ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # AP 323150

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

PIN # 4649 -- 04 -- 7428

APPLICANT/OWNER: Kim Powers | APPLICANT ADDRESS: 105 Orchard Farm Mooresville 28117

SITE ADDRESS: 105 Orchard Farm Lane Mooresville NC | PHONE: 610-276-0068 | ALT. PHONE: —

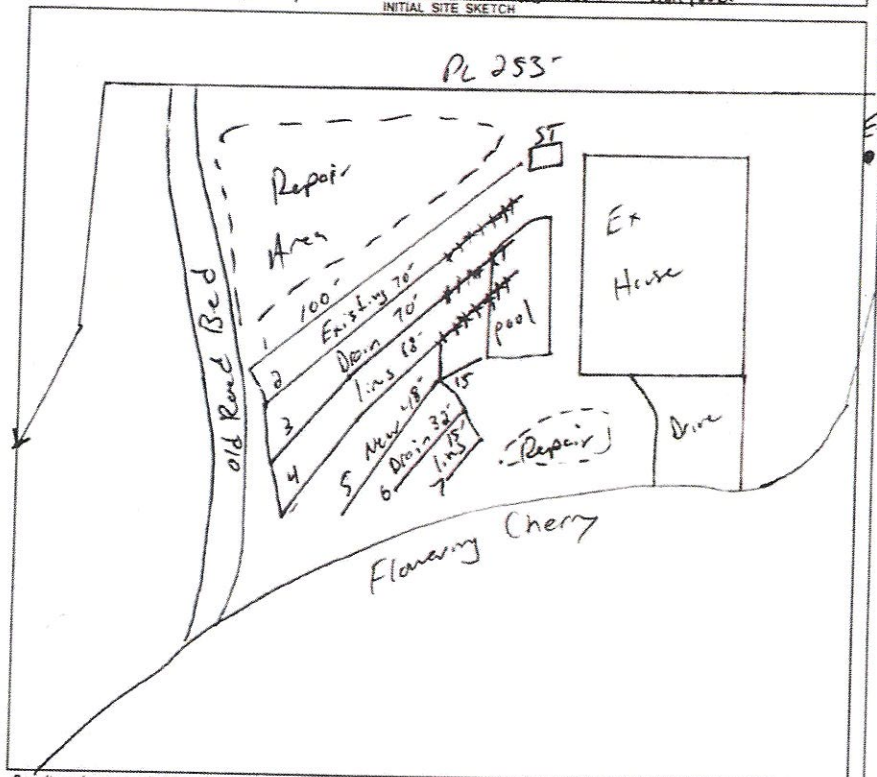
SITE DIRECTIONS: Hwy 150 R on Perth R on Flowering Cherry First Lot on L | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: The Orchard | SECTION: — LOT # 1 | LOT AREA: 0.82 | DESIGN FLOW: 480 gpd | L.T.A.R.: 0.3

Septic Tank	Ex (gal)	STB	Date	☐ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 4	Water Supply
Pump Tank	(gal)	PT	Date	System Description: Relocation 25% Cred.		☐ Business	No. Persons 8	☒ Private
Pump Make		Model	Serial #	Repair System Description: 50% Reduction		☐ Other	No. Employees	☐ Public
# Nitrification Fields	1	# Lines 3	Linear Ft 92	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☒ Crawl Space	☐ Community
Trench Width	36"	Trench Bottom Depth (Low side)	Max 36"	Gravel Depth —	☒ GRAVITY ☐ PRESSURE	☐ Basement w/ plumbing	☐ Basement w/o plumbing	

