CHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP 3167167

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

PIN # 4730 -- 71 -- 4925

APPLICANT/OWNER: Chris Emory | APPLICANT ADDRESS: 14310 Promenade Dr. Huntersville NC 28078

SITE ADDRESS: 122 Shady Cove Rd, Troutman NC 28166 | PHONE: 704-632-5578 | ALT. PHONE 704-928-7019 (Jeff-Schumacher)

SITE DIRECTIONS: (W) NC 150 → (R) Perth → (L) Shady Cove → lot on (R) | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Shady Cove Acres | SECTION: — LOT # 7 | LOT AREA: 0.52 ac | DESIGN FLOW: 360 gpd | L.T.A.R.: 0.3 (I) / 0.1 (R)

Septic Tank	1000 (gal)	STB 7160	Date 3/29/22	☒ New System ☐ Repair ☐ Expansion	System Type: I II III (IV) V VI	☒ Residence	No. Bedrooms 3	Water Supply: ☒ Private
Pump Tank	1000 (gal)	PT 3613	Date 5/23/22	System Description:	LPP-HPP3BPS	☐ Business	No. Persons 6	☐ Public
Pump Make	Sep30 Dnp	Model Sep30 05121	Serial #	Repair System Description:	partial - exempt	☐ Other	No. Employees	☐ Community
# Nitrification Fields	1	# Lines 16	Linear Ft 200'	Maintenance Agreement Required:	☒ YES ☐ NO	☐ Slab	☐ Crawl Space	
Trench Width	36"	Trench Bottom Depth	32' MAX	Gravel Depth	N/A	☒ Basement w/plumbing	☐ Basement w/o plumbing	

100 ft² drip

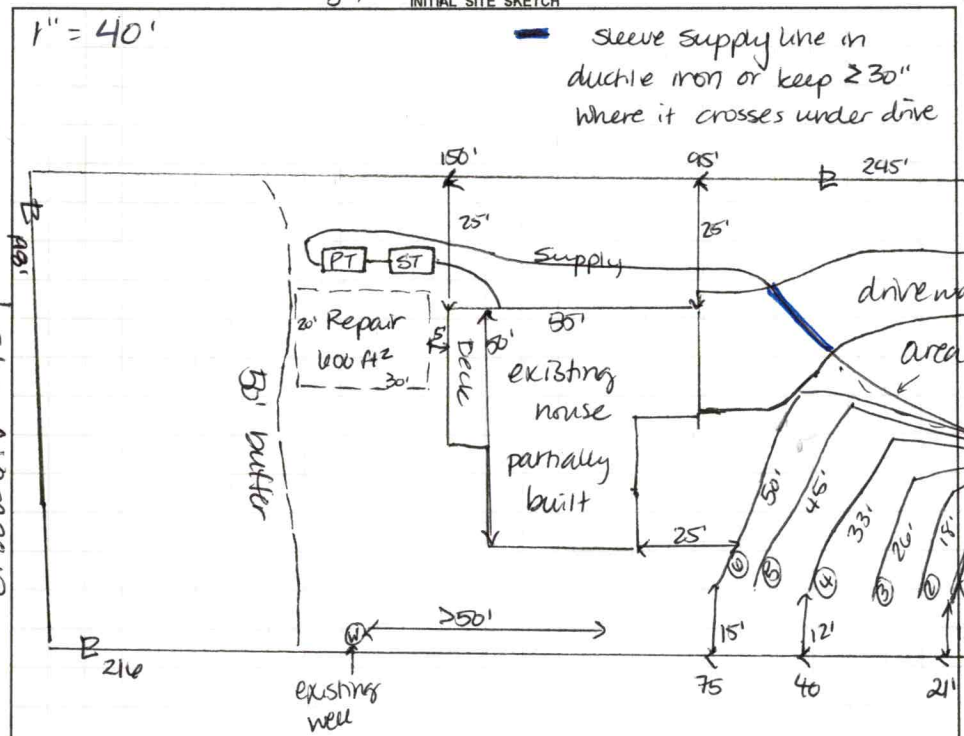
Comments / Conditions: Do not install outside of system area indicated - lot has been graded & filled - only suitable area is shown. Divert all drainage, stay 25' from front of house.

2" supply, 3' pressure head

5/32" holes

Dose = 158.4 g
Flow = 22 gpm
Run = 7.2 min
Drawdown = 7.5"

INITIAL SITE SKETCH


1" = 40'
Sleeve supply line in ductile iron or keep ≥30" where it crosses under drive
150'
95'
245'
25'
25'
PT
ST
Supply
drive way
20' Repair 600 ft²
30'
5'
Deck
50'
existing house partially built
area of fill
50' buffer
Lake Norman
Shady Cove Rd
CVB
IP
A92'
B
B
B

Item	Date	Initials
Drain Lines Checked	7/13/22	DW
Tanks Checked	7/13/22	DW
Pressure Manifold or Valve Box Checked	7/13/22	DW
Pressure Head Set	7/13/22	DW
Electrical Checked	8/23/22	NW
Floats Set	7/13/22	DW
Alarm Checked	8/23/22	NW
Maintenance Contract Needed? (Y) / N		
Comments:		

