ICHD–ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP 307510

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

PIN # 4678084357.000

APPLICANT/OWNER: Collin Homes Inc | APPLICANT ADDRESS: 9943 Beatties Ford Rd Huntersville, NC 28078

SITE ADDRESS: 1299 Mt Ulla Hwy Mooresville NC 28115 | PHONE: 704 728-5946 | ALT. PHONE

SITE DIRECTIONS: Hwy 801 N on left just before Wallace Grant Drive

SUBDIVISION: BA Troutman | SECTION: — | LOT # 2B | LOT AREA: 1.0 Ac.

SAP CONTROLLED: ☐ YES ☒ NO

DESIGN FLOW: 360gpd | L.T.A.R.: .3

Septic Tank	1000 (gal)	STB 766	Date 8-28-2020	☒ New System ☐ Repair ☐ Expansion	System Type: I, II, III, IV, V, VI
Pump Tank	1000 (gal)	PT 363	Date 8-29-2020	System Description:	Pump-PM-25% Reduction
Pump Make	Zoeller	Model	Serial #	Repair System Description:	Same
# Nitrification Fields	1	# Lines 3	Linear Ft. 300	Maintenance Agreement Required:	☐ YES ☒ NO
Trench Width	36"	Trench Bottom Depth (Low side) MAX	22"	Gravel Depth	N/A ☐ GRAVITY ☒ PRESSURE

☒ Residence ☐ Business ☐ Other ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing

No. Bedrooms 3 | No. Persons 6 | No. Employees

Water Supply: ☒ Private ☐ Public ☐ Community

☐ Basement w/o plumbing

Comments / Conditions:

House Box to wider but can not make any closer to Septic

INITIAL SITE SKETCH

See attached, approved Septic Plan by Soil & Forestry Services of the Carolinas, PA (5/14/2020)

AS BUILT SKETCH

	Date	Initials
Drain Lines Checked	10-28-20	
Tanks Checked	10-28-20	
Pressure Manifold or Valve Box Checked	2-1-21	
Pressure Head Set	2-1-21	
Electrical Checked	2-1-21	
Floats Set	2-1-21	
Alarm Checked	2-1-21	
Maintenance Contract Y (N)	Not Required	
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**

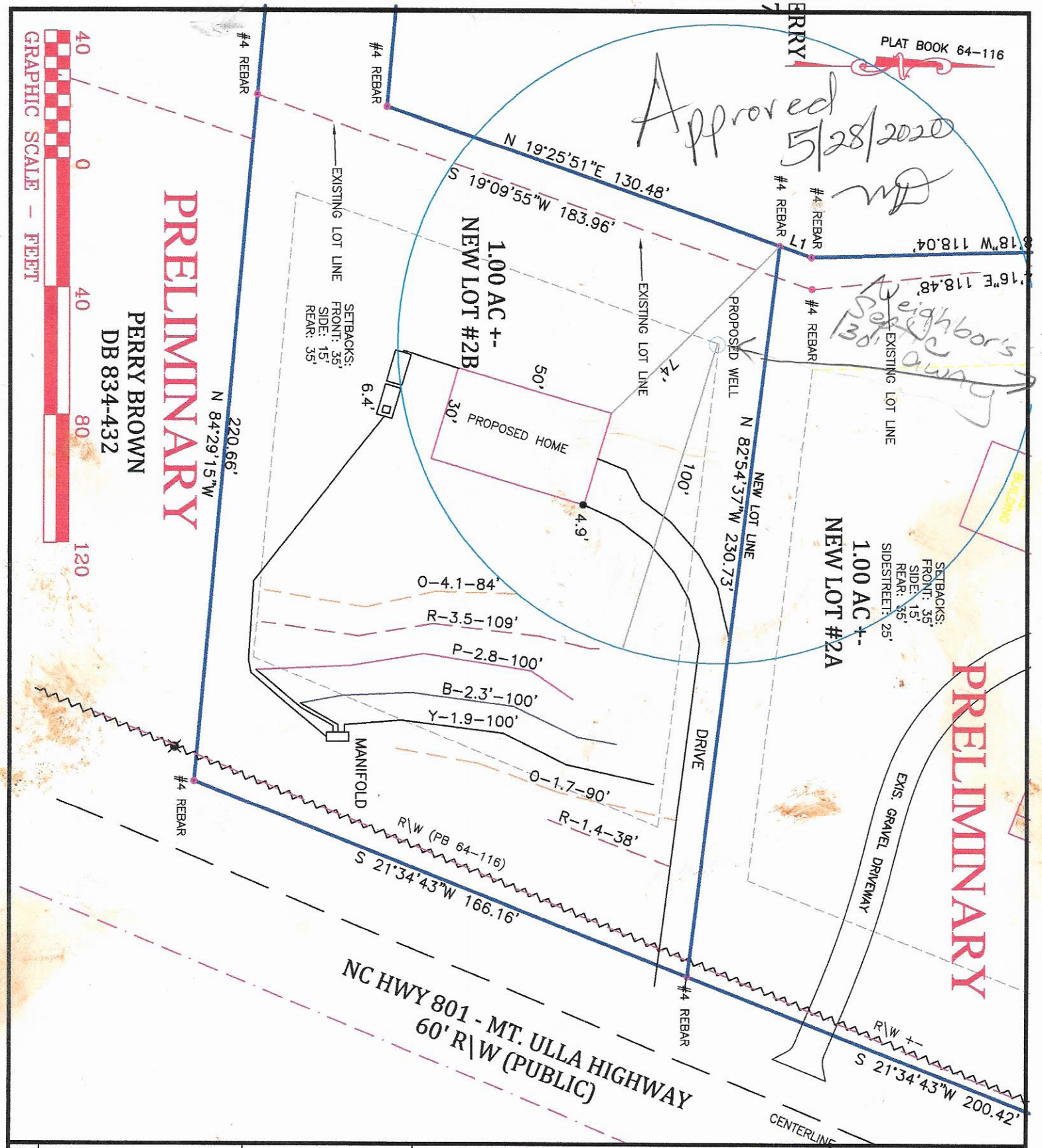
☐ IMPROVEMENT PERMIT *with plat valid without expiration.* ☒ IMPROVEMENT PERMIT *with site plan valid for 60 mos.* ☒ AUTHORIZATION TO CONSTRUCT *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Acceptance of Permit Valid Date: 5-29-2020 Installed by: Ground Breakers

