IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 214799

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

PIN # 4628-63-6122

APPLICANT: Mario Gonzales APPLICANT ADDRESS: 135 South Haven Drive Mooresville, NC

SITE ADDRESS: 111 Emerald Point Lane Mooresville, NC PHONE: 704-677-3224 ALT. PHONE:

SITE DIRECTIONS: Rt 150 West toward Lake Norman → Right on Pinnacle Shores Drive → Right on Emerald Point Lane → Lot on Left

SUBDIVISION: Pinnacle Shores SECTION: 3 LOT # 44 LOT AREA: 1.03 acres DESIGN FLOW: 600 gal/day L.T.A.R.: 0.30

Septic Tank 1500 (gal) STB 780 Date 4-19-2019
Pump Tank — (gal) PT — Date —
Pump Make — Model — Serial # —
Nitrification Fields 1 # Lines 7 Linear Ft: 350
Trench Width 24" Max. Trench Bottom Depth 36" [high side] Gravel Depth —

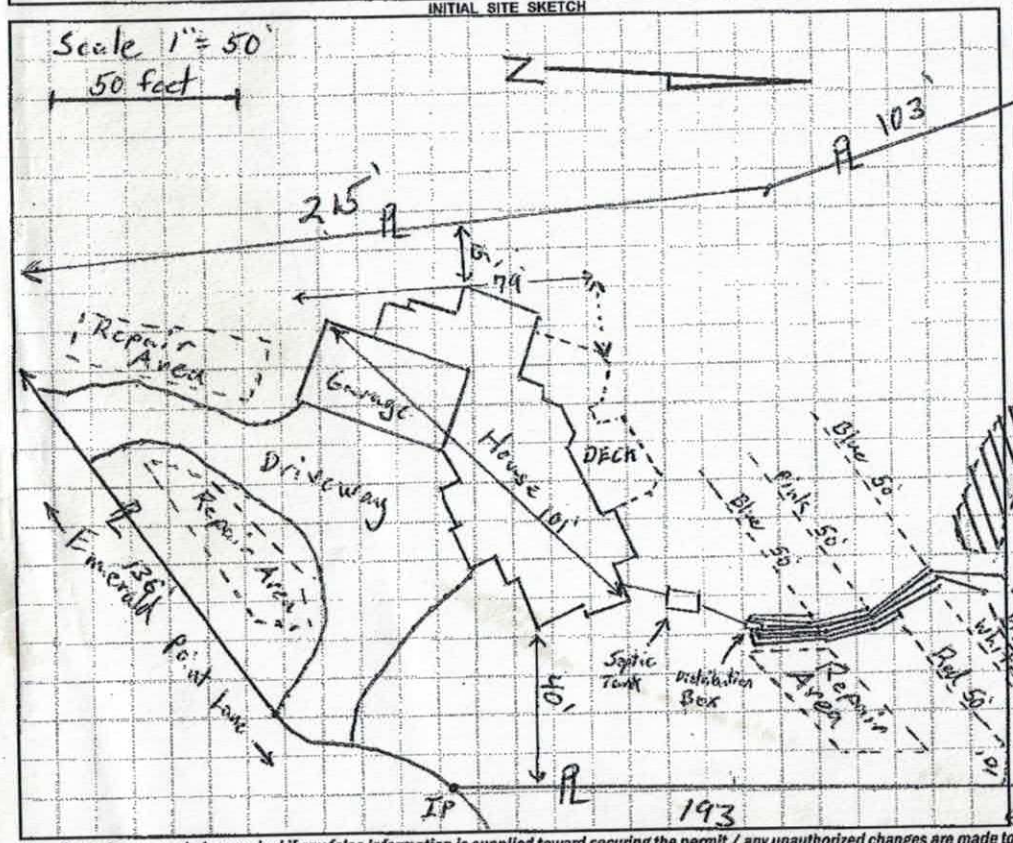
☒ New System ☐ Repair ☐ Expansion System Type: I II ☒ III IV V VI
System Description: 50% Reduction - PPBPS - Parallel Distribution
Repair System Description: LP-PPBPS (50% Reduction)
Maintenance Agreement Required: ☐ YES ☒ NO
☒ GRAVITY ☐ PRESSURE

☒ Residence ☐ Business ☐ Other ☐ Slab ☒ Basement w/plumbing
No. Bedrooms 5 No. Persons 10 No. Employees — ☐ Crawl Space ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☒ Community

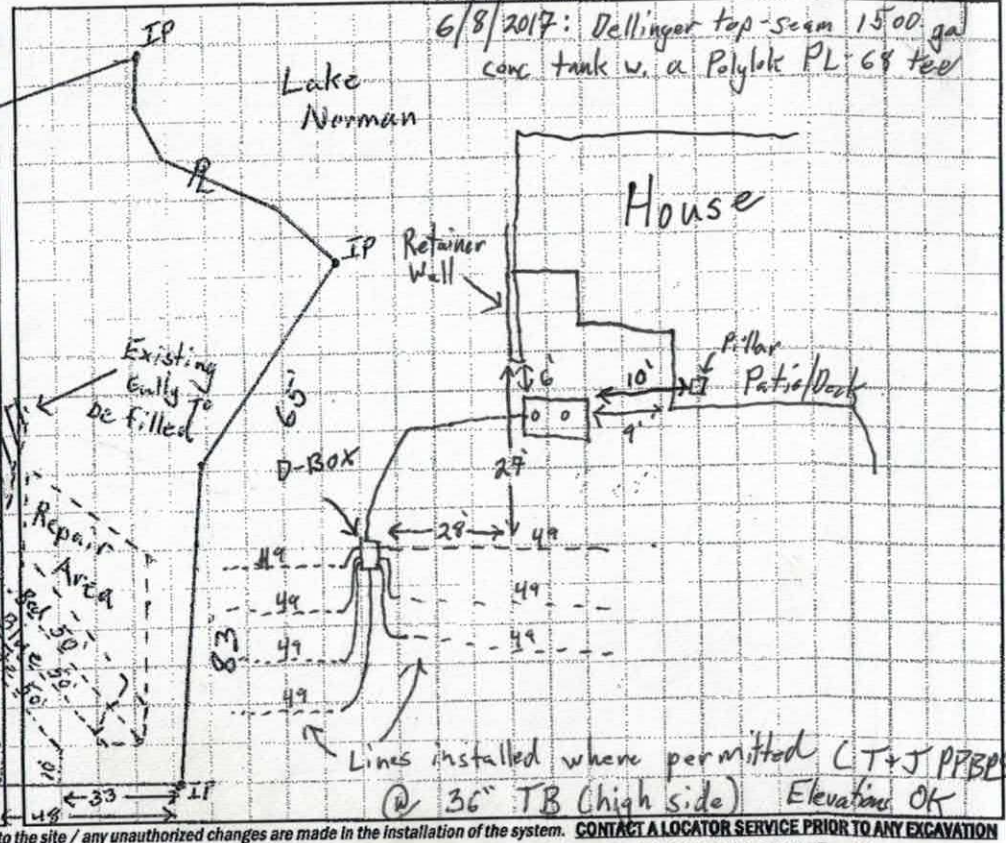
Comments / Conditions: Follow all N.C. septic rules. Recommend pumping septic tank every 3-5 years.

