IREDELL COUNTY HEALTH DEPARTMENT

KW Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 234824

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

PIN # 4624895972

APPLICANT/OWNER: E.S. Johnson APPLICANT ADDRESS: P.O. Box 1402 Cornelius, NC 28031

SITE ADDRESS: 238 Yacht Rd Mooresville, NC 28117 PHONE: 704 987-7950 ALT. PHONE 704 819-2193

SITE DIRECTIONS: Brawley School Rd TL Yacht Rd on right @ Sterling Oak

SUBDIVISION: Yacht Shores SECTION: -1- LOT # 3 LOT AREA: .55 Acre SAP CONTROLLED: ☐ YES ☒ NO

DESIGN FLOW: 480gpd L.T.A.R.: .3

Septic Tank	1000 (gal)	STB	794	Date	12-4-18	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI
Pump Tank	(gal)	PT		Date		System Description:	Gravity - 25% Reduction		
Pump Make		Model		Serial #		Repair System Description:	JPPBPS		
# Nitrification Fields	1	# Lines	5	Linear Ft	400'	Maintenance Agreement Required:	☐ YES	☒ NO	
Trench Width	36"	Trench Bottom Depth(Low side)	36"	Gravel Depth	N/A	☒ GRAVITY	☐ PRESSURE		

☒ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing

No. Bedrooms 4 No. Persons 8 No. Employees ___ ☒ Crawl Space

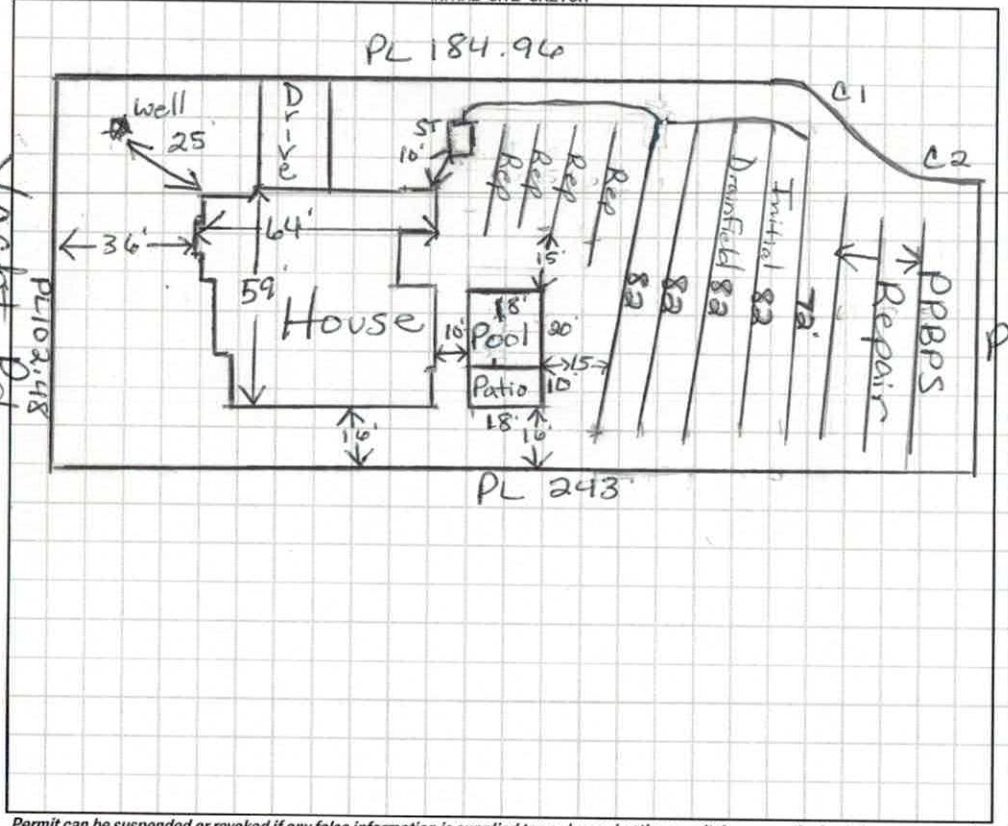
Water Supply: ☒ Private ☐ Public ☐ Community