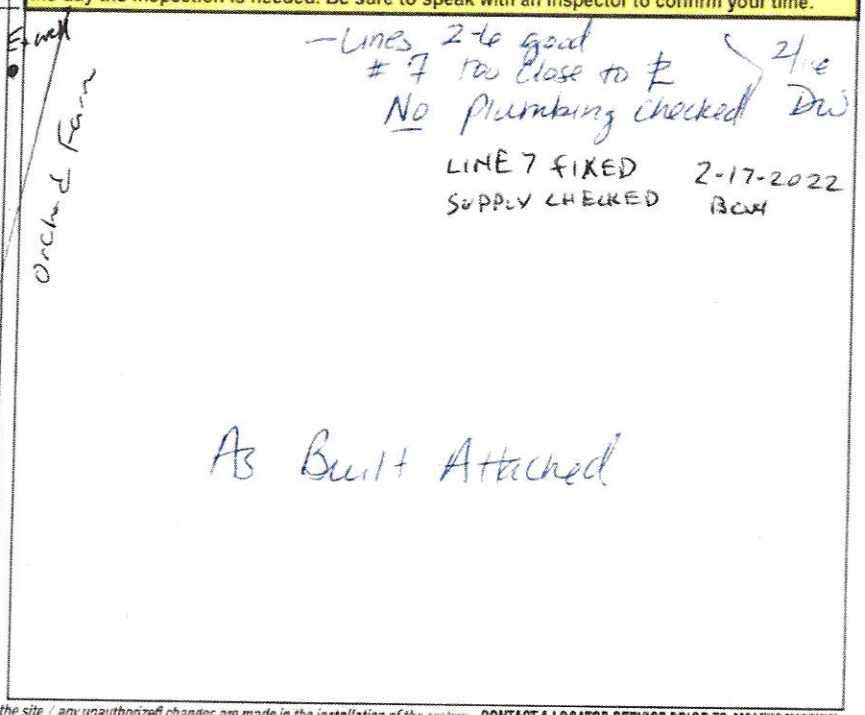
Comments / Conditions: Install Drainlines on Contour of Land. Remove 30' on line 2 & 3 Remove 22' on line 4. Add 92' of line between Existing System For Pool. Maintain 15ft from Pool.

INITIAL SITE SKETCH



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.



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: 11/27/2021 Installed by: Bentold Septic

IMPROVEMENT PERMIT by: [signature] Date: 1-26-2022 OPERATION PERMIT by: Bryant C White Date: 2-17-2022

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 1-26-2022 Existing System Inspected by: Date:

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

As Built

LINE SCHEDULE

LINE NUMBER	COLOR	FIELD ELEVATION	LENGTH (FT)	DESIGN LENGTH (FT)
1	WHITE	0.1	13	0
2	GREEN	.6	24	0
3	BLUE	1.5	38	0
4	ORANGE	2.7	63	0
5	PINK	3.9	75	0
6	WHITE	5.6	76	0
7	EXISTING Y	7.4	101	101
8	EXISTING P	8.4	100	70
9	EXISTING G	9.1	101	70
10	EXISTING O	10.1	100	68
11	BLUE	10.8	48	48
12	YELLOW	12.1	32	32
13	WHITE	13.1	15	15
14	PINK	14.3	31	0
			TOTAL	TOTAL
			817	404

105 ORCHARD FARM LN, MOORESVILLE NC.
SECTION -, LOT 1 THE ORCHARD

4-BEDROOM GRAVITY ACCEPTED SYSTEM
LINES 7-13 TOTALING 404 LINEAR FT (USE 400')
LTAR 0.3
25% REDUCTION 9' OC
24-36" TRENCH BOTTOM

