Site Address: 193 Winding Creek Dr. - Troutman

828 632 0991

ELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PERMIT# 134349 PIN# 4730456822 54-3997

OWNER OR APPLICANT Summerwood Homes, LLC DATE 3-27-06

ADDRESS Blue Stream Way PHONE: Business 704 799 8085 Home

LOCATION Hwy 21 (R) on Perth (R) on State Park (L) Twin Creeks (L) Rushing Water (L) Blue Stream; corner of Blue Stream and Rushing Water

SUBDIVISION Twin Creek Estates BLOCK / SECTION 2 LOT 37 LOT AREA SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .25

Septic Tank: 1000 Gallons; STB 1007 Date 07/2006

Pump Tank: 1000 Gallons; PT Date

Pump Make: ZOELLER Model ~~#95 (1/2 HP)~~ Serial No.

Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 240

No Lines 5 Trench Width 24" Max Trench Bottom Depth 36"

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

System Description: LP 50% Reduction

Repair System Description: LP 50% Reduction

Maintenance Agreement Required: ☒ Yes ☐ No

Gravel Depth n/a ☐ Gravity ☒ Pressure

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Persons No. Employees

Water Supply: ☐ Individual ☒ Public ☐ Community

☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

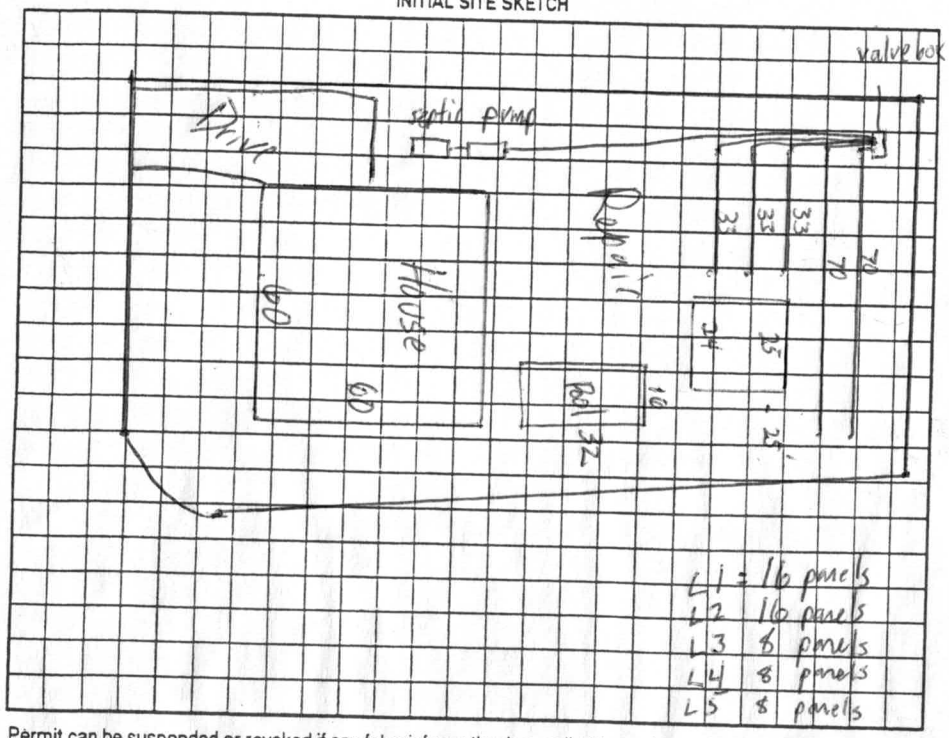
Comments:/Conditions:

4BN 140C lhs.

Comments:/Conditions:

~~X~~ USED ISOCO FILTER IN S.T.

INITIAL SITE SKETCH



AS BUILT SKETCH

	Date	Initials
Drain Lines Checked	08/25/06	PM
Tanks Checked	08/25/06	PM
Pressure Manifold or Valve Box Checked	8/29/06	
Pressure Head Set	8/29	
Electrical Checked		
Floats Set		
Alarm Checked		
Maintenance Contract Y / N		

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. Improvement Permit with plat valid without expiration ☐ Improvement Permit with site plan valid for sixty months ☐ Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: date 3-28-06

