3:00

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 318301

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

PIN # 4730603171

APPLICANT/OWNER: Edward Belanger APPLICANT ADDRESS: 541 Isle of Pines Rd Mooresville, NC 28117

SITE ADDRESS: 157 Winding Shore Rd Troutman, NC PHONE: 6318311461 ALT. PHONE

SITE DIRECTIONS: Perth Rd to TL Winding Forest Pl to Winding Shore SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Winding Forest SECTION: LOT # 18 LOT AREA: .585 Ac DESIGN FLOW: 360 gpd L.T.A.R.: .275

Septic Tank	1CC	(gal)	STB	760	Date	8-12-22	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	
Pump Tank	1CC	(gal)	PT	363	Date	8-16-22	System Description:	Hump-PM-Hort PPBPS			
Pump Make	Zoeller	Model		½ hp	Serial #		Repair System Description:	Hort PPBPS			
# Nitrification Fields	1	# Lines		3	Linear Ft	218	Maintenance Agreement Required:	☐ YES	☒ NO		
Trench Width	36"	Trench Bottom Depth(Low side)		26"	Gravel Depth	N/A		☐ GRAVITY	☒ PRESSURE		

☒ Residence	No. Bedrooms	3	Water Supply		
☐ Business	No. Persons	6	☒ Private		
☐ Other	No. Employees		☐ Public		
☐ Slab	☒ Crawl Space		☐ Community		
☐ Basement w/ plumbing	☐ Basement w/o plumbing				

Comments / Conditions:

Home must be constructed in approved home area.

INITIAL SITE SKETCH

See attached, as previously

Septic plan by Michael Abrams & Assoc (dated 5/9/21)

AS BUILT SKETCH

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 time.

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: 10-18-21 Installed by: Gail Excavation

IMPROVEMENT PERMIT by: Date: 6/28/21 OPERATION PERMIT by: Date: 1/19/23

AUTHORIZATION TO CONSTRUCT by: D. Meberg Date: 5/8/21 Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP 318301

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

PIN # 4730-60--3171

APPLICANT/OWNER: Edward Belanger | APPLICANT ADDRESS: 541 Isle of Pines Rd Mooresville, NC 28117

SITE ADDRESS: 157 Winding Shore Rd Troutman, NC | PHONE: 6318311461 | ALT. PHONE

SITE DIRECTIONS: Perth Rd & TL Winding Forest TR Winding Shore | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Winding Forest | SECTION: | LOT # 18 | LOT AREA: .585 Ac. | DESIGN FLOW: 360 gpd | L.T.A.R.: .275

Septic Tank	1000	(gal)	STB		Date		☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	
Pump Tank	1000	(gal)	PT		Date		System Description:	Pump-PM-Hort. PPBPS			
Pump Make			Model		Serial #		Repair System Description:	Hort. PPBPS			
# Nitrification Fields	1		# Lines	3	Linear Ft	218	Maintenance Agreement Required:	☐ YES	☒ NO		
Trench Width	36"		Trench Bottom Depth(Low side)	20"	Gravel Depth	N/A		☐ GRAVITY	☒ PRESSURE		

☒ Residence	No. Bedrooms	3	Water Supply
☐ Business	No. Persons	6	☒ Private
☐ Other	No. Employees		☐ Public
☐ Slab	☒ Crawl Space		☐ Community
☐ Basement w/plumbing			☐ Basement w/o plumbing

Comments / Conditions:

House must be constructed in approved house area.

INITIAL SITE SKETCH

See attached, approved Septic plan by Michael Athanas & Assoc. (dated 5/19/21)

AS BUILT SKETCH

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 time.

