IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 212156

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

PIN # 4626516630

APPLICANT: Lance Skeim APPLICANT ADDRESS: 504 Southmead Dr. Clayton, NC 27527

SITE ADDRESS: 122 Seagrove Ln Mooresville NC PHONE: 704 657-7123 ALT. PHONE:

SITE DIRECTIONS: Brawley School Rd TR Chuckwood TR Seagrove Site on right

SUBDIVISION: Holiday Harbor SECTION: - LOT # 5 LOT AREA: .46 Acre DESIGN FLOW: 360gpd L.T.A.R.: .275

Septic Tank 1000 (gal) STB 821 Date 10-20-17

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines 6 Linear Ft: 328'

Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: Gravity - 25% Reduction

Repair System Description: Repair Exempt

Maintenance Agreement Required: ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

☐ Residence No. Bedrooms

☐ Business No. Persons

☐ Other No. Employees

☐ Slab ☐ Crawl Space

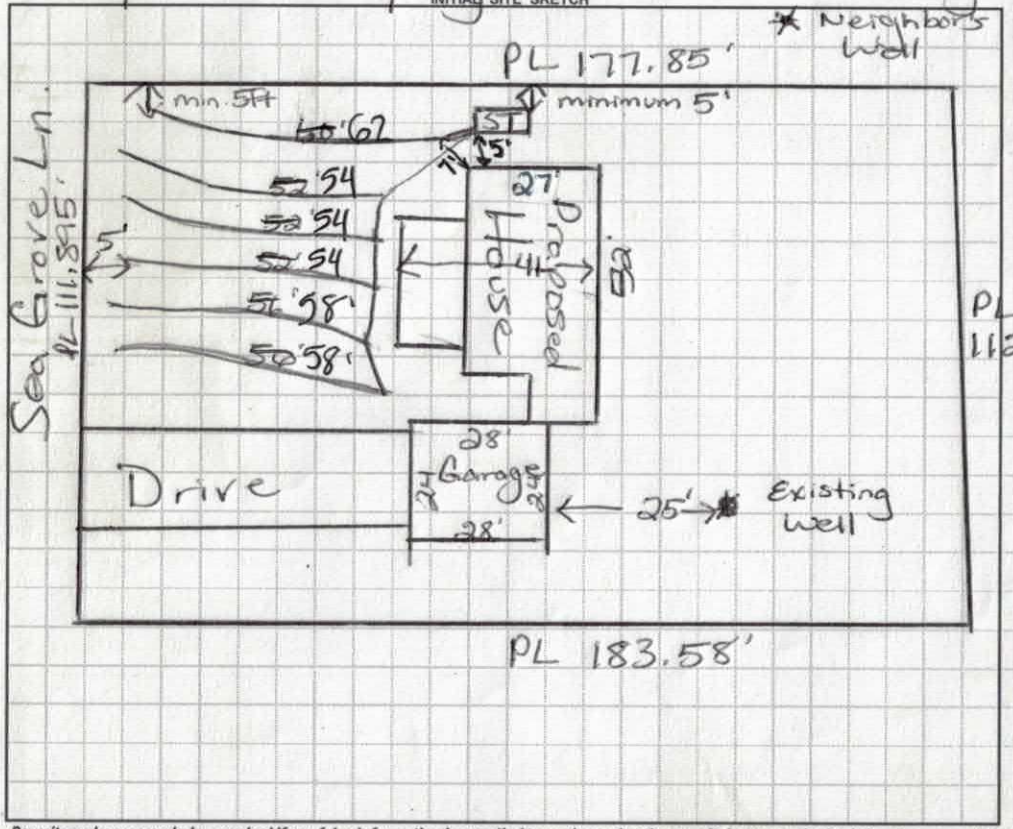
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☐ Community

Comments / Conditions: Do Serial distribution, okay to connect drainlines mid Section. Install at a minimum of 30" TB. Fill depression to keep any surface water from standing in area.

Lot recorded in 1963, minimum setback from property lines is 5ft

INITIAL SITE SKETCH



AS BUILT SKETCH

Scale 1:40'

Installed as shown

Permit can be suspended or revoked if any false information is supplied toward securing the permit / any unauthorized changes are made to the site / any unauthorized changes are made in the installation of the system. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☐ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Date: 5-3-17 Installed by: Dennis Willis Septic Service

