ICHD–ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP-242529

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

PIN # 4761491231

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

SITE ADDRESS: 118 Northlake Dr. Statesville, NC 28677 PHONE: 704-621-4664 ALT. PHONE 704-558-4527

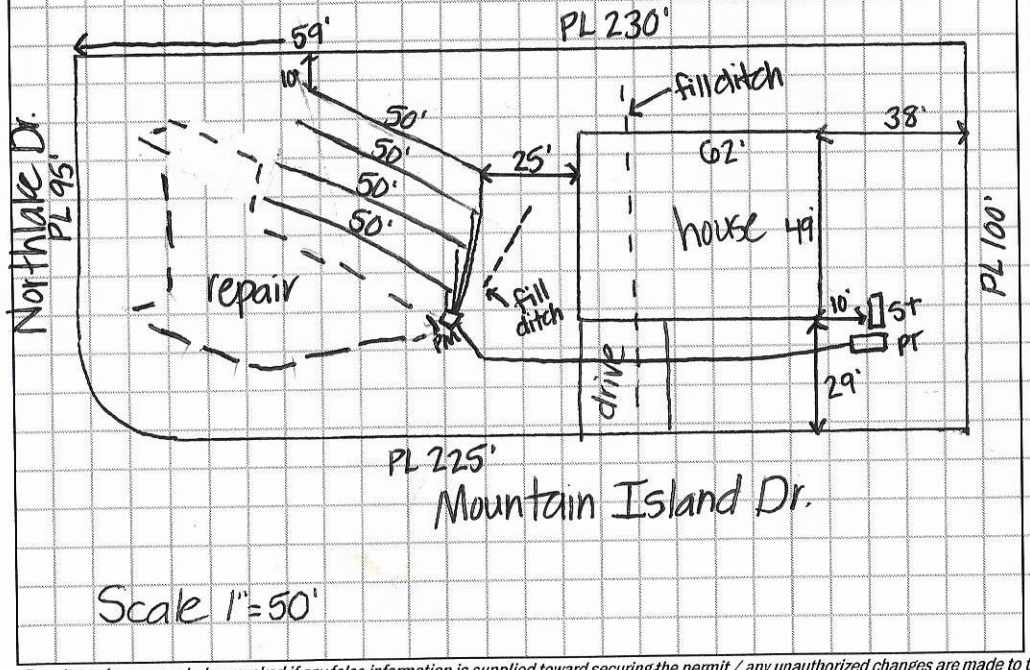
SITE DIRECTIONS: 801 N → L on Triplett → L on Ostwalt Amity → R on Bethesda → R on Northlake → lot on R SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: Northlake SECTION: 1 LOT # 74 LOT AREA: .52ac DESIGN FLOW: 360gpd L.T.A.R.: .3

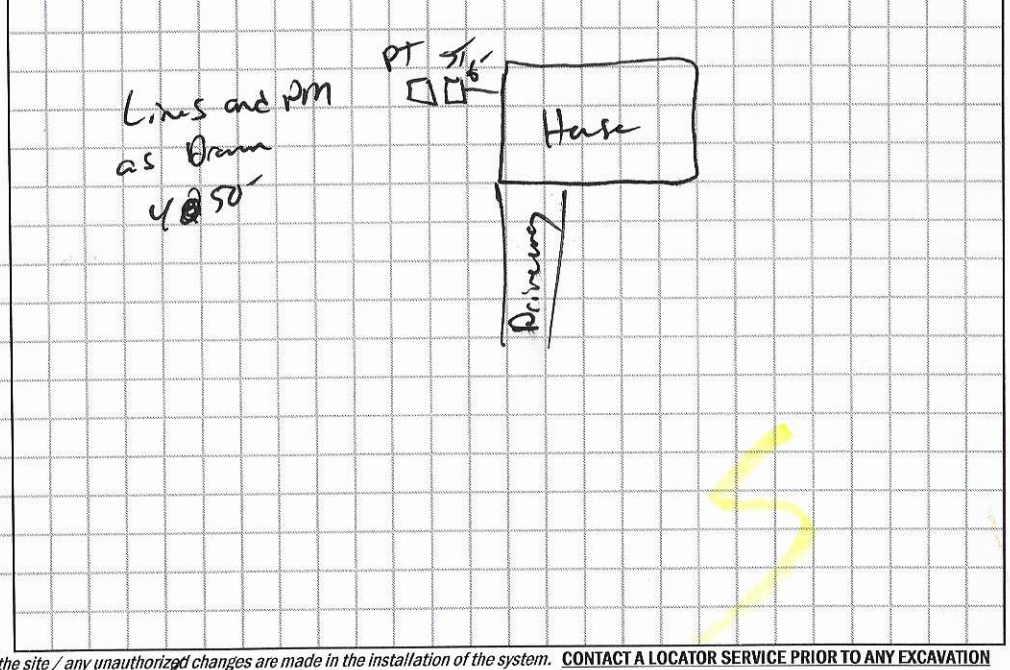
Septic Tank 1000 (gal)	STB 760	Date 4-12-20	☑ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI	☑ Residence	No. Bedrooms 3	Water Supply
Pump Tank 1000 (gal)	PT 363	Date 3-13-20	System Description: PM PPBPS		☐ Business	No. Persons 6	☐ Private
Pump Make Zoeller	Model BN151-C	Serial # 2R20E200	Repair System Description: LP PPBPS		☐ Other	No. Employees	☐ Public
# Nitrification Fields 1	# Lines 4@50'	Linear Ft 200'	Maintenance Agreement Required: ☐ YES ☑ NO		☐ Slab	☑ Crawl Space	☑ Community
Trench Width 24"	Trench Bottom Depth(Low side) 34"/36" highside	Gravel Depth —	☐ GRAVITY ☑ PRESSURE		☐ Basement w/ plumbing	☐ Basement w/o plumbing	

