ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP 322035

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

PIN # 4635 -- 80 -- 2935

APPLICANT/OWNER: Lakeshore Holdings LLC | APPLICANT ADDRESS: 637 Williamson Rd, Suite 102, Mooresville 28117

SITE ADDRESS: 260 Lakeshore drive, Mooresville | PHONE: 704-799-7609 | ALT. PHONE –

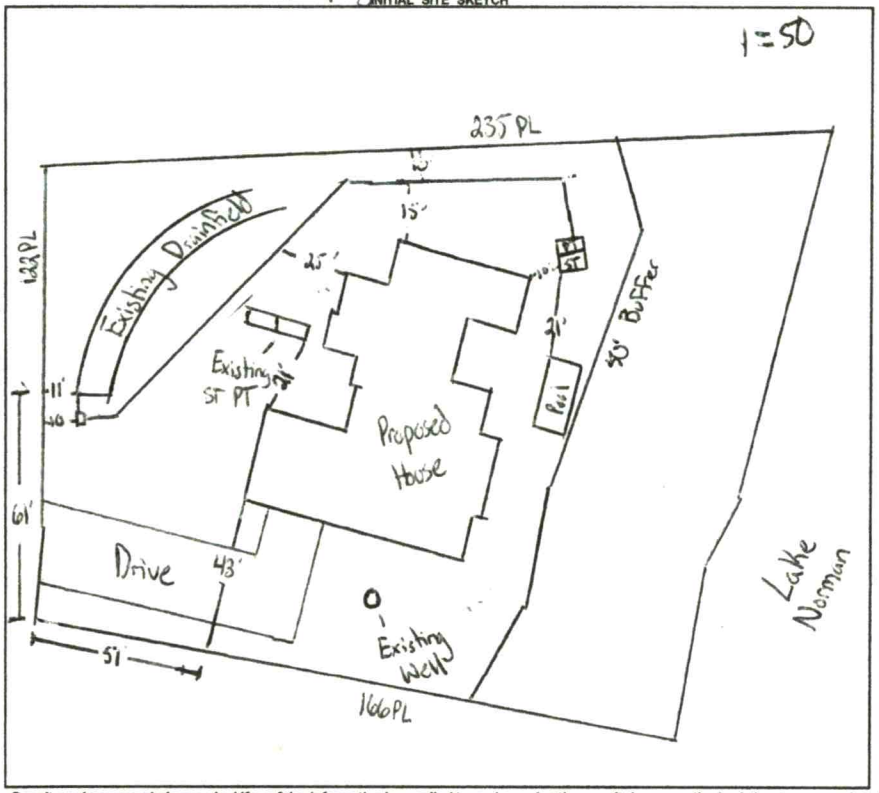
SITE DIRECTIONS: I77 Exit 31 - Rt Langtree - Rt Lakeshore | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Lakeview Shores | SECTION: 1 | LOT # 15 | LOT AREA: | DESIGN FLOW: 360 GPD | L.T.A.R.: EXISTING

Septic Tank	1000 (gal)	STB	766	Date	9-14-21	☐ New System	☒ Repair	☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 3	Water Supply
Pump Tank	1000 (gal)	PT	3683	Date	9-20-21	System Description:	Tank replacement			☐ Business	No. Persons 6	☒ Private
Pump Make		Model		Serial #		Repair System Description:	EXISTING			☐ Other	No. Employees	☐ Public
# Nitrification Fields		# Lines		Linear Ft		Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☒ Crawl Space	☐ Community
Trench Width	EXISTING	Trench Bottom Depth(Low side)		Gravel Depth			☐ GRAVITY	☒ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing	

Comments / Conditions: Crush existing septic & pump tanks. Replace distribution
If necessary, 50' buffer must be marked before install.
ICHD recommends pumping to pressure manifold.

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.

