ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 318236.

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

PIN # 4776-72-8592

APPLICANT/OWNER: LF DP Properties APPLICANT ADDRESS: 540 Mocksville Rd Statesville NC 28677.

SITE ADDRESS: 126 Meadow Spring CT Statesville NC PHONE: 704-622 1722. ALT. PHONE

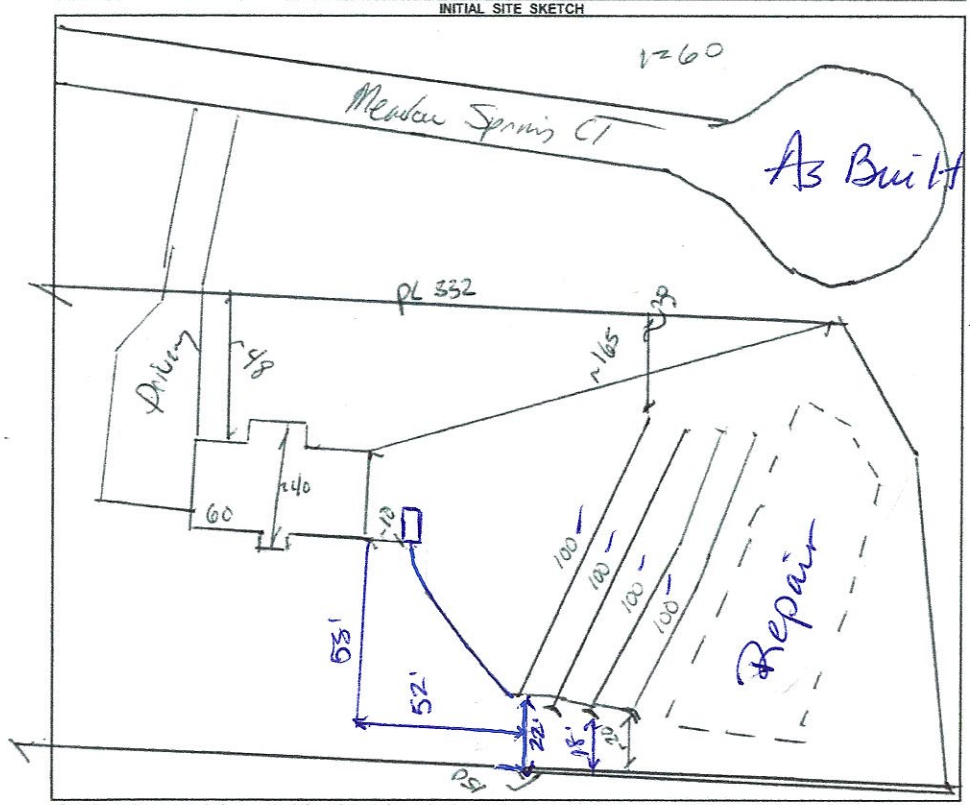
SITE DIRECTIONS: Hwy 64 Left on Swann Creek at End on New Gravel Drive. SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Subdivision in Swann Pond. SECTION: - LOT # 1 LOT AREA: 2.02 Acres DESIGN FLOW: 360 L.T.A.R.: .30

Septic Tank	1000 (gal)	STB	TP 1012	Date	11/27/21	☒ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms	3	Water Supply
Pump Tank	(gal)	PT		Date		System Description:	Gravity - Low Profile Chambers.	☐ Business	No. Persons	6	☐ Private
Pump Make		Model		Serial #		Repair System Description:	Horizontal Panel	☐ Other	No. Employees		☒ Public
# Nitrification Fields	1	# Lines	4	Linear Ft	400	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☒ Crawl Space		☐ Community
Trench Width	36 in	Trench Bottom Depth (Low side)			24 in max	Gravel Depth	- ☒ GRAVITY ☐ PRESSURE	☐ Basement w/ plumbing			☐ Basement w/o plumbing

Comments / Conditions: Install on the Contour of the land, Utilize Serial distribution
Do not Drive, pave, Pave, park, or any vehicle over trench area.

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.