INITIAL SITE SKETCH



AS BUILT SKETCH

6/8/2017: Dellinger top-seam 1500 gal conc tank w. a Polylok PL-68 tee



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: Audra Bodmer Date: 5-4-16 Installed by: Richard Abernathy

IMPROVEMENT PERMIT by: Thomas D. Shuck Date: 4-25-2016 OPERATION PERMIT by: Tom Shuck Date: 6/8/2017

AUTHORIZATION TO CONSTRUCT by: Thomas D. Shuck Date: 4-26-2016 Existing System Inspected by: Date:

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

* Page 2

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 214799

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

PIN # 4628-63-6122

APPLICANT: Mario Gonzales APPLICANT ADDRESS: 135 South Haven Drive Mooresville, NC

SITE ADDRESS: 111 Emerald Point Lane Mooresville, NC PHONE: 704-677-3224 ALT. PHONE:

SITE DIRECTIONS: Rt 150 West toward Lake Norman → Right on Pinnacle Shores Drive → Right on Emerald Point Lane → Lot on Left

SUBDIVISION: Pinnacle Shores SECTION: LOT # 44 LOT AREA: 1.03 acres DESIGN FLOW: 600 gal/day L.T.A.R.: 0.30

Septic Tank	1500 (gal)	STB	780	Date	4-19-2017		
Pump Tank	— (gal)	PT	—	Date	—		
Pump Make	—	Model	—	Serial #	—		
# Nitrification Fields	1	# Lines	7	Linear Ft:	350		
Trench Width	24"	Max. Trench Bottom Depth	36" [high side]	Gravel Depth	—		

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

System Description: 50% Reduction - PPBPS - Parallel Distribution

Repair System Description: LP-PPBPS (50% Reduction)

Maintenance Agreement Required: ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

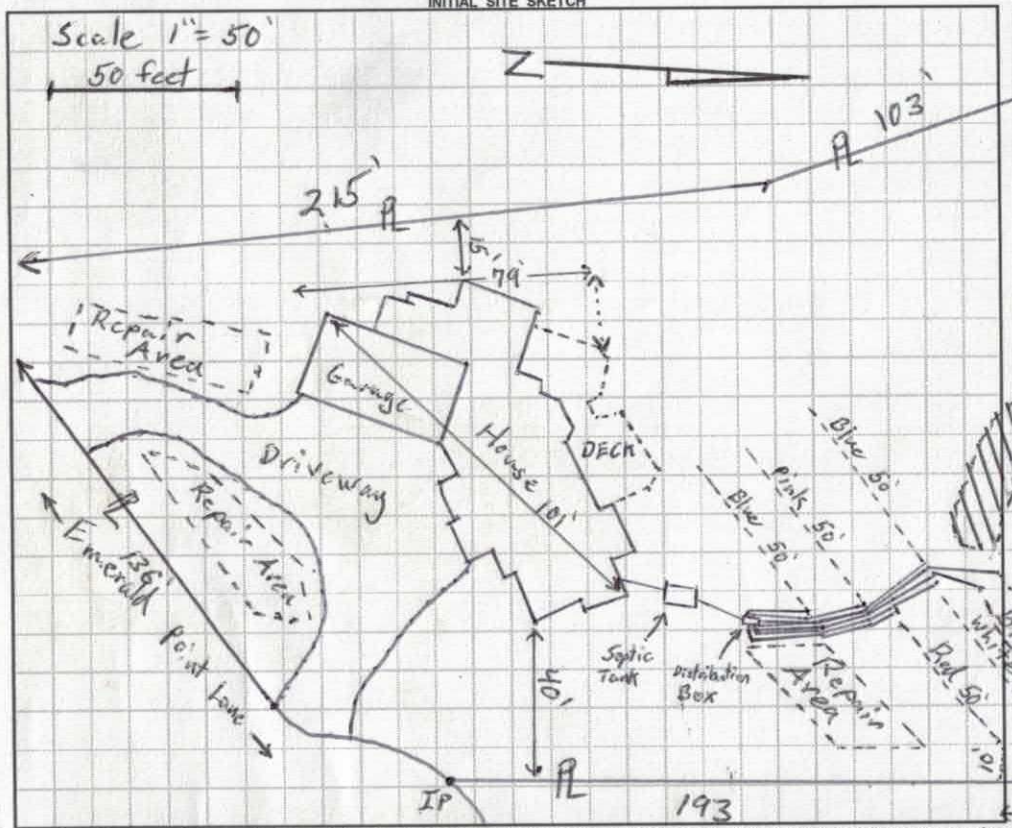
☒ Residence ☐ Business ☐ Other ☐ Slab ☒ Basement w/plumbing

No. Bedrooms 5 No. Persons 10 No. Employees — ☐ Crawl Space ☐ Basement w/o plumbing

