H5

ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # OSWP-2022-4077

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

PIN # 4730-71-8676

APPLICANT / OWNER: HELMSMAN HOMES, LLC | APPLICANT ADDRESS: PO Box 3965, MOORESVILLE, NC 28117

SITE ADDRESS: 113 MILLARD LN, TROUTMAN, NC 28166 | PHONE: (980) 500-1251 | ALT. PHONE: (980) 500-1251

SITE DIRECTIONS: W NC 150 -> R Perth -> L Shady Cove -> L Millard -> lot on L | SAP CONTROLLED: YES ☐ NO ☑

SUBDIVISION: Shady Cove Acres | SECTION: 2 | LOT #: 1 | LOT AREA: 0.46 | DESIGN FLOW: 240 | L.T.A.R.: 0.275

Septic Tank: 1000 (gal)	STB: INFILTRATOR	Date: –	☑ New System ☐ Repair ☐ Expansion	System Type: III	☒ Residence	No. Bedrooms: 2	Water Supply: New Well
Pump Tank: 1000 (gal)	PT: INFILTRATOR	Date: –	System Description: HPPBPS - PM		☐ Business	No. Persons: 4	
Pump Make: Liberty	Model: 280	Serial #:	Repair System Description: HPPBPS - PM		☐ Other	No. Employees:	
# Nitrification Fields: 1	# Lines: 3	Linear Ft.: 147	Maintenance Agreement Required: ☐ YES ☑ NO		☑ Slab	☐ Crawl Space	
Trench Width: 36	Trench Bottom Depth (Low side): 40"		Gravel Depth: 0	☐ GRAVITY ☑ PRESSURE	☐ Basement w/ Plumbing	☐ Basement w/o Plumbing	

Comments / Conditions: Do not pave, grade, park, drive, or bury utilities in drainfield. Install on contour, maintain 50' off all wells. Divert drainage from drainfield.
Pressure Manifold: 2" supply, 2' pressure head. Dose: 126 g Flow: 21.33 gpm Runtime: 5.9 min Drawdown: 6" L1 & 2 = 12 panels L3 = 11 panels. 1/2" SCH 40 tap each line

INITIAL SITE SKETCH

See attached
Site plan by Paul
Penninger, LSS w/
modifications by ICHD
approved
2/2/23

AS BUILT SKETCH

see modified tank locations.
Lines as drawn.

TANKS
LINES SW 10/12/23
MANIFOLD

* Drains need to be moved near Tanks before signing AC

Check

Pressure Head MW 11/17/23
Floats MW 11/17/23
Alarm MW 11/17/23
Electrical MW 11/17/23

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

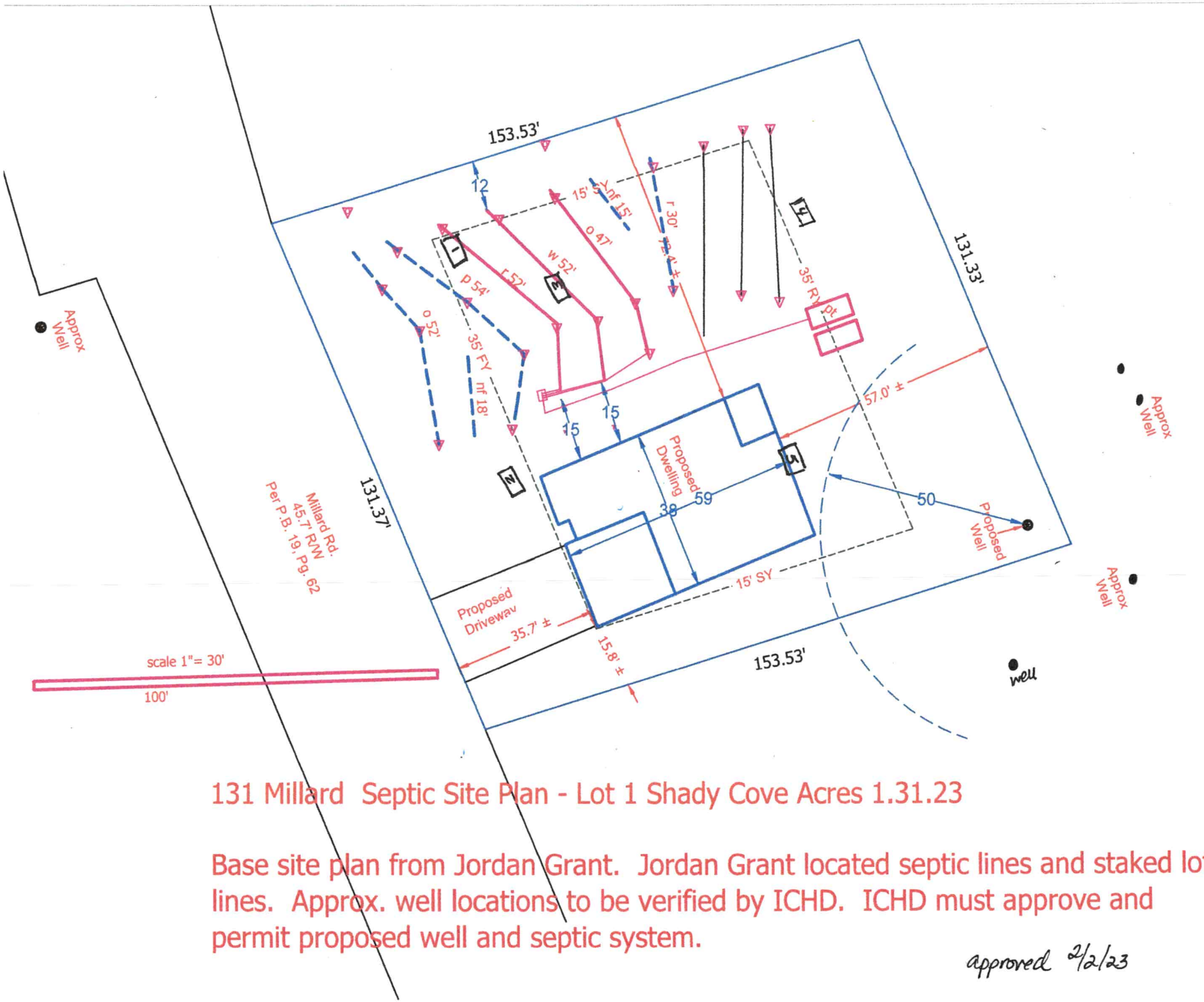
☐ IMPROVEMENT PERMIT with plat valid without expiration. ☑ IMPROVEMENT PERMIT with site plan valid for 60 mos. ☑ AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: _____ Date: _____ Installed By: Sid Gaskins

