IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 210358

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

PIN # 4638198149

APPLICANT: Phillip Stumpf APPLICANT ADDRESS: ~~149 Plus~~ PO Box 832 Mooresville

SITE ADDRESS: 1140 Fern Hill Rd Mvl NC 28117 PHONE: ALT. PHONE: 746 5046

SITE DIRECTIONS: Perth (N) - TL Fern Hill - On Rt

SUBDIVISION: Lake Wood Crossing SECTION: — LOT # 2 LOT AREA: 1.86 AC DESIGN FLOW: 600 L.T.A.R.: .4

Septic Tank 1500 (gal) STB Infiltrater Date

Pump Tank 1500 (gal) PT Infiltrater Date

Pump Make Liberty Model 280 Serial #

Nitrification Fields 1 # Lines 5 Linear Ft: 252

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

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

System Description: 600 PPBFS Manifold

Repair System Description: Same

Maintenance Agreement Required: ☐ YES ☑ NO

☐ GRAVITY ☐ PRESSURE

☐ Residence No. Bedrooms 5

☐ Business No. Persons 10

☐ Other No. Employees

☐ Slab ☐ Crawl Space

☑ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions:

CHECKED LINES, TANKS, PM BA

SEE ATTACHED DRAWING

INITIAL SITE SKETCH

See Rollans Soil & Environmental's Design

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**

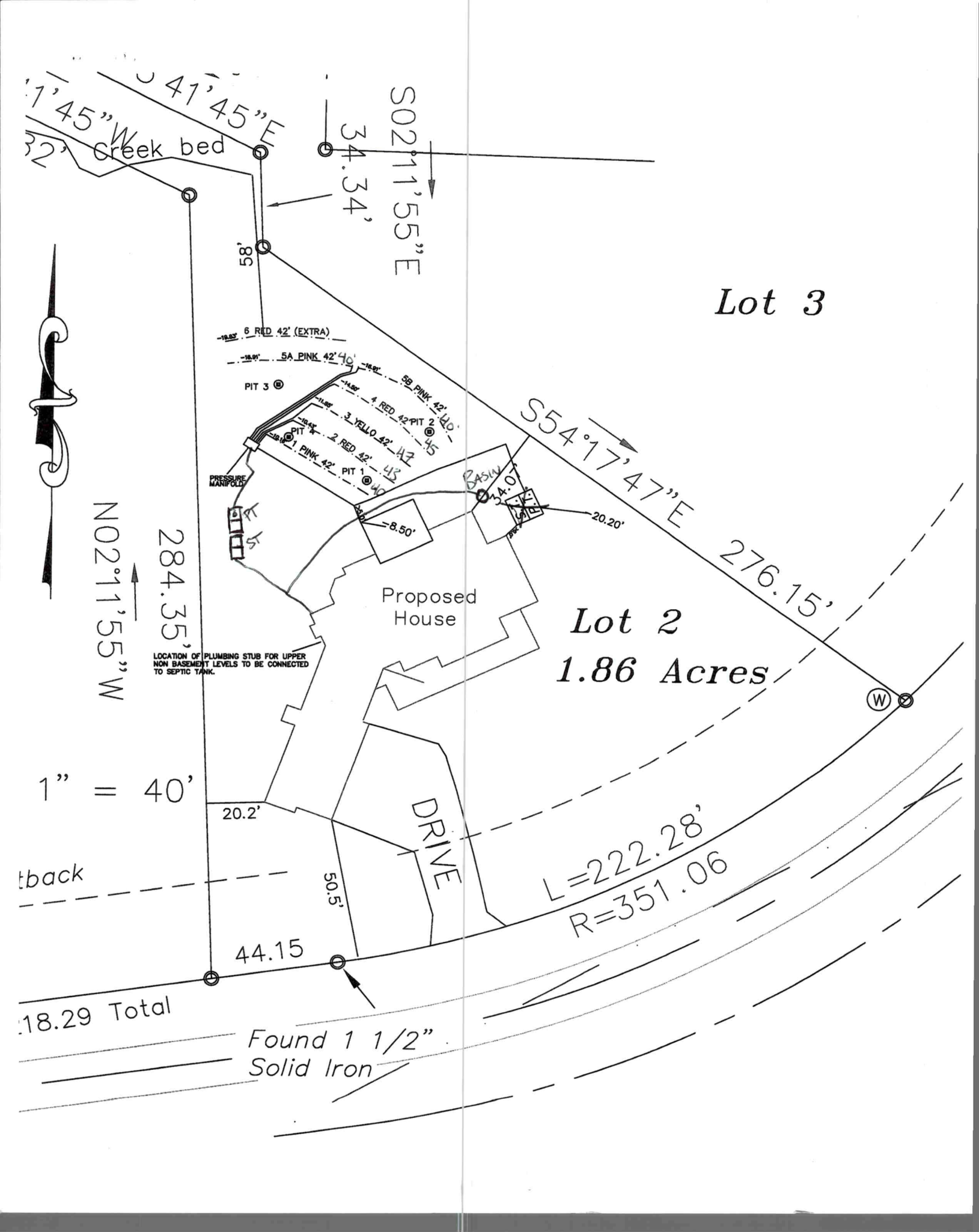
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☐ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☑ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Phillip Stumpf Date: 8-23-16 Installed by: Neil Yoder

