IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 223313

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

PIN # 4658-46-1326

APPLICANT: Freedom Homes APPLICANT ADDRESS: 1124 Charlotte Highway Troutman, NC

SITE ADDRESS: 227 Bailey Rd. Mooresville, NC 28115 PHONE: 704-528-7980 ALT. PHONE:

SITE DIRECTIONS: N on Rt 21 from Mooresville → L on Bailey Rd → Lot on Left

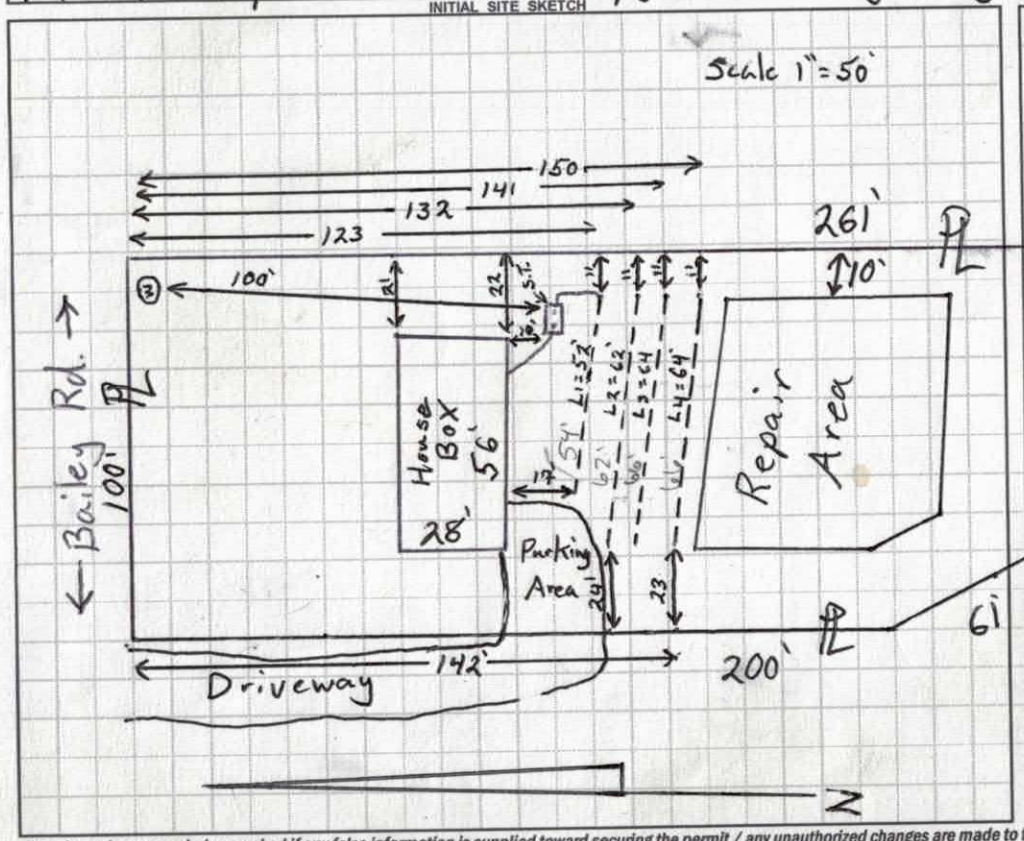
SUBDIVISION: Green Meadows SECTION: - LOT # 1 LOT AREA: 0.643 acres DESIGN FLOW: 360 GPD L.T.A.R.: 0.375

Septic Tank	1000 (gal)	STB		Date		☒ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 3
Pump Tank	— (gal)	PT	—	Date	—	System Description: 25% Reduction		☐ Business	No. Persons 6
Pump Make	—	Model	—	Serial #	—	Repair System Description: 25% Reduction		☐ Other	No. Employees
# Nitrification Fields	1	# Lines	4	Linear Ft:	240	Maintenance Agreement Required: ☐ YES ☒ NO		☐ Slab	☒ Crawl Space
Trench Width	36"	Max. Trench Bottom Depth	36"	Gravel Depth	—	☒ GRAVITY ☐ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing

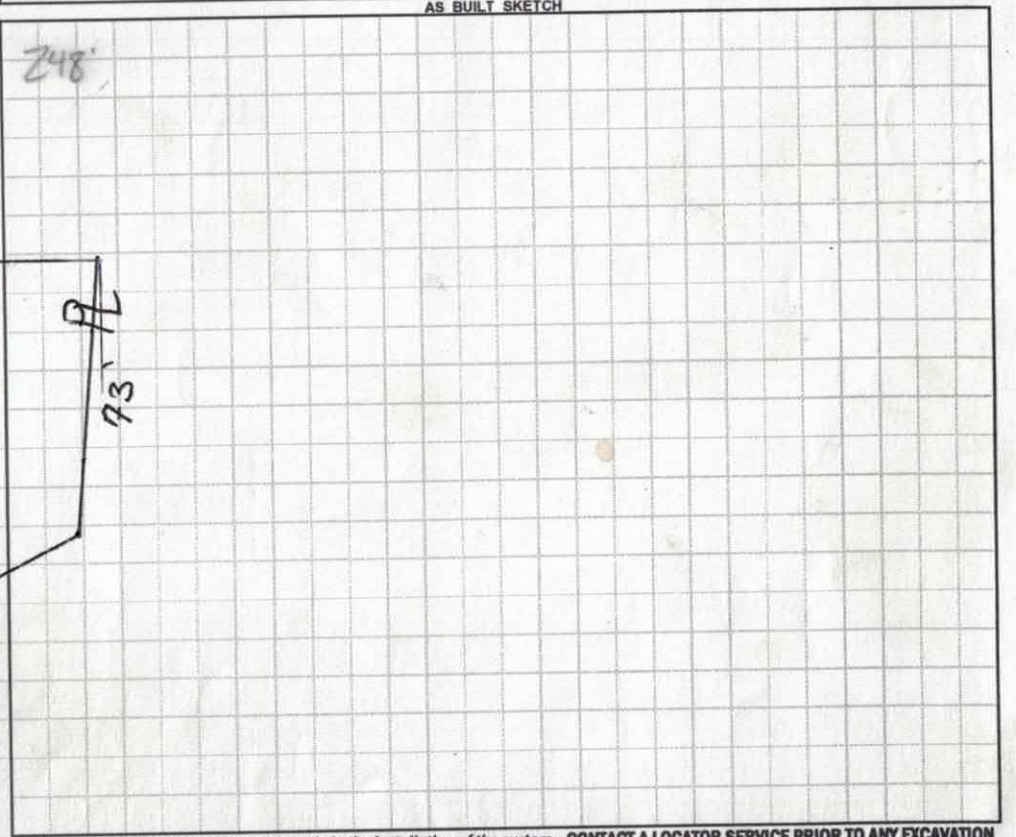
Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Follow all N.C. septic rules. Recommend pumping septic tank every 3-5 years. Before Qualifying for AC a copy of the deeded / recorded plat must be provided to the health department (with deed book + page number) exactly matching the information for the lot.

INITIAL SITE SKETCH



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: Stephen Allen Date: 12-16-16 Installed by: Craig Thomson

IMPROVEMENT PERMIT by: Tom Chuck Date: 12/14/16 OPERATION PERMIT by: [signature] Date: 2-9-17

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 12/16/16 Existing System Inspected by: Date:

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

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

52
52 10'
54 10'
53 9'
21

Sheet ___ of ___
PROPERTY ID #: ___
COUNTY: Iredell

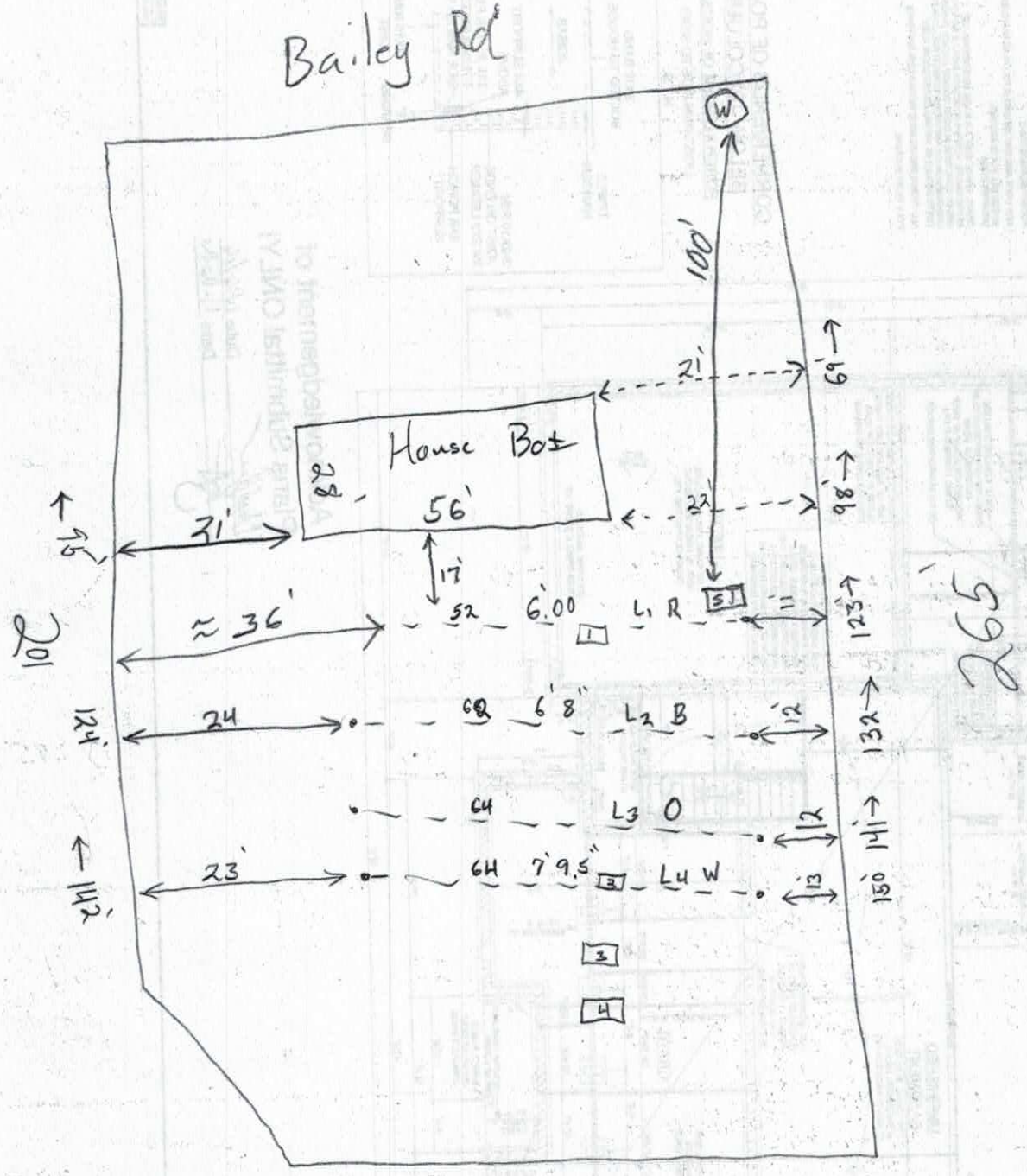
SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM
(Complete all fields in full)

OWNER: Wendell Holman
ADDRESS: 229 Bailey Rd. Mooresville
PROPOSED FACILITY: 3 BR House
LOCATION OF SITE: 227 Bailey Rd
APPLICATION DATE 11/21/16
DATE EVALUATED: 12/13/16
PROPERTY SIZE: 0.632
PROPERTY RECORDED: No
PROPOSED DESIGN FLOW (.1949): 360 GPD
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	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LSS 6%	0-9	SCL w.SBK some mica	sl. Firm, SS, Sp, Sexp	—	25	—	—	0.4 PS
		9-16	R. clay w.SBK trace SAP mica	sl. Firm, SS, Sp, Sexp					
		16-25	Clay Loam w.SBK + some Saprolite	Friable, SS, Sp, Sexp					
		25-72"	MA Sandy Saprolite	very Friable + well drained					
2	LSS 6%	0-12	SCL w.SBK some mica	sl. Firm, SS, Sp, Sexp	—	33	—	—	0.375 PS
		12-33	Clay w. SBK	sl. Firm, SS, Sp, Sexp					
		33-68"	MA Sandy Saprolite	very Friable + well. drained					
3	LSS 6%	0-12	SCL V. Weak SBK	sl. Firm, SS, Sp, Sexp	—	25	—	—	0.4 PS
		12-21	Clay m. SBK some mica	sl. Firm, SS, Sp, Sexp					
		21-25	Clay Loam w.SBK + some Saprolite	sl. Friable, SS, Sp, Sexp					
		25-72	MA. Sandy Saprolite	Very Friable + well Drained					
4	LSS 6%	0-8	SCL V. weak SBK	sl. Firm, SS, Sp, Sexp	—	35	—	—	0.275 PS
		8-27	Clay moderate strong SBK	sl. Firm, SS, Sp, Sexp					
		27-35	Clay Loam + Saprolite (w.SBK)	Friable, SS, Sp, Sexp					
		35-77	MA Sandy. Saprolite	Very Friable, moderate dense than other Hole					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	240	400+
System Type(s)	25% reduction	Same
Site LTAR	0.375	0.275

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Tom Shuck
OTHER(S) PRESENT: Grace Herbert + Ben Botkins



Bailey Rd

242

1.79 fall

6.6% Slope 27

DHHS

ON-SITE WASTEWATER SECTION

Sheet ____ of ____

PROPERTY ID #: ____

COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Vendal Holman [Freedom Homes: Applicant] APPLICATION DATE 11/21/16

