IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 244451

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

PIN # 4614-84-3870

APPLICANT/OWNER: David Spence | APPLICANT ADDRESS: 1662 Brawley School Rd. Mooresville, NC

SITE ADDRESS: 148 Sunstede Rd. Mooresville, NC 28117 | PHONE: 704-402-2119 | ALT. PHONE

SITE DIRECTIONS: BSR towards Lake → R on Tuskarora → R on Sunstede → Lot on Right | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: CL+T | SECTION: 6 | LOT # 271 | LOT AREA: 0.66 acres | DESIGN FLOW: 360 GPD | LTAR: 0.25

Septic Tank	1000	(gal)	STB	760	Date	8-9-21	☐ New System	☐ Repair	☒ Expansion	System Type: I II (III) IV V VI	
Pump Tank	1000	(gal)	PT	363	Date	8-24-21	System Description:	Existing Bed + PM PPBPS (50% Reduction)			
Pump Make	Liberty		Model	290	Serial #		Repair System Description:	Partial Drip + TS II			
# Nitrification Fields	1		# Lines	Existing Bed +3	Linear Ft	Ex + 80	Maintenance Agreement Required:	☐ YES	☒ NO		
Trench Width	24"		Trench Bottom Depth(Low side)	40"	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: 50' Lake buffer must be staked by surveyor with stakes visible @ time of ST/PT inspection. Existing tank shall be pumped by a licensed sewage hauler and crushed in place. Existing well that is *23-24' from existing gravel bed must be abandoned IMMEDIATELY [well abandonment permit issued 5/24/19] Relocated ditch 15' from distal end of system as shown on drawing. Recommend a timer control panel be used for system pumping/dosing.

INITIAL SITE SKETCH

* 3 Bedrooms Total, No Bedroom in Basement!

See attached drawing from

Paul Penninger [plus pumping/dosing page]

Dated 5/4/19

AS BUILT SKETCH

ST- 4ft to upper deck post
Short lines 23 to PL & 15ft to top of drainage ditch
Red filter installed Set speed
PPBPS drainlines installed as drawn
Water was diverted from drainfield

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: 7/1/19 | Installed by: Richard Abernathy

[signature] Date: 6/14/2019 | OPERATION PERMIT by: Cary Smith Date: 11/9/21

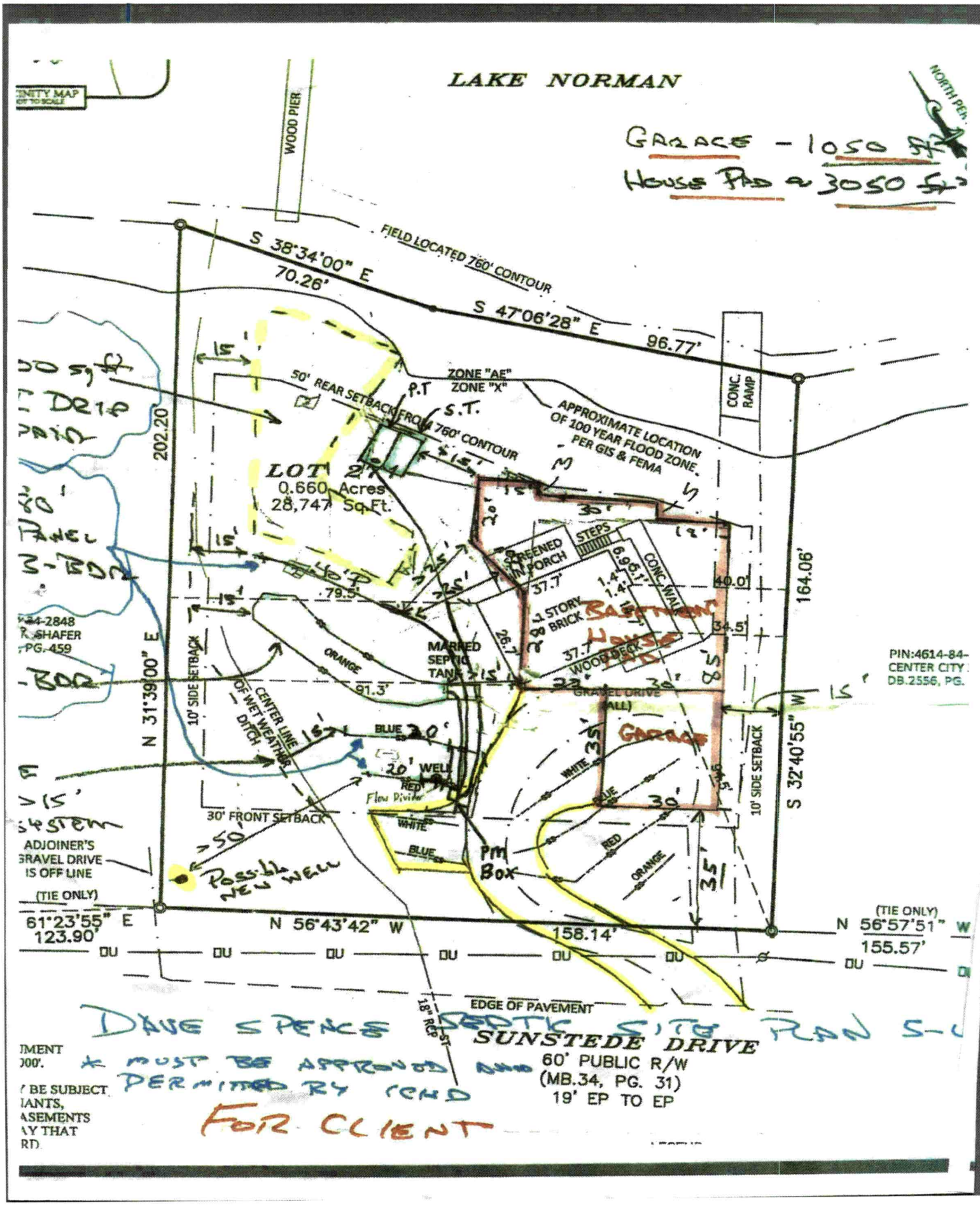
[signature] 7/14/2021 | Existing System Inspected by: Date:

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

148 Sunstede

	Date	Initials
Drain Lines Checked	10/1/21	MD
Tanks Checked	10/1/21	MD
Pressure Manifold or Valve Box Checked	10/1/21	MD
Pressure Head Set	11/9/21	CW
Electrical Checked	11/9/21	CW
Floats Set	11/9/21	CW
Alarm Checked	11/9/21	CW
Maintenance Contract Y (N)		

Set ~~Speed~~ levelers in D-box 10/1/21 MD


LAKE NORMAN
GARAGE - 1050 SF
HOUSE PAD = 3050 SF
WOOD PIER
FIELD LOCATED 760' CONTOUR
S 38°34'00" E
70.26'
S 47°06'28" E
96.77'
CONC. RAMP
ZONE "AE"
ZONE "X"
P.T
S.T.
50' REAR SETBACK FROM 760' CONTOUR
APPROXIMATE LOCATION OF 100 YEAR FLOOD ZONE PER GIS & FEMA
LOT 2
0.660 Acres
28,747 Sq.Ft.
202.20
164.06'
STEPS
SCREENED IN PORCH
CONC. WALK
1 STORY BRICK
BASEMENT
HOUSE
WOOD DECK
GRAVEL DRIVE
GARAGE
MARRIED SEPTIC TANK
ORANGE
BLUE
WELL
RED
Flow Divider
WHITE
PM Box
Possible NEW WELL
10' SIDE SETBACK
CENTER LINE OF WET WEATHER DITCH
30' FRONT SETBACK
ADJOINER'S GRAVEL DRIVE IS OFF LINE
(TIE ONLY)
N 31°39'00" E
S 32°40'55" W
N 61°23'55" E
123.90'
N 56°43'42" W
158.14'
(TIE ONLY)
N 56°57'51" W
155.57'
EDGE OF PAVEMENT
18" RCP
PIN:4614-84-
CENTER CITY
DB.2556, PG.
SUNSTEDE DRIVE
60' PUBLIC R/W
(MB.34, PG. 31)
19' EP TO EP
DAVE SPENCE SEPTIC SITE PLAN S-C
* MUST BE APPROVED AND PERMITTED BY LCHD
FOR CLIENT

6-1-19
FOR ICHD REVIEW

Dave Spence - 148 Sunstede Possible Pressure Manifold Design for 2 bdr expansion to 3 bdr.