Improvement Permit by: date 3-27-06

Authorization to Construct by: date 3-27-06

Installed by: BARNES BACKHOE + GRADING

Operation Permit by: date

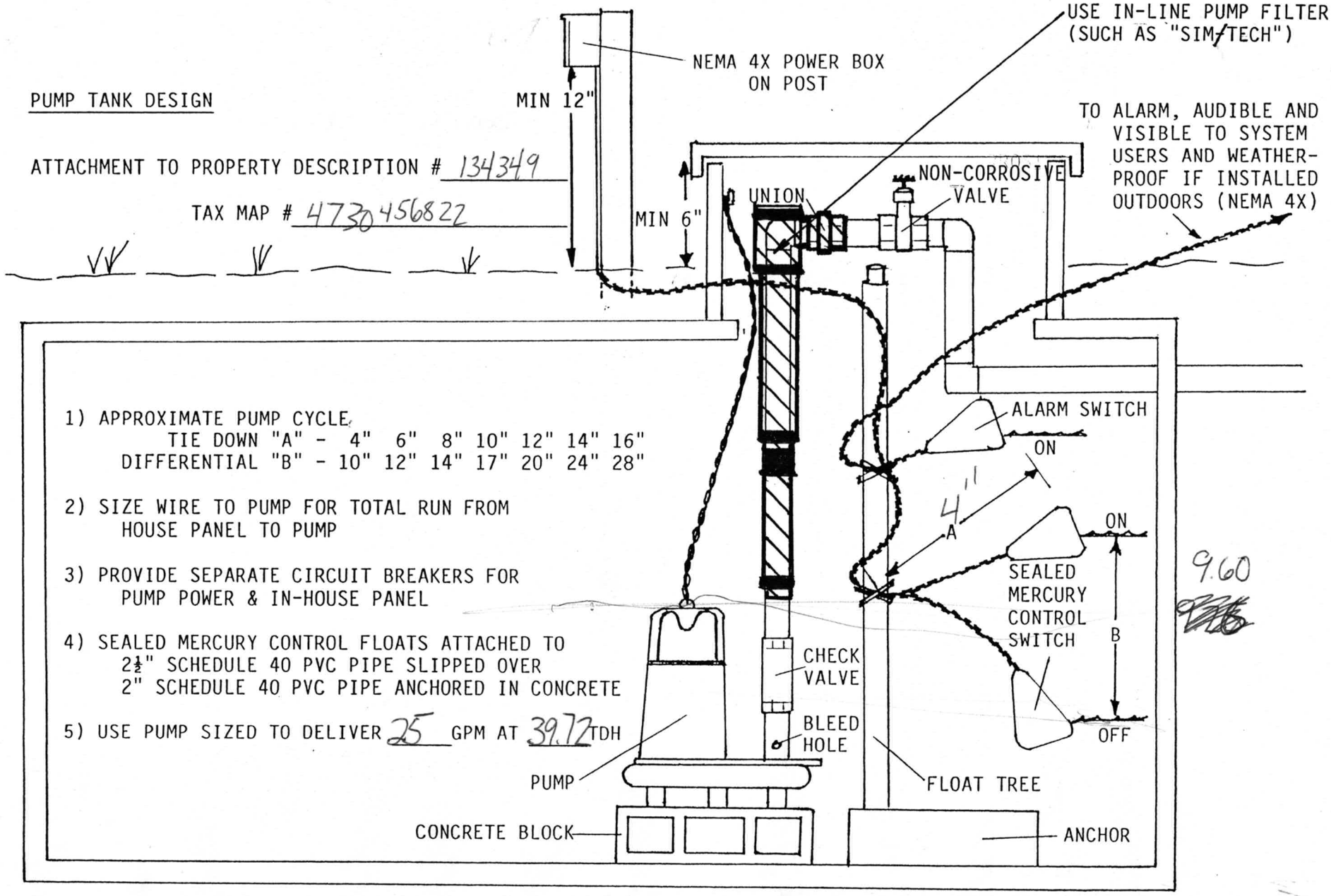
Existing System Inspection by: date

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK

PUMP TANK DESIGN

ATTACHMENT TO PROPERTY DESCRIPTION # 134349

TAX MAP # 473045682 2



1) APPROXIMATE PUMP CYCLE
   TIE DOWN "A" - 4" 6" 8" 10" 12" 14" 16"
   DIFFERENTIAL "B" - 10" 12" 14" 17" 20" 24" 28"