IMPROVEMENT PERMIT by: Date: 4/26/17 OPERATION PERMIT by: Date: 12-6-17

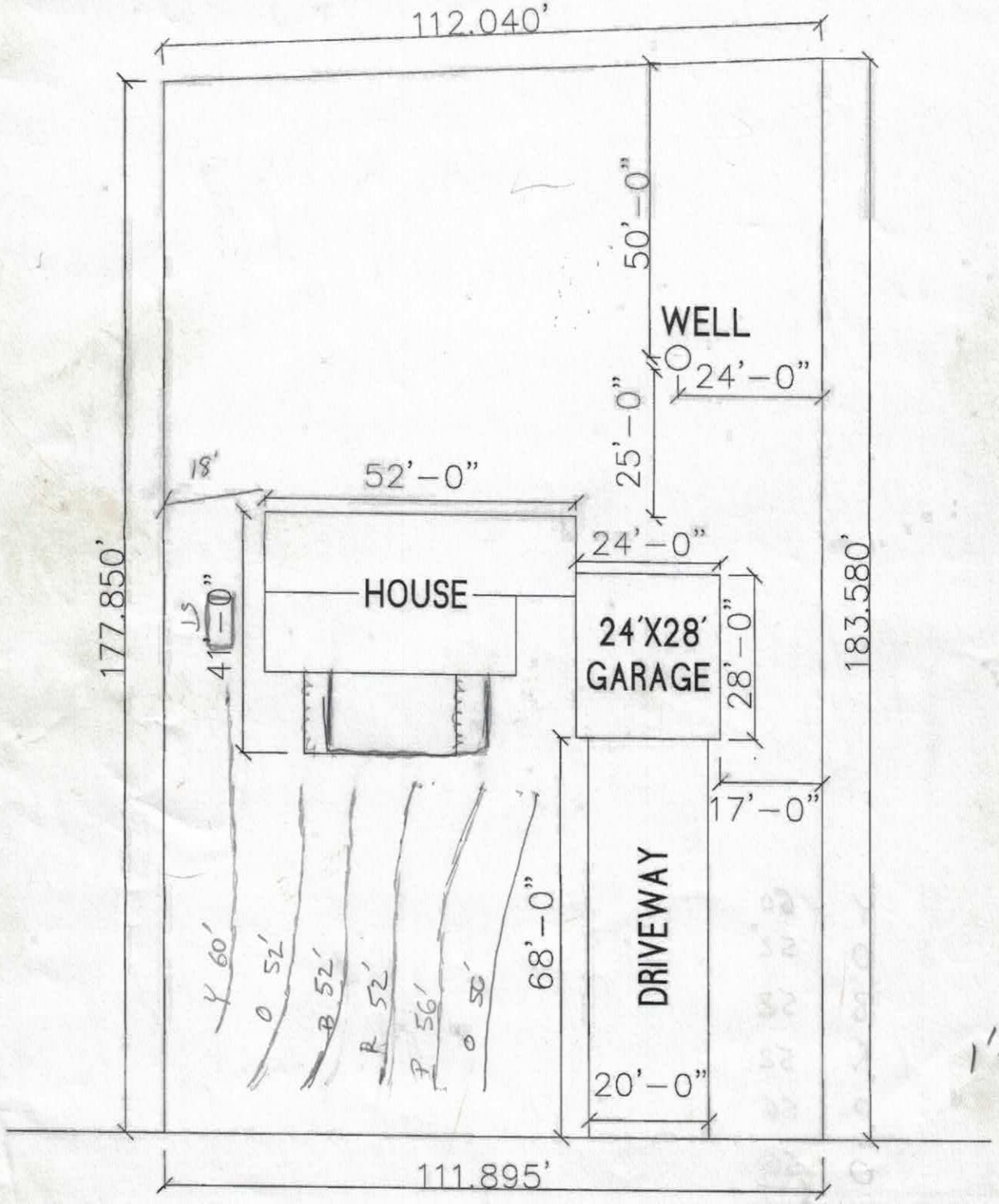
AUTHORIZATION TO CONSTRUCT by: Date: 4/26/17 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK

LANCE SKEIM

LOT 5 – .46 ACRES

SilverpointHomes



1"=25'

DENR/DEH

ON-SITE WASTEWATER SECTION

Sheet 1 of 3
PROPERTY ID #: 6630
COUNTY: IREDELL

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Scott Lee — APPLICATION DATE 7/20/15
ADDRESS: 601 Barber Ln. Mooresville — DATE EVALUATED: 7/30/15
PROPOSED FACILITY: SFR — PROPOSED DESIGN FLOW (.1949): 480 GPD — PROPERTY SIZE:
LOCATION OF SITE: 122 Sedgrove Ln. Mooresville NC — PROPERTY RECORDED: 63'
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
A 1	SS 5%	0-12	BCL, SBK	VFR, SS, SP	FEW B DRAINAGE MOTTLES 18"-27"	48"	N/A	N/A	.25 ABOVE 28" .3 28"-48"
		12-30	RC, ABK	FI/FR, SS, SP					
		30-48	RCL, SBK	FR, SS, SP					
A 2	TS 8%	0-20	BCL, GR	VFR, SS, SP	N/A	48"	N/A	N/A	.3
		20-29	RC, SBK/ABK	FR, SS, SP					
		29-48	RCL, SBK	FR, " "					
A 3	SS 8%	0-22	BCL, WSBK	VFR, SS, SP	N/A	49"	N/A	N/A	.3
		22-36	BCL, WSBK	FR " "					
		36-48	RC/CL, SBK	" " "					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	TR	EXEMPT
System Type(s)	APPROVED	APPROVED
Site LTAR	.275	EXEMPT

OTHER FACTORS (.1946): —
SITE CLASSIFICATION (.1948): TR
EVALUATED BY: Shane Cashion
OTHER(S) PRESENT: Tom Shuler

COMMENTS:

LEGEND

use the following standard abbreviations

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

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

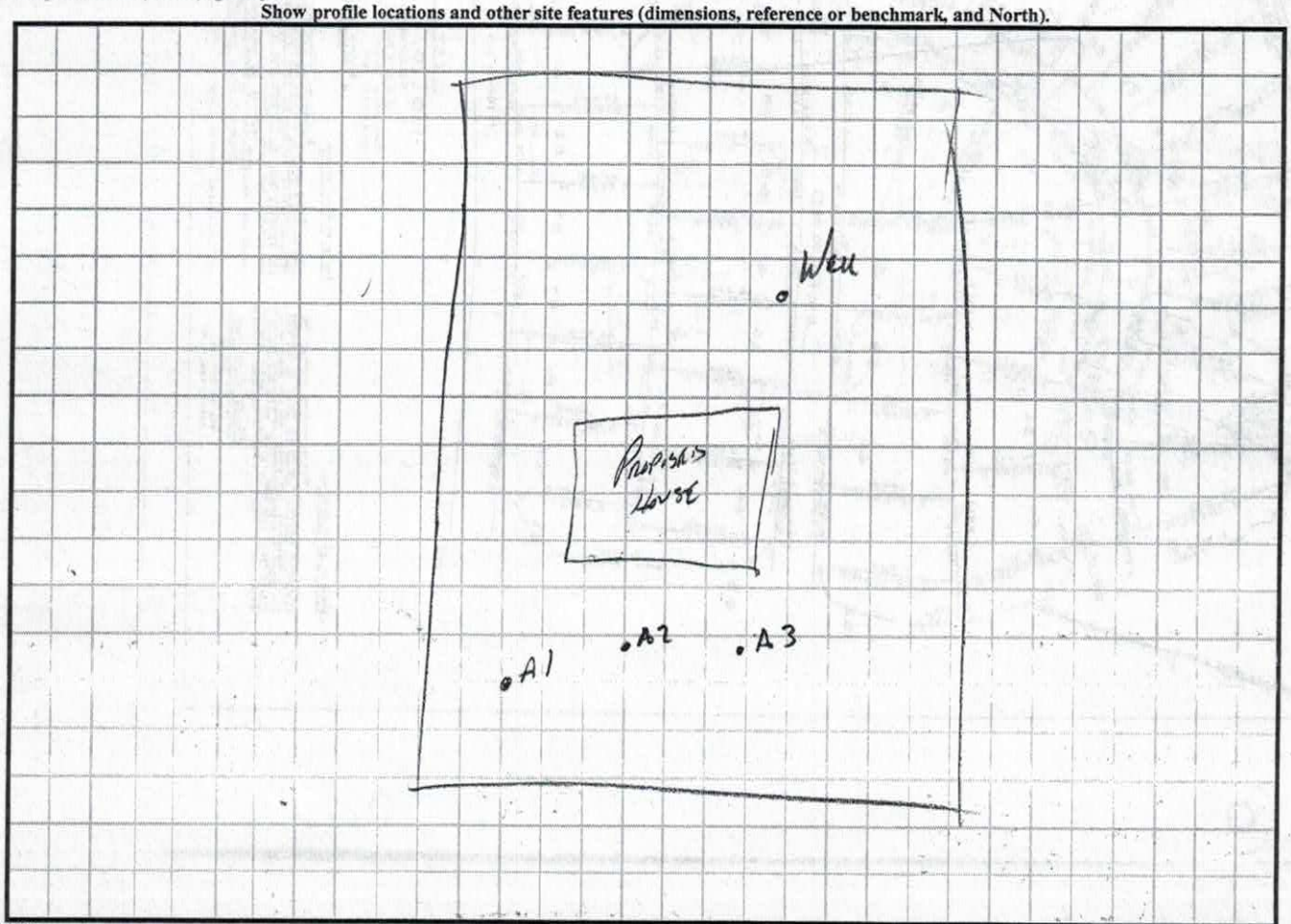
NOTES

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/ft^2

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



DENR (######)
Review (#####)

0 - 22" B SCL UNSBK OFR, SS, SP

#3 22 - 36 BCL, UNSBK, FR, SS, SP

36 - 48 RCL/CL, SBK FR, SS, SP

.3

1" = 40'

L1 Red: 48'

L2 Blue: 50'

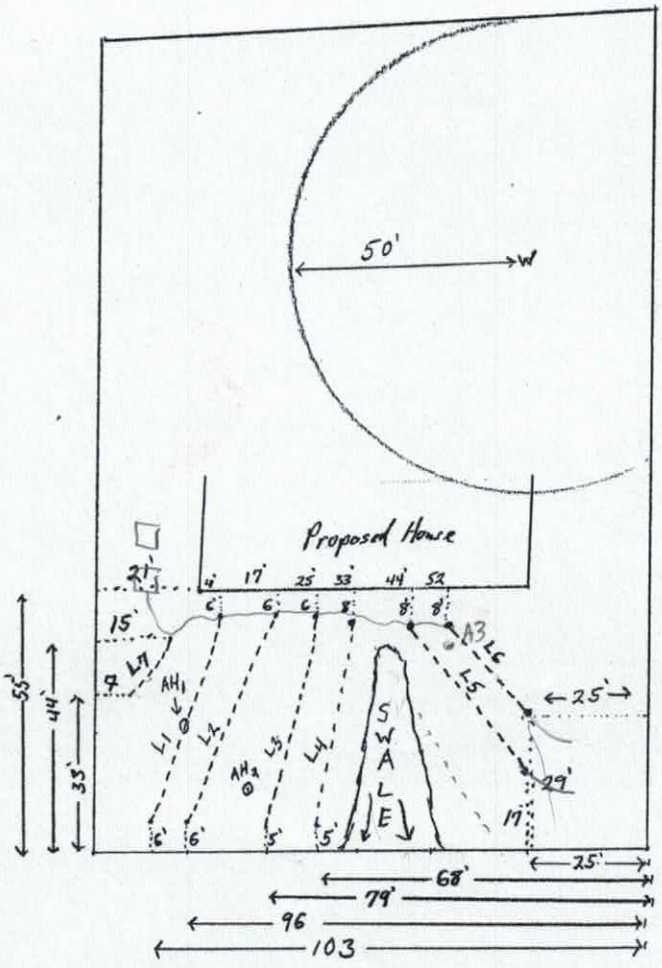
L3 Yellow: 46'

