HS AP

ICHD–ENVIRONMENTAL HEALTH DIVISION

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

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

PERMIT # 307270

APPLICANT/OWNER: Pilch Acres Holding LLC APPLICANT ADDRESS: 15 Frowein Rd Ste G2 Center Moriches, NY 11934

SITE ADDRESS: 138 Holly Springs Lp Troutman NC PHONE: Mike 980 722 7370 ALT. PHONE

SITE DIRECTIONS: Amity Hill Rd TR Pilch Pear Rd TR Windstone TR Holly Springs on right

SUBDIVISION: Windstone Crossing SECTION: — LOT # 31 LOT AREA: 1.62 Acre

PIN # 4751268361

SAP CONTROLLED: ☒ YES ☐ NO Rep

DESIGN FLOW: 360gpd L.T.A.R.: .275 Inf / .125

Septic Tank	1000 (gal)	STB	760	Date	1/3
Pump Tank	1000 (gal)	PT	363	Date	12/9
Pump Make		Model		Serial #	
# Nitrification Fields	1	# Lines	6	Linear Ft	
Trench Width	36"	Trench Bottom Depth(Low side)	20"	Gravel Depth	N/A

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

System Description: Pump-PM Hoot PBPS

Repair System Description: Pretreatment Drip

Maintenance Agreement Required: ☐ YES ☒ NO

☐ GRAVITY ☒ PRESSURE

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

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

Water Supply: ☐ Private ☐ Public ☒ Community

☐ Basement w/o plumbing

Comments / Conditions: Divert storm/surface water away from Septic

INITIAL SITE SKETCH

See attached, approved Septic plan by Michael Athanas & Assoc. (dated 2/2/21)

AS BUILT SKETCH

3/3/2021: First 4 drainlines checked and were good but nothing was connected. Tanks Locations was checked but no Filter in ST or pump in PT.

3/4/21 Checked filter & Supply lines MD

5/3/21 Set 2ft pressure, check elect. & alarm.

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: [signature] Date: 3-1-21

IMPROVEMENT PERMIT by: Maria Detson Date: 2/7/21

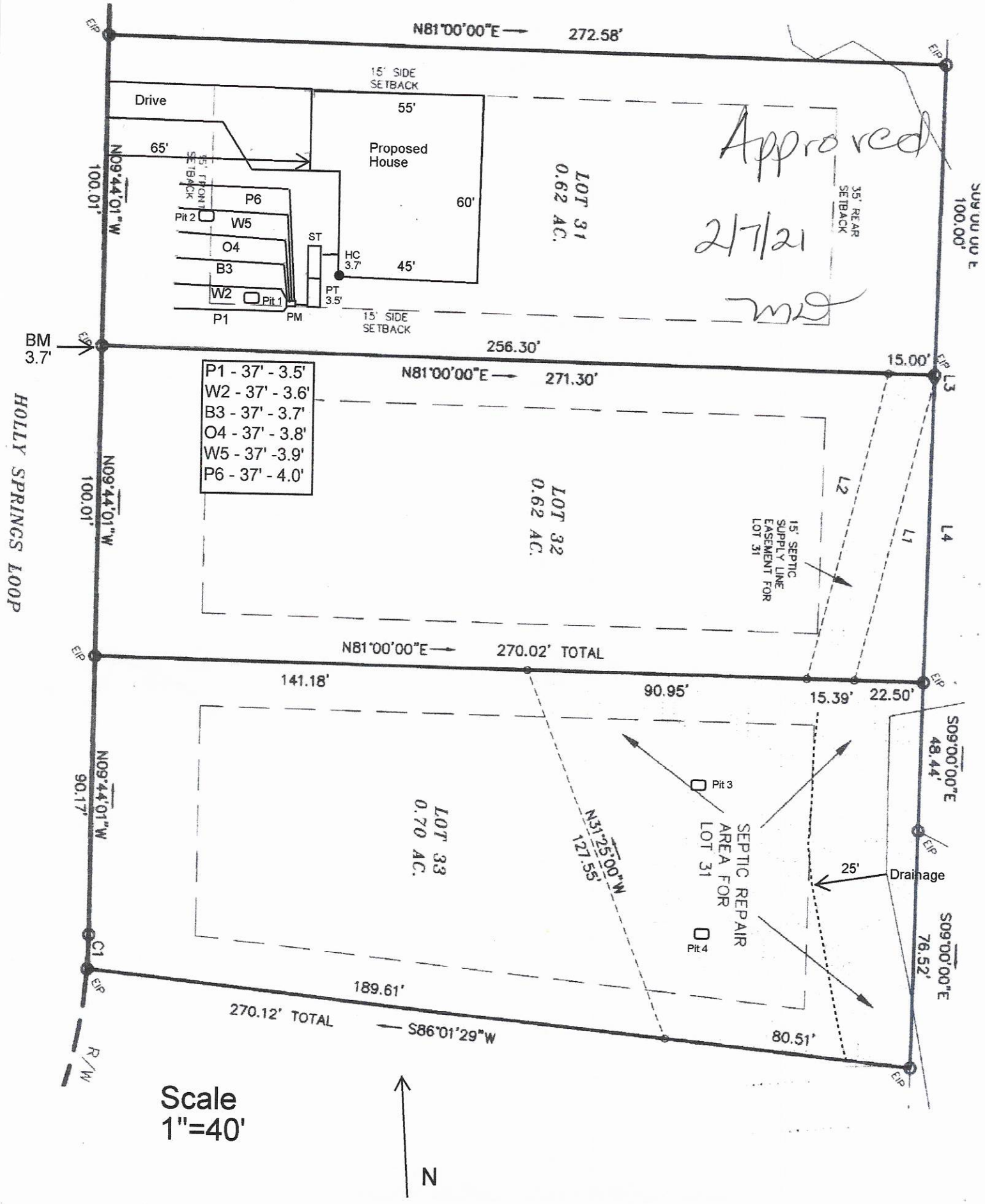
AUTHORIZATION TO CONSTRUCT by: Maria Detson Date: 2/7/21

