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Paid $200.00

IREDELL COUNTY HEALTH DEPARTMENT

Application For Improvement Permit and/or Authorization To Construct, Existing System Inspection #213183

(THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED - APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS)

1. APPLICATION FOR: ___ Improvement Permit ___Authorization To Construct ___BOTH _✓_Existing System Inspection

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

3. Applicant Information:

Applicant Name	Mailing Address	Home Phone	Work Phone
ASHLEY ROLLANS	PO BOX 832 MOORESVILLE 28115		704 746-5046

Owner Name	Mailing Address	Home Phone	Work Phone
WILLIAM MATYI	176 ANNISTON WAY DAVIDSON 28036		

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
176 Anniston Way	Anniston	Lot 3

Driving Directions: Shearer South, Lt on Anniston Way, Lot on Rt.

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

( ) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
( ) Repair To Failing Septic System

Maximum Number of Bedrooms 4
Maximum Number of Occupants 8
If Expansion, Current Number of Bedrooms ____

( ) Crawl Space Foundation?
(✓) Concrete Slab Foundation?
(✓) Basement w/Plumbing?
( ) Basement w/out Plumbing?

*Existing House - Pool

IF Non- Residential Site Development:
Type of Business ____
Square Footage of Building ____
Maximum Number of Employees ____
Maximum Number of Seats ____

****

6. Proposed Water Supply:

( ) New Well (✓) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

****

7. Desired Septic System Type: *(You may rank in order of preference, if any)*

( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional (✓) Other Accepted ( ) No Preference

****

8. 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. industry) to be generated?
( ) Yes (✓) No Is the site subject to approval by any other public agency?

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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: [signature] 8/27/15
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY HEATLH DEPARTMENT

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…
- X All proposed structures are indicated…
- X *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 Preferred driveway location and configuration, preferred well location…
- X Area you prefer your septic system to be placed…
- 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

