IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 680-3825 PERMIT # 240215

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

PIN # 4646-32-4487

APPLICANT/OWNER: Jessica Barish APPLICANT ADDRESS: 438 Williamson Rd. Ste. C. Mooresville, NC

SITE ADDRESS: 125 Barrister Bay Lane Mooresville, NC 28117 PHONE: 704-650-2260 ALT. PHONE

SITE DIRECTIONS: Williamson Rd South from BSR → Ron Alcove Rd → Ron Catalina → Ron Barrister Bay → left

SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Barrister Bay SECTION: — LOT # 4 LOT AREA: 1.31 acres DESIGN FLOW: 480 GPD L.T.A.R.: 0.30

Septic Tank	1000 (gal)	STB 2071	Date INFILTRATOR	☒ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms	4	Water Supply
Pump Tank	1000 (gal)	PT 2071	Date INFILTRATOR	System Description: PM - 25% Reduction		☐ Business	No. Persons	8	☒ Private
Pump Make		Model	Serial #	Repair System Description: Horizontal PMPS (50% Reduction)		☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines 5	Linear Ft 400	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☐ Crawl Space		☐ Community
Trench Width	36"	Trench Bottom Depth(Low side)	24" - 34"	Gravel Depth —	☐ GRAVITY ☒ PRESSURE	☐ Basement w/ plumbing		☐ Basement w/o plumbing	

Comments / Conditions: Recommend pumping tanks every 3-5 years. Also recommend drilling well before building house to avoid access concerns. New lot with updated lot lines

Must be recorded at the Iredell County Office of the Register and must exactly match what has been submitted/prepared to the health department.

INITIAL SITE SKETCH

See attached design information from Michael Athanas + Associates

Dated: 3/20/19 Michael Athanas LSS #1252

Revised: 3/28/19 (site drawing - pool, well, etc)

visited 4/29/19: House Footes are with, house Box sub mitted and poppy has been recorded.

AS BUILT SKETCH

DRAINLINES CHECKED INSTALLED AS PERMITTED 8-14-2019 BCW

ST 11' off deck

	Date	Initials
Drain Lines Checked	8-14	BCW
Tanks Checked	8-15	CC
Pressure Manifold or Valve Box Checked	8-15	CC
Pressure Head Set	11-26	BCW
Electrical Checked	11-22	BB
Floats Set	11-22	BB
Alarm Checked	11-22	BB
Maintenance Contract Y / (N)	—	—

* Move Irrigation Lines 10ft away from Septic & out of Repair Area. REMOVED 11-26-19 CHECKED BY PJB

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

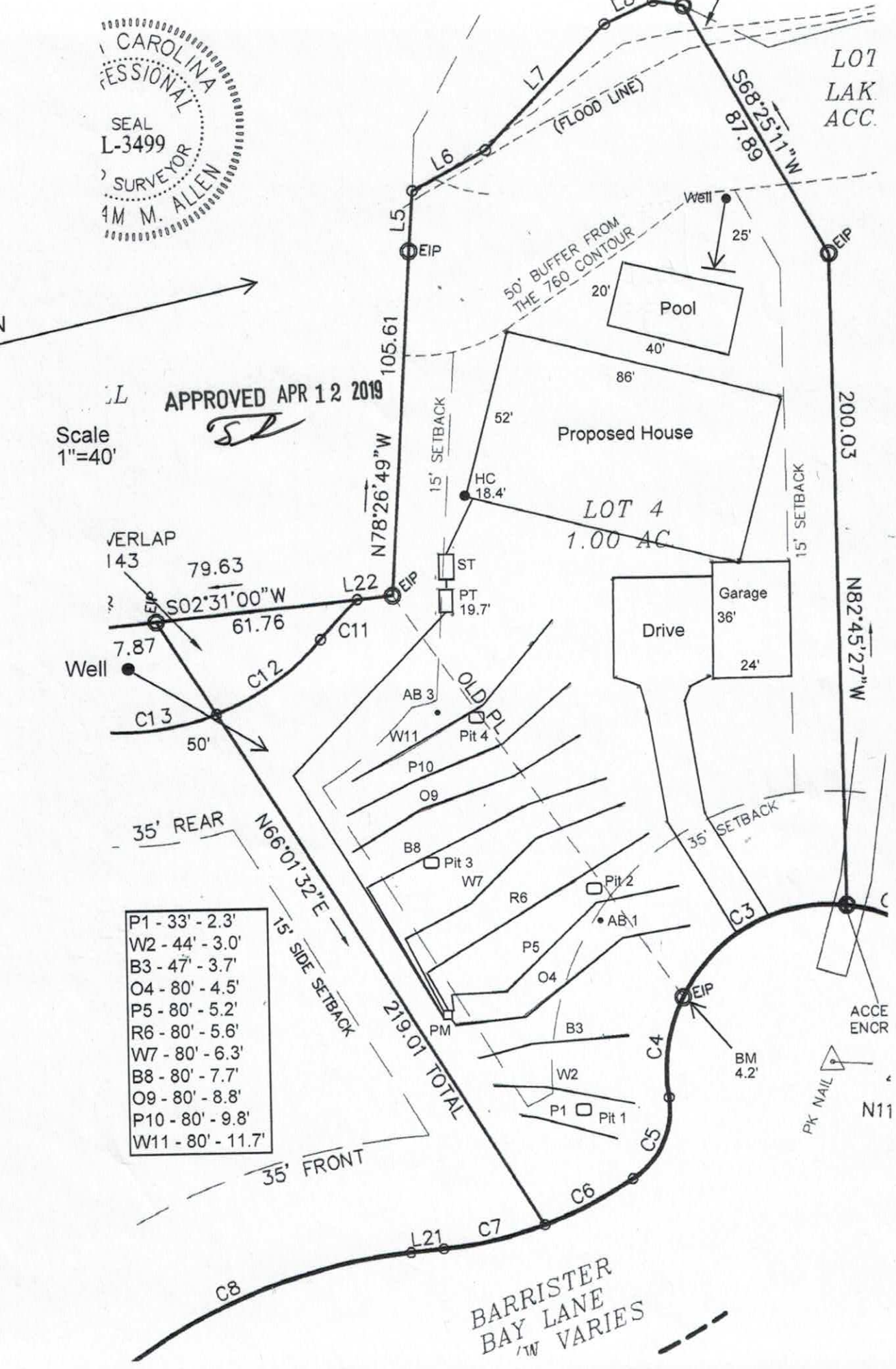
☐ IMPROVEMENT PERMIT with plat valid without expiration. ☒ IMPROVEMENT PERMIT with site plan valid for 60 mos. ☐ AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT - not to exceed 60 mo.

