DW

ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # AP 305636

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

PIN # 4624 --57 --9069

APPLICANT/OWNER: Christopher Hoffman/Southern Cottage APPLICANT ADDRESS: 20509 N. Main St Cornelius, NC 28031

SITE ADDRESS: 113 Saylors Watch Mooresville, NC 28117 PHONE: 704 237 4554 ALT. PHONE 704 669 5205

SITE DIRECTIONS: Brawley School Rd TL Torrence Chapel to Saylors Watch at end SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Saylors Watch SECTION: LOT # 4 LOT AREA: 1.19 Ac DESIGN FLOW: 600 gpd L.T.A.R.: .3

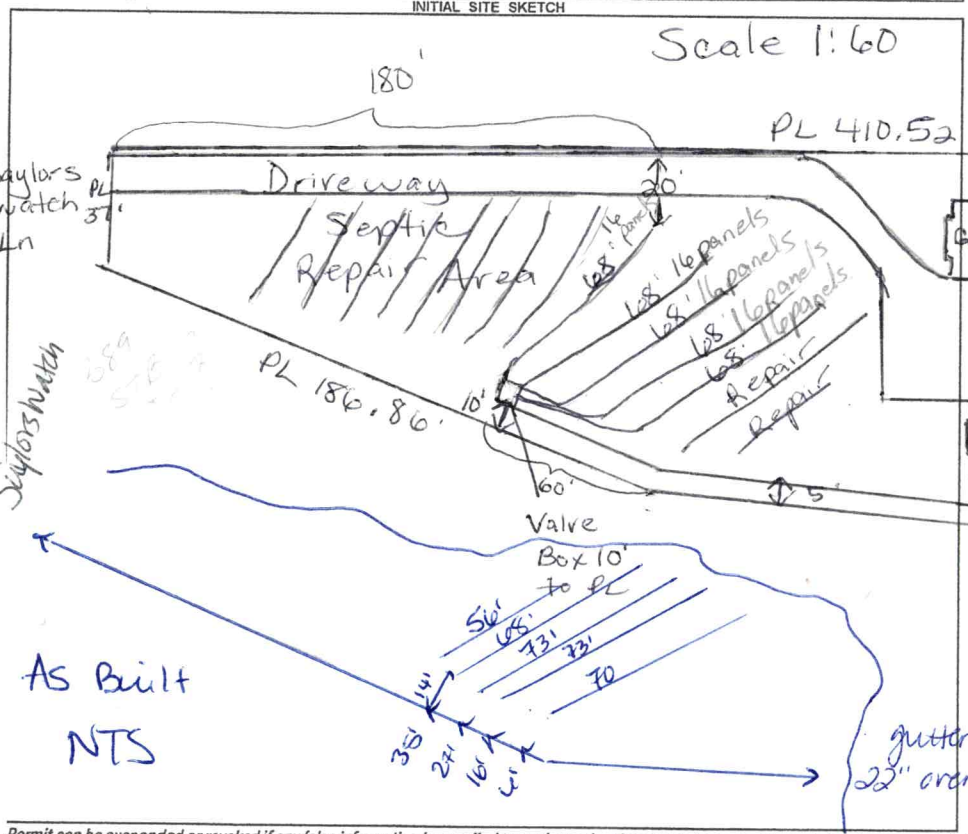
Septic Tank	1500 (gal)	STB	964	Date	6-15-22	☒ New System	☐ Repair	☐ Expansion	System Type: I II III (IV) V VI	☒ Residence	No. Bedrooms 5
Pump Tank	1500 (gal)	PT	389	Date	8-15-22	System Description:	Pump LP PPBPS			☐ Business	No. Persons 10
Pump Make		Model		Serial #		Repair System Description:	LP PPBPS			☐ Other	No. Employees
# Nitrification Fields	1	# Lines	5	Linear Ft:	340'	Maintenance Agreement Required:	☒ YES	☐ NO		☒ Slab	☐ Crawl Space
Trench Width	min 24"	Trench Bottom Depth (~~Low side~~)			36"	Gravel Depth	N/A	☐ GRAVITY	☒ PRESSURE	☐ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☒ Community

Comments / Conditions: 80 panels max 288 gals dose Vdume
80 x 4' = 328 1.56 drawdown
8.78 minutes

