ICHD–ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # AP 308722

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

PIN # 4645461706

APPLICANT/OWNER: Cirrus Prop. Mgmt Inc | APPLICANT ADDRESS: 9606 Caldwell Commons Cir Ste A Cornelius, NC 28031

SITE ADDRESS: 165 Harwell Mooresville, NC 28117 | PHONE: 704 230-0890 | ALT. PHONE

SITE DIRECTIONS: US21 S to Williamson Rd TL Alcove Rd TR Templeton TL Harwell on left

SUBDIVISION: Queens Cove | SECTION: 2 | LOT # 8 | LOT AREA: 4.34 Acres | SAP CONTROLLED: ☐ YES ☒ NO | DESIGN FLOW: 600 gpd | L.T.A.R.: .275I / .25Rep.

2ND SEPTIC

Septic Tank	2@ 1000 (gal)	STB 760	Date 11-7-2021	☒ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI
~~Pump Tank~~	1000 (gal)	PT STB 760	Date 10	System Description:	Gravity – 25% Reduction
Pump Make		Model	Serial #	Repair System Description:	25% Reduction
# Nitrification Fields	1	# Lines ★ 560	Linear Ft 560	Maintenance Agreement Required:	☐ YES ☒ NO
Trench Width	36"	Trench Bottom Depth(Low side)	18-22"	Gravel Depth	N/A ☒ GRAVITY ☐ PRESSURE

☒ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/ plumbing | No. Bedrooms 5 | No. Persons 10 | No. Employees | ☐ Crawl Space

Water Supply: ☒ Private ☐ Public ☐ Community | ☐ Basement w/o plumbing

Comments / Conditions: ★ Septic tank from house will go to Septic tank at garage & then a Distribution box will be used to split the flow in half

Divert Storm/surface water away from Septic.

INITIAL SITE SKETCH

(see Septic plan)

See attached Approved Septic Plan by Michael Athanas & Assoc dated 6/29/2020

AS BUILT SKETCH

* SEDIMENT POND TO BE FILLED PRIOR TO O.P.

INSTALLED AS SHOWN

Permit can be suspended or revoked if any false information is supplied toward securing the permit / any unauthorized changes are made to the site / any unauthorized changes are made in the installation of the system. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

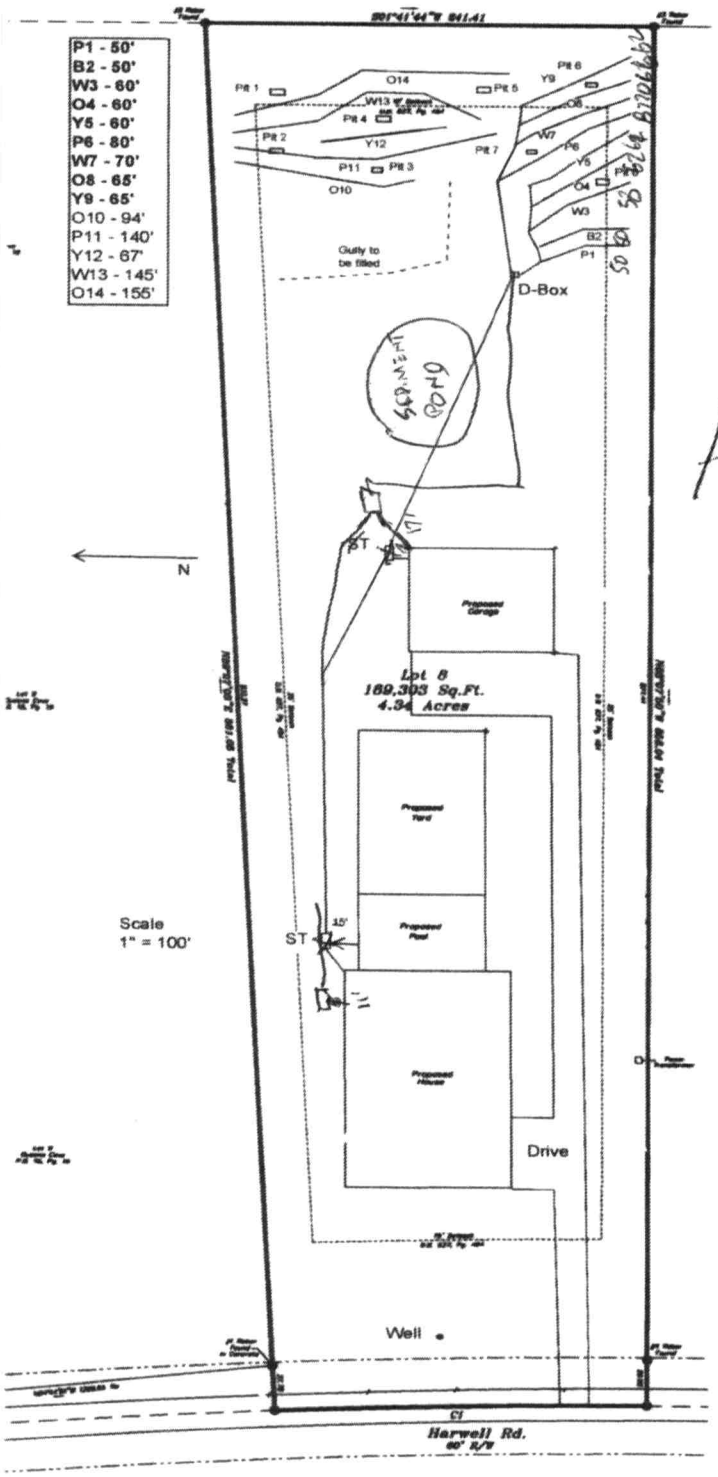
☐ IMPROVEMENT PERMIT *with plat valid without expiration.* ☐ IMPROVEMENT PERMIT *with site plan valid for 60 mos.* ☒ AUTHORIZATION TO CONSTRUCT *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: [signature] Date: 9/17/2020 Installed by: RICHARD ABERNATHY