Owner / Applicant Signature: Date: 4/30/2019 Installed by: SPECIALTY SEPTIC

IMPROVEMENT PERMIT by: Date: 4/12/2019 OPERATION PERMIT by: Date: 11-26-19

AUTHORIZATION TO CONSTRUCT by: Date: 4/29/2019 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 inspector to confirm your inspection time.


CAROLINA
ESSIONAL
SEAL
L-3499
SURVEYOR
M. ALLEN
APPROVED APR 12 2019
Scale
1"=40'
LOT
LAK
ACC
L7
(FLOOD LINE)
S68°25'11"W
87.89
L6
L5
EIP
Well
25'
50' BUFFER FROM
THE 760 CONTOUR
20'
Pool
40'
86'
105.61
N78°26'49"W
15' SETBACK
52'
Proposed House
HC
18.4'
LOT 4
1.00 AC
15' SETBACK
200.03
ST
PT
19.7'
Garage
36'
24'
Drive
N82°45'27"W
VERLAP
143
79.63
S02°31'00"W
61.76
L22
EIP
C11
7.87
Well
C12
C13
50'
AB 3
OLD PL
W11
Pit 4
P10
O9
B8
Pit 3
W7
R6
Pit 2
AB 1
P5
O4
35' REAR
N66°01'32"E
15' SIDE SETBACK
219.01 TOTAL
35' FRONT
35' SETBACK
C3
EIP
ACCE
ENCR
PM
B3
C4
BM
4.2'
W2
P1
Pit 1
C5
PK NAIL
N11
C6
L21
C7
C8
BARRISTER
BAY LANE
VARIES
P1 - 33' - 2.3'
W2 - 44' - 3.0'
B3 - 47' - 3.7'
O4 - 80' - 4.5'
P5 - 80' - 5.2'
R6 - 80' - 5.6'
W7 - 80' - 6.3'
B8 - 80' - 7.7'
O9 - 80' - 8.8'
P10 - 80' - 9.8'
W11 - 80' - 11.7'



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

Reference: Data Sheet for 125 Barrister Bay Ln, Barrister Bay Lot 4
House Footprint: See attached plan
Building Setbacks: 35' front/rear, 15' side, 50' lake
Water Source: Private well
Number of Bedrooms/Daily Flow: 4/480 GPD
Proposed LTAR: 0.3 GPD/FT^2 (initial), 0.25 GPD/FT^2 (repair)
Proposed System Type: 25% Reduction
Proposed Repair System Type: Horizontal PPBPS
Distribution: Pressure manifold
Flow per Tap: 5.48 GPM
Tap Size and Material: ½" SCH 80
System Flow: 27.4 GPM
Dosing Volume: 175 gallons
Pump Run Time: 6.4 minutes
Elevation Head: 20.2'
Friction Head: 2.9'
Pressure Head: 2'
Total Dynamic Head: 25.1'
Supply Line Length: 155' of 2" PVC
Septic/Pump Tank Size: 1000/1000 gallons
Proposed Trench Bottom: 24-36" (initial), 21" (repair)



