IREDELL COUNTY HEALTH DEPARTMENT

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

RA PERMIT # 226488

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

PIN # 4637111805

APPLICANT: Oliver Hiner APPLICANT ADDRESS: 182 Culpeze Mooresville, NC

SITE ADDRESS: 182 Culpeze Mooresville, NC PHONE: 704 806-5871 ALT. PHONE: Mike 704 576-3887

SITE DIRECTIONS: Brawley School Rd TL Beaten Path TR Culpeze, on left

SUBDIVISION: L&T SECTION: 9 LOT # 133 LOT AREA: .64 Acre DESIGN FLOW: 480 gpd L.T.A.R.: .25

Septic Tank 1000 (gal) STB 20"/1 Date Info Heard ☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI

Pump Tank (gal) PT Date System Description: *Gravity - 25% Reduction

Pump Make Model Serial # Repair System Description: Pretreatment Drip Irrigation

Nitrification Fields 1 # Lines 3 Linear Ft. *250' Maintenance Agreement Required: ☐ YES ☒ NO

Trench Width 36" Max. Trench Bottom Depth 24-36" Gravel Depth N/A ☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 4 Water Supply

☐ Business No. Persons 8 ☒ Private

☐ Other No. Employees ☐ Public

☐ Slab ☒ Crawl Space ☐ Community

☐ Basement w/plumbing ☐ Basement w/o plumbing

Comments / Conditions: * Existing bed will be fed first and then new drip lines. See Septic plan

* AC application + floor plans state basement. Contracted builder + he said no grading or cutting is to occur. Builder stated they are building at ground level and hauling in dirt to put around house. KW 8/15

INITIAL SITE SKETCH

See attached Approved Plan by Michael Athanas & Assoc. (dated 4/25/17)

AS BUILT SKETCH

Not to scale

this part was cut off

House

Gravel Pit

Lake Norman

Authorization to Construct

Client gets attached photo copy

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: 5/10/17 Installed by: Richard Abernathy

IMPROVEMENT PERMIT by: Date: 5/9/17 OPERATION PERMIT by: Date: 6/14/18

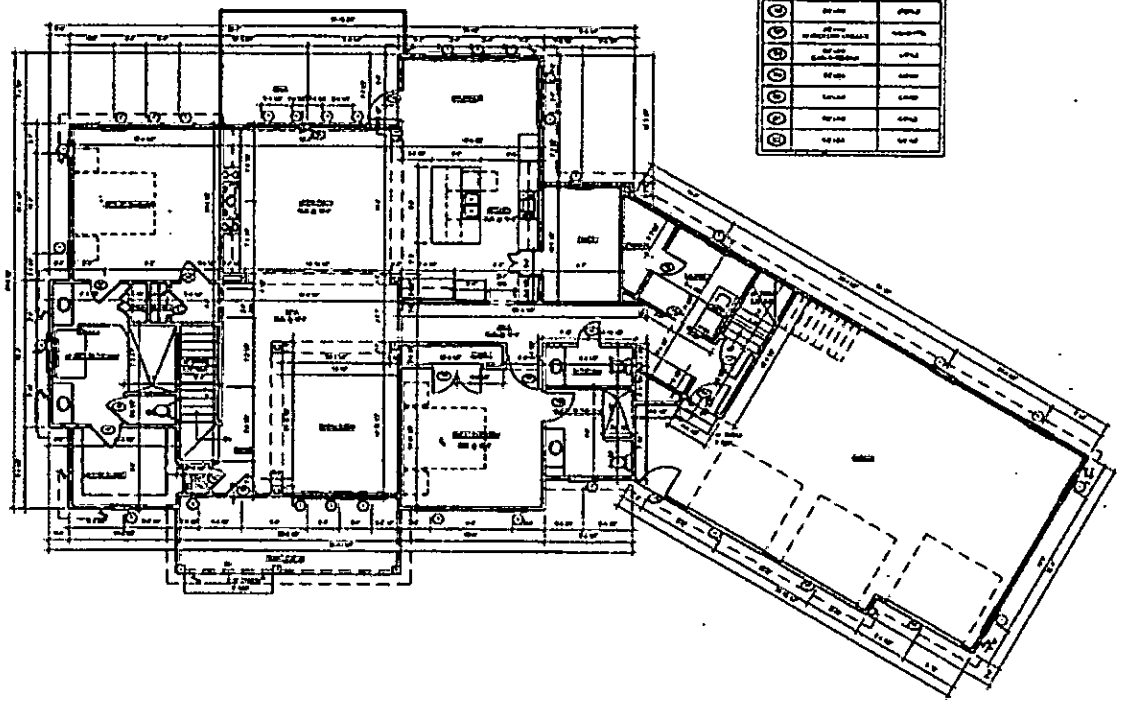
AUTHORIZATION TO CONSTRUCT by: Date: 8-15-18 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK

Acknowledgement Of
Plans Submittal ONLY!