IMPROVEMENT PERMIT by: D. Meben Date: 2/2/23 OPERATION PERMIT by: Matt Wi Date: 11/21/23

AUTHORIZATION TO CONSTRUCT by: D. Meben Date: 2/2/23 Existing System Inspected By: _____ Date: _____

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



131 Millard Septic Site Plan - Lot 1 Shady Cove Acres 1.31.23

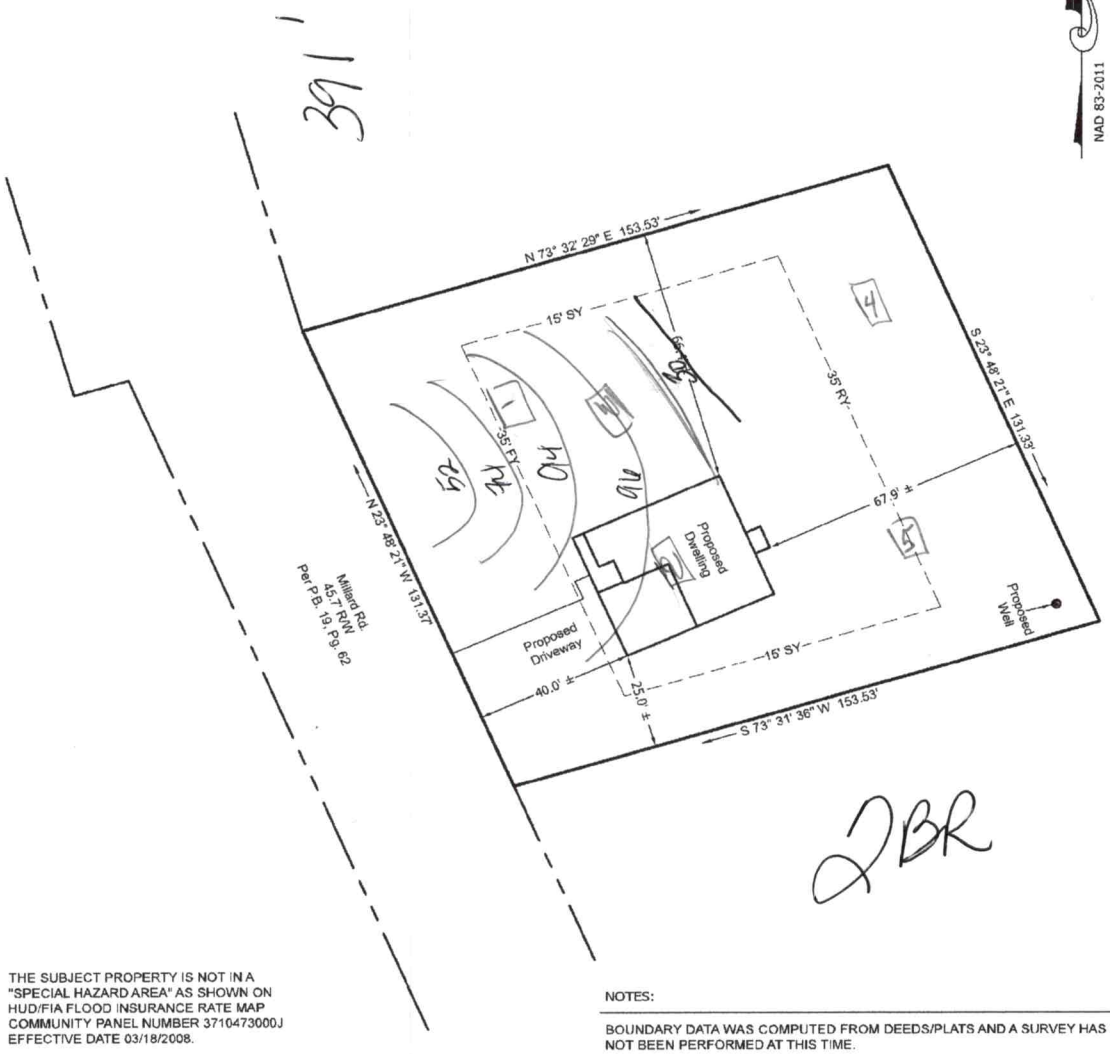
Base site plan from Jordan Grant. Jordan Grant located septic lines and staked lot lines. Approx. well locations to be verified by ICHD. ICHD must approve and permit proposed well and septic system.

