Site Address: 112 Avensong Court, Mvl. 28115

IREDELL COUNTY HEALTH DEPARTMENT

...ESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PERMIT# 1490852092 45 PIN# ~~4676956328.024~~ 4676-96-1422 DATE 11-3-08

OWNER OR APPLICANT David McKay PHONE Business 704-664-9080 Home

ADDRESS 505 Teeter Rd Mooresville NC 28115

LOCATION Hwy 152-E TR Teeter Rd TL Rain Shadow TL Avensong at end

SUBDIVISION Holly brook BLOCK / SECTION — LOT 24 LOT AREA 1.034 Ac SITE CLASS PS DESIGN FLOW 480gpd L.T.A.R. .3gpd/ft²

Septic Tank 1000 Gallons: STB Date
Pump Tank Gallons: PT Date
Pump Make Model Serial No.
Nitrification Field: No. Fields 1 Square Feet Linear Feet 400
No. Lines 4 Trench Width 36" Max. Trench Bottom Depth 30"

☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI
System Description: 25% reduction gravity
Repair System Description: 25% reduction pm
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other
No. Bedrooms 4 No. Persons No. Employees

Water Supply: ☒ Individual ☐ Public ☐ Community

Gravel Depth NA ☒ Gravity ☐ Pressure ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments/Conditions:

Comments/Conditions: 2/8/18 Reviewed Floor plans in compliance with Septic plan OK to do 30 133FT

INITIAL SITE SKETCH

See plan from Steve Gourley GSS Consultants & Wastewater Solutions

AS BUILT SKETCH

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.

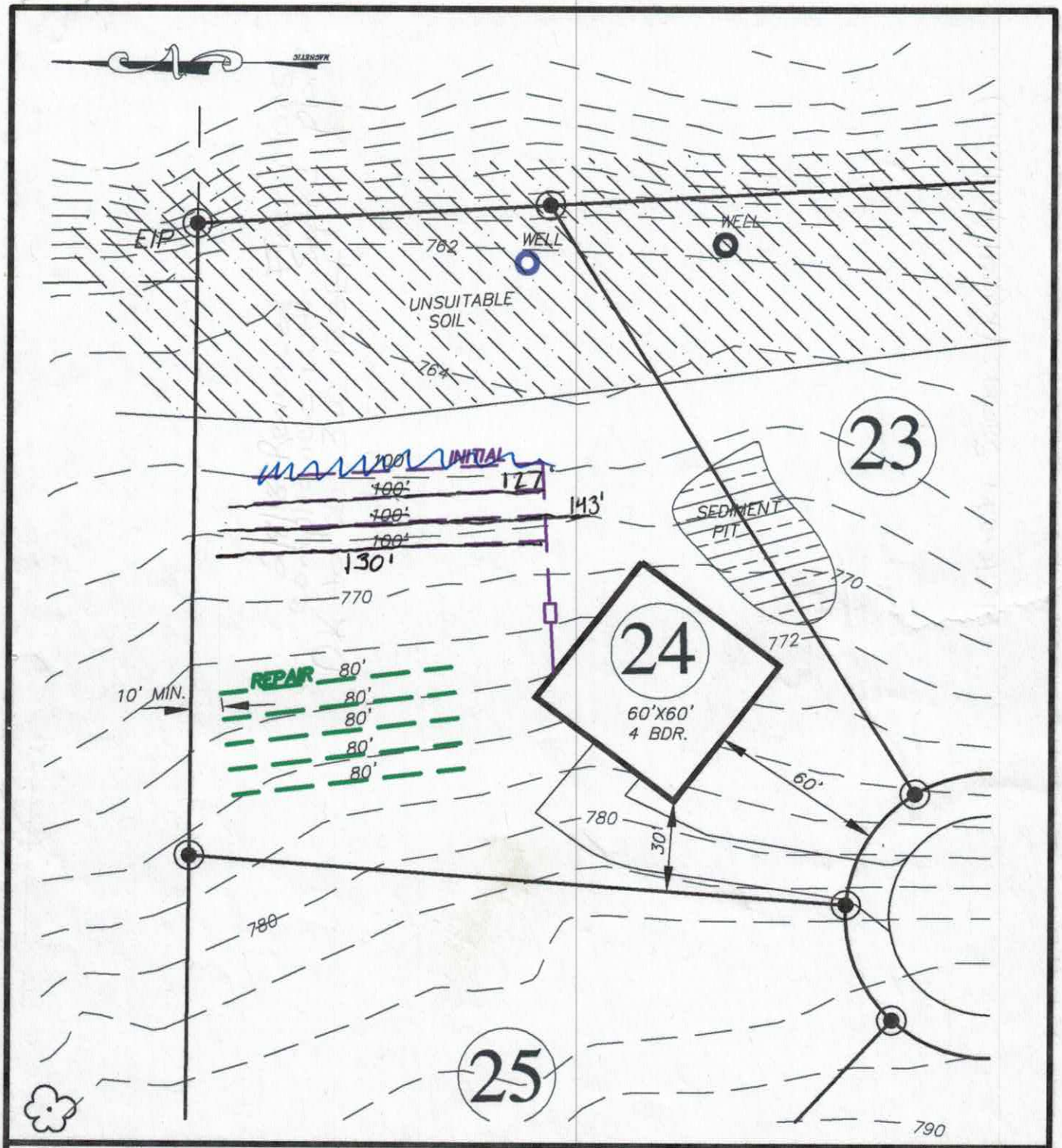
Signed: [signature] date 11-13-08 Installed by: Wastewater Solutions (Russell Williams)

