IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 180963

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

PIN # 4664973442634

APPLICANT: ANNISTON LLC / Mark Benitez APPLICANT ADDRESS: PO Box 39 CORNELIUS

SITE ADDRESS: ✓ 117 Overlook Ridge Lane Davidson PHONE: ALT. PHONE: 658 1723

SITE DIRECTIONS: SHEARERS RD - TR ANNISTON - TR Burnett TL Walking Horse TR Overlook

SUBDIVISION: ANNISTON SECTION: 4 LOT # 156 LOT AREA: 1.7 AC DESIGN FLOW: 600 L.T.A.R.: .3

Septic Tank 1500 (gal) STB 338 Date 8-23-16

Pump Tank 1500 (gal) PT 477 Date 6-16-16

Pump Make Liberty Model 290 Serial #

Nitrification Fields 1 # Lines 4 Linear Ft: 500

Trench Width 36" Max. Trench Bottom Depth 28" LOWSIDE Gravel Depth

☑ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI

System Description: PUMP 25% REDUCTION

Repair System Description: LP PIPES

Maintenance Agreement Required: ☐ YES ☑ NO

☑ GRAVITY ☐ PRESSURE

☑ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing

No. Bedrooms 5 No. Persons 10 No. Employees

☑ Crawl Space ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☐ Community

Comments / Conditions:

2/29/16 Reviewed Floor plans, in Compliance with Septic plan.

INITIAL SITE SKETCH

SEE ROLCANS

SOIL & ENVIRONMENTAL'S

PLAN.

AS BUILT SKETCH

CHECKED LAST DRAIN LINE ONLY BA 9-29-16

	Date	Initials
Drain Lines Checked	10/4	WS
Tanks Checked	9/29	BA
Pressure Manifold or Valve Box Checked	1-6	BA
Pressure Head Set		BA
Electrical Checked		BA
Floats Set		BA
Alarm Checked		BA
Maintenance Contract Y (N)		BA
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**

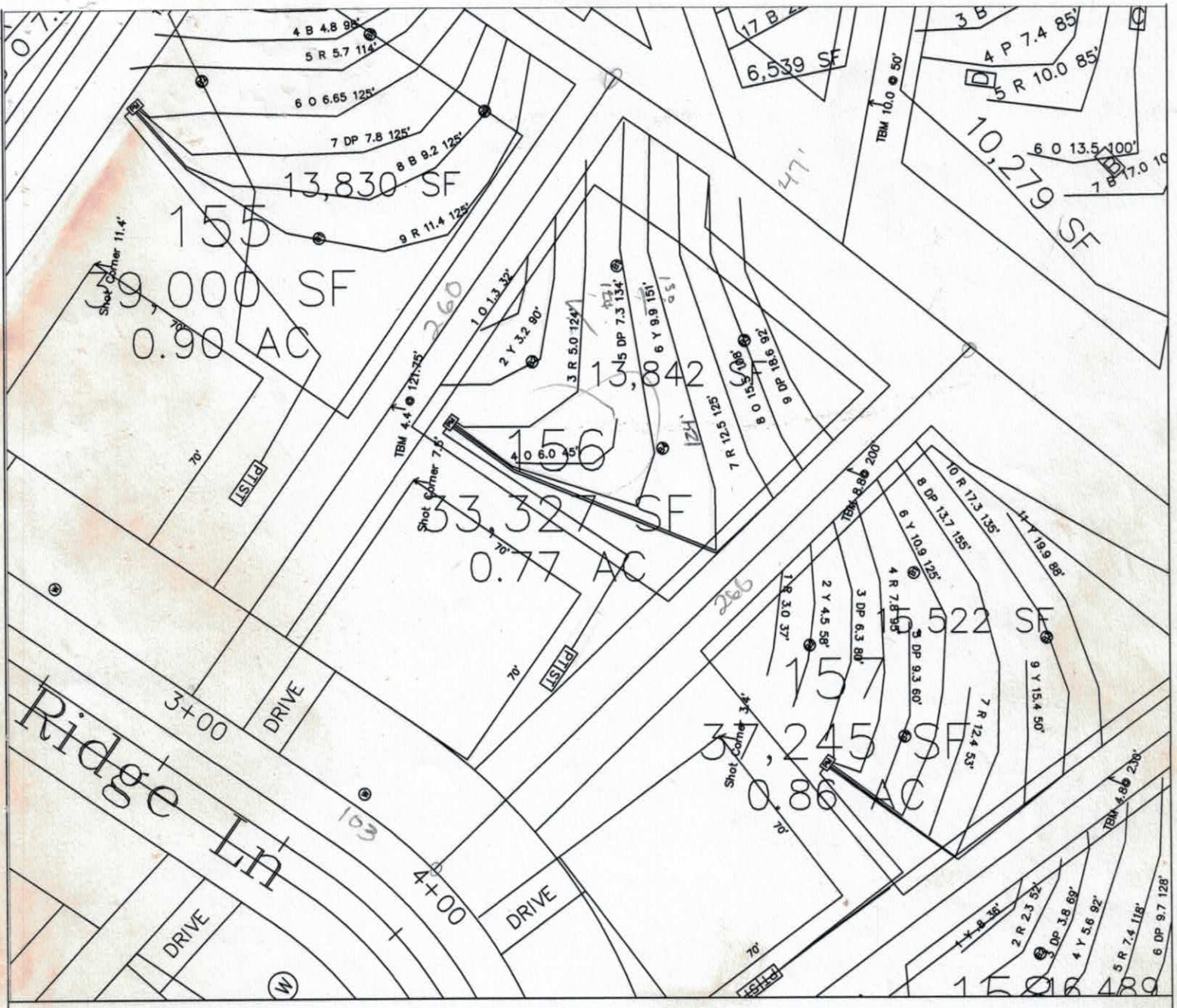
☐ **IMPROVEMENT PERMIT** *with plat* valid without expiration. ☑ **IMPROVEMENT PERMIT** *with site plan* valid for 60 mos. ☐ **AUTHORIZATION TO CONSTRUCT** valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: W. Kell Lee Date: 11/22/13 Installed by: ABERNATHY