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] MEMBER Date: 7/9/2021 Installed by: (Steve Jordan) Piedmont Backhoe

IMPROVEMENT PERMIT by: [signature] Date: 6/16/2021 OPERATION PERMIT by: [signature] D. Wieberg Date: 3/1/22

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 6/16/2021 Existing System Inspected by: Date:

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

Item	Date	Initials
Drain Lines Checked	3/1/22	DW
Tanks Checked	3/1/22	DW
Pressure Manifold or Valve Box Checked		
Pressure Head Set		
Electrical Checked		
Floats Set		
Alarm Checked		
Maintenance Contract Needed? Y / N		
Comments:		

Repairs Only	
	State Code
Failing System Code	
Type of Distribution	G or P
Type of Failure/Malfunction	
Primary Cause of Failure/Malfunction	
Age of System? _____	
Initial or Repair? _____	

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

Sheet 1 of 1
PROPERTY ID #: 477608236
COUNTY: Guilford

Lot 1

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

OWNER: CFDD Properties
ADDRESS: 126 Meadow Spring Ct Stokesdale
PROPOSED FACILITY: 3BR Home
PROPOSED DESIGN FLOW (.1949): 360
LOCATION OF SITE: 126 Meadow Spring Ct
APPLICATION DATE
DATE EVALUATED:
PROPERTY SIZE:
PROPERTY RECORDED:

WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring ☑ Pit ☐ Cut
TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

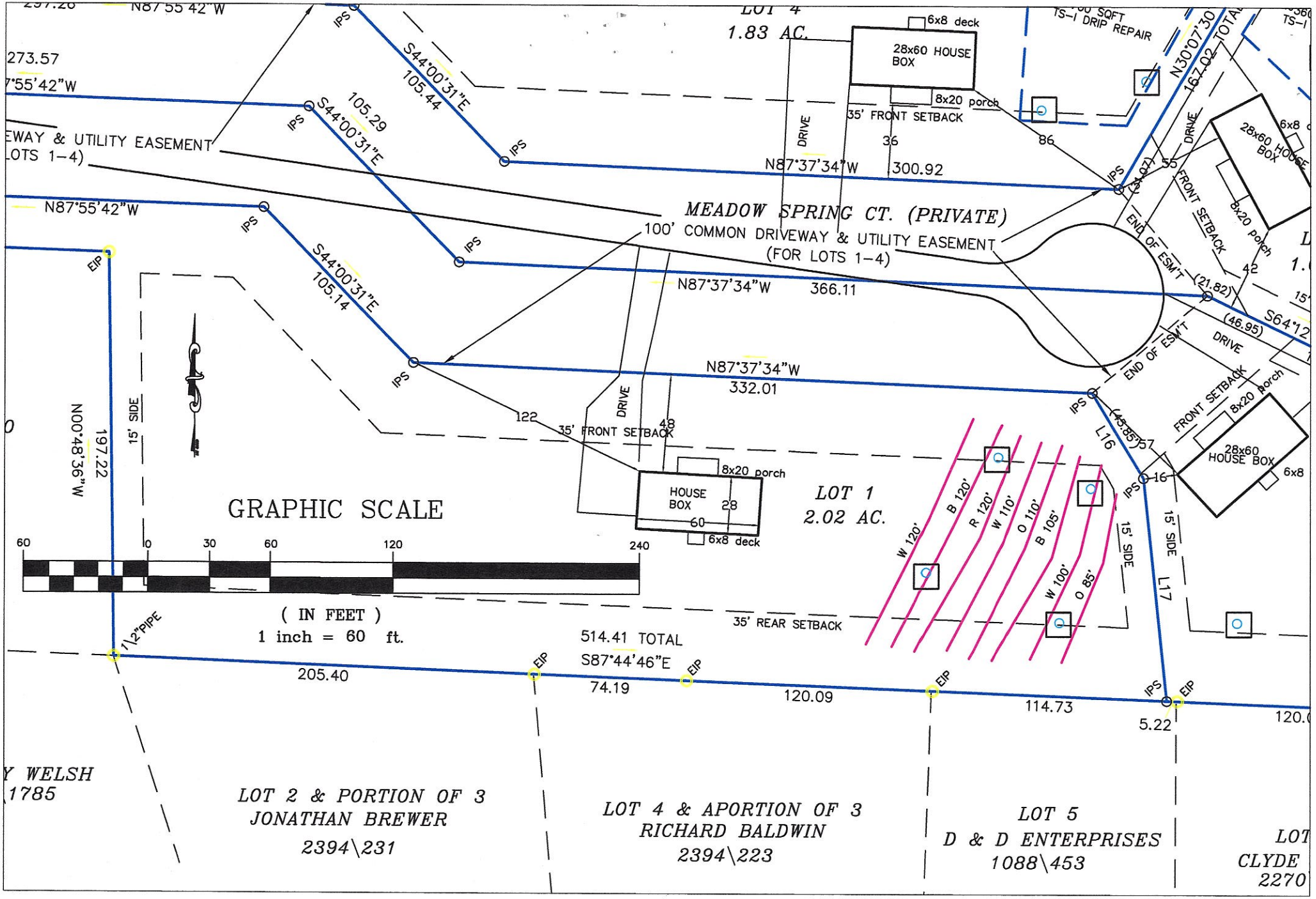
PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
1	Sdl S-6%	0-13	Disturbed		2.5YR 4/6	SI		Rock < SI	PS .30
		13-38	C SBK/ABK	os S, FR SPN					
		38-51	CL SBK/ABK	SS S, FR SPN					
		51-62	RCSAP M	FIRM.					
2	Sdl S-6%	0-10	Disturbed					21-34 Some 10YR5/6 10YR6/1 Depletions	PS .25
		10-34	C ABK/SBK						
		34-63	CL OSBK						
3	Sdl S-6%	0-12	Disturbed					12-34 10YR5/6 10YR 6/6 Depletions	PS .25 @ 36 inch.
		12-33	C						
		33-56	CL						
		56+	Rock.						
4	Sdl S-6%	0-14	SCL	SSSP					PS .30 @ 24 Max Trench
		14-36	C	SSSP					
		36-52	RCSAP. M	FIRM					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	400	240.
System Type(s)	LP-Chamber	Horizontal Panel
Site LTAR	III	IV

