ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # AP 324005

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

PIN # 4636-93-3899

APPLICANT/OWNER: Michelle Hunt | APPLICANT ADDRESS: 147 Ringneck Trail Mooresville, NC 28117

SITE ADDRESS: 187 Ringneck Trail Mooresville, NC 28117 | PHONE: 704 651-7125 | ALT. PHONE

SITE DIRECTIONS: Brawley School Rd TL Canvasback TL Broadbill TR Ringneck on right | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Woodland Hills | SECTION: 8 | LOT # 114 | LOT AREA: .39 Acre | DESIGN FLOW: 360gpd | L.T.A.R.: .3

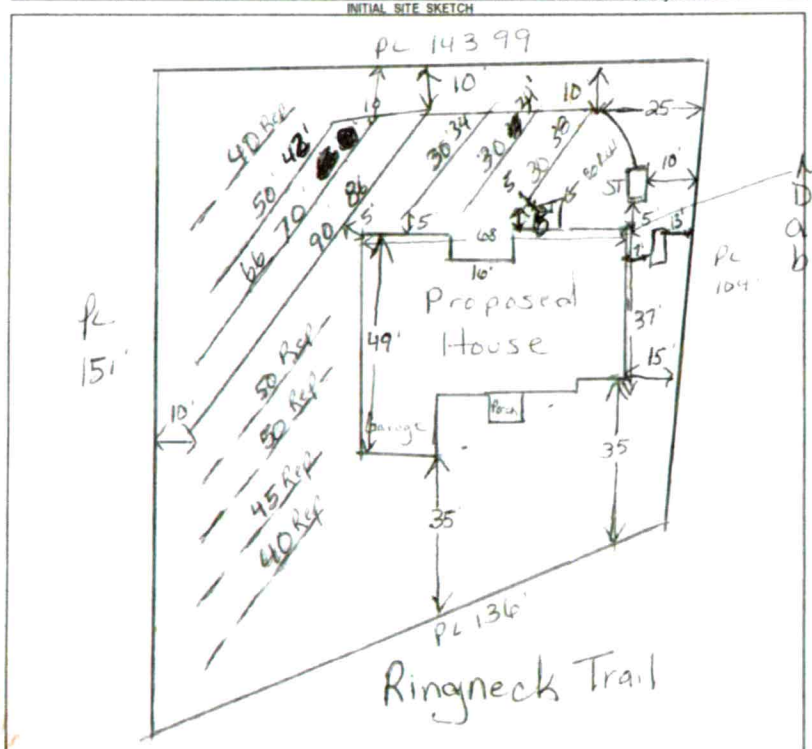
Septic Tank	1000 (gal)	STB	Date	☒ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 3
Pump Tank	(gal)	PT	Date	System Description: Gravity- 25% Reduction		☐ Business	No. Persons 6
Pump Make		Model	Serial #	Repair System Description: PPBPS		☐ Other	No. Employees
# Nitrification Fields	1	# Lines 6	Linear Ft 300'	Maintenance Agreement Required: ☐ YES ☒ NO		☐ Slab	☒ Crawl Space
Trench Width	36"	Trench Bottom Depth(Low side)		Gravel Depth	☒ GRAVITY ☐ PRESSURE	☐ Basement w/ plumbing	☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☒ Community

Comments / Conditions: No drain around back of house
Divert storm/surface water away from Septic
Scale 1:40

INSTALLED @ 24 IN HIGHSIDE
8-24-2022 BOTTOM LINE + PLUMBING MUST BE CHECKED

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.

INSTALLED AS SHOWN

Authorization to Construct
FOR SEPTIC FINAL INSPECTION
CALL 704-664-3703

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: 3/14/22 | Installed by: RUSSELL WILLIAMS

IMPROVEMENT PERMIT by: [signature] Date: 3/9/22 | OPERATION PERMIT by: Bryant L. White Date: 8-22-2022

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 3/9/22 | Existing System Inspected by: Date:

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

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP 324005

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

PIN # 4636 -- 93 -- 3899

APPLICANT/OWNER: Michelle Hunt | APPLICANT ADDRESS: 147 Ringneck Trail Mooresville, NC 28117

SITE ADDRESS: 187 Ringneck Trail Mooresville, NC 28117 | PHONE: 704 651-7125 | ALT. PHONE