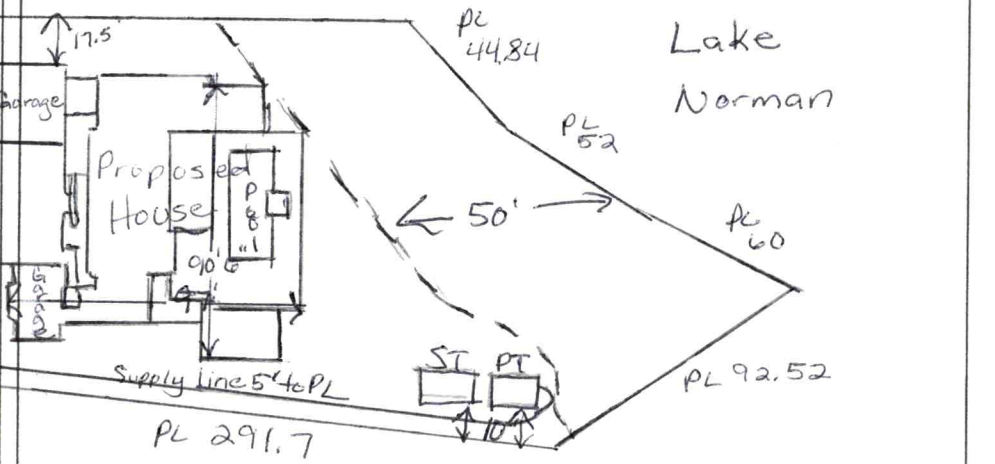
Keep waterline a minimum of 10' from Septic.
Non-functioning & Irrigation disconnected at time of OP - Do not reconnect

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.



9/5/23 MOVE pool water line OR expose pool water line to verify supply 18" below

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: Jessica Hoffman Date:

IMPROVEMENT PERMIT by: Maria Dobson Date: 7/28/21

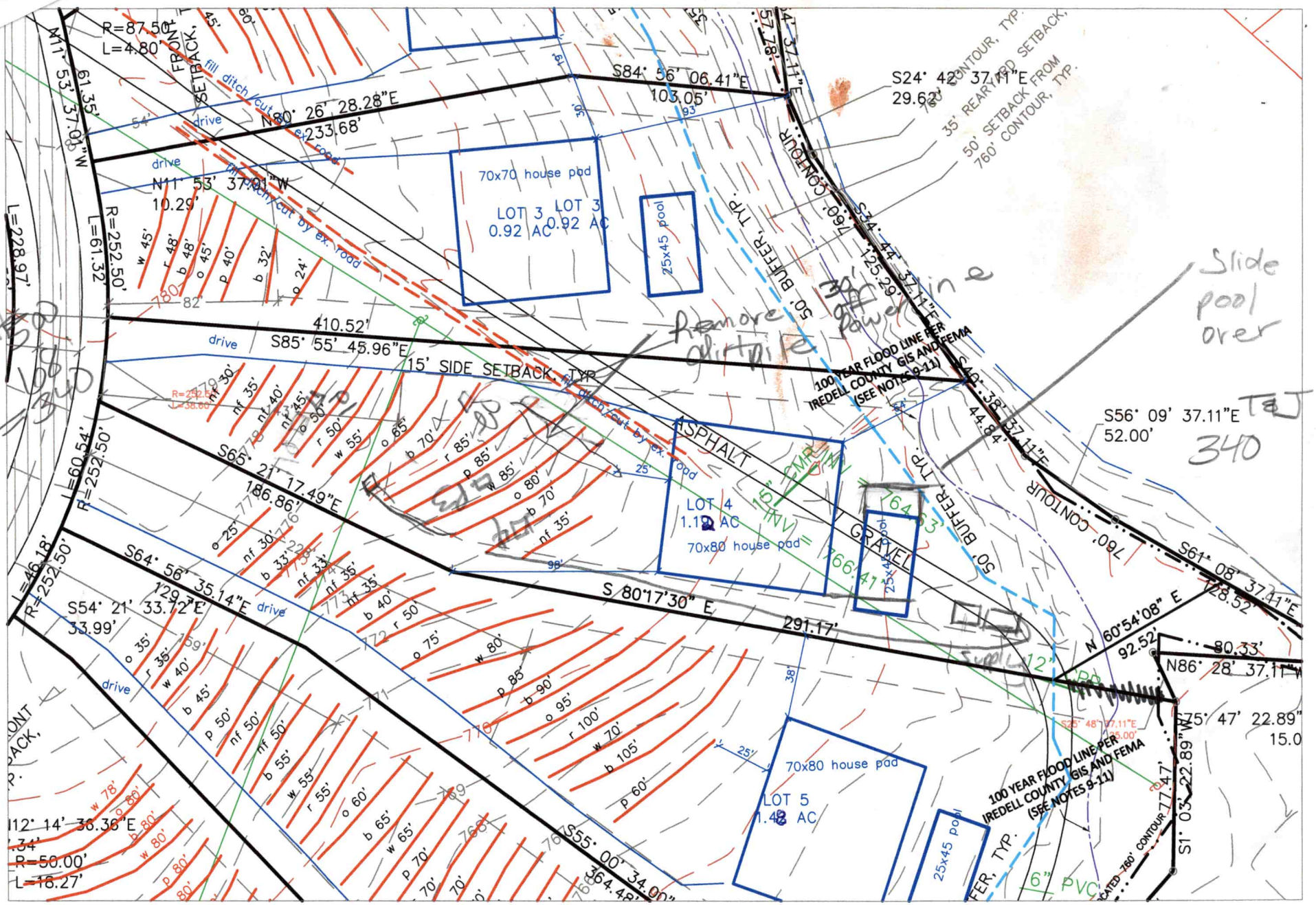
AUTHORIZATION TO CONSTRUCT by: Maria Dobson Date: 7/28/21

