ICHD - ENVIRONMENTAL HEALTH DIVISION

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

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

PERMIT # 3106608

PIN # 4677 -69 -5069.

APPLICANT/OWNER: Joe Buckley

APPLICANT ADDRESS: 148 Willowbrook Drive Mooresville NC

SITE ADDRESS: 162 Sills Creek Lane Mvl NC

PHONE: 704-796-7401 ALT. PHONE

SITE DIRECTIONS: 150 East out of Mooresville @ Sills Creek Lane at End

SAP CONTROLLED: ☑ YES ☐ NO

SUBDIVISION: Sills Creek Plantation

SECTION: — LOT # 10 LOT AREA: 2.113 Acres

DESIGN FLOW: 480 L.T.A.R.: .275

Septic Tank	1000 (gal)	STB	760	Date	11-30-20	☑ New System	☐ Repair ☐ Expansion
Pump Tank	1000 (gal)	PT	363	Date	3-1-21	System Type: I II III (IV) V VI	
Pump Make		Model		Serial #		System Description:	LP-Panel Bloc -50% Reduction.
# Nitrification Fields	1	# Lines	5	Linear Ft	291	Repair System Description:	LP-Panel Bloc 50% Reduction
Trench Width	24	Trench Bottom Depth	36 max	Gravel Depth	—	Maintenance Agreement Required:	☑ YES ☐ NO
							☐ GRAVITY ☑ PRESSURE

☑ Residence ☐ Business ☐ Other ☐ Slab ☑ Crawl Space ☐ Basement w/ plumbing ☐ Basement w/o plumbing

No. Bedrooms 4 No. Persons 8 No. Employees

Water Supply: ☑ Private ☐ Public ☐ Community

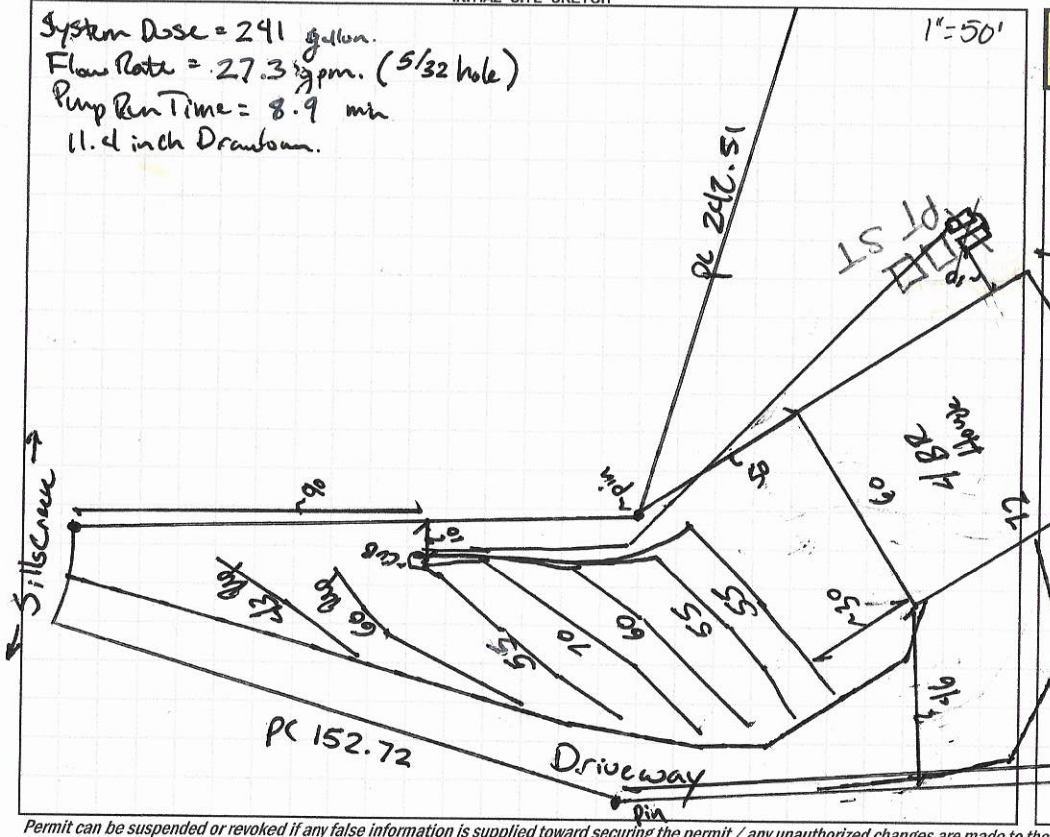
Comments / Conditions: Install on the Contour of the land and utilities ELVB. Do not Drive, Park, Pave, Gravel or Use, utilizing Inground Area

16ft from ST to house

INITIAL SITE SKETCH

System Dose = 241 gallon.
Flow Rate = 27.3 gpm. (5/32 hole)
Pump Run Time = 8.9 min
11.4 inch Drawdown.

