IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 22811-7

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

PIN # 4685027249 3298

APPLICANT/OWNER: Lindsay Dobrick APPLICANT ADDRESS: 4220 Amity Hill Road Cleveland, NC 27013

SITE ADDRESS: 138 Greggs Woods Dr. Mooresville, NC 28115 PHONE: (304) 290-0244 ALT. PHONE

SITE DIRECTIONS: Linwood Rd, TR onto Patterson Farm Rd, TR onto Greggs Woods Dr. SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Johnson Estates SECTION: — LOT # 1 LOT AREA: ≈5 acres DESIGN FLOW: 480 GPD L.T.A.R.: 0.3

Septic Tank	1600	(gal)	STB		Date	10-28-17	☒ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	
Pump Tank	—	(gal)	PT	—	Date	—	System Description:	25% reduction	
Pump Make	—		Model	—	Serial #	—	Repair System Description:	25% reduction	
# Nitrification Fields	1	# Lines	6		Linear Ft	400	Maintenance Agreement Required:	☐ YES ☒ NO	
Trench Width	36"	Trench Bottom Depth(Low side)	32"		Gravel Depth	—	☒ GRAVITY ☐ PRESSURE		

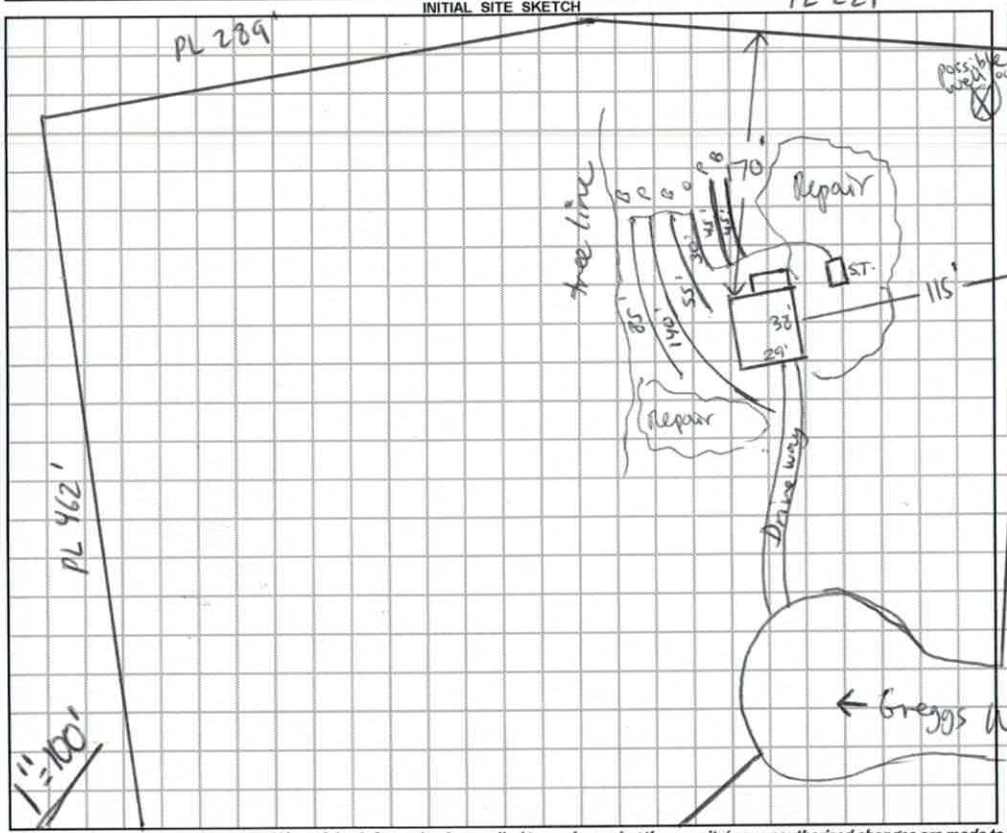
☒ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing

No. Bedrooms 4 No. Persons 8 No. Employees — ☒ Crawl Space ☐ Basement w/o plumbing