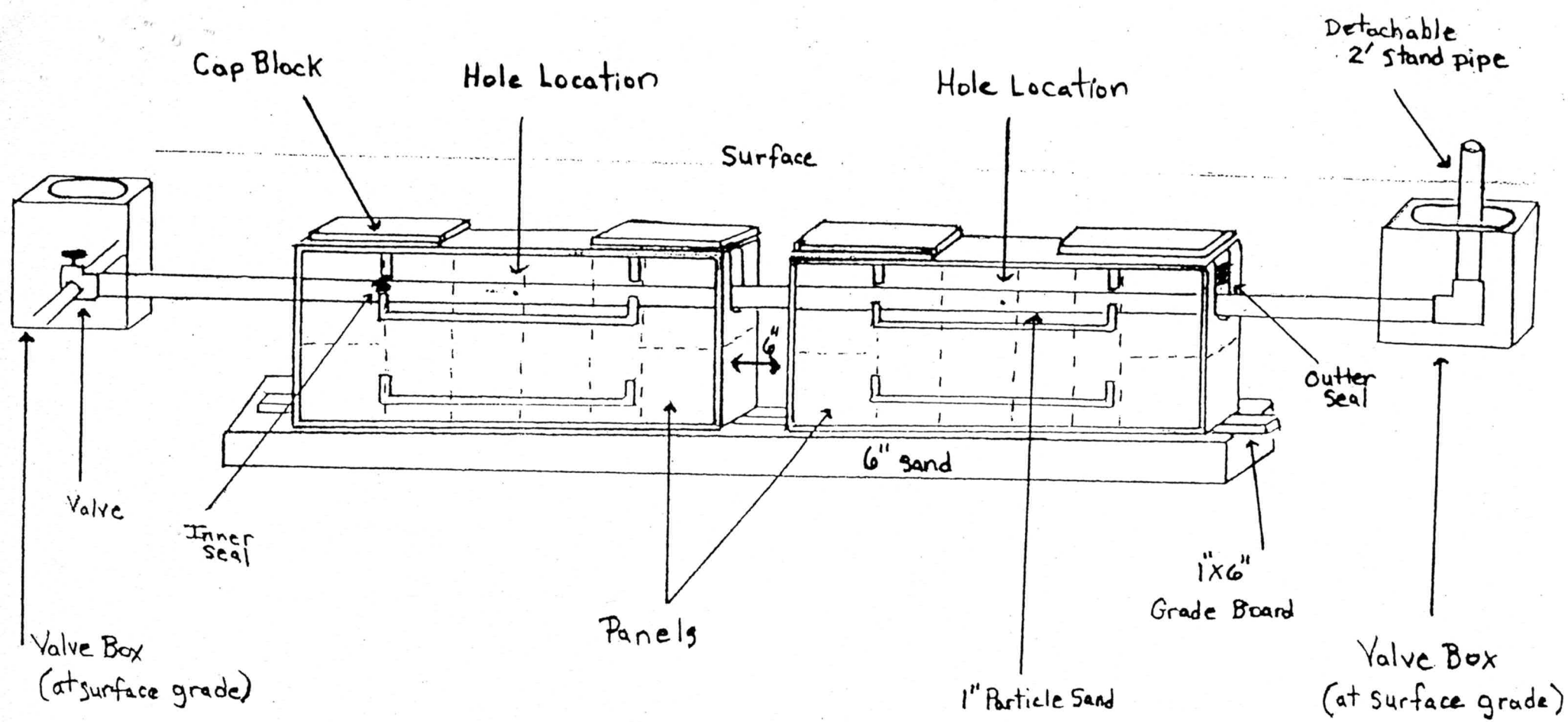
2) SIZE WIRE TO PUMP FOR TOTAL RUN FROM HOUSE PANEL TO PUMP

3) PROVIDE SEPARATE CIRCUIT BREAKERS FOR PUMP POWER & IN-HOUSE PANEL

4) SEALED MERCURY CONTROL FLOATS ATTACHED TO 2½" SCHEDULE 40 PVC PIPE SLIPPED OVER 2" SCHEDULE 40 PVC PIPE ANCHORED IN CONCRETE

5) USE PUMP SIZED TO DELIVER 25 GPM AT 39.72 TDH

9.60



Pressure Dosed PPBPS

# of panels 56.
Size holes 5/32. 1 hole per panel.
Approximate amount of sand needed 39.5 tons.
100lbs. of partical sand per 8 panels.
Sidewalls raked and limed.
GPM 25.
TDH 39.72.