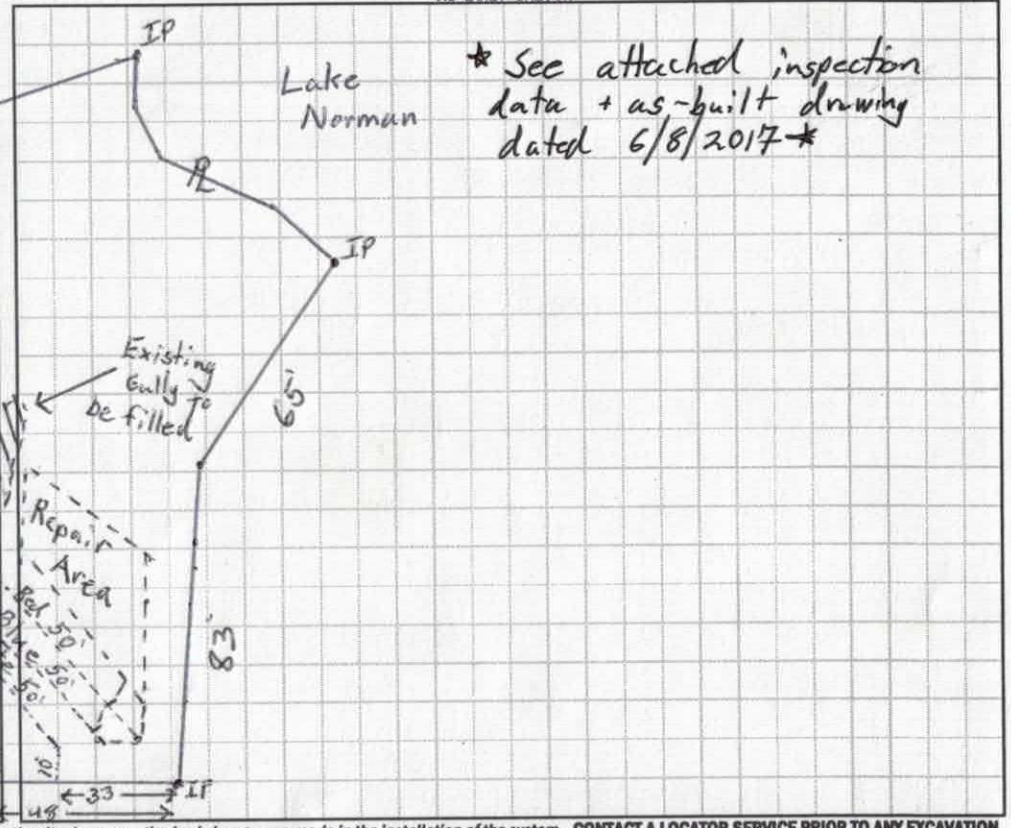
Water Supply: ☐ Private ☐ Public ☒ Community

Comments / Conditions: Follow all N.C. septic rules. Recommend pumping septic tank every 3-5 years.

INITIAL SITE SKETCH



AS BUILT SKETCH



* See attached inspection data + as-built drawing dated 6/8/2017 *

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.*

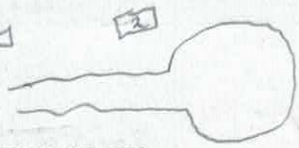
Owner / Applicant Signature: Audra Barbour Date: 5-4-16 Installed by: Richard Abernathy

IMPROVEMENT PERMIT by: Thomas D. Shuck Date: 4-25-2016 OPERATION PERMIT by: Tom Shuck Date: 6/8/2017

AUTHORIZATION TO CONSTRUCT by: Thomas D. Shuck Date: 4-26-2016 Existing System Inspected by: Date:

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

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH



Sheet 1 of 3
PROPERTY ID #:
COUNTY: Iredell

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

OWNER: Mario Gonzales
ADDRESS: 111 Emerald Point Lane Mooresville, NC
PROPOSED FACILITY: 5 Bedroom House
LOCATION OF SITE: 111 Emerald Point Lane Mooresville

APPLICATION DATE 11-10-2015
DATE EVALUATED: 12-15-15
PROPERTY SIZE: 1.03 acres
PROPERTY RECORDED: Yes

PROPOSED DESIGN FLOW (.1949): 600 gal/day

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	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	Shoulder 7% Primary	0-23	Clay weak SBK	Slightly Firm, SS, Sp, Sap	some sap inclusions 28"+	35	-	-	PS 0.3
		23-35	Clay Loam weak SBK	Friable, SS, Sp, Sap					
		35-64	Loamy massive saprolite	well drained + Friable					
2	Shoulder 7% Primary	0-30	Clay weak SBK	Slightly Friable, SS, Sp, Sap	some SAP inclusions 23"+	37	-	-	PS 0.3
		30-37	clay Loam weak SBK	Friable, SS, Sp, Sap					
		37-74"	massive loamy Saprolite	Very Friable, well drained					
3	Shoulder	0-34	Clay strong SBK	Slightly Firm, SS, Sp, Sap	-	24"	-	-	Unsuitable Area [shallow to rock]
		34-63"	massive loamy Saprolite	Friable + well drained					
		* Rock	in Hole 24" → Base						
4	shoulder 7% Repair	0-36	Clay medium SBK	Slightly Firm, SS, Sp, Sap	some SAP inclusions 38"+	47"	-	-	PS 0.3
		36-47"	Clay Loam weak SBK	Friable, SS, Sp, Sap					
		47-62	Loamy massive Saprolite	Friable + well drained					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	338	333
System Type(s)	PPBPS	PPBPS
Site LTAR	0.3	0.3

OTHER FACTORS (.1946): —
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Tom Shuck
OTHER(S) PRESENT:

COMMENTS: Fill in swale adjacent smaller repair area below house.

Repair Area

L1 (Red) : 65'

L2 (Blue : 60'

L3 (pink/white) : 47'

L4 (red) : 44'

216' [house side PPBPS]

35

86 = 19.11 panels

119 = 26.44 panels

133 = 29.55

51 =

50

52

526 + 216 = 742'

19
26
+ 29
74

L1 (Blue) = 35
L2 (Red) = 86
L3 (white) = 119

L4 (Yellow) = 137
L5 (Blue) = 51
L6 (Red) = 50
L7 (white) = 52

526

5BR = 333
4BR = 266
3BR = 200

727 conv 100%

SOIL/SITE EVALUATION

(Continuation Sheet)