	Design Flow (gpd)	Percent of Design Flow (%)	PM Tap size at 2 ft head	PM flow per tap (gpm)	Percent of PM Flow (%)
existing 2-bdr bed	240	66.67	1 inch SCH 40	20.2	64.8
new 40 ft panel line	60	16.67	1/2 in SCH 80	5.48	17.6
new 20 ft panel line	30	8.34	1/2 in SCH 80	5.48	17.6
new 20 ft panel line	30	8.34			
Sum	360	100.02		31.16	100

Use 1 tap for two 20 ft lines and split with flow divider or D-box ★

Dose Volume = Number of Panels *3.6 gallons

9 panels per 40 ft line — 32.4 gal max dose
5 panels per 20 ft line — 18 gal max dose

$\frac{32.4 \text{ gal/Dose}}{5.48 \text{ gal/min}} = 5.9 \frac{\text{min}}{\text{Dose}}$

5.9 min × 31.16 gpm = 183 gal/Dose

USE 4 min Dose Time ★

4 min × 31.16 gpm = 124.6 gal/Dose

$\frac{360 \text{ gpd}}{124.6 \text{ gal/Dose}} = 2.9 \frac{\text{Dose}}{\text{Day}}$

APPROVED JUN 14 2019

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

Sheet 1 of 1
PROPERTY ID #: 4614-84-3870
COUNTY: Iredell

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

OWNER: David Spence
ADDRESS:
PROPOSED FACILITY: Ex + 1 BR
PROPOSED DESIGN FLOW (.1949): 360 GPD
LOCATION OF SITE: 148 Sunstede Rd. Mooresville
APPLICATION DATE 5/4/19
DATE EVALUATED: 5/22/19
PROPERTY SIZE: 0.66 acres
PROPERTY RECORDED: Yes
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) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LSS 9% Primary	0-10	SCL V.W.SBK	Sl. Friable, SS, Sp, Sap		63 Keep	— Deep	—	0.25 PS
		10-35	Clay M-S ABK MSBK	Firm, Sticky, Plastic Sap					
		35-63	Clay W.SBK Loam some Saprolite	Sl. Friable, SS, Sp, Sap					
			some Rock Fragments 50"-60"						
2	Lower 7% Primary	0-10	SCL V.W.SBK		Stay Above	72	— 48"	—	0.25 PS
		10-47	Clay M.ABK/SBK	Firm, Sticky, Sp, Sap					
		47-72	Clay M.ABK/SBK	Firm, Sticky, Sp, Sap					
			some Lithochromic Saprolite						
3	Foot Slope 8% Repair	0-7	SCL V.W.SBK	Sl. Friable, SS, Sp, Sap		60"	—	—	0.25 PS
		7-34	Clay M.ABK/SBK	Firm, Sticky, Plastic, Sap					
		34-60	Clay W.ABK/SBK	Sl. Firm, Sticky, Sp, Sap					
		some Dense	Sap fragments 30"-40"						
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	80 L.F.	1600 ft² +
System Type(s)	PPBPS (50% Red)	Drip
Site LTAR	0.25	0.125

OTHER FACTORS (.1946): Move Drainage Ditch
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Tom Shuck + Paul Pennegar
OTHER(S) PRESENT:

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE
OR IT WILL NOT BE PROCESSED

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM*

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

Applicant Information: (PRINT CLEARLY)

Applicant Name: David J Spence Address: 662 Brawley School Rd, Mooresville Zip: 28117
Applicant Email: spencedj@msn.com Phone: 704 402 2119 Alt. Phone: _____
Owner Name: Same Address: _____ Zip: _____
Owner Email: Same Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 148 Sunstede Dr, Mooresville, NC 28117
Subdivision Name: CL+T Section/Phase: 6 Lot Number: 271
Driving Directions: BSR towards Lake → R on Tuskarora – R on Sunstede Lot on Right

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

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
(✓) Bedroom(s) Addition to previous 2
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____
Maximum Number of Bedrooms: 3
Maximum Number of Occupants: 6
( ) Swimming Pool
( ) Other Addition/Structure: _____
Non-Residential Site Development: Type of Business: _____
Square Footage of Building: _____ Max. Number of Employees: ____ Max. Number of Seats/Beds/Other: ____

