# ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # AP 312695

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

PIN # 4629 - 64 - 4154

APPLICANT/OWNER: Niblock Homes | APPLICANT ADDRESS: 759 Concord Parkway N Ste 20 Concord NC 28027

SITE ADDRESS: 143 Sunset Bay Dr Troutman NC 28166 | PHONE: 704-920-7104 | ALT. PHONE

SITE DIRECTIONS: NC 115 N to L on Connector Rd, S on Cornelius Rd, R on Judas Rd, R on Perth, L on State Park Rd, L on Morrison Farm Rd, R on Sunset Bay Dr, 1st on L

SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Sunset Bay | SECTION: | LOT # 7 | LOT AREA: 0.679 acres | DESIGN FLOW: 480 GPD | L.T.A.R.: .3

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 (gal) | STB | Infiltrator | Date | | | | | |
| Pump Tank | 1000 (gal) | PT | Infiltrator | Date | | | | | |
| Pump Make | | Model | | Serial # | | | | | |
| # Nitrification Fields | 1 | # Lines | 5 | Linear Ft | 267 | | | | |
| Trench Width | 24" | Trench Bottom Depth(Low side) | 33" | Gravel Depth | | | | | |

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

System Description: LPPPBPS

Repair System Description: DRIP

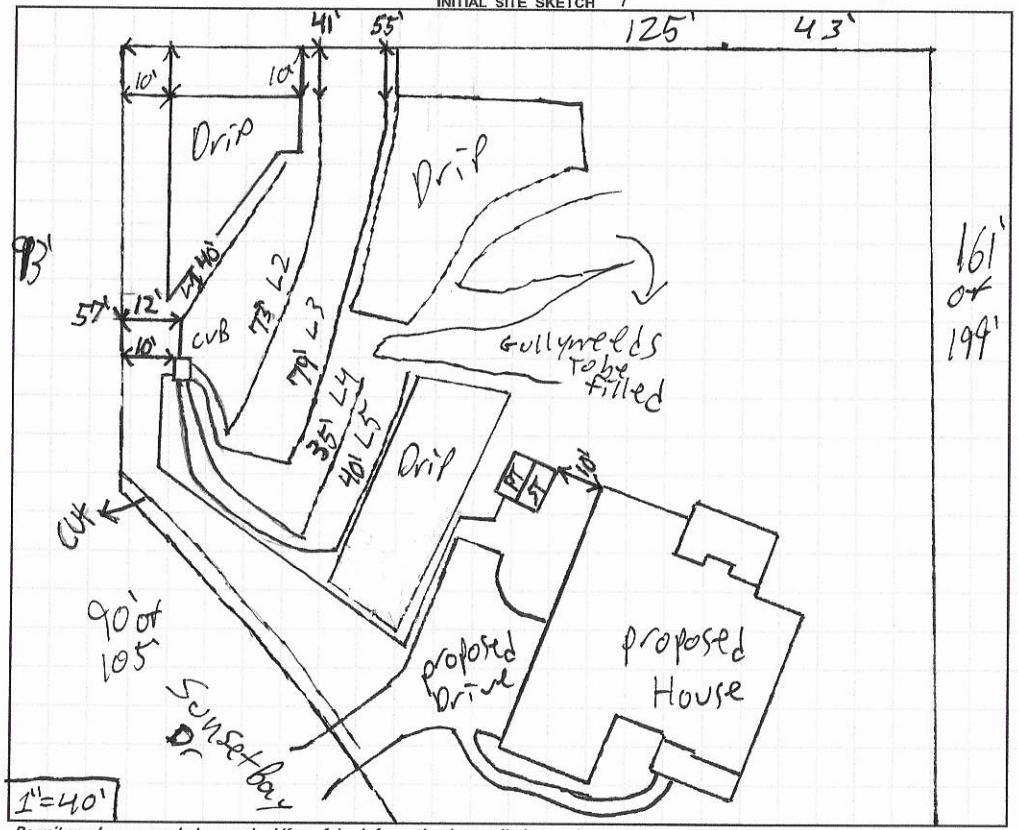
Maintenance Agreement Required: ☒ YES ☐ NO

☐ GRAVITY ☒ PRESSURE

| | | | |
|---|---|---|---|
| ☒ Residence | No. Bedrooms | 4 | Water Supply |
| ☐ Business | No. Persons | 8 | ☐ Private |
| ☐ Other | No. Employees | | ☐ Public |
| ☐ Slab | ☒ Crawl Space | | ☒ Community |
| ☐ Basement w/plumbing | ☐ Basement w/o plumbing | | |

Comments / Conditions: Install Lines on contour. DO NOT drive on, store material, or manipulate drainfield in anyway. All property Lines and corners must be marked during time of installation and inspection. No Foundation drains can be installed on house. Water Line must be 10' off any part of septic.

