(38)

ICHD–Environmental Health Division

Statesville Office (704) 878-5305 x3456 | Mooresville Office (704) 660-3625

PERMIT # AP 323681

PRIVATE DRINKING WATER WELL PERMIT

PIN # 4167e -- 96 -- 9373 ✓

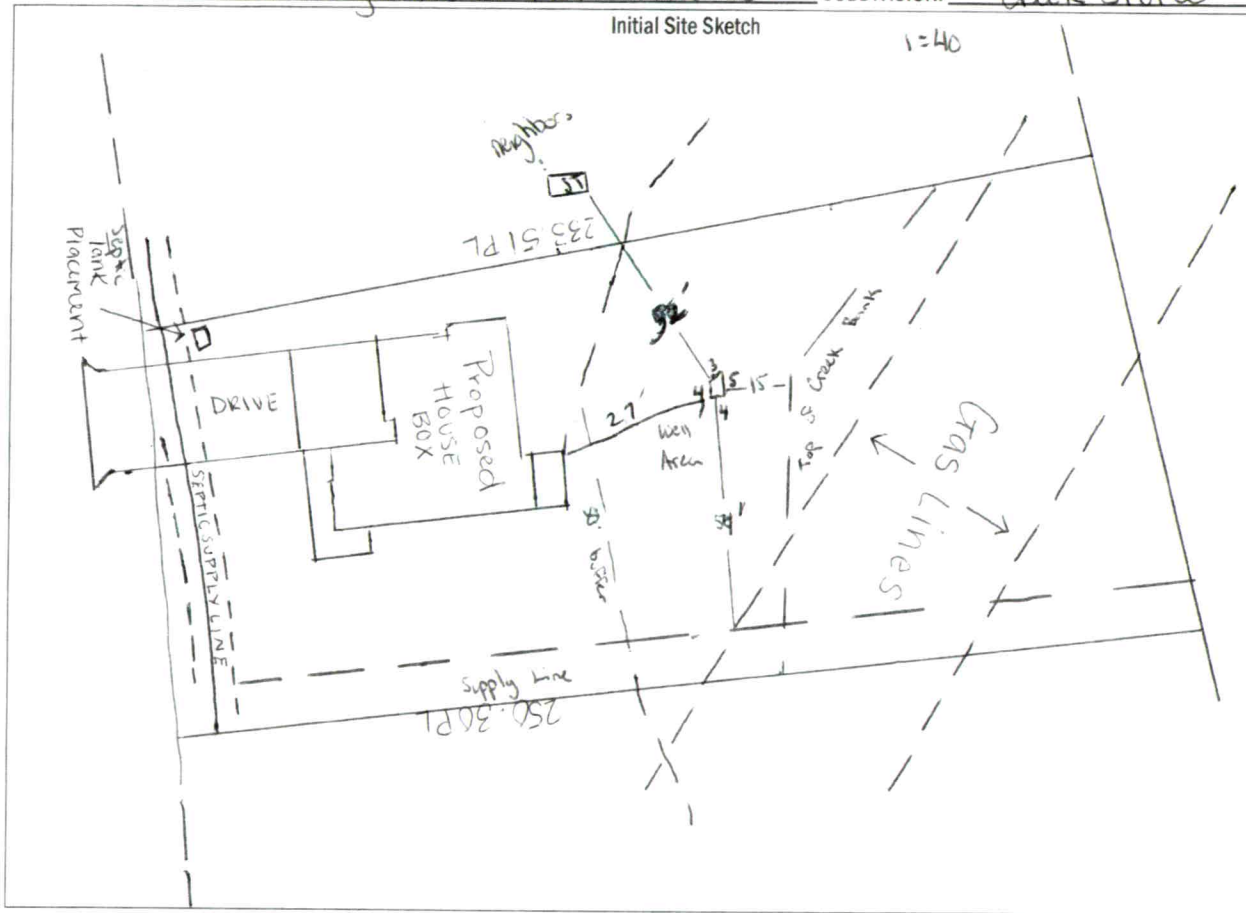
Type of Permit (circle one): **New** Repair Abandonment

APPLICANT/OWNER NAME: Nest Homes LLC ADDRESS: PO Box 3965 Mooresville NC 28117 PHONE: 980-500-1238

DIRECTIONS TO SITE: Hwy 150 E - (R) Hwy 152 - (R) Teeter Rd - (R) Country Lake Dr.

SITE ADDRESS: 238 Country Lake Dr. Mooresville NC ✓ SUBDIVISION: Creek Stone ✓ SECTION/LOT: P2 -- 25 ✓

Initial Site Sketch



CALL 704-664-3703 for

Grout or Well Head Inspections

ROUTING RESULTS

Total Depth _____

Depth of Casing _____

Yield _____

Notes:

Emailed 5/27/22

PERMIT CONDITIONS/COMMENTS: Follow all NC well drilling rules. Septic supply line easement must be marked at time of drilling. Well has a variance.