IMPROVEMENT PERMIT by: Date: 5/28/2020 OPERATION PERMIT by: Date: 2-1-2021

AUTHORIZATION TO CONSTRUCT by: Date: 9/25/2020 Existing System Inspected by: Date:

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 inspection time.



SHEET 1 OF 1	SHEET TITLE: SEPTIC SYSTEM LAYOUT SKETCH MAP	PROJECT NAME: COLLIN HOMES, INC. MT ULLA HWY IREDELL COUNTY, NORTH CAROLINA MAY 2020	Soil & Forestry Services of the Carolinas, PA PO Box 832–Mooresville, NC 28115 www.soilandforestryservices.com	PROJECT NO. #20-1036 PROJECT MGR. WO DRAWN BY WO FIELD WORK WO SCALE 1" = 40'

Three (3) Bedroom Accepted Septic System Design using Pressure Manifold Distribution for 1299 Mt Ulla Highway

Contents: **Page**

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

Design Information

Design Specifications---------- 2-3

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Environmental Health Requirements---------- 15

Agent Authorization---------- 16

Owner: Collin Homes, Inc.
9943 Beatties Ford Road Huntersville, NC
704 728-5946
May 20, 2020
Project 20-1036
Design By: Soil & Forestry Services of the Carolinas, 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 DHH, and certification supplied by the manufacturer.
- 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
- 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.
- Where required by the county health department, post installation inspections by the designer must be scheduled 5 week days in advance.
- 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.
- Elevations at pinflag locations should be checked by the installer prior to beginning
- Pump tank 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 specified as accepted type using p manifold distribution**
- **Repair specified as accepted type using p manifold distribution**
- **System trench depth specified at 22"**
- **System trenches installed on 9' minimum; 3' wide trenches**
- **Iredell County has approval to move tanks or distribution devices**

Mt Ulla Highway Lot 2a
Manifold Design

DESIGN FLOW:	360	gpd
SOIL APPLICATION RATE:	0.3 gpd/ft.^{2}	
TOTAL AREA TRENCH BOTTOM:	900	sf
TOTAL LATERAL LENGTH:	300	lf
NUMBER OF FIELDS:	1	
LATERAL LENGTH REQUIRED PER FIELD:	300	lf
SUPPLY LINE LENGTH:	125	lf
TOTAL DYNAMIC HEAD:	11.37	gpm
DOSING VOLUME:	137.13	gal
PUMP TANK DRAW DOWN*:	6.5	in
SEPTIC TANK SIZE:	1000	
PUMP TANK SIZE:	1000	

Approved
5/28/20
MP

**Pump tank draw down based on a volume basis of 21 gallons per inch. Draw down may vary among pump tank manufacturers.*

PRESSURE MANIFOLD DOSED SYSTEM
FOR WASTEWATER TREATMENT

Applicant:	Collin Homes, Inc.
Phone:	704 728.5946
County:	Iredell
Location:	1299 Mt Ulla Highway (Lot 2a)

Source of Wastewater Flow:	3 Bedroom Single Family Residence
Estimated Daily Wastewater Production:	360 gpd
System Flow:	21.33 gpm

Approved
5/28/20
MD

Design Specifications

Drainfield Size:	300 lf
Loading Rate:	0.3 gpd/ft.^{2}
Depth of Gravel in Trench:	n/a
Gravel Size:	n/a
Trench Depth:	22 in
Trench Width:	36 in.
Septic Tank Size:	1000
Pump Tank Size:	1000
Estimated Supply Line Length:	125 lf
Supply Line Diameter:	2 in. SCH 40 PVC
Supply Line Volume:	21.75 gal
Dosing Volume:	137.13 gal

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:	1.19 ft
Elevation Head:	8.00 ft
Total Dynamic Head:	11.37 ft
Threaded Union:	In Tank
Gate Valves:	1 in Tank: 1 @ manifold
Check Valves:	In Tank
Anti-Siphon Hole:	n/a

1299 Mt Ulla Highway (Lot 2a)

Layout for a 3 bedroom home

May-20

LINE #	FLAG COLOR	BS	HI	FS	ELEV	FLAGGED LENGTH	DESIGN LENGTH
TBM			104.9		100.0		
INSTR. 1							
House				4.90	100.0		
Tank				6.40	98.5		
			REPAIR				
1	Red			1.40	103.5	40	40
2	Orange			1.70	103.2	90	90
			SYSTEM				
3	Yellow			1.90	103.0	108	100
4	Blue			2.30	102.6	123	100
5	Pink			2.80	102.1	144	100
			REPAIR				
6	Red			3.50	101.4	88	88
7	Orange			4.10	100.8	92	92

