IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 235914

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

PIN # 4703659921.127

APPLICANT/OWNER: Elliott M. Odom JR APPLICANT ADDRESS: 129 Cedar Bluff Lane

SITE ADDRESS: 127 Bobby's Loop Statesville NC 28677 PHONE: 704-724-7909 ALT. PHONE ~

SITE DIRECTIONS: 1 Mile west of Old NTN Rd on Hwy 70. SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Hickory Ridge MHP SECTION: ~ LOT # #127 LOT AREA: ~ DESIGN FLOW: 240 L.T.A.R.: EXT

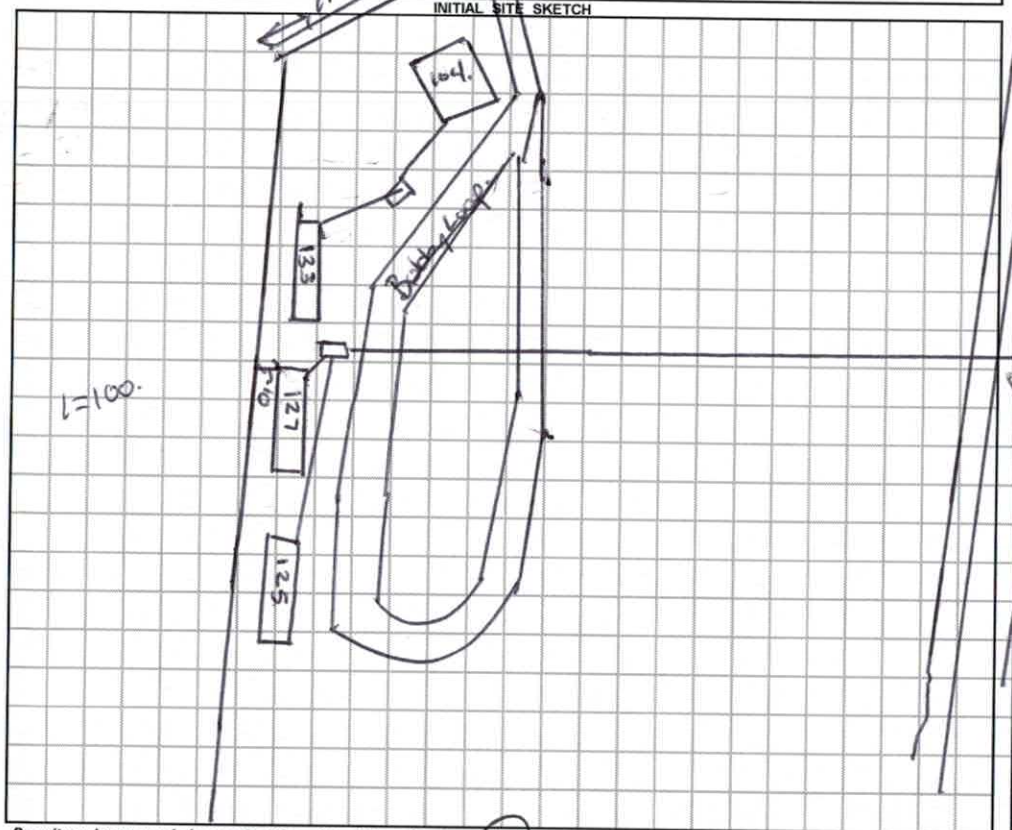
Septic Tank	1500 EXT (gal)	STB		Date		☐ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☐ Residence	No. Bedrooms 3
Pump Tank	~ (gal)	PT	~	Date	~	System Description:		☐ Business	No. Persons 4
Pump Make	~	Model	~	Serial #	~	Repair System Description:	Existing	☐ Other	No. Employees
# Nitrification Fields	EXT	# Lines	EXT	Linear Ft	EXT	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☐ Crawl Space
Trench Width	EXT	Trench Bottom Depth(Low side)	EXT	Gravel Depth	EXT		☒ GRAVITY ☐ PRESSURE	☐ Basement w/ plumbing	☐ Basement w/o plumbing