☐ Basement w/o plumbing

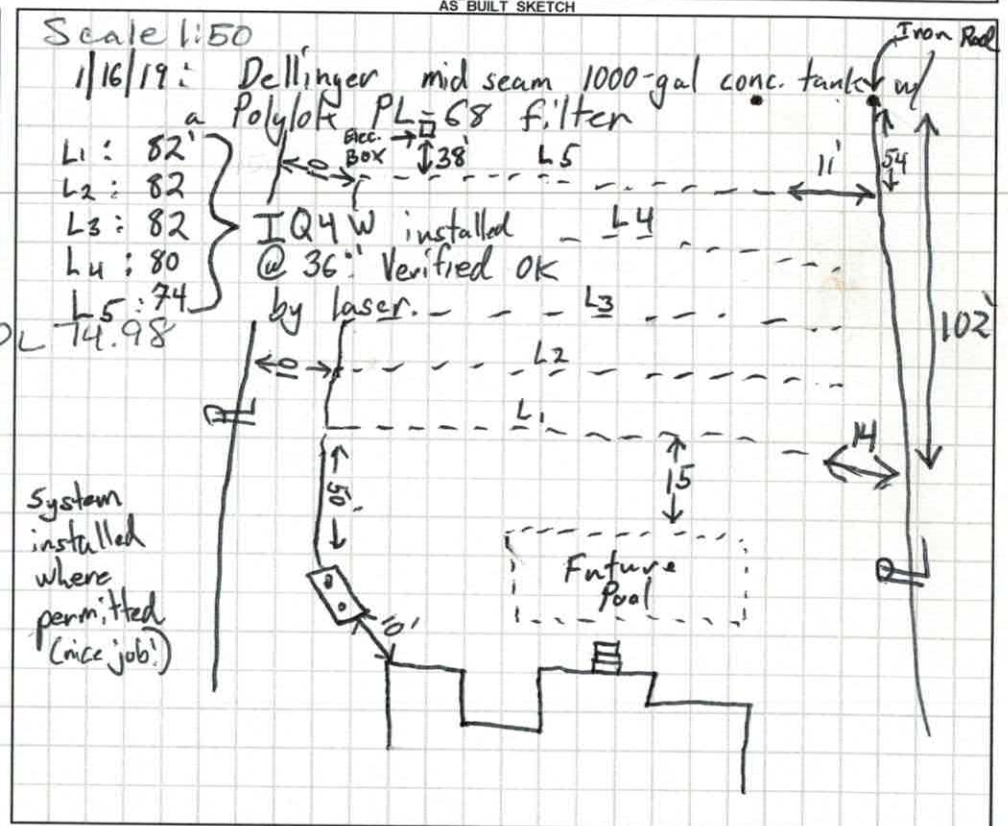
Comments / Conditions: Divert Storm/Surface water away from Septic area.

*Must keep pool a minimum of 15ft from Septic. (including Repair area)

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. **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: 1/14/19 Installed by: B.W. Christenbury

IMPROVEMENT PERMIT by: Maria Dolgen Date: 1/14/19 OPERATION PERMIT by: Tom Shuck Date: 1/16/19

AUTHORIZATION TO CONSTRUCT by: Maria Dolgen Date: 1/14/19 Existing System Inspected by: ___ Date: ___

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

DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

PROPERTY ID #: 4624895
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: ES Johnson
ADDRESS: P.O Box 1402 Cornelius, NC
PROPOSED FACILITY: House
LOCATION OF SITE: 238 Yacht Rd Yacht Shores #3
APPLICATION DATE
DATE EVALUATED: 5/3/18
PROPOSED DESIGN FLOW (.1949): 480 gpd
PROPERTY SIZE: .55Ac
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	4%	0-5	Brw SCL	SS, SP, SExp, FR					PS
		5-22	RC, m-w SBK	SS, SP, SExp, FR					.3
		22-50	RCL, m-w SBK	SS, SP, SExp, FR					
			Wy Some SAP Inclus						
2	5-6%	0-5	Brw SCL	SS, SP, SExp, FR					PS
		5-25	RC, m-w SBK	SS, SP, SExp, FR					.3
		25-52	R to VFR CL, w SBK	SS, SP, SExp, FR					
			Wy Few to many	SAP Inclus					
3	6%	0-5	Brw SCL	SS, SP, SExp, FR					PS
		5-24	RC m-w SBK	SS, SP, SExp, FR					.3
		24-49	R to VFR CL w SBK	SS, SP, SExp, FR					
			Wy Few to many	SAP Inclus					
4	5%	0-5	Brw SCL	SS, SP, SExp, FR					PS
		5-23	RC m-f w SBK	SS, SP, SExp, FR					.3
		23-50	R/UR CL w SBK	SS, SP, SExp, FR					
			Wy Some	SAP Inclus					

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

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: Maria Dotson
OTHER(S) PRESENT: Thompson Grading

COMMENTS:

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope) CV (Convex Slope) D (Drainage Way) DS (Debris Slump) FP (Flood Plain) FS (Foot Slope) H (Head Slope) L (Linear Slope) N (Nose Slope) R (Ridge) S (Shoulder Slope) T (Terrace)	I	S (Sand) LS (Loamy Sand)	1.2 - 0.8	0.6 - 0.4	NEXP (Non-expansive) SEXP (Slightly Expansive) EXP (Expansive)	G (Single Grain) M (Massive) CR (Crumb) GR (Granular) SBK (Subangular Blocky) ABK (Angular Blocky) PL (Platy) PR (Prismatic)
	II	SL (Sandy Loam) L (Loam)	0.8 - 0.6	0.4 - 0.3		
	III	Si (Silt) SiCL (Silty Clay Loam) CL (Clay Loam) SCL (Sandy Clay Loam) SiL (Silt Loam)	0.6 - 0.3	0.3 - 0.15		
	IV	SC (Sandy Clay) SiC (Silty Clay) C (Clay) O (Organic)	0.4 - 0.1	0.2 - 0.05	MOIST VFR (Very Friable) FR (Friable) FI (Firm) VFI (Very Firm v. Very Sticky) EFI (Extremely Firm)	WET NS (Non-sticky) SS (Slightly Sticky) S (Sticky) VS (Very Sticky) NP (Non-plastic) SP (Slightly Plastic) P (Plastic) VP (Very Plastic)
			None	None		

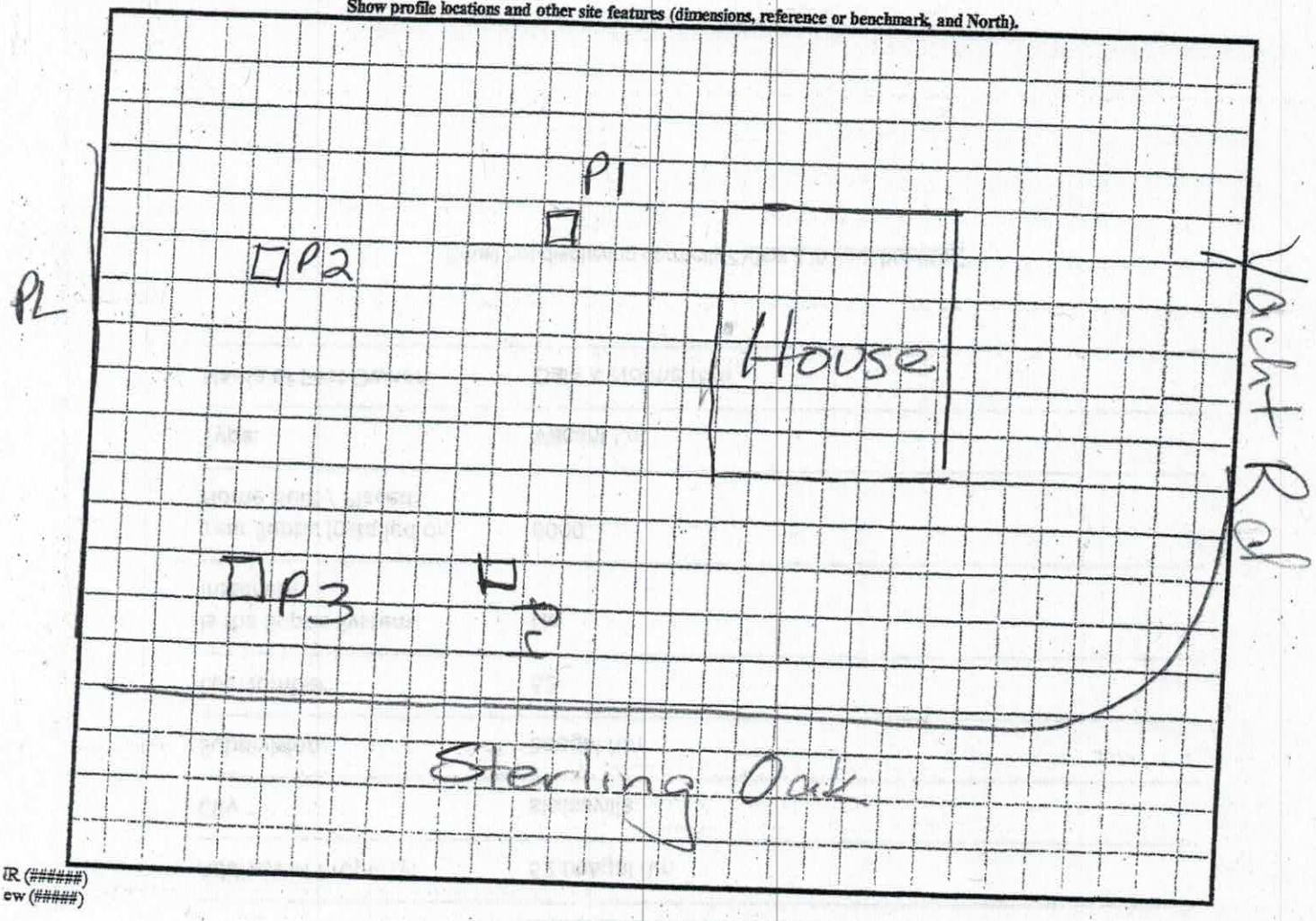
*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

