ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) [illegible] PERMIT # [illegible]

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

PIN # 4761--49--9114

APPLICANT/OWNER: Cynthia Bladow | APPLICANT ADDRESS: 3401 Saint Vardell Lane - Suite B Charlotte NC | PHONE: 704-621-4664 | ALT. PHONE 704-884-1548

SITE ADDRESS: 150 Northlake Drive Statesville NC 28677 | SAP CONTROLLED: ☐ YES ☒ NO

SITE DIRECTIONS: Ostwalt Amity L on Bethesda Road R on Northlake | DESIGN FLOW: 480 gpd | L.T.A.R.: .3

SUBDIVISION: Northlake | SECTION: 1 | LOT # 66 | LOT AREA: .53 Acre

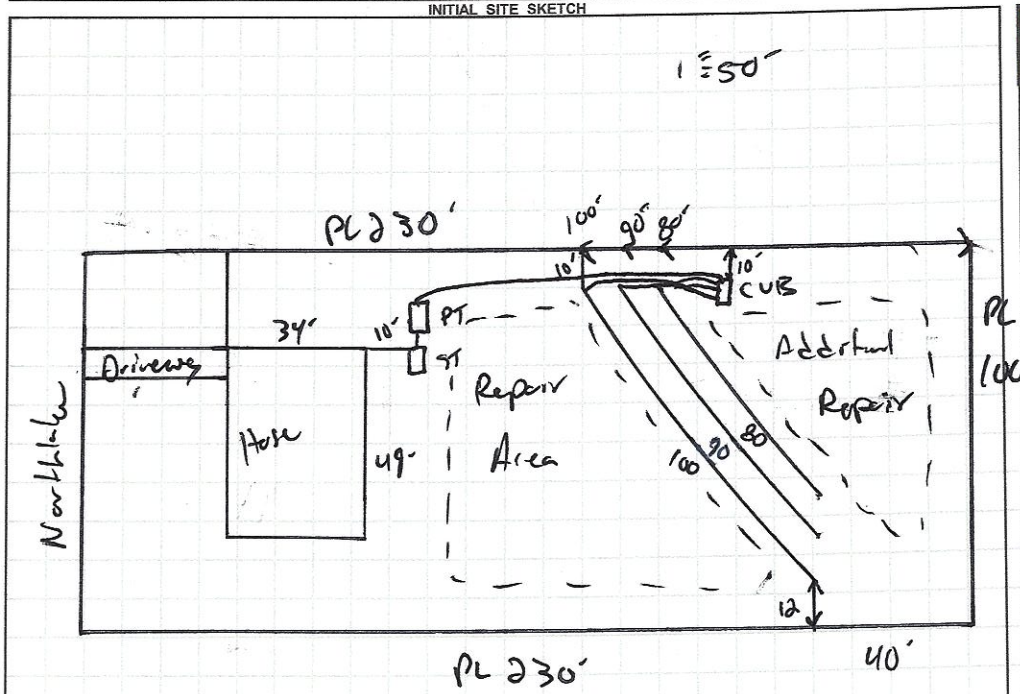
Septic Tank	1000 (gal)	STB 760	Date 6/14/22	☒ New System ☐ Repair ☐ Expansion	System Type: I II III (IV) V VI	☒ Residence	No. Bedrooms 4
Pump Tank	1000 (gal)	PT 363	Date 4/11/22	System Description:	50% Reduction Low Pressure	☐ Business	No. Persons 8
Pump Make	~~Zoeller~~ Gal/Model	PES1	Serial #	Repair System Description:	50% Reduction	☐ Other	No. Employees
# Nitrification Fields	1	# Lines 3	Linear Ft 270'	Maintenance Agreement Required:	☒ YES ☐ NO	☐ Slab	☒ Crawl Space
Trench Width	24"	Trench Bottom Depth(~~Low side~~)	Max 36"	Gravel Depth	☐ GRAVITY ☒ PRESSURE	☐ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☐ Private ☒ Public ☐ Community

Comments / Conditions: Install Drainlines on Contour of land use Central Valve box for distribution

62 Panels | 7 minute Run time
223 gal dose | Maintain 3 ft head pressure
use 5/32 holes

INITIAL SITE SKETCH



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.

Tanks 7/13/22 CW
Floats CW
Line 1&2 7/15/22 CW
Pressurized.
Brushing Alarm.