APPROVED APR 12 2019

Line	Design Length	Actual Length	Elevation
Pink 1		33'	2.3'
White 2		44'	3.0'
Blue 3		47'	3.7'
Orange 4	**80'**	**80'**	**4.5'**
Pink 5	**80'**	**80'**	**5.2'**
Red 6	**80'**	**80'**	**5.6'**
White 7	**80'**	**80'**	**6.3'**
Blue 8	**80'**	**80'**	**7.7'**
Orange 9		80'	8.8'
Pink 10		80'	9.8'
White 11		80'	11.7'

Initial System: 400' **Repair System:** 364'
Pump Tank: 19.7' **House Corner:** 18.4' **Benchmark:** 4.2'

Comments:
A portion of lot 3 will be added to lot 4 for the septic system to accommodate the changes to the house design.

IREDELL COUNTY HEALTH DEPARTMENT

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SITE DIRECTIONS: Williamson Rd South from BSR → Ron Alcove Rd → Ron Catalina → Ron Barrister Bay → left SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Barrister Bay SECTION: LOT # 4 LOT AREA: 1.31 acres DESIGN FLOW: 480 GPD L.T.A.R.: 0.30

Septic Tank 1000 (gal) STB Date
Pump Tank 1000 (gal) PT Date
Pump Make Model Serial #
Nitrification Fields 1 # Lines 5 Linear Ft 400
Trench Width 36" Trench Bottom Depth(Low side) 24"-34" Gravel Depth —

☒ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI
System Description: PM - 25% Reduction
Repair System Description: Horizontal PPBPS (50% Reduction)
Maintenance Agreement Required: ☐ YES ☒ NO
☐ GRAVITY ☒ PRESSURE

☒ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing
No. Bedrooms 4 No. Persons 8 No. Employees
☐ Crawl Space ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Recommend pumping tank every 3-5 years. Also recommend drilling well before building house to avoid access concerns. New lot with updated lot lines must be recorded at the Iredell County Office of the Registrar and must exactly match what has been submitted/proposed to the health department.

INITIAL SITE SKETCH

See attached design information from Michael Athanas + Associates

Dated: 3/20/19 Michael Athanas LSS #1252

Revised: 3/28/19 (site drawing - pool, well, etc)

visited 4/29/19: House Footes are within house Box sub mitted and property has been recorded.

AS BUILT SKETCH

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☐ **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: 4/30/2019 Installed by:

IMPROVEMENT PERMIT by: Tom Shuck Date: 4/12/2019 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Tom Shuck Date: 4/29/2019 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.

SOIL/SITE EVALUATION
(Continuation Sheet)

PROPERTY ID #: 4646324590____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Jessica Barish_____ APPLICATION DATE_____
ADDRESS: 120 Barrister Bay Ln, Mooresville, NC 28117_____ DATE EVALUATED: _2/2019_____
PROPOSED FACILITY: __4 BDRM____ PROPOSED DESIGN FLOW (.1949): __480 GPD__ PROPERTY SIZE: __1.0 AC_____
LOCATION OF SITE: Barrister Bay Lot 4_____ PROPERTY RECORDED: _____
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	
PIT 1	LS 4%	0-14	Br CL WSBK	FR SS SP SXP	N/A	53"	F-C SAP	N/A	PS 0.3
		14-41	R C SBK	FR SS SP SXP					
		41-53	R CL WSBK	FR SS SP SXP					
PIT 2	LS 4%	0-6	Br CL WSBK	FR SS SP SXP	N/A	55"	F-C SAP	N/A	PS 0.3
		6-29	R C WSBK	FR SS SP SXP					
		29-55	R CL WSBK	FR SS SP SXP					
PIT 3	LS 4%	0-20	Br CL WSBK	FR SS SP SXP	N/A	53"	F-C SAP	N/A	PS 0.3
		20-40	R C SBK	FR SS SP SXP					
		40-53	R CL WSBK	FR SS SP SXP					
PIT 4	LS %	0-7	Br CL WSBK	FR SS SP SXP	YB @ 29" CHR 2 @ 38"	38"	N/A	N/A	PS 0.25
		7-38	R C SBK	FR SS SP SXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	1200 FT^2	1092 FT^2
System Type(s)	25% Reduction	PPBPS
Site LTAR	0.3	0.25

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____PS_____
EVALUATED BY: _____MA&A_____
OTHER(S) PRESENT: _____
* APPROVED APR 12 2019