Date 8-15-18

Date 8-15-18



① FIRST FLOOR PLAN

AE STOUT

Designed Exclusively for the:

Hiner Residence

182 Calpezzo Road, Mooresville, NC 28117

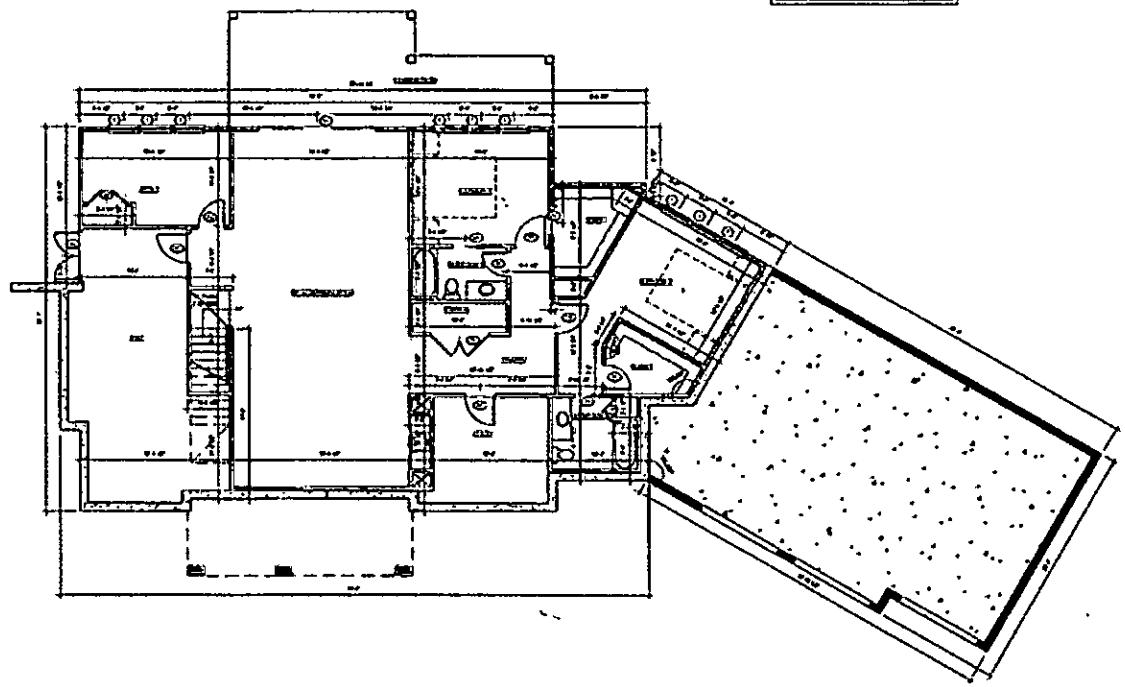
FIRST FLOOR PLAN

A-2.2

Acknowledgement Of
Plans Submittal ONLY!

Date 8-15-18

Date 8-15-18



① BASEMENT PLAN

AE STOUT

Designed Exclusively for the:

Hiner Residence

182 Culpeze Road, Mooresville, NC 28117

A-2.1

IREDELL COUNTY HEALTH DEPARTMENT

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

RA PERMIT # 226488

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

PIN # 4637111805

APPLICANT: Oliver Hiner APPLICANT ADDRESS: 182 Culpeze Mooresville, NC

SITE ADDRESS: 182 Culpeze Mooresville, NC PHONE: 704 806-5871 ALT. PHONE: Mike 704 576-3887

SITE DIRECTIONS: Brawley School Rd TL Beaten Path TR Culpeze on left

SUBDIVISION: C.L.T.J. SECTION: 9 LOT # 133 LOT AREA: .64 Acre DESIGN FLOW: 480gpd L.T.A.R.: .25

Septic Tank 1000 (gal) STB Date

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines 3 Linear Ft. *250'