Installed as Drawn

	Date	Initials
Drain Lines Checked 1+2	7-15-22	CW
Tanks Checked	7/13/22	CW
Pressure Manifold or Valve Box Checked	7/15/22	CW
Pressure Head Set	7-15-22	BB
Electrical Checked	7/29/22	CW
Floats Set	7/13/22	CW
Alarm Checked	7-15-22	BB
Maintenance Contract (Y) / N	8/2/22	CW
Comments:		

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: Cynthia Bladow Date: 8/27/21

IMPROVEMENT PERMIT by: [signature] Date: 8-9-2021

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 8-9-2021

Installed by: Precision Excavation Date: 8/4/22

OPERATION PERMIT by: Cory Hill Date:

Existing System Inspected by: Date:

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

RECEIVED JUL C 7 2021

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM AP-318948 $500.00

Application For: (X) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) 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@maipermits.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: 150 Northlake Drive, Statesville, NC 28677
Subdivision Name: Northlakes **Section/Phase:** **Lot Number:** 66
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:
Non-Residential Site Development:
Square Footage of Building:

Maximum Number of Bedrooms: 4
Maximum Number of Occupants:
( ) Swimming Pool
( ) Other Addition/Structure:
Type of Business:
Max. Number of Employees: **Max. Number of Seats/Beds/Other:**

CHECK FOUNDATION TYPE
(X) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

Water Supply: ( ) Replacement Well – Reason: **Number of Persons:**
( ) Multi-connection Well **Number of Houses:**
( ) 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 June 16, 2021
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

Jenkins – 910-777-8531 Northlake Drive lots

Ryan Kinard – 704-813-7535 Wylie Trial lots

Northlake Lot: **66**

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, Arrow Homes NC, LLC, am the legal owner(s) of the property located at 150 Northlake Drive, Statesville, NC 28677, identified as PIN (Parcel Identification Number) 4761-499-114, 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 [signature] manager 7/19/2016
Signature of Owner(s) Date

[signature] 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

150 Northlake Drive, Statesville, NC 28677 Lot 66

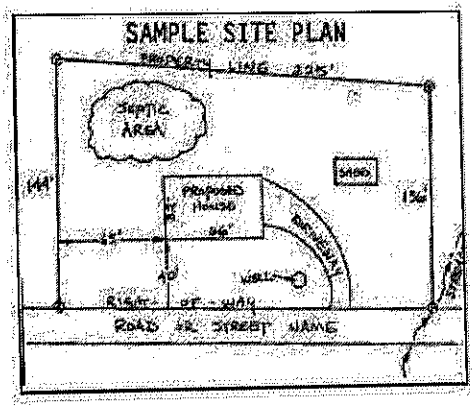
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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

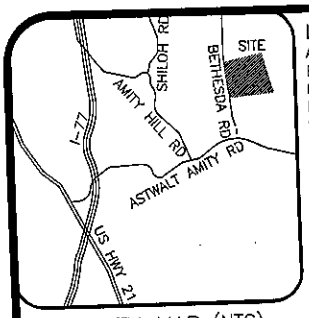
USE THIS SPACE TO DRAW YOUR SITE PLAN

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)

June 16, 2021
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 EXHIBIT MAP IS OF AN EXISTING PARCEL OR PARCELS OF LAND AND DOES NOT CREATE A NEW STREET OR CHANGE AN EXISTING STREET.

D.B. FLOYD, PLS L-3640 DATE

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

GENERAL NOTES:

1. ALL DISTANCES ARE HORIZONTAL GROUND DISTANCES IN U.S. SURVEY FEET UNLESS OTHERWISE NOTED.

2. AREAS SHOWN HEREON WERE COMPUTED USING THE COORDINATE METHOD.

3. LINES NOT SURVEYED ARE SHOWN AS DASHED LINES FROM INFORMATION REFERENCED ON THE FACE OF THIS SURVEY.

4. PROPERTY MAY BE SUBJECT TO ANY/ALL EASEMENTS AND RESTRICTIONS OF RECORD. THIS SURVEY IS A CORRECT REPRESENTATION OF THE LAND PLATTED AND OR DEEDED AND HAS BEEN PREPARED WITHOUT THE BENEFIT OF A TITLE REPORT. A NORTH CAROLINA LICENSED ATTORNEY-AT-LAW SHOULD BE CONSULTED REGARDING CORRECT OWNERSHIP, WIDTH AND LOCATION OF EASEMENTS, AND OTHER TITLE QUESTIONS REVEALED BY TITLE EXAMINATION.