L4 Orange: 45'

L5 Red: 42'

L6 Blue: 28'

L7 Purple: 13'



SEA GROVE ROAD

L7 (30')

L6 +5'

L5 +5'

15' off Road Line w/ Driveway

Fill Swale

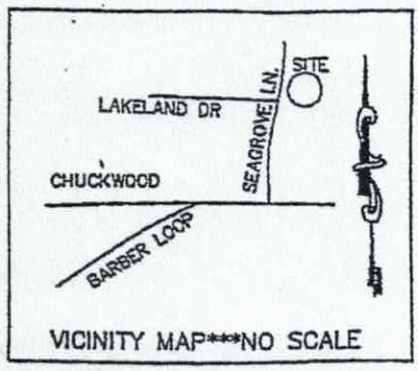
* - Driveway? [Contact homeowner

...the General Statutes of North Carolina Chapter 89C. ...this map

my hand and seal on the 27, day of JULY
A.D. 20 15.

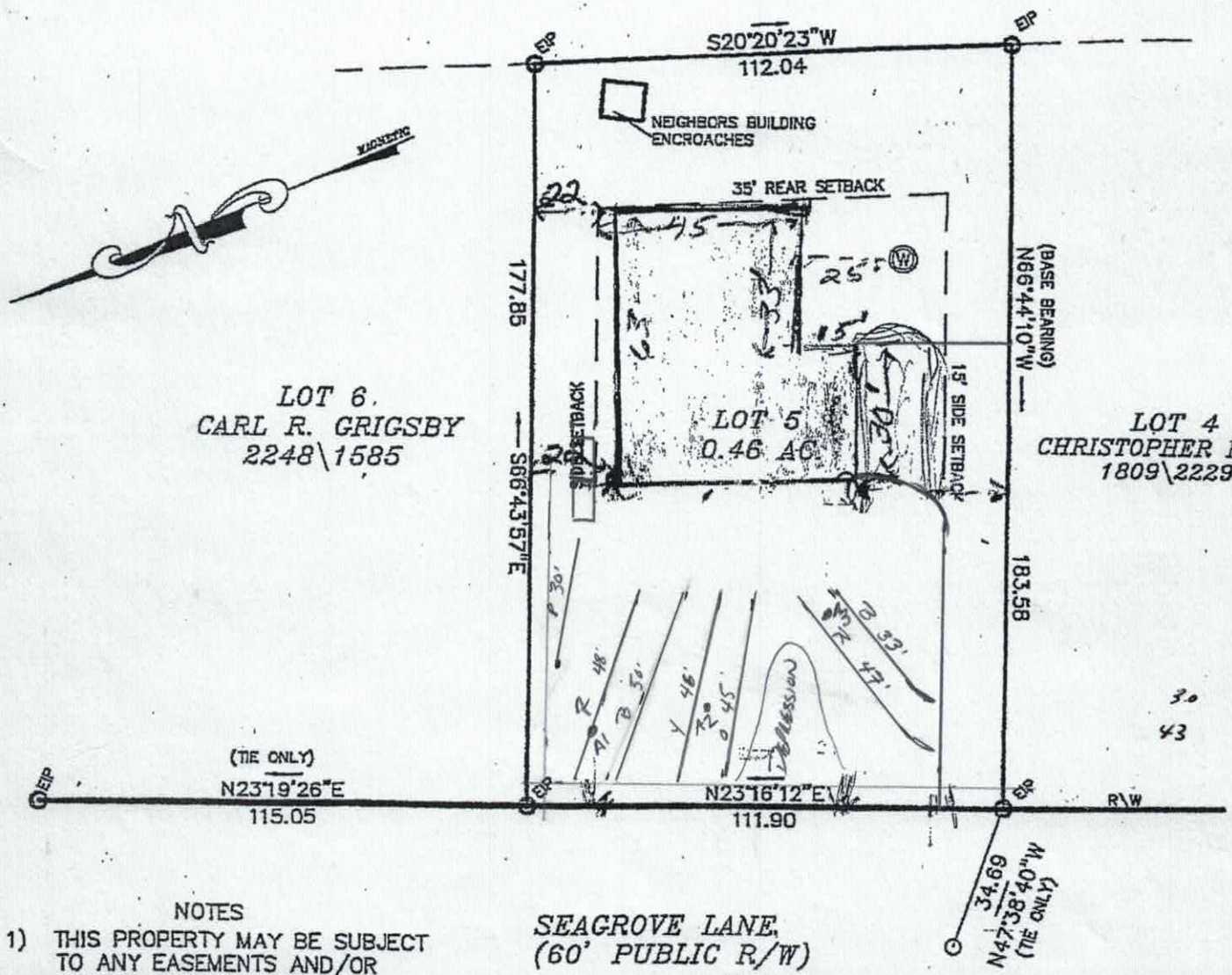
WILLIAM M. ALLEN

NORTH CAROLINA PROFESSIONAL SEAL L3499 LAND SURVEYOR WILLIAM M. ALLEN



290 @ .275
Power
6 @ 49 for Grau
299 AS IS

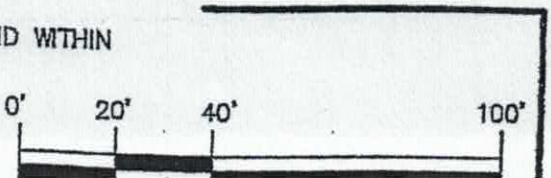
LOT 247
SCOTT NICHOLS
1634\525



SEAGROVE LANE.
(60' PUBLIC R/W)

NOTES

1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENTS AND/OR RIGHTS OF WAY OF RECORD.
2) ACREAGE COMPUTED BY THE COORDINATE METHOD.
3) UNDERGROUND POWER
4) NO GRID MONUMENT FOUND WITHIN 2000 FEET.



