# IREDELL COUNTY HEALTH DEPARTMENT

*ENVIRONMENTAL HEALTH DIVISION*

PAGE 1: *APPLICATION FORM*

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

**Applicant Information:**

Applicant Name: 46 DESIGN BUILD Address: PO BOX 984 TROUTMAN 28166 Phone: 704 208-8342

Owner Name: 46 DESIGN BUILD Address: PO BOX 984 TROUTMAN 28166 Phone: 704 208-8342

**Property Information:**

Street Address: 115 SILVER FALLS DR

Subdivision Name: FALLS COVE Section/Phase: _____ Lot Number: 601

Driving Directions: STATE PARK Rd, Left on Morrison Farm, Left on SILVER FALLS, 2nd house on left.

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

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

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 8
( ) 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 Employee: _____
Maximum Number of Seats/Beds/Other: _____

**Water Supply:**

( ) New Well ( ) Existing Well ( ) Community Well (X) City Water ( ) Other Public Water

**Desired Septic System Type:** *(you may rank in order of preference)* Year existing system installed: _____

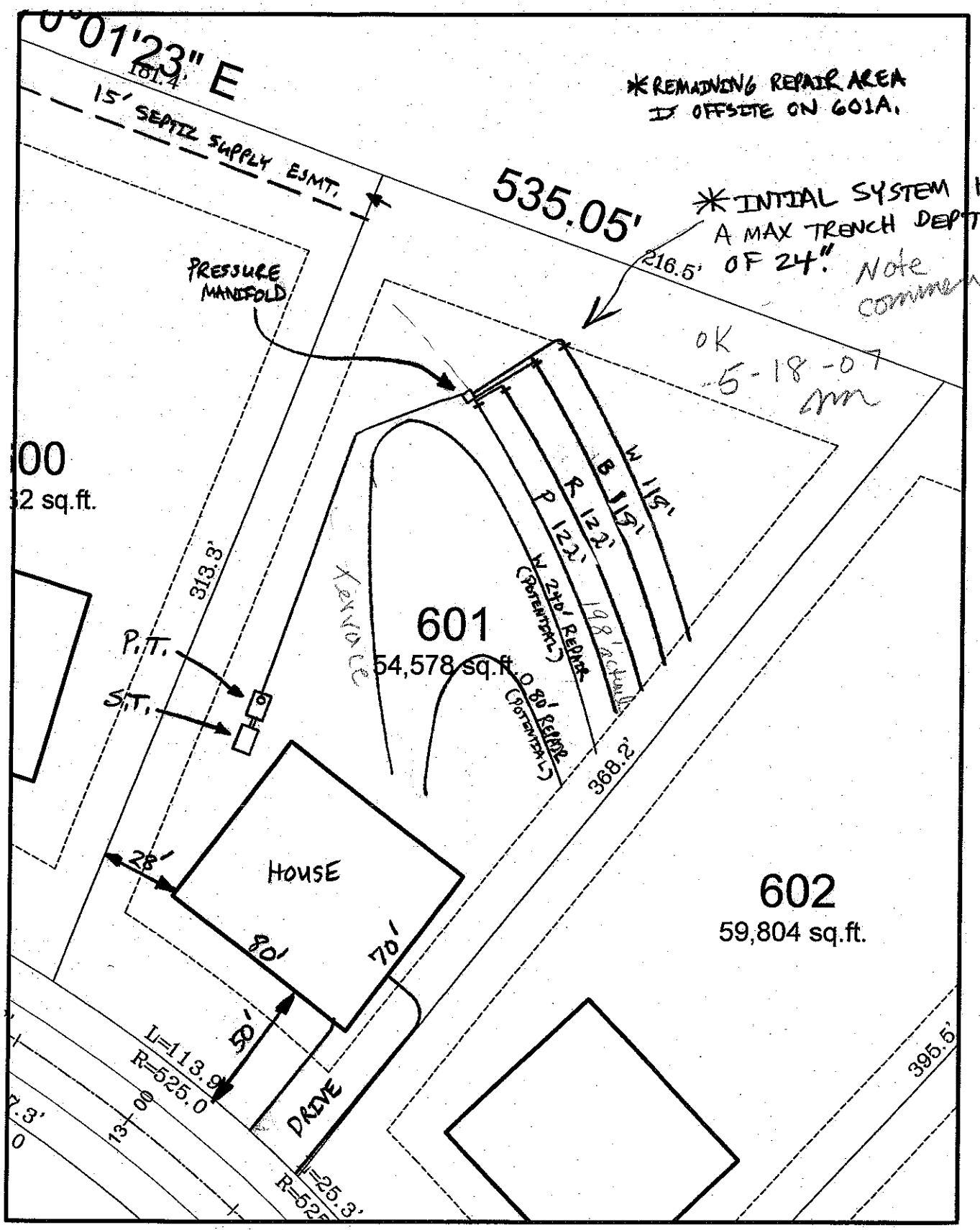
( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional (X) Other: 25% reduction

