IREDELL COUNTY HEALTH DEPARTMENT

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

PERMIT # 252020

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

PIN # 4636-61-8321

APPLICANT/OWNER: Amon Hahn

APPLICANT ADDRESS: 102 Farm Knoll Way. Mooresville, NC 28117

SITE ADDRESS: 108 Hiram Rd. Mooresville, NC 28117

PHONE: 704-361-9880

ALT. PHONE

SITE DIRECTIONS: Stutts, TL Peninsula, TL Hiram, on R

SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Norman Shore

SECTION: — LOT # 17 LOT AREA: .53 AC

DESIGN FLOW: 360 L.T.A.R.: .2

Septic Tank	1000 (gal)	STB	1941	Date	10-26-18	☒ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI
Pump Tank	1000 (gal)	PT	283	Date	11-18-18	System Description:	LP-PPRPS
Pump Make	Champion	Model	CDS TEP1025	Serial #	N33541	Repair System Description:	EXEMPT
# Nitrification Fields	1	# Lines	7	Linear Ft	301	Maintenance Agreement Required:	☒ YES ☐ NO
Trench Width	24"	Trench Bottom Depth(Low side)	42"	Gravel Depth	—	☐ GRAVITY	☒ PRESSURE

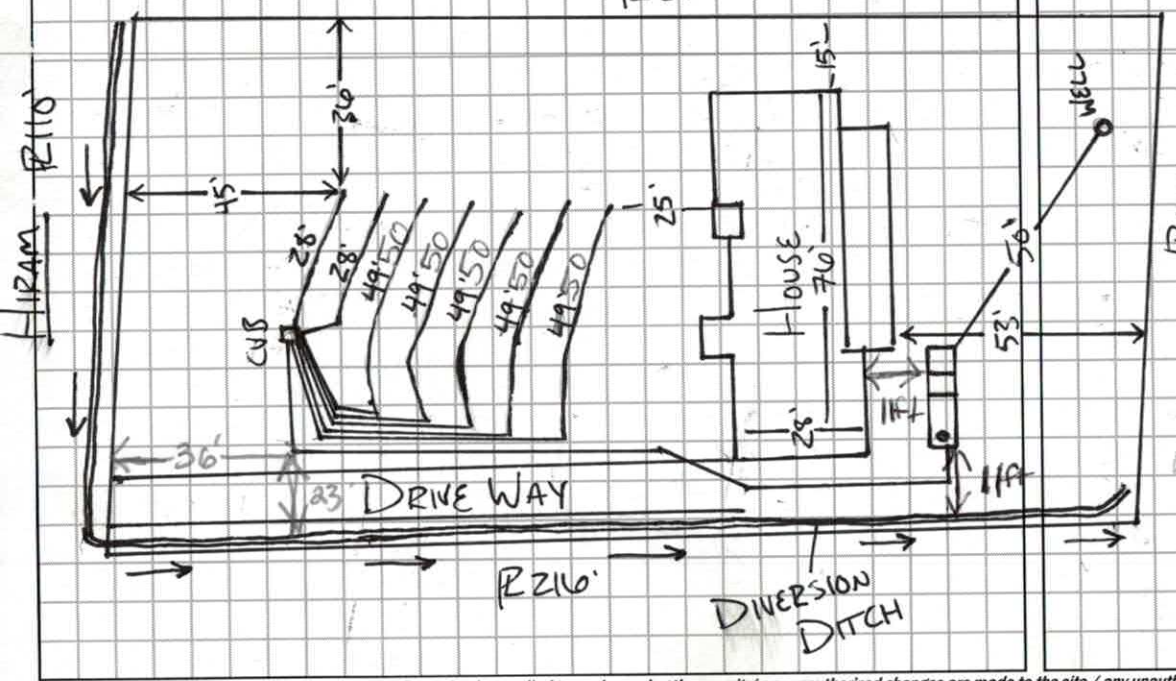
☒ Residence	No. Bedrooms	3	Water Supply
☐ Business	No. Persons	6	☒ Private
☐ Other	No. Employees		☐ Public
☐ Slab	☒ Crawl Space		☐ Community
☐ Basement w/plumbing	☐ Basement w/o plumbing		