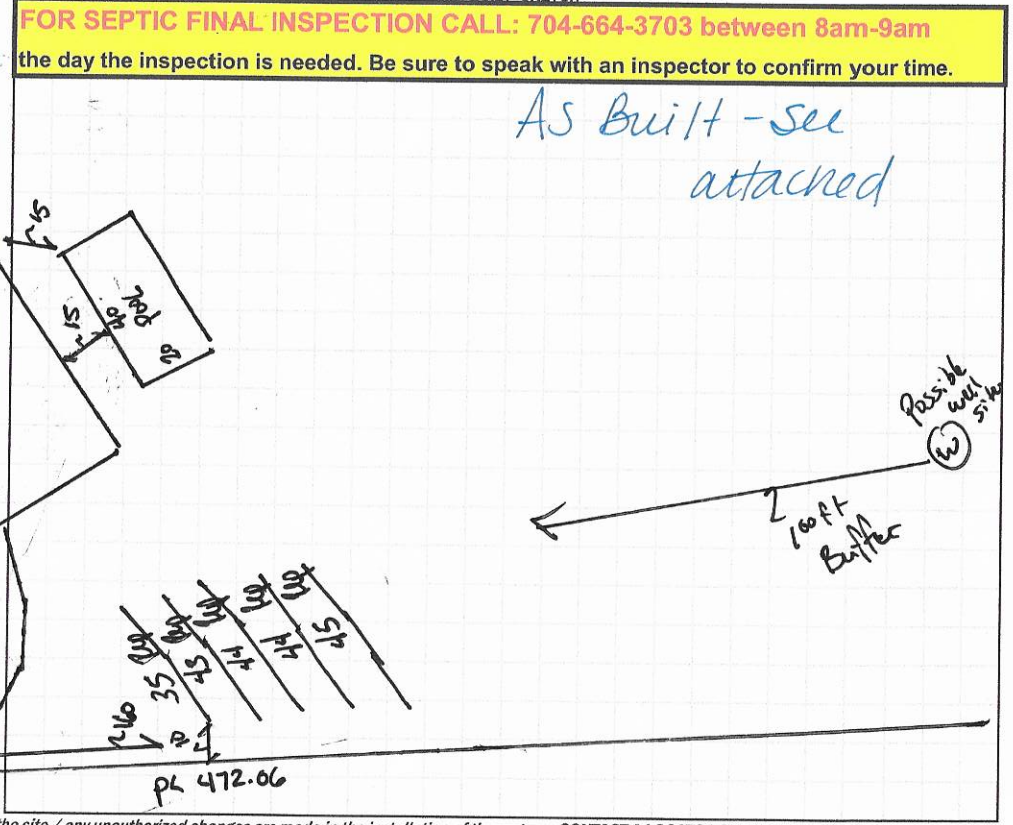
1"=50'



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.

As Built - see attached



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: Lakeita Davis Date: 9-23-20 Installed by: Specialty Septic

IMPROVEMENT PERMIT by: Benjamin D. Beam Date: 1/23/2020 OPERATION PERMIT by: D. Mieberg Date: 6/29/21

AUTHORIZATION TO CONSTRUCT by: Benjamin D. Beam Date: 9/28/2020 Existing System Inspected by: Date:

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

ICHD - ENVIRONMENTAL HEALTH DIVISION

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

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

PERMIT # 310608

PIN # 4677 -69 -5064.

APPLICANT/OWNER: Joe Buckley

APPLICANT ADDRESS: 148 Willowbrook Drive Mooresville NC

SITE ADDRESS: 162 Sills Creek Lane Mvl NC

PHONE: 704-796-7401 ALT. PHONE

SITE DIRECTIONS: 150 East out of Mooresville @ Sills Creek Lane at End

SAP CONTROLLED: ☑ YES ☐ NO

SUBDIVISION: Sills Creek Plantation SECTION: — LOT # 10 LOT AREA: 2.113 Acres DESIGN FLOW: 480 L.T.A.R.: .275

Septic Tank	1000 (gal)	STB	760	Date	11-30-20
Pump Tank	1000 (gal)	PT	3603	Date	3-1-21
Pump Make		Model		Serial #	
# Nitrification Fields	1	# Lines	5	Linear Ft:	291
Trench Width	24	Trench Bottom Depth	36 max	Gravel Depth	—

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

System Description: LP-Panel Bloce -50% Reduction.