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Bottoms
OTHER(S) PRESENT: Pennington LSS

COMMENTS: CL 4@100 low traffic .3. Horizontal Panel.

Updated February 2014



LFDD Properties, LLC – Lot 1 Minor Subdivision of Swann Road Septic Site Plan 5.25.21
Base site plan from DAS. DAS has staked property lines and located flagged septic lines and backhoe pits.
Any septic system must be approved and permitted by the ICHD.

RECEIVED MAY 27 2021

call Paul Penninger for site visit 704.996.6330

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM AP-318236 Paid $500.00

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

****

Applicant Information: (PRINT CLEARLY)

Applicant Name: LFDD PROPERTIES LLC **Address:** 540 MOCK MILL RD STATESVILLE NC **Zip:** 28677

Applicant Email: ddavidson@statesvilleroofing.com **Phone:** 704.622.1722 **Alt. Phone:** _____

Owner Name: same as applicant **Address:** _____ **Zip:** _____

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

****

Property Information:

Street Address: ~~286~~ Swann Road 126 Meadow Spring CT

Subdivision Name: Minor Subdivision of Swann Road **Section/Phase:** _____ **Lot Number:** 1

Driving Directions: Highway 64 (Mocksville Hwy) east from Statesville, Left on Swann, lots at end of new gravel drive

****

Site Development Information: *(check or complete ALL that apply*

(X) New Single Family Residence — Maximum Number of Bedrooms: 3
( ) New Multi-Family Residence — Maximum Number of Occupants: 6
( ) Accessory Building — ( ) Swimming Pool
( ) Bedroom(s) Addition — ( ) Other Addition/Structure: _____
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____

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 (X) 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 (X) 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: _____ 5-24-21
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

(Check and sign only ONE of the options below)

1. * APPLICANT AND OWNER ARE THE SAME. * (*Sign here*) _____

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.

2. I, LFDD PROPERTIES LLC, am the legal owner(s) of the property located at 286, 288, 290, and 292 Swann Road, identified as

PIN (Parcel Identification Number) 4654688991.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Paul Penninger/Penninger Soil Consulting 4776823652.000, 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.