Comments / Conditions: Bottom Valve box Controls lower 3 lines & Upper Valve box Controls Upper 4 lines 5/32" hole drilled

ST 11ft from house, 51½ft to well. 10ft from side line

INITIAL SITE SKETCH

1/8/19 Checked drain lines, set 2ft pressure. TT=40



AS BUILT SKETCH

	Date	Initials
Drain Lines Checked	1/8/19	MD
Tanks Checked	12/27/18	MD
Pressure Manifold or Valve Box Checked	1/8/19	MD
Pressure Head Set	1/8/19	MD
Electrical Checked	4.23.19	KW
Floats Set	1/8/19	MD
Alarm Checked	4.23.19	KW
Maintenance Contract Y / N	5/9/19	KW
Supply line (buried 30" + under drive)	1/2/18	MD

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: 12/14/17 Installed by: Kevin Hallman

IMPROVEMENT PERMIT by: APPROVED Date: DEC 12 2017 OPERATION PERMIT by: Kayla Watson Date: 5-9-19

AUTHORIZATION TO CONSTRUCT by: APPROVED Date: DEC 12 2017 Existing System Inspected by: Date:

APPROVED JUN 2 0 2017

APPROVED JUN 1 6 2017

PROPERTY ID #: 4636618321

COUNTY: Iredell

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

OWNER: Crystal Edwards Trefry

APPLICATION DATE

ADDRESS: 136 Stutts Rd., Mooresville, NC 28117

DATE EVALUATED: March-May 2017

PROPOSED FACILITY: Residential

PROPOSED DESIGN FLOW (.1949): 360 gpd

PROPERTY SIZE: 0.53 ac

LOCATION OF SITE: 108 Hiram Rd., Mooresville, NC 28117

PROPERTY RECORDED: Yes

WATER SUPPLY: X Private ☐ Public ☐ Well ☐ Spring ☐ Other

EVALUATION METHOD: X Auger Boring X Pit ☐ Cut

TYPE OF WASTEWATER: X 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	
B 1	LSS 12%	0-27	FILL		N/A -COM SAP -FEW CL INCL.	27-48"	PS	N/A	PS 0.35 GPD/SQFT >27"
		27-37	RY CL WFSBK	FR SS SP SEXP					
		37-48	VAR L SAP M	FR SS SP SEXP					
B 2	LSS 10%	0-14	FILL		N/A -COM MN -MANY SAP -COM CL	14-48"	PS	N/A	PS 0.35 GPD/SQFT 19-62"
		14-19	B SCL GR	FR SS SP SEXP					
		19-48	RY CL/L VWFSBK	FR SS SP SEXP					
		48-62	VAR L SAP M	FR SS SP SEXP					
B 3	LSS 6%	0-12	FILL		N/A -COM SAP -MANY SAP -COM CL	12-50"	PS	N/A	PS 0.35 GPD/SQFT 12-61"
		12-31	RY CL WFSBK	FR SS SP SEXP					
		31-50	RY L VWFSBK	FR SS SP SEXP					
		50-61	VAR L SAP M	FR SS SP SEXP					
B 4	LSS 6%	0-8	FILL		-COM MN -COM MN -FEW MN, FEW YB, FEW SAP -FEW MN, FEW SAP, FEW YB -FEW CHR 2 >57", FEW MN, FEW YR	8-60"	N/A	N/A	PS 0.25 GPD/SQFT 8-57"
		8-16	B SCL GR	FR SS SP SEXP					
		16-30	BR C WFSBK	FI S P SEXP					
		30-41	YR C WFSBK	FI S P SEXP					
		41-52	SB C WFSBK	FI S P SEXP					
		52-60	YB C WFSBK	FI S P SEXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	NOT REQUIRED
System Type(s)	LP PPBPS	
Site LTAR	0.2	