Comments

DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet ____ *of* ____
PROPERTY ID #: _____
COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: _____
ADDRESS: _____ APPLICATION DATE _____
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ DATE EVALUATED: _____
LOCATION OF SITE: _____ PROPERTY SIZE: _____
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____ PROPERTY RECORDED: _____
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		0-16	CL	FR		48+			PS .25
		16-48	C	FR					
2		0-20	CL	FR		48+			PS .25
		20-48	C	FR					
3		0-12	CL	FR		48+			PS .25
		12-48	C	FR					
4									

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

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: _____
OTHER(S) PRESENT: _____

COMMENTS: _____

IREDELL COUNTY HEALTH DEPARTMENT

Application For Improvement Permit and/or Authorization To Construct, Existing System Inspection

(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)

1. **APPLICATION FOR:** ___ Improvement Permit ___Authorization To Construct ___BOTH ___Existing System Inspection

2. **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 check ( ) beside whichever is submitted if applicable ___ Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. **Applicant Information:**

Applicant Name	Mailing Address	Home Phone	Work Phone
Summerwood Homes	173 W Maranta Rd	704-799-8085	
Owner Name	Mailing Address	Home Phone	Work Phone

4. **Property Information:**

Blue Stream Way (Street Address) | Twin Creeks (Subdivision Name) | 1 / 37 (Section/Phase and Lot Number)

Driving Directions: _____

****

5. **RESIDENTIAL Site Development Information:** *(Check or Complete ALL that apply)*

(X) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
( ) Repair To Failing Septic System

Maximum Number of Bedrooms 3
Maximum Number of Occupants ___
If Expansion, Current Number of Bedrooms ___

(X) Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) Basement w/Plumbing?
( ) Basement w/out Plumbing?

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

****

6. **Proposed Water Supply:**

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

****

7. **Desired Septic System Type:** *(You may rank in order of preference, if any)*

( ) Alternative (X) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other_____ ( ) No Preference

****

8. **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. industry) to be generated?
( ) Yes (X) No Is the site subject to approval by any other public agency?

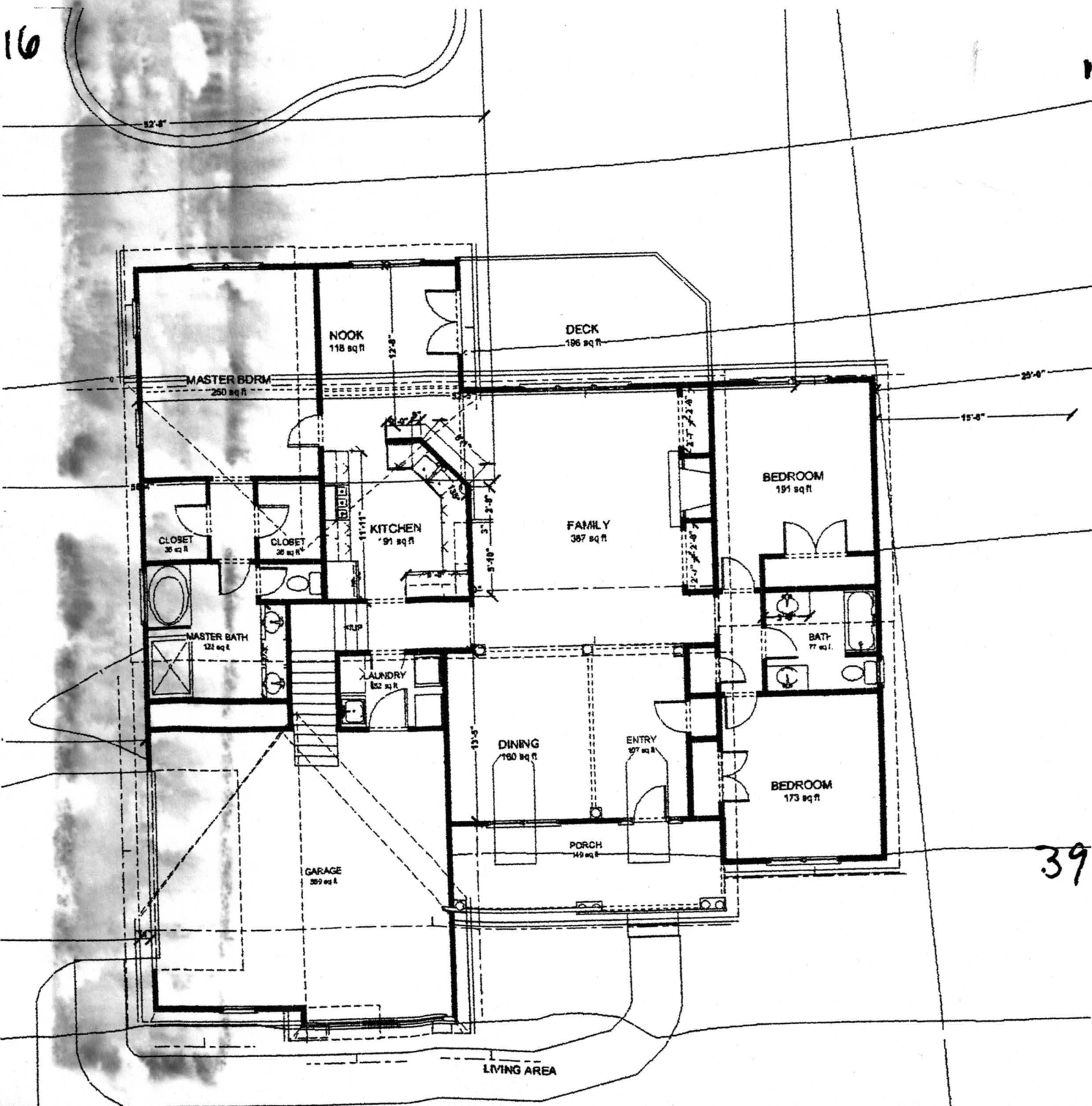
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I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable 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.