COMMENTS: _____

PROPERTY ID #: 4646324590_
COUNTY: Iredell_____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Jay Kevin White_____ APPLICATION DATE_____
ADDRESS: 120 Barrister Bay Ln, Mooresville, NC 28117_____ DATE EVALUATED: _____
PROPOSED FACILITY: __4 BDRM____ PROPOSED DESIGN FLOW (.1949): __480 GPD__ PROPERTY SIZE: __0.691 AC_____
LOCATION OF SITE: Barrister Bay Lot 4_____ PROPERTY RECORDED: _____
WATER SUPPLY: Ξ Private ☐ Public Ξ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: Ξ Auger Boring Ξ Pit ☐ Cut TYPE OF WASTEWATER: Ξ 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 4%	0-12	Br SCL WSBK	FR SS SP SXP	LITHO Chr2 @ 45"	50" (ICHD 45")	Few SAP	N/A	PS 0.3
		12-28	R C SBK	FR SS SP SXP					
		28-50	R CL WSBK	FR SS SP SXP					
PIT 2	LS 4%	0-14	Br SCL WSBK	FR SS SP SXP	N/A	60"	F-C SAP	N/A	PS 0.3
		14-33	R C WSBK	FR SS SP SXP					
		33-60	R CL WSBK	FR SS SP SXP					
PIT 3	LS 6%	0-14	Br SCL WSBK	FR SS SP SXP	N/A	65"	F-C SAP	N/A	PS 0.3
		14-35	R C SBK	FR SS SP SXP					
		35-65	R CL WSBK	FR SS SP SXP					
PIT 4	LS 6%	0-10	Br SCL WSBK	FR SS SP SXP	N/A	62"	F-C SAP	N/A	PS 0.3
		10-34	R C SBK	FR SS SP SXP					
		34-62	R CL WSBK	FR SS SP SXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	540 FT^2	825 FT^2
System Type(s)	PPBPS	PPBPS
Site LTAR	0.3	0.3

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____PS_____
EVALUATED BY: _____MA&A_____
OTHER(S) PRESENT: Tom Shuck (revised from observations in field)

COMMENTS:_____

SOIL/SITE EVALUATION

(Continuation Sheet)

PROPERTY ID #: 4646324590____
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	
AB 1	LS 6%	0-12	Br SCL WSBK	FR SS SP SXP	N/A	48"	F-C SAP	N/A	PS 0.3
		12-36	R C SBK	FR SS SP SXP					
		36-48	R CL WSBK	FR SS SP SXP					
AB 2	LS 4%	0-12	Br SCL WSBK	FR SS SP SXP	N/A	48"	F-C SAP	N/A	PS 0.3
		12-32	R C SBK	FR SS SP SXP					
		32-48	R CL WSBK	FR SS SP SXP					

COMMENTS:_____

PROPERTY ID #: 4646324590
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Jay Kevin White _____ APPLICATION DATE_____
ADDRESS: 120 Barrister Bay Ln, Mooresville, NC 28117 _____ DATE EVALUATED: _____
PROPOSED FACILITY: __4 BDRM____ PROPOSED DESIGN FLOW (.1949): __480 GPD__ PROPERTY SIZE: __0.691 AC_____
LOCATION OF SITE: Barrister Bay Lot 4 _____ PROPERTY RECORDED: _____
WATER SUPPLY: Ξ Private ☐ Public Ξ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: Ξ Auger Boring Ξ Pit ☐ Cut TYPE OF WASTEWATER: Ξ Sewage ☐ Industrial Process ☐ Mixed

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PIT 1	LS 4%	0-12	Br SCL WSBK	FR SS SP SXP	LITHO	50"	Few SAP	N/A	PS 0.3
	MA @ 41" Chroma 2 @ 45"	12-28	R C SBK	FR SS SP SXP					
		28-50	R CL WSBK	FR SS SP SXP					
PIT 2	LS 4%	0-14	Br SCL WSBK	FR SS SP SXP	N/A	60"	F-C SAP	N/A	PS 0.3
		14-33	R C WSBK	FR SS SP SXP					
		33-60	R CL WSBK	FR SS SP SXP					
PIT 3	LS 6%	0-14	Br SCL WSBK	FR SS SP SXP	N/A	65"	F-C SAP	N/A	PS 0.3
		14-35 38"	R C SBK	FR SS SP SXP					
		35-65	R CL WSBK	FR SS SP SXP					
PIT 4	LS 6%	0-10	Br SCL WSBK	FR SS SP SXP	N/A	62"	F-C SAP	N/A	PS 0.3
		10-34	R C SBK	FR SS SP SXP					
		34-62	R CL WSBK	FR SS SP SXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	540 FT^2	550 FT^2
System Type(s)	PPBPS	PPBPS
Site LTAR	0.3	0.3

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

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

COMMENTS: _____

SOIL/SITE EVALUATION

(Continuation Sheet)

PROPERTY ID #: 4646324590____
DATE OF EVALUATION: _____
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			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
AB 1	LS 6%	0-12	Br SCL WSBK	FR SS SP SXP	N/A	48"		N/A	PS 0.3
		12-36	R C SBK	FR SS SP SXP					
		36-48	R CL WSBK	FR SS SP SXP			F-C SAP		
AB 2	LS 4%	0-12	Br SCL WSBK	FR SS SP SXP	N/A	48"		N/A	PS 0.3
		12-32	R C SBK	FR SS SP SXP					
		32-48	R CL WSBK	FR SS SP SXP			F-C SAP		

