Site Address: 192 Rain Shadow Dr., Mrvl 28115

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PERMIT# 149051 PIN# ~~4674956328.000~~ 4676.94.0453 DATE 8-14-08

OWNER OR APPLICANT DAVID R. MCKAY LLC PHONE: Business 664-9080 Home

ADDRESS 505 TEETER RD. MOORESVILLE, NC 28115

LOCATION 152-E RT TEETER RD. APPROX. 2MI ON LT HOLLYBROOK SUBD. - CUL DE SAC

SUBDIVISION HOLLYBROOK BLOCK / SECTION LOT 11 LOT AREA 1.005 SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .25 GPD/FT²

Septic Tank: 1000 Gallons; STB 794 Date 6/18/18

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet Linear Feet 480'

No Lines 5 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth

☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI

System Description: 25% REDUCTION

Repair System Description: PRBPS LP

Maintenance Agreement Required: ☐ Yes ☒ No

☒ Gravity ☐ Pressure

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Persons

☐ Business No. Employees

☐ Other

Water Supply: ☒ Individual ☐ Public ☐ Community

☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions:

Do not cut house pad fm

Comments:/Conditions:

INITIAL SITE SKETCH

* SEE PLAN FROM WASTEWATER SOLUTIONS
STEVE BURLEY - 655 CONSULTANTS INC.

8/24/18 Dellinger mid-serum Conc. tank w/ a Polylok PL-68 effluent filter

Garage (slab)

15'

67'

6'

L1: 98
L2: 98
L3: 98
L4: 98
L5: 90
492

verified OK by Jason IQ4W installed @ 36" TB.

AS BUILT SKETCH

Future Deck? (incomplete)

House

16'

30'

Garage

9/7/18: PP marked (CoR) w/ 11' of offset between top distal line and PP.

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. Improvement Permit with plat valid without expiration ☐ Improvement Permit with site plan valid for sixty months ☒ Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: date 11-13-08

