RECEIVED JUL 2 9 2014 Paid $350.00 PM

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

Application For:

( ) New Well Permit ✓ ( ) Well Repair Permit Parkmore #204931 ( ) 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

The following optional attachments may also be submitted:

Place an (X) beside whichever is submitted if applicable

( ) Survey Plat, scaled no more than 1 inch = 60 feet

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

Applicant Information:

Applicant Name: Michel Dobrik Address: 162 Southwood Park Dr Mooresville 28117 Phone: 9725895405

Owner Name: " Address: " Phone: "

Property Information:

Street Address: 162 Southwood Park Dr

Subdivision Name: Mama Valley Section/Phase: _____ Lot Number: 72

Driving Directions: SW Brawley, TL Statta, TR Southwood Park, on Left

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

( ) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 3 (5th Addition)
Maximum Number of Occupants: 4
( ) Swimming Pool
( ) Other Addition/Structure: _____

(✓) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

Non-Residential Site Development:

Type of Business: _____
Square Footage of Building: _____
Maximum Number of Employee: _____
Maximum Number of Seats/Beds/Other: _____

Water Supply:

( ) 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: N/A 92

( ) 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: Tommy C. Parker, Jr.

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

7/29/14

DATE

IREDELL COUNTY HEALTH DEPARTMENT

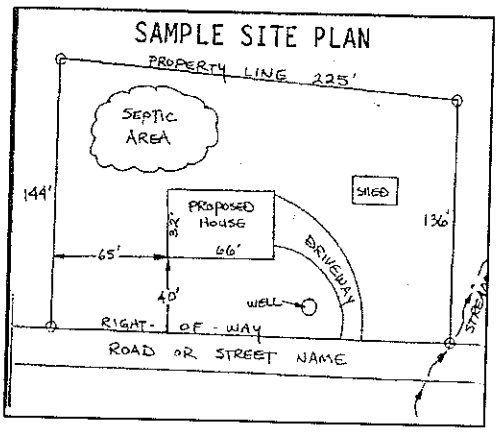
ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *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
( ) Front and side setbacks from property line
( ) Preferred driveway location and 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

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 plan
Septic on site

Signature: Tammy C. Jones, Esq

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

7/29/11
DATE

DESIGN SPECIFICATIONS
162 Southwood Park Drive

Daily design flow	360 gpd.
Septic tank size	1000 gal.
Pumping tank size	1000 gal.
Initial system	existing T & J Panel
Effluent loading rate, Initial system	existing 0.35 gpd/ft^2
Total length and diameter of supply pipe	approx. 90 ft. 2" sch 40 PVC
Number and length of laterals	4 @ 109'
Tank depth	7.0'
Elevation head	approx. 12.0' (to be verified by installer after tanks are set)
Pressure head	2.0'
Friction head	2.0'
20% contingency	2.0'
Total head	20.0'
Pump requirements	20.5 gpm at 20' of head; use existing pump and controls,
Dosing volume	147 gal. *
Depth of water pumped per dose	calculated to specific tank by measure or dealer engineering specifications (1 cubic ft. of water equals 7.48 gal.)
Pump run per dose	approx. 7.1 min.
Check valve	yes
Siphon break hole	no
Effluent loading rate, Repair system	0.35 gpd/ft^2 existing
Repair system	LP Panel

Note: * Before placement of cap block, one panel on each line near the center of the field should be observed filling to make certain that it does not overflow top chamber into air chambers of panel. If overflow occurs, reduce floats by 25 gallons and reset until no overflow is observed.