SITE DIRECTIONS: Brawley School Rd TL Canvasback TL Broadbill TR Ringneck on right | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Woodland Hills | SECTION: 8 | LOT # 114 | LOT AREA: .39 Acre | DESIGN FLOW: 360gpd | L.T.A.R.: .3

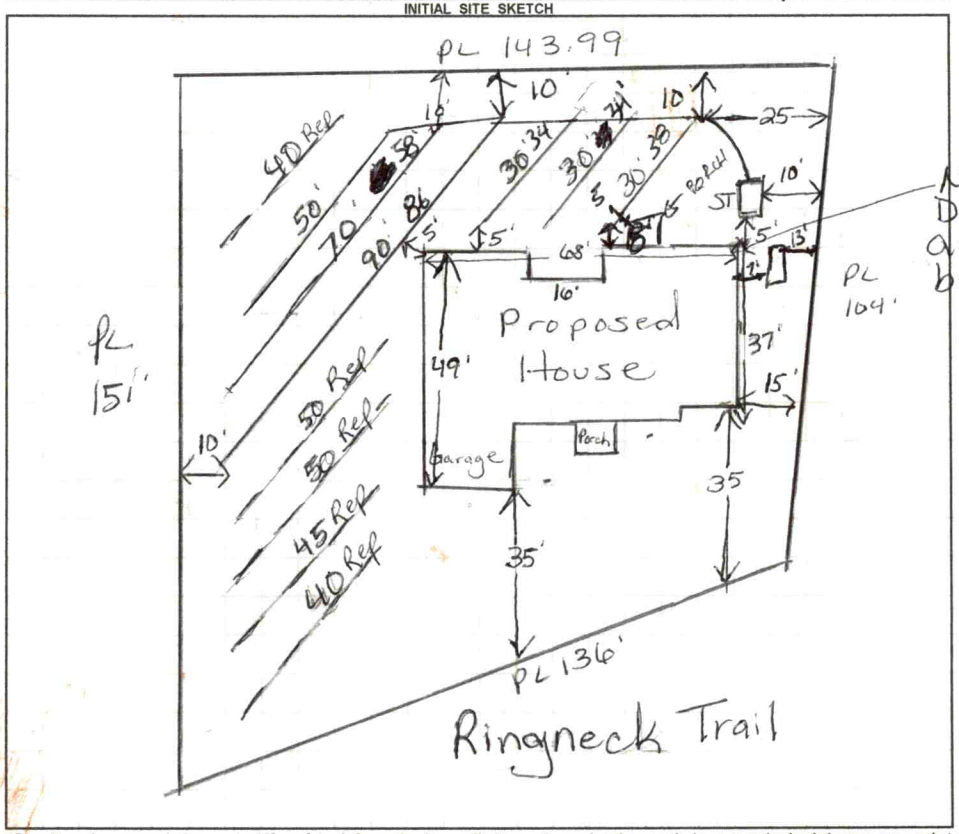
Septic Tank	1000 (gal)	STB	Date	☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 3
Pump Tank	(gal)	PT	Date	System Description:	Gravity- 25% Reduction			☐ Business	No. Persons 6
Pump Make		Model	Serial #	Repair System Description:	PPBPS			☐ Other	No. Employees
# Nitrification Fields	1	# Lines	6	Linear Ft: 300'	Maintenance Agreement Required:	☐ YES	☒ NO	☐ Slab	☒ Crawl Space
Trench Width	36"	Trench Bottom Depth(Low side)		Gravel Depth		☒ GRAVITY	☐ PRESSURE	☐ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☒ Community

Comments / Conditions: No drain around back of house
Divert storm/surface water away from Septic
Scale 1:40

INSTALLED @ 24IN HIGHSIDE
8-24-2022 BOTTOM LINE + PLUMBING MUST BE CHECKED

INITIAL SITE SKETCH



AS BUILT SKETCH

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☐ **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: 3/14/22 | Installed by: RUSSELL WILLIAMS

IMPROVEMENT PERMIT by: Maria Dobson Date: 3/9/22 | OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Maria Dobson Date: 3/9/22 | Existing System Inspected by: Date:

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

Item	Date	Initials
Drain Lines Checked		
Tanks Checked		
Pressure Manifold or Valve Box Checked		
Pressure Head Set		
Electrical Checked		
Floats Set		
Alarm Checked		
Maintenance Contract Needed? Y / N		
Comments:		