Repairs Only	
	State Code
Failing System Code	
Type of Distribution	G or P
Type of Failure/Malfunction	
Primary Cause of Failure/Malfunction	
Age of System? _____	
Initial or Repair? _____	

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 3167767

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

PIN # 4730 -- 71 -- 4925

APPLICANT/OWNER: Chris Emory APPLICANT ADDRESS: 14310 Promenade Dr. Huntersville NC 28078

SITE ADDRESS: 122 Shady Cove Rd, Troutman NC 28166 PHONE: 704-632-5578 ALT. PHONE 704-928-7019 (Jeff-Schuma

SITE DIRECTIONS: (W) NC 150 → (R) Perth → (L) Shady Cove → lot on (R) SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Shady Cove Acres SECTION: — LOT # 7 LOT AREA: 0.52 ac DESIGN FLOW: 360gpd L.T.A.R.: 0.3(I)/0.1

Septic Tank	1000	(gal)	STB	7160	Date	3/29/22	☒ New System	☐ Repair	☐ Expansion	System Type: I II III (IV) V VI	
Pump Tank	1000	(gal)	PT	3603	Date	5/23/22	System Description:	LD-HPPBPS			
Pump Make	Step Tech Corp		Model	Step 20 05121	Serial #		Repair System Description:	partial - exempt		100 ft² drip	
# Nitrification Fields	1		# Lines	6	Linear Ft	200'	Maintenance Agreement Required:	☒ YES	☐ NO		
Trench Width	36"		Trench Bottom Depth (Elevation)	32" max.	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

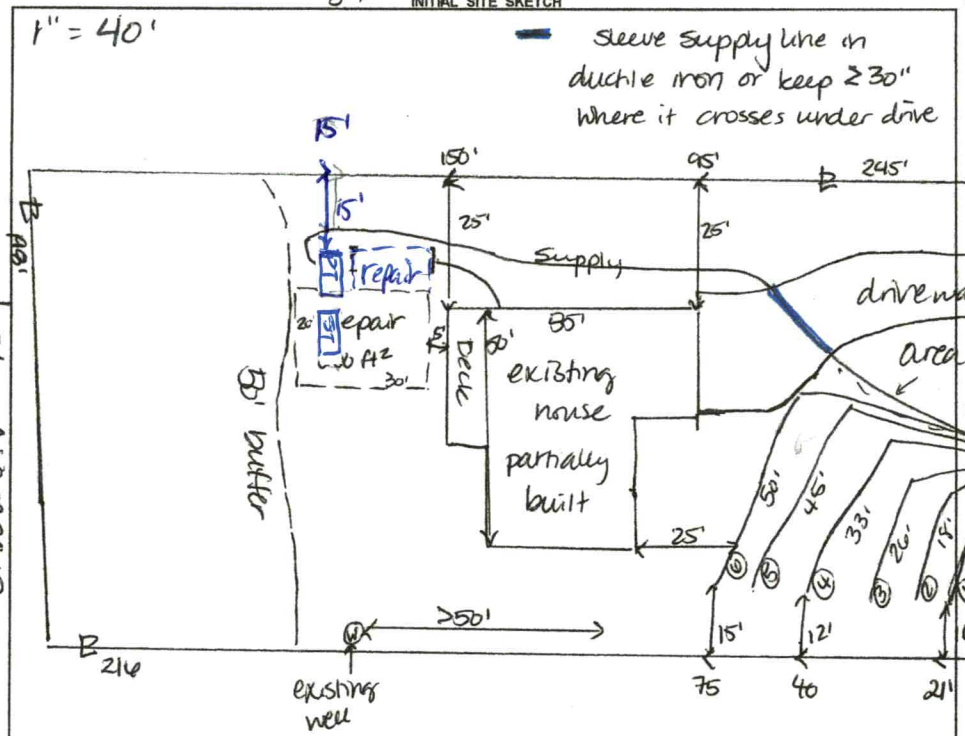
Comments / Conditions: Do not install outside of system area indicated - lot has been graded & filled - only suitable area is shown. Divert all drainage, stay 25' from front of house

2" supply, 3' pressure head

#5/32" holes #

Dose = 158.4 g
Flow = 22 gpm
Run = 7.2 min Drawdown = 7.5"

INITIAL SITE SKETCH



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.