Water Supply: ☐ Private ☒ Public ☐ Community

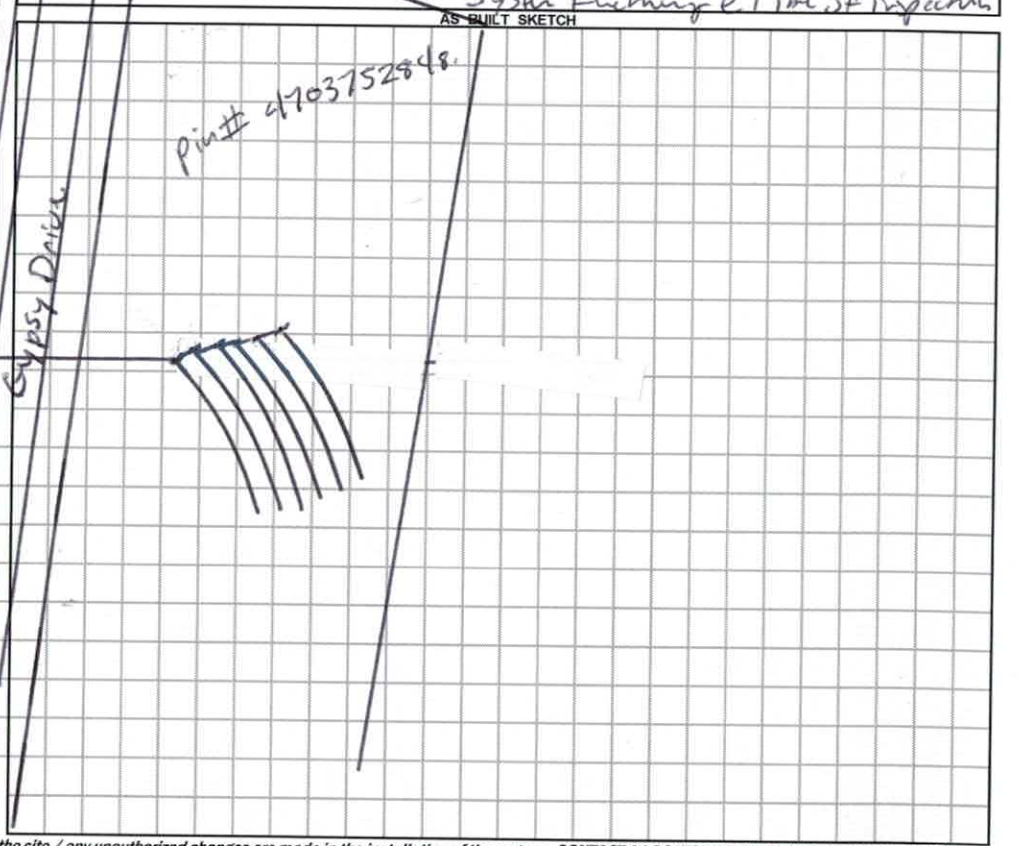
Comments / Conditions:

System served Both 127 & 125 Bobby Loop
Easement Recorded Bk 2048 PG 2159-2161
System Functioning at Time of Inspection

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: [signature] Date: 6/4/18 Installed by:

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date:

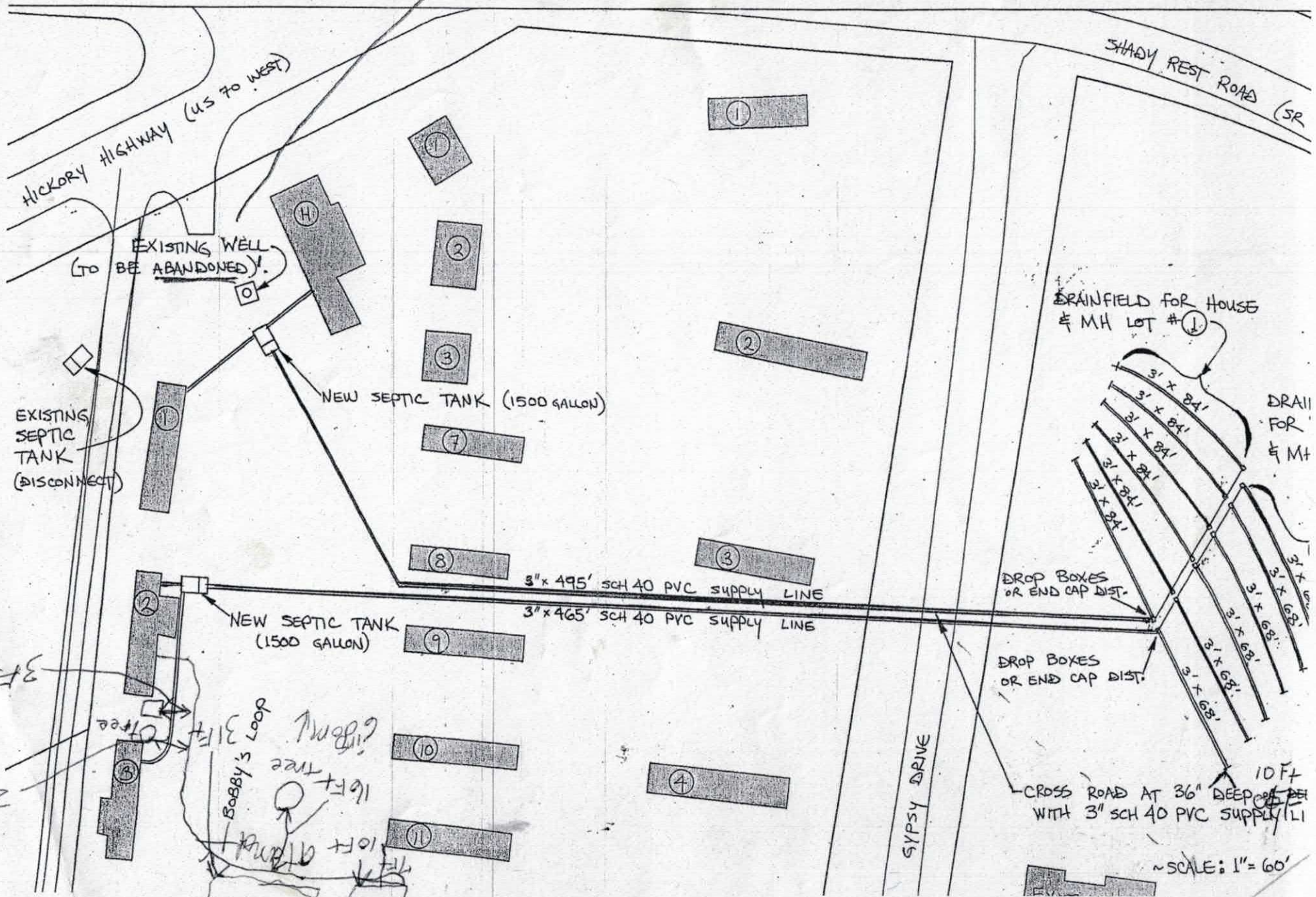
AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Benjamin Bobbitt Date: 5/31/2018

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.

REPAIR SITE SKETCH
PIN# 4703-65-9921
TRAVIS MHP

ABANDONED [illegible]

Ernie



IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) Septic Improvement Permit ( ) Authorization to Construct (X) 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: Elliott M. Odom Jr Address: 129 Cedar Bluff Lane Zip: 28117

Applicant Email: MARK@MARKodom.com Phone: 7047247909 Alt. Phone: _____

Owner Name: SAME Address: _____ Zip: _____

Owner Email: SAME Phone: _____ Alt. Phone: _____

****

Property Information:

Street Address: 127 Bobby's Loop STATESVILLE NC 28677

Subdivision Name: Hickory Ridge Mobile Home Park Section/Phase: _____ Lot Number: _____

Driving Directions: 1 mile west of OLD MTN Rd on Hwy 70

****

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

CHECK FOUNDATION TYPE

(X) New Single Family Residence Maximum Number of Bedrooms: 2 (X) Crawl Space Foundation
( ) New Multi-Family Residence Maximum Number of Occupants: 2 ( ) Concrete Slab Foundation
( ) Accessory Building ( ) Swimming Pool ( ) Basement with Plumbing
( ) Bedroom(s) Addition ( ) Other Addition/Structure: _____ ( ) Basement without Plumbing
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____
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 ( ) 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: 2010

( ) 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: _____ 5/23/18
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

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, Elliott M. Odom Jr., am the legal owner(s) of the property located at _____, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

_____ 5/23/19
Signature of Owner(s) Date

I do hereby authorize (**print legal representative/company name**) _____, _____, 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.