Repairs Only	
	State Code
Failing System Code	
Type of Distribution	G or P
Type of Failure/Malfunction	
Primary Cause of Failure/Malfunction	
Age of System? _____	
Initial or Repair? _____	

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

Sheet ___ of ___
PROPERTY ID #: 4636933899
COUNTY: Iredell

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

OWNER: Michelle Hunt — APPLICATION DATE: 12/16/21
ADDRESS: 147 Ringneck Trail Mooresville NC 28117 — DATE EVALUATED: 12/20/22
PROPOSED FACILITY: House — PROPOSED DESIGN FLOW (.1949): 360 gpd — PROPERTY SIZE: .39 Ac
LOCATION OF SITE: 187 Ringneck Trail / Woodland Hills #114 — PROPERTY RECORDED: Y
WATER SUPPLY: ☐ Private ☒ Public ☐ Well ☐ Spring ☐ Other ___
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	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	3%	0-8	Brw SCL	w SBK SS,	SP, Sexp, FR	FR			PS
		8-28	RC/CL	m-w SBK SS, SP, Sexp,					
		28-50	RC/CL	w SBK SS, SP, Sexp,		FR w/few to many			.3
			many	SAP Inclus					
2	2%	0-7	Brw SCL	w SBK	w SBK SS, SP, Sexp, FR				PS
		7-24	RC	m-w SBK SS	SP, Sexp, FR				
		24-50	RCL	w SBK SS, SP, Sexp,		FR w/few to			.3
			many	SAP, Inclus & Mica flakes					
3	3%	0-7	Brw SCL	w SBK SS, SP, Sexp,					PS
		7-23	RC	m-w SBK SS, SP, Sexp, FR					
		23-50	RCL	w SBK SS, SP, Sexp,		FR w/few to			.3
			many	SAP Inclus & mica flakes					
4	3%	0-7	Brw SCL	w SBK SS, SP, Sexp, FR					PS
		7-24	RC	m-w SBK SS, SP, Sexp, FR					
		24-50	RCL	w SBK SS, SP, Sexp, FR					.3

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	25% Red	PPBPS
Site LTAR	.3	.3

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Maria Dotson
OTHER(S) PRESENT: Michelle Hunt

COMMENTS: AB- 0-8 Brw SCL w SBK SS, SP, Sexp, FR — PS
8-28 RC m-w SBK SS, SP, Sexp, FR — .3
28-50 RC/CL w SBK SS, SP, Sexp, FR w/ few to many SAP Inclus

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	SEXP (Slightly Expansive)	G (Single Grain)
CV (Convex Slope)		LS (Loamy Sand)			EXP (Expansive)	M (Massive)
D (Drainage Way)						CR (Crumb)
DS (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
FP (Flood Plain)		L (Loam)				SBK (Subangular Blocky)
FS (Foot Slope)						ABK (Angular Blocky)
H (Head Slope)	III	Si (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
L (Linear Slope)		SiCL (Silty Clay Loam)				PR (Prismatic)
N (Nose Slope)		CL (Clay Loam)				
R (Ridge)		SCL (Sandy Clay Loam)			**MOIST**	**WET**
S (Shoulder Slope)		SiL (Silt Loam)				
T (Terrace)					VFR (Very Friable)	NS (Non-sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FR (Friable)	SS (Slightly Sticky)
		SiC (Silty Clay)			FI (Firm)	S (Sticky)
		C (Clay)			VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
		O (Organic)	None	None	EFI (Extremely Firm)	NP (Non-plastic)
						SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

