IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 210847

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

PIN # 4635-16-6149

APPLICANT: ROWLAND DEVELOPMENT APPLICANT ADDRESS: 2231 HWY 152 E. CHINA GROVE

SITE ADDRESS: 220 MAYFAIR RD. PHONE: 704-506-0556 ALT. PHONE:

SITE DIRECTIONS: BSR, TL CHATHAM, TL MAYFAIR, ON R

SUBDIVISION: THE POINT SECTION: 1B LOT # 33 LOT AREA: .8 AC DESIGN FLOW: 480 L.T.A.R.: .3

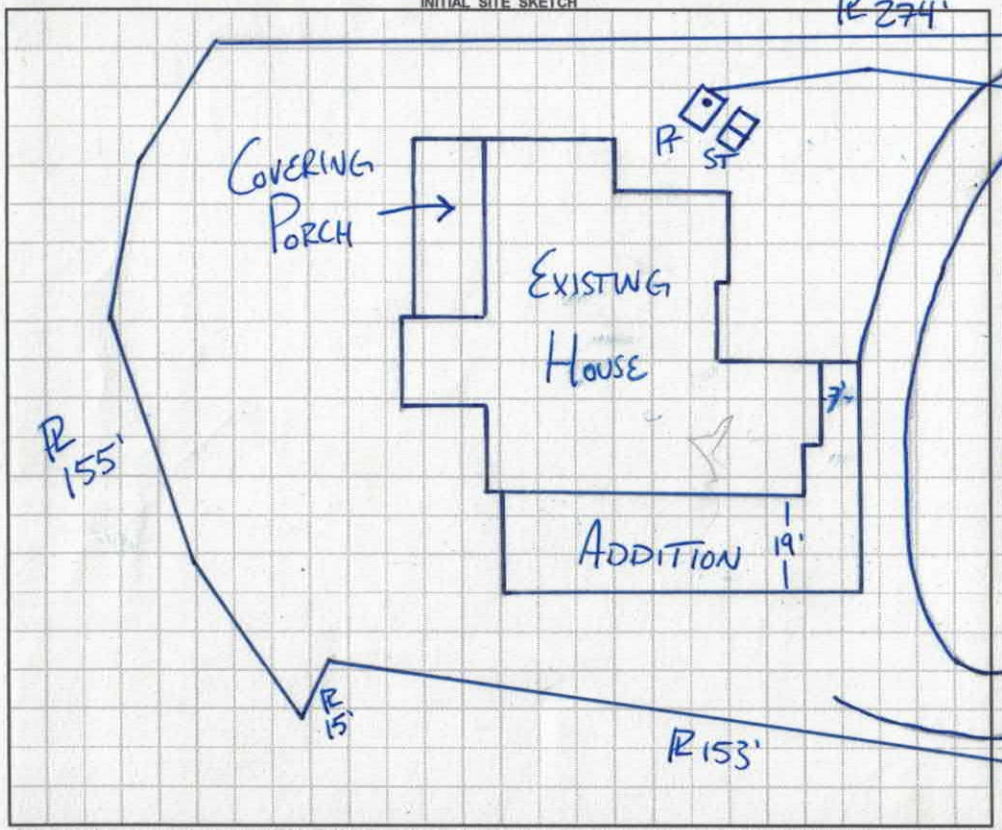
Septic Tank	EXISTING (gal)	STB		Date		☐ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	☐ Residence	No. Bedrooms
Pump Tank	EXISTING (gal)	PT		Date		System Description:		LP- PANEL		☐ Business	No. Persons
Pump Make		Model		Serial #		Repair System Description:		SAME		☒ Other	No. Employees
# Nitrification Fields	1	# Lines	2	Linear Ft:	25'	Maintenance Agreement Required:	☒ YES	☐ NO		☐ Slab	☐ Crawl Space
Trench Width	24"	Max. Trench Bottom Depth	36"	Gravel Depth	—		☐ GRAVITY	☒ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☐ Community