Improvement Permit by: [signature] date 11-3-08 Operation Permit by: Carla C. Core date 8/20/18

Authorization to Construct by: [signature] APPROVED date AUG 10 2015 Existing System Inspection by: date

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

A.C reapproved [signature] 2/8/18



Hollybrook

FOR

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

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

IREDELL COUNTY; CODDLE CREEK NORTH CAROLINA

SEPTIC FIELD LAYOUT
LOT # 24

BAR SCALE 1"=50'

0 25 50 100

Hollybrook Subdivision Septic Specifications
Iredell County , NC

Lot # 24 Type of Water Supply Well Number of Bedrooms 4 GPD Flow 480

Type of Initial System 3g Gravity V Pump ____ LTAR 0.3

Total Linear feet of drain line 400 ' Type of Distribution System Serial

____ Number of Trenches 4 Trench Width and Length 3X100 If

Variable Length Lines List Separately ____ Minimum Trench Spacing 9' o/c

Trench Depth 30" in. Septic Tank Size 1000 gal. Pump Tank Size ____ gal.

Type of Repair System 3gb Gravity ____ Pump V LTAR 0,3

Total Linear Feet of drain line 400 ' Type of Distribution System PM

Number of Trenches 5 Trench Width and Length 3'X80'

If Variable Length List Separately ____

Minimum Trench Spacing 9' o/c

Trench Depth 30" in. Septic Tank Size 1000 gal. Pump Tank Size 1000 gal.

SOIL/SITE EVALUATION

(Continuation Sheet)

DEPARTMENT OF ENVIRONMENT
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

PROPERTY ID #: _____
DATE OF EVALUATION: _____
COUNTY: _____

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
23	L 8-15% smooth	B* 6-10	SBK SCL	SEXP FR S SP	2.5YR 4/4	48"+	N/A	N/A	II/III 0.35/Har
		AB 10-28	" SCL	" " " SP					
		B+ 28-48+	" C	" " " P	2.5YR 4/6				
24	L (23)	B* 6-10	SBK SCL	SEXP FR S SP	2.5YR 4/4	48+	N/A	N/A	III/III 0.4/Har
		AB 10-41	" "	" " " "					
		B+ 41-48+	" C	" " " P	2.5YR 4/6				
25	HS (23)	AB 0-21	SBK SCL	SEXP FR S SP	2.5YR 4/4	45"+	NA	35"<2 Chroma	IV 2.0 0.2/Har
		Bt 21-35	" C	" " " P					
		B+ 35-45+	" "	EXP " " VP	8/1 redox 35-45"				
		Wtr. in hole on 10/27 @ 11/5. Wtr. surface 45" below soil surface. Wtr. level appeared to have dropped about 12" based on wtr. mark in pit.							
26	L 8-15% smooth	AB 3-3	SBK SCL	SEXP FR S SP	2.5YR 4/4	45"+	N/A	N/A .3 @ 24" or 24"+B	III/III 0.4/Har .35 36"+B
		B+ 3-24	" C/CL	" " " P					
		BC 24-48+	" C/CL/SCL	" " " SP					
27	L 2-8% on long (approaches 15% & plane slope)	AB 3-3	SBK SCL	SEXP FR S SP	2.5YR 4/4	47"+	N/A	N/A	III/III 0.4/Har
		B+ 3-24	" C/CL	" " " P					
		BC 24-48+	" C/CL/SCL	" " " SP					

COMMENTS: * Reworked Slope w/Sc

SOIL/SITE EVALUATION

(Continuation Sheet)