INITIAL SITE SKETCH




AS BUILT SKETCH

**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 time.**

| | Date | Initials |
|---|---|---|
| Drain Lines Checked | 5-16-2021 | |
| Tanks Checked | 5-16-2021 | |
| Pressure Manifold or Valve Box Checked | 5-16-2021 | |
| Pressure Head Set | 6/23/21 | PB |
| Electrical Checked | " | PB |
| Floats Set | 6/24/21 | MD |
| Alarm Checked | " | MD |
| Maintenance Contract (Y) / N | Rec'd | |

Hole size = 5/32"
2' pressure head
Dosing volume = 219.6
Draw down = 10.5
Flow Rate = 25.6
Run time = 8.6

*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: [signature] Date: 1/18/2021

IMPROVEMENT PERMIT by: Patrick J Byrd II Date: 2/8/2021

AUTHORIZATION TO CONSTRUCT by: Patrick J Byrd II Date: 1/18/2021

Installed by: Larry Hendrix Grading

OPERATION PERMIT by: Maria Dotson Tad Date: 6-24-21

Existing System Inspected by: Date:

**FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.**

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

Sheet 1 of 1
PROPERTY ID #: 4629644154
COUNTY: Iredell

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

OWNER: N;blockHomesLLC
ADDRESS: 759 Concord Parkway N 28120
PROPOSED FACILITY: New Single fam PROPOSED DESIGN FLOW (.1949): 600GPD
LOCATION OF SITE: 143 Sunset Bay Troutman
APPLICATION DATE 10/21/2020
DATE EVALUATED: 12/22/2020
PROPERTY SIZE: .679ac-ls
PROPERTY RECORDED: yes

WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☒ Other community
EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut
TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

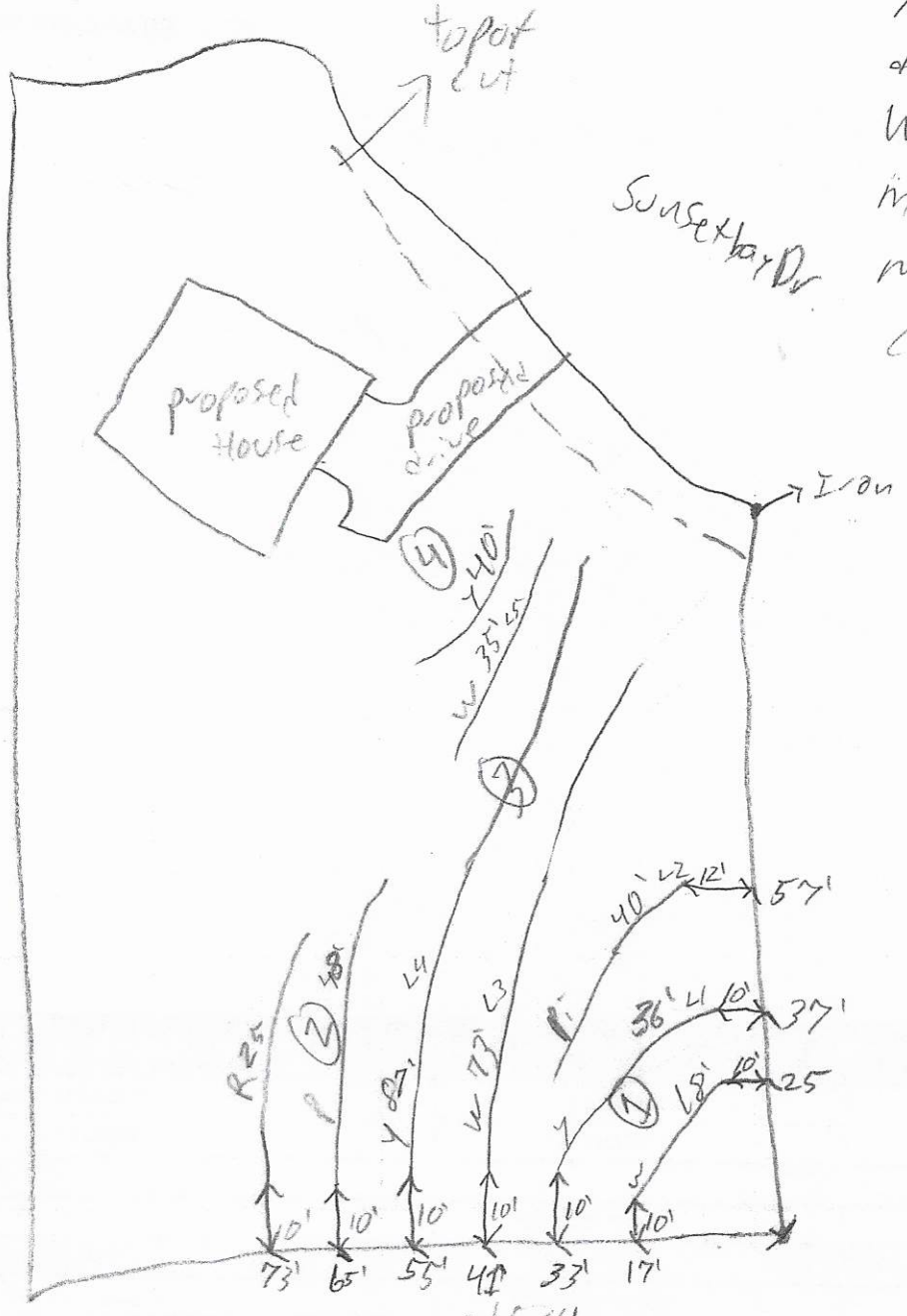
| PROFILE # | .1940 LANDSCAPE POSITION/ SLOPE % | HORIZON DEPTH (IN.) | SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE | .1941 CONSISTENCE/ MINERALOGY | OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR | .1943 SOIL DEPTH | .1956 SAPRO CLASS | .1934 RESTR HORIZ | PROFILE CLASS & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| 1 | SS 7% | 0-8 | SCLWSBK | Fr SSSP SexP | — | 53" | Litho inclusons throughout to Lomy sap at 53" | — | PS,3 |
| | | 8-20 | C SBK | Fr SSSP SexP | | | | | |
| | | 20-53 | CL WSBK | Fr SSSP SexP | | | | | |
| | | 53-60 | Lomy sap mass | VFr | | | | | |
| 2 | SS 7% | 0-7 | SCLWSBK | Fr SSSP SexP | — | 50" | Litho inclusons throughout to Lomy sap at 50" | some manganese Inclusons scattered in sap | PS,3 |
| | | 7-19 | C SBK | Fr SSSP SexP | | | | | |
| | | 19-50 | CL WSBK | Fr SSSP SexP | | | | | |
| | | 50-63 | Lomy sap mass | VFr | | | | | |
| 3 | SS 6% | 0-9 | SCLWSBK | Fr SSSP SexP | — | 60" | Litho inclusons throughout more common at bottom | — | PS,3 |
| | | 9-26 | C SBK/ABK | Fr SSSP SexP | | | | | |
| | | 26-60 | CL SBK/ABK | Fr SSSP SexP | | | | | |
| 4 | SS 9% | 0-9 | SCLWSBK | Fr SSSP SexP | — | 60" | Litho inclusons | — | PS,3 |
| | | 9-30 | C SBK | Fr SSSP SexP | | | | | |
| | | 30-60 | CL SBK | Fr SSSP SexP | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | 267 | 3200 |
| System Type(s) | 50% Reduction | Drip |
| Site LTAR | .3 | .15 |