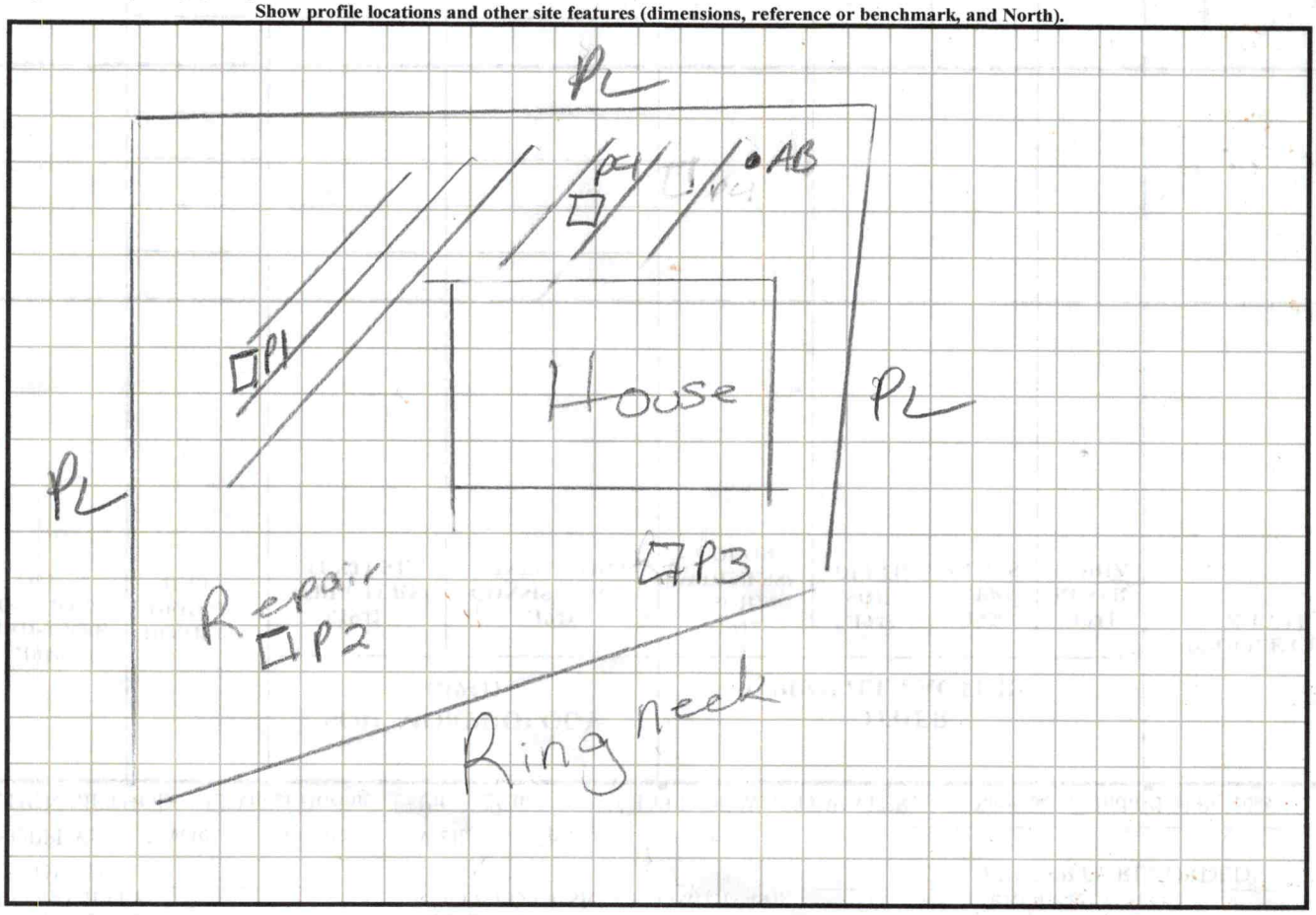
NOTES

HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
CLASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.

Long-term Acceptance Rate (LTAR): gal/day/ft^2

Show profile locations and other site features (dimensions, reference or benchmark, and North).



RECEIVED DEC 17 2021 Thurs 11/20 10:00am

M MD

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-324005 $500.00

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: Michelle Hunt **Address:** 147 Ringneck Trail Mooresville **Zip:** 28117
Applicant Email: mishgrant53@gmail **Phone:** 704 651 7125 **Alt. Phone:** _____
Owner Name: Maria Walling **Address:** 2591 Marble St. Newton NC **Zip:** 28658
Owner Email: tootsiegirlhome@gmail **Phone:** 239-253-2953 **Alt. Phone:** _____

Property Information:

Street Address: 187 Ringneck Trail Mooresville
Subdivision Name: Woodland Hills **Section/Phase:** S8 **Lot Number:** 114
Driving Directions: I77 to Brawley School Rd - West on Brawley to Canvasback, left on Broadbill, right on Ringneck

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

(✓) 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: _____
( ) Swimming Pool
( ) Other Addition/Structure: _____
Non-Residential Site Development: Type of Business: _____
Square Footage of Building: _____ Max. Number of Employees: _____ Max. Number of Seats/Beds/Other: _____

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

Water Supply: ( ) Replacement Well – Reason: _____
( ) Multi-connection Well Number of Houses: _____ 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.

