IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3825 PERMIT # 237229

PIN # 4637077083

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

APPLICANT/OWNER: Robert Dunn
APPLICANT ADDRESS: PO Box 832 Mooresville, NC
PHONE: 631-827-4776
ALT. PHONE
SITE ADDRESS: 219 Quiet Cove Rd. Mooresville, NC
SAP CONTROLLED: ☐ YES ☑ NO
SITE DIRECTIONS: NC 150 W → L on Quiet Cove Rd → lot at end
SECTION: -- LOT # 7 LOT AREA:
DESIGN FLOW: 360gpd LTAR: .3 (.3 repair)
SUBDIVISION: Spring Acres

Septic Tank 1000 (gal)	SIB 7.94	Date 3-29-19	☑ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI	☑ Residence	No. Bedrooms 3	Water Supply ☑ Private
Pump Tank 1000 (gal)	PT 2.7	Date 3-27-19	System Description: PM 25% reduction	☐ Business	No. Persons 6	☐ Public
Pump Make Cable	Model 240 3/4	Serial #	Repair System Description: LP PPBPS	☐ Other	No. Employees	☐ Community
# Nitrification Fields 1	# Lines 5@60'	Linear Ft. 300'	Maintenance Agreement Required: ☐ YES ☑ NO	☐ Slab	☑ Crawl Space	
Trench Width 36"	Trench Bottom Depth (Low side) 25"/30" high side	Gravel Depth	☐ GRAVITY ☑ PRESSURE	☐ Basement w/ plumbing	☐ Basement w/o plumbing	

Comments / Conditions: No foundation drain shall be installed along the side of the house where the tanks are to be set. If drain is tear during time of septic install, tanks shall be set below foundation drain.
TANKS SET BELOW FOUNDATION DRAINS BCW 5-8-19

GENERAL SITE SKETCH

See attached site plan by Soil & Forestry Services of the Carolinas, PA

AS BUILT SKETCH

TOP DRAINLINE ELEV = 5'2"
TOP OF FOUNDATION DRAIN ELEV 5'4"
FOUNDATION DRAIN 2" DEEP
MUST BE REMOVED BCW 5-8-19

5/14/2019: Foundation drain removed from house SR

	Date	Initials
Drain Lines Checked	5-8-19	BCW
Tanks Checked	5-8-19	BCW
Pressure Manifold or Valve Box Checked	6/12	BB
Pressure Head Set	6/12	BB
Electrical Checked	6/12	BB
Floats Set	6/12	BB
Alarm Checked	6/12	BB
Maintenance Contract Y / N		

- Caution Tape

* System appeared to be drawn out
* Caution Tape removed & system placed on.
- No visual Damage observed.

Permit can be suspended or revoked if any false information is supplied during or after the permit / any unauthorized changes are made to the site / any [illegible]

☐ IMPROVEMENT PERMIT with site plan and without expiration. ☑ IMPROVEMENT PERMIT with site plan valid for 60 mos. ☑ AUTHORIZATION TO CONSTRUCT [illegible]

Owner / Applicant Signature: [signature] Date: 8/2/18 Installed by: RICHARD ABERNATHY

IMPROVEMENT PERMIT by: Kayla Weber Date: 8-2-18 OPERATION PERMIT by: Benjamin A Bothers Date: 6/12/19.

AUTHORIZATION TO CONSTRUCT by: Kayla Weber Date: 8-2-18 Existing System Inspected by: Date:

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 inspection time.

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 237229

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

PIN # 4637077083

APPLICANT/OWNER: Robert Dunn APPLICANT ADDRESS: PO Box 832 Mooresville, NC

SITE ADDRESS: 219 Quiet Cove Rd. Mooresville, NC PHONE: 631-827-4776 ALT. PHONE —

SITE DIRECTIONS: NC 150 W → L on Quiet Cove Rd → lot at end SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: Spring Acres SECTION: — LOT # 7 LOT AREA: — DESIGN FLOW: 360gpd L.T.A.R.: .3 (.3 repair)

Septic Tank 1000 (gal) STB Date

Pump Tank 1000 (gal) PT Date

Pump Make — Model — Serial #

Nitrification Fields 1 # Lines 5@60' Linear Ft 300'

Trench Width 36" Trench Bottom Depth(Low side) 25"/38" highside Gravel Depth —

☑ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI

System Description: PM 25% reduction

Repair System Description: LP PPBPS

Maintenance Agreement Required: ☐ YES ☑ NO

☐ GRAVITY ☑ PRESSURE

☑ Residence No. Bedrooms 3

☐ Business No. Persons 6

☐ Other No. Employees —

☐ Slab ☑ Crawl Space

☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions: No foundation drain shall be installed along the side of the house where the tanks are to be set. If drain is there during time of septic install, tanks shall be set below foundation drain.