IMPROVEMENT PERMIT by: [signature] Date: 7/17/2020 OPERATION PERMIT by: D. meberg Date: 1/25/22

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 11/12/20 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.



Approved
7/17/2020
MD



MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887
6/29/2020

Approved
7/17/2020
MD

Reference: Data Sheet for 165 Harwell Rd, Queens Cove Lot 8
House Footprint: See attached plan
Building Setbacks: 35' front/rear, 15' side
Water Source: Private well
Number of Bedrooms/Daily Flow: 5/600 GPD
Proposed LTAR: 0.275 GPD/FT^2 (initial), 0.25 GPD/FT^2 (repair)
Proposed System Type: 25% Reduction
Proposed Repair System Type: 25% Reduction
Distribution: Gravity-D-box and End cap/Drop box
Septic Tank Size: 2 @ 1000 gallons (One ST at the house, One ST at the Garage)
Proposed Trench Bottom: 18-22"

Line	Design Length	Actual Length
Pink 1	**50'**	**50'**
Blue 2	**50'**	**53'**
White 3	**60'**	**68'**
Orange 4	**60'**	**75'**
Yellow 5	**60'**	**80'**
Pink 6	**80'**	**85'**
White 7	**70'**	**70'**
Orange 8	**65'**	**67'**
Yellow 9	**65'**	**67'**
Orange 10		94'
Pink 11		140'
Yellow 12		67'
White 13		145'
Orange 14		155'



Initial System: 560' **Repair System:** 601'

Comments:
The septic tank from the house will go into the septic tank at the garage and from there to the drain field. A distribution box will be used to split the flow in half. One half feeds P1-Y5 (280'), and one half P6-Y9 (280').

PROPERTY ID #:4645461706
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Approved 7/17/2020 md