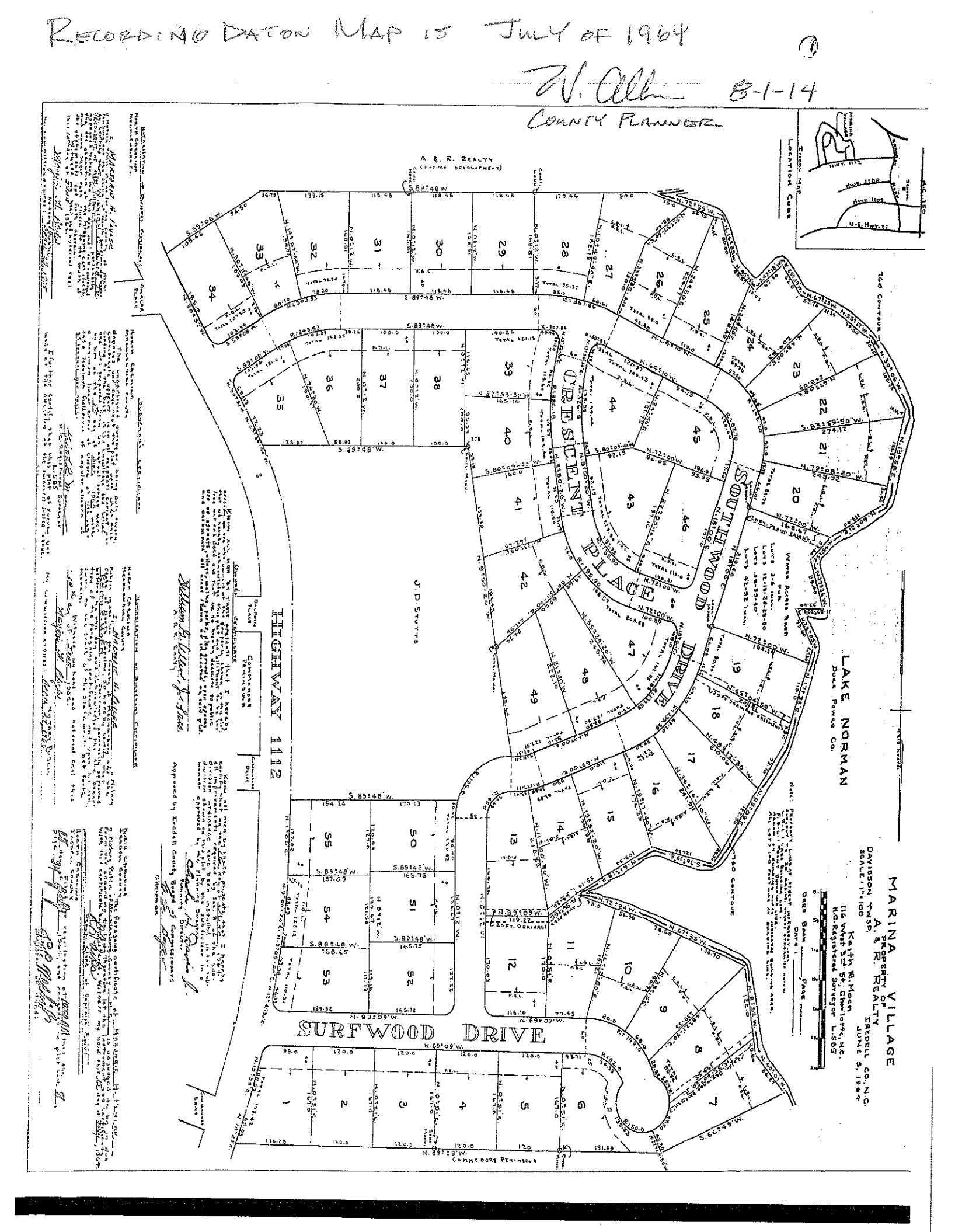
This permit change is only to septic, pump tank and connector to 5 existing panel lines. On July 28, 2014 these were dry to bottom as the owner is mostly absentee. No evidence could be found of failure and the site appears to be the same as it was on February 12, 1992 when the permit was finalized by Wesley Sparks.

Installer will pump septic tank and remove both tanks and backfill. If the pump is usable it will be reused. Only with the owner's approval will it be replaced.