Improvement Permit by: C. Mc Kee, R.S. date 10-7-08 / 8-15-08 CPM

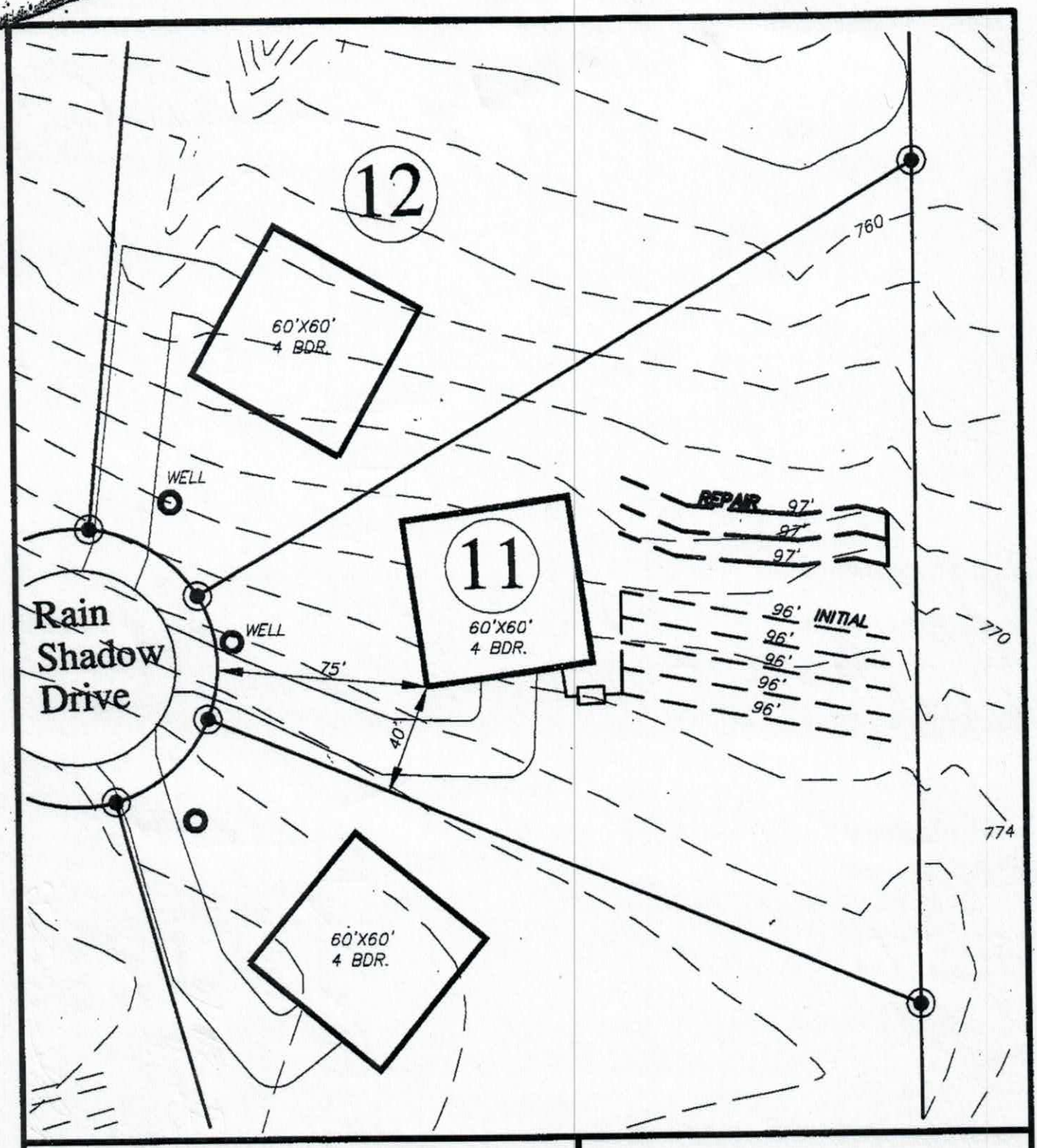
Authorization to Construct by: date

Installed by: Russell Williams

Operation Permit by: date 9/7/18

Existing System Inspection by: date

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK



Hollybrook

FOR

DAVID R. MCKAY, LLC. & BETTY MCKAY, LLC.

606 TEETER ROAD
Mooresville, NC 28115
(704) 664-9080

IREDELL COUNTY; CODDLE CREEK NORTH CAROLINA

SEPTIC FIELD LAYOUT
LOT # 11

BAR SCALE 1"=50'

0 25 50 100

RECEIVED MAR 15 2018 ~~RECEIVED FEB 8 2018~~

AC w/ inspection - Old permit

233272

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) 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: Century Communities Southeast, LLC Address: 7400 Carmel Executive Park Dr. Suite 205 Zip: 28226

Applicant Email: rhonda.bustard@centurycommunit Phone: 704-943-1310 Alt. Phone: _____

Owner Name: Century Communities Southeast, LLC. Address: 7400 Carmel Executive Park Dr. Suite 205 Zip: 28226

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

Property Information:

Street Address: 192 Rain Shadow Drive

Subdivision Name: Hollybrook Section/Phase: 1 Lot Number: 11

Driving Directions: HWY 152 Right on Teeter Road, community on Right

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

(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: 4
Maximum Number of Occupants: _____
( ) Swimming Pool
( ) Other Addition/Structure: _____

CHECK FOUNDATION TYPE
( ) 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: _____

(✓) 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: N/A
(X) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other: _____

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. 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: Rhonda Bustard 2/8/18
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

RECEIVED 12/17/2015 10:38AM
From Century Communities NC 1.704.702.4445 Thu Feb 8 07:59:56 2018 MST Page 1 of 6

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, Matthew Chisholm, am the legal owner(s) of the property located at 192 Rain Shadow Drive, identified as PIN (Parcel Identification Number) 4676-94-0453, located in Iredell County, North Carolina.

I do hereby authorize **(print legal representative/company name)** Century Communities, 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.