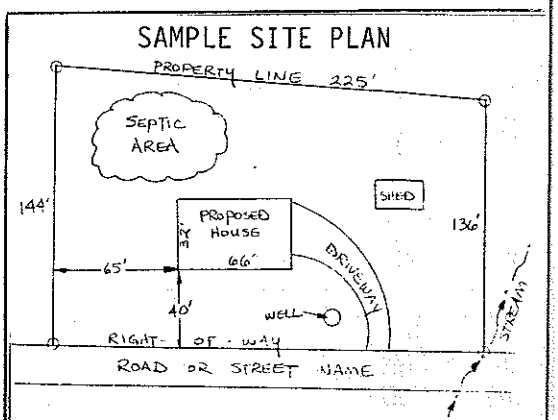
Signature: Samuel A Tolbert

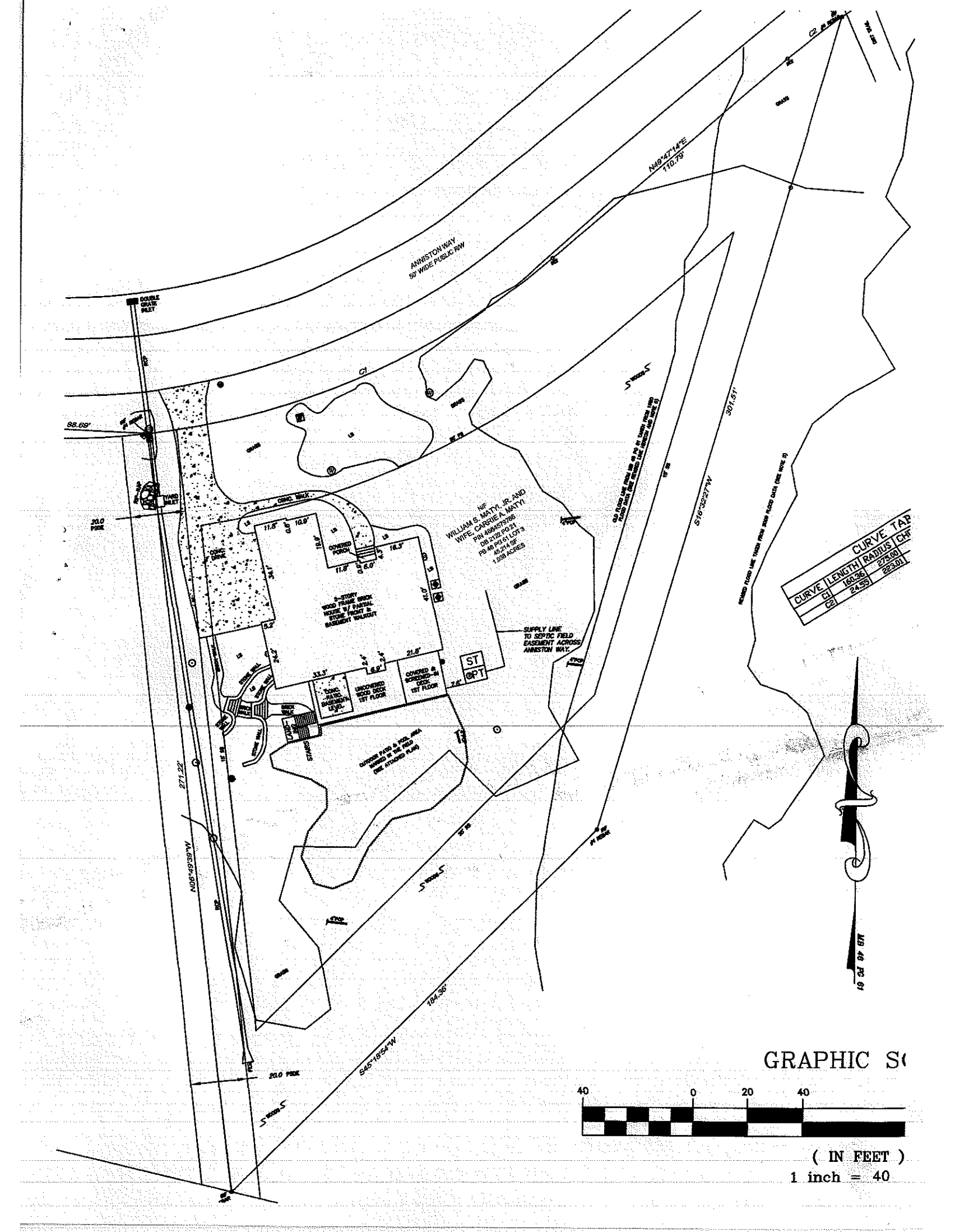
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

