IREDELL COUNTY HEALTH DEPARTMENT

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

PERMIT # 242060

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

PIN # 4757265090

APPLICANT/OWNER: PILCH ACRES HOLDING LLC APPLICANT ADDRESS: 15 FROWEIN ROAD, STE G2, CENTER MORICHES, NY 11934

SITE ADDRESS: 115 HOLLYSPRINGS LOOP, TROUTMAN, NC 28166 PHONE: 980-722-7370 ALT. PHONE 704-310-4832

SITE DIRECTIONS: SOUTH ON 77, L ON AMITY HILL, R ON PILCH, R ON WINDSTONE DRIVE, R ON HOLLYSPRING LOOP

SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: WINDSTONE CROSSING SECTION: - LOT # 52 LOT AREA: .59 Ac DESIGN FLOW: 360 GPD L.T.A.R.: 0.3

Septic Tank	1000	(gal)	STB	760	Date	6/22	☑ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	
Pump Tank	1000	(gal)	PT	363	Date	5/11	System Description:	50% REDUCTION			
Pump Make			Model		Serial #		Repair System Description:	DRIP			
# Nitrification Fields	1		# Lines	3	Linear Ft	201	Maintenance Agreement Required:	☐ YES	☑ NO		
Trench Width	24"		Trench Bottom Depth(Low side)	24"	Gravel Depth	—		☐ 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		

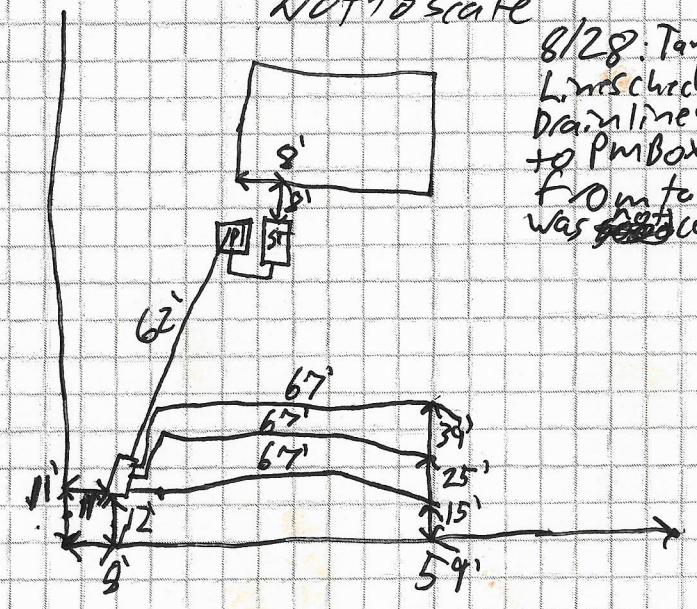
Comments / Conditions: INSTALL ON CONTOUR, INSTALL ON 8FT CENTERS, PERMIT VOID IF SITE PLAN IS NOT ATTACHED SITE PLAN STAMPED 2/28/2019

INITIAL SITE SKETCH

SEE ATTACHED SITE PLAN BY: MICHAEL ATHANAS + ASSOCIATES, LSS

AS BUILT SKETCH

NOT to scale



8/28: Tanks and Drain Lines checked. only for Drain line was connected to Pm Box. Supply line from tanks to Pm Box was ~~not~~ connected to

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: 3-28-19 Installed by: Center Grading

IMPROVEMENT PERMIT by: Burkett C. Mitchell Date: 2-28-2019 OPERATION PERMIT by: _____ Date: 12-20-19