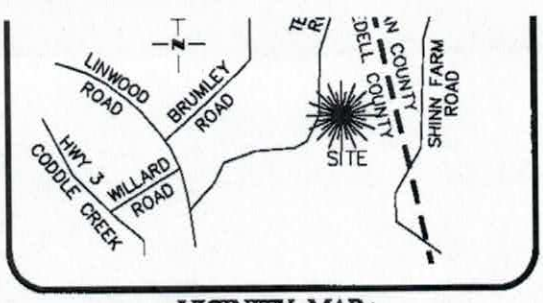
Signature of Owner(s)	Date	Signature of Witness	Date
	2/6/18	Ronda Bustard	2/6/18

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

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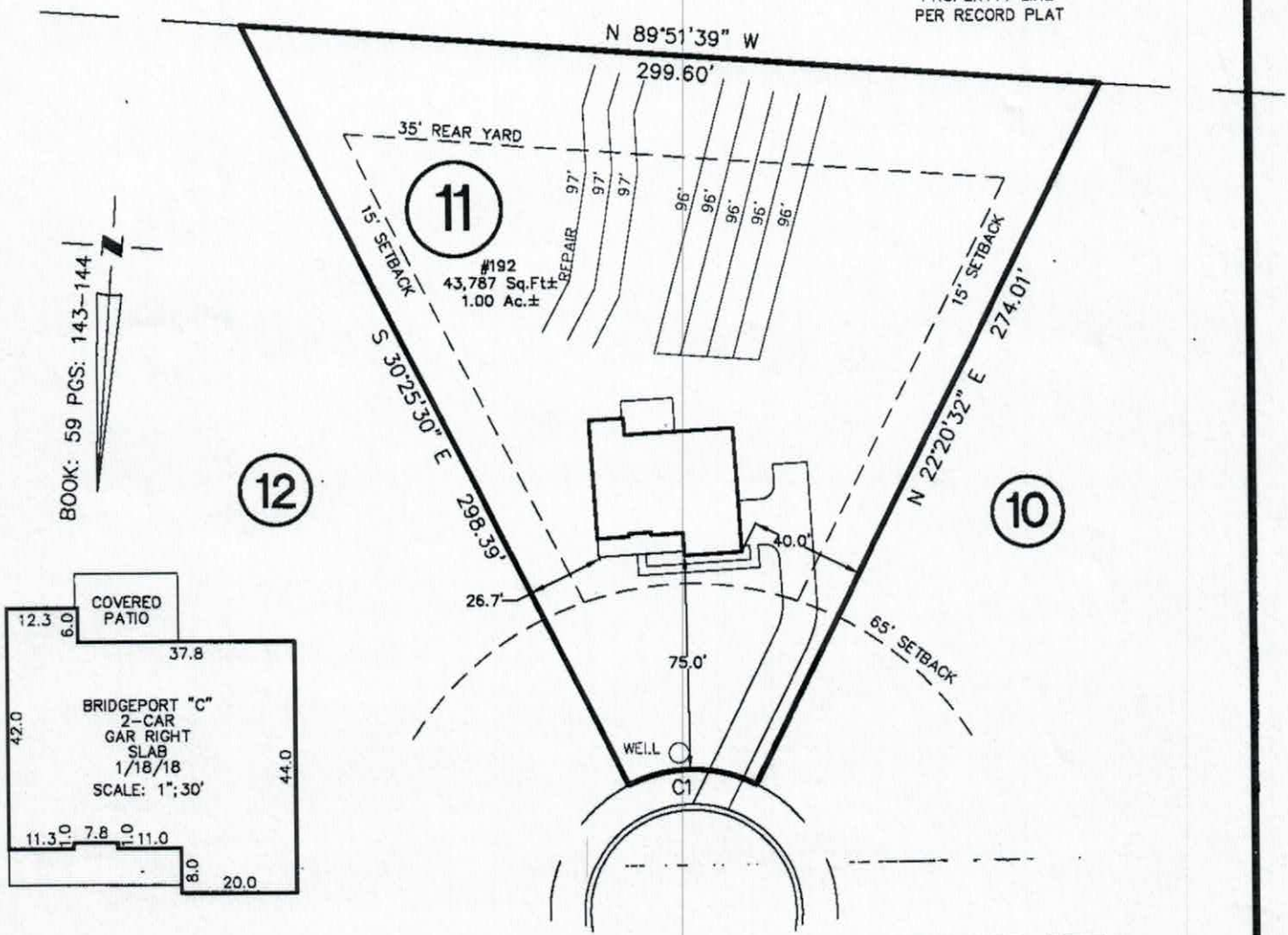