Repair System Description: LP-Panel Bloce 50% Reduction

Maintenance Agreement Required: ☑ YES ☐ NO

☐ GRAVITY ☑ PRESSURE

☑ Residence No. Bedrooms 4 — Water Supply

☐ Business No. Persons 8 — ☑ Private

☐ Other No. Employees — ☐ Public

☐ Slab ☑ Crawl Space — ☐ Community

☐ Basement w/ plumbing ☐ Basement w/o plumbing

Comments / Conditions: Install on the Contour of the land and utilize EVB. Do not Drive, Park, Pave, Grade of Bug utilities in Installed Area

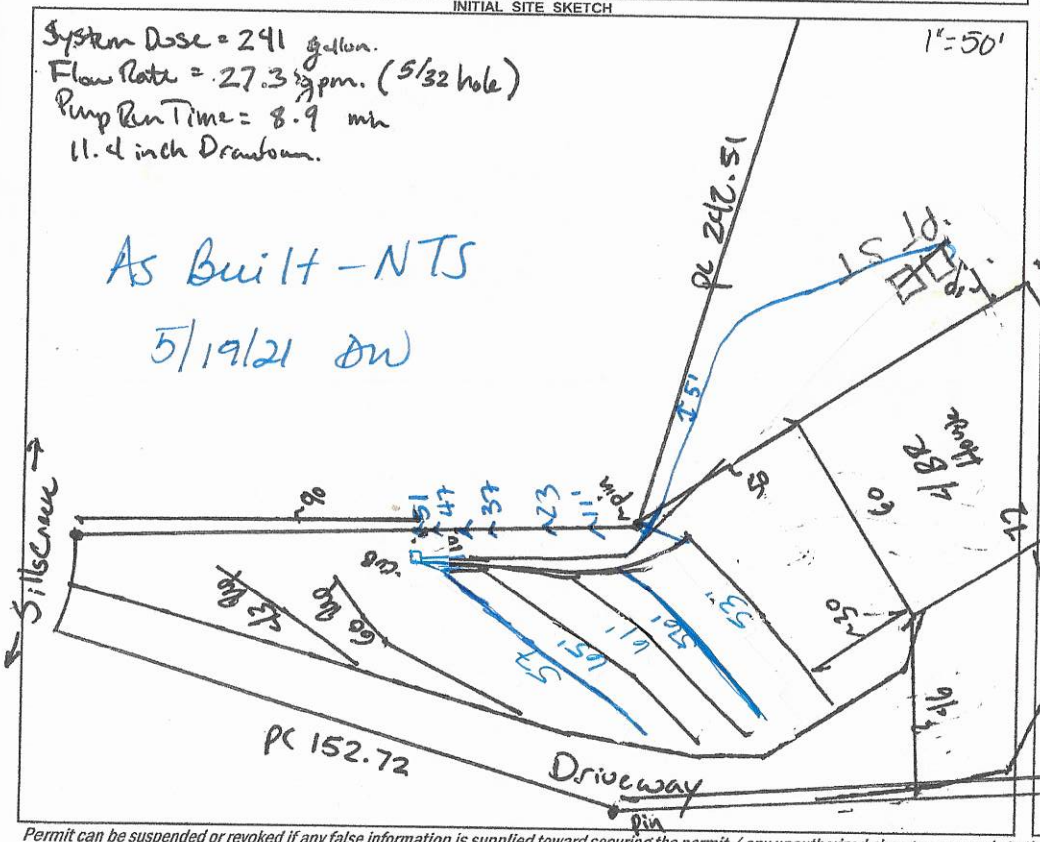
160ft from ST to house

INITIAL SITE SKETCH

System Dose = 241 gallon.
Flow Rate = 27.3 gpm. (5/32 hole)
Pump Run Time = 8.9 min
11.4 inch Drawdown.

