# IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP-302398

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

PIN # 4761496138 / 4761-39-9503

APPLICANT/OWNER: Adams Homes AEC, LLC APPLICANT ADDRESS: 3401 Saint Vardell Ln. Ste B Charlotte, NC

SITE ADDRESS: 134 Northlake Dr. Statesville, NC 28677 PHONE: 704-621-4664 ALT. PHONE 704-558-4527

SITE DIRECTIONS: 801 N → L on Triplett → L on Triplett → L on Ostwalt Amity → R on Bethesda → R on Northlake → 1st on R SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: Northlake SECTION: 1 LOT # 70 LOT AREA: .53 ac DESIGN FLOW: 360gpd L.T.A.R.: .3

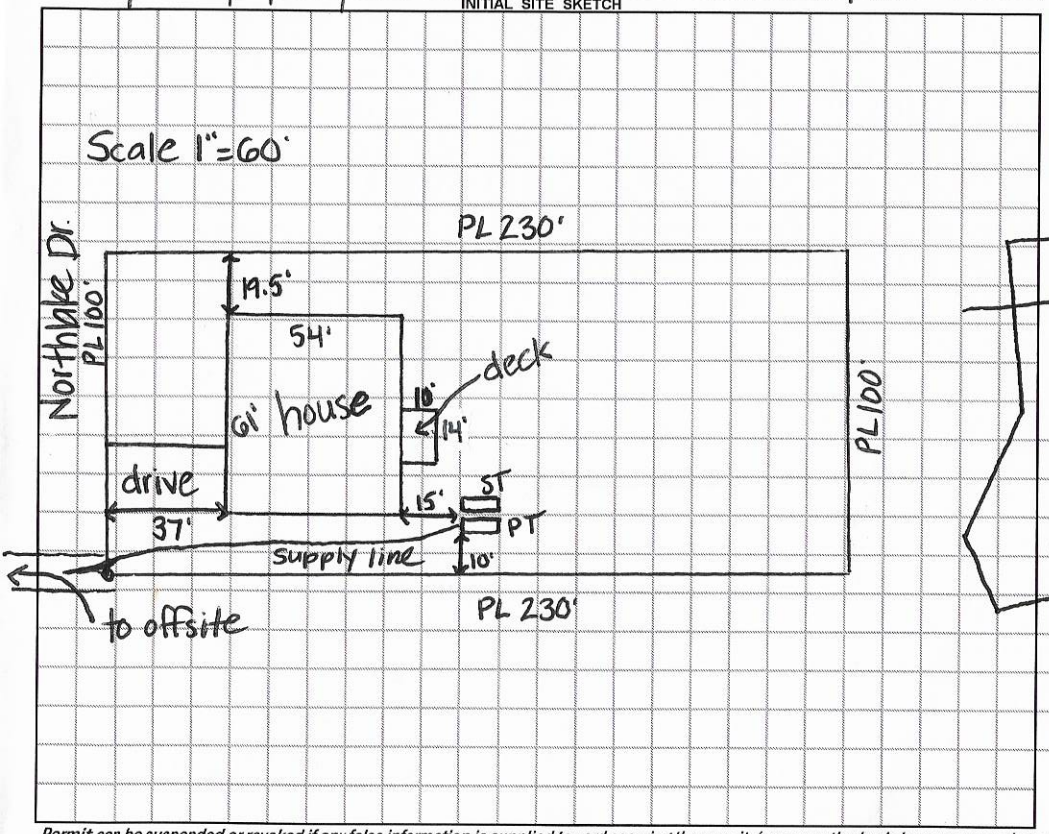
| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 | (gal) | STB | 260 | Date | 6-17-2020 | ☑ New System | ☐ Repair | ☐ Expansion | System Type: I II III IV V VI | |
| Pump Tank | 1000 | (gal) | PT | 363 | Date | 5-4-2020 | System Description: | PM 25% reduction (offsite) | | | |
| Pump Make | | | Model | | Serial # | | Repair System Description: | LP PPBPS | | | |
| # Nitrification Fields | 1 | | # Lines | 5@60' | Linear Ft | 300' | Maintenance Agreement Required: | ☐ YES | ☑ NO | | |
| Trench Width | 36" | | Trench Bottom Depth(Low side) | 32"/36" high side | 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 |

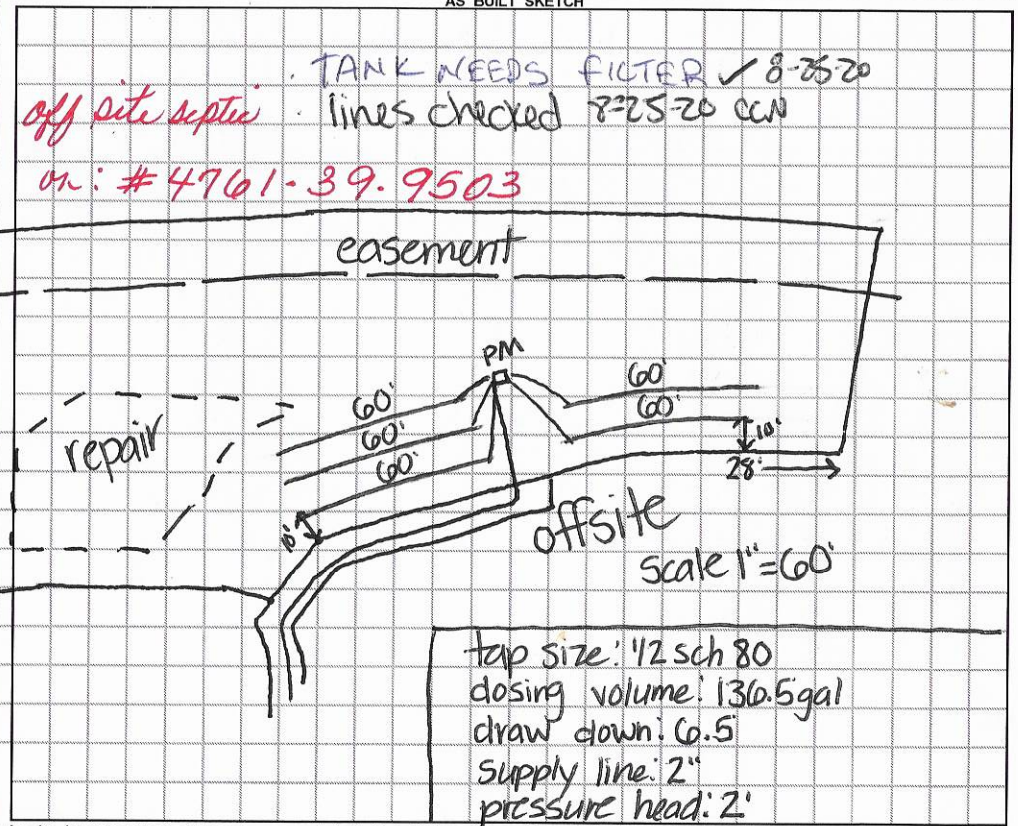
Comments / Conditions: * Supply line easement must be recorded prior to issuing AC. * A site visit be ICHD will be required to verify new property lines are marked at offsite septic.

