# IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625

PERMIT # 235352

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

PIN # 4628906714

APPLICANT/OWNER: Mike Marshburn

APPLICANT ADDRESS: 149 Hermance Ln.

SITE ADDRESS: 149 Hermance Ln. Mooresville, NC

PHONE: 704-576-3887 (Athanas) ALT PHONE

SITE DIRECTIONS: NC 150 W → R on Waddle → R on Hermance → lot on L

SAP CONTROLLED: ☑ YES ☐ NO

SUBDIVISION: CL+T SECTION: 11 LOT # 1129 LOT AREA: 2.23ac DESIGN FLOW: 480gpd L.T.A.R.: .3 (.125 repair)

Septic Tank existing 1000 gal STB 875 Date 2-12-16

Pump Tank existing 1000 gal PT 302 Date 2-3-16

Pump Make ____ Model ____ Serial # ____

# Nitrification Fields 1 # Lines 5 Linear Ft 270'

Trench Width 24" Trench Bottom Depth (Low side) 31"/36" high side Gravel Depth ____

☑ New System ☐ Repair ☐ Expansion System Type: I II III (IV) V VI

System Description: LP PPBPS

Repair System Description: drip

Maintenance Agreement Required: ☑ YES ☐ NO

☐ GRAVITY ☑ PRESSURE

☑ Residence No. Bedrooms 4

☐ Business No. Persons 8

☐ Other No. Employees ____

☐ Slab ☐ Crawl Space

☑ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions: The purpose of this permit is a relocation. The applicant wants to grade the septic area + wants new system. *Do not install in fill area*

3/16" hole drilled 6/13/18 MD

6/13/18 Checked lines to supply tank

INITIAL SITE SKETCH

See attached site plan by Michael Athanas + Associates

AS BUILT SKETCH

Installed as Drawn

Authorization to Construct
FOR SEPTIC FINAL INSPECTION
CALL 704-664-3703

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: 5-9-18 Installed by: Lago Vista #5240

IMPROVEMENT PERMIT by: Kayla Wilson Date: 5-9-18 OPERATION PERMIT by: Carla C. Cave Date: 6/14/18

AUTHORIZATION TO CONSTRUCT by: Kayla Wilson Date: 5-9-18 Existing System Inspected by: ____ Date: ____

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inspector to confirm your inspection time.

# IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 235352

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

PIN # 4628906714

APPLICANT/OWNER: Mike Marshburn APPLICANT ADDRESS: 149 Hermance Ln.

SITE ADDRESS: 149 Hermance Ln. Mooresville, NC PHONE: 704-576-3887 (Athanas) ALT PHONE —

SITE DIRECTIONS: NC 150 W → R on Waddle → R on Hermance → lot on L SAP CONTROLLED: ☑ YES ☐ NO

SUBDIVISION: CL+T SECTION: 11 LOT # 1129 LOT AREA: 2.23ac DESIGN FLOW: 480gpd L.T.A.R.: .36 (.125 repair)

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Septic Tank existing 1000 (gal) | STB 825 | Date 2-12-16 | ☑ New System ☐ Repair ☐ Expansion | System Type: I II III (IV) V VI | ☑ Residence | No. Bedrooms 4 | Water Supply |
| Pump Tank existing 1000 (gal) | PT 302 | Date 2-3-16 | System Description: LP PPBPS | | ☐ Business | No. Persons 8 | ☑ Private |
| Pump Make — | Model — | Serial # — | Repair System Description: drip | | ☐ Other | No. Employees — | ☐ Public |
| # Nitrification Fields 1 | # Lines 5 | Linear Ft 270' | Maintenance Agreement Required: ☑ YES ☐ NO | | ☐ Slab | ☐ Crawl Space | ☐ Community |
| Trench Width 24" | Trench Bottom Depth (Low side) 31"/36" highside | Gravel Depth — | ☐ GRAVITY ☑ PRESSURE | | ☑ Basement w/ plumbing | ☐ Basement w/o plumbing | |

Comments / Conditions: The purpose of this permit is a relocation. The applicant wants to grade the septic area + wants new system. *Do not install in fill area*

3/16" hole drilled 6/13/18 MD
6/13/18 Checked lines & supply line

INITIAL SITE SKETCH

See attached site plan by Michael Athanas + Associates

AS BUILT SKETCH

Installed as Drawn

*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: 5-9-18 Installed by: Lago Vista #5240

IMPROVEMENT PERMIT by: Kayla Watson Date: 5-9-18 OPERATION PERMIT by: _____ Date: _____

AUTHORIZATION TO CONSTRUCT by: Kayla Watson Date: 5-9-18 Existing System Inspected by: _____ Date: _____

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inpsector to confirm your inspection time.

