IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 225872

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

PIN # 4645-12-9927

APPLICANT: Joe Medlin | APPLICANT ADDRESS: 164 Yeoman Rd. Mooresville, NC 28117

SITE ADDRESS: 164 Yeoman Rd. Mooresville, NC 28117 | PHONE: | ALT. PHONE: Adrian Pruett 704-202-5791

SITE DIRECTIONS: I-77 south and right on Langtree Rd → R on Yeoman Rd → House on Corner with Bain Rd.

SUBDIVISION: Yeoman Shores | SECTION: 1 | LOT # 5 | LOT AREA: | DESIGN FLOW: 360 GPD | L.T.A.R.: 0.275

Septic Tank	1000 (gal)	STB	794	Date	8-12-19	☐ New System ☐ Repair ☒ Expansion	System Type: I II (III) IV V VI
Pump Tank	— (gal)	PT	—	Date	—	System Description:	Ex Bed + 2 Lines + New Septic tanks
Pump Make	—	Model	—	Serial #	—	Repair System Description:	1 Bedroom TS-1 25% Reduction
# Nitrification Fields	1	# Lines	Ex Bed + 2 lines	Linear Ft:	110	Maintenance Agreement Required:	☐ YES ☒ NO
Trench Width	36"	Max. Trench Bottom Depth	30" (low side)	Gravel Depth	—		☒ GRAVITY ☐ PRESSURE

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

Comments / Conditions: Existing well must be properly abandoned according to Health Department standards prior to an AC being issued. Recommend pumping septic tank every 3-5 years. Existing septic bed to be used in its entirety. Old septic tank shall be pumped, limed and crushed in place.
2/18/19 Reviewed Floor Plans, in Compliance with Septic plan.

INITIAL SITE SKETCH

X well abandoned 2/13/19
See attached design information from
Carolina Soil + Septic Consulting, PLLC
Dated 3-21-2017 Adrian Pruett LSS # 1314

AS BUILT SKETCH

Installed as Drawn

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: 5/26/17 Installed by: R+H Septic

IMPROVEMENT PERMIT by: Tom Shuck Date: 4/11/17 OPERATION PERMIT by: Date: 9-19-19

AUTHORIZATION TO CONSTRUCT by: Date: 2/18/19 Existing System Inspected by: Date:

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

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT # 225872

PIN # 4645-12-9927

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SITE ADDRESS: 164 Yeoman Rd. Mooresville, NC 28117 PHONE: ALT. PHONE: Adrian Pruett 704-202-5791

SITE DIRECTIONS: I-77 south and right on Langtree Rd → R on Yeoman Rd → House on Corner with Bain Rd.

SUBDIVISION: Yeoman Shores SECTION: 1 LOT # 5 LOT AREA: DESIGN FLOW: 360 GPD L.T.A.R.: 0.275

Septic Tank	1000 (gal)	STB		Date	
Pump Tank	— (gal)	PT	—	Date	—
Pump Make	—	Model	—	Serial #	—
# Nitrification Fields	1	# Lines	Ex Bed + 2 lines	Linear Ft:	110
Trench Width	36"	Max. Trench Bottom Depth	30" (low side)	Gravel Depth	—

☐ New System ☐ Repair ☒ Expansion System Type: I II (III) IV V VI

System Description: Ex Bed + 2 Lines + New septic tanks

Repair System Description: 1 Bedroom TS-1 25% Reduction

Maintenance Agreement Required: ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

☒ Residence ☐ Business ☐ Other ☐ Slab ☒ Basement w/plumbing

No. Bedrooms 3 No. Persons 6 No. Employees — ☒ Crawl Space

Water Supply: ☒ Private ☐ Public ☐ Community

☐ Basement w/o plumbing

Comments / Conditions: Existing well must be properly abandoned according to Health Department standards prior to an AC being issued. Recommend pumping septic tank every 3-5 years. Existing septic bed to be used in its entirety. Old septic tank shall be pumped, limed and crushed in place.

2/18/19 Reviewed Floor Plans, in compliance with Septic plan.

