ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # OSWP-2022-9180

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

PIN # 4863 -- 50 -- 4671

APPLICANT/OWNER: CLAYTON HOMES OF STATESVILLE | APPLICANT ADDRESS: 136 WHISPERING DRIVE, HARMONY, N.C. 28634

SITE ADDRESS: 136 WHISPERING DRIVE, HARMONY, N.C. 28634 | PHONE: 704-929-1552 | ALT. PHONE: —

SITE DIRECTIONS: (E) ON 901, (L) ON WINTHROP, (L) ON CRATER, (R) ON CARTWRIGHT, (L) ON TRIVETTE (R) ON WHISPERING LOT ON (R)

SAP CONTROLLED: ☒ YES ☐ NO EXT

SUBDIVISION: CHESHIRE RIDGE | SECTION: 3 | LOT # 19 | LOT AREA: 1.55 AC | DESIGN FLOW: EXT | L.T.A.R.: EXT

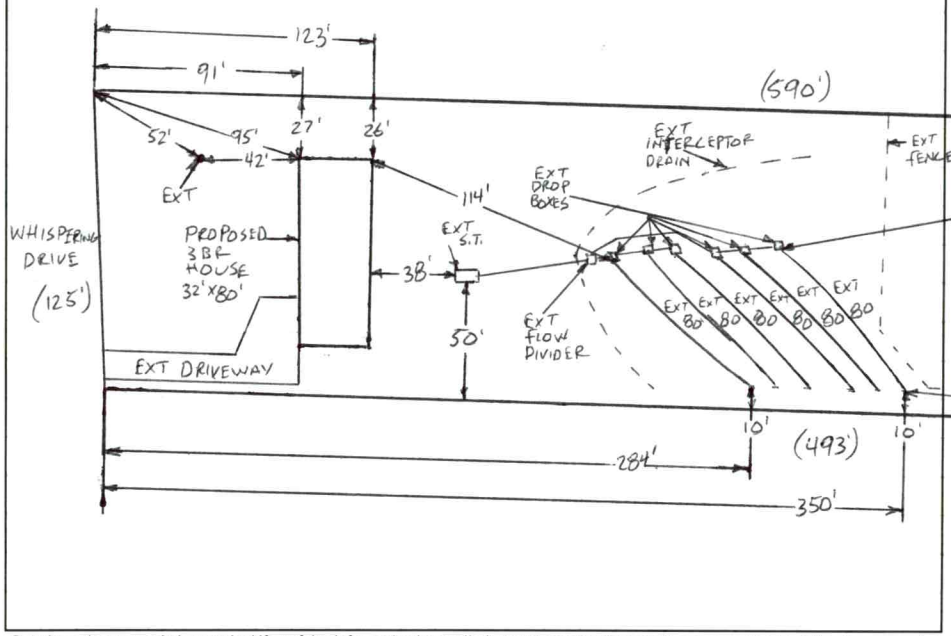
Septic Tank	EXT	(gal)	STB	EXT	Date	EXT	☐ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI	
Pump Tank	—	(gal)	PT	—	Date	—	System Description:	EXISTING - CONVENTIONAL	
Pump Make	—	Model		—	Serial #	—	Repair System Description:		
# Nitrification Fields	EXT	# Lines		EXT	Linear Ft	EXT	Maintenance Agreement Required:	☐ YES ☑ NO	
Trench Width	EXT	Trench Bottom Depth(Low side)		EXT	Gravel Depth	EXT	☑ GRAVITY ☐ PRESSURE		

☑ Residence	No. Bedrooms	EXT	**Water Supply**
☐ Business	No. Persons	EXT	☑ Private EXT
☐ Other	No. Employees	—	☐ Public
☐ Slab	☑ Crawl Space		☐ Community
☐ Basement w/plumbing			☐ Basement w/o plumbing

Comments / Conditions: SYSTEM HAD BE HEAVILY TRACKED BY CATTLE, OWNER HAS NOW MOVED THE FENCE AND IS AWARE THAT THE CATTLE ARE STILL ON REPAIR AREA, COULD NOT DETERMINE IF CATTLE HAD NEGATIVELY IMPACTED SYSTEM

SEE EXISTING 3BR SYSTEM FROM 1999

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.