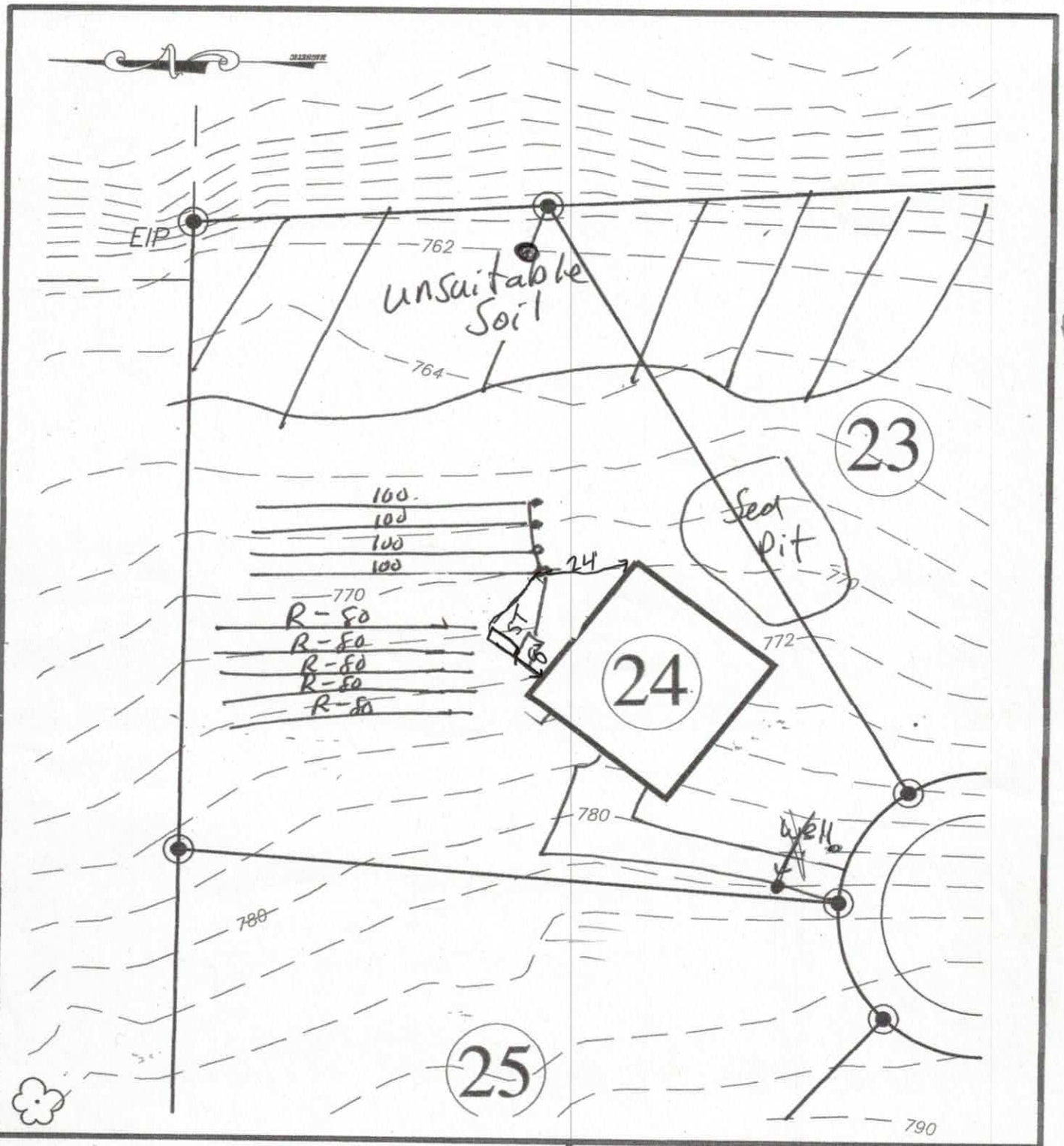
DEPARTMENT OF ENVIRONMENT
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

PROPERTY ID #: _____
DATE OF EVALUATION: _____
COUNTY: _____

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
5	As (1)	Bt 0-40	SBK CL	SEXP FR S P	2.5YR 4/8	48"+	N/A	N/A	III 0.35 ltar CCL texture
		BC 40-48+	" "	" " " "					
6	As (1) No Wtr. 1/21 Wtr in pit +/1 Wtr dropped 6" in 2 hrs 15	Bt 0-24**	SBK C/CL	SEXP FR S P	2.5YR 4/8	24" to RC	U too much Rock	24" to RC	IV 0.2 ltar LPP
		RC 24"+	m/GR RK/SCL	" FI SS SP					
7	As (4)	Bt 0-23	SBK C	SEXP FR S P	2.5YR 4/6	37"	N/A	37" to CB	IV 0.25? ltar (PL stone & depth)
		BC 23-37	SBK* CL	" " " "					
		CB 37-48+	" "	" " " "					
8	No Wtr. in Pit 01/15 As 6"+ slop (1) Wtr in pit 1/1	AB 0-2	SBK SC	SEXP FR S P	2.5YR 4/8	48"+	N/A	N/A	IV 0.3 ltar .3 OK SM CM
		Bt 2-38	" C	" " " "					
		BC 38-48+	" "	" " " "					
		RC 48-58"							
9	As (1)	Bt 0-48+	SBK C	SEXP FR S P	2.5YR 4/6	48"+	N/A	N/A	IV 0.3 ltar .3 OK gm CM
		0-30	SBK C						
		30-48	SBK CL						

COMMENTS: * SBK according to PL (schistosity of PM)
** S. side of pit. N. side of pit 36"+ depth. Pit 34" deep OVER FOR 24A