APPROVED MAY X 9 2018

North

Scale
1" = 40'
50'
0'
30'
60'
100'

N35°05'44"W 139.28'

MARK IN PAVEMENT

R/W

15' SETBACK

50' BUFFER FROM THE 760 CONTOUR LINE

FLOODLINE

AB 7

House

35' FRONT SETBACK

L=123.68'
R=50.00'
(CHORD BEARING)
N71°45'28"W
94.47'

St

Pt-27.2'

Drive

#5

1/2"

#3 REBAR

HC
16.4'

Retaining Wall

S79°46'29"E 73.67'

60' R/W PB. 19 PG. 36

AB 6

Drainage

1/2" PIPE

N53°26'01"W 205.58'

Existing System Area

35' REAR SETBACK

AB 5

Pit 7

Repair Area

(BASE BEARING)
S85°08'56"E
120.99'

LOT 1129
2.23 AC.

AB 1

Pit 1

35' FRONT SETBACK

#5 REBAR

Well

Fill Area

AB 4

#4 REBAR

Pit 2

Pit 3

35' FRONT SETBACK

15' SIDE SETBACK

BM 10.4'

S34°38'09"E
100.00'

S49°05'16"W
173.33'

#4 REBAR

N55°28'23"E
52.85'

15' SETBACK

Neighbor's Septic

R/W

AB 3

Pit 4

AB 6

B5

W4

P3

V2

O1

CVB

Pit 5

Repair Area

AB 2

Line-Ligth-Elev
O1 - 40' - 0.2'
Y2 - 45' - 1.5'
P3 - 75' - 3.7'
W4 - 60' - 5.1'
B5 - 50' - 7.6'

HERMANCE ROAD
60' PUBLIC R/W

R/W

L=66.85'
R=868.40'
(CHORD BEARING)
S47°32'13"W
66.83'

#5 REBAR

L=127.08'
R=1049.19'
(CHORD BEARING)
S42°08'37"E
127.00'

Surface Drainage

SAWYERS LANE
60' PUBLIC R/W

S48°0
6.57'

OFFICI

SU
INF
TH
G.S
WITN



**MICHAEL ATHANAS & ASSOCIATES**
**LICENSED SOIL SCIENTIST**
**561 Ennis Rd.**
**Weddington, NC 28173**
**(704) 576-3887**

**Reference: Data Sheet for 149 Hermance Ln, CL&T Sec 11, Lot 1129**
**House Footprint:** See attached plan
**Building Setbacks:** 35' front, 25' side street, 15' side, 50' lake
**Water Source:** Ex. Private well
**Number of Bedrooms/Daily Flow:** 4/480 GPD
**Proposed LTAR:** 0.3 GPD/FT2 (initial), 0.125 GPD/FT2 (repair)
**Proposed System Type:** PPBPS (9' on center)
**Proposed Repair System Type:** Pretreatment Drip Irrigation
**Distribution:** Low Pressure-CVB
**Flow per Orifice:** 0.59 GPM
**Orifice Size:** 3/16"
**System Flow:** 36.6 GPM
**Dosing Volume:** 223.2 gallons
**Pump Run Time:** 6.1 minutes
**Elevation Head:** 30.7'
**Friction Head:** 9.7'
**Pressure Head:** 2'
**Total Dynamic Head:** 42.4'
**Supply Line Length:** 310' of 2" PVC
**Septic/Pump Tank Size:** 1000/1000 gallons (existing)
**Proposed Trench Bottom:** 36"




| Line | Design Length | # of Panels | Actual Length | Elevation |
|---|---|---|---|---|
| Orange 1 | 40' | 9 | 40' | 0.2' |
| Yellow 2 | 45' | 10 | 45' | 1.5' |
| Pink 3 | 75' | 17 | 84' | 3.7' |
| White 4 | 60' | 14 | 62' | 5.1' |
| Blue 5 | 50' | 12 | 52' | 7.6' |

**Initial System:** 270'
**Repair System:** 4300+ FT2
**Pump Tank:** 27.2'
**House Corner:** 16.4'
**Benchmark:** 10.4'

APPROVED MAY X 9 2018
KW

**Comments:**
The client wants to install a new drainfield and grade the area in the current system area.

A surface swell should be installed along the property line next to the proposed new drainfield.