ADDRESS: DATE EVALUATED: 12-2-16

PROPOSED FACILITY: 3 BR House PROPOSED DESIGN FLOW (.1949): 360 GPD PROPERTY SIZE: ____

LOCATION OF SITE: 227 Bailey Road PROPERTY RECORDED: Yes

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	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LSS 11%	0-10	SCL + trace Mica W. SBK	SI Friable, SS, Sp, Sexp	—	33"	—	—	0.3+ [in Sap] pit Needed
		10-14	CL + mica W. SBK	SI Firm, SS, Sp, Sexp					
		14-24"	R. Clay W. SBK W Mica + some SAP	SI Firm, SS, Sp, Sexp					
		24-33"	Clay Loam W. SBK + Abundant SAP	Friable, SS, Sp, Sexp					
		33-48"	Sandy Saprolite MA [Fine Micaceous]	Very Friable + well Drained					
2	LSS 11% [further down slope]	0-6	SCL + Mica W. SBK	SI Friable, SS, Sp, Sexp	—	20"	—	—	0.4+ pit Needed
		6-17	R. Clay + Mica + some Saprolite W. SBK	SI Firm, SS, Sp, Sexp					
		17-20	Clay Loam W. SBK + abundant SAP	Friable, SS, Sp, Sexp					
		20-48"	Sandy Saprolite MA	well Drained + very Friable					

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

OTHER FACTORS (.1946): ____

SITE CLASSIFICATION (.1948): ____

EVALUATED BY: ____

OTHER(S) PRESENT: ____

COMMENTS: ____

RECEIVED NOV 2 1 2016

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)

Paid $500.00

1. APPLICATION FOR: ___Improvement Permit X Authorization To Construct ___Existing System Inspection

223313

2. Page 2: *Site Plan Worksheet* Form MUST Accompany This Application
The following optional attachments may also be submitted: X Survey Plat, Scaled no more than 1 Inch = 60 Feet
Place check ( ) beside whichever is submitted if applicable X Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. Applicant Information:

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Freedom Homes	Jaime Steve Acres 1124 Charlotte Hwy Troutman NC	704-528-7960	704-876-5866
Owner Name	Mailing Address	Home Phone #	Alternate Phone #
Wendell Holman	329 Bailey Rd. Mooresville NC	704-232-9720	

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
227 Bailey Rd	Green meadows	Lot 11 -1-

Driving Directions: South on Hwy 21, turn Rt onto Bailey Rd
Lot is on the left.

5. RESIDENTIAL Site Development Information: *(Check or Complete ALL that apply)*

(X) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
( ) Repair To Failing Septic System due to ___
( ) Other ___

Maximum Number of Bedrooms 3
Maximum Number of Occupants 2
If Expansion, Current Number of Bedrooms ___

(X) 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:

(X) 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 ___ *Year*

( ) Alternative (X) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other ___

8. Please Answer The Following ( ) Yes (X) No Does the site contain any jurisdictional wetlands?
To The Best of Your Ability: ( ) Yes (X) No Is any non-domestic sewage (i.e. industry) 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.

9. Signature: /s/ Stephen AK — 11-21-16
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) — DATE

Type: CONSOLIDATED REAL PROPERTY
Recorded: 12/15/2016 3:31:05 PM
Fee Amt: $26.00 Page 1 of 3
Revenue Tax: $0.00
Iredell County, NC
Ronald N. Wyatt Register of Deeds

BK 2464 PG 444 - 446

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: **None**

Parcel Identifier No._____ Verified by_____ County on the _____ day of _____, _____

By:_____

Mail/Box to:_____

This instrument was prepared by: **Alan G. Carpenter, Attorney**

Brief description for the Index:_____

THIS DEED made this **9th** day of **December**, **2016**, by and between

GRANTOR	GRANTEE
Wendell Holman, **widower of Lillie Holman**	**Cindy Holman Horton, a/k/a** **Cindy R. Horton, and husband,** **Jerry Wayne Horton, a/k/a** **Jerry W. Horton**
Mailing Address: **229 Bailey Road** **Mooresville, NC 28117**	**Property Addres:** **TBD Bailey Road** **Mooresville, NC 28117**

Enter in appropriate block for each Grantor and Grantee: name, mailing address, and, if appropriate, character of entity, e.g. corporation or partnership.

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot, parcel of land or condominium unit situated in the City of _____, _____ Township, **Iredell** County, North Carolina and more particularly described as follows:

See Exhibit A, attached.

The property hereinabove described was acquired by Grantor by instrument recorded in Book **1662** page **815**.

All or a portion of the property herein conveyed ___ includes or **X** does not include the primary residence of a Grantor.