INITIAL SITE SKETCH

See attached site plan by Soil & Forestry Services of the Carolinas, PA

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**

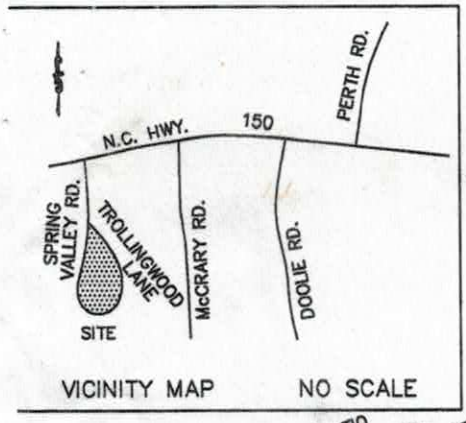
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☑ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☑ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Date: 8/2/18 Installed by:

IMPROVEMENT PERMIT by: Date: 8-2-18 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: 8-2-18 Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inpsector to confirm your inspection time.



VICINITY MAP NO SCALE

APPROVED AUG X 2 2018
Kw

760 CONTOUR PER ACTUAL FIELD SURVEY

LAKE NORMAN

PBB PG320

BRICK PATIO AREA

RAMP

STAIRS

PIPE

22.7'

1\2"PIPE

CP

N76°40'00"W 70.30

761 CONTOUR (FLOOD LINE)

N43°49'00"W 89.00

60.39 S58°30'16"W

ORIGINAL PORCH LINE

LOT 7
0.55 AC.

50' BUFFER FROM THE 760 CONTOUR LINE

EIP

EXISTING SEPTIC (ABANDON)

HOUSE STAKED BY SURVEY

189.80

S17°06'34"E

91'

15' SIDE SETBACK

WELL (MUST BE ABANDONED)

N31°13'40"E (BASE BEARING)

SETBACK

SIDE

LOT 8
JUDY J. SHOFFNER
926\267

DRIVE

35' FRONT SETBACK

172.62

LOT 6
HAROLD D. COLEY III
2333\174

NEIGHBORS WELL

1/2" PIPE

R\W

S67°21'31"E 39.21

L=40.29'

R=50.00

(TIE ONLY) N56°24'21"E 49.77

EIP

PK NAIL

NEIGHBORS WELL ENCROACHES

0' 20' 40' 100'

SCALE IN FEET

QUIET COVE RD.
(60' PUBLIC R\W)

LEGEND

= P.P. = POWER POLE

= POWER TRANS.

E.I.P. = EXISTING IRON FOUND

I.P.S. = #4 REBAR SET

R/W = RIGHT-OF-WAY

CP = COMPUTED POINT

NOTES

1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENT AND/OR RIGHTS-OF-WAY OF RECORD.
2) AREA COMPUTED BY THE COORDINATE METHOD.
3) EXISTING 760' & 761' CONTOUR ELEVATION BASED ON LAKE NORMAN LAKE LEVEL AT COWAN'S FORD DAM (READING ON 3/28/17)
4) SERVICE LINES
5) NO GRID MONUMENT FOUND WITHIN 2000 FEET.
6) SETBACKS PER CURRENT ZONING (RA)
   FRONT = 35 FEET
   SIDES = 15 FEET
   REAR = 35 FEET
   LAKE = 50 FEET

PRESSURE MANIFOLD SYSTEM
FOR WASTEWATER TREATMENT

Owner:	Frank Goode
Address:	129 Honeysuckle Lane Mooresville, NC 28117
Phone:	631.827.4776
County:	Iredell
Location:	219 Quiet Cove Road

Source of Wastewater Flow:	3 Bedroom Single Family Residence
Estimated Daily Wastewater Production:	360 gpd
System Flow:	27.4