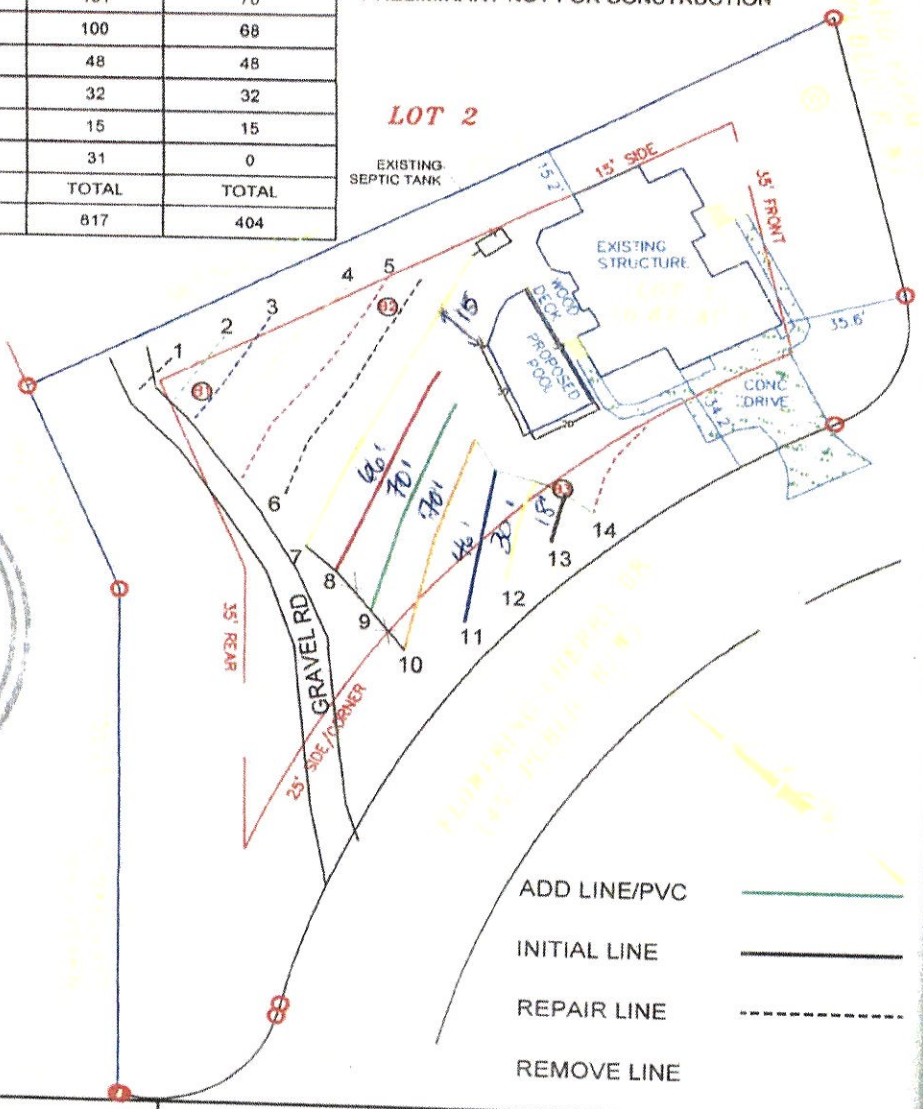
4-BEDROOM LP PANEL BLOCK SYSTEM
TOTAL 320 LINEAR FEET
LTAR 0.3
36" TRENCH BOTTOM

FOR GENERAL USE NOT A SURVEY
PRELIMINARY NOT FOR CONSTRUCTION

Notes: SOIL INFORMATION PROVIDED BY MIRANDA STAMPER & IREDELL CO

-REMOVE 30' FROM LINE #8 & 9
-REMOVE 32' FROM LINE #10-
-INSTALL NEW 92' BELOW LINES #10-13

LICENSED SOIL SCIENTIST
MIRANDA E STAMPER
1258
STATE OF NORTH CAROLINA



SCALE:
1" = 50 ft.

BOSS	Benfield Outdoor Services & Solutions, LLC 939 Brawley School Rd, Mooresville, NC 28117 Ph 704-360-0376 info@yardsbyboss.com	KIM POWERS	LOT 1 105 ORCHARD FARM, MOORESVILLE, NC IREDELL COUNTY DATE: 8/5/21 DRAWN BY: MDB CHECKED BY: MS

ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # AP 323150

PIN # 4649 -- 04 -- 7488

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

APPLICANT/OWNER: Kim Powers | APPLICANT ADDRESS: 105 Orchard Farm Mooresville 28117

SITE ADDRESS: 105 Orchard Farm Lane Mooresville NC | PHONE: 610-276-0068 | ALT. PHONE —

SITE DIRECTIONS: Hwy 150 R on Perth R on Flowery Cherry First Lot on L | SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: The Orchard | SECTION: — LOT # 1 | LOT AREA: 0.82 | DESIGN FLOW: 480 gpd | L.T.A.R.: 0.3

Septic Tank Ex (gal) STB Date

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines 3 Linear Ft 92

Trench Width 36" Trench Bottom Depth(Low side) Max 36" Gravel Depth

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

System Description: Relocation 25% Crawl

Repair System Description: 50% Reduction

Maintenance Agreement Required: ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