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

Doc ID: 012823050003 Type: CRP
Kind: EASEMENT
Recorded: 02/04/2010 at 03:19:38 PM
Fee Amt: $20.00 Page 1 of 3
Revenue Tax: $0.00
Iredell County, NC
Brenda D. Bell Register of Deeds
BK 2048 PG 2159-2161

Drawn by: Alan G. Carpenter, Attorney at Law

3

NORTH CAROLINA

DEED OF EASEMENT

IREDELL COUNTY

This Deed of Easement is made this 25th day of January, 2010, by and between ELLIOTT M. ODOM, JR., (hereinafter called "Grantor"), and ELLIOTT M. ODOM, JR., (hereinafter called "Grantee")

RECITALS:

1. The Grantor is the owner of a tract or parcel of land designated as Iredell County PIN 4703-75-2848 (2.33 acres) and described in Deed Book 2044, page 443, Iredell County Registry.

2. The Grantee is the owner of a tract or parcel of land designated as Iredell County PIN 4703-65-9921 (4.3 acres) and described in Deed Book 2044, page 530, Iredell County Registry.

3. The Grantee intends to construct new septic tanks on the tract designated as PIN 4703-65-9921 to serve a house, two mobile homes and a mobile home lot, and has found that it is necessary that the proposed septic drain field cross over to and lie in a portion of the tract designated as PIN 4703-75-2848.

4. In order to comply with Iredell County Ordinances, the Grantee is in need of a recorded Deed of Easement, establishing that the septic easement area on the tract designated as PIN 4703-75-2848 is an appurtenance to the tract designated as Iredell County PIN 4703-65-9921.

NOW, THEREFORE, in consideration of the foregoing premises and the sum of $1.00, receipt of which is hereby acknowledged, the Grantor does hereby give, grant, and convey unto the Grantee, his heirs and assigns, a perpetual right of way and easement for

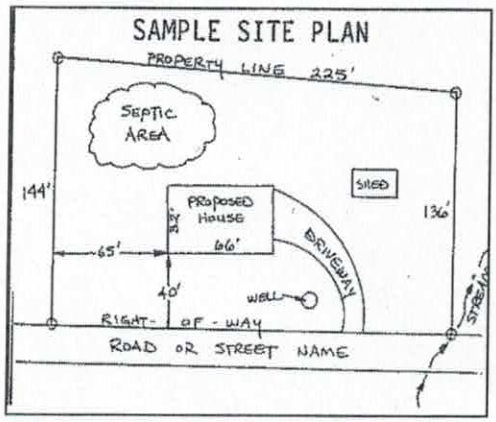
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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**