INITIAL SITE SKETCH

Well abandoned 2/13/19

See attached design information from

Carolina Soil + Septic Consulting, PLLC

Dated 3-21-2017 Adrian Pruett LSS # 1314

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

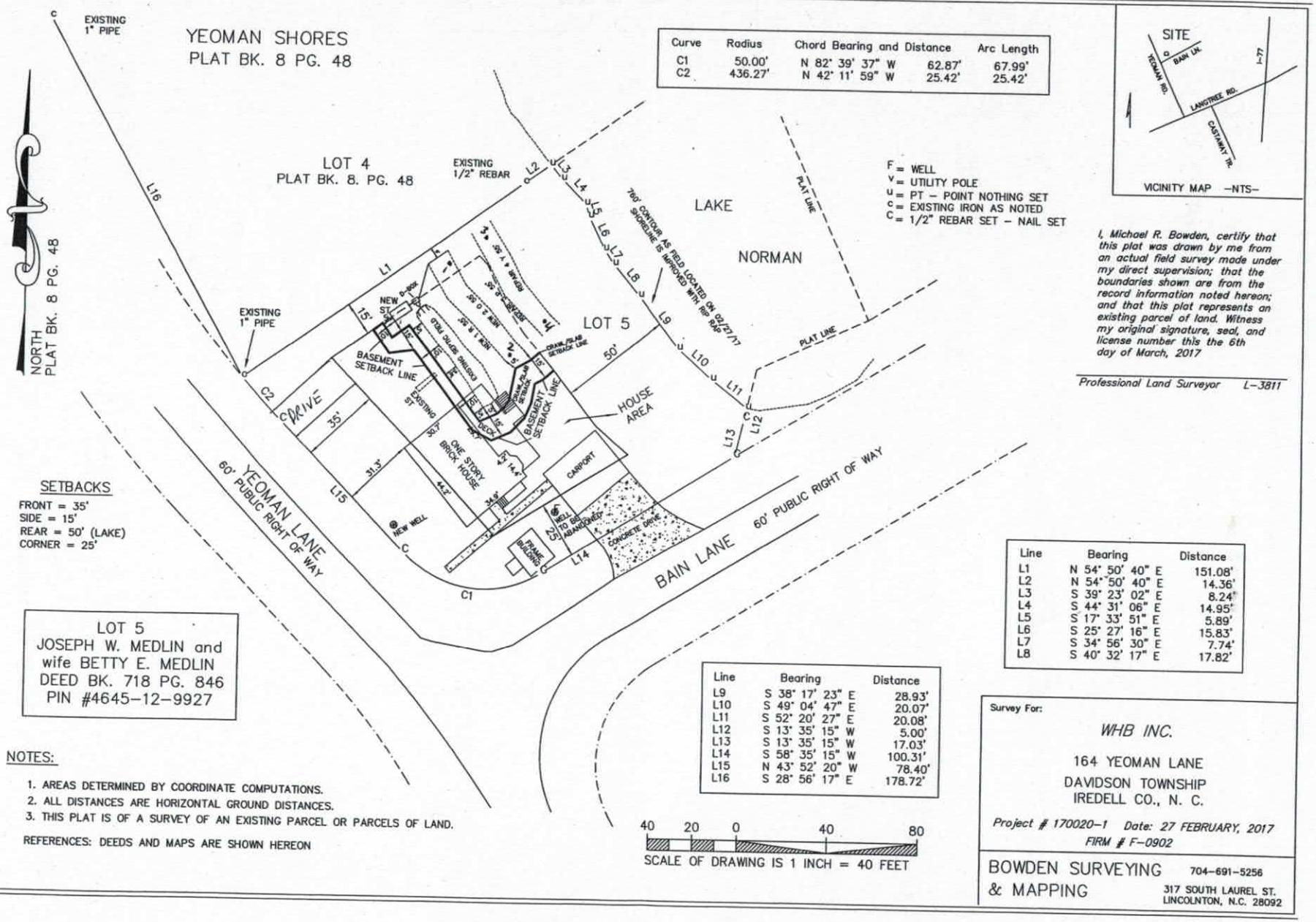
☐ IMPROVEMENT PERMIT *with plat* valid without expiration. ☒ IMPROVEMENT PERMIT *with site plan* valid for 60 mos. ☒ AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: Date: 5/26/17 Installed by:

IMPROVEMENT PERMIT by: Tom Shuck Date: 4/11/17 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: 2/18/19 Existing System Inspected by: Date:

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



Curve	Radius	Chord Bearing and Distance		Arc Length
C1	50.00'	N 82° 39' 37" W	62.87'	67.99'
C2	436.27'	N 42° 11' 59" W	25.42'	25.42'