OTHER FACTORS (.1946): NONE

SITE CLASSIFICATION (.1948): PS

EVALUATED BY: ADRAIN L. PRUETT

OTHER(S) PRESENT: NONE

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

PROPERTY ID #: 4636618321

DATE OF EVALUATION: MARCH-MAY 2017

COUNTY: IREDELL

APPROVED JUN 2 0 2017 BA

APPROVED JUN 1 6 2017

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	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
B 5	LSS 10%	0-14	FILL		N/A	14-48"	N/A	N/A	PS
		14-22	B SCL GR	FR SS SP SEXP	-COM MN				
		22-32	BR C WFSBK	FI S P SEXP	-COM MN				0.25 GPD/SQFT 14-48"
		32-36	YR C WFSBK	FI S P SEXP	-COM MN, FEW SAP, FEW YB				
		36-48	SB C WFSBK	FI S P SEXP	-COM MN, FEW SAP, FEW YB				
B 6	LSS 6%	0-14	FILL		N/A	14-61"	N/A	N/A	PS
		14-24	B SCL GR	FR SS SP SEXP	-COM MN				
		24-53	SB C WFSBK	FI S P SEXP	-COM MN, FEW YB				0.25 GPD/SQFT 14-57"
		53-61	YB C WFSBK	FI S P SEXP	-FEW CHR. 2 >57", FEW MN				
B 7	LSS 7%	0-18	FILL		N/A	18-60"	N/A	N/A	PS
		18-28	B SCL GR	FI SS SP SEXP	-COM MN				
		28-42	BR C WFSBK	FR SS SP SEXP	-COM MN, FEW YB				0.25 GPD/SQFT 18-60"
		42-48	SB C WFSBK	FI S P SEXP	-FEW MN, FEW YR				
		48-60	YB C WFSBK	FI S P SEXP					
B 8	LSS 5%	0-17	FILL		N/A	61"	N/A	N/A	PS
		17-18	B SCL GR	FR SS SP SEXP	-FEW MN				
		18-41	YR C WFSBK	FI S P SEXP	-FEW SAP -COM SAP				0.275 GPD/SQFT 17-61"
		41-55	YR C WFSBK	FI S P SEXP					
		55-61	YR CL WFSBK	FR SS SP SEXP					
B 9	LSS 5%	0-16			N/A	16-62"	N/A	N/A	PS
		16-29	YR C WFSBK	FI S P SEXP	-MANY SAP -MANY SAP				
		29-52	RY CL WFSBK	FR SS SP SEXP					0.3 GPD/SQFT 16-62"
		52-62	RY L WFSBK	FR SS SP SEXP					

