# IREDELL COUNTY HEALTH DEPARTMENT

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

PERMIT # 241072

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

PIN # 4722795194

APPLICANT/OWNER: Ronald Scott Parmiter APPLICANT ADDRESS: 152 Windmere Isle Rd Statesville NC 28677.

SITE ADDRESS: 131 Whistling Pines Drive Statesville NC 28677. PHONE: 980 505 2421 ALT. PHONE –

SITE DIRECTIONS: Buffalo Shoals Rd on Davidson Rd Rd on Winding Cedars Rd on Whistling Pines. @ end on L

SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Davidson Woods SECTION: 2 LOT # 28 LOT AREA: 0.6 Acres DESIGN FLOW: 360 L.T.A.R.: .275

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 (gal) | STB | 7100 | Date | 2/12/19 | ☒ New System ☐ Repair ☐ Expansion | System Type: I II (III) IV V VI | ☒ Residence | No. Bedrooms 3 |
| Pump Tank | 1000 (gal) | PT | 7100 | Date | 1/27/19 | System Description: Pressure Manifold - 25% Reduction | | ☐ Business | No. Persons 6 |
| Pump Make | Ouldsfab | Model | PE61M | Serial # | | Repair System Description: LD-PPBPS - 50% Reduction | | ☐ Other | No. Employees |
| # Nitrification Fields | 1 | # Lines | 5 | Linear Ft | 340 | Maintenance Agreement Required: ☐ YES ☒ NO | | ☐ Slab | ☒ Crawl Space |
| Trench Width | 36 | Trench Bottom Depth (~~low side~~) | 24 High | Gravel Depth | – | ☐ GRAVITY ☒ PRESSURE | | ☐ Basement w/ plumbing | ☐ Basement w/o plumbing |

Water Supply: ☐ Private ☐ Public ☒ Community

Comments / Conditions: See attached Proposal

INITIAL SITE SKETCH

See attached Design and Proposal from Soil & Forestry Services of the Carolinas, PA Approved Jan 15, 2019.

AS BUILT SKETCH

L1 - 64'
L2 - 68'
L3 - 68' - tap sizes OK - w/i 10%
L4 - 68'
L5 - 72'

| | Date | Initials |
|---|---|---|
| Drain Lines Checked | 4/3/19 | CC |
| Tanks Checked | 4/3/19 | CC |
| Pressure Manifold or Valve Box Checked | 4/3/19 | DC |
| Pressure Head Set | 4-30 | GHS |
| Electrical Checked | 4-30 | GHS |
| Floats Set | 4-30 | GHS |
| Alarm Checked | 4-30 | GHS |
| Maintenance Contract Y / N | | NOT REQUIRED |

- tanks 11' from house box - house not built at install

*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: 1/23/2019 Installed by: Gunter Grading

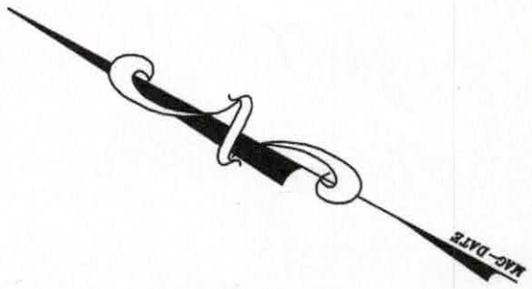
IMPROVEMENT PERMIT by: Benjamin A Bolton Date: 1/15/2019 OPERATION PERMIT by: Date: 7-30-19

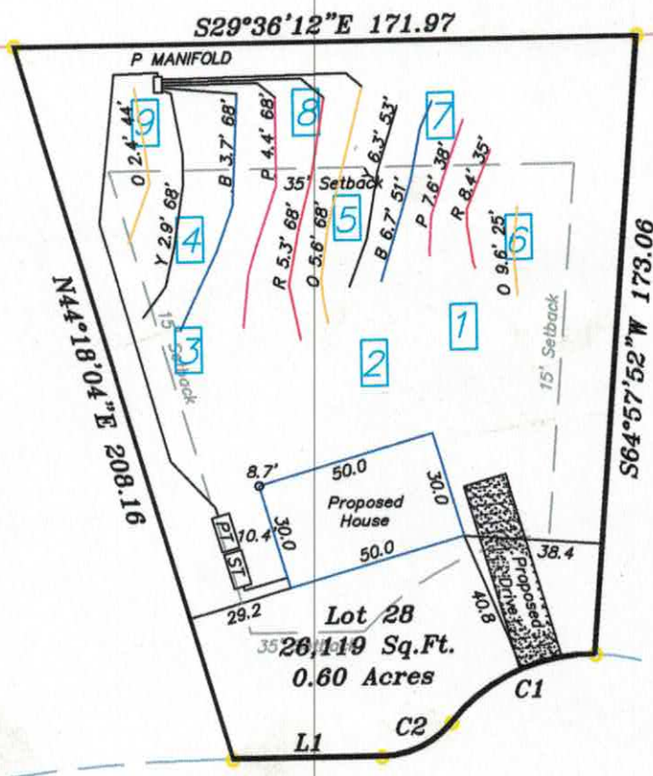
AUTHORIZATION TO CONSTRUCT by: Benjamin A Bolton Date: 1/15/2019 Existing System Inspected by: Date:

**FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inpsector to confirm your inspection time.**

| LINE TABLE | | |
|---|---|---|
| LINE | LENGTH | BEARING |
| L1 | 41.22 | N29°36'12"W |

| CURVE TABLE | | | | |
|---|---|---|---|---|
| CURVE | LENGTH | RADIUS | BEARING | CHORD |
| C1 | 45.46 | 50.00 | N54°15'49"W | 43.91 |
| C2 | 22.13 | 25.00 | S54°57'26"E | 21.41 |




## Whistling Pines Dr.

**45' Public R/W**

*Notes:*

1) *This property may be subject to any Easements, Rights-of-way, and/or Restrictive Covenants.*
2) *Boundary information based on Plat Book: 51 at Page: 21 as recorded in the Iredell County Register of Deeds.*
3) *This survey is of an existing parcel or parcels of land.*
4) *No N.C.G.S. or U.S.G.S. Monuments could be located within 2000'.*
5) *10' Utility & Drainage Easement. 10' Along each Property Line.*

GRAPHIC SCALE

50 0 25 50 100

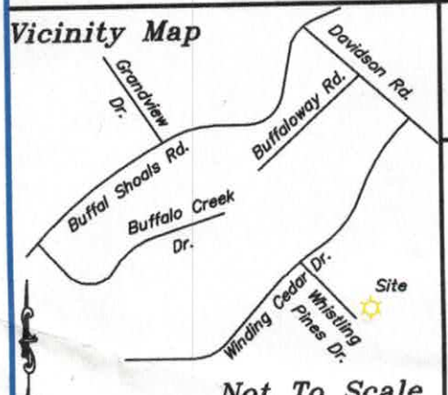
( IN FEET )

1 inch = 50 ft.

**Legend**

- = Fire Hydrant
- R/W = Right-of-way
- I.P.S. = #4 Rebar Set
- = Catch Basin
- = Not to scale
- = Cable Pedestal
- WM = Water Meter
- = Utility Pole
- B.O.C. = Back of Curb
- = Sanitary Sewer Manhole

**Vicinity Map**




*Not To Scale*

# Plot Plan

FOR

Ronald Scott Properties, Inc.

PROPERTY DESCRIPTION

Lot 28, Phase 2
Davidson Woods Subdivision
Plat Book 51, at Page 21

Statesville Outside Township
Iredell County, NC

SCALE: 1" = 50'

FIELD BOOK:

FILE: 2016-135

TAX PARCEL ID: 4722795194


Schamback Surveying, P.A.
Post Office Box 4143
Mooresville, NC 28117
(704) 622-9915
C-3218

APPROVED JAN 15 2019

SOIL & FORESTRY SERVICES
OF THE CAROLINAS, PA

**Three (3) Bedroom Accepted Septic System Design using Pressure Manifold Distribution for Lot 28 of Davidson Woods**
**PIN# 4722795194**

**Contents:** **Page**


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Owner: Ronald Scott Properties/152 Windemere Isle Rd-Statesville, NC 28677
(980) 505-2421
December 20, 2018
Project #: 16-1036
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 VPPBPS with gravity distribution**
- **System trench depth specified at 24"**
- **System trenches installed on 9' minimum; 3' wide trenches**
- **Iredell County has approval to move tanks or distribution devices**

# PRESSURE MANIFOLD DOSED SYSTEM FOR WASTEWATER TREATMENT

| | |
|---|---|
| Applicant: | Ronald Scott Parmiter |
| Phone: | 980 505-2421 |
| County: | Iredell |
| Location: | Davidson Woods Lot 28 |
| Source of Wastewater Flow: | 3 Bedroom Single Family Residence |
| Estimated Daily Wastewater Production: | 360 gpd |
| System Flow: | 27.40 gpm |