5. DRIVEWAY IMPERVIOUS CALCULATION SHOWN HEREON CALCULATED TO THE FRONT PROPERTY LINE/RIGHT-OF-WAY.

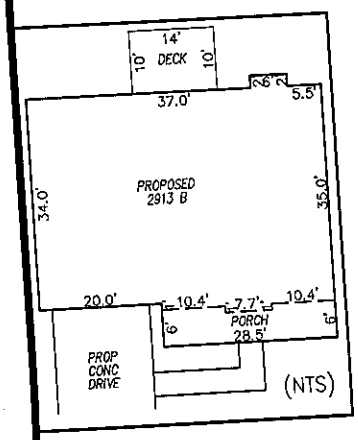
6. ALL LOTS SUBJECT TO A 10' UTILITY & DRAINAGE EASEMENT. 10' ON EACH SIDE OF AL.. PROPERTY LINES.

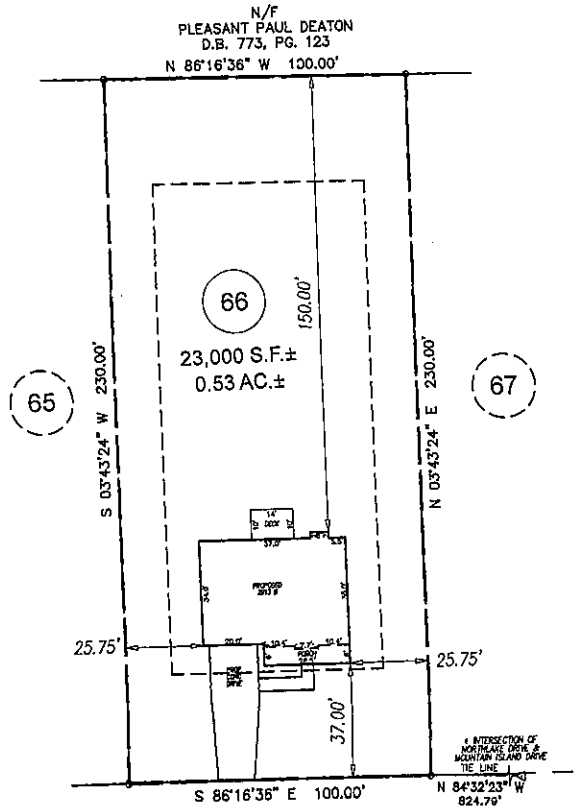
IMPERVIOUS AREA	
HOUSE	1,861 SQ.FT.
DRIVE	650 SQ.FT.
WALK	89 SQ.FT.
PATIO	100 SQ.FT.
TOTAL	3,100 SQ.FT.