240215 Pd $350 ER

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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: Jessica Barish **Address:** 120 Barrister Bay LN, Mooresville, NC **Zip:** 28117

Applicant Email: _____ **Phone:** Jonathan-704-650-2260 **Alt. Phone:** _____

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

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

Property Information:

Street Address: 125 Barrister Bay Ln Gate #7641

Subdivision Name: Barrister Bay **Section/Phase:** _____ **Lot Number:** 4

Driving Directions: _____

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

CHECK FOUNDATION TYPE

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: _____
( ) 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: _____ **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: _____ 3/20/2019
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

New Well + AC

240215 pd $550

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

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( ) Septic Improvement Permit (✓) Authorization to Construct ( ) Existing System Inspection ( ) Septic System Repair

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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: Foundation Homes Address: 438 Williamson Rd, Ste C Zip: 28117
Applicant Email: jsmith@foundationhomesnc.com Phone: 704-650-2260 Alt. Phone: _____
Owner Name: Jessica Barish Address: 4 Scott Ct. Kinelon NJ Zip: 07405
Owner Email: jessbarish@gmail.com Phone: 201-400-9889 Alt. Phone: _____

Property Information:

Street Address: 125 Barrister Bay Cn Mooresville, NC 28117
Subdivision Name: Barrister Bay Section/Phase: _____ Lot Number: 4
Driving Directions: Williamson Rd (Rt) on N. Cardigan Way (Rt) on Catalina Drive, (Rt) on Barrister Bay Cn, Lot on (Lt)

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

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____
Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 4
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( ) Other Addition/Structure: _____

CHECK FOUNDATION TYPE
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( ) Basement with Plumbing
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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: _____
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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: Jessica Barish 3-28-19
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

24025

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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: Foundation Homes Address: 438 Williamson Rd, Suite C, Mooresville, NC Zip: 28117

Applicant Email: _____ Phone: Jonathan-704-650-2260 Alt. Phone: _____

Owner Name: Kevin White Address: 120 Barrister Bay Ln, Mooresville, NC Zip: 28117

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

Property Information:

Street Address: 125 Barrister Bay Ln

Subdivision Name: Barrister Bay Section/Phase: _____ Lot Number: 4

Driving Directions: _____

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

CHECK FOUNDATION TYPE

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____

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

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: _____ 11/9/2018
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, Jessica Barish, am the legal owner(s) of the property located at 125 Bocastle Bay, Mooresville, NC 28117, identified as PIN (Parcel Identification Number) 4646324590, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Michael Athanas & Assoc. Jonathan Smith, Fanlestan Homes Residential, 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.

Jessica Barish
Signature of Owner(s)

3-11-19
Date

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

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, Jessica Barish, am the legal owner(s) of the property located at 125 Barnsley Bay, Mooresville, NC 28117, identified as PIN (Parcel Identification Number)_____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**)
Jonathan Smith, Fundation Homes Residential 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.

Jessica Barish
Signature of Owner(s)

3-28-19
Date

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

dotloop signature verification: dotloop.com/my/forms

Public Health
Protect. Promote. Protect.
Iredell County Health Department

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public Health
Protect. Promote. Protect.
Iredell County Health Department

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, Jay K. White, am the legal owner(s) of the property located at Lot 4, Barrister Bay Ln., Mooresville, identified as PIN (Parcel Identification Number) 4646-32-4590, located in Iredell County, North Carolina.

I do hereby authorize **(print legal representative/company name)** Michael Athanas & Associates Jonathan Smith, Foundation Homes, 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.

Jay Kevin White — dotloop verified 11/08/18 9:32AM EST 0BPQ-UC6K-NSWV-H9ZU

Signature of Owner(s) Date

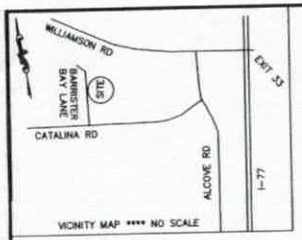
Amy Feira — dotloop verified 11/08/18 10:44AM EST CCG0-S2DU-JVXD-MJUR

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



SURVEYORS CERTIFICATION

I, WILLIAM M. ALLEN CERTIFY THAT THIS MAP WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION DEED DESCRIPTION RECORDED IN BOOK ____ PAGE ____; THAT THE RATIO OF PRECISION AS CALCULATED BY LATITUDES AND DEPARTURES IS 1:10000. (THAT THE BOUNDARIES NOT SURVEYED ARE SHOWN AS BROKEN LINES PLOTTED FROM INFORMATION FOUND IN BOOK ____ PAGE ____; THAT THIS MAP WAS PREPARED IN ACCORDANCE WITH G.S. 47-30, AS AMENDED.

WITNESS MY HAND AND SEAL THIS 23 DAY OF April A.D. 2019.