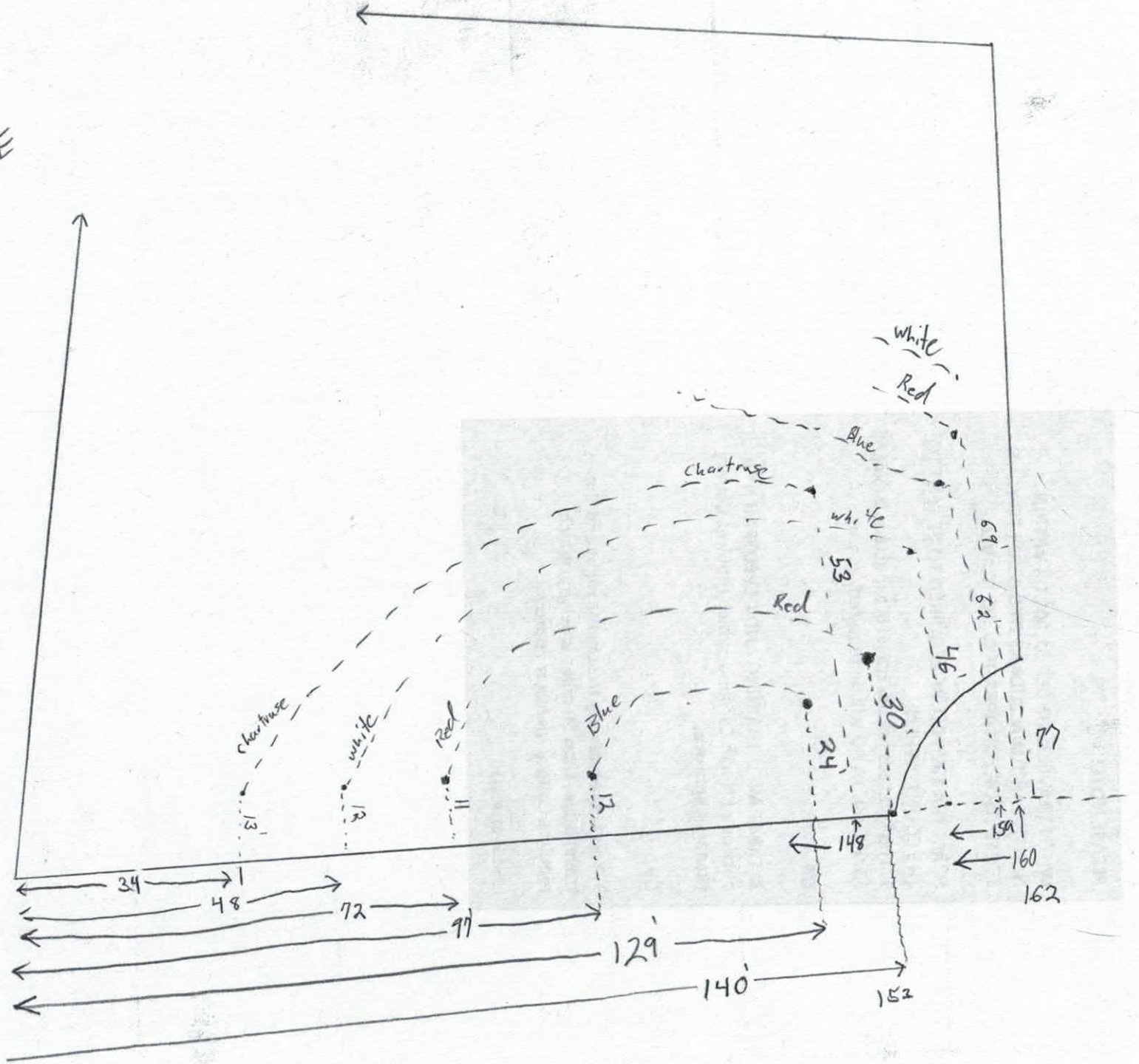
DEPARTMENT OF ENVIRONMENT
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

PROPERTY ID #:
DATE OF EVALUATION: 12-15-15
COUNTY: Iredell

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
5 Beside House	side Slope 8% Repair	0-18"	Loam weak sbk	Friable, SS, Sp, Sexp	some saprolite inclusions 31+	56"	—	—	0.30
		18-56	Clay Loam weak sbk	Friable, SS, Sp, Sexp					
		56-62	Saprolite Loamy + massive	Friable + Moderately Dispersed					
6	Shoulder	0-8	Clay medium ABK	Firm Slightly Firm, SS, Sp, Sexp	—	28"	—	—	0.3
		8-28	Clay Loam weak sbk	Friable, SS, Sp, Sexp					
		@28	Rock/Ledge						
7	Shoulder	0-14	Clay medium ABK	Firm (slightly) SS, Sp, Sexp	—	26"	—	—	0.3
		14-26"	Rock + Clay Loam + Saprolite Inclusions						

COMMENTS:

NOT
TO
SCALE


White
Red
Blue
Chartruse
wh. yl.
53'
Red
69'
22'
76'
30'
24'
77'
Chartruse
White
Red
Blue
13'
13'
11'
12'
148'
159'
160'
162
34'
48'
72'
97'
129'
140'
152

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

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

Blue 50'

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

OWNER: Mario Gonzalez
APPLICATION DATE 3-7-16
ADDRESS: 111 Emerald Point Lane
DATE EVALUATED: 4-8-16
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
LOCATION OF SITE: 111 Emerald Point Lane
PROPERTY RECORDED: _____
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	Shoulder/ Side slope 15%	0-6	Loam/Clay Loam v. weak SBK	Friable, SS, Sp, Sexp	—	48	—	—	0.3 PS
		6-30	Clay weak SBK	Slightly Firm, SS, Sp, Sexp					
		30-48	Clay Loam weak SBK	Friable, SS, Sp, Sexp					
2	Side Slope 16%	0-38"	Clay Loam weak SBK	Slightly Friable, SS, Sp, Sexp	—	38	—	—	0.3 PS Pit needed
		38-48"	Saprolite (massive) Loamy	Friable + decently drained					
4-13-16 B 2(2) (Pit)	Side Slope 16%	0-8	Loam weak SBK	Slightly Friable, SS, Sp, Sexp	—	38'	—	—	0.3
		8-28	Clay - Clay Loam weak SBK	Slightly Friable, SS, Sp, Sexp					
		38-64"	Loamy Saprolite (massive)	Friable + Well drained					
		28-38"	clay loam weak SBK	Slightly Friable, SS, Sp, Sexp					
			misc. sized boulders throughout column						
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	Yes 50% PPBPS 350 L.F.	
System Type(s)	50% reduction	
Site LTAR		