OWNER: Cirrus Prop Mgmt Inc
APPLICATION DATE
ADDRESS: 9606 Caldwell Commons Cir STE A, Cornelius, NC 28031
DATE EVALUATED:
PROPOSED FACILITY: 5 BDRM
PROPOSED DESIGN FLOW (.1949): 600 GPD
PROPERTY SIZE: 4.34 AC
LOCATION OF SITE: 165 Harwell Rd, Queens Cove Lot 8
PROPERTY RECORDED: 12/11/1978
WATER SUPPLY: X Private ☐ Public X Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring X 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	
PIT 1	LS 5%	0-30	R CL WSBK	FR SS SP SXP	CHR 2 @ 42"	42"	N/A	N/A	PS 0.25
		30-34	Br CL WSBK	FR SS SP SXP					
		34-42	R C WSBK	FR SS SP SXP					
PIT 2	LS 5%	0-13	R CL WSBK	FR SS SP SXP	CHR 2 @ 41"	41"	SAP Inc	N/A	PS 0.25
		13-34	BrR C SBK	FR SS SP SXP					
		34-41	R CL WSBK	FR SS SP SXP					
PIT 3	LS 5%	0-18	R CL WSBK	FR SS SP SXP	Mn @ 28" CHR 2 @ 44"	44"	N/A	N/A	PS 0.25
		18-44	R C SBK	FR SS SP SXP					
PIT 4	LS 3%	0-29	R CL WSBK	FR SS SP SXP	CHR 2 @ 55"	55"	N/A	N/A	PS 0.275
		29-51	Br CL WSBK	FR SS SP SXP					
		51-55	YR C WSBK	FR SS SP SXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	1680 FT^2	1803 FT^2
System Type(s)	25% Reduction	25% Reduction
Site LTAR	0.275	0.25

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: MA&A
OTHER(S) PRESENT:

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet)

Approved
7/17/2020 mjd

PROPERTY ID #: 4645461706
DATE OF EVALUATION:
COUNTY: IREDELL

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
PIT 5	LS 3%	0-16	RC/CL WSBK	FR SS SP SXP	CHR 2 @ 42"	42"	N/A	N/A	PS 0.275
		16-30	Br CL WSBK	FR SS SP SXP					
		30-42	BrR C SBK	FR SS SP SXP					
PIT 6	LS 6%	0-13	RBr CL WSBK	FR SS SP SXP	Mn CHR 2 @ 38"	38"	N/A	N/A	PS 0.275
		13-38	R C SBK	FR SS SP SXP					
PIT 7	LS 6%	0-8	RBr CL WSBK	FR SS SP SXP	N/A	51"	F-C SAP PS	N/A	PS 0.3
		8-36	R C SBK	FR SS SP SXP					
		36-51	R CL WSBK	FR SS SP SXP					
		51-60	VER SL SAP M	FR SS SP SXP					
PIT 8	LS 6%	0-36	R C SBK	FR SS SP SXP	Few Litho Litho	64"	N/A	N/A	PS 0.3
		36-64	R CL WSBK	FR SS SP SXP					

COMMENTS:

RECEIVED NOV 1 0 2020

IREDELL COUNTY HEALTH DEPARTMENT AP-308722

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: Goodis Construction **Address:** 915 River Hwy Mooresville **Phone:** 704 363-7302

Owner Name: Ronnie Bice **Address:** 165 Harwell Rd Mooresville **Phone:** 704 236-1062

Property Information:

Street Address: 165 Harwell Rd Mooresville

Subdivision Name: Queens Cove **Section/Phase:** _____ **Lot Number:** _____

Driving Directions: Alcove Rd to Harwell

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: 3
Maximum Number of Occupants: 2
(✓) Swimming Pool
( ) Other Addition/Structure: Detached garage

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

11/9/2020
DATE

RECEIVED JUL 2 - 2020

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

AP-308722

Paid $350.00

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: (PRINT CLEARLY)

Applicant Name: Cirrus Prop. Mgmt, Inc **Address:** 9606 Caldwell Commons Cir, STE A, Cornelius, NC **Zip:** 28031

Applicant Email: ronniebice@me.com **Phone:** Chad Goodin-704-230-0890 **Alt. Phone:** _____

Owner Name: Same **Address:** _____ **Zip:** _____

Owner Email: _____ **Phone:** _____ **Alt. Phone:** _____

Property Information:

Street Address: 165 Harwell Rd

Subdivision Name: Queens Cove **Section/Phase:** _____ **Lot Number:** 8

Driving Directions: _____

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

CHECK FOUNDATION TYPE

(✓) New Single Family Residence — Maximum Number of Bedrooms: 5 — ( ) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: _____ — (✓) Concrete Slab Foundation
( ) Accessory Building — (✓) Swimming Pool — ( ) Basement with Plumbing
( ) Bedroom(s) Addition — (✓) Other Addition/Structure: Garage — ( ) 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: _____