ZnA 0-26 mosbkc fr .3
26-48 wk sbkcl fr



move well

Hollybrook

FOR

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

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

IREDELL COUNTY; CODDLE CREEK NORTH CAROLINA

SEPTIC FIELD LAYOUT
LOT # 24

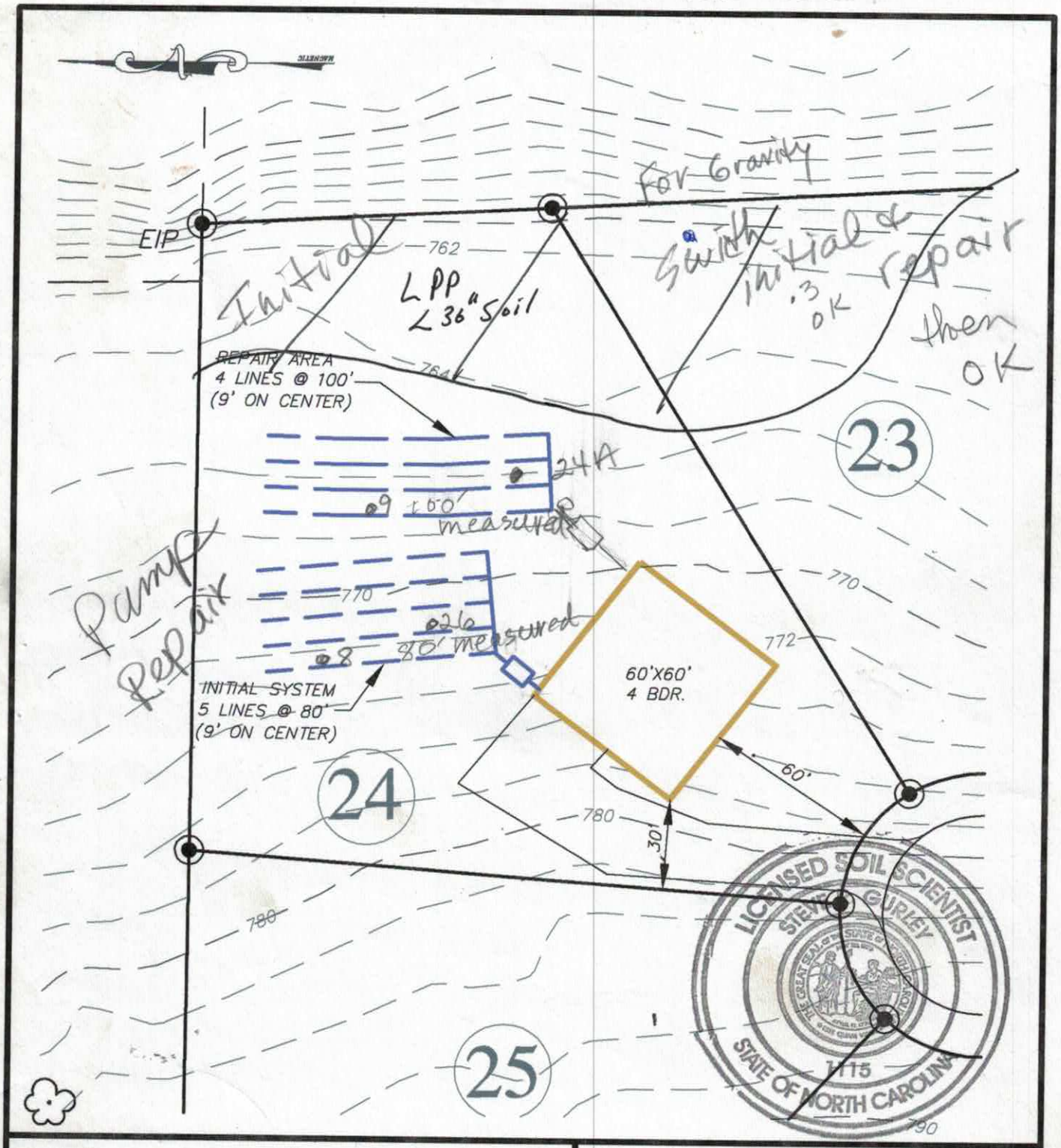
BAR SCALE 1"=50'

0 25 50 100

+BR

80 gpd - Initial - LTAR. 0.3 @ 25% Red = (4) lines of 3x100 - Serial Dist.
Repair. LTAR 0.3 @ 25% Red = (5) lines of 3'x 80' - Pump - PM.

