# IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 1777606

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

PIN # 4740 62 2583

APPLICANT: ELG Investments, LLC APPLICANT ADDRESS: 16108 North Point Rd Huntersville 28078

SITE ADDRESS: 132 Hawks Landing Dr - Troutman PHONE: 704-578-4951 ALT. PHONE:

SITE DIRECTIONS: Hwy 21 N TL Flowerhouse LP TL Hawks Landing on right

SUBDIVISION: Hawks Landing SECTION: LOT # 6 LOT AREA: .516 Ac. DESIGN FLOW: 480 gpd L.T.A.R.: .3 gpd/ft²

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 (gal) | STB | 768 | Date | 7/27 | ☒ New System | ☐ Repair | ☐ Expansion | System Type: I II ⓘ IV V VI |
| Pump Tank | (gal) | PT | | Date | | System Description: | 25% Reduction Gravity | | |
| Pump Make | | Model | | Serial # | | Repair System Description: | LP PPBPS | | |
| # Nitrification Fields | 1 | # Lines | 4 | Linear Ft: | 400 | Maintenance Agreement Required: | ☐ YES | ☒ NO | |
| Trench Width | 36" | Max. Trench Bottom Depth | 36" | Gravel Depth | NA | | ☒ GRAVITY | ☐ PRESSURE | |

☒ Residence ☐ Business ☐ Other ☒ Slab ☐ Basement w/plumbing

No. Bedrooms 4 No. Persons ____ No. Employees ____ ☐ Crawl Space

Water Supply: ☐ Private ☐ Public ☐ Community

☐ Basement w/o plumbing

Comments / Conditions: 5/13/2014 Renewed Floor plans in Compliance with original plan.

* Do not grade down Septic area or house slab, otherwise pump may be required

INITIAL SITE SKETCH

See Plan From
The Oaks Group, PA
Approved by ICHD

AS BUILT SKETCH

- LAST TWO LINES 8" off House foundation.
- ESSENTIALLY INSTALLED AS PER DRAWING

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: 04.15.13 Installed by: Al Backhoe

IMPROVEMENT PERMIT by: Date: 4-10-13 OPERATION PERMIT by: Date: 7/10/14

AUTHORIZATION TO CONSTRUCT by: RS Date: 5/13/14 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK

obby T. Isenhour
Book 1663 Page 1279
el ID #4740-52-9966

Found Stone

Larry W. &
Deed Boo
Parcel ID

Any Backhoe Pits/Auger Borings, Proposed Septic Lines, Proposed or Installed Wells, House Boxes, Driveways, and/or Roadbeds are approximately located on this site plan and have not been located on site by a licensed surveyor.

4'16"E 507.54' (T)

CCM

9.81'

S86°07'11"E

107.19'

L40

10' Septic Supply Line Easement

10' U&DE (Typical)

Approved ICHD 4-10-13

Lot 8

Lot 7

Lot 6

Lot 5

54' Repair

85' Repair

100' Repair

100'

100'

100'

40' Repair

D Box

ST

15'

60²

L42

L41

80' Setback

11' Setback

36' (TL)

Well

Drive

C8

L10

L9

C7

C6

C9

Hawks Landing Drive
(45' Public R/W)

61.32'

S68°32

C10

C37

L12

C21

L13

C20

35' Setback
(Typical)

C36

25' Corner Side

L43

Lot 17

Lot 18

1" = 50'

