IREDELL COUNTY HEALTH DEPARTMENT

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

CC 2:00

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

PERMIT # 241574

PIN # 4702566840

APPLICANT/OWNER: Dagenhart Builders

APPLICANT ADDRESS: 161 Ronnie Lane Stony Point NC 28678.

SITE ADDRESS: 104 Fosko Ferry Drive Statesville NC 28677

PHONE: 704-880-8205 ALT. PHONE 7045852331

SITE DIRECTIONS: Lewis Ferry over Eutola Property 1/4 mile after crossing over Eutola on Right

SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Bacon Christopher Lynn

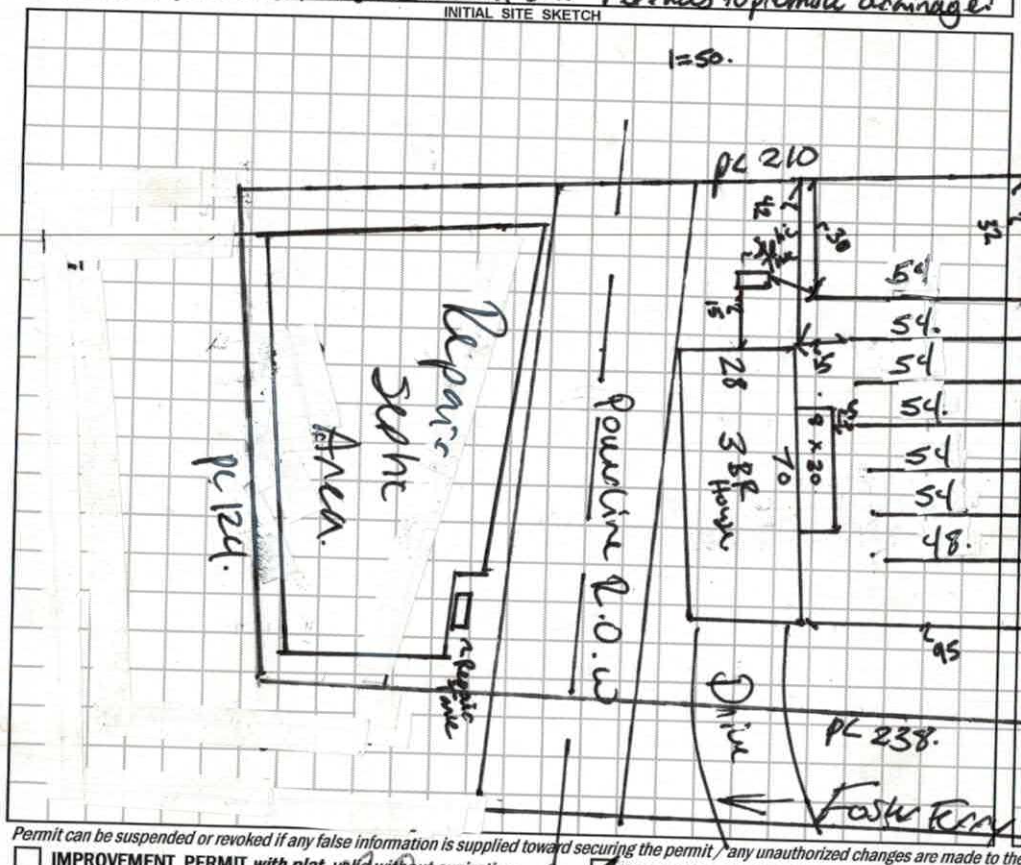
SECTION: — LOT # 1 LOT AREA: .78 Acre

DESIGN FLOW: 360 L.T.A.R.: .25 (.30 Rep

Septic Tank	1000	(gal)	STB 1012	Date 4/10/19	☒ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms 3	Water Supply
Pump Tank		(gal)	PT	Date	System Description: Gravity 25% Reduction		☐ Business	No. Persons 6	☐ Private
Pump Make		Model		Serial #	Repair System Description: Gravity 25% Reduction		☐ Other	No. Employees	☒ Public
# Nitrification Fields	1	# Lines	4	Linear Ft. 360	Maintenance Agreement Required: ☐ YES ☒ NO		☐ Slab	☒ Crawl Space	☐ Community
Trench Width	36	Trench Bottom Depth(Low side)	33	Gravel Depth —	☒ GRAVITY ☐ PRESSURE		☐ Basement w/plumbing		☐ Basement w/o plumbing