Design Specifications

| | |
|---|---|
| Drainfield Size: | 340 lf |
| Loading Rate: | 0.275 gpd/ft.$^2$ |
| Depth of Gravel in Trench: | n/a |
| Gravel Size: | n/a |
| Trench Depth: | 24 in |
| Trench Width: | 36 in. |
| Septic Tank Size: | 1000 |
| Pump Tank Size: | 1000 |
| Estimated Supply Line Length: | 150 lf |
| Supply Line Diameter: | 2 in. SCH 40 PVC |
| Supply Line Volume: | 26.10 gal |
| Dosing Volume: | 155.41 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: | 2.27 ft |
| Elevation Head: | 13.00 ft |
| Total Dynamic Head: | 19.22 ft |
| Threaded Union: | In Tank |
| Gate Valves: | 1 in Tank: 1 @ manifold |
| Check Valves: | In Tank |
| Anti-Siphon Hole: | n/a |
| Recommended Pump: | |

## Davidson Woods Lot 28
## Manifold Design

| | | |
|---|---|---|
| DESIGN FLOW: | 360 | gpd |
| SOIL APPLICATION RATE: | 0.275 | gpd/ft.$^2$ |
| TOTAL AREA TRENCH BOTTOM: | 1020 | sf |
| TOTAL LATERAL LENGTH: | 340 | lf |
| NUMBER OF FIELDS: | 1 | |
| LATERAL LENGTH REQUIRED PER FIELD: | 327 | lf |
| SUPPLY LINE LENGTH: | 150 | lf |
| TOTAL DYNAMIC HEAD: | 19.22 | gpm |
| DOSING VOLUME: | 155.41 | gal |
| PUMP TANK DRAW DOWN*: | 7.4 | in |
| SEPTIC TANK SIZE: | 1000 | |
| PUMP TANK SIZE: | 1000 | |

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

# Davidson Woods Lot 28

**Job #16-1036**

**Layout for a 3 bedroom home** **DEC 2018**

| LINE # | FLAG COLOR | BS | HI | FS | ELEV | FLAGGED LENGTH | DESIGN LENGTH |
|---|---|---|---|---|---|---|---|
| TBM | | 8.7 | | | 100.0 | | |
| INSTR. 1 | | | 108.7 | | | | |
| Back Rt House Crnr | | 8.7 | | | 100.0 | | |
| Pump Tank | | 10.4 | | | 98.3 | | |
| | | | REPAIR | | | | |
| 1 | Orange | | | 2.40 | 106.3 | 46 | 44 |
| | | | SYSTEM | | | | |
| 2 | Yellow | | | 2.90 | 105.8 | 68 | 68 |
| 3 | Blue | | | 3.70 | 105.0 | 74 | 68 |
| 4 | Pink | | | 4.40 | 104.3 | 76 | 68 |
| 5 | Red | | | 5.30 | 103.4 | 80 | 68 |
| 6 | Orange | | | 5.60 | 103.1 | 68 | 68 |
| | | | REPAIR | | | | |
| 7 | Yellow | | | 6.30 | 102.4 | 53 | 50 |
| 8 | Blue | | | 6.70 | 102.0 | 51 | 50 |
| 9 | Pink | | | 7.60 | 101.1 | 38 | 38 |
| 10 | Red | | | 8.40 | 100.3 | 35 | 35 |
| 11 | Orange | | | 9.60 | 99.1 | 25 | 25 |

| | LINE LENGTH | LTAR GPD/FT | SYSTEM TYPE | REDUCTION TYPE | DIST | TRENCH DEPTH |
|---|---|---|---|---|---|---|
| SYSTEM | 340 | 0.275 | ACCEPT | 25% | MANIFOLD | 24 |
| REPAIR | 242 | 0.250 | PPBPS | 50% | MANIFOLD | 36 |

## Notes:

** TBM located at back right house stake
**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

## Davidson Woods Lot 28

**SYSTEM FLOW**

DESIGN SPECIFICATIONS

| Line # | Color | Elev | Length | Hole Size | Flow/Tap | Line gpd | Line Trench Area | Flow/Line | Line LTAR |
|---|---|---|---|---|---|---|---|---|---|
| 2 | Yellow | 105.8 | 68 | SCH 80 1/2 | **5.48** | 72.00 | 204 | **0.081** | **0.35** |
| 3 | Blue | 105 | 68 | SCH 80 1/2 | **5.48** | 72.00 | 204 | **0.081** | **0.35** |
| 4 | Pink | 104.3 | 68 | SCH 80 1/2 | **5.48** | 72.00 | 204 | **0.081** | **0.35** |
| 5 | Red | 103.4 | 68 | SCH 80 1/2 | **5.48** | 72.00 | 204 | **0.081** | **0.35** |
| 6 | Orange | 103.1 | 68 | SCH 80 1/2 | **5.48** | 72.00 | 204 | **0.081** | **0.35** |
| | **total** | **feet =** | **340** | **gal/min =** | **27.4** | | | | |

| | |
|---|---|
| **Des. Flow** | **360** |
| **Pump Run to Dose 360gpd=** | **13.14** |
| **soil LTAR** | **0.275** |
| **Accepted LTAR** | **0.37** |