Design Specifications

Drainfield Size:	300
Loading Rate:	0.3
Depth of Gravel in Trench:	NA (25% reduction)
Gravel Size:	NA (25% reduction)
Trench Depth:	30 in. Repair - 30 in.
Trench Width:	36 in.
Septic Tank Size:	1000
Pump Tank Size:	1000
Estimated Supply Line Length:	70
Supply Line Diameter:	2 in. SCH 40 PVC
Supply Line Volume:	12.18
Dosing Volume:	137.13
Supply Manifold:	4 in. SCH 80 PVC
Supply Manifold Length:	4 ft. (minimum)
Supply Manifold Volume:	N/A
Recommended Float Controls:	SJE Sensor Float Control Switches as Required for Control Panel or County Approved Equivalents
Recommended Control Panel:	SJE-Rhombus Model 112 (NEMA 4x) Control Panel or County Approved Control Panel.
Pressure Head:	2 ft.
Friction Head:	1.25
Elevation Head:	11.00
Total Dynamic Head:	16.38
Threaded Union:	In Tank
Gate Valves:	1 in Tank 1 at Pressure Manifold
Check Valves:	In Tank
Anti-Siphon Hole:	NA
Additional Comments:	Soil suitability was performed by Soil & Forestry Services of the Carolinas, PA.

APPROVED AUG X 2 2018
KW

219 Quiet Cove Road
PRESSURE MANIFOLD DESIGN

DESIGN FLOW:	360	
SOIL APPLICATION RATE:	0.3	
TOTAL AREA TRENCH BOTTOM:	900	
TOTAL LATERAL LENGTH:	300	
NUMBER OF FIELDS:	1	
LATERAL LENGTH REQUIRED PER FIELD:	300	
SUPPLY LINE LENGTH:	70	
TOTAL DYNAMIC HEAD:	16.38	
MANIFOLD SIZE:	4 in.SCH 80 PVC	
DOSING VOLUME:	137.13	
PUMP TANK DRAW DOWN*:	6.5	
SEPTIC TANK SIZE:		1000
PUMP TANK SIZE:		1000

**Pump tank draw down based on a volume basis of 21 gallons per inch. Draw down may vary among pump tank manufacturers.*

APPROVED AUG X 2 2018
KW

219 QUIET COVE ROAD (SPRING ACRES LOT # 7)

Project #: 01-3435

LAYOUT FOR 3 BEDROOM HOME — June 21, 2018

LINE #	FLAG COLOR	BS	HI	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM							
INSTR. 1							
HOUSE CNR					772.46		
P. TANK					767.35		
1	YELLOW				774.90	38	38
2	BLUE				774.25	59	59
3	***ORANGE***				***773.33***	***60***	***60***
4	***PINK***				***772.46***	***60***	***60***
5	***YELLOW***				***771.71***	***60***	***60***
6	***BLUE***				***770.53***	***70***	***60***
7	***ORANGE***				***769.97***	***60***	***60***
8	PINK				769.04	55	55
9	YELLOW				768.49	48	48
					Total	**510**	**500**

	LINE LENGTH	LTAR GPD/FT^2	SYSTEM TYPE	SOIL LTAR GPD/FT^2	TRENCH SYSTEM	DISTRIBUTION
**** System***	***300***	***0.300***	***ACCEPTED***	***0.300***	***25% RED.***	**PRESSURE MANIFOLD**
Repair	200	0.300	*MOD.*	0.300	PPBPS	LOW PRESSURE

Notes:

** Septic Lines Located by Licensed Surveyor (SEE SITE PLAN)

**All measures in feet

**Nitrification lines are demonstrated on contour via colored pin flags

APPROVED AUG X 2 2018
KW

PRESSURE MANIFOLD TAPSHEET - 219 QUIET COVE ROAD (SPRING ACRES LOT# 7)

SYSTEM

Line #	Color	Elevation	Length	Hole Size	Flow/Tap	Trench Area	Line LTAR
3	***ORANGE***	773.33	***60***	SCH 80 1/2	**5.48**	180	0.15
4	***PINK***	772.46	***60***	SCH 80 1/2	**5.48**	180	0.15
5	***YELLOW***	771.71	***60***	SCH 80 1/2	**5.48**	180	0.15
6	***BLUE***	770.53	***60***	SCH 80 1/2	**5.48**	180	0.15
7	***ORANGE***	769.97	***60***	SCH 80 1/2	**5.48**	180	0.15