Comments / Conditions: Install Septic Drainlines on the Contour of the Land and utilize Serial distribution. Do not Drive, pave, grade or bury utilities in Drainfield Area. Smooth out Terrain to promote drainage

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed as permitted

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: Mitchell Dagenhart Date: 5/10/2019 Installed by: Steve Jordan

IMPROVEMENT PERMIT by: Benjamin A Bellamy Date: 4/30/2019 OPERATION PERMIT by: Benjamin A Bellamy Date: 8/6/2019

AUTHORIZATION TO CONSTRUCT by: Benjamin A Bellamy Date: 4/30/2019. 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.

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

Sheet 1 of 1
PROPERTY ID #: 4702566
COUNTY: Iredell

SOIL/SITE EVALUATION
***for* ON-SITE WASTEWATER SYSTEM** Lot 1
(Complete all fields in full)

OWNER: Dayhurst Builders
ADDRESS: 104 Foster Ferry
PROPOSED FACILITY: 3 BR House
LOCATION OF SITE: 104 Foster Ferry Rd.
APPLICATION DATE 4/12/19
DATE EVALUATED: 4/05/19
PROPOSED DESIGN FLOW (.1949): 360
PROPERTY SIZE: .78 Acres
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	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	4%	0-9	SC wSBK/GR	SS SP FR SEXP	2.5YR 4/6	59	—	10YR 5/6	PS .275
		9-32	C SBK	SS SP FR					
		32-59	CL wSBK	SS SP FR					
2	2-3%	0-10	SC wSBK	SS SP FR SEXP	2.5YR 4/6	55	—	10YR 6/6 R 5/8 6/6.	PS .25
		10-36	C SBK	SS SP FR					
		36-55	CL wSBK	SS SP FR					
3	3%	0-10	SC wSBK	SS SP FR SEXP	2.5YR 4/6	62	-	10-20 10YR 6/6 Rock	PS .275
		10-39	C SBK	SS SP FR					
		39-62	CL wSBK	SS SP FR					
4	3%	0-15	SC wSBK	SS SP FR SEXP	2.5YR 4/6	58	—	10YR 5/6 Redox	PS .275.
		15-44	C SBK	SS SP FR					
		44-58	CL wSBK	SS SP FR					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	360	360
System Type(s)	III 25%	III 25%
Site LTAR	.25	.25

OTHER FACTORS (.1946): Poorly
SITE CLASSIFICATION (.1948): PS.
EVALUATED BY: Bakkus
OTHER(S) PRESENT: Pennington / Dayhurst.

COMMENTS: Terraces positive drainage.

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

(1)