F = WELL
V = UTILITY POLE
U = PT – POINT NOTHING SET
C = EXISTING IRON AS NOTED
C = 1/2" REBAR SET – NAIL SET

VICINITY MAP –NTS–

I, Michael R. Bowden, certify that this plot was drawn by me from an actual field survey made under my direct supervision; that the boundaries shown are from the record information noted hereon; and that this plot represents an existing parcel of land. Witness my original signature, seal, and license number this the 6th day of March, 2017

Professional Land Surveyor L-3811

SETBACKS
FRONT = 35'
SIDE = 15'
REAR = 50' (LAKE)
CORNER = 25'

LOT 5
JOSEPH W. MEDLIN and wife BETTY E. MEDLIN
DEED BK. 718 PG. 846
PIN #4645-12-9927

NOTES:

1. AREAS DETERMINED BY COORDINATE COMPUTATIONS.
2. ALL DISTANCES ARE HORIZONTAL GROUND DISTANCES.
3. THIS PLAT IS OF A SURVEY OF AN EXISTING PARCEL OR PARCELS OF LAND.

REFERENCES: DEEDS AND MAPS ARE SHOWN HEREON

Line	Bearing	Distance
L1	N 54° 50' 40" E	151.08'
L2	N 54° 50' 40" E	14.36'
L3	S 39° 23' 02" E	8.24'
L4	S 44° 31' 06" E	14.95'
L5	S 17° 33' 51" E	5.89'
L6	S 25° 27' 16" E	15.83'
L7	S 34° 56' 30" E	7.74'
L8	S 40° 32' 17" E	17.82'

Line	Bearing	Distance
L9	S 38° 17' 23" E	28.93'
L10	S 49° 04' 47" E	20.07'
L11	S 52° 20' 27" E	20.08'
L12	S 13° 35' 15" W	5.00'
L13	S 13° 35' 15" W	17.03'
L14	S 58° 35' 15" W	100.31'
L15	N 43° 52' 20" W	78.40'
L16	S 28° 56' 17" E	178.72'

40 20 0 40 80
SCALE OF DRAWING IS 1 INCH = 40 FEET

Survey For:

WHB INC.

164 YEOMAN LANE
DAVIDSON TOWNSHIP
IREDELL CO., N. C.

Project # 170020-1 Date: 27 FEBRUARY, 2017
FIRM # F-0902

BOWDEN SURVEYING & MAPPING
704-691-5256
317 SOUTH LAUREL ST.
LINCOLNTON, N.C. 28092

PROPERTY ID #: 4645129927
COUNTY: Iredell

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

OWNER: Joseph & Betty Medlin — APPLICATION DATE
ADDRESS: 164 Yeoman Rd., Mooresville, NC 28117 — DATE EVALUATED: 2/13/17
PROPOSED FACILITY: Residential — PROPOSED DESIGN FLOW (.1949): 3 brm total — PROPERTY SIZE:
LOCATION OF SITE: 164 Yeoman Rd., Mooresville, NC 28117 — PROPERTY RECORDED: Yes
WATER SUPPLY: X Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: X Auger Boring ☐ 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 15%	0-8	BR CL WFSBK	FR SS SP SEXP	N/A -COM. MN -FEW MN FROM PARENT MATERIAL, FEW/COM SAP/MINERALS, FEW WR -FEW SAP	49"	N/A	N/A	PS 0.275 GPD/SQFT
		8-20	R C WFSBK	FR SS SP SEXP					
		20-42	R C WFSBK	FR SS SP SEXP					
		42-49	R CL WFSBK	FR SS SP SEXP					
B 2	LSS 15%	0-30	BR C WFSBK	FR SS SP SEXP	N/A -COM MN -FEW MN	50"	N/A	N/A	PS 0.275 GPD/SQFT
		30-38	R C WFSBK	FR SS SP SEXP					
		38-50	R CL WFSBK	FR SS SP SEXP					
B 3	LSS 18%	0-8	B CL WFSBK	FR SS SP SEXP	N/A -FEW MN -FEW MICA, FEW SAP	49"	N/A	N/A	PS 0.275 GPD/SQFT
		8-24	R C WFSBK	FR SS SP SEXP					
		24-49	YR C/CL WFSBK	FR SS SP SEXP					
B 4	LSS 18%	0-12	B CL WFSBK	FR SS SP SEXP	N/A -FEW MN -FEW SAP -FEW SAP	50"	N/A	N/A	PS 0.3 GPD/SQFT
		12-18	BR C MFSBK	FR SS SP SEXP					
		18-32	R C WFSBK	FR SS SP SEXP					
		32-48	YR C WFSBK	FR SS SP SEXP					
		48-50	YR CL WFSBK	FR SS SP SEXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	GRAVITY 25%	TS-1 GRAVITY 25%
Site LTAR	0.275	0.275