WELL PERMIT ISSUED BY: Cory Wit DATE: 5/27/22 (Permit is valid for 5 years from date issued. This permit may be revoked if it is determined there has been a material change in any fact or circumstance upon which the permit is issued. Actions of the employees of the Iredell County Health Department shall in no way be taken as a guarantee that this well will produce water of any particular quantity or quality or for any amount of time. Employees of the Iredell County Health Department assume no liability for any damages, either direct or consequential which may be caused by this well.)

Well Contractor: D & K Well Drilling CONTRACTOR CERT #: 3274A GROUT INSPECTION BY: _____ DATE: 05/24/23

OR CERTIFICATION OF GROUT NOT WITNESSED BY DEPT: _____ DATE: _____ WELL HEAD INSPECTION BY: Sydney Holland DATE: 5/23/23

WELL HEAD INSPECTION (check when completed): GROUT TO GROUND SURFACE ☑ WELL CONTRACTOR ID PLATE ☑ PUMP INSTALLER ID PLATE ☑ SAMPLE PORT ☑

ACCESS PORT / VENT ☑ WELL SEAL ☑ WELL HEAD 12 INCHES / PITLESS ADAPTOR 8 INCHES ABOVE GRADE ☑

CERTIFICATE OF COMPLETION BY: Sydney Holland DATE: 5/23/23 WATER SAMPLES BY: _____ DATE: _____

Attachments: Form GW-1a (required except for abandonment) ☒ Form GW-30 ☐ Water Sample Results ☐ Plat ☐ **CALL 704-664-3703 to schedule grout or well head inspections between 8-9am**

WELL CONSTRUCTION RECORD (GW-1)

For Internal Use Only: Creekstone lot 25

1. Well Contractor Information:

Joseph Bailey
Well Contractor Name

3271-A
NC Well Contractor Certification Number

B & K Well Drilling Inc
Company Name

2. Well Construction Permit #: AP - 323681
List all applicable well construction permits (i.e. UIC, County, State, Variance, etc.)

3. Well Use (check well use):

Water Supply Well:
- ☐ Agricultural
- ☐ Geothermal (Heating/Cooling Supply)
- ☐ Industrial/Commercial
- ☐ Irrigation
- ☐ Municipal/Public
- ☒ Residential Water Supply (single)
- ☐ Residential Water Supply (shared)

Non-Water Supply Well:
- ☐ Monitoring
- ☐ Recovery

Injection Well:
- ☐ Aquifer Recharge
- ☐ Aquifer Storage and Recovery
- ☐ Aquifer Test
- ☐ Experimental Technology
- ☐ Geothermal (Closed Loop)
- ☐ Geothermal (Heating/Cooling Return)
- ☐ Groundwater Remediation
- ☐ Salinity Barrier
- ☐ Stormwater Drainage
- ☐ Subsidence Control
- ☐ Tracer
- ☐ Other (explain under #21 Remarks)

4. Date Well(s) Completed: 5/4/23 **Well ID#** P2 - 25

5a. Well Location:

NEST Homes LLC
Facility/Owner Name

Creekstone SD
Facility ID# (if applicable)

238 Country Lake Dr., Mooresville, NC 28117
Physical Address, City, and Zip

Iredell Co.
County

4676-40-9373
Parcel Identification No. (PIN)

5b. Latitude and longitude in degrees/minutes/seconds or decimal degrees:
(if well field, one lat/long is sufficient)

_____ N _____ W

6. Is(are) the well(s): ☒ **Permanent** or ☐ **Temporary**

7. Is this a repair to an existing well: ☐ Yes or ☒ No
If this is a repair, fill out known well construction information and explain the nature of the repair under #21 remarks section or on the back of this form.

8. For Geoprobe/DPT or Closed-Loop Geothermal Wells having the same construction, only 1 GW-1 is needed. Indicate TOTAL NUMBER of wells drilled: _____

9. Total well depth below land surface: 345' (ft.)
For multiple wells list all depths if different (example- 3@200' and 2@100')

10. Static water level below top of casing: 40 (ft.)
If water level is above casing, use "+"

11. Borehole diameter: 6 1/8 (in.)

12. Well construction method: Rotary
(i.e. auger, rotary, cable, direct push, etc.)

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm): 15 GPM **Method of test:** Airlift

13b. Disinfection type: Chlor Tabs **Amount:** 1 1/2 Tabs

15. Screen

FROM	TO	DIAMETER	SLOT SIZE	THICKNESS	MATERIAL
ft.	ft.	in.			
ft.	ft.	in.			

16. Grout

FROM	TO	MATERIAL	EMPLACEMENT METHOD & AMOUNT
0 ft.	20 ft.	Benote	Pour
ft.	ft.		
ft.	ft.		