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**

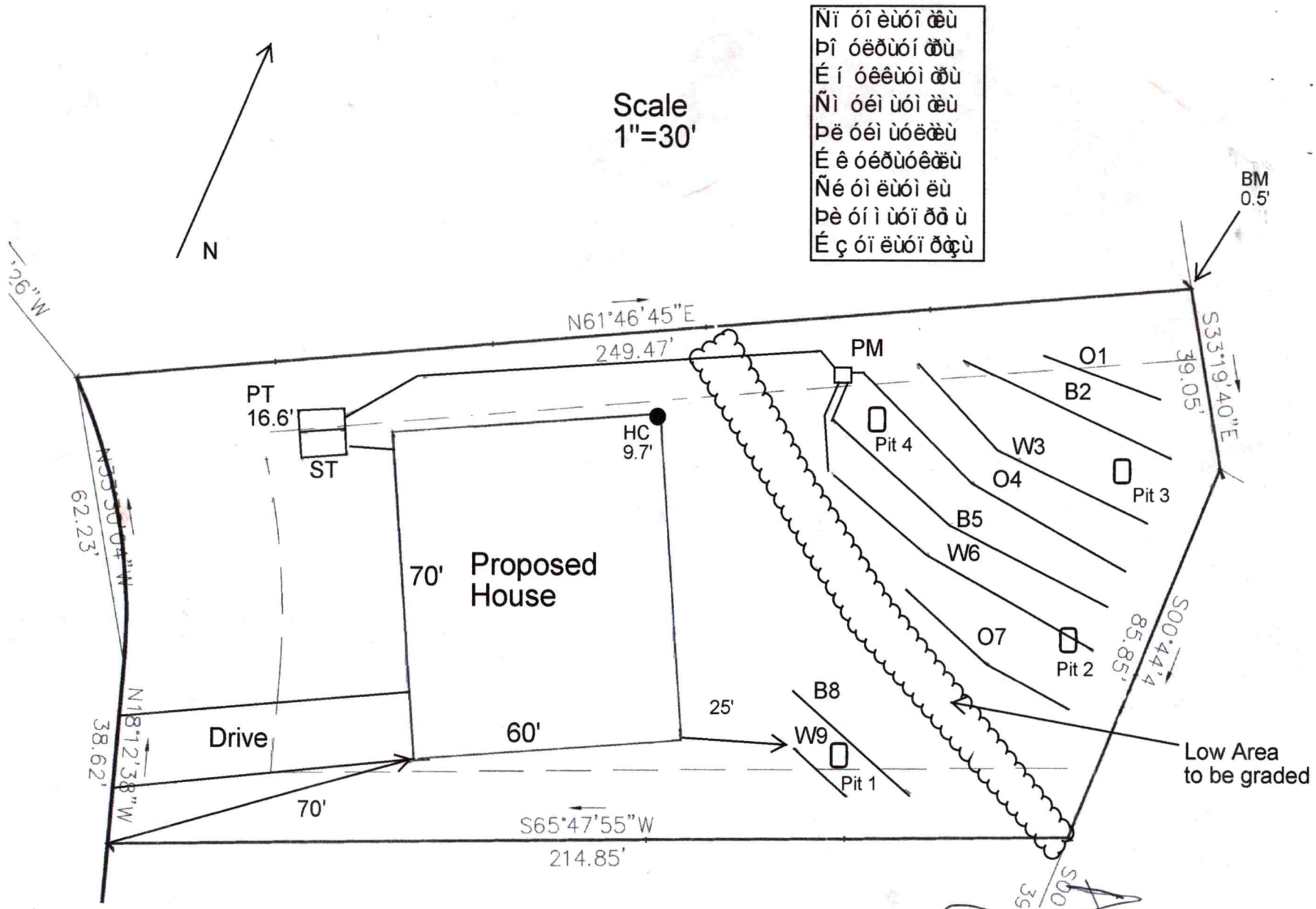
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: [signature] Date: 10-18-21 Installed by:

IMPROVEMENT PERMIT by: [signature] Date: 6/28/21 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: [signature] D. Moberg Date: 8/8/21 Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.


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Scale
1"=30'
N
BM
0.5'
N61°46'45"E
249.47'
S33°19'40"E
39.05'
PM
PT
16.6'
ST
HC
9.7'
70'
Proposed
House
Drive
60'
25'
70'
S65°47'55"W
214.85'
62.23'
38.62'
O1
B2
W3
O4
B5
W6
O7
B8
W9
Pit 1
Pit 2
Pit 3
Pit 4
S00°44'4
85.85'
Low Area
to be graded
Approved
6/28/21



Approved
6/28/21
MD

MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
556 Walden Trail
Weddington, NC 28173
(704) 576-3887
5/19/2021

Reference: Data Sheet for 157 Winding Shore Rd, Winding Forest Lot 18
House Footprint: See attached plan
Building Setbacks: 35' front/rear, 15' side
Water Source: Community well
Number of Bedrooms/Daily Flow: 3/360 GPD
Proposed LTAR: 0.275 GPD/FT^2
Proposed System Type: Horizontal PPBPS
Proposed Repair System Type: Horizontal PPBPS
Distribution: Pressure Manifold
Flow per Tap: 7.11 GPM
Tap Size and Material: ½" SCH 40
System Flow: 21.33 GPM
Dosing Volume: 180 gallons
Pump Run Time: 8.4 minutes
Elevation Head: 16.8'
Friction Head: 1.5'
Pressure Head: 2'
Total Dynamic Head: 20.3'
Supply Line Length: 115' of 2" PVC
Septic/Pump Tank Size: 1000/1000
Proposed Trench Bottom: 20"