IMPROVEMENT PERMIT by: C. [illegible] Date: 11/21/13 OPERATION PERMIT by: BA Date: 1-6-17

AUTHORIZATION TO CONSTRUCT by: [illegible] Date: 2/29/16 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK



LEGEND

Areas contain soils with 24 inches or more of useable material and have potential for conventional, modified conventional and low-pressure pipe (lpp) septic systems.

House Footprint

System lines.

Repair lines.

Temporary Bench Mark (TBM)

Well Location. (25) Pit Location.

GRAPHIC SCALE
1" = 50'

50 0 50 100

FOR PRELIMINARY PLANNING PURPOSES ONLY. ALL LOTS WILL REQUIRE FINAL APPROVAL BY THE COUNTY HEALTH DEPARTMENT ON A LOT BY LOT BASIS. THIS MAP SHOULD BY USED AS A GENERAL GUIDE, SOME ADJUSTMENTS WILL BE NECESSARY IN THE FIELD DUE TO SOIL VARIABILITY AND COMPLEX TOPOGRAPHIC FEATURES.
THIS MAP ONLY REFLECTS EXISTING SOIL SUITABILITY FOR ON-SITE SEPTIC TANK SYSTEMS.

PLEASE REFER TO ATTACHED SOIL REPORT FOR ADDITIONAL SITE SPECIFIC INFORMATION

ROLLANS SOIL & ENVIRONMENTAL SERVICES, PA
P.O. BOX 832
MOORESVILLE, NC 28115
PHONE/FAX: (704) 278 - 0989
ASHLEY ROLLANS, NC LICENSED SOIL SCIENTIST
MOBILE: (704) 746 - 5046
EMAIL: rollans.ashley@yahoo.com

MAP TITLE: SITE PLAN & DRAINFIELD AREAS

PROJECT NAME: ANNISTON II, LLC / ANNISTON SUBDIVISION

LOCATION/DATE: SHEARER CHAPEL ROAD IREDELL COUNTY, NORTH CAROLINA SEPTEMBER 2013

JOB # : 01-1005
FILE: C:\JOBS\01-1005
PROJECT MGR.: S.A.R.
FIELD WORK: S.A.R.
DRAWN BY: S.A.R.

ROLLANS *Soil & Environmental Services, PA.*

P.O. Box 832, Mooresville, NC 28115 Phone: (704) 746-5046 Fax: (704) 278-0989

Ashley Rollans, NC Licensed Soil Scientist
Mobile: (704) 746-5046
Email: rollans.ashley@yahoo.com

NC Certified Septic Installer
NC Certified Subsurface Operator
NC Certified Septic Inspector

Attached is a proposed design for an Accepted (25% reduction) Septic System with Pressure Manifold distribution for a 5 bedroom single family residence on Lot # 156 Anniston Subdivision, Iredell County, North Carolina.

Contents: **Page**

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

Design Information
- Design Specifications---------- 2-3
- Layout Specifications---------- 4
- System Tapsheet---------- 5
- Pressure Manifold Diagram---------- 6

Site Plan/System Plan---------- 7

Calculations---------- 8

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

August 1, 2013
Project No. 01-1005
Design By: Rollans Soil and Environmental Services, 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 DENR, and certification supplied by the manufacturer.
- Tanks shall be water tested prior to installation.
- 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 structure.
- 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.
- 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 for installation.
- Elevations at pinflag locations should be checked by the installer prior to beginning trenches.
- Pumptank 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 is specified as an innovative 25% reduction installation.
- Repair is specified as a PPBPS with low pressure distribution installation.
- Rake trench walls, lime sidewalls, install trenches 36" wide and have no more than 1/4" fall in 10 feet.