OTHER FACTORS (.1946): —
SITE CLASSIFICATION (.1948): RS
EVALUATED BY: Tom Shuck
OTHER(S) PRESENT: _____

COMMENTS: _____

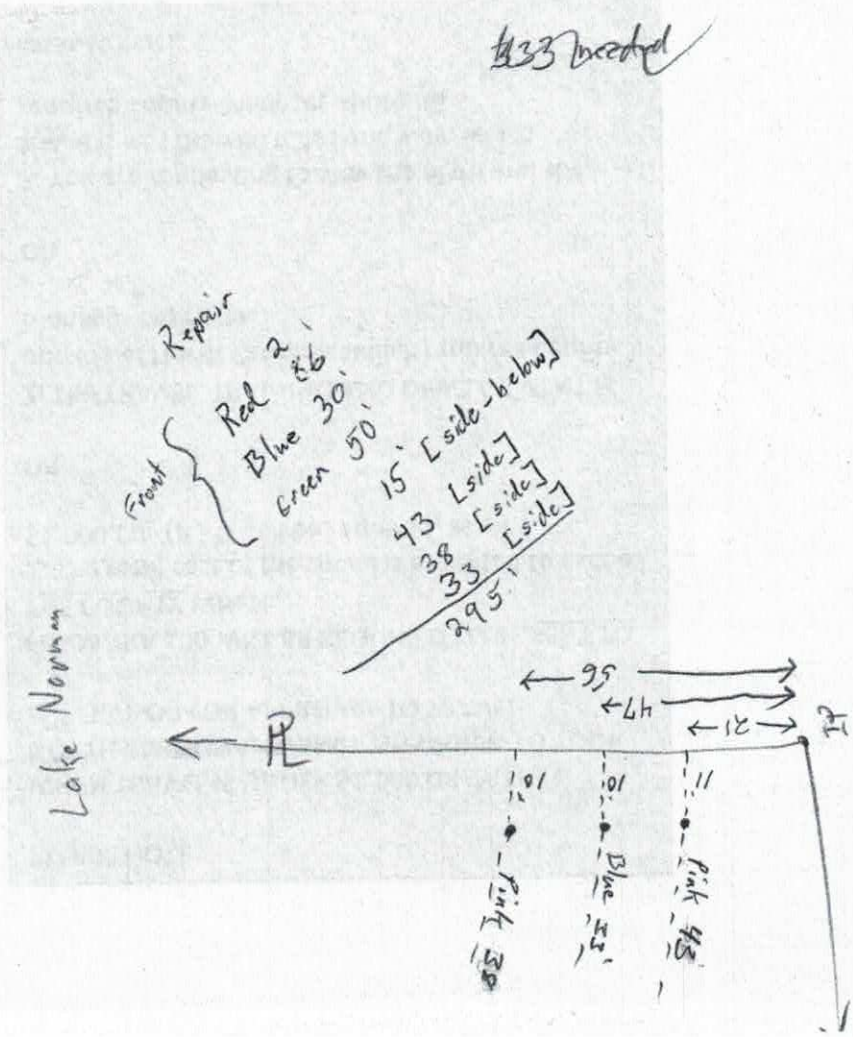
333 needed

65 → 15 repair
60
50
50
50
50
+ 50
375

15
35
50
50
150
183
- 114
69
- 38
21

1
33 blue
38 pink
43 pink
+
114

~~333~~ needed



ENR/DEH

N-SITE WASTEWATER SECTION

COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

APPLICATION DATE 11-10-2015

OWNER: Mario Gonzales
ADDRESS: 111 Emerald Point Lane Mooresville
PROPOSED FACILITY: 6 BR House PROPOSED DESIGN FLOW (.1949): 720 gal/day
LOCATION OF SITE: 111 Emerald Point Lane Mooresville, NC
WATER SUPPLY: ☐ Private ☒ Public ☐ Well ☐ Spring ☒ Other Community Well
EVALUATION METHOD: ☒ Auger Boring ☐ Pit ☐ Cut TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

DATE EVALUATED: 12-3-2015
PROPERTY SIZE: 1.03 Acres
PROPERTY RECORDED: Yes

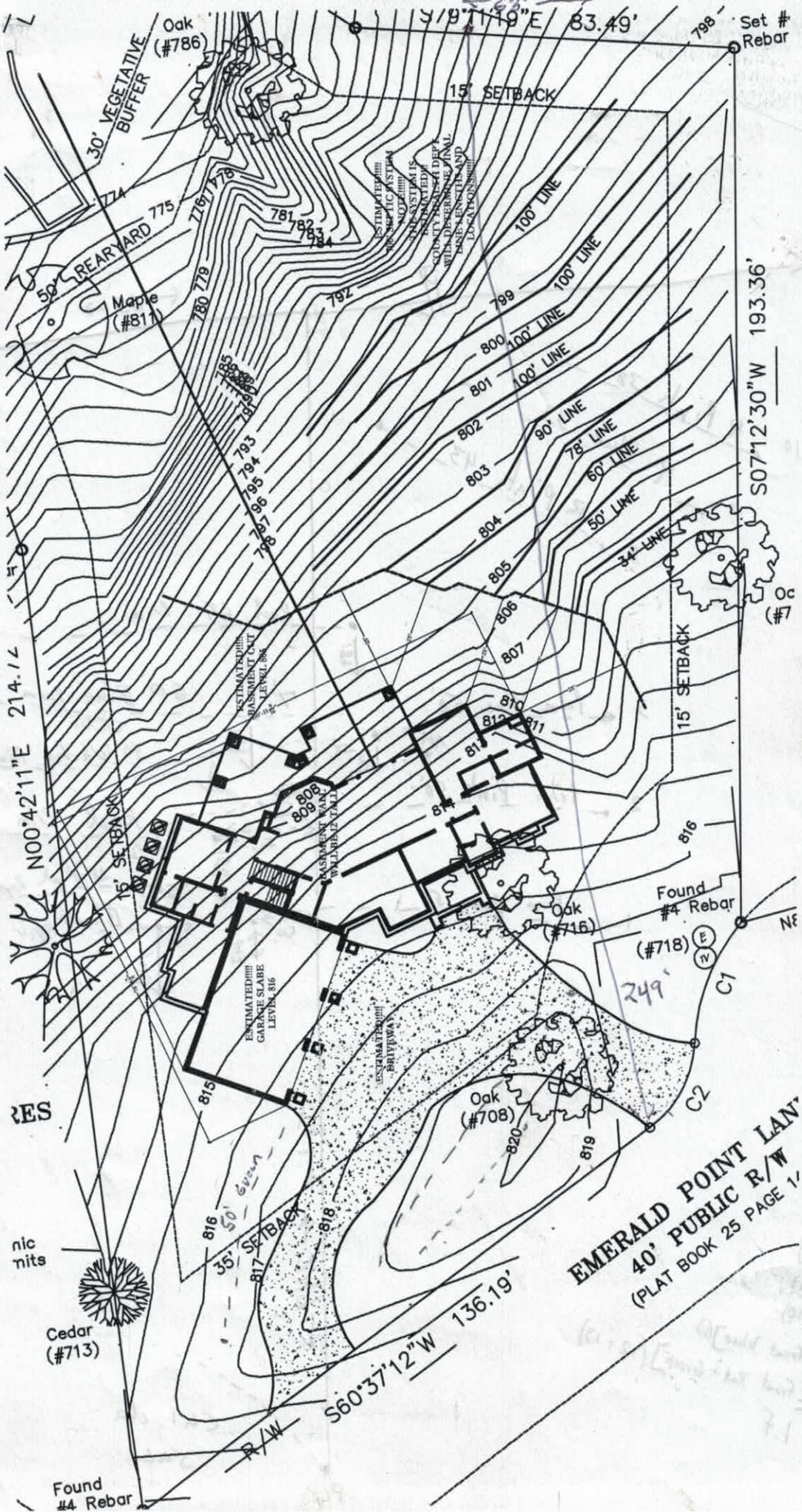
PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	8% Sloping Shoulder Slope	0-17"	Clay weak SBK	Slightly Firm, SS, SP, SOP	some saprolite inclusions	43"			PS 0.3
		17-43"	Clay Loam weak SBK	Friable, SS, SP, SOP					
		43"-48"	Loamy Massive Saprolite	Friable + Well Drained					
2	8% Shoulder Slope	0-10	Clay Weak SBK	Slightly Firm, SS, SP, SOP		10"			PS 0.4 Pit needed
		10-48	Sandy/gravelly massive saprolite	Friable + well drained					
3	35↓ 8% Shoulder side-slope	0-17"	Clay weak SBK	Slightly firm, SS, SP, SOP	mica flakes @ 19" saprolite SAP inclusions @ 30+"	40+			0.4 Pit Needed
		17-40"	Clay Loam weak SBK	Slightly Firm SS, SP, SOP					
		40-48"	Sandy/gravelly massive saprolite	Friable, Well Drained					

