BCW

File/Permit #: 2024-49202

IREDELL COUNTY HEALTH DEPARTMENT
JANE HINSON, MS, BSN, RN
HEALTH DIRECTOR

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

EXISTING SYSTEM APPROVAL

Issued by: ☑ Local Health Department ☐ AOWE ☐ Certified Inspector

☑ Existing System Approval
- ☐ Site modification (e.g., storage shed) or footprint addition with no DDF or wastewater strength increase
- ☐ Reconnection when the proposed facility is in the same footprint as existing/previous facility

☐ Construction Authorization/Notice of Intent to Construct

[issued for reconnection when the proposed facility is not in the same footprint as existing/previous facility pursuant to Session Law 2023-77, Section 5.(c)]
[certified inspectors are not authorized to approve reconnections outside of footprint pursuant to Session Law 2023-77, Section 5.(c)]

Applicant: Bonanza Development
Mailing Address: 816-G Brawley School Rd
City: Mooresville
State: NC Zip: 28117
Phone #: (704)662-0105
Email: bdevelopment816@gmail.com

Owner: Kristen Surgeon
Mailing Address: -
City: -
State: - Zip: -
Phone #: (704)235-7136
Email: coordinator.BDC@gmail.com

PIN/Lot Identifier: 4626419700 ✓
Property Location/Address: 125 Lakeland Rd Mooresville, NC 28117 ✓ Holiday Harbor lot 20 ✓
Facility Type: ☑ House/Modular ☐ Mobile/Manufactured Home ☐ Business ☐ Other:

Operation Permit/ATO #: 2024-49202 Design Daily Flow: 360 GPD
Number of Bedrooms: 3 Max # Occupants: 6 Other:
Wastewater Strength: ☑ Domestic ☐ High Strength ☐ Industrial Process Wastewater
Water Supply: ☑ Private well ☐ Public well ☐ Shared well ☐ Municipal Supply ☐ Spring ☐ Other:

Proposed Property Improvement:

All of the following must be checked for approval:

***For Reconnections:**
- ☑ Site complies with its Operation Permit or the wastewater system was in use prior to July 1, 1977
- ☑ No current or past uncorrected malfunction of the system as described in 15A NCAC 18E .1303(a)(2)
- ☑ DDF and wastewater strength for the proposed facility do not exceed that of the existing system
- ☑ Facility meets the setbacks in Section .0600 of 15A NCAC 18E
- ☑ Existing system is being operated and maintained in accordance with Section .1300 of 15A NCAC 18E and permit conditions.

***For Site Modifications or Footprint Expansions:**

Proposed structure meets the setbacks in Section .0600 of 15A NCAC 18E

Approval Conditions: Do not drive, park or construct on septic area. Lot is repair exempt