Installed by: Richard Abernathy

OPERATION PERMIT by: D. Weber Date:

Existing System Inspected by: Date:

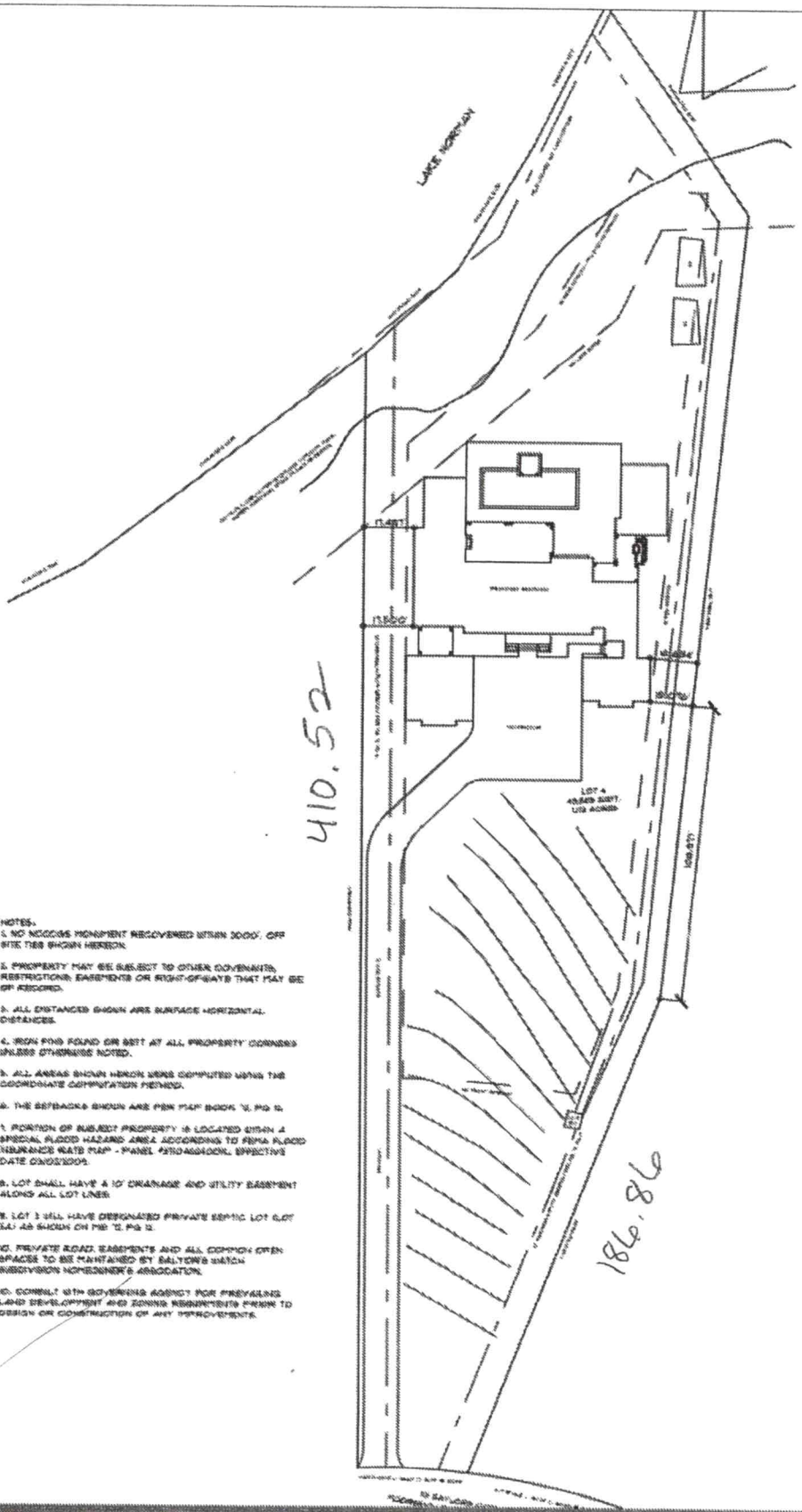
FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.