PRESSURE MANIFOLD SYSTEM
FOR WASTEWATER TREATMENT

Owner:	Anniston II, LLC
Address:	P.O. Box 39 Cornelius, NC 28031
Phone:	704.622.3569
County:	Iredell
Location:	ANNISTON Lot # 156
Source of Wastewater Flow:	5 Bedroom Single Family Residence
Estimated Daily Wastewater Production:	600 gpd
System Flow:	28.44

Design Specifications

Drainfield Size:	500
Loading Rate:	0.3
Depth of Gravel in Trench:	NA (25% reduction)
Gravel Size:	NA (25% reduction)
Trench Depth:	36 in.
Trench Width:	36 in.
Septic Tank Size:	1500 gal.
Pump Tank Size:	1500 gal.
Estimated Supply Line Length:	120
Supply Line Diameter:	2 in. SCH 40 PVC
Supply Line Volume:	20.88
Dosing Volume:	228.55
Supply Manifold:	4 in. SCH 80 PVC
Supply Manifold Length:	4 ft. (minimum)
Supply Manifold Volume:	N/A
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:	2.14
Elevation Head:	14.00
Total Dynamic Head:	20.86
Threaded Union:	In Tank
Gate Valves:	1 in Tank 1 at Pressure Manifold
Check Valves:	In Tank
Anti-Siphon Hole:	NA
Additional Comments:	Soil suitability was performed by Rollans Soil & Environmental Services.

ANNISTON Lot # 156
PRESSURE MANIFOLD DESIGN

DESIGN FLOW:	600
SOIL APPLICATION RATE:	0.3
TOTAL AREA TRENCH BOTTOM:	1500
TOTAL LATERAL LENGTH:	500
NUMBER OF FIELDS:	1
LATERAL LENGTH REQUIRED PER FIELD:	500
SUPPLY LINE LENGTH:	120
TOTAL DYNAMIC HEAD:	20.86
MANIFOLD SIZE:	4 in.SCH 80 PVC
DOSING VOLUME:	228.55
PUMP TANK DRAW DOWN*:	7.4
SEPTIC TANK SIZE:	1500 gal.
PUMP TANK SIZE:	1500 gal.

**Pump tank draw down based on a volume basis of 31 gallons per inch. Draw down may vary among pump tank manufacturers.*

ANNISTON LOT # 156

Project #: 01-1005

LAYOUT FOR 5 BEDROOM HOME

August 1, 2013

LINE #	FLAG COLOR	BS	HI	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM		4.4			100.00		
INSTR. 1			104.40				
HOUSE CNR				7.50	96.90		
P. TANK				19.00	85.40		
1	ORANGE			1.30	103.10	32	32
2	YELLOW			3.20	101.20	90	90
3	***RED***			***5.00***	***99.40***	***124***	***124***
4	ORANGE			6.00	98.40	45	45
5	***DARK PINK***			***7.30***	***97.10***	***134***	***124***
6	***YELLOW***			***9.90***	***94.50***	***151***	***128***
7	***RED***			***12.50***	***91.90***	***125***	***124***
8	ORANGE			15.50	88.90	108	108
9	PINK			18.60	85.80	92	92
					Total	**901**	**867**

	LINE LENGTH	LTAR GPD/FT^2	SYSTEM TYPE	SOIL LTAR GPD/FT^2	TRENCH SYSTEM	DISTRIBUTION
**** System***	***500***	***0.300***	***ACCEPT.***	***0.300***	***25% RED.***	**PRESSURE MANIFOLD**
Repair	335	0.300	*MOD.*	0.300	PPBPS	LOW PRESSURE

Notes:

** TBM located on top of stake 121.75' on left hand line

**TBM is assumed to be 100'

**All measures in feet

**Nitrification lines are demonstrated on contour via colored pin flags

**BS, HI, and FS indicate rod readings

PRESSURE MANIFOLD TAPSHEET - ANNISTON LOT# 156

SYSTEM

Line #	Color	Elevation	Length	Hole Size	Flow/Tap	Trench Area	Line LTAR
3	***RED***	99.4	***124***	SCH 40 1/2	**7.11**	372	0.15
5	***PINK***	97.1	***124***	SCH 40 1/2	**7.11**	372	0.15
6	***YELLOW***	94.5	***128***	SCH 40 1/2	**7.11**	384	0.15
7	***RED***	91.9	***124***	SCH 40 1/2	**7.11**	372	0.15

total	**feet =**	**500**	**gal/min =**	**28.44**
		Des. Flow	**600**
		Pump Run=	**8.04**
		soil LTAR	**0.3**
		LTAR +5%	**0.315**
		LTAR with ACCEPTED	**0.4**
		LTAR with ACCEPTED + 5%	**0.42**

CALCULATIONS

Location ANNISTON PH4

Project Number 01-1005

Lot No: 156

No. of Bedrooms	5	
Design Flow	600	$^{gal}/_{day}$
LTAR	0.30	$^{gpd/ft^2}$
25% RED.? (YES OR NO)	YES	
Supply Line Length	120	ft.
Supply Line Volume	20.88	gal.
Required Feet of Line	500	ft.
Amount of Line from Layout	500	ft.
Gallons per Minute	28.44	$^{gal}/_{min}$
Required Septic Tank Capacity	1500	gal.
Minimum Standard Tank Size	1500 gal.	
Lateral Line Volume	326.5	gal.
Dosing Volume	228.55	gal.