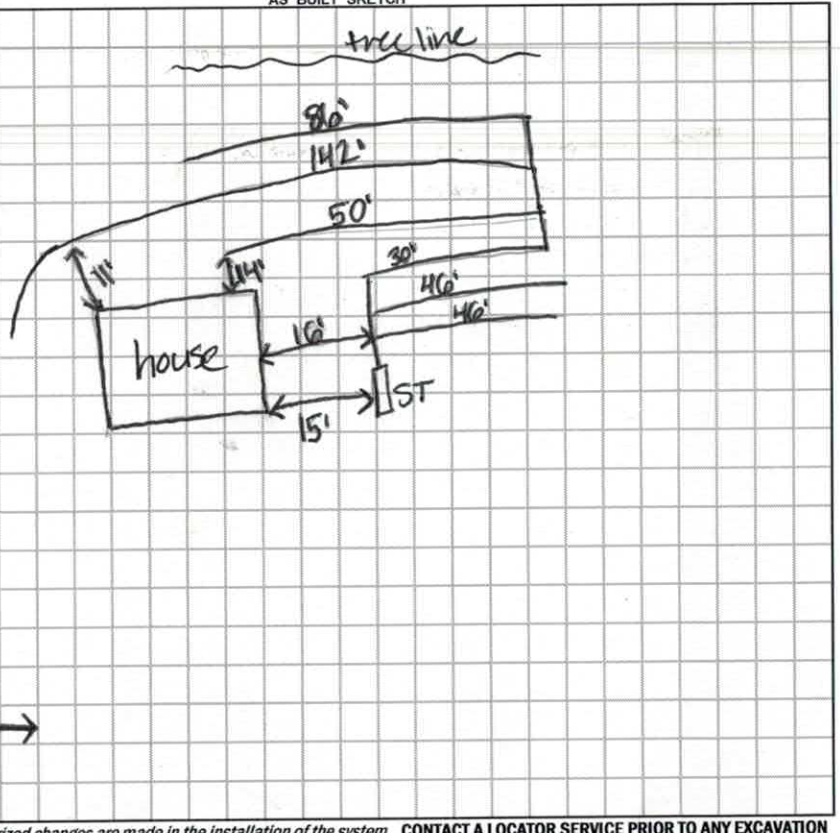
Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Install on contour of the land. Deed showing the combined lots needed for AC.

INITIAL SITE SKETCH



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. **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: Date: 8/2/17 Installed by: Ground Breakers

IMPROVEMENT PERMIT by: Mohamed Zunaseich Date: 7/11/2017 OPERATION PERMIT by: Krystle Wilson Date: 1-9-18

AUTHORIZATION TO CONSTRUCT by: Krystle Wilson Date: 9-14-17 Existing System Inspected by: Date:

DHHS

ON-SITE WASTEWATER SECTION

Sheet 1 of 1
PROPERTY ID #:
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

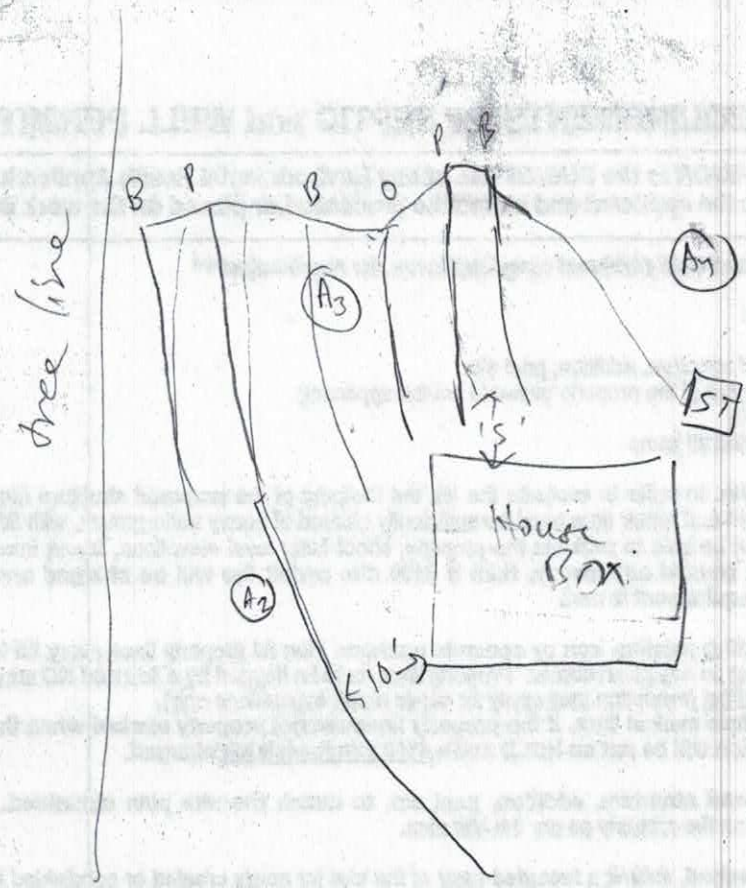
OWNER: Carol H. Johnson APPLICATION DATE 6/1/2017
ADDRESS: 118 Greggs Woods Dr DATE EVALUATED: 7/7/2017
PROPOSED FACILITY: 4BR House PROPOSED DESIGN FLOW (.1949): 480GPD PROPERTY SIZE: 5 acres
LOCATION OF SITE: 138 Greggs Woods Dr. PROPERTY RECORDED:
WATER SUPPLY: ☒ Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☒ Auger Boring ☐ Pit ☐ Cut TYPE OF WASTEWATER: ☒ 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	8-14%	0-23	SBk C	FR SS SP Serp	—	48	sandy sap @45"	—	0.3
		23-45	SBk CL	FR SS SP Serp					
R	L	45-48	sandy sap	VFR Serp					PS
2	8-14%	0-40	SBk C	FI SS SP Serp	—	48	—	—	0.3
		40-48	SBk CL	FR SS SP Serp					
I	L								PS
3	8-14%	0-35	Bk C	FR SS SP Serp	—	48	—	—	0.3
		35-48	Bk CL	FR SS SP Serp					
I	L								PS
4	8-14%	0-36	Bk C	FR SS SP Serp	—	48	—	—	0.3
		36-48	Bk CL	FR SS SP Serp					
R	L								PS