approved 2/2/23

PRELIMINARY FOR REVIEW ONLY
* NOT AN ACTUAL SURVEY *

THIS PLOT PLAN WAS DRAWN FROM EXISTING PLATS AND/OR DEEDS AND A FULL SURVEY WAS NOT PERFORMED AT THIS TIME. ACREAGES AND DISTANCES ARE SUBJECT TO AN ACTUAL SURVEY. A FULL TITLE SEARCH HAS NOT BEEN PERFORMED.

NAD 83-2011



THE SUBJECT PROPERTY IS NOT IN A "SPECIAL HAZARD AREA" AS SHOWN ON HUD/FIA FLOOD INSURANCE RATE MAP COMMUNITY PANEL NUMBER 3710473000J EFFECTIVE DATE 03/18/2008.

NOTES:

BOUNDARY DATA WAS COMPUTED FROM DEEDS/PLATS AND A SURVEY HAS NOT BEEN PERFORMED AT THIS TIME.

REFERENCE:

BEING ALL OF LOT 1 - SHADY COVE ACRES SECTION II - AS RECORDED IN P.B. 19, PG. 62.- IREDELL COUNTY REGISTRY.

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

APPROXIMATE STRUCTURAL/IMPERVIOUS COVERAGE:

TOTAL PROPERTY AREA: 20,001 SF, 0.459 AC.
PROPOSED DWELLING AREA: 1,395 SF, 0.032 AC.
PROPOSED DRIVEWAY/ SIDEWALK AREA: 752 SF, 0.017 AC.
APPROXIMATE STRUCTURAL COVERAGE: 1,395 SF, 0.032 AC, 6.97%
APPROXIMATE IMPERVIOUS COVERAGE: 2,147 SF, 0.049 AC, 10.73%

SETBACKS:

PROPERTY CURRENTLY ZONED: R-20 (IREDELL COUNTY)

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

PROPERTY LIES WITHIN WATERSHED OF LAKE NORMAN "WS-IV CA".

0 30 60 90

LEGEND	
FY	FRONT YARD SETBACK
RY	REAR YARD SETBACK
SY	SIDE YARD SETBACK
R/W	RIGH OF WAY
P.B.	PLAT BOOK
D.B.	DEED BOOK
PG.	PAGE

JORDAN GRANT
ENGINEERING • SURVEYING • PLANNING
JORDAN GRANT & ASSOCIATES, PLLC
P.O. BOX 151 * STATESVILLE, NC 28687
Matt.Grant@jordan-grant.com (704) 928-7919
FIRM # P-1227

Plot Plan For:

Helmsman Homes

DRAWN BY: IDV	CHECKED BY: JWE	SCALE: 1" = 30'
PIN NO: 4730-71-8676		
DEED REF: 2897-1064		
DATE OF MAP: 12-14-21	SURVEY DATE:	
REVISION: 06-28-22	DRAWING FILE: 20211214_06-28-22	