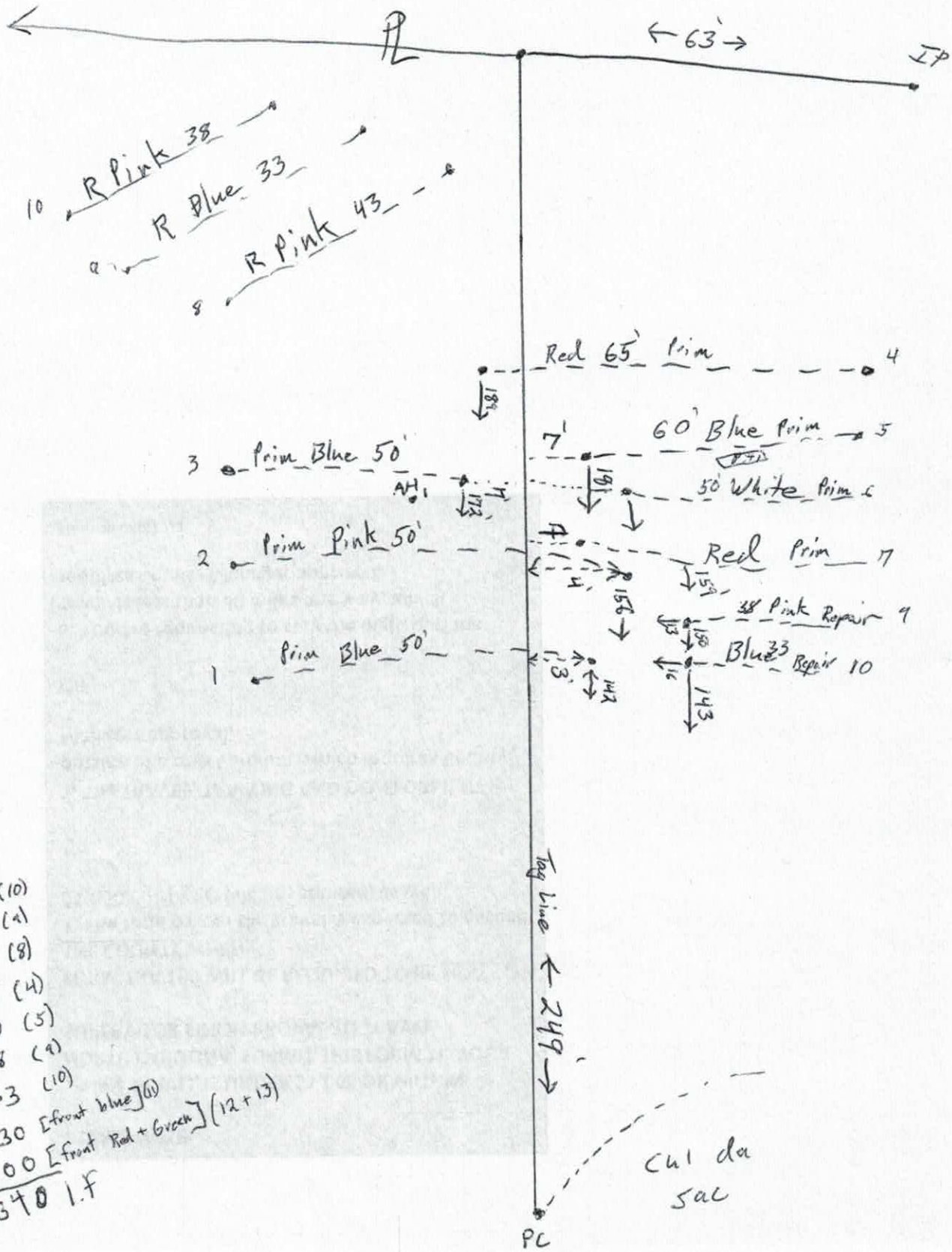
DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: _____
OTHER(S) PRESENT: _____

COMMENTS: _____

Survey Nail
AH2
32
AH3
35
AH1
25
15'
25'
52'
140'
117'
PC
186' from PC to PC
10:00 - 1:30


Oak
(#786)
30' VEGETATIVE BUFFER
15' SETBACK
Set #
Rebar
50' REARYARD
Maple
(#811)
100' LINE
90' LINE
78' LINE
60' LINE
50' LINE
34' LINE
S07°12'30"W 193.36'
N00°42'11"E 214.17
15' SETBACK
ESTIMATED
BASEMENT CUT
LEVEL 806
ESTIMATED
BASEMENT FLOOR
WALKOUT LEVEL
ESTIMATED
GARAGE SLABE
LEVEL 816
ESTIMATED
DRIVEWAY
Found
#4 Rebar
Oak
(#716)
(#718)
249'
C1
C2
Oak
(#708)
35' SETBACK
50' Swing
EMERALD POINT LAN
40' PUBLIC R/W
(PLAT BOOK 25 PAGE 1
Cedar
(#713)
S60°37'12"W 136.19'
R/W
Found
#4 Rebar



3
38 (10)
33 (9)
43 (8)
15 (4)
10 (5)
38 (9)
33 (10)
30 [front blue] (11)
+ 100 [front Red + Green] (12+13)
340 l.f

RECEIVED MAR 7 - 2016

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

Comprehensive Relayout

(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)

Paid $500.00

#214799

1. **APPLICATION FOR:** (X) Improvement Permit ( ) Authorization To Construct ( ) Existing System Inspection

2. **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 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 #
MARIO GONZALEZ	135 SOUTH HAVEN DRIVE	704 892-7029	704-677-3224
Owner Name	**Mailing Address**	**Home Phone #**	**Alternate Phone #**
MARIO GONZALEZ	135 SOUTH HAVEN DRIVE	SAME AS ABOVE	704-677 3224

4. **Property Information:**

Street Address	Subdivision Name	Section/Phase and Lot Number
111 EMERALD POINT LANE	PINNACLE SHORES	LOT 44.