IMPROVEMENT PERMIT by: Date: 8/19/16 OPERATION PERMIT by: BA Date: 9-29-16

AUTHORIZATION TO CONSTRUCT by: Date: 8/19/16 Existing System Inspected by: Date:

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


41'45"E
1'45"W
Creek bed
S02°11'55"E
34.34'
58'
Lot 3
6 RED 42' (EXTRA)
5A PINK 42'
5B PINK 42'
4 RED 42'
3 YELLO 42'
2 RED 42'
1 PINK 42'
PIT 3
PIT 2
PIT 4
PIT 1
PRESSURE MANIFOLD
PT
ST
BASIN
34.07'
20.20'
8.50'
S54°17'47"E
276.15'
Proposed House
Lot 2
1.86 Acres
N02°11'55"W
284.35'
LOCATION OF PLUMBING STUB FOR UPPER NON BASEMENT LEVELS TO BE CONNECTED TO SEPTIC TANK.
1" = 40'
20.2'
DRIVE
50.5'
L=222.28'
R=351.06
44.15
tback
18.29 Total
Found 1 1/2"
Solid Iron

RECEIVED AUG 15 2016

Revision

ROLLANS *Soil & Environmental Services, PA.*

P.O. Box 832, Mooresville, NC 28115 Phone: (704) 746-5046 Fax: (704) 278-0989

Ashley Rollans, NC Licensed Soil Scientist
Mobile: (704) 746-5046
Email: rollans.ashley@yahoo.com

NC Certified Septic Installer
NC Certified Subsurface Operator
NC Certified Septic Inspector

Attached is a proposed design for a PPBPS Septic System with Pressure Manifold distribution for a 5 bedroom single family residence on Lot # 2 in Lakewood Crossing Subdivision, Iredell County, North Carolina.

Contents:

	Page
Information for the Installer	1
Design Information	
Design Specifications	2-3
Layout Specifications	4
System Tapsheet	5
Site Plan/System Plan	6-7
Calculations	8
Profile Descriptions	SUBMITTED
Green Sheet	SUBMITTED
Application	SUBMITTED
Authorization Form	SUBMITTED
Voluntary Relinquishment Form	SUBMITTED
Expedited Review Process	9

LICENSED SOIL SCIENTIST Samuel A. Rollans 1231 STATE OF NORTH CAROLINA

8/10/16

August 10, 2016
Project No. 01-3030
Design By: Rollans Soil and Environmental Services, PA

INFORMATION FOR THE INSTALLER/OWNER:

The permit should be read very carefully prior to bidding. The following are details that must be considered along with all other considerations.