Sheet 1 of 1
PROPERTY ID #: 9702566619
COUNTY: Iredell

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

OWNER: Bigshot Builders
ADDRESS: 161 Rounding Stone Point
APPLICATION DATE 1-19
PROPOSED FACILITY: 3BR
PROPOSED DESIGN FLOW (.1949): 360 gpd.
DATE EVALUATED: 1-19
LOCATION OF SITE: 104 Frosty Fog. Drive
PROPERTY SIZE: .87
PROPERTY RECORDED: No.
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	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	2-5% Ridge	0-14	sc wSBk	SS Sp FR SE		58		Hem Mica	PS .3
		14-34	c SBk	SS Sp FR					
		34-58	cl wSBk	SS Sp FR					
2	Ridge 2-5%	0-7	sc wSBk	SS Sp FR SE		53		Hem Litho conc.	PS .3
		7-29	c SBk	SS Sp FR					
		28-53	cl wSBk	SS Sp FR					
3	Ridge 12%	0-7	sc wSBk	SS Sp FR SE		55		Litho conc.	PS .3
		7-35	c SBk	SS Sp FR					
		35-55	cl wSBk	SS Sp VFR					
4	Ridge 8%	0-14	sc wSBk	SS Sp FR SE		58.		Litho conc	PS .3
		14-35	c SBk	SS Sp FR					
		35-59	cl wSBk	SS Sp VFR					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	360 Ct	360 Ct
System Type(s)	III 25%	III 25%
Site LTAR	.30	.30

OTHER FACTORS (.1946): Poorcin
SITE CLASSIFICATION (.1948): PS.
EVALUATED BY: Botkins
OTHER(S) PRESENT:

COMMENTS: R.O.W.

Updated February 2014

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope) CV (Convex Slope) D (Drainage Way) DS (Debris Slump) FP (Flood Plain) FS (Foot Slope) H (Head Slope) L (Linear Slope) N (Nose Slope) R (Ridge) S (Shoulder Slope) T (Terrace)	I	S (Sand) LS (Loamy Sand)	1.2 - 0.8	0.6 - 0.4	SEXP (Slightly Expansive) EXP (Expansive)	G (Single Grain) M (Massive) CR (Crumb) GR (Granular) SBK (Subangular Blocky) ABK (Angular Blocky) PL (Platy) PR (Prismatic)
	II	SL (Sandy Loam) L (Loam)	0.8 - 0.6	0.4 - 0.3		
	III	Si (Silt) SiCL (Silty Clay Loam) CL (Clay Loam) SCL (Sandy Clay Loam) SiL (Silt Loam)	0.6 - 0.3	0.3 - 0.15		
	IV	SC (Sandy Clay) SiC (Silty Clay) C (Clay) O (Organic)	0.4 - 0.1	0.2 - 0.05		
			None	None		

MOIST	WET
VFR (Very Friable)	NS (Non-sticky)
FR (Friable)	SS (Slightly Sticky)
FI (Firm)	S (Sticky)
VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
EFI (Extremely Firm)	NP (Non-plastic)
	SP (Slightly Plastic)
	P (Plastic)
	VP (Very Plastic)