## CALCULATIONS

Location Davidson Woods

Project Number 16-1036

| | | |
|---|---|---|
| Lot No: | 28 | |
| No. of Bedrooms | 3 | |
| Design Flow | 360 | $^{gal}/_{day}$ |
| LTAR | 0.275 | $^{gal}/_{ft^2\,day}$ |
| Accepted? (YES OR NO) | Yes | |
| Supply Line Length | 150 | ft. |
| Supply Line Volume | 26.1 | gal. |
| Required Feet of Line | 327 | ft. |
| Amount of Line from Layout | 340 | ft. |
| Gallons per Minute | 27.40 | $^{gal}/_{min}$ |
| Required Septic Tank Capacity | 1000 | gal. |
| Minimum Standard Tank Size | 1000 | |
| Lateral Line Volume | 222.02 | gal. |
| Dosing Volume | 155.41 | gal. |

FRICTION FACTOR INTERPOLATER
2" SCH 40 PVC

| GPM | *f* |
|---|---|
| 20 | 0.84 |
| | -0.88 |
| 25 | 1.27 |
| 27.4 | 1.51 |
| 30 | 1.78 |
| | -1.76 |
| 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 | 7.4 | in. |
| | *Generic Draw Down of 21 gal.per in.* | |
| Pump Run Time | 5.67 | minutes |
| Elevation Head | 13 | ft. |
| Pressure Head | 2 | ft. |
| Friction Factor | 1.51 | ft./100 ft. *(From the interpolater.)* |
| Friction Head | 2.27 | ft. |
| Elevation Head +15% | 14.95 | |
| Total Dynamic Head | 19.22 | ft. |

PROPERTY ID #: 4722795194
COUNTY: Iredell

# SOIL/SITE EVALUATION
## *for* ON-SITE WASTEWATER SYSTEM

OWNER: Ronald Scott Properties
ADDRESS:
PROPOSED FACILITY: Residence PROPOSED DESIGN FLOW (.1949): 360
LOCATION OF SITE: Lot 28 Davidson Woods-131 Whistling Pines Drive
WATER SUPPLY: ☐ Private x☐ Public x☐ Well ☐ Spring Other
EVALUATION METHOD: ☐ Auger Boring x☐ Pit ☐ Cut

APPLICATION DATE
DATE EVALUATED: 12/6/18
PROPERTY SIZE: 0.6
PROPERTY RECORDED:

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 / 10% | 0-18 | FILL | | 2 chroma @ 48" 44 chroma 2 | 56 | N/A | | UN |
| | | 18-40 | R C MMA/S | Fr S SP | | | | | |
| | | 40-56 | RB CL WMS | Fr SS SP | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 2 | L / 10% | 0-33 | FILL | | N/A | 60 | N/A | | UN |
| | | 33-52 | BR C MMA | Fr S SP | | | | | |
| | | 52-60 | RB CL WFS | Fr SS SP | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 3 | L / 8% | 0-5 | B CL WFS | Fi SS SP | N/A | 46 | N/A | | 0.3 |
| | | 5-26 | RB C MMS | Fi S SP | | | | | |
| | | 26-46 | RB CL WFS | Fr SS SP | | | | | |
| | | 46-63 | VAR L M/WMS | Fr SS SP | | | | | |
| | | | | | | | | | |
| 4 | L / 8% | 0-7 | RB CL WMS | Fr SS SP | N/A | 68 | N/A | | 0.3 |
| | | 7-38 | BR C MMA/S | Fr SS SP | | | | | |
| | | 38-68 | RB CL WMS/A | Fr SS SP few/c sap | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | 340 | 240 |
| System Type(s) | ACCEPTED | VPPBPS |
| Site LTAR | 0.275 | 0.25 |

OTHER FACTORS (.1946): PS
SITE CLASSIFICATION (.1948): PS

EVALUATED BY: OVERBY
OTHER(S) PRESENT: ROLLANS

LICENSED SOIL SCIENTIST JAMES E. OVERBY 1218 STATE OF NORTH CAROLINA

COMMENTS:

# SOIL/SITE EVALUATION

*(Continuation Sheet)*



PROPERTY ID #: 4722795194
DATE OF EVALUATION: 12/6/18
COUNTY: Iredell

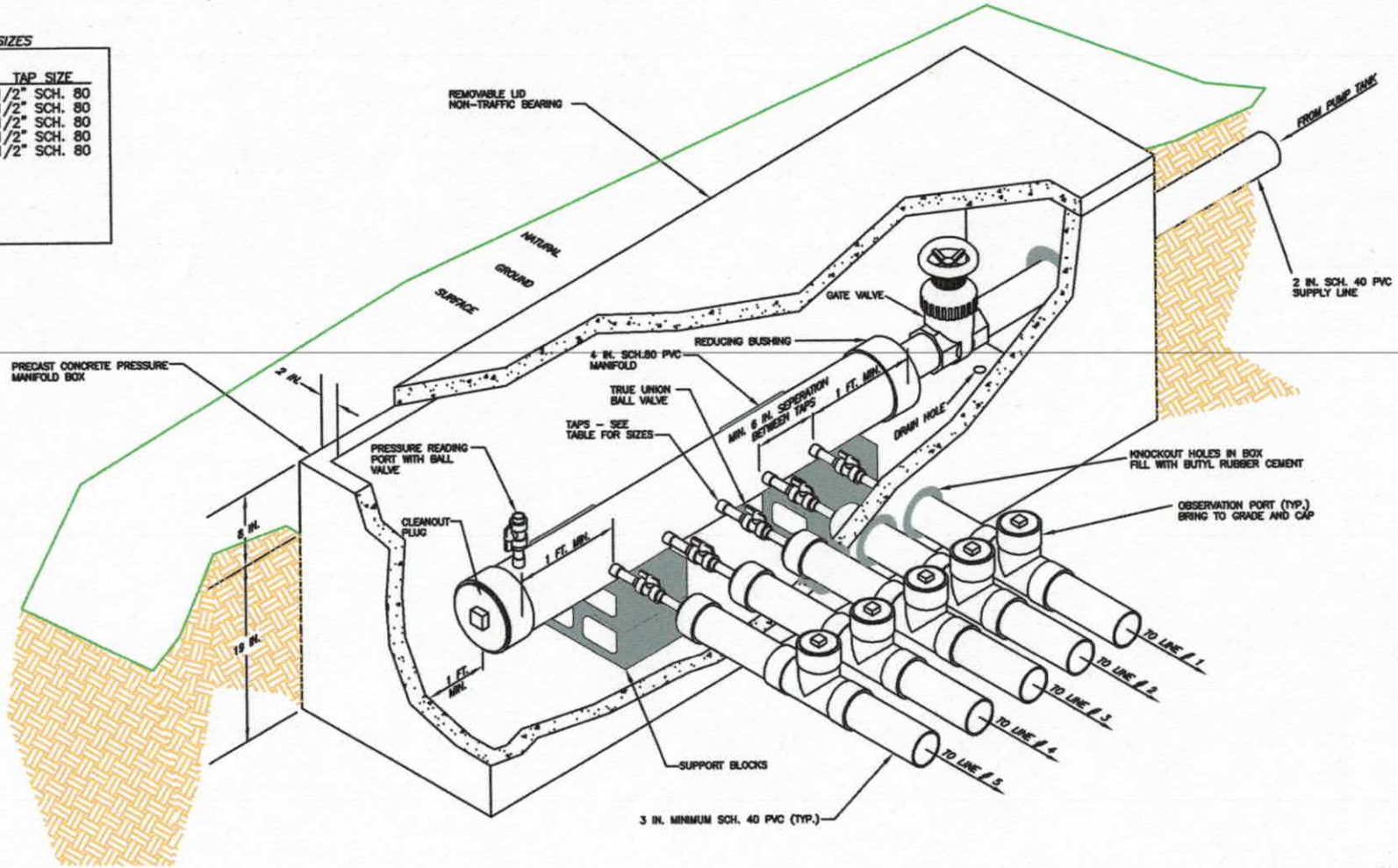
| PROFILE # | .1940 LANDSCAPE POSITION/ SLOPE % | HORIZON DEPTH (IN.) | SOIL MORPHOLOGY (.1941) | | OTHER PROFILE FACTORS | | | | PROFILE CLASS & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| | | | .1941 STRUCTURE/ TEXTURE | .1941 CONSISTENCE/ MINERALOGY | .1942 SOIL WETNESS/ COLOR | .1943 SOIL DEPTH | .1956 SAPRO CLASS | .1944 RESTR HORIZ | |
| 5 | L / 8% | 0-5 | B CL WFSBK | Fr SS SP | N/A | 60 | N/A | | 0.275 |
| | | 5-35 | RB C MMABK | Fi SS SP few Fe depl | | | | | |
| | | 35-60 | RB CL WFSBK | Fr SS SP few sap | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 6 | L / 15% | 0-4 | B SL WFGr | Fr SS SP | N/A | 60 | PS | N/A | 0.25 |
| | | 4-48 | RB C MMABK | Fi SS SP | | | | | |
| | | 48-60 | RB CL WFSBK | Fr SS SP few sap | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 7 | L / 11% | 0-5 | B CL WFSBK | Fr SS SP | N/A | 65 | N/A | N/A | 0.3 |
| | | 5-33 | RB C MMABK | Fi SS SP | | | | | |
| | | 33-65 | RB CL WFSBK | Fr SS SP few sap | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 8 | L / 10% | 0-3 | B SL WFGr | Fr SS SP | N/A | 60 | N/A | N/A | 0.3 |
| | | 3-33 | RB C MMABK | Fi SS SP | | | | | |
| | | 33-60 | RB CL WFSBK | Fr SS SP few sap | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 9 | L / 6% | 0-7 | BRCL WFSBK | Fr SS SP | N/A | 45 | PS | N/A | 0.275 |
| | | 7-27 | RB C WMSBK | Fi SS SP | | | | | |
| | | 27-45 | RB CL WFSBK | | | | | | |
| | | 45-63 | VAR L MASS | Fr SS SP | | | | | |
| | | | | | | | | | |