① = 6 panels
② = 4 panels
③ = 6 panels
④ = 7 panels
⑤ = 10 panels
⑥ = 11 panels

must set w/ 3' pressure head to achieve scour velocity

As Built

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: Christin Emory Date: 6/27/22 Installed by: Stevens Septic

IMPROVEMENT PERMIT by: D. Wreberg Date: 6/28/22 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: D. Wreberg Date: 6/28/22 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 # 3167167

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

PIN # 4730-71-4925

APPLICANT/OWNER: Jennifer Mech / Sheila McMillan APPLICANT ADDRESS: 13620 Reese Blvd E 130, Huntersville, NC 28078

SITE ADDRESS: 122 Shady Cove Rd, Troutman, NC 28166 PHONE: 704-526-8252 ALT. PHONE

SITE DIRECTIONS: (N) Perth → (L) Shady Cove → lot on (R) SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Shady Cove Acres SECTION: — LOT # 7 LOT AREA: 0.52 ac DESIGN FLOW: 360 gpd L.T.A.R.: 0.3(I)/0.275(R)

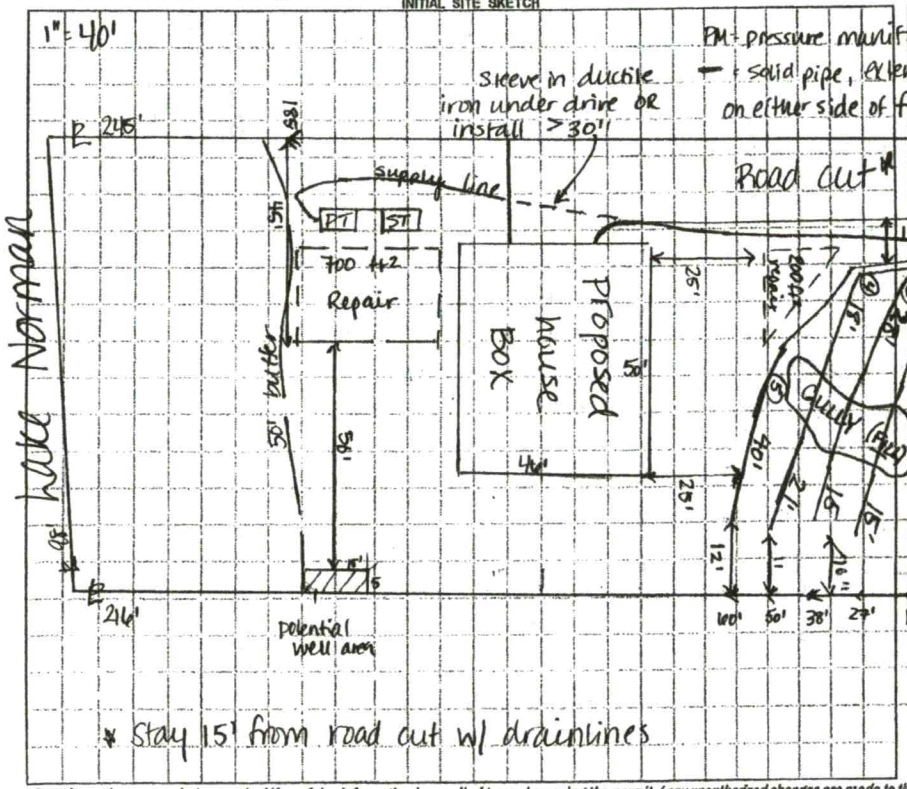
Septic Tank	1000	(gal)	STB		Date	☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 3
Pump Tank	1000	(gal)	PT		Date	System Description:	HPPBPS-PM 50% Red			☐ Business	No. Persons 6
Pump Make			Model		Serial #	Repair System Description:	Partial - repair exempt (900ft2) drip			☐ Other	No. Employees
# Nitrification Fields	1	# Lines	5	Linear Ft:	202'	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☐ Crawl Space
Trench Width	36"	Trench Bottom Depth(Low side)			24"	Gravel Depth	N/A	☐ GRAVITY	☒ PRESSURE	☒ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

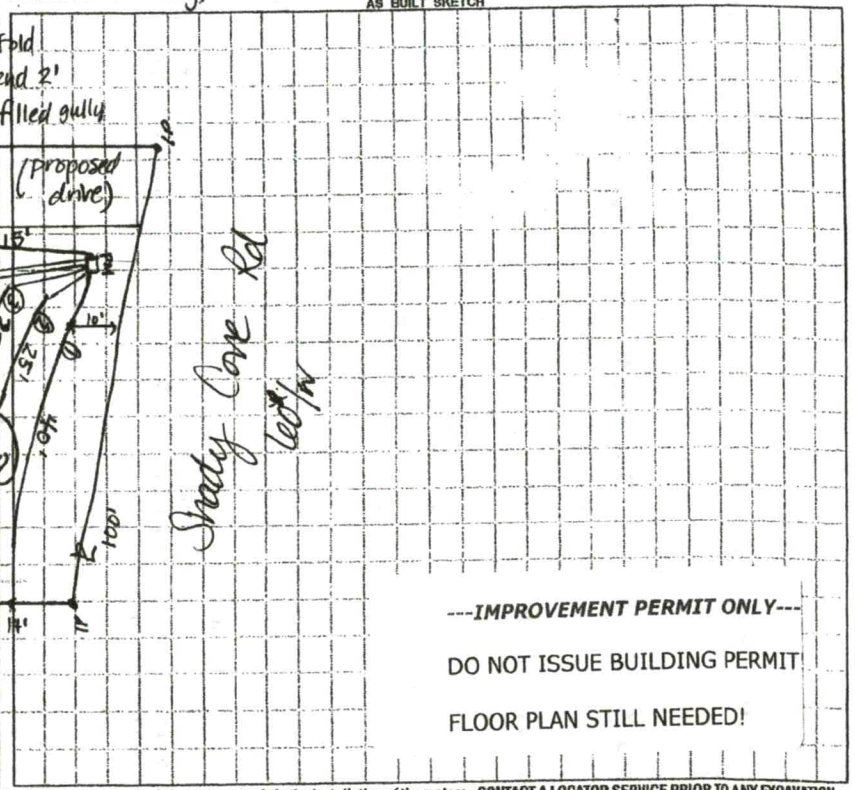
Comments / Conditions: DO NOT grade lot - will become SAP control, no room for a well. Fill gully - solid pipe across it & 2' either side. Install on contour. Divert all drainage from drainfields

