ICHD - ENVIRONMENTAL HEALTH DIVISION

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

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

PERMIT # AP-312626

PIN # 4751 - 25 - 7707

APPLICANT/OWNER: PILCH ACRES HOLDING, LLC | APPLICANT ADDRESS: 15 FROWEIN ROAD, SUITE G2, CENTER MORICHES, N.Y. 11934

SITE ADDRESS: 120 HOLLY SPRING LOOP, TROUTMAN, NC. 28166 | PHONE: 631-831-1461 | ALT. PHONE —

SITE DIRECTIONS: (S) ON 77, (L) ON AMITY HILL, (R) ON PILCH, (R) ON WINDSTONE, (R) ON HOLLY SPRING, LOT ON (R)

SUBDIVISION: WINDSTONE CROSSING | SECTION: — | LOT # 37 | LOT AREA: 0.73 AC | SAP CONTROLLED: ☐ YES ☑ NO | DESIGN FLOW: 360GPD | L.T.A.R.: 0.275

Septic Tank	1000 (gal)	STB	760	Date	IN GROUND SINCE 5-13-21
Pump Tank	1000 (gal)	PT	363	Date	3-21-2021
Pump Make		Model		Serial #	
# Nitrification Fields	1	# Lines	3	Linear Ft	328FT
Trench Width	36 IN	Trench Bottom Depth(Low side)	32 IN	Gravel Depth	—

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

System Description: 25% REDUCTION - P.M.

Repair System Description: 50% REDUCTION - PPBPS

Maintenance Agreement Required: ☐ YES ☑ NO

☐ GRAVITY ☑ PRESSURE

☑ Residence ☐ Business ☐ Other ☑ Stab ☐ Basement w/plumbing

No. Bedrooms 3 | No. Persons 6 | No. Employees — | ☐ Crawl Space

Water Supply: ☐ Private ☐ Public ☑ Community

☐ Basement w/o plumbing

Comments / Conditions: INSTALL ON CONTOUR, INSTALL ON 9FT CENTER, UTILIZE 3 - 1/2 SCH 40 TAPS IN PRESSURE MANIFOLD, DO NOT EXCEED 36IN MAX TRENCH BOTTOM, DO NOT SHALLOW UP

SITE PLAN MUST BE ATTACHED AT ALL TIMES

INITIAL SITE SKETCH

SEE ATTACHED SITE PLAN BY: MICHAEL ATHANAS AND ASSOCIATES LSS

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.

5-13-2021 - NEED FICTER & PUMP
- COULD NOT VERIFY TANK DATE (COVERED)
- TRENCH DEPTH EXCEEDED ON LINES 2 & 3
- LINES 1 & 3 OUT OF LEVEL 2-3 IN
- SUPPLY LINE CHECKED

10-7-2021 - TANK
Pressure - DRAINLINE
10-14-21 - P.M.
- FLOATS
- ALARM
- FILTER
- Electrical