Pit Locations



Hollybrook

FOR

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

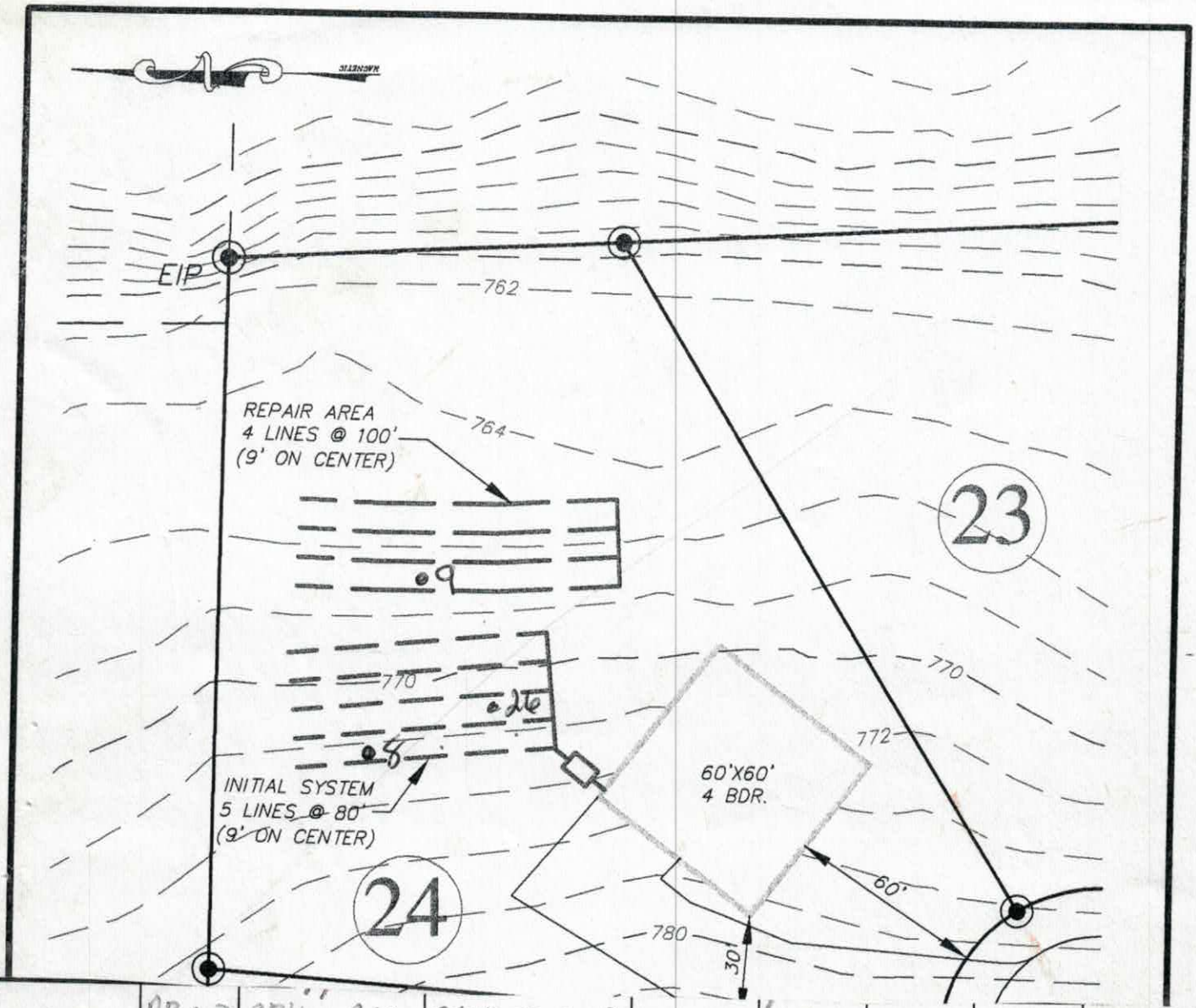
605 TEETER ROAD
Mooresville, NC 28115
(704) 664-9080

IREDELL COUNTY; CODDLE CREEK NORTH CAROLINA

SEPTIC FIELD LAYOUT
LOT # 3

BAR SCALE 1"=50'

0 25 50 100



26	L 10-15% smooth	AB 0-3	SBK " SCL	SEXP FR, S.SP	2.5YR 4/6	48"+	N/A	N/A	III/IV 0.4/ac
		B+ 3-24	" C/CL	" " " P					
		BC 24-48+	" C/CL/SCL	" " " SP					
NO WTR. IN Pit on 1/5									
8	As 6"± drop (1) Wtr in pit 1/1	AB 0-2	SBK SC	SEXP FR S P	2.5YR 4/8	48"+	N/A	N/A	IV 0.3 Hor
		B+ 2-38	" C	" " " "					
		BC 38-48+	" "	" " " "					
9	As (1)	B+ 0-48+	SBK C	SEXP FR S P	2.5YR 4/6	48"+	N/A	N/A	IV 0.3 Hor

RECEIVED FEB 6 - 2018

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: 112 Avensong Court

Subdivision Name: Hollybrook **Section/Phase:** 1 **Lot Number:** 24

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
(X) 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:
(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: 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 2/6/18
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

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 112 Avensong Court, identified as PIN (Parcel Identification Number) _____, 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.

_____ 1/25/18 Rhonda Gustafson 1/25/18
Signature of Owner(s) Date Signature of Witness Date

Please return this signed form to the appropriate office:

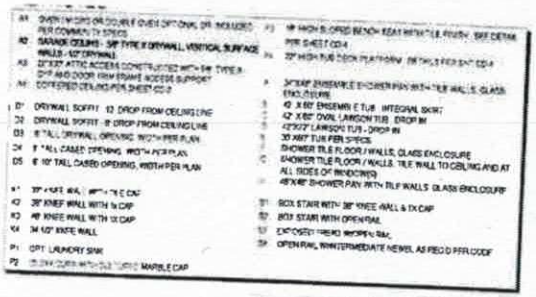
Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