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

COMMENTS: Sunny Inthe woods

Covedale ct




No foundation drains
Water-Line 10' off
might have to move neighbors cable line

3200' drip

needs 54

402

need 132'

600 ÷ 3
→ 2006 ÷ 3
→ 667 X.5
→ 333'

480 ÷ 3
→ 1600 ÷ 3
→ 533 X.5
→ 267'

RECEIVED NOV 17 2020

# APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED

## Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM*

AP-312695 $600.00

**Application For:** ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) Septic Improvement Permit (X) 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**

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:* (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

**Applicant Information:** (PRINT CLEARLY)

Applicant Name: Niblock Homes, LLC Address: 759 Concord Parkway N. Ste. 20 Concord, NC Zip: 28027
Applicant Email: blivengood@niblockhomes.com Phone: 704-920-7104 Alt. Phone: _____
Owner Name: Christopher/Hanna Brannen Address: 112 Tetcott St. Mooresville, NC Zip: 28115
Owner Email: Jdmsi03@gmail.com Phone: _____ Alt. Phone: _____

**Property Information:** 143 Sunset Bay
Street Address: 103 Lovedale Court Troutman, NC
Subdivision Name: Sunset Bay Section/Phase: _____ Lot Number: 7
Driving Directions: Perth Rd -(R) State Park (L) Morrison Farm (R) Sunset Bay

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

**CHECK FOUNDATION TYPE**

(X) New Single Family Residence — Maximum Number of Bedrooms: 5 — (X) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: _____ — ( ) Concrete Slab Foundation
( ) Accessory Building — ( ) Swimming Pool — ( ) Basement with Plumbing
( ) Bedroom(s) Addition — ( ) Other Addition/Structure: _____ — ( ) Basement without Plumbing
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____
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: _____
(X) 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 (X) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other: _____

**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. industrial) 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.***

**Signature:** _____ 10/21/2020
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

DocuSign Envelope ID: E1399DAF-12A0-4796-A589-3BEB7DA84819

# IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

## DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

*(Check and sign only ONE of the options below)*

1. *** APPLICANT AND OWNER ARE THE SAME. *** (*Sign here*) DocuSigned by: [signature] 38B7E57DA73B42D... DocuSigned by: Hanna A. Brenner CA0572D980AF45D...

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.**

2. I, DocuSigned by: [signature] 38B7E57DA73B42D... DocuSigned by: Hanna A. Brenner CA0572D980AF45D..., am the legal owner(s) of the property located at TBD Covedale Ct. Troutman, NC 28166, identified as

PIN (Parcel Identification Number) 4629-64-4154, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Beth Livengood, Niblock Homes, LLC (agent), 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.

DocuSigned by: [signature] 38B7E57DA73B42D... DocuSigned by: Hanna A. Brenner CA0572D980AF45D... Signature of Owner(s) — 10/21/2020 10/21/2020 Date

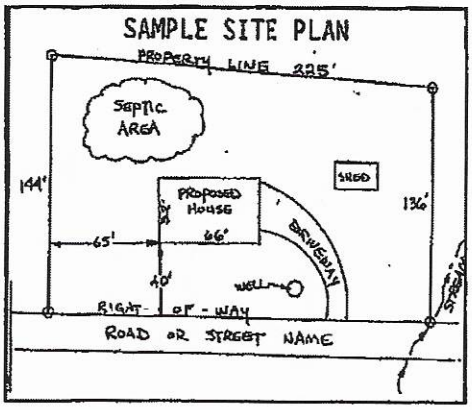
**Mooresville - Environmental Health**
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