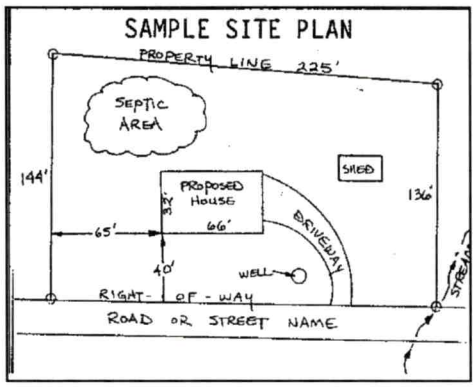
Signature: _____ December 16 20
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) D

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:

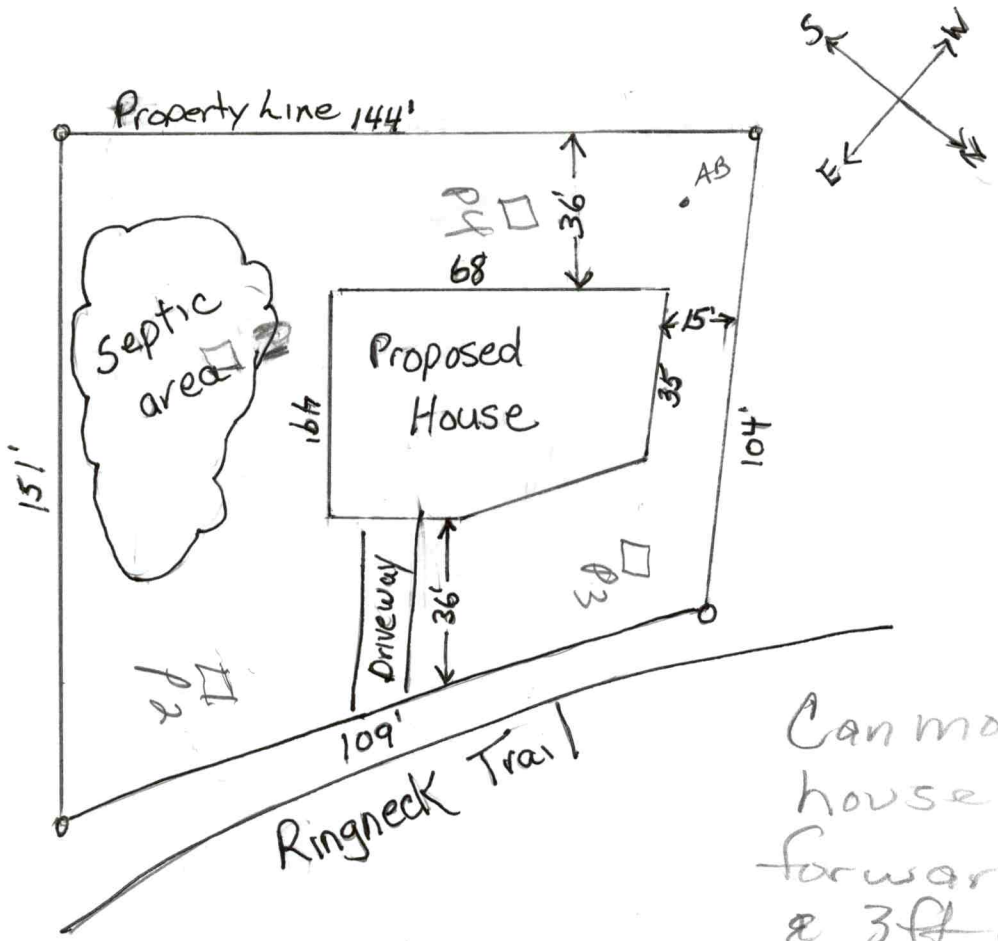
- (✓) Property Line measurements are clearly identified
- (✓) All proposed structures are indicated
- (✓) Front and side setbacks from property line
- (✓) Preferred driveway location and well location
- (✓) Area you prefer your septic system to be placed
- (✓) North arrow, or other sufficient indicator 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