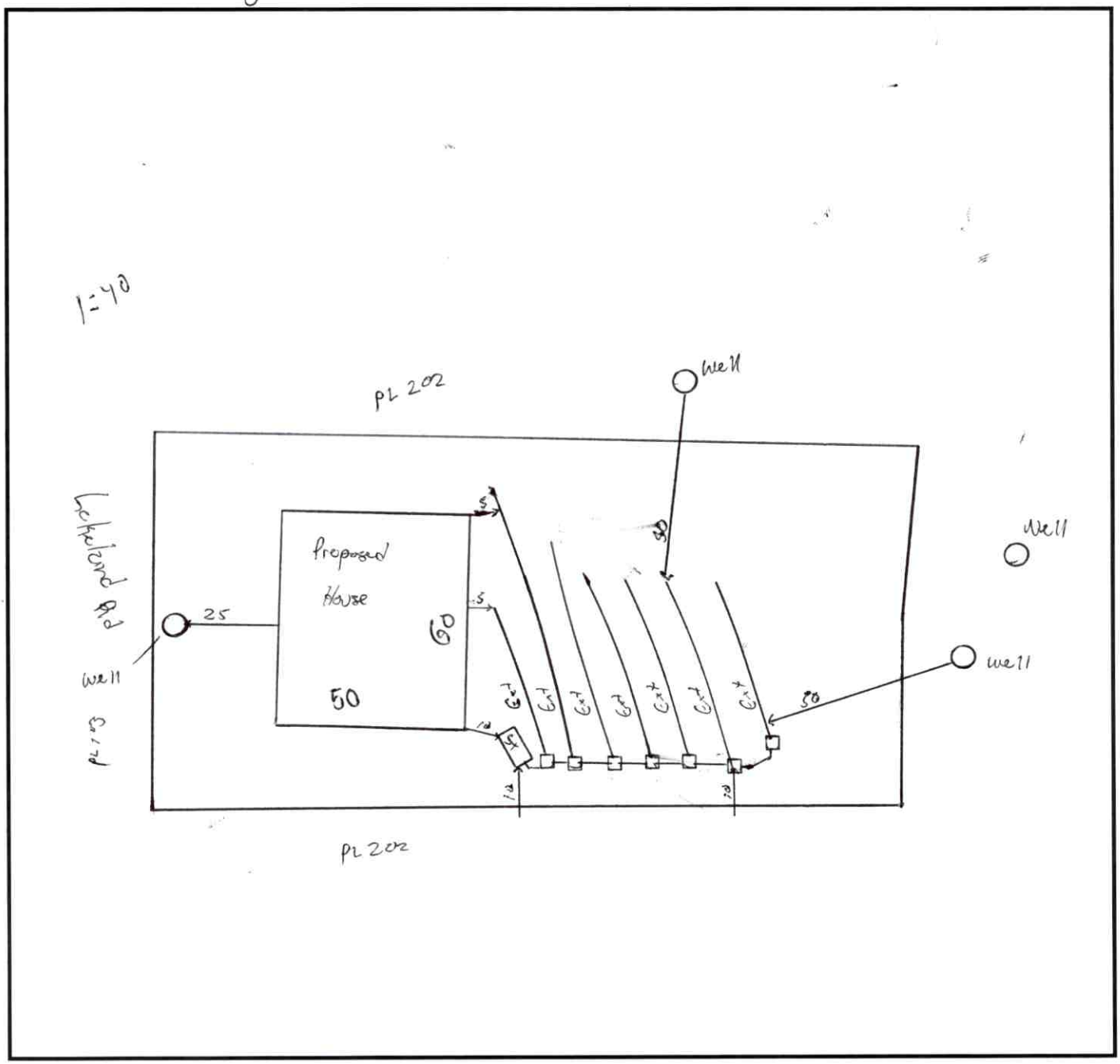
Inspector's Printed Name: Matthew Wilkinson Inspector Certification #: 3061
Inspector's Signature: Matt Wilki Date: 4/18/24

See attached site sketch

EXISTING SYSTEM APPROVAL
SITE SKETCH

Operation Permit/ATO #: 2024-49202 PIN/Lot Identifier: 4626419700

Owner: Kristen Sarcygani Property Location/Address: 125 Lakeland Rd · Mooresville, NC 28117



Include the existing and proposed structures and applicable setbacks.

Central Office
318 Turnersburg Hwy
Statesville, NC 28625
704-878-5300

Mooresville Site
610 E. Center Avenue
Mooresville, NC 28115
704-664-5281

Environmental Health
349 N. Center Street
Statesville, NC 28677
704-878-5305 x3456

www.co.iredell.nc.us/161/Health-Department

DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet ___ of ___
PROPERTY ID #: ___
COUNTY: ___

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Scott Needham
ADDRESS: ___ APPLICATION DATE ___
PROPOSED FACILITY: ___ PROPOSED DESIGN FLOW (.1949): 480 gpd 360 gpd DATE EVALUATED: 10-6
LOCATION OF SITE: Lakeland PROPERTY SIZE: ___
WATER SUPPLY: ☐ Private ☐ Public ☒ Well ☐ Spring ☐ Other ___ PROPERTY RECORDED: ___
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	slope 2%	0-12	1sbk scl		yellow brown mottles	45+			.2-.25
		10-30	1sbk cl						
		30-45+	1abk/sbk cl fr	ss/sp SE					
		soil falling out of pit	C-f yellow clay → brown peds						
2	slight concave 3%	0-10	1sbk scl		yellow brown	36+			.2
		10-22	1sbk cl						
		22-30	1abk/sbk cl fr/fi						
			+C yel/br peds						
		30-36+	C+sap	very difficult digging					
3		0-8	1sbk scl		yellow brown few inc.	36+			.2
		8-20	1sbk cl						
		20-36+	1sbk/abk cl/c fr						
		36	soil won't stay in auger						
4	pit	0-6	1sbk scl		yellow brown mottles				.2
		6-17	1abk/sbk cl fr	ss/sp SE					
		17-48	1abk + sap	fi ss SE					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		no
System Type(s)		
Site LTAR		