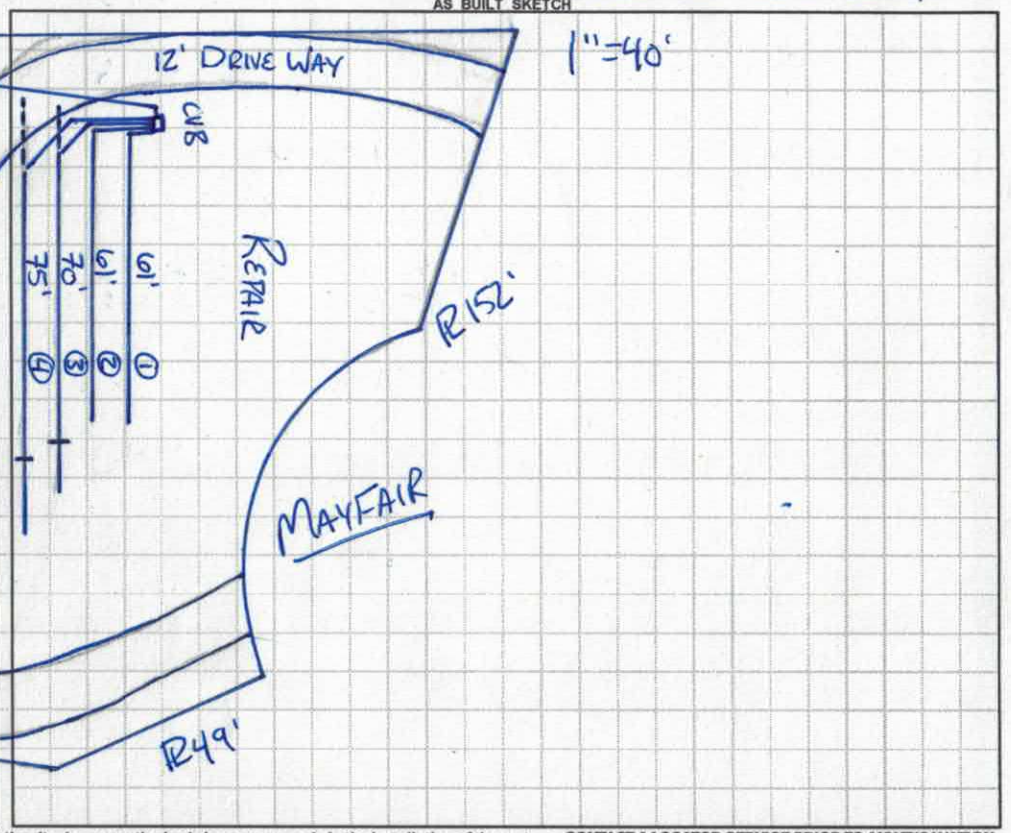
Comments / Conditions: ① MOVE CVB WHERE SHOWN ② REMOVE 2 PANELS FROM LINE 3 & REPLACE AT END ③ REMOVE 3 PANELS FROM LINE 4 & REPLACE @ END ④ SUPPLY LINE MUST BE 30" DEEP OR SLEEVED IN DUCTILE IRON UNDER DRIVE WAY

EXPANDING GARAGE & MAS. SOTF COVERING EXISTING DECK NEW 12' DRIVEWAY

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. **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: 3-15-16 Installed by: N. Christenbery

IMPROVEMENT PERMIT by: Date: 3-2-16 OPERATION PERMIT by: Date: 6-16-16

AUTHORIZATION TO CONSTRUCT by: Date: 3-2-16 Existing System Inspected by: Date:

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

RECEIVED FEB 4 2016

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION* #210847

(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)

Credit $70.00 Paid $300.00 OK-Paid

1. **APPLICATION FOR:** ✓ Improvement Permit ___ Authorization To Construct ___ Existing System Inspection

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2. Page 2: *Site Plan Worksheet* Form MUST Accompany This Application — Relocation - ~~Balance $630.00 for pump~~

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 #
Rowland Dev. Corp.	2231 Hwy 152 E China Grove NC 28023	James / 704-202-1176	Gabe 704-506-0556
Greg Zipadelli	220 Mayfair Rd. Mooresville	704-965-3336	

Owner Name

4. **Property Information:**

Street Address	Subdivision Name	Section/Phase and Lot Number
220 Mayfair Rd. Mooresville NC	The Point	Lot #33

Driving Directions: From I-77 exit #77 exit #35, travel west on Brawley Sch. Rd., left on Chatham, left on Mayfair last house on Rt.

5. **RESIDENTIAL Site Development Information:** *(Check or Complete ALL that apply)*

( ) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
(X) Repair To Failing Septic System due to _____
(X) Other Relocate D-box, & closest line to the house for drive

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

( ) Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) 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 (X) 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 1998 *Year*

( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other_____

8. **Please Answer The Following** ( ) Yes (X) No Does the site contain any jurisdictional wetlands?
To The Best of Your Ability: ( ) Yes (X) 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.