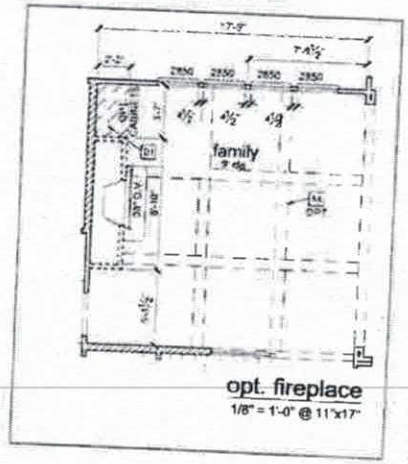
Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

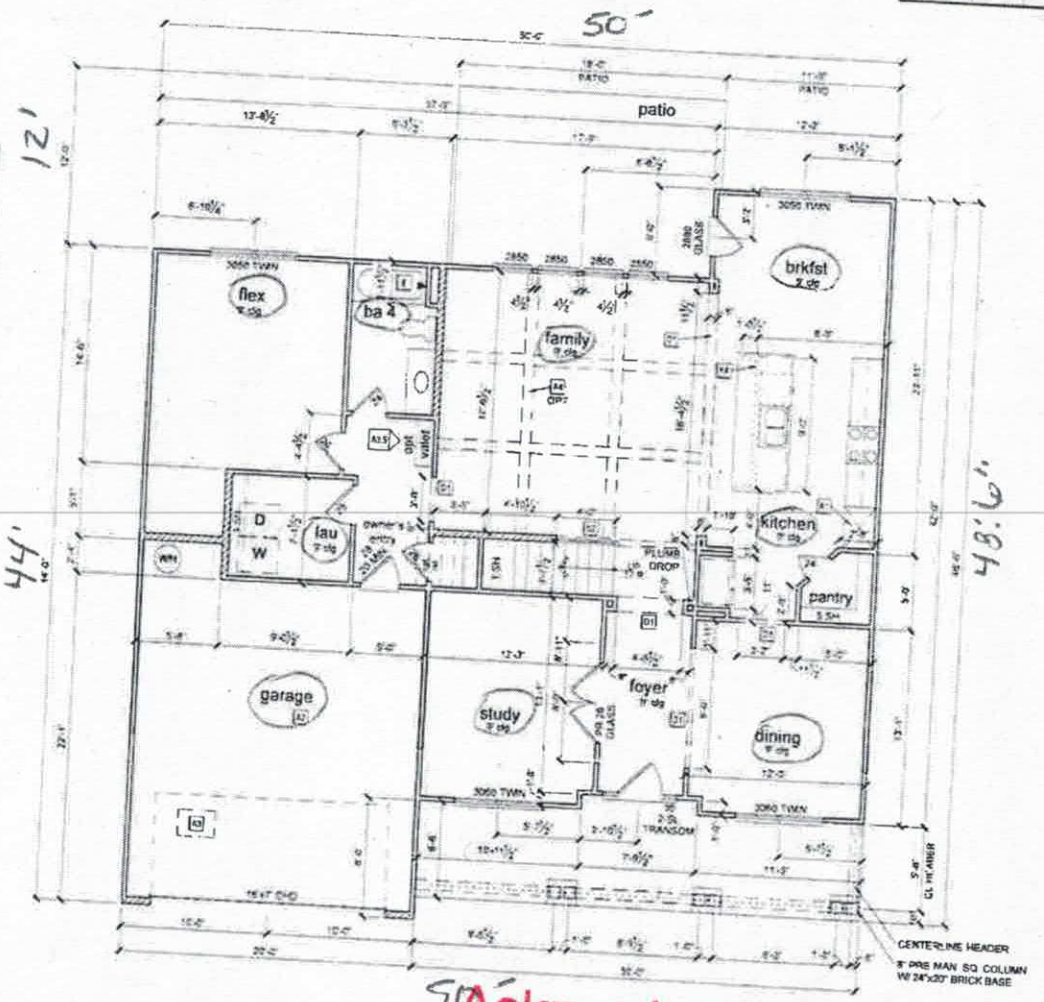
Hollybrook - 2 7

AREA TABULATION

PORCH	200 SF
GARAGE	451 SF
FLOOR 1 LIVING	1575 SF
FLOOR 2 LIVING	1802 SF
TOTAL LIVING	3377 SF







FIRST FLOOR 'C'

NOTES & LEGENDS

1. REFER TO ENGINEERING STRUCTURAL DRAWINGS (S-#) FOR BEARING WALL LOCATIONS AND FOR ALL BEAM & HEADER SIZES AND BEARING WALL LOCATIONS
2. EXTERIOR & LOAD BEARING WALLS SHALL BE 16" O.C. WITH DOUBLE TOP PLATE U.N.O. INTERIOR NON-BEARING WALLS SHALL BE 24" O.C. WITH DOUBLE TOP PLATE U.N.O.
3. INTERIOR NON-BEARING DOOR & WINDOW HEADERS SHALL BE (1) 2x4 OP (1) 2x6 INVERTICAL CRIPPLERS @ 2'-0" O.C. TO MATCH WALL WIDTH UNLESS NOTED OTHERWISE
4. (2) HOSE BIBS SHALL BE INSTALLED, LOCATION TO BE DETERMINED BY PLUMBING CONTRACTOR

OPTIONAL WINDOW | 2X4 FRAME WALL | 2X6 FRAME WALL | BALLOON FRAME WALL PER STRUCTURAL

Acknowledgement of Plans Submittal ONLY!