1 IN = 80 FT
S.T. = SEPTIC TANK
EXT = EXISTING

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: _____ Installed by: _____

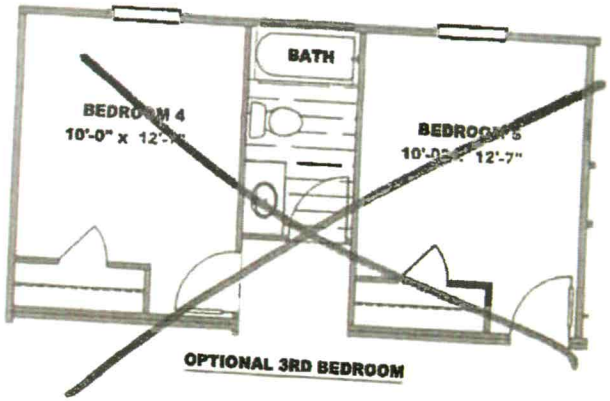
IMPROVEMENT PERMIT by: _____ Date: _____ OPERATION PERMIT by: _____ Date: _____

AUTHORIZATION TO CONSTRUCT by: _____ Date: _____ Existing System Inspected by: Burnt C. White Date: 1-26-2023

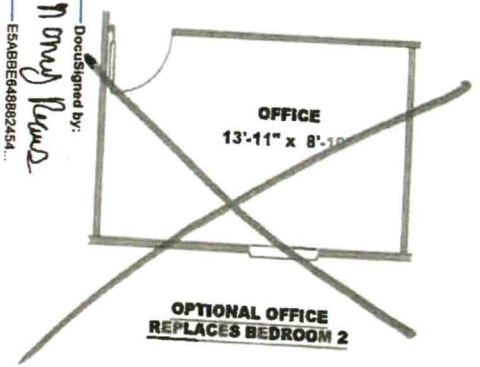
FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.

Item	Date	Initials
Drain Lines Checked		
Tanks Checked		
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? _____	