NOTES

HORIZON DEPTH — In inches below natural soil surface
DEPTH OF FILL — In inches from land surface
RESTRICTIVE HORIZON — Thickness and depth from land surface
SAPROLITE — S(suitable) or U(unsuitable)
SOIL WETNESS — Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
CLASSIFICATION — S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.
Long-term Acceptance Rate (LTAR): gal/day/ft²

Show profile locations and other site features (dimensions, reference or benchmark, and North).



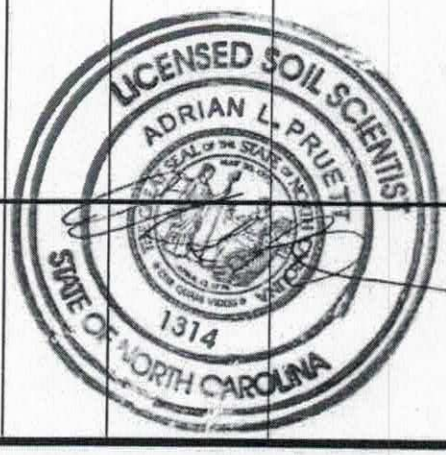
IR (######)
ew (#####)

PROPERTY ID #: 4624895972
COUNTY: Iredell

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

OWNER: Michael Agnello — APPLICATION DATE
ADDRESS: 667 Meisten St., Washington, NJ 07676 — DATE EVALUATED: 4/7/17
PROPOSED FACILITY: Residential — PROPOSED DESIGN FLOW (.1949): — PROPERTY SIZE: 0.55 ac
LOCATION OF SITE: 238 Yacht Rd. Mooresville, Yacht Shores Subdivision, Lot 3 — PROPERTY RECORDED: yes
WATER SUPPLY: X Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: X Auger Boring ☐ Pit ☐ Cut — TYPE OF WASTEWATER: X Sewage ☐ Industrial Process ☐ Mixed

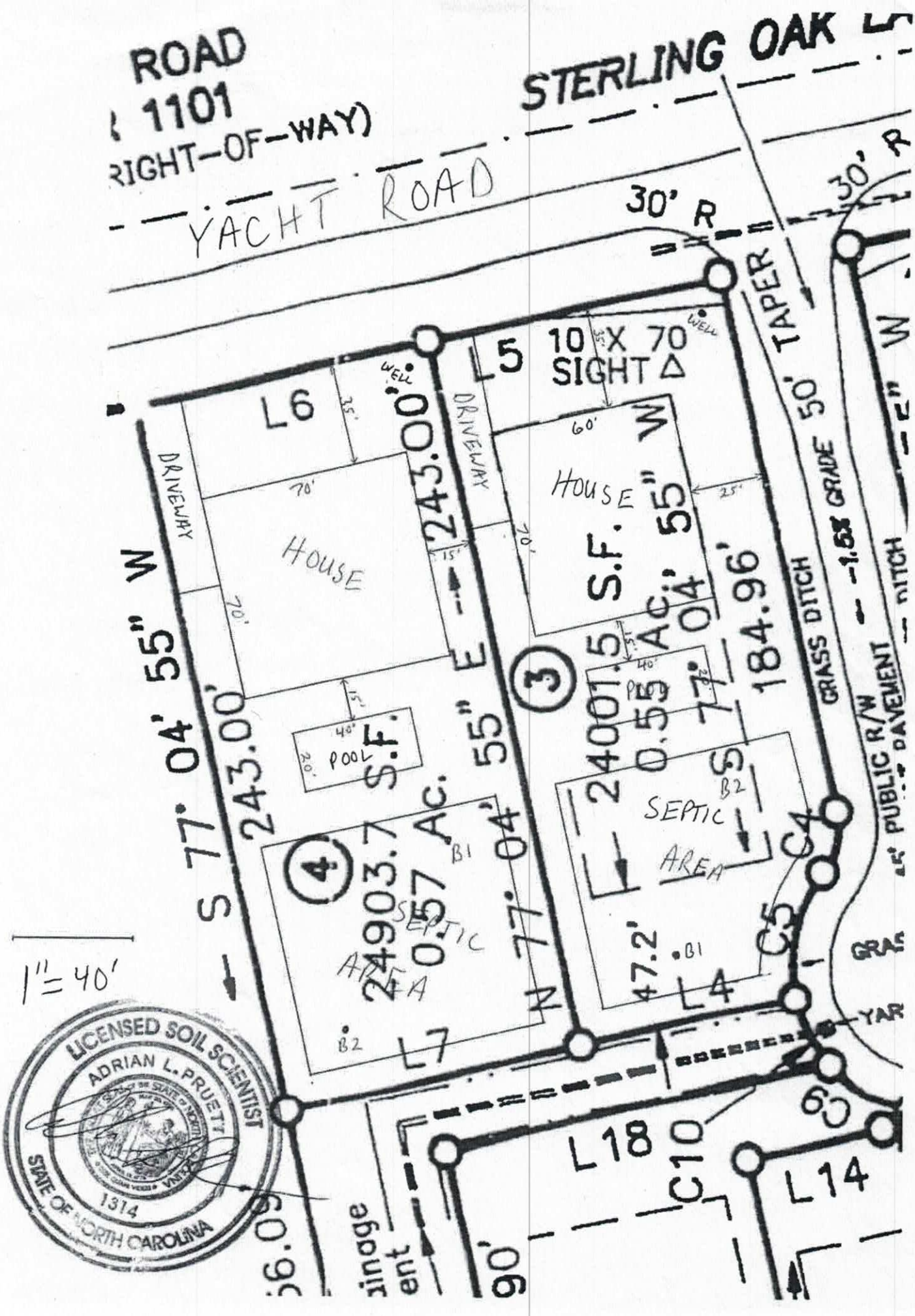
PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
B 1	SMALL HS 6%	0-8	RB SCL GR	FR SS SP SEXP	N/A	48"	N/A	N/A	PS
		8-30	R C MFSBK	FR SS SP SEXP					
		30-42	R C WFSBK	FR SS SP SEXP	-FEW/COM. SAP				
		42-48	YR CL WFSBK	FR SS SP SEXP	-COM SAP				0.3 GPD/SQFT
B 2	LSS 6%	0-4	B SCL GR	FR SS SP SEXP	N/A	48"	N/A	N/A	PS
		4-20	R C WFSBK	FR SS SP SEXP					
		20-34	R C MFSBK	FR SS SP SEXP	-FEW SAP @ TRANS.				
		34-48	YR CL WFSBK	FR SS SP SEXP	-COM SAP				0.3 GPD/SQFT
3									
4									



DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)		
Site LTAR	0.3	0.3

OTHER FACTORS (.1946): NONE
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: ADRIAN L. PRUETT
OTHER(S) PRESENT: NONE

COMMENTS:


ROAD
1101
RIGHT-OF-WAY)
STERLING OAK
YACHT ROAD
30' R
30' R
50' TAPER
-1.5% GRADE
GRASS DITCH
PUBLIC R/W
PAVEMENT
DITCH
L5
10 X 70
SIGHT Δ
WELL
L6
DRIVEWAY
HOUSE
70'
35'
15'
60'
25'
S 77° 04' 55" W
243.00'
N 77° 04' 55" E
243.00'
S 77° 04' 55" W
184.96'
24001.5 S.F.
0.55 AC.
24903.7 S.F.
0.57 AC.
POOL
40'
20'
SEPTIC
AREA
B1
B2
47.2'
L4
L7
L18
L14
C4
C5
C6
C10
90'
1" = 40'
LICENSED SOIL SCIENTIST
ADRIAN L. PRUETT
1314
STATE OF NORTH CAROLINA

Pd. $320.00

234824

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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: ES JOHNSON Address: PO BOX 1402 CORNELIUS NC Zip: 28031

Applicant Email: MARGIE@ESJOHNSON.COM Phone: 704-987-7950 Alt. Phone: 704-819-2193

Owner Name: SCOTT,APRIL ROSS Address: 238 YACHT RD MOORESVILLE NC Zip: 28117

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

Property Information:

Street Address: 238 YACHT RD, MOORESVILLE NC 28117

Subdivision Name: YACHT SHORES Section/Phase: _____ Lot Number: 3

Driving Directions: BRAWLEY SCHOOL TURN LEFT ON YACHT, HOUSE ON RIGHT AT STERLING OAK

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: 4
Maximum Number of Occupants: 8
(✓) Swimming Pool
( ) Other Addition/Structure: PATIO AT POOL

CHECK FOUNDATION TYPE
(✓) 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 ( ) 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: _____

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: Charlie McGarty 10/2/18
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

RECEIVED APR 12 2018

4/11/18 talked to Charlie will call back after lot cleared

EFT # ~~85865~~ 85827

Paid $500 EFT # 234824

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

PAGE 1: *APPLICATION FORM*

Neighbor's well behind Leyland Cypress

Application For: (X) 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 ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: Ed Johnson Address: E.S. Johnson Builders P.O. Box 1402 Cornelius NC Zip: 28031