Driving Directions: 150 WEST TOWARDS LAKE NORMAN - RIGHT ONTO PINNACLE SHORES DR. RIGHT ONTO EMERALD POINT LANE → LOT 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
(X) Repair To Failing Septic System due to _____
( ) Other _____

Maximum Number of Bedrooms 5
Maximum Number of Occupants 4
If Expansion, Current Number of Bedrooms ___

( ) Crawl Space Foundation?
(X) Concrete Slab Foundation?
(X) 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 ( ) Existing Well (X) 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 (X) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other _____

Wants gravity system

8. **Please Answer The Following** ( ) Yes ( ) No Does the site contain any jurisdictional wetlands?
   To The Best of Your Ability: ( ) Yes ( ) No Is any non-domestic sewage (i.e. industry) 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.

9. **Signature:** _____ 3-7-2016
   Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

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

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

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

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, Anabel Gonzalez, am the legal owner(s) of the property located at 111 Emerald Point Lane, identified as PIN (Parcel Identification Number) 4628-63-6122, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**)

* Audra Barbour, New River Construction, 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] _____
Signature of Owner(s) Date

Audra Barbour 5/4/16
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

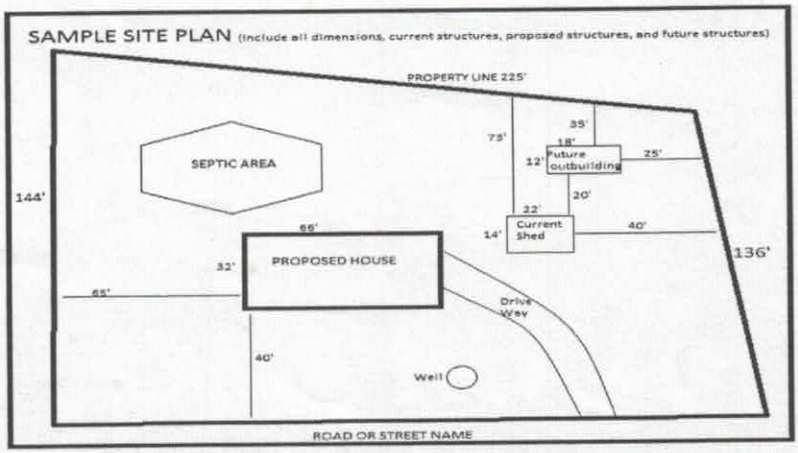
_____ Front and side setbacks from property line… **_____ Preferred driveway location and configuration, preferred well location…**

_____ 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 Attach Site Plan

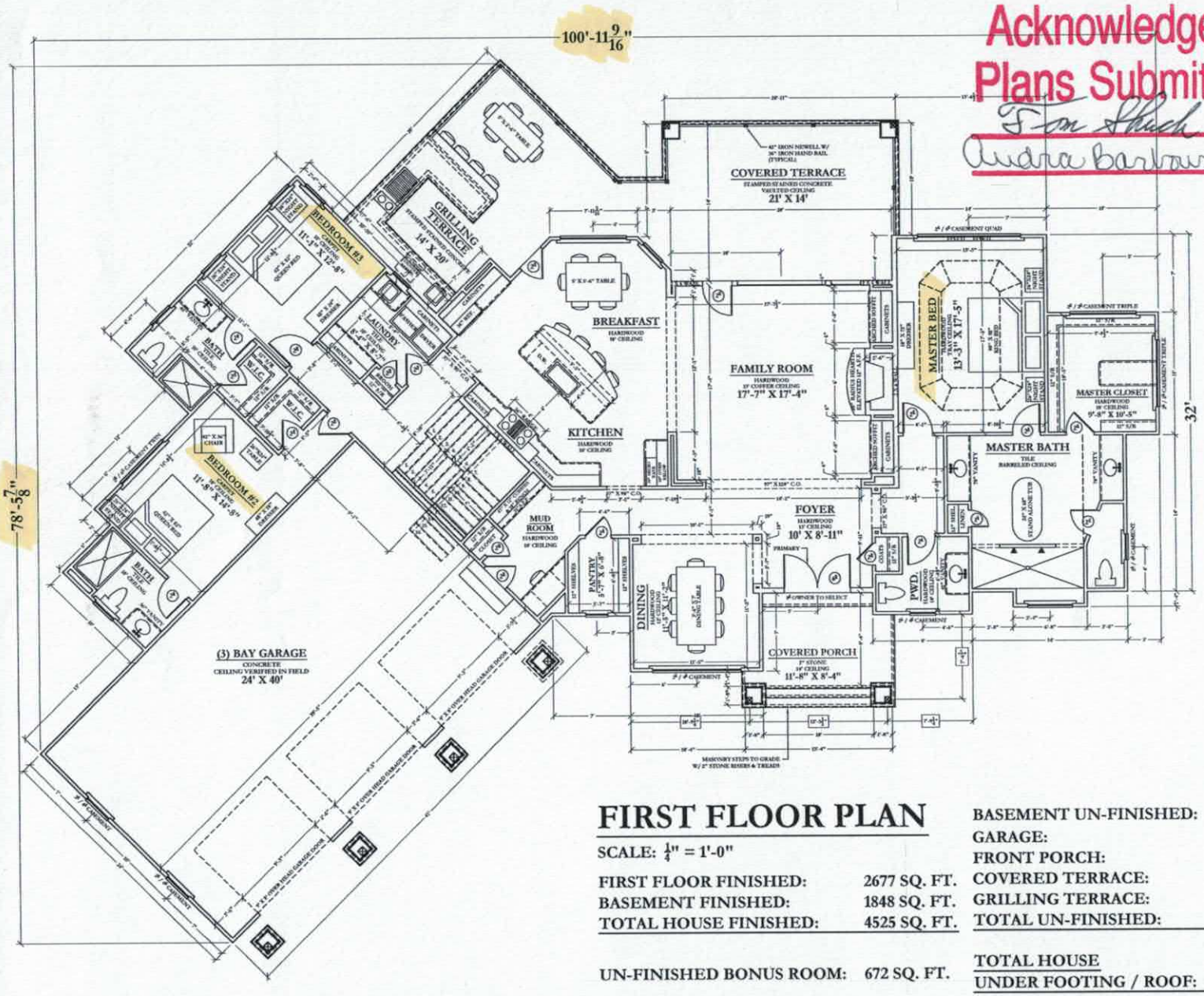
Signature: _____

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

3-7-2016

DATE

Acknowledgement Of
Plans Submittal ONLY!
Tom Shuck Date 4-26-16
Andra Barbour Date 5-4-16



FIRST FLOOR PLAN

SCALE: $\frac{1}{4}$" = 1'-0"

FIRST FLOOR FINISHED:	2677 SQ. FT.
BASEMENT FINISHED:	1848 SQ. FT.
TOTAL HOUSE FINISHED:	4525 SQ. FT.
UN-FINISHED BONUS ROOM:	672 SQ. FT.