Canmore house 5ft forward & 3ft over

Signature: _____

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

December 16 2021

DATE

DAS

DON ALLEN & ASSOCIATES, P. A.
"Since 1971"
Commercial * Residential * Mortgage Surveys * Multi-Family
Construction Staking * Subdivision Design * Topographical
131 Crosslake Park Drive – Suite 102 * Mooresville * NC * 28117
(704) 664-7029 (704) 664-8041 Fax

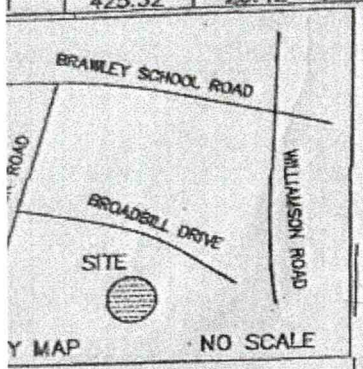
I, certify that this map was drawn under my supervision from an actual survey made under my supervision recorded in deed book 2364, page 1627, and/or plat book 21, page 13, that the ratio of precision is 1':10,000, that this map was prepared in accordance with the General Statutes of North Carolina Chapter 89C. In my hand and seal on the 8, day of AUG. A.D. 20 17.

WILLIAM M. ALLEN, PLS

NORTH CAROLINA PROFESSIONAL SEAL L-3499 LAND SURVEYOR WILLIAM M. ALLEN

58
114

CURVE TABLE				
VE	RADIUS	LENGTH	BEARING	CHORD
1	425.32'	26.42'	S 35°48'17" E	26.42'



FIBROS

LOT 100A
ALAN GREGORY
1764\1610

LOT 101A
WILLIAM HANNAGAN
825\741

LOT 118
ABAR LLC
2431\903

N16°50'35"W
144.23

EIP

20.50

130.53

35' REAR SETBACK

LOT 114
0.393 AC.

LOT 113
WILLIAM PHILLIPS III
1061\1909

N80°02'49"E
104.04

18' SIDE

15' SIDE SETBACK

151.03 TOTAL

(BASE BEARING)
S71°37'02"W

35' FRONT SETBACK

R\W

C1

LOT 115
CE HOLDING LLC
364\1627

S37°41'05"E
109.89

RINGNECK TRAIL
(60' R\W)

ONLY)
°40'16"E
124.92

NOTES

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

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, MARIA WALLING, am the legal owner(s) of the property located at 187 Ringneck Tr Mooresville NC, identified as PIN (Parcel Identification Number)_____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Michelle Hunt, _____, 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.

Maria Walling
Signature of Owner(s)

12-17-2021
Date

Mooresville - Environmental Health

Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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

IREDELL COUNTY · NC

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

APPLICATION NUMBER
324005 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4636933899.000	187 RINGNECK TRL	Iredell County

Owner Information	Applicant Information
Name: WALLING MARIA+JOHN W PENDERGAST	Name: MICHELLE HUNT
Address:	Address: 147 RINGNECK TR MOORESVILLE, NC 28115
Phone:	Phone: (704)651-7125

Use Requested	Zone Code
Single Family Dwelling	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.39	35	35	15	15	WSIV-CA Catawba/Lake Norman	NO

Remarks
SFD

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: 12/17/2021

Signature of Owner/Contractor

Permit Number	324005	TOTAL FEES:	$77.25

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

Residential Zoning Permit Application

What are you building? (Please check)

Stick built X Modular___ Duplex___ Singlewide___ Doublewide___ Pier___ Addition___ Bedroom addition___

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

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

Is there a septic tank on the property? Yes (No) If residence how many bedrooms? 3 and stories? 1

If an addition, please describe project: _____

Please list square footage of project (Pier, Addition, Accessory Dwelling, Accessory Building only): 1877

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 Maria Walling Phone # 239-253-2953

Owner's Current Address 2591 Marble St Newton NC.

Property Information

Property Address 187 Ringneck Tr. Parcel # _____

Subdivision: Woodland Hills Lot: 114 Zoning:___ Watershed: Y or N Flood Plain: Y or N Township:___

Directions to property (from a MAIN ROAD) Brawley to Canvas Back, to Broadbill to Ringneck Trail

Application Information

Applicant's Name or Company Michelle Hunt Applicant's Phone # 704-651-7125.