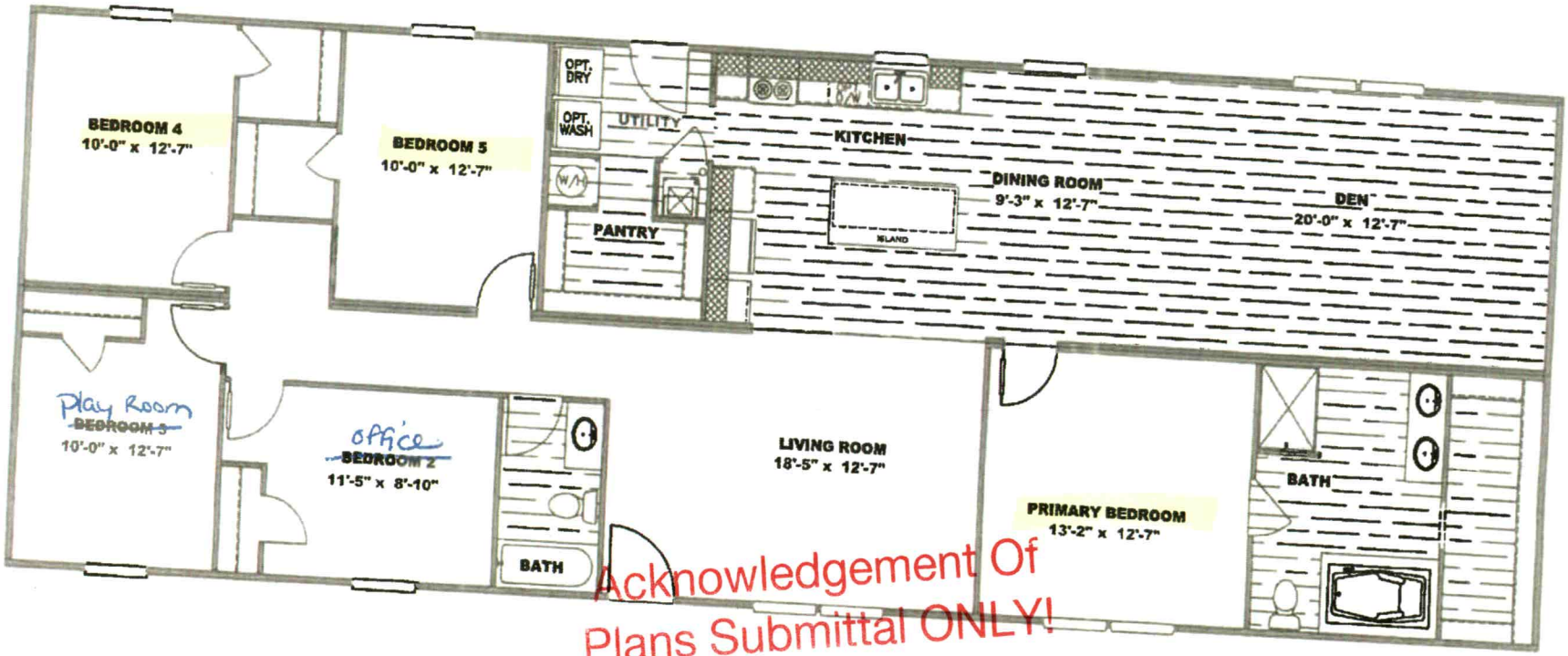


DocuSigned by:
9/22/2022



DocuSigned by:
9/22/2022

Exhibit C
9-22-22



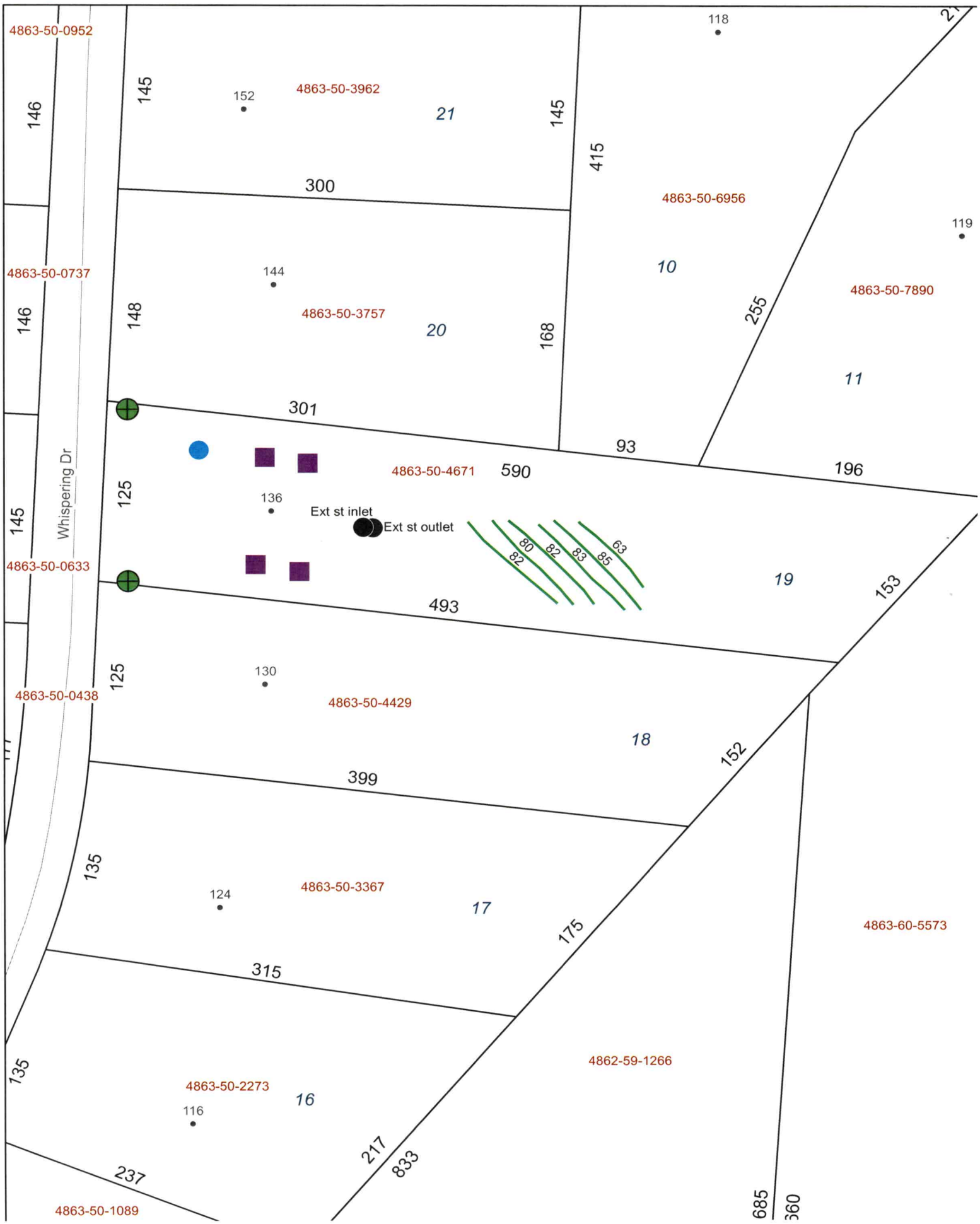
Acknowledgement Of
Plans Submittal ONLY!
By Just C. White Date 1-26-2023