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	480 lin. feet	400 linear feet
System Type(s)	25% reduction	25% reduction
Site LTAR	0.3	0.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Mohamed Dumanieh
OTHER(S) PRESENT:

COMMENTS:



57 Repair

#11

85' 140' 55' 30'

B P B O

5'9.4" 4'6.2" 4'2.4"

45° 45°

P B

3'5"

assigned 6/22

RECEIVED JUN 2 1 2017

Paid $500.00 Online

228117

RECEIVED AUG 1 7 2017 AC

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAGE 1: APPLICATION FORM

Application For:
(✓) Septic Improvement Permit (✓) Authorization to Construct ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment ( ) 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: Eddie Shue (704)794-4505 - AC

Applicant Name: Lindsay Dobrick Address: 4720 Amity Hill Rd Cleveland 27013 Phone: 304.290.0874

Owner Name: Carol H. Johnson Address: 118 Greggs Woods Phone:

Property Information:

Street Address: 113 138 Greggs Woods Dr, Mooresville, NC 28115

Subdivision Name: Johnson Estates Section/Phase: _____ Lot Number: 1

Driving Directions: I-77 South to Exit 42. US-21 South 4.2 miles, NC-455 1.4 miles. Left on Whitman Circle 98', Right on Maple St. .2 miles, Left on Goodwin Circle .2 miles. Left on NC-150 E 2.4 mi., Right on NC-152 E .3 mi. Right on Wilkinson Rd 2.1 mi. LaHorsa Road 1.7 mi, Right on Greggs Woods Drive

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

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

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

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

Non-Residential Site Development:
Type of Business: _____
Square Footage of Building: _____
Maximum Number of Employees: _____
Maximum Number of Seats/Beds/Other: _____

Water Supply:

(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 (x) 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: Carol H. Johnson 6-1-17
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

6-1-17

Email to CP
" AC to ?

8/17/17

6/26/2017 House box not marked property line not marked

eddieshue@americashomeplace.com

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, Carol H. Johnson, am the legal owner(s) of the property located at ~~145~~ 138 Greggs Woods Dr, Mooresville NC 28115, identified as PIN (Parcel Identification Number) 4685-02-3211, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Lindsay Dobrick / Buyer, 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.

Carol H Johnson 6-1-17 Angela Perez 6-1-17

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

Type: CONSOLIDATED REAL PROPERTY
Recorded: 8/29/2017 11:20:35 AM
Fee Amt: $176.00 Page 1 of 2
Revenue Tax: $150.00
Iredell County, NC
Ronald N. Wyatt Register of Deeds

BK 2509 PG 416 - 417

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: $150.00 Purchase Price: $75,000.00

Parcel Identifier No. 4685023298 (4685023211 and pt of 4685027249) Verified by _____ County on the ____ day of_____, 20____

By:_____

Mail/Box to: Grantee

Instrument prepared by: Ben S. Thomas of THOMAS & GODLEY, PLLC, 514 Williamson Road, Ste. 421, Mooresville, NC 28117
File# 2017088302

Title Insurance Company: Meridian Title Company

Brief description for the Index: **L1 Carol H. Johnson Recombination**

THIS DEED made this 08/28/17, by and between

GRANTOR	GRANTEE
Carol Hazel Johnson, Widow 118 Greggs Woods Drive Mooresville, NC 28115	**Matthew S. Dobrick and spouse, Lindsay M. Dobrick** **Property Address:** 138 Greggs Woods Drive Mooresville, NC 28115

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated in Iredell County, North Carolina and more particularly described as follows:

Being all of Lot 1 as shown on the Carol H. Johnson Recombination Plat that is recorded in Book 66, on Page 148 in the Office of the Register of Deeds for Iredell County, North Carolina.

ROTC Page 1 of 2

Delinquent property taxes, if any, are to be paid by the closing attorney to the county Tax Administrator upon disbursement of the closing proceeds.

The property hereinabove described was acquired by Grantor by instrument recorded in Book 548, Page 23.

All or a portion of the property herein conveyed ___ includes or __x_ does not include the primary residence of a Grantor.

A map showing the above described property is recorded in Book 66, Page 148.

TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the Grantee in fee simple.

And the Grantor covenants with the Grantee, that Grantor is seized of the premises in fee simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever, other than the following exceptions:

1. Any and all easements, rights of way and restrictions of record.
2. Any and all zoning and planning ordinances.
3. Any discrepancies as an accurate survey of the premises might reveal.
4. Any and all other matters of record.