**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:**

- ( X ) **Property Line measurements are clearly identified**
- ( X ) **All proposed structures are indicated**
- ( ) **Front and side setbacks from property line**
- ( X ) **Preferred driveway location**
- ( X ) **Preferred well location**
- ( X ) **Preferred septic system location**
- ( 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***

- See attached -

**Signature:** _____ 10/21/2020

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

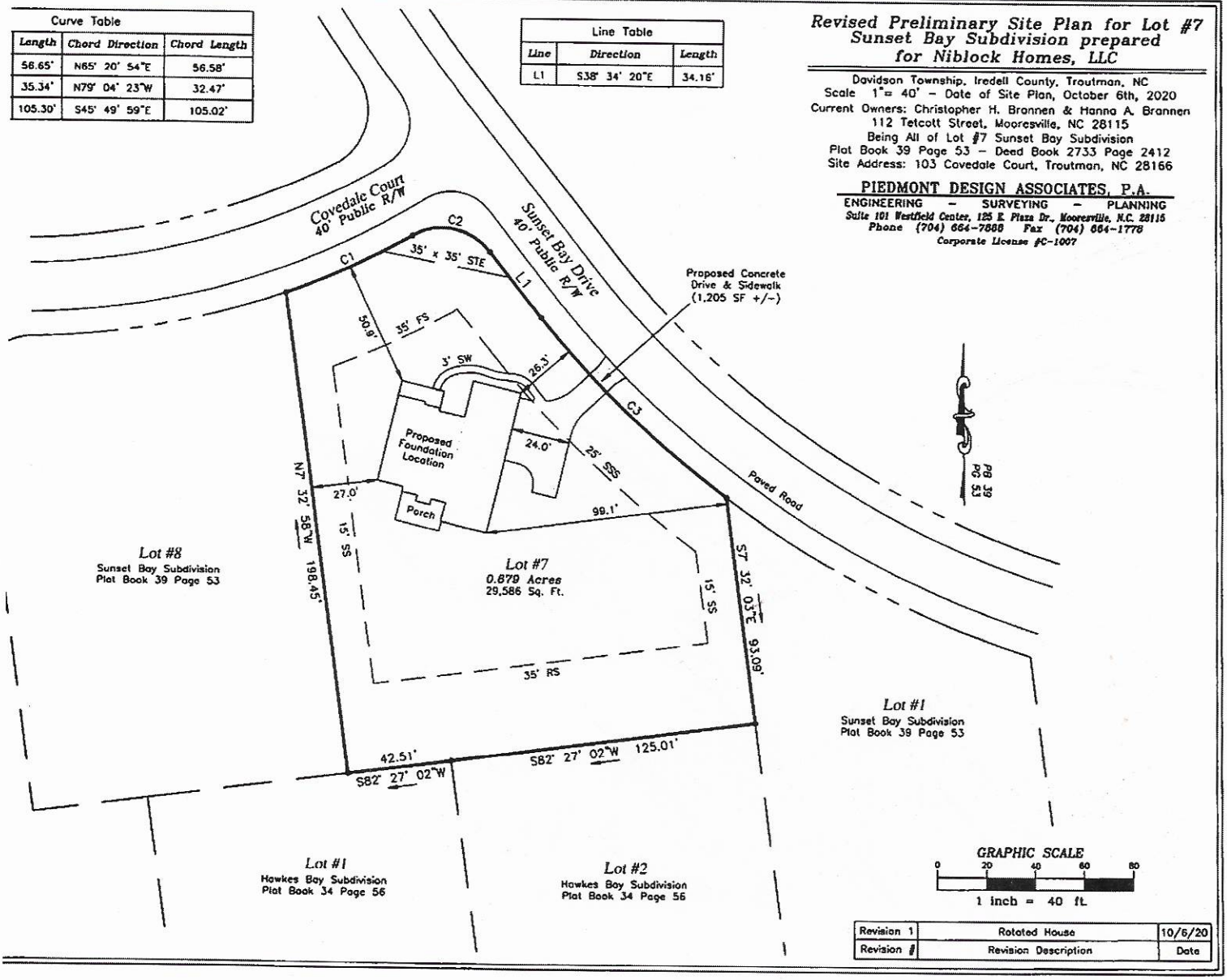
| Curve Table | | |
|---|---|---|
| Length | Chord Direction | Chord Length |
| 56.65' | N65° 20' 54"E | 56.58' |
| 35.34' | N79° 04' 23"W | 32.47' |
| 105.30' | S45° 49' 59"E | 105.02' |

| Line Table | | |
|---|---|---|
| Line | Direction | Length |
| L1 | S38° 34' 20"E | 34.16' |

# Revised Preliminary Site Plan for Lot #7 Sunset Bay Subdivision prepared for Niblock Homes, LLC

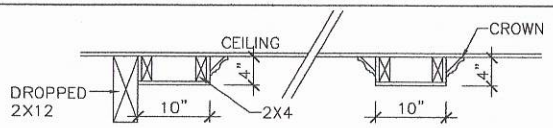
Davidson Township, Iredell County, Troutman, NC
Scale 1"= 40' – Date of Site Plan, October 6th, 2020
Current Owners: Christopher H. Brannen & Hanna A. Brannen
112 Tetcott Street, Mooresville, NC 28115
Being All of Lot #7 Sunset Bay Subdivision
Plat Book 39 Page 53 – Deed Book 2733 Page 2412
Site Address: 103 Covedale Court, Troutman, NC 28166