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 EXCEPTION**

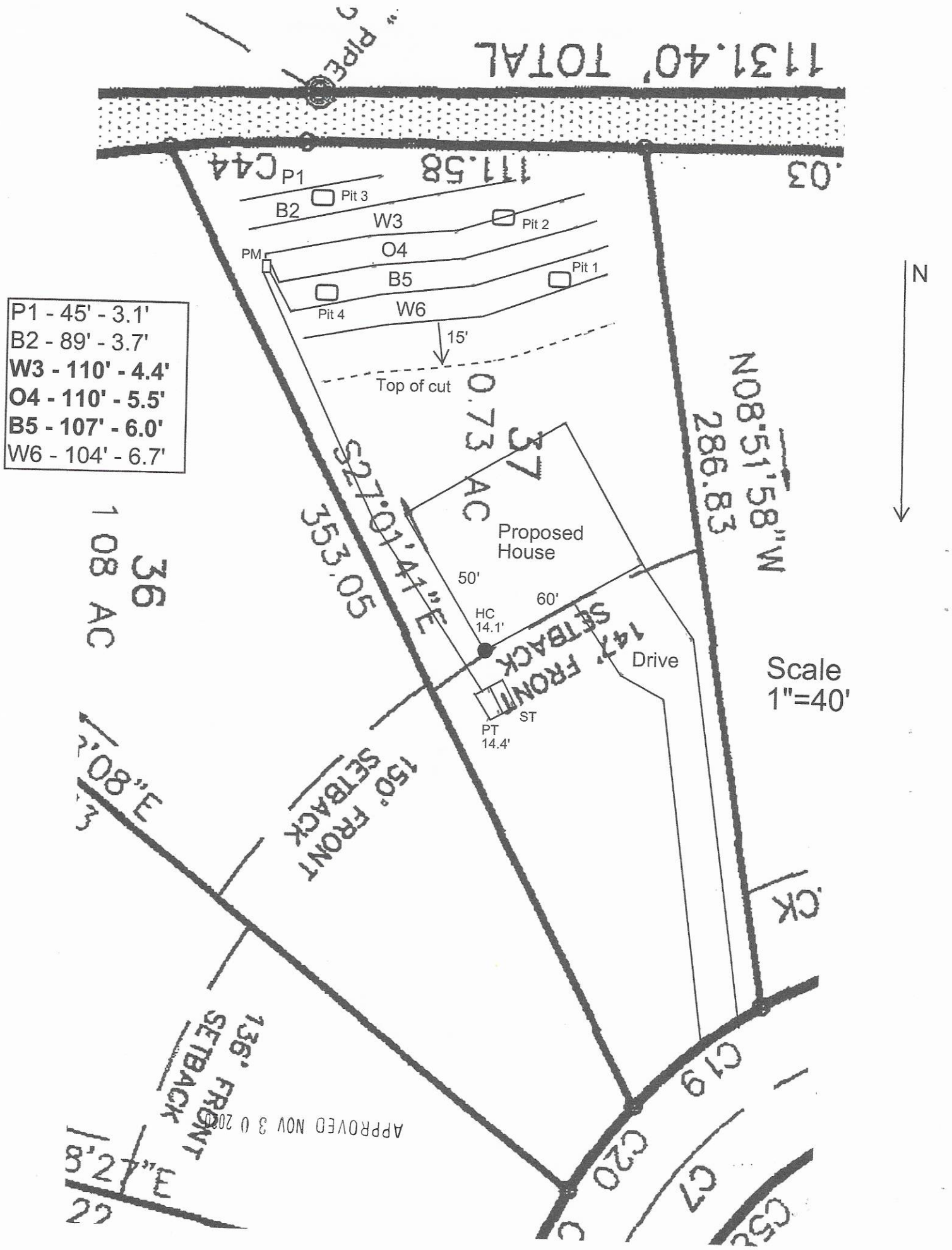
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☑ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

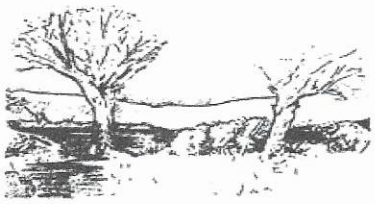
Owner / Applicant Signature: [signature] Date: 12/16/20 Installed by: Center Grading

IMPROVEMENT PERMIT by: [signature] Date: 11-30-2020 OPERATION PERMIT by: [signature] Date: 10-14-21

AUTHORIZATION TO CONSTRUCT by: Patrick J Boyle III Date: 12/16/2020 Existing System Inspected by: Date:

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


1131.40' TOTAL
P1
Pit 3
B2
W3
Pit 2
O4
PM
B5
Pit 1
Pit 4
W6
15'
Top of cut
P1 - 45' - 3.1'
B2 - 89' - 3.7'
W3 - 110' - 4.4'
O4 - 110' - 5.5'
B5 - 107' - 6.0'
W6 - 104' - 6.7'
N
Proposed House
50'
60'
HC 14.1'
PT 14.4'
ST
Drive
Scale 1"=40'
36 108 AC
353.05
286.83
150' FRONT SETBACK
147' FRONT SETBACK
136' FRONT SETBACK
APPROVED NOV 30 2020



APPROVED NOV 3 0 2020

MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887
11/11/2020

Reference: Data Sheet for 120 Holly Springs Lp, Windstone Crossing Lot 37
House Footprint: See attached plan
Building Setbacks: 147' front, 35' 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: 25% Reduction
Proposed Repair System Type: PPBPS
Distribution: Pressure manifold
Flow per Tap: 7.11 GPM
Tap Size and Material: ½" SCH 40
System Flow: 21.33 GPM
Dosing Volume: 131.3 gallons
Pump Run Time: 6.2 minutes
Elevation Head: 15'
Friction Head: 0.4'
Pressure Head: 2'
Total Dynamic Head: 17.4'
Supply Line Length: 160' of 2" PVC
Septic/Pump Tank Size: 1000/1000 gallons
Proposed Trench Bottom: 24-36"



Line	Design Length	Actual Length	Elevation
Pink 1		45'	3.1'
Blue 2		89'	3.7'
White 3	**110'**	**123'**	**4.4'**
Orange 4	**110'**	**121'**	**5.5'**
Blue 5	**107'**	**107'**	**6.0'**
White 6		104'	6.7'

Initial System: 327'
Repair System: 237'
Pump Tank: 14.4'
House Corner: 14.1'
Benchmark: 2.2'

Comments:

PROPERTY ID #: 4751257707
COUNTY: Iredell

APPROVED NOV 3 0 2020

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Pilch Acres Holdings LLC
ADDRESS: 15 Frowein Rd, BLDG G2, Center Moriches, NY 11934 APPLICATION DATE
PROPOSED FACILITY: 3 BDRM PROPOSED DESIGN FLOW (.1949): 360 GPD DATE EVALUATED: 11/2020
LOCATION OF SITE: 120 Holly Springs Lp, Windstone Crossings Lot 37 PROPERTY SIZE: 0.73 AC
WATER SUPPLY: ☐ Private X Public X Well ☐ Spring ☐ Other PROPERTY RECORDED:
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) .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	LS 6%	0-10	Br SCL WSBK	FR SS SP SXP	N/A Y/B 10YR 7/6 18"-22" SABK-PL	57"	N/A	N/A	PS 0.3 .275
		10-28	R C SBK ABK	FR SS SP SXP					
		28-57	R CL WSBK	FR SS SP SXP					
2	LS 6%	0-4	Br SL WSBK	FR SS SP SXP	N/A	58"	N/A	N/A	PS 0.3
		4-10	Br SCL WSBK	FR SS SP SXP					
		10-33	R C SBK	FR SS SP SXP					
		33-58	R CL WSBK	FR SS SP SXP					
3	LS 6%	0-6	Br SCL WSBK	FR SS SP SXP	N/A	48"	Few SAP	N/A	PS 0.3
		6-24	R C SBK	FR SS SP SXP					
		24-48	R CL WSBK	FR SS SP SXP					
4	LS 6%	0-10	Br SCL WSBK	FR SS SP SXP	N/A	57"	N/A	N/A	PS 0.3
		10-28	R C SBK	FR SS SP SXP					
		28-57	R CL WSBK	FR SS SP SXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	900 FT^2	711 FT^2
System Type(s)	25% Reduction	PPBPS
Site LTAR	0.3	0.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: MA&A
OTHER(S) PRESENT:

COMMENTS:

RECEIVED NOV 1 3 2020

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Paid $350.00 AP-312626

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: Pilch Acres Holding LLC **Address:** 15 Frowein Rd, STE G2, Center Moriches, NY **Zip:** 11934