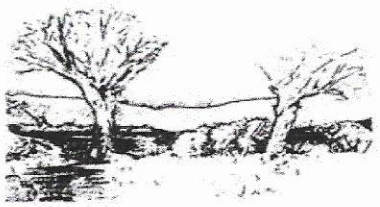
Installed by: Gunter Grading

OPERATION PERMIT by: Maria Detson Date 5-3-21

Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION, CALL 704-878-5305 Between 8am-9am the day the inspection is needed. Be sure to speak to an inspector to confirm your inspection time.


N81°00'00"E 272.58'
15' SIDE SETBACK
Drive
55'
Proposed House
65'
60'
45'
35' FRONT SETBACK
35' REAR SETBACK
15' SIDE SETBACK
N09°44'01"W 100.01'
100.00'
LOT 31 0.62 AC.
Approved
2/7/21
MS
P6
W5
O4
B3
W2
P1
Pit 1
Pit 2
ST
HC 3.7'
PT 3.5'
PM
BM 3.7'
256.30'
15.00'
L3
P1 - 37' - 3.5'
W2 - 37' - 3.6'
B3 - 37' - 3.7'
O4 - 37' - 3.8'
W5 - 37' -3.9'
P6 - 37' - 4.0'
N81°00'00"E 271.30'
LOT 32 0.62 AC.
15' SEPTIC SUPPLY LINE EASEMENT FOR LOT 31
L2
L1
L4
HOLLY SPRINGS LOOP
N81°00'00"E 270.02' TOTAL
141.18'
90.95'
15.39'
22.50'
S09°00'00"E 48.44'
N09°44'01"W 90.17'
LOT 33 0.70 AC.
N31°25'00"W 127.55'
Pit 3
Pit 4
SEPTIC REPAIR AREA FOR LOT 31
25' Drainage
S09°00'00"E 76.52'
C1
189.61'
270.12' TOTAL
S86°01'29"W
80.51'
R/W
Scale 1"=40'
N