APPROVED MAY X 9 2018
KW

APPROVED MAY X 9 2018 KW


PROPERTY ID #: 4628906714
COUNTY: Iredell

# SOIL/SITE EVALUATION
## *for* ON-SITE WASTEWATER SYSTEM

OWNER: Michael Mashburn APPLICATION DATE
ADDRESS: 149 Hermance Ln, Mooresville, NC 28117 DATE EVALUATED:
PROPOSED FACILITY: 4 bdrm PROPOSED DESIGN FLOW (.1949): 480 GPD PROPERTY SIZE: 2.23 AC
LOCATION OF SITE: 149 Hermance Ln, CL&T Sec 11 Lot 1129 PROPERTY RECORDED: 5/8/1987
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) | | 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 | |
| PIT 1 | LS 8% | 0-6 | FILL | | N/A | 43" | N/A | N/A | PS 0.25-0.3 NOT IN SYSTEM AREA |
| | | 6-12 | Br SL WSBK | FR SS SP SXP | | | | | |
| | | 12-22 | Br SCL WSBK | FR SS SP SXP | | | | | |
| | | 22-43 | YR C SBK | FR SS SP SXP | | | | | |
| | | 43-60 | R SC M | FI SS SP SXP | | | | | |
| PIT 2 | LS 6% | 0-12 | FILL | | Few YB | 60" | N/A | N/A | PS 0.3-0.25 NOT IN SYSTEM AREA |
| | | 12-17 | Br SL WSBK | FR SS SP SXP | | | | | |
| | | 17-28 | Br SCL WSBK | FR SS SP SXP | | | | | |
| | | 28-60 | R C SBK | FR SS SP SXP | | | | | |
| | | 60-65 | R C M | FI SS SP SXP | | | | | |
| PIT 3 | LS 6% | 0-18 | FILL | | N/A | 64" | N/A | N/A | PS 0.3 NOT IN SYSTEM AREA |
| | | 18-24 | Br SL WSBK | FR SS SP SXP | | | | | |
| | | 24-34 | Br SCL WSBK | FR SS SP SXP | | | | | |
| | | 34-50 | R C SBK | FR SS SP SXP | | | | | |
| | | 50-64 | R SCL WSBK | FR SS SP SXP | | | | | |
| PIT 4 | LS 10% | 0-9 | Br SCL WSBK | FR SS SP SXP | N/A | 38" | F-C SAP PS | N/A | PS 0.3-0.4 |
| | | 9-28 | R C SBK | FR SS SP SXP | | | | | |
| | | 28-38 | R CL WSBK | FR SS SP SXP | | | | | |
| | | 38-60 | VER SL SAP M | FR SS SP SXP | | | | | |
| | | | | | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | 810 FT2 | 4300FT2 |
| System Type(s) | PPBPS | DRIP |
| Site LTAR | 0.3 | 0.125 |

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: MA&A
OTHER(S) PRESENT:

COMMENTS:

# SOIL/SITE EVALUATION

*(Continuation Sheet)*



PROPERTY ID #: 4628906714

APPROVED MAY X 9 2018 DATE OF EVALUATION:

KW 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 |
|---|---|---|---|---|---|---|---|---|---|
| PIT 5 | LS 12% | 0-10 | Br SL WSBK | FR SS SP SXP | N/A | 58" | N/A | N/A | PS 0.3 |
| | | 10-22 | Br SCL WSBK | FR SS SP SXP | | | | | |
| | | 22-44 | R C SBK | FR SS SP SXP | | | | | |
| | | 44-58 | R SCL WSBK | FR SS SP SXP | | | | | |
| | | | | | | | | | |
| PIT 6 | LS 12% | 0-9 | Br SCL WSBK | FR SS SP SXP | N/A | 34" | F-C SAP PS | N/A | PS 0.3-0.4 |
| | | 9-20 | R C SBK | FR SS SP SXP | | | | | |
| | | 20-34 | R CL WSBK | FR SS SP SXP | | | | | |
| | | 34-61 | VER L/SL SAP M | FR SS SP SXP | | | | | |
| | | | | | | | | | |
| PIT 7 | LS 12% | 0-7 | Br SCL WSBK | FR SS SP SXP | YB's | 22" | N/A | N/A | PS 0.125 DRIP |
| | | 7-22 | R C SBK | FR SS SP SXP | | | | | |
| | | 22- | CHR 2 | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| AB 1 | LS 6% | 0-12 | FILL | | N/A | 48" | N/A | N/A | PS 0.3 |
| | | 12-34 | Br SL WSBK | FR SS SP SXP | | | | | |
| | | 34-37 | RY SCL WSBK | FR SS SP SXP | | | | | |
| | | 37-48 | R C SBK | FR SS SP SXP | | | | | |
| | | | | | | | | | |
| AB 2 | LS 12% | 0-7 | Br SL WSBK | FR SS SP SXP | N/A | 48" | N/A | N/A | PS 0.3 |
| | | 7-20 | YBr SCL WSBK | FR SS SP SXP | | | | | |
| | | 20-48 | R C SBK | FR SS SP SXP | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