Saylors Watch Lot 4 Septic Site Plan - BI PART DEV LLC - March 22, 2020

Base site plan from ColeJenest & Stone, PA and Professional Property Surveyors, Inc. Proposed septic lines sketched on site plan by Penninger Soil Consulting, PLLC

Approximate septic line locations - refer to flagged lines in field. Septic System must be approved and permitted by ICHD.



NOTES:
1. NO NGS/USB MONUMENT RECOVERED WITHIN 2000' OF SITE THIS SHOWN HEREON.

2. PROPERTY MAY BE SUBJECT TO OTHER COVENANTS, RESTRICTIONS, EASEMENTS OR RIGHT-OF-WAYS THAT MAY BE OF RECORD.

3. ALL DISTANCES SHOWN ARE SURFACE HORIZONTAL DISTANCES.

4. IRON PIN FOUND OR SET AT ALL PROPERTY CORNERS UNLESS OTHERWISE NOTED.

5. ALL AREAS SHOWN HEREON WERE COMPUTED USING THE COORDINATE COMPUTATION METHOD.

6. THE SETBACKS SHOWN ARE PER PLAT BOOK 12, PG 12.

7. PORTION OF SUBJECT PROPERTY IS LOCATED WITHIN A SPECIAL FLOOD HAZARD AREA ACCORDING TO FEMA FLOOD INSURANCE RATE MAP - PANEL #3704640004L, EFFECTIVE DATE 09/03/2009.

8. LOT SHALL HAVE A 10' DRAINAGE AND UTILITY EASEMENT ALONG ALL LOT LINES.

9. LOT 3 WILL HAVE DESIGNATED PRIVATE SEPTIC LOT 0.07 AS SHOWN ON PB 12, PG 12.

10. PRIVATE ROAD, EASEMENTS AND ALL COMMON OPEN SPACES TO BE MAINTAINED BY BALTIMORE WATCH NEIGHBORHOOD HOMEOWNER'S ASSOCIATION.

11. CONSULT WITH GOVERNING AGENCY FOR PREVAILING LAND DEVELOPMENT AND ZONING REQUIREMENTS PRIOR TO DESIGN OR CONSTRUCTION OF ANY IMPROVEMENTS.

SITE PLAN
SCALE: 1" = 10'-0"

DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

PROPERTY ID #: ___
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Bi-Part Dev LLC
ADDRESS: 18611 Starcreek Dr Cornelius, NC
PROPOSED FACILITY: House
PROPOSED DESIGN FLOW (.1949): 1200gpd
LOCATION OF SITE: Lot #4 Saylor's Watch
APPLICATION DATE 3/24/20
DATE EVALUATED: 3/27/20
PROPERTY SIZE: 1.19Ac
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) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	5%	0-3	Brw CL	w SBK FR, SS, SP					PS
		3-33	RC m-F SBK/AB	FR, S, P,					
		33-60	RCL w SBK	FR, SS, SP					.3
			Lw few SAP Incl	OS	—	60"	—	—	
2	6%	0-7	Rd/Brw SCL	w SBK SS, SP, SExP, FR					PS
		7-26	RCL m-w SBK	SS, SP, SExP, FR					
		26-56"	RCL w SBK	SS, SP, SExP, FR					.3
			w/ SAP Incl	OS / mica	—	56"	—	—	
3	6%	0-7"	Brw SCL/CL	w/ SBK SS, SP, SExP, FR					PS
		7-29	RC m-w	SBK/AB FR, S, P, SExP					
		29-57	U/RCL	w-f SBK FR, S, SP, SExP					.3
			common SAP		—	57"	—	—	
4	7%	0-16	Rd/Brw CL/CL	SS, SP, SExP, FR					PS
		16-50	Rd/Yel CL	w SBK SS, SP, SExP, FR					
			w/ SAP	Incl OS					.3
		50-60"	LS	AP	—	50"	—	—	
			Massive, FR						