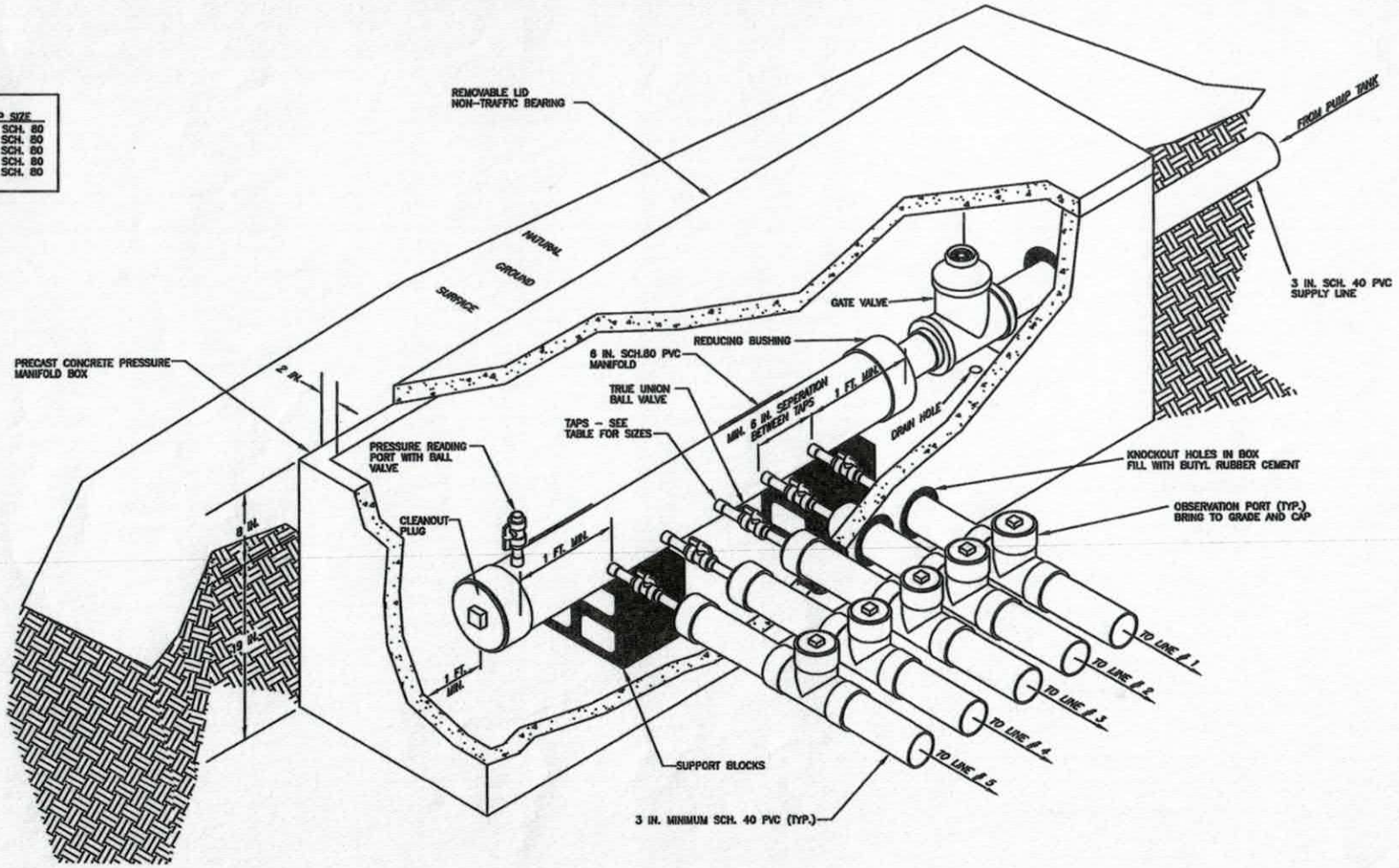
total	**feet =**	**300**	**gal/min =**	**27.4**
		Des. Flow	**360**	
		Pump Run=	**5.00**	
		soil LTAR	**0.3**	
		LTAR +5%	**0.315**	
		LTAR with ACCEPTED	**0.4**	
		LTAR with ACCEPTED + 5%	**0.42**	

