ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP 319523

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

PIN # 4648-42-3860

APPLICANT/OWNER: JBR Custom Homes Inc | APPLICANT ADDRESS: 135 Hunts Landing Dr Mooresville, NC 28117

SITE ADDRESS: 117 Hunts Landing Dr Mooresville, NC | PHONE: 704-380-0838 | ALT. PHONE

SITE DIRECTIONS: Hwy 150 W TR Bluefield TL Big Indian Loop, stay left @ fork TL Hunts Landing NC | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Hunts Landing | SECTION: | LOT # 3 | LOT AREA: .69 Acre | DESIGN FLOW: 480 gpd | L.T.A.R.: 3

Septic Tank	1000 (gal)	STB	7100	Date	6/11/22	☒ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms 4
Pump Tank	1000 (gal)	PT	303	Date	6/9/22	System Description: LP Panel Block (Vert)		☐ Business	No. Persons 8
Pump Make		Model		Serial #		Repair System Description: PPBPS		☐ Other	No. Employees
# Nitrification Fields	1	# Lines	5	Linear Ft.	2608'	Maintenance Agreement Required: ☒ YES ☐ NO		☒ Slab	☐ Crawl Space
Trench Width		Trench Bottom Depth(Low side)	36"	Gravel Depth	N/A	☐ GRAVITY ☒ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions:

Note: Existing well could be used with a Variance

INITIAL SITE SKETCH

See attached, approved Septic plan by Michael Athanas & Assoc. (dated 7/2/21)

AS BUILT SKETCH

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 time.

Bottom 2 Lines, Tanks 7/25/22 DW
Middle Lines 7/27/22 last line, CVB, plumbing 7/27/22

* As Built Attached

→ Remove irrigation from drainfield & all areas w/in 10' of initial & repair - remove heads, out line

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: | Installed by: Richard Abernathy

IMPROVEMENT PERMIT by: Maria Dotson | Date: 7/16/21 | OPERATION PERMIT by: D. Mebane | Date: 8/31/22

AUTHORIZATION TO CONSTRUCT by: Maria Dotson | Date: 7/22/21 | Existing System Inspected by: | Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.

Item	Date	Initials
Drain Lines Checked	7/27/22	DW
Tanks Checked	7/25/22	DW
Pressure Manifold or Valve Box Checked	7/27/22	DW
Pressure Head Set	8/30/22	DW
Electrical Checked	8/30/22	DW
Floats Set	8/30/22	DW
Alarm Checked	8/30/22	DW
Maintenance Contract Needed? (Y) / N	8/24/22	DW
Comments:		

Repairs Only	
	State Code
Failing System Code	
Type of Distribution	G or P
Type of Failure/Malfunction	
Primary Cause of Failure/Malfunction	
Age of System? _____	
Initial or Repair? _____	

LENTZ WASTEWATER MANAGEMENT, Inc.

www.lentzwastewater.com

Subsurface (Type IV) Inspection and Maintenance Agreement

Contract Dates: 8/24/22 -- 8/24/23

Agreement between:
Kyle Rush
(the "Owner")
and Lentz Wastewater Management, Inc

Jarrid Lentz
463 Lentz Road
Statesville, NC 28625
(the "Operator")

117 Hunts Landing Dr
Mooresville, NC 28117
("system" location)

WITNESSETH

WHEREAS The Owner owns or controls the property upon which a ground absorption sewage treatment system ("system") is installed, being designated a Type IV system in the Rules for Sanitary Sewage Collection, Treatment and Disposal found at 15A N.C. Administrative Code 18A.1900 et seq. and

WHEREAS, Administrative Code 18A. 1961 requires a contract to be executed between the system owner and a management entity prior to issuance of an Operation Permit for said system; and,

WHEREAS, Administrative Code 18A. 1961 requires that a condition of the Operation Permit for said system be that a properly executed contract between the system owner and a management entity, shall be in effect for as long as the system is in use; and

WHEREAS, the Operator is a management entity, of the type authorized by 15A N.C. Administrative Code 18A. 1961 to manage a Type IV System.

NOW THEREFORE, in consideration of the premises and of the mutual covenants and promises contained in this Agreement, it is agreed by the Owner and the Operator as stipulated below:

1. The Operator Obligations:

a. The Operator shall inspect, document, and report on the system every 6 months:
~If an inspection indicates the need for system repairs, the Operator shall notify the local health department within 48 hours of inspection.
~The Operator shall notify the owner of needed repairs, which are outside of the scope of routine maintenance described in this contract. At the request of the Owner, the Operator will perform necessary repairs to the system and shall be entitled to payment at the Operator's normal charge for services and materials.
~ The operator shall respond to a request for a nonscheduled service or maintenance call within 48 hours after receipt of such request.