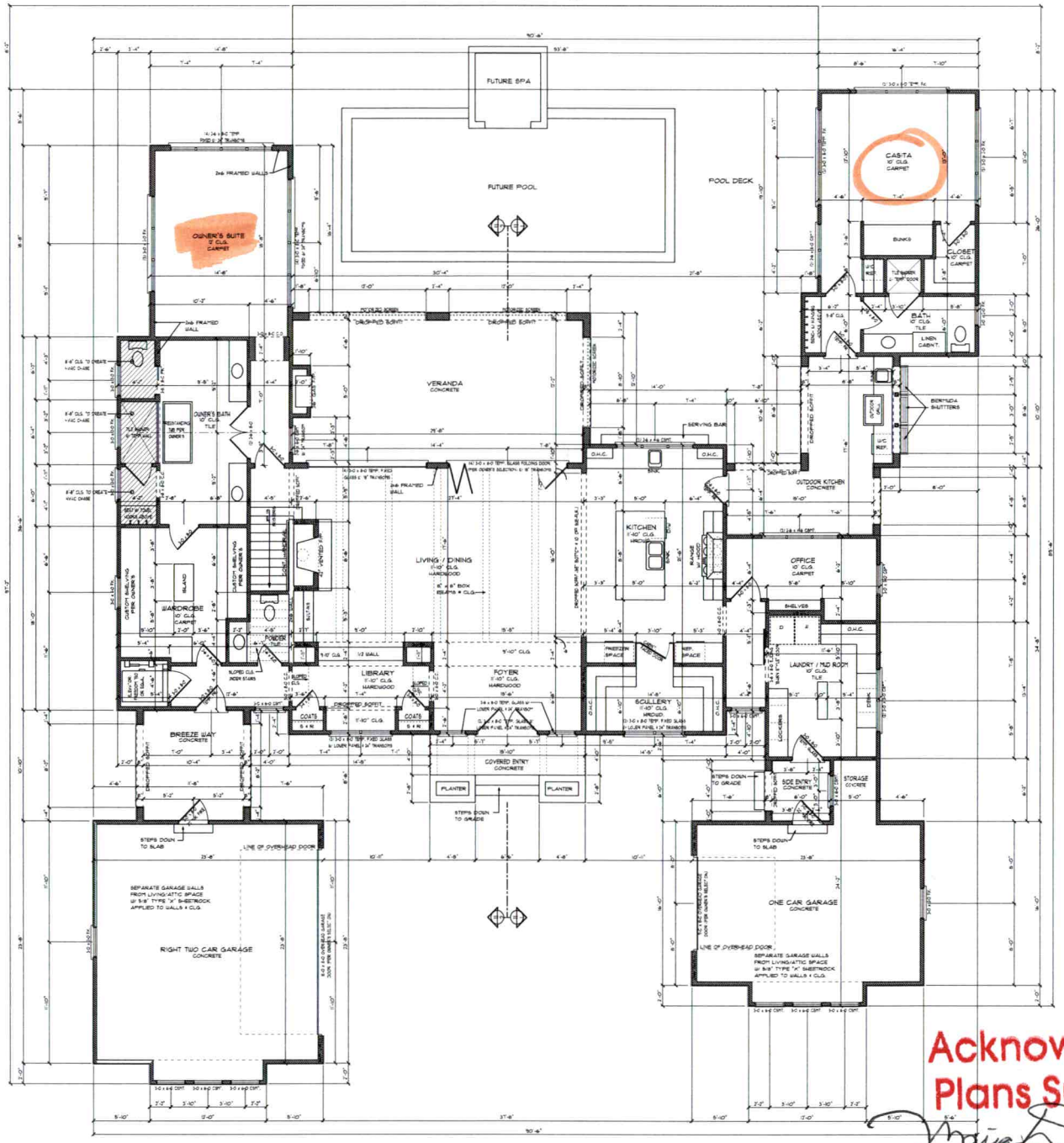
DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	PPBPS	PPBPS
Site LTAR	.3	.3

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): ___
EVALUATED BY: Maria Dotson
OTHER(S) PRESENT: Paul Pennington & David Bean

COMMENTS: ___

90' 6"

97' 2"

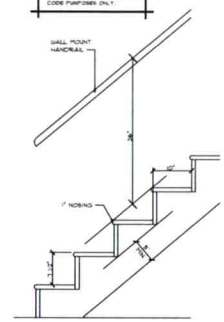


STAIR NOTES

NOTE:
VERIFY ACTUAL CONDITIONS + FLOOR FINISH MATERIALS PRIOR TO STAIR FABRICATION

NOTE:
GUARD RAILS + HANDRAILS SHALL BE IN COMPLIANCE W/ 2018 N.C.R.C.

HANDRAILS + BALUSTERS SHOWN MAY NOT REPRESENT THE FINAL PRODUCT. THIS DRAWING IS FOR CODE PURPOSES ONLY.