A map showing the above described property is recorded in Plat Book **65** page **109**.

TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the Grantee in fee simple.

And the Grantor covenants with the Grantee, that Grantor is seized of the premises in fee simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever, other than the following exceptions:

Easements, rights of way and restrictions of record, if any.

IN WITNESS WHEREOF, the Grantor has duly executed the foregoing as of the day and year first above written.

_____ (SEAL)
(Entity Name)

By: _____

Title: _____

/ Wendell Lee Holman (SEAL)
Wendell Holman

By: _____

Title: _____

_____ (SEAL)

By: _____

Title: _____

_____ (SEAL)

State of North Carolina - County or City of Iredell

I, the undersigned Notary Public of the County or City of Iredell and State aforesaid, certify that Wendell Holman

personally appeared before me this day and acknowledged the due execution of the foregoing instrument for the purposes therein expressed. Witness my hand and Notarial stamp or seal this 9th day of December, 2016.

My Commission Expires: 11-6-2021
(Affix Seal)

Sandra J. Benfield
Notary Public Sandra J. Benfield
Notary's Printed or Typed Name

SANDRA J. BENFIELD
Notary Public
Iredell County, NC
My Commission Expires: 11/06/2021

State of North Carolina - County or City of _____

I, the undersigned Notary Public of the County or City of _____ and State aforesaid, certify that

personally appeared before me this day and acknowledged the due execution of the foregoing instrument for the purposes therein expressed. Witness my hand and Notarial stamp or seal this _____ day of _____, _____.

My Commission Expires: _____
(Affix Seal)

_____
Notary Public
Notary's Printed or Typed Name

State of North Carolina - County or City of _____

I, the undersigned Notary Public of the County or City of _____ and State aforesaid, certify that

_____ personally came before me this day and acknowledged that he is the _____ of _____, a North Carolina or _____ corporation / limited liability company / general partnership / limited partnership (strike through the inapplicable), and that by authority duly given and as the act of such entity, he signed the foregoing instrument in its name on its behalf as its act and deed. Witness my hand and Notarial stamp or seal, this _____ day of _____, _____.

My Commission Expires: _____
(Affix Seal)

_____
Notary Public
Notary's Printed or Typed Name

EXHIBIT A

BEING ALL of Lot No. 1, containing 0.643 acres, more or less, of the FAMILY DIVISION OF GREEN MEADOWS S/D LOT 11 FOR WENDELL HOLMAN, as the same is platted, planned and recorded in Plat Book 65, page 109, Iredell County Registry.

PIN: TBD
Property address: TBD Bailey Road, Mooresville, NC 28117

AUTHORIZATION TO ACT AS AGENT FOR OWNER

Any application/document/permit requiring a signature must be signed by the property owner or their authorized agent. This form shall be provided by the owner to allow specified individuals to act as agents for the owner. This form allows the specified individuals to sign or receive any application/document/permit on behalf of the owner. This form allows the authorized agent to make decisions on behalf of the owner pertaining to modifications of permits in the field. It is the responsibility of the owner to assure that any/all permit conditions specified on permits issued by this Division are followed.

I, Cindy & Jerry Horton, am the legal owner of the property located at 229 Bailey Rd Mooresville NC, identified as PIN(Parcel Identification Number) 4658461007.000, located in Iredell County, North Carolina.

I do hereby authorize (print authorized agent/company name) Freedom Homes, _____, _____, _____, _____, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

1. Improvement Permit (IP)/ Authorization to Construct (AC).
2. Application for soil-site evaluation (new/repair).
3. Application/permit for water well/well abandonment.
4. Application for existing system.
5. Application for Improvement Permit (IP)/ Authorization to Construct (AC).

I agree to abide by any and all decisions and/or conditions between the agent acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division. This form must be fully executed before the individual's specified above will be recognized as the authorized agent.

Cindy Horton — 10-8-16
Signature of Owner — Date

Jerry Horton — 10-8-16
Signature of Witness — Date

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*:

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:

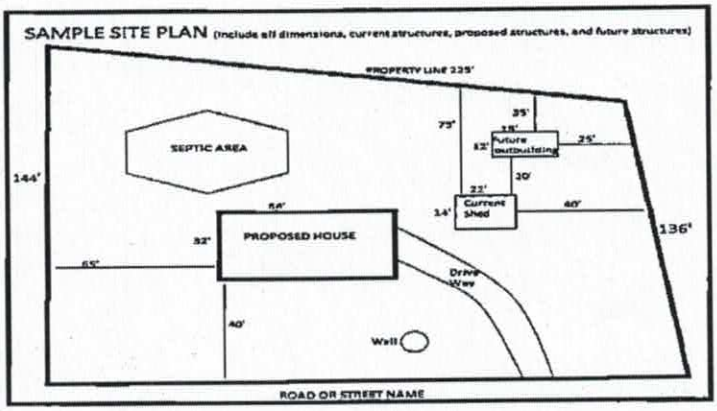
- X **Property Line measurements are clearly identified...**
- X **All proposed structures are indicated...**