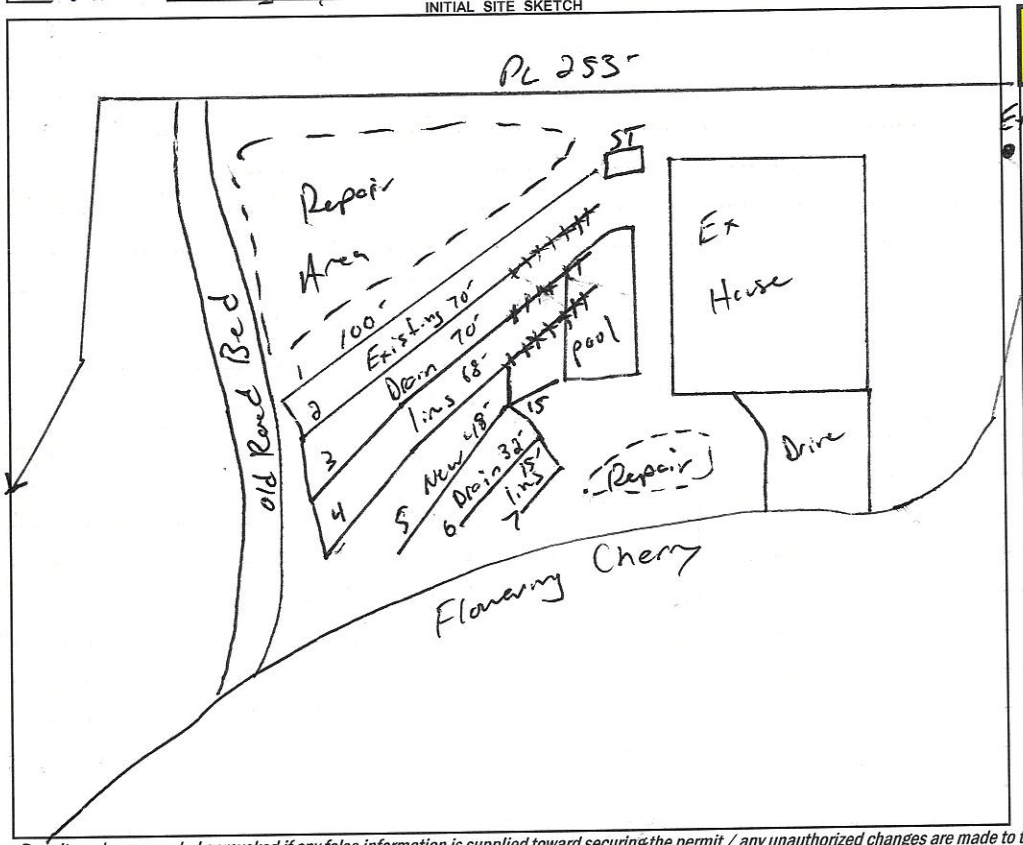
☒ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing

No. Bedrooms 4 | No. Persons 8 | No. Employees | ☒ Crawl Space | ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Install Drainlines on Contour of Land. Remove 30' on line 2+3 Remove 32' on line 4. Add 92' of line between Existing System For Pool. Maintain 15ft from pool.

INITIAL SITE SKETCH



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.

- Lines 2-6 good
- #7 too close to ℄
- No plumbing checked

2/12 DW

As Built Attached

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: 11/27/2020 Installed by: Bonfield Septic

IMPROVEMENT PERMIT by: [signature] Date: 1-26-2022 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 1-28-2022 Existing System Inspected by: Date:

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

As Built

LINE SCHEDULE

LINE NUMBER	COLOR	FIELD ELEVATION	LENGTH (FT)	DESIGN LENGTH (FT)
1	WHITE	0.1	13	0
2	GREEN	.6	24	0
3	BLUE	1.5	38	0
4	ORANGE	2.7	63	0
5	PINK	3.9	75	0
6	WHITE	5.6	76	0
7	EXISTING Y	7.4	101	101
8	EXISTING P	8.4	100	70
9	EXISTING G	9.1	101	70
10	EXISTING O	10.1	100	68
11	BLUE	10.8	48	48
12	YELLOW	12.1	32	32
13	WHITE	13.1	15	15
14	PINK	14.3	31	0
			TOTAL	TOTAL
			817	404

