IREDELL COUNTY HEALTH DEPARTMENT

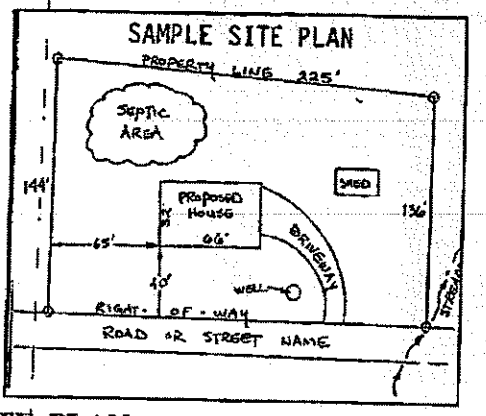
ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *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:

- (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 and well location
- (X) Area you prefer your septic system to be placed
- (X) North arrow, or other sufficient indicator of direction

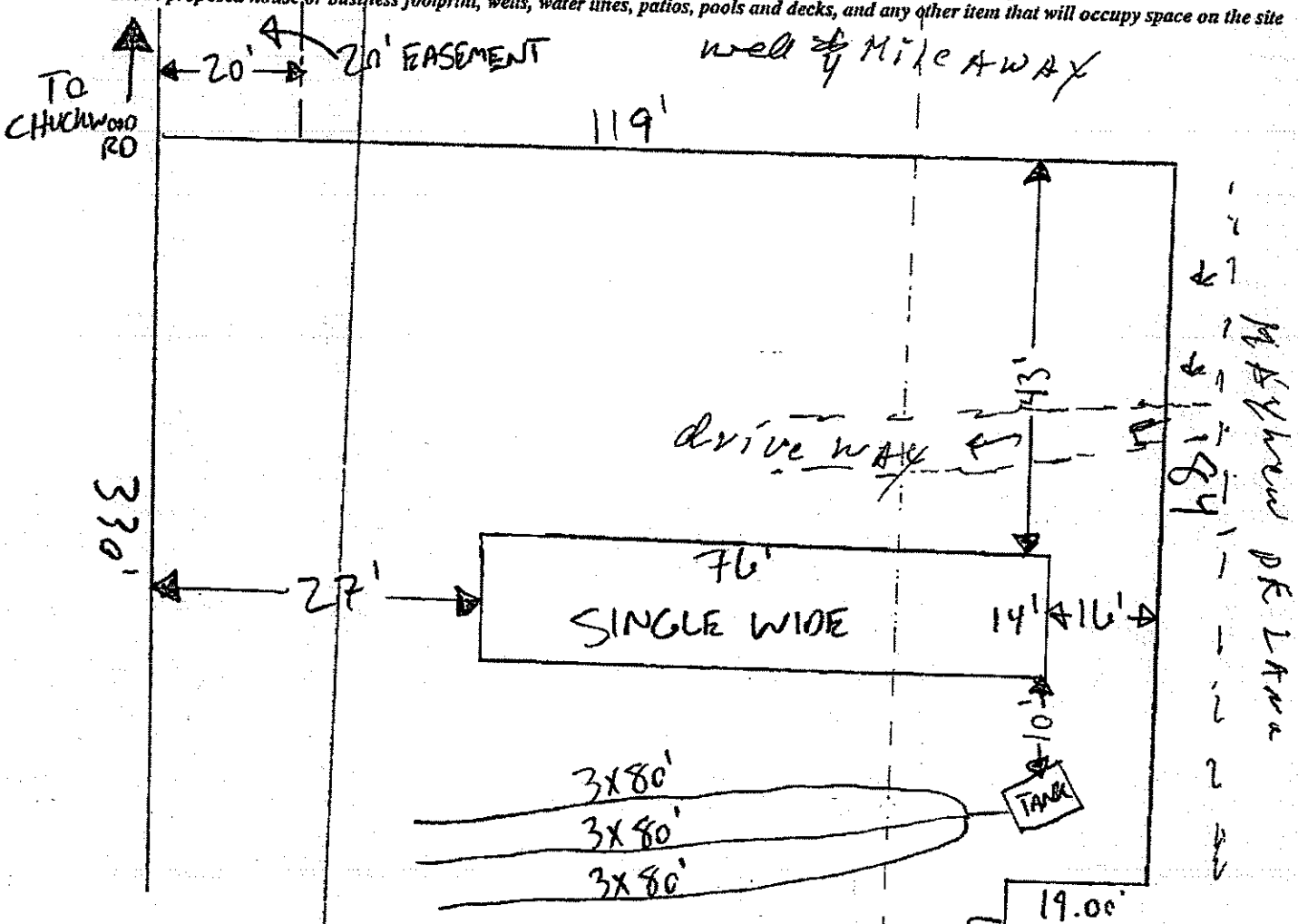


Circle N/A on the following if appropriate:

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



Signature: Brady & Shay Lew

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

7-25-12

DATE

PRELIMINARY APPROVAL
- HOLD BUILDING PERMIT UNTIL PLAT IS RE-RECORDED.
W. Alli 8/3/16
COUNTY PLANNER

STATE OF NORTH CAROLINA
IREDELL COUNTY

I, JAMES R. HOBBS, certify that this plat was drawn under my supervision from an actual survey made under my supervision (deed description recorded in Book ___, page ___, etc.) (other); that the boundaries not surveyed are clearly indicated as drawn from information found in Book ___, page ___; that the ratio of precision as calculated is 1/ 10,000+; that this plat was prepared in accordance with G.S. 47-30 as amended. Witness my original signature, registration number and seal this ___ day of ___ MONTH ___ A.D., 2016.

"PRELIMINARY PLAT"

NOT FOR RECORDATION, CONVEYANCES, OR SALES

Professional Land Surveyor L-3785

1. THIS PLAT IS OF A SURVEY OF AN EXISTING PARCEL OR PARCELS OF LAND AND DOES NOT CREATE A NEW STREET OR CHANGE AN EXISTING STREET;
2. THAT THE SURVEY IS OF AN EXISTING BUILDING OR OTHER STRUCTURE, OR NATURAL FEATURE, SUCH AS A WATERCOURSE; OR
3. THAT THE SURVEY IS A CONTROL SURVEY.
4. THIS PLAT IS OF A SURVEY THAT CREATES A SUBDIVISION OF LAND WITHIN THE AREA OF A COUNTY OR MUNICIPALITY THAT HAS AN ORDINANCE THAT REGULATES PARCELS OF LAND.
5. THIS PLAT IS OF A SURVEY THAT IS LOCATED IN SUCH PORTION OF A COUNTY OR MUNICIPALITY THAT IS UNREGULATED AS TO AN ORDINANCE THAT REGULATES PARCELS OF LAND.
X 6. THIS PLAT IS OF A SURVEY OF ANOTHER CATEGORY, SUCH AS THE RECOMBINATION OF EXISTING PARCELS, A COURT-ORDERED SURVEY OR OTHER EXCEPTION TO THE DEFINITION OF SUBDIVISION.