Comments / Conditions: Fill ditches. Do not fill septic area while filling ditches. Supply line must be buried >30" under drive or sleeved in ductile iron.

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: [signature] Date: 2-4-20 Installed by: Precision Grading

IMPROVEMENT PERMIT by: Kayla Wilson Date: 1-31-20 OPERATION PERMIT by: Patrick J Boyle III Date: 8/14/2020

AUTHORIZATION TO CONSTRUCT by: Kayla Wilson Date: 1-31-20 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.

	Date	Initials
Drain Lines Checked	6-2-20	
Tanks Checked	6/1/2020	PJB
Pressure Manifold or Valve Box Checked	6/1/2020	PJB
Pressure Head Set	6-2-20	
Electrical Checked	6-2-20	
Floats Set	6-2-20	
Alarm Checked		
Maintenance Contract Y (N)		
Comments:		

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

Design proposal for a PPBPS Septic System with low pressure distribution for a 4 bedroom single family residence on Lot 74 of Northlake Subdivision located in Statesville, Iredell County, North Carolina

Contents:

	Page
Installer Information	1
Design Information	
Install Specifications	2
Field Layout Specifications	3
System Tapsheet	4
Site Plan/System Plan	5
Dosing Calculations	6
Soil Profile Descriptions	7-8

February 20, 2019
Job Number: 17133
Design By: Ben Aldridge, REHS



INSTALLER INFORMATION:

- 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.
- All tanks shall be properly back filled and compacted to prevent slump 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 risers are used they should be a minimum of 6" above finished grade or within 6" of final grade if buried.
- **Design precludes use of foundation drains on the residence.**
- Backfill minimum of 6" of material (County Approved) over panels, rake trench walls, lime side walls, install trenches 36" wide.
- **System is specified as a PPBPS with Low Pressure Distribution.**
- **Repair is specified as a PPBPS with Low Pressure Distribution.**
- **If grading for a slab occures, do not create a greater than 2 ft. cut within 15 ft. of any septic component. Do not back fill over any septic component.**

LOW PRESSURE PPBPS SYSTEM
INSTALL SPECIFICATIONS

Owner/Applicant Information

Owner:	Lakeside Vista Partners
Address:	PO BOX 2091
	CORNELIUS, NC 28031
Client:	Michael Blackmon
Phone Number:	704-452-7000

Location:	NORTHLAKE LOT 74
County:	IREDELL

Source of Wastewater Flow:	4 Bedroom Single Family Residence
Estimated Gallons Per Day Flow:	480
System Flow:	25.42

Design Specifications

Drainfield Size:	267
Required Drainfield Size:	266.6666667
Loading Rate (gpd/ft.^{2}):	0.3
Depth of Gravel in Trench:	NA (PPBPS)
Gravel Size:	NA (PPBPS)
Trench Depth:	34 in.
Trench Width:	24 in.