M. Douglas Daniels J. MAUNCE A — Signature of Owner(s)

5-24-21 — Date

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

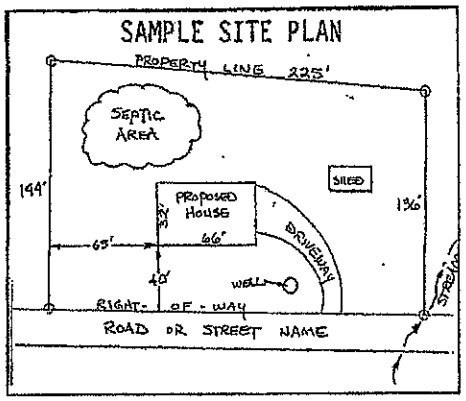
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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:

- (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
- (N/A) 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

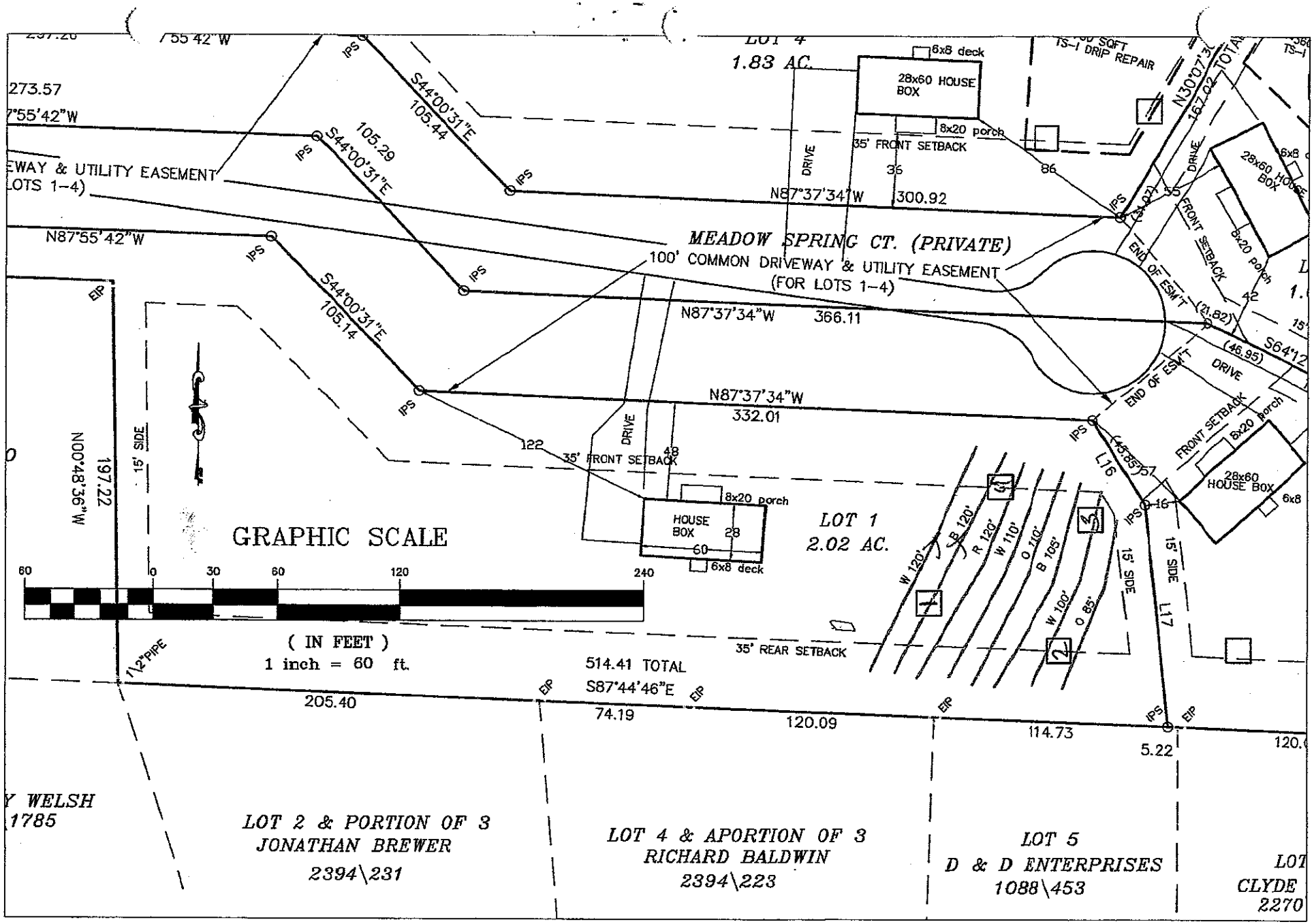
USE THIS SPACE TO DRAW YOUR SITE PLAN

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

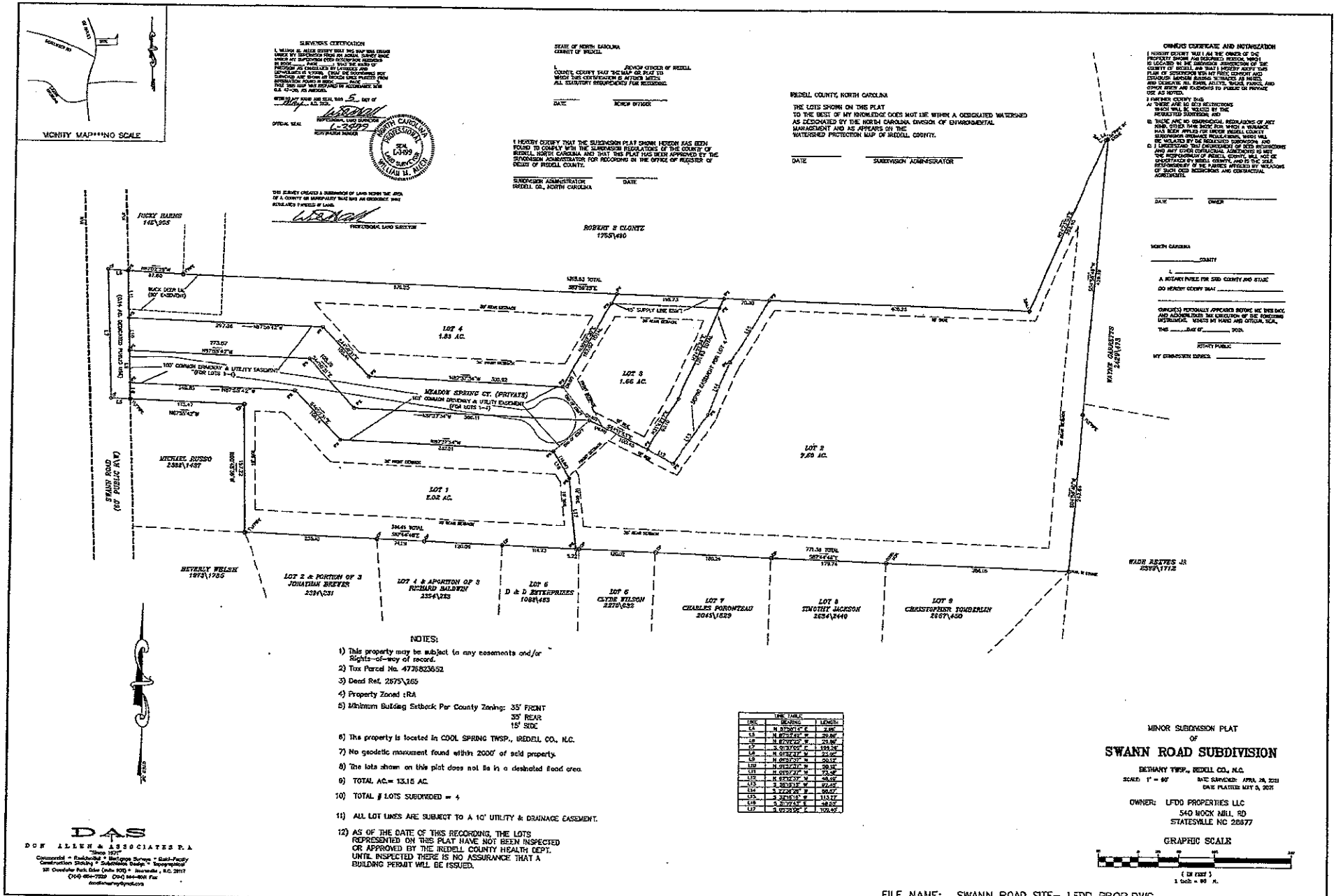
See attached site plan.