Approved
5/28/2020
MD

	LINE LENGTH	LTAR GPD/FT	SYSTEM TYPE	REDUCTION TYPE	DIST	TRENCH DEPTH
SYSTEM	300	0.300	ACCEPTED	25%	MANIFOLD	22
REPAIR	310	0.300	ACCEPTED	25%	MANIFOLD	22

Notes:

**TBM is assumed to be 100'
**All measures in feet
**Nitrification lines are demonstrated on contour via colored pin flags
**BS and FS indicate rod readings

Mt Ulla Highway Lot 2a

SYSTEM FLOW

DESIGN SPECIFICATIONS

Line #	Color	Elev	Length	Hole Size	Flow/Tap	Line gpd	Line Trench Area	Flow/Line	Line LTAR
3	Y	103	100	SCH 40 1/2	**7.11**	120.00	300	**0.071**	**0.40**
4	B	102.6	100	SCH 40 1/2	**7.11**	120.00	300	**0.071**	**0.40**
5	P	102.1	100	SCH 40 1/2	**7.11**	120.00	300	**0.071**	**0.40**
	total	**feet =**	**300**	**gal/min =**	**21.33**				

Des. Flow	**360**
Pump Run to Dose 360gpd=	**16.88**
soil LTAR	**0.3**
Accepted LTAR	**0.40**
Accepted LTAR + 5%	**0.42**

Approved
5/28/2020

CALCULATIONS

Location Mt Ulla Highway Lot 2a

Project Number 20-1036

Lot No:	2a
No. of Bedrooms	3
Design Flow	360 $^{gal}/_{day}$
LTAR	0.3 $^{gal}/_{ft^2\ day}$
Accepted? (YES OR NO)	Yes
Supply Line Length	125 ft.
Supply Line Volume	21.75 gal.
Required Feet of Line	300 ft.
Amount of Line from Layout	300 ft.
Gallons per Minute	21.33 $^{gal}/_{min}$
Required Septic Tank Capacity	1000 gal.
Minimum Standard Tank Size	1000
Lateral Line Volume	195.9 gal.
Dosing Volume	137.13 gal.

Approved
5/28/2020
MD

FRICTION FACTOR INTERPOLATER
2" SCH 40 PVC

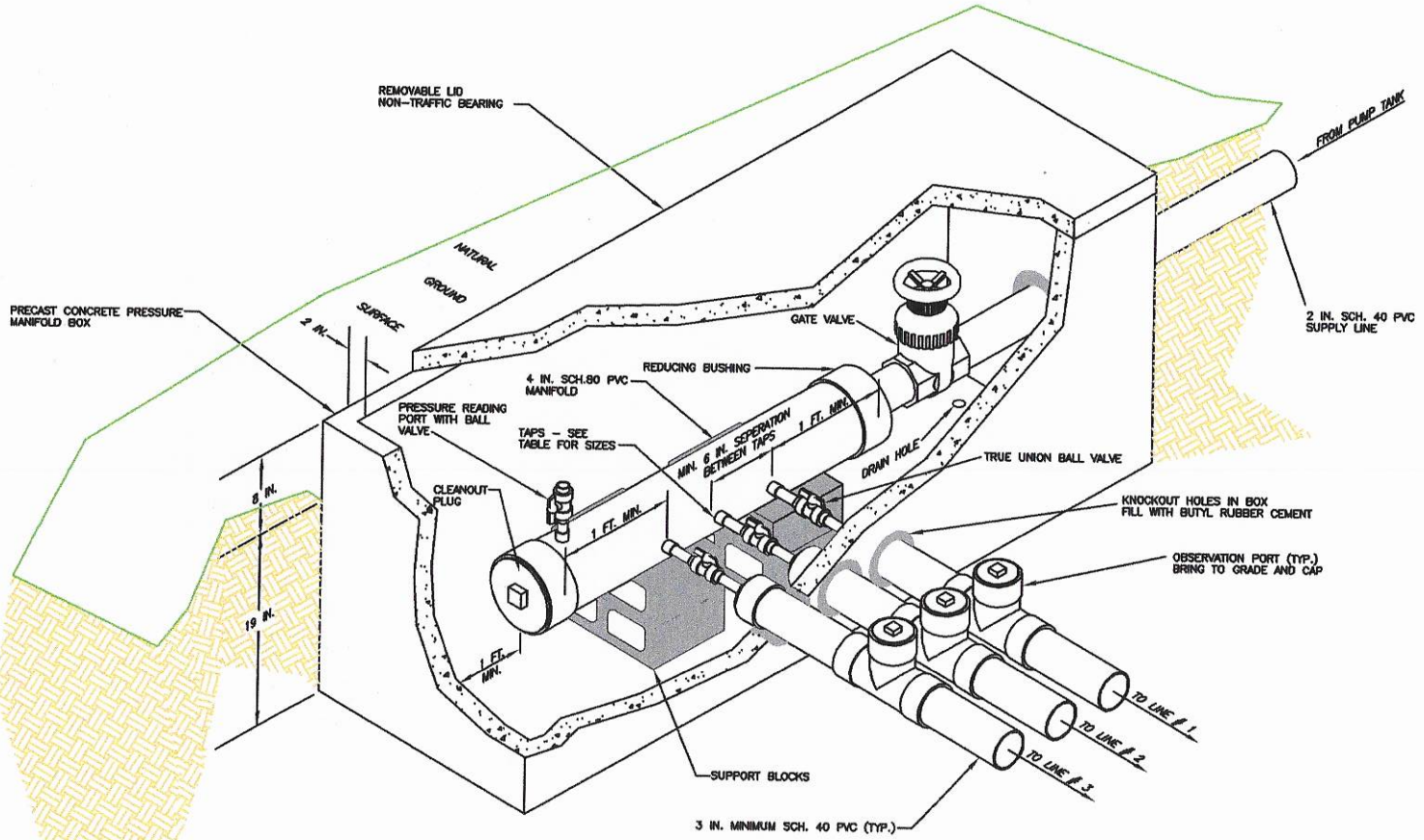
GPM	*f*
20	0.84
21.3	0.95
25	1.27
27.4	1.51
30	1.78
33	2.13
35	2.37
37	2.63
40	3.03
42.7	3.43
45	3.77
46.51	4.01
50	4.58
57.11	5.89
60	6.42