APPROVED AUG X 2 2018
KW

PRESSURE MANIFOLD DETAILS
FOR
219 QUIET COVE SEPTIC SYSTEM

TAP SIZES

LINE No.	TAP SIZE
1	1/2" SCH. 80
2	1/2" SCH. 80
3	1/2" SCH. 80
4	1/2" SCH. 80
5	1/2" SCH. 80



Sheet 1 of 1
PROPERTY ID #: Ka37011083
COUNTY: Iredell

APPROVED AUG X 2 2018 KW

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

OWNER: Frank Goode
APPLICATION DATE June 2018
ADDRESS: 129 Honeysuckle LN Mooresville NC 28117
DATE EVALUATED: 6-29-17
PROPOSED FACILITY: House - 3BR
PROPOSED DESIGN FLOW (.1949): 360 gpd
PROPERTY SIZE: 0.55
LOCATION OF SITE: 219 Quiet Cove Rd Mooresville NC 28117
PROPERTY RECORDED:
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)		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	
1	L/12%	0-2	scr wsbk	frssp	24-60 few to com sep	60	-	-	PS .3-.325
		2-12	RBCl wsbk	frsssp sc xp					
		12-46	RCm sbk/abk	frssp sc xp					
		46-60	RBC wsbk	frsssp sc xp					
2	L/10%	0-8	RBC ws	frssp sc xp	36-60 few to many scp	60	-	-	PS .3-.325
		8-53	RCm sbk/abk	frssp sc xp					
		53-60	RBC wsbk	frssp sc xp					
3	L/11%	0-8	RB Cl wksg	Fisssp sexp	- f scp	60	-	-	PS .3-.325
		8-60	RBC wsbk	frssp sc xp					
4	L/10%	0-8	BCl w	frssp	- f scp - c scp	63	-	-	PS .3-.325
		8-48	RCmm Abk/sbk	frssp					
		48-58	RC wsbk	frssp					
		58-63	RBCl wsbk	frssp					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	Accepted	PP BPS
Site LTAR	0.3	0.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: S. Ashley Rollins
OTHER(S) PRESENT:

COMMENTS:

Updated February 2014

RECEIVED JUL 1 3 2018

Paid $850.00

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

237229

Application For: (X) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) 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: (X) Survey Plat, scaled no more than 1 inch = 60 feet
Place an (X) beside whichever is submitted if applicable (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: Rollans Soil & Env **Address:** P.O. Box 832 Mooresville NC **Zip:** 28115

Applicant Email: ashlyRollans@gmail.com **Phone:** 704 746 5046 **Alt. Phone:**

Owner Name: Frank Goode **Address:** 129 Honeysuckle LN Mooresville **Zip:** 28117

Owner Email: **Phone:** 631827 4776 **Alt. Phone:**

Property Information:

Street Address: 219 Quiet Cove Rd Mooresville NC 28117

Subdivision Name: Spring Acres **Section/Phase:** **Lot Number:** 7

Driving Directions:

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

CHECK FOUNDATION TYPE

(X) New Single Family Residence — Maximum Number of Bedrooms: 3 — ( ) 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:

(X) 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: Unknown
( ) No Preference ( ) Alternative (X) Conventional ( ) Innovative ( ) Modified Conventional (X) Other: Accepted

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: _____ 6/21/18
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, [redacted] Robert Dunn, am the legal owner(s) of the property located at 219 Quiet Cove Rd Mooresville NC 28117, identified as

PIN (Parcel Identification Number) 4637077083.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Rollanssol/Ashley Rollans & RobDunn([redacted]), 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