17. Sand/Gravel Pack

FROM	TO	MATERIAL	EMPLACEMENT METHOD
ft.	ft.		
ft.	ft.		

18. Drilling Log

FROM	TO	DESCRIPTION (color, hardness, soil/rock type, grain size, etc.)
0 ft.	3 ft.	Fill Dirt
3 ft.	15 ft.	Red Soil
15 ft.	30 ft.	Brown Soil
30 ft.	50 ft.	Reddish Brown Sandy Soil
50 ft.	70 ft.	Soft Grey Brown Rock
70 ft.	345 ft.	Light Grey Granite Rock
ft.	ft.	

19. Additional Information:

FROM	TO	DESCRIPTION
315 ft.	319 ft.	Large Fracture Zone
ft.	ft.	

20. Borehole

FROM	TO	DIAMETER	THICKNESS	MATERIAL
0 ft.	61' ft.	6.25 in.	SDR 21	PVC
ft.	ft.	in.		
ft.	ft.	in.		

21. Remarks:

There is a Variance Issued For This Location Approval No. JMB 2652.

22. Certification:

Joseph Bailey
Signature of Certified Well Contractor

5/4/23
Date

By signing this form, I hereby certify that the well(s) was (were) constructed in accordance with 15A NCAC 02C .0100 or 15A NCAC 02C .0200 Well Construction Standards and that a copy of this record has been provided to the well owner.

23. Site diagram or additional well details:
You may use the back of this page to provide additional well site details or well construction details. You may also attach additional pages if necessary.

SUBMITTAL INSTRUCTIONS

24a. For All Wells: Submit this form within 30 days of completion of well construction to the following:

Division of Water Resources, Information Processing Unit,
1617 Mail Service Center, Raleigh, NC 27699-1617

24b. For Injection Wells: In addition to sending the form to the address in 24a above, also submit one copy of this form within 30 days of completion of well construction to the following:

Division of Water Resources, Underground Injection Control Program,
1636 Mail Service Center, Raleigh, NC 27699-1636

24c. For Water Supply & Injection Wells: In addition to sending the form to the address(es) above, also submit one copy of this form within 30 days of completion of well construction to the county health department of the county where constructed.

NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

ROY COOPER • Governor
KODY H. KINSLEY • Secretary
HELEN WOLSTENHOLME • Interim Deputy Secretary for Health
MARK T. BENTON • Assistant Secretary for Public Health
Division of Public Health

Onsite Water Protection Branch
May 27, 2022

NH Landholdings
PO Box 3965
Mooresville, NC 28117

Re: Approval No. JMB2652

Private Well Located Less than 25' from Surface Water [Rule 15A NCAC 2C .0107(a)(2)(R)]

Property location:
238 Country Lake Dr
Mooresville, NC 28117

To Whom It May Concern:

On May 24, 2022, the On-site Water Protection Branch received your request for a variance from the Well Construction standards, Title 15A North Carolina Administrative Code Subchapter 2C .0100. The request for a variance concerns a proposed water supply well on the referenced property that will serve a single-family dwelling and part of a on the property will be within twenty-five feet of the well. The home is on a lot with very difficult topography.

Specifically, the variance request grants you permission to construct a water supply well at a distance closer than the fifty-foot setback to a surface water body. Achieving the fifty-foot setback would be difficult given the challenges of the property.

Based upon information provided by the Iredell County Health Department, and the property owner, it is my finding that based upon current conditions as the site exist today (as well as the current proposal for use of the structure) you meet the conditions necessary for approval of a variance as specified by 15A NCAC .0118 (a) (1) and (2). On that basis and if the following conditions are met, the requested variance is approved:

1) The new water supply well shall be constructed of either PVC, steel, or galvanized metal casing.
2) The well shall be located as far as possible from the structure where, depending upon where well rig can actually set up, will possibly encroach upon the 25foot setback, but not be closer than 5feet.
3) A preconstruction meeting shall be required with the Iredell County Health Department staff to ensure that the maximum possible distances are achieved.
4) The well will be required to have casing installed to a minimum of 50 feet below land surface or to bedrock, whichever is greater.
5) The well shall be at least fifty feet from any part of the septic system including repair area.
6) Grout will be required the entire length of the casing from land surface into bedrock.
7) A drill bit with a diameter of a least one third greater than the diameter of the casing must be used to drill the cased portion of the well.
8) Grout must be either pumped into place with the use of a tremmie pipe or pressure method.
9) If a full-length grout is not possible due to site conditions, then a packer-liner must be installed in the well. The liner must extend at least five feet beyond the end of the casing and grouted entirely with a neat cement grout.
10) The well must be constructed outside of any road right of way.