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: 10/11/21 | Installed by: Stutts Grading

IMPROVEMENT PERMIT by: Cary Whitt Date: 10/6/21 | OPERATION PERMIT by: [signature] Date: 11-3-2021

AUTHORIZATION TO CONSTRUCT by: Cary Whitt Date: 10/18/21 | Existing System Inspected by: Date:

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

RECEIVED OCT 0 4 2021

DW

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM AP-322035 repair eval

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) Septic Improvement Permit ( ) Authorization to Construct ( ) Existing System Inspection (X) 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 ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: Lakeshore Holdings, LLC **Address:** 637 Williamson Rd, Ste 102, Mooresville, NC **Zip:** 28117

Applicant Email: lakemistoperations@gmail.com **Phone:** 704-799-7609 **Alt. Phone:**

Owner Name: Steve Bailey **Address:** PO Box 5350, Mooresville, NC **Zip:** 28117

Owner Email: lakemisthomes@yahoo.com **Phone:** 704-799-7609 **Alt. Phone:**

Property Information:

Street Address: 260 Lakeshore Drive, Mooresville, NC 28117

Subdivision Name: Lakeview Shores **Section/Phase:** BLC **Lot Number:** 15

Driving Directions: From exit 31 I-77S turn right onto Langtree. Take 2nd exit at roundabout to continue on Langtree Rd.

Turn right on Lakeshore Drive.

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

CHECK FOUNDATION TYPE

(X) New Single Family Residence — Maximum Number of Bedrooms: 3 — (X) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: 6 — ( ) 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:

( ) 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:
(X) 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: Lakeshore Holdings, LLC dba Lakemist Homes 10/1/21

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

PB

AP-320334

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

PJ $250.00 8/9/21 (cc)

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) 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: (X) 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) Please contact Gary McNeely (704-310-1832) prior to evalution

Applicant Name: Lakeshore Holdings, LLC dba Lakemist Homes **Address:** PO BOX 5350, Mooresville, NC **Zip:** 28117

Applicant Email: lakemisthomesdesign@yahoo.com **Phone:** 704-617-4324 **Alt. Phone:** 704-799-7609

Owner Name: Steve Bailey **Address:** _____ **Zip:** _____

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

Property Information:

Street Address: 260 Lakeshore Dr., Mooresville, NC 28117

Subdivision Name: Lakeview Shores **Section/Phase:** BL C **Lot Number:** 15

Driving Directions: From exit 31 (Langtree Rd.) I-77S turn right onto Langtree. Take 2nd exit at roundabout to continue on Langtree Rd. Turn right on Lakeshore Dr. Turn left onto Aqua Dr.

Turn right onto Lakeshore Dr. Lot will be on left

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

CHECK FOUNDATION TYPE

(X) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____

Maximum Number of Bedrooms: 3
Maximum Number of Occupants: 6
( ) Swimming Pool
( ) Other Addition/Structure: _____

(x) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) 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 (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: X _____ 8/6/21
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

(Check and sign only ONE of the options below)

1. * APPLICANT AND OWNER ARE THE SAME. * (*Sign here*) _____

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, Steve Bailey, am the legal owner(s) of the property located at 260 Lakeshore Drive, Mooresville, NC 28117, identified as

PIN (Parcel Identification Number) 4635802935, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Aaron Feldman, Lakeshore Holdings, LLC, 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.

Lakeshore Holdings, LLC dba Lakerest Homes

Signature of Owner(s)

10/1/21
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

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, X STEVE BAILEY, am the legal owner(s) of the property located at 260 Lakeshore Dr, Mooresville, NC 28117, identified as PIN (Parcel Identification Number) 4635802935, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Michael Athanas & Associates, Lake Mist Homes, 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.

X _____ 8/10/21 _____ _____

Signature of Owner(s) Date Signature of Witness Date

Please return this signed form to the appropriate office:

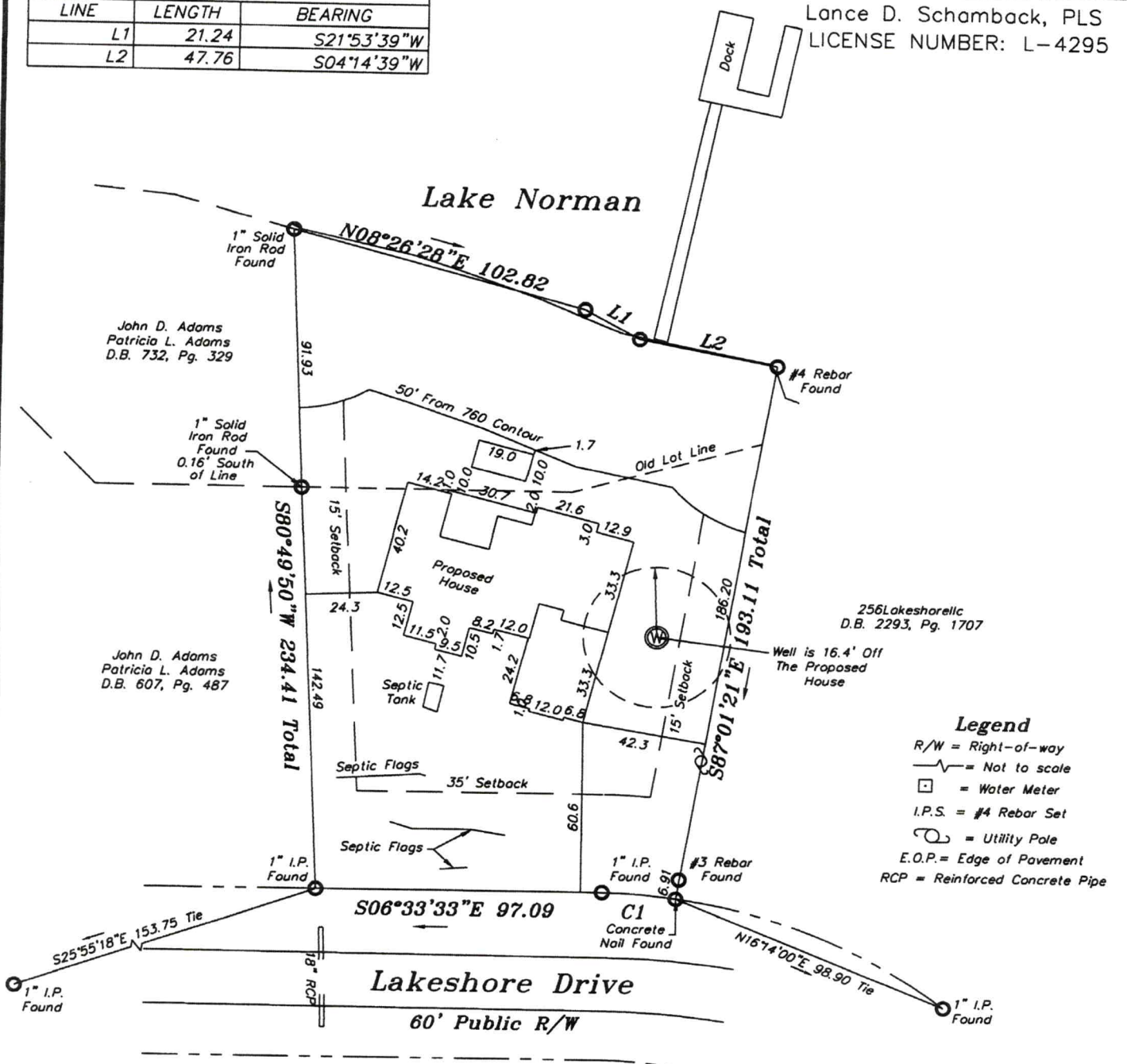
Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

I Lance D. Schamback, certify that this plat was drawn under my supervision from an actual survey made under my supervision (deed description and/or Map Book: 2789, Page 2116. That the boundaries not surveyed are indicated as drawn from information as shown on the survey; that the ratio of precision as calculated is 1: 10,000+ that this map meets the requirements of The Standards of Practice for Land Surveying in North Carolina (21 NCAC 56.1600). This 4 day of June, A.D. 2021.

Lance D. Schamback, PLS
LICENSE NUMBER: L-4295

LINE TABLE		
LINE	LENGTH	BEARING
L1	21.24	S21°53'39"W
L2	47.76	S04°14'39"W



Legend

R/W = Right-of-way
~ = Not to scale
⊡ = Water Meter
I.P.S. = #4 Rebar Set
= Utility Pole
E.O.P. = Edge of Pavement
RCP = Reinforced Concrete Pipe

Notes:

1) This property may be subject to any Easements, Rights-of-way, and/or Restrictive Covenants.

2) Boundary information based on Deed Book: 2789 at Page: 2116 as recorded in the Iredell County Register of Deeds.