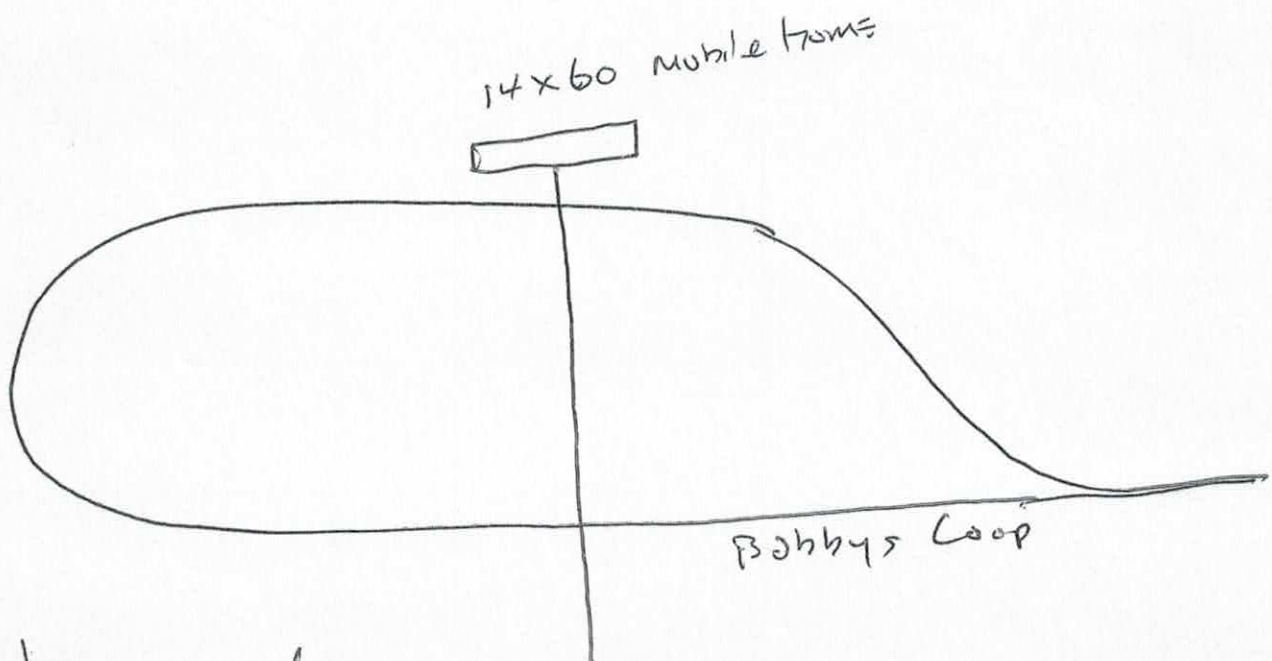


Circle N/A on the following if appropriate:

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



Signature: _____

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

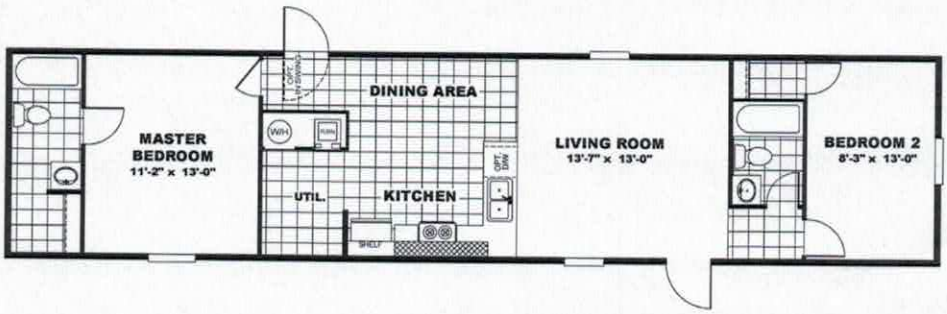
5/23/19

DATE


70
Hickory Hwy
N Shady Rest Rd
S Shady Rest Rd
Gypsy Dr
Bobbys Loop
STREET
187
385
102
103
104
105
106
107
109
111
112
113
115
116
117
119
121
123
124
125
127
133
3285
250
48
48
50
117
(107)
68
780
195
590
549
157
478
N
W
E
S
1 : 100 Feet

Acknowledgement Of
Plans Submittal ONLY!
Date 5/31/2018
Date 6/4/13

Delight



Model #: TRU14602A
14' x 60' Delight
4/4/2017 3:26:06 PM, Huiting

IREDELL COUNTY

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

APPLICATION NUMBER
235914
Issue Date: 05/23/2018

CS

ZONING PERMIT

FILE COPY

Parcel Number	Street Address	Jurisdiction
4703659921.000	127 BOBBYS LOOP, STATESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: ODOM, ELLIOTT M. JR..	Applicant: ODOM, ELLIOTT M. JR..
Address: 128 CEDAR BLUFF LN	Address: 128 CEDAR BLUFF LN
MOORESVILLE, NC 28117	MOORESVILLE, NC 28117
Phone:	Phone:

Use Requested	Zone Code
	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
4.300	15.00	25.00	20.00	20.00	PACL	X

Remarks:

REQUIREMENTS FOR ALL SINGLEWIDE MOBILE HOMES Must meet requirement R10 of the LDC. Must remove the towing apparatus, if it cannot be removed, it shall be screened; Must have a continuous underpinning; Must have 36 square foot front porch constructed within 12 inches of the floor elevation; Must have approved steps at all other secondary entrances and exits; Must face front property line and be no less than 20 degrees from parallel to the front property line. Original home must be removed before Certificate of Occupancy can be approved.