IN WITNESS WHEREOF, the Grantor has duly executed the foregoing,

Carol Hazel Johnson (SEAL)
Carol Hazel Johnson

_____ (SEAL)

_____ (SEAL)

_____ (SEAL)

_____ (SEAL)

_____ (SEAL)

State of North Carolina - County or City of Iredell

I, the undersigned Notary Public of the County and State aforesaid, certify that Carol Hazel Johnson personally appeared before me this day and acknowledged the due execution of the foregoing instrument for the purposes therein expressed. Witness my hand and Notarial stamp or seal this 28 day of Aug, 2017

My Commission Expires: 3/1/22
(Affix Seal)

BEN S. THOMAS NOTARY PUBLIC My Commission Expires 3-1-2022 IREDELL COUNTY, NORTH CAROLINA

Ben S. Thomas Notary Public
Notary's Printed or Typed Name

State of North Carolina - County or City of Iredell

I, the undersigned Notary Public of the County and State aforesaid, certify that _____.

Witness my hand and Notarial stamp or seal, this ____ day of _____, 20___.

My Commission Expires:_____
(Affix Seal)

_____ Notary Public
Notary's Printed or Typed Name

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*:

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 PERMIT!!!***

Place an (X) beside each item as you complete the site plan:

_____ Property Line measurements are clearly identified… **_____ All proposed structures are indicated…**

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

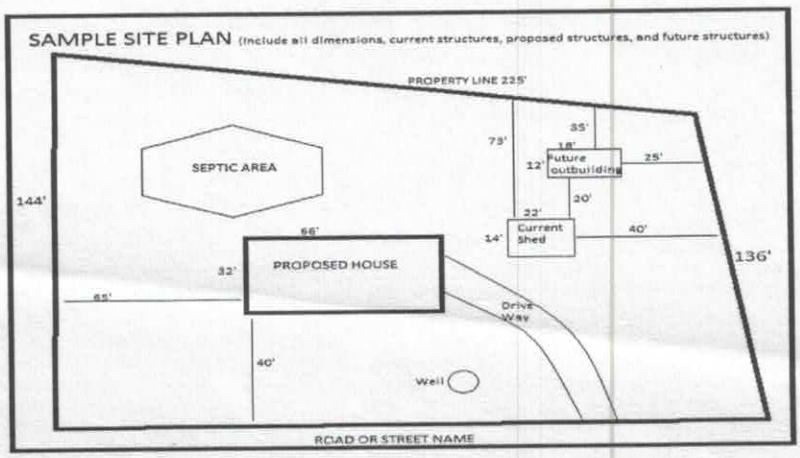
_____ Front and side setbacks from property line… **_____ Preferred driveway location and configuration, preferred well location…**

_____ Area you prefer your septic system to be placed… **_____ 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**



FOR AC

USE THIS SPACE TO DRAW YOUR SITE PLAN

See Septic permit

Signature: _____

REQUIRED **property owner or owner's legal representative signature.**

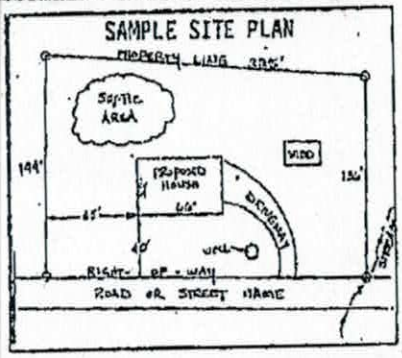
8/17/17
DATE

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAGE 2: *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 PERMIT!!!*

Place an (X) beside each item as you complete the site plan:

- (✓) Property Line measurements are clearly identified
- (✓) All proposed structures are indicated
- (✓) Front and side setbacks from property line
- (✓) Preferred driveway location and well location
- (✓) Area you prefer your septic system to be placed
- (✓) North arrow, or other sufficient indicator of direction