OTHER FACTORS (.1946): NONE
SITE CLASSIFICATION (.1948): PS

EVALUATED BY: ADRIAN L. PRUETT
OTHER(S) PRESENT: NONE

COMMENTS:

YEOMAN SHORES LOT 5, 164 YEOMAN RD
FIELD LAYOUT SPECIFICATIONS

LAYOUT FROM A 2 BEDROOM TO A 3 BEDROOM RESIDENCE — March 21, 2017

LINE #	FLAG COLOR	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM			NA		
HOUSE CRN		NA	NA		
P. TANK		NA	NA		
1	***EXISTING BED***	*NA*	*NA*	***460 SQFT***	***460 SQFT***
2	***RED***	*NA*	*NA*	*66*	*55*
3	***ORANGE***	*NA*	*NA*	*64*	*55*
4	***PINK***	*NA*	*NA*	*65*	*55*
5	***YELLOW***	*NA*	*NA*	*67*	*55*
			Total	**262**	**220**

	LINE LENGTH	SYSTEM TYPE	SOIL LTAR GPD/FT^2	TRENCH SYSTEM	DISTRIBUTION
System	*110*	*ACCEPT.*	*0.275*	*25% RED.*	*GRAVITY*
Repair	110	*INNOV.*	0.275	TS-1 PRETREATED 25% RED.	GRAVITY

Notes:
** TBM Is Not Required.
**All measures in feet
**Nitrification lines are demonstrated on contour via colored pin flags

Comments: **Lot deeded December 30, 1964 full repair not required.**
Expansion of existing 2 bedrooom septic system by 1 bedroom making 3 bedrooms total.
Repair for 1 bedroom expansion only.
House must maintain setbacks shown on site plan with no foundation drains along crawl space
All septic lines were survey located.
Grinder pump must be used in basement to pump any plumbing up to main level, follow building code.
Iredell County has CS&SC's permission to change septic tank location and distribution type

Approved
4-11-2017

DOSING CALCULATIONS

Location Yeoman Shores
Lot No: 5
Address: 164 Yeoman Rd., Mooresville

No. of Bedrooms	1	Expansion
No. of Bedrooms	3	Total
Design Flow	120	$^{gal}/_{day}$
LTAR	0.275	$^{gal}/_{ft^2\,day}$
25% RED. Expansion? (YES OR NO)	YES	
Supply Line Length	2	ft.
Supply Line Volume	0.72	gal.
Required Feet of 25% RED. Line	109.09091	ft.
Amount of Line from Layout	110	ft.
Gallons per Minute	NA	$^{gal}/_{min}$
Septic Tank Capacity	1000	gal.
Minimum Septic Tank Capacity	1000	gal.
Lateral Line Volume	71.83	gal.

INFORMATION FOR INSTALLER:

- The permit should be read very carefully prior to submitting bid. The following are details that must be considered along with all other considerations.
- Tanks shall be approved by NC DHHS, and certification supplied by the manufacturer.
- All tanks shall be properly back filled and compacted to prevent slump at a later date.
- The installer is responsible for final grades and returning that grade to original, with exception of added structural features.
- The supply trench shall be compacted to eliminate any 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 has no more than 1/4"fall in 10 feet with no high or low areas within. If high or low areas do exist after trench excavation, high areas should be removed rather than filling in low areas. Do not over excavate trenches! Any fine grading should be completed by hand with a rake and shovel, leaving no loose material.
- All pipe openings in the tanks shall be properly grouted. This also applies to the joints around the riser.
- Earth dams, constructed of relatively impervious material, shall be installed at the beginning and end of each lateral to prevent unwanted lateral water movement.
- Elevations at pin flag locations should be checked by the installer prior to beginning trenches to insure accuracy.
- If septic tank risers are used they should be a minimum of 6" above finished grade or within 6" of final grade if buried.
- Design precludes use of foundation drains on the residence.
- System is specified as an Accepted 25% Reduction Gravity installation.
- Repair is specified as an Innovative TS-1 Pretreated Gravity 25% Reduction installation.
- Trench width is specified as 36" wide, rake and lime all trench sidewalls
- **If grading for slab foundation is utilized do not grade/create greater than 2 ft of elevation difference within 15 ft of any component of the septic or repair. If back filling do not backfill over any initial or repair septic line.**