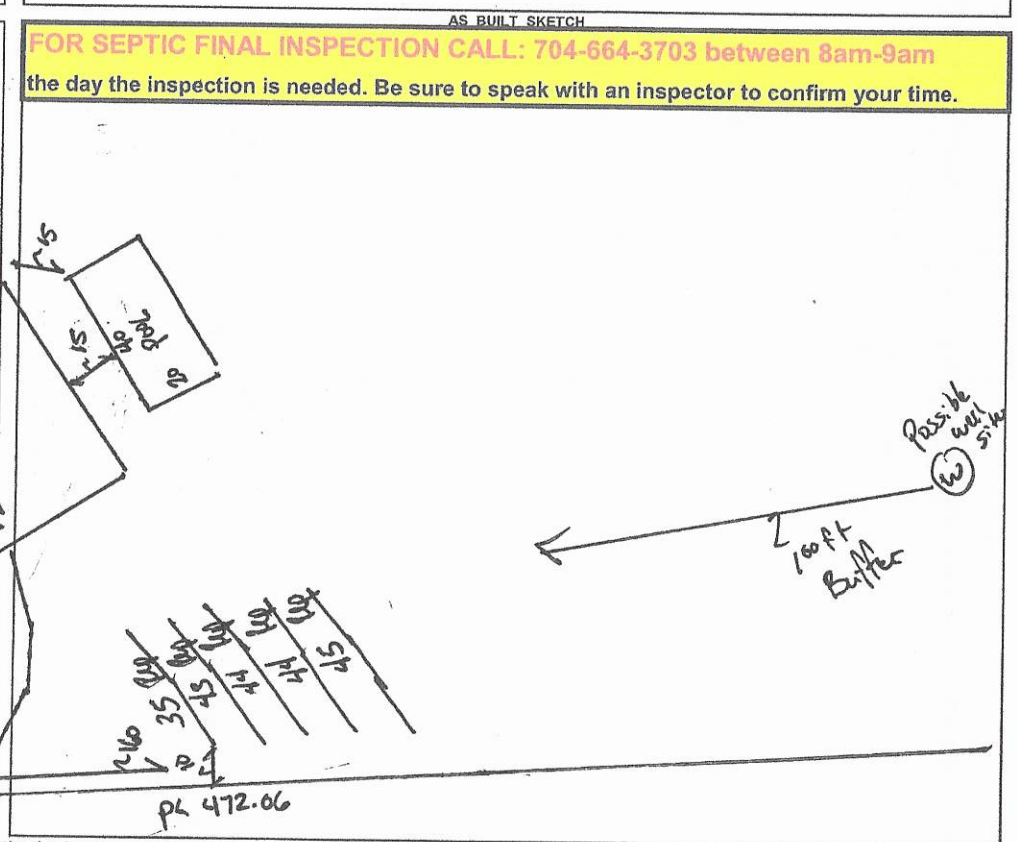
As Built - NTS
5/19/21 DW

1"=50'



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.



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: Dakota Davis Date: 9-23-20 Installed by: Specialty Septic

IMPROVEMENT PERMIT by: Benjamin A. Bass Date: 9/23/2020 OPERATION PERMIT by: Daniel Griberg Date: 6/29/21

AUTHORIZATION TO CONSTRUCT by: Benjamin A. Bass Date: 9/28/2020 Existing System Inspected by: Date:

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

	Date	Initials
Drain Lines Checked	5/19/21	DW
Tanks Checked	4/16/21	
Pressure Manifold or Valve Box Checked	5/19/21	DW
Pressure Head Set	6/25/21	DW
Electrical Checked	6/25/21	DW
Floats Set	6/25/21	DW
Alarm Checked	6/25/21	DW
Maintenance Contract Y / N	6/29/21	DW

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

Sheet 1 of 1
PROPERTY ID #: 4677695064
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM
(Complete all fields in full)

OWNER: Jr Buckley — Lot 10 Sills Creek
ADDRESS: 148 Willow Barn One Mtn — APPLICATION DATE 9/16/
PROPOSED FACILITY: 4BR Home — PROPOSED DESIGN FLOW (.1949): 480 — DATE EVALUATED: 9/22
LOCATION OF SITE: 162 Sills Creek Ln Mtn — PROPERTY SIZE: 2+Ac
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other — PROPERTY RECORDED: Yes
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	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	Ridge 10%	0-23	C	SS Sp FR	2.5Y 4/6	52	—	L. Mn Mottles	PS .30
		23-52	CL	SS Sp FR					
		52-65	LSa M	NS NP VFR					
2	Side 10%	0-21	C	SS Sp	.25Y 4/6	42	—	L. Mn	PS .30 +
		21-42	CL	SS Sp					
		42-67	LSa M	NS NP VFR					
3	Side 8%	0-21	C	SS Sp FR	" "	30	—	Hy Lith	PS .30 +
		21-30	CL	SS Sp FR					
		30-64	LSa M	NS NP VFR					
4	Side 6%	0-25	C STXL	SS Sp FR SEX	2.5Y 4/6	58	—	Mica / Lith Mottles	PS .30
		25-58	CL WSBK	SS Sp FR					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	Z 91	291
System Type(s)	IV 50%	II 50%
Site LTAR	.30	.30

OTHER FACTORS (.1946): —
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Bottoms / Pennington (LSS)
OTHER(S) PRESENT:

COMMENTS:

RECEIVED SEP 16 2020

AP-310608
$500.00

CALL PAUL PENNINGER FOR SITE VISIT 704.996.6330

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Application For: (X) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) 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 (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: Joe Buckley Address: 148 Willowbrook Drive, Mooresville Zip: 28115
Applicant Email: Get2Buck@hotmail.com Phone: 704-796-7401 Alt. Phone:
Owner Name: SCP MOORESVILLE LLC Address: 114 MORLAKE DR STE 103 MOORESVILLE Zip: 28117
Owner Email: nick@landandluxury.com Phone: 704-658-1121 Alt. Phone:

Property Information:

Street Address: 162 Sills Creek Lane
Subdivision Name: Sills Creek Plantation Section/Phase: Lot Number: 10
Driving Directions: 150 ~~West~~ EAST out of Mooresville, L Sills Creek Lane, at end

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: 8
(X) Swimming Pool
( ) Other Addition/Structure:
Non-Residential Site Development: Type of Business:
Square Footage of Building: Max. Number of Employees: Max. Number of Seats/Beds/Other:

CHECK FOUNDATION TYPE

(X) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

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:
(X) 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 (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: 9-3-20
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, SCP MOORESVILLE LLC, am the legal owner(s) of the property located at Sills Creek Sub. Lot 1,2, 7-11, 14-17; 1443 Oakridge Farm Rd, identified as

4677789525; 4677788808; 4677792105; 4677689139; 4677695241; 4677695064; 4677688858;4677783692;4677784487;4677785358;4677787362;4677786135

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

I do hereby authorize (print legal representative/company name) Paul Penninger/Penninger Soil Consulting M. Wetter/Nest Homes, 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
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

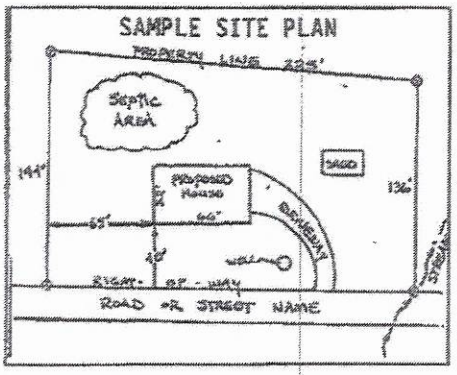
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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**
- (X) **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