- Tanks shall be approved by NC DENR, and certification supplied by the manufacturer.
- Tanks shall be water tested prior to installation.
- The installer shall be responsible to the owner for placement of the tanks and to insure that final grades are returned to the original natural grade, with exception of added structural features.
- The supply trench shall be compacted to eliminate cavities left during initial fill placement.
- Installation of the system shall be during dry conditions in order to protect the soil structure.
- All fittings shall be pressure rated fittings.
- All joints shall be cleaned with PVC pipe cleaner and a heavy bodied glue applied to weld all joints.
- Where required by the county health department, post installation inspections by the designer must be scheduled 5 week days in advance.
- Trenches shall be carefully excavated so the bottom is within 2" from the highest to . the lowest points of elevation within the trench. If the bottom elevation needs adjusting after it has been trenched, it will be done by removing high points rather than filling low points. It is extremely important to insure that trenches are not over excavated during initial trenching. All fine grading within the trench will be hand done with a shovel. No loose material will be left in the trench
- All pipe openings in the tanks shall be properly grouted. This also applies to the joints around the riser.
- All tanks shall be properly back filled and compacted to prevent slump at a later date.
- Earth dams, constructed of relatively impervious material, shall be installed at the beginning and end of each lateral.
- No heavy equipment shall be used on the field during or after installation. The use of a small loader (i.e. Bobcat) or a trencher (i.e. Ditch Witch 2300/2310) may be used for installation.
- Elevations at pinflag locations should be checked by the installer prior to beginning trenches.
- Septic tank riser shall be a minimum of 6" above finished grade.
- System is specified as a PPBPS installation w/Pressure Manifold Distribution.
- Repair is specified as a PPBPS installation with low pressure distribution.
- **Basement effluent will flow to the Septic Tank**
- **First & Second Floor Plumbing must be piped around the house to the Septic Tank**
- Backfill 4 - 6" of material (Excavation material) over panels, rake & lime sidewalls, install trenches 24" wide to be level but have no more than 1/4" fall in 10 feet.

PRESSURE MANIFOLD SYSTEM
FOR WASTEWATER TREATMENT

Owner:	Phillip Stumphf
Address:	P.O. Box 4659 Mooresville, NC 28117
Phone:	704.507.8051
County:	Iredell
Location:	LAKEWOOD CROSSING LOT 2 1140 Fern Hill Road, Mooresville, NC 28117
Source of Wastewater Flow:	5 Bedroom Single Family Residence
Estimated Daily Wastewater Production:	600 gpd
System Flow:	32.88

Design Specifications

Drainfield Size:	252
Loading Rate:	0.4
Depth of Gravel in Trench:	NA
Gravel Size:	NA
Trench Depth:	36 in.
Trench Width:	24 in.
Septic Tank Size:	1500 gal.
Pump Tank Size:	1500 gal.
Estimated Supply Line Length:	115
Supply Line Diameter:	2 in. SCH 40 PVC
Supply Line Volume:	20.01
Dosing Volume:	237.60
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:	2.73
Elevation Head:	16.00
Total Dynamic Head:	23.83
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 Rollans Soil & Environmental Services.

LAKEWOOD CROSSING LOT 2
PRESSURE MANIFOLD DESIGN

DESIGN FLOW:	600
SOIL APPLICATION RATE:	0.4
TOTAL AREA TRENCH BOTTOM:	504
TOTAL LATERAL LENGTH:	252
NUMBER OF FIELDS:	1
LATERAL LENGTH REQUIRED PER FIELD:	250
SUPPLY LINE LENGTH:	115
TOTAL DYNAMIC HEAD:	23.83
MANIFOLD SIZE:	4 in.SCH 80 PVC
DOSING VOLUME:	237.60
PUMP TANK DRAW DOWN*:	8.2
SEPTIC TANK SIZE:	1500 gal.
PUMP TANK SIZE:	1500 gal.

**Pump tank draw down based on a volume basis of 29 gallons per inch. Draw down may vary among pump tank manufacturers.*

LAKEWOOD CROSSING LOT 2

Project #: 01-3030

LAYOUT FOR 5 BEDROOM HOME

August 10, 2016

LINE #	FLAG COLOR	BS	HI	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM/HOUSE					-8.50		
INSTR. 1							
1	***PINK***				***-10.16***	***42***	***42***
2	***RED***				***-10.43***	***42***	***42***
3	***YELLOW***				***-11.85***	***42***	***42***
4	***RED***				***-14.50***	***42***	***42***
5A	***PINK***				***-16.91***	***42***	***42***
5B	***PINK***				***-16.91***	***42***	***42***
6	RED		(EXTRA)		-19.83	42	42
TBM		11.5			100.00		
INSTR. 1			111.50				
HOUSE CNR				-4.80	4.80		
P. TANK				-9.80	9.80		
1	BLUE			2.20	-2.20	50	50
2	BLUE			2.20	-2.20	45	45
3	PINK			3.90	-3.90	67	67
4	PINK			3.90	-3.90	50	50
5	ORANGE			5.30	-5.30	60	60
6	ORANGE			5.30	-5.30	78	78
7	BLUE			6.30	-6.30	146	146
8	PINK			7.90	-7.90	133	133
					Total	629	629