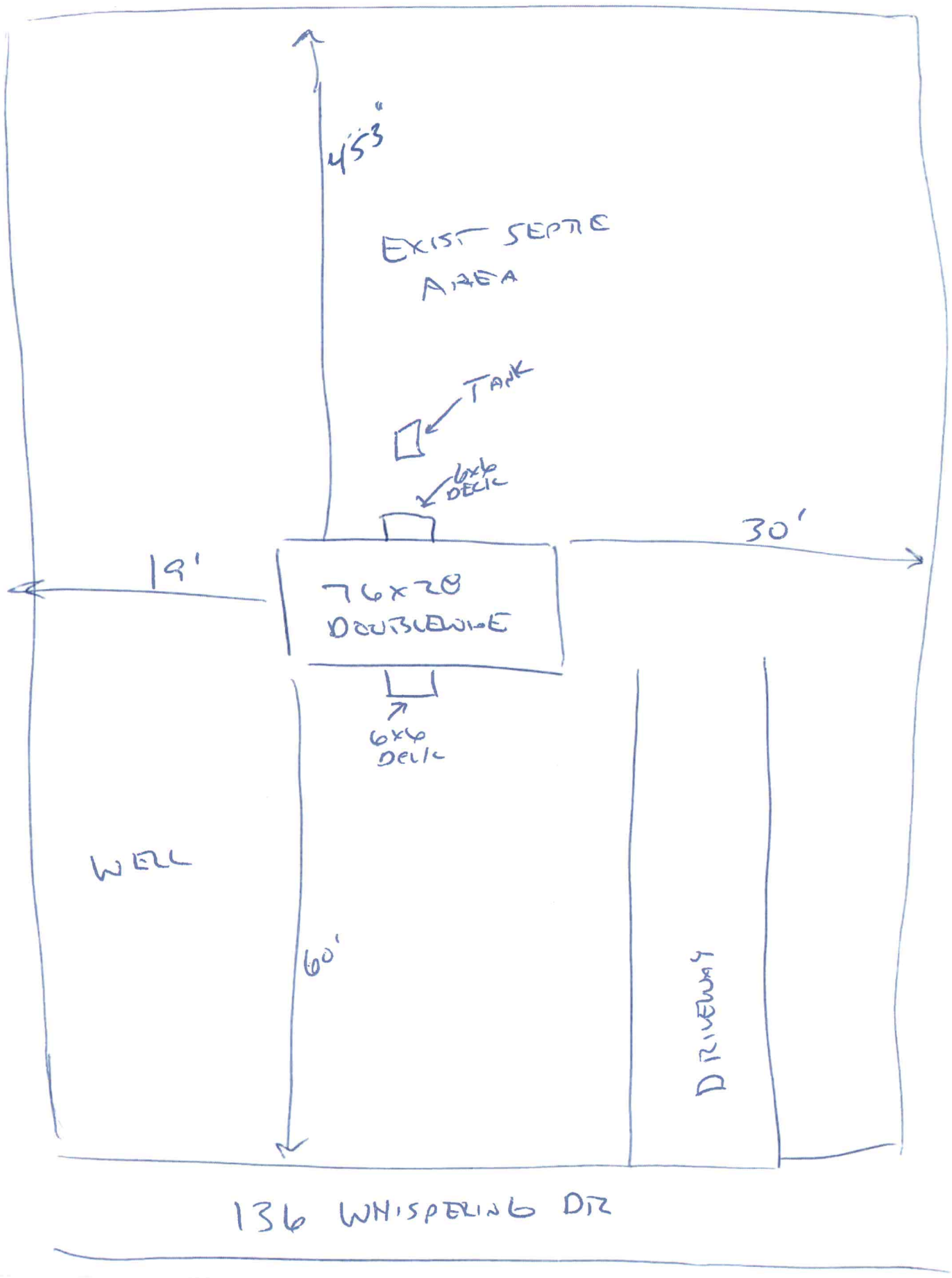
Date

1/26/23

Clayton
EAGLE SERIES
MODEL: 28'x76' EAGLE
MODEL #: EAG28765A

DocuSign Envelope ID: 70B39644-55F5-4EE7-800D-737E36FFB808


4863-50-0952
146
145
152
4863-50-3962
21
145
300
118
415
4863-50-6956
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4863-50-0737
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144
148
4863-50-3757
20
168
10
255
4863-50-7890
11
301
93
196
590
4863-50-4671
125
136
Ext st inlet
Ext st outlet
145
Whispering Dr
4863-50-0633
80
82
82
83
85
63
19
153
493
125
130
4863-50-0438
4863-50-4429
18
152
399
135
124
4863-50-3367
17
175
4863-60-5573
315
135
4862-59-1266
4863-50-2273
16
116
217
833
237
4863-50-1089
685
360


