

Acknowledgement Of
Plans Submittal ONLY
Elizabeth Dial Date 7/31/20
Patricia J Byers Date 7/31/2020

PEACHTREE RESIDENTIAL PROPERTIES
The Builder Who Listens
7385 McGinnis Ferry Rd. • Suwanee, Georgia 30174
Phone: (770) 622-9500 • Fax: (770) 622-9171

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Drawn By: JLS
Date: 11/18/04
Plan No.

Revisions:
12/07-3933 07/24/10-3911
12/07-3937 03/01/13-4430
03/08-3942
07/26/06-3406
07/30/08-3440
11/07/08-3604
01/09/04-3613

Model Name: BRUNSWICK
Sheet Title: FIRST FLOOR PLAN
SHEET NO. A3.1

IREDELL COUNTY

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

APPLICATION NUMBER
237267
Issue Date: 07/16/2018

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4664868764.000	128 BROAD BIRCH DRIVE, DAVIDSON, NC 28036	

Owner Information	Applicant Information
Owner: YOUNG MICHAEL L+FAYE	Applicant: MICHAEL ATHANAS & ASSO
Address: 2360	Address: 561 ENNIS RD
IREDELL CO, NC 28625	WEDDINGTON, NC 28173
Phone:	Phone: 704-576-3887

Use Requested	Zone Code
SFD	

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
41.000	35.00	35.00	15.00	15.00	NOT	AE

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	145608	TOTAL FEES:	$ 77.25