Tank Draw Down	6.5	in.
		Generic Draw Down of 21 gal.per in.
Pump Run Time	6.43	minutes
Elevation Head	8	ft.
Pressure Head	2	ft.
Friction Factor	0.95	ft./100 ft. *(From the interpolater.)*
Friction Head	1.19	ft.
Friction Head +15%	1.365625	
Total Dynamic Head	11.37	ft.

PRESSURE MANIFOLD DETAILS
FOR
1299 MT ULLA HIGHWAY MOORESVILLE

TAP SIZES

LINE No.	TAP SIZE
1	1/2" SCH. 40
2	1/2" SCH. 40
3	1/2' SCH. 40



PROPERTY ID #: 4678180435
COUNTY: Iredell

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

OWNER: Collin Homes, Inc. APPLICATION DATE
ADDRESS: DATE EVALUATED: 4/24/2020
PROPOSED FACILITY: Residence PROPOSED DESIGN FLOW (.1949): 360 PROPERTY SIZE: 1 acre
LOCATION OF SITE: 1299 Mt Ulla Hwy Mooresville PROPERTY RECORDED: in process
WATER SUPPLY: x☐ Private ☐ Public x ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring x☐ Pit ☐ Cut TYPE OF WASTEWATER: x☐ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
1	L / 4%	0-7	B SL WFGr	Fr SS SP	N/A	46	PS		PS .3
		7-13	BR SCL WMS	Fr SS SP					
		13-24	R C WMS	Fr SS SP few Y mot					
		24-46	BR CL	Fr SS SP					
		46-60	VAR SL MASS	VFr NS NP	Water @ 36"				
2	L / 5%	0-3	B SL WFGr	Fr SS SP	N/A	36	PS		PS .3
		3-9	BR SCL WMS	Fr SS SP					
		9-24	R C WMS	Fr SS SP					
		24-36	BR CL WFS	Fr SS SP					
		36-60	VAR SL MASS	VFr NS NP					
3	L / 5%	0-2	B SL WFGr	Fr SS SP	N/A	36	PS		PS .3
		2-26	BR CL WFS	Fr SS SP					
		26-36	BR CL WFS	Fr SS SP C SAP					
		36-72	VAR SL MASS	VFr NS NP					
4	L / 5%	0-3	RB CL WFGr	Fr SS SP	N/A	38	PS		PS .3
		3-22	R C WFS	Fr SS SP					
		22-38	RB CL WFS	Fr SS SP					
		38-72	VAR SL MAS	VFr NS NP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	300	300
System Type(s)	ACCEPTED	ACCEPTED
Site LTAR	.3	.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Overby
OTHER(S) PRESENT: Rollans

COMMENTS:

SOIL/SITE EVALUATION

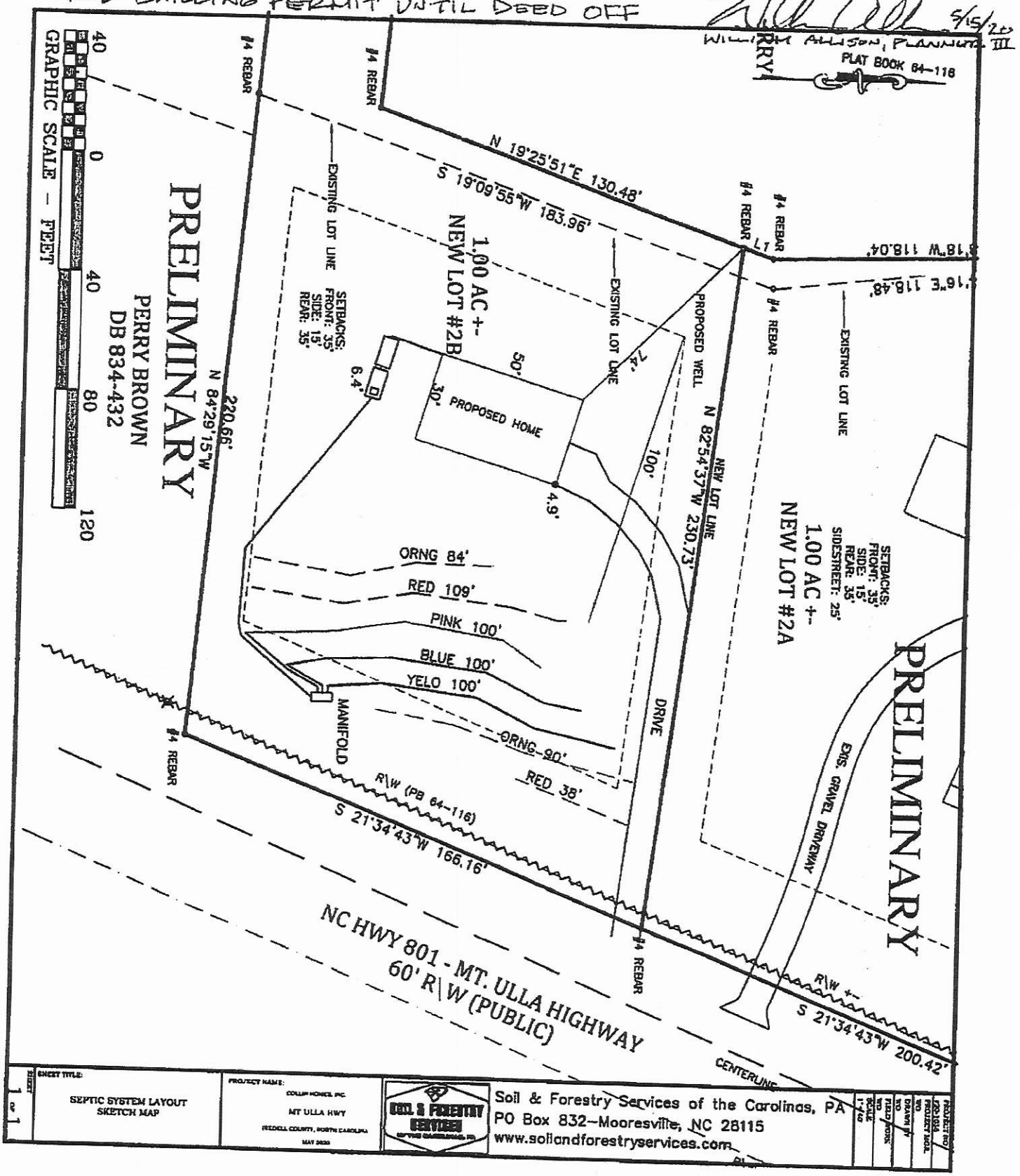
(Continuation Sheet-Complete all field in full)

PROPERTY ID #: 4678180435
DATE OF EVALUATION: 4/24/20
COUNTY: Iredell

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
5	L / 5%	0-3	B SCL WFGr	Fr SS SP	N/A	36	PS		PS .3
		3-14	R C WMS	Fr SS SP					
		14-30	BR CL WFS	Fr SS SP few sap					
		30-36	BR CL WFS	Fr SS SP c sap					
		36-72	VAR SL MASS	VFr NS NP					
6	L / 5%	0-4	B SL WFGr	Fr SS SP	N/A	42	PS		PS .3
		4-26	RB CL WMS	Fr SS SP few sap					
		26-42	RB CL WMA/S	Fr SS SP c sap					
		42-65	VAR SL MASS	VFr NS NP					
			Water @ 35'						

PRELIMINARY APPROVAL
- HOLD BUILDING PERMIT UNTIL DEED OFF

5/15/20
WILLIAM ALLISON, PLANNING III



SHEET 1 of 1	SHEET TITLE: SEPTIC SYSTEM LAYOUT SKETCH MAP	PROJECT NAME: COLLIN HOMES, INC. MT ULLA HWY IREDELL COUNTY, NORTH CAROLINA MAY 2020	SOIL & FORESTRY SERVICES Soil & Forestry Services of the Carolinas, PA PO Box 832—Mooresville, NC 28115 www.soilandforestryservices.com

RECEIVED MAY 1 8 2020

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM Paid $850.00 AP-307510

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: (PRINT CLEARLY)

Applicant Name: COLLIN HOMES, INC Address: 9943 BENTTIES FORD ROAD HVILLE Zip: 28078
Applicant Email: COLLINHOMESINC@YAHOO.COM Phone: (704) 728-5946 Alt. Phone: _____
Owner Name: CROSSROAD PROPERTY SOLUTIONS Address: SAME AS ABOVE Zip: _____
Owner Email: SAME Phone: SAME Alt. Phone: _____

Property Information:

Street Address: 1299 MT ULLA HWY MOORESVILLE
Subdivision Name: BA TRUITMAN Section/Phase: _____ Lot Number: _____
Driving Directions: @ HWY 150 AND 801 GO N. PROPERTY ON LOT JUST BEFORE WALLACES GRANT DRIVE

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

CHECK FOUNDATION TYPE

(X) New Single Family Residence — Maximum Number of Bedrooms: 3 — (X) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: 6 — ( ) Concrete Slab Foundation
( ) Accessory Building — ( ) Swimming Pool — ( ) Basement with Plumbing
( ) Bedroom(s) Addition — ( ) Other Addition/Structure: _____ — ( ) Basement without Plumbing
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____
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 (X) 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: Wendell Cly 5/14/2020
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, DAVID COLLIN - CROSSROAD PROPERTY SOLUTIONS, am the legal owner(s) of the property located at 1299 MT ULLA HWY, identified as

PIN (Parcel Identification Number) 4678180435 / 4678088313, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) WGHOLE ENERGY SOIL & FORESTRY SERVICES, 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.