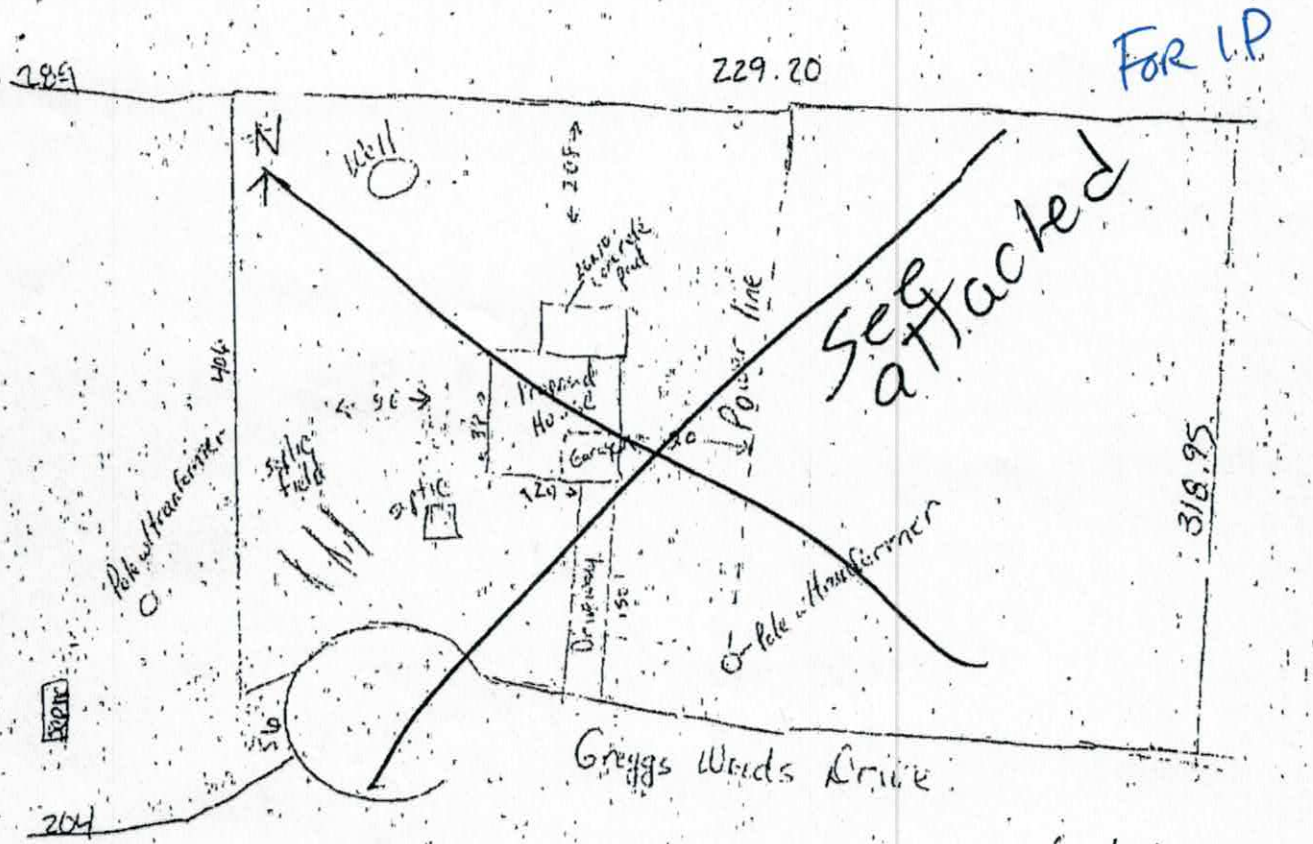


Circle N/A on the following if appropriate:

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)