35' Rearyard

5' Setback

L44

C19

## Lot 6 Hawks Landing Subdivision Fast Track

| | |
|---|---|
| **Number of Bedrooms** | **4** |
| **Basement or Crawl** | **Concrete Slab** |
| **Design Flow (gpd)** | **480** |
| **Primary System LTAR (gpd/ft2)** | **0.3** |
| **Primary System Type** | **25% Reduction** |
| No. Lines | 4 (See Table) |
| Total Linear Feet | 400 |
| Trench Width | 3' min. |
| Trench Spacing | 9' min. |
| Trench Bottom Depth (~~low side~~) | 36 |
| Distribution Device | Distribution Box |
| Tank Size | 1000 gallon tank |
| Maintenance Agreement Required | No |
| Length and Diameter of Supply Pipe | 18' of 2" SCH 40 PVC |
| **Repair System** | **LP PPBPS** |
| Total Linear Feet | 282 |
| Repair Loading Rate | 0.3 |

### Table: Summary of Primary and Repair Nitrification Line Specifications

| Line No. | Use | Line Color | System Type | Line Length (Ft.) |
|---|---|---|---|---|
| 1 | Repair | Red | LP PPBPS | 54 |
| 2 | Repair | Blue | LP PPBPS | 88 |
| 3 | Repair | Orange | LP PPBPS | 100 |
| 4 | System | Pink | 25% Reduction | 100 endfed |
| 5 | System | Orange | 25% Reduction | 100 endfed |
| 6 | System | Red | 25% Reduction | 100 endfed |
| 7 | System | Blue | 25% Reduction | 100 endfed |
| 8 | Repair | Red | LP PPBPS | 40 |
| | | | | Total System: 400' |
| | | | | Total Repair: 282' |

**Note:**

oject #: _____ Sheet: _____

operty ID #: _____

County: Iredell

## SOIL/SITE EVALUATION

Date Evaluated: 3/9/13

wner or Client: ELG Investments LLC

roposed Facility: House Design Flow: 480 Property Size: _____

ocation of Site: Lot 6

oil Described By: KMS Others Present: _____ Site LTAR: Int. 0.3 Rep. 0.3

ntecedent Moisture: _____ Weather: _____ Site Classification: PS

/ater Supply: [ ] Public [ ] Community [X] On-Site Well [ ] Spring [ ] Other

valuation Method: [X] Auger Boring [X] Pit [ ] Cut

ype of Wastewater: [X] Sewage [ ] Industrial Process [ ] Mixed

| PROFILE # | Landscape Position/ Slope% | Horizon Depth (IN.) | SOIL MORPHOLOGY: Structure/ Texture | SOIL MORPHOLOGY: Consistence Mineralogy | PROFILE FACTORS: Inclusions | Matrix Color | Mottles | Profile Notes (Restr Hortz, Soil Depth, Coarse Frag, etc...) | Profile Class & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| 1 | L | 0-3 | MO GR SL | FR NS/NP | | Br | | | 0.3 |
| | | 3-27 | MO SBK C | FR SS/SP | F sap | Red | | | |
| | | 27-48 | WK SBK CL | FR SS/SP | C sap | Red | | | |
| 2 | L 3% Pit | 0-29 | MO SBK C | FR SS/SP | F sap | Red | | | 0.3 |
| | | 29-48 | WK SBK CL | FR SS/SP | C sap | Red | | | |
| | | 48-56 | MA L sap | FR SS/SP | | LtR | | F CL pockets | |
| 3 | L | 0-4 | MO GR SL | FR NS/NP | | Br | | | 0.3 |
| | | 4-28 | MO SBK C | FR SS/SP | | Red | | | |
| | | 28-46 | WK SBK CL | FR SS/SP | C sap | Red | | | |
| | | 46-48 | MA L Sap | FR SS/SP | | Red | | | |
| 4 | L | 0-3 | MO GR SL | FR NS/NP | | Br | | | 0.3 |
| | | 3-27 | MO SBK C | FR SS/SP | | Red | | | |
| | | 27-46 | WK SBK CL | FR SS/SP | C sap | Red | | | |
| | | 46-50 | MA L sap | FR SS/SP | | Red | | | |
| 5 | | | | | | | | | |
| 6 | | | | | | | | | |