Trench Width 36" Max. Trench Bottom Depth 24-36" Gravel Depth N/A

[X] New System [ ] Repair [ ] Expansion System Type: I II III IV V VI

System Description: *Gravity - 25% Reduction

Repair System Description: Pretreatment Drip Irrigation

Maintenance Agreement Required: [ ] YES [X] NO

[X] GRAVITY [ ] PRESSURE

[X] Residence No. Bedrooms 4

[ ] Business No. Persons 8

[ ] Other No. Employees

[ ] Slab [X] Crawl Space

[ ] Basement w/plumbing [ ] Basement w/o plumbing

Water Supply: [X] Private [ ] Public [ ] Community

Comments / Conditions: * Existing bed will be fed first and then new drip lines. See Septic Plan.

* AC application & floor plans state basement. Contacted builder & he said no grading or cutting is to occur. Builder stated they are building at ground level and hauling in dirt to put around house. KW 8/15

INITIAL SITE SKETCH

See attached, Approved Plan by Michael Athanas & Assoc. (dated 4/25/17)

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.* [X] **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* [X] **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Date: 5/10/17 Installed by:

IMPROVEMENT PERMIT by: Date: 5/9/17 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: 8-15-18 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK

RECEIVED APR 2 5 2017

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

Relocation / Expansion Paid $350.00

Application For: ( ) 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 # 226488

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:

Applicant Name: Oliver Hiner Address: Mooresville, NC Phone: oliverhiner@yahoo.com

Owner Name: James Brewer Address: 915 Sprucewood St, Kannapolis, NC 28081 Phone:

Property Information:

Street Address: 182 Culpeze Rd

Subdivision Name: CL&T Section/Phase: 9 Lot Number: 133

Driving Directions: BSR, TR Blume, TL Beaten Path, TR Culpeze, on LT

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

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

Maximum Number of Bedrooms: 4
Maximum Number of Occupants:
( ) 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:
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 (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?

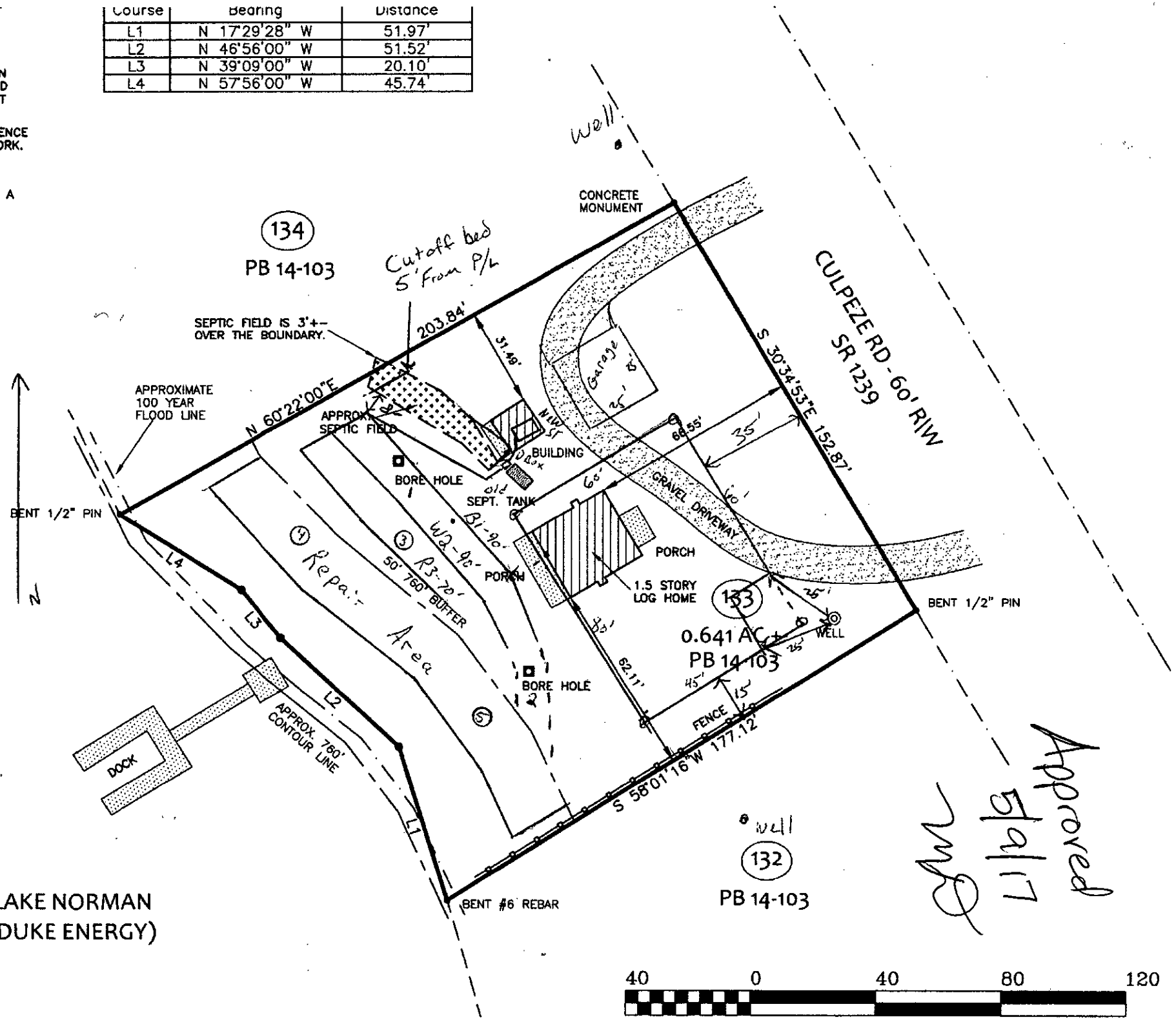
I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible 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: _____ 4/25/2017
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