The granting of this variance is for the well location only. It in no way relieves the owner or agent from other requirements of the North Carolina Well Construction Standards including, but not limited to the requirements in 15A NCAC 2C .0113(b) to repair or to abandon any well which acts as a source or channel for the migration of contamination. This approval does not imply sufficient water quality. Further, the approval does not relieve your responsibility to comply with any other applicable Federal, State, or local laws or regulations.

If you have any questions regarding this variance, please contact me at (828) 713-3335.

Sincerely,

John M. Brooks R.E.H.S, MS

North Carolina Department of Environmental Quality (DEQ) – Division of Water Resources (DWR)

VARIANCE APPLICATION FOR WELL CONSTRUCTION STANDARDS:

PRIVATE DRINKING WATER WELLS UNDER 15A NCAC 02C .0300

WATER SUPPLY WELLS UNDER 15A NCAC 02C .0107

All water supply wells not considered "Private Drinking Water Wells" and including irrigation, industrial, and commercial wells.

WELLS OTHER THAN WATER SUPPLY UNDER 15A NCAC 02C .0108

Including monitoring and recovery wells.

Print clearly or type information. Illegible submittals will be returned as incomplete.

DATE: May 10, 2022 **PERMIT NO.:** _____ (to be completed by DWR/DPH)

A. WELL OWNER(S) – For single family residences, list all persons appearing on property deed. For all others, list name of the business/government agency and person and title with delegated signature authority:

NH Landholdings LLC

Mailing Address: PO Box 3965

City: Mooresville State: NC Zip Code: 28117 County: Iredell

Day Tele No.: 980-500-1238 Cell No.: _____

EMAIL Address: hposton@nesthomes.com Fax No.: _____

B. PHYSICAL LOCATION OF WELL SITE

(1) Parcel Identification Number (PIN) of well site: 4676469373.000

County: Iredell

(2) Physical Address (if different than mailing address): 238 Country Lake Dr

City: Mooresville County: Iredell Zip Code: 28115

C. WELL DRILLER INFORMATION (if known)

Well Drilling Contractor's Name: Alfred Kiesling Sr or Robert Teague

NC Well Drilling Contractor Certification No.: 2670-A or 2857-A

Company Name: B+K Well Drilling Inc Contact Person: _____

City: Mooresville State: NC Zip Code: 28115 County: Iredell

Day Tele No.: 704-892-4696 Cell No.: _____

EMAIL Address: bkwelldrilling@yahoo.com Fax No.: 704-677-7843

D. **REASON FOR VARIANCE REQUEST** – Include type of well(s) to be constructed; rule for which the variance is being requested; description of how the alternate construction will not endanger human health and welfare and the environment; and reason why construction and/or operation in accordance with the standards is not technically feasible and/or provides equal or better protection of the groundwater.

Well location is 5ft from the top of Stream batter

E. **ATTACHMENTS** – Provide the following information as attachments to this application:

(1) A map showing general location of the property (including road names, NC State Route Number, distances, any key landmarks, etc.) sufficient for finding the well location.
(2) Detailed site map with scale showing location of proposed well relevant to septic system(s), building foundations, property lines, water bodies, potential sources of contamination, other wells, etc.
(3) Submit a copy of the local well permit application and site evaluation map (if applicable).
(4) Any other information relevant to the variance request such as a well construction diagram showing proposed well liner or atypical construction materials/methods.

F. **SIGNATURE(S)**

Heather Poston
Signature(s) of Well/Property Owner(s)

Heather Poston of Nest Homes LLC
Print or Type Well/Property Owner(s)