Septic Tank Size:	1000
Pump Tank Size:	1000

Repair Trench Width:	24 in.
Repair Trench Depth:	33 in.

Estimated Supply Line Length:	44
Supply Line Diameter:	2 in. SCH 40 PVC
Supply Line Volume:	7.66
Dosing Volume:	223.20

Recommended Pump:	Float Control Switches as Required for Control Panel or County Approved Equivalents
Recommended Control Panel:	NEMA 4X Control Panel or Equivalent, County Approved Control Panel.

Pressure Head:	2 ft.
Friction Head:	0.78
Elevation Head:	11.95
Total Dynamic Head:	17.68

Threaded Union:	In Tank
Gate Valves:	1 in Tank
	1 per lateral
Check Valves:	In Tank
Anti-Siphon Hole:	**NO**
Additional Comments:	Soil suitability performed by Carolina Soil & Septic Consulting, PLLC

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

APPROVED MAR 18 2019
KW

NORTHLAKE LOT 74
FIELD LAYOUT SPECIFICATIONS

LAYOUT FOR 4 BEDROOM HOME

February 20, 2019

LINE #	FLAG COLOR	IH	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM				880.74		
INSTR. 1						
HOUSE CNR				878.34		
P. TANK				875.12		
1	BLUE			885.90	42	37
2	ORANGE			884.95	71	67
3	PINK			883.82	99	78
4	YELLOW			882.84	126	94
5	***RED***			***882.07***	***89***	***89***
6	***ORANGE***			***881.10***	***77***	***77***
7	***BLUE***			***879.74***	***61***	***61***
8	***PINK***			***878.64***	***64***	***40***
				Total	**629**	**543**

	LINE LENGTH	SYSTEM TYPE	SOIL LTAR GPD/FT2	TRENCH SYSTEM	DISTRIBUTION
**** System***	***267***	***MOD.***	***0.300***	***PPBPS***	***LOW PRESSURE***
Repair	276	MOD.	0.300	PPBPS	LOW PRESSURE

Notes:
** TBM located top of ground at EIP at corner of lot (see site plan)
**All measures in feet
**Nitrification lines are demonstrated on contour via colored pin flags
**IH, and FS indicate rod readings

Comments: **FILL DITCHES AS SHOWN ON PLAN**

APPROVED MAR 18 2019
KW

LOW PRESSURE PPBPS TAPSHEET
NORTHLAKE LOT 74
SYSTEM

Line #	Color	Elevation	Length	Hole Size	Flow/hole	Trench Area	Number of Panels
5	*RED*	*882.07*	*89*	0.156	**0.41**	267	21
6	*ORANGE*	*881.10*	*77*	0.156	**0.41**	231	18
7	*BLUE*	*879.74*	*61*	0.156	**0.41**	183	14
8	*PINK*	*878.64*	*40*	0.156	**0.41**	120	9
							62
	total	**feet =**	**267**	**gal/min =**	**25.42**		
			Des. Flow	**480**			
			Pump Run=	**8.78**			
			soil LTAR	**0.3**			

.156 equals 5/32 inch hole

APPROVED MAR 18 2019
KW

DOSING CALCULATIONS

Location NORTHLAKE
Lot No: 74

No. of Bedrooms	4	
Design Flow	480	$^{gal}/_{day}$
LTAR	0.300	$^{gal}/_{ft^2\ day}$
PPBPS? (YES OR NO)	YES	
Supply Line Length	44	ft.
Supply Line Volume	7.656	gal.
Required Feet of Line	266.6667	ft.
Amount of Line from Layout	267	ft.
Gallons per Minute	25.42	$^{gal}/_{min}$
Required Septic Tank Capacity	1000	gal.
Minimum Standard Tank Size	1000	
Panel Volume	3.6	gal.
# of Panels	62	
Dosing Volume	223.20	gal.