LICENSED SOIL SCIENTIST
MICHAEL
STATE OF NORTH CAROLINA

Line	Design Length	# of Panels	Actual Length	Elevation
Orange 1			28'	2.6'
Blue 2			50'	3.0'
White 3			66'	4.0'
Orange 4	**74'**	**17**	**74'**	**4.8'**
Blue 5	**74'**	**17**	**88'**	**5.8'**
White 6	**70'**	**16**	**72'**	**6.5'**
Orange 7			45'	7.5'
Blue 8			34'	10.4'
White 9			15'	10.9'

Initial System: 218' **Repair System:** 238'
Pump Tank: 16.6' **House Corner:** 9.7'
Benchmark: 0.5'

Comments:
The low area behind the house should be graded/filled without compromising the septic area.

PROPERTY ID #: 4730603171
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

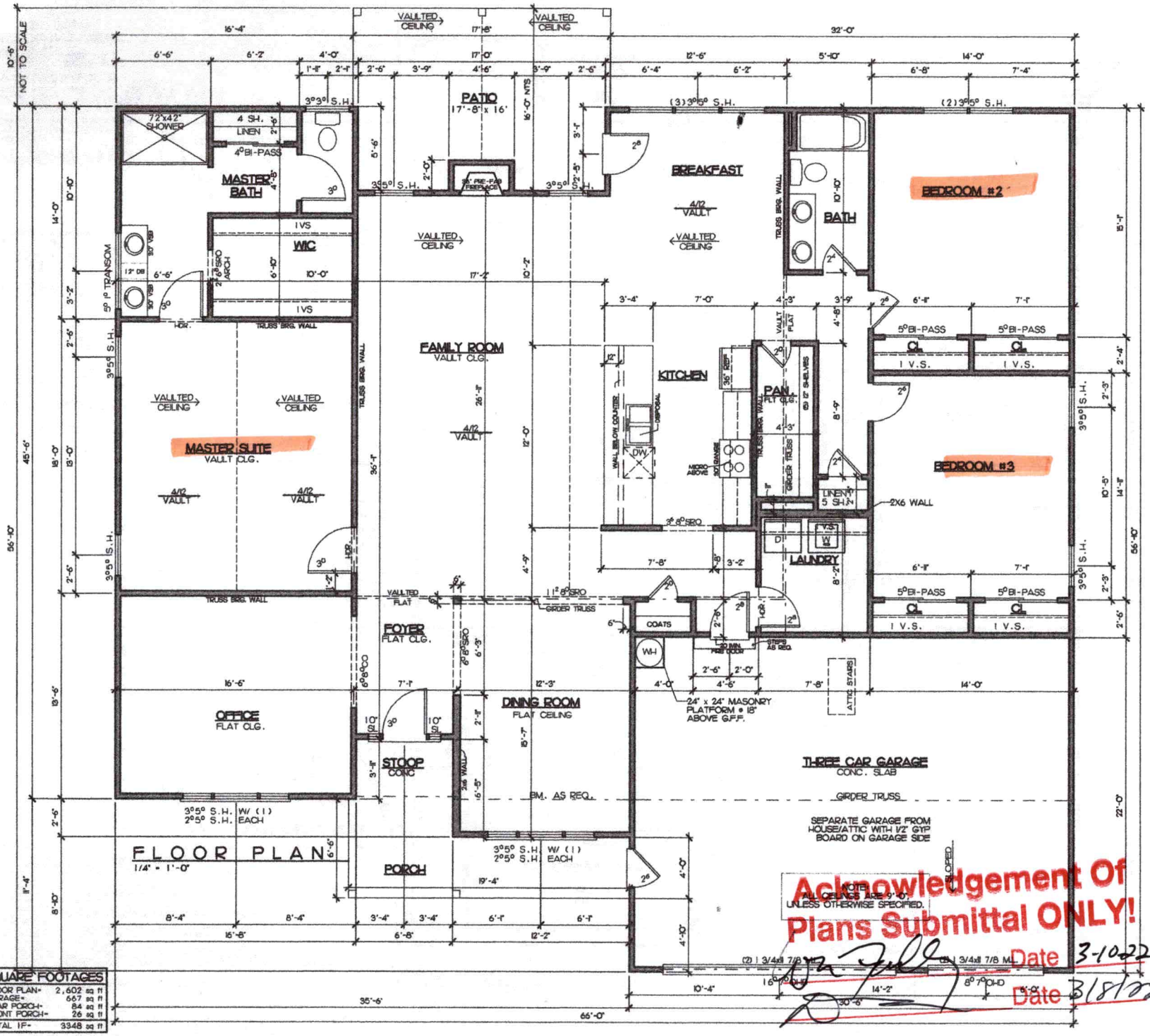
OWNER: Daniel Scott Terry _____ APPLICATION DATE _____
ADDRESS: 707 Circleview Dr, Beckley, WV 25801 _____ DATE EVALUATED: _____
PROPOSED FACILITY: 3 BDRM _____ PROPOSED DESIGN FLOW (.1949): 360 GPD _____ PROPERTY SIZE: 0.585 AC _____
LOCATION OF SITE: 157 Winding Shore Rd, Winding Forest Lot 18 _____ PROPERTY RECORDED: _____
WATER SUPPLY: ☐ Private X Public ☐ 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	LS 8%	0-8	Br SCL WSBK	FR SS SP SXP	Mn Few YB @ 36"	49"	N/A	N/A	PS 0.275 TO 36" 0.25 > 36"
		8-49	R C SBK	FR SS SP SXP					
			Observed Chroma 2 @ 46"						
2	LS 8%	0-8	Br SCL WSBK	FR SS SP SXP	Mn YB @ 38"	50"	N/A	N/A	PS 0.275 TO 38" 0.25> 38"
		8-50	R C SBK	FR SS SP SXP					
3	LS 6%	0-6	Br SCL WSBK	FR SS SP SXP	Few YB Com YB	50"	N/A	N/A	PS 0.275 TO 33" 0.25>33"
		6-33	R C SBK	FR SS SP SXP					
		33-40	R C ABK	FR SS SP SXP					
		40-50	R CL WSBK	FR SS SP SXP					
				Observed Chroma 2 @ 38"					
4	LS 8%	0-8	Br SCL WSBK	FR SS SP SXP	Few YB/Litho	49"	N/A	N/A	PS 0.275
		8-36	R C SBK	FR SS SP SXP					
		36-49	R CL WSBK	FR SS SP SXP					
		One side of Pit			Chroma 2 @ 42"				