Applicant Email: ed@esjohnson.com Phone: 704-967-7950 Alt. Phone: 704 819-2193

Owner Name: Michael Angello Address: 667 Meisten St. Washington NJ Zip: 07676

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

Property Information:

Street Address: 738 Yacht Rd. Mooresville NC

Subdivision Name: Yacht Shores Section/Phase: _____ Lot Number: 3

Driving Directions: Brawley School Rd. South

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: _____

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 8
(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: _____

(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: _____
(X) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other: _____

Please answer the following to the best of your ability:

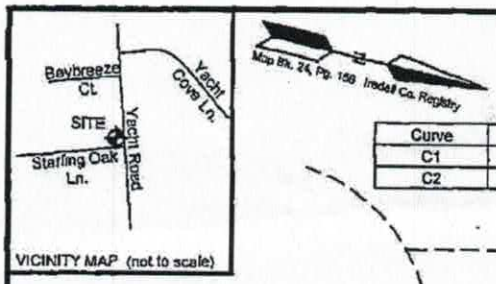
( ) Yes (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (X) No Is the site subject to approval by any other public agency?

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: _____ 1/8/16.
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

Ross 238 Yacht Rd

PLOT PLAN



Curve	Radius	Arc	Chord	Chord Bearing
C1	25.00'	22.13'	21.41'	N 77°34'00" W
C2	50.00'	44.25'	42.82'	N 77°33'51" W

LEGEND
R/W - RIGHT OF WAY
TP - TRANSFORMER PAD
EoP - EDGE OF PAVEMENT
CP - CALCULATED POINT
⊕- ELECTRIC PEDESTAL

1/2" REBAR
N 12°55'05" W 74.98'
1/2" REBAR
TP
NOW OR FORMERLY
Yacht Shores Owners Association, Inc.
Deed Bk. 1506, Pg. 896
COS, Map Bk. 24, Pg. 156
PIN #4624891976
Iredell Co. Registry
C1
CP
CP
47.2' Rear Setback
Lot #3
PIN #4624895972
24000.47 sf
0.551 AC
25' Side Setback
119.68'
N 77°04'55" E 243.00' Total
15' Side Setback
51.69'
NOW OR FORMERLY
The Kevin J. Tarpey Revocable Trust
Deed Bk. 2490, Pg. 788
Lot #4, Map Bk. 25, Pg. 113
PIN #4625805062
Iredell Co. Registry
Sterling Oak Lane
45' Public R/W
S 77°04'55" W 184.96'
Proposed House
16.0'
1/2" REBAR
28.0'
42.10'
35' Front Setback
1/2" REBAR
36.6'
29.53'
SET 1/2" REBAR
10 x 70 Sight Triangle
1/2" REBAR
S 12°55'05" E 102.48'
EoP
Yacht Road
60' Public R/W

NORTH CAROLINA PROFESSIONAL SEAL L-4444 LAND SURVEYOR R. SCOTT DYER

40 20 0 40
BAR GRAPH

NOTES:
* Deed Reference - Deed Bk. 2503, Pg. 1885 Scott R. Ross & W. April E. Dated July 31, 2017 Recorded in Iredell Co. Registry
* Map Reference - Yacht Shores Phase I Dated November 8, 1994 Map Bk. 24, Pg. 156 Recorded in Iredell Co. Registry Performed by Robert J. Wilkins, PLS
* Property subject to recorded and unrecorded right of ways, easements and agreements as may appear.
* All lot lines are subject to a 10' either side & 10' front & rear utility & drainage easement.

I, R. Scott Dyer, certify that this plat was drawn under my supervision from an actual survey made under my supervision (deed description recorded in Book 2503, page 1885, etc.); that the boundaries not surveyed are clearly indicated as drawn from information found in Book n/a, page n/a; that the ratio of precision as calculated exceeds 1:10,000; and that this map meets the requirements for The Standards of Practice for Land Surveying in North Carolina (21 NCAC 56. 1600). Witness my original signature, registration number and seal this 10th day of April, A.D., 2018.

R. Scott Dyer, PLS #4444

NORSTAR LAND SURVEYING N W E S 2002

NorStar Land Surveying, Inc.
552-B Newell Street NW
Concord, NC 28025
Ph 704 721 6651
Fax 704 721 6853
Firm Lic. # C-2294

Scott & April Ross
238 Yacht Road

DRAWN BY: S. Kimrey	NLS NO.: 18049
DATE: March 19, 2018	SCALE: 1" = 40'

Davidson Township Iredell County, NC

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, Scott Ross Dawn Ross, am the legal owner(s) of the property located at 230 Valdosta Dr Mooresville NC, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) E S Johnson Bros, 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.