Applicant Email: _____ **Phone:** Eddie-631-831-1461 **Alt. Phone:** _____

Owner Name: Same **Address:** _____ **Zip:** _____

Owner Email: _____ **Phone:** _____ **Alt. Phone:** _____

Property Information:

Street Address: 120 Holly Springs Lp

Subdivision Name: Windstone Crossing **Section/Phase:** _____ **Lot Number:** 37

Driving Directions: _____

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

CHECK FOUNDATION TYPE

(✓) 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: _____

( ) 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: _____

( ) 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: Accepted

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: _____ 11/12/2020
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

Public Health
Prevent. Promote. Protect
Iredell County Health Department

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public Health
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Iredell County Health Department

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 120 Holly Springs Lp Windstone Crossing Lot 37, identified as PIN (Parcel Identification Number) 4751257707, 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
	11/12/2020		

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

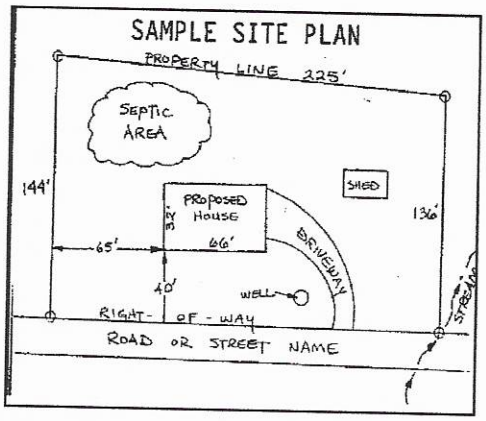
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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