Professional Land Surveyor L-3785

LOCATION MAP NOT TO SCALE

OWNERSHIP CERTIFICATE

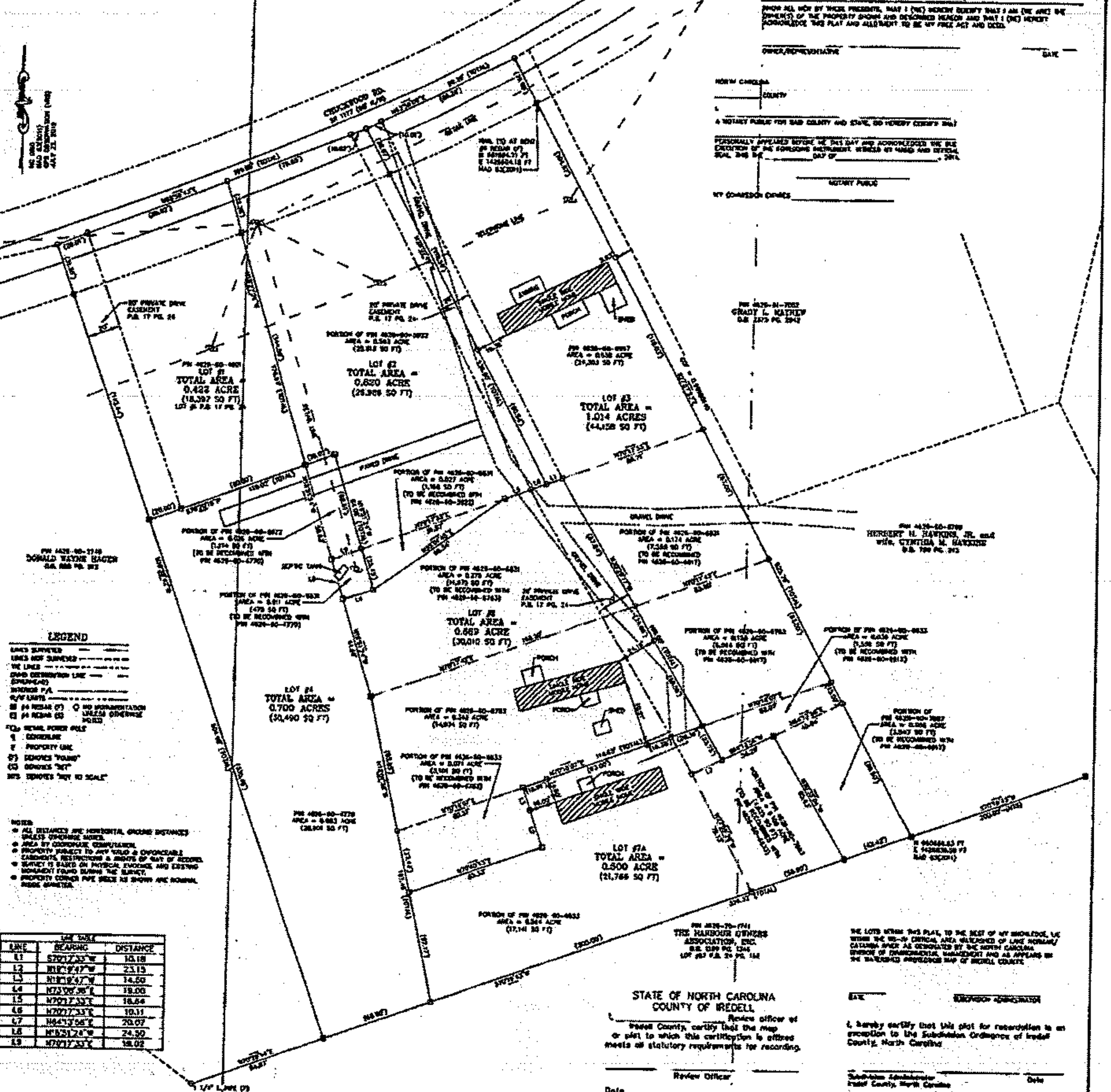
KNOW ALL MEN BY THESE PRESENTS, THAT I (WE) HEREBY CERTIFY THAT I AM (WE ARE) THE OWNER(S) OF THE PROPERTY SHOWN AND DESCRIBED HEREON AND THAT I (WE) HEREBY ACKNOWLEDGE THIS PLAT AND ALLOTMENT TO BE MY FREE ACT AND DEED.

OWNER/REPRESENTATIVE ___ DATE ___

NORTH CAROLINA
___ COUNTY
I, ___
A NOTARY PUBLIC FOR SAID COUNTY AND STATE, DO HEREBY CERTIFY THAT ___
PERSONALLY APPEARED BEFORE ME THIS DAY AND ACKNOWLEDGED THE DUE EXECUTION OF THE FOREGOING INSTRUMENT. WITNESS MY HAND AND OFFICIAL SEAL, THIS THE ___ DAY OF ___, 2016.

NOTARY PUBLIC

MY COMMISSION EXPIRES ___



LEGEND

LINES SURVEYED
LINES NOT SURVEYED
TIE LINES
R/W LINES
#4 REBAR (F)
#4 REBAR (S)
NO MONUMENTATION UNLESS OTHERWISE NOTED
CENTERLINE
PROPERTY LINE
(F) DENOTES "FOUND"
(S) DENOTES "SET"
NTS DENOTES "NOT TO SCALE"

NOTES:
- ALL DISTANCES ARE HORIZONTAL GROUND DISTANCES UNLESS OTHERWISE NOTED.
- AREA BY COORDINATE COMPUTATION.
- PROPERTY SUBJECT TO ANY VALID & ENFORCEABLE EASEMENTS, RESTRICTIONS & RIGHTS OF WAY OF RECORD.
- SURVEY IS BASED ON PHYSICAL EVIDENCE AND EXISTING MONUMENT FOUND DURING THE SURVEY.
- PROPERTY CORNER PIPE SIZES AS SHOWN ARE NOMINAL INSIDE DIAMETER.