OWNER INFORMATION

Owner:	Joseph & Betty Medlin
Address:	164 Yeoman Rd Mooresville, NC 28117
Contact:	Dave White
Phone:	704-309-4301
County:	Iredell
Location:	YEOMAN SHORES LOT 5, 164 YEOMAN RD
Source of Wastewater Flow:	3 Bedroom Single Family Residence
Estimated Gallons Per Day Flow:	120
System Flow:	NA

25% GRAVITY DESIGN INFORMATION

Drainfield Design Flow (gpd):	110
Loading/Soil Application Rate (gpd/ft.^{2}):	0.275
Depth of Gravel in Trench:	NA (25% reduction)
Gravel Size:	NA (25% reduction)
Total Lateral Length From Layout:	110
Total Lateral Length Required:	109.09
Trench Depth:	30 in. Lowside
Trench Width:	36 in.
TOTAL AREA TRENCH BOTTOM:	330
Trench Spacing on Center:	9 ft.
Repair Trench Spacing:	9 ft.
Repair Trench Depth:	28 in.
Septic Tank Size:	1000 gal.
Estimated Supply Line Length:	2
Supply Line Diameter:	3 in. SCH 40 PVC
Supply Line Volume:	0.72
Dosing Volume:	NA
Supply Manifold:	SERIAL DISTRIBUTION
Additional Comments:	Soil suitability was performed by Adrian L. Pruett LSS

Approved
4-11-2017

AC 225872 2/15/19

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

(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)

1. APPLICATION FOR: ___Improvement Permit X Authorization To Construct ___ Existing System Inspection

2. 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 check ( ) beside whichever is submitted if applicable ___Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. Applicant Information:

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
David White	P.O. Box 4301 Mooresville 28117		704-309-4301
Owner Name	**Mailing Address**	**Home Phone #**	**Alternate Phone #**
Joe Medlin	164 Yeoman Rd Mooresville 28117	704-660-1036	

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
164 Yeoman Rd	Yeoman Shores	Section 1 Lot 5

Driving Directions: I-77 South Right at Longtree Right on Yeoman ~~House~~ Corner of Bain Ln.

5. RESIDENTIAL Site Development Information: *(Check or Complete ALL that apply)*

- (X) New, Single Family Residence
- ( ) New, Multi-Family Residence
- ( ) Expansion of Existing Septic System
- ( ) Repair To Failing Septic System due to _____
- ( ) Other _____

Maximum Number of Bedrooms 3
Maximum Number of Occupants 6
If Expansion, Current Number of Bedrooms ___

- ( ) Crawl Space Foundation?
- ( ) Concrete Slab Foundation?
- (X) Basement w/Plumbing?
- ( ) Basement w/out Plumbing?

IF Non-Residential Site Development:
Type of Business _____
Square Footage of Building _____
Maximum Number of Employees _____
Maximum Number of Seats _____

6. Proposed Water Supply:

(X) New Well ( ) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

7. Desired Septic System Type: *(You may rank in order of preference, if any)* ( ) EXISTING SYSTEM installed _____ *Year*

( ) Alternative ( ) Conventional (X) Innovative ( ) Modified Conventional ( ) Other_____

8. Please Answer The Following ( ) Yes (X) No Does the site contain any jurisdictional wetlands?
To The Best of Your Ability: ( ) Yes (X) No Is any non-domestic sewage (i.e. industry) 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.

9. Signature: D White 2/11/19

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

RECEIVED MAR 23 2017

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

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Paid $350.00

1. APPLICATION FOR: ✓ **Improvement Permit** ___ **Authorization To Construct** ___ **Existing System Inspection**

2. **Page 2: *Site Plan Worksheet* Form MUST Accompany This Application** Expansion # 225872

The following optional attachments may also be submitted: ✓ **Survey Plat, Scaled no more than 1 Inch = 60 Feet**

Place check ( ) beside whichever is submitted if applicable ___ **Custom Site Plan, Scaled no more than 1 Inch = 60 Feet**