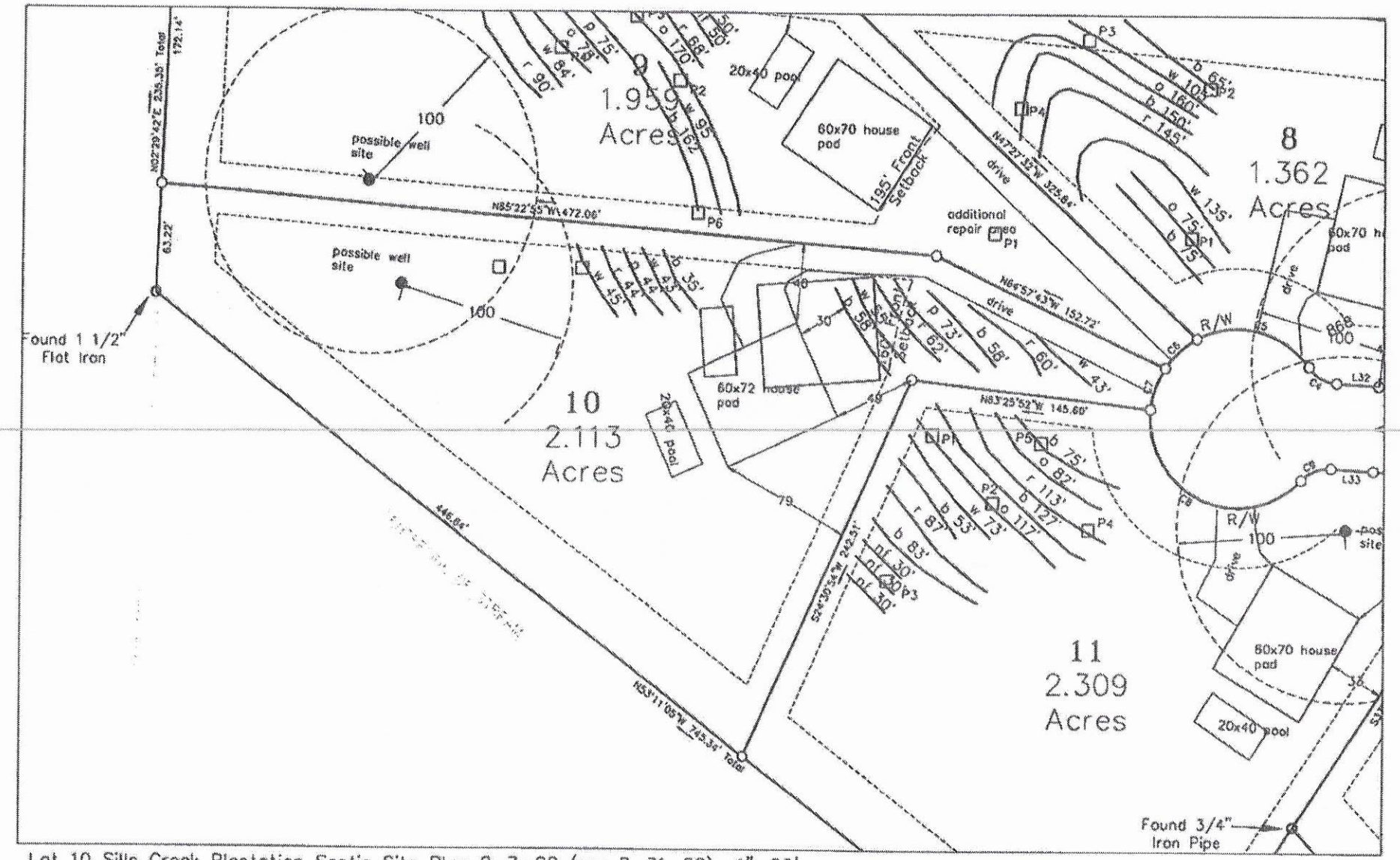
USE THIS SPACE TO DRAW YOUR SITE PLAN

Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site

See attached site plan.

Signature: _____ 9-3-20

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

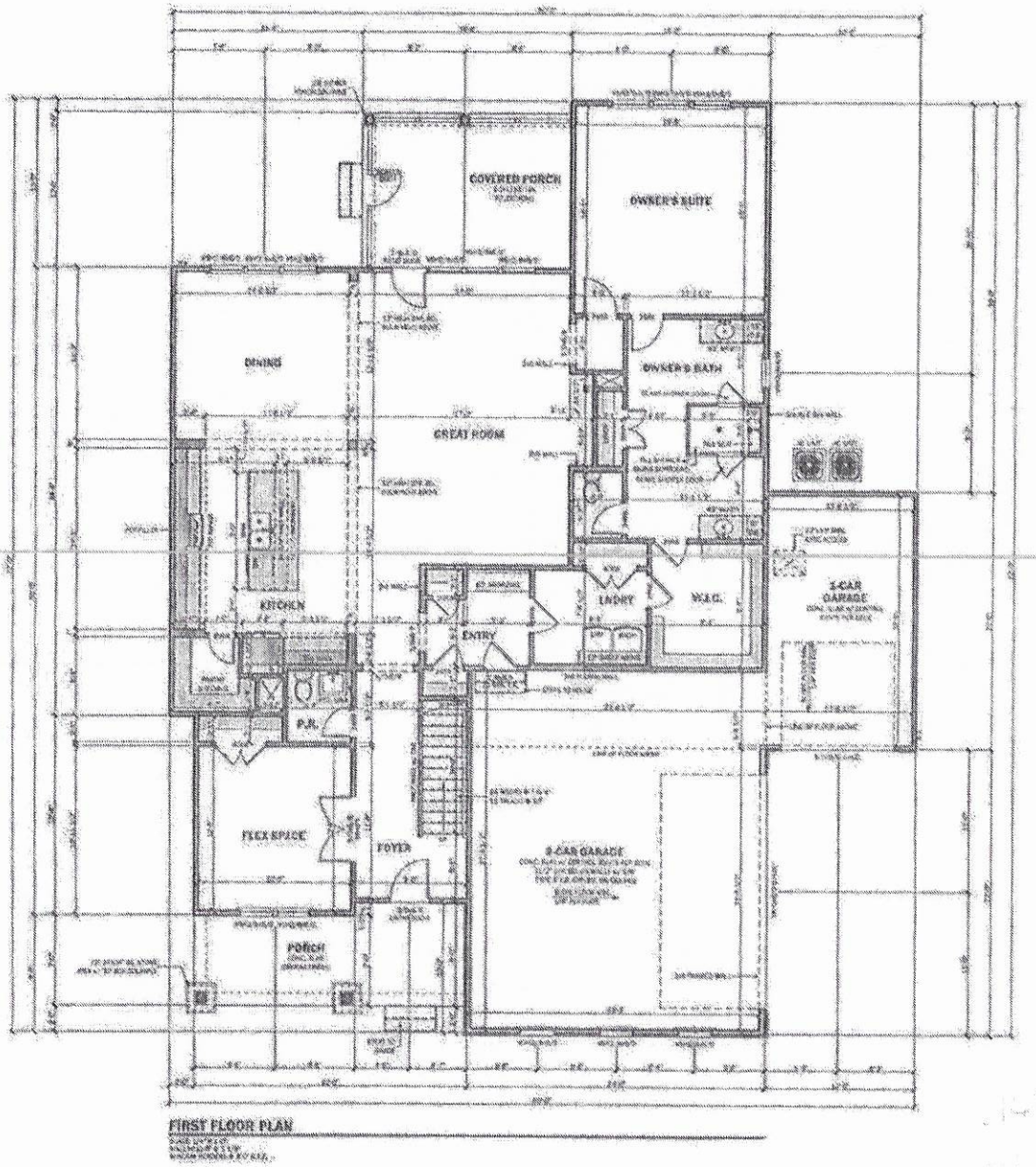


Lot 10 Sills Creek Plantation Septic Site Plan 8-7-20 (rev 8-31-20) 1"=50'

Base site plan from Patterson Land Surveying. Lot and house/pool in red staked by Patterson Land Surveying

Septic system and well must be approved and permitted by ICHD.