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

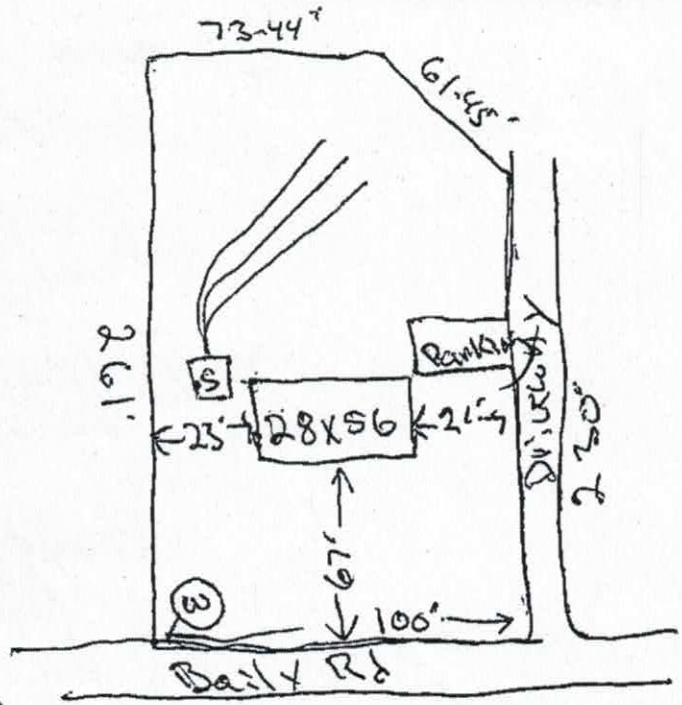
- X **Front and side setbacks from property line...**
- X **Area you prefer your septic system to be placed...**
- X **Preferred driveway location and configuration, preferred well location...**
- X **North arrow, or other sufficient indicator of direction...**

Circle N/A on the following if appropriate:

- X **Location of septic systems and wells within 100' of your property..** (N/A)
- X **Location of easements and rights of ways on your property..** (N/A)
- X **Location of any designated wetlands on the property..** (N/A)



USE THIS SPACE TO DRAW YOUR SITE PLAN



Signature: Stephen Ak

REQUIRED **property owner or owner's legal representative signature.**

11-21-16

DATE

Book 65 Page: 109 Page 1 of 1

SHADOW-WOLF

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.

Wendell Holman — 11-4-16
Owner Wendell Holman — Date

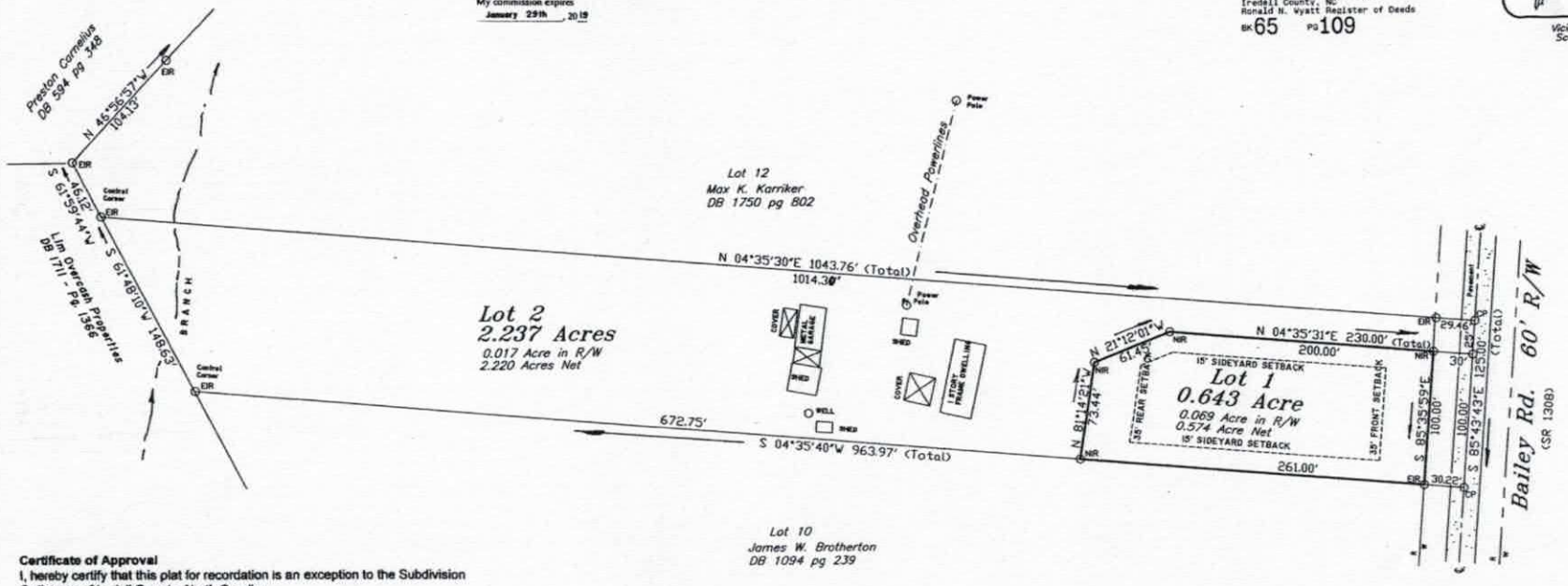
STATE OF NORTH CAROLINA COUNTY OF CATAWBA
I, Judy D. Clark, a Notary Public for said County and State, do hereby certify that Wendell Holman personally appeared before me this day and acknowledged the due execution of the foregoing instrument. Witness my hand and official seal, this the 4th day of November, 2016
Judy D Clark
Notary
My commission expires January 29th, 2019