STAIR SECTION
SCALE: 1" = 1'-0"

DOOR + WINDOW NOTE

ALL WINDOW + DOOR SIZES ARE NOMINAL. BUILDER TO VERIFY ALL EGRESS + NON-EGRESS CONDITIONS, FALL PROTECTION CODE + GLAZING REQUIREMENTS PER CODE W/ WINDOW + DOOR MANUFACTURE SELECTED. ALL DOORS + WINDOWS TO COMPLY W/ ALL OF 2018 NORTH CAROLINA RESIDENTIAL CODES.

SQUARE FOOTAGE	
FIRST FLOOR HEATED	2,458
SECOND FLOOR HEATED	1,938
CASITA	435
TOTAL HEATED AREA	4,831
COVERED ENTRY	63
BREEZE WAY	126
ONE CAR GARAGE	434
TWO CAR GARAGE	584
OUTDOOR KITCHEN	215
SIDE ENTRY	40
VERANDA	444
UPPER BALCONY	63
TOTAL UNDER ROOF	6,800

FIRST FLOOR NOTES

- 10' CEILING HEIGHT TYP. UNLESS NOTED OTHERWISE
- 8' DOOR AND WINDOW HEIGHT TYP. UNLESS NOTED OTHERWISE
- SEE SECOND FLOOR FRAMING PLAN FOR ALL SECOND FLOOR BEAM + FIRST FLOOR HEADER SIZES
- IN DWELLING UNITS WHERE THE OPENING OF AN OPERABLE WINDOW IS LOCATED MORE THAN 72" ABOVE THE FINISHED GRADE OR SURFACE BELOW, THE LOWEST PART OF THE CLEAR OPENING OF THE
- ALL GLAZING WITHIN 24" OF THE FINISHED FLOOR.

FIRST FLOOR PLAN
SCALE: 1/4" = 1'-0"

ENGINEERED BY:
G.B. ENGINEERING, PLLC.
GARY A. BARNES, PE
11926 TREE SPARROW RD.
CHARLOTTE, NC 28278
(704) 671-5339
N.C. BUS. LIC. # P-1298

P.O. BOX 691286
MINT HILL, NC 28227
704-545-2928
ELITEDESIGNGROUP.COM

PROJECT:

SOUTHERN COTTAGE
113 BAYLORS WATCH LANE MOORESVILLE, NC 28117
IREDELL COUNTY

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DRAWN BY:
JJ.BARJA

DATE:
04.16.2021

REVISED:

SHEET 4 OF 14

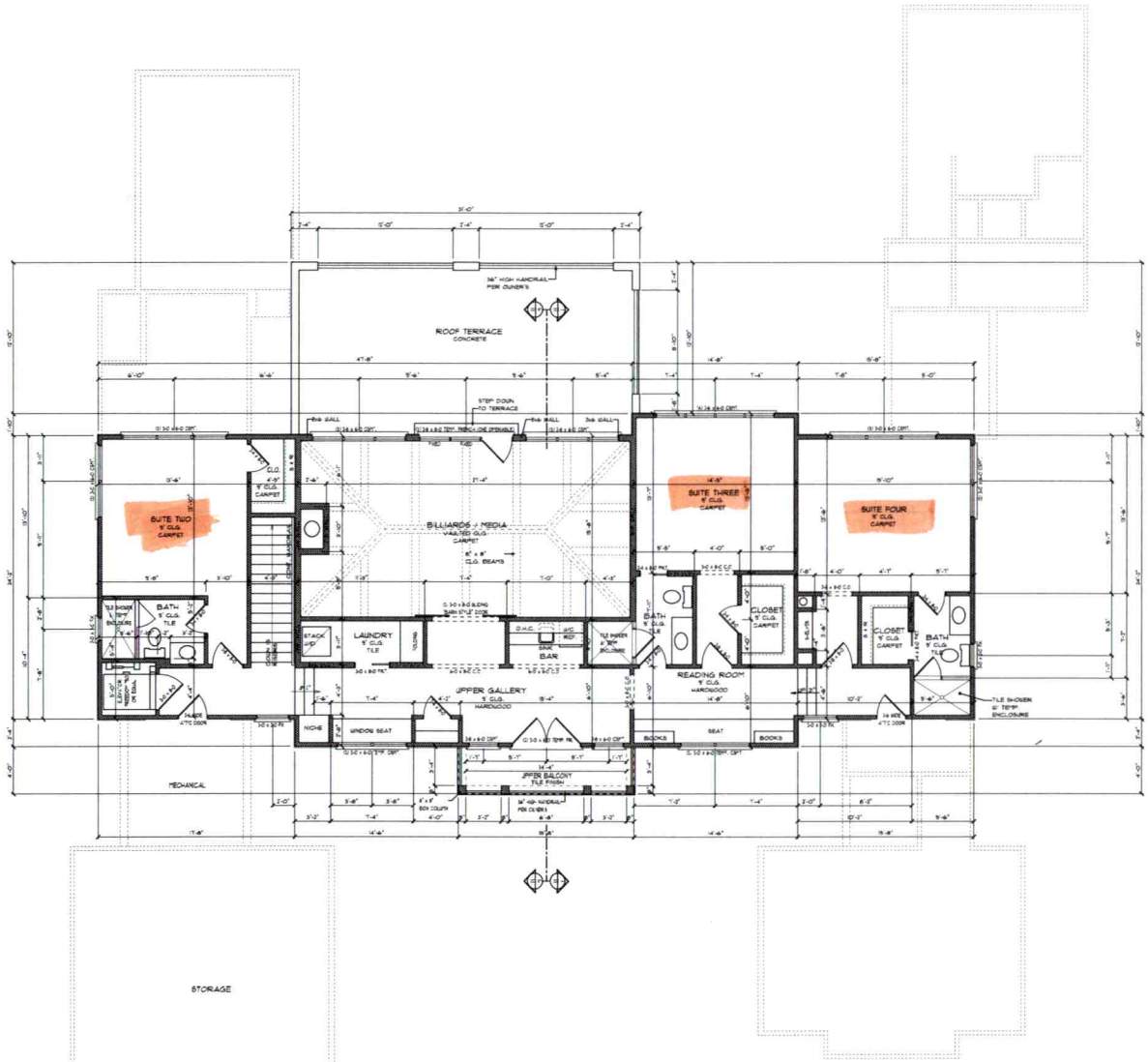
Acknowledgement Of Plans Submittal ONLY!