RECORDING DATON MAP 15 JULY OF 1964

8-1-14

COUNTY PLANNER



IREDELL COUNTY

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

APPLICATION NUMBER
204231
Issue Date: 06/23/2014

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4635496226.000	162 SOUTHWOOD PARK ROAD, MOORESVILLE, NC 28117	MOORESVILLE

Owner Information	Applicant Information
Owner: DOBISH, MICAHEL DOBISH, CHERIE	Applicant: MERRITT REMODELING
Address: 119 ORNIDA DR BEAVER, PA 15009	Address: 7507 LADY BANK DR CHARLOTTE, 28687
Phone: - -	Phone: 704-281-3779

Use Requested	Zone Code
ADDING BATH AND SMALL STORAGE AREA	RR

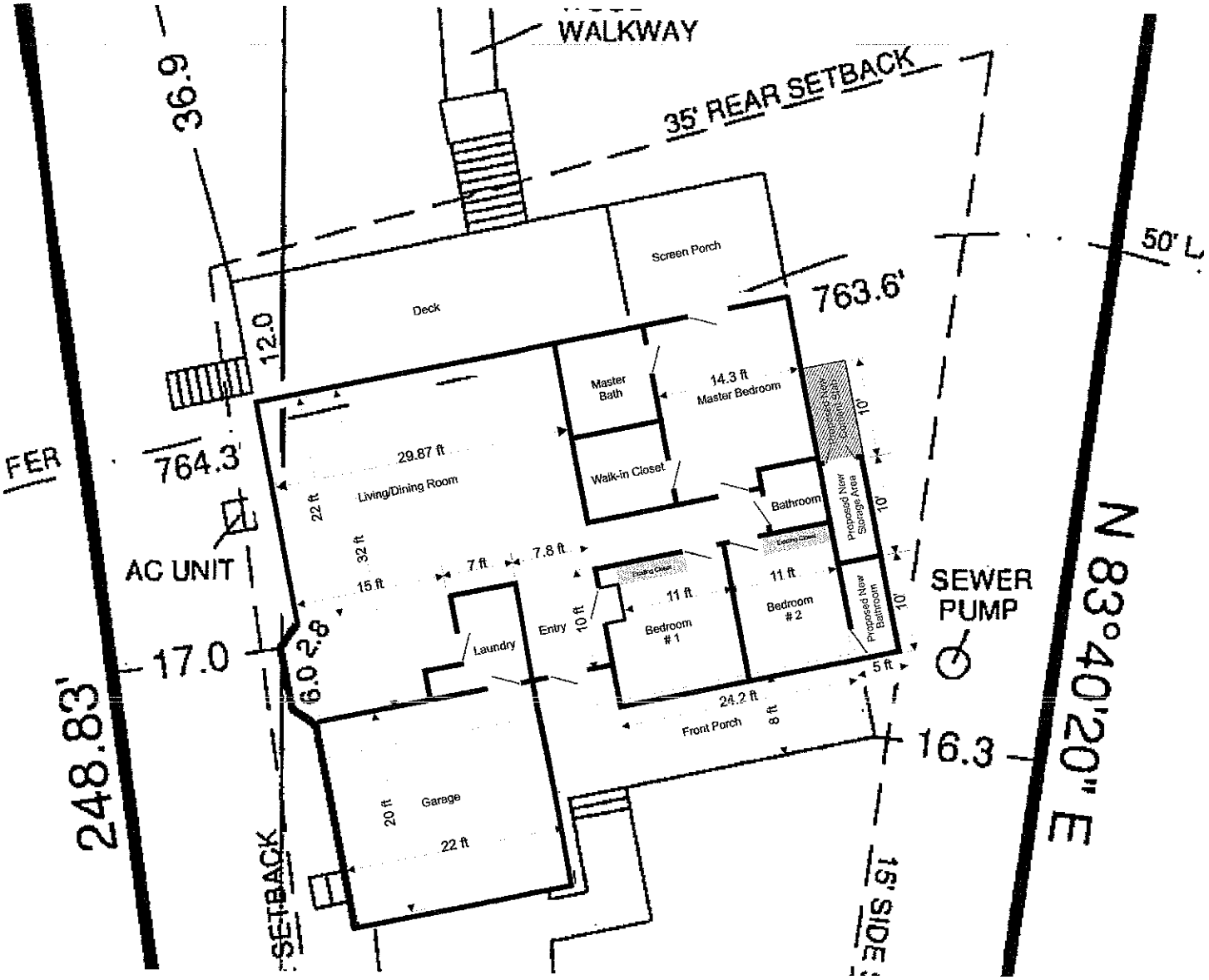
Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
		50.00	15.00	15.00	CACL	AE