	LINE LENGTH	LTAR GPD/FT	SYSTEM TYPE	SOIL LTAR GPD/FT2	TRENCH SYSTEM	DISTRIBUTION
**** System***	***252***	***0.400***	***MOD CONV.***	***0.400***	***PPBPS***	***PRESSURE MANIFOLD***
Repair	629	0.300	MOD CONV	0.300	PPBPS	LOW PRESSURE

Notes: **All measures in feet

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

**BS, HI, and FS indicate rod readings

**** Primary Lines, Tank Location and Backhoe Pits Located via Survey**

PRESSURE MANIFOLD TAPSHEET - LAKEWOOD CROSSING LOT 2

SYSTEM

Line #	Color	Elevation	Length	Hole Size	Flow/Tap	Trench Area	Line LTAR	# of Panels
1	***PINK***		*42*	SCH 80 1/2	**5.48**	84	0.47	11
2	***RED***		*42*	SCH 80 1/2	**5.48**	84	0.47	11
3	***YELLOW***		*42*	SCH 80 1/2	**5.48**	84	0.47	11
4	***RED***		*42*	SCH 80 1/2	**5.48**	84	0.47	11
5A	***PINK***		*42*	SCH 80 1/2	**5.48**	84	0.47	11
5B	***PINK***		*42*	SCH 80 1/2	**5.48**	84	0.47	11
								66
total	**panel**	**footage=**	**252**	**gal/min =**	**32.88**			
			Des. Flow	**600**				
			Pump Run=	**7.23**				
			soil LTAR	**0.4**				
			LTAR +5%	**0.42**				
			LTAR with ACCEPTED	**0.533333333**				
			LTAR with ACCEPTED + 5%	**0.56**				

CALCULATIONS

Location	Lakewood Crossing	
Project Number	01-3030	
Lot No:	2	
No. of Bedrooms	5	
Design Flow	600	$^{gal}/_{day}$
LTAR	0.400	$^{gpd/ft^2}$
50% RED.? (YES OR NO)	YES	
Supply Line Length	115	ft.
Supply Line Volume	20.01	gal.
Required Feet of Line	250	ft.
Amount of Line Proposed	252	ft.
Gallons per Minute	32.88	$^{gal}/_{min}$
Required Septic Tank Capacity	1500	gal.
Minimum Standard Tank Size	1500 gal.	gal.
Pump Tank Size	1500	gal.
Panel Volume	3.6	gal.
Number of Panels	66	
Dosing Volume	237.60	gal.

Note: Dosing Volume based on 100% of panel volume

Tank Draw Down	8.2	*Generic Draw Down of 29 gal.per in.*
Pump Run Time	7.23	minutes
Elevation Head	16	ft.
Pressure Head	2	ft.
Friction Factor	2.37	ft./100 ft. *(From the interpolater.)*
Friction Head	2.73	ft.
Total Dynamic Head (+15%)	23.83	ft.

FRICTION FACTOR INTERPOLATER
2" SCH 40 PVC

GPM	*f*
20	0.84
	-0.88
25	1.27
	-1.28
30	1.78
	-1.76
35	2.37
	-2.25
40	3.03
43.07	3.48
45	3.77
48.14	4.28
50	4.58
57.11	5.89
60	6.42