Note: Dosing Volume based on70% of lateral line volume

FRICTION FACTOR INTERPOLATER
2" SCH 40 PVC

GPM	*f*
20	0.84
	-0.88
25	1.27
	-1.28
30	1.78
	-1.76
35	2.37
	-2.25
40	3.03
43.07	3.48
45	3.77
48.14	4.28
50	4.58
57.11	5.89
60	6.42

Tank Draw Down	7.4	*Generic Draw Down of 31 gal.per in.*
Pump Run Time	8.04	minutes
Elevation Head	14	ft.
Pressure Head	2	ft.
Friction Factor	1.78	ft./100 ft. *(From the interpolater.)*
Friction Head	2.14	ft.
Total Dynamic Head (+15%)	20.86	ft.

DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet ___ of ___
PROPERTY ID #: ___
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Anniston, LLC
ADDRESS: Lot 156 Anniston
PROPOSED FACILITY: SBR
PROPOSED DESIGN FLOW (.1949): 600 gpd
LOCATION OF SITE: ___

APPLICATION DATE ___
DATE EVALUATED: 2/25/13
PROPERTY SIZE: ±.77 ac
PROPERTY RECORDED: ___

WATER SUPPLY: ☐ Private ☐ Public ☒ Well ☐ Spring ☐ Other ___
EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut
TYPE OF WASTEWATER: ☒ 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
B 1	2% L/17%	0-12	BRCl wmsbk	FrSSSPSExP	C.SAP	45	PS	—	PS 0.3
		12-30	RcWmsbk	FrSSSPSExP					
		30-45	RYCl wfsbk	FrSSSPSExP					
		45-48	Vartmass	FrSSSPSExP					
B 2	4/10%	0-6	Bl s r	FrSSSPSExP	f sap - c sap	45	PS	—	PS 0.3
		6-20	Rc wmsbk	" " " "					
		20-45	Rc l wmsbk	" " " "					
		45-48	var l-sl mass	" " " "					
B 3	4/20%	0-8	BRcl vwsbk	FrSSSPSExP	f sap - c-m sap	48	—	—	PS 0.3
		8-35	Rc wmsbk	" " " "					
		35-48	R-RYcl wfsbk	" " " "					
P 4 (11)	L/11%	0-5	Bl s-	FrSSSPSExP	f sap - f-c sap	46	PS	—	PS 0.3
		5-29	Rc wmsbk	" " " "					
		29-46	Rc l wmsbk	" " " "					
		46-48	var l mass	" " " "					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	Accepted	PPBPS
Site LTAR	0.3	0.3

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: S. Ashley Rollins
OTHER(S) PRESENT: ___

COMMENTS: ___

RECEIVED FEB 2 9 2016

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

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:

Applicant Name: Mark Benitez **Address:** 5160 River hwy Suite 301 Mooresville **Phone:** 7049289218

Owner Name: Peachtree Residential **Address:** 7380 McGinnis Ferry Suwanee GA 30024 **Phone:** 2582

Property Information:

Street Address: 117 overlook ridge Davidson

Subdivision Name: Anniston **Section/Phase:** _____ **Lot Number:** 156

Driving Directions: Shearers (L) on Anniston way (R) on Burnell (L) on Walking horse (R) overlook

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

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 5
Maximum Number of Occupants: 10
( ) 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: _____
Maximum Number of Employee: _____
Maximum Number of Seats/Beds/Other: _____

Water Supply:

(✓) 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: _____ 2/17/16
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**

Paid $850.00 Statesville 9-11-13 RW

IREDELL COUNTY HEALTH DEPARTMENT

Application For Improvement Permit and/or Authorization To Construct, Existing System Inspection

(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)

1. **APPLICATION FOR:** X **Improvement Permit** __ **Authorization To Construct** __ **BOTH** __ **Existing System Inspection**

2. **Page 2: *Site Plan Worksheet* Form MUST Accompany This Application**
   The following optional attachments may also be submitted: *Place check ( ) beside whichever is submitted if applicable*
   ( ) **Survey Plat, Scaled no more than 1 Inch = 60 Feet**
   (X) **Custom Site Plan, Scaled no more than 1 Inch = 60 Feet**

3. **Applicant Information:**

Applicant Name	Mailing Address	Home Phone	Work Phone
Anniston II, LLC	P.O. Box 39, Cornelius NC, 28031		(704)-662-3569

Owner Name	Mailing Address	Home Phone	Work Phone
Anniston II, LLC	P.O Box 39, Cornelius NC, 28031		(704)-662-3569

4. **Property Information:**

Street Address	Subdivision Name	Section/Phase and Lot Number
Overlook Ridge Ln	Anniston	Phase IV-Lot 156

Driving Directions: From Shears Rd turn onto Anniston Way, then take a right onto Burnell Pl, then take a left onto Walking Horse Trail, then turn right onto Overlook Ridge Ln.

****

5. **RESIDENTIAL Site Development Information:** *(Check or Complete ALL that apply)*

(X) **New, Single Family Residence**
( ) **New, Multi-Family Residence**
( ) **Expansion of Existing Septic System**
( ) **Repair To Failing Septic System**

Maximum Number of Bedrooms 5
Maximum Number of Occupants 10
If Expansion, Current Number of Bedrooms ___

(X) **Crawl Space Foundation?**
( ) **Concrete Slab Foundation?**
( ) **Basement w/Plumbing?**
( ) **Basement w/out Plumbing?**

IF Non- Residential Site Development:
Type of Business _____
Square Footage of Building _____
Maximum Number of Employees _____
Maximum Number of Seats _____

****

6. **Proposed Water Supply:**

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

****

7. **Desired Septic System Type:** *(You may rank in order of preference, if any)*

( ) **Alternative** ( ) **Conventional** ( ) **Innovative** ( ) **Modified Conventional** (X) **Other** Accepted ( ) **No Preference**

****

8. **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. industry) 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.