offsite septic easement recorded: book 71 page 26 + book 26664 page 809

INITIAL SITE SKETCH




AS BUILT SKETCH




*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: 2/12/20 Installed by: PRECISION

IMPROVEMENT PERMIT by: Kayla Watson Date: 2-11-20 OPERATION PERMIT by: Bradford C. White Date: 9-22-2020

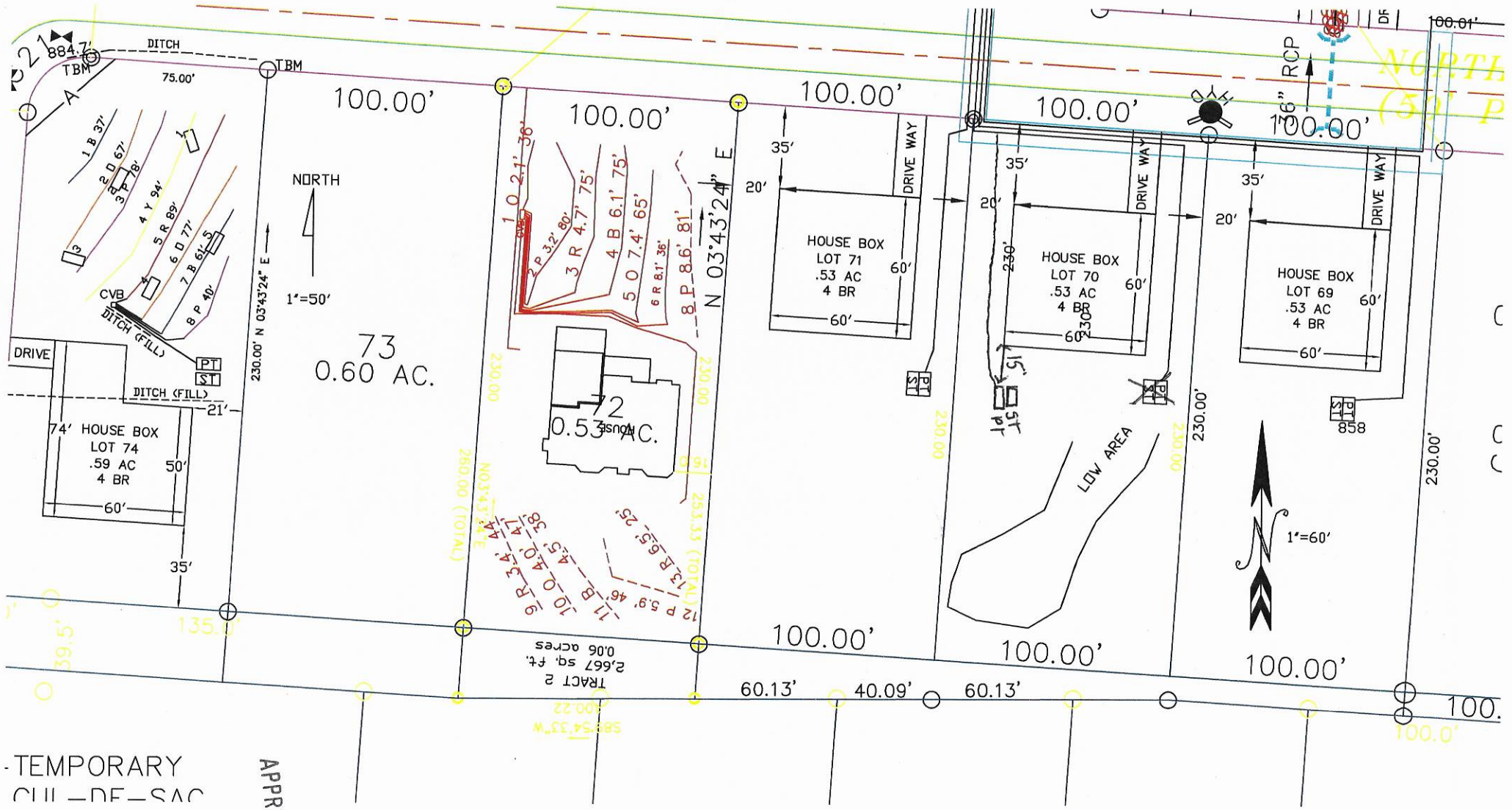
AUTHORIZATION TO CONSTRUCT by: Date: 2-25-20 Existing System Inspected by: Date:

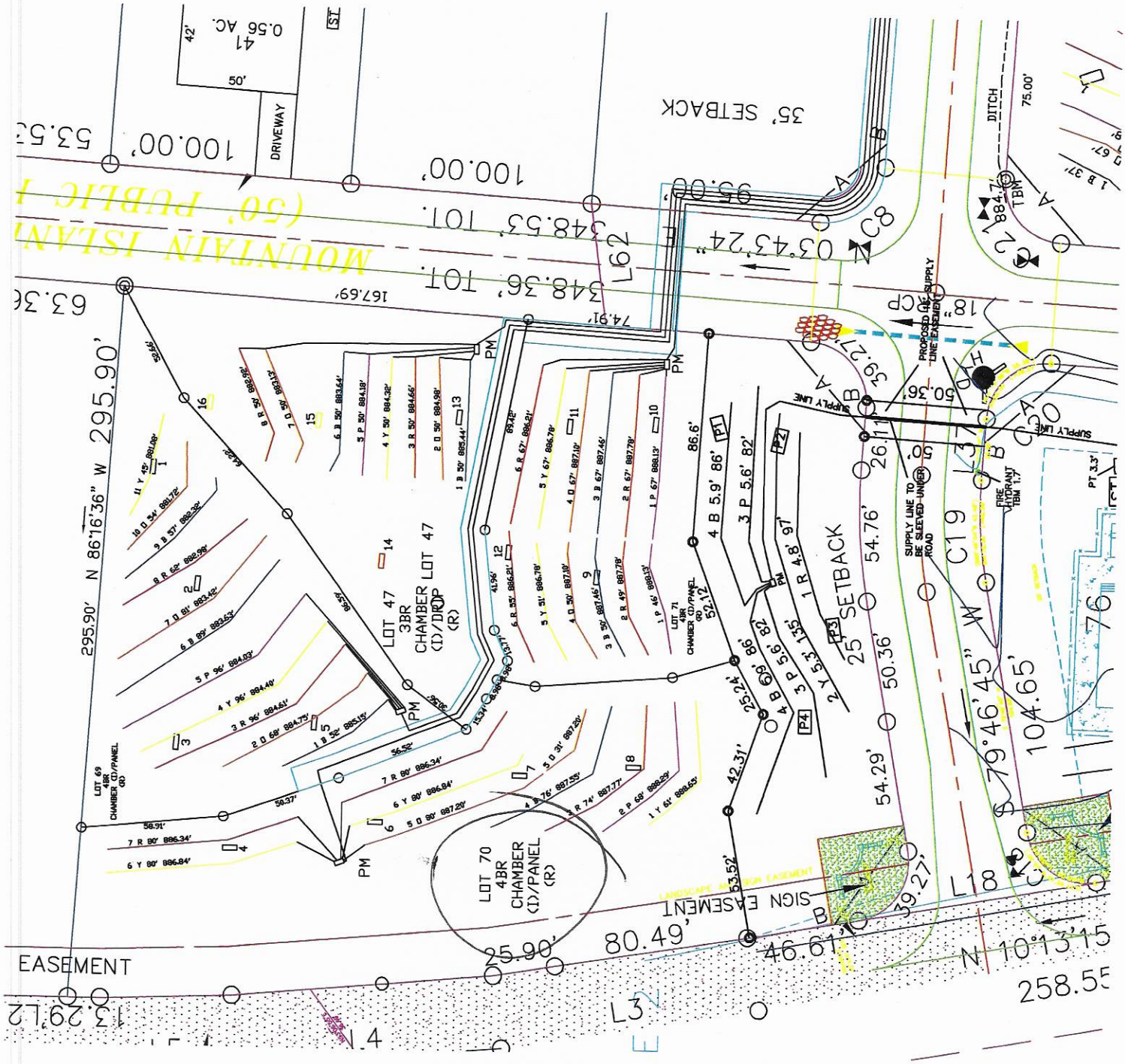
FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inpsector to confirm your inspection time.

Lot 70

| | Date | Initials |
|---|---|---|
| Drain Lines Checked | 8-25-20 | CCW |
| Tanks Checked | 9-19-20 | BW |
| Pressure Manifold or Valve Box Checked | 8-28-20 | CCW |
| Pressure Head Set | 9.17.20 | |
| Electrical Checked | 9.22.20 | BW |
| Floats Set | 9-17-20 | |
| Alarm Checked | 9-17-20 | |
| Maintenance Contract Y / (N) | Not Required | |

Checked supply line to offsite 8-27-20


DITCH
TBM
75.00'
100.00'
NORTH
1"=50'
73
0.60 AC.
72
0.53 AC.
House
DRIVE
DITCH (FILL)
74' HOUSE BOX
LOT 74
.59 AC
4 BR
60'
50'
35'
21'
230.00' N 03°43'24" E
N 03°43'24" E
HOUSE BOX
LOT 71
.53 AC
4 BR
HOUSE BOX
LOT 70
.53 AC
4 BR
HOUSE BOX
LOT 69
.53 AC
4 BR
DRIVE WAY
20'
35'
60'
230'
15'
LOW AREA
1"=60'
RCP
36"
858
TRACT 2
2,667 sq. ft.
0.06 acres
60.13'
40.09'
60.13'
TEMPORARY
APPROVED DEC 13 2019
KW
Scale 1"=60'




APPROVED DEC 13 2019
KW

Scale 1"=60'

# Carolina Soil & Septic Consulting, PLLC

P.O. Box 1703, Mooresville, NC 28115

Phone: (704) 202-5791 Email: adrianpruett@yahoo.com

NC Licensed Soil Scientist, SC Professional Soil Classifier,
Certified Septic System Operator, Licensed Septic Installer,
Certified Septic Inspector

**Proposed design for a 25% Reduction Septic System with Pressure Manifold distribution for a 4 bedroom single family residence on Lot 70, of Northlake Subdivision, Iredell County, North Carolina.**

**Contents:**

| | Page |
|---|---|
| Information for the Installer | 1 |
| Design Information | |
| Design Specifications | 2 |
| Layout Specifications | 3 |
| System Tapsheet | 4 |
| Pressure Manifold Diagram | 5 |
| Site Plan/System Plan | 6 |
| Calculations | 7 |
| Profile Descriptions | 8 |