VICINITY MAP
Not To Scale

DESCRIPTION	AREA
LEADWALK	156 S.F.±
DRIVEWAY ASSUMED 12' TO BOC	1,747 S.F.±
SOD AREA 1 (BOC TO REAR OF HOUSE)	11,297 S.F.±
SOD AREA 2 (REAR OF HOUSE TO REAR SETBACK)	18,758 S.F.±

NOW OR FORMERLY
TRACT ONE
WILLIAM LEE TEETER, ET AL
DB 1007 PG 159
DB 1055 PG 425
DB 1067 PG 812
DB 2100 PG 2108
DB 2106 PG 488

BARBED WIRE FENCE MENANDERS ALONG PROPERTYY LINE PER RECORD PLAT



RAIN SHADOW DRIVE

50' PUBLIC R/W

CURVE TABLE				
CURVE	BEARING	CHORD	LENGTH	RADIUS
C1	N85°57'32"E	44.44	46.05	50.00

NOTE:
ALL LOTS ARE SUBJECT TO A 10' DRAINAGE & UTILITY EASEMENT ALONG ALL LOT LINES.

THIS PROPERTY LIES WITHIN "ZONE X" ACCORDING TO FLOOD INSURANCE RATE MAP COMMUNITY PANELS #3710467600J, DATED MARCH 18, 2008 & #3710468600K, DATED JUNE 16, 2009. XONE X BEING THE AREAS DETERMINED TO BE OUTSIDE THE 0.2% ANNUAL CHANCE FLOODPLAIN.

THIS PROPERTY MAY BE SUBJECT TO ANY AND ALL APPLICABLE DEED RESTRICTIONS, EASEMENTS, RIGHT-OF-WAY, UTILITIES AND RESTRICTIVE COVENANTS WHICH MAY BE OF RECORD OR IMPLIED

THIS DRAWING DOES NOT REFLECT AS-BUILT INFORMATION

PRELIMINARY PLAT
NOT FOR RECORDATION, CONVEYANCES, OR SALES.