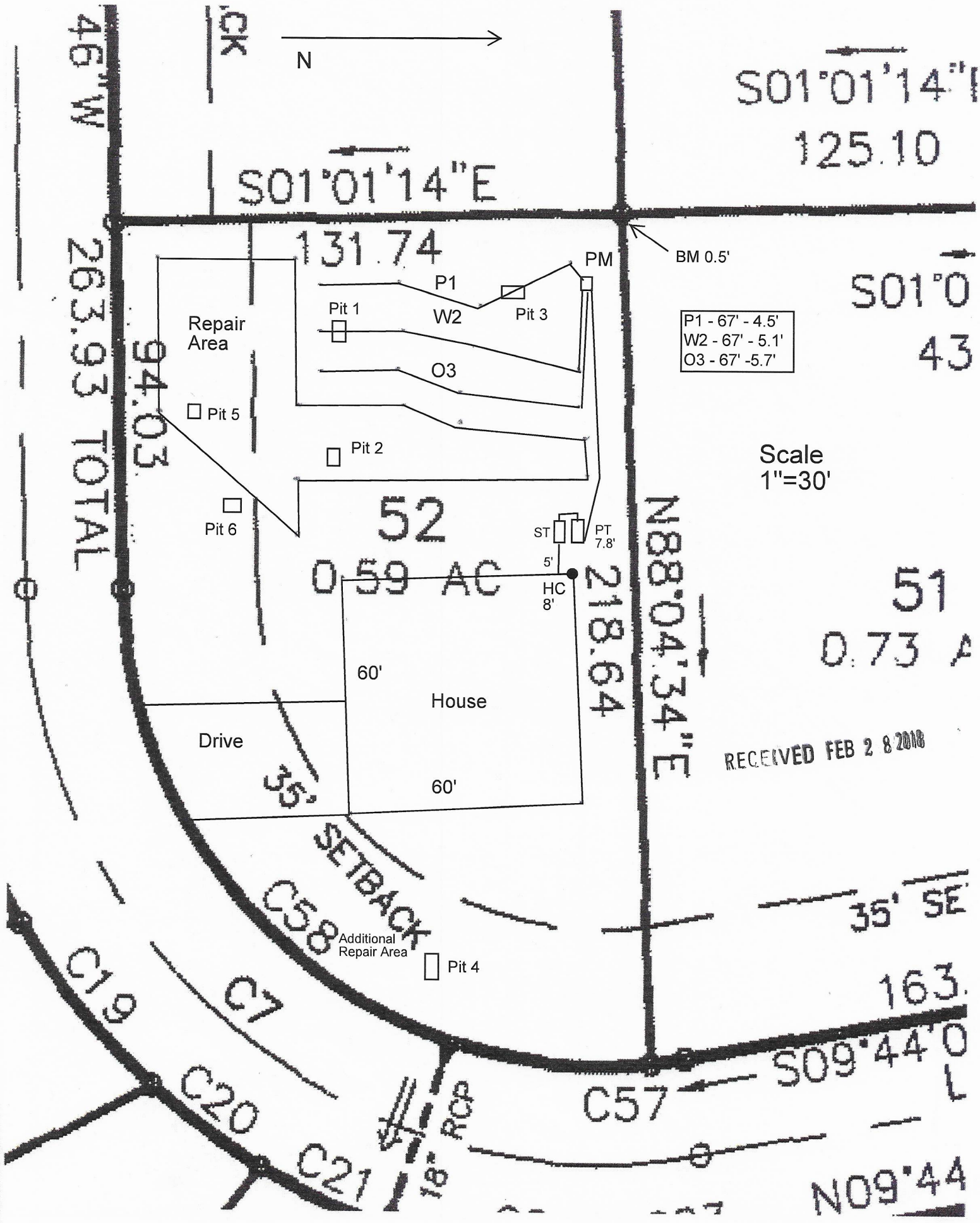
AUTHORIZATION TO CONSTRUCT by: Burkett C. Mitchell Date: 2-28-2019 Existing System Inspected by: _____ Date: _____

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inpsector to confirm your inspection time.

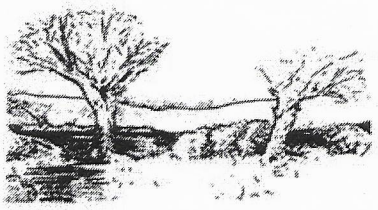
	Date	Initials
Drain Lines Checked	8/28/19	PSB
Tanks Checked	8/28/19	PJB
Pressure Manifold or Valve Box Checked	12-19-19	
Pressure Head Set	12-19-19	
Electrical Checked	12-19-19	
Floats Set	12-19-19	
Alarm Checked	12-19-19	
Maintenance Contract Y (N)	not required	