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

APPROVED JUN 2 0 2017

APPROVED JUN 1 6 2017

PROPERTY ID #: 4636618321

DATE OF EVALUATION: MARCH-MAY 2017

COUNTY: IREDELL

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	
B10	LSS 5%	0-20	FILL		N/A	20-62"	N/A	N/A	PS
		20-27	B SCL GR	FR SS SP SEXP	-COM MN				
		27-39	RB CL WFSBK	FR SS SP SEXP	-COM MN				
		39-44	BR C WFSBK	FR SS SP SEXP	-COM MN				0.25 GPD/SQFT 20-62"
		44-62	YR C WFSBK	FR SS SP SEXP	-FEW YB, FEW MN				
B11	LSS 6%	0-18	FILL		N/A	18-62"	N/A	N/A	PS
		18-24	BR CL WFSBK	FR SS SP SEXP					
		24-32	YR C WFSBK	FR SS SP SEXP	-FEW/COM MN				
		32-42	YR C WFSBK	FR SS SP SEXP	-FEW SAP				0.275 GPD/SQFT 18-62"
		42-52	YR CL WFSBK	FR SS SP SEXP	-FEW/COM SAP				
		52-62	YR CL WFSBK	FR SS SP SEXP	-MANY SAP				
P1	LSS 6%	0-12	FILL		N/A	12-64"	PS	N/A	PS
		12-23	YR C MFABK	FI S P SEXP					
		23-40	YR C WFSBK	FI S P SEXP	-COM SAP				
		40-64	YR CL WFSBK	FR SS SP SEXP	-MANY SAP				0.25 GPD/SQFT 12-74"
		64-72	YB L SAP M	FR SS SP SEXP	-COM YR C VEINS				
P2	LSS 6%	0-25	FILL			25-68"	N/A	N/A	PS
		25-31	B C VWFSBK	FI S P SEXP	-FEW ORGANICS, FEW MN				
		31-42	RB C WFSBK	FI S P SEXP	-COM MN				
		42-50	RB C WFSBK	FI S P SEXP	-FEW YB				0.2 GPD/SQFT 25-57"
		50-68	YB C WFSBK	FI S P SEXP	-FEW 2.5Y 6/2 >57", FEW 2.5Y 6/3				
P3	LSS 5%	0-18	FILL		N/A	18-67"	N/A	N/A	PS
		18-25	B SCL GR	FR SS SP SEXP	-FEW MN, FEW YB				
		25-40	RB C WFSBK	FI S P SEXP	-FEW MN, FEW YB				
		40-48	RB C WFABK	FI S P SEXP	-COM MN, FEW YB				0.2 GPD/SQFT 18-67"
		48-60	YR C MFABK	FI S P SEXP	-COM MN, FEW YB				
		60-67	YB C MFABK	FI S P SEXP	-COM YR				

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

PROPERTY ID #: 4636618321
DATE OF EVALUATION: MARCH-MAY 2017
COUNTY: IREDELL

APPROVED JUN 2 0 2017 BA

~~APPROVED JUN 1 6 2017~~

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	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
P 4	LSS 5%	0-14	FILL		N/A	14-60"	PS	N/A	PS OK
		14-20	B CL WFSBK	FR SS SP SEXP					
		20-40	YR C MFABK	FI S P SEXP	-FEW PARENT MATERIAL				
		40-60	RY CL WFSBK	FR SS SP SEXP	-COM SAP				0.3 GPD/SQFT 14-68"
		60-68	VAR L SAP M	FR SS SP SEXP	-COM YR C/CL				
P 5	LSS 12%	0-28	FILL		N/A	28-68"	N/A	N/A	PS
		28-39	B SCL GR	FR SS SP SEXP	-FEW/COM MN				
		39-45	BR/RB C WFSBK	FI S P SEXP	-FEW MN, FEW YB				
		45-50	BR C WFSBK/ABK	FI S P SEXP	-COM MN, FEW YB				0.2 GPD/SQFT 28-68"
		50-55	YR C MFABK	FI S P SEXP	-COM YB, FEW MN				
		55-68	YB C MFABK	FI S P SEXP	-FEW MN				

COMMENTS:

RECEIVED DEC 11 2017

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM Ltd Relayout Pd. $105.00 #232020

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 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: Whitley Construction Address: PO Box 3395 Mooresville, NC Zip: 28117
Applicant Email: JCwhitley@att.net Phone: (704) 658-9251 Alt. Phone: (704) 361-9880
Owner Name: Amon Hahn Address: 102 Farm Knoll Way Mooresville Zip: 28117
Owner Email: ahahn1@yahoo.com Phone: (704) 472-9231 Alt. Phone: _____

Property Information:

Street Address: 108 Hiram Rd
Subdivision Name: Norman Shore Section/Phase: _____ Lot Number: 17
Driving Directions: Turn onto Stutts from Brawley School (L) Peninsula (L) Hiram

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

moving a stick built house to lot

(✓) 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: _____

CHECK FOUNDATION TYPE
(✓) 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: 1 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: John Whitley 12/6/17
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