Note: Dosing Volume based on 100% of # of panels times 3.6 gal/panel

Tank Draw Down	10.6	*Generic Draw Down of 21 gal.per in.*
Pump Run Time	8.78	minutes
Elevation Head	11.95	ft.
Pressure Head	2	ft.
Friction Factor	1.78	ft./100 ft. *(From the interpolater.)*
Friction Head	0.78	ft.
Total Dynamic Head (+20%)	17.68	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 MAR 18 2019
KW

PROP. ID #: 4761491231

COUNTY: IREDELL

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

OWNER: LAKESIDE VISTA LLC

ADDRESS: PO BOX 2091, CORNELIUS, NC 28031

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

LOCATION OF SITE: 118 NORTHLAKE DRIVE, LOT 74

APPLICATION DATE:

DATE EVALUATED: 12/19/2018

PROPERTY SIZE: 0.52

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	
1	LS 9%	0-22	RC SABK	FI S SP SEXP	N/A	54"	N/A	54"+	0.3
		22-54	RC WABK	FI S SP SEXP					
2	LS 7%	0-24	RC SABK	FI S SP SEXP	N/A	55"	N/A	55"+	0.3
		24-55	RC WABK	FR S SP SEXP					
3	LS 7%	0-25	RC SABK	FI S SP SEXP	N/A	52"	N/A	52"+	0.325
		25-52	RC WABK	FR SS SP SEXP					
4	LS 7%	0-9	SCL WSBK	VFR SS SP SEXI	N/A	62"	N/A	62"+	0.3
		9-34	RC M/SABK	FI S SP SEXP					
		34-62	RC/CL WSBK	FR SS SP SEXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
AVAILABLE SPACE (.1945)	PS	PS
SYSTEM TYPE(S)	LP PPBPS	LP PPBPS
SITE LTAR	0.3	0.3
COMMENTS		

OTHER FACTORS (.1946):	NONE
SITE CLASSIFICATION (.1948):	PS
EVALUATED BY:	BEN ALDRIDGE
OTHER(S) PRESENT	JACOB CONRAD MICHAEL TUCKER

APPROVED MAR 18 2019

KW

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

Sheet 2 OF 2

PROP. ID #: 4761491231

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/C OLOR	.1943 SOIL DEPTH	.1956 SAPROLITE CLASS	.1944 RESTR HORIZON	
5	LS 6%	0-4	SCL WSBK	VFR SS SP SEXP	N/A	55"	N/A	55"+	0.3
		4-26	RC MABK	FI S SP SEXP					
		26-55	RC WSBK	FI S SP SEXP					

RECEIVED JAN 1 6 2020

Ltd Relayout Paid $105.00

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

#242529

Application For:

(✓) Septic Improvement Permit (X) Authorization to Construct ( ) New Well Permit ( ) Well Repair Permit ( ) Existing System Inspection ( ) Well Abandonment ( ) 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: 118 Northlake Drive, Statesville, NC 28677

Subdivision Name: Northlakes **Section/Phase:** _____ **Lot Number:** 74

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

December 28, 2019
DATE

118 Northlake Drive, Statesville, NC 28677 Lot 74

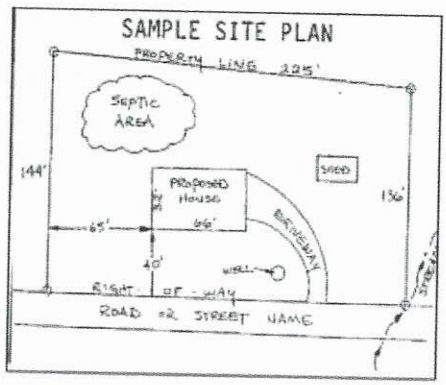
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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

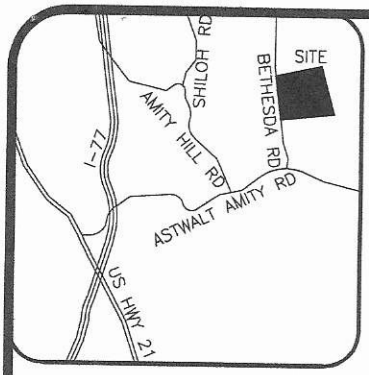
Please see attached

Signature: Cynthia Blanding

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

January 28, 2020

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	2,931 SQ.FT.
DRIVE TO R/W	467 SQ.FT.
WALK	183 SQ.FT.
TOTAL	3,581 SQ.FT.