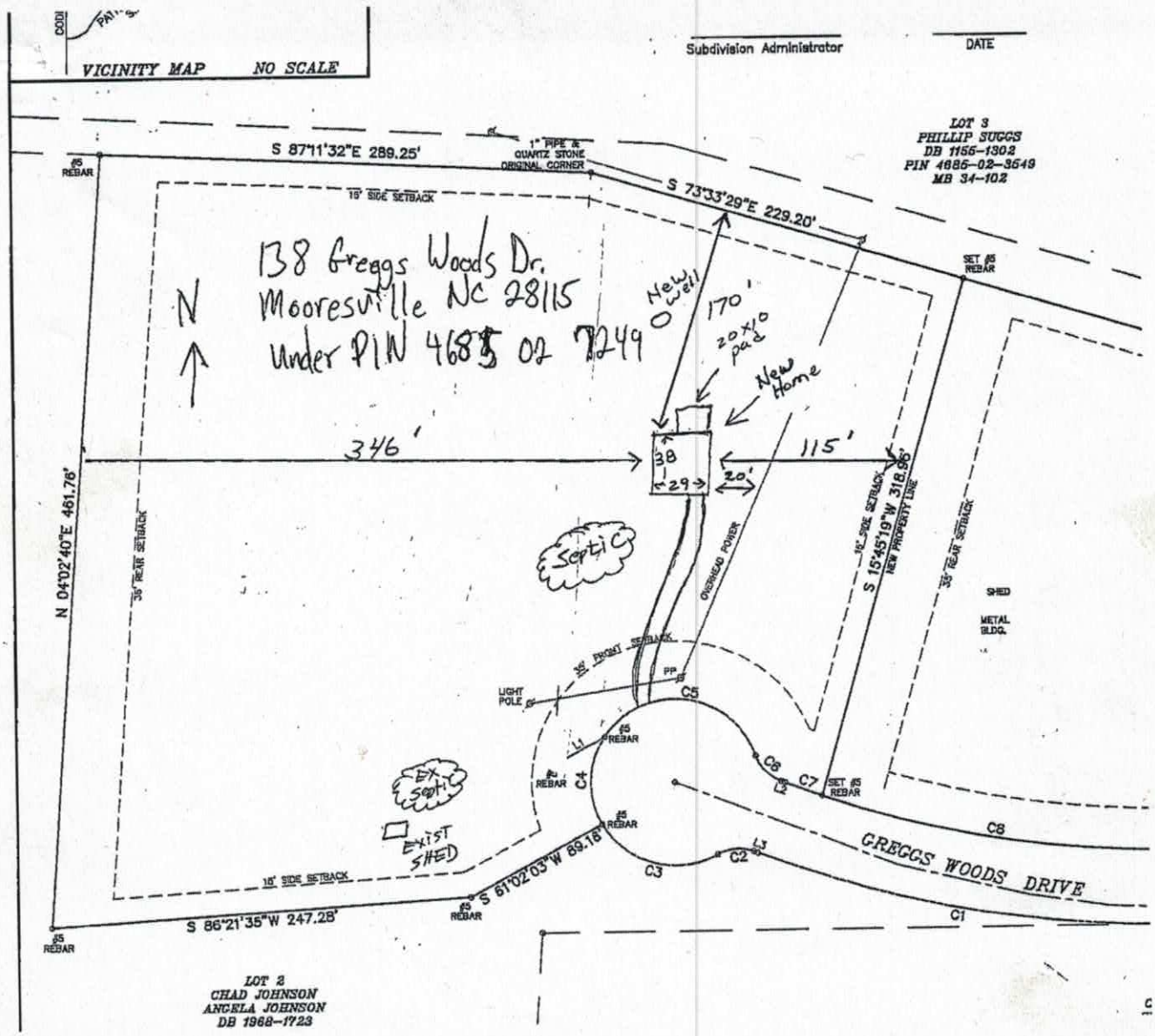
USE THIS SPACE TO DRAW YOUR SITE PLAN

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

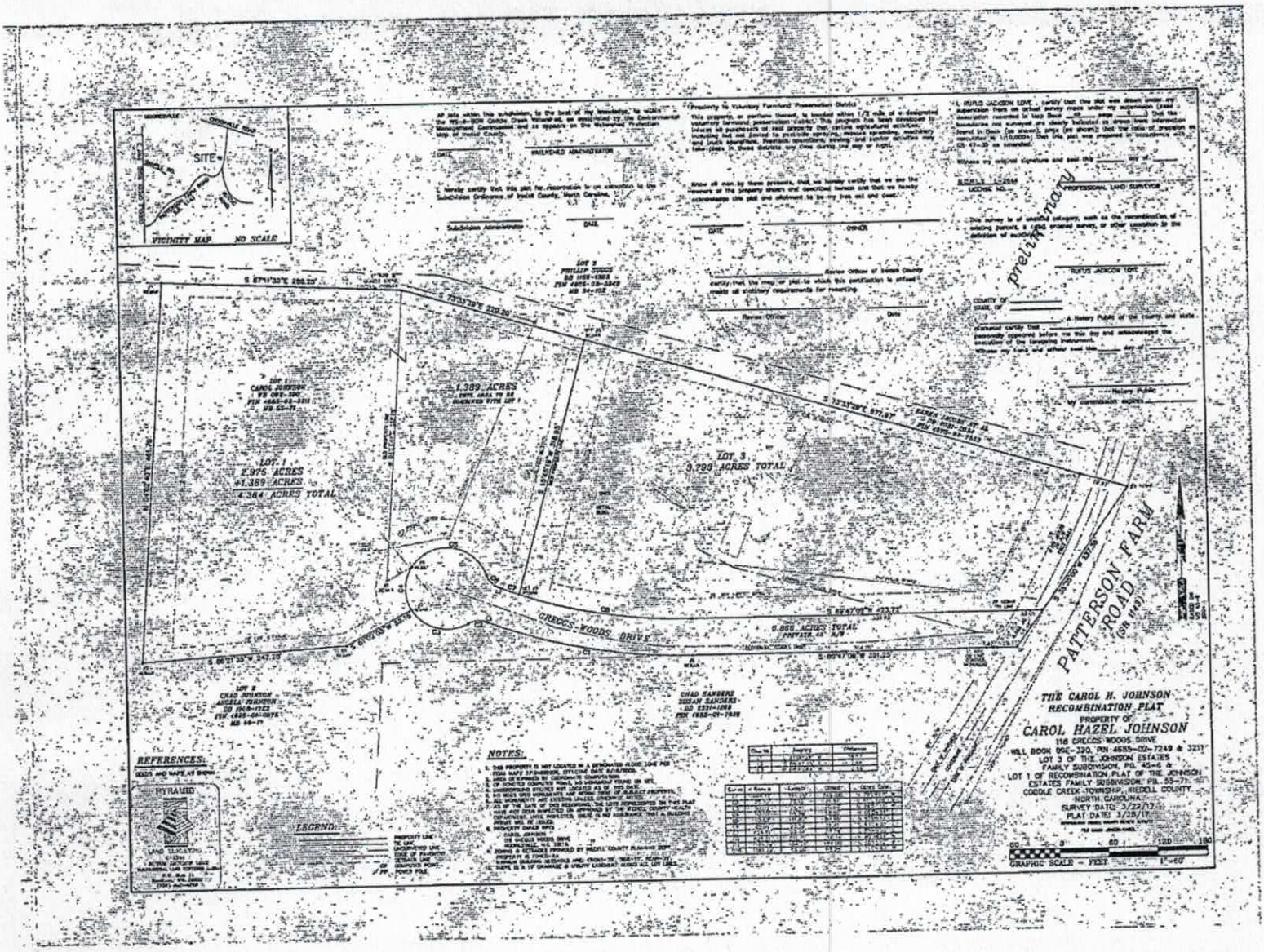


Signature: [signature] 6-1-17

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


VICINITY MAP NO SCALE
Subdivision Administrator
DATE
S 87°11'32"E 289.25'
1" PIPE & QUARTZ STONE ORIGINAL CORNER
S 73°33'29"E 229.20'
LOT 3
PHILLIP SUGGS
DB 1155-1302
PIN 4685-02-3549
MB 34-102
138 Greggs Woods Dr.
Mooresville NC 28115
Under PIN 4685 02 7249
New well
170'
20x10 pad
New Home
346'
115'
38
29
20'
N 04°02'40"E 461.76'
35' REAR SETBACK
15' SIDE SETBACK
S 15°45'19"W 318.96'
NEW PROPERTY LINE
OVERHEAD POWER
SHED
METAL BLDG.
Septic
35' FRONT SETBACK
LIGHT POLE
PP
C5
C4
C8
C7
C6
C3
C2
C1
L1
L2
L3
EX Septic
EXIST SHED
GREGGS WOODS DRIVE
S 61°02'03"W 89.18'
S 86°21'35"W 247.28'
#5 REBAR
SET #5 REBAR
LOT 2
CHAD JOHNSON
ANGELA JOHNSON
DB 1968-1723

1" = 100'


VICINITY MAP NO SCALE
SITE
Preliminary
LOT 1
2.975 ACRES
41.389 ACRES