Judy D Clark Notary Public Catawba County, North Carolina

NORTH
PB 12 pg 25
Oct 1975

Doc ID: 015627960001 Type: CRP
Recorded: 11/04/2016 at 10:24:13 AM
Fee Amt: $21.00 Page 1 of 1
Iredell County, NC
Ronald N. Wyatt Register of Deeds
BK 65 PG 109

Vicinity Map
Scale None
Bailey Rd. (308)



Certificate of Approval
I, hereby certify that this plat for recordation is an exception to the Subdivision Ordinance of Iredell County, North Carolina.

Subdivision Administrator — 11-4-16
Iredell County, North Carolina — Date

Review Officer
I, Review Officer of Iredell County, Certify that the map or plat to which this certification is affixed meets all statutory requirements for recording.

Review Officer — 11-4-16
Date

Certificate of Survey and Accuracy
I, David S. Clark, PLS, certify that this plat was drawn under my supervision from an actual survey made under my supervision (deed description recorded in Book 1662, page 815, etc.) (other); that the boundaries not surveyed are clearly indicated as drawn from information found in Book 1662, page 815; that the ratio of precision as calculated is 1: 20,000; that this plat was prepared in accordance with G. S. 47-30, as amended. Witness my original signature, registration number and seal this 31st day of October, A.D. 2016.

I further certify that this plat is of another category, such as the recombination of existing parcels, a court-ordered survey or other exception to the definition of subdivision.

David S. Clark PLS
Surveyor
L-2829
Registration Number

NORTH CAROLINA PROFESSIONAL SEAL L-2829 LAND SURVEYOR DAVID S. CLARK

60 0 60 120 180
GRAPHIC SCALE – FEET

LEGEND
DB = Deed Book
PG = Page
PP = Power Pole
MN = Mag Nail
HN = Iron Hole
EIP = Existing Iron Pipe
EIR = Existing Iron Rod
NIR = New Iron Rod
Dwlg = Dwelling
Bldg = Building
CL = Center Line
R/W = Right of Way
CM = Concrete Marker
CP = Computer Point

2.880 ACRES TOTAL

FAMILY DIVISION of GREEN MEADOWS S/D
LOT 11

for
Wendell Holman
229 Bailey Rd, Moorseville, NC 28117
Coddle Creek Township, Iredell County, North Carolina
PIN 4658461007.000 — Drawn By DKB
DB 1662 pg 815 — FB 148 pg 44
Date Oct 31st, 2016 — Scale 1"=60'
Zoned R-A — Watershed WS4
Green Meadow PB 12 pg 25