131 Millard Rd., Troutman, NC 28166
Fallstown Twsp - Iredell County - North Carolina

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 8670
COUNTY: Iredell

2 BR

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

OWNER: Helmsman Homes — APPLICATION DATE
ADDRESS: 116 Gasoline Alley # 105 Mooresville NC — DATE EVALUATED: 10/19/22
PROPOSED FACILITY: 4BR — PROPOSED DESIGN FLOW (.1949): 480 — PROPERTY SIZE:
LOCATION OF SITE: 113 Millard Trantmen NC 28166 — PROPERTY RECORDED: Y
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	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	10%	0-5	SCL - WSBK	SSSP-FR-SEVP	some larger peds 5-27 some large peds in C	64"	N/A	N/A	PS 0.275
		5-27	C - SBK/ABK						
		27-44	CL - WSBK						
		44-64	L/SCL WSBK						
2	15%	0-4	SCL - WSBK	SSSP-FR-SEVP	large peds in C Sap incl Common 26"+	58"	N/A	N/A	PS 0.275
		4-26	C - SBK						
		26-45	CL - WSBK						
		45-58	L/SCL WSBK						
3	15%	0-6	SCL - WSBK	SSSP-FR-SEVP	common incl sap @ 31"	55"	N/A	N/A	PS 0.275
		6-23	C - SBK/ABK	SSSP-FI-SEVP					
		23-39	CL/SCL - WSBK	SSSP-FR-SEVP					
		39-55	L/SCL WSBK	FI-FR					
4	15%	0-10	SCL - WSBK	SSSP-FR		10"	S	N/A	PS 0.5
		10-56	SAP-MAT-LS	SSMP-VFR					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)	50%	50%
Site LTAR	0.275	0.275

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: D. Wiebers
OTHER(S) PRESENT: P. Renninger

COMMENTS:
B) 0-6 - SL
6-28 - CL
28-60 - SL/LS
391' total

Updated February 2014

wed 10/19 @ 9[00]

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

Iredell County Health Department – Environmental Health Division

PAGE 1: ***APPLICATION FORM***

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

Applicant Information: **(PRINT CLEARLY)**

Applicant Name: Moriah Collins **Address:** 116 Gasoline Alley, STE 105, Mooresville, NC **Zip:** 28117
Applicant Email: mcollins@helmsmanhomes.com **Phone:** 704-993-7168 **Alt. Phone:**
Owner Name: Helmsman Homes, LLC **Address:** 116 Gasoline Alley, STE 105, Mooresville, NC **Zip:** 28117
Owner Email: permitting@helmsmanhomes.com **Phone:** 980-500-1251 **Alt. Phone:**

Property Information:

Street Address: 113 Millard Lane

Subdivision Name: Shady Cove Road Lots **Section/Phase:** **Lot Number:** 1

Driving Directions: Take I-77 N to Flower House Loop in Troutman, Turn right onto Clontz Hill Rd, Turn right onto Perth Rd, Turn left onto Shady Cove Rd, Turn left onto Millard Ln

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: 2
Maximum Number of Occupants: 4
( ) Swimming Pool
( ) Other Addition/Structure:

CHECK FOUNDATION TYPE
( ) Crawl Space Foundation
(x) 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:
(x) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) 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?

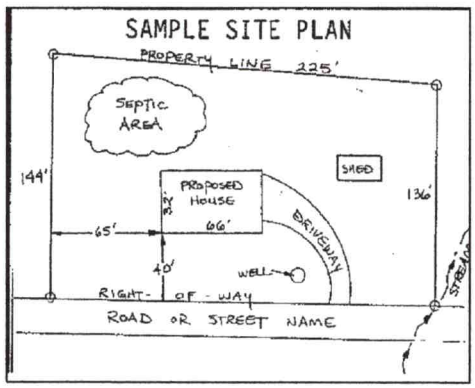
I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible 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: Moriah Collins 09-08-2022
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

Signature: Moriah Collins 09-08-2022

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

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*) Moriah Collins

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, Moriah Collins, am the legal owner(s) of the property located at 113 Millard Lane, identified as

PIN (Parcel Identification Number) 4730.71.8676.000, located in Iredell County, North Carolina.

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

Moriah Collins — Signature of Owner(s)

09-08-2022 — Date

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 ****

X **Complete all Environmental Health forms**:
_____ Application
_____ Site Plan including the dimensions of proposed structure, addition, pool etc.
_____ Documentation to Authorize Owner Agent (even if the property owner is the applicant – complete section 1 or 2)
_____ Copy of Zoning Permit when applicable
_____ Sign this sheet after you have completed all items

X **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.**

X **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**.

X **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.

X 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 Moriah Collins **Date** 09-08-2022

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