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Course	Bearing	Distance
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L2	N 46°56'00" W	51.52'
L3	N 39°09'00" W	20.10'
L4	N 57°56'00" W	45.74'



LOT #133
182

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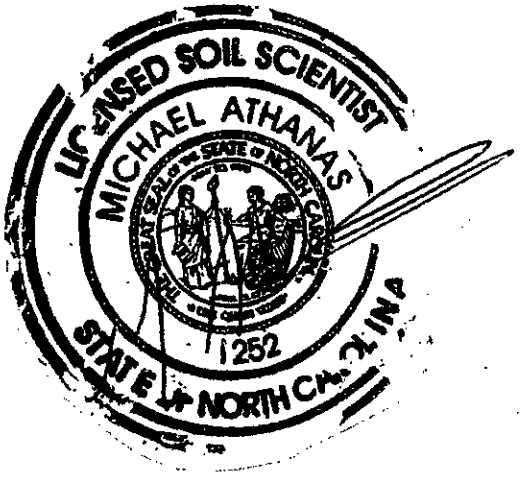
BEATEN PAT



Approved
5/9/17

MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887

Reference: Data Sheet for 182 Culpeze Rd., CL&T Sec 9, Lot 133
House Footprint: See Attached Plan
Building Setbacks: 35' front, 15' side, 50' lake
Water Source: Private well
Number of Bedrooms: 4/480 GPD
Proposed LTAR: 0.25 GPD/FT2 (initial), 0.1 GPD/FT2 (repair)
Proposed System Type: Existing system + 25% Reduction
Proposed Repair System Type: Pretreatment Drip Irrigation
Distribution: Gravity-End cap/Drop boxes/D-box
Septic Tank Size: 1000 gallons
Proposed Trench Bottom: 24-36'



Line	Design Length	Actual Length
Pink-Existing System		
Blue 1	90'	133'
White 2	90'	111'
Red 3	70'	71'

Initial System: 250' **Repair System:** 3000+ FT2

Comments:
The current existing system goes over the property line by about three feet. Because the lot was deeded 5/9/1977 and needs only a 5' property line setback, MA&A are proposing to block off the existing system at the 5' setback (represented by double pink flags). We will lose approximately 40 FT2 of the existing system which is added to the proposed new lines. (240 GPD addition at 0.25 GPD/FT2 + 40 FT2=250' of 25% Reduction)
The old septic tank (orange flags) will be abandoned and a new septic tank (yellow flag) installed. The existing bed should be fed first with a distribution box with speed levelers. One pipe in the distribution box will feed the new lines once the bed fills.
If the plumbing in the basement can't get to the new septic tank by gravity, a grinder pump will be necessary to lift the effluent from the basement to the main level plumbing to gravity feed to the septic tank.
The house is marked with white and red flags at an 80' x 60' box. The site plan shows an offset near the well to allow a 25' radius setback to the house. The garage is marked in blue and orange flags.
All existing structures will be removed.