Remarks:

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	15654	TOTAL FEES:	$ 77.25


WALKWAY
36.9
35' REAR SETBACK
Screen Porch
Deck
763.6'
50' L
12.0
Master Bath
14.3 ft
Master Bedroom
Proposed New Storage Area
10'
FER
764.3'
29.87 ft
Living/Dining Room
22 ft
Walk-in Closet
Bathroom
32 ft
10'
AC UNIT
15 ft
7 ft
7.8 ft
11 ft
Bedroom #2
Proposed New Bathroom
SEWER PUMP
17.0
6.0
2.6
Laundry
Entry
10 ft
11 ft
Bedroom #1
5 ft
24.2 ft
Front Porch
8 ft
16.3
248.83'
20 ft
Garage
22 ft
SETBACK
15' SIDE
N 83°40'20" E

BRADY APPROVED ON 7-20-14 & 7-22-14

RECEIVED AUG - 4 2014 PH
Paid $40.00 Statesville

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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( ) Septic Improvement Permit ( ) Authorization to Construct (X) Existing System Inspection ( ) Septic System Repair

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

Applicant Information:

Applicant Name: Mike Helms Address: 176 Fernhill Rd. Troutman 704- Phone: 634-2900

Owner Name: CHERIE ZERCHER Address: 118 ORNELIA DR. MA. Phone:

Property Information:

Street Address: 162 Southwood Park Rd. Mooresville NC.

Subdivision Name: Manna Village Section/Phase: Lot Number: 22

Driving Directions:

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

( ) New Single Family Residence Maximum Number of Bedrooms: ( ) Crawl Space Foundation
( ) New Multi-Family Residence Maximum Number of Occupants: ( ) Concrete Slab Foundation
(X) Accessory Building 832 sq ft ( ) Swimming Pool ( ) Basement with Plumbing
( ) Bedroom(s) Addition ( ) Other Addition/Structure: ( ) Basement without Plumbing

Non-Residential Site Development: Type of Business:
Square Footage of Building:
Maximum Number of Employee:
Maximum Number of Seats/Beds/Other:

Water Supply:

( ) New Well (X) 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:

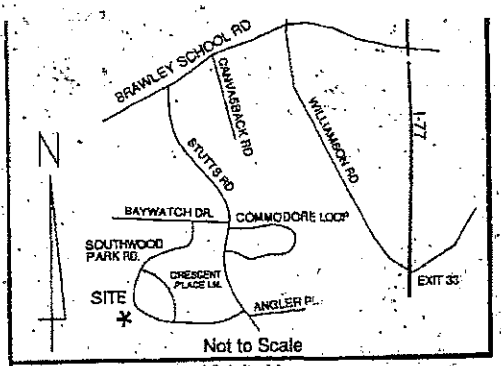
Please answer the following to the best of your ability:
( ) Yes (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (X) No Is the site subject to approval by any other public agency?