4.364 ACRES TOTAL
1.389 ACRES
LOT 3
3.799 ACRES TOTAL
GREGGS WOODS DRIVE
0.868 ACRES TOTAL
PRIVATE 40' R/W
PATTERSON FARM ROAD
(SR 1149)
THE CAROL H. JOHNSON
RECOMBINATION PLAT
PROPERTY OF
CAROL HAZEL JOHNSON
116 GREGGS WOODS DRIVE
DEED BOOK 09E-330, PIN 4655-02-7249 & 3211
LOT 3 OF THE JOHNSON ESTATES
FAMILY SUBDIVISION, PB. 45-6 &
LOT 1 OF RECOMBINATION PLAT OF THE JOHNSON
ESTATES FAMILY SUBDIVISION, PB. 55-71
CODDLE CREEK TOWNSHIP, IREDELL COUNTY
NORTH CAROLINA
SURVEY DATE: 3/22/17
PLAT DATE: 3/28/17
GRAPHIC SCALE - FEET
REFERENCES:
LEGEND:
NOTES:

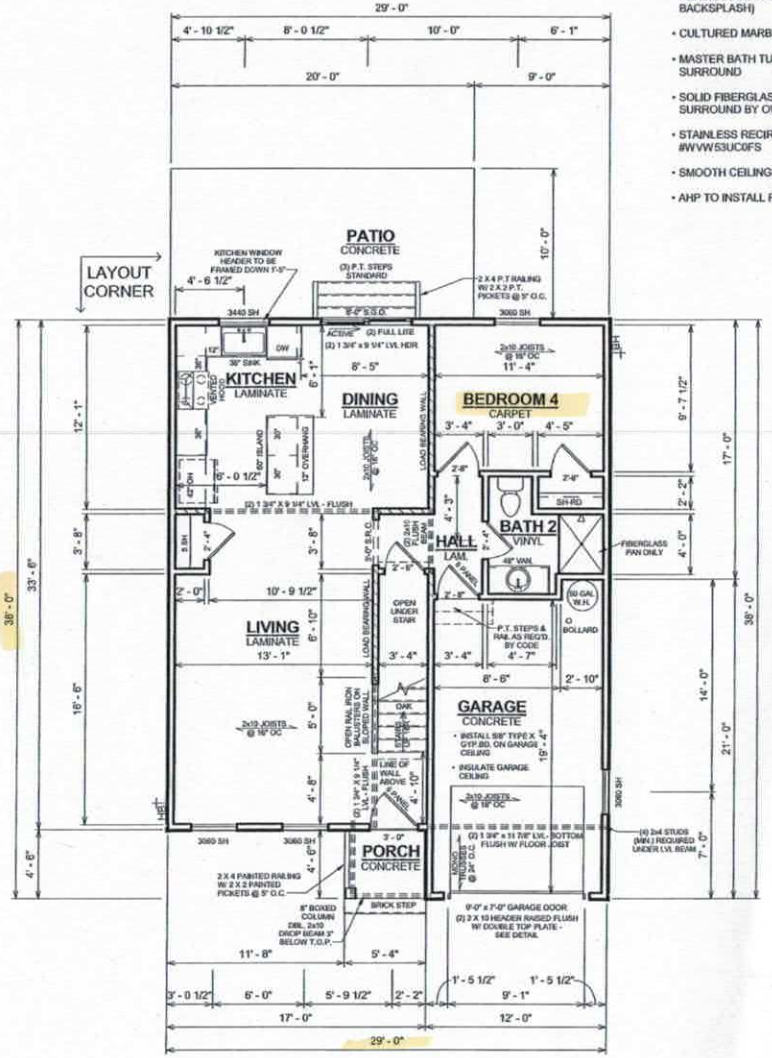
SPECIAL NOTES

- GRANITE (BLACK PEARL) KITCHEN COUNTERTOPS W/ PENCIL EDGE AND SINGLE BOWL UNDERMOUNT SINK (NO BACKSPLASH)
- CULTURED MARBLE BATHROOM VANITY TOPS
- MASTER BATH TUB MODEL #TO6032 W/ BY OWNER TILE SURROUND
- SOLID FIBERGLASS SHOWER PAN IN BATH 2 ONLY, TILE SURROUND BY OWNER
- STAINLESS RECIRCULATING CANOPY HOOD MODEL #WVW53UC0FS
- SMOOTH CEILINGS THROUGHOUT
- AHP TO INSTALL PLUMBING IN BATH 2 AND MASTER BATH