...ELAND RD.
...PUBLIC R/W).

R\W

RECEIVED MAR 2 9 2017

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

(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)

212156

1. APPLICATION FOR: X Improvement Permit X Authorization To Construct ___ Existing System Inspection

2. Page 2: *Site Plan Worksheet* Form MUST Accompany This Application — Paid $320.00

The following optional attachments may also be submitted: ___Survey Plat, Scaled no more than 1 Inch = 60 Feet

Place check ( ) beside whichever is submitted if applicable ___Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. Applicant Information:

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Lance Skeim	504 Southmead Dr. Clayton, NC 27527	N/A	704 657 7123
Owner Name	Mailing Address	Home Phone #	Alternate Phone #

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
122 Seagrove LN.	Holiday Harbor	lot #5

Driving Directions: Brawley School Rd to Chuckwood Rd. right into Holiday Harbor OR Seagrove Ln. lot on right.

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 due to _____
( ) Other _____

Maximum Number of Bedrooms 3
Maximum Number of Occupants 6
If Expansion, Current Number of Bedrooms ___

(X) Crawl Space Foundation?
( ) 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:

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

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

( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional (X) Other Conventional OR gravity panel.

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.

Install @ 30" TB Max 36"

9. Signature: Lance D. Skeim — 03/20/17

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

(2)

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, Lance D. Skeim, am the legal owner(s) of the property located at 122 Seagrove Lane Lot 5 Mooresville, NC 28117, identified as PIN (Parcel Identification Number) 4626-51-6630, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Randy Hefner or Mindy Gallison Silverpoint Homes, 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.

Lance D. Skeim 05/01/17 Melanie H. Skeim 05/01/17

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

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:

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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, LANCE SKEIM, am the legal owner(s) of the property located at 122 SEAGROVE LANE, MOORESVILLE, NC 28117, identified as PIN (Parcel Identification Number) 1702F060000A005, located in Iredell County, North Carolina. 4626-51-6630-000

I do hereby authorize (**print legal representative/company name**) ASHLEY ROLLANS, KELLY H MILLER, 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.

Lance D. Skeim 03/20/17 — Ronda Hart 3-20-17

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

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*:

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 PERMIT*!!!

Place an (X) beside each item as you complete the site plan:

_____ Property Line measurements are clearly identified… **_____ All proposed structures are indicated…**

SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site

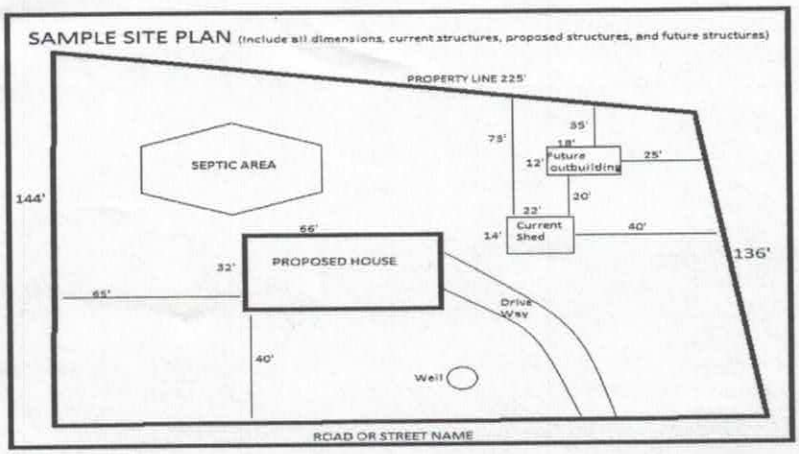
_____ Front and side setbacks from property line… **_____ Preferred driveway location and configuration, preferred well location…**