Signature: _____ 5-24-21

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



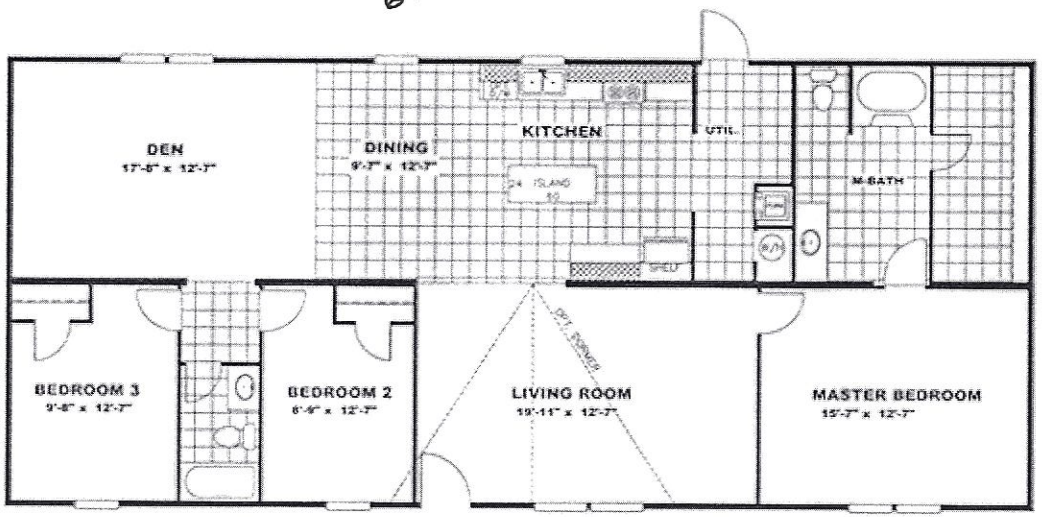
LFDD Properties, LLC – Lot 1 Minor Subdivision of Swann Road Septic Site Plan 5.25.21
Base site plan from DAS. DAS has staked property lines and located flagged septic lines and backhoe pits.
Any septic system must be approved and permitted by the ICHD.