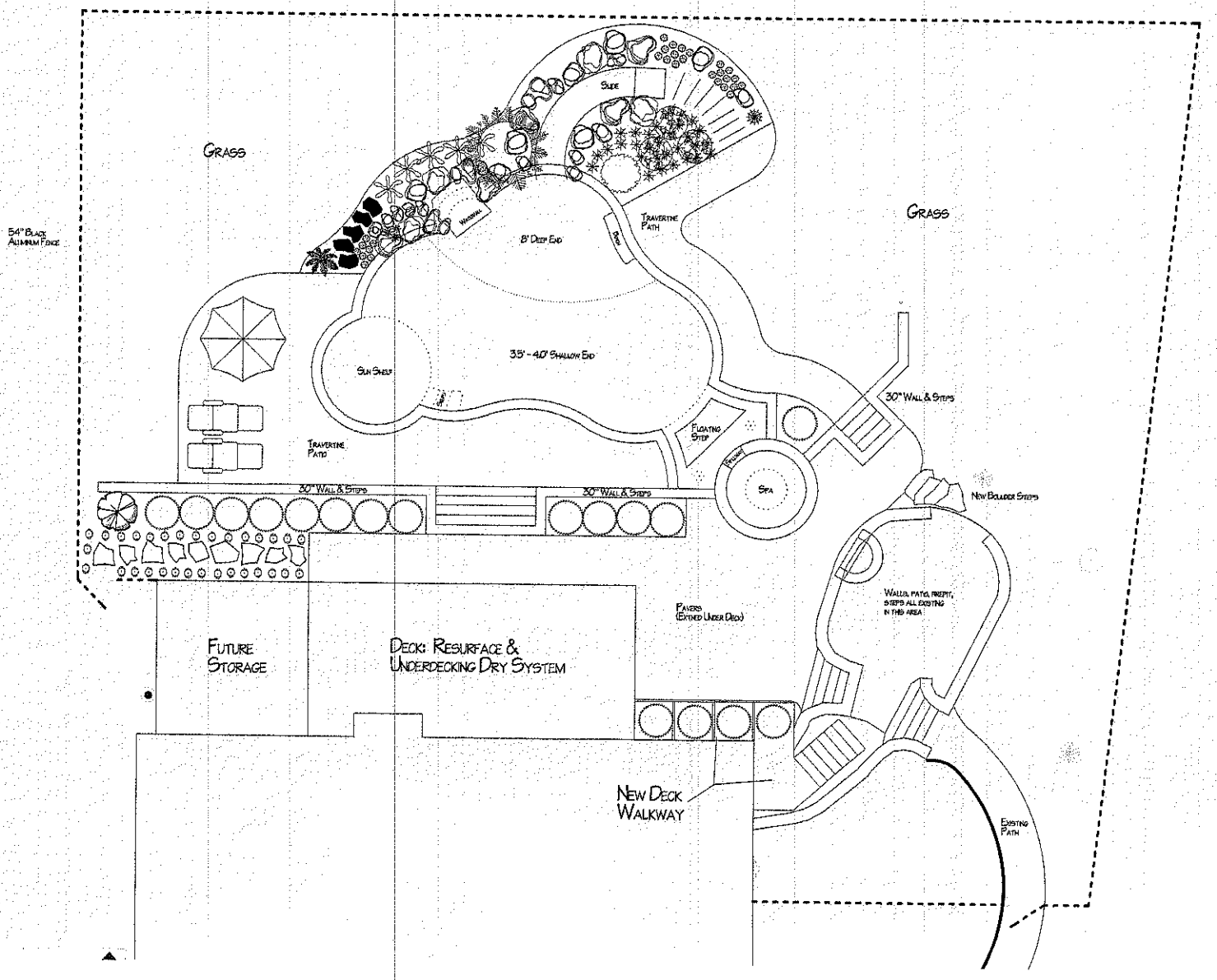
8/27/15
DATE

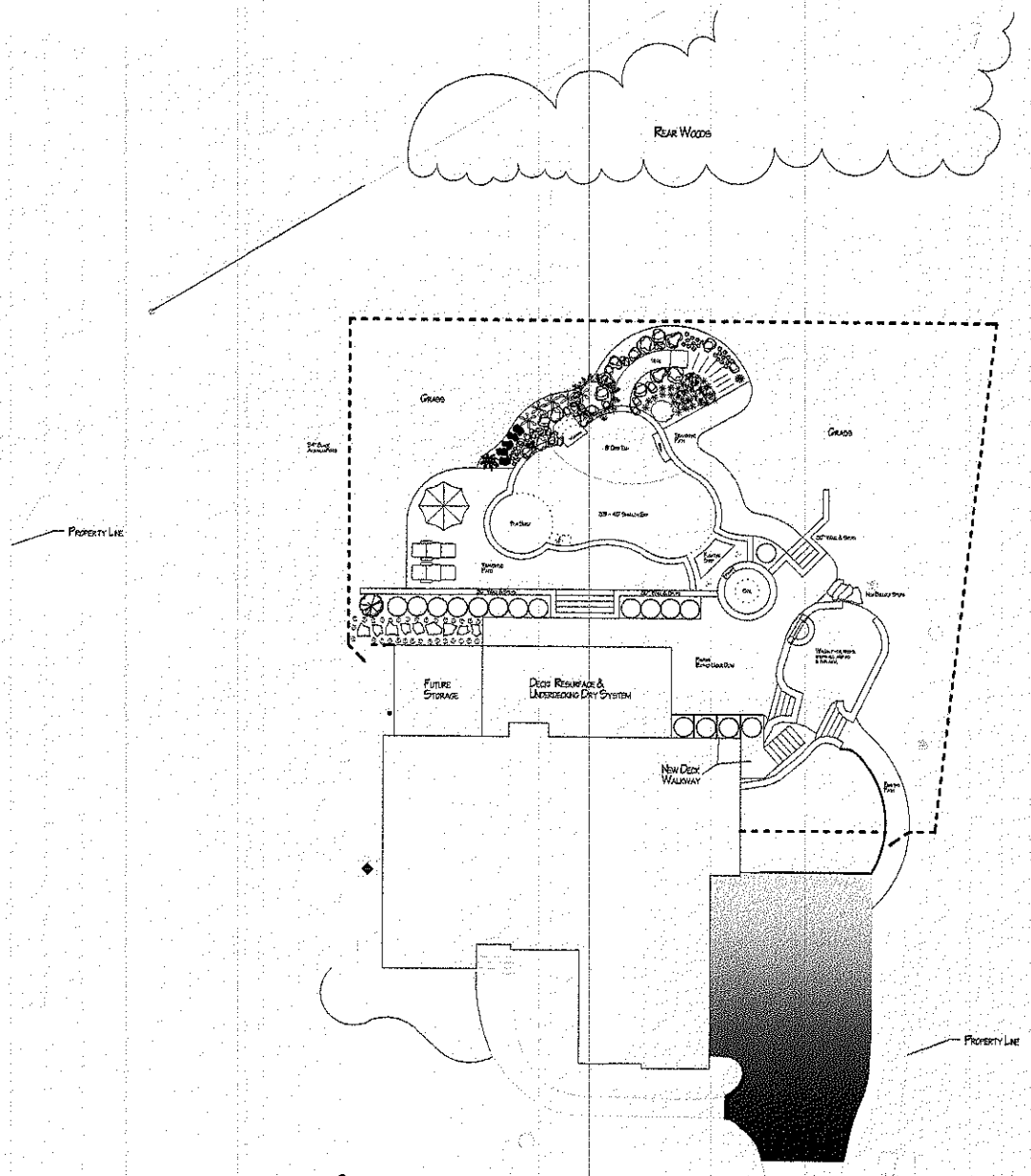
USE THIS SPACE TO DRAW YOUR SITE PLAN

See Attached




ANNISTON WAY
50' WIDE PUBLIC RW
N49°47'14"E
110.79'
301.51'
S16°32'27"W
271.22'
N16°56'56"W
184.36'
S45°18'54"W
98.69'
20.0 PSNE
NF
WILLIAM S. MATYI, JR. AND
WIFE, CARRIE A. MATYI
PIN 4684570786
DB 2122 PG 21
PB 46 PG 61 LOT 3
45,214 SF
1.038 ACRES
2-STORY
WOOD FRAME BRICK
HOUSE W/ PARTIAL
STONE FRONT &
BASEMENT WALKOUT
COVERED
PORCH
CONC.
DRIVE
CONC. WALK
DOUBLE
GRATE
INLET
TYPE D
INLET
SUPPLY LINE
TO SEPTIC FIELD
EASEMENT ACROSS
ANNISTON WAY
ST
@PT
CONC.
PATIO
UNCOVERED
WOOD DECK
1ST FLOOR
COVERED &
SCREENED-IN
DECK
1ST FLOOR
CONC.
PATIO
BASEMENT
LEVEL
STONE WALL
BRICK WALK
STEPS
OUTDOOR POOL & POOL AREA
NAMED IN THIS FIELD
SEE ATTACHED PLANS
SEPTIC
FIELD
20.0 PSNE
MB 46 PG 61
CURVE TAB
CURVE
LENGTH
RADIUS
CHO
C1
160.36
275.00
C2
24.55
223.01
GRAPHIC SC
40
0
20
40
(IN FEET)
1 inch = 40


GRASS
54" BLACK ALUMINUM FENCE
SLIDE
WATERFALL
8' DEEP END
RAIL
TRAVERTINE PATH
GRASS
35' - 40' SHALLOW END
SUN SHELF
TRAVERTINE PATIO
30" WALL & STEPS
FLOATING STEP
HAND RAIL
SPA
30" WALL & STEPS
30" WALL & STEPS
NEW BOULDER STEPS
WALLS, PATIO, FIREPIT, STEPS ALL EXISTING IN THIS AREA
PAVERS (EXTEND UNDER DECK)
FUTURE STORAGE
DECK: RESURFACE & UNDERDECKING DRY SYSTEM
NEW DECK WALKWAY
EXISTING PATH


Rear Woods
Property Line
Grass
Grass
Future Storage
Deck Resurface & Underdecking Dry System
New Deck Walkway
Property Line