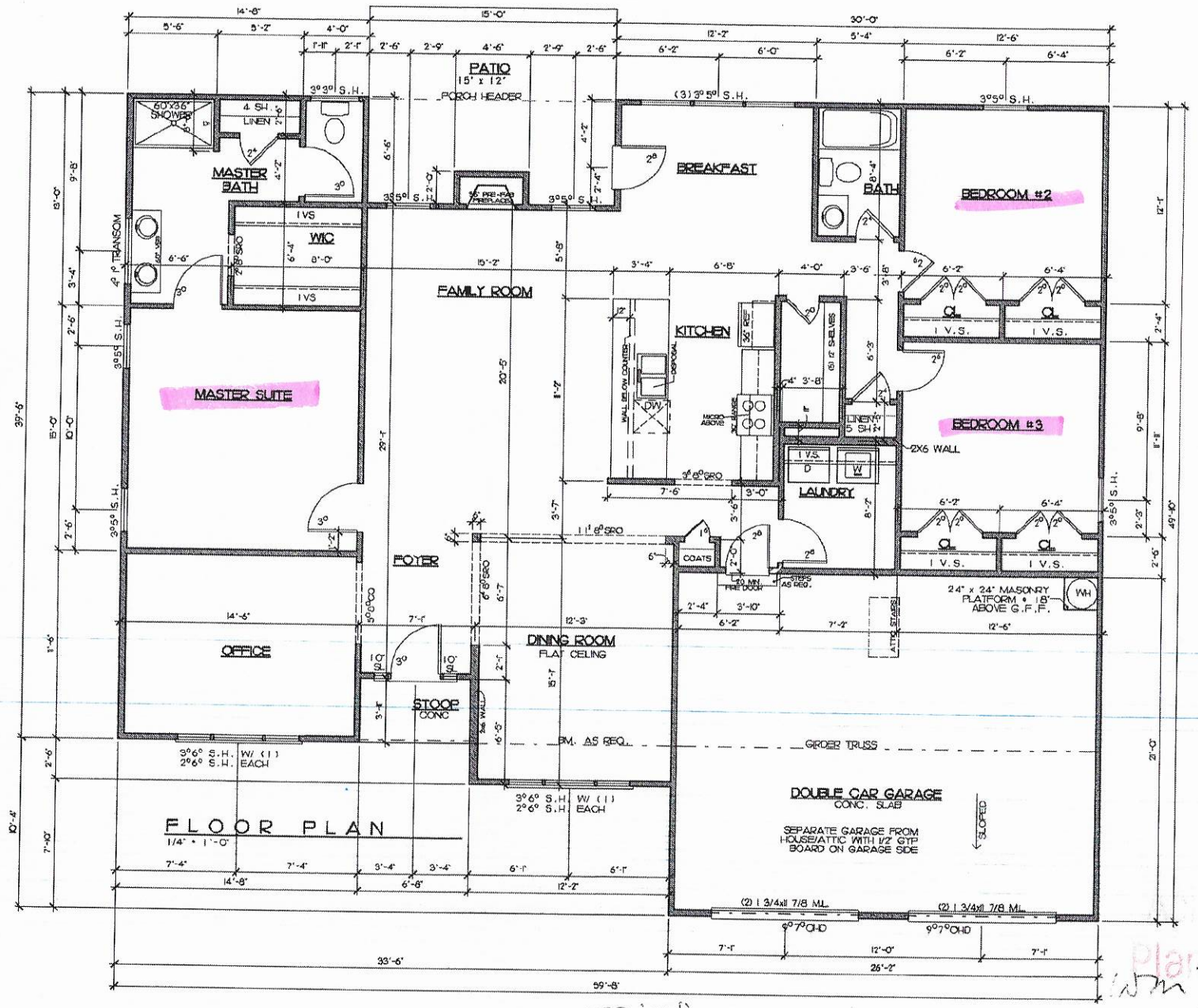
See attached plan

Signature: _____

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

11/12/2020

DATE



SQUARE FOOTAGES	
FLOOR PLAN=	1,998 sq ft
GARAGE=	580 sq ft
REAR PORCH=	66 sq ft
FRONT PORCH=	26 sq ft
TOTAL SF=	2682 sq ft

NOTE:
ALL CEILINGS ARE 9'-0" UNLESS OTHERWISE SPECIFIED.

Drafting & Design Inc.
Charlotte NC
704-542-8068

COPYRIGHT STATEMENT
DRAFTING & DESIGN, Inc. accepts no responsibility, liability or part of any legal action related to documentation supplied to the homeowner/contractor for preparing the drawing that may be supplied by another party. As materials used to produce the drawing are considered to have been manufactured by the homeowner or the owner/contractor has agreed by law the owner/contractor has obtained approval from any previously copyrighted materials from a previous by DRAFTING & DESIGN, Inc.

WINDSTONE ESTATES

Project: THE MEADOW
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
Site:

MEADOW-FP_REV
Sheet 3

GARAGE RIGHT

Plans Approved
12-3-2020
Date

Patrick J Boyce III 12/16/2020

IREDELL COUNTY
PO Box 788
349 North Center St.
Statesville, NC 28677

APPLICATION NUMBER
312626 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4751257707.000	120 HOLLY SPRINGS LOOP	Iredell County

Owner Information	Applicant Information
Name: PILCH ACRES HOLDING LLC	Name: MICHAEL ATHANAS & ASSOCIATES
Address: 15 FROWEIN RD BLDG G2	Address: 561 ENNIS RD
CENTER MORICHES, NY 11934	WEDDINGTON, NC 28173
Phone:	Phone: (704)576-3887