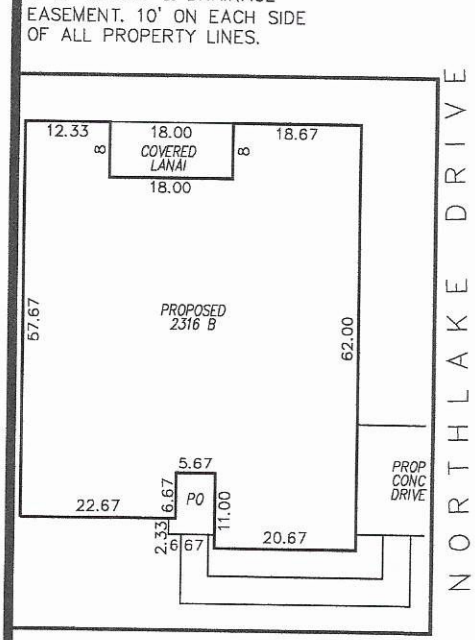
SETBACKS

FRONT	35'
SIDE	15'
REAR	35'
SIDE STREET	25'

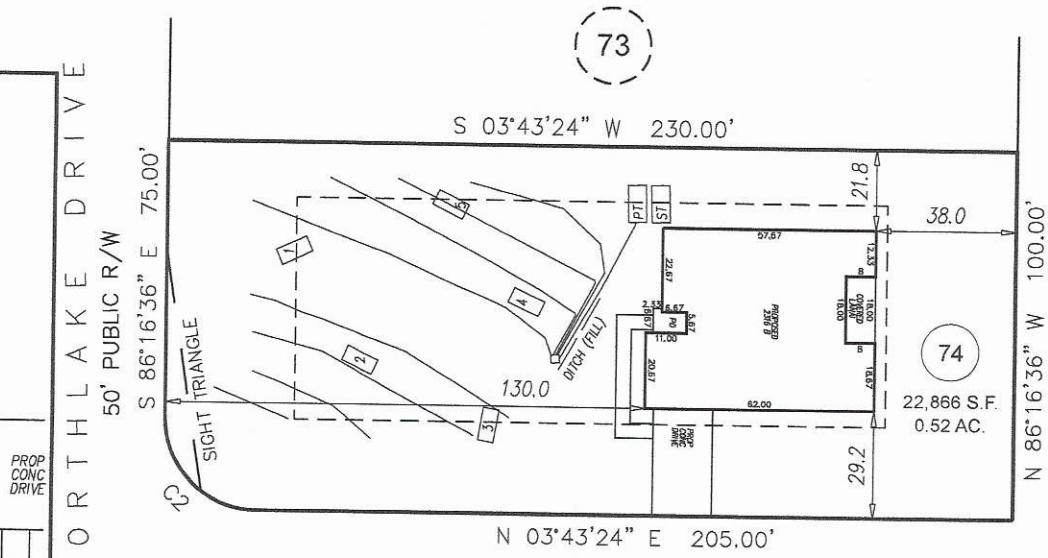
NOTE: ALL LOTS SUBJECT TO A 10' UTILITY & DRAINAGE EASEMENT. 10' ON EACH SIDE OF ALL PROPERTY LINES.

PLAT NORTH PB 53, PG 94

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



NORTHLAKE DRIVE
50' PUBLIC R/W



MOUNTAIN ISLAND DRIVE
50' PUBLIC R/W

(NTS)

GRAPHIC SCALE

50 0 25

1 inch = 50 ft.

CURVE	ARC LENGTH	RADIUS	DELTA ANGLE	CHORD BEARING	CHORD LENGTH
C2	39.28'	25.00'	90°00'54"	N 48°43'24" E	35.36'