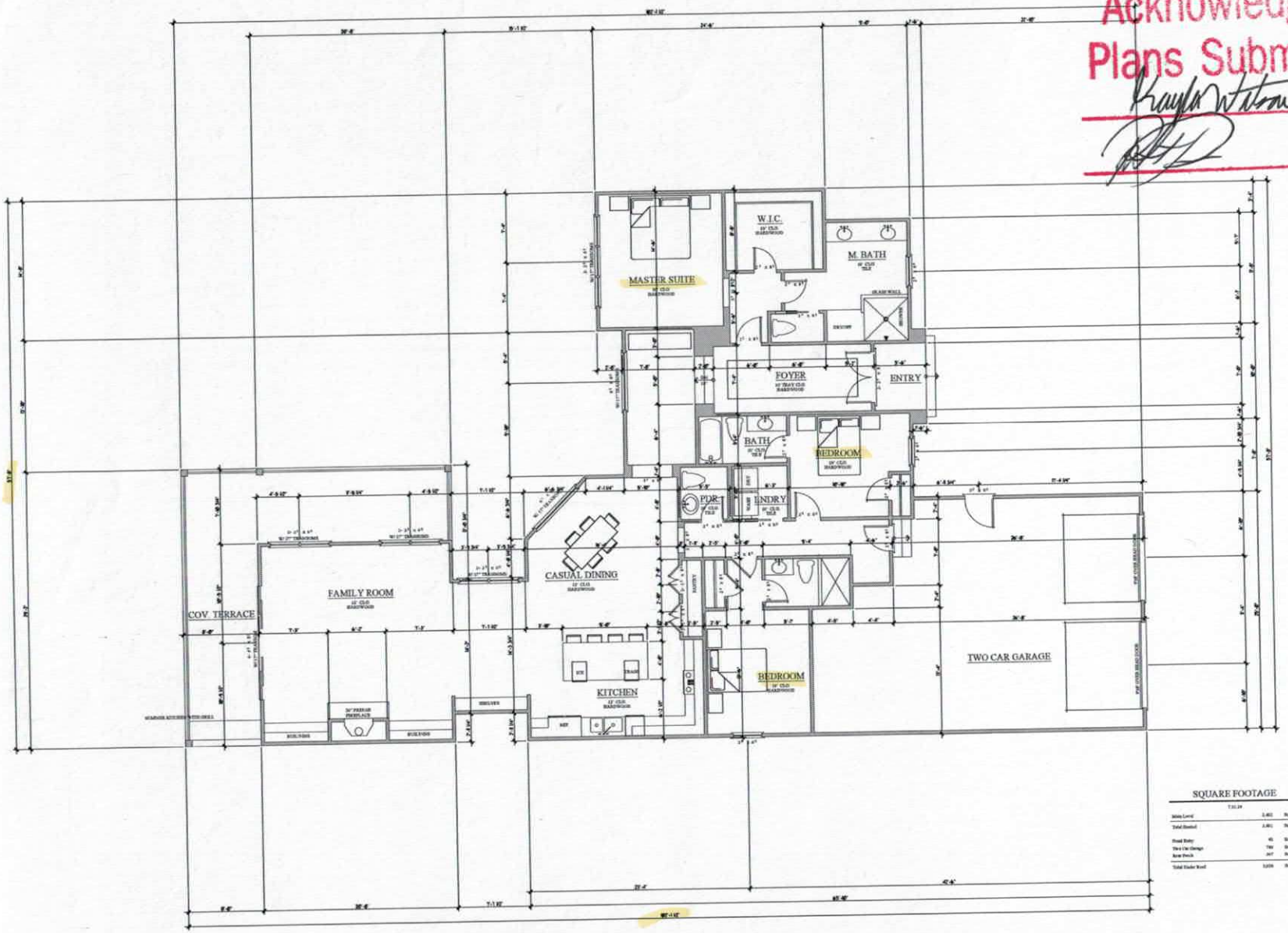
I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

_____ 7/11/18
Signature of Owner(s) 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

Acknowledgement Of
Plans Submittal ONLY!
Kayla Watson Date 8-2-18
Date 8/2/18



MAIN FLOOR NOTES

SQUARE FOOTAGE

NOT FOR CONSTRUCTION

MAIN LEVEL FLOOR PLAN

The
Dunn Residence
Lot 7-Quiet Cove Road
Mooresville, N.C.

05

IREDELL COUNTY

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

APPLICATION NUMBER
237230
Issue Date: 07/13/2018

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4765814353.000	125 PORTMAN LANE, STATESVILLE, NC 28625	

Owner Information	Applicant Information
Owner: WCU PORTER, BRUCE A.	Applicant: ROLLANS SOIL & ENVIRON
Address: 2143 MOCKSVILLE HWY STATESVILLE, NC 28625	Address: 470 NORTH BROAD STREET SUITE D MOORESVILLE, NC 28115
Phone:	Phone: 704-658-1723

Use Requested	Zone Code
SFD	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
	35.00	35.00	15.00	15.00	CACL	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: 7/13/18

Permit Number	145437	TOTAL FEES:	$ 77.25