_____ 5/15/20
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

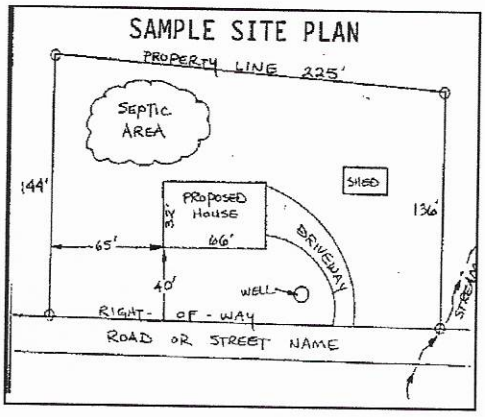
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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
- ( ) 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**

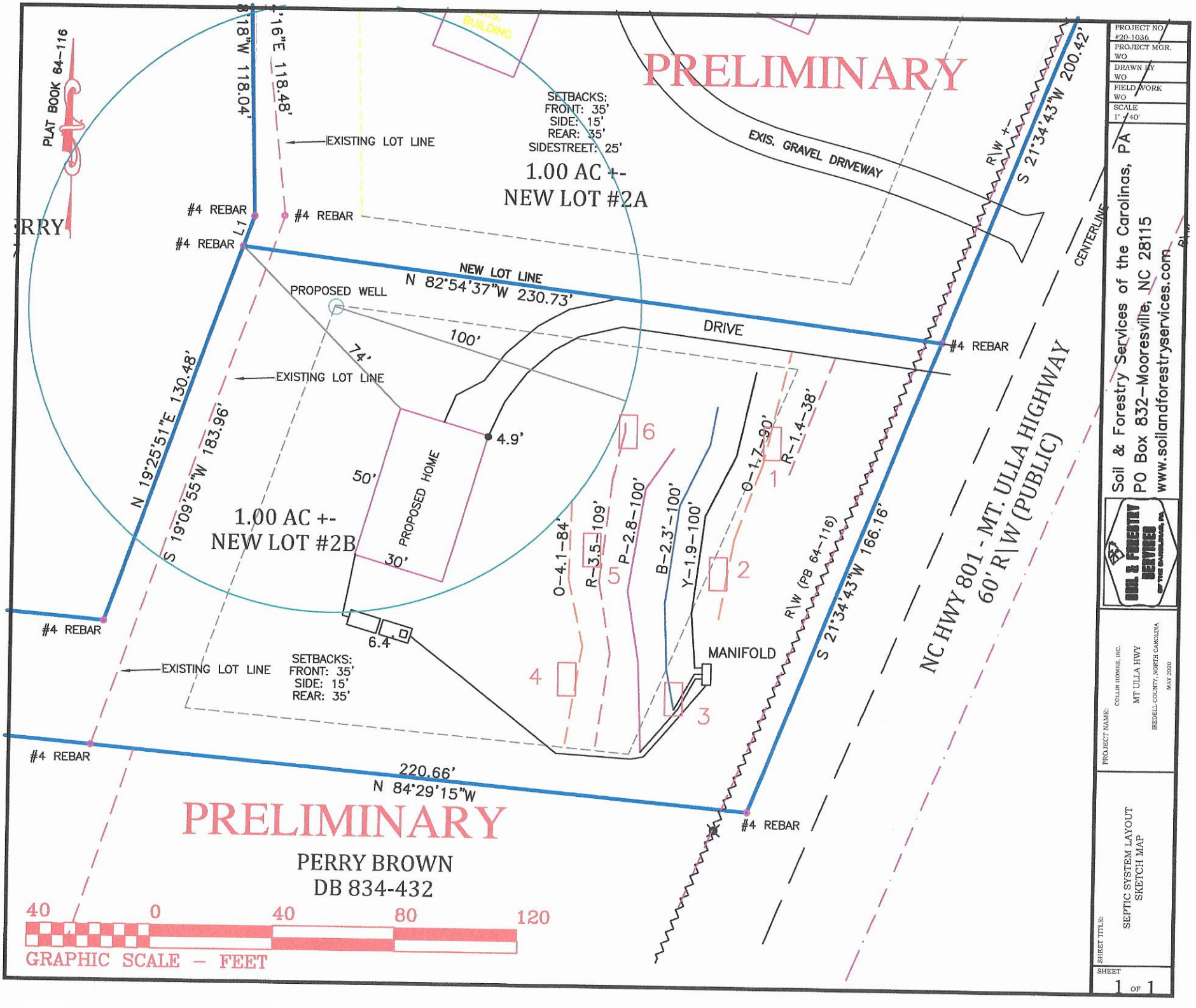
USE THIS SPACE TO DRAW YOUR SITE PLAN

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

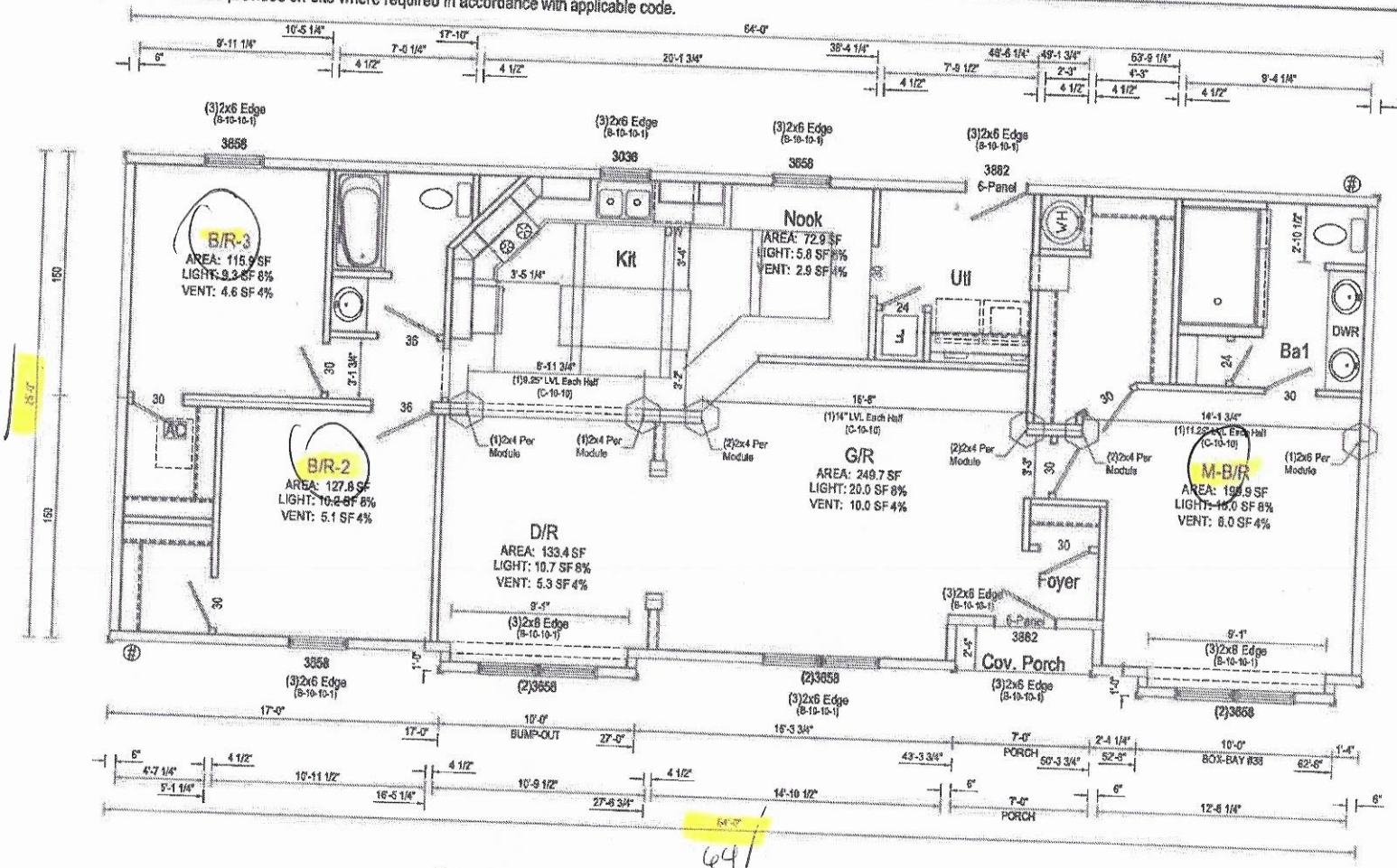
SEE ATTACHED SITE PLAN

Signature: Wendell Cly
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

5/14/20
DATE


PRELIMINARY
PLAT BOOK 64-116
N 19°16'E 118.48'
S 19°18"W 118.04'
EXISTING LOT LINE
SETBACKS:
FRONT: 35'
SIDE: 15'
REAR: 35'
SIDESTREET: 25'
1.00 AC +-
NEW LOT #2A
EXIS. GRAVEL DRIVEWAY
R\W +-
S 21°34'43"W 200.42'
#4 REBAR
L1
NEW LOT LINE
N 82°54'37"W 230.73'
PROPOSED WELL
DRIVE
100'
74'
EXISTING LOT LINE
N 19°25'51"E 130.48'
S 19°09'55"W 183.96'
4.9'
50'
PROPOSED HOME
30'
1.00 AC +-
NEW LOT #2B
6.4
SETBACKS:
FRONT: 35'
SIDE: 15'
REAR: 35'
EXISTING LOT LINE
O-4.1-84'
R-3.5-109'
P-2.8-100'
B-2.3'-100'
Y-1.9-100'
O-1.7-90'
R-1.4-38'
MANIFOLD