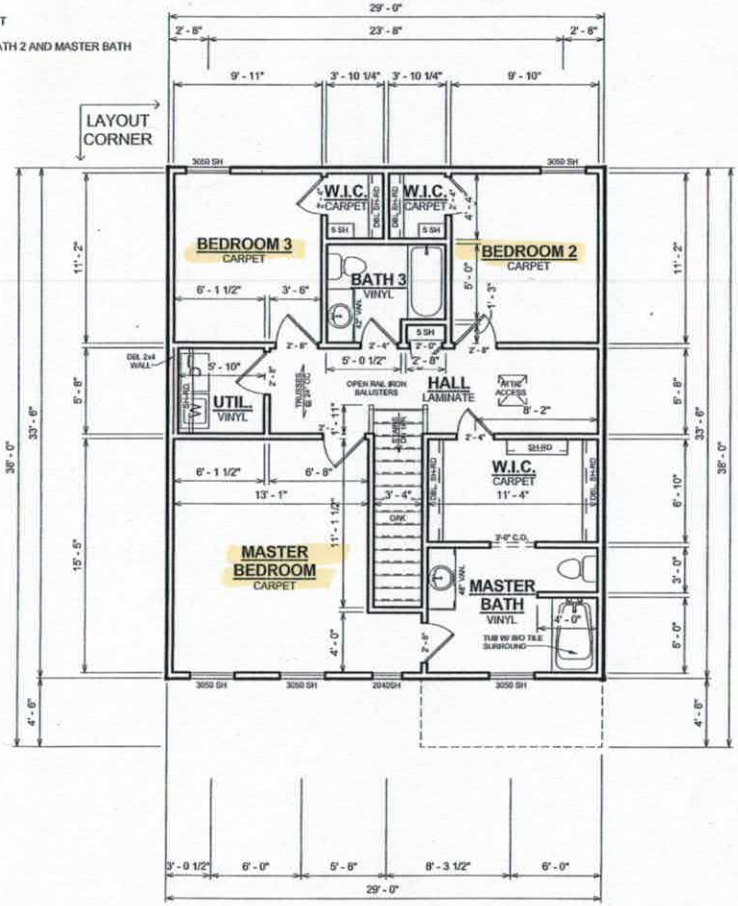
Acknowledgement of Plans Submittal ONLY!

Date 8/17/17

Date 9-14-17



FIRST FLOOR PLAN



SECOND FLOOR PLAN

FINAL CONSTRUCTION PLANS

© COPYRIGHT-ALL RIGHTS RESERVED NOTE-VIOLATORS OF THE COPYRIGHT WILL BE PROSECUTED TO THE FULLEST EXTENT OF THE LAW. THIS WORK IS THE INTELLECTUAL PROPERTY OF AMERICA'S HOME PLACE AND SHALL NOT BE REPRODUCED WITHOUT PERMISSION

PAPER SIZE: 11" x 17" | SCALE: 1/8" = 1'-0"

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Revision Schedule

Revision Number	Revision Description	Revision Date

AREAS:

FIRST FLOOR	790 S.F.
SECOND FLOOR	972 S.F.
TOTAL HEATED	1762 S.F.
GARAGE	235 S.F.
FRONT PORCH	24 S.F.
TOTAL UNDER ROOF	2021 S.F.
PATIO	200 S.F.

PLAN: DEATON A

FOR: LINDSAY & MATT DOBRICK

143 GREGGS WOODS DRIVE MOORESVILLE, NC 28115

OFFICE: STATESVILLE

SOLD BY: J SCHOOLEY

JOB#: 67-17-039

2 X 4 EXTERIOR WALL UNLESS OTHERWISE NOTED

FOUNDATION TYPE: CRAWLSPACE

REVIEWED BY: W BAXLEY

REVISED BY:

DRAFTER: P DAVIS

PROPERTY OF:

PAGE: F-2

8/15/2017 2:46:14 PM

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1ST & 2ND FLOOR PLANS

IREDELL COUNTY

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

APPLICATION NUMBER
228117
Issue Date: 06/21/2017

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4685027249.000	138 GREGGS WOODS DRIVE, MOORESVILLE, NC 28115	IREDELL COUNTY

Owner Information	Applicant Information
Owner: JOHNSON CAROL H	Applicant: DOBRICK, LINDSAY
Address: 118 GREGGS WOODS DR MOORESVILLE, NC 28115	Address: 4220 AMITY HILL ROAD CLEVELAND, NC 27013
Phone:	Phone: 304-290-0244

Use Requested	Zone Code
SFD	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
5.182	35.00	35.00	15.00	15.00	BOWC	X

Remarks:

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.

Applicant: _____ Date: _____

Permit Number	106801	TOTAL FEES:	$ 77.25