Lines ①, ②, ④ & ⑤ = 9 panels Line ③ = 10 panels
Dose = 165.6 g PM → 1½ SCH40 taps each line
Flow = 27.4 gpm 60 min run time 7.88" drawdown

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: 6/29/21 Installed by:

IMPROVEMENT PERMIT by: D. Wiebers Date: 5/8/21 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-878-5703 between 8am-9am the day the inspection is needed. Be sure to speak with an inspector to confirm your inspection time.

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

(Check and sign only ONE of the options below)

☐ **1. * APPLICANT AND OWNER ARE THE SAME. *** (*Sign here*) _____

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.

☐ **2.** I, Chris Emory, am the legal owner(s) of the property located at 122 Shady Cove Rd. Troutman, NC, identified as PIN (Parcel Identification Number) 4730-71-4925, 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.

_____ 7/2/21
Signature of Owner(s) Date

Mooresville - Environmental Health
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

Sheet 1 of 1
PROPERTY ID #: 4730 71 4925
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM
(Complete all fields in full)

OWNER: Sheila McMillan
APPLICATION DATE
ADDRESS: PO Box 9 West Jefferson NC 28694
DATE EVALUATED: 5/5/21
PROPOSED FACILITY: 3BR
PROPOSED DESIGN FLOW (.1949): 360 gpd
PROPERTY SIZE: 0.52
LOCATION OF SITE: 122 Shady Cove, Troutman NC 28166
PROPERTY RECORDED: YES -
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) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	hS 17"	0-8	CL - SBK	SSSP - FR - SEXP	Heavy sap incl 30-44"	44"	L		PS 0.3
		8-13	C - SBK	SSSP - FR - SEXP					
		13-30	CL - SBK	SSSP - FR - SEXP					
		30-44	CL - WSBK	SSNP - FR - SEXP					
		44-50	SAP - L - M	SSNP - VFR -					
2	hS 17"	0-17	CL - SBK	SSSP - FR - SEXP	Heavy sap content 30-44"	44"	L		PS 0.3
		17-19	C - SBK	SSSP - FR - SEXP					
		19-30	CL - SBK	SSSP - FR - SEXP					
		30-44	CL - WSBK	SSNP - FR - SEXP					
		44-48	SAP - L - M	SSNP - VFR					
3	FS 14"	0-18	CL - SBK	SSSP - FR - SEXP	Some LB mottling around roots	48"	N/A	N/A	PS 0.275
		18-30	C - SBK	SSSP - FR - SEXP					
		30-48	CL - SBK	SSSP - FR - SEXP					
4	FS 14"	0-19	C - SBK	SSSP - FR - SEXP	2.5Y 6/2 @ 29" 5/2 @ 29" mottling light brown around roots	48"	N/A	N/A	PS 0.275
		19-48	CL - SBK	SSSP - FR - SEXP					

Stumphole

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	210	exempt partial
System Type(s)	50% Red PM	50% red
Site LTAR	0.3	

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: D. Weber
OTHER(S) PRESENT: J. Williams

COMMENTS: 8" slope

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	SEXP (Slightly Expansive)	G (Single Grain)
CV (Convex Slope)		LS (Loamy Sand)			EXP (Expansive)	M (Massive)
D (Drainage Way)						CR (Crumb)
DS (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
FP (Flood Plain)		L (Loam)				SBK (Subangular Blocky)
FS (Foot Slope)						ABK (Angular Blocky)
H (Head Slope)	III	Si (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
L (Linear Slope)		SiCL (Silty Clay Loam)				PR (Prismatic)
N (Nose Slope)		CL (Clay Loam)				
R (Ridge)		SCL (Sandy Clay Loam)			**MOIST**	**WET**
S (Shoulder Slope)		SiL (Silt Loam)				
T (Terrace)					VFR (Very Friable)	NS (Non-sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FR (Friable)	SS (Slightly Sticky)
		SiC (Silty Clay)			FI (Firm)	S (Sticky)
		C (Clay)			VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
		O (Organic)	None	None	EFI (Extremely Firm)	NP (Non-plastic)
						SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