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: Mike Helms 8-04-14
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

PAID
8/4/14 mcl GR9373

Cornelius, N.C. 28031
Phone (704) 634-9356
Business License #: C -2674



Vicinity Map

LEGEND

E.I.P.	EXISTING IRON PIN
C.P.	COMPUTED POINT
E.C.M.	EXISTING CONCRETE MONUMENT
S.I.P.	RE-SET IRON PIN
	PROPERTY LINE
	ADJOINER PROPERTY LINE BY DEED OR PLAT
P.S.D.E	PUBLIC STORM DRAINAGE EASEMENT
CLOSURE	EXCEEDS 1'in 10,000'
F.P.E.	FLOOD PROTECTION ELEVATION
F.F.E.	FINISHED FLOOR ELEVATION
	POWER POLE

SEAL L-3957 LAND SURVEYOR ROBERT G. BISHOP

LAKE NORMAN
F.P.E. = 761.0'

FLOATING DOCK
RAMP
DOCK

N:30°05'00" W
108.25'

760.0' CONTOUR FLOOD LINE (FIELD LOCATED)

WOOD WALKWAY
35' REAR SETBACK
SCREEN PORCH
763.6'
50' LAKE BUFFER
DECK
SINGLE STORY FRAME #162
F.F.E. = 769.08'
764.3'
AC UNIT
SEWER PUMP
PORCH
763.9'
50' LAKE BUFFER
TIE TO EIP
S 51°48'57" E
129.74'
248.83'
N 83°40'20" E
271.11'
15' SIDE SETBACK
35' SIDE SETBACK
CONCRETE DRIVE
GRAVEL DRIVE
35' FRONT SETBACK
WELL SITE
EIP
C1
ECM
TIE LINE
N 02°09'02" E
41.66'
ECM

LOT 23
RONALD W. JOYNER & wife
NORMA J. JOYNER
DB 884 PG 767

LOT 21
DANIEL GRINOSTAFF & wife
BETTY W. GRINOSTAFF
DB 489 PG 432

PB 8, PG 34

N 67°08'00" E

NEW GARAGE
10'
27'
3' OFF RMD

SOUTHWOOD PARK ROAD
60' PUBLIC R/W

LINE TABLE

LINE	LENGTH	BEARING
L1	14.05'	N13°41'37" E

CURVE TABLE

CURVE	LENGTH	RADIUS	CHORD	BEARING
C1	42.05'	142.70'	41.90'	S14°53'46"E

Physical SURVEY

OF

Lot 22 Marina Village

DEPARTMENT OF PLANNING & DEVELOPMENT
PO BOX 788, STATESVILLE NC 28687-0788
349 N. Center Street / Building Standards Center
(704) 878-3118 / FAX 928-2025

205047

Residential Zoning Permit Application

What are you building? (Please check)

Stick built___ Modular___ Duplex___ Singlewide___ Doublewide___ Pier___ Addition___ Bedroom addition___

Accessory dwelling (ie: M-I-L Suite, guest house)___ Accessory building (ie: garage, shed) X Swimming pool___

Are there any other structures currently on the property such as dwellings, sheds, garages? (Please list type below)
HOUSE

Is there a septic tank on the property? (Yes) No If residence how many bedrooms? 4 and stories? 2

If an addition, please describe project: Detached Garage 20x32

Please list square footage of project (Pier, Addition, Accessory Dwelling, Accessory Building only) 832 sq ft.

Does the property have community water? Yes (No) If yes, please list who provides it: —

Does the property have community sewer? Yes (No) If yes, please list who provides it: —

Owner Information

Property Owner's Name CHERIE ZOELLNER Phone # _____

Owner's Current Address 118 OLIVE DR. PA.

Property Information

Property Address 162 Southwood park Parcel # _____
Mooresville

Subdivision: _____ Lot: ___ Zoning: ___ Watershed: Y or N Flood Plain: Y or N Township: ___

Directions to property (from a MAIN ROAD) Brawley to Staffs, Staffs to Bay watch, Bay watch to Southwood Park

Application Information

Applicant's Name or Company New Horizon Build Applicant's Phone # 704-634-2900

Applicant's Address 176 Fernhill Rd. Troutman, NC.