PROFESSIONAL LAND SURVEYOR

OFFICIAL SEAL

L-3499
REGISTRATION NUMBER

NORTH CAROLINA PROFESSIONAL LAND SURVEYOR SEAL L-3499 WILLIAM M. ALLEN

STATE OF NORTH CAROLINA
COUNTY OF IREDELL

I, William M. Allen, REVIEW OFFICER OF IREDELL COUNTY, CERTIFY THAT THE MAP OR PLAT TO WHICH THIS CERTIFICATION IS AFFIXED MEETS ALL STATUTORY REQUIREMENTS FOR RECORDING.

4-26-19
DATE

REVIEW OFFICER

THIS SURVEY IS OF ANOTHER CATEGORY, SUCH AS THE RECOMBINATION OF EXISTING PARCELS, A COURT-ORDERED SURVEY, OR OTHER EXCEPTION TO THE DEFINITION OF

PROFESSIONAL LAND SURVEYOR

Doc ID: 016539270001 Type: CRP
Recorded: 04/26/2019 at 02:03:03 PM
Fee Amt: $21.00 Page 1 of 1
Iredell County, NC
Ronald N. Wyatt Register of Deeds
BK 69 PG 148

LAKE NORMAN

760 CONTOUR PER ACTUAL FIELD SURVEY

LOT 5 LAKE ACCESS

LOT 5 aka ADAM BARISH 2599/2370

LOT 4A WANDA K. HOWELL 2493/315

LOT 4 1.00 AC.

LOT 2 1.11 AC.

LOT 1 ADAM BARISH 2599/2366

(0.31 AC.)

(0.39 AC.)

POOL AREA

PROPOSED HOUSE BOX

50' BUFFER FROM THE 760 CONTOUR

POSSIBLE OVERLAP PB. 53 PG. 143

OLD PL

ACCESS WALK ENCROACHES

BARRISTER BAY LANE R/W VARIES

35' REAR

35' FRONT

15' SIDE SETBACK

35' SETBACK

CURVE TABLE				
CURVE	RADIUS	LENGTH	BEARING	CHORD
C1	50.00'	46.31'	S 72°27'51" W	44.67'
C2	50.00'	27.36'	S 30°15'07" W	27.02'
C3	50.00'	60.80'	S 20°15'49" E	57.12'
C4	50.00'	31.28'	S 73°05'32" E	30.77'
C5	25.00'	28.48'	N 57°10'30" W	26.96'
C6	127.50'	30.42'	N 18°39'10" W	30.34'
C7	127.50'	31.90'	N 04°39'01" W	31.82'
C8	172.50'	112.00'	S 16°04'56" E	110.04'
C9	172.50'	65.20'	S 45°57'55" E	64.81'
C10	127.00'	65.99'	N 41°13'35" W	65.25'
C11	134.53'	16.57'	S 38°20'56" E	16.56'
C12	78.92'	39.73'	N 27°27'23" W	39.31'
C13	78.92'	37.52'	N 00°35'03" E	37.17'
C14	78.92'	22.37'	N 22°09'00" E	22.30'

LINE TABLE		
LINE	BEARING	LENGTH
L5	N 77°43'01" W	18.47'
L6	N 20°08'23" W	25.68'
L7	N 38°00'02" W	52.86'
L8	N 16°48'17" W	16.27'
L9	N 17°20'38" E	9.32'
L10	N 77°28'05" E	19.04'
L11	N 55°42'47" E	30.69'
L12	N 65°05'10" E	25.27'
L13	N 20°26'55" E	13.74'
L14	S 74°31'19" E	10.78'
L15	N 36°41'11" E	15.12'
L16	S 73°03'49" E	12.09'
L17	N 36°03'18" E	20.07'
L18	N 01°49'33" W	14.51'
L19	S 63°15'36" E	32.95'
L20	N 84°21'27" E	44.75'
L21	N 02°31'00" E	10.14'
L22	N 02°31'00" E	10.78'
L23	S 30°20'22" W	51.85'

NORTH CAROLINA
IREDELL COUNTY,

I, Wendy L. Jones
A NOTARY PUBLIC FOR SAID COUNTY AND STATE Morris NJ
DO HEREBY CERTIFY THAT
Diane S. Oliveira
Jessica Barish
Adam Barish
OWNER(S) PERSONALLY APPEARED BEFORE ME THIS DAY, AND ACKNOWLEDGED THE EXECUTION OF THE FOREGOING INSTRUMENT. WITNESS MY HAND AND OFFICIAL SEAL,
THIS 25th DAY OF April 2019.
Wendy L. Jones
NOTARY PUBLIC
MY COMMISSION EXPIRES: February 11, 2024

OWNER CERTIFICATE FOR EXCEPTION PLATS

KNOW ALL MEN BY THESE PRESENTS, THAT I (WE) HEREBY CERTIFY THAT I AM (WE ARE) THE OWNER(S) OF THE PROPERTY SHOWN AND DESCRIBED HEREON AND THAT I (WE) HEREBY ACKNOWLEDGE THIS PLAT AND ALLOTMENT TO BE MY FREE ACT AND DEED.