**COMMENTS:**

Approved ICHD
4-10-13

# IREDELL COUNTY HEALTH DEPARTMENT

## *ENVIRONMENTAL HEALTH DIVISION*

**PAGE 1: *APPLICATION FORM***

**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:**

**Applicant Name:** Michael Gandy **Address:** 16108 North Point Rd **Phone:** 704 506 5148

**Owner Name:** ELG Investments **Address:** 16108 North Point Rd **Phone:** 704 506 5148

**Property Information:**

**Street Address:** 132 Hawks Landing Dr Troutman NC

**Subdivision Name:** Hawks Landing **Section/Phase:** _____ **Lot Number:** 6

**Driving Directions:** Exit 42 take Left Flower House Loop tk Left 1 mile Hawk Landing on Rt

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

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

**Maximum Number of Bedrooms:** 4
**Maximum Number of Occupants:** _____
( ) 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 ( ) 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:** _____ 5/13/14
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

# IREDELL COUNTY HEALTH DEPARTMENT

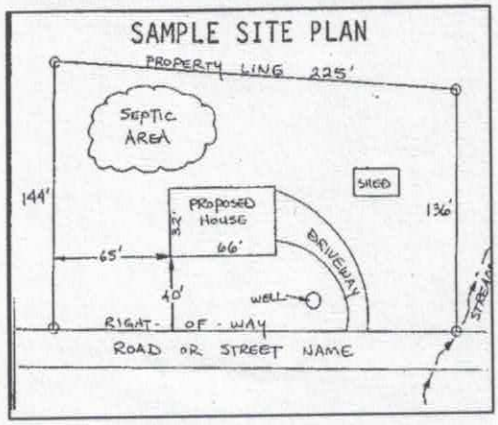
*ENVIRONMENTAL HEALTH DIVISION*

**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

**Signature:** _____ 5/13/14

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

Acknowledgement Of
Plans Submittal ONLY!

Date 5/13/14

Date 5/13/14

FRANK BETZ ASSOCIATES, INC.
DESIGNERS OF CUSTOM AND STOCK HOMEPLANS
3550 GEORGE BUSBEE PARKWAY
SUITE 190
KENNESAW, GEORGIA 30144
770-431-0888 888-717-3003

FIRST / SECOND FLOOR PLANS

THE CHADWICK

MICHAEL GANDY
TROUTMAN, N.C.

SHEET 3

**Iredell County**
**Planning & Enforcement**
**349 N. Center St. PO Box 788**
**Statesville, NC 28687**
**704-878-3113**


Printed: 3/12/2013

## Zoning Permit

**Permit Number:** 177606ZO

**Master #:** 177606

**Associated Permits:**
177606ZO Zoning

### Applicant

**Name:** Kathleen Saunders
**Address:** 227 GRAYLAND RD
MOORESVILLE, NC 28115
**Phone:** 704-578-4951

### Parcel

**Parcel Number:** 4740622583.000
**Address:** 132 HAWKS LANDING DR
Troutman, NC 28116
**Subdivision:** Hawks Landing
**Zoning:** RA
**Township:** 1600
**Area:** 0.516
**Lot(s):** 6
**Directions to Parcel:** FLOWER HOUSE LOOP TO HAWKS LANDING DR, PROPERTY ON RIGHT

### Owners

**Name:** ELG INVESTMENTS LLC
**Address:** 16108 NORTH POINT ROAD
HUNTERSVILLE, NC 28078

### Contractors

**Contractor Type: Not Liscensed**
**Name:** Kathleen Saunders
**Address:** 227 GRAYLAND RD
MOORESVILLE, NC 28115
**Phone:** 704-578-4951

### Fees and Receipts:

| Number | Description | Amount |
|---|---|---|
| FEE-278396-07 | Zoning - Permit Application | $75.00 |
| FEE-278397-07 | Technology Fee - Planning | $2.25 |
| FEE-278401-07 | Environmental Health - Gravity - Fast Track | $350.00 |