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	654 FT^2	714 FT^2
System Type(s)	Horz PPBPS	Horz PPBPS
Site LTAR	0.275	0.275

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____PS_____
EVALUATED BY: _____MA&A_____
OTHER(S) PRESENT: _____

COMMENTS: _____



SQUARE FOOTAGES	
FLOOR PLAN=	2,602 sq ft
GARAGE=	667 sq ft
REAR PORCH=	84 sq ft
FRONT PORCH=	26 sq ft
TOTAL I.F.=	3348 sq ft

Acknowledgement Of Plans Submittal ONLY!

Date 3-10-22

Date 3/18/22

GARAGE RIGHT

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Charlotte NC
704-542-9058
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WINDSTONE ESTATES

Project: THE MADISON

Sheet Title: FIRST FLOOR PLAN

DR. BY: BRIAN G.
Date: 06-06-08
REV: 02-22-18, 02-26-18, 03-07-18, 03-20-18, 12-01-21
Site:

Madison-FP_REV

Sheet 3

RECEIVED MAY 27 2021

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Paid $350.00 AP-318301

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) 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) Please contact Gary McNeely (704-310-1832) prior to evalution

Applicant Name: Edward Belanger Address: 541 Ilse of Pines Rd, Mooresville, NC Zip: 28117
Applicant Email: _____ Phone: 631-831-1461 Alt. Phone: _____
Owner Name: Same Address: _____ Zip: _____
Owner Email: _____ Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 157 Winding Shore Rd
Subdivision Name: Winding Forest Section/Phase: _____ Lot Number: 18
Driving Directions: _____

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

(X) 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
(X) 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: _____

(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 ( ) Innovative (X) 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: _____ 5/27/2021
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

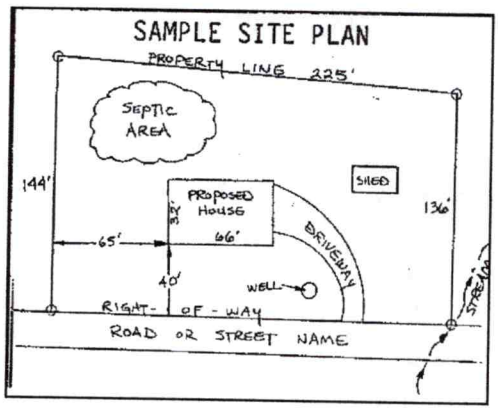
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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:

- ( ) Property Line measurements are clearly identified
- ( ) All proposed structures are indicated
- ( ) Front and side setbacks from property line
- ( ) Preferred driveway location
- ( ) Preferred well location
- ( ) 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 Plan

Signature: _____

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

5/27/2021

DATE

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, Edward Belanger, am the legal owner(s) of the property located at 157 Winding Shore Rd Winding Forest Lot 18, identified as PIN (Parcel Identification Number) 4730603171, located in Iredell County, North Carolina.