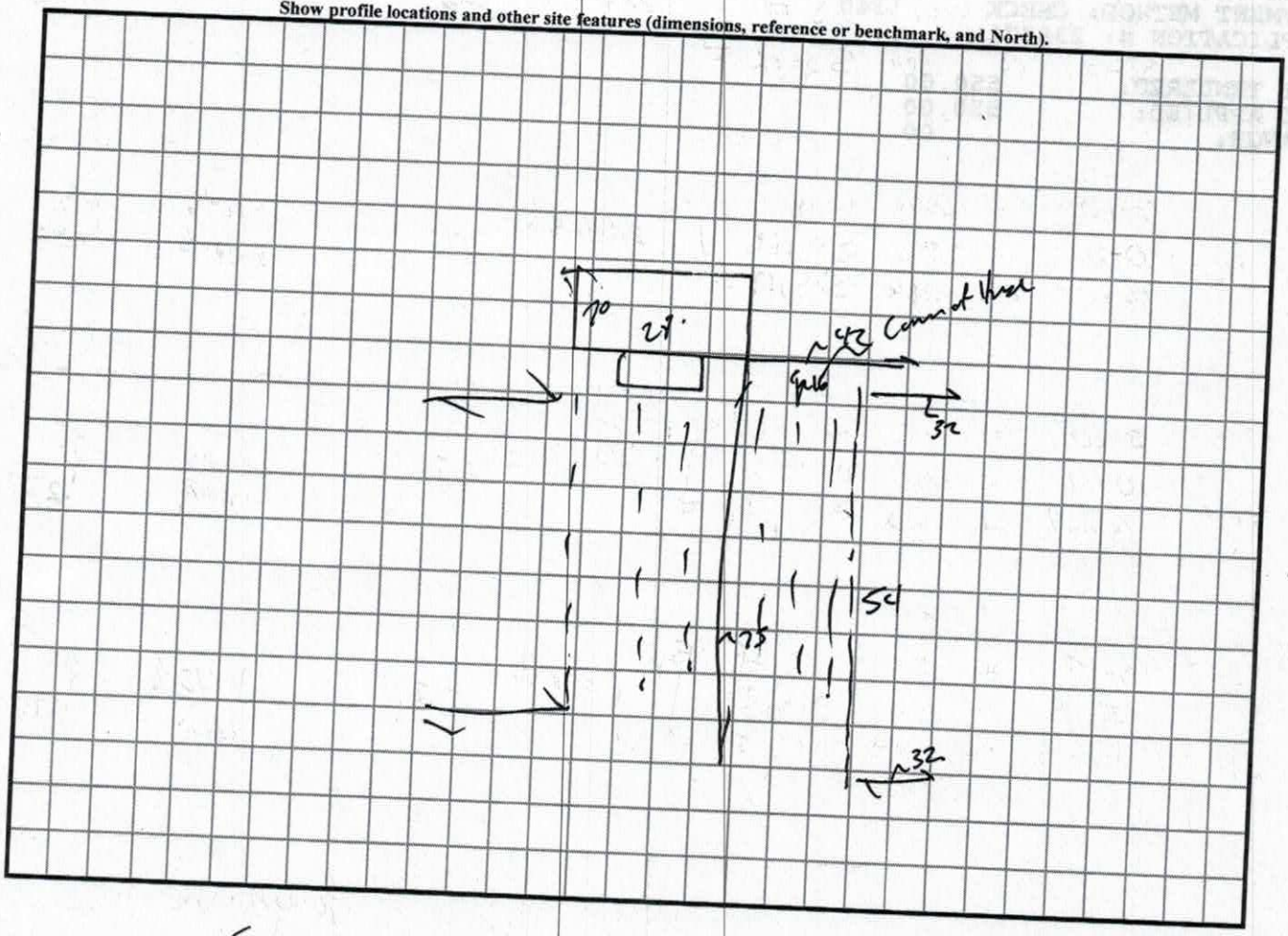
*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

NOTES

HORIZON DEPTH — In inches below natural soil surface
DEPTH OF FILL — In inches from land surface
RESTRICTIVE HORIZON — Thickness and depth from land surface
SAPROLITE — S(suitable) or U(unsuitable)
SOIL WETNESS — Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
CLASSIFICATION — S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.
Long-term Acceptance Rate (LTAR): gal/day/ft^2

Show profile locations and other site features (dimensions, reference or benchmark, and North).



Terrace

From: "Heath Snow" <heath.snow@co.iredell.nc.us>
To: "Paul Penninger" <pgpenninger@gmail.com>
Cc: "mdag1957@charter.net" <mdag1957@charter.net>
Date: Wednesday April 10 2019 7:28:16AM

Re: Lewis Ferry Power line lot question

Paul

As long as all parts of the system are out of the ROW we do not regulate the supply line from house to the tank. That would be inspected by building inspections.

Thanks

Heath

Get

On Wed, Apr 10, 2019 at 7:50 AM -0400, "Paul Penninger" < > wrote:

Heath,

Energy United is able to provide public water to the Lewis Ferry Road lots where we have been discussing the power line issue. This will free up additional septic area at the front of the lots. On Lot 1, we will still need to utilize the area across the power line for the primary or repair system.

Based on our conversation last week, we can install the septic tank across the power line easement without an encroachment agreement? The owner wants to verify this before he starts the process with Energy United of getting public water to the lots. See attached site plan.