COMMENTS: ___

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: J Melville
OTHER(S) PRESENT: ___

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

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

16 Lakeland Rd, Mooresville

PERMIT# ~~13820~~ 245001 PIN# 4626419700

OWNER OR APPLICANT Bonanza Development Co. PHONE: Business 704-662-0105 Home 704-363-9942 DATE 10-27-06

ADDRESS 816 G Brawley School Rd mooresville 28117

LOCATION Brawley School Rd TR Chuckwood TR Seagrove TL Lakeland on left

SUBDIVISION Holiday Harbor BLOCK / SECTION ____ LOT 70 LOT AREA .462 Ac SITE CLASS PS DESIGN FLOW 360gpd L.T.A.R. .2 gpd/ft²

Septic Tank: 1000 Gallons: STB 794 Date 5-13-19

Pump Tank: ____ Gallons: PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 1800 Linear Feet 450

No Lines 7 Trench Width 36" Max Trench Bottom Depth 18"

☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI

System Description: 25% reduction gravity

Repair System Description: max feasible Rule .1945

Maintenance Agreement Required: ☐ Yes ☒ No

Gravel Depth NA ☒ Gravity ☐ Pressure ☒ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement w/o plumbing

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

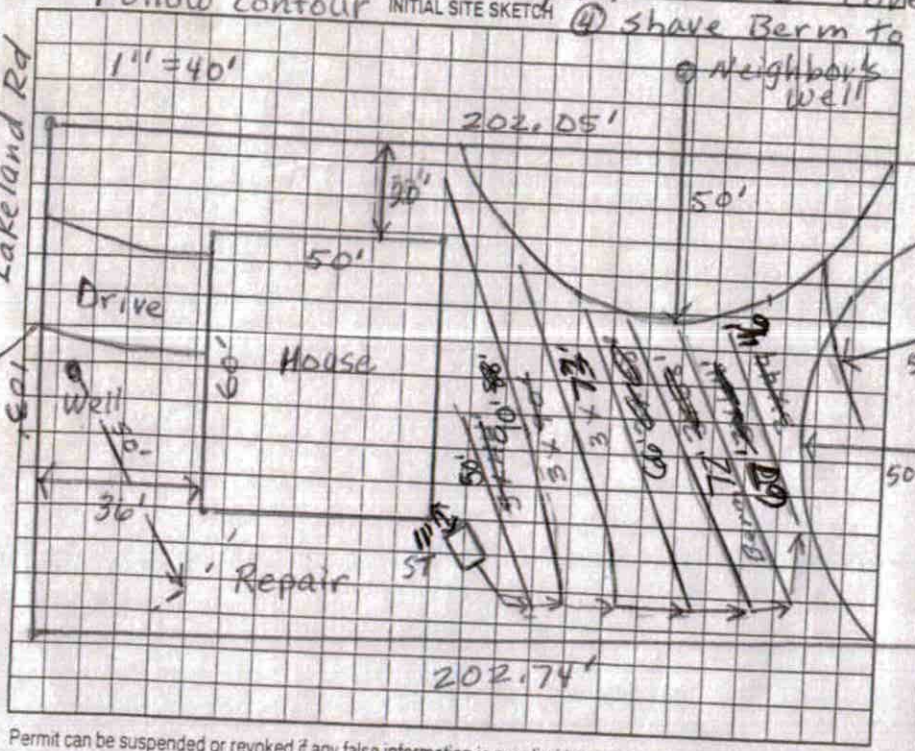
No. Bedrooms 3 No. Persons ____ No. Employees ____