60 0 60

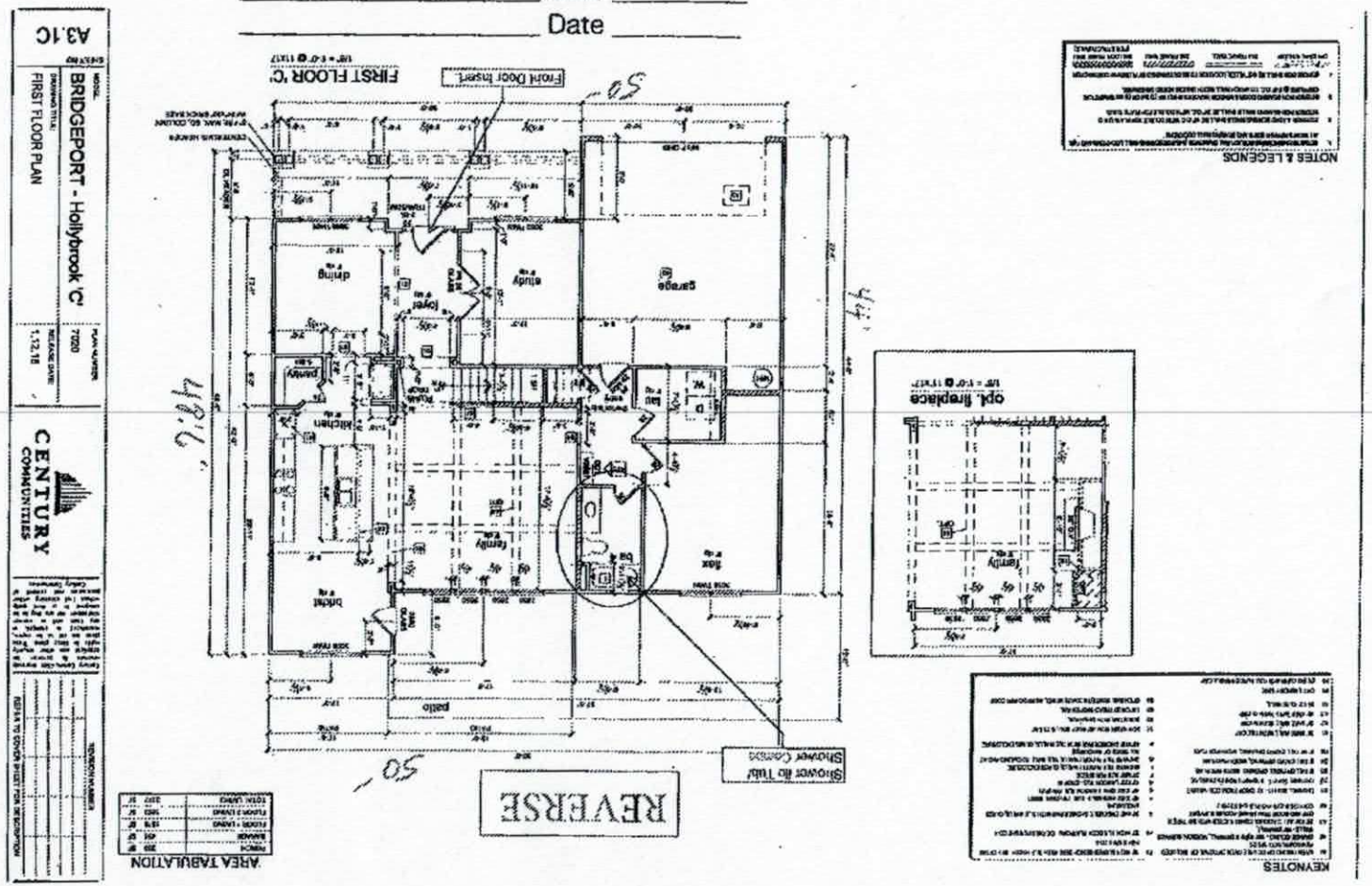
HOUSE LOCATION PLOT PLAN
FOR

RECEIVED 12/17/2015 10:38AM
From Century Communities NC 1.704.702.4445 Thu Feb 8 07:59:56 2018 MST Page 4 of 6

Acknowledgement of Plans Submittal ONLY!

_____ Date _____

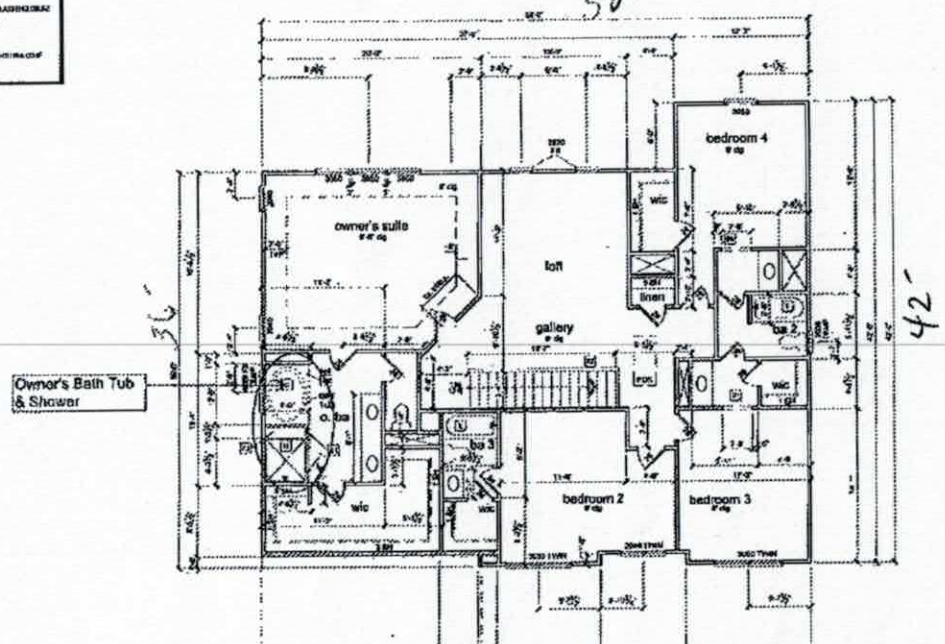
_____ Date _____



KEYNOTES

NOTES & LEGENDS

REVERSE



SECOND FLOOR 'C'

Acknowledgement of Plans Submittal ONLY!

Rhonda Baldwin Date

Date

CENTURY COMMUNITIES

BRIDGEPORT - Hollybrook 'C'

SECOND FLOOR PLAN

A3.2C

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