COMMENTS:

# SOIL/SITE EVALUATION

*(Continuation Sheet)*



PROPERTY ID #: 4628906714

DATE OF EVALUATION: _____

COUNTY: Iredell

APPROVED MAY X 9 2018 KW

| 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 | |
| AB 3 | LS 10% | 0-7 | Br SCL WSBK | FR SS SP SXP | N/A | 40" | PS | N/A | PS 0.3-0.4 |
| | | 7-26 | R C SBK | FR SS SP SXP | | | | | |
| | | 26-40 | R CL WSBK | FR SS SP SXP | | | | | |
| | | 40-48 | VER SL SAP M | FR SS SP SXP | | | | | |
| | | | | | | | | | |
| AB 4 | LS 12% | 0-6 | Br SCL WSBK | FR SS SP SXP | N/A | 32" | PS | N/A | PS 0.3-0.4 |
| | | 6-32 | R C SBK | FR SS SP SXP | | | | | |
| | | 32-48 | VER L SAP M | FR SS SP SXP | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| AB 5 | LS 12% | 0-4 | Br SCL WSBK | FR SS SP SXP | Com YB CHR 2 @ 18" | 18" | N/A | N/A | PS 0.125 DRIP |
| | | 4-18 | R C SBK | FR SS SP SXP | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| AB 6 | LS 15% | 0-5 | Br SL WSBK | FR SS SP SXP | N/A | 38" | PS | N/A | PS 0.3-0.4 |
| | | 5-30 | RBr C SBK | FR SS SP SXP | | | | | |
| | | 30-38 | RBr CL WSBK | FR SS SP SXP | | | | | |
| | | 38-48 | VER SL SAP M | FR SS SP SXP | | | | | |
| | | | | | | | | | |
| AB 7 | LS 5% | 0-5 | Br SCL WSBK | FR SS SP SXP | N/A | 30" | N/A | N/A | PS 0.3 |
| | | 5-30 | R C SBK | FR SS SP SXP | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

COMMENTS: _____

RECEIVED MAY 2 - 2018

# IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

***APPLICATION FORM*** Relocation $350.00/Pd. $500.00 5-10-18

**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 WTIHOUT 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** #235352

**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

**********

**Applicant Information:** **(PRINT CLEARLY)**

**Applicant Name:** Mike Marshburn **Address:** 149 Hermance Ln, Mooresville, NC **Zip:** 28117

**Applicant Email:** rimzoneonline@gmail.com **Phone:** _____ **Alt. Phone:** _____

**Owner Name:** Same **Address:** _____ **Zip:** _____

**Owner Email:** _____ **Phone:** _____ **Alt. Phone:** _____

**********

**Property Information:**

**Street Address:** 149 Hermance LN

**Subdivision Name:** CL&T **Section/Phase:** II **Lot Number:** 1129

**Driving Directions:** _____

**********

**Site Development Information:** ***(check or complete ALL that apply***

Change System due to grading

( ) New Single Family Residence **Maximum Number of Bedrooms:** 4 **CHECK FOUNDATION TYPE**
( ) New Multi-Family Residence **Maximum Number of Occupants:** _____ (✓) Crawl Space Foundation
( ) Accessory Building ( ) Swimming Pool ( ) Concrete Slab Foundation
( ) Bedroom(s) Addition ( ) Other Addition/Structure: _____ ( ) Basement with Plumbing
( ) Repair to failing septic system ___ Tank ___ Drain lines **Describe Problem:** _____ ( ) 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:** _____ 5/2/2018

**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, ____Michael Mashburn_____, am the legal owner(s) of the property located at_149 Hermance Ln Mooresville NC 28117_____, identified as PIN (Parcel Identification Number) _4628906714_____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) _Michael Athanas & Associates_____, _____, 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.

| | | | |
|---|---|---|---|
| _____ | 5-1-18 | _____ | _____ |
| 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