Water Supply: ☒ Individual ☐ Public ☐ Community

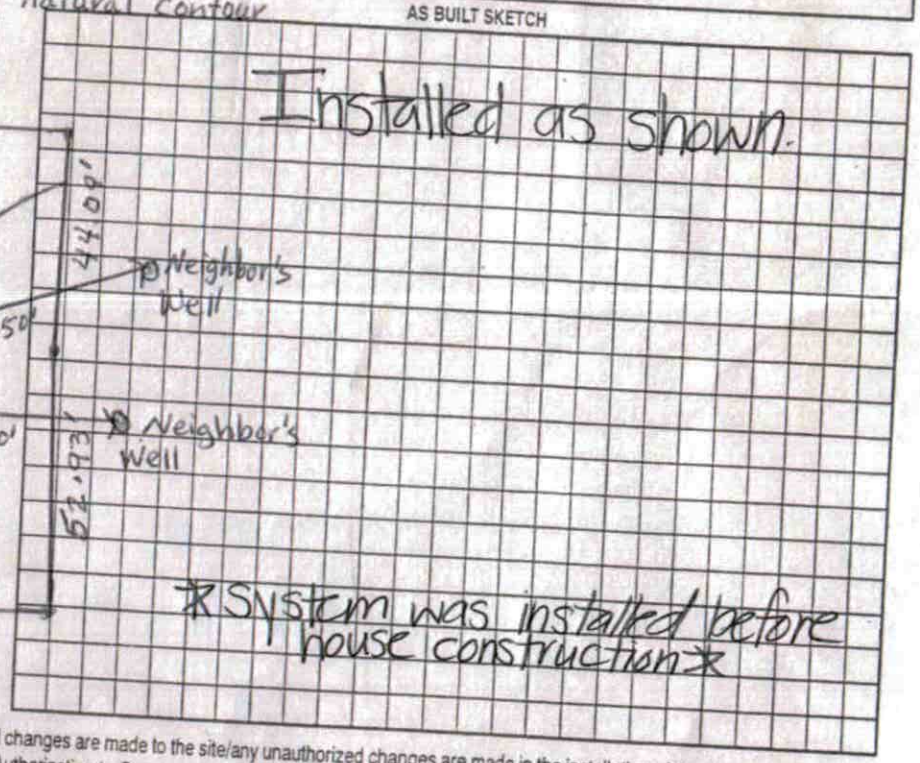
Comments/Conditions:
① Infiltrator with end cap distribution
② min. 5' setback from property line Rule .1951
③ Max 18" trench depth with 6" cover Follow contour
④ shave Berm to natural contour

Comments/Conditions:
*This AC was signed under SL 2017-211. KW
Existing well during site visit was 28' from proposed house box + 50' from left property line.

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 plat 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: Bonanza Development Co. Inc. by Scott R. Needham date 10/30/06