CHECK FOUNDATION TYPE

( ) Crawl Space Foundation
( ) Concrete Slab Foundation
(✓) Basement with Plumbing
( ) Basement without Plumbing

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: 60's
( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other: See permit

Please answer the following to the best of your ability:

( ) Yes (✓) No Does the site contain any jurisdictional wetlands?
( ) Yes (✓) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (✓) 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: David J Spence 9/1/2020
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

#244451
5-9-19
pd. $500/$550/$175

Call Dave Pennington for site visit
704-996-6330

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Application For: (X) New Well Permit ( ) Well Repair Permit (X) 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: David Spence **Address:** 1662 Brawley School Rd, Mooresville **Zip:** 28117

Applicant Email: spencedj@msn.com **Phone:** 704-402-2119 **Alt. Phone:**

Owner Name: SAME AS ABOVE **Address:** **Zip:**

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

Property Information:

Street Address: 148 Sunstede Rd, Mooresville, NC

Subdivision Name: CL&T **Section/Phase:** 6 **Lot Number:** 271

Driving Directions: BRAWLEY SCHOOL RD, TR TUSKARORA, TR SUNSTEDE, LOT ON RT

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

CHECK FOUNDATION TYPE

(X) New Single Family Residence — Maximum Number of Bedrooms: 3 — ( ) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: 6 — ( ) Concrete Slab Foundation
( ) Accessory Building — ( ) Swimming Pool — (X) Basement with Plumbing
( ) Bedroom(s) Addition — ( ) Other Addition/Structure: — ( ) Basement without Plumbing
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem:
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:

(X) New Well ( ) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

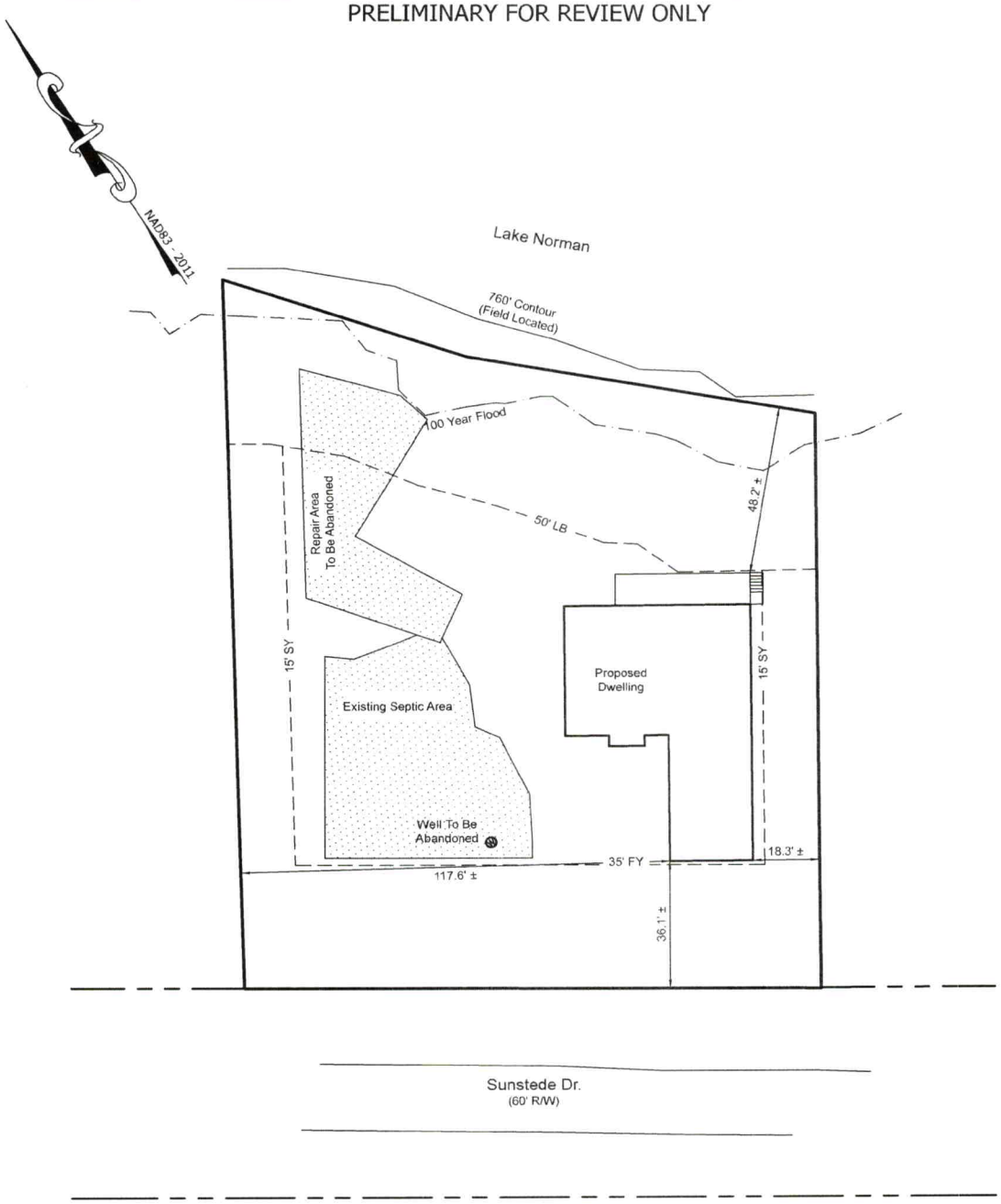
Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: 1970s?
(X) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other:

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: _____ 5-4-19
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

PRELIMINARY FOR REVIEW ONLY



REFERENCE:

BEING ALL OF LOT 271 - AS RECORDED IN P.B. 34, PG. 31 - IREDELL COUNTY REGISTRY.

SETBACKS:

PROPERTY IS ZONED: R-20 (IREDELL COUNTY)

PROPERTY SUBJECT TO A 35' FRONT YARD (FY), 15' SIDE YARD (SY), & 50' LAKE BUFFER (RY) PER IREDELL COUNTY ZONING ORDINANCE.

THE SUBJECT PROPERTY IS LOCATED IN A "SPECIAL HAZARD AREA" AS SHOWN ON HUD/FIA FLOOD INSURANCE RATE MAP COMMUNITY PANNEL NUMBER 3710461400K EFFECTIVE DATE 3/13/2008.

0 30 60 90

LEGEND	
FY	FRONT YARD SETBACK
LB	LAKE BUFFER
SY	SIDE YARD SETBACK
R/W	RIGHT OF WAY
P.B.	PLAT BOOK
PG.	PAGE

JORDAN GRANT
ENGINEERING • SURVEYING • PLANNING
JORDAN GRANT & ASSOCIATES, PLLC
P.O. BOX 151 * STATESVILLE, NC 28687
mattg@jordan-grant.com (704) 928-7919
FIRM # P-1227

Plot Plan For:

Spence

DRAWN BY: JWE	CHECKED BY: MIG
SCALE: 1" = 30'	
DEED REF: 2600-1097	PIN NO: 4614-84-3870
DATE OF MAP: 06-12-20	SURVEY DATE: 06-10-20
REVISION: 09-01-20	DRAWING FILE: 20200616-2

148 Sunstede Dr, Mooresville, NC 28117
Davidson TWSP - Iredell County - North Carolina

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*) David J Spence

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, _____, am the legal owner(s) of the property located at _____, identified as PIN (Parcel Identification Number)_____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) _____, _____, 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.

David J Spence
Signature of Owner(s)

9/1/2020
Date

Mooresville - Environmental Health
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

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, David Spence, am the legal owner(s) of the property located at 148 Sunstede Road, identified as

PIN (Parcel Identification Number) 4614843870.000, located in Iredell County, North Carolina.
I do hereby authorize (**print legal representative/company name**) Paul Penninger / Penninger Soil Consulting _____, 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