PROPERTY ID #: 4637111805_
COUNTY: _Iredell____

Approved
5/9/17 MD

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

OWNER: James E. Brewer_____ APPLICATION DATE_____
ADDRESS: _915 Sprucewood St. Kannapolis, NC 28081_____ DATE EVALUATED: __2017_____
PROPOSED FACILITY: _4 bdrm_____ PROPOSED DESIGN FLOW (.1949): _480 GPD_____ PROPERTY SIZE: __0.64 AC_____
LOCATION OF SITE: _182 Culpeze Rd, CL&T Sec 9, Lot 133_____ PROPERTY RECORDED: _5/9/1977_____
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	LS 5%	0-5	Br CL WSBK	FR SS SP SEXP	Few YB	48"	N/A	N/A	PS 0.275-0.25
		5-48	R C SBK	FR SS SP SEXP					
2	LS 5%	0-8	Br CL WSBK	FR SS SP SEXP	Mn	48"	N/A	N/A	PS 0.275
		8-38	R C SBK	FR SS SP SEXP					
		38-48	R CL WSBK	FR SS SP SEXP					
3	LS 5%	0-4	Br CL WSBK	FR SS SP SEXP	YB @ 42"	48"	N/A	N/A	PS 0.25-0.275
		4-48	R C SBK	FR SS SP SEXP					
4	LS 5%	0-5	Br CL WSBK	FR SS SP SEXP	YB/Mn @ 42"	48"	N/A	N/A	PS 0.25-0.275
		5-48	R C SBK	FR SS SP SEXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	750 FT2	3000 FT2
System Type(s)	25% Reduction	DRIP
Site LTAR	0.25	0.1

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): ____PS_____

EVALUATED BY: _____MA&A_____
OTHER(S) PRESENT: _____

COMMENTS:_____

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

Approved 5/9/17 MD

PROPERTY ID #: 4637111805____

DATE OF EVALUATION: _____

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	
5	LS 5%	0-8	Br CL WSBK	FR SS SP SEXP	YB/Mn @ 40"	48"	N/A	N/A	PS 0.25-0.275
		8-48	R C SBK	FR SS SP SEXP					

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, Oliver Hiner, am the legal owner(s) of the property located at 182 Culpeze Rd, Mooresville, NC 28117, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Michael Athenes, Michael Athenes & Associates, 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.

Signature of Owner(s)	Date 4/20/17	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

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

APPLICATION NUMBER
226488
Issue Date: 04/21/2017

ZONING PERMIT

Parcel Number	Street Address	Jurisdiction
4637111805.000	182 CULPEZE ROAD, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: BREWER JAMES E	Applicant: MICHAEL ATHANAS & ASSO
Address: 915 SPRUCEWOOD ST MOORESVILLE, NC 28081	Address: 561 ENNIS RD WEDDINGTON, NC 28173
Phone:	Phone: 704-576-3887

Use Requested	Zone Code
	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.640	35.00	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	100304	TOTAL FEES:	$ 77.25

AE #226488 paid: $550.00

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

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:

Applicant Name: Goodin Construction Address: 915 River Hwy Mooresville 28117 Phone: 704-363-7302

Owner Name: Oliver Hiner Address: 359 Bay Berry Creek Cir Mooresville 28117 Phone: 704.774.7613

Property Information:

Street Address: 182 Culpeze Mooresville NC 28117

Subdivision Name: CL&T Section/Phase: 9 Lot Number: 133

Driving Directions: Brawley School - Ron Blume Rd Beaten Path Rd Ron Culpeze

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: 4
Maximum Number of Occupants: 8
( ) 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: New

( ) 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: [signature] 7/30/18
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

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, Oliver Hiner, am the legal owner(s) of the property located at 182 Culpeper Mooresville, NC 28117, identified as PIN (Parcel Identification Number) 4637111805, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) Lisa MacNamara, Goodin Construction, 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.