(✓) 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: Accepted

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: _____ 7/2/2020

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

IREDELL COUNTY HEALTH DEPARTMENT

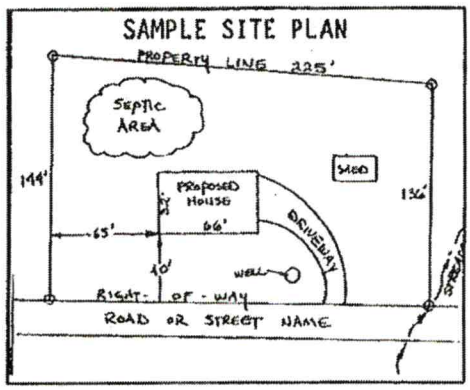
ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *SITE PLAN WORKSHEET*

SEE THE "SAMPLE SITE PLAN" BELOW. *INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!*

Place an (X) beside each item as you complete the site plan:

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

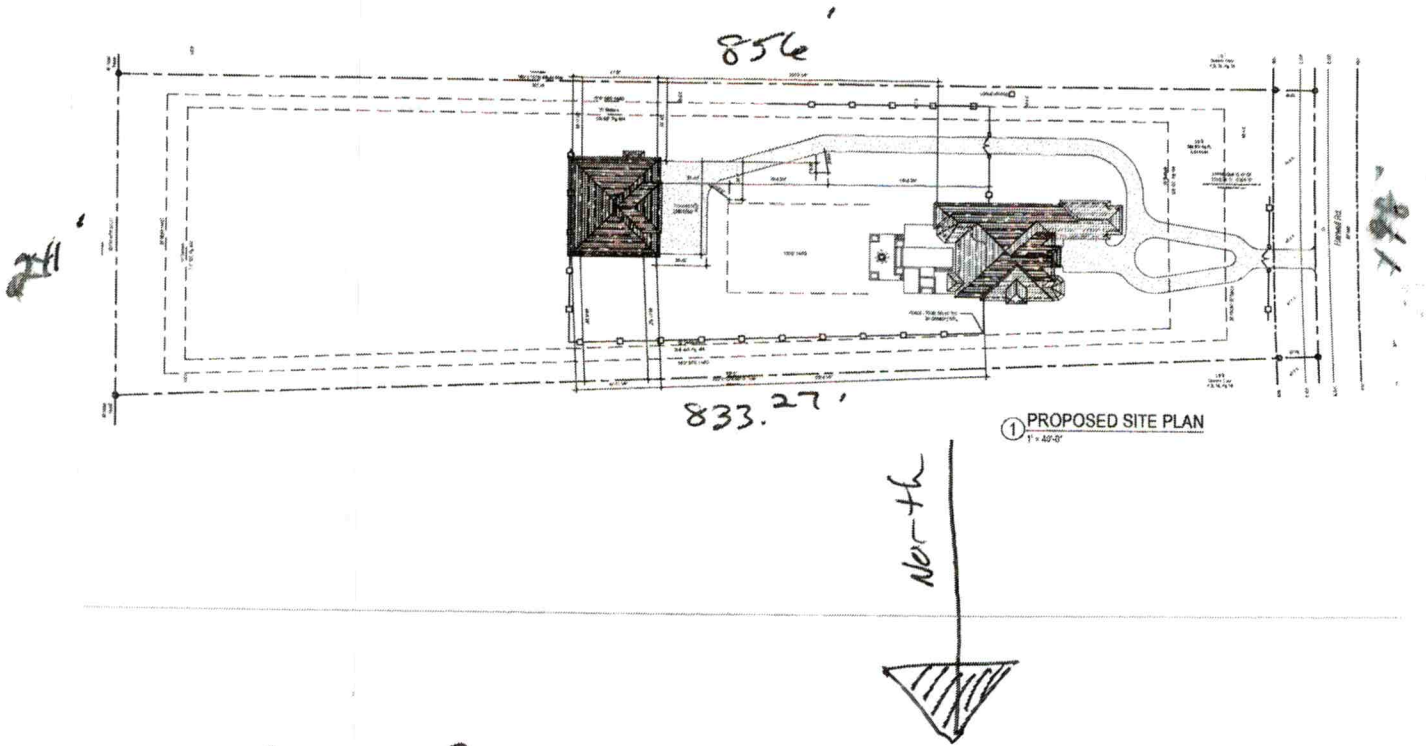


Circle N/A on the following if appropriate:

Location of septic systems and wells within 100' of your property	N/A
Location of easements and rights of ways on your property	N/A
Location of any designated wetlands on the property	N/A

USE THIS SPACE TO DRAW YOUR SITE PLAN

Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site



1 PROPOSED SITE PLAN
1" = 40'-0"

Signature: Lisa [illegible] 11/9/2020

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, Cirrus Property Management, Inc. By:Ronnie J Bice, am the legal owner(s) of the property located at 1105 Harwell Rd., Mooresville, NC 28117, identified as PIN (Parcel Identification Number) 4645461706.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Chad Goodin, Goodin Construction, 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)
- 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.

Ronnie J Bice
Signature of Owner(s)

9/11/2020
Date

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

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

IREDELL COUNTY 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, Cirrus Property Management, Inc., By: Ronnie J Bice, am the legal owner(s) of the property located at 165 Harwell Road, Mooresville NC 28117, identified as
PIN (Parcel Identification Number) 4645461706.000, located in Iredell County, North Carolina.

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

Cirrus Property management, Inc.
By: Ronnie J Bice 6/30/2020

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

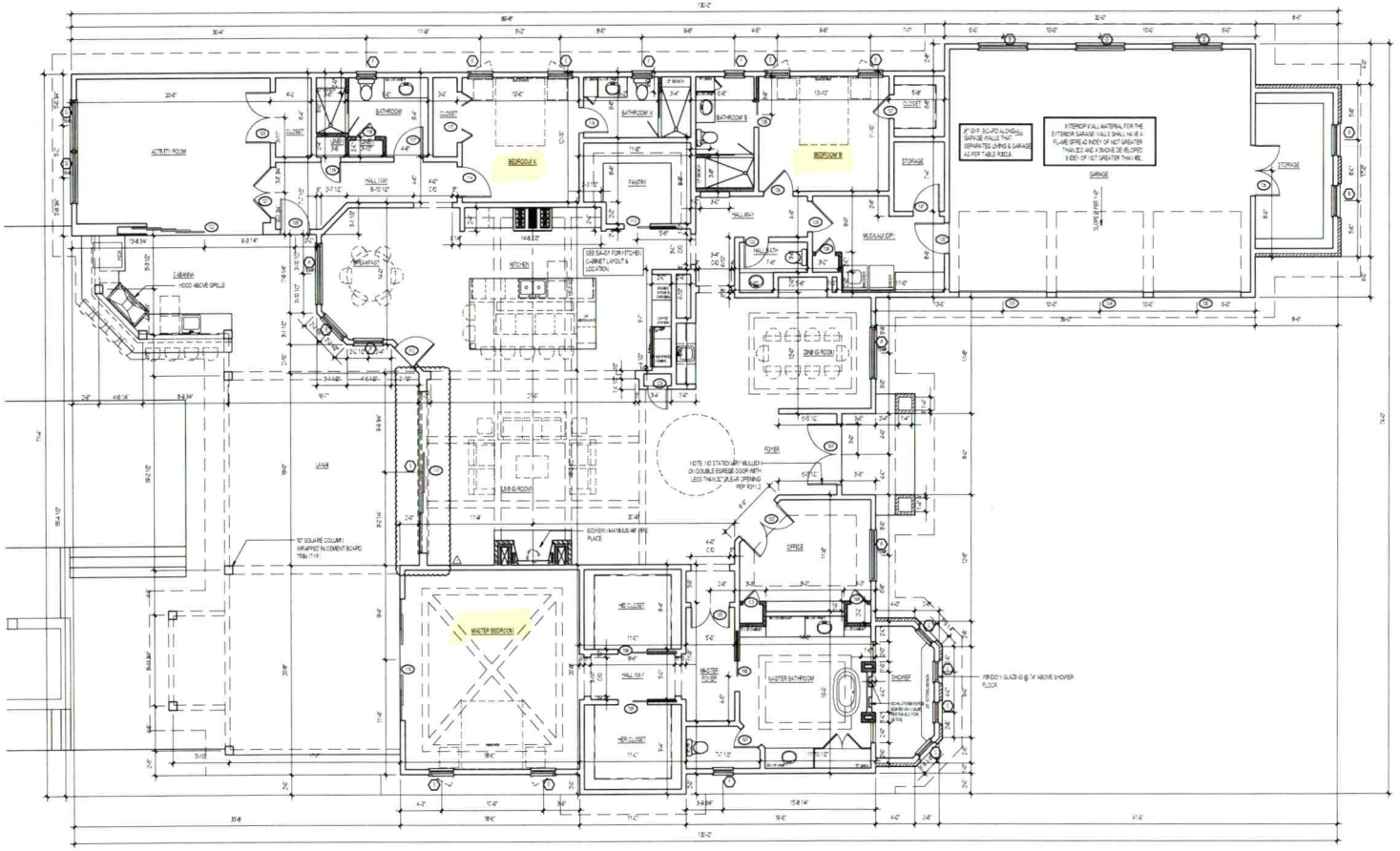
Acknowledgement of Plans Submittal ONLY!