COMMENTS:

PRESSURE MANIFOLD DETAILS
FOR
LOT 28 DAVIDSON WOODS

*TAP SIZES*

| LINE No. | TAP SIZE |
|---|---|
| 1 | 1/2" SCH. 80 |
| 2 | 1/2" SCH. 80 |
| 3 | 1/2" SCH. 80 |
| 4 | 1/2" SCH. 80 |
| 5 | 1/2" SCH. 80 |



RECEIVED DEC 2 8 2018

Paid $850.00

# IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

*APPLICATION FORM*

#241072

**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:** RONALD SCOTT PARMITER **Address:** 152 WINDERMERE ISLE RD STATESVILLE **Zip:** 28677

**Applicant Email:** RSPARMITER@GMAIL.COM **Phone:** (980) 505-2421 **Alt. Phone:**

**Owner Name:** RONALD SCOTT PROPERTIES **Address:** SAME **Zip:**

**Owner Email:** SAME **Phone:** SAME **Alt. Phone:**

**Property Information:**

**Street Address:** 131 WHISTLING PINES DRIVE STATESVILLE

**Subdivision Name:** DAVIDSON WOODS **Section/Phase:** **Lot Number:** 28

**Driving Directions:** FROM CENTER ST, TURN RIGHT ON W WATER ST (HWY 90) TURN L ON W FRONT ST, TURN RIGHT ON BUFFALO SHOALS, L ON DAVIDSON RD, R ON WINDING CEDAR, L ON WHISTLING PINES

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

(✓) 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:** 3
**Maximum Number of Occupants:** 6
( ) Swimming Pool
( ) Other Addition/Structure:

**CHECK FOUNDATION TYPE**
(✓) 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:
( ) 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 (✓) Innovative ( ) Modified Conventional ( ) Other:

**Please answer the following to the best of your ability:**
( ) Yes (✓) No Does the site contain any jurisdictional wetlands?
( ) Yes (✓) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (✓) 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:** Ronald Scott Parmiter 12/20/18
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

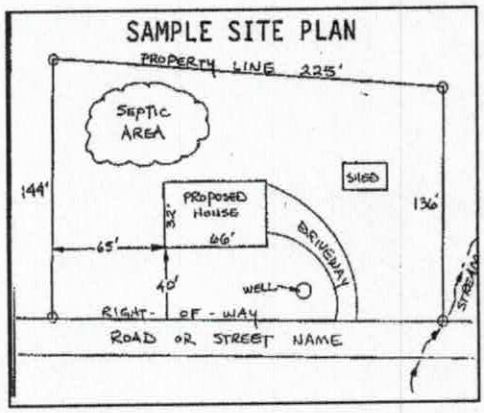
# IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

***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***

SOIL ATTACHED

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

12/20/18
**DATE**

## 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, RONALD SCOTT PROPERTIES INC, am the legal owner(s) of the property located at 131 WHISTLING PINES DR. STATESVILLE, identified as PIN (Parcel Identification Number) 472793194, located in Iredell County, North Carolina.