4/25/19 DATE — Diane S. Oliveira OWNER
4/25/19 DATE — Jessica Barish OWNER
4/25/19 DATE — OWNER Adam Barish
DATE — OWNER
4/25/19 DATE — MEMBER\MANAGER

I, HEREBY CERTIFY THAT THIS PLAT FOR RECORDATION IS AN EXCEPTION TO THE SUBDIVISION ORDINANCE OF IREDELL COUNTY, NORTH CAROLINA.

4-26-19
SUBDIVISION ADMINISTRATOR
IREDELL COUNTY, NORTH CAROLINA

IREDELL COUNTY, NORTH CAROLINA

THE LOTS SHOWN ON THIS PLAT TO THE BEST OF MY KNOWLEDGE LIES WITHIN THE WS-IV CRITICAL AREA OF THE LAKE NORMAN/CATAWBA RIVER WATERSHED AS DESIGNATED BY THE NORTH CAROLINA DIVISION OF ENVIRONMENTAL MANAGEMENT AND AS APPEARS ON THE WATERSHED PROTECTION MAP OF IREDELL COUNTY.

4-26-19
DATE

SUBDIVISION ADMINISTRATOR

NOTES:

1) This property may be subject to any easements and/or Rights-of-way of record.
2) Tax Parcel No.'s (4646325295) LOT 2– DB 2599 PG.2364 & DB 2613 PG 2130
(4646325377) LOT 3– DB.2599 PG.2368
(4646324590) LOT 4– DB.2599 PG.2362 & 2613 PG 2132
The deed swap recorded in DB. 2613 PG 2128 & DB.2613 PG.2132
3) This property is zoned RA
4) Minimum Building Setback Per County Zoning: 35' FRONT
15' SIDE
50' from 760 contour or 35' from rear property line which ever is greater.
5) The property is located in DAVIDSON TWSP., IREDELL CO., N.C.
6) This property is located in WS-IV Critical Area of the LAKE NORMAN/CATAWBA WATERSHED BASIN.
7) All lots are subject to a 10' Utility and Drainage Easement. 10 feet on each side of the property line.
8) No geodetic monument found within 2000' of said property.
9) AS OF THE DATE OF THIS RECORDING, THE LOTS REPRESENTED ON THIS PLAT HAVE NOT BEEN INSPECTED OR APPROVED BY THE IREDELL COUNTY HEALTH DEPT. UNTIL INSPECTED THERE IS NO ASSURANCE THAT A BUILDING PERMIT WILL BE ISSUED.
10) The subdivision will be served by individual well and septic.
11) The sole purpose of this plat is to revise LOTS 2,3,4 into 2 lots
12) A overlap was found on the rear boundary line as shown on this plat. The overlap was also noted on the previous plat recorded in PB.53 PG.143.

RECOMBINATION PLAT
OF
BARRISTER BAY
LOTS 2,3,4
(PLAT BK.53 PG.143)

DAVIDSON TWSP., IREDELL CO., N.C.

SCALE: 1" = 50'
DATE SURVEYED: MARCH 1, 2019
DATE PLATTED: MARCH 8, 2019
REVISED PLATTED: MARCH 18, 2019 (PER CO COMMENTS)
REVISED PLATTED: APRIL 23, 2019 (ADDED DEED REF. FOR SWAP)

OWNER LOT 2 : OLIVEIRA DIANE ETAL aka ADAM BARISH JESSICA BARISH
& 1\2 OF 3 2 KIEL AVE. UNIT 248
KINNELON NJ 07405

OWNER LOT 4: JESSICA BARISH
& 1\2 OF 3 2 KIEL AVE. UNIT 248
KINNELON NJ 07405

GRAPHIC SCALE

50 0 25 50 100 200

(IN FEET)
1 inch = 50 ft.

file: BARRISTER BAY RECOM 2-4 -- 13557.DWG

DAS
DON ALLEN & ASSOCIATES P.A
"Since 1971"
Commercial * Residential * Mortgage Surveys * Multi-Family
Construction Staking * Subdivision Design * Topographical
131 Crosslake Park Drive (suite 102) * Mooresville, N.C. 28117
(704) 664-7029 (704) 664-8041 Fax
DONALLENSURVEY@GMAIL.COM

G:\Users\Robert Smith\Dropbox (Personal)\4_CAD FILES\1_JOBS\FOUNDATION HOMES\BARISH RESIDENCE\BARISH RESIDENCE.dwg Plot Date: Wednesday, March 19, 2014 5:20:00 AM Plot Scale: 1'1/1'1" = NOT TO SCALE 30"x42" = 1/4"=1'-0" Plotted by: Robert Smith

Acknowledgement of Plans Submittal ONLY!