Cracked Riser on tank needs checked

Checked 12-20-19


CK
N
S01°01'14"E
125.10
S01°01'14"E
131.74
PM
BM 0.5'
P1
Pit 1
W2
Pit 3
O3
Repair Area
Pit 5
Pit 2
Pit 6
P1 - 67' - 4.5'
W2 - 67' - 5.1'
O3 - 67' -5.7'
Scale
1"=30'
52
0.59 AC
ST
PT
7.8'
5'
HC
8'
N88°04'34"E
218.64
51
0.73 A
60'
House
Drive
60'
35'
SETBACK
C58
Additional Repair Area
Pit 4
C19
C7
C20
C21
C57
35' SE
163.
S09°44'0
N09°44
RCP
263.93 TOTAL
94.03
RECEIVED FEB 2 8 2018

RECEIVED FEB 2 8 2018



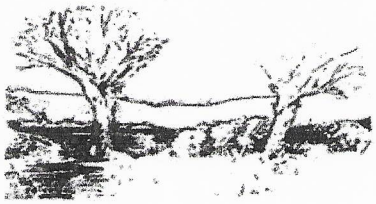
MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887

Reference: Data Sheet Holly Springs Lp, Windstone Crossing Lot 52
House Footprint: 60' x 60'
Building Setbacks: 35' front/rear, 15' side
Water Source: Community well
Number of Bedrooms: 3/360 GPD
Proposed LTAR: 0.3 GPD/FT2 (initial), 0.125 GPD/FT^2 (repair)
Proposed System Type: PPBPS
Proposed Repair System Type: Pretreatment Drip Irrigation
Distribution: Pressure Manifold
Flow per Tap: 7.11 GPM
Tap Size and Material: ½" SCH 40
System Flow: 21.33 GPM
Dosing Volume: 162 gallons
Pump Run Time: 7.6' minutes
Elevation Head: 8.3'
Friction Head: 0.9'
Pressure Head: 2'
Total Dynamic Head: 11.2'
Supply Line Length: 70' of 2" PVC
Septic/Pump Tank Size: 1000/1000 gallons
Proposed Trench Bottom: 36" maximum (initial), 12" (repair)
Proposed Trench Width: 24" (initial)

Line	Design Length	# of Panels	Actual Length	Elevation
Pink 1	67'	15	67'	4.5'
White 2	67'	15	67'	5.1'
Orange 3	67'	15	67'	5.7'

Initial System: 201' **Repair System:** 3100+ FT^2
Pump Tank: 7.8' **House Corner:** 8' **Benchmark:** 0.5'

Comments:
The house is increasing in size from the original permit.



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

Reference: Data Sheet Holly Springs Lp, Windstone Crossing Lot 52
House Footprint: 60' x 60'
Building Setbacks: 35' front/rear, 15' side
Water Source: Community well
Number of Bedrooms: 3/360 GPD
Proposed LTAR: 0.3 GPD/FT2 (initial), 0.125 GPD/FT^2 (repair)
Proposed System Type: PPBPS
Proposed Repair System Type: Pretreatment Drip Irrigation
Distribution: Pressure Manifold
Flow per Tap: 7.11 GPM
Tap Size and Material: ½" SCH 40
System Flow: 21.33 GPM
Dosing Volume: 162 gallons
Pump Run Time: 7.6' minutes
Elevation Head: 14'
Friction Head: 2'
Pressure Head: 2'
Total Dynamic Head: 18'
Supply Line Length: 155' of 2" PVC
Septic/Pump Tank Size: 1000/1000 gallons
Proposed Trench Bottom: 36" maximum (initial), 12" (repair)
Proposed Trench Width: 24" (initial)



Line	Design Length	# of Panels	Actual Length	Elevation
Pink 1	67'	15	67'	4.5'
White 2	67'	15	67'	5.1'
Orange 3	67'	15	67'	5.7'

Initial System: 201' **Repair System:** 3100+ FT^2
Pump Tank: 13.5' **House Corner:** 8' **Benchmark:** 0.5'

Comments:
The house is increasing in size from the original permit.