Maria Date 2/8/18

Rhonda Date

CENTURY COMMUNITIES

MODEL: BRIDGEPORT - Hollybrook 'C'
PLAN NUMBER: 7020
RELEASE DATE: 1.12.18
DRAWING TITLE: FIRST FLOOR PLAN
SHEET NO: A3.1C

Hollybrook-C4

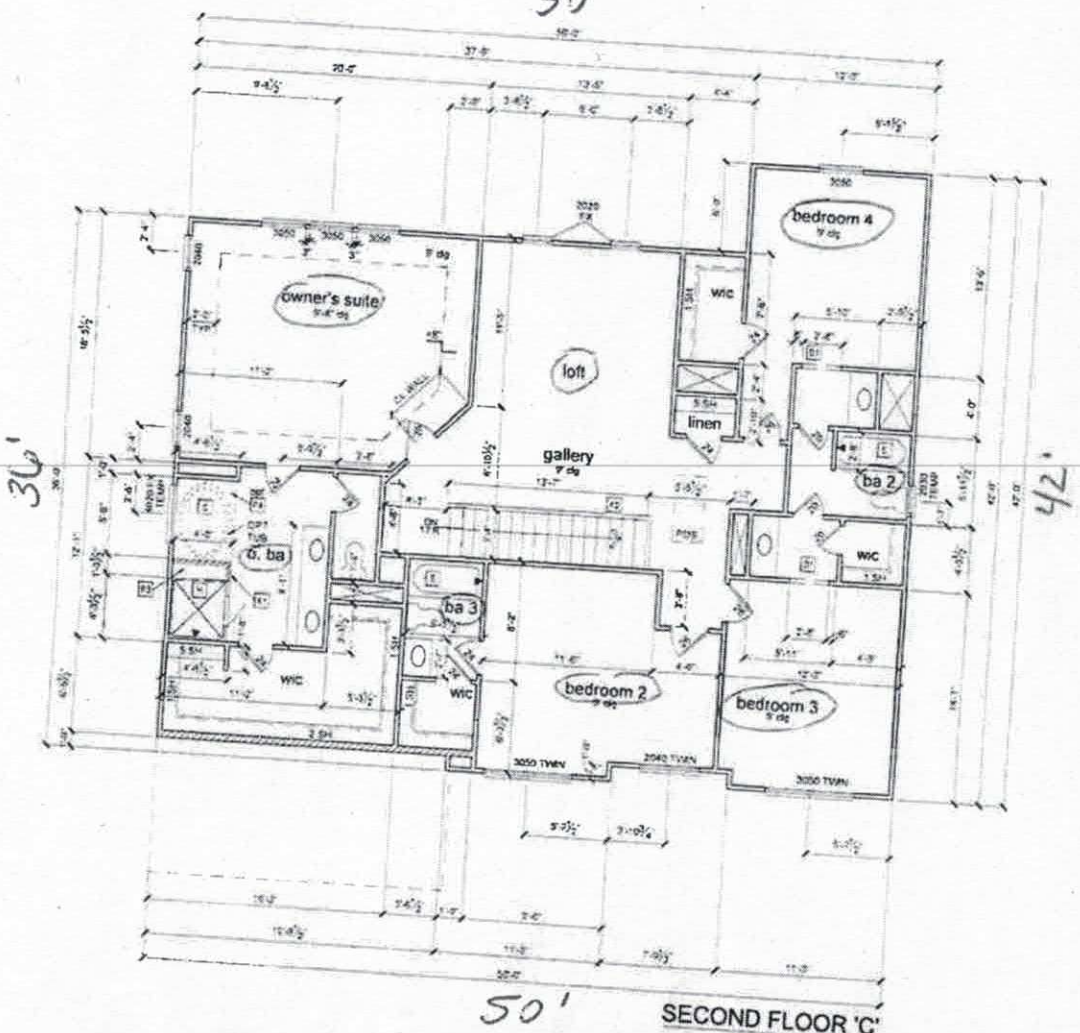
A1 OVEN VENTED OR DOUBLE OVEN (OPTIONAL OR INCLUDED PER COMMUNITY SPECS)	P2 18" HIGH SLOPED BENCH SEAT W TILE FINISH SEE DETAIL PER SHEET CD-4
A2 GARAGE CEILING - 5/8" TYPE X DRYWALL, VERTICAL SURFACE WALLS - 1/2" DRYWALL	P4 27" HIGH TUB DECK PLATFORM DETAILS PER SHEET CD-4
A3 ATTIC ACCESS CONSTRUCTED WITH 5/8" TYPE X DRYWALL AND INSULATION FROM FRAME ACCESS OPENING	A 34"X48" ENSEMBLE SHOWER PAN WITH TILE WALLS, GLASS ENCLOSURE
A4 COFFERED CEILING PER SHEET CD-2	B 42" X 60" ENSEMBLE TUB - INTEGRAL SKIRT
D1 DRYWALL SOFFIT - 12" DROP FROM CEILING LINE	C 42" X 60" OVAL GARDEN TUB - DROP-IN
D2 DRYWALL SOFFIT - 8" DROP FROM CEILING LINE	30"X60" TUB PER SPECS
D3 8" TALL DRYWALL OPENING, WIDTH PER PLAN	SHOWER TILE FLOOR / WALLS, GLASS ENCLOSURE
D4 8" TALL CASED OPENING, WIDTH PER PLAN	SHOWER TILE FLOOR / WALLS, TILE WALL TO CEILING AND 42" ALL SIDES OF WINDOWS
D5 6'-10" TALL CASED OPENING, WIDTH PER PLAN	48"X48" SHOWER PAN WITH TILE WALLS, GLASS ENCLOSURE
K1 36" KNEE WALL WITH TILE CAP	S1 BOX STAIR WITH 36" KNEE WALL & 1X CAP
K2 36" KNEE WALL WITH 1x CAP	S2 BOX STAIR WITH OPEN RAIL
K3 48" KNEE WALL WITH 1X CAP	S3 EXPOSED TREAD WITH TAN
K4 54 1/2" KNEE WALL	S4 OPEN RAIL PAINTED/PRIMA RE NEWEL AS REQD PER CODE
P1 OPT LAUNDRY SINK	
P3 32" 2PM CURB WITH TILE TOP AND MARBLE CAP	