9. **Signature:** _____ PAID 4418 9-11-13 DL 9/10/13
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY HEATLH DEPARTMENT

PAGE 2: *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 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…
  SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site
- X — Front and side setbacks from property line…
- X — Preferred driveway location and configuration, preferred well location…
- X — Area you prefer your septic system to be placed…
- X — North arrow, or other sufficient indicator of direction…

Circle N/A on the following if appropriate:

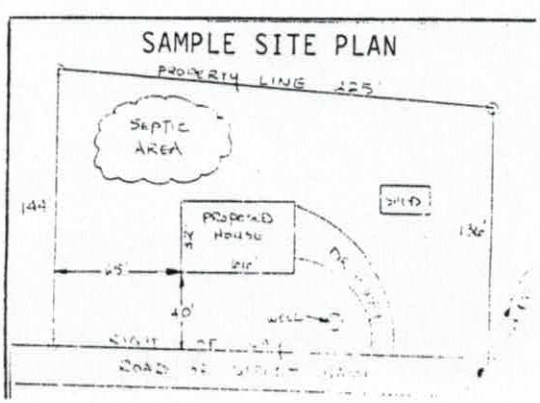
- ____ Location of septic systems and wells within 100' of your property… ~~N/A~~
- ____ Location of easements and rights of ways on your property… ~~N/A~~
- ____ Location of any designated wetlands on the property… ~~N/A~~

Signature: Samuel A Tollison
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

9/10/13
DATE

USE THIS SPACE TO DRAW YOUR SITE PLAN

See Attached



IREDELL COUNTY HEALTH DEPARTMENT

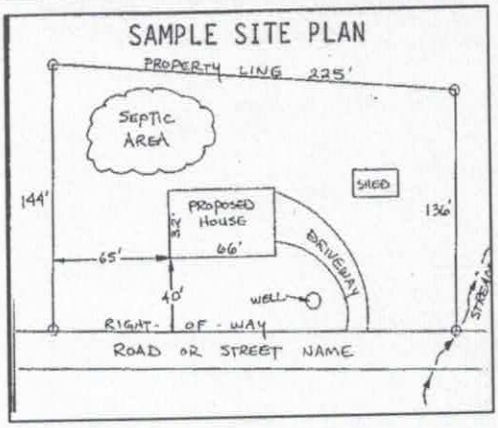
ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *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 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 and well location**
- ( ) **Area you prefer your septic system to be placed**
- ( ) **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**