Applicant's Address 147 Ringneck Tr. Mooresville NC.

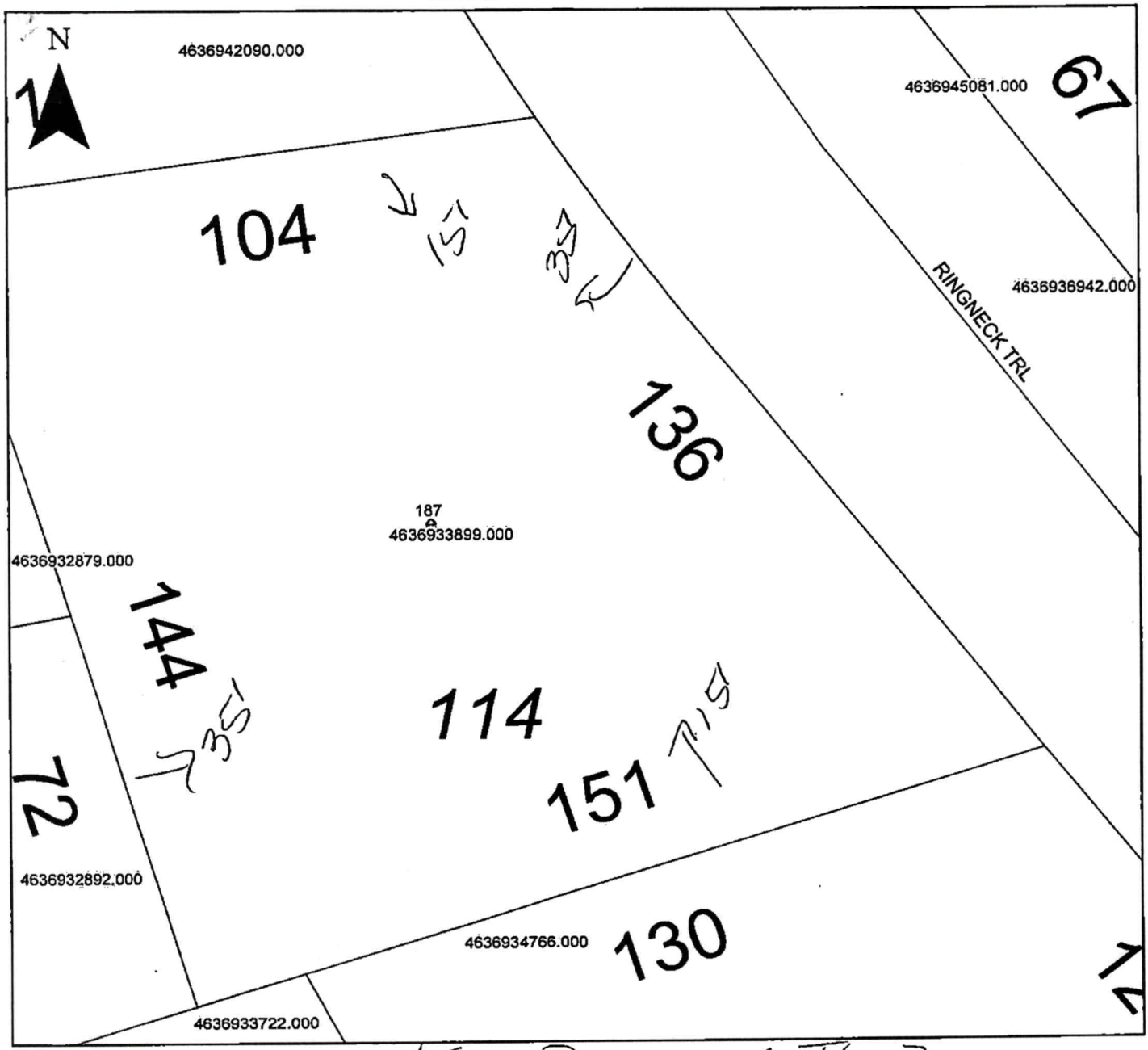
If Company, Representative's Name and Title _____