9. **Signature:** _____ 3-21-06
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

Acknowledgement Of
Plans Submittal ONLY!
Date 3-27-06
Date 3-28-06

16



39

Iredell County
ZONING PERMIT

227 South Center St. PO Box 788 Statesville, NC 28687 Phone 704-878-3118

Call Sanitarian between 8 a.m. & 9 a.m. Statesville 704-878-5305 Mooresville 704-664-5281

Permit #:	134349ZO	Subdivision:	Twin Creek Estates PH 1
Proposed Use:	Single Family	Township:	1500 Fallstown
Location of Property:	000 Blue Streram Way Troutman NC 28166		
Parcel #:	4730456822.000	Zoning:	Ra
Lot #:	37 Size: 55.336	Flood Plain:	No Watershed: WSIV-PA
Applicant:	Summerwood Homes, LLC	Owner:	RYON-WEST DEVELOPERS LLC
Address:	173 West Maranta Road Mooresville NC 28117	Address:	215 CRYSTAL CIRCLE MOORESVILLE, NC 281150000
Phone:	704-799-8085	Phone:	
Property Recorded:	No Site Plan Reviewed:	Community Water:	No Community Sewer:

If permitted the following minimum requirements must be met, unless Health Department requires more land area, or other qualifications are indicated in the comments.

Min. Lot Area: 21780	Min. Front Yard: 35 ft	Min. Left Side Yard: 15 ft
Min. Lot Width: 100	Min: Rear Yard: 35 ft	Min: Right Side Yard: 25 ft
Min. Number Parking Spaces:		Max. Built Upon Area:

Comments:

Hold Building permit till plat has been recorded

Directions:

State Park Rd, left Tein Creeks Dr,left Rushing Water, left Blue Stream, property on the corner of Blue Stream and Rushing water

FEES

Zoning Permit/Inspection Fee	✓	$45.00
Site Plan Review Fee		$0.00
Environmental Health New System	✓	$350.00
Environmental Health Existing System		$0.00
Total Fees:		$395.00

I certify that all statements made in this application and any attached documents are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that false information may be grounds for rejection of this application. Authorized Health Department and Planning & Enforcement Representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

Applicant: _____ Date: 3/7/06

DEBBIE WILLIAMS

A non-refundable fee of $45.00 is charged on all permit applications.

Printed: 3/7/2006

Iredell County
Planning & Enforcement
227 S. Center St. PO Box 788
Statesville, NC 28687
704-878-3113

Grading Permit

Permit Number: 134349GR

Printed: 3/7/2006

Master #: 134349

Associated Permits:

134349ZO	Zoning
134349GR	Grading

Applicant

Name: Summerwood Homes, LLC
Phone: 704-799-8085
Address: 173 West Maranta Road
Mooresville, NC 28117

Parcel

Parcel Number: 4730456822.037
Zoning: Ra
Address: 000 Blue Streram Way
Troutman, NC 28166
Township: 1500
Area: 55.336
Subdivision: Twin Creek Estates PH 1
Lot(s): 37
Directions to Parcel: State Park Rd, left Tein Creeks Dr,left Rushing Water, left Blue Stream, property on the corner of Blue Stream and Rushing water

Owners

Name: RYON-WEST DEVELOPERS LLC
Address: 215 CRYSTAL CIRCLE
MOORESVILLE, NC 281150000

Contractors

Contractor Type: Building
Name: Summerwood Homes, LLC
Phone: 704-799-8085
Address: 173 West Maranta Road
Mooresville, NC 28117

Fees and Receipts:

Number	Description	Amount
FEE-120867-06	Grading Permit - One and Two Family Dwelling	$45.00
	Total Fees:	**$45.00**