R\W (PB 64-116)
S 21°34'43"W 166.16'
NC HWY 801 - MT. ULLA HIGHWAY
60' R\W (PUBLIC)
CENTERLINE
220.66'
N 84°29'15"W
PRELIMINARY
PERRY BROWN
DB 834-432
40 0 40 80 120
GRAPHIC SCALE – FEET
PROJECT NO
#20-1036
PROJECT MGR.
WO
DRAWN BY
WO
FIELD WORK
WO
SCALE
1" = 40'
Soil & Forestry Services of the Carolinas, PA
PO Box 832–Mooresville, NC 28115
www.soilandforestryservices.com
SOIL & FORESTRY SERVICES
PROJECT NAME:
COLLIN HOWIS, INC.
MT ULLA HWY
IREDELL COUNTY, NORTH CAROLINA
MAY 2020
SHEET TITLE:
SEPTIC SYSTEM LAYOUT
SKETCH MAP
SHEET
1 OF 1

Note: Window fall protection must be provided on-site where required in accordance with applicable code.



Notes:
1. Exterior opening headers and jack studs are SPF #2 unless otherwise noted.
2. Sidewall headers may use alternate construction per section B-10 of Systems Manual.
3. LVL's where specified to be minimum of 1 1/2" wide, M.O.E. = 2.0 and fb = 2900 PSI.
4. See C-10-45 for stair opening framing.
5. See C-10-105 for dormer opening framing.

Note:
* LVLs noted must extend past column on at least one end 24" minimum and be overlayed with OSB sheathing.