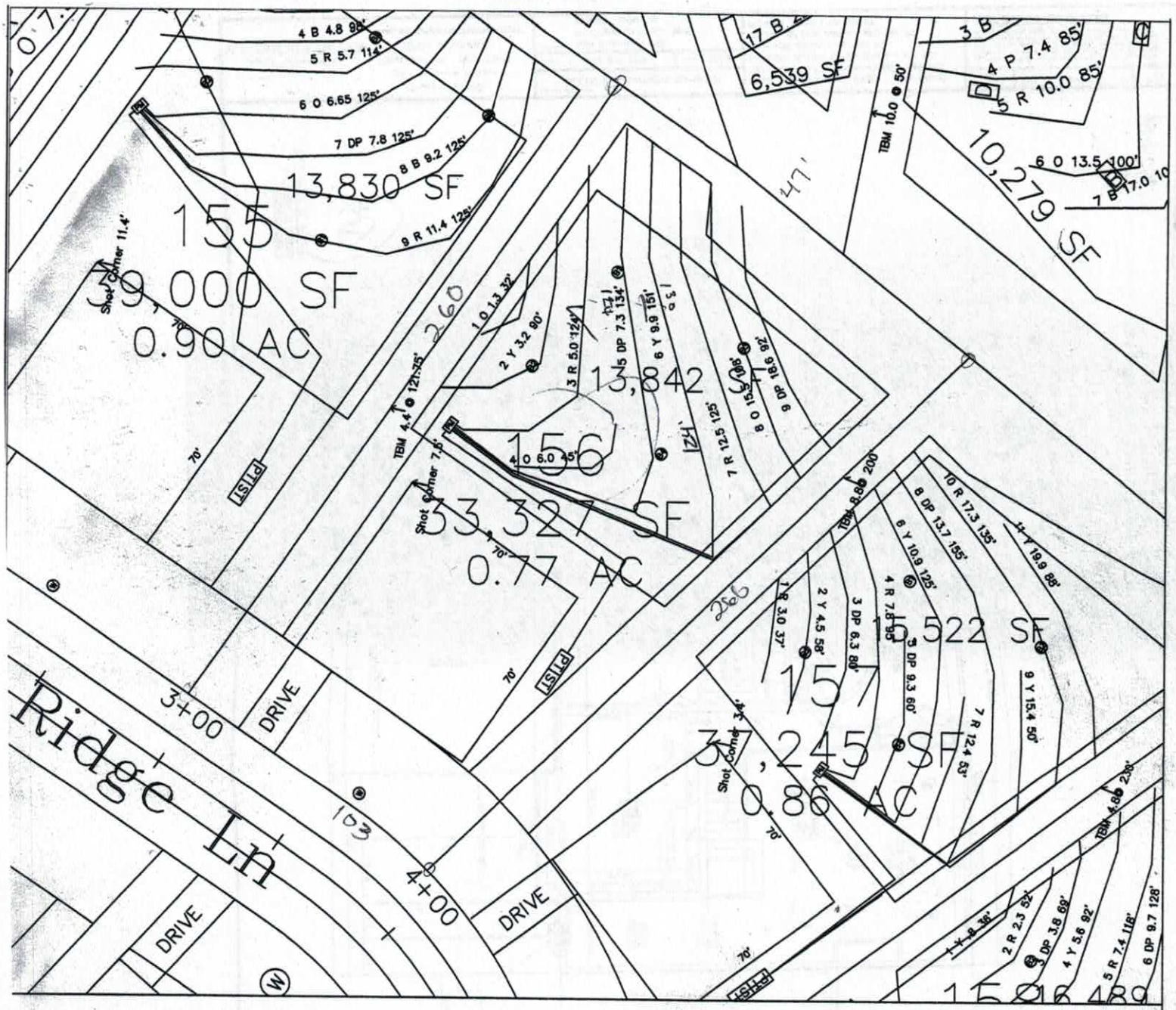
USE THIS SPACE TO DRAW YOUR SITE PLAN

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

Signature: _____ 2/17/16

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



LEGEND

- Areas contain soils with 24 inches or more of useable material and have potential for conventional, modified conventional and low-pressure pipe (lpp) septic systems.
- House Footprint
- System lines.
- Repair lines.
- Temporary Bench Mark (TBM)
- (W) Well Location. (25) Pit Location.

GRAPHIC SCALE
1" = 50'

50 0 50 100

FOR PRELIMINARY PLANNING PURPOSES ONLY. ALL LOTS WILL REQUIRE FINAL APPROVAL BY THE COUNTY HEALTH DEPARTMENT ON A LOT BY LOT BASIS. THIS MAP SHOULD BY USED AS A GENERAL GUIDE, SOME ADJUSTMENTS WILL BE NECESSARY IN THE FIELD DUE TO SOIL VARIABILITY AND COMPLEX TOPOGRAPHIC FEATURES.
THIS MAP ONLY REFLECTS EXISTING SOIL SUITABILITY FOR ON-SITE SEPTIC TANK SYSTEMS.

PLEASE REFER TO ATTACHED SOIL REPORT FOR ADDITIONAL SITE SPECIFIC INFORMATION

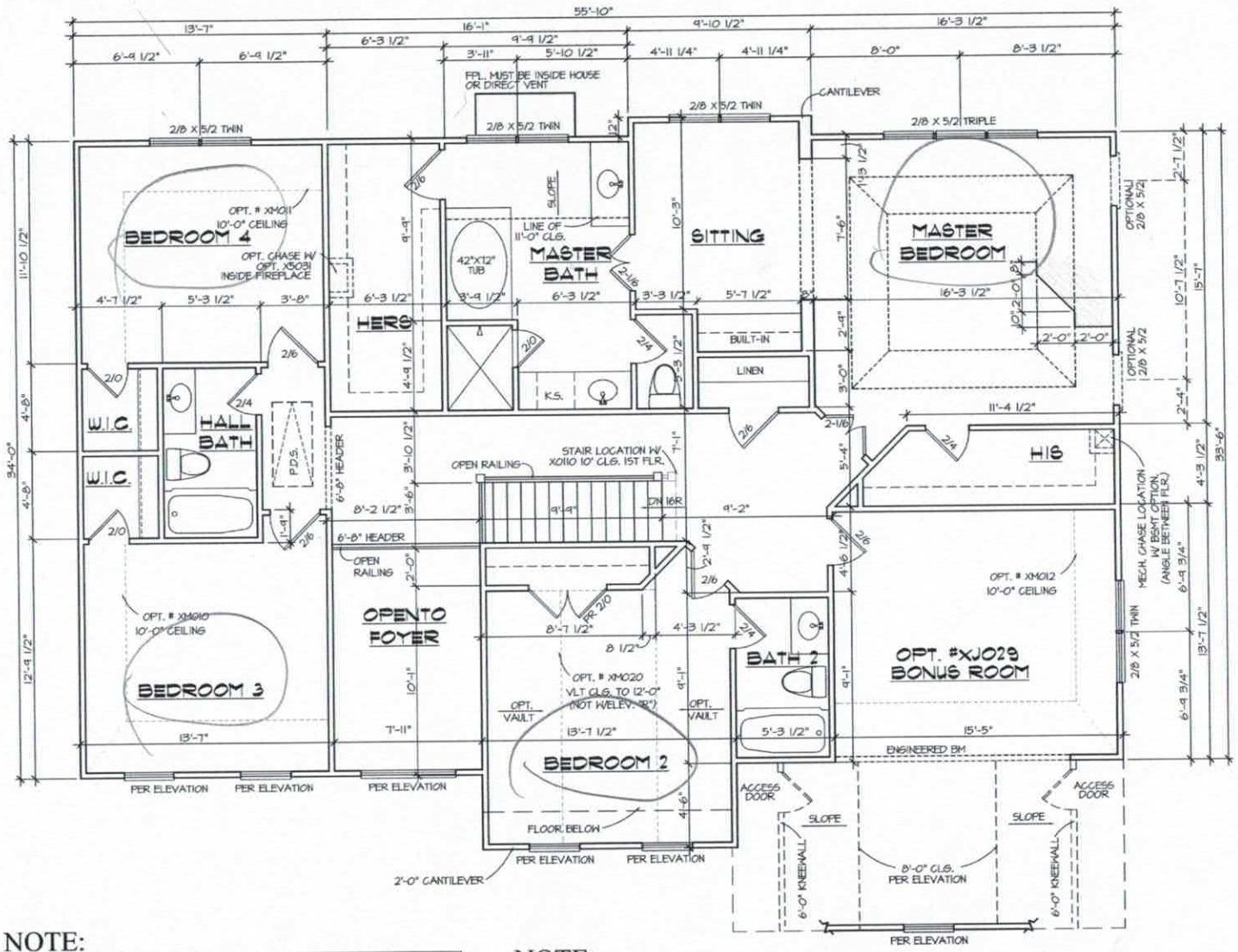
ROLLANS SOIL & ENVIRONMENTAL SERVICES, PA
P.O. BOX 832
MOORESVILLE, NC 28115
PHONE/FAX: (704) 278 - 0989
ASHLEY ROLLANS, NC LICENSED SOIL SCIENTIST
MOBILE: (704) 746 - 5046
EMAIL: rollans.ashley@yahoo.com