105 ORCHARD FARM LN, MOORESVILLE NC.
SECTION -, LOT 1 THE ORCHARD

4-BEDROOM GRAVITY ACCEPTED SYSTEM
LINES 7-13 TOTALING 404 LINEAR FT (USE 400')
LTAR 0.3
25% REDUCTION 9' OC
24-36" TRENCH BOTTOM

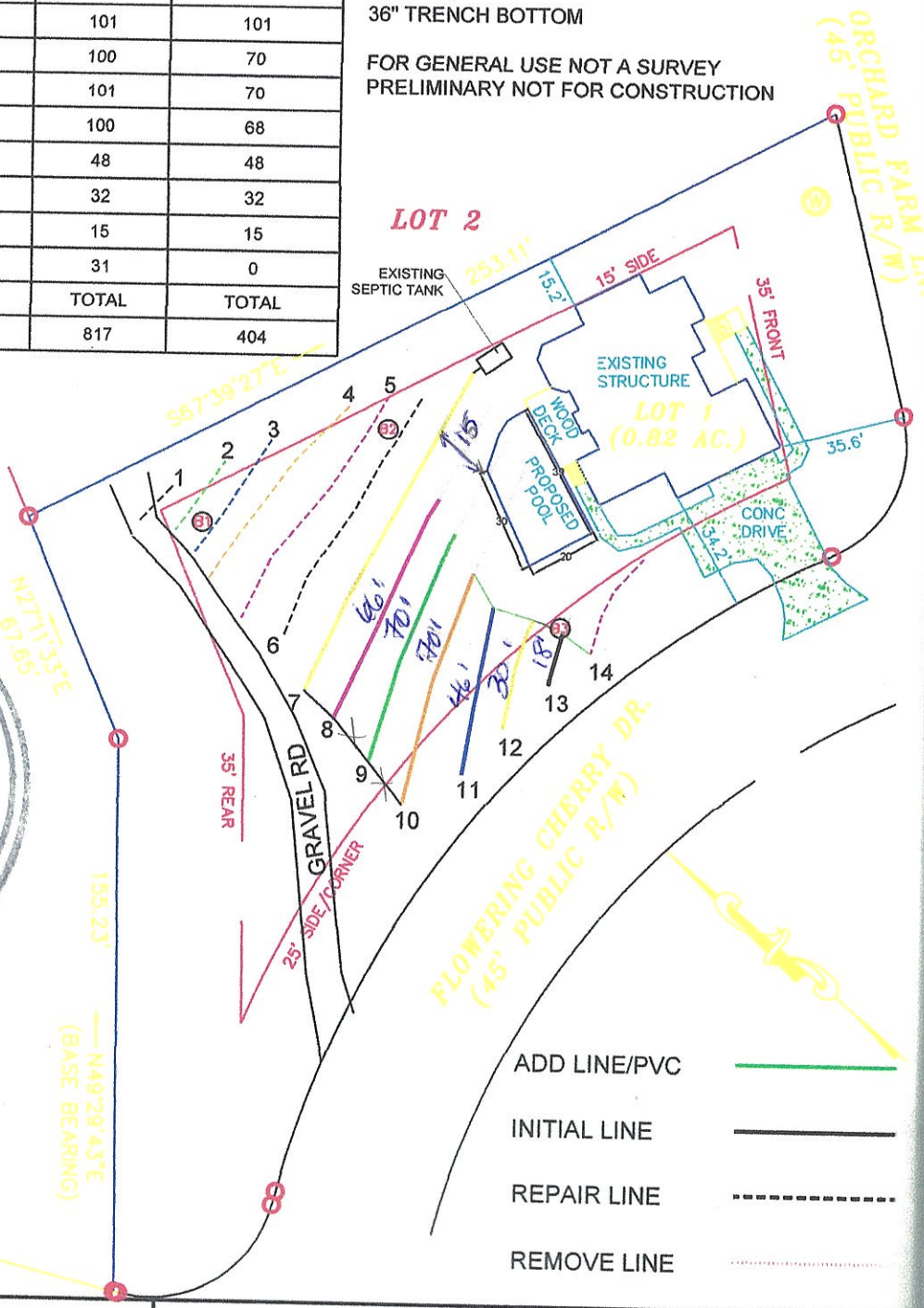
4-BEDROOM LP PANEL BLOCK SYSTEM
TOTAL 320 LINEAR FEET
LTAR 0.3
36" TRENCH BOTTOM