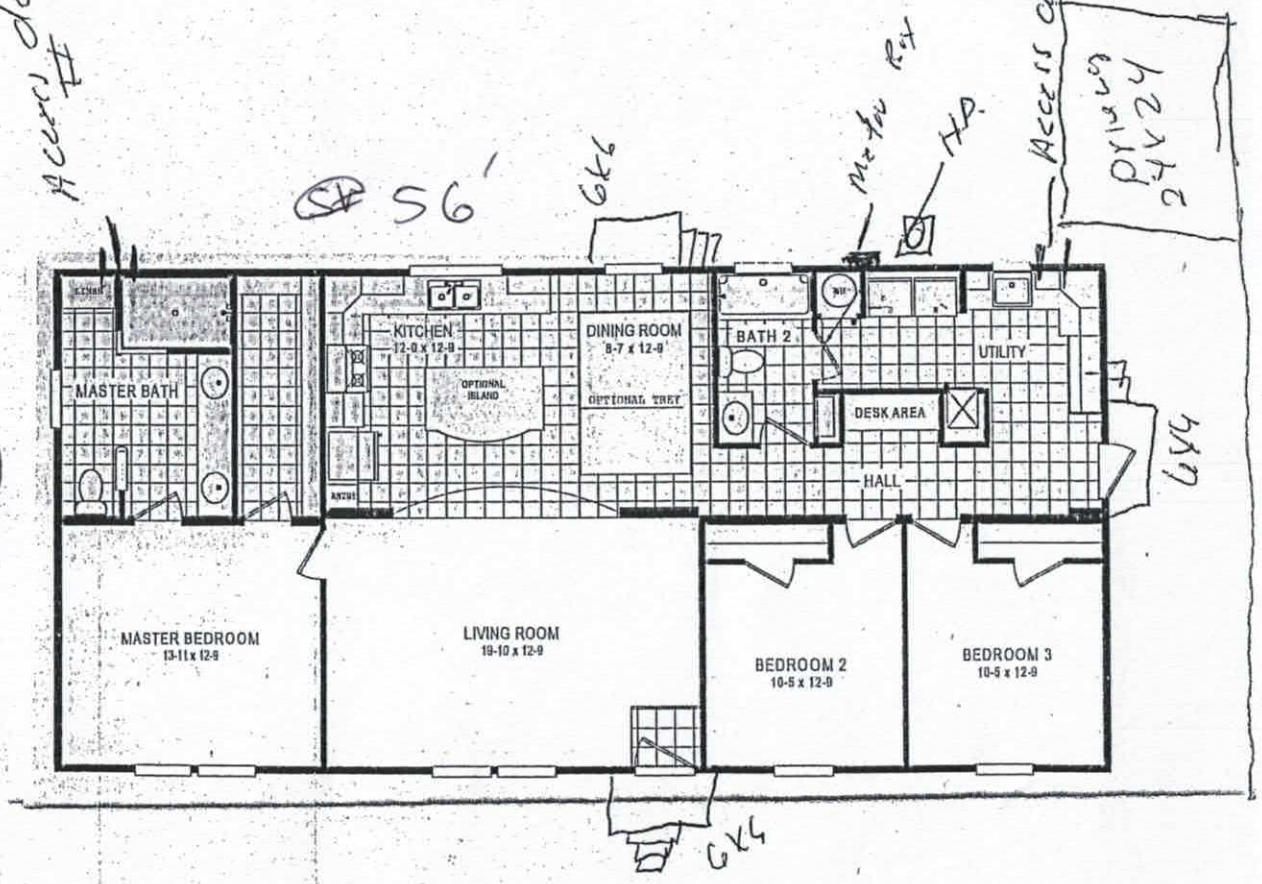
David S. Clark Surveyor
1920 32nd Street NE, Hickory NC, 28601
828-256-6400 www.clarksurveying.com

C-2272

Stephens AK 11-21-16

12/16/16

28' X 56' (S)



Cindy Horton

Jerry Horton

IREDELL COUNTY

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

APPLICATION NUMBER
223313
Issue Date: 11/21/2016

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4658461326.000	227 BAILEY ROAD, MOORESVILLE, NC 28117	IREDELL COUNTY

Owner Information	Applicant Information
Owner: HOLMAN WENDELL+LILLIE	Applicant: FREEDOM HOMES-TROUTMAN
Address: 229 BAILEY RD MOORESVILLE, NC 28117	Address: 1124 CHARLOTTE HWY TROUTMAN, NC 28166
Phone:	Phone: 704-883-6148

Use Requested	Zone Code
	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
2.890	35.00	35.00	15.00	15.00		X

Remarks:

REQUIREMENTS FOR ALL MULTI -SECTIONAL MOBILE HOMES Minimum size of main body is at least 22 feet by 40 feet; Must have standard residential shingles; Minimum of 3/12 roof pitch; Must have continuous masonry underpinning; Must have minimum roof eave and raker projections of 6 inches; Must have a 36 square foot deck or porch at all front and rear entrances; Exterior siding must consist of vinyl or aluminum lap siding, wood, or hardboard, comparable in composition, appearance and durability to residential siding; Must remove towing apparatus; Must face front property line and be no less than 20 degrees from parallel to the front property line. Original mobile home must be removed before Certificate of Occupancy can be approved.

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	86315	TOTAL FEES:	$ 77.25