If Company, Representative's Name and Title Mike Helms / Pres.

IN APPLYING FOR A ZONING PERMIT I CERTIFY THAT ALL INFORMATION ON THIS APPLICATION IS CORRECT AND THAT ALL WORK WILL COMPLY WITH IREDELL COUNTY ZONING REGULATIONS. THE IREDELL COUNTY ZONING DEPARTMENT WILL BE NOTIFIED OF ANY CHANGES THAT ARE MADE TO THIS PROJECT. I AM AWARE THAT THIS IS AN APPLICATION ONLY - NOT A PERMIT - AND DOES NOT CONSTITUTE APPROVAL OF THIS PROJECT. HOWEVER, IF THIS PROJECT IS APPROVED, THIS SIGNATURE IS VALID FOR MY PERMIT.

SIGNATURE OF APPLICANT _____ DATE 8-04-14

RECEIVED JUN 2 3 2014 PM

Paid $40.00 Statesville

Paid $110.00 Statesville

204231

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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Applicant Information:

Applicant Name: D.J. MERRITT Address: 7507 LADY BANK DR. CHAR. 28269 Phone: 704-281-3779

Owner Name: MICHAEL DOBISH Address: 523 McCAUGHTRY RUN, DARLINGTON PA 16115 Phone: 724-336-5084

Property Information:

Street Address: 162 SOUTHWOOD PARK RD. MOORESVILLE, NC 28117

Subdivision Name: Marina Village Section/Phase: _____ Lot Number: 23 22

Driving Directions: BRAWLEY SCHOOL RD., LEFT ON STUTTS RD. THEN RIGHT ON SOUTHWOOD PARK RD.

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

( ) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: _____
Maximum Number of Occupants: _____
( ) Swimming Pool
(X) Other Addition/Structure: BATHROOM AND STORAGE

( ) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

Non-Residential Site Development:

Type of Business: _____
Square Footage of Building: 121
Maximum Number of Employee:
Maximum Number of S

Water Supply:

( ) New Well (X) Existing Well ( ) C ther Public Water

Desired Septic System Type: *(you may rank in orde* led: _____
( ) No Preference ( ) Alternative ( ) Conventional her: _____

Please answer the following to the best of your ability:

( ) Yes ( ) No
( ) Yes (X) No generated?
( ) Yes ( ) No agency?