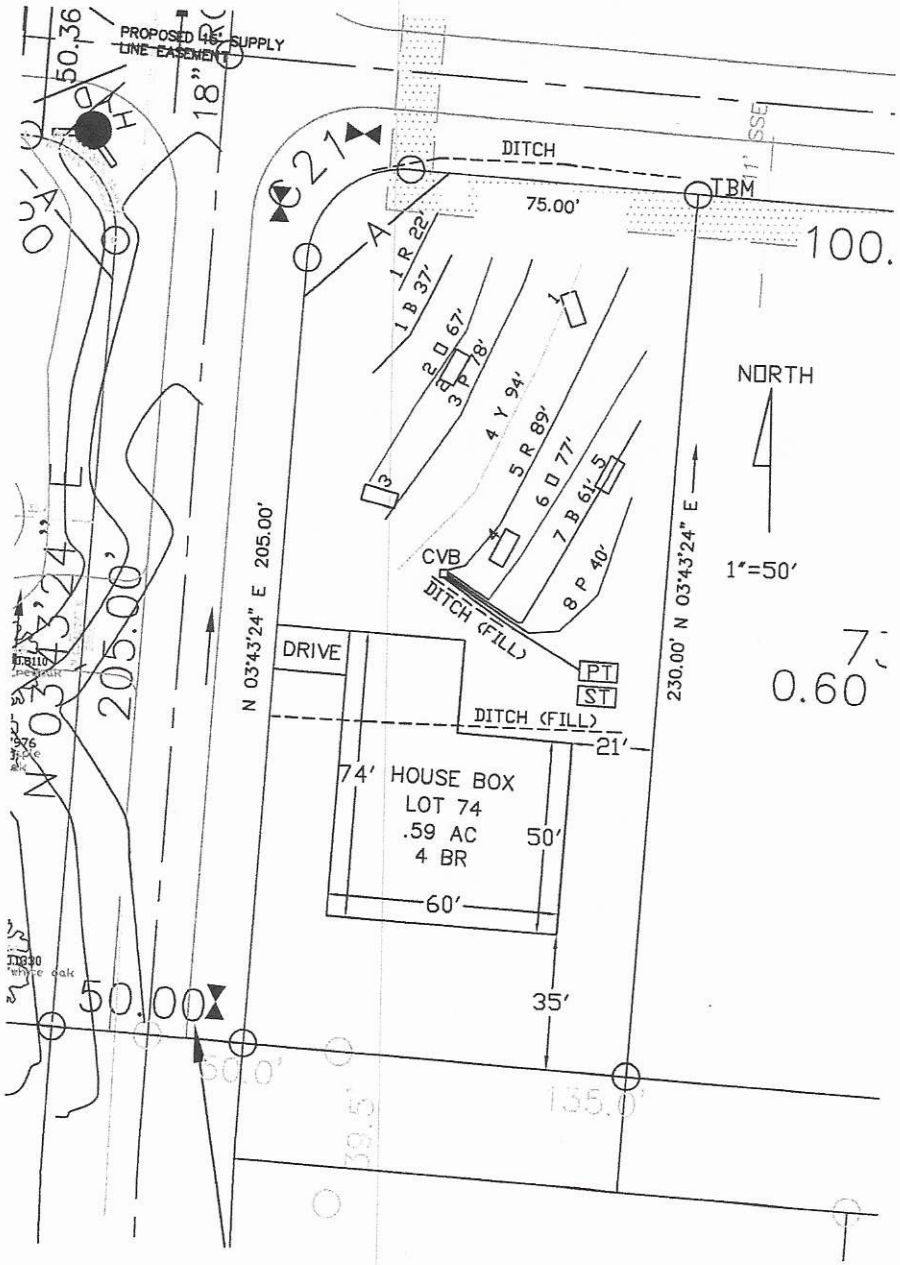
PRELIMINARY PLOT PLAN

ECLS

PROJECT: 18-005 NORTHLAKES
DRAWN BY: SEER
SCALE: 1"=50'
DATE: 12-09-19

FOR
ADAMS HOMES CHARLOTTE
118 NORTHLAKE DRIVE, STATESVILLE
LOT 74 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



APPROVED MAR 18 2019

KW

Northlake Lot: **74**

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 118 Northlake Drive, Statesville, NC 28677, identified as PIN (Parcel Identification Number) 4761-491-231, 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.