Approved
2/7/2021
MD

MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887
2/2/2021

Reference: 138 Holly Springs Lp, Windstone Crossing Lot 31
House Footprint: See attached plan
Building Setbacks: 35' front/rear, 15' side
Water Source: Community Water
Number of Bedrooms/Daily Flow: 3/360 GPD
Proposed LTAR: 0.275 GPD/FT^2 (initial), 0.125 GPD/FT^2 (repair)
Proposed System Type: Horizontal PPBPS
Proposed Repair System Type: Pretreatment Drip Dispersal (SFE)
Distribution: ~~Gravity Distribution box~~ Pressure Manifold
Flow per Tap: 5.48 GPM
Tap Size and Material: ½" SCH 80
System Flow: 32.9 GPM
Dosing Volume: 194.4 gallons
Pump Run Time: 5.9 minutes
Elevation Head: 5.2'
Friction Head: 0.3'
Pressure Head: 2'
Total Dynamic Head: 7.5'
Supply Line Length: 10' of 2" PVC
Septic/Pump Tank Size: 1000/1000 gallons
Proposed Trench Bottom: 20"



Line	Design Length	# of Panels	Actual Length	Elevations
Pink 1	37'	9	40'	3.5'
White 2	37'	9	40'	3.6'
Blue 3	37'	9	40'	3.7'
Orange 4	37'	9	40'	3.8'
White 5	37'	9	40'	3.9'
Pink 6	37'	9	40'	4.0'

Initial System: 222'
Repair System: 3000 FT^2
Pump Tank: 3.5'
House Corner: 3.7'
Benchmark: 3.7'

Comments:
The initial system is <2% slope. Soil borings were also performed in the SFE that reflect the results in the pits.

RECEIVED FEB 03 2020

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

AP-307202 $225.00

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: 138 Holly Springs Lp

Subdivision Name: Windstone Crossing **Section/Phase:** _____ **Lot Number:** 31

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: _____

CHECK FOUNDATION TYPE
( ) 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: _____ 2/2/2021
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

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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 138 Holly Springs Lp Windstone Crossing Lot 31, identified as PIN (Parcel Identification Number) 4751268361, 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.

	2/2/2021		
Signature of Owner(s)	Date	Signature of Witness	Date

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

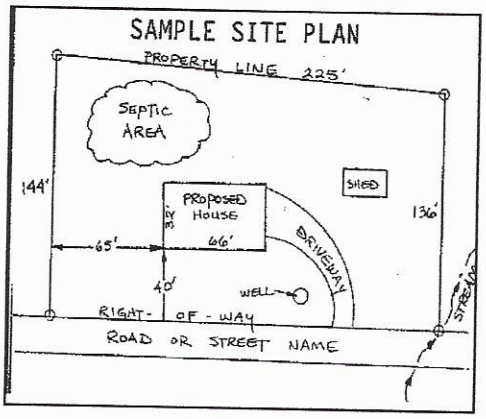
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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