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

PRESIDENT 12/13/18 _____ _____

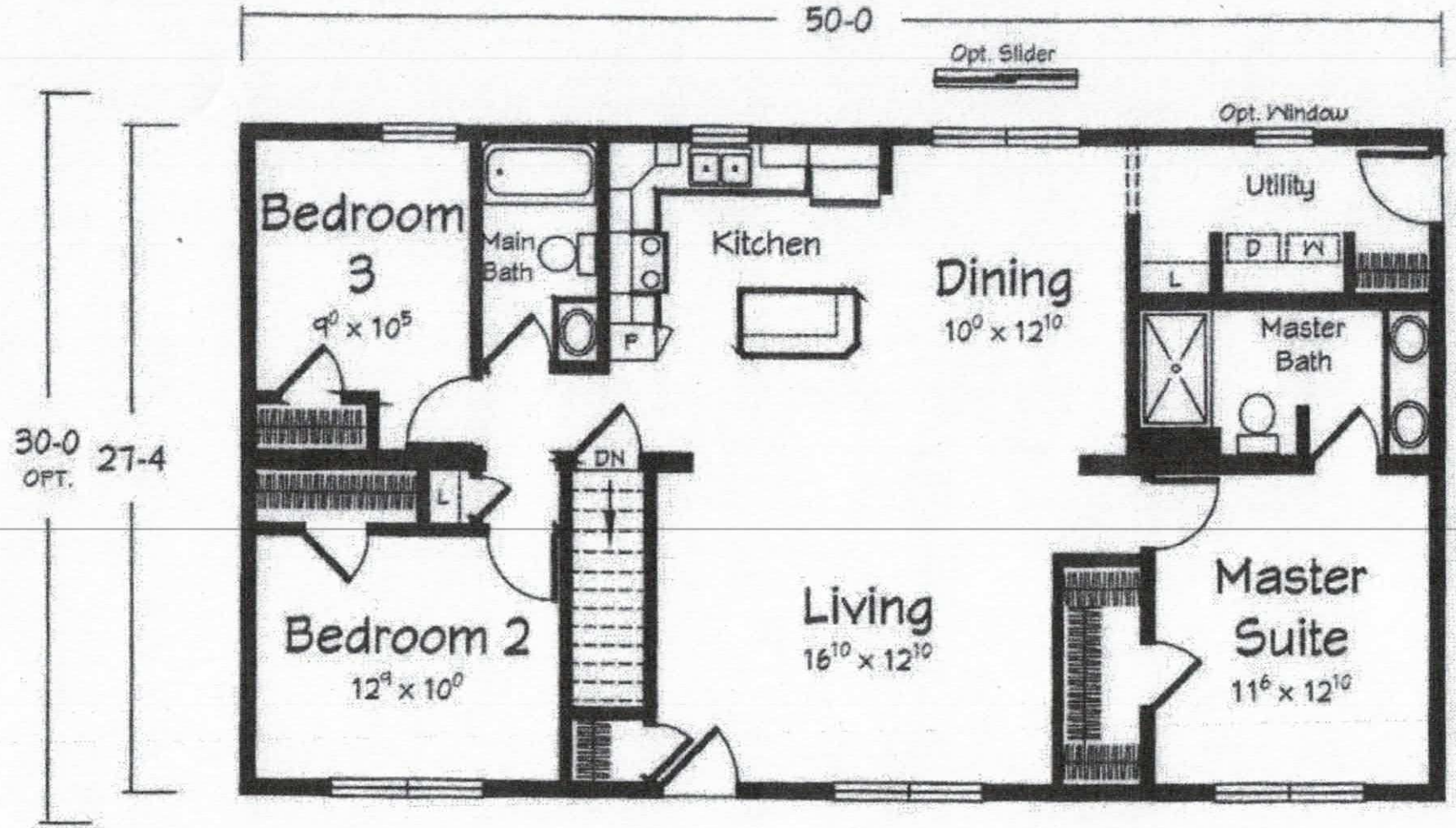
Signature of Owner(s) Date Signature of Witness Date

RONALD SCOTT PROPERTIES INC

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




50' x 30' OPTION

Homestead Series
Emoryville 28
1366 sq ft Living
Basement

Acknowledgement Of
Plans Submittal ONLY!

Date 1/23/2019

Date 1/15/2019.