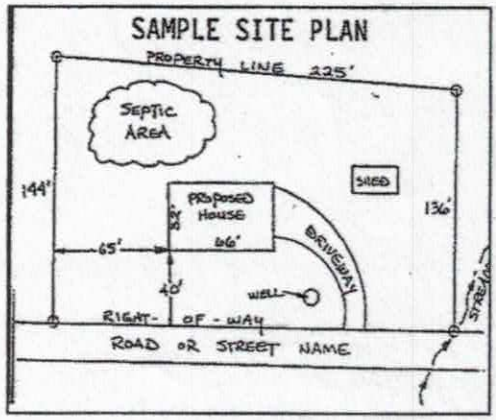
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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
- (X) Front and side setbacks from property line
- (X) Preferred driveway location
- (X) Preferred well location
- (X) Preferred septic system location
- (→) North arrow, or other sufficient indicator of direction

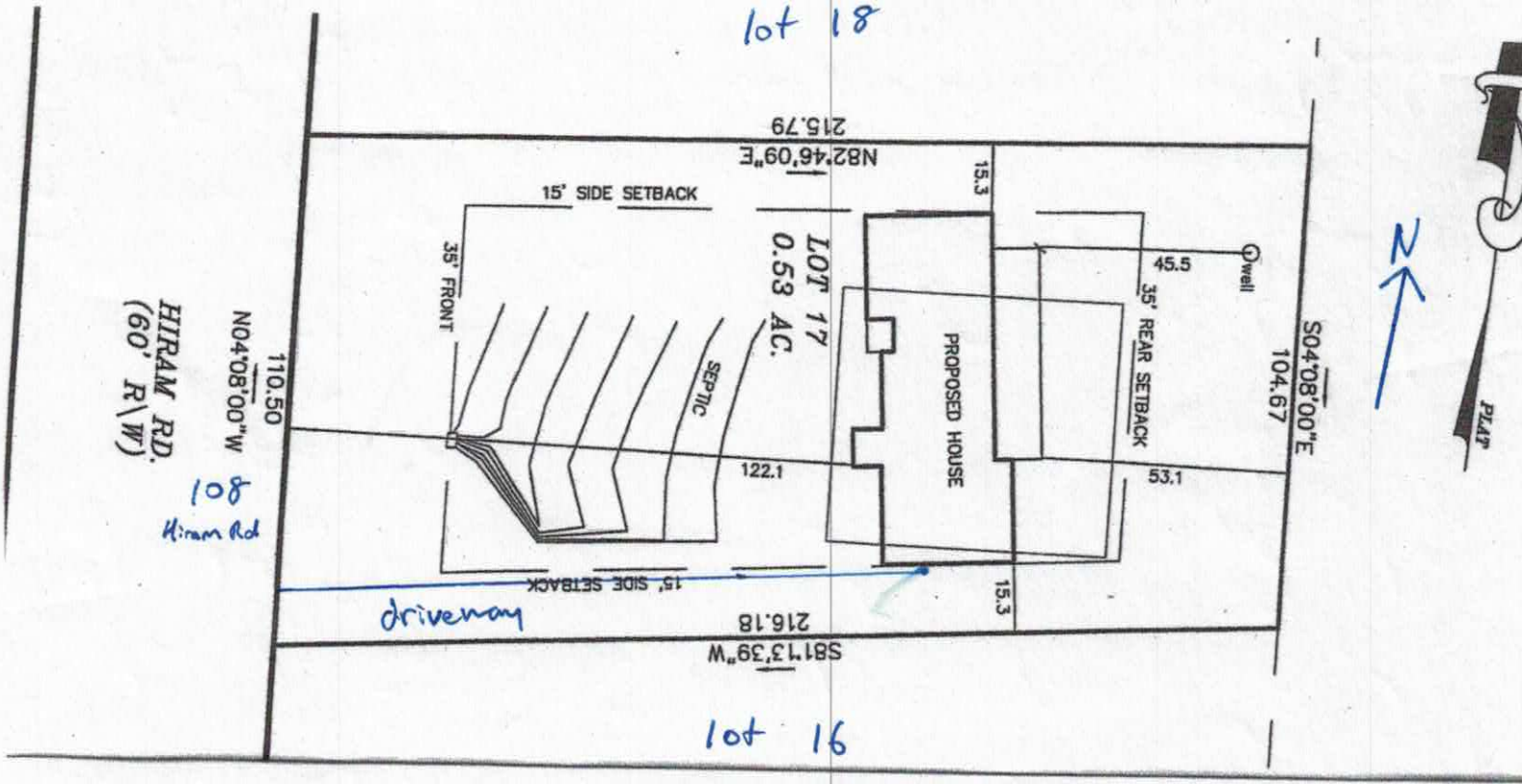


Circle N/A on the following if appropriate:

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



Signature: John R Whitley

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

12/6/17

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, Amon Hahn, am the legal owner(s) of the property located at 108 Hiram Rd, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) John Whitley, Whitley Construction 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.

Amon Hahn	12/11/17		
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

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, Crystal B Trefry, am the legal owner(s) of the property located at 108 Hiran Rd, Mooresville NC 28117, identified as PIN (Parcel Identification Number) 4636618321, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Adrian Pruett, Carolina Soil & Septic, 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.