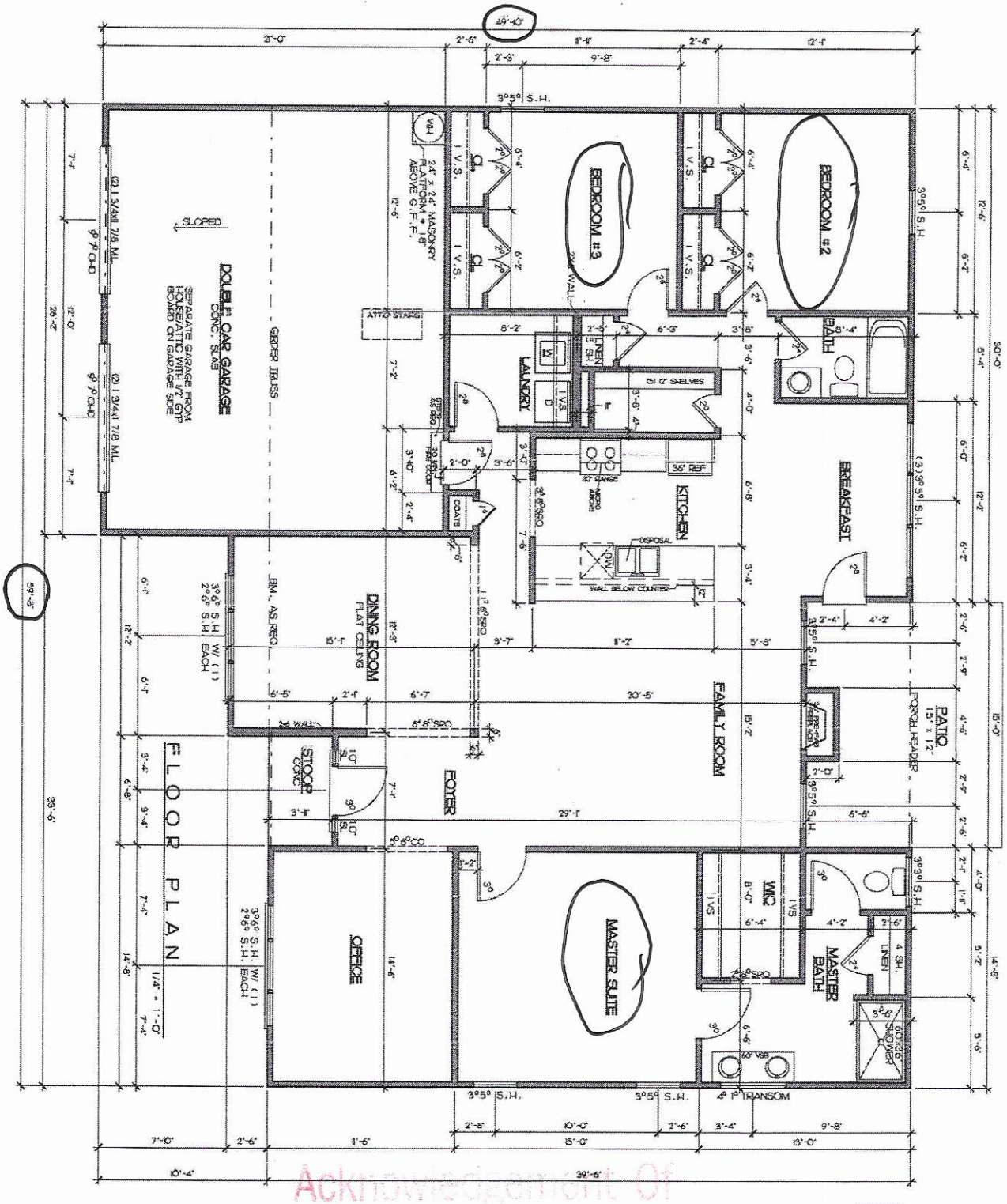
See attached plan

Signature: _____

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

2/2/2021

DATE



Acknowledgement Of
Plans Submittal ONLY
From Shuck Date 7/29/2020
W M Faulkner Date 7-2-2020