PROPERTY ID #: 4751265090
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Pilch Acres LLC APPLICATION DATE
ADDRESS: 15 Frowein Rd, Bldg G2, Center Moriche, NY 11934 DATE EVALUATED: 2/2019
PROPOSED FACILITY: 3 bdrm PROPOSED DESIGN FLOW (.1949): 360 GPD PROPERTY SIZE: 0.59 AC
LOCATION OF SITE: Holly Springs Lp, Windstone Crossing lot 52 115 Holly Springs PROPERTY RECORDED:
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)		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 6%	0-9	Br SCL WSBK	FR SS SP SXP	N/A	42"	F-C SAP PS	N/A	PS 0.3
		9-21	R C SBK	FR SS SP SXP					
		21-42	R CL WSBK	FR SS SP SXP					
		42-60	VER SL SAP M	FR SS SP SXP					
2	LS 6%	0-5	Br SL GR	FR SS SP SXP	N/A	40"	F-C SAP	N/A	PS 0.3
		5-12	RBr SCL SBK	FR SS SP SXP					
		12-33	R C SBK	FR SS SP SXP					
		33-56	R CL WSBK	FR SS SP SXP					
3	LS 5%	0-3	Br SCL WSBK	FR SS SP SXP	N/A	52"	F-C SAP	N/A	PS 0.3
		3-21	R C SBK	FR SS SP SXP					
		21-52	R CL WSBK	FR SS SP SXP					
4	LS 5%	0-9	FILL		N/A	52"	F-C SAP	N/A	PS 0.3
		9-15	Br CL WSBK	FR SS SP SXP					
		15-34	R C WSBK	FR SS SP SXP					
		34-52	R CL WSBK	FR SS SP SXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	402 FT2	3100+ FT2
System Type(s)	PPBPS	DRIP
Site LTAR	0.3	0.125

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

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet)

PROPERTY ID #: 4751265090
DATE OF EVALUATION:
COUNTY: IREDELL

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	
5	LS 7%	0-20	Br SCL WSBK	FR SS SP SXP	N/A	65"	N/A	N/A	PS 0.3
		20-32	Br CL WSBK	FR SS SP SXP					
		32-50	R C SBK	FR SS SP SXP					
		50-65	R CL WSBK	FR SS SP SXP					
6	LS 7%	12-36"	FILL						US

BB RECEIVED FEB 7 - 2018

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM Comprehensive Relayout - Paid $350.00

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:** Mike-980-722-7370 **Alt. Phone:** _____

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

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

Property Information:

Street Address: 115 Holly Springs Lp

Subdivision Name: Windstone Crossing **Section/Phase:** _____ **Lot Number:** 52

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: _____
( ) 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: _____

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: _____ 2/7/2019
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

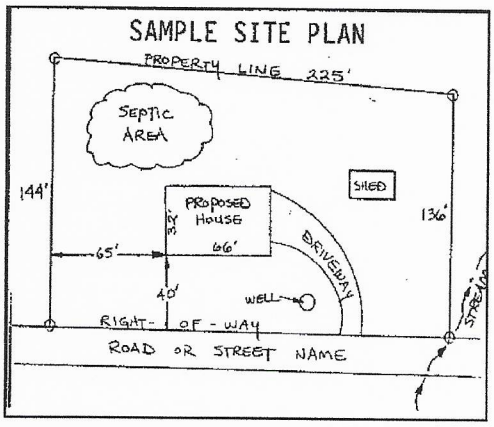
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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

