IREDELL COUNTY HEALTH DEPARTMENT

KW Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 230501

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

PIN # 4626902394

APPLICANT/OWNER: Keith Davis / CS&SC APPLICANT ADDRESS: 104 Wild Harbor Rd Mooresville, NC 28117

SITE ADDRESS: 104 Wild Harbor Rd Mooresville, NC PHONE: ALT. PHONE

SITE DIRECTIONS: Brawley School Rd to Great Point Tr. Wild Harbor lot on right

SUBDIVISION: The Point ON NORMAN SECTION: 3 LOT # 294 LOT AREA: .820 Acre

SAP CONTROLLED: ☐ YES ☒ NO

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

Septic Tank	Exist 1500 (gal)	STB	Date	☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 4
Pump Tank	(gal)	PT	Date	System Description:	Gravity – 25% Reduction			☐ Business	No. Persons 8
Pump Make	Model		Serial #	Repair System Description:	LPP PBPS			☐ Other	No. Employees
# Nitrification Fields 1	# Lines 2		Linear Ft 176'	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☒ Crawl Space
Trench Width 36"	Trench Bottom Depth(Low side) 33"		Gravel Depth N/A	☒ GRAVITY	☐ PRESSURE			☐ Basement w/ plumbing	☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☒ Community

Comments / Conditions: Note: Septic System relocation to make room for Swimming pool. Septic lines within 15ft of pool must be removed and ditch filled with Clay and tamped. Installed Quick 4 replaced 1 drop box

INITIAL SITE SKETCH

See attached, approved plan by CS&SC, PLLC (Adrian Pruett) dated 10/1/17

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: Keith Davis Date: 10/17/17 Installed by: T. W. Ammons

IMPROVEMENT PERMIT by: Maria Dolson Date: 10/13/17 OPERATION PERMIT by: Maria Dolson Date: 1/8/18

AUTHORIZATION TO CONSTRUCT by: Maria Dolson Date: 10/13/17 Existing System Inspected by: Date:

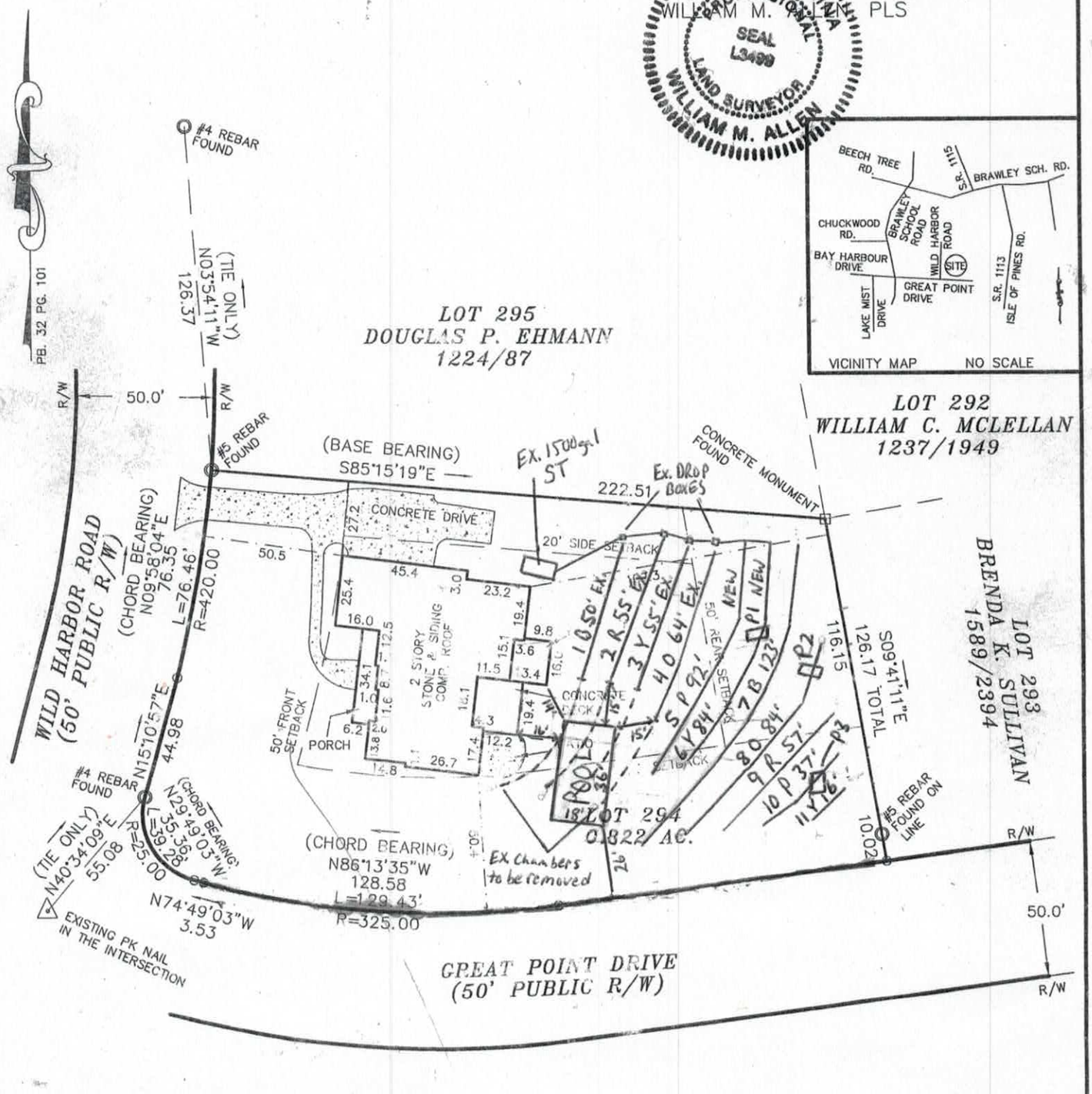
DAS DON ALLEN & ASSOCIATES, P. A.
"Since 1971"
Commercial * Residential * Mortgage Surveys * Multi-Family
Construction Staking * Subdivision Design * Topographical
111-B Raceway Drive * Mooresville * NC * 28117
(704) 664-7029 (704) 664-8041 Fax