Approx. location of proposed septic lines sketched by Penninger Soil Consulting. Refer to flags in field.



FIRST FLOOR PLAN

Acknowledgement Of
Plans Submittal ONLY

Date

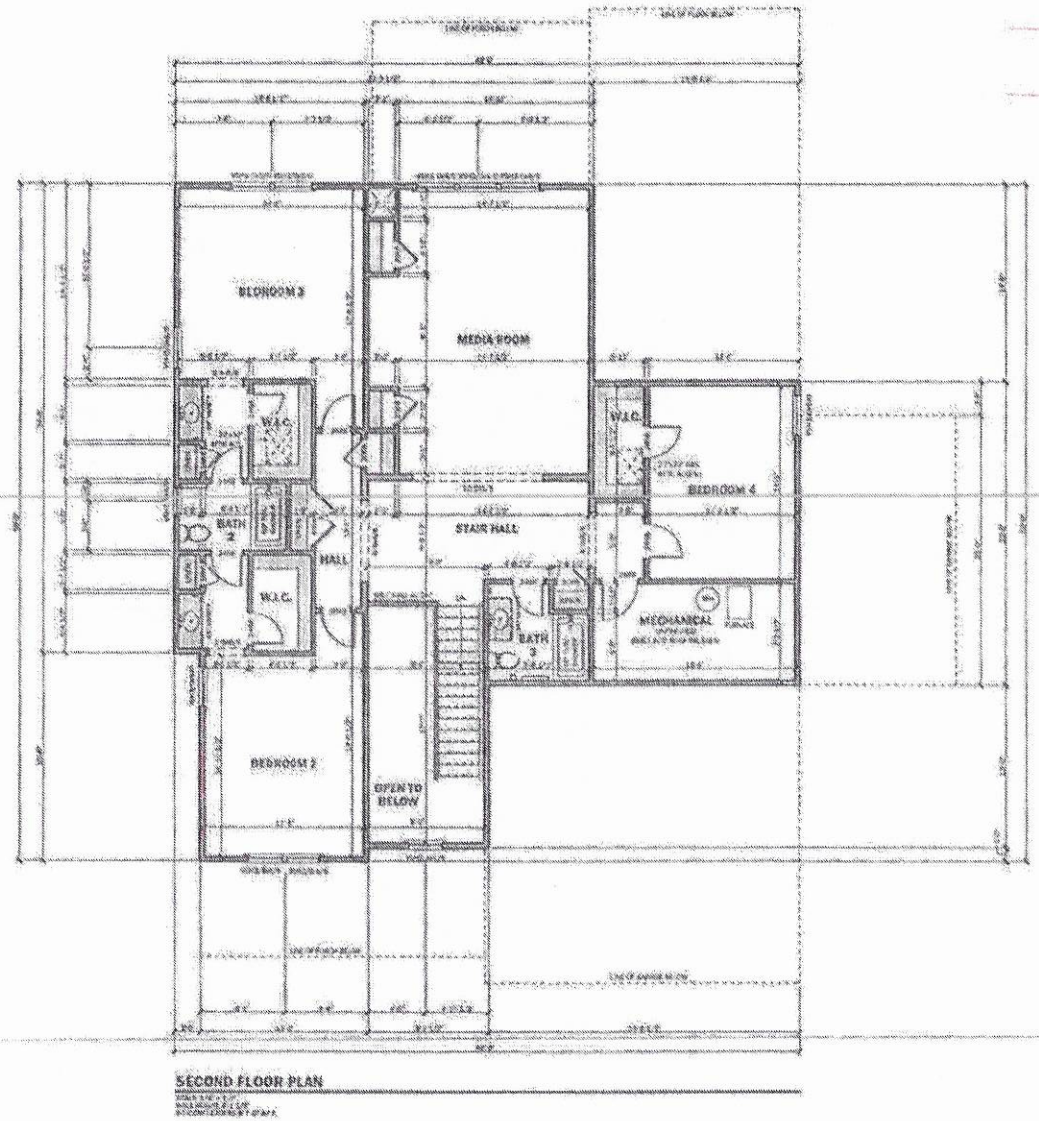
Date

A3.0

Acknowledgement Of
Plans Submittal ONLY!