2. The Owner's Obligations:

a. The Owner shall pay to the Operator:
~ At start of contract (6 months prior to first inspection). Yearly fee includes [2] inspections per year. Contract will be sent to Environmental Health Department upon receipt of payment.
~ The Owner is responsible for any charges for necessary repairs/replacement parts. A quote for such repairs will be provided. The Operator will complete needed repairs after a signed quote for repairs has been received.
~The Owner is responsible for charges associated with pumping/removal of solids from tanks. The Operator will notify Owner when pumping is needed and the Owner shall schedule and pay for pumping with a Licensed Septic Pumper.
~The Owner is responsible for any additional maintenance (clearing around any septic components, such as: septic tank, pump tank, drain field lines, etc.) or labor repair and service calls requested by client.
~ Septic system components must be kept clear of vegetation, bushes, trees and shrubs
~All septic system components (risers on tanks, valve boxes, control panel, etc.) must be accessible in order to collect the necessary information and to properly maintain the system. When visits are made and components are not accessible, the report will indicate "not evaluated" or "not accessible"

3. Term: This Agreement shall remain in effect until terminated

a. Automatic Termination
~ This agreement shall automatically terminate if the Operation Permit for the system is revoked and all appeals of the revocation are exhausted or the time for taking an appeal has passed.

b. Termination by Mutual Consent
~ The Parties may mutually agree to terminate this Agreement by giving written notice of termination by mutual consent to the local health department thirty (30) days in advance of the date of termination.

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Contract Dates: 8/24/22 -- 8/24/23

LENTZ WASTEWATER MANAGEMENT, Inc
www.lentzwastewater.com

c. Termination by the Owner

~ The Owner may terminate this Agreement by giving notice to the Operator and to the local health department thirty (30) days in advance of the date of termination.

d. Termination by the Operator

~ The Operator may terminate this Agreement for cause by giving written notice of intent to terminate this Agreement to the Owner and to the local health department thirty (30) days in advance of the date of termination. Cause shall be defined as:

1. Failure to remit payment for any bill for services performed under and in accordance with this Agreement if said bill is not paid within seven (7) days of receipt by the Owner of the bill. If said bill is paid after notice of termination of this Agreement, but prior to the date of termination of this Agreement, this Agreement shall continue in effect; or

2. Failure of the Owner to provide to the Operator authorization to complete needed repairs or satisfactory evidence that needed repairs to the system were completed by another entity. If said authorization to complete needed repairs or evidence of completion of said repairs is provided after notice of termination is given but prior to the date of termination of this Agreement, this Agreement shall continue in effect; or

3. Failure of the Owner to allow the Operator such access to the system as is reasonably necessary order for the Operator to comply with the terms of this Agreement.

~The annual fee may be amended upon sixty (60) days advance notice to the Owner. Bi-annual maintenance visits are unscheduled. Owner does not need to be present. Operator will send a written report to the owner and local Environmental Health Department. Maintenance contract bi-annual inspections are NOT Point-of-Sale inspections and should not be used as a replacement.

~ The Operator may terminate this Agreement without cause, by notification to the Owner no less than ninety (90) days in advance of the termination date. The Operator may also assign its rights and duties under this Agreement as provided in paragraph 4, below.

4. Assignment:

a. Assignment by the Owner

~ The Owner shall notify the Operator of the name and address of any purchaser of the property on which the system is located. The Owner shall also notify any purchaser of the property on which the system is located of the existence of this Agreement and shall assign all rights and duties under this Agreement to said purchaser.

5. Use of Subcontractors:

The Operator may subcontract with such manufacturers, suppliers and contractors as it deems desirable to perform any of the Operator's duties under this Agreement. The Operator shall at all times remain responsible for the performance of and payment for all work performed by all subcontractors.

6. Representatives:

The Parties represent to each other that each has the power, authority and legal right to enter into and perform its obligations as set forth in this Agreement.