Approved 10/13/17 MF

I, certify that this map was drawn under my supervision from an actual survey made under my supervision recorded in deed book 1658, page 1030, and/or plat book 32, page 101, 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 8, day of FEBRUARY, A.D. 20 11.

WILLIAM M. ALLEN, PLS

NORTH CAROLINA PROFESSIONAL SEAL L3499 LAND SURVEYOR WILLIAM M. ALLEN



0' 25' 50' 100'
SCALE IN FEET

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.

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

PHYSICAL SURVEY

OF
104 WILD HARBOR ROAD
LOT 294 THE POINT ON NORMAN, PH. 3 MAP 3

SCALE 1" = 50'
DAVIDSON TWSP., IREDELL COUNTY, NORTH CAROLINA
ACQUIRED BY: CYNTHIA & KEITH DAVIS

FIELD BOOK: 663
FILE: POINT LOT 294.DWG
DC FILE:
TAX MAP NO: 4626902394

INFORMATION FOR INSTALLER:

- The permit should be read very carefully prior to submitting bid. The following are details that must be considered along with all other considerations.
- Tanks shall be approved by NC DHHS, and certification supplied by the manufacturer.
- All tanks shall be properly back filled and compacted to prevent slump at a later date.
- The installer is responsible for final grades and returning that grade to original, with exception of added structural features.
- The supply trench shall be compacted to eliminate any cavities left during initial fill placement.
- Installation of the system shall be during dry conditions in order to protect the soil structure.
- All fittings shall be pressure rated fittings.
- All joints shall be cleaned with PVC pipe cleaner and a heavy bodied glue applied to weld all joints.
- Where required by the county health department, post installation inspections by the designer must be scheduled 5 week days in advance.
- Trenches shall be carefully excavated so the bottom has no more than 1/4"fall in 10 feet with no high or low areas within. If high or low areas do exist after trench excavation, high areas should be removed rather than filling in low areas. Do not over excavate trenches! Any fine grading should be completed by hand with a rake and shovel, leaving no loose material.
- All pipe openings in the tanks shall be properly grouted. This also applies to the joints around the riser.
- Earth dams, constructed of relatively impervious material, shall be installed at the beginning and end of each lateral to prevent unwanted lateral water movement.
- No heavy equipment shall be used on the field during or after installation. The use of a small loader (i.e. Bobcat) or a trencher (i.e. Ditch Witch 2300/2310) may be used for installation.
- Elevations at pin flag locations should be checked by the installer prior to beginning trenches to insure accuracy.
- If septic tank risers are used they should be a minimum of 6" above finished grade or within 6" of final grade if buried.
- Design precludes use of foundation drains on the residence.
- System is specified as an Accepted 25% Reduction Gravity installation.
- Repair is specified as PPBPS Low Pressure installation.
- Trench width is specified as 36" wide, rake and lime all trench sidewalls
- **If grading for slab foundation is utilized do not grade/create greater than 2 ft of elevation difference within 15 ft of any component of the septic or repair. If back filling do not backfill over any initial or repair septic line.**