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

Sheet 1 of 1
PROPERTY ID #: 4638196140
COUNTY: Iredell

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

OWNER: Phillip Stumpf
ADDRESS: 1140 FORD HILL RD MORRISVILLE 28117
PROPOSED FACILITY: 5 BR
PROPOSED DESIGN FLOW (.1949): 600 GPD
LOCATION OF SITE: 1140 FORD HILL RD, MORRISVILLE NC 28117
WATER SUPPLY: ☑ Private ☐ Public ☑ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring ☑ Pit ☐ Cut
APPLICATION DATE 6-16
DATE EVALUATED: 6-16
PROPERTY SIZE: 1.86 AC
PROPERTY RECORDED:
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
P 1	L/10%	0-9"	FILL			18"	PS		PS .4-.5
		9-18"	brown CL wk sbk	fr ss sp sap					
		18-73"	mass sap SL var f	fr ns sp nap					
P 2	L/10%	0-8"	FILL			17"	PS		PS .4-.5
		8-17"	Brown CL wk sbk	fr ss sp sap	fw sap. nc				
		17-25"	mass sap loam var f	fr ss sp sap					
		25-80"	mass sap SL var f	fr ns sp nap					
P 3	L/10%	0-6"	FILL			24"	PS		PS .4-.5
		6-24"	Brown CL w m sbk	fr ss sp sap	fw sap. incl				
		24-75"	mass sap SL var f	fr ns sp nap					
P 4	L/10%	0-13"	red brown CL w m sbk	fr ss sp sap	fw sap inclusions	13"	PS		PS .4-.5
		13-25"	mass sap loam var f	fr ss sp sap					
		25-70"	mass sap SL var f	fr ns sp nap					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	PPBPS	PPBPS
Site LTAR	.4	.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: S. ASHLEY ROLLINS
OTHER(S) PRESENT: CHAD WAGNER

COMMENTS:

RECEIVED JUL 27 2016

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM* #210358 Comp. Relayout $350.00

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 Paid $500.00 8-23-16

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: Rollans Soil **Address:** P.O. Box 832 Mooresville NC 28115 **Phone:** 704 746 5046

Owner Name: Phillip Stumpf **Address:** 1140 Fern Hill Rd Mooresville NC 28117 **Phone:** 704 507 8051

Property Information:

Street Address: 1140 Fern Hill Road Mooresville NC 28117

Subdivision Name: Lakewood Crossing **Section/Phase:** _____ **Lot Number:** 2

Driving Directions: Perth, Lt on Fern Hill, Lot on Rt.

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

(✓) New Single Family Residence * Under Construction

( ) New Multi-Family Residence

( ) Accessory Building

( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 5

Maximum Number of Occupants: 10

( ) 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:** _____

( ) 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: _____ 7/26/16

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

#210358

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, Phillip Stumph, am the legal owner(s) of the property located at 1140 Fernhill Rd, identified as PIN (Parcel Identification Number) 4638198149, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Ashley Rollans, 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.