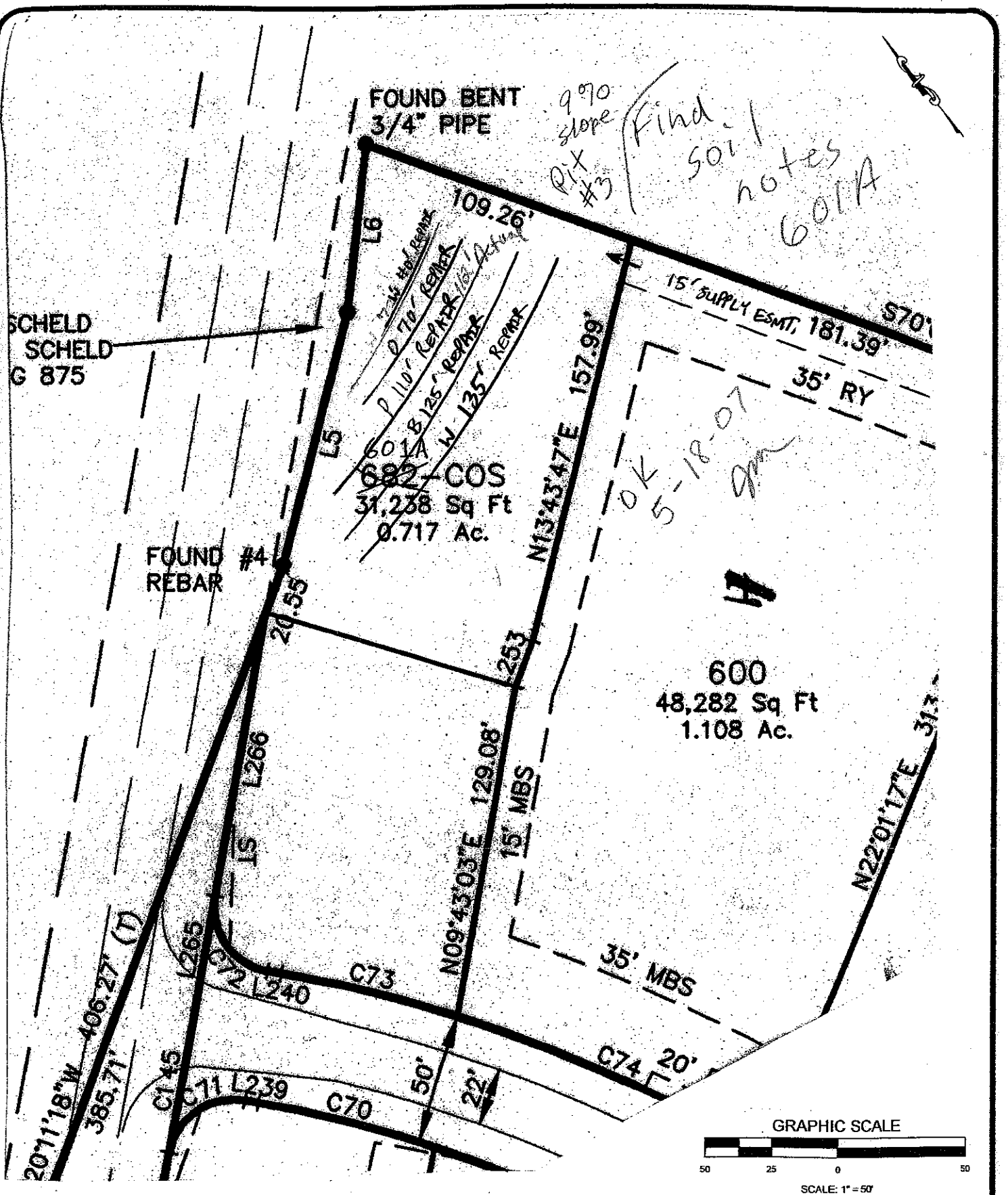
**Please answer the following to the best of your ability:**