3. Applicant Information:

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Joe Medlin / CS&SC	164 Yeoman Rd, Mooresville NC 28117		Adrian Pruett 704-202-5791
Owner Name	**Mailing Address**	**Home Phone #**	**Alternate Phone #**
Joseph & Betty Medlin	164 Yeoman Rd, Mooresville NC 28117		

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
164 Yeoman Rd	Yeoman Shores	P1 Lot 5

Driving Directions: Hwy 21 South, Cross I77, TL on Alcove, TR on Langtree, TR on Yeoman Rd, Lot on corner of Yeoman & Bain

5. RESIDENTIAL Site Development Information: *(Check or Complete ALL that apply)*

- (✓) New, Single Family Residence
- ( ) New, Multi-Family Residence
- ( ) Expansion of Existing Septic System
- ( ) Repair To Failing Septic System due to _____
- ( ) Other _____

Maximum Number of Bedrooms 3
Maximum Number of Occupants 6
If Expansion, Current Number of Bedrooms ___

- (✓) Crawl Space Foundation?
- ( ) Concrete Slab Foundation?
- (✓) Basement w/Plumbing?
- ( ) Basement w/out Plumbing?

IF Non-Residential Site Development:
Type of Business _____
Square Footage of Building _____
Maximum Number of Employees _____
Maximum Number of Seats _____

6. Proposed Water Supply:

(✓) New Well ( ) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

7. Desired Septic System Type: *(You may rank in order of preference, if any)* ( ) EXISTING SYSTEM installed 1964 *Year*

(✓) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other_____

8. Please Answer The Following ( ) Yes (✓) No Does the site contain any jurisdictional wetlands?
To The Best of Your Ability: ( ) Yes (✓) No Is any non-domestic sewage (i.e. industry) 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.

9. Signature: _____
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

3-21-17
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, Joseph Medlin, am the legal owner(s) of the property located at 164 Yeoman Road Mooresville NC 28117, identified as PIN (Parcel Identification Number) 4645-12-9927, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) David White WHB, Inc., 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)
- X Improvement Permit (IP) / Authorization to Construct (AC)
- Application for soil-site evaluation (new/repair)
- X 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.

Joseph Medlin 2/14/2019 Betty Medlin 2/14/2019

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

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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, Joseph W. Medlin, Betty E. Medlin, am the legal owner(s) of the property located at 164 Yeoman Rd., Mooresville NC 28117, identified as PIN (Parcel Identification Number) 4645129927.000, located in Iredell County, North Carolina.