BASEMENT UN-FINISHED:	829 SQ. FT.
GARAGE:	945 SQ. FT.
FRONT PORCH:	102 SQ. FT.
COVERED TERRACE:	290 SQ. FT.
GRILLING TERRACE:	306 SQ. FT.
TOTAL UN-FINISHED:	2472 SQ. FT.
TOTAL HOUSE UNDER FOOTING / ROOF:	6997 SQ. FT.

General Notes

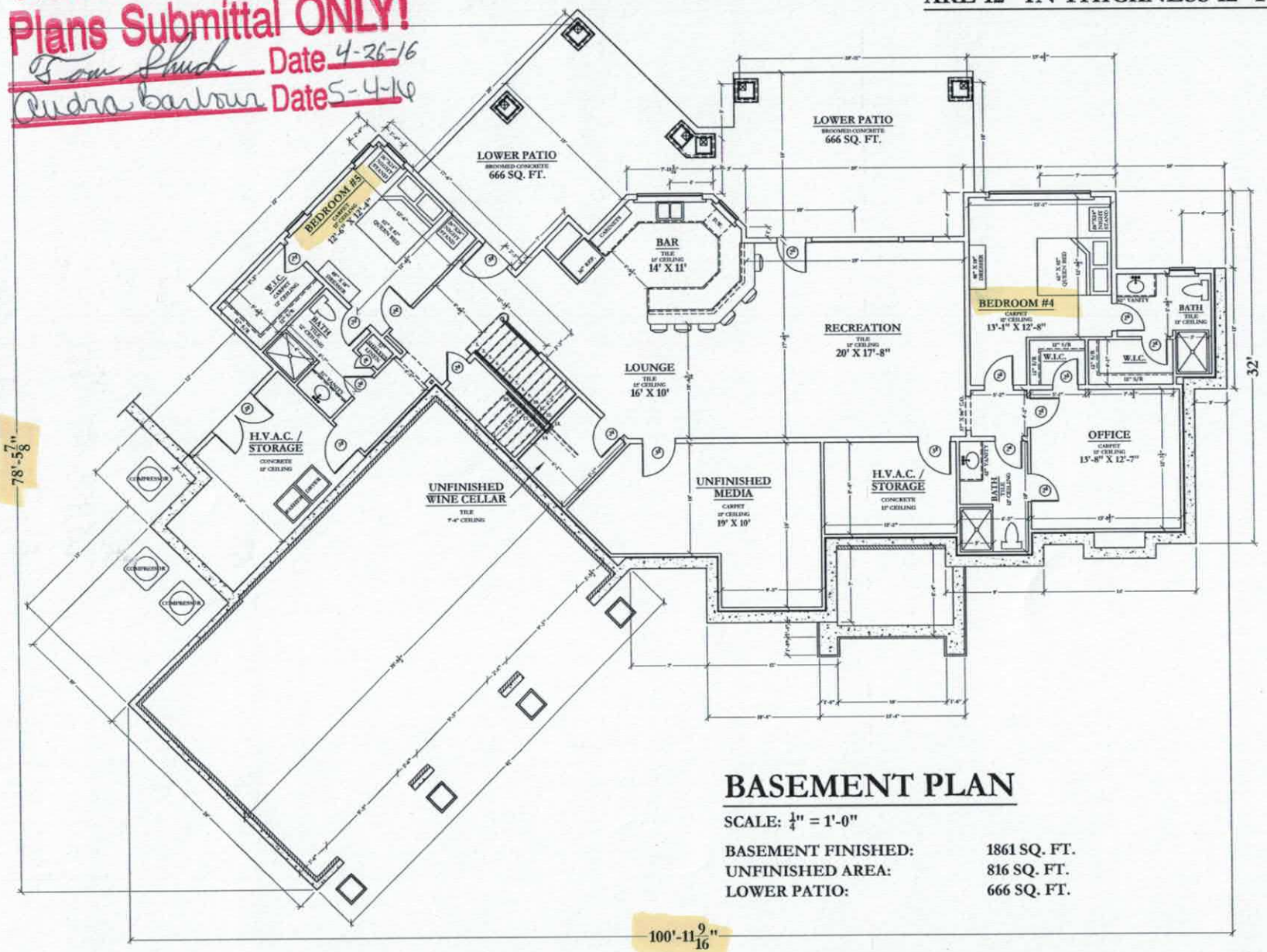
"The Gonzalez Residence"
Lot #44 Emerald Point Ln., Mooresville, Iredell County, NC 28117

McFarland Design Group Inc.
342 Highway 16 North, Denver, NC 28037
980-722-1726
www.mcfarlanddesign.com

First Floor Plan
Date 4-14-2016
Scale 1/4" = 1'-0"
Sheet No. Sub No.
Sheet A-4

Acknowledgement Of
Plans Submittal ONLY!
Tom Shuck Date 4-26-16
Cindra Barbour Date 5-4-16

NOTE: FOUNDATION WALLS ARE 12" IN THICKNESS 12' TALL



BASEMENT PLAN

SCALE: 1/4" = 1'-0"

BASEMENT FINISHED:	1861 SQ. FT.
UNFINISHED AREA:	816 SQ. FT.
LOWER PATIO:	666 SQ. FT.

General Notes

McFarland Design Group as Robert S. McFarland assumes no liability for any house constructed from this plan. Reuse of these plans without written permission and retention of the designer's seal is an illegal act. Changes made from these plans without consent of the McFarland Design Group are unauthorized and shall relieve the designer of responsibility for all or those drawings shall have precedence over scaled dimensions, contractor shall verify and be responsible for all dimensions and conditions on the job.

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Basement Plan
Date 4-16-2016
Scale 1/4" = 1'-0"
Drawn By: Rob M.
Sheet A-3