Approved
10/13/17
MD

OWNER INFORMATION

Owner: Keith Davis
Address: 104 Wild Harbor Rd
Mooresville, NC 28117
Contact: Keith Davis
Phone: 732-433-6123
County: Iredell
Location: 104 WILD HARBOR RD., MOORESVILLE, LOT 294

Source of Wastewater Flow: 4 Bedroom Single Family Residence
Estimated Gallons Per Day Flow: 480
System Flow: NA

25% GRAVITY DESIGN INFORMATION

Drainfield Design Flow (gpd): 400
Loading/Soil Application Rate (gpd/ft.^{2}): 0.300
Depth of Gravel in Trench: NA (25% reduction)
Gravel Size: NA (25% reduction)
Total Lateral Length From Layout: 400
Total Lateral Length Required: 400
Trench Depth: 33 in. Lowside
Trench Width: 36 in.
TOTAL AREA TRENCH BOTTOM: 1200

Trench Spacing on Center: 9 ft.
Repair Trench Spacing on Center: 8 ft.
Repair Trench Depth: 23 in.

Septic Tank Size: Existing gal.

Estimated Supply Line Length: Existing
Supply Line Diameter: 3 in. SCH 40 PVC
Supply Line Volume: Existing
Dosing Volume: NA
Supply Manifold: SERIAL DISTRIBUTION

Additional Comments: Soil suitability was performed by Adrian L. Pruett LSS

Approved 10/13/17 MD

104 WILD HARBOR RD., MOORESVILLE, LOT 294
FIELD LAYOUT SPECIFICATIONS

LAYOUT FOR 4 BEDROOM RESIDENCE

October 1, 2017

LINE #	FLAG COLOR	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM			NA		
HOUSE CRN		NA	NA		
P. TANK		NA	NA		
1	***EXISING BLUE***	***NA***	***NA***	***100***	***50 remaining***
2	***EXISING RED***	***NA***	***NA***	***100***	***55 remaining***
3	***EXISING YELLOW***	***NA***	***NA***	***100***	***55 remaining***
4	***EXISING ORANGE***	***NA***	***NA***	***100***	***64 remaining***
5	***PINK***	***NA***	***NA***	***92***	***92***
6	***YELLOW***	***NA***	***NA***	***84***	***84***
7	BLUE	NA	NA	123	123
8	ORANGE	NA	NA	84	84
9	RED	NA	NA	57	57
10	PINK	NA	NA	37	37
11	YELLOW	NA	NA	16	16
			Total	**893**	**493**

	LINE LENGTH	SYSTEM TYPE	SOIL LTAR GPD/FT^2	TRENCH SYSTEM	DISTRIBUTION
System	***400***	***ACCEPT.***	***0.300***	***25% RED.***	***GRAVITY***
Repair	317	*MOD.*	0.300	PPBPS	LOW PRESSURE

Notes: ** TBM Is Not Required.
**All measures in feet
**Nitrification lines are demonstrated on contour via colored pin flags

Comments: **Existing drainlines are 25% Reductioon Chamber material with Drop Box Distribution**
Existing septic lines to be shortened to line lengths above to maintain a minimum of 15 ft. away from the proposed swimming pool.
Septic line within 15 ft. of swimming pool to be removed and ditch to be filled with clay and tamped.
The existing septic tank is determined to be a 1500 gal tank based on exterior dimensions, not a 1000 gal tank as described on the Iredell County OP dated 4-25-08
Proposed swimming pool is 18'X36'.
Iredell County has CS&SC's permission to change septic tank location and distribution type

Approved
10/13/17
MD

DOSING CALCULATIONS

Location 104 Wild Harbor Rd., Mooresville

Lot No: 294
Subdivision: The Point on Norman Phase 3 Map 3

No. of Bedrooms	4	
Design Flow	480	$^{gal}/_{day}$
LTAR	0.300	$^{gal}/_{ft^2\ day}$
25% RED. Expansion? (YES OR NO)	YES	
Supply Line Length	Existing	ft.
Supply Line Volume	Existing	gal.
Required Feet of 25% RED. Line	400	ft.
Amount of Line from Layout	400	ft.
Gallons per Minute	NA	$^{gal}/_{min}$
Septic Tank Capacity	Existing	gal.
Minimum Septic Tank Capacity	1000	gal.
Lateral Line Volume	261.2	gal.