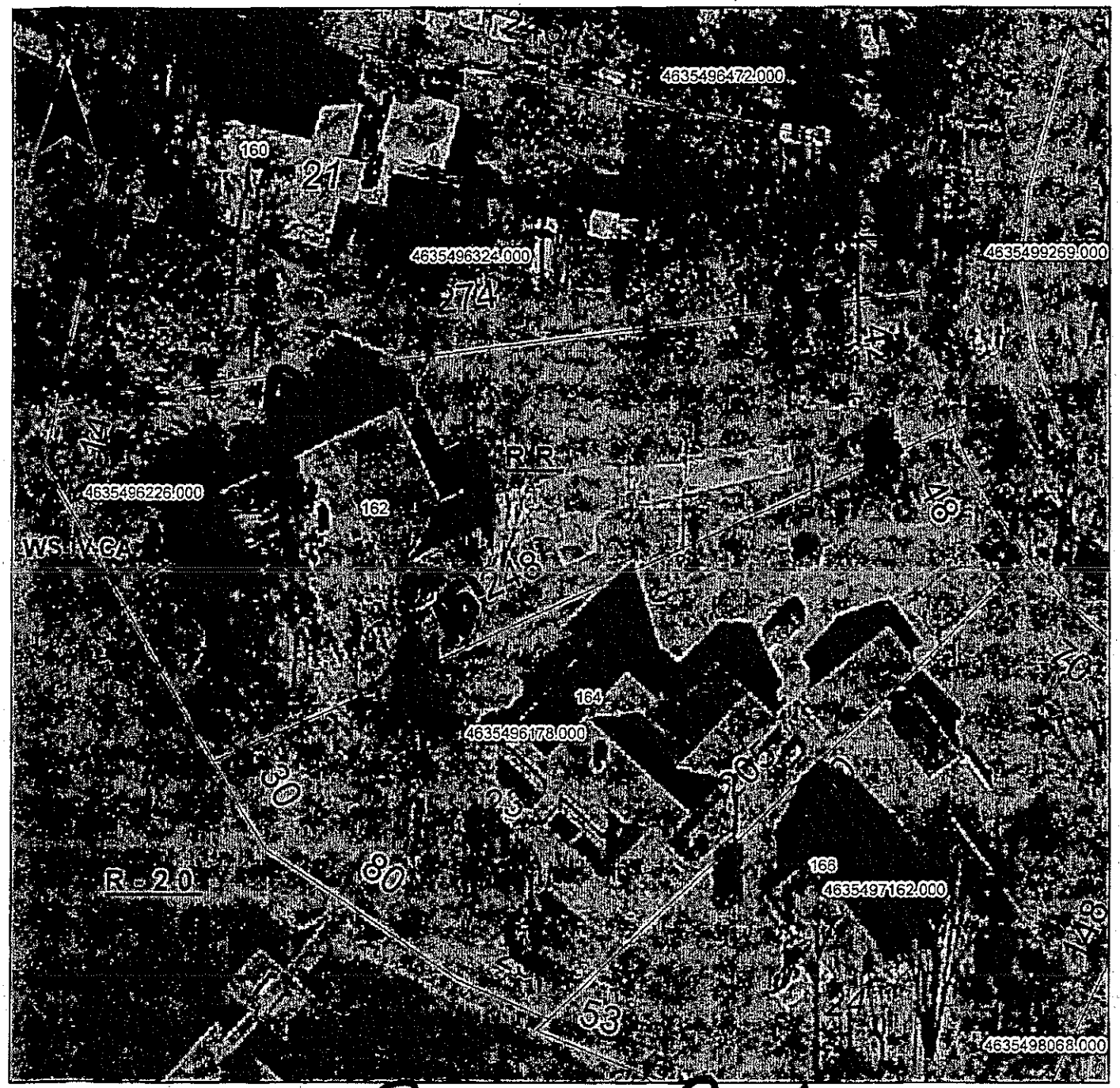
I have read this application and certify that the information provided h e officials are granted right of entry to conduct necessary inspections to determine complian y responsible for the proper identification and labeling of all property lines and corners and be performed.

CALL BEFORE WE COME OUT. Come in W. Track

Signature: D.J. Merritt 6/23/14

Property owner or owner's legal representative signature DATE

ZONING DISCLAIMER



Property Address 162 Southwood Park Rd

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. Applicant further acknowledges that the 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

6/23/14
Date

PERMITS/INSP PAYMENT RECEIPT# 335524
COUNTY OF IREDELL
PO BOX 788
200 SOUTH CENTER STREET
STATESVILLE NC 28687

DATE: 06/23/14 TIME: 12:06
CLERK: amanda.ho
PAID BY: MERRITT REMODELING

APPLICATION #: 204231

PERMIT ALLOCATION:

1	104563	460450	2.25	Technology Fee - Planning
		PZOI		
1	104563	472223	75.00	Zoning Permits
		PZOI		
1	10492751	447004 47472	40.00	In Office Septic Rev & Plan Ap
		PEHSA		

TOTAL RECEIPT AMOUNT: 117.25

AMOUNT PAID: 117.25
PAID BY: MERRITT REMODELING
PAYMENT METHOD: CHECK 1175
APPLICATION #: 204231

AMT TENDERED: 117.25
AMT APPLIED: 117.25
CHANGE: .00