_____ Area you prefer your septic system to be placed… **_____ 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

See Attached

Signature: Laura D. Skeim

REQUIRED **property owner or owner's legal representative signature.**

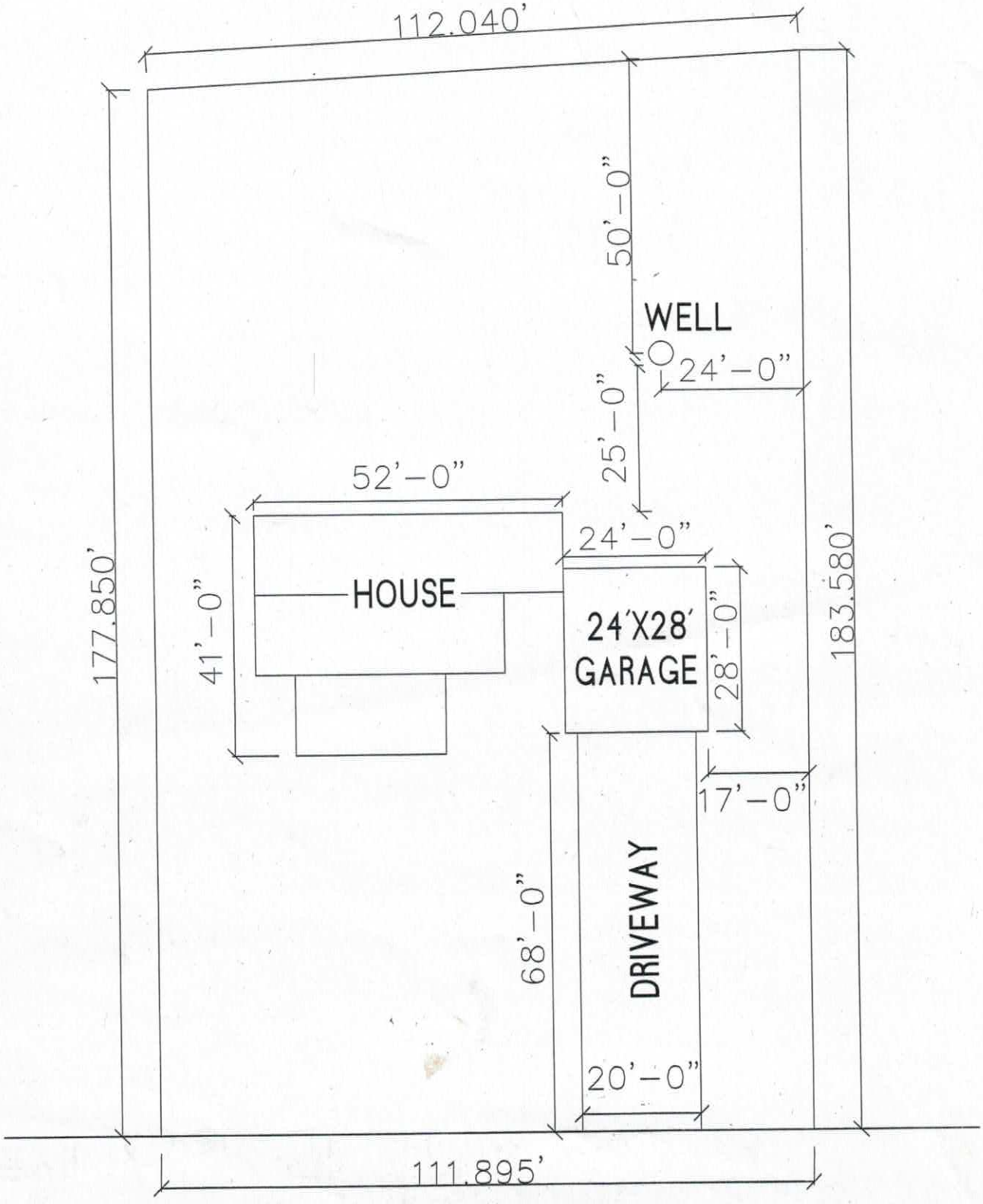
03/20/17

DATE

LANCE SKEIM

LOT 5 – .46 ACRES

SilverpointHomes



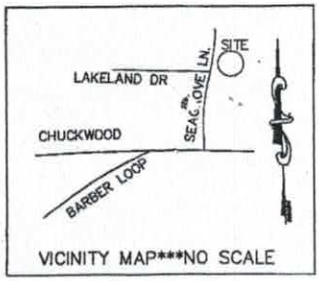
SEAGROVE LANE

DAS DON ALLEN & ASSOCIATES, P.A.
"Since 1971"
Commercial * Residential * Mortgage Surveys * Multi-Family
Construction Staking * Subdivision Design * Topographical
131 Crosslake Park Drive – Suite 102 * Mooresville * NC * 28117
(704) 664-7029 (704) 664-8041 Fax

I, certify that this map was drawn under my supervision from an actual survey made under my supervision recorded in deed book 2298, page 780, and/or plat book 7, page 29, that the ratio of precision is 1':10,000, that this map was prepared in accordance with the General Statutes of North Carolina Chapter 89C. my hand and seal on the 27, day of JULY, A.D. 20 15.