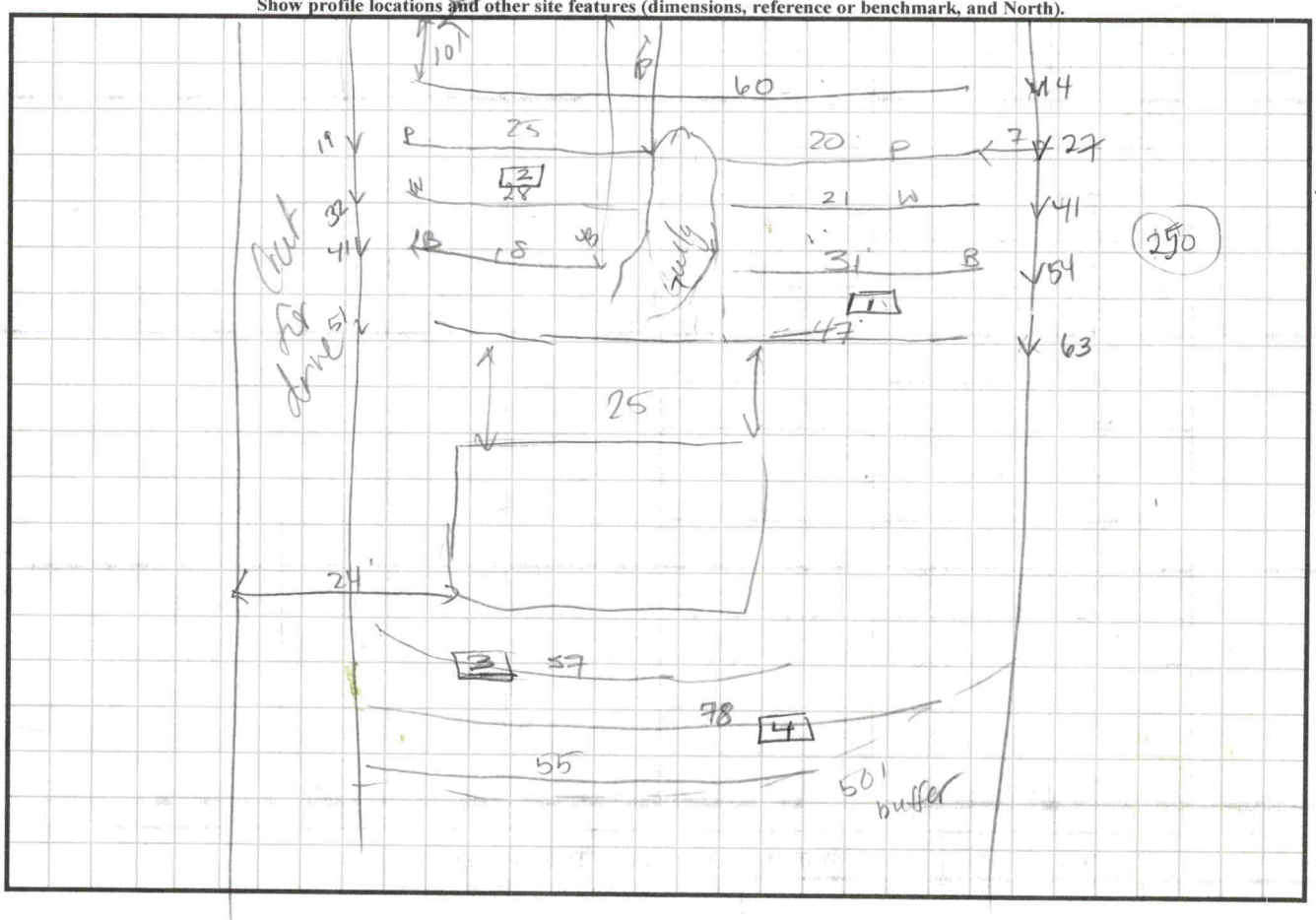
NOTES

HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
CLASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.

Long-term Acceptance Rate (LTAR): gal/day/ft^2

Show profile locations and other site features (dimensions, reference or benchmark, and North).



10/26/2021

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED

comp relayout $500.00

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM* AP-316767

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: Chris Emory Address: 14310 Promenade Dr. Huntersville Zip: 28078
Applicant Email: CSemoryegmail.com Phone: 724-632-5578 Alt. Phone: _____
Owner Name: " " Address: _____ Zip: _____
Owner Email: _____ Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 122 Shady Cove Rd.
Subdivision Name: Shady Cove Acres Section/Phase: — Lot Number: 7
Driving Directions: _____

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

CHECK FOUNDATION TYPE

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

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.