PROPERTY ID #: 4626902394
COUNTY: Iredell

Approved
10/13/17
MS

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

OWNER: Keith Davis
APPLICATION DATE
ADDRESS: 104 Wild Harbor Rd., Mooresville, NC 28117
DATE EVALUATED: 9/26/17
PROPOSED FACILITY: Residential
PROPOSED DESIGN FLOW (.1949): 480 gpd
PROPERTY SIZE: 0.822 ac
LOCATION OF SITE: 104 Wild Harbor Rd., Mooresville
PROPERTY RECORDED: Yes
WATER SUPPLY: ☐ Private X Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring X 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	
P 1	LSS 5%	0-7	R SCL GR	FR SS SP SEXP	N/A -FEW SAP	47"	N/A	N/A	PS 0.3 GPD/SQFT
		7-45	R C MFSBK	FI S P SEXP					
P 2	LSS 5%	0-10	B SCL GR	FR SS SP SEXP	N/A	39"	N/A	N/A	PS 0.3 GPD/SQFT
		10-39	R C MFSBK	FI S P SEXP					
P 3	LSS 5% OLD PIT	0-10	B SCL GR	FR SS SP SEXP	N/A -FEW SAP	37"	N/A	N/A	PS 0.3 GPD/SQFT
		10-37	R C MFSBK	FI S P SEXP					
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	GRAVITY 25%	LP PPBPS
Site LTAR	0.3	0.3

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

COMMENTS:

RECEIVED OCT -2 2017

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Paid $350.00 #230501

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

Relocation

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

****

Contact: Adrian Pitt # 704-202-5791

Applicant Information: (PRINT CLEARLY)

Applicant Name: Keith Davis / CS&SC Address: 104 Wild Harbor Rd, Mooresville Zip: 28117

Applicant Email: Kdavis@mrcrec.com Phone: 732-433-6123 Alt. Phone: _____

Owner Name: Keith Davis Address: 104 Wild Harbor Rd, Mooresville Zip: 28117

Owner Email: Kdavis@mrcrec.com Phone: 732-433-6123 Alt. Phone: _____

****

Property Information:

Street Address: 104 Wild Harbor Rd, Mooresville NC 28117

Subdivision Name: The Point on Norman Section/Phase: 3 Map3 Lot Number: 294

Driving Directions: Brawley Sch Rd, TL on Great Point Dr, TL on Wild Harbor, lot on right corner of Great Point and Wild Harbor

****

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: _____

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: _____ 10-2-17
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

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, KEITH DAVIS, am the legal owner(s) of the property located at 134 Wild Hanson Rd. Mooresville NC 28117, identified as PIN (Parcel Identification Number) 4626-90-2394, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) ADRIAN PRUETT, CAROLINA SOIL & SEPTIC 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.

Signature of Owner(s)	Date	Signature of Witness	Date
	9/24/17		9/24/17

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

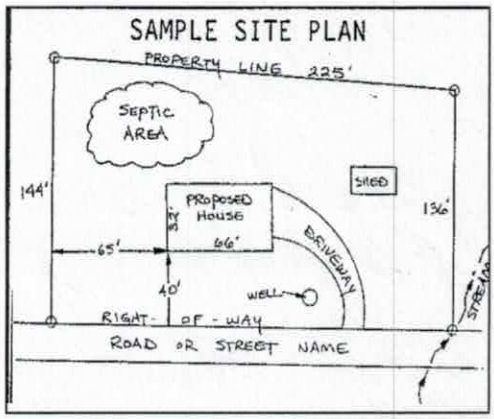
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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:

- (✓) **Property Line measurements are clearly identified**
- (✓) **All proposed structures are indicated**
- (✓) **Front and side setbacks from property line**
- (✓) **Preferred driveway location**
- (N/A) **Preferred well location**
- (✓) **Preferred septic system location**
- (✓) **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: _____ 10-2-17

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

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 132286 PIN# 4626902394 4626-90-2394 DATE 11-16-05

OWNER OR APPLICANT Zande Homes Inc PHONE: Business 375-5999 Home Shelby 363-2898

ADDRESS 909 East Blvd Charlotte, NC 28203

LOCATION Brawley School Rd TL Great Point Dr TL Wild Harbor Rd immediately on right

SUBDIVISION The Point BLOCK / SECTION III LOT 294 LOT AREA 35,825 ft² SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 944 Date 3/7/06