Scott Ross Dawn Ross 3/14/18 Margie DiBella 3/15/18

Signature of Owner(s) Date 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

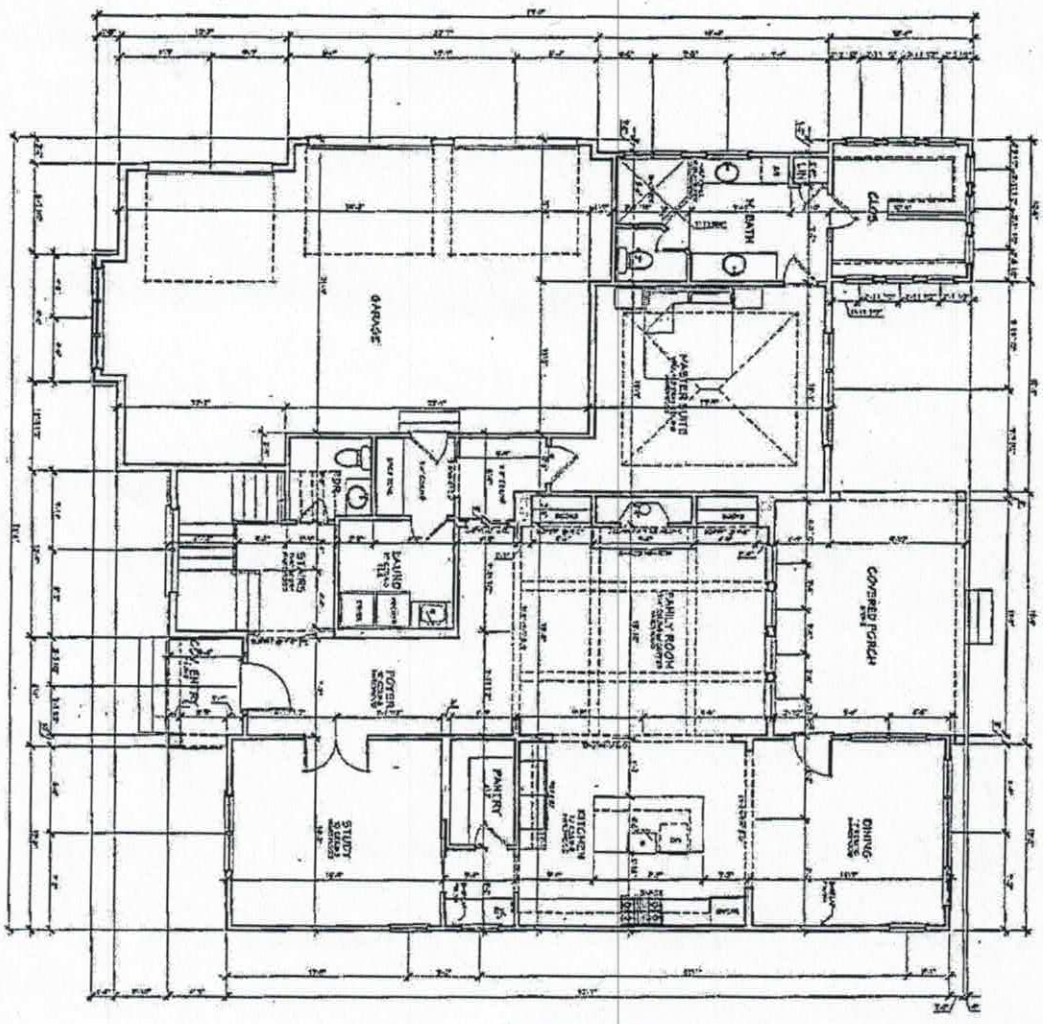
Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

Acknowledgement of
Plans Submittal ONLY!

Date 5/17/18

Date 4/11/18

63'8"



58'6 1/2"

SQUARE FOOTAGE	
HEATED SQ. FOOTAGE	
FIRST LEVEL	3181 SQ. FT.
UPPER LEVEL	1918 SQ. FT.
TOTAL HEATED	5099 SQ. FT.
GARAGE/ENTRY	1240 SQ. FT.
PORCHES	1018 SQ. FT.
COVERED PORCH	344 SQ. FT.
UPPER COVERED PORCH	258 SQ. FT.
TOTAL UNDER ROOF	7959 SQ. FT.