VICINITY MAP***NO SCALE
SURVEYOR'S CERTIFICATION
STATE OF NORTH CAROLINA
COUNTY OF IREDELL
REVIEW OFFICER OF IREDELL
DATE
REVIEW OFFICER
I HEREBY CERTIFY THAT THE SUBDIVISION PLAT SHOWN HEREON HAS BEEN FOUND TO COMPLY WITH THE SUBDIVISION REGULATIONS OF THE COUNTY OF IREDELL, NORTH CAROLINA AND THAT THIS PLAT HAS BEEN APPROVED BY THE SUBDIVISION ADMINISTRATOR FOR RECORDING IN THE OFFICE OF REGISTER OF DEEDS OF IREDELL COUNTY.
SUBDIVISION ADMINISTRATOR
IREDELL CO., NORTH CAROLINA
DATE
IREDELL COUNTY, NORTH CAROLINA
THE LOTS SHOWN ON THIS PLAT TO THE BEST OF MY KNOWLEDGE DOES NOT LIE WITHIN A DESIGNATED WATERSHED AS DESIGNATED BY THE NORTH CAROLINA DIVISION OF ENVIRONMENTAL MANAGEMENT AND AS APPEARS ON THE WATERSHED PROTECTION MAP OF IREDELL COUNTY.
DATE
SUBDIVISION ADMINISTRATOR
OWNERS CERTIFICATE AND AUTHORIZATION
DATE
OWNER
NORTH CAROLINA
COUNTY
A NOTARY PUBLIC FOR SAID COUNTY AND STATE
DO HEREBY CERTIFY THAT
OWNER(S) PERSONALLY APPEARED BEFORE ME THIS DAY, AND ACKNOWLEDGED THE EXECUTION OF THE FOREGOING INSTRUMENT. WITNESS MY HAND AND OFFICIAL SEAL,
THIS DAY OF 2021.
NOTARY PUBLIC
MY COMMISSION EXPIRES
RICKY HARNS 145\905
ROBERT S CLONTZ 1755\490
WAYNE GARRETTE 2429\673
MICHAEL RUSSO 2388\1437
BEVERLY WELSH 1973\1785
LOT 2 & PORTION OF 3 JONATHAN BREWER 2334\231
LOT 4 & APORTION OF 3 RICHARD BALDWIN 2354\233
D & D ENTERPRISES 1088\483
LOT 6 CLYDE WILSON 2270\632
LOT 7 CHARLES POROMTEAU 2045\1529
LOT 8 TIMOTHY JACKSON 2634\2440
LOT 9 CHRISTOPHER TOMBERLIN 2657\450
WADE REEVES JR 2399\1712
SWANN ROAD (60' PUBLIC R/W)
BLACK DEER LN. (50' EASEMENT)
MEADOW SPRING CT. (PRIVATE)
50' COMMON DRIVEWAY & UTILITY EASEMENT (FOR LOTS 1-7)
100' COMMON DRIVEWAY & UTILITY EASEMENT (FOR LOTS 1-7)
45' SUPPLY LINE EASE.
LOT 1 2.02 AC.
LOT 2 9.69 AC.
LOT 3 1.66 AC.
LOT 4 1.83 AC.
NOTES:
1) This property may be subject to any easements and/or Rights-of-way of record.
2) Tax Parcel No. 4736823652
3) Deed Ref. 2675\265
4) Property Zoned :RA
5) Minimum Building Setback Per County Zoning: 35' FRONT
35' REAR
15' SIDE
6) The property is located in COOL SPRING TWSP., IREDELL CO., N.C.
7) No geodetic monument found within 2000' of said property.
8) The lots shown on this plat does not lie in a designated flood area.
9) TOTAL AC.= 13.15 AC.
10) TOTAL # LOTS SUBDIVIDED = 4
11) ALL LOT LINES ARE SUBJECT TO A 10' UTILITY & DRAINAGE EASEMENT.
12) AS OF THE DATE OF THIS RECORDING, THE LOTS REPRESENTED ON THIS PLAT HAVE NOT BEEN INSPECTED OR APPROVED BY THE IREDELL COUNTY HEALTH DEPT. UNTIL INSPECTED THERE IS NO ASSURANCE THAT A BUILDING PERMIT WILL BE ISSUED.
LINE TABLE
LINE BEARING LENGTH
L6 N 87°37'54" E 2.00'
L7 N 87°37'54" E 20.00'
L8 N 87°37'54" E 20.00'
L9 S 01°37'00" E 199.06'
L10 N 01°37'54" W 22.00'
L11 N 01°37'54" W 20.12'
L12 N 01°37'54" W 20.12'
L13 N 01°37'54" W 73.48'
L14 S 87°37'54" E 98.00'
L15 S 88°33'13" W 97.49'
L16 S 2°26'08" E 98.97'
L17 S 2°26'08" E 113.72'
L18 S 87°37'54" E 48.07'
L19 S 01°37'54" E 109.47'
MINOR SUBDIVISION PLAT
OF
SWANN ROAD SUBDIVISION
BETHANY TWSP., IREDELL CO., N.C.
SCALE: 1" = 60'
DATE SURVEYED: APRIL 28, 2021
DATE PLATTED: MAY 5, 2021
OWNER: LFDD PROPERTIES LLC
540 MOCK MILL RD
STATESVILLE NC 28677
GRAPHIC SCALE
(IN FEET)
1 inch = 60 ft.
DAS
DON ALLEN & ASSOCIATES P.A.
"Since 1971"
Commercial * Residential * Mortgage Surveys * Land-Facility
Construction Staking * Subdivision Design * Topographical
FILE NAME: SWANN ROAD SITE- LFDD PROP.DWG

Lot #1 / 126 Meadow Spring Court

60-0"

28-0"