Thanks,

Paul
Penninger Soil Consulting, PLLC

704.996.6330

From: "Paul Penninger" <pgpenninger@gmail.com>
To: "Heath Snow" <heath.snow@co.iredell.nc.us>
Cc: mdag1957@charter.net
Date: Wednesday April 10 2019 6:50:32AM

Lewis Ferry Power line lot question

Heath,

Energy United is able to provide public water to the Lewis Ferry Road lots where we have been discussing the power line issue. This will free up additional septic area at the front of the lots. On Lot 1, we will still need to utilize the area across the power line for the primary or repair system.

Based on our conversation last week, we can install the septic tank across the power line easement without an encroachment agreement? The owner wants to verify this before he starts the process with Energy United of getting public water to the lots. See attached site plan.

Thanks,

Paul
Penninger Soil Consulting, PLLC

704.996.6330

RECEIVED APR 1 2 2019
241574

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Paid $500.00 Comprehensive Relayout

Application For:
(X) Septic Improvement Permit ( ) New Well Permit (X) Authorization to Construct ( ) Well Repair Permit ( ) Existing System Inspection ( ) Well Abandonment ( ) 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: DAGENHART BUILDERS Address: 161 Ronnie Ln, Stony Point, NC Zip: 28678
Applicant Email: mday1957@charter.net Phone: 704-880-8205 Alt. Phone: 704-585-2331
Owner Name: LFDD Properties LLC Address: _____ Zip: _____
Owner Email: _____ Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 104 FOSTER FERRY DRIVE Lot #1
Subdivision Name: BARRON CHRISTOPHER LYNN Section/Phase: _____ Lot Number: # 1
Driving Directions: Take Lewis Ferry Cross over Eufola Rd - Property 1/4 m. to 5 AFTER CROSSING OVER EUFOLA ON RIGHT

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: 3
Maximum Number of Occupants: 10
( ) 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: 1960 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 (X) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: _____
( ) No Preference ( ) Alternative (X) 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: Michael L Dagenhart / Dagenhart Builders 4/12/19
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

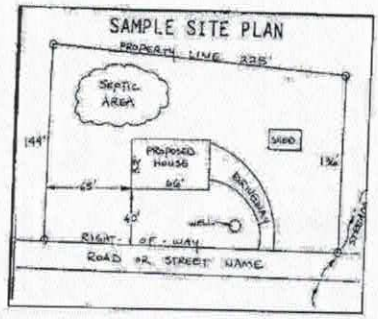
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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:

- (X) Property Line measurements are clearly identified
- (X) All proposed structures are indicated
- (X) Front and side setbacks from property line
- (X) Preferred driveway location
- (X) Preferred well location
- (X) Preferred septic system location
- (X) North arrow, or other sufficient indicator of direction



Circle N/A on the following if appropriate:

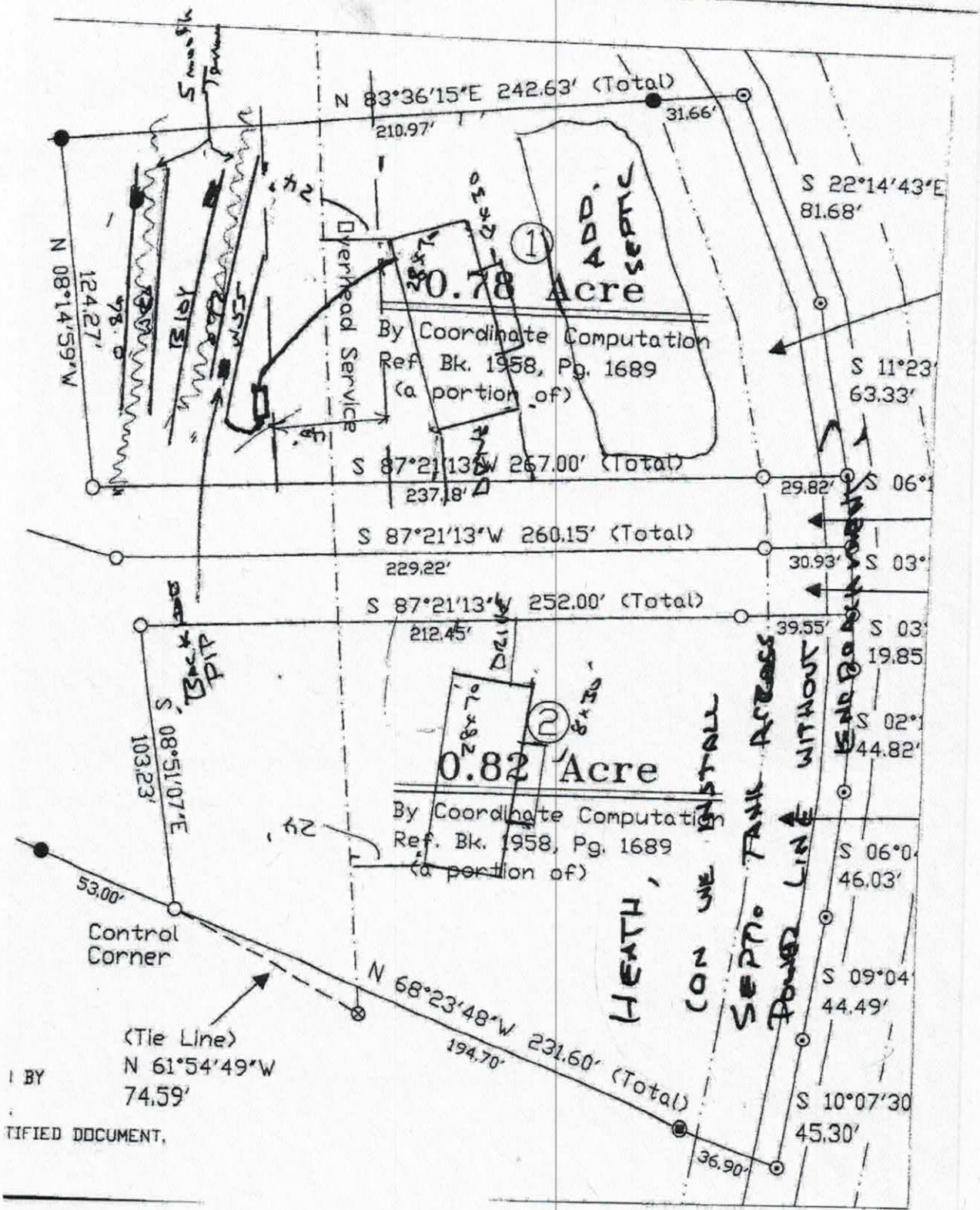
Location of septic systems and wells within 100' of your property (N/A)
Location of easements and rights of ways on your property (N/A)
Location of any designated wetlands on the property (N/A)

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

Signature: Michael Davenport / Davenport Builders
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

4/12/2019
DATE



I BY

TIFIED DOCUMENT.

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, X M. [illegible], am the legal owner(s) of the property located at Lot #1 Foster Ferry Drive, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize **(print legal representative/company name)** Michael Dagenhart, Dagenhart Builders, 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.