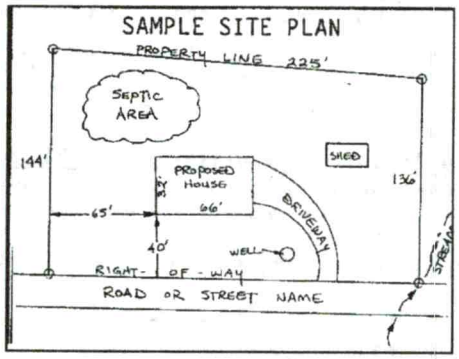
Signature: _____ 7/7/21
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

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

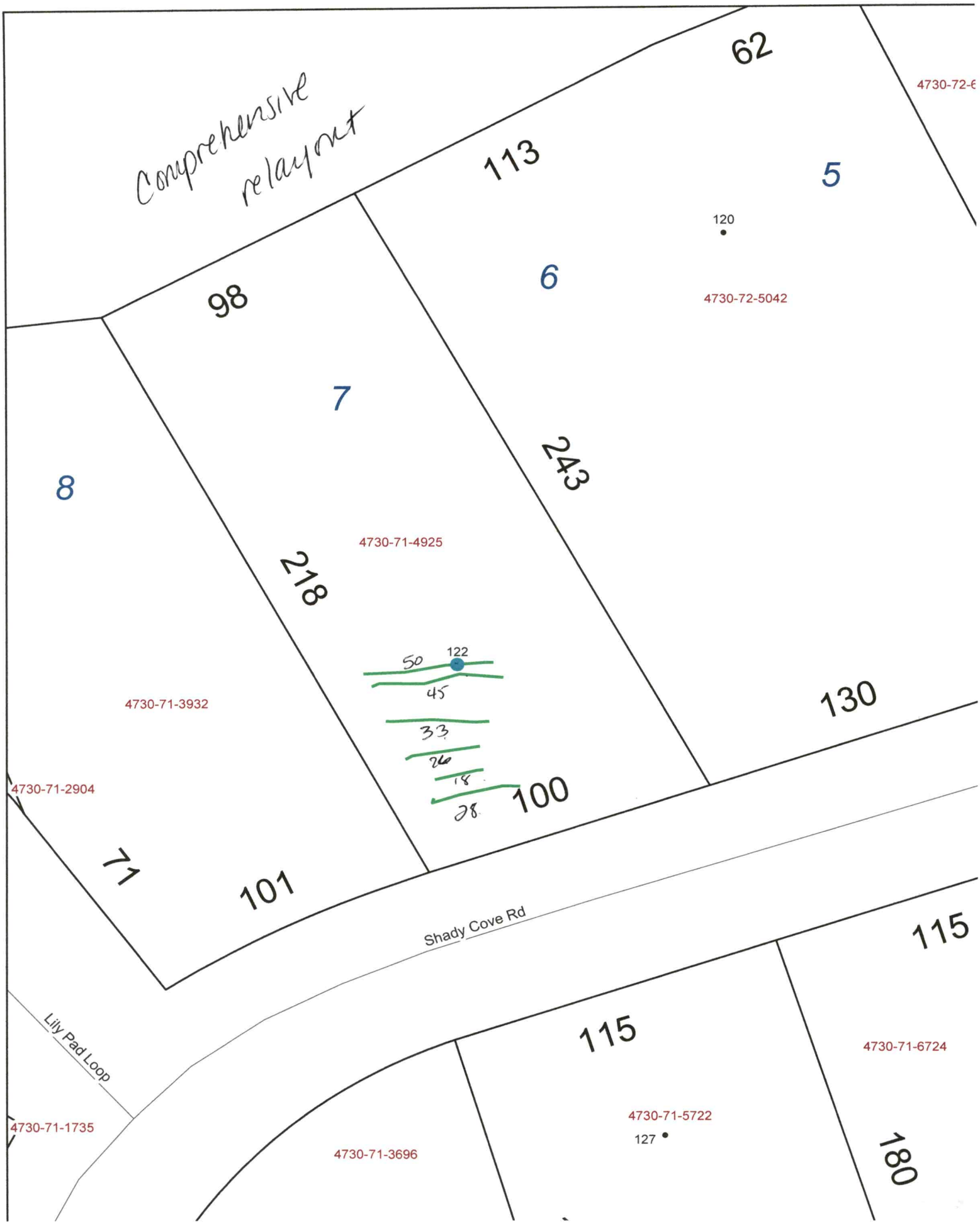
- See Attached Septic Permit

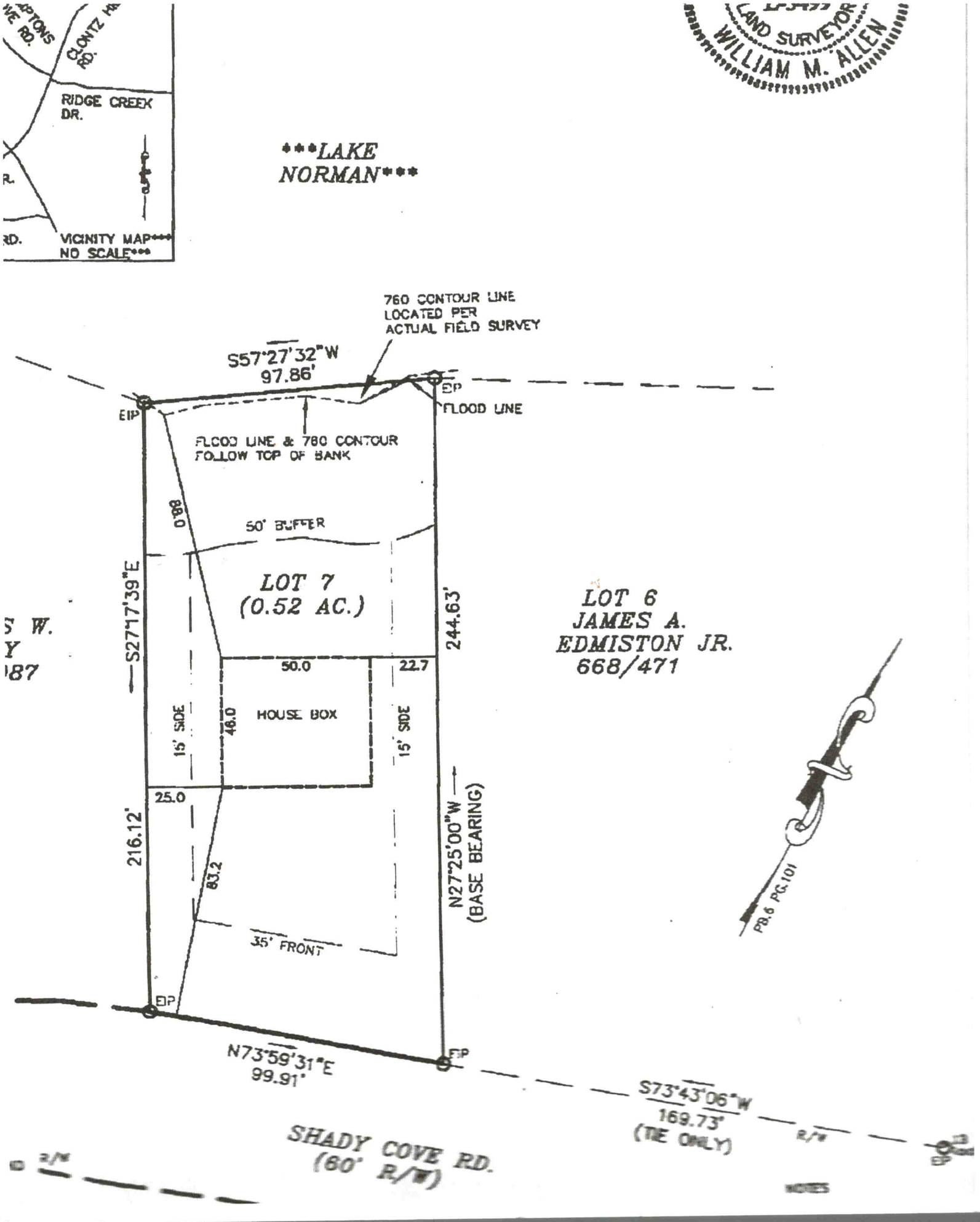
Signature: _____

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

7/7/21

DATE


Comprehensive relayout
62
4730-72-6
113
5
120
6
4730-72-5042
98
7
8
243
4730-71-4925
218
50
122
45
33
26
18
28
100
130
4730-71-3932
4730-71-2904
71
101
Shady Cove Rd
115
Lily Pad Loop
115
4730-71-6724
4730-71-5722
127
4730-71-1735
4730-71-3696
180


RIDGE CREEK DR.
VICINITY MAP
NO SCALE
LAKE NORMAN
760 CONTOUR LINE LOCATED PER ACTUAL FIELD SURVEY