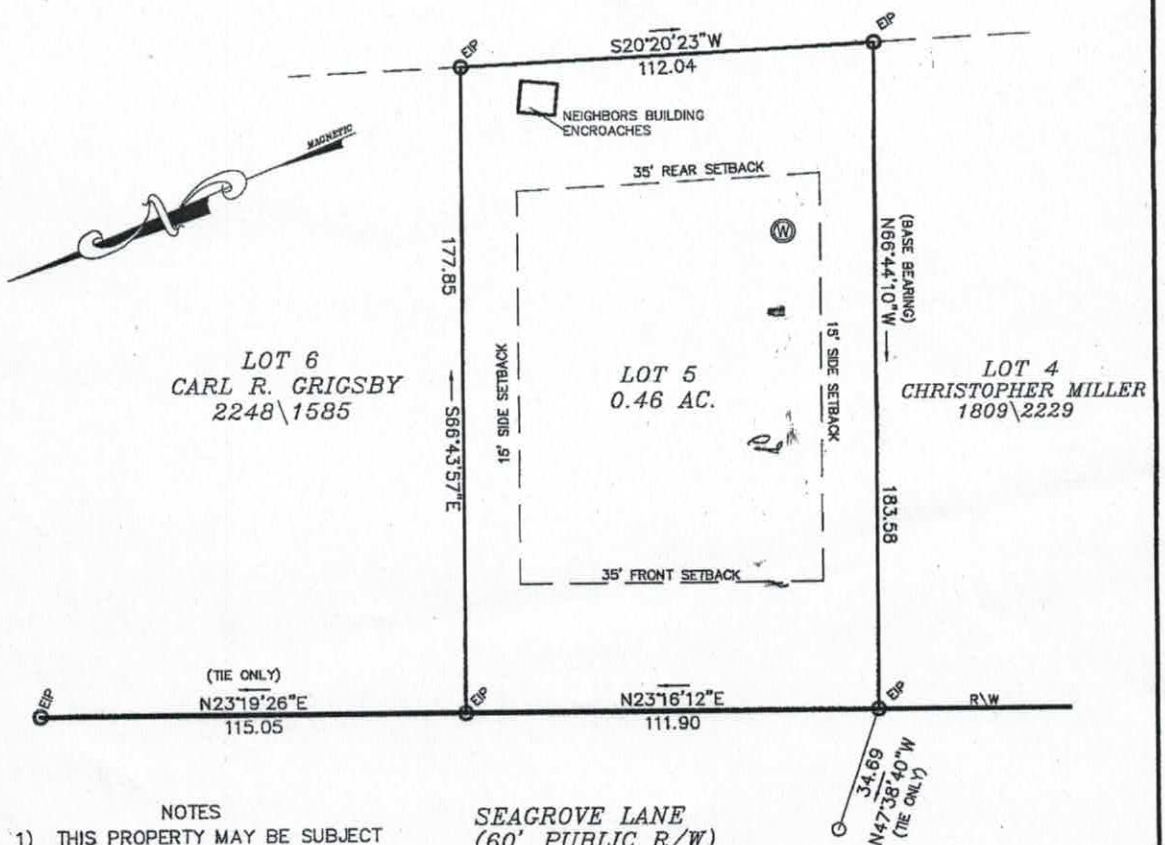
WILLIAM M. ALLEN

NORTH CAROLINA PROFESSIONAL SEAL L3499 LAND SURVEYOR WILLIAM M. ALLEN



VICINITY MAP***NO SCALE

LOT 247
SCOTT NICHOLS
1634\525



SEAGROVE LANE
(60' PUBLIC R/W)

LAKELAND RD.
(60' PUBLIC R/W)

R\W

NOTES
1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENTS AND/OR RIGHTS OF WAY OF RECORD.
2) ACREAGE COMPUTED BY THE COORDINATE METHOD.
3) UNDERGROUND POWER
4) NO GRID MONUMENT FOUND WITHIN 2000 FEET.

0' 20' 40' 100'
SCALE IN FEET

LEGEND
P.P. = POWER POLE
POWER TRANS.
E.I.P. = EXISTING IRON FOUND
I.P.S. = #4 REBAR SET
R/W = RIGHT-OF-WAY

BOUNDARY SURVEY
OF
LOT 5 HOLIDAY HARBOR

SCALE 1" = 40'
DAVIDSON TWSP., IREDELL CO., N.C.
ACQUIRED BY: LANCE SKEIM

FIELD BOOK:
FILE: HOLIDAY HARBOR 5
DC FILE:
TAX MAP NO: 4626516630

8261

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Boyce B. Gibson DATE 7/5/89 PERMIT NO. _____

PHONE: Business _____ Home 864-8110

LOCATION 1100 TR [redacted] Cherrywood TR Statesville 1/4 mile on R. S. R. No. _____

SUBDIVISION NAME Holiday Hardware LOT NO. 5 SECTION OR BLOCK NO. _____

House (✓) Mobile Home ( ) Business ( ) Other _____

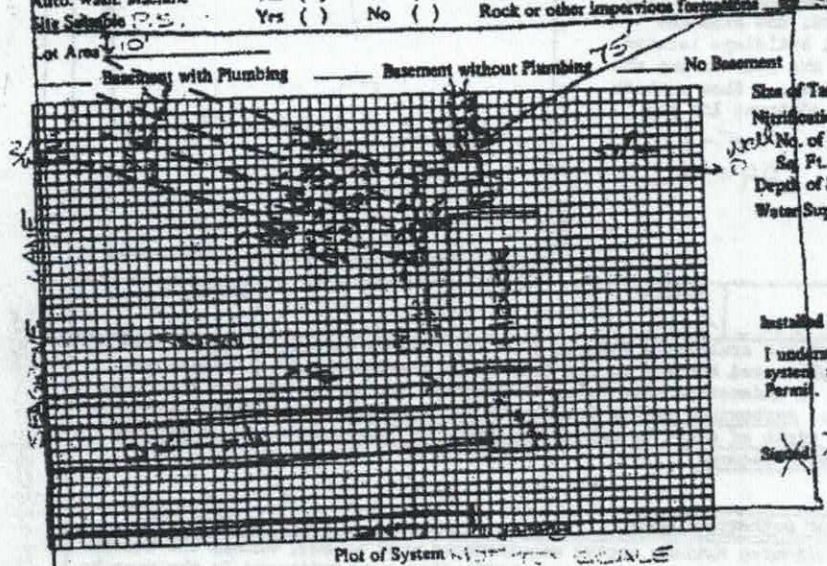
No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	
Auto. Dishwasher	Yes (✓)	No ( )	
Auto. Wash. Machine	Yes (✓)	No ( )	
Site Sample P.S.	Yes ( )	No ( )	

Character & Porosity of Soil Clayey
Percolation Rate 3 gpd A/P
Topography Good
Depth to Water Table 4' + or -
Rock or other impervious formations Some scattered

Lot Area .10

Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System NOT TO SCALE

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. _____ Linear Ft. 340
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by _____

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed [redacted]

IMPROVEMENTS PERMIT BY _____

COMMENTS: 1000 tanks 5' off the structure (deck/porch included) Run lines level and shallow (24" to bottom of trench) Keep ON contour so that cover can be constant.