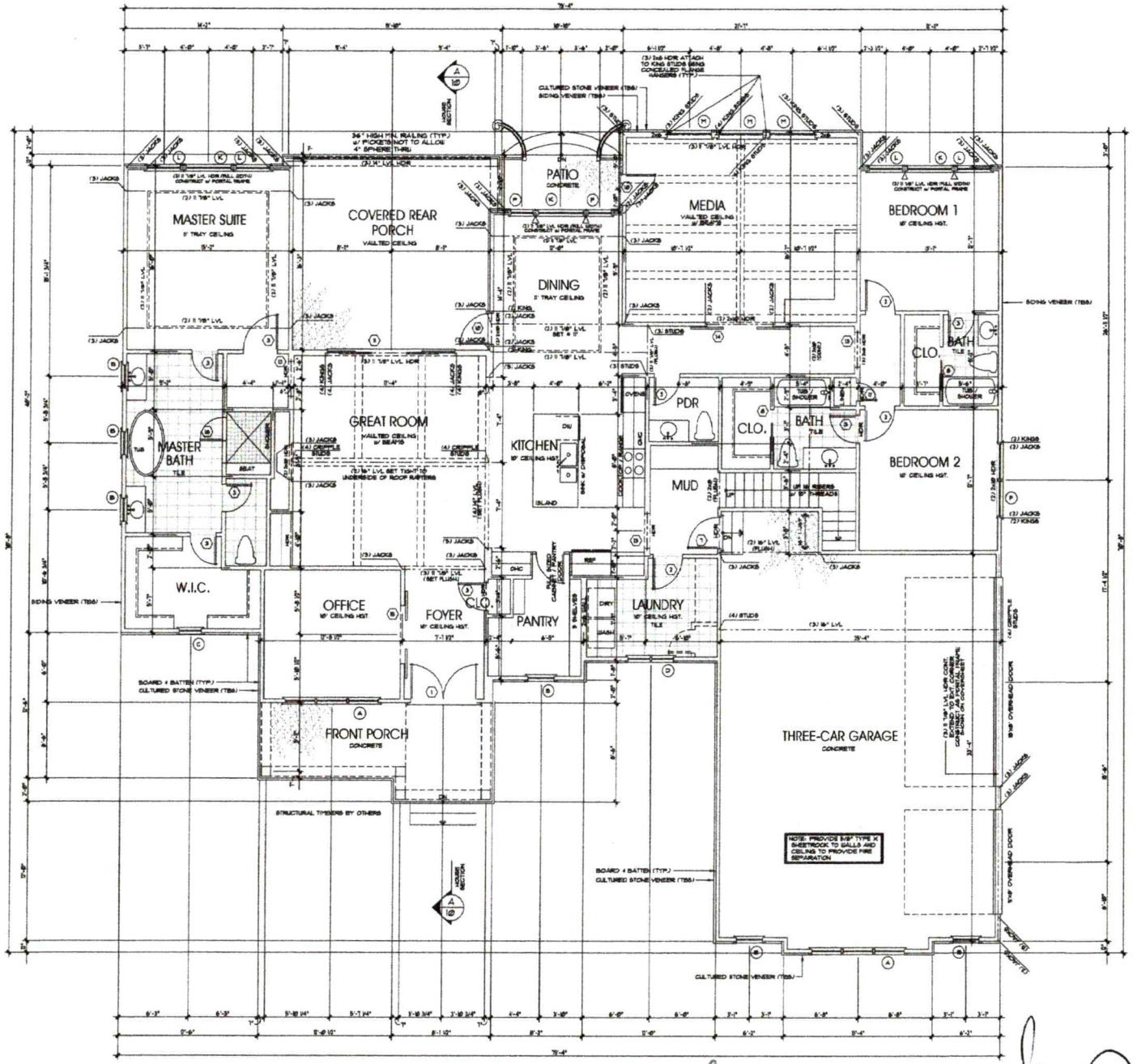
3) No N.C.G.S. or U.S.G.S. Monuments could be located within 2000'.