Call prior to Inspection

9. **Signature:** _____ 8/27/15
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, Greg Zipadelli, am the legal owner(s) of the property located at 220 Mayfair Rd, Mooresville NC 28117, identified as PIN (Parcel Identification Number) 4635166149, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) Rowland Development Corp., 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.

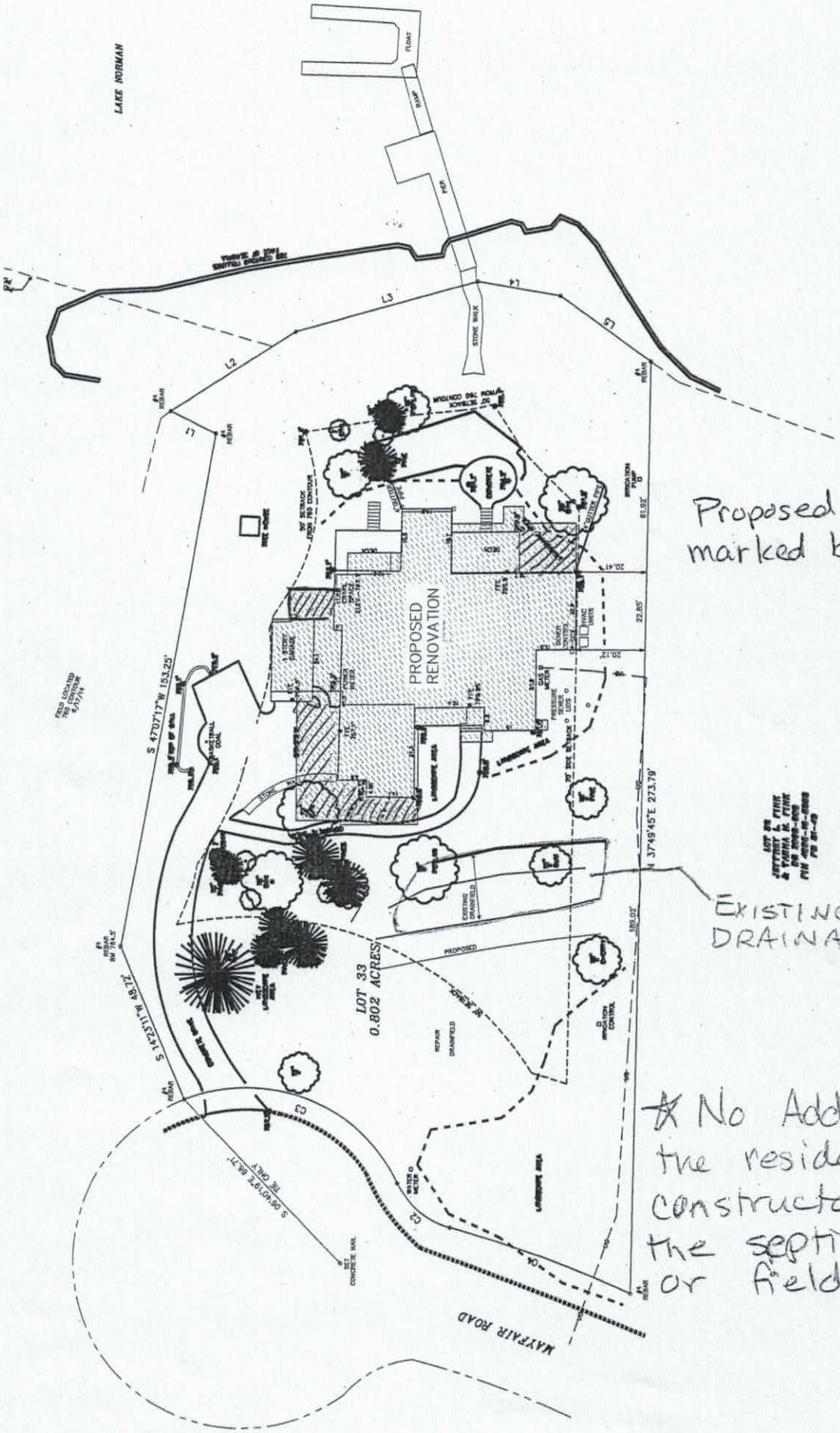
5-27-15 Susan M. Wheeler 5-27-15

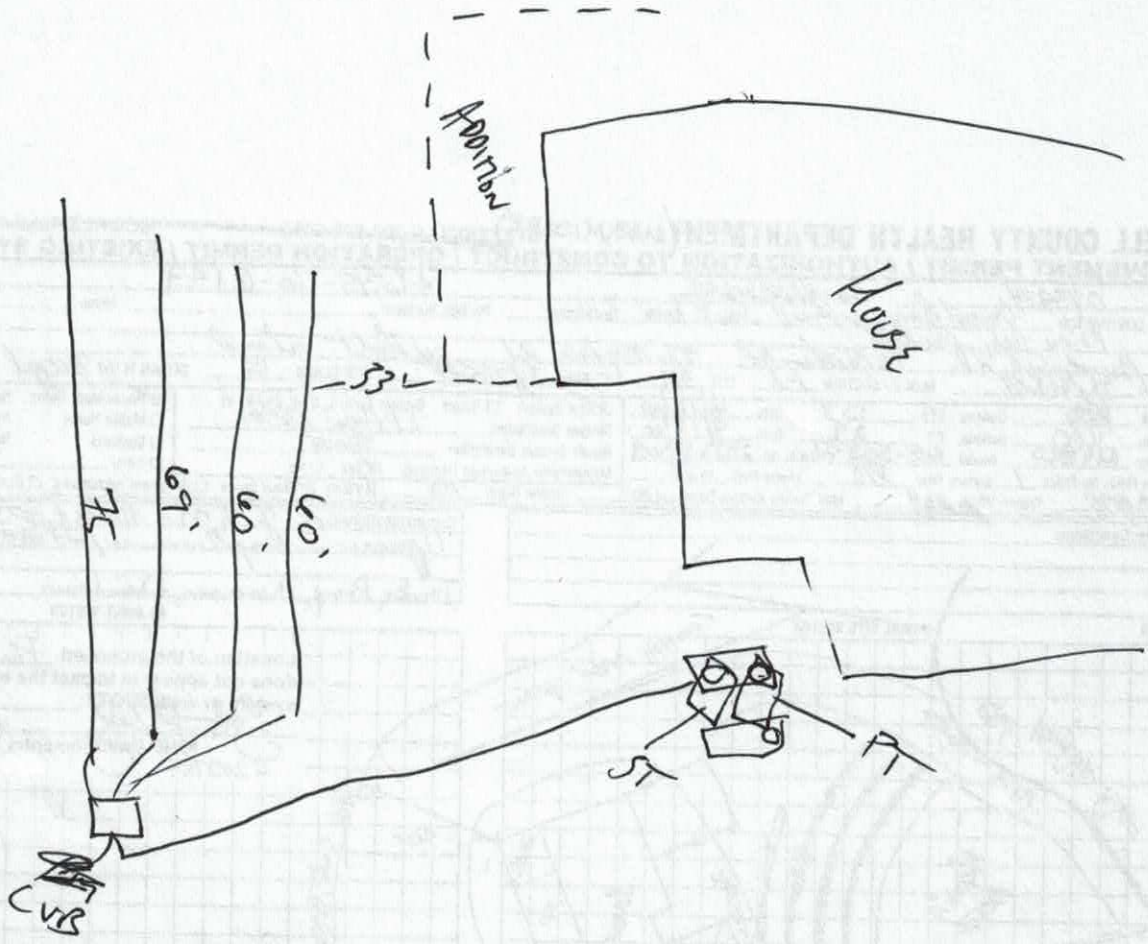
Signature of Owner(s) Date Signature of Witness Date

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


LAKE NORMAN
PROPOSED RENOVATION
LOT 33
0.802 ACRES
MAYFAIR ROAD
STONE WALK
EXISTING DRAINFIELD
REPAIR DRAINFIELD
PROPOSED
Proposed Expansion marked by
EXISTING SEPTIC DRAINAGE FIELD
* No Additions to the residence being constructd near the septic tanks or fields


Addition
House
53'
75'
69'
60'
60'
ST
PT

IREDELL COUNTY

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

APPLICATION NUMBER
210847
Issue Date: 05/28/2015

FILE COPY

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4635166149.000	220 MAYFAIR ROAD, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: ZIPADELLI GREGORY+NANETTE	Applicant: ROWLAND DEVELOPMENT CO
Address: 172-A LUGNUT LN MOORESVILLE, NC 28117	Address: 2231 HWY 152 EAST CHINA GROVE, NC 280230652
Phone:	Phone: 704-799-0652

Use Requested	Zone Code
ADDING TO BEDROOM AND BATHROOM AND GARAGE AND OUTDOOR LIVING SPACE	2USU

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.800	35.00	50.00	15.00	15.00	CACL	AE

Remarks:

PAID
✓ 2379
5-28-15

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.

Attached

Applicant: _____ Date: _____

Permit Number	39444	TOTAL FEES:	$ 77.25