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

SQUARE FOOTAGES

FLOOR PLAN:	1,978.45 ft
GARAGE:	560.82 ft
REAR PORCH:	68.82 ft
FRONT PORCH:	26.82 ft
TOTAL I/F:	2682.85 ft

DR. BY: BRIAN GL	
DATE	04-04-018
REV.	02-22-18
	02-26-18
	03-30-18

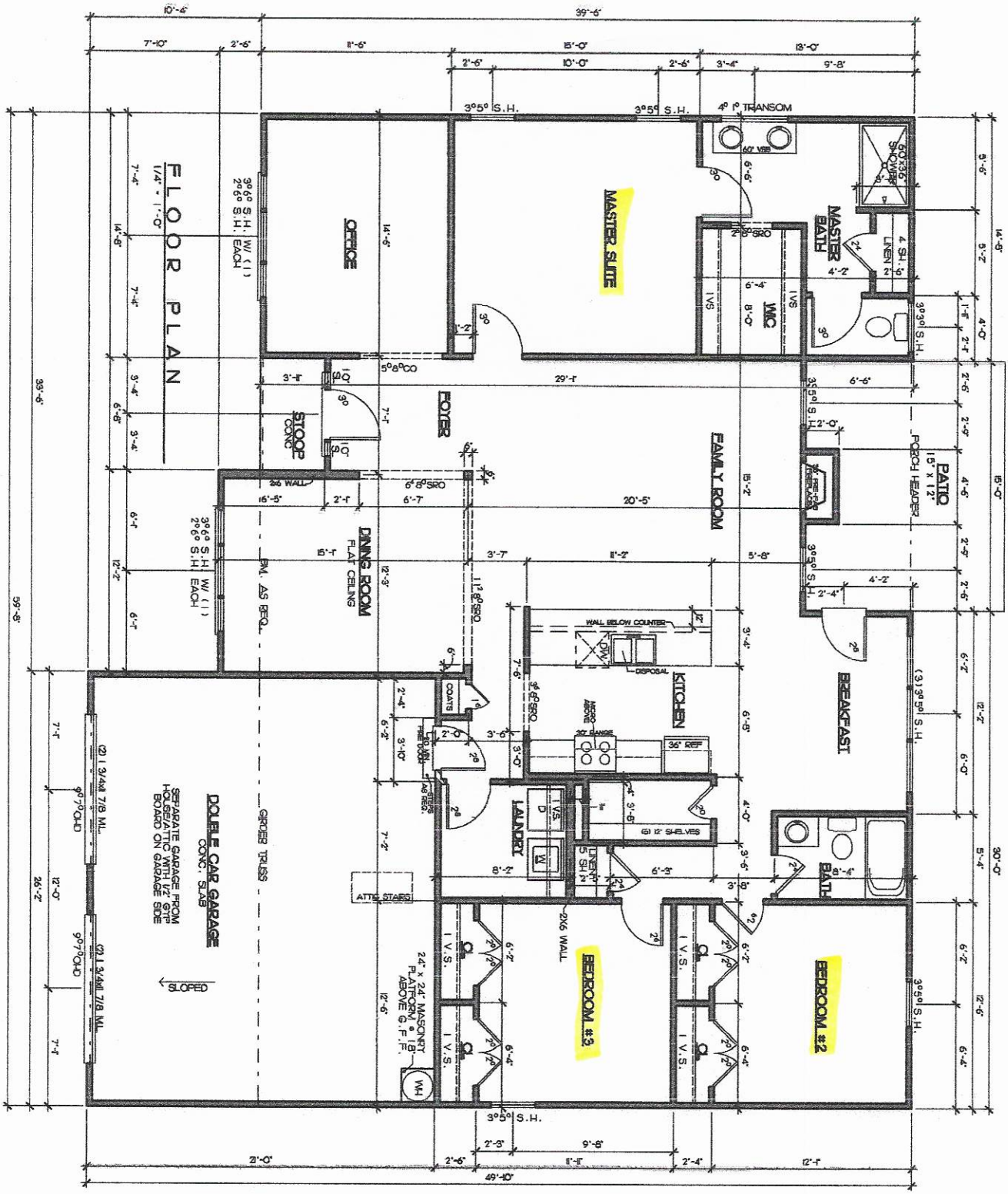
Project: THE MEADOW

Sheet Title: FIRST FLOOR PLAN

WINDSTONE ESTATES

Drawing No. 3

Sheet 3 MEADOW-FP



Acknowledgement of Plans Submittal ONLY!

Date 6-10-2020

Date

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

SQUARE FOOTAGES	
FLOOR PLAN=	1,998 sq ft
GARAGE=	560 sq ft
REAR PORCH=	88 sq ft
FRONT PORCH=	26 sq ft
TOTAL 1F=	2682 sq ft

GARAGE RIGHT

Sheet 3	MEADOW-FP_REV	Title	Date: C06-06-08 REV: C07-22-08 C07-24-08 C08-07-08 C08-20-08	DR. BY: BRIAN G.	Project: THE MEADOW Sheet Title: FIRST FLOOR PLAN

WINDSTONE ESTATES

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

APPLICATION NUMBER
307270 Issue Date: 05/07/2020

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4751268361.000	138 HOLLY SPRINGS LOOP	Iredell County

Owner Information	Applicant Information
Name: PILCH ACRES HOLDINGS LLC Address: Phone:	Name: MICHAEL ATHANAS & ASSOCIATES Address: 561 ENNIS RD WEDDINGTON, NC 28173 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
0.62	35	35	35	35	N/A	NO

Remarks
SFD**NEEDS DISCLAIMER**

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.

Signature of Owner/Contractor

Date: 05/07/2020

Permit Number	307270

TOTAL FEES:	$77.25

ZONING DISCLAIMER



Property Address 138 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

5/7/2020
Date