Date

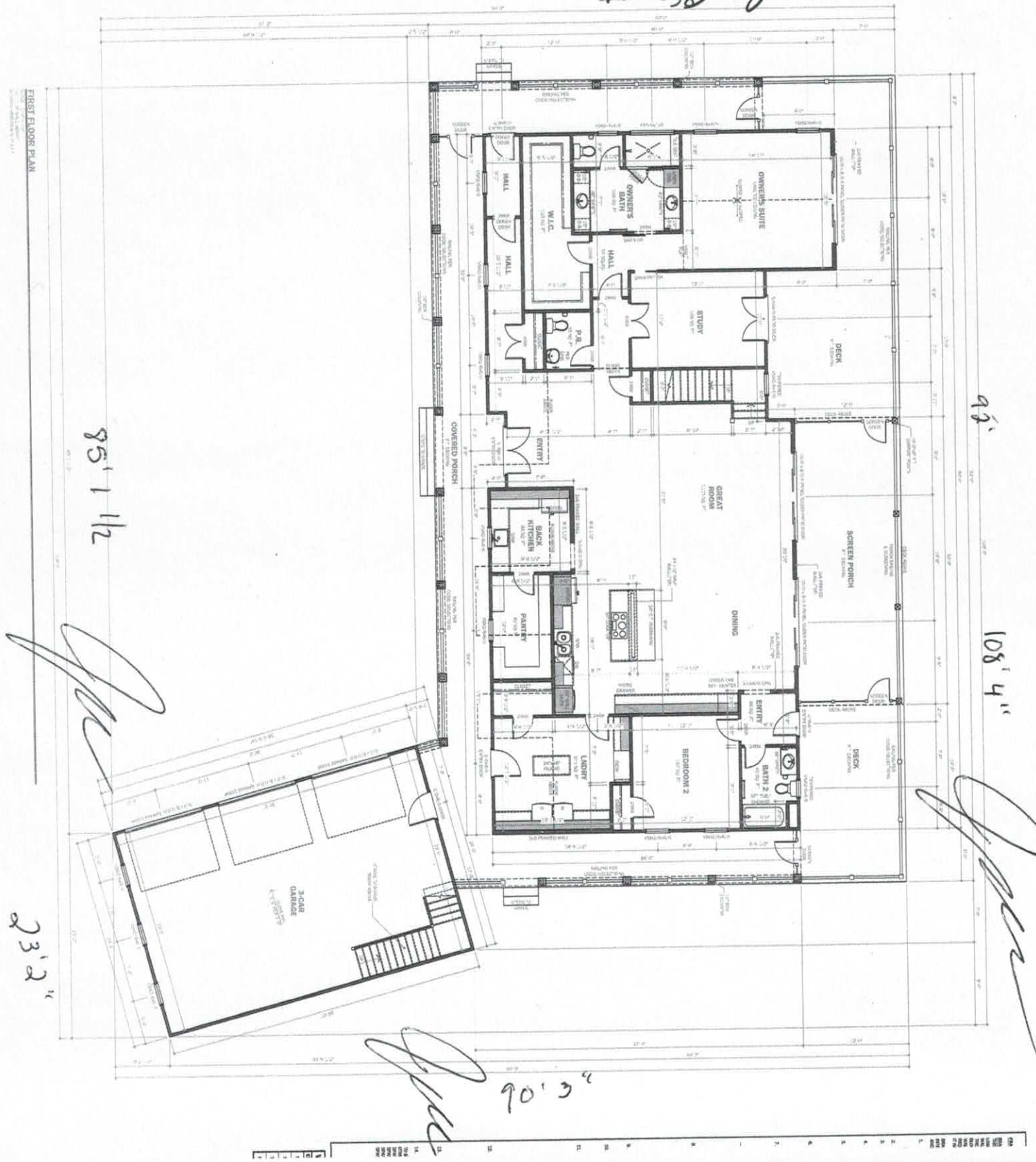
Date 04/30/14

SECOND FLOOR PLAN

Acknowledgement of
Plans Submittal ONLY!

Date 04/30/19

90'3"



711.58

92'

108'4"

23'2"

90'3"

IREDELL COUNTY

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

APPLICATION NUMBER
240215
Issue Date: 11/09/2018

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4646324590.000	125 BARRISTER BAY LANE, MOORESVILLE, NC 28117	

Owner Information	Applicant Information
Owner: WHITE JAY KEVIN	Applicant: MICHAEL ATHANAS & ASSO
Address: 167	Address: 561 ENNIS RD
IREDELL CO, NC 28625	WEDDINGTON, NC 28173
Phone:	Phone: 704-576-3887

Use Requested	Zone Code

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.690	35.00	50.00	15.00	15.00	CA	AE

Remarks:

Lake Lots: Must meet both the 50-foot setback from the 760 Æ contour line and the 35-foot setback from the rear property line for any structure.

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	158581	TOTAL FEES:	$ 77.25