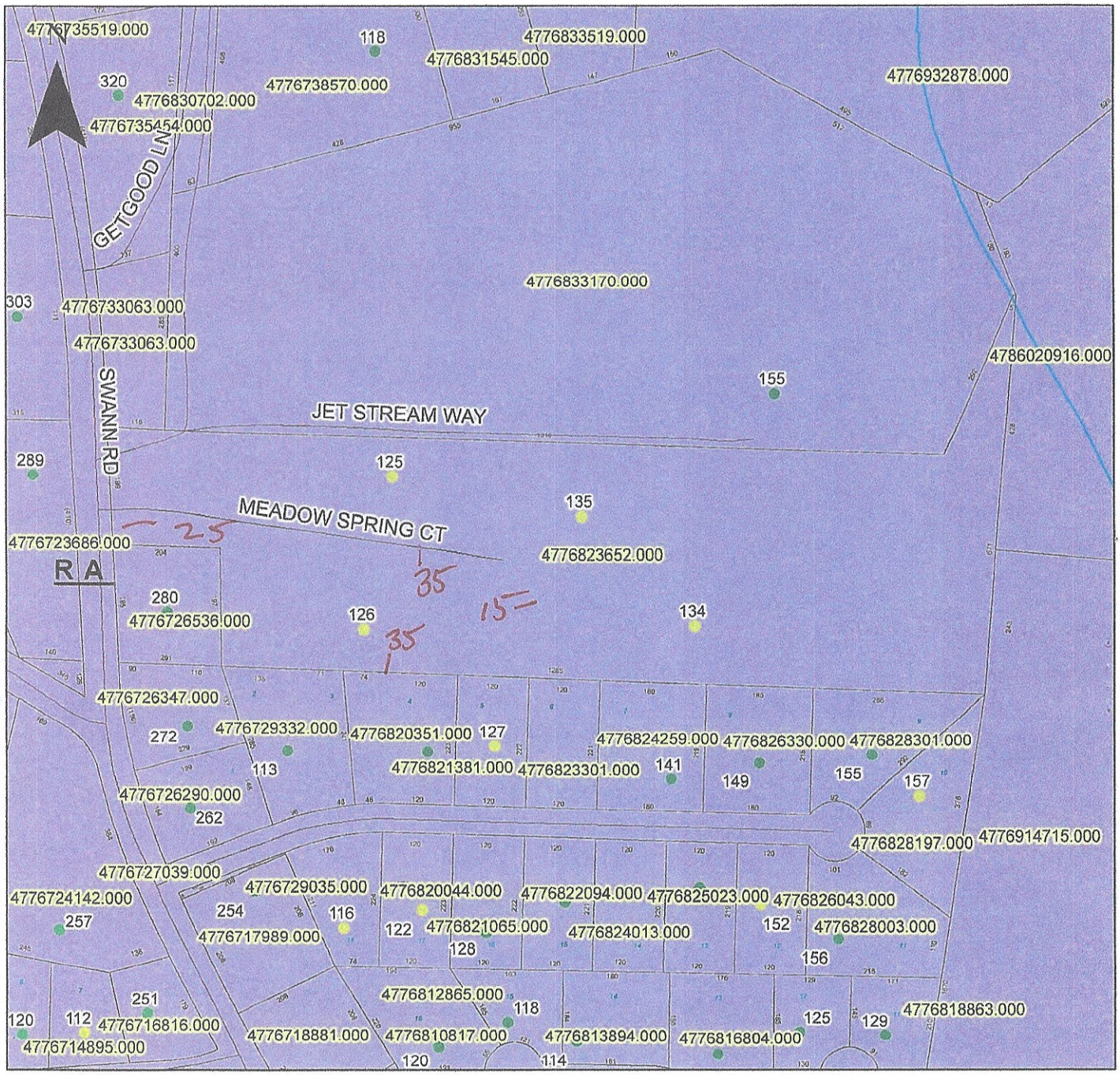


Acknowledgement Of Plans Submittal ONLY!

M. Jeffrey Dunlap, Jr. Date 7/6/2021

Manager Date

ZONING DISCLAIMER



Property Address 124 Meadow Spring

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 _____ Date _____