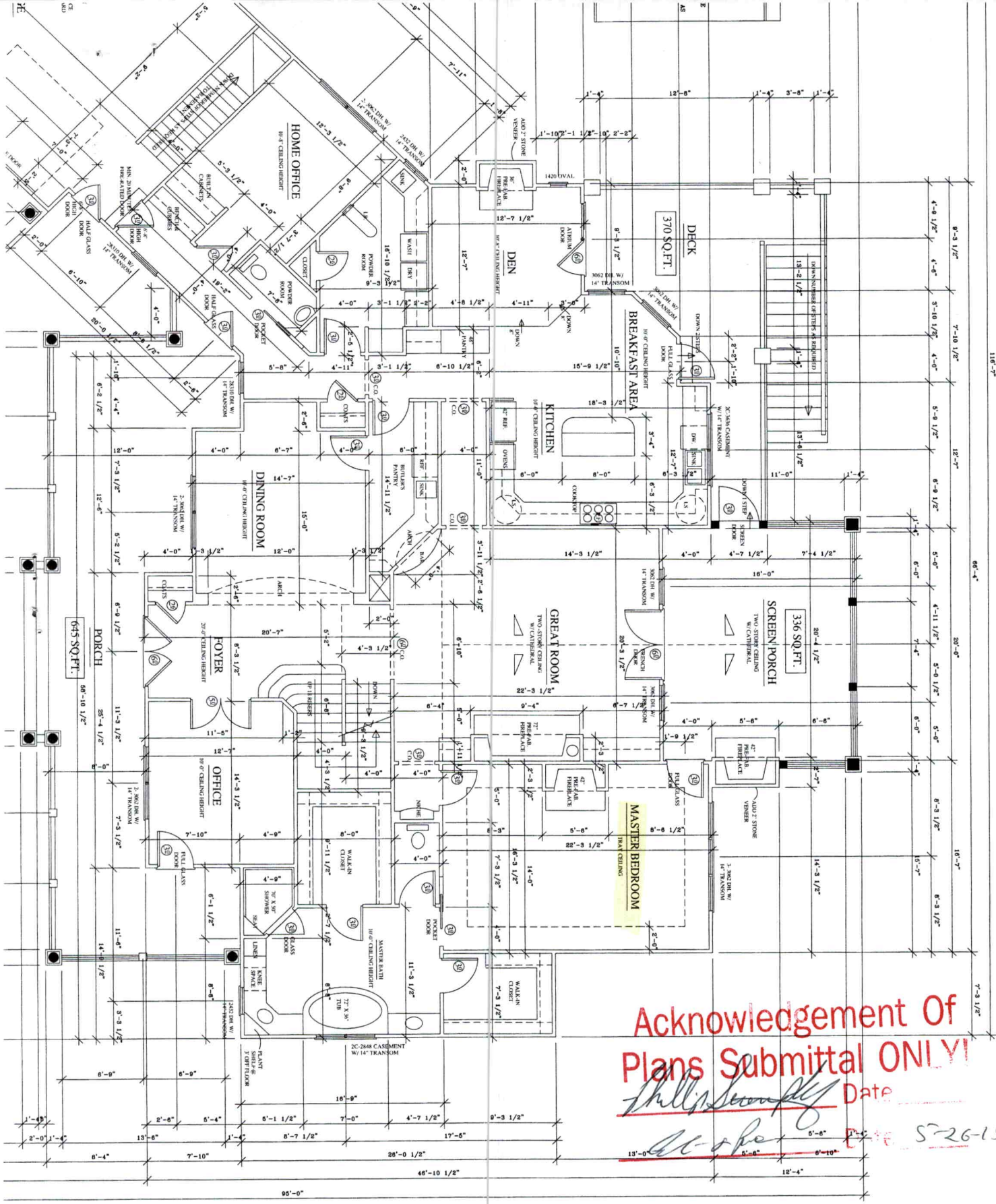
Phillip Stumph 7-13-16
Signature of Owner(s) Date

Signature of Witness 7-13-16
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