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

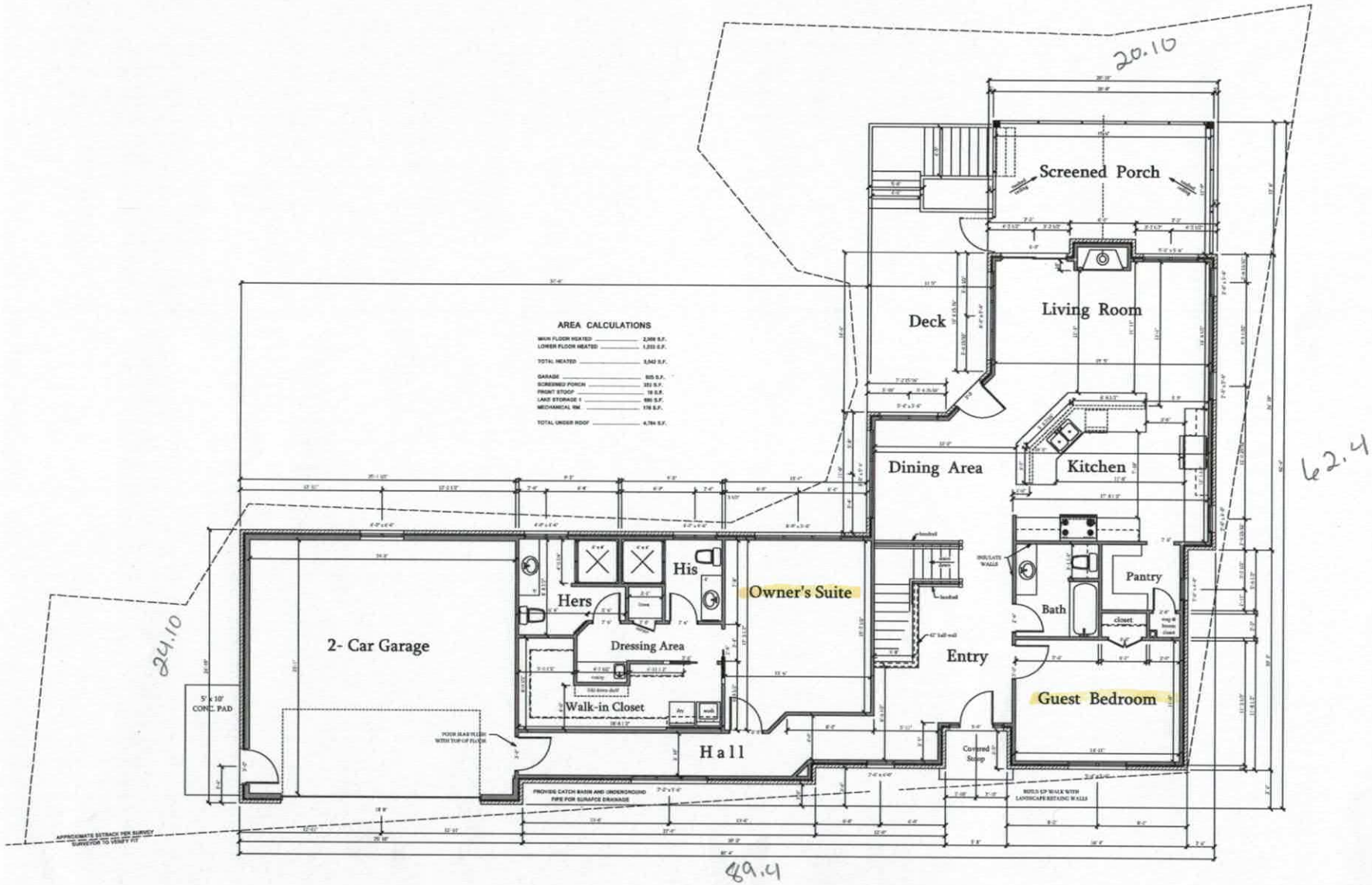
Joseph W. Medlin Betty E. Medlin 3/22/2017 — Signature of Owner(s) — Date

[signature] 3/22/17 — 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



1 A-1 MAIN FLOOR PLAN

SCALE: 1/4" = 1'-0"

10-2-18

WHITE HOUSE BUILDERS, INC.
P.O. BOX 4301, MOORESVILLE, NC 28117
704-799-8500 (O) 704-309-4301 (M)