See Schedules and General Notes Page
⬡ = Column Support Location
AC = Attic Access

Builder: R-Anell Housing Group, LLC - Subsidiary of The Commodore Corp.
Title: Floor Plan

Date: 9/25/20
Date: 9/25/20

APPROVED BY NTA 7/30/2020
Approval of this document does not authorize or approve any deviation or deviations from the requirements of applicable State Laws.
David Barts

Revisions	Scale: 3/16" = 1'-0"	Date: 07/24/2020	Cust: PENNWARDEN
Drawn By: NE	Reference: 1B1006-L		Dr: CLAYTON STATESVILLE
			S/N: 42557

Modeling No.: 1B1006-L1
Pg: FP

1299 Nt Ulla

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

APPLICATION NUMBER
307510 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4678180435.000	1299 MT ULLA HWY	Iredell County

Owner Information	Applicant Information
Name: CROSSROAD PROPERTY SOLUTIONS LLC Address: Phone:	Name: SOIL AND FORESTRY SERVICES Address: P. O. BOX 832 MOORESVILLE, NC 28115 Phone: (704)746-5046

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
1.806	35	35	15	15	WSII-BOW Back Creek	NO

Remarks
SFD HOLD BLDG UNTIL DEED IS RECORDED(DIVIDING&ADDING PROP)

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

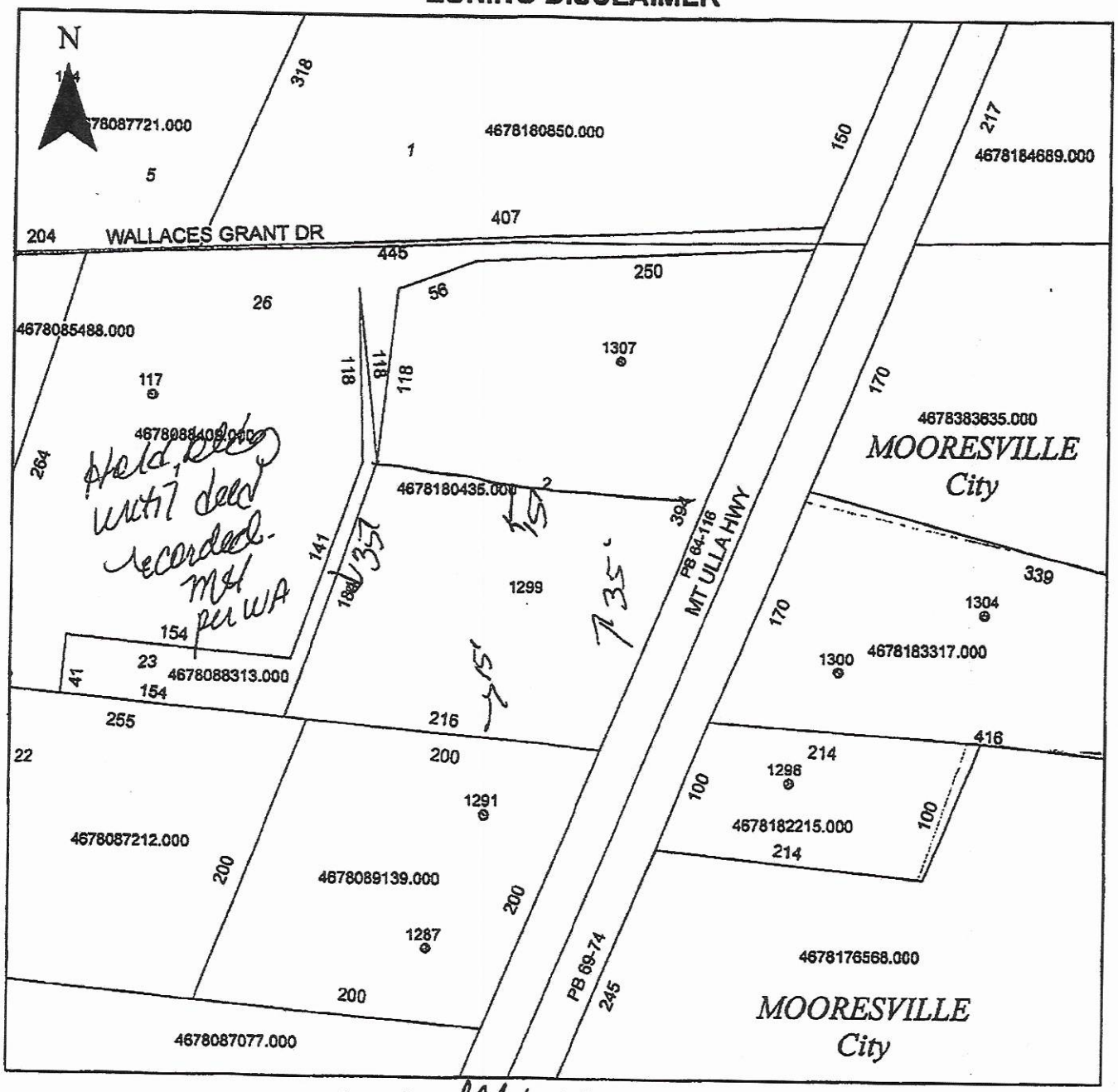
Date: 05/15/2020

Permit Number	307510

TOTAL FEES:	

PAID ONLINE
DATE:

ZONING DISCLAIMER



Property Address 1299 Mt Ulla

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.

Wesley Cg
Applicant

5/15/20
Date