NOTES & LEGENDS

1. REFER TO ENGINEERING STRUCTURAL DRAWINGS S1-S6 FOR BEARING WALL LOCATIONS AND FOR ALL BEAM & HEADER SIZES AND BEARING WALL LOCATIONS
2. EXTERIOR & LOAD BEARING WALLS SHALL BE 16" O.C. WITH DOUBLE TOP PLATE U.N.O. INTERIOR NON-BEARING WALLS SHALL BE 24" O.C. WITH DOUBLE TOP PLATE U.N.O.
3. INTERIOR NON-BEARING DOOR & WINDOW HEADERS SHALL BE (1) 2x4 ON (1) 2x6 WHERE OPPOSING @ 2'-0" O.C. TO MATCH WALL WIDTH UNLESS NOTED OTHERWISE.
4. (2) HOSE BIBS SHALL BE INSTALLED LOCATION TO BE DETERMINED BY PLUMBING CONTRACTOR

OPTIONAL WINDOW | 2x4 FRAME WALL | 2x6 FRAME WALL | BALLOON FRAME WALL WHERE APPLICABLE

50'



50'

SECOND FLOOR 'C'

1/8" = 1'-0" @ 11x17

Acknowledgement of Plans Submittal ONLY!

Maria Dobson 12/18/18 Date

Rhonda Bullard Date

MODEL: BRIDGEPORT - Hollybrook 'C'

PLAN NUMBER: 7020

RELEASE DATE: 1.12.18

DRAWING TITLE: SECOND FLOOR PLAN

SHEET NO: A3.2C

CENTURY COMMUNITIES

Iredell County
ZONING PERMIT

227 South Center St. PO Box 788 Statesville, NC 28687 Phone 704-878-3118

Call Sanitarian between 8 a.m. & 9 a.m. Statesville 704-878-5305 Mooresville 704-664-5281

Permit #: 149085ZO
Proposed Use: Single Family
Location of Property: 000 Avensong Ln. MOORESVILLE NC 28115
Parcel #: 4676956328.024
Lot #: 24 Size: 1.034
Applicant: Wastewater Solutions & Design
Address: 4711 Rocking Horse Dr.
Maiden NC 28650
Phone: 980-429-1580
Property Recorded: No Site Plan Reviewed:

Subdivision: Hollybrook
Township: 0300 Coddle Creek Outside
Zoning: RA
Flood Plain: No Watershed: WSII BA
Owner: David & Betty McKay
Address: 505 Teeter Rd.
MOORESVILLE, NC 28115
Phone:
Community Water: No Community Sewer:

If permitted the following minimum requirements must be met, unless Health Department requires more land area, or other qualifications are indicated in the comments.

Min. Lot Area:
Min. Lot Width: 100
Min. Number Parking Spaces:
Min. Front Yard: 35 ft
Min: Rear Yard: 35 ft
Min. Left Side Yard: 15 ft
Min: Right Side Yard: 15 ft
Max. Built Upon Area:

Comments:

SFD - HOLD BLDG PERMIT UNTIL PLAT IS RECORDED

RECEIVED
MAY 12 2008
By

Directions:

SE on Coddle Creek, lft on Williford, rt on Linwood, lft on Teeter, rt on Rain Shadow, lft on Avensong, lot at end in cul de sac

FEES

Zoning Permit/Inspection Fee	☑	$45.00
Site Plan Review Fee	☐	$0.00
Environmental Health New System	☑	$275.00
Environmental Health Existing System	☐	$0.00
Total Fees:		$320.00

I certify that all statements made in this application and any attached documents are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that false information may be grounds for rejection of this application. Authorized Health Department and Planning & Enforcement Representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

Applicant:_____ Date: _____

A non-refundable fee of $45.00 is charged on all permit applications.

PAULA WOODY

Printed: 3/14/2008