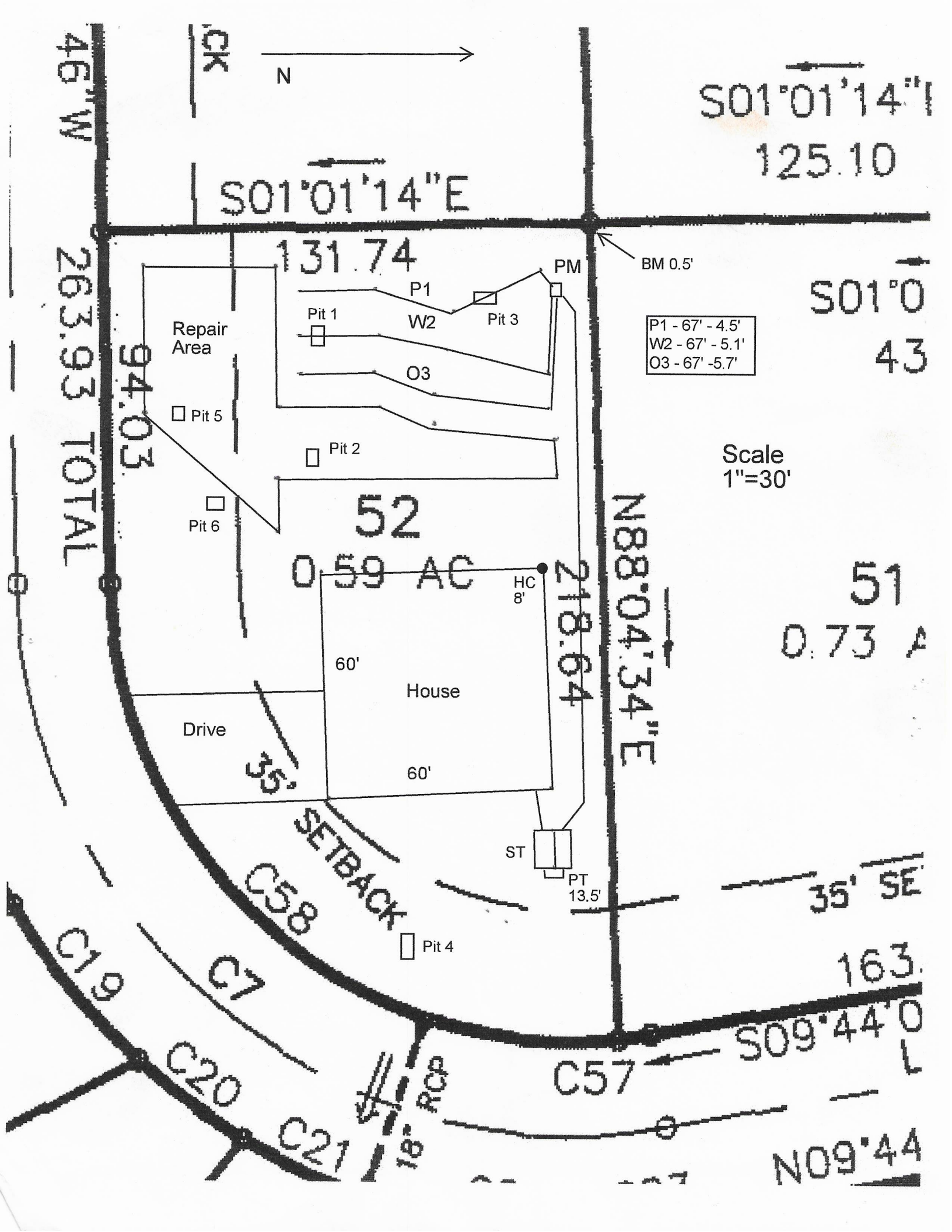
USE THIS SPACE TO DRAW YOUR SITE PLAN

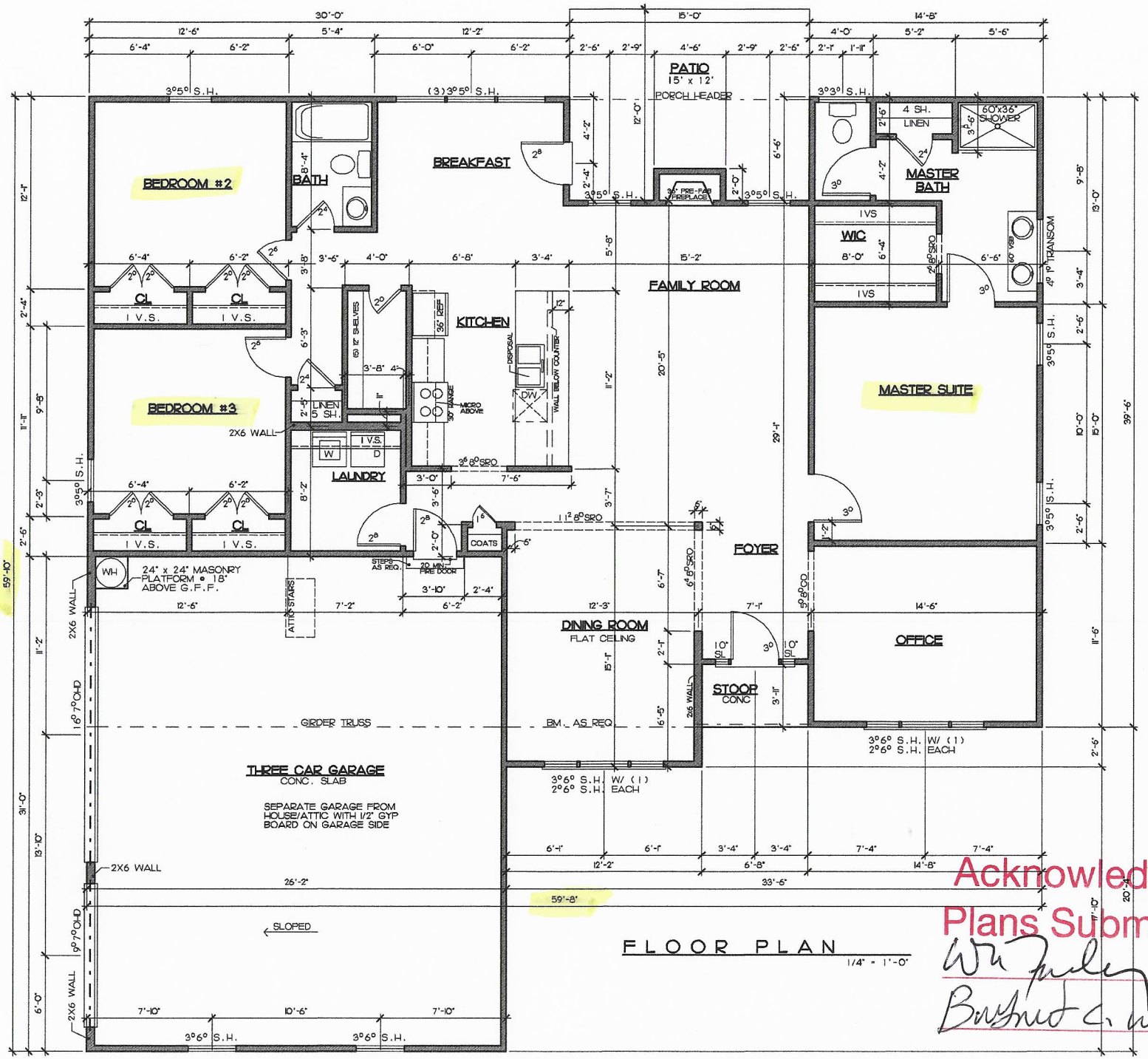
Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site

See attached plan

Signature: _____ 2/7/2019

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


N
S01°01'14"E
125.10
S01°01'14"E
131.74
BM 0.5'
PM
P1
W2
O3
Pit 1
Pit 2
Pit 3
Pit 4
Pit 5
Pit 6
Repair Area
P1 - 67' - 4.5'
W2 - 67' - 5.1'
O3 - 67' -5.7'
Scale
1"=30'
52
0.59 AC
HC
8'
60'
House
60'
Drive
35'
SETBACK
ST
PT
13.5'
N88°04'34"E
218.64
263.63 TOTAL
94.03
C58
C57
C7
C19
C20
C21
18" RCP
S09°44'0
N09°44
51
0.73 A
35' SE
163.



FLOOR PLAN

1/4" = 1'-0"

SQUARE FOOTAGES	
FLOOR PLAN=	1,998 sq ft
GARAGE=	807 sq ft
REAR PORCH=	88 sq ft
FRONT PORCH=	26 sq ft
TOTAL I.F.=	2919 sq ft

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

Acknowledgement Of Plans Submittal ONLY!

Date 3-28-19

Date 2-28-2019

Drafting & Design inc.
Charlotte N.C.
704-542-3833

COPYRIGHT STATEMENT
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WINDSTONE ESTATES

Project: THE MEADOW

Sheet Title: FIRST FLOOR PLAN

DR. BY: C. BAZAIRE
Date 12-6-18
REV:
Site

MEA-W-FP-LOT52

Sheet 3

IREDELL COUNTY

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

APPLICATION NUMBER
242060
Issue Date: 02/07/2019

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4751265090.000	115 HOLLY SPRINGS LOOP, TROUTMAN, NC 28166	

Owner Information		Applicant Information	
Owner:	PILCH ACRES HOLDING LLC	Applicant:	MICHAEL ATHANAS & ASSO
Address:	423	Address:	561 ENNIS RD
	IREDELL CO, NC 28625		WEDDINGTON, NC 28173
Phone:		Phone:	704-576-3887

Use Requested	Zone Code

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.590	35.00	35.00	15.00	15.00	NOT	X