( ) 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:** _____ 12/29/14
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE


0°01'23" E
181.4'
15' SEPTIC SUPPLY ESMT.
535.05'
216.5'
*REMAINING REPAIR AREA IS OFFSITE ON 601A.
*INTIAL SYSTEM HAS A MAX TRENCH DEPTH OF 24".
Note comment
OK
5-18-07
PRESSURE MANIFOLD
313.3'
P.T.
S.T.
601
54,578 sq.ft.
Terrace
B 113'
R 122'
P 122'
W 119'
W 2ND REPAIR (POTENTIAL)
198' actual
80' REPAIR (POTENTIAL)
368.2'
HOUSE
28'
80'
70'
602
59,804 sq.ft.
50'
L=113.9'
R=525.0'
DRIVE
L=25.3'
395.5'
GRAPHIC SCALE
50 25 0 50
SCALE: 1" = 50'



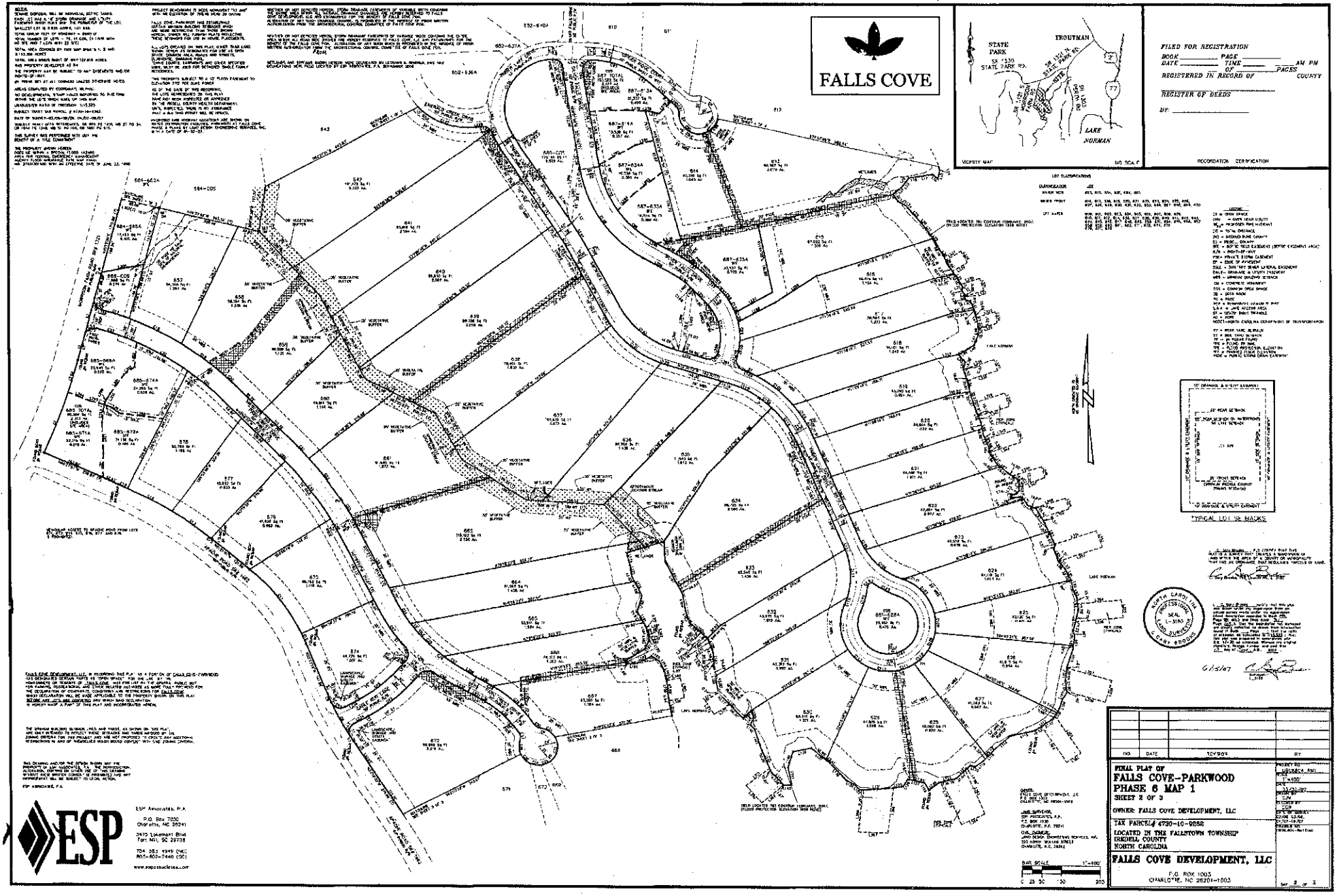

| | |
|---|---|
| SCALE: | AS SHOWN |
| DATE: | MAY 2007 |
| DRAWN BY: | RDM |
| PROJECT NO: | 1588-06-091 |

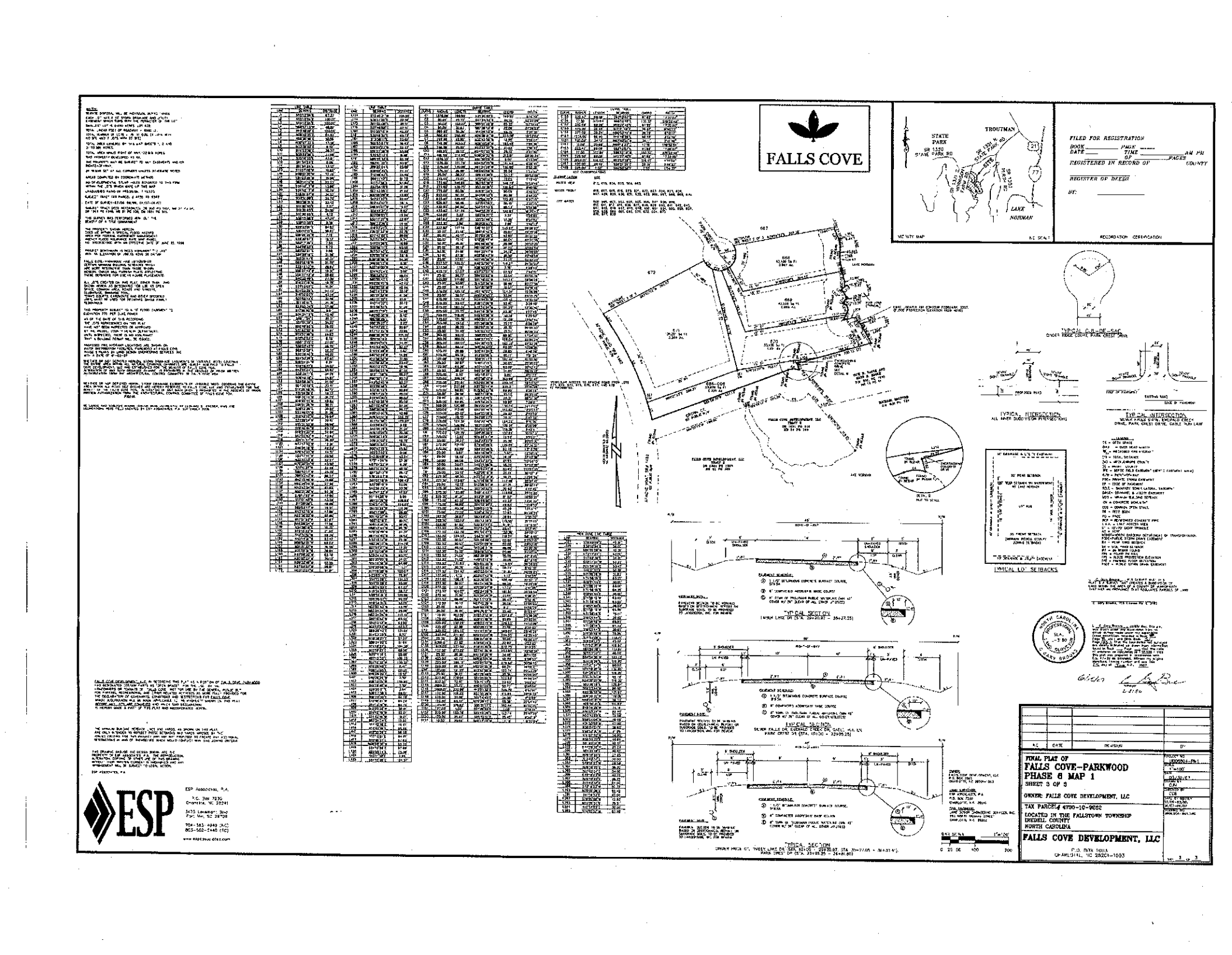
S&ME
WWW.SMEINC.COM

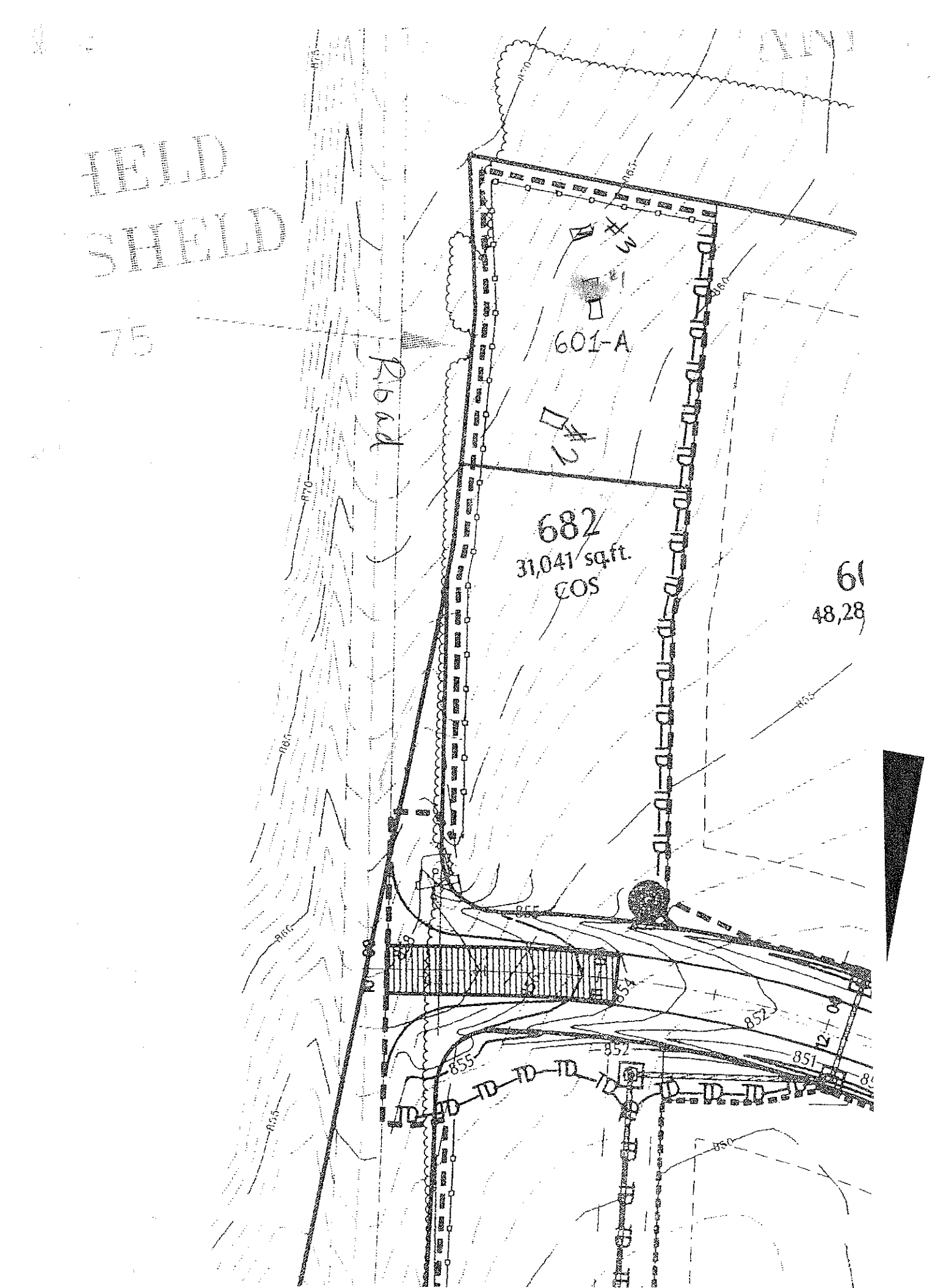
LOT #601A
CRESCENT PARKWOOD - PHASE 6