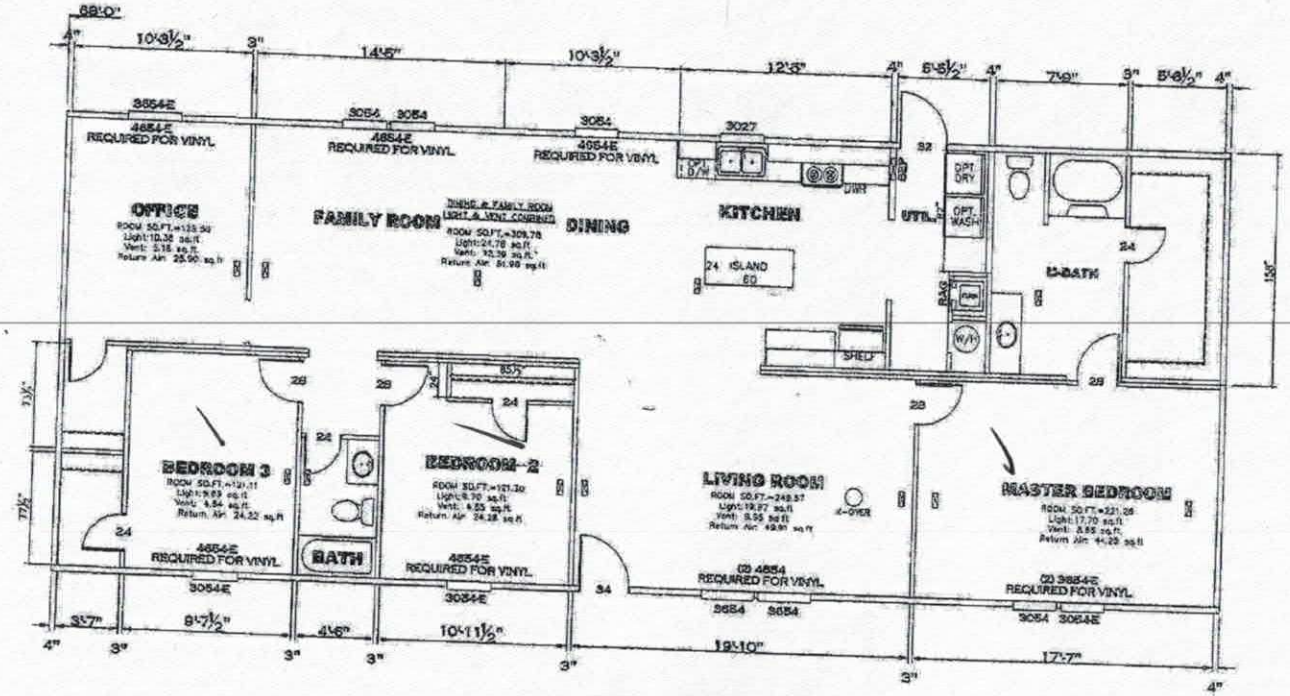
X M. [illegible]
Signature of Owner(s)

1/18/2019
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

The Bluestone 28x68
Manufactured Home 36m073



104 Foster Ferry Dr

APPROVED HWC REVISED APPROVED

FP-28-3813

Federal Manufactured Home Construction And Safety Standards

**NOTE: ALL BEDROOM DOORS ARE WITHIN 35' OF FRONT DOOR.

1791 SQ.FT. (STD PLAN "CONDITIONED")
SQ.FT. (W/DPT. PORCH/RECESS "CONDITIONED")

Product Designer: HARMONY | Drawing #: 36M073 | 28' x 66'

3 Bedroom 2 Bath

REVISION 2CB- 1/20/14 BR

Acknowledgement Of Plans Submittal ONLY!

Benjamin D. Bolling Date 4/30/2014.

Mike Dagenhart Date 5/10/2014

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)* _____

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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, X [illegible], am the legal owner(s) of the property located at Lot #1 Foster Ferry Drive, identified as PIN (Parcel Identification Number)_____, located in Iredell County, North Carolina.

I do hereby authorize **(print legal representative/company name)** Michael Dagenhart, Dagenhart Builders, 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.