Date 7/29/21

Date 7/29/21

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GARY A. BARNES, PE
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IREDELL COUNTY

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DOOR & WINDOW NOTE

ALL WINDOW & DOOR SIZES ARE NOMINAL. BUILDER TO VERIFY ALL EGRESS & NON-EGRESS CONDITIONS. FALL PROTECTION CODE & GLAZING REQUIREMENTS PER CODE w/ WINDOW & DOOR MANUFACTURE SELECTED. ALL DOORS & WINDOWS TO COMPLY w/ ALL OF 2018 NORTH CAROLINA RESIDENTIAL CODES.

SECOND FLOOR NOTES

- 9' CEILING HEIGHT TYP. UNLESS NOTED OTHERWISE
- 8'-0" DOOR AND WINDOW HEIGHT TYP. UNLESS NOTED OTHERWISE. SEE ELEVATION FOR WINDOW HEIGHTS
- PROVIDE ATTIC ACCESS TO ALL ATTIC SPACES ACCORDING TO CODE.
- SEE SECOND FLOOR CEILING PLAN FOR ALL SECOND CLG. BEAM + SECOND FLOOR HEADER SIZES.
- ALL DOORS WITH GLASS SHOULD BE TEMPERED + WINDOWS SHOULD BE TEMPERED PER STATE CODE
- [illegible] FOR FIREPLACE SHOULD BE [illegible]

SECOND FLOOR PLAN
SCALE: 1/4" = 1'-0"

DRAWN BY:
JJ.BARJA
DATE:
04.16.2021
REVISED:

SHEET 6
OF 14

Acknowledgement of
Plans Submittal ONLY!
Date 7/28/21
Date 7/29/21

CALL PAUL PENNINGER FOR SITE VISIT 704.996.6330 RECEIVED MAR 2 3 2020 AP-305636 $500.00

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

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: BI PART DEV LLC Address: 18611 STARCREEK DR CORNELIUS, NC Zip: 28031

Applicant Email: jpalillo@aol.com Phone: 704-895-0606 Alt. Phone: _____

Owner Name: same as above Address: _____ Zip: _____

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

Property Information:

Street Address: 113 SAYLORS WATCH LANE

Subdivision Name: SAYLOR'S WATCH Section/Phase: _____ Lot Number: 4

Driving Directions: BRAWLEY SCHOOL ROAD, TL TORRENCE CHAPEL, SAYLORS WATCH LANE AT END.