**September 17, 2019**
**Job Number: 17133**
**Design By: Ben Aldridge, REHS**



# INFORMATION FOR INSTALLER:

- The permit should be read very carefully prior to submitting bid. The following are details that must be considered along with all other considerations.
- Tanks shall be approved by NC DHHS, and certification supplied by the manufacturer when requested.
- All tanks shall be properly back filled and compacted to prevent slumping at a later date.
- The installer is responsible for final grades and returning that grade to original, with exception of added structural features.
- The supply trench shall be compacted to eliminate any cavities left during initial fill placement.
- Installation of the system shall be during dry conditions in order to protect the soil structure.
- All fittings shall be pressure rated fittings.
- All joints shall be cleaned with PVC pipe cleaner and a heavy bodied glue applied to weld all joints.
- Where required by the county health department, post installation inspections by the designer must be scheduled 5 week days in advance.
- Trenches shall be carefully excavated so the bottom has no more than 1/4"fall in 10 feet with no high or low areas within. If high or low areas do exist after trench excavation, high areas should be removed rather than filling in low areas. Do not over excavate trenches! Any fine grading should be completed by hand with a rake and shovel, leaving no loose material.
- All pipe openings in the tanks shall be properly grouted. This also applies to the joints around the riser.
- Earth dams, constructed of relatively impervious material, shall be installed at the beginning and end of each lateral to prevent unwanted lateral water movement.
- Elevations at pin flag locations should be checked by the installer prior to beginning trenches to insure accuracy.
- Pump tank riser should be 6" above grade, control panel should be 12" above grade.
- If septic tank riser is used it should be a minimum of 6" above finished grade or within 6" below finished grade.
- Design precludes use of foundation drains on the residence and assumes back filling for positive drainage unless other wise noted.
- Trench walls should be raked, limed and installed at the depth specified by this design.
- Rake trench walls, lime sidewalls, install trenches 36" wide and have no more than 1/4" fall in 10 feet.
- **System is specified as a 25% Reduction Pressure Manifold installation.**
- **Repair is specified as a LP PPBPS installation.**
- **If grading for slab foundation is utilized do not grade/create greater than 2 ft of elevation difference within 15 ft of any component of the septic or repair. If back filling do not backfill over any initial or repair septic line.**

# PRESSURE MANIFOLD SYSTEM
# DESIGN SPECIFICATIONS

| | |
|---|---|
| **Owner:** | Lakeside Vista Partners |
| **Address:** | PO Box 2091<br>Cornelius, NC 28031 |
| **Phone:** | 704-452-7000 |
| **County:** | Iredell |
| **Location:** | NORTHLAKE LOT 70 |
| **Drainfield Design Flow (gpd):** | 480 |
| **Loading/Soil Application Rate (gpd/ft.$^2$):** | 0.3 |
| **Depth of Gravel in Trench:** | NA (25% reduction ) |
| **Gravel Size:** | NA (25% reduction ) |
| **Total Lateral Length From Layout:** | 400 |
| **Total Lateral Length Required:** | 400 |
| **Trench Depth:** | 32 in. Low side |
| **Trench Width:** | 36 in. |
| **Trench Spacing:** | 9 ft. on center |
| **Trench Bottom Area:** | 1200 |
| **Repair Trench Spacing:** | 8 ft. on center |
| **Repair Trench Depth:** | 32 in. Low side |
| **Septic Tank Size:** | 1000 |
| **Pump Tank Size:** | 1000 |
| **Estimated Supply Line Length:** | 1111 |
| **Supply Line Diameter:** | 2 in. SCH 40 PVC |
| **Supply Line Volume:** | 193.31 |
| **Dosing Volume:** | 182.84 |
| **Pump Tank Draw Down:** | 8.7 |
| **Supply Manifold Size:** | 4 in. SCH 80 PVC |
| **Supply Manifold Length:** | 4 ft. (minimum) |
| **Supply Manifold Volume:** | N/A |
| **Recommended Dosing Controls:** | Float Control Switches as Required for Control Panel or County Approved Equivalents |
| **Recommended Control Panel:** | NEMA 4X Control Panel or County Approved Control Panel. |
| **Pressure Head:** | 2 ft. |
| **Friction Head:** | 1.78 |
| **Elevation Head:** | 38.00 |
| **Total Dynamic Head:** | 71.73 |
| **Threaded Union:** | In Tank |
| **Gate Valves:** | 1 in Tank<br>1 at Pressure Manifold |
| **Check Valves:** | In Tank |
| **Anti-Siphon Hole:** | NA |
| **Additional Comments:** | Soil suitability was performed by CS&SC |

**Pump tank draw down based on an industry standard volume basis of 21 gallons per inch. Draw down may vary among pump tank manufacturers.*

APPROVED DEC 13 2019
KW

# NORTHLAKE LOT 70
# FIELD LAYOUT SPECIFICATIONS

LAYOUT FOR 4 BEDROOM HOME

September 17, 2019

| LINE # | FLAG COLOR | BS | HI | FS | ELEVATION | FLAGGED LINE LENGTH | DESIGN LINE LENGTH |
|---|---|---|---|---|---|---|---|
| TBM | | | | | 884.70 | | |
| INSTR. 1 | | | | | | | |
| HOUSE | | | | | 856.00 | | |
| TANK | | | | | 856.00 | | |
| 1 | YELLOW | | | | 888.65 | 61 | 61 |
| 2 | PINK | | | | 888.29 | 68 | 68 |
| 3 | RED | | | | 887.77 | 74 | 74 |
| 4 | BLUE | | | | 887.55 | 76 | 76 |
| 5 | ORANGE | | | | 887.20 | 31 | 31 |
| ***5*** | ***ORANGE*** | | | | ***887.20*** | ***80*** | ***80*** |
| ***6*** | ***YELLOW*** | | | | ***886.84*** | ***80*** | ***80*** |
| ***6*** | ***YELLOW*** | | | | ***886.84*** | ***80*** | ***80*** |
| ***7*** | ***RED*** | | | | ***886.34*** | ***80*** | ***80*** |
| ***7*** | ***RED*** | | | | ***886.34*** | ***80*** | ***80*** |
| | | | | | **Total** | **710** | **710** |

| | LINE LENGTH | SYSTEM TYPE | SOIL LTAR GPD/FT[1] | TRENCH SYSTEM | DISTRIBUTION |
|---|---|---|---|---|---|
| **** System*** | ***400*** | ***ACCEPT.*** | ***0.300*** | ***25% RED.*** | **PRESSURE MANIFOLD** |
| Repair | 310 | MOD. | 0.275 | PPBPS | LOW PRESSURE |

**Notes:**
** TBM located at corner of lot 74 (see site plan)
**All measures in feet
**Nitrification lines are demonstrated on contour via colored pin flags

**Comments: Iredell County has CS&SC's permission to relocate tanks and distribution devices as needed.**

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KW

# PRESSURE MANIFOLD TAPSHEET - NORTHLAKE LOT 70

## SYSTEM

| Line # | Color | Elev | Length | Hole Size | Flow/Tap | gpd | Trench Area | Line LTAR |
|---|---|---|---|---|---|---|---|---|
| *5* | *ORANGE* | *887.20* | *80* | SCH 80 1/2 | **5.48** | 36.57 | 240 | 0.15 |
| *6* | *YELLOW* | *886.84* | *80* | SCH 80 1/2 | **5.48** | 36.57 | 240 | 0.15 |
| *6* | *YELLOW* | *886.84* | *80* | SCH 80 1/2 | **5.48** | 36.57 | 240 | 0.15 |
| *7* | *RED* | *886.34* | *80* | SCH 80 1/2 | **5.48** | 36.57 | 240 | 0.15 |
| *7* | *RED* | *886.34* | *80* | SCH 80 1/2 | **5.48** | 36.57 | 240 | 0.15 |
| | **total** | **feet =** | **400** | **gal/min =** | **27.4** | | | |
| | | | **Des. Flow** | **480** | | | | |
| | | | **Pump Run=** | **6.67** | | | | |
| | | | **LTAR** | **0.300** | | | | |

Some lines flagged longer in the field, shorten to lengths shown here.

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KW

## CALCULATIONS

Location NORTHLAKE

Lot No: 70

| | | |
|---|---|---|
| No. of Bedrooms | 4 | |
| Design Flow | 480 | $^{gal}/_{day}$ |
| LTAR | 0.3 | $^{gpd/ft^2}$ |
| 25% RED.? (YES OR NO) | YES | |
| Supply Line Length | 1111 | ft. |
| Supply Line Volume | 193.314 | gal. |
| Required Feet of Line | 400 | ft. |
| Amount of Line from Layout | 400 | ft. |
| Gallons per Minute | 27.4 | $^{gal}/_{min}$ |
| Required Septic Tank Capacity | 1000 | gal. |
| Required Pump Tank Capacity | 1000 | gal. |
| Lateral Line Volume | 261.2 | gal. |
| Dosing Volume | 182.84 | gal. |

*Note: Dosing Volume based on 70% of lateral line volume*

| | | |
|---|---|---|
| Tank Draw Down | 8.7 | *Generic Draw Down of 21 gal.per in.* |
| Pump Run Time | 6.67 | minutes |
| Elevation Head | 38 | ft. |
| Pressure Head | 2 | ft. |
| Friction Factor | 1.78 | ft./100 ft. *(From the interpolater.)* |
| Friction Head | 19.78 | ft. |
| Total Dynamic Head (+20%) | 71.73 | ft. |

FRICTION FACTOR INTERPOLATER
2" SCH 40 PVC

| GPM | *f* |
|---|---|
| 20 | 0.84 |
| | -0.88 |
| 25 | 1.27 |
| | -1.28 |
| 30 | 1.78 |
| | -1.76 |
| 35 | 2.37 |
| | -2.25 |
| 40 | 3.03 |
| 43.07 | 3.48 |
| 45 | 3.77 |
| 48.14 | 4.28 |
| 50 | 4.58 |
| 57.11 | 5.89 |
| 60 | 6.42 |

APPROVED DEC 13 2019
KW

PROP. ID #: 4761495138

COUNTY: IREDELL

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

OWNER: LAKESIDE VISTA PARTNERS LLC

ADDRESS: PO BOX 2091 CORNELIUS NC 28031

PROPOSED FACILITY: SFR PROPOSED DESIGN FLOW (.1949): 480 GPD

LOCATION OF SITE: 134 NORTHLAKE DRIVE

APPLICATION DATE:

DATE EVALUATED: 9/13/2019

PROPERTY SIZE: 0.53

PROPERTY RECORDED: YES

**WATER SUPPLY:** PRIVATE X PUBLIC WELL SPRING OTHER:

**EVAL. METHOD:** A. BORING X PIT CUT **WASTEWATER TYPE** X 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/C OLOR | .1943 SOIL DEPTH | .1956 SAPROLITE CLASS | .1944 RESTR HORIZON | |
| 4 | LS 7% | 0-10 | BRSCL,W,SBK | FR,SS,SP,SEXP | N/A | 55" | FEW TO COMMON 43-55 | N/A | 0.3 |
| | | 10-26 | RC SABK | FI S P SEXP | | | | | |
| | | 26-43 | RC WSBK | FR SS SP SEXP | | | | | |
| | | 43-55 | Y/R CL WSBK | FR SS SP SEXP | | | | | |
| | | | | | | | | | |
| 6 | LS 8% | 0-7 | BRSCL,W,SBK | FR,SS,SP,SEXP | N/A | 55" | FEW 41-55 | N/A | 0.3 |
| | | 7-26 | RC SABK | FI S P SEXP | | | | | |
| | | 26-41 | RC WSBK | FI S SP SEXP | | | | | |
| | | 41-55 | R CL WSBK | FR SS SP SEXP | | | | | |
| | | | | | | | | | |
| 7 | LS 7% | 0-9 | BRSCL,W,SBK | FR,SS,SP,SEXP | N/A | 55" | N/A | N/A | 0.3 |
| | | 9-35 | RC SABK | FI S P SEXP | | | | | |
| | | 35-55 | RC MSBK | FI S P SEXP | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 8 | LS 7% | 0-9 | BRSCL,W,SBK | FR,SS,SP,SEXP | N/A | 54" | N/A | N/A | 0.275 |
| | | 9-25 | Y/BR SC WSBK | FI SS SP SEXP | | | | | |
| | | 25-54 | RC S/MABK | FI S P SEXP | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| AVAILABLE SPACE (.1945) | PS | PS |
| SYSTEM TYPE(S) | PM 25% REDUCTION | LP PPBPS |
| SITE LTAR | 0.3 | 0.275 |
| COMMENTS | | |

| | |
|---|---|
| OTHER FACTORS (.1946): | N/A |
| SITE CLASSIFICATION (.1948): | PS |
| EVALUATED BY: | BEN ALDRIDGE |
| OTHER(S) PRESENT | JACOB CONRAD, DAVID BEANE |

APPROVED DEC 13 2019

KW

RECEIVED FEB 1 0 2020

Paid $105.00

#AP-302398

# IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

*APPLICATION FORM*

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

**Applicant Information:** (PRINT CLEARLY)

Applicant Name: Cynthia Bladning Address: 3401 Saint Vardell Lane, Suite B, Charlotte, NC Zip: 28217

Applicant Email: submit@majpermits.com Phone: (704) 621-4664 Alt. Phone: (704) 884-1548

Owner Name: Adams Homes AEC, LLC Address: 3401 Saint Vardell Lane, Suite B, Charlotte, NC Zip: 28217

Owner Email: charlottewarranty@adamshomes.com Phone: (704) 558-4527 Alt. Phone: _____

**Property Information:**

Street Address: 134 Northlake Drive, Statesville, NC 28677

Subdivision Name: Northlakes Section/Phase: _____ Lot Number: 70

Driving Directions: I-77 North, exit 42, right onto NC-115 / US-21 toward Troutman , Turn left onto US-21 N / NC-115 N, Turn right onto Ostwalt Amity Rd, Turn left onto Bethesda Rd, Turn right onto Northlake Dr

**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: 3
Maximum Number of Occupants: _____
( ) Swimming Pool
( ) Other Addition/Structure: _____

**CHECK FOUNDATION TYPE**

(X) 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: _____
(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:** Cynthia Bladning 12/6/19

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

134 Northlake Drive, Statesville, NC 28677 Lot 70

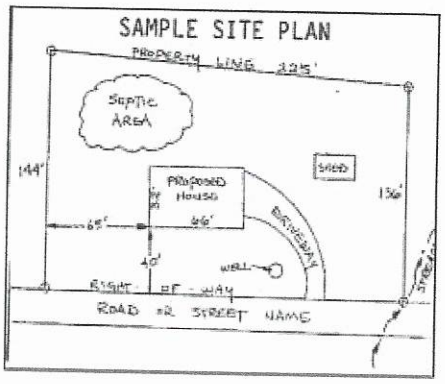
# IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

***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:**

- (X) Property Line measurements are clearly identified
- (X) All proposed structures are indicated
- (X) Front and side setbacks from property line
- (X) Preferred driveway location
- (X) Preferred well location
- (X) Preferred septic system location
- (X) 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 |

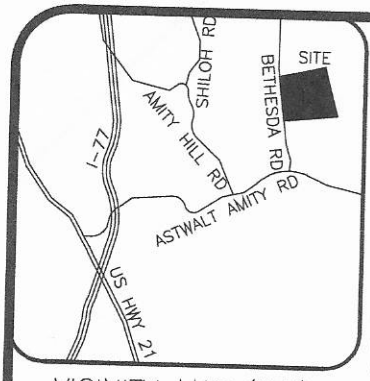
## USE THIS SPACE TO DRAW YOUR SITE PLAN

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

Please see attached

**Signature:** Cynthia Blanding 2/10/20

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




VICINITY MAP (NTS)

LEGEND

AC=AIR CONDITIONING UNIT
BOC=BACK OF CURB
DW=CONC DRIVEWAY
EB=ELECTRIC BOX
EOP=EDGE OF PAVEMENT
P=PATIO
PO=PORCH
SCO=CLEANOUT
SW=SIDEWALK
TP=TELEPHONE PEDESTAL
WM=WATER METER

◎ IRON PIPE FOUND
◉ IRON PIPE SET
○ NAIL SET

THIS SURVEY IS OF AN EXISTING PARCEL OR PARCELS OF LAND AND DOES NOT CREATE A NEW STREET OR CHANGE AN EXISTING STREET.

SHAWN T. RUMBERGER, PLS L-4909 DATE

THIS MAP IS ONLY INTENDED FOR THE PARTIES AND PURPOSES SHOWN. THIS MAP IS NOT FOR RECORDATION. NO TITLE REPORT PROVIDED.

NOTE: LOTS SHOWN HEREON ARE SUBJECT TO ANY AND ALL EASEMENTS, RIGHT OF WAYS, AND RESTRICTIONS OF RECORD.

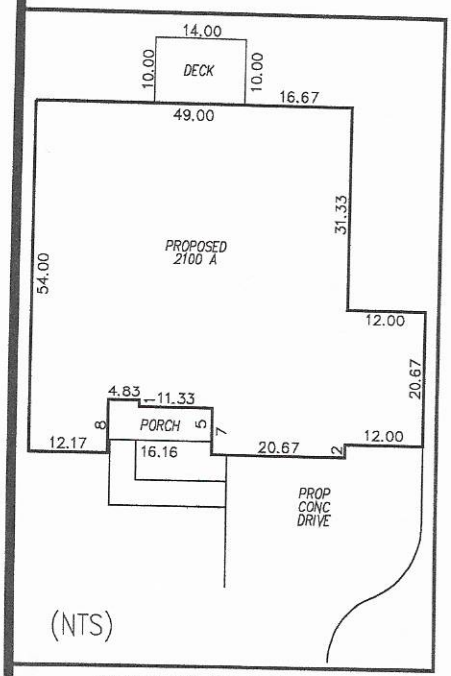
NOTES:

1) DRIVEWAY IMPERVIOUS CALCULATION SHOWN HEREON CALCULATED TO THE FRONT PROPERTY LINE/RIGHT-OF-WAY.
2) LOT SHOWN HEREON IS SUBJECT TO ANY AND ALL EASEMENTS, RIGHT-OF-WAYS AND RESTRICTIONS OF RECORD.

| IMPERVIOUS AREA | |
|---|---|
| HOUSE | 2,861 SQ.FT. |
| DRIVE TO R/W | 901 SQ.FT. |
| WALK | 96 SQ.FT. |
| DECK | 140 SQ.FT. |
| TOTAL | 3,998 SQ.FT. |

| SETBACKS | |
|---|---|
| FRONT | 35' |
| SIDE | 15' |
| REAR | 35' |
| SIDE STREET | 25' |

NOTE: ALL LOTS SUBJECT TO A 10' UTILITY & DRAINAGE EASEMENT. 10' ON EACH SIDE OF ALL PROPERTY LINES.




GRAPHIC SCALE

50 0 25

1 inch = 50 ft.

N/F
PLEASANT PAUL DEATON
D.B. 773, PG. 123

N 86°16'36" W 100.00'

PLAT NORTH
PB 53, PG 94

69

S 03°43'24" W 230.00'

139.0

70

23,000 S.F.
0.53 AC.

N 03°43'24" E 230.00'

71

19.5

19.5

37.0

S 86°16'36" E 100.00'

NORTHLAKE DRIVE
50' PUBLIC R/W

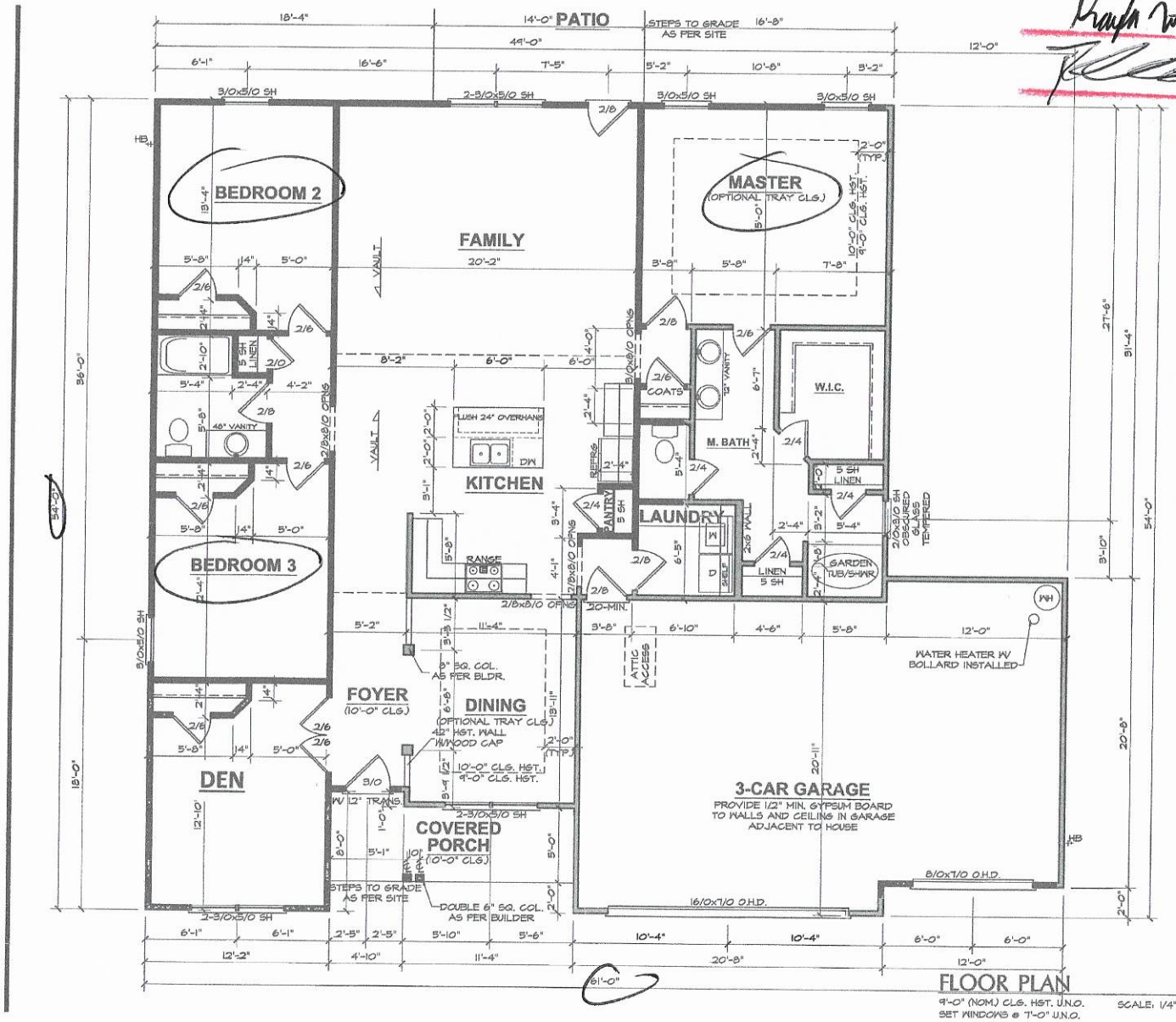
# PRELIMINARY PLOT PLAN

| | |
|---|---|
| PROJECT: | 18-005 NORTHLAKES |
| DRAWN BY: | SEER |
| SCALE: | 1"=50' |
| DATE: | 11-21-19 |

FOR
ADAMS HOMES CHARLOTTE
134 NORTHLAKE DRIVE, STATESVILLE
LOT 70 NORTHLAKE SUBDIVISION
CHAMBERSBURG TWP., IREDELL CO., NC
P.B. 53, PG. 94

ECLS GLOBAL, INC.
U.S. VETERAN-OWNED
19 N McKINLEY ST
COATS, NC 27521
910.897.3257 ECLSGLOBALINC.COM
910.897.2329 (FAX) CO#C-4175

Acknowledgement Of
Plans Submittal ONL
Date 2-11-20
Date




2100 "A" FE (R) 3-CAR NR070

ADAMS HOMES AEC, LLC

DATE DRAWN
12-3-2019
PROJECT
4161
REVISIONS

SHEET
3

# 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 # AP-302398

PIN # 4761495138

APPLICANT/OWNER: Lakeside Vista Partners

APPLICANT ADDRESS: PO Box 2091 Cornelius NC

SITE ADDRESS: 134 Northlake Dr. Statesville, NC

PHONE: 704-798-6337 ALT. PHONE ____

SITE DIRECTIONS: NC 801 N → L on Triplett → L on Ostwalt Amity → R on Bethesda → R on Northlake → 1st on R

SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: Northlake SECTION: 1 LOT # 70 LOT AREA: .53ac DESIGN FLOW: 480gpd L.T.A.R.: .3

Septic Tank 1000 (gal) STB ____ Date ____

Pump Tank 1000 (gal) PT ____ Date ____

Pump Make ____ Model ____ Serial # ____

# Nitrification Fields 1 # Lines 5@80' Linear Ft: 400'

Trench Width 36" Trench Bottom Depth(Low side) 32"/36" high side Gravel Depth ____

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

System Description: PM 25% reduction (offsite)

Repair System Description: LP PPBPS

Maintenance Agreement Required: ☐ YES ☑ NO ☐ GRAVITY ☑ PRESSURE

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

No. Bedrooms 4 No. Persons 8 No. Employees ____ ☑ Crawl Space ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☑ Community

Comments / Conditions: *Offsite Septic and supply line easements must be recorded prior to issuing AC* A site visit by ICHD will be required to verify property lines are marked at offsite septic.

INITIAL SITE SKETCH

See attached site plan by CS + SC, PLLC (N new)

Offsite Nitrification Easement Recorded Book 71/Page 26 + Book 2664/Page 809

AS BUILT SKETCH

Revised

* offsite septic/supply line recorded

---IMPROVEMENT PERMIT ONLY---

DO NOT ISSUE BUILDING PERMIT!

FLOOR PLAN STILL NEEDED

Only give client attached photo copy

*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

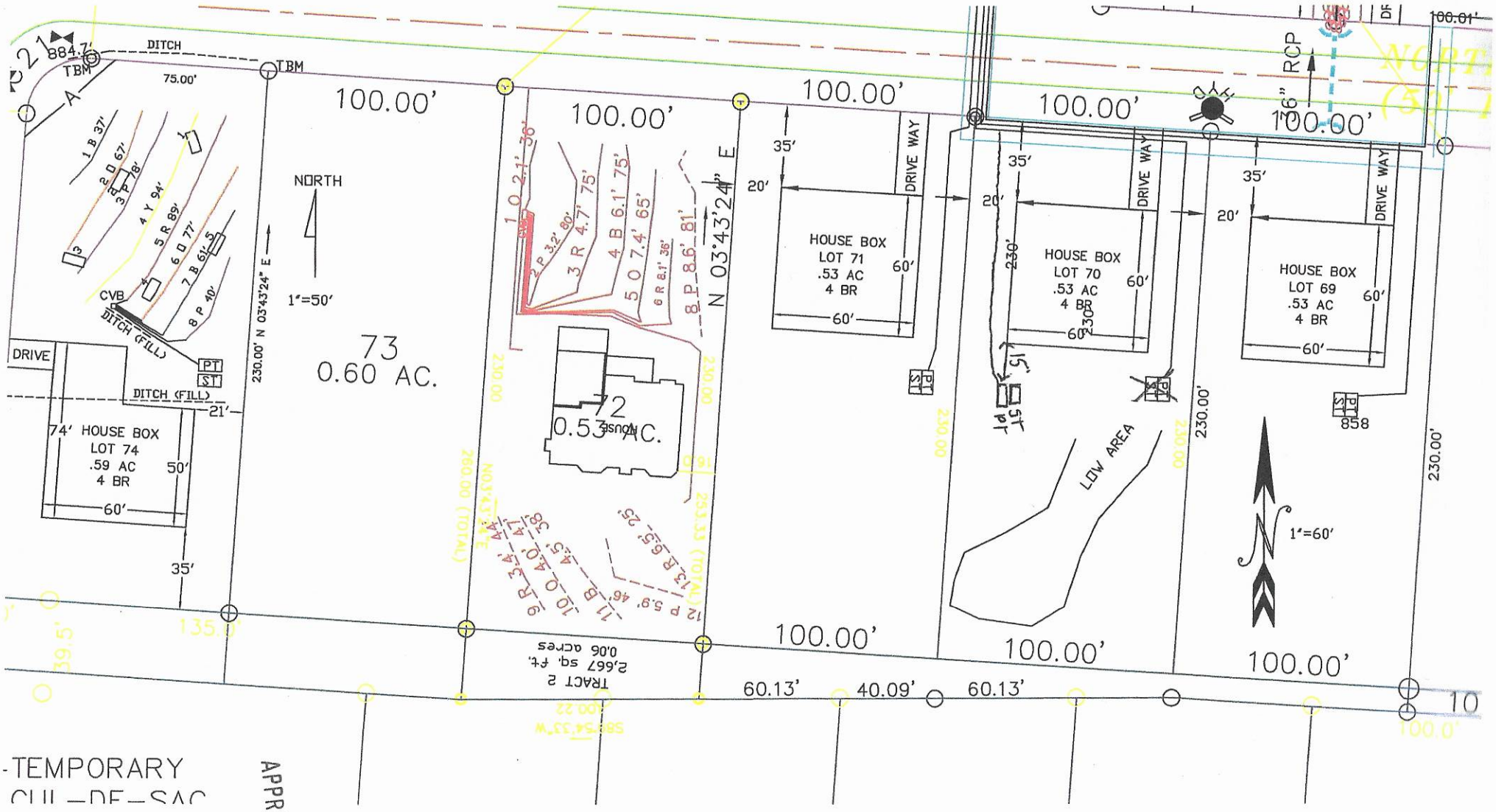
☐ IMPROVEMENT PERMIT *with plat valid without expiration.* ☑ IMPROVEMENT PERMIT *with site plan valid for 60 mos.* ☐ AUTHORIZATION TO CONSTRUCT *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: ____ Date: 12/27/19 Installed by: ____

IMPROVEMENT PERMIT by: Kayla Wilson Date: 12-13-19 OPERATION PERMIT by: ____ Date: ____

AUTHORIZATION TO CONSTRUCT by: ____ Date: ____ 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.


884.7'
DITCH
TBM
TBM
75.00'
100.00'
100.00'
100.00'
100.00'
100.00'
NORTH
1"=50'
73
0.60 AC.
72
0.53 AC.
House
230.00' N 03°43'24" E
N 03°43'24" E
DRIVE
DITCH (FILL)
DITCH (FILL)
21'
74' HOUSE BOX
LOT 74
.59 AC
4 BR
50'
60'
35'
CVB
PT
ST
HOUSE BOX
LOT 71
.53 AC
4 BR
60'
60'
35'
20'
DRIVE WAY
HOUSE BOX
LOT 70
.53 AC
4 BR
60'
60'
230'
35'
20'
DRIVE WAY
HOUSE BOX
LOT 69
.53 AC
4 BR
60'
60'
35'
20'
DRIVE WAY
RCP
36"
15'
ST
PT
LOW AREA
1"=60'
230.00'
230.00'
858
TRACT 2
2,667 sq. ft.
0.06 acres
60.13'
40.09'
60.13'
100.00'
100.00'
100.00'
135.0'
39.5'
-TEMPORARY
APPROVED DEC 13 20
KW
Scale 1"=60'




APPROVED DEC 1 3 2019

KW

Scale 1"=60'

**Northlake** Lot: **70**

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

## 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, Adams Homes NC, LLC, am the legal owner(s) of the property located at 134 Northlake Drive, Statesville, NC 28677, identified as PIN (Parcel Identification Number) 4671-495-138, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Cynthia Blanding, MAJ Permits Inc., 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.

X MANAGER 7/19/2016
Signature of Owner(s) Date

X 7.19.16
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