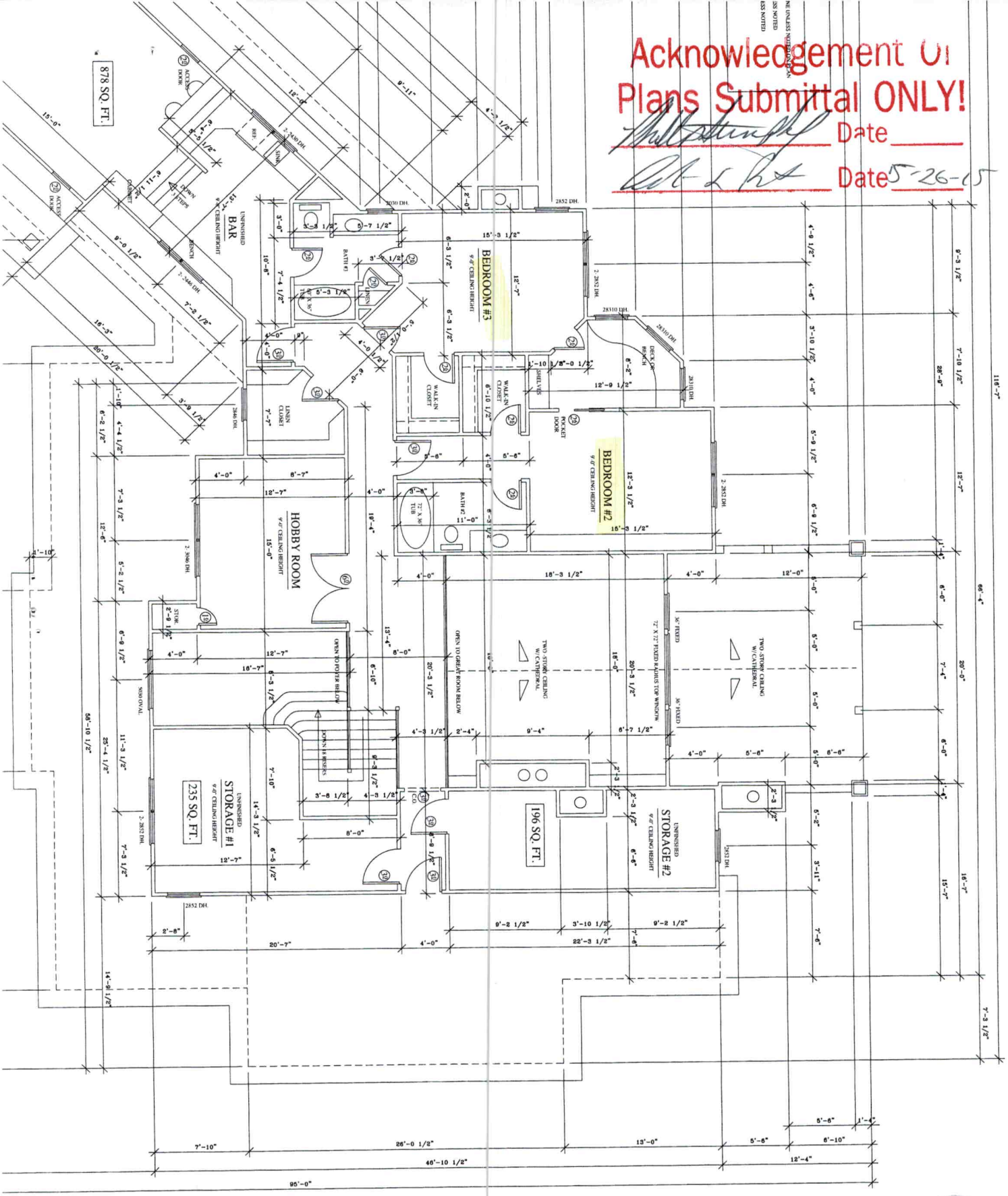


STUMPHF RESIDENCE

PROJECT:

CONTRACTOR SHALL CHECK AND VARIFY ALL DIMENSIONS BEFORE BEGINNING CONSTRUCTION AND REPORT ANY CORRECTIONS OR REVISIONS WITH THE OWNER AND DESIGNER. JEFFERY D. GRAY WILL ASSUME NO LIABILITY FOR ANY WORK PERFORMED BEFORE CONSTRUCTION BEGINS.

JEFFERY D. GRAY
RESIDENTIAL DRAFTING & DESIGN
1200 SOUTH MAIN STREET KANNAPOLIS NORTH CAROLINA 28081
OFFICE (704) 933-4729



Acknowledgement Of
Plans Submittal ONLY!
Date
Date 5-26-15

STUMPHF RESIDENCE

PROJECT:

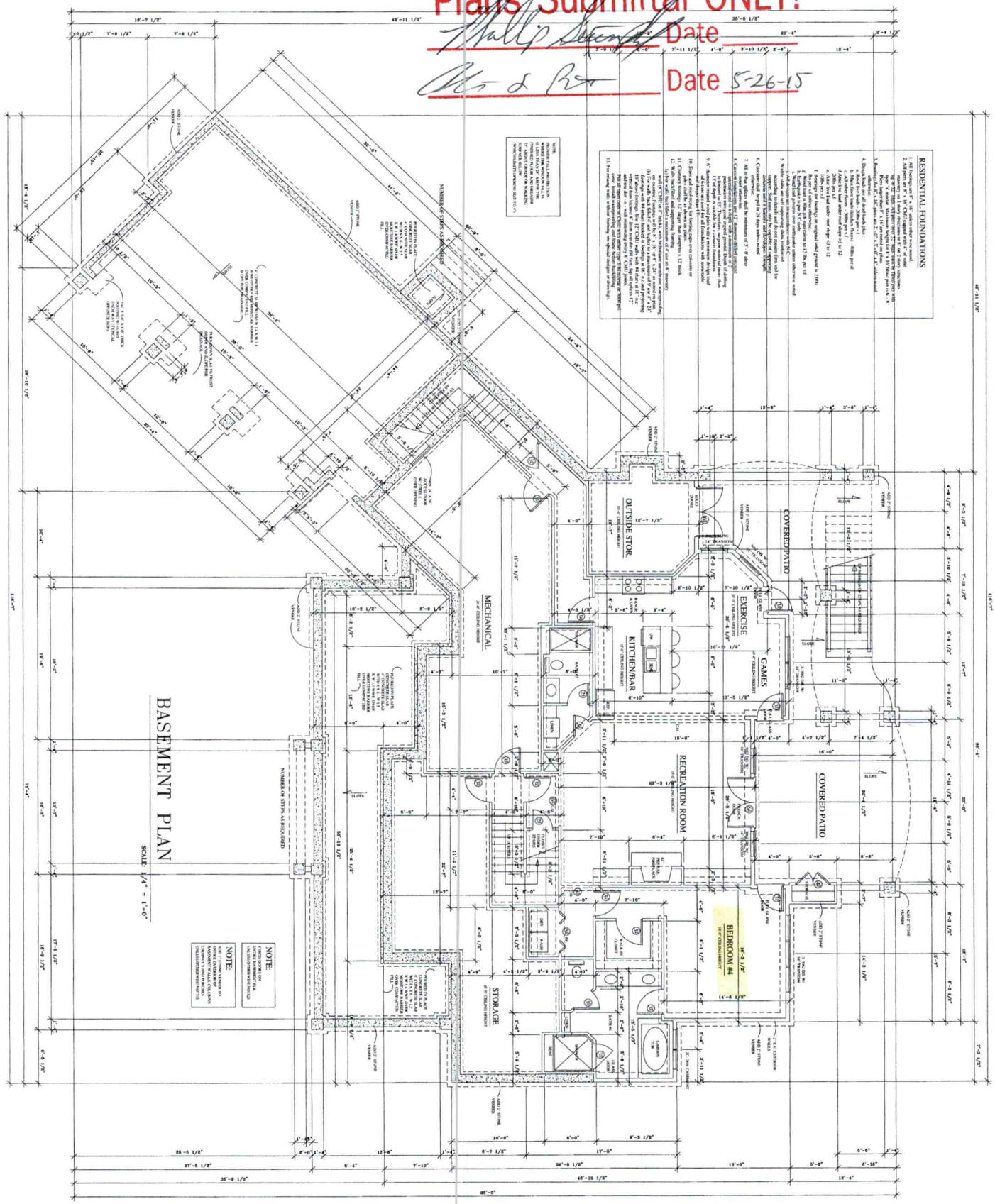
CONTRACTOR SHALL CHECK ALL DIMENSIONS AND VARIFY ALL DIMENSIONS BEFORE BEGINNING CONSTRUCTION. ANY DISCREPANCIES AND COORDINATIONS OR REVISIONS WITH THE OWNER AND DESIGNER MUST BE RESOLVED BEFORE CONSTRUCTION BEGINS. THE DESIGNER WILL ASSUME NO LIABILITY FOR ANY ERRORS ONCE CONSTRUCTION BEGINS.

JEFFERY D. GRAY
RESIDENTIAL DRAFTING & DESIGN
1200 SOUTH MAIN STREET KANNAPOLIS NORTH CAROLINA 28081
OFFICE (704) 933-4729

Acknowledgement Of
Plans Submittal ONLY!

Phillip Stumph Date

Date 5-26-15



STUMPHF RESIDENCE

JEFFERY D. GRAY
RESIDENTIAL DRAFTING & DESIGN

3 OF 6

IREDELL COUNTY

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

APPLICATION NUMBER
210358
Issue Date: 05/08/2015

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4638198149.000	1140 FERN HILL ROAD, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: UELTSCHI RODGER+HEATHER M	Applicant: ROLLANS SOIL & ENVIRON
Address: 149 PURPLE FINCH LANE MOORESVILLE, NC 28117	Address: 470 NORTH BROAD STREET SUITE D MOORESVILLE, NC 28115
Phone:	Phone: 704-658-1723

Use Requested	Zone Code
SFD	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
1.860	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: 5/8/15

Permit Number	37803	TOTAL FEES:	$ 77.25