SETBACKS PER PB 53 PG 94	
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





NORTHLAKE DRIVE
50' PUBLIC R/W

REVISION: CHANGED ADDRESS PER REQUEST 06-21-2021 SEER

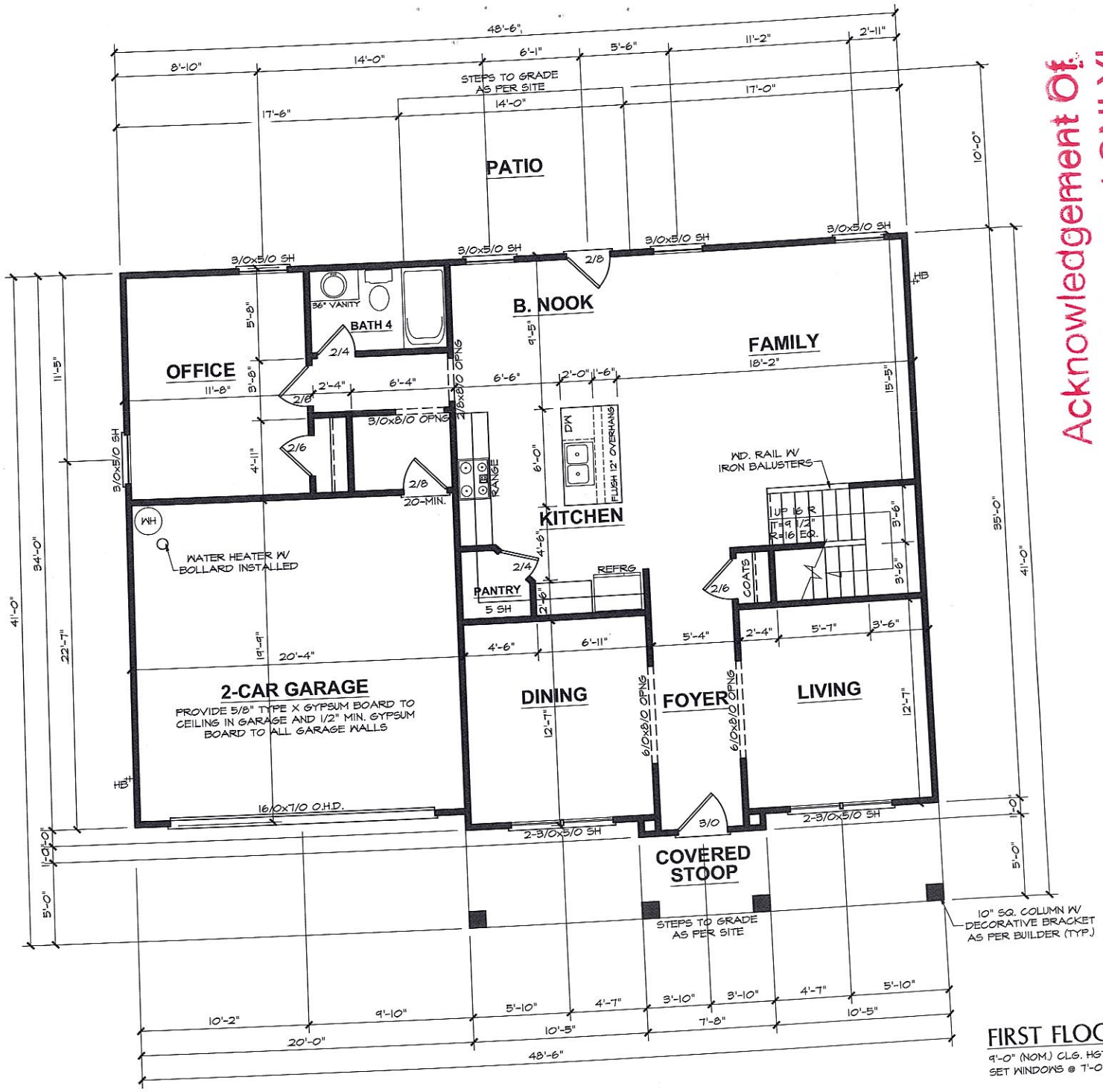
GRAPHIC SCALE
50 0 25
1 inch = 50 ft.

PRELIMINARY
PLOT PLAN

PROJECT:	18-005 NORTHLAKES
DRAWN BY:	SEER
SCALE:	1"=50'
DATE:	06-04-2021

FOR
ADAMS HOMES CHARLOTTE
150 NORTHLAKE DRIVE, STATESVILLE
LOT 66 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) COA#C-4175



Acknowledgement Of Plans Submittal ONLY!

Date 6-18-2021

Date 8/27/21

ADAMS HOMES AEC, LLC

2913 "B" FE (L) NR066

DATE DRAWN
6/3/2021
PROJECT
5158
REVISIONS

SHEET
3

FIRST FLOOR PLAN

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

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

SECOND FLOOR PLAN

8'-0" (NOM.) CLG. HGT. U.N.O.
SET WINDOWS @ 7'-2" U.N.O.

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

Knowledgement Of
ns Submittal ONLY!

Date 9-10-2021

Date 8/27/21

ADAMS HOMES AEC, LLC

2913 "B" FE (L) NR066

DATE DRAWN 6/3/2021
PROJECT 5156
REVISIONS

SHEET 4

IREDELL COUNTY · NC

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

APPLICATION NUMBER
318948 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4761499114.000	150 NORTHLAKE DR	Iredell County

Owner Information	Applicant Information
Name: MORRIS KENNY N+BARRY V Address: Phone:	Name: ADAMS HOMES AEC LLC Address: 3401 SAINT VARDELL LN SUITE B CHARLOTTE, NC 28217 Phone: (704)558-4527

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.53	35	35	15	15	WSIV-CA Catawba/Lake Norman	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: 06/18/2021

Signature of Owner/Contractor

Permit Number	318948	TOTAL FEES:	$77.25