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200' Linear Feet 400'

No Lines 4@100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

[X] New System [ ] Repair [ ] Expansion System Type: I II III IV V VI

System Description: Gravity-25% Reduction

Repair System Description: Pump-LP-Panel Blk

Maintenance Agreement Required: [ ] Yes [X] No

[X] House/Mod. Home [ ] Mobile Home [ ] Business [ ] Other

No. Bedrooms 4 No. Persons ___ No. Employees ___

Water Supply: [ ] Individual [X] Public [X] Community

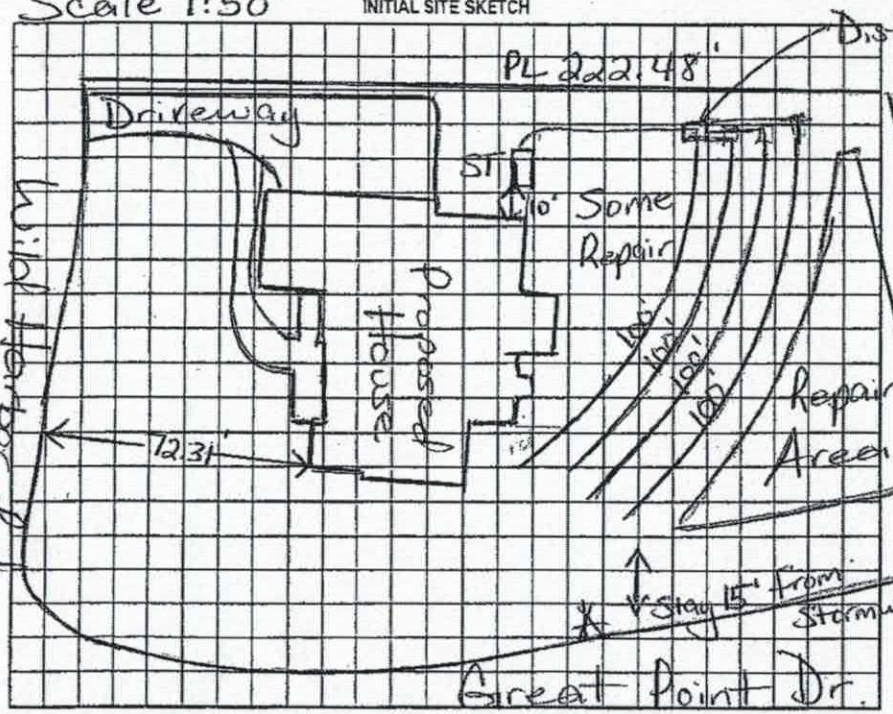
[X] Gravity [ ] Pressure [ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

Comments/Conditions: * Note: Keep drainfield 15ft+ (side slope) from stormwater drain

Comments/Conditions: ⚠ Do Not over cut house pad

Scale 1:50'

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: Sheeley Steele RS date 11/7/05 Installed by: Stanley Septic Service

Improvement Permit by: Maina H. Dolan RS date 11/16/05 Operation Permit by: Wesley Spanhour date 4/25/06

Authorization to Construct by: Maina H. Dolan RS date 11/16/05 Existing System Inspection by: _____ date _____

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

IREDELL COUNTY

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

APPLICATION NUMBER
230501
Issue Date: 09/26/2017

ZONING PERMIT
Residential

Parcel Number	Street Address	Jurisdiction
4626902394.000	104 WILD HARBOR ROAD, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: DAVIS KEITH M+CYNTHIA C	Applicant: CAROLINA SOIL SEPTIC C
Address: 104 WILD HARBOR RD MOORESVILLE, NC 28117	Address: 162 WEST B ST KANNAPOLIS, NC 28081
Phone:	Phone: 704-202-5791

Use Requested	Zone Code
SWIMMING POOL	20CU

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.820		10.00	10.00	25.00	CACL	X

Remarks:

Pools shall be located to comply with minimum setbacks requirements for accessory buildings and structures of the district in which located. Pools which are not an integral part of the principal building shall be located at least the minimum distance from the principal building necessary to comply with N. C. Building Code requirements. Pools shall be protected by a fence of equal enclosure, a minimum of four feet in height, and equipped with self-closing and positive self-latching gate to provide with hardware for permanent locking. Fencing Is NOT required for above ground pools if they are at least four (4) in height, the ladder is removed, or when NOT in use have a gate to the ladder as described above.

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: _____ Date: _____

Permit Number	116188	TOTAL FEES:	$ 77.25