Date

Date



SECOND FLOOR PLAN

A4.0

IREDELL COUNTY

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

APPLICATION NUMBER
310608
Issue Date: 09/03/2020

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4677695064.000	162 SILLS CREEK LN	Iredell County

Owner Information	Applicant Information
Name: SCP MOORESVILLE LLC	Name: NEST HOMES LLC
Address: 114 MORLAKE DR STE 103	Address: PO BOX 3965
MOORESVILLE, NC 28117	MOORESVILLE, NC 28117
Phone:	Phone: (704)808-1064

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
2.113	35	35	15	15	WSII-BOW Back Creek	NO

Remarks
SFD - NEEDS ZD and signed floorplans

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.

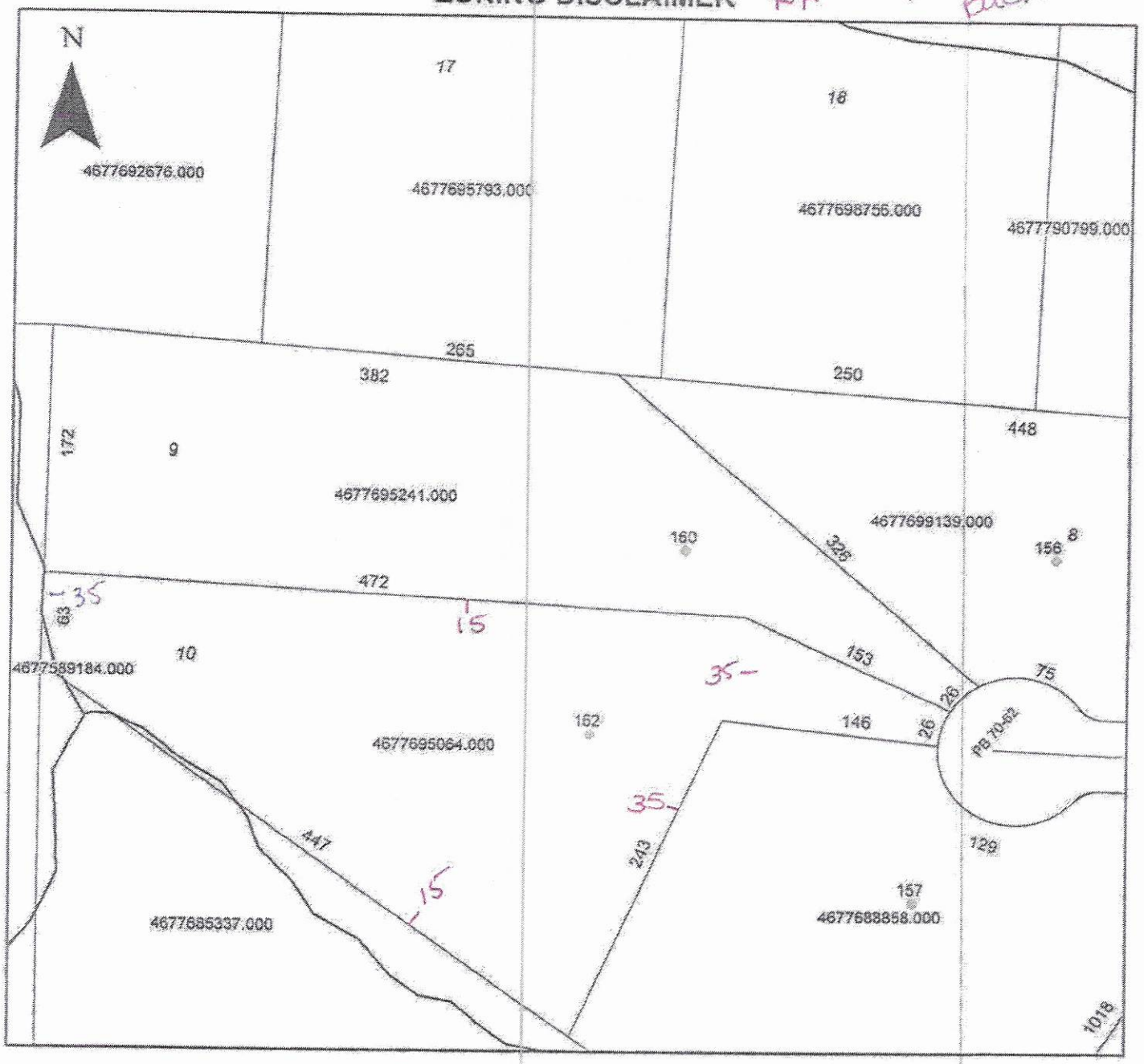
Signature of Owner/Contractor

Date: 09/03/2020

Permit Number	310608	TOTAL FEES:	$77.25

ZONING DISCLAIMER

2.113 RA Bow-Back



Property Address 162 Sills Creek

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. Applicant further acknowledges that the 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