X [illegible]
Signature of Owner(s)

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

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

FILE COPY

APPLICATION NUMBER
241574
Issue Date: 01/18/2019

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4702563878.000	104 FOSTER FERRY DRIVE, STATESVILLE, NC 28677	

Owner Information	Applicant Information
Owner: MILLSAPS PATTY F	Applicant: DAGENHART BUILDERS
Address: 0	Address: 161 ROMMIE LANE
IREDELL CO, NC 28625	STONY POINT, NC 28678
Phone:	Phone: 704-585-2331

Use Requested	Zone Code
DOUBLEWIDE	

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
7.770	35.00	35.00	15.00	15.00	PACL	X

Remarks:

PAID
✓7549
1/18/19

Must meet requirement R9 of the LDC. 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 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.

See Attached

Applicant: _____ Date: _____

Permit Number	164980	TOTAL FEES:	$ 77.25

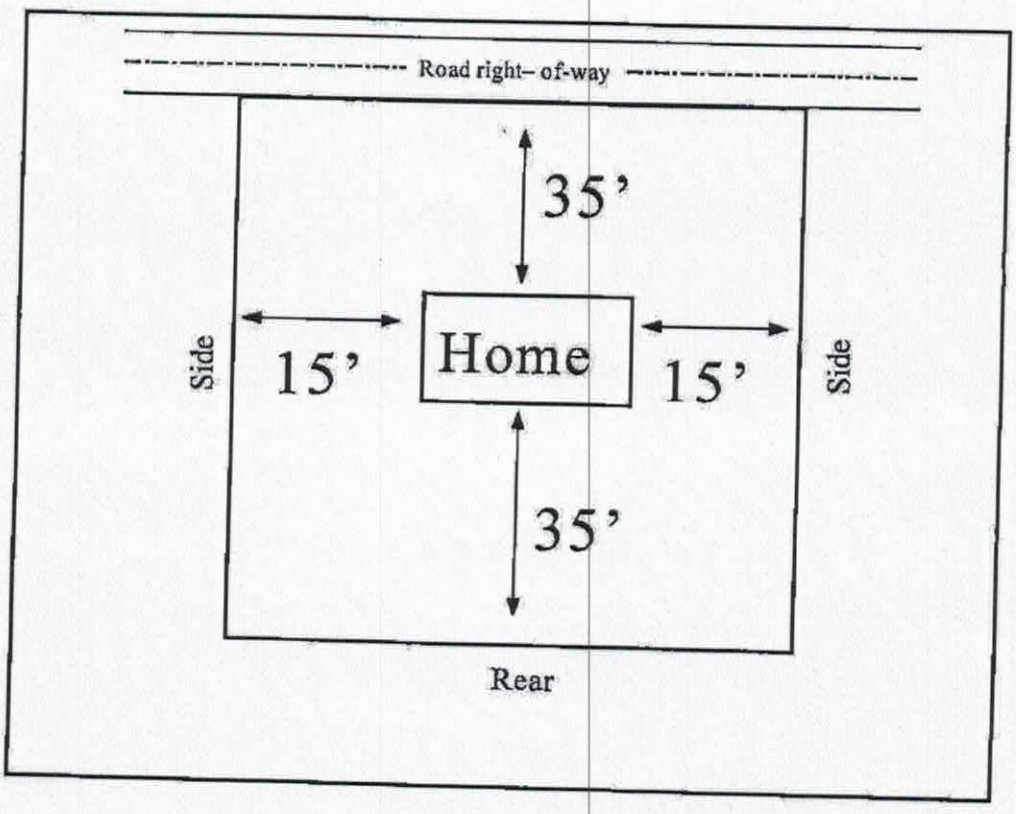
ZONING DISCLAIMER

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MICHAEL DAGENHART
Applicant

1/17/2019
Date

STREET NAME: Lot 1



In the box above indicate the location of the building's or structure's, their orientation to the front of the lot as indicated, and the setback distances to all property lines and the distances to any other building's or structure's on the lot. Also indicate the size/shape of the lot and the corresponding dimensions when necessary. The front of the lot is the portion which abuts a public right of way or easement.