45'3"
EXIST SEPTIC AREA
TANK
6x6 DECK
30'
19'
76x20 DOUBLEWIDE
6x6 Deck
WELL
60'
DRIVEWAY
136 WHISPERING DR

PERMIT SNAPSHOT REPORT OSWP-2022-9180 FOR IREDELL COUNTY

Permit Type	Environmental Health OSWP	**Project:**		**App Date:**	11/11/2022
Work Class:	EH Existing Septic System	**District:**	Iredell County	**Exp Date:**	NOT AVAILABLE
Status:	In Progress	**Square Feet:**	0.00	**Completed:**	NOT COMPLETED
Valuation:	$0.00	**Assigned To:**	White, Bryant	**Approval Expire Date:**	
Description:	exist septic check for 3 br home remove exist SW and install new DW home				

Parcel:	4863504671.000	Main	**Address:**	136 Whispering Dr Harmony, NC 28634	Main	**Zone:**	RA(Residential Agricultural District)

Applicant/Authorized Agent	Applicant/Authorized Agent	Property Owner
CLAYTON HOMES #72	CLAYTON HOMES #72	LEOVARDO N+JENNIFER REVOLLAR
2026 NORTHSIDE 2026 NORTHSIDE DR	2026 NORTHSIDE 2026 NORTHSIDE DR	
STATESVILLE, NC 28677	STATESVILLE, NC 28677	
Mobile: (704) 929-1552	Mobile: (704) 929-1552	

Permit Custom Fields

How is your site plan being submitted	Custom Site Plan	Does the site contain any jurisdictional wetlands	No	Non-domestic Sewage Generated	No
Other Public Agency	No	All proposed structure dimensions	76x28 with two 6x6 decks	What are the proposed structures	New Single Family Residence
If other Addition/Structure, please explain		Maximum Number of Bedrooms	3	Number of Occupants	4
Foundation Type	Crawl Space Foundation	Water Supply	Existing Well	Desired Septic System Type	Conventional (most common)
If existing, Year existing system installed	2006	Lot Acreage	1	Front Setback	35
Back Setback	35	Left Setback	15	Right Setback	15
Zoning Permit Issued Date	Nov 15 2022 12:00AM	Zoning Permit Expiration Date	May 14 2023 12:00AM	Is the structure or development in the floodplain	No
Is the property located downtown?	No	Is the property in a local historic district?	No	Additional Unique Setbacks Apply	No
Watershed	WSIII BOW HUNTING CREEK				

Attachment File Name	Added On	Added By	Attachment Group	Notes
Signature_ADAM_CASSTEVENS_11/11/2022.jpg	11/11/2022 13:24	CASSTEVENS, ADAM		Uploaded via CSS
revollar author to act_v1.pdf	11/15/2022 8:41	Nebel, Barbara	Available Online	Authorize to Act as Agent
revollar deed and exist septic pmt_v1.pdf	11/15/2022 8:41	Nebel, Barbara	Available Online	Additional Supporting Information
revollar floor plan septic_v1.pdf	11/15/2022 8:41	Nebel, Barbara	Available Online	Floor Plan(s)
revollar septic permit site plan_v1.pdf	11/15/2022 8:41	Nebel, Barbara	Available Online	Site Plan
revollar zoning_v1.pdf	11/15/2022 8:41	Nebel, Barbara	Available Online	Additional Supporting Information

Inspection Number	Status	Inspection Type	Request Date	Scheduled Start Date	Scheduled End Date	Actual Start Date	Actual End Date
2022-41622	Re-inspection required	OSWP Septic/Well Preliminary Site Visit	12/02/2022			12/02/2022 8:41	12/02/2022 8:41

Inspectors: Kobuck, Teanna (Primary)

Checklist Item	Description	Passed	Comments
General Comments	Checklist item used to track general comments, not specific to any other	No	

PERMIT SNAPSHOT REPORT (OSWP-2022-9180)

checklist item

2022-42903	Passed - Permit	OSWP Septic/Well Preliminary Site Visit	12/07/2022	12/07/2022 16:52	12/07/2022 16:52

Inspectors: Kobuck, Teanna (Primary)

Checklist Item	Description	Passed	Comments
General Comments	Checklist item used to track general comments, not specific to any other checklist item	No	

Invoice No.	Fee		Fee Amount	Amount Paid
INV-00005065	Existing System Inspection		$250.00	$250.00
		Total for Invoice INV-00005065	$250.00	$250.00
INV-00005069	Iredell Zoning Tech Fee		$2.25	$2.25
	Iredell Zoning Permit Fee		$75.00	$75.00
		Total for Invoice INV-00005069	$77.25	$77.25
		Grand Total for Permit	**$327.25**	**$327.25**