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

SHEET	TITLE
4	

The Ross Residence

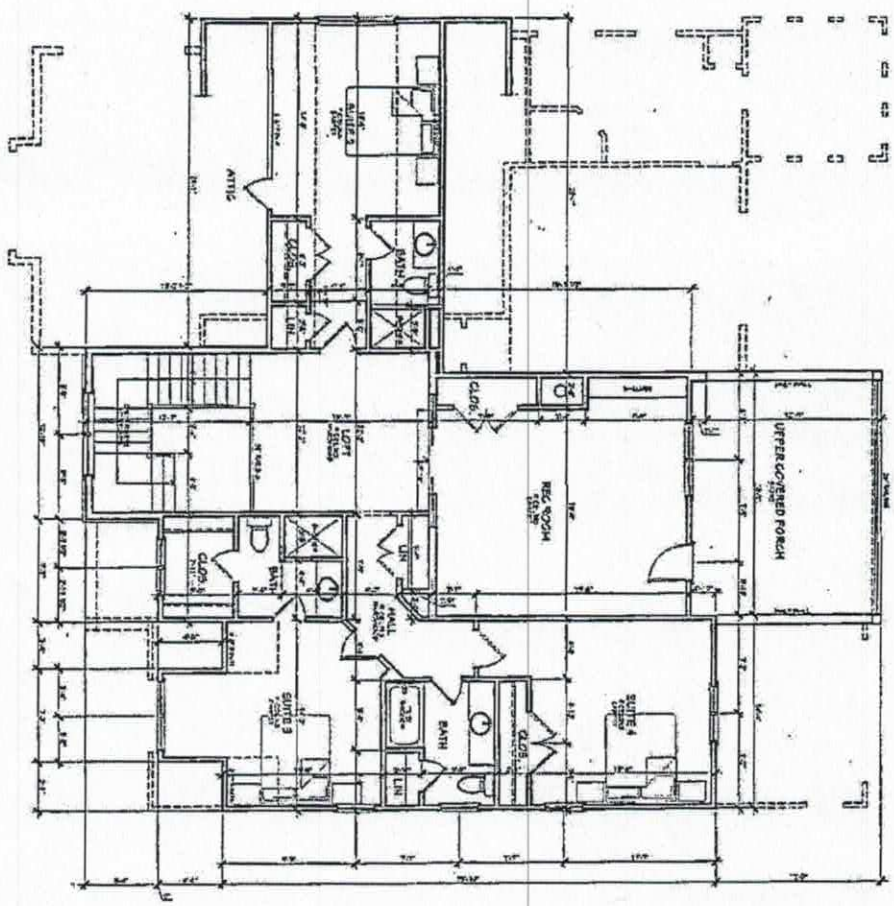
238 Yacht Cove Rd, Mooresville

E.S. Johnson BUILDERS

Acknowledgement of Plans Submittal ONLY!

Maria Dobson Date 5/17/18

Date 7/17/18



UPPER LEVEL FLOOR PLAN

6	SHEET	2018	The Ross Residence 238 Yacht Cove Rd, Mooresville

E.S. Johnson BUILDERS

IREDELL COUNTY

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

APPLICATION NUMBER
234824
Issue Date: 10/05/2018

Permit Type: RELAYOUT APPLICATION

Parcel Number	Street Address	Jurisdiction
4624895972.000	238 YACHT ROAD	IREDELL COUNTY

Owner Information	Applicant Information	Contractor Information
Owner: AGNELLO MICHAEL+DEBORAH	Applicant: ES JOHNSON BUILDERS LL	Contractor: ES JOHNSON BUILDERS LL
Address: 667 MEISTEN ST	Address: PO BOX 1402	Address: PO BOX 1402
WASHINGTON, NJ 7676	CORNELIUS, NC 28031	CORNELIUS, NC 28031
Phone:	Phone: 704-987-7950	Phone: 704-987-7950
		License Type: BLDG License Number: 40199-U

Project Description
NEW SINGLE FAMILY - IREDELL

Scope of Work
SFD

Permit Details:		
ADJUST SEPTIC FOR LARGER POOL & PATIO EFT	IMPROVEMENT PERMIT FEE	Amount: 320.00 Amount: Amount: Amount: Amount: Amount: Amount:

I hereby certify that all information in this application is correct and all work will comply with the state code and all other applicable state and local laws, ordinances and regulations. The respective department will be notified of any changes in the approved plans, a change of contractor, and/or specifications for the project permitted herein. This application becomes a permit only when validated and approved.

Signature of Owner/Contractor

Date: 10/05/2018

ANY PERMIT ISSUED EXPIRES SIX (6) MONTHS AFTER ISSUANCE IF NO INSPECTIONS HAVE BEEN MADE. ANY PERMIT ISSUED SHALL EXPIRE TWELVE (12) MONTHS AFTER LAST INSPECTION IF THE WORK IS DISCONTINUED.

Permit Number	154653	TOTAL FEES:	$ 320.00