ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 310361

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

PIN # 4704-48-8001

APPLICANT/OWNER: Bruce Hedrick APPLICANT ADDRESS: 182 Wedge View Way 28677

SITE ADDRESS: 116 Brady LN Statesville NC 28625 PHONE: 704-408-2702 ALT. PHONE 704-450-2747

SITE DIRECTIONS: Old Mountain Road toward Taylorsville Brady Ln on R Lot on R SAP CONTROLLED: ☐ YES ☒ NO