Improvement Permit by: Judy McNeill date 10-27-06

Authorization to Construct by: Judy McNeill date 3-8-07

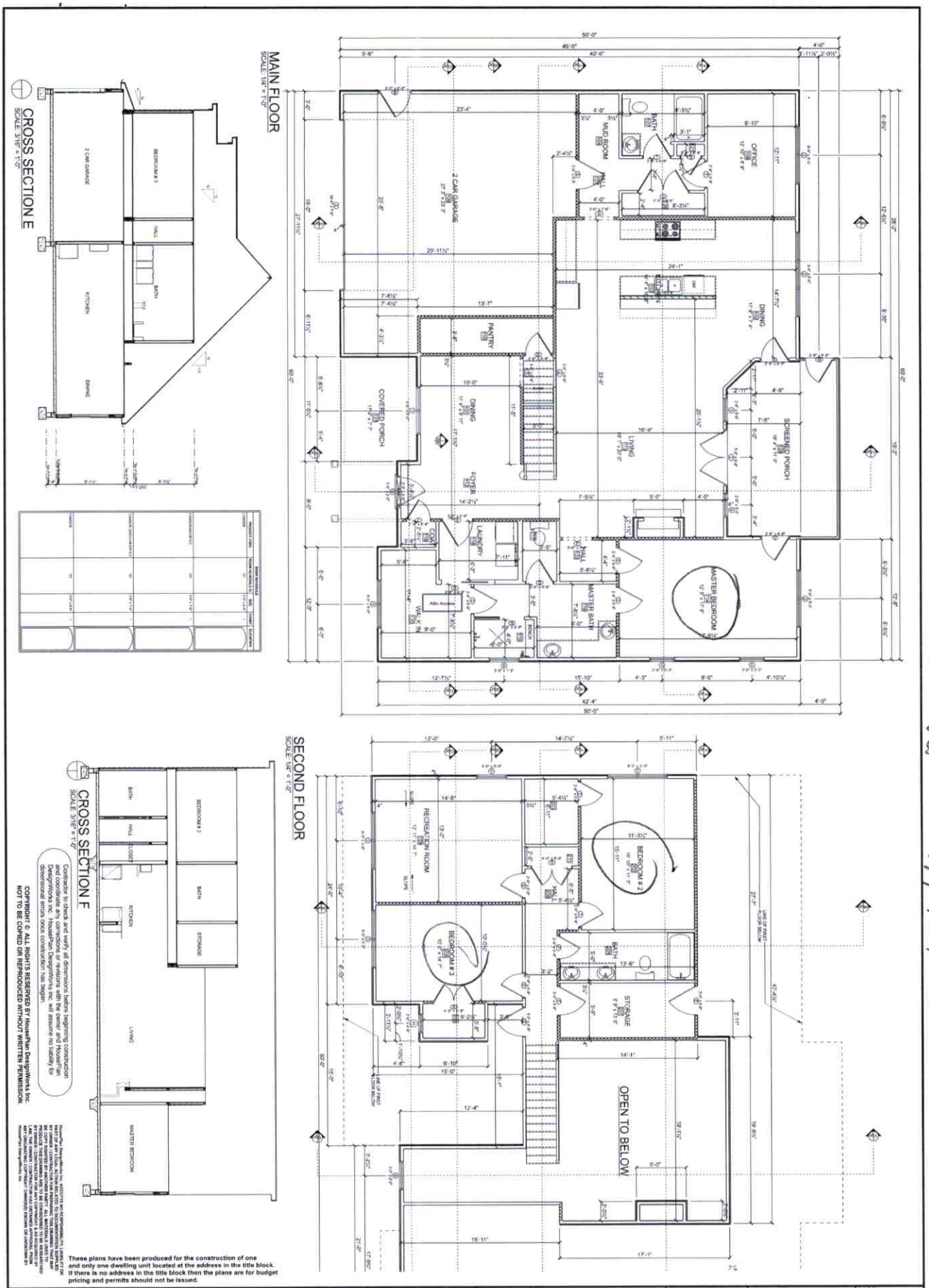
Installed by: R+H

Operation Permit by: Kayla Wilson date 7-16-19

Existing System Inspection by: ____ date ____

Kayla Wilson 5-28-19

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



Contractor to check and verify all dimensions before beginning construction and coordinate any corrections or revisions with the owner and HousePlan DesignWorks Inc. HousePlan DesignWorks Inc. will assume no liability for dimensional errors once construction has begun.

COPYRIGHT © ALL RIGHTS RESERVED BY HousePlan DesignWorks Inc.
NOT TO BE COPIED OR REPRODUCED WITHOUT WRITTEN PERMISSION.

These plans have been produced for the construction of one and only one dwelling unit located at the address in the title block. If there is no address in the title block then the plans are for budget pricing and permits should not be issued.

Bonanza Development
125 Lakeland Rd
Davidson North Carolina
Custom Plan LOT:

ALL FEDERAL, STATE AND LOCAL CODES, ORDINANCES, AND REGULATIONS ETC. ARE CONSIDERED TO BE PART OF SPECIFICATIONS FOR THIS BUILDING AND SHOULD TAKE PREFERENCE OVER ANYTHING SHOWN, DESCRIBED OR IMPLIED WHERE SAME ARE AT VARIANCE.

HousePlan DesignWorks Inc
PO Box 815
Stanley NC 28164
PHONE: 704-650-8270
FAX:
info@houseplandesignworks.com

SCALE: As Noted
DRAWN BY: CMB
DATE: Saturday, December 24, 2022

A 1 1 — SECTION LETTER / PAGE NUMBERS

APPROVED:
CHECKED BY:

PAGE: 3/4
Floor Plan

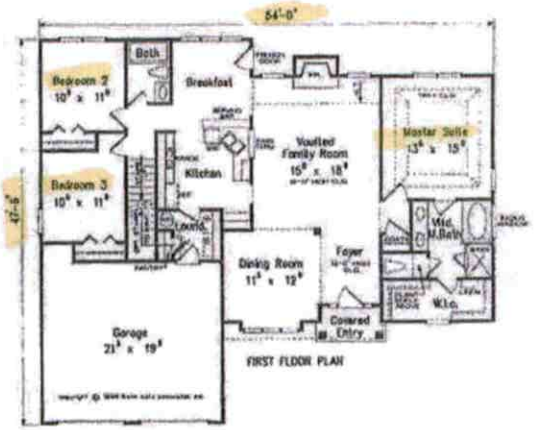
4/18/24

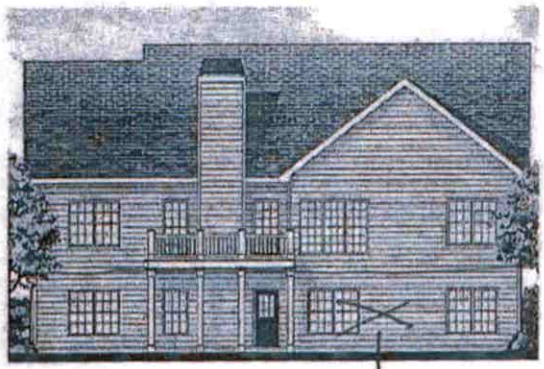
888.717.3003

FRANK BETZ ASSOCIATES

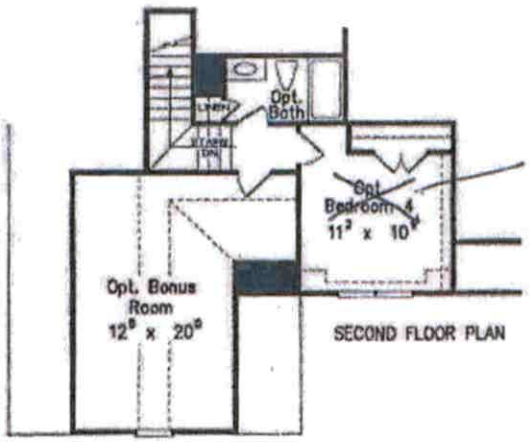
SUMMERBROOKE







No Basement to be built Am 5/22/19



No 4th Bedroom Am 5/22/19

Acknowledgement of Plans Submittal ONLY!

Scott R. Needham Date 5/22/19

Kayla Watson Date 5-28-19

PERMIT SNAPSHOT REPORT OSWP-2024-49202 FOR IREDELL COUNTY

Permit Type	Environmental Health OSWP	**Project:**		**App Date:**	03/15/2024
Work Class:	EH Septic Permit	**District:**	Iredell County	**Exp Date:**	NOT AVAILABLE
Status:	In Progress	**Square Feet:**	0.00	**Completed:**	NOT COMPLETED
Valuation:	$0.00	**Assigned To:**	Wilkinson, Matthew	**Approval Expire Date:**	

Description: THE PROPERTY CORNERS & HOUSE BOX CORNERS ARE NOW MARKED -per KRISTEN 4/3/24. PLEASE CALL 1st FOR EXISTING SYS. INSPECTION. permit to use existing previously installed sepl system that have never been used. Property corner, lines and house box not marked. Will call when they are ready. 3/26/24 BM

Parcel: 4626419700.000 Main	**Address:** 125 Lakeland Rd Mooresville, NC 28117 Main	**Zone:** RR(Resort Residential District)

Property Owner
Kristen Saragoni
Home: (704) 662-0105
Mobile: (704) 235-7138

Applicant/Authorized Agent
Bonanza Development Company, Inc.
Anthony DeSimone
816-G Brawley School Road
Mooresville, NC 28117
Business: (704) 662-0105
Mobile: (704) 309-8630

Permit Custom Fields

How is your site plan being submitted	Survey Plat	Septic Application/Permit Type	Existing System Inspection	Does the site contain any jurisdictional wetlands	No
Non-domestic Sewage Generated	No	Other Public Agency	No	All proposed structure dimensions	50 x 60 house box. Same location and dimensions as septic permit was permitted for
What are the proposed structures	New Single-Family Residence - Stick Built	Type of New Single-Family Residence	Stick Built	Maximum Number of Bedrooms	3
If other Addition/Structure, please explain		Number of Occupants	4	Foundation Type	Concrete Slab Foundation
Residential/Business/Other	Residential	Water Supply	Existing Well	Desired Septic System Type	Conventional (most common)
Front Setback	35	Back Setback	35	Left Setback	15
Right Setback	15	Zoning Permit Issued Date	Mar 25 2024 12:00AM	Zoning Permit Expiration Date	Sep 21 2024 12:00AM
Is the structure or development in the floodplain	No	Is the property in a local historic district?	No	Is the property located downtown?	No
Additional Unique Setbacks Apply	No	Watershed	WSIV CA CATAWBA/LAKE NORMAN		