**PIEDMONT DESIGN ASSOCIATES, P.A.**
ENGINEERING – SURVEYING – PLANNING
Suite 101 Westfield Center, 125 E. Plaza Dr., Mooresville, N.C. 28115
Phone (704) 664-7888 Fax (704) 664-1778
Corporate License #C-1007


GRAPHIC SCALE
0 20 40 60 80
1 inch = 40 ft

| Revision 1 | Rotated House | 10/6/20 |
|---|---|---|
| Revision # | Revision Description | Date |

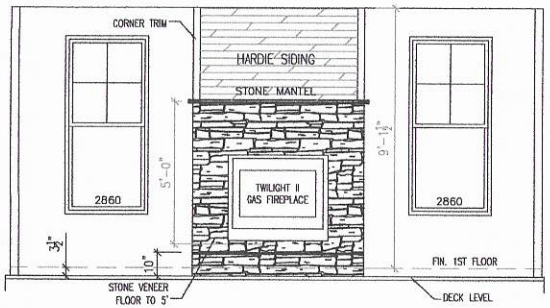



COFFER CLG. DETAIL
SCALE: 1 1/2" = 1'-0"

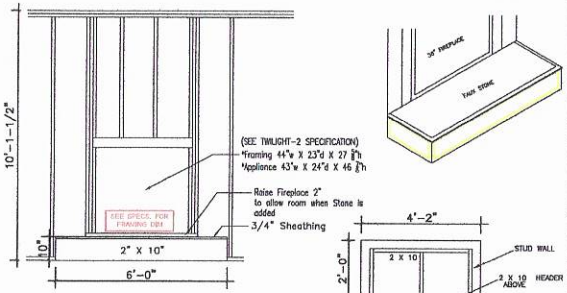
**TWILIGHT 2 FIREPLACE**

A) Family Room Side
-Faux Stone 6' wide x 5' tall above hearth (5'-10" from Fin. Floor)
-Raised Stone Hearth and Surround
-Cedar Mantel, no brackets (8" Tall x 10" Deep)
-Drywall above mantel

B) Screen Porch Side
-Faux Stone 6' wide x 5' tall above hearth (5'-10" from Fin. Floor)
-Raised Stone Hearth and Surround
-Stone Ledge (mantel) at 5' above hearth
-Hardie Siding above mantel and at sides of fireplace