Crystal B Trefry 5/16/17

Signature of Owner(s) Date

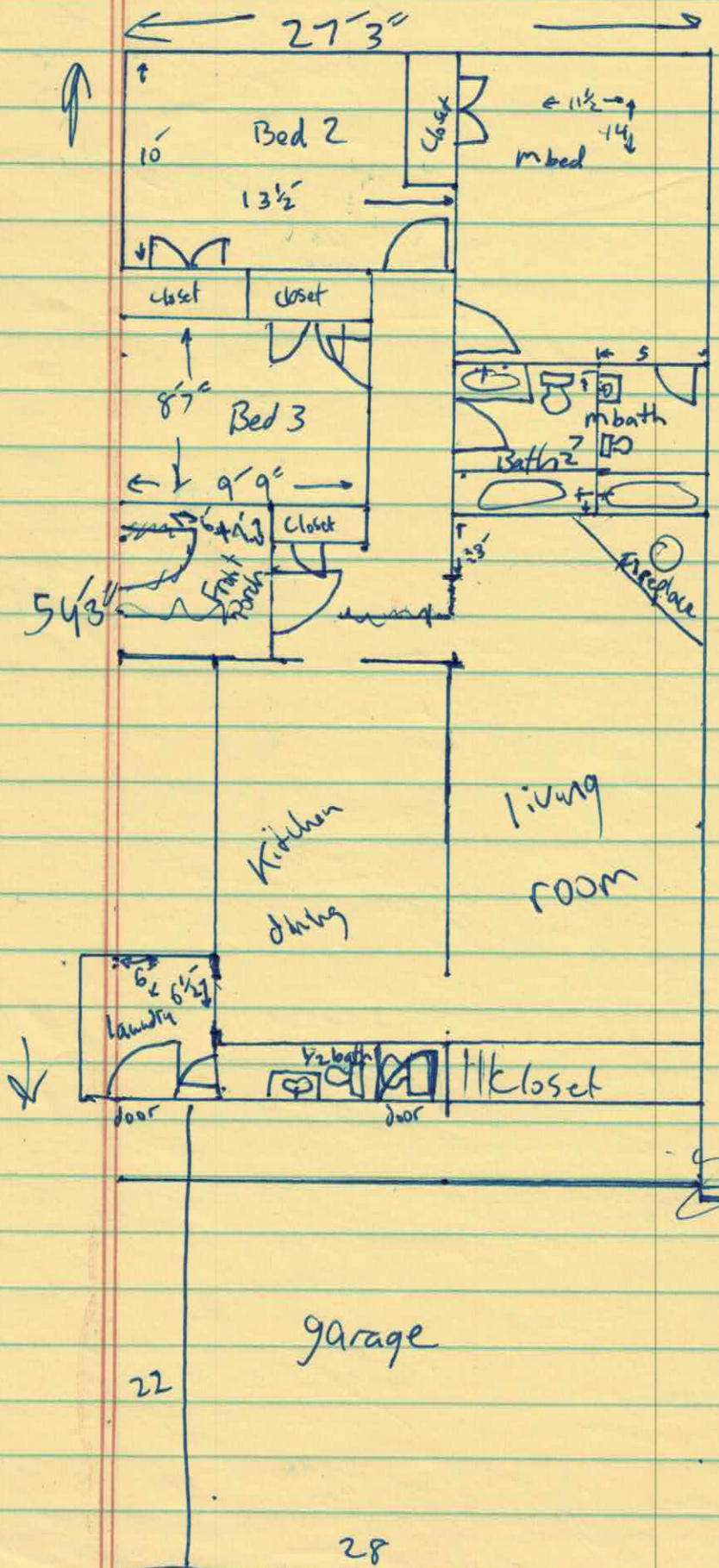
Signature of Witness 5/16/17

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



1392 sq'

3 bed

2 ½ bath

Acknowledgement of Plans Submittal ONLY!

Date 12/7/17

Date 12-12-17

IREDELL COUNTY

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

APPLICATION NUMBER
232020
Issue Date: 12/07/2017

Permit Type: ZONING-IREDELL COUNTY

Parcel Number	Street Address	Jurisdiction
4636618321.000	108 HIRAM ROAD	

Owner Information	Applicant Information	Contractor Information
Owner: EDWARDS CRYSTAL B Address: 2200 IREDELL CO, NC 28625 Phone:	Applicant: WHITLEY CONSTRUCTION L Address: PO BOX 3395 MOORESVILLE, NC 28117 Phone: 704-658-9251	Contractor: WHITLEY CONSTRUCTION L Address: PO BOX 3395 MOORESVILLE, NC 28117 Phone: 704-361-9880 License Type: BLDG License Number: 45448-U

Project Description

NEW SINGLE FAMILY - IREDELL

Scope of Work

SFD

Permit Details:

	TECHNOLOGY FEE - PLANNING	Amount:	2.25
	IREDELL COUNTY ZONING	Amount:	75.00
		Amount:	
		Amount:	
		Amount:	
		Amount:	
		Amount:	

