IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 224926

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

PIN # 4645-48-4813

APPLICANT: ARCHADECK OF CHARLOTTE APPLICANT ADDRESS: 2311 VILLAGE LAKE DR.

SITE ADDRESS: 161 HUNTFIELD WAY MOORESVILLE PHONE: 704-944-1350 ALT. PHONE:

SITE DIRECTIONS: ALCOVE, TR TEMPLETON, TR TEMPLETON BAY, TL HUNTFIELD, ON L

SUBDIVISION: TEMPLETON BAY SECTION: LOT # 10 LOT AREA: .565 AC DESIGN FLOW: 480 L.T.A.R.:

Septic Tank (gal) STB Date

Pump Tank (gal) PT Date

Pump Make Model EXISTING Serial #

Nitrification Fields # Lines Linear Ft:

Trench Width Max. Trench Bottom Depth Gravel Depth

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

System Description: LP- PANEL

Repair System Description: SAME

Maintenance Agreement Required: ☑ YES ☐ NO

☐ GRAVITY ☑ PRESSURE

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

No. Bedrooms 4 No. Persons 8 No. Employees

☑ Crawl Space

Water Supply: ☐ Private ☐ Public ☑ Community

☐ Basement w/o plumbing

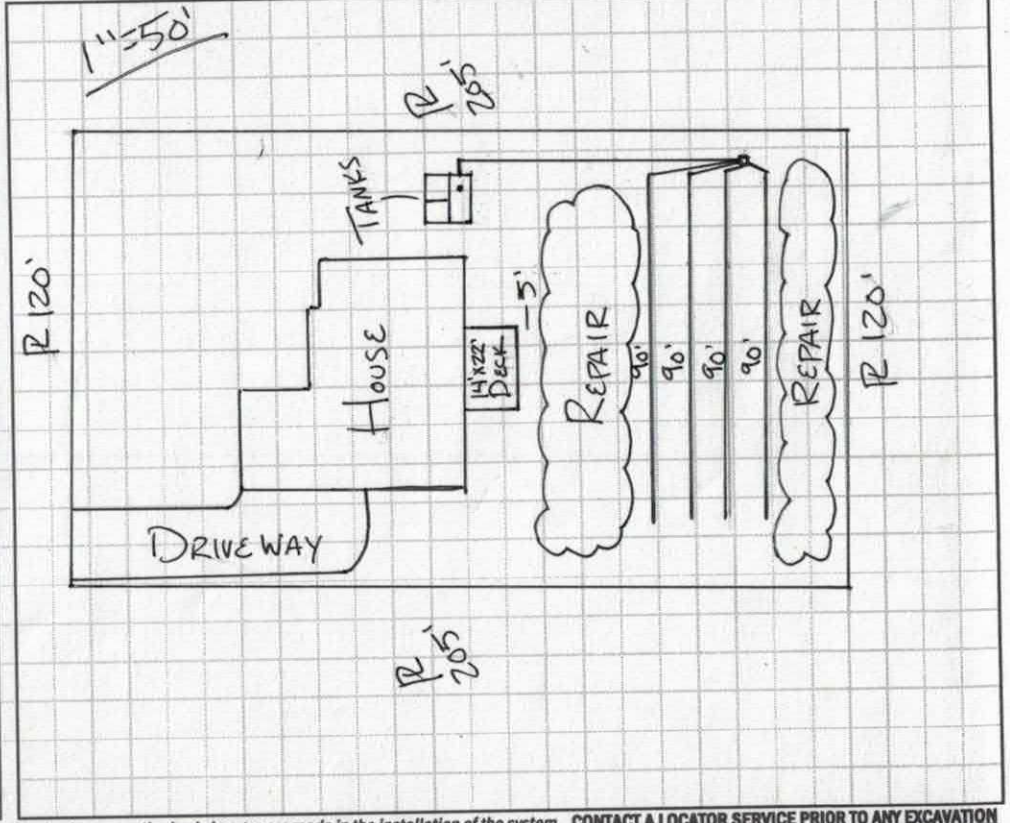
Comments / Conditions:

DECK

INITIAL SITE SKETCH

HUNTFIELD WAY

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: Roger Moon Date: 4/20/17 Installed by:

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Date: 4-5-17

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

OK

RECEIVED MAR 3 - 2017

Paid Online $250.00
#224926

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

3. Applicant Information:

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Archadeck of Charlotte	2311 Village Lake Drive	704-944-1350	704-900-1192
David Holland (Owner Name)	161 Huntfield Way, Mooresville, 28117 (Mailing Address)	784-677-5520	Alternate Phone #

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
161 Huntfield Way, Mooresville, NC 28117	Templeton Bay	-Lot 10

Driving Directions: Exit 33 off of I-77, left on Alcove Rd, right on Templeton Rd, right on Templeton Bay Dr, left on Huntfield Way

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 Existing house - Porch rear of house 3ft by 5ft

Maximum Number of Bedrooms ___
Maximum Number of Occupants ___
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 2001 (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: X _____ 2/27/17
Homeowner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

03/01/2017 07:46

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.

X I, David Holland, am the legal owner(s) of the property located at 161 Hurdfield Way Mooresville NC 28117, identified as PIN (Parcel Identification Number) 4645484813, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) Arrebadek of Charlotte, 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.