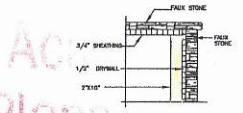


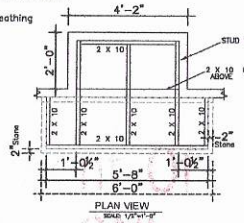

Fireplace Exterior View from Screen Porch



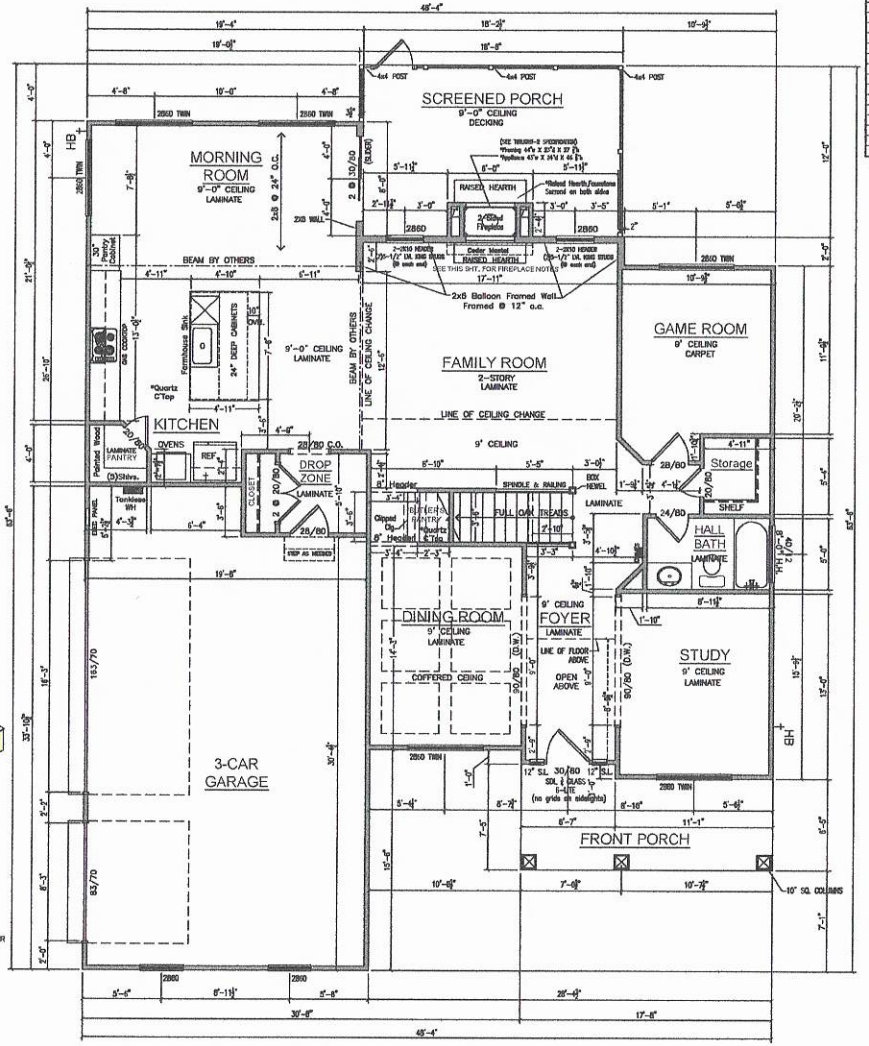




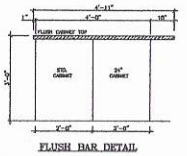



10" RAISED HEARTH FRAMING DETAIL




BUTLER'S PANTRY




FLUSH BAR DETAIL

**DOOR SCHEDULE**

| QUANTITY | MARK | DOOR SIZE WxH | TYPE | SWING | ROUGH OPENING |
|---|---|---|---|---|---|
| 1 | 28/80 | 32 x 96 | CASED OPENING | NA | 34" x 98 1/2" |
| 2 | 90/80 | 108 x 96 | CASED OPENING | NA | 110" x 98 1/2" |
| 1 | 2 @ 20/80 | 2 @ 24 x 96 | Double | NA | 48" x 96" |
| 1 | 28/80 | 32 x 96 | EXTERIOR | Left | 34" x 98 1/2" |
| 1 | 30/80 | 36 x 96 | EXTERIOR | Right | 38" x 98 1/2" |
| 1 | 2 @ 30/80 | 2 @ 36 x 96 | EXTERIOR – SLIDER | Right | 72" x 96" |
| 1 | 18/68 | 20 x 80 | INTERIOR | Left | 22" x 82 1/2" |
| 1 | 20/68 | 24 x 80 | INTERIOR | Left | 25" x 82 1/2" |
| 2 | 20/80 | 24 x 96 | INTERIOR | Right | 25" x 98 1/2" |
| 4 | 24/68 | 28 x 80 | INTERIOR | Right | 30" x 82 1/2" |
| 1 | 24/80 | 28 x 96 | INTERIOR | Right | 30" x 98 1/2" |
| 1 | 28/68 | 30 x 80 | INTERIOR | Left | 32" x 82 1/2" |
| 4 | 28/68 | 30 x 80 | INTERIOR | Right | 32" x 82 1/2" |
| 2 | 28/68 | 32 x 80 | INTERIOR | Right | 34" x 82 1/2" |
| 1 | 28/80 | 32 x 96 | INTERIOR | Left | 34" x 98 1/2" |
| 2 | 2 @ 28/68 | 2 @ 30 x 80 | INTERIOR – BYPASS | Left | 61" x 81 3/4" |
| 1 | 2 @ 28/68 | 2 @ 30 x 80 | INTERIOR – BYPASS | Right | 61" x 81 3/4" |
| 1 | 30/68 | 24 x 80 | INTERIOR – POCKET | Right | 25" x 84 1/2" |
| 1 | 63/70 | 99 x 84 | OVERHEAD | NA | 99" x 84" |
| 1 | 163/70 | 195 x 84 | OVERHEAD | NA | 195" x 84" |

**SEE SUPERINTENDENT FOR R.O. FRAMING ON POCKET DOORS**

**POCKET DOOR HEADER HEIGHT:**
*8'0" = 101" Header Ht.*
*8'8" = 84" Header Ht.*

**SQUARE FOOTAGES**

| | SQ. FT. |
|---|---|
| 1ST FLOOR | 1571 |
| 2ND FLOOR | 1342 |
| TOTAL LIVING | 2913 |
| GARAGE | 640 |
| FRONT PORCH | 119 |
| SCREENED PORCH | 219 |
| ATTIC STORAGE | 357 |

**NOTE:**
*Home will have a propane tank for gas
*Home has a gas furnace, gas tankless WH, gas fireplace and gas cooktop

REVISION DATES:
10/07/20: c.o. #1,2
10/14/20: c.o. #3
11/03/20: c.o. #4-6
12/14/20: c.o. #7-9
12/17/20: c.o. #10
12/18/20: c.o. #11
01/08/21: per Superint.


BLOCK DEVELOPMENT CORPORATION
300 McGILL AVENUE N.W.
CONCORD, NC
(704) 788-4618 FAX (704) 784-3720


LOT #7
SUNSET BAY
(OFFSITE)
Brannen Residence

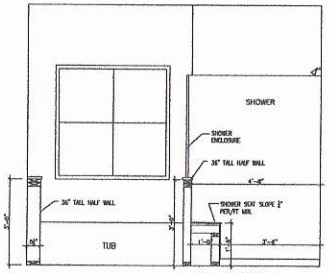
FIRST FLOOR PLAN
SCALE: 1/4" = 1'-0" (34X22)
SCALE: 1/8" = 1'-0" (17X11)