MAP TITLE: SITE PLAN & DRAINFIELD AREAS

PROJECT NAME: ANNISTON II, LLC / ANNISTON SUBDIVISION

LOCATION/DATE: SHEARER CHAPEL ROAD, IREDELL COUNTY, NORTH CAROLINA, SEPTEMBER 2013

JOB # : 01-1005
FILE: C:\JOBS\01-1005
PROJECT MGR.: S.A.R.
FIELD WORK: S.A.R.
DRAWN BY: S.A.R.



NOTE:
SEE FACADE PLAN ON SHEET A4.1 FOR PLAN AND PORCH DIMENSIONS, WINDOW AND DOOR SIZES AND LOCATION.

NOTE:
NOT AVAILABLE W/ ELEV "R"

#XL005 ALTERNATE SECOND FLOOR PLAN

SCALE: 1/4" = 1'-0"

Acknowledgement of Plans Submittal ONLY!
Date 2/20/06

PEACHTREE RESIDENTIAL PROPERTIES
The Builder Who Listens
7380 McGinnis Ferry Rd. • Suwanee, Georgia 30174
Voice (770) 622-2822 • Fax (770) 622-9171

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Drawn By: RKB
Date: 5/28/02
Plan No:

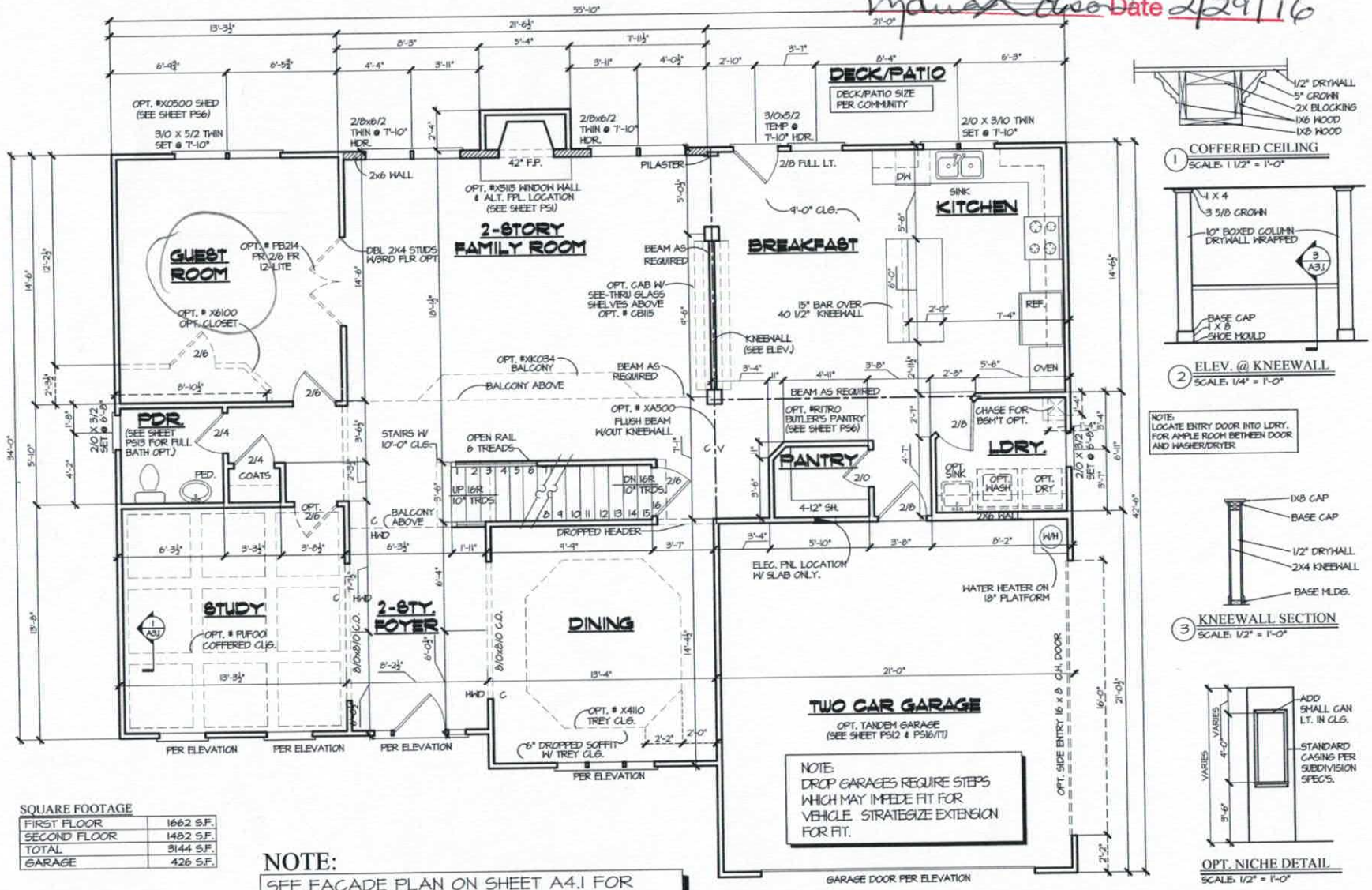
Revisions:
06/13/06 JS
09/25/06 JS
06/209-3508