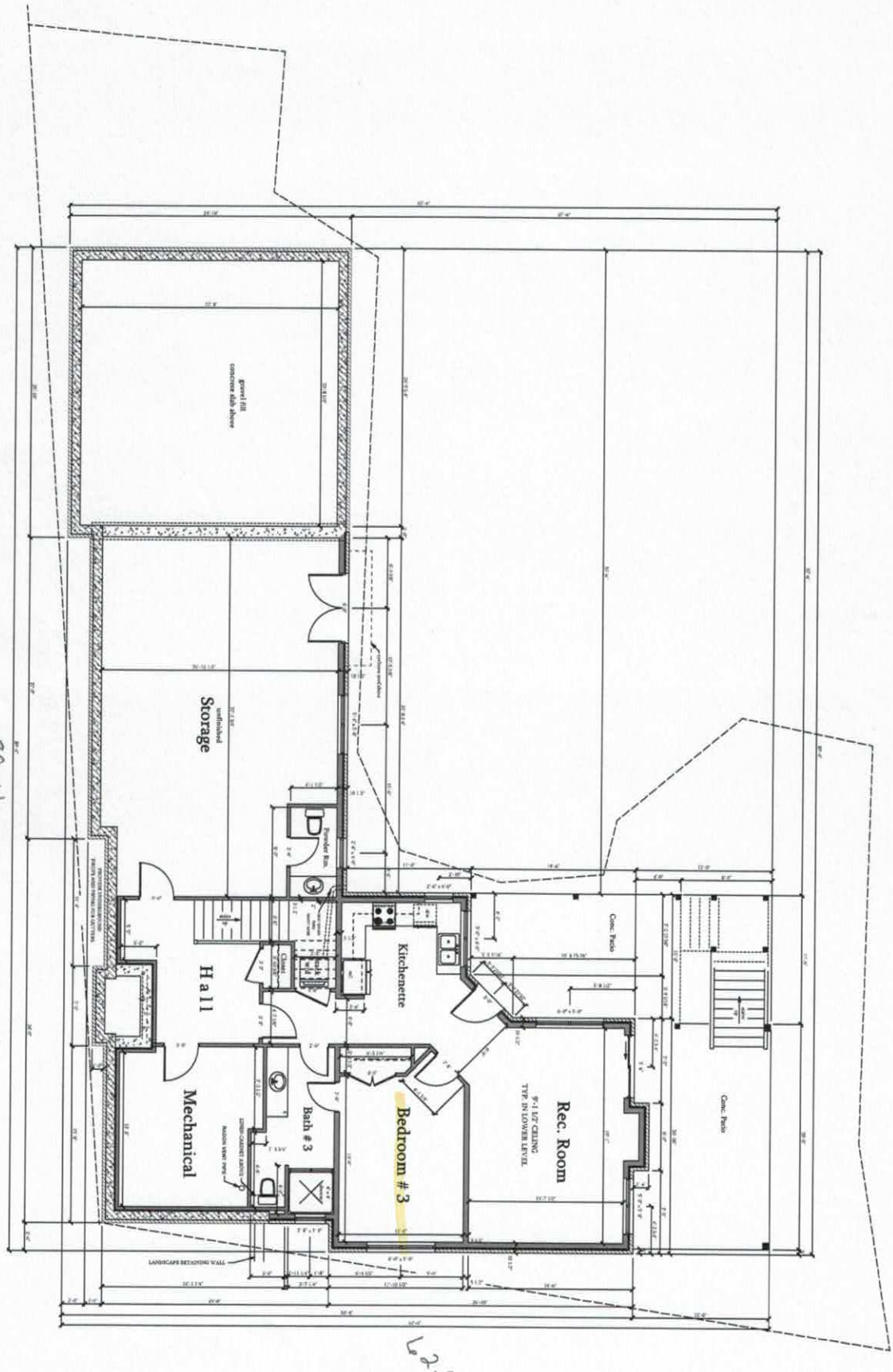
WHB EXCELLENCE IN CONSTRUCTION

Joe and Betty MEDLIN

Main Floor Plan

SCALE: 1/4" = 1'-0"

SHEET No. A-1



1 / A-2 LOWER FLOOR PLAN

SCALE: 1/4" = 1'-0"

89.4

62.4

SHEET No.
A-2

Lower Floor Plan

SCALE: 1/4" = 1' - 0"

Joe and Betty
MEDLIN

WHB INC
EXCELLENCE IN CONSTRUCTION

WHITE HOUSE BUILDERS, INC.
P.O. BOX 4301, MOORESVILLE, NC 28117
704-799-9500 (O) 704-309-4301 (M)

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Phone TR 3-7271 Mooresville Phone NO 3-1271

PERMIT TO INSTALL SEPTIC TANK

Permit NO._____ Permit Date 11 Nov. 1964

Owner Mr. Fields Address Mooresville, N.C.

Installed By Stutts & Blanton. Address China Grove

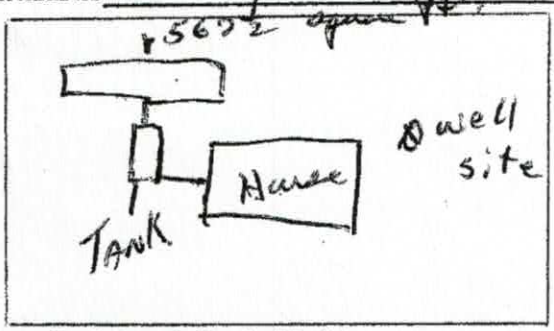
Location of Property Lot 5 Blk 1 Harry Mott Dev. Lake Norman.

Tank		Capacity		Length of Lines		Fixtures	
Block	( )	800	( )	150'	( )	No. of Baths	( )
Precast	(✓)	900	( )	175'	( )	Dishwasher	( )
		1000	(✓)	200'	( )	Garbage Grdr.	( )
		1100	( )	225'	(✓)	Auto-Washer	( )
		1200	( )	250'	( )	Other_____	
		Other_____		Other_____			

NOTIFY HEALTH DEPARTMENT AT LEAST EIGHT HOURS BEFORE TANK IS TO BE INSPECTED.

Final Inspection 11 Nov. 1964 Approved (✓) Disapproved ( )

Remarks +560½ square ft.



Sketch of Installation

Reg R. Sawyer
Sanitarian