FOR GENERAL USE NOT A SURVEY
PRELIMINARY NOT FOR CONSTRUCTION

Notes: SOIL INFORMATION PROVIDED BY
MIRANDA STAMPER & IREDELL CO

-REMOVE 30' FROM LINE #8 & 9
-REMOVE 32' FROM LINE #10-
-INSTALL NEW 92' BELOW LINES #10-13





0 25 50

SCALE:
1" = 50 ft.

ADD LINE/PVC
INITIAL LINE
REPAIR LINE
REMOVE LINE

BOSS

Benfield Outdoor Services & Solutions, LLC
939 Brawley School Rd, Mooresville, NC 28117 Ph:704-360-0376
Info@yardsbyboss.com

KIM POWERS

LOT 1
105 ORCHARD FARM,
MOORESVILLE, NC
IREDELL COUNTY

DATE:8/521 DRAWN BY:MDB CHECKED BY:MS

RECEIVED NOV 17 2021

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED

Iredell County Health Department – Environmental Health Division

Relocating

PAGE 1: ***APPLICATION FORM*** AP-323150 $500.00

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) 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: Benfield Outdoor Servics **Address:** 939 Brawley school Rd **Zip:** 28117

Applicant Email: infos@yahoo.com **Phone:** 704 360 0376 **Alt. Phone:**

Owner Name: Kim Powers **Address:** 105 orchard Farm Ln **Zip:** 28117

Owner Email: **Phone:** 610.276.0068 **Alt. Phone:**

Property Information:

Street Address: 105 Orchard Farm Ln, Mooresville NC

Subdivision Name: The Orchard **Section/Phase:** **Lot Number:** 1

Driving Directions: Hwy 150 W, R on Perth Rd, R onto Flowering cherry Dr, 1st Lot on left

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: 8
(X) Swimming Pool
( ) Other Addition/Structure:

CHECK FOUNDATION TYPE
(X) 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 (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 (X) 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: _____ 11-16-21
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, Sean & Kim Powers, am the legal owner(s) of the property located at 105 Orchard Farm LN, Mooresville, NC 28117, identified as

PIN (Parcel Identification Number) 4649047428.000, located in Iredell County, North Carolina.

I do hereby authorize **(print legal representative/company name)** Benfield Outdoor Services & Solutions, 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.

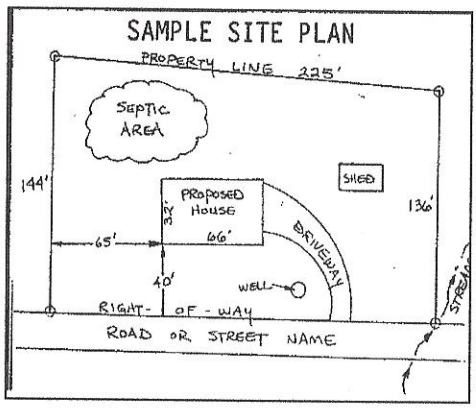
Signature of Owner(s) _____ Date 9/7/21

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 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:

- (X) **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

See Attached

Signature: _____ 11-16-21

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

LINE SCHEDULE

LINE NUMBER	COLOR	FIELD ELEVATION	LENGTH (FT)	DESIGN LENGTH (FT)
1	WHITE	0.1	13	0
2	GREEN	.6	24	0
3	BLUE	1.5	38	0
4	ORANGE	2.7	63	0
5	PINK	3.9	75	0
6	WHITE	5.6	76	0
7	EXISTING Y	7.4	101	101
8	EXISTING P	8.4	100	70
9	EXISTING G	9.1	101	70
10	EXISTING O	10.1	100	68
11	BLUE	10.8	48	48
12	YELLOW	12.1	32	32
13	WHITE	13.1	15	15
14	PINK	14.3	31	0
			TOTAL	TOTAL
			817	404