I hereby certify that all information in this application is correct and all work will comply with the state code and all other applicable state and local laws, ordinances and regulations. The respective department will be notified of any changes in the approved plans, a change of contractor, and/or specifications for the project permitted herein. This application becomes a permit only when validated and approved.

Date: 12/07/2017

Signature of Owner/Contractor

ANY PERMIT ISSUED EXPIRES SIX (6) MONTHS AFTER ISSUANCE IF NO INSPECTIONS HAVE BEEN MADE. ANY PERMIT ISSUED SHALL EXPIRE TWELVE (12) MONTHS AFTER LAST INSPECTION IF THE WORK IS DISCONTINUED.

Permit Number	122734	TOTAL FEES:	$ 77.25

IREDELL COUNTY

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

APPLICATION NUMBER
224749
Issue Date: 02/03/2017

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4636618321.000	108 HIRAM ROAD, MOORESVILLE, NC 28117	

Owner Information	Applicant Information
Owner: EDWARDS CRYSTAL B	Applicant: 1ST CHOICE HOUSING INC
Address: 2200 IREDELL CO, NC 28625	Address: 119 BEECHNUT LANE STATESVILLE, NC 28625
Phone:	Phone:

Use Requested	Zone Code

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.530	35.00	35.00	15.00	15.00	CA	X

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	92266	TOTAL FEES:	$ 77.25