4) Area by coordinate method

CURVE TABLE				
CURVE	LENGTH	RADIUS	Chord Distance	Chord Bearing
C1	25.24	189.03	25.22	S02°07'13"E

GRAPHIC SCALE

50 0 25 50 100



NOTES:

- ALL ANGLED WALLS ARE 45° UNO
- ▪ INDICATES BLOCKING FOR ABOVE CONCENTRATED LOADS AND ROOF BRACING POINT LOADS UNO.
- SEE FRAMING NOTE 16 FOR HEADER SIZES UNLESS NOTED ON PLAN.
- ALL DOORS ARE 6" FROM WALL UNLESS DIMENSIONED OTHERWISE

EXTERIOR WALL HEIGHT (h)	STUD SIZE/ SPACING
h ≤ 10'	2x4 @ 16" oc
10' < h ≤ 11'	2x4 @ 12" oc
11' < h ≤ 13'	2x6 @ 16" oc
h ≥ 13'	CONSULT ENG.

GARAGE WALL TO BE 2x6 @ 16" O.C. IF EXCEEDING 10' H HEIGHT

△ (3) INTERMEDIATE STUDS. STRAP TO HEADER w/ (1) MSTA-24 STRAP INSIDE AND OUT (TYP.)

DOOR SCHEDULE

	SIZE	DESCRIPTION
1	3'-0" x 8'-0"	ENTRY
2	2'-6" x 8'-0"	SOLID PANEL
3	2'-6" x 8'-0"	SOLID PANEL
4	3'-0" x 8'-0"	SOLID PANEL
5	3'-0" x 6'-8"	EXTERIOR HALF LITE
6	2'-6" x 8'-0"	SOLID PANEL
7	2'-6" x 8'-0"	FIRE RATED
8	2'-6" x 8'-0"	POCKET
9	2'-0" x 8'-0"	SOLID PANEL
10	2'-0" x 8'-0"	EXTERIOR FULL LITE
11	4'-0" x 8'-0"	EXTERIOR SLIDER w/ 0" TRANSOMS
12	1'-6" x 8'-0"	SOLID PANEL
13	3'-0" x 8'-0"	CASED OPENING
14	2'-0" x 8'-0"	BARN SLIDER
15	2'-0" x 8'-0"	BARN SLIDER
16	2'-6"	TEMPERED
17	2'-6" x 6'-8"	SOLID PANEL
18	2'-6" x 6'-8"	SOLID PANEL
19	2'-6" x 6'-8"	SOLID PANEL
20	2'-0" x 6'-8"	SOLID PANEL

WINDOW SCHEDULE

	SIZE	DESCRIPTION
A	3'-0" x 6'-0"	SINGLE HUNG
B	2'-6" x 2'-6"	CASEMENT
C	2'-6" x 4'-6"	SINGLE HUNG
D	2'-0" x 4'-6"	SINGLE HUNG
E	2'-6" x 4'-6"	SINGLE HUNG
F	2'-0" x 5'-1"	SINGLE HUNG
G	2'-6" x 5'-1"	SINGLE HUNG
H	4'-6" x 1'-9"	TEMPERED
J	2'-6" x 3'-9"	TEMPERED
K	4'-6" x 6'-8"	CASEMENT w/ 8" TRANSOM
L	3'-6" x 6'-8"	CASEMENT w/ 8" TRANSOM
M	3'-6" x 6'-8"	CASEMENT
N	2'-0" x 4'-6"	CASEMENT
P	2'-6" x 6'-8"	CASEMENT w/ 8" TRANSOM
Q	4'-6" x 4'-6"	CASEMENT
R	6'-6" x 1'-3"	LEFT TRAPEZOID
S	6'-6" x 1'-3"	RIGHT TRAPEZOID

SQUARE FOOTAGE

MAIN LEVEL	2,926 SQ.FT.
BONUS ROOM	408 SQ.FT.
TOTAL HEATED	3,334 SQ.FT.
UNF. STORAGE	398 SQ.FT.
THREE-CAR GARAGE	898 SQ.FT.
COVERED REAR PORCH	306 SQ.FT.
FRONT PORCH	154 SQ.FT.
TOTAL UNDER ROOF	5,090 SQ.FT.