S57°27'32"W
97.86'
EIP
EIP
FLOOD LINE
FLOOD LINE & 760 CONTOUR FOLLOW TOP OF BANK
50' BUFFER
LOT 7
(0.52 AC.)
LOT 6
JAMES A.
EDMISTON JR.
668/471
S27°17'39"E
244.63'
50.0
22.7
HOUSE BOX
46.0
15' SIDE
15' SIDE
25.0
216.12'
83.2
35' FRONT
N27°25'00"W
(BASE BEARING)
PB.6 PG.101
EIP
EIP
N73°59'31"E
99.91'
S73°43'06"W
169.73'
(TIE ONLY)
SHADY COVE RD.
(60' R/W)
R/W
R/W
LAND SURVEYOR
WILLIAM M. ALLEN

REFERENCE:

BEING ALL OF LOT 7 - SHADY COVE ACRES - AS RECORDED IN P.B. 6, PG. 101 - IREDELL COUNTY REGISTRY.

PROPERTY SUBJECT TO RESTRICTIVE COVENANTS LISTED IN D.B. 351, PG. 295, D.B. 414, P.G. 32.

PROPERTY IS SUBJECT TO ANY AND ALL ZONING AND PLANNING ORDINANCES, EASEMENTS, RIGHTS-OF-WAY, AND RESTRICTIONS OF RECORD.