to EH 5-23-18 3:49PM

$ PAID

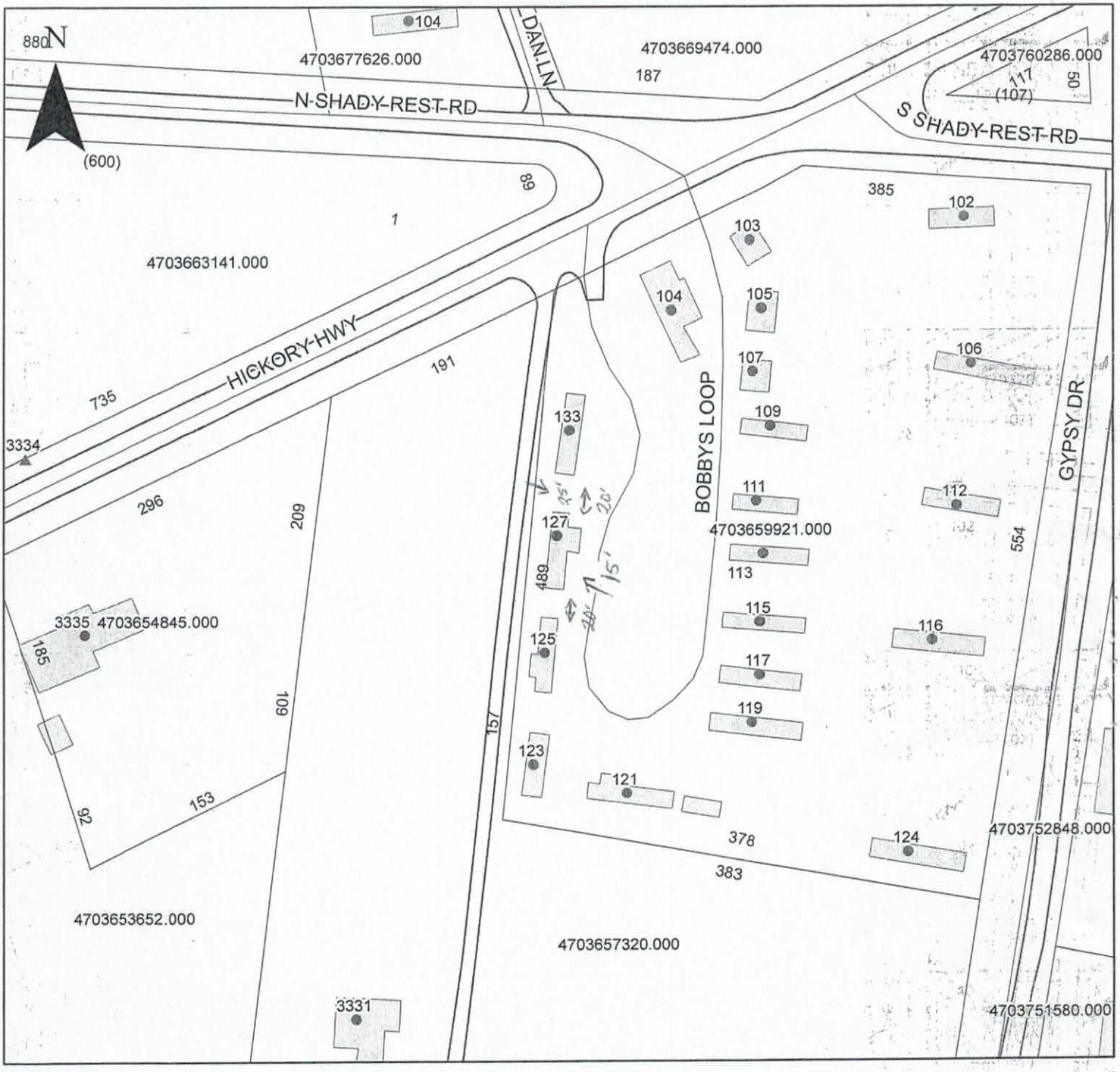
The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions, 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	139945	TOTAL FEES:	$ 77.25

ZONING DISCLAIMER



Property Address 127 Bobby's Loop

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. Applicant further acknowledges that the 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 1/23/19