Remarks:

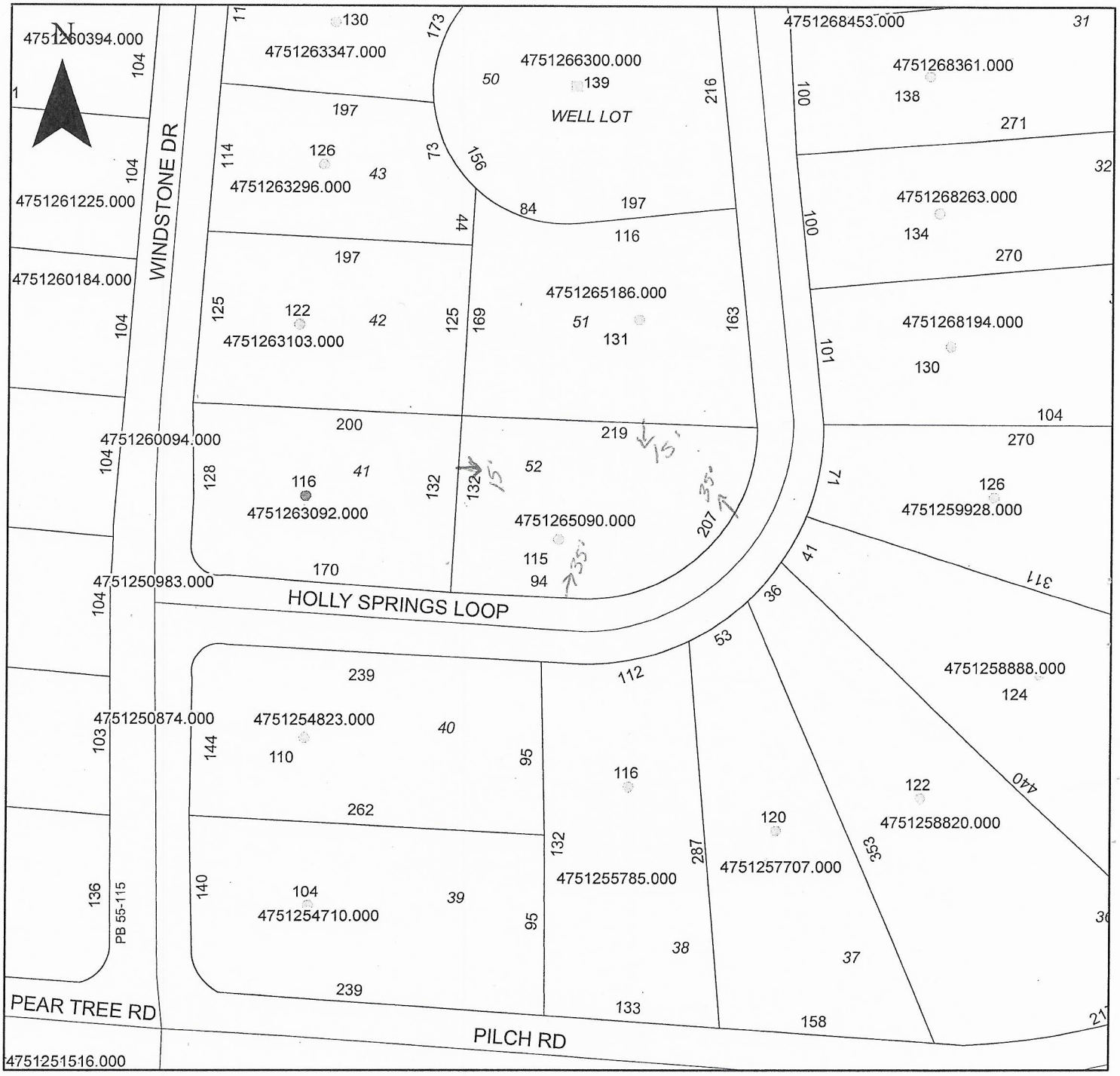
SET BACKS PER LESLIE 35' ALONG ROAD THE
OTHER TWO ARE 15'

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.

Applicant: _____ Date: _____

Permit Number	166887	TOTAL FEES:	$ 77.25

ZONING DISCLAIMER



Property Address 115 Holly Springs Loop

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

2/7/2019
Date