Date 11/13/2020

Date

130' 2"

74'



1 FIRST FLOOR PLAN
3/16" = 1'-0"

NOTE
10" CONCRETE
STUD WALL
FURRED WALL
NEW WALL

NORTH

D.B. 2485, PG. 1266

AE STOUT RESIDENTIAL DESIGN
A.E. STOUT DESIGNS LLC
Phone: 704.941.8597
E-mail:
aestuutdesigns@icloud.com

The drawings and the designs shown on the property of A.E. STOUT DESIGNS LLC and may not be used in whole or in part, for use on any other project is prohibited. This drawing is for informational purposes. © All Rights

Designed Exclusively for the:

Bice Residence

165 Harwell Road, Mooresville, NC 28118

PROJECT #	2005
ISSUE DATE	03 AUGUST 2020
REVISIONS	
1	22 SEPTEMBER 2020 (OWNER REQUEST)

1ST FLOOR PLAN

A-2.1

OF TWENTY FOUR

Acknowledgement of
Plans Submittal ONLY!

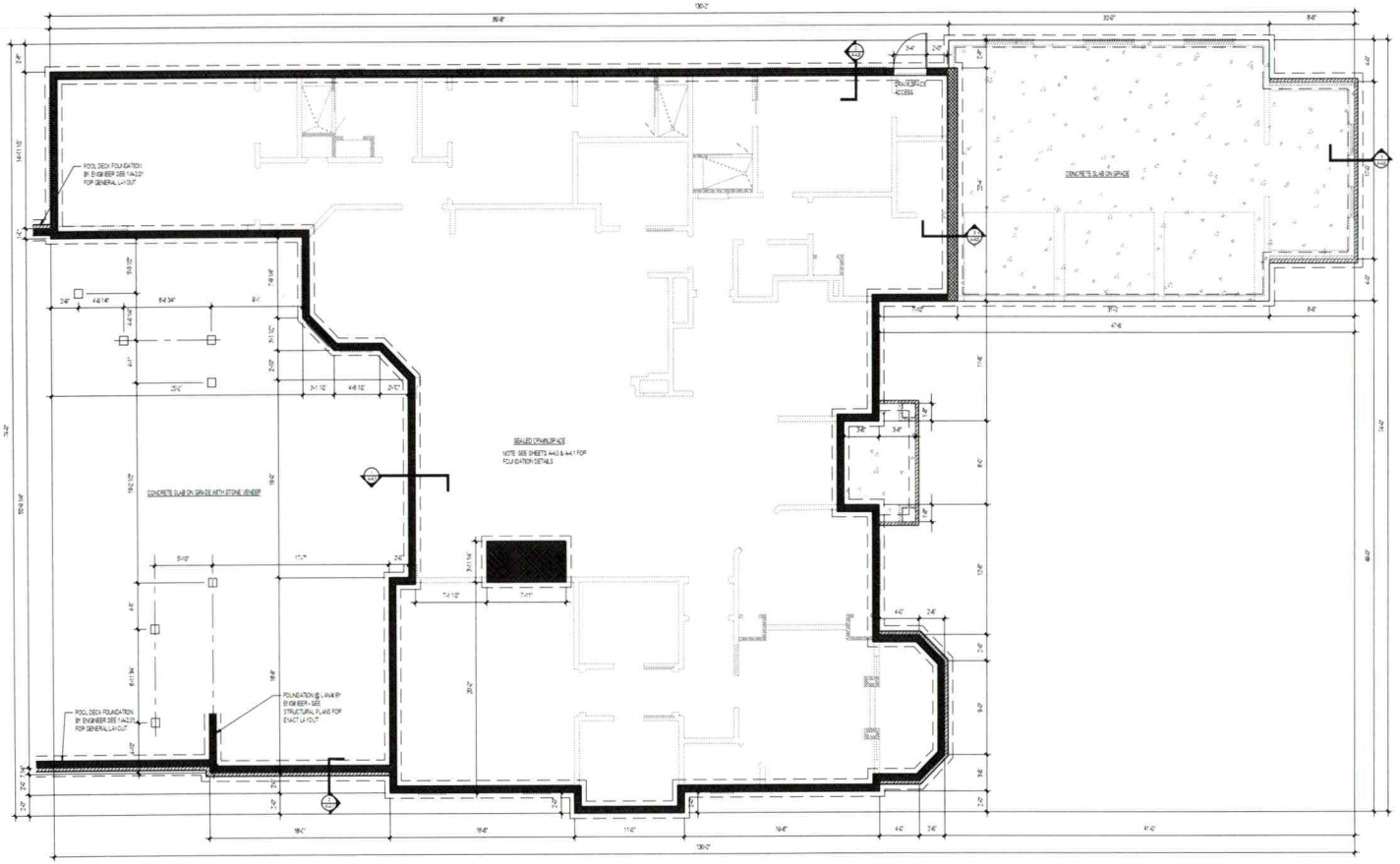
Date 11/13/2020

Date

AE STOUT
DESIGN STUDIO
A.E. STOUT DESIGNS LLC
Phone: 704.941.8597

E-mail
aestoutdesigns@icloud.com

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1 PROPOSED FIRST FLOOR PLAN
3/16" = 1'-0"

NOTE
10" CONCRETE
STUD WALL
FURRED WALL
NEW WALL

NORTH

D.B. 2496, PG. 1266

Designed Exclusively for the:

Bice Residence

165 Harwell Road, Mooresville, NC 28118

PROJECT #	2008
ISSUE DATE:	03 AUGUST 2020
REVISIONS	
1	22 SEPTEMBER 2020 (OWNER REQUEST)