RITE CRAFT

# IREDELL COUNTY

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

| APPLICATION NUMBER |
|---|
| 241072 |
| Issue Date: 12/20/2018 |

## ZONING PERMIT

Open Space

| Parcel Number | Street Address | Jurisdiction |
|---|---|---|
| 4722795194.000 | 131 WHISTLING PINES DRIVE, STATESVILLE, NC | IREDELL COUNTY |

| Owner Information | Applicant Information |
|---|---|
| Owner: 20 20 PROPERTIES LLC | Applicant: OVERBY, WENDELL |
| Address: ATTN: SPECIAL ASSETS<br>P O BOX 989<br>BLUEFIELD, VA 24605 | Address: P. O. BOX 832<br>MOORESVILLE, NC 28115 |
| Phone: | Phone: 704-239-2001 |

| Use Requested | Zone Code |
|---|---|
| NEW SFD | R20 |

| Lot Acreage | F Setback | B Setback | L Setback | R Setback | Watershed | Flood Zone |
|---|---|---|---|---|---|---|
| .600 | 35.00 | 35.00 | 15.00 | 15.00 | NOT | X |

**Remarks:**

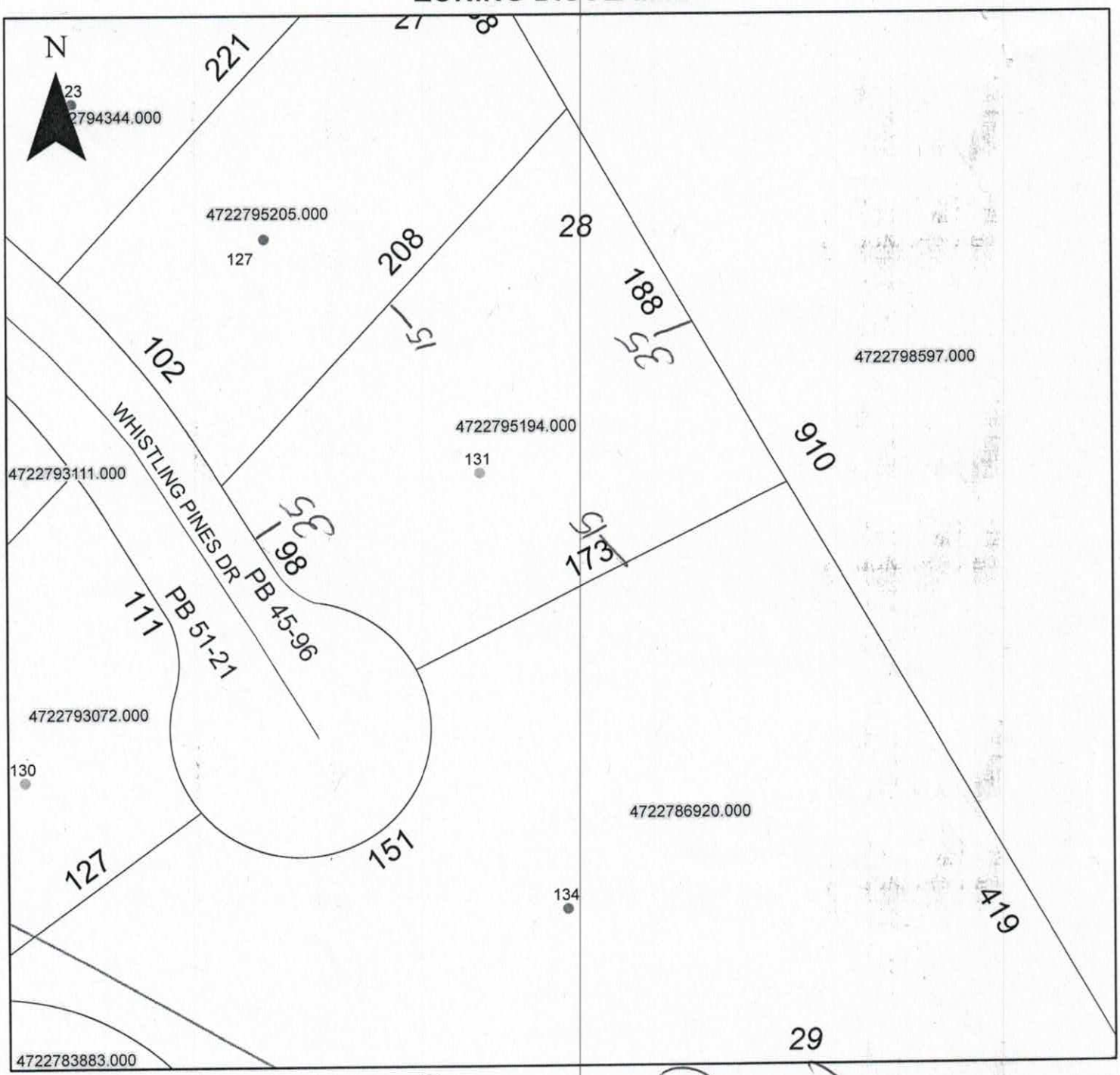
PAID
Credit Card 79.50

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 | 162862 | TOTAL FEES: | $ 79.50 |
|---|---|---|---|

# ZONING DISCLAIMER




Property Address 131 Whistling Pines Drive

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.

WCG

Applicant

12/20/18

Date