STRATFORD PLAN
DATE: 9/10/2020
PLAN: STRATFORD (CUSTOM)
DRAWN BY: MB
ESTIMATED BY: AK
CHECKED BY: MN

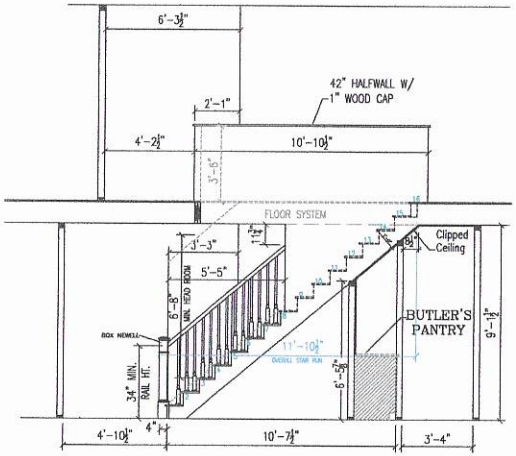
A Combs 11/8/2021
Patrick J Bagley III 1/8/2021

Plans Date 1/8/2021

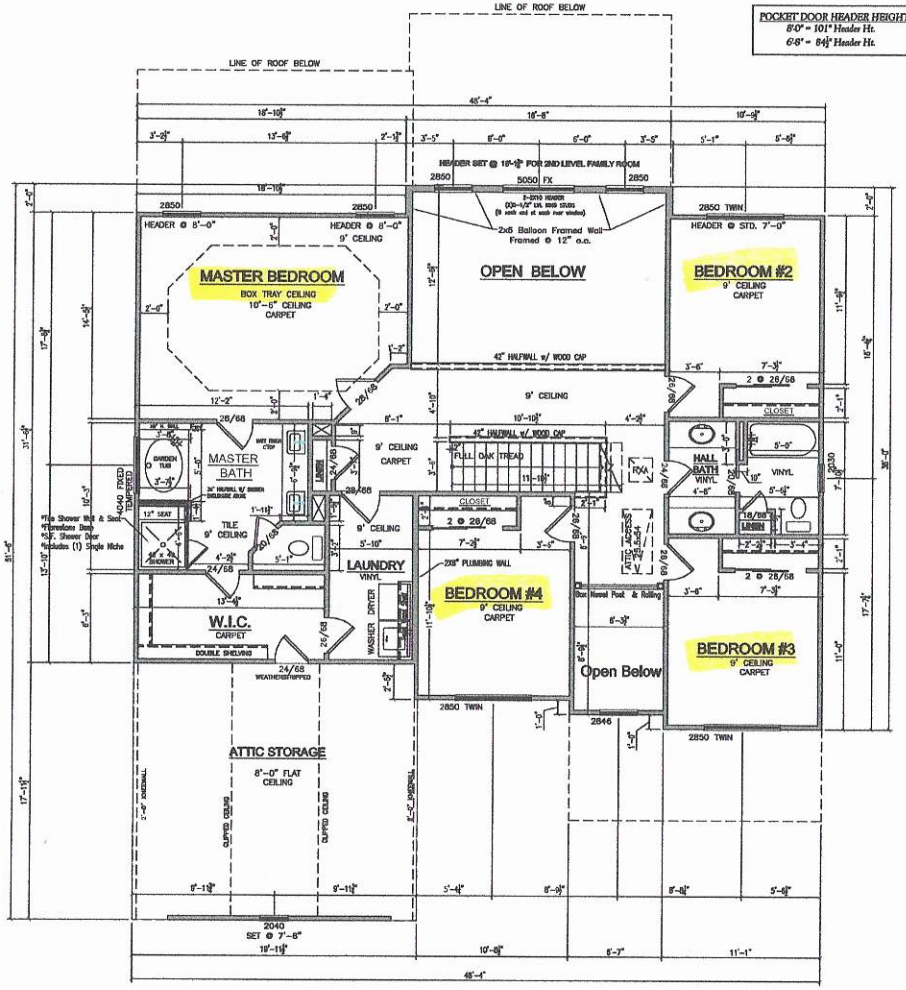
Patrick J Byrne III Date 1/8/2021




42x42 SHOWER
W/ 12" SEAT DETAIL
SCALE: 1/2" = 1'-0"




STRATFORD STAIR SECTION
(Revised: 10/17)
SCALE: 1/4" = 1'-0"




POCKET DOOR HEADER HEIGHT:
8'0" = 101" Header Ht.
6'8" = 84½" Header Ht.

NOTE:
*Home will have a propane tank for gas
*Home has a gas furnace, gas tank-less WH, gas fireplace and gas cooktop

REVISION DATES:
10/07/20: c.o. #1,2
10/14/20: c.o. #3
11/03/20: c.o. #4-6


IBLOCK DEVELOPMENT CORPORATION
300 MCGILL AVENUE N.W.
CONCORD, NC
(704) 788-4818 FAX (704) 784-3720


LOT #7
SUNSET BAY
(OFFSITE)
Brannen Residence

SECOND FLOOR PLAN
SCALE: 1/4" = 1'-0" (34X22)
SCALE: 1/8" = 1'-0" (17X11)