Cory Whitt 10/6/21

7/22/21

Ruby Designs
704.631.6031
www.rubydesigns.com

LAKEMIST HOMES

PLAN INFO:

A New Custom Residence

The Bailey Residence

PLAN NO:

REVISIONS

SEAL

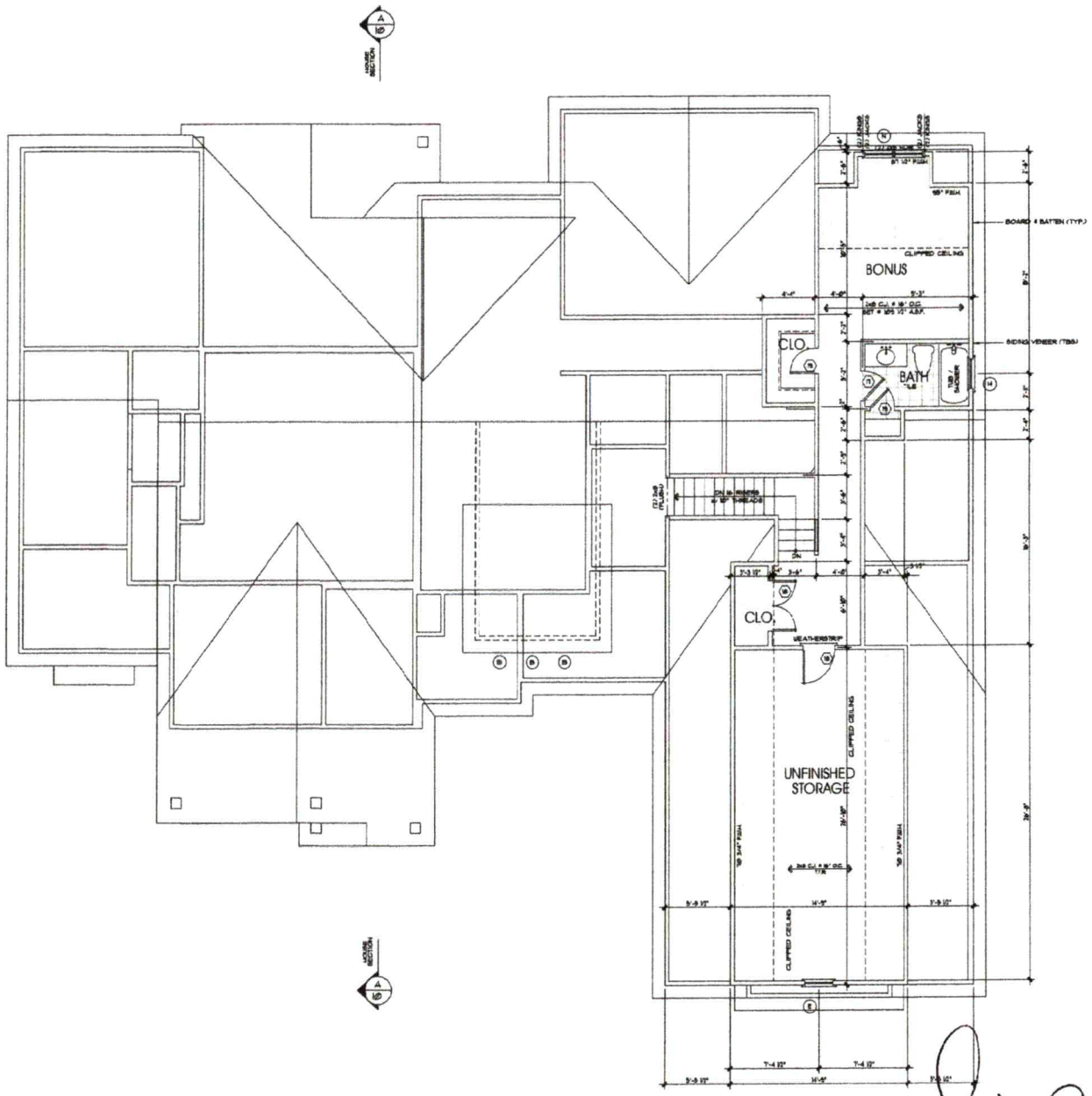
DRAWN BY: D.R. CHECKED BY:

DATE: 07.16.21

DRAWING TITLE: MAIN LEVEL PLAN

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

SHEET NO: 2 OF 15 SHEETS



NOTES:

- ALL ANGLED WALLS ARE 45° UNO.
- ■ INDICATES BLOCKING FOR ABOVE CONCENTRATED LOADS AND ROOF BRACING POINT LOADS UNO.
- SEE FRAMING NOTE 16 FOR HEADER SIZES UNLESS NOTED ON PLAN
- ALL DOORS ARE 6" FROM WALL UNLESS DIMENSIONED OTHERWISE
- WEATHERSTRIP ALL DOORS INTO ATTIC SPACE

EXTERIOR WALL HEIGHT (h)	STUD SIZE/ SPACING
h ≤ 10'	2x4 @ 16" oc
10' < h ≤ 11'	2x4 @ 12" oc
11' < h ≤ 13'	2x6 @ 16" oc
h ≥ 13'	CONSULT ENG.

GARAGE WALL TO BE 2x6 @ 16" OC. IF EXCEEDING 10' IN HEIGHT

DOOR SCHEDULE

	SIZE	DESCRIPTION
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4	2'-6" x 8'-0"	SOLID PANEL
5	2'-0" x 8'-0"	EXTERIOR HALF LITE
6	2'-6" x 8'-0"	SOLID PANEL
7	2'-6" x 8'-0"	FIRE RATED
8	2'-6" x 8'-0"	POCKET
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20	2'-0" x 8'-0"	SOLID PANEL

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C	2'-6" x 4'-0"	SINGLE HUNG
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E	2'-6" x 4'-0"	SINGLE HUNG
F	2'-0" x 3'-0"	SINGLE HUNG
G	2'-6" x 3'-0"	SINGLE HUNG
H	4'-0" x 1'-0"	TEMPERED
J	2'-6" x 3'-0"	TEMPERED
K	4'-0" x 6'-0"	CASEMENT w/ 12" TRANSOM
L	3'-0" x 6'-0"	CASEMENT w/ 12" TRANSOM
M	3'-0" x 6'-0"	CASEMENT
N	2'-0" x 4'-0"	CASEMENT
P	2'-6" x 6'-0"	CASEMENT w/ 12" TRANSOM
Q	4'-0" x 4'-0"	CASEMENT
R	4'-0" x 9'-6" x 3'-0"	LEFT TRAPEZOID
S	4'-0" x 9'-6" x 3'-0"	RIGHT TRAPEZOID

SQUARE FOOTAGE

MAIN LEVEL	2,906 SQ.FT.
BONUS ROOM	428 SQ.FT.
TOTAL HEATED	3,334 SQ.FT.
UNF. STORAGE	398 SQ.FT.
THREE-CAR GARAGE	898 SQ.FT.
COVERED REAR PORCH	306 SQ.FT.
FRONT PORCH	154 SQ.FT.
TOTAL UNDER ROOF	5,090 SQ.FT.

Cory Whitt 10/6/21

7/22/21

Ruth Custom Designs
704.631.6031
www.ruthcustomdesigns.com

LAKEMIST HOMES

PLAN INFO:

A New Custom Residence

The Bailey Residence

PLAN NO:

REVISIONS

SEAL

DRAWN BY: DR | CHECKED BY:

DATE: 07.16.21

DRAWING TITLE: UPPER LEVEL PLAN

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

SHEET NO: 4 OF 15 SHEETS

IREDELL COUNTY · NC

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

APPLICATION NUMBER
320334 Issue Date: 08/09/2021

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4635802935.000	260 LAKESHORE DR	Iredell County

Owner Information	Applicant Information
Name: BAILEY STEVEN	Name: MICHAEL ATHANAS & ASSOCIATES
Address:	Address: 561 ENNIS RD
,	WEDDINGTON, NC 28173
Phone:	Phone: (704)576-3887

Use Requested	Zone Code
Single Family Dwelling	R-20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0	35	50	15	15	WSIV-CA Catawba/Lake Norman	YES

Remarks

SFD (OLD HSE MOVED TO 265 LAKESHORE DR)

Lake Lots: Must meet both the 50-foot setback from the 760' contour line and the 35-foot setback from the rear property line for any structure.

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: 08/09/2021

Signature of Owner/Contractor

Permit Number	320334	TOTAL FEES:	$77.25