IREDELL COUNTY, NORTH CAROLINA

FIGURE NO.

Refer to Plat BK 52
Page 43, 44, 45 to find recorded copy




FALLS COVE
STATE PARK
TROUTMAN
LAKE NORMAN
FILED FOR REGISTRATION
REGISTERED IN RECORD OF
REGISTER OF DEEDS
RECORDATION CERTIFICATION
VICINITY MAP
N.C. GRID
TYPICAL CUL-DE-SAC
TYPICAL INTERSECTION
ALL INNER SUBDIVISION INTERSECTIONS
TYPICAL LOT SETBACKS
TYPICAL SECTION
TYPICAL SECTION
TYPICAL SECTION
ESP Associates, P.A.
P.O. Box 7030
Charlotte, NC 28241
3475 Lakemont Blvd
Fort Mill, SC 29708
704-583-4949 (NC)
803-502-2440 (SC)
www.espassociates.com
FINAL PLAT OF
FALLS COVE—PARKWOOD
PHASE 6 MAP 1
SHEET 3 OF 3
OWNER: FALLS COVE DEVELOPMENT, LLC
TAX PARCEL# 4700-10-9662
LOCATED IN THE FALLSTOWN TOWNSHIP
IREDELL COUNTY
NORTH CAROLINA
FALLS COVE DEVELOPMENT, LLC
P.O. BOX 10015
CHARLOTTE, NC 28201-1003


601-A
682
31,041 sq.ft.
COS
48,28
855
852
851
850