[signature]	7/30/18	Jamie Castaneda	7/30/18
Signature of Owner(s)	Date	Signature of Witness	Date

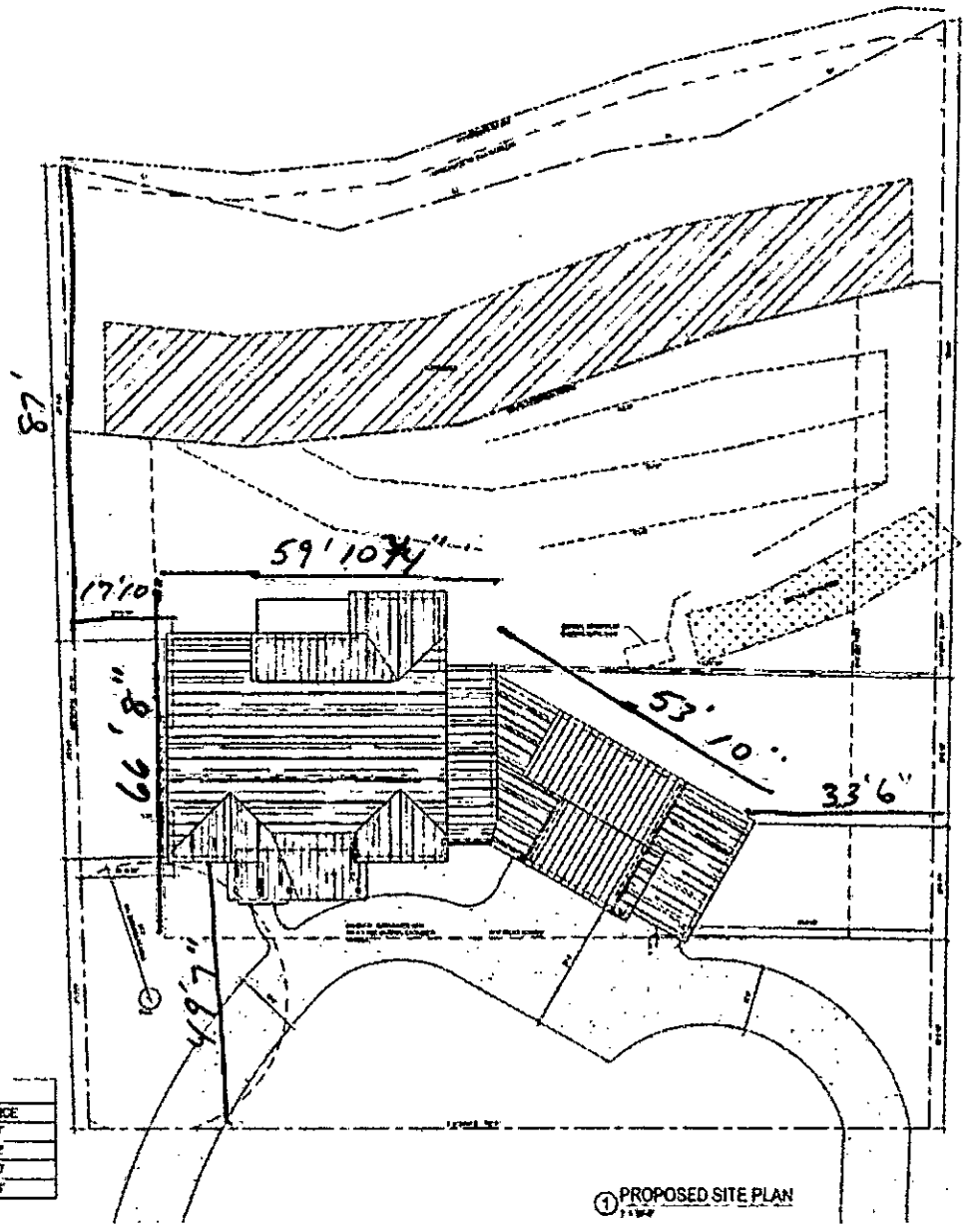
Please return this signed form to the appropriate office:

Mooresville - Environmental Health

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

Statesville - Environmental Health

Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677



① PROPOSED SITE PLAN

SURVEY SEGMENT LINES		
COURSE	BEARING	DISTANCE
L1	N 17°23'28" W	61.97'
L2	N 46°56'00" W	61.52'
L3	N 38°08'00" W	30.10'
L4	N 53°56'00" W	45.74'

AE STOUT

Designed Exclusively for the:

Hiner Residence

187 Culpeaze Road, Mooresville, NC 28117

PROPOSED SITE PLAN

A-1.1