7. Notice:

Every notice required under this Agreement shall be in writing and shall be deemed sufficiently given if delivered in person or sent by certified or registered mail, return receipt requested, postage prepaid to the Party to be notified and addressed as follows:

Owner:

Kyle Rush
117 Hunts Landing Dr
Mooresville, NC 28117

Local Health Department

Iredell County Environmental Health Department
349 N Center Street
Statesville, NC 28677
610 E Center Avenue
Mooresville, NC 28115

Operator:

Jarrid Lentz
463 Lentz Road
Statesville, NC 28625

The date of any Notice shall be the date of personal delivery or the date shown on the return receipt as the date of delivery or attempted delivery, as the case may be. Changes in the respective addresses to which notice may be directed may be made from time to time by either Party by notice to the other Party.

8. Place of Agreement:

This Agreement and any questions concerning its validity, the system construction or performance shall be governed by the laws of the State of North Carolina.

9. Entire Agreement and Amendment:

This Agreement supersedes all prior negotiations, agreements and understandings between the Parties with respect to the subject matter hereof and constitutes the entire Agreement between the Parties with respect to the subject matter hereof. To be effective, any amendment or modification to this Agreement must be in writing and must be signed by both Parties.

10. Severability:

In the event that any provision of this Agreement shall, for any reason, be determined to be invalid, illegal or unenforceable in any respect, the Parties shall negotiate in good faith and agree to such amendments, modification or supplements to this Agreement.