105 ORCHARD FARM LN, MOORESVILLE NC.
SECTION -, LOT 1 THE ORCHARD

4-BEDROOM GRAVITY ACCEPTED SYSTEM
LINES 7-13 TOTALING 404 LINEAR FT (USE 400')
LTAR 0.3
25% REDUCTION 9' OC
24-36" TRENCH BOTTOM

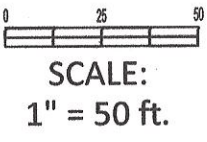
4-BEDROOM LP PANEL BLOCK SYSTEM
TOTAL 320 LINEAR FEET
LTAR 0.3
36" TRENCH BOTTOM

FOR GENERAL USE NOT A SURVEY
PRELIMINARY NOT FOR CONSTRUCTION

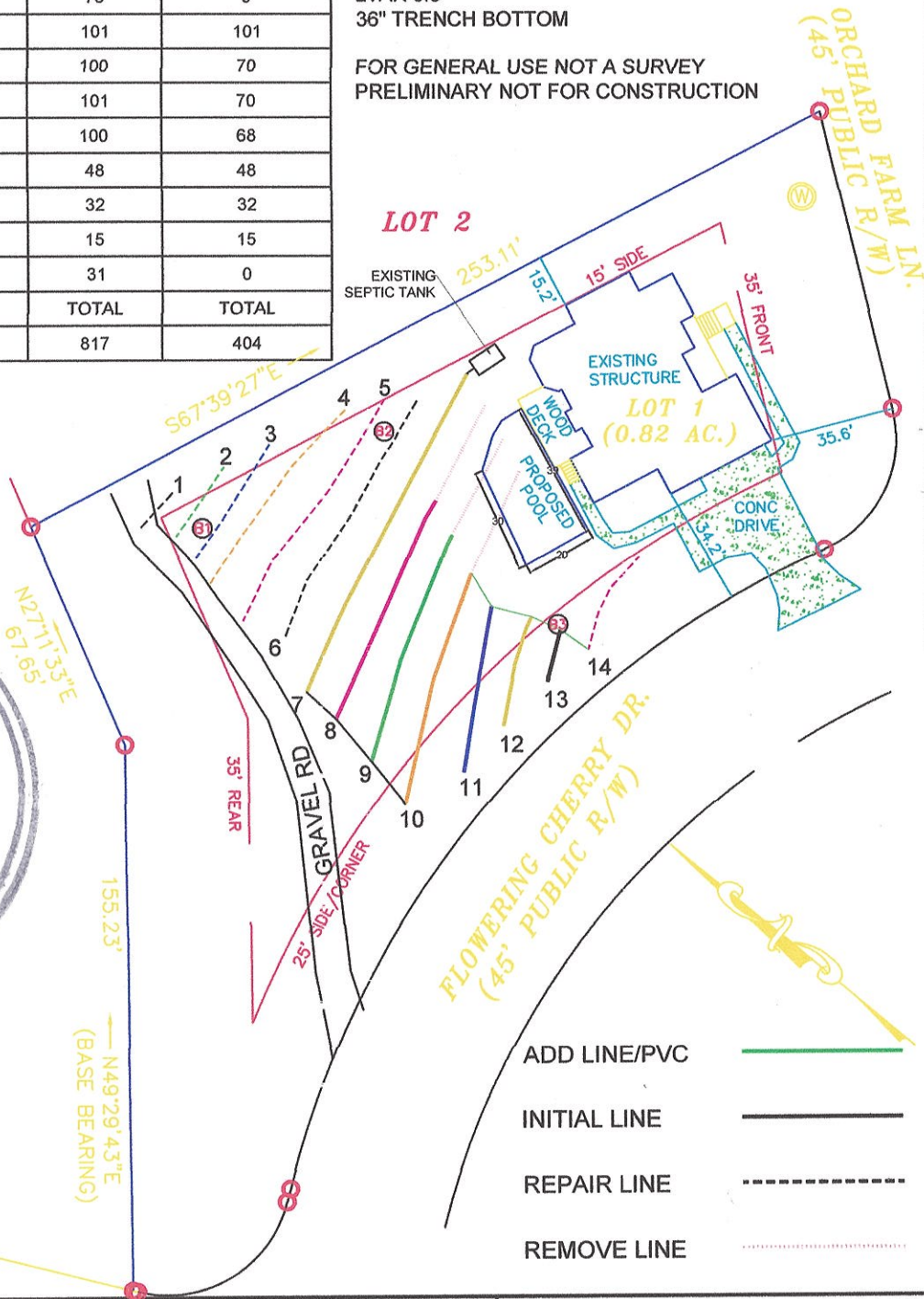
Notes: SOIL INFORMATION PROVIDED BY MIRANDA STAMPER & IREDELL CO