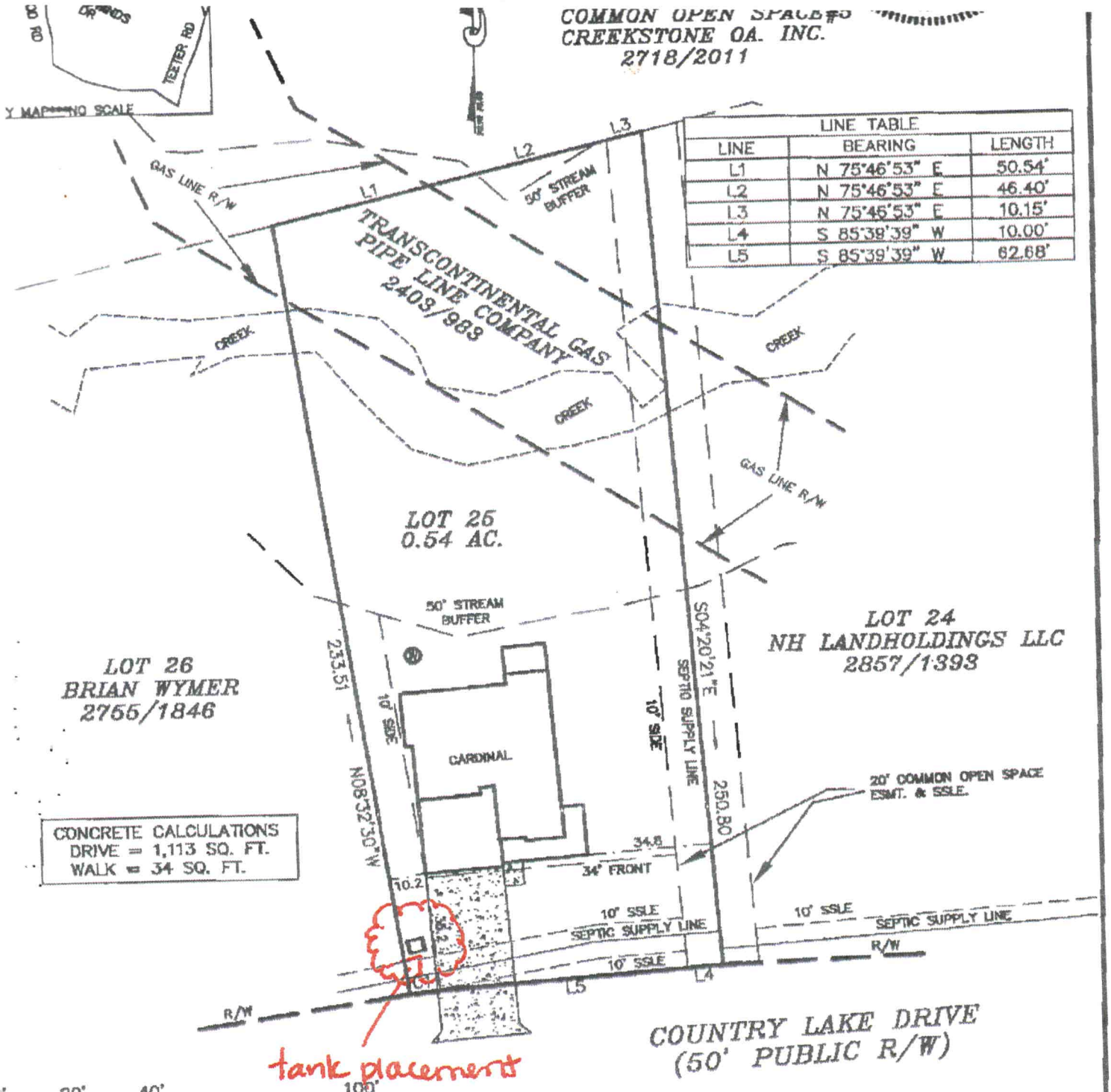
Signature of Person Responsible for Well Construction
(Typically the well driller)

Alfred Kirsling Sr or Robert Tracy
Print or Type Name of Person Responsible for Well Construction
(Typically the well driller)

Cory Whit
Signature of County Environmental Health Specialist

Cory Whicker
Print or Type Full Name and Title of County Environmental Health Specialist

Per 15A NCAC 02C .0118 the Secretary of the Division of Water Resources or the Division of Public Health may require submittal of information deemed necessary to make a decision on the variance, may impose conditions as part of the decision, and shall respond in writing to the request within 30 days of receipt of the variance request. A variance applicant who is dissatisfied with the decision of the Director may commence a contested case by filing a petition as described in G.S. 150B-23 within 60 days after receipt of the decision.



LINE TABLE		
LINE	BEARING	LENGTH
L1	N 75°46'53" E	50.54'
L2	N 75°46'53" E	46.40'
L3	N 75°46'53" E	10.15'
L4	S 85°39'39" W	10.00'
L5	S 85°39'39" W	62.68'

CURVE TABLE				
CURVE	RADIUS	LENGTH	BEARING	CHORD
C1	275.00'	15.72'	S 84°01'22" W	15.72'

LEGEND
L.P.S. = ¾ REBAR SET
R/W = RIGHT-OF-WAY
BTL = BUILD TO LINE
CP = COMPUTED POINT
W = WELL
SSLE = SEPTIC SUPPLY LINE ESMT.

NOTES
1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENTS AND/OR RIGHTS OF WAY OF RECORD.
2) ACREAGE COMPUTED BY THE COORDINATE METHOD.
3) UNDERGROUND POWER
4) NO GRID MONUMENT FOUND WITHIN 2000 FEET.
5) SETBACKS SHOWN PER RECORDED PLAT (P70 P059).