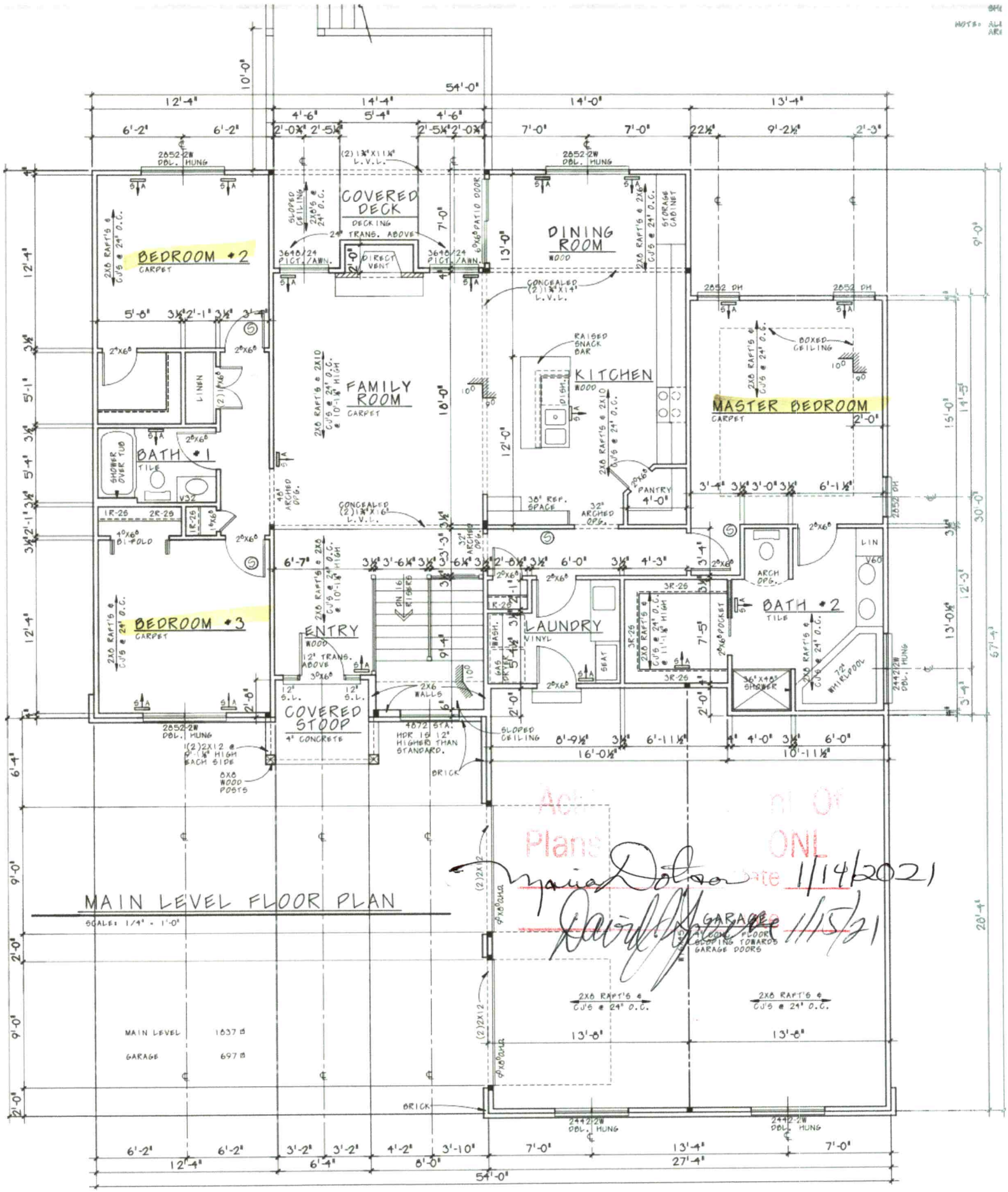
I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

David Spence
Signature of Owner(s)

5-4-19
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



MAIN LEVEL FLOOR PLAN

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

Maria Dolan 1/14/2021

David Anderson 1/15/21

IREDELL COUNTY

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

APPLICATION NUMBER
244451
Issue Date: 05/08/2019

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4614843870.000	148 SUNSTEDE DRIVE, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: STROWD ROY E	Applicant: PAUL PENNINGER
Address: 900 COLVILLE RD	Address: 595 J M PENNINGER RD
CHARLOTTE, NC 28207	LEXINGTON, NC 27292
Phone:	Phone: 704-996-6330

Use Requested	Zone Code
OLD HSE HAS TO BE DEMOLISHED BEFORE BLDG PERMIT ISSUED	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.660	35.00	50.00	15.00	15.00	CACL	AE

Remarks:

Lake Lots: Must meet both the 50-foot setback from the 760 Æ contour line and the 35-foot setback from the rear property line for any structure.

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	176621	TOTAL FEES:	$ 77.25