Workflow Step / Action Name	Action Type	Start Date	End Date
Application Completeness Check v.1		11/15/2022 0:00	11/15/2022 8:41
Confirm application complete v.1	Generic Action		11/15/2022 8:41
Zoning Review v.1		11/15/2022 0:00	11/30/2022 9:13
Fees Paid v.1	Generic Action		11/30/2022 8:59
Iredell County Zoning Approval v.1	Task	11/15/2022 0:00	11/30/2022 9:13
Issue Invoice v.1	Generic Action		11/15/2022 9:01
Fees v.1		11/15/2022 0:00	11/30/2022 8:59
Issue Invoice v.1	Generic Action		11/15/2022 8:43
Fees Paid v.1	Generic Action		11/30/2022 8:59
Lot Readiness Verification v.1		12/05/2022 0:00	
OSWP Septic Preliminary Site Visit v.1	Inspection	12/05/2022 0:00	12/05/2022 8:43
OSWP Septic Preliminary Site Visit v.2	Inspection	12/07/2022 0:00	12/07/2022 16:52
Existing System Inspection v.1	Inspection		
EH Inspections v.1			
OSWP Alarm Checked v.1	Inspection		
OSWP Drain Lines Checked v.1	Inspection		
OSWP Electrical Checked v.1	Inspection		
OSWP Floats Checked v.1	Inspection		
OSWP Maintenance Contract v.1	Inspection		
OSWP Pressure Head Checked v.1	Inspection		
OSWP Pressure Manifold Checked v.1	Inspection		
Environmental Health Review v.1			
Environmental Health Approved For Building Permit v.1	Generic Action		
Permit Completion Process v.1			
Issue Permit/Complete v.1	Generic Action		

PERMIT SNAPSHOT REPORT (OSWP-2022-9180)

checklist item

2022-42903	Passed - Permit	OSWP Septic/Well Preliminary Site Visit	12/07/2022	12/07/2022 16:52	12/07/2022 1

Inspectors: Kobuck, Teanna (Primary)

Checklist Item	Description	Passed	Comments
General Comments	Checklist item used to track general comments, not specific to any other checklist item	No	

Invoice No.	Fee		Fee Amount	Amount Paid
INV-00005065	Existing System Inspection		$250.00	$250.00
		Total for Invoice INV-00005065	$250.00	$250.00
INV-00005069	Iredell Zoning Tech Fee		$2.25	$2.25
	Iredell Zoning Permit Fee		$75.00	$75.00
		Total for Invoice INV-00005069	$77.25	$77.25
		Grand Total for Permit	**$327.25**	**$327.25**

Workflow Step / Action Name	Action Type	Start Date	End Date
Application Completeness Check v.1		11/15/2022 0:00	11/15/2022 8:4
Confirm application complete v.1	Generic Action		11/15/2022 8:4
Zoning Review v.1		11/15/2022 0:00	11/30/2022 9:1
Fees Paid v.1	Generic Action		11/30/2022 8:5
Iredell County Zoning Approval v.1	Task	11/15/2022 0:00	11/30/2022 9:1
Issue Invoice v.1	Generic Action		11/15/2022 9:0
Fees v.1		11/15/2022 0:00	11/30/2022 8:5
Issue Invoice v.1	Generic Action		11/15/2022 8:4
Fees Paid v.1	Generic Action		11/30/2022 8:5
Lot Readiness Verification v.1		12/05/2022 0:00	
OSWP Septic Preliminary Site Visit v.1	Inspection	12/05/2022 0:00	12/05/2022 8:4
OSWP Septic Preliminary Site Visit v.2	Inspection	12/07/2022 0:00	12/07/2022 16:5
Existing System Inspection v.1	Inspection		
EH Inspections v.1			
OSWP Septic Checked v.1	Inspection		
OSWP Septic Lines Checked v.1	Inspection		
OSWP Trench Checked v.1	Inspection		
OSWP Final Checked v.1	Inspection		
OSWP Maintenance Contract v.1	Inspection		
OSWP Pressure Head Checked v.1	Inspection		
OSWP Pressure Manifold Checked v.1	Inspection		
Environmental Health Review v.1			
Environmental Health Approved For Building Permit v.1	Generic Action		
Permit Completion Process v.1			
Close Permit complete v.1	Generic Action		

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PERMIT# 137563 PIN# 4863504671 DATE 8/30/06

OWNER OR APPLICANT Sergio Martinez PHONE: Business 704 646 5596 Home 704 232 9777