FOUNDATION PLAN

A-2.0

OF TWENTY FOUR

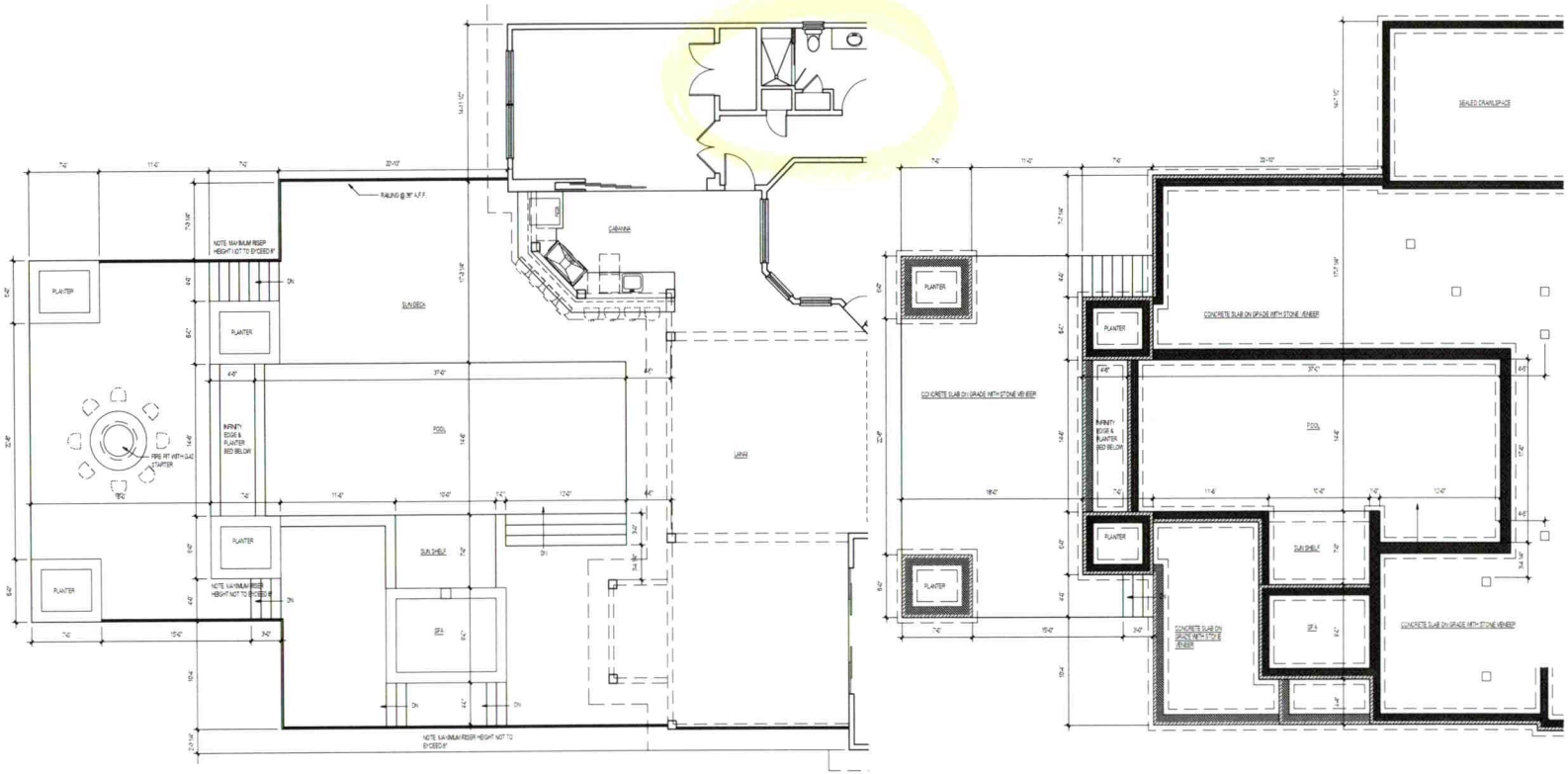
Acknowledgement of
Plans Submittal ONLY!

Date 11/13/2020

Date

AE STOUT
RESIDENTIAL DESIGN
A.E. STOUT DESIGNS LLC
Phone 704.941.8597
E-mail
aestoutdesigns@icloud.com
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NOTE: GENERAL LAYOUT OF POOL & PATIO - ACTUAL POOL & PATIO BY POOL COMPANY



2 GENERAL POOL AND PATIO LAYOUT
3/16" = 1'-0"

1 GENERAL FOUNDATION @ POOL & POOL PATIO
3/16" = 1'-0"

NOTE: GENERAL LAYOUT OF POOL & PATIO - ACTUAL POOL & PATIO BY POOL COMPANY

NOTE
10" CONCRETE
STUD WALL
FURRED WALL
NEW WALL

NORTH

D.B. 2496, PG. 1266

Designed Exclusively for the:

Bice Residence

165 Harwell Road, Mooresville, NC 28118

PROJECT #	2009
ISSUE DATE	03 AUGUST 2020
REVISIONS	
1	22 SEPTEMBER 2020 (OWNER REQUEST)

GENERAL POOL & PATIO LAYOUT

A-2.01

OF TWENTY FOUR

IREDELL COUNTY · NC

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

APPLICATION NUMBER

308722
Issue Date: 07/02/2020

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4645461706.000	165 HARWELL RD	Iredell County

Owner Information	Applicant Information
Name: CIRRUS PROPERTY MANAGEMENT INC	Name: MICHAEL ATHANAS & ASSOCIATES
Address: 9606 CALDWEL CMMNS CIR STE A	Address: 561 ENNIS RD
CORNELIUS, NC 28031	WEDDINGTON, NC 28173
Phone:	Phone: (704)576-3887

Use Requested	Zone Code
Single Family Dwelling	R-20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0	35	34	15	15	WSIV-CA Catawba/Lake Norman	NO

Remarks
SFD

The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions, plat conditions and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

Date: 07/02/2020

Signature of Owner/Contractor

Permit Number	308722	TOTAL FEES:	$77.25