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

( ) 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: 5
Maximum Number of Occupants: 10
(X) 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 (X) Community Well ( ) 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 ( ) Other: _____

done on Sept 17

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: _____ 3.22.20
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

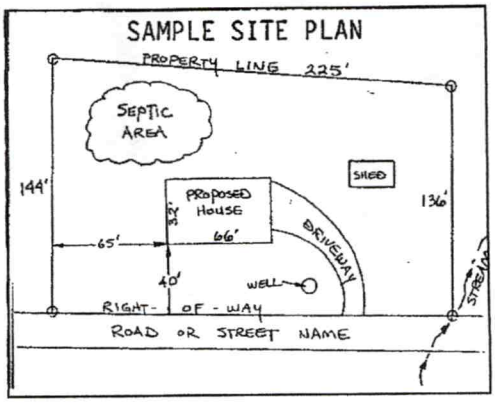
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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
- ( ) Preferred well location NA
- (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: _____ 3.22.20

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

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

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*) JACOB Pahl AS owner of BI-PART Development LLC

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, BI PART DEV LLC, am the legal owner(s) of the property located at Saylor's Watch Subdivision Lots 1-11, identified as

PIN (Parcel Identification Number) 4624576180.000, 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.

_____ 3.2.20
Signature of Owner(s) 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

ENVIRONMENTAL HEALTH REQUIREMENTS for SEPTIC and WELL PERMITS

The following items must be completed *PRIOR* to the *SUBMITTAL* of any Environmental Health Application. Incomplete applications will be returned to the applicant and cannot be processed or placed on the work list.

*** Initial all lines below to indicate you have submitted each form and completed every site requirement ****

___ **Complete all Environmental Health forms**:
- ___ Application
- ___ Site Plan with dimensions of proposed structure, addition, pool etc.
- ___ Documentation to Authorize Owner Agent (if the property owner is not the applicant)
- ___ Copy of Zoning Permit when applicable
- ___ Sign this sheet after you have completed all items

___ **Lot must be cleared of heavy undergrowth.** In order to evaluate the lot, the footprint of the proposed structure must be visible. Adequate area for the septic drain field and repair area must be sufficiently cleared of heavy undergrowth, with **50 feet of visibility** in all directions. Inspectors must be able to evaluate the property, shoot laser level elevations, layout the drain field, do soils work, etc. **If the lot is not cleared sufficiently, then a $100 site revisit fee will be charged and the evaluation will be put on HOLD until the requirement is met.**

___ **Clearly mark all property corners by locating existing iron or concrete markers**. Flag all property lines every 25 feet if adjacent corners are not visible when standing on any given corner. Property lines must be flagged by a licensed NC surveyor & easily identified **prior to application submittal** (exception may apply for septic repair evaluations only).
'Mow lines' and/or fence lines do NOT constitute marked lines. **If the property lines are not properly marked when the lot is ready to be evaluated, then the application will be put on HOLD and a $100 site re-visit fee charged**.

___ **Stake or flag the footprint of the proposed structure, addition, pool etc. to match the site plan submitted.** The proposed structure, etc. **must be staked** out on the property as per the site plan.

___ If an **Authorization to Construct (AC) is desired**, submit a recorded copy of the plat for newly created or subdivided lot(s) and a LEGIBLE copy of the basic floor plan no larger than 8 ½" x 14" for each floor of the structure including decks, porches, etc. **The overall dimensions must be clearly noted & the rooms labeled.**

Any site not meeting the above requirements when staff arrives for the evaluation will result in a $100 site revisit fee being charged and the request being placed on HOLD. This will delay the processing of the application.
Once work by Environmental Health staff begins, the up-front fees paid toward securing any health department permit are non-refundable. Refunds for work not started, due to a customer changing their mind or plans, are subject to an administrative fee of $50 to defray a portion of the costs of processing the refund.

Backhoe pits are required for all applications that require a soils evaluation.
DO NOT DIG PITS UNTIL THE EH SPECIALIST HAS AUTHORIZED AND SCHEDULED YOUR EVALUATION TIME.
- **All utilities shall be marked before pits are dug. Call NC 811 for this service.**
- **The applicant/agent is responsible for securing these services**
- **Backhoe pits are to be dug at the locations and depths determined by the Environmental Health Specialist or a NC Licensed Soil Scientist. A minimum of four pits must be dug.**
- **The EH specialist will contact you when your application is ready to be processed for pit scheduling.**
- **Your backhoe operator must be on site during the EH Specialist's evaluation to prevent your operator from having to return to the property for additional work**.

By signing below I am acknowledging the above specifications have been met and the site is READY to be evaluated AND I understand the backhoe pit requirement and will secure those services (if applicable).

Signature _____ **Date** 3.22.20

Questions? Contact the Environmental Health Offices below:

Statesville Office
349 North Center Street (2nd Floor Building Standards)
Statesville, NC 28677-4063
Phone: (704)878-5305 ext. 3456

Mooresville Office
610 East Center Avenue (2nd Floor Govt. Center South)
Mooresville, NC 28115-2548
Phone: (704)660-3625