LINE TABLE

LINE	BEARING	DISTANCE
L1	S70°17'33"W	10.18
L2	N18°19'47"W	23.15
L3	N18°19'47"W	14.50
L4	N73°06'36"E	19.00
L5	N70°17'33"E	18.64
L6	N70°17'33"E	10.11
L7	N64°13'56"E	20.07
L8	N15°51'24"W	24.50
L9	N70°17'33"E	18.02

THE LOTS WITHIN THIS PLAT, TO THE BEST OF MY KNOWLEDGE, LIE WITHIN THE WS-IV CRITICAL AREA WATERSHED OF LAKE NORMAN/CATAWBA RIVER AS DESIGNATED BY THE NORTH CAROLINA DIVISION OF ENVIRONMENTAL MANAGEMENT AND AS APPEARS ON THE WATERSHED PROTECTION MAP OF IREDELL COUNTY.

STATE OF NORTH CAROLINA
COUNTY OF IREDELL
I, ___ Review officer of Iredell County, certify that the map or plat to which this certification is affixed meets all statutory requirements for recording.

Review Officer
Date ___

DATE ___ SUBDIVISION ADMINISTRATOR

I, hereby certify that this plat for recordation is an exception to the Subdivision Ordinance of Iredell County, North Carolina

Subdivision Administrator
Iredell County, North Carolina ___ Date

FLOOD STATEMENT

THIS IS TO CERTIFY THAT THE LOCATION OF THE SUBJECT PROPERTY HAS BEEN CHECKED AGAINST AREA FEMA/FIRM MAPS AND THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT A PORTION OF THE SUBJECT PROPERTY IS NOT LOCATED IN A SPECIAL FLOOD HAZARD AREA. MAP NUMBER 3710462600J DATED: 3/16/2009

GRAPHIC SCALE
(IN FEET)
1 inch = 40 ft.

LNS FILE NO:	S150710
DWG NO:	S160601REV1
SURVEYED BY:	J.R. HOBBS
DRAWN BY:	N.O. WATLEY
CHECKED BY:	J.R. HOBBS

SHEET 1 OF 1
TAX ID: 4626-60-4901, 4626-60-5922, 4626-60-6917, 4626-60-4770, 4626-60-6831, 4626-60-8763, 4626-60-6833 & 4626-60-7657
FOR SOURCE OF TITLE REFER TO D.BK. 677 PG. 236
D.BK. 687 PG. 6
D.BK. 702 PG. 697
D.BK. 790 PG. 401

RECOMBINATION SURVEY OF PROPERTY OWNED BY
GRADY L. MAYHEW

DAVIDSON TOWNSHIP — IREDELL COUNTY, N.C.
SCALE: 1" = 40'
BOOK: NA
DATE OF SURVEY: JULY 6, 2016
DATE OF MAPPING: JULY 25, 2016

LNS
SURVEY AND MAP PREPARED BY:
LAKE NORMAN SURVEYING & MAPPING PLLC #P-0190
137 Jennings Road, Suite C
Statesville, North Carolina 28625
(704) 876-4450 Fax (704) 876-4451

108 Maynard Park Lane

4626-60-4770

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 Grady Mayfield DATE 7-27-84 PERMIT NO. 244

PHONE: Business _____ Home _____

LOCATION 1100 TR 1177 ¼ Mile on Left

SUBDIVISION NAME Mayfield MH Park LOT NO. 4 SECTION OR BLOCK NO. _____ S. R. No. _____

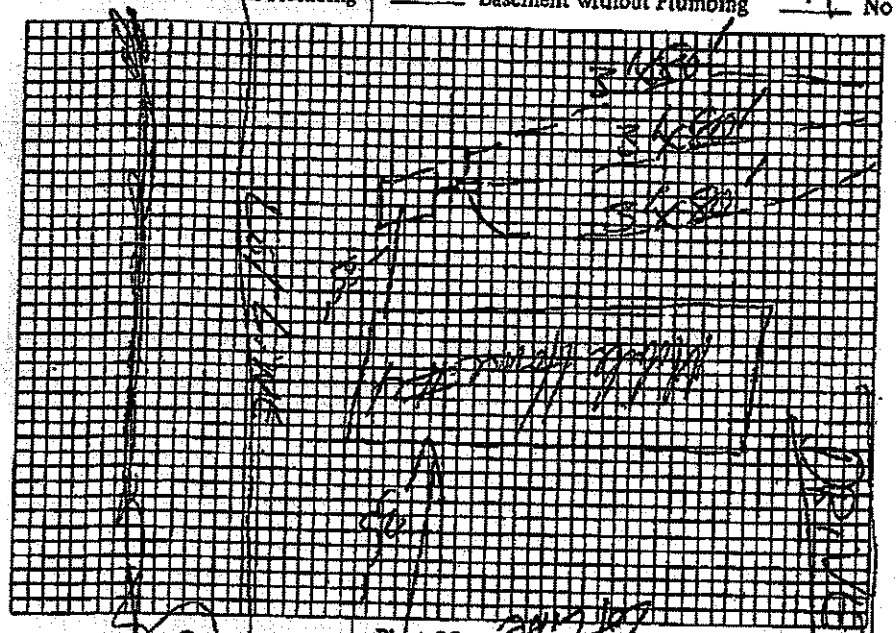
House ( ) Mobile Home (X) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (X)
Auto. Dishwasher Yes (X) No ( )
Auto. Wash. Machine Yes (X) No ( )
Site Suitable Yes (X) No ( )
Lot Area 15,000 Ft²