ADDRESS 136 Whispering Dr

LOCATION R 70 W (L) 177 (N) (R) on 901, (L) on Winthrop, (L) on Cedar, (R) on Cartwright, (L) on Trivette, (L) on Whispering, Prop on (R)

SUBDIVISION Cashiers Ridge BLOCK / SECTION III LOT 19 LOT AREA 1.55 SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .25

Septic Tank: Ex. Gallons: STB Ex. Date Ex

Pump Tank: Gallons: PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields Ex Square Feet Ex Linear Feet Ex

No Lines Ex. Trench Width Ex Max Trench Bottom Depth Ex Gravel Depth Ex

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

System Description: Ex. Conv. Gravity

Repair System Description: Ex.

Maintenance Agreement Required: ☐ Yes ☐ No

☐ House/Mod. Home ☒ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Persons No. Employees

Water Supply: ☒ Individual ☐ Public ☐ Community

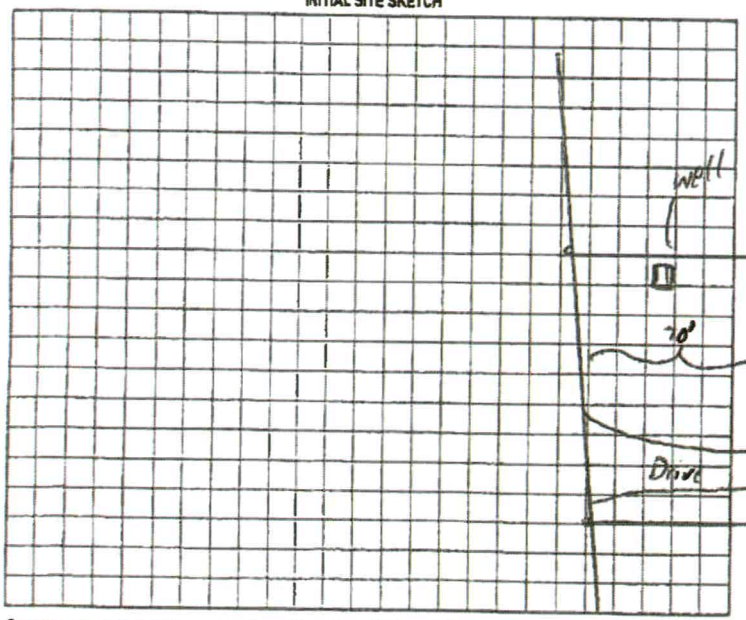
☒ Gravity ☐ Pressure ☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments/Conditions:

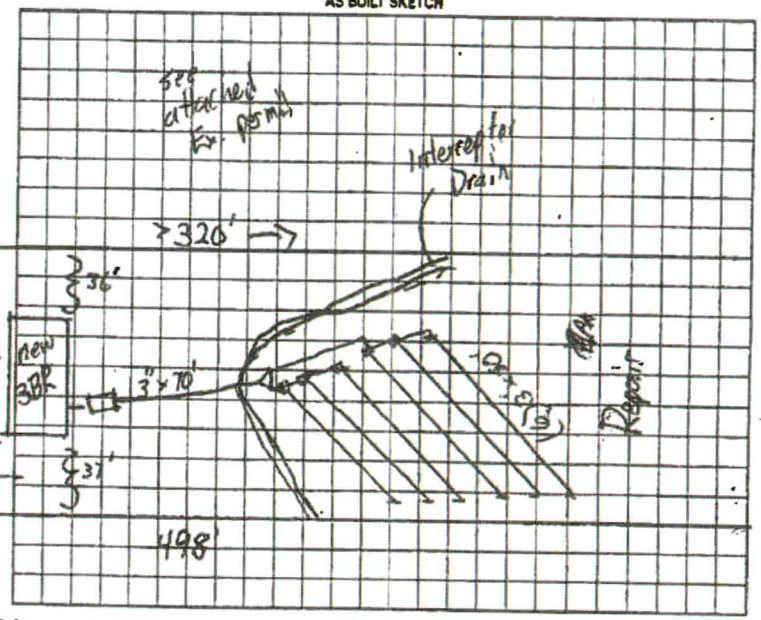
Replace Broken Riser Cap on Outlet end of tank
Clean Filter in Septic Tank

Comments/Conditions:

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. Improvement Permit with plan valid without expiration ☐ Improvement Permit with site plan valid for sixty months ☐ Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: Bernard Cannon date 9/1/06 Installed by:

Improvement Permit by: date Operation Permit by: date

Authorization to Construct by: date Existing System Inspection by: date 8-30-06

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK

DocuSign Envelope ID: 818471B4-9D76-470F-A709-F00717D4852B

Type: CRP
Recorded: 06/13/2019 at 09:58:13 AM
Fee Amt: $81.00 Page 1 of 3
Revenue Tax: $55.00
Iredell County, NC
Ronald N. Wyatt Register of Deeds
BK 2624 PG 1771-1773

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: $ 55.00

Parcel Identifier No. ____ Verified by ____ County on the ____ day of ____, 20__
By: ____

Mail/Box to: Grantee

This instrument was prepared by: Russell W. Chapman, Jr.