PLOT PLAN SURVEY

OF

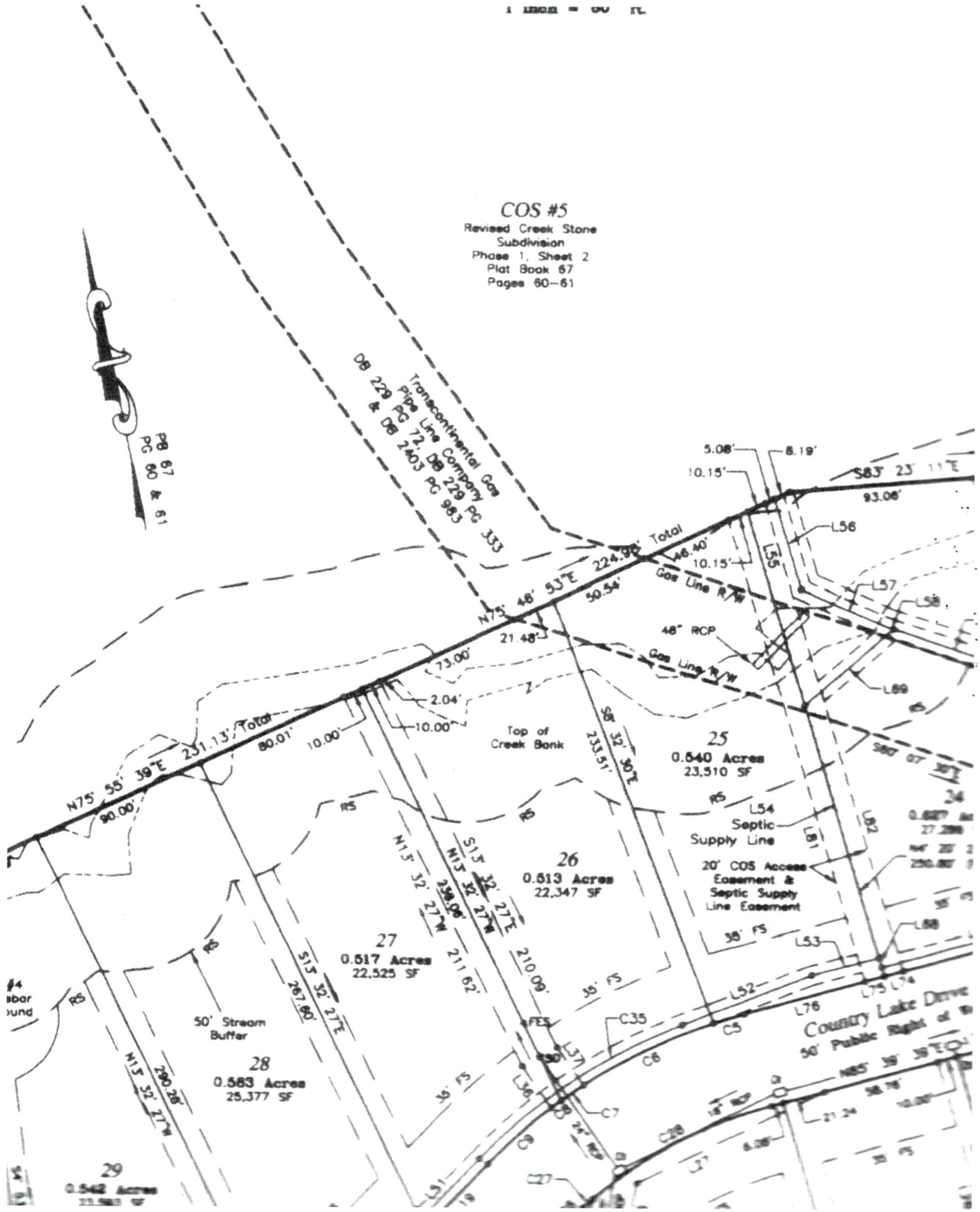
LOT 25 CREEK STONE PHASE 2

CODDLE CREEK TWSP., IREDELL CO., N.C.

SCALE 1" = 40'

ACQUIRED BY: NEST HOMES

FIELD BOOK:
FILE: CREEK STONE 25 PH2
DC FILE:
TAX MAP NO: 20211004

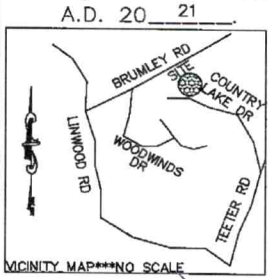

COS #5
Revised Creek Stone Subdivision
Phase 1, Sheet 2
Plat Book 67
Pages 60--61
PB 67 PG 60 & 61
DB 229 & DB 2403 PG 983
Transcontinental Gas Pipe Line Company DB 229 PG 333
Gas Line R/W
48" RCP
Top of Creek Bank
25
0.540 Acres
23,510 SF
26
0.513 Acres
22,347 SF
27
0.517 Acres
22,525 SF
28
0.583 Acres
25,377 SF
29
0.542 Acres
20' COS Access Easement & Septic Supply Line Easement
Septic Supply Line
50' Stream Buffer
Country Lake Drive
50' Public Right of Way
N75° 55' 39"E 231.13' Total
N75° 46' 53"E 224.98' Total
S83° 23' 11"E
93.06'
N13° 32' 27"W 290.26'
S13° 32' 27"E 267.60'
N13° 32' 27"W 211.62'
S13° 32' 27"E 210.09'
S8° 32' 30"E 233.51'