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

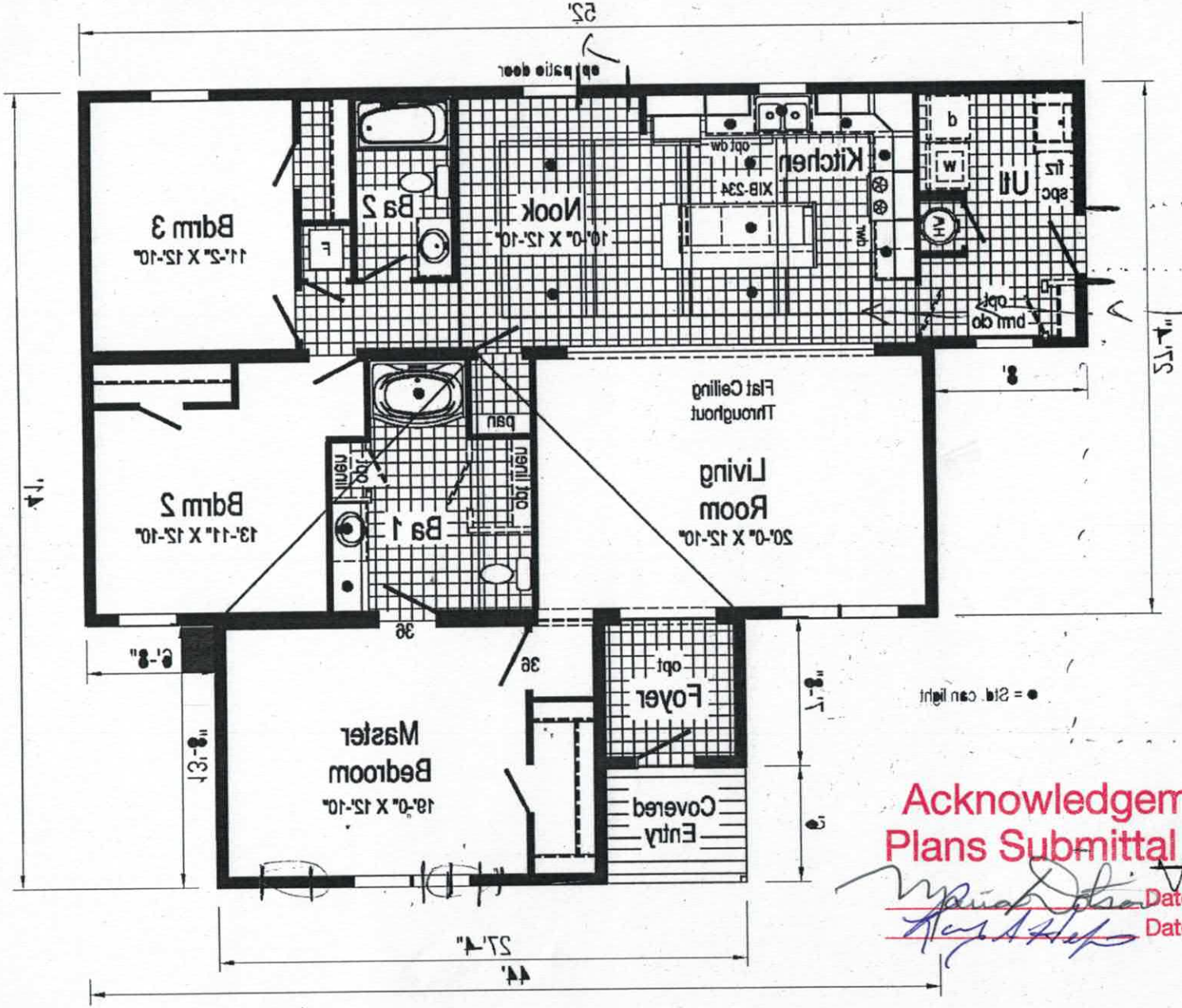
Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Improvements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold

159,500

GRANDVIEW MAX

B4252445 - 4252/44 - Approx. 1638 sq. ft.



Acknowledgement of
Plans Submittal ONLY!

Date 4/26/17

Date 5-3-17

IREDELL COUNTY

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

APPLICATION NUMBER
212156
Issue Date: 07/20/2015

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4626516630.000	122 SEAGROVE LANE, MOORESVILLE, NC 28117	

Owner Information	Applicant Information
Owner: GIBSON SUE S	Applicant: SKEIM, LANCE D.
Address: 0 IREDELL CO, NC 28625	Address: 504 SOUTHMEAD DRIVE CLAYTON, NC 27527
Phone:	Phone: 704-657-7123

Use Requested	Zone Code
SFD	

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
	35.00	35.00	15.00	15.00	CA	X

Remarks:

$ PAID

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: *See Attached* Date: _____

Permit Number	44096	TOTAL FEES:	$ 77.25