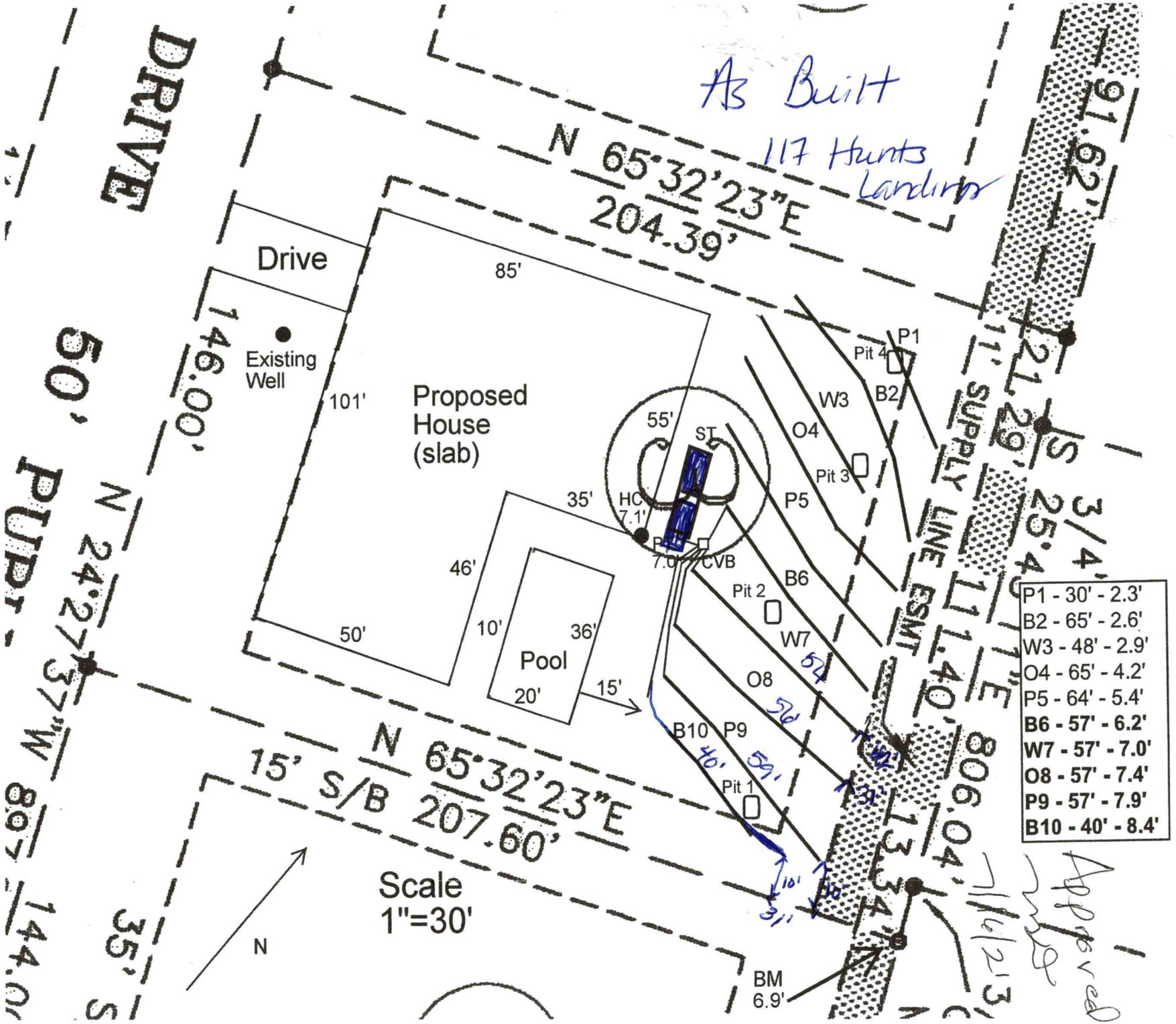


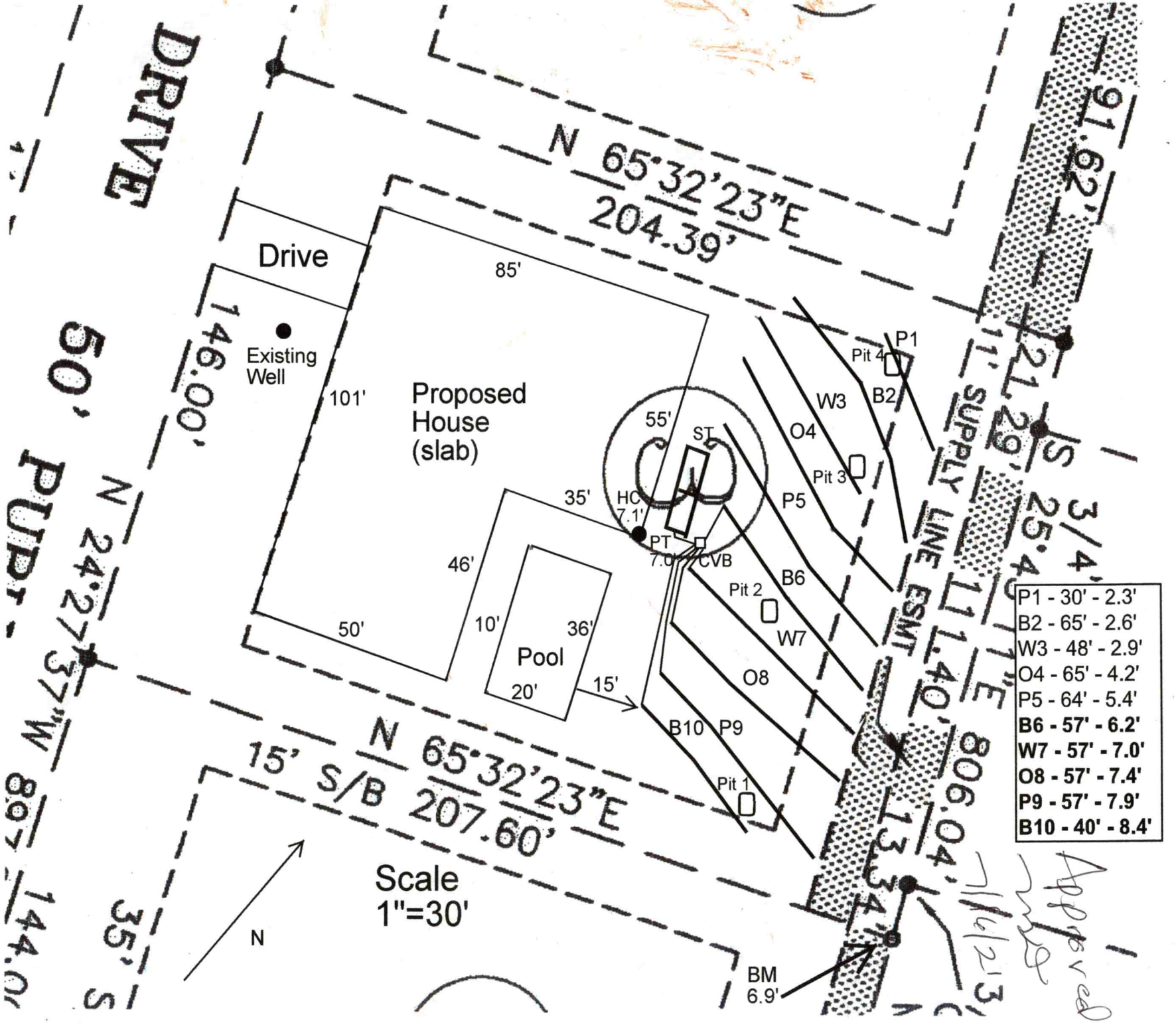
08 / 08 / 2022

Owner's Signature — Date

Operator's Signature — Date

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As Built
117 Hunts Landing
N 65°32'23"E
204.39'
Drive
85'
Existing Well
101'
Proposed House (slab)
55'
ST
35'
HC 7.1'
46'
50'
10'
36'
Pool
20'
15'
CVB
7.0'
Pit 4
Pit 3
Pit 2
Pit 1
P1
B2
W3
O4
P5
B6
W7
O8
B10
P9
SUPPLY LINE ESMT
S 25.4'
N 65°32'23"E
15' S/B 207.60'
Scale 1"=30'
N
BM 6.9'
P1 - 30' - 2.3'
B2 - 65' - 2.6'
W3 - 48' - 2.9'
O4 - 65' - 4.2'
P5 - 64' - 5.4'
B6 - 57' - 6.2'
W7 - 57' - 7.0'
O8 - 57' - 7.4'
P9 - 57' - 7.9'
B10 - 40' - 8.4'
Approved
7/16/13


DRIVE
N 65°32'23"E
204.39'
Drive
85'
Existing Well
146.00'
101'
Proposed House (slab)
55'
ST
35'
HC 7.1'
PT 7.0'
CVB
46'
50'
10'
36'
Pool
20'
15'
N 24°27'37"W
80.00'
PUBLIC
60'
N 65°32'23"E
15' S/B 207.60'
144.0'
35'
S
Scale 1"=30'
N
BM 6.9'
P1
Pit 4
B2
W3
O4
Pit 3
P5
B6
Pit 2
W7
O8
B10
P9
Pit 1
SUPPLY LINE ESMT
11'
S 21°26'11"E
806.04'
91.62'
3/4"
25.40'
1.1
1.40'
13'
3'
P1 - 30' - 2.3'
B2 - 65' - 2.6'
W3 - 48' - 2.9'
O4 - 65' - 4.2'
P5 - 64' - 5.4'
B6 - 57' - 6.2'
W7 - 57' - 7.0'
O8 - 57' - 7.4'
P9 - 57' - 7.9'
B10 - 40' - 8.4'
Approved
7/16/23

MA&A
SOIL & ENVIRONMENTAL CONSULTANTS

Approved
MD
7/16/21

MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
556 Walden Trail
Weddington, NC 28173
(704) 576-3887
7/2/2021

Reference: Data Sheet for 117 Hunts Landing Dr, Hunts Landing Lot 3
House Footprint: See attached plan
Building Setbacks: 35' front/rear, 15' side
Water Source: Private well
Number of Bedrooms/Daily Flow: 4/480 GPD
Proposed LTAR: 0.3 GPD/FT^2
Proposed System Type: PPBPS
Proposed Repair System Type: PPBPS
Distribution: Low Pressure-CVB
Flow per Orifice: 0.59 GPM
Orifice Size: 3/16"
System Flow: 36 GPM
Dosing Volume: 219.6 gallons
Pump Run Time: 6.1 minutes
Elevation Head: 5.8'
Friction Head: 0.3'
Pressure Head: 2'
Total Dynamic Head: 8.1'
Supply Line Length: 10' of 2" PVC
Septic/Pump Tank Size: 1000/1000 gallons
Proposed Trench Bottom: 36"



Line	Design Length	# of Panels	Actual Length	Elevation
Pink 1			30'	2.3'
Blue 2			65'	2.6'
White 3			48'	2.9'
Orange 4			65'	4.2'
Pink 5			64'	5.4'
Blue 6	**57'**	**13**	**60'**	**6.2'**
White 7	**57'**	**13**	**60'**	**7.0'**
Orange 8	**57'**	**13**	**59'**	**7.4'**
Pink 9	**57'**	**13**	**63'**	**7.9'**
Blue 10	**40'**	**9**	**43'**	**8.4'**

Initial System: 268'
Pump Tank: 7.0'
Benchmark: 6.9'

Repair System: 272'
House Corner: 7.1'

Approved
Maria Dolan
7/14/21

Comments:
There is an existing well that could be used with a variance.