-REMOVE 30' FROM LINE #8 & 9
-REMOVE 32' FROM LINE #10-
-INSTALL NEW 92' BELOW LINES #10-13

LICENSED SOIL SCIENTIST
MIRANDA E. STAMPER
GREAT SEAL OF THE STATE OF NORTH CAROLINA
1258
STATE OF NORTH CAROLINA



SCALE:
1" = 50 ft.



BOSS

Benfield Outdoor Services & Solutions, LLC
939 Brawley School Rd, Mooresville, NC 28117 Ph:704-360-0376
Info@yardsbyboss.com

KIM POWERS

LOT 1
105 ORCHARD FARM,
MOORESVILLE, NC
IREDELL COUNTY

DATE:8/521 DRAWN BY:MDB CHECKED BY:MS

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

Sheet ____ *of* ____
PROPERTY ID #: _____
COUNTY: _____

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

OWNER: _Orchard Farm_ Kim Powers
ADDRESS: 1200 Orchard Farm Lane
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____
LOCATION OF SITE: _____
APPLICATION DATE_____
DATE EVALUATED: _10-28-21_____
PROPERTY SIZE: _____
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) .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
B1		0-3	Gr SL	NS NP FR		48"	PS		0.3
		3-11	SBK CL	SS SP FR					
		11-48	WEAK SBK CL	NS NP FR					
B2		0-2	GR SL	NS NP FR		48"	PS		0.3
		2-34	SBK C	SS SP FI					
		34-48	WEAK SBK CL	NS NP FR					
B3		0-1	GR SL	NS NP FR		48"	PS		0.3
		1-18	SBK C/CL	SS SP FI					
		18-48	WEAK SBK	NS NP FR					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: Miranda Stamper
OTHER(S) PRESENT: Michael Benfield

COMMENTS: _____

LICENSED SOIL SCIENTIST MIRANDA F. STAMPER 1256 STATE OF NORTH CAROLINA

Updated February 2014

IREDELL COUNTY · NC

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

APPLICATION NUMBER
323150 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4649047428.000	105 ORCHARD FARM LN	IREDELL COUNTY

Owner Information	Applicant Information
Name: POWERS SEAN B+KIMBERLY A	Name: BENEFIELD OUTDOOR SERVICES & SOLUTIONS
Address:	Address: 737 BRAWLEY SCHOOL RD MOORESVILLE, NC
Phone:	Phone: (704)360-0376

Use Requested	Zone Code
SWIMMING POOL	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.82 '	0	10	25	10	WSIV-PA Catawba/Lake Norman	NO

Remarks

SWIMMING POOL

Swimming Pool: Must meet requirement R22 of the LDC. Pools shall be located to comply with minimum setbacks for accessory structures- located behind front building line of house, 10' from side & rear property line. Lake lots must meet the 50' setback from the 760 contour line AND the 35' setback from the rear property line. Pools that are not an integral part of the principal building shall be located at least the minimum distance from the principal building necessary to comply with N.C. Building Code. Setback from house could be +/-10'. Fenced with a minimum 4' in height, and equipped with self-closing and positive self-latching gate provided with hardware for permanent locking. Fence not required for above ground pools if they are at least 4' in height, the ladder removed, or when NOT in use have a gate to the ladder as described above.

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: 11/16/2021

Signature of Owner/Contractor

Permit Number	323150	TOTAL FEES:	$77.25