Attachment File Name	Added On	Added By	Attachment Group	Notes
Signature_Anthony_DeSimone_3/15/2024.jpg	03/15/2024 9:50	Needham, Mark		Uploaded via CSS
lakeland document to authorize an owners legal rep_v1.pdf	03/15/2024 10:10	Needham, Mark	Available Online	
lakeland site plan with septic_v1.pdf	03/18/2024 9:30	Needham, Mark	Available Online	

Inspection Number	Status	Inspection Type	Request Date	Scheduled Start Date	Scheduled End Date	Actual Start Date	Actual End Date
2024-203332	Passed - Permit	OSWP Septic/Well Preliminary Site Visit	04/04/2024			04/04/2024 9:54	04/04/2024 9:54

PERMIT SNAPSHOT REPORT (OSWP-2024-49202)

Inspectors: Holland, Sydney (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-00028342	Iredell Zoning Tech Fee	$2.25	$2.25
	Iredell Zoning Permit Fee	$75.00	$75.00
	Existing System Inspection	$250.00	$250.00
	Total for Invoice INV-00028342	$327.25	$327.25
	Grand Total for Permit	**$327.25**	**$327.25**

Workflow Step / Action Name	Action Type	Start Date	End Date
Application Completeness Check v.1		03/15/2024 10:10	03/15/2024 10:11
Confirm application complete v.1	Generic Action		03/15/2024 10:11
Fees v.1		03/25/2024 7:43	03/25/2024 7:43
Issue Invoice v.1	Generic Action		03/25/2024 7:43
Fees Paid v.1	Generic Action		03/25/2024 7:43
Zoning Review v.1		03/18/2024 16:50	03/25/2024 9:14
~~Floodplain Admin Overview v.1~~	Task		03/18/2024 16:50
Iredell County Zoning Approval v.1	Task	03/18/2024 16:50	03/25/2024 9:14
Issue Invoice v.1	Generic Action		03/18/2024 16:51
Fees Paid v.1	Generic Action		03/25/2024 7:43
Lot Readiness Verification v.1		04/04/2024 9:54	
OSWP Septic Preliminary Site Visit v.1	Inspection	04/04/2024 9:54	04/04/2024 9:54
OSWP Site Evaluation v.1	Inspection		
Issue Improvement Permit v.1			
Issue Invoice v.1	Generic Action		
Fees Paid v.1	Generic Action		
Issue Permit v.1	Generic Action		
Permit Completion Process v.1			
Authorization to Construct Permit v.1	Create Sub Permit		
Issue Authorization to Construct v.1	Generic Action		

#245001

* Request re-activation of expired permit for authorization to construct, no changes to design of system or site. Please contact Scott Needham

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH 704-363-994

APPLICATION FORM

Application For:
( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) Septic Improvement Permit (X) 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:
Place an (X) beside whichever is submitted if applicable
(X) Survey Plat, scaled no more than 1 inch = 60 feet
(X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: Bonanza Development Co. Inc. Address: 816-G Brawley School Road Mooresville NC 28117 Zip: 28117
Applicant Email: bdc@infionline.net Phone: 704-363-9942 Alt. Phone: 704-662-0105
Owner Name: Needham Poplar LLC Address: 816-G Brawley School Road Mooresville NC 28117 Zip: 28117
Owner Email: bdc@infionline.net Phone: 704-363-9942 Alt. Phone: 704-662-0105

Property Information:

Street Address: 125 Lakeland Road, Mooresville NC 28117
Subdivision Name: Holiday Harbor Section/Phase: _____ Lot Number: 70
Driving Directions: Brawley School Road, TR Chuckwood Rd., TR Seagrove, TL Lakeland Road on left

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: 3
Maximum Number of Occupants: _____
( ) 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
(X) 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 (X) 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 (X) Other: 25% reduction in gravity

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: Scott R. Needham
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)
5/22/19
DATE

IREDELL COUNTY HEALTH DEPARTMENT

Application For Improvement Permit and/or Authorization To Construct, Existing System Inspection

(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)

1. **APPLICATION FOR:** X **Improvement Permit** X **Authorization To Construct** ___ **BOTH** ___ **Existing System Inspection** Skm 3/8/07

2. **Page 2: *Site Plan Worksheet* Form MUST Accompany This Application**
   The following optional attachments may also be submitted: *Place check ( ) beside whichever is submitted if applicable*
   X **Survey Plat, Scaled no more than 1 Inch = 60 Feet**
   X **Custom Site Plan, Scaled no more than 1 Inch = 60 Feet**