Brief description for the Index: ____

THIS DEED made this 13th day of June, 20 19, by and between

GRANTOR	GRANTEE
Anna M. Kupka and husband, Thomas D. Harrison PO Box 85 Union Grove, NC 28689	Jennifer R. Revollar 143 Whispering Drive Harmony, NC 28634

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated in the City of ____, Union Grove Township, Iredell County, North Carolina and more particularly described as follows:
Legal description attached

The property hereinabove described was acquired by Grantor by instrument recorded in Book ____ page ____.

A map showing the above described property is recorded in Plat Book ____ page ____.

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Printed by Agreement with the NC Bar Association – 1981 SoftPro Corporation, 333 E. Six Forks Rd., Raleigh, NC 27609

R.O.T.C.

Page Count 3
☐NS ☐PQ ☐SI

DocuSign Envelope ID: 818471B4-9D76-470F-A709-F00717D4852B

Type: CRP
Recorded: 06/13/2019 at 09:58:13 AM
Fee Amt: $81.00 Page 1 of 3
Revenue Tax: $55.00
Iredell County, NC
Ronald N. Wyatt Register of Deeds
BK 2624 PG 1771-1773

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: $ 55.00

Parcel Identifier No. _____ Verified by _____ County on the ____ day of _____, 20__
By: _____

Mail/Box to: Grantee

This instrument was prepared by: Russell W. Chapman, Jr.

Brief description for the Index: _____

THIS DEED made this 13th day of June, 20 19, by and between

GRANTOR	GRANTEE
Anna M. Kupka and husband, Thomas D. Harrison PO Box 85 Union Grove, NC 28689	Jennifer R. Revollar 143 Whispering Drive Harmony, NC 28634

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated in the City of _____, Union Grove Township, Iredell County, North Carolina and more particularly described as follows:
Legal description attached

The property hereinabove described was acquired by Grantor by instrument recorded in Book _____ page _____.

A map showing the above described property is recorded in Plat Book _____ page _____.

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R.O.T.C.

Page Count 3
DNS DPQ DSI

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TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the Grantee in fee simple.

And the Grantor covenants with the Grantee, that Grantor is seized of the premises in fee simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever, other than the following exceptions:
SUBJECT TO such existing easements for public roadways and utilities, rights of way, and restrictive covenants of record.

IN WITNESS WHEREOF, the Grantor has duly executed the foregoing as of the day and year first above written.

(Entity Name)

By:

Title:

By:

Title:

By:

Title:

Anna M. Kupka (SEAL)
Anna M Kupka

Thomas D. Harrison (SEAL)
Thomas D. Harrison

(SEAL)

(SEAL)

State of North Carolina - County of Iredell

I, the undersigned Notary Public of the County and State aforesaid, certify that Anna M. Kupka and husband, Thomas D. Harrison personally appeared before me this day and acknowledged the due execution of the foregoing instrument for the purposes therein expressed. Witness my hand and Notarial stamp or seal this 13th day of June, 20 19

My Commission Expires: 7-6-21

RUSSELL W. CHAPMAN, JR.
NOTARY PUBLIC
Iredell County, NC
Commission Expires July 6, 2021

Notary Public

State of North Carolina - County of

I, the undersigned Notary Public of the County and State aforesaid, certify that personally came before me this day and acknowledged that he is the of corporation/limited liability company/general partnership/limited partnership (strike through the inapplicable), a North Carolina or that by authority duly given and as the act of such entity, he signed the foregoing instrument in its name on its behalf as its act and deed. Witness my hand and Notarial stamp or seal, this day of , 20__.

My Commission Expires:

Notary Public

State of North Carolina - County of

I, the undersigned Notary Public of the County and State aforesaid, certify that

Witness my hand and Notarial stamp or seal, this day of , 20__.

My Commission Expires:

Notary Public

The foregoing Certificate(s) of is/are certified to be correct. This instrument and this certificate are duly registered at the date and time and in the Book and Page shown on the first page hereof.

Register of Deeds for County

By: Deputy/Assistant - Register of Deeds

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