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.73	35	35	15	15	N/A	NO

Remarks
SFD

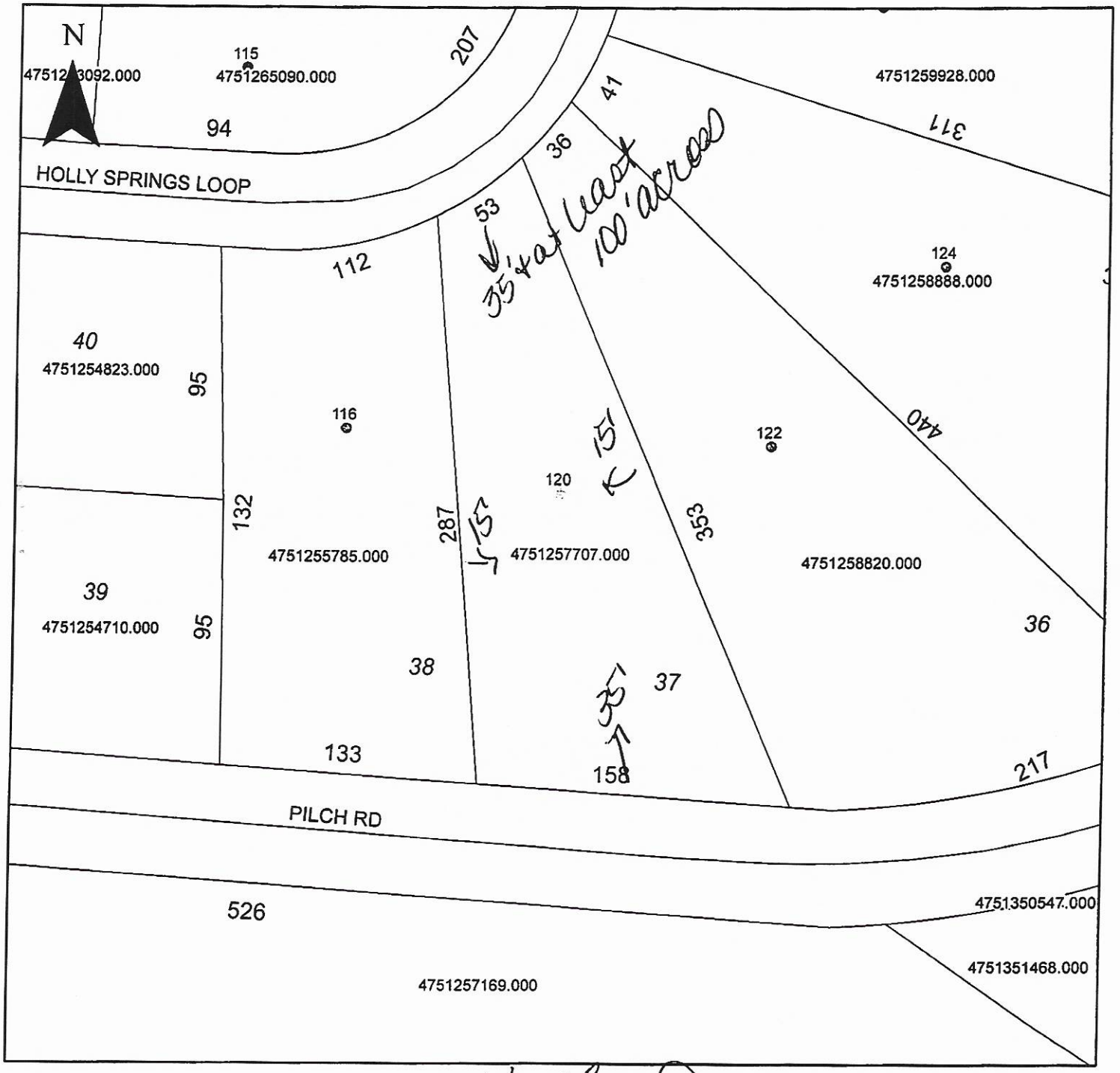
The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions, plat conditions and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

Date: 11/13/2020

Signature of Owner/Contractor

Permit Number	312626	TOTAL FEES:	$77.25

ZONING DISCLAIMER



Property Address 120 Holly Springs

The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. Applicant further acknowledges that the enforcement of deed restrictions, plat conditions, and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

Applicant

11/13/2020
Date