DAS
DON ALLEN & ASSOCIATES, P.A.
"Since 1971"
Commercial * Residential * Mortgage Surveys * Multi-Family
Construction Staking * Subdivision Design * Topographical
131 Crosslake Park Drive – Suite 102 * Mooresville * NC * 28117
(704) 664-7029 (704) 664-8041 Fax

I, certify that this map was drawn under my supervision from an actual survey made under my supervision recorded in deed book 2857, page 1393, and/or plat book 70, page 59, that the ratio of precision is 1':10,000, that this map was prepared in accordance with the General Statutes of North Carolina Chapter 89C. my hand and seal on the 2, day of DECEMBER, A.D. 20 21.

WILLIAM M. ALLEN, PLS

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



REVISION 12/15/21
ADDED WELL

REVISION 3/8/22
SHIFTED HOUSE 12' LEFT

REVISION 4/8/22
ADDED SEPTIC TANK

COMMON OPEN SPACE#5
CREEKSTONE OA. INC.
2718/2011

LINE TABLE		
LINE	BEARING	LENGTH
L1	N 75°46'53" E	50.54'
L2	N 75°46'53" E	46.40'
L3	N 75°46'53" E	10.15'
L4	S 85°39'39" W	10.00'
L5	S 85°39'39" W	62.68'

GAS LINE R/W
50' STREAM BUFFER
TRANSCONTINENTAL GAS PIPE LINE COMPANY 2403/983
CREEK
CREEK
CREEK
GAS LINE R/W
LOT 25
0.54 AC.
50' STREAM BUFFER
LOT 26
BRIAN WYMER
2755/1846
LOT 24
NH LANDHOLDINGS LLC
2857/1393
233.51'
N08°32'30"W
10' SIDE
CARDINAL
10' SIDE
S04°20'21"E
SEPTIC SUPPLY LINE
250.80'
20' COMMON OPEN SPACE ESMT. & SSLE.
34.8'
34' FRONT
10.2'
35.2'
10' SSLE
SEPTIC SUPPLY LINE
SEPTIC TANK
10' SSLE
SEPTIC SUPPLY LINE
10' SSLE
C1
L5
L4
R/W
R/W
COUNTRY LAKE DRIVE
(50' PUBLIC R/W)

CONCRETE CALCULATIONS
DRIVE = 1,113 SQ. FT.
WALK = 34 SQ. FT.

0' 20' 40' 100'
SCALE IN FEET

CURVE TABLE				
CURVE	RADIUS	LENGTH	BEARING	CHORD
C1	275.00'	15.72'	S 84°01'22" W	15.72'

LEGEND
I.P.S. = #4 REBAR SET
R/W = RIGHT-OF-WAY
BTL = BUILD TO LINE
CP = COMPUTED POINT
Ⓦ = WELL
SSLE = SEPTIC SUPPLY LINE ESMT.

NOTES
1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENTS AND/OR RIGHTS OF WAY OF RECORD.
2) ACREAGE COMPUTED BY THE COORDINATE METHOD.
3) UNDERGROUND POWER
4) NO GRID MONUMENT FOUND WITHIN 2000 FEET.
5) SETBACKS SHOWN PER RECORDED PLAT (P70 PG59).

PLOT PLAN SURVEY

OF

LOT 25 CREEK STONE PHASE 2

CODDLE CREEK TWSP., IREDELL CO., N.C.

SCALE 1" = 40'

ACQUIRED BY: NEST HOMES

FIELD BOOK:
FILE: CREEK STONE 25 PH2
DC FILE:
TAX MAP NO: 20211004

RECEIVED FEB 0 2 2022

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM AP-323681 $550.00

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: Nest Homes LLC **Address:** PO Box 3965 , Mooresville NC **Zip:** 28117

Applicant Email: hposton@nesthomes.com **Phone:** 980-500-1238 **Alt. Phone:**

Owner Name: NH Landholdings LLC **Address:** PO Box 3965 , Mooresville NC **Zip:** 28117

Owner Email: hposton@nesthomes.com **Phone:** 980-500-1238 **Alt. Phone:**

Property Information:

Street Address: 238 Country Lake Dr

Subdivision Name: Creek Stone Subdivision **Section/Phase:** P2 **Lot Number:** 25

Driving Directions: Hwy 150 East , right onto East Hwy 152, right on Teeter Rd, right on Country Lake Dr, parcel is on right

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

CHECK FOUNDATION TYPE

(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:

( ) Crawl Space Foundation
(X) 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 (X) Other:

Please answer the following to the best of your ability:

(X) Yes ( ) 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: Heather Poston 12/15/2021

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

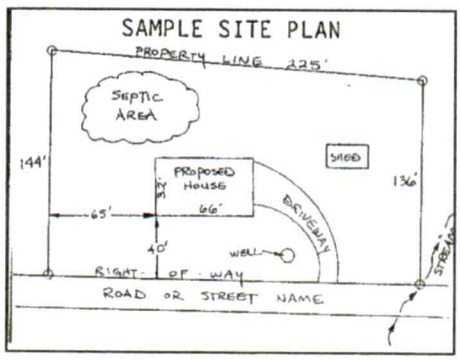
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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:

- (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**
- ( ) **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**

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

**** Please see attached plot plan ****

Signature: Heather Poston

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

12/15/2021

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, Eric Wood, am the legal owner(s) of the property located at 238 Country Lake Dr, identified as

PIN (Parcel Identification Number) 4676469373.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Nest Homes LLC, Heather Poston, 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.

Heather Poston
Signature of Owner(s)

12/15/2021
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

ENVIRONMENTAL HEALTH REQUIREMENTS for SEPTIC and WELL PERMITS

The following items must be completed *PRIOR* to the *SUBMITTAL* of any Environmental Health Application. Incomplete applications will be returned to the applicant and cannot be processed or placed on the work list.

*** Initial all lines below to indicate you have submitted each form and completed every site requirement ****

HP **Complete all Environmental Health forms**:
- X Application
- X Site Plan with dimensions of proposed structure, addition, pool etc.
- X Documentation to Authorize Owner Agent (if the property owner is not the applicant)
- X Copy of Zoning Permit when applicable
- X Sign this sheet after you have completed all items

HP **Lot must be cleared of heavy undergrowth.** In order to evaluate the lot, the footprint of the proposed structure must be visible. Adequate area for the septic drain field and repair area must be sufficiently cleared of heavy undergrowth, with **50 feet of visibility** in all directions. Inspectors must be able to evaluate the property, shoot laser level elevations, layout the drain field, do soils work, etc. **If the lot is not cleared sufficiently, then a $100 site revisit fee will be charged and the evaluation will be put on HOLD until the requirement is met.**

HP **Clearly mark all property corners by locating existing iron or concrete markers**. Flag all property lines every 25 feet if adjacent corners are not visible when standing on any given corner. Property lines must be flagged by a licensed NC surveyor & easily identified **prior to application submittal** (exception may apply for septic repair evaluations only).
'Mow lines' and/or fence lines do NOT constitute marked lines. **If the property lines are not properly marked when the lot is ready to be evaluated, then the application will be put on HOLD and a $100 site re-visit fee charged**.

HP **Stake or flag the footprint of the proposed structure, addition, pool etc. to match the site plan submitted.** The proposed structure, etc. **must be staked** out on the property as per the site plan.

HP If an **Authorization to Construct (AC) is desired**, submit a recorded copy of the plat for newly created or subdivided lot(s) and a LEGIBLE copy of the basic floor plan no larger than 8 ½" x 14" for each floor of the structure including decks, porches, etc. **The overall dimensions must be clearly noted & the rooms labeled.**

Any site not meeting the above requirements when staff arrives for the evaluation will result in a $100 site revisit fee being charged and the request being placed on HOLD. This will delay the processing of the application.
Once work by Environmental Health staff begins, the up-front fees paid toward securing any health department permit are non-refundable. Refunds for work not started, due to a customer changing their mind or plans, are subject to an administrative fee of $50 to defray a portion of the costs of processing the refund.

Backhoe pits are required for all applications that require a soils evaluation.
DO NOT DIG PITS UNTIL THE EH SPECIALIST HAS AUTHORIZED AND SCHEDULED YOUR EVALUATION TIME.
- **All utilities shall be marked before pits are dug. Call NC 811 for this service.**
- **The applicant/agent is responsible for securing these services**
- **Backhoe pits are to be dug at the locations and depths determined by the Environmental Health Specialist or a NC Licensed Soil Scientist. A minimum of four pits must be dug.**
- **The EH specialist will contact you when your application is ready to be processed for pit scheduling.**
- **Your backhoe operator must be on site during the EH Specialist's evaluation to prevent your operator from having to return to the property for additional work.**

By signing below I am acknowledging the above specifications have been met and the site is READY to be evaluated AND I understand the backhoe pit requirement and will secure those services (if applicable).

Signature Heather Poston **Date** 12/15/2021

Questions? Contact the Environmental Health Offices below:

Statesville Office
349 North Center Street (2nd Floor Building Standards)
Statesville, NC 28677-4063
Phone: (704)878-5305 ext. 3456

Mooresville Office
610 East Center Avenue (2nd Floor Govt. Center South)
Mooresville, NC 28115-2548
Phone: (704)660-3625