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PERMIT# 123254 PIN# 4664 67 0278.003 4664-57-9786 DATE 4/15/05

OWNER OR CONTRACTOR RIDGELINE DEVELOPMENT / Edwards Const. PHONE: Business 362-5007 Home

ADDRESS 17105 VEATON DRIVE SUITE 207-G. CORNELIUS NC 28031

LOCATION SHEARERS RD (S) - TL ANNISTON - LOT ON RT - SEPTIC ON LEFT

SUBDIVISION ANNISTON BLOCK / SECTION 1 LOT 3 LOT AREA 1.04AC SITE CLASS. PS DESIGN FLOW 480GPD L.T.A.R. .25GPD/FT

Septic Tank: 1000 Gallons; STB 794 Date 4-18-07

Pump Tank: 1000 Gallons; PT 283 Date 6-27-07

Pump Make: _____ Model ME-SFXH Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1500 Linear Feet 500

No Lines 10 @ 50' Trench Width 36" Max Trench Bottom Depth 30"

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: PUMP 25% REDUCTION

Repair System Description: CP PANEL

Maintenance Agreement Required: ☐ Yes ☑ No

Gravel Depth N/A ☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees _____

☐ Other _____

Water Supply: ☑ Individual ☐ Public ☐ Community

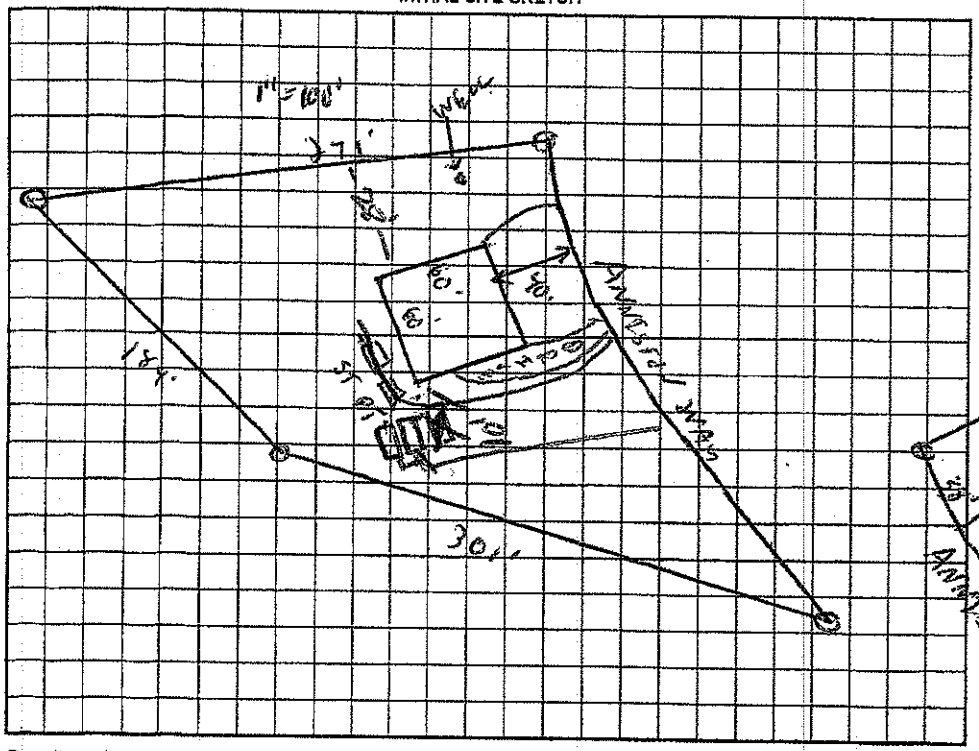
Comments/Conditions: SEE MAP FOR SUPPLY LINE LOCATIONS