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

Signature of Owner(s)	Date	Signature of Witness	Date
	5/26/2021		

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

ENVIRONMENTAL HEALTH REQUIREMENTS for SEPTIC and WELL PERMITS

The following items must be completed *PRIOR* to the *SUBMITTAL* of any Environmental Health Application. Incomplete applications will be returned to the applicant and cannot be processed or placed on the work list.

***** Initial all lines below to indicate you have submitted each form and completed every site requirement *****

✓ **Complete all Environmental Health forms**:
- ✓ Application
- ✓ Site Plan with dimensions of proposed structure, addition, pool etc.
- ✓ Documentation to Authorize Owner Agent (if the property owner is not the applicant)
- ✓ Copy of Zoning Permit when applicable
- ✓ Sign this sheet after you have completed all items

✓ **Lot must be cleared of heavy undergrowth.** In order to evaluate the lot, the footprint of the proposed structure must be visible. Adequate area for the septic drain field and repair area must be sufficiently cleared of heavy undergrowth, with **50 feet of visibility** in all directions. Inspectors must be able to evaluate the property, shoot laser level elevations, layout the drain field, do soils work, etc. **If the lot is not cleared sufficiently, then a $100 site revisit fee will be charged and the evaluation will be put on HOLD until the requirement is met.**

✓ **Clearly mark all property corners by locating existing iron or concrete markers**. Flag all property lines every 25 feet if adjacent corners are not visible when standing on any given corner. Property lines must be flagged by a licensed NC surveyor & easily identified **prior to application submittal** (exception may apply for septic repair evaluations only).
'Mow lines' and/or fence lines do NOT constitute marked lines. **If the property lines are not properly marked when the lot is ready to be evaluated, then the application will be put on HOLD and a $100 site re-visit fee charged**.

✓ **Stake or flag the footprint of the proposed structure, addition, pool etc. to match the site plan submitted.** The proposed structure, etc. **must be staked** out on the property as per the site plan.

✓ If an **Authorization to Construct (AC) is desired**, submit a recorded copy of the plat for newly created or subdivided lot(s) and a LEGIBLE copy of the basic floor plan no larger than 8 ½" x 14" for each floor of the structure including decks, porches, etc. **The overall dimensions must be clearly noted & the rooms labeled.**

Any site not meeting the above requirements when staff arrives for the evaluation will result in a $100 site revisit fee being charged and the request being placed on HOLD. This will delay the processing of the application.
Once work by Environmental Health staff begins, the up-front fees paid toward securing any health department permit are non-refundable. Refunds for work not started, due to a customer changing their mind or plans, are subject to an administrative fee of $50 to defray a portion of the costs of processing the refund.

Backhoe pits are required for all applications that require a soils evaluation.
DO NOT DIG PITS UNTIL THE EH SPECIALIST HAS AUTHORIZED AND SCHEDULED YOUR EVALUATION TIME.
- **All utilities shall be marked before pits are dug. Call NC 811 for this service.**
- **The applicant/agent is responsible for securing these services**
- **Backhoe pits are to be dug at the locations and depths determined by the Environmental Health Specialist or a NC Licensed Soil Scientist. A minimum of four pits must be dug.**
- **The EH specialist will contact you when your application is ready to be processed for pit scheduling.**
- **Your backhoe operator must be on site during the EH Specialist's evaluation to prevent your operator from having to return to the property for additional work.**

By signing below I am acknowledging the above specifications have been met and the site is READY to be evaluated AND I understand the backhoe pit requirement and will secure those services (if applicable).

Signature _____ **Date** 5/27/2021

Questions? Contact the Environmental Health Offices below:

Statesville Office
349 North Center Street (2nd Floor Building Standards)
Statesville, NC 28677-4063
Phone: (704)878-5305 ext. 3456

Mooresville Office
610 East Center Avenue (2nd Floor Govt. Center South)
Mooresville, NC 28115-2548
Phone: (704)660-3625