Character & Porosity of Soil Clay Loam
Percolation Rate 02-24 Hrs/Inch
Topography Gently Rolling
Depth to Water Table 12"
Rock or other impervious formations None Obs

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 24"
Water Supply: Individual ( )
Public (X)

Installed by Self-Installed

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

Signed: _____

IMPROVEMENTS PERMIT BY Fred Clemmer + K Barnett

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 7-27-84

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

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 Bradley Mayhew DATE 2-24-86 PERMIT NO. 109

PHONE: Business _____ Home _____

LOCATION 1400 TR 1177 Tynaite on left

SUBDIVISION NAME Bradley Mayhew Mobile Park LOT NO. 4 S. R. No. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (X)
Auto. Dishwasher	Yes (X)	No ( )
Auto. Wash. Machine	Yes (X)	No ( )
Site Suitable	Yes (X)	No ( )

Lot Area 20,000 Ft²

Character & Porosity of Soil Unsuitable Fill Dirt

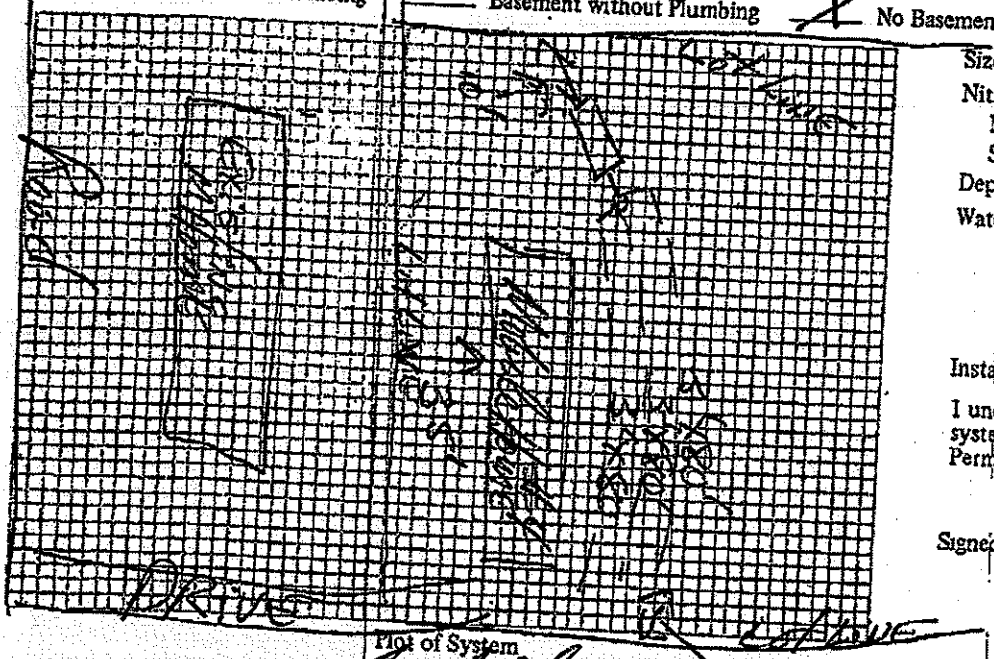
Percolation Rate 0.5 20 Min.

Topography Level

Depth to Water Table _____

Rock or other impervious formations None observed

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"

Water Supply: Individual ( )
Public (X)
Community Water

Installed by _____

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

Signed: X Fred Clements

IMPROVEMENTS PERMIT BY Fred Clements

COMMENTS: Keep System Shallow About 1.5' Cover, Follow Contours

CERTIFICATE OF COMPLETION BY _____

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