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 Dec. 17 2021

.39 A 10 IN CAT P

ZONING DISCLAIMER

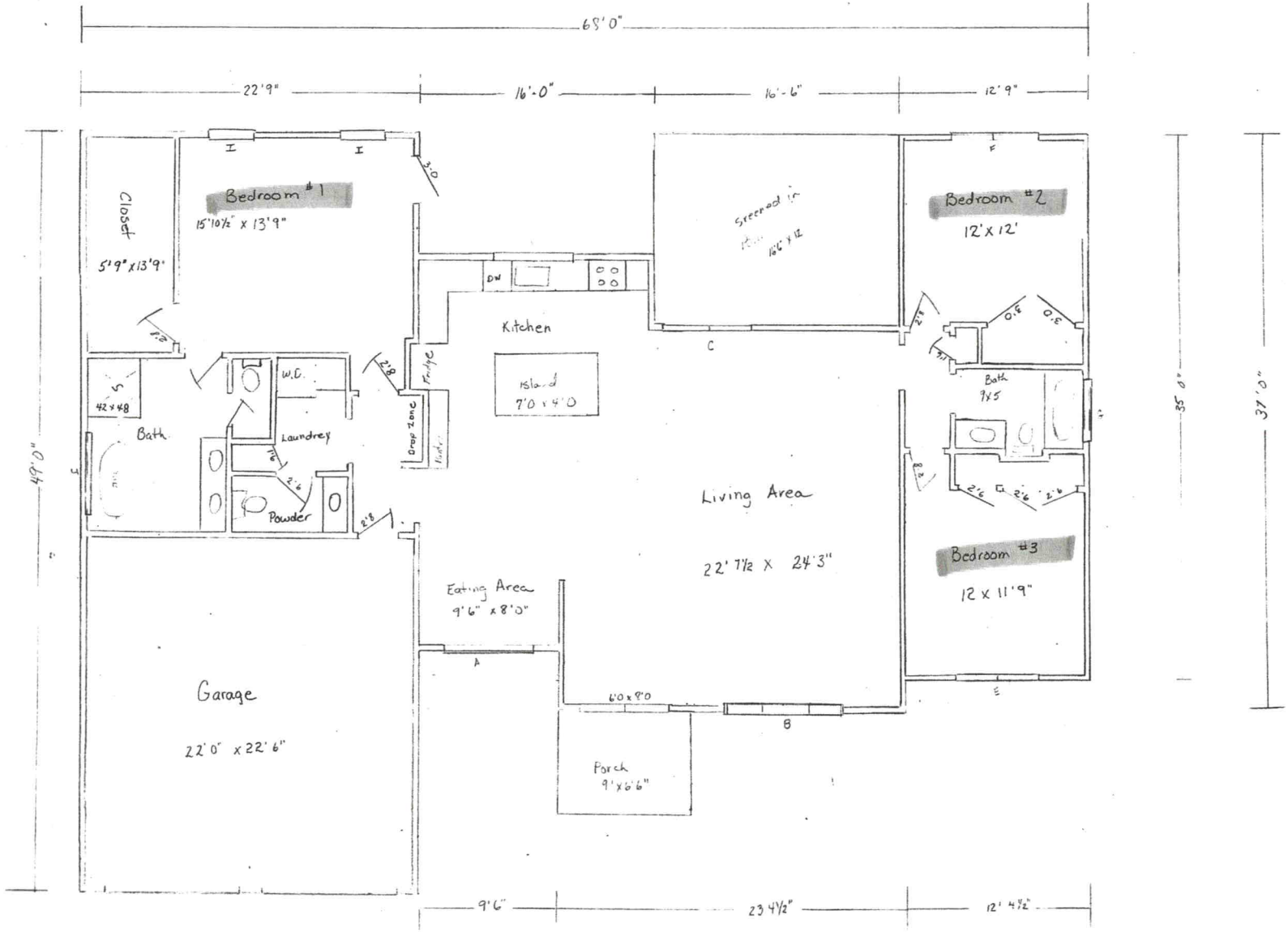


Property Address 187 Ringneck Trail

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

Dec 17 2021
Date



12.375
x 35 = 433.12
18x25 = 450
22'9x 26 = 5
5', 29'3" =
9'10'2" y 25'6
118.5 x 196

windows
A -
B -
C -
D -
E
F -
G -
H
I
J

Pattern 2.5'6" x 6'4"
x3 = 89x