Red Poly, Inlet Filter installed

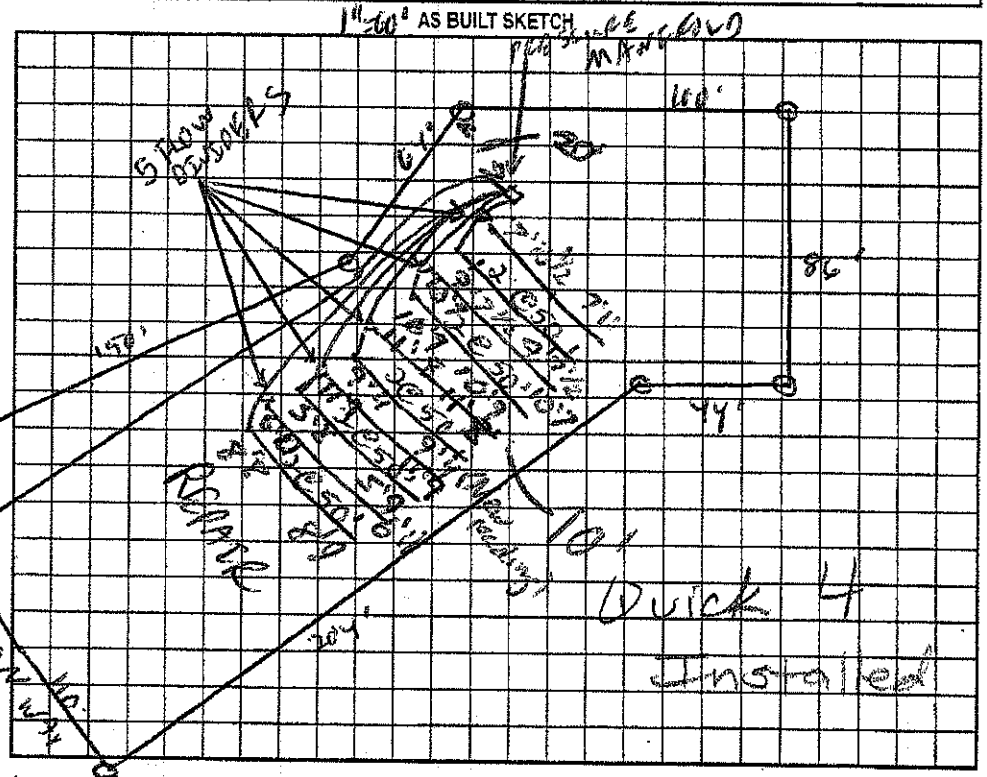
Comments/Conditions: 10/22/07 Pressure checked 7/20/07 lines, Tank & PM checked

OFFSITE

INITIAL SITE SKETCH



1"=100' 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. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: _____ date 5-17-05 Installed by: Tucker's Hauling & Grading

Improvement Permit by: _____ date 4/15/05 Operation Permit by: _____ date 11/8/07

Authorization to Construct by: _____ date 4-21-06 Existing System Inspection by: _____ date _____

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK

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, Carrie Matyi, am the legal owner(s) of the property located at 176 Anniston Way - Davidson NC 28036, identified as PIN (Parcel Identification Number) 4664579786.00, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Ashley Rollans, Rollans Soil, 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.

Carrie Matyi	8/26/2015	[signature]	8-26-15
Signature of Owner(s)	Date	Signature of Witness	Date

Please return this signed form to the appropriate office:

Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

IREDELL COUNTY

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

APPLICATION NUMBER
213183
Issue Date: 08/27/2015

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4664579786.000	176 ANNISTON WAY, DAVIDSON, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: MATYI WILLIAM S JR+CARRIE A	Applicant: ROLLANS SOIL & ENVIRON
Address: 176 ANNISTON WAY DAVIDSON, NC 28036	Address: 470 NORTH BROAD STREET SUITE D MOORESVILLE, NC 28115
Phone:	Phone: 704-658-1723

Use Requested	Zone Code
POOL	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
1.038	35.00	10.00	10.00	10.00	NOT	X

Remarks:

Swimming Pool Zoning Permit: Pools shall be located to comply with minimum setbacks requirements for accessory buildings and structures of the district in which located. Pools which 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 requirements. Pools shall be protected by a fence of equal enclosure, a minimum of four feet in height, and equipped with self-closing and positive self-latching gate to provide with hardware for permanent locking. Fencing Is NOT required for above ground pools if they are at least four (4) in height, the ladder is removed, or when NOT in use have a gate to the ladder as described above.

$ PAID CC MAB

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: [signature] Date: 8/27/15

Permit Number	47801	TOTAL FEES:	$ 77.25