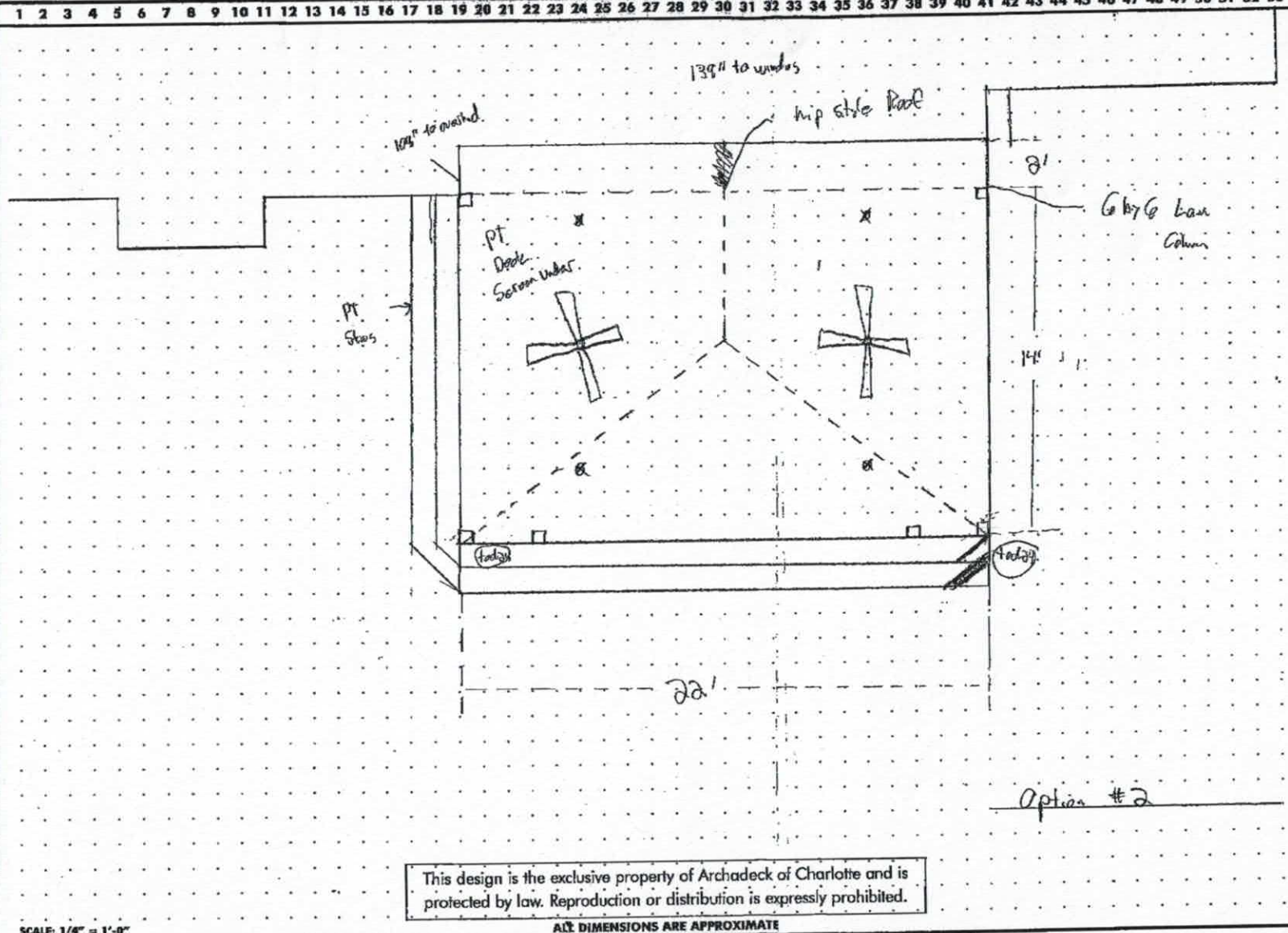
X _____ 2-28-17
Signature of Owner(s) Date

_____
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



archadeck®
In America's Most Popular Backyards℠

Name: David Holland
Address: 161 Huntfield Way
City: Mooresville
St.: NC
Zip Code: 28117
Office: Char
Sales Person: Greg
Contact No:
Drwg. No.:

Additional Notes:

Demo
Existing deck
Build Back
14' x 22'
hip Roof
Wall tie in
hip Roof open
porch.

BUILDER:
CUSTOMER:
CUSTOMER:

This design is the exclusive property of Archadeck of Charlotte and is protected by law. Reproduction or distribution is expressly prohibited.

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

ALL DIMENSIONS ARE APPROXIMATE

This drawing shall not be duplicated without the express written consent of U.S. Structures, Inc.
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Mar. 3. 2017 7:40AM No. 7415 P. 9

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Town of Mooresville Jurisdiction

ZONING APPROVAL

For building permit applications

Development Services 413 North Main St. Mooresville, NC 28115 Phone 704-662-7040

Number: 224926 Subdivision: TEMPLETON BAY

Proposed Use: COVERED OPEN PORCH ADDITION 14' X 22'

Location: 161 HUNTFIELD WAY

Tax PIN: 4645484813.000 Zoning: R2 Lot: 10 Size: 0.565

Owner: HOLLAND DAVID V+ERIN W
Address: 161 HUNTFIELD WAY
MOORESVILLE, NC 28117

Applicant: ARCHADECK OF CHARLOTTE/KENT'S
Address: 2311 VILLAGE LAKE DRIVE

I certify that all statements made in this application and any attached documents are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that false information may be grounds for rejection of this application. Authorized Health Department and Inspection Department Representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

Signature of Owner or Authorized Agent Date

If permitted, the following minimum zoning requirements must be met, unless Health Department requires more land area or other qualifications are indicated in the remarks.

Lot Area: Front Yard Depth: 30.00 Side Yard Depth: 15.00
Rear Yard Depth: 40.00 Corner Yard Depth:

FILE COPY

Remarks: APPROVAL FOR COVERED DECK ADDTION.
MUST OBTAIN ALL IREDELL COUNTY PERMITS AND INSPECITONS.

HP Approved By: 02/10/2017 Date $50 Application Fee