RECEIVED JUL 9 - 2021

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM Comprehensive Relayout Pd. $350.00

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) Septic Improvement Permit (X) 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.

AP-319523

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) Please contact Gary McNeely (704-310-1832) prior to evalution

Applicant Name: JBR Custom Homes Inc Address: 135 Hunts Landing Dr, Mooresville, NC Zip: 28117

Applicant Email: _____ Phone: 704-380-0838 Alt. Phone: _____

Owner Name: JBR Custom Homes Inc Address: 135 Hunts Landing Dr Mooresville Zip: 28117

Owner Email: JBRCustomHomes@gmail.com Phone: 704-380-0838 Alt. Phone: 704-661-8884

Property Information:

Street Address: 117 Hunts Landing Dr, Mooresville, NC 28117

Subdivision Name: Hunts Landing Section/Phase: _____ Lot Number: 3

Driving Directions: Bluefield Rd to Big Indian Loop - Stay Straight 2nd Left is Hunts Landing Drive

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

(X) 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: _____
(X) Swimming Pool
( ) Other Addition/Structure: _____

CHECK FOUNDATION TYPE
( ) Crawl Space Foundation
(X) 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: _____

(X) New Well (X) 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 (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industrial) 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.

Signature: _____ 7/2/2021
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

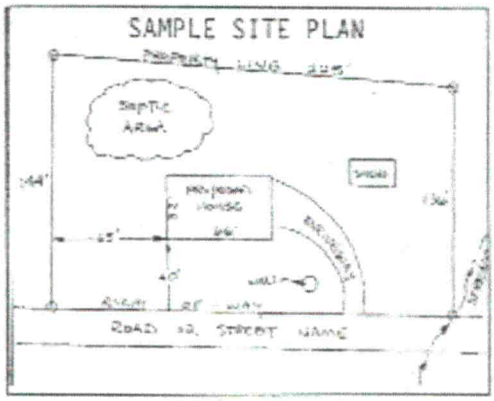
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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 OR WELL 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
( ) Preferred well location
( ) Preferred septic system location
( ) 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

See Attached Plan

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

7/2/2021
DATE

PROPERTY ID #: 4648423860
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: JBR Custom Homes APPLICATION DATE
ADDRESS: Mooresville, NC 28117 DATE EVALUATED:
PROPOSED FACILITY: 4 BDRM PROPOSED DESIGN FLOW (.1949): 480 GPD PROPERTY SIZE: 0.690 AC
LOCATION OF SITE: 117 Hunts Landing Dr, Hunts Landing Lot 3 PROPERTY RECORDED:
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	
1	LS 4%	0-44	R C SBK	FR SS SP SXP	N/A	60"	N/A	N/A	PS 0.3
		44-60	R CL WSBK	FR SS SP SXP					
2	LS 4%	0-5	Br CL WSBK	FR SS SP SXP	N/A	58"		N/A	PS 0.3
		5-28	R C SBK	FR SS SP SXP					
		28-58	R CL WSBK	FR SS SP SXP			F-C SAP		
3	LS 5%	0-18	Br CL WSBK	FR SS SP SXP	N/A	60"		N/A	PS 0.3
		18-46	R C SBK	FR SS SP SXP					
		46-60	R CL WSBK	FR SS SP SXP			F-C SAP		
4	LS 4%	0-12	Br CL WSBK	FR SS SP SXP	N/A	~~32~~" 53"		N/A	PS 0.3
		12-38	R C SBK	FR SS SP SXP					
		38-53	R CL WSBK	FR SS SP SXP			F-C SAP		

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	536 FT^2	544 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:

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, Jeffrey Hunt + Pies, JBR Custom Homes Inc, am the legal owner(s) of the property located at 117 Hunts Landing Dr Mooresville, NC 28117, identified as PIN (Parcel Identification Number) 4684842386000, 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.

Signature of Owner(s) 7/2/2021 Date

Signature of Witness 7/2/21 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 · NC

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

APPLICATION NUMBER
319523 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4648423860.000	117 HUNTS LANDING DR	Iredell County

Owner Information	Applicant Information
Name: JBR CUSTOM HOMES INC	Name: MICHAEL ATHANAS & ASSOCIATES
Address:	Address: 561 ENNIS RD
,	WEDDINGTON, NC 28173
Phone:	Phone: (704)576-3887

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.69	35	35	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: 07/09/2021

Signature of Owner/Contractor

Permit Number	319523	TOTAL FEES:	$77.25