STRATFORD PLAN
DATE: 9/10/2020
PLAN: STRATFORD (CUSTOM)
DRAWN BY: MB
ESTIMATED BY: AK
CHECKED BY: MN

Site plan attached

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

| APPLICATION NUMBER |
|---|
| 312695<br>Issue Date: |

**Permit Type: ZONING**

| Parcel Number | Street Address | Jurisdiction |
|---|---|---|
| 4629644154.000 | ~~103 COVEDALE CT~~ 143 Sunset Bay | Iredell County |

| Owner Information | Applicant Information |
|---|---|
| Name: BRANNEN CHRISTOPHER H+HANNA A | Name: NIBLOCK HOMES LLC |
| Address: | Address: 759 CONCORD PARKWAY N<br>SUITE 20<br>CONCORD, NC 28027 |
| Phone: | Phone: (704)920-7104 |

| Use Requested | Zone Code |
|---|---|
| Single Family Dwelling | R20 |

| Lot Acreage | F Setback | B Setback | L Setback | R Setback | Watershed | Flood Zone |
|---|---|---|---|---|---|---|
| 0.679 | 35 | 35 | 15 | 25 | WSIV-CA Catawba/Lake Norman | NO |

| Remarks |
|---|
| SFD address will b 143 Sunset Bay need discl, lien & temp |

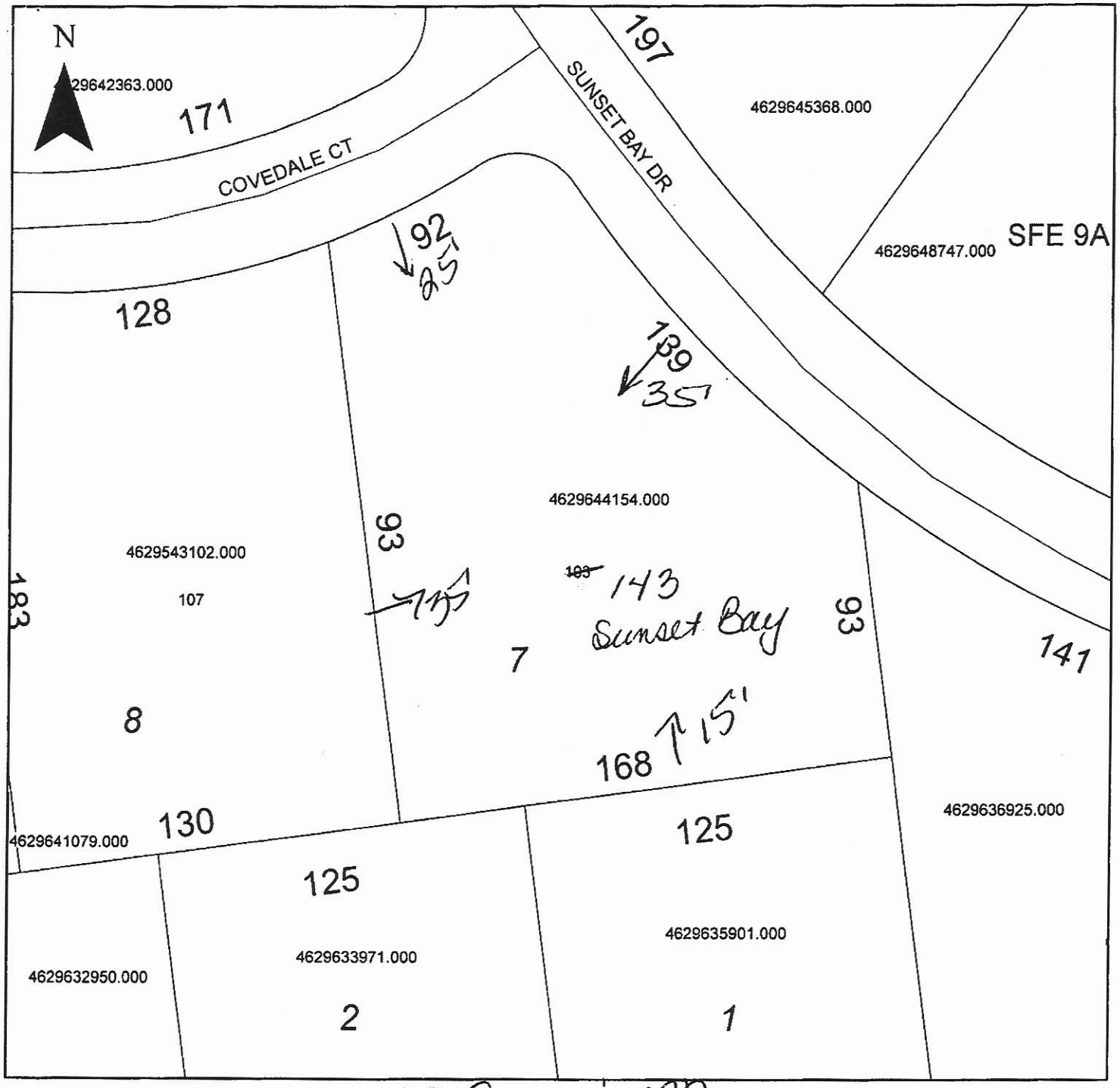
The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions, plat conditions and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

**Date:** 11/17/2020

Signature of Owner/Contractor

| Permit Number | 312695 | TOTAL FEES: | $77.25 |
|---|---|---|---|

# ZONING DISCLAIMER




Property Address 143 Sunset Bay

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Applicant

Date