PRELIMINARY FOR RE

* NOT AN ACTUAL SI

THIS PLOT PLAN WAS DRAWN FROM EXISTING PLATS AN WAS NOT PERFORMED AT THIS TIME. ACREAGES AND DI ACTUAL SURVEY. A FULL TITLE SEARCH HAS NOT BEEN I

Would lik the shap the repai accomm proposed

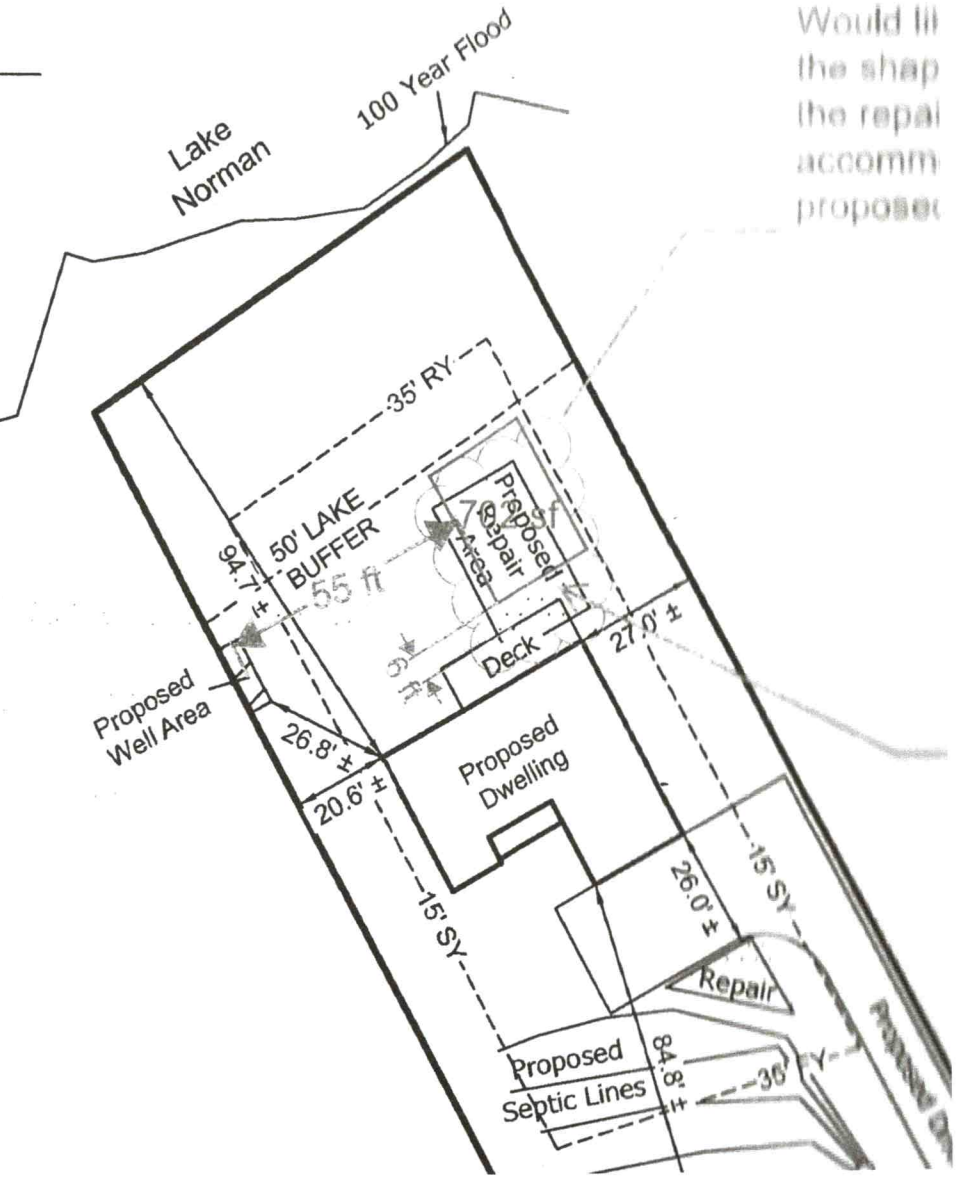
NOTES:

PROPERTY CURRENTLY CURRENTLY ZONED: R-20 (IREDELL COUNTY)

PROPERTY SUBJECT TO A 35' FRONT YARD (FY), 15' SIDE YARD (SY), 35' REAR YARD (RY) & LAKE BUFFER 50' AS PER IREDELL COUNTY ZONING REQUIREMENTS .

PROPERTY IS SUBJECTED TO LAKE NORMAN / CATAWBA RIVER WATERSHED IV AREA.

THE PROPOSED SEPTIC LINES, PROPOSED REPAIR AREA, AND PROPOSED WELL AREA WERE COMPUTED GRAPHICALLY FROM A PROVIDED SEPTIC PERMIT #316767 - DATED 06-29-21.



APPROXIMATE STRUCTURAL/IMPERVIOUS COVERAGE:

TOTAL PROPERTY AREA: 22,464 SF, 0.516 AC.
PROPOSED DWELLING AREA: 2,192 SF, 0.050 AC.
PROPOSED SIDEWALK/DRIVEWAY AREA: 2,308 SF, 0.053 AC.
APPROXIMATE STRUCTURAL COVERAGE: 2,192 SF, 0.050 AC, 9.75%
APPROXIMATE IMPERVIOUS COVERAGE: 4,500 SF, 0.103 AC, 20.03%