Model Name: BILTMORE
Sheet Title: SECOND FLOOR PLAN
SHEET NO. PS9

Acknowledgement of
Plans Submittal ONLY!

Date 2/29/16

Date 2/29/16



1/2" DRYWALL
5" CROWN
2X BLOCKING
1X6 WOOD
1X8 WOOD

1 COFFERED CEILING
SCALE: 1 1/2" = 1'-0"

4 X 4
3 5/8 CROWN
10" BOXED COLUMN DRYWALL WRAPPED
BASE CAP
1 X 8
SHOE MOULD

2 ELEV. @ KNEEWALL
SCALE: 1/4" = 1'-0"

1X8 CAP
BASE CAP
1/2" DRYWALL
2X4 KNEEWALL
BASE MLDG.

3 KNEEWALL SECTION
SCALE: 1/2" = 1'-0"

ADD SMALL CAN LT. IN CLG.
STANDARD CASING PER SUBDIVISION SPEC'S.

OPT. NICHE DETAIL
SCALE: 1/2" = 1'-0"

SQUARE FOOTAGE

FIRST FLOOR	1662 S.F.
SECOND FLOOR	1482 S.F.
TOTAL	3144 S.F.
GARAGE	426 S.F.

NOTE:
SEE FACADE PLAN ON SHEET A4.1 FOR PLAN AND PORCH DIMENSIONS, WINDOW AND DOOR SIZES AND LOCATION.

FIRST FLOOR PLAN
SCALE: 1/4" = 1'-0"

PEACHTREE RESIDENTIAL PROPERTIES
The Builder Who Listens
7980 McDonald Ferry Rd. Suwanee, Georgia 30174
Voice (770) 622-2522 • Fax (770) 622-9171

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Drawn By: RKB
Date: 05/01/01
Plan No:

Revision:
04/25/06 ⊥.5
04/24/06 ⊥.5
03/12/07-2748
06/18/08-3506
07/13/09-3686
07/22/15-5223

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

Iredell County
Planning & Enforcement
349 N. Center St. PO Box 788
Statesville, NC 28687
704-878-3113

Zoning Permit

Printed: 9/11/2013

Permit Number: 180963ZO

Master #: 180963

Associated Permits:
180963ZO Zoning

Applicant

Name: Rollans Soil & Environmental Services **Phone:** 704-658-1723
Address: PO BOX 832
MOORESVILLE, NC 28115

Parcel

Parcel Number: 4664973411.156 **Zoning:** RA
Address: 000 OVERLOOK RIDGE Ln. **Township:** 0300
DAVIDSON, NC 28036 **Area:**
Subdivision: Anniston **Lot(s):** 156
Directions to Parcel: SHEARS RD, LEFT ANNISTON WAY, RIGHT BURNELL PL, LEFT WALKING HORSE, RIGHT OVERLOOK RIDGE

Owners

Name: ANNISTON LLC
Address: 17824 STATESVILLE RD STE 112
CORNELIUS, NC 280310000

Contractors

Contractor Type: Enviromental Services
Name: Rollans Soil & Environmental Services **Phone:** 704-658-1723
Address: PO BOX 832
MOORESVILLE, NC 28115

45855

Fees and Receipts:

Number	Description	Amount
FEE-296594-07	Zoning - Permit Application	$75.00
FEE-296595-07	Technology Fee - Planning	$2.25
FEE-296596-07	Environmental Health - Pump - Fast Track	$850.00