3. **Applicant Information:**

Bonanza Development Co.	816-G Brawley School Rd. Mooresville, NC 28117	704-662-0105	704-363-9942 (Scott)
Applicant Name	**Mailing Address**	**Office ~~Home~~ Phone**	**Cell ~~Work~~ Phone**
Bonanza Development Co.	816-G Brawley School Rd. Mooresville NC 28117	704-662-0105	704-363-9942 (Scott)
Owner Name	**Mailing Address**	**Office ~~Home~~ Phone**	**Cell ~~Work~~ Phone**

4. **Property Information:**

Lake Land Rd, Mooresville, NC 28117	Holiday Harbor	Lot 70
Street Address	**Subdivision Name**	**Section/Phase and Lot Number**

Driving Directions: West on Brawley School Rd, Turn right on ~~Mckee~~ Church wood, Turn right on Seagrove, Turn Left on Lakeland, lot is on left at sharp curve and gravel drive on left

****

5. **RESIDENTIAL Site Development Information:** *(Check or Complete ALL that apply)*

(X) **New, Single Family Residence**
( ) **New, Multi-Family Residence**
( ) **Expansion of Existing Septic System**
( ) **Repair To Failing Septic System**

Maximum Number of Bedrooms 4
Maximum Number of Occupants ___
If Expansion, Current Number of Bedrooms ___

( ) **Crawl Space Foundation?**
(X) **Concrete Slab Foundation?**
( ) **Basement w/Plumbing?**
( ) **Basement w/out Plumbing?**

IF Non- Residential Site Development:
Type of Business ___
Square Footage of Building ___
Maximum Number of Employees ___
Maximum Number of Seats ___

****

6. **Proposed Water Supply:**

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

****

7. **Desired Septic System Type:** *(You may rank in order of preference, if any)*

( ) **Alternative** (X) **Conventional** ( ) **Innovative** ( ) **Modified Conventional** ( ) **Other** ___ ( ) **No Preference**

****

8. **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. industry) 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.

9. **Signature:** Bonanza Development Co. Inc. by Scott L. Needham
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

10/2/06
DATE

R. S. Hollifield land surveying / subdivision planning P. o. box 1036 Troutmer
phone (704) 871-1175 ~ fax (704) 871-2777 ~ email: hollironeyv:
file: holbrb70

SCALE: 1" = 40'

Lot 80 | Lot 81 | Lot 71

S69°04'58"E 202.09'

S72°04'51"E 52.93'

44.09'

EX ⅝" REBAR

EX ⅝" REBAR BY EX TALL PIPE

15'

well

50' well radius

15'

well

50' well radius

5'

CHAIN LINK FENCE

N18°09'39"E

PL-890 464 AC.

Lot 70

72'

90'

44' 45'

15' BLDG LINE

N19°50'22"E 202.05'

20'

55' 50'

3BR

60'

35' BLDG LINE

202.74'

Drive 50'

WELL

8'

38'

EX ⅝" REBAR AT 202.37'

EX ⅝" REBAR AT 202.52'

S68°34'14"E 102.31' (TIE LINE)

S66°51'46"E 61.53' (TIE LINE)

EX ½" REBAR BY PINE

WOOD FENCE ENCROACHES UPON LOT 70 FROM LOT 69

Lot 69

44
65 64
70 68
70 68
72
95 90 90
45 44
461

PB 7-29

N

Infiltrator w/ end cap distribution

SITE

CHUCKWOOD RD

SEAGROVE LN

HARBOR PINE RD

LAKELAND RD

LAKELAND RD. 60' PUBLIC R/W

HARBOR PINE RD. 50' PUBLIC R/W

GRAVEL

ASPHALT

CURVE TABLE

	DELTA	ARC	RADIUS	BEARING	DISTANCE
C1	1°46'42"	102.93'	3315.76'	N70°21'13"W	102.92'

HOLIDAY HARBOR LOT 70 125 LAKELAND R

10/19/06

10/19/06

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, Needham Poplar, LLC, am the legal owner(s) of the property located at 125 Lakeland Road, Mooresville, NC 28117, identified as

PIN (Parcel Identification Number) 4626419700, located in Iredell County, North Carolina.
I do hereby authorize (**print legal representative/company name**) Bonanza Development Co, Inc. _____, 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.

Needham Poplar, LLC by
Scott R. Needham, manager
Signature of Owner(s)

5/22/19
Date

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