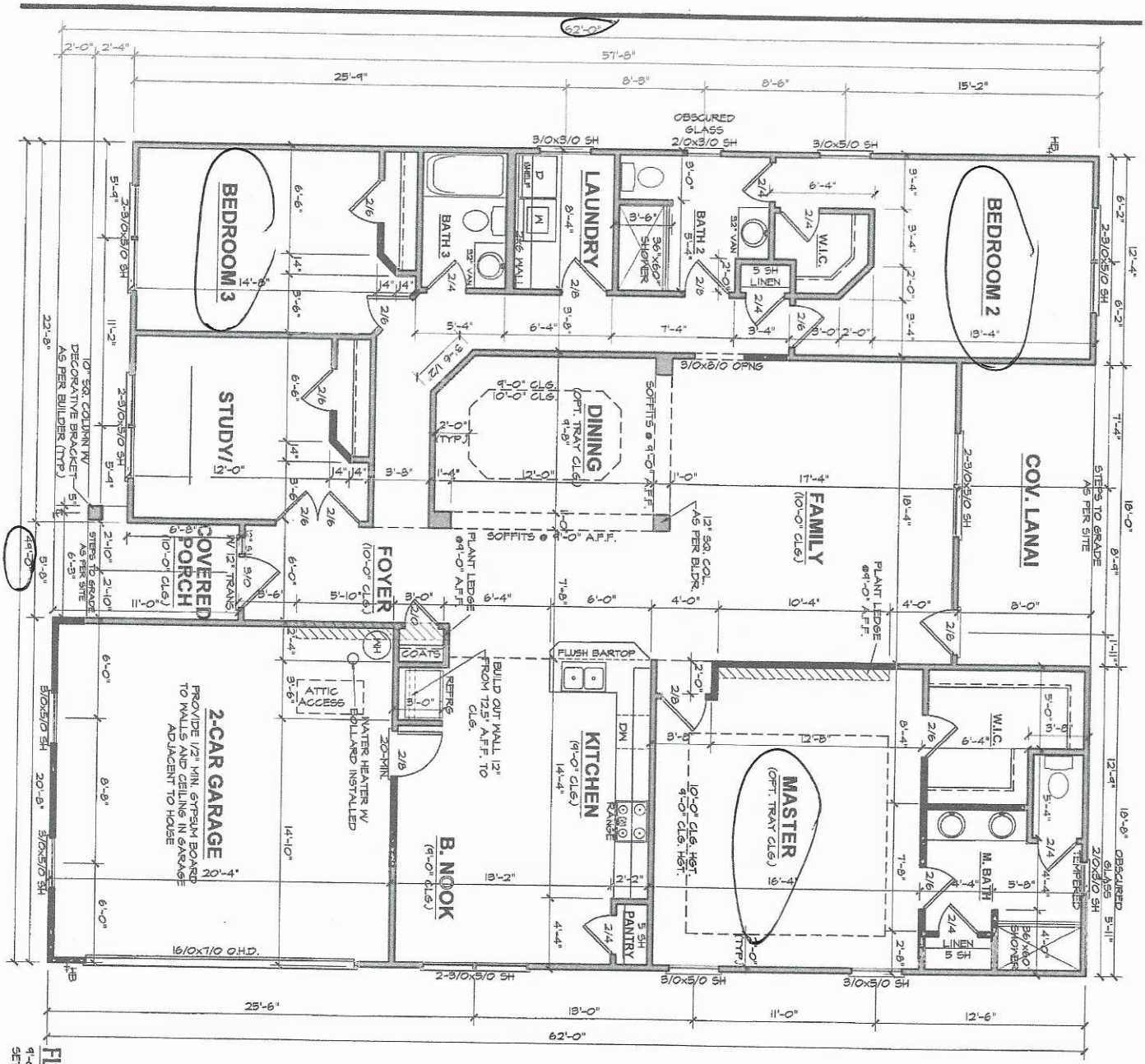
(X) MANAGER 7/19/2016
Signature of Owner(s) Date

(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



FLOOR PLAN

9'-0" (NOM.) CLG. HGT. U.N.O.
SET WINDOWS @ 7'-0" U.N.O.

SCALE: 1/4"=1'-0"

Acknowledgement Of
Plans Submittal ONLY!

Date 1-31-20

Date 2-4-20

SHEET 3

DATE DRAWN 12-19-2019
PROJECT 4180
REVISIONS

2316 "B" SE (R) NR074

ADAMS HOMES AEC, LLC

IREDELL COUNTY

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

APPLICATION NUMBER
242529
Issue Date: 02/27/2019

ZONING PERMIT
Open Space

Parcel Number	Street Address	Jurisdiction
4761491231.000	118 NORTHLAKE DRIVE, STATESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: LAKESIDE VISTA PARTNERS LLC	Applicant: CAROLINA SOIL SEPTIC C
Address: 12621 MCGINNIS LANE	Address: 162 WEST B ST
STATESVILLE, NC 28078	KANNAPOLIS, NC 28081
Phone:	Phone: 704-202-5791

Use Requested	Zone Code
SFD	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.520	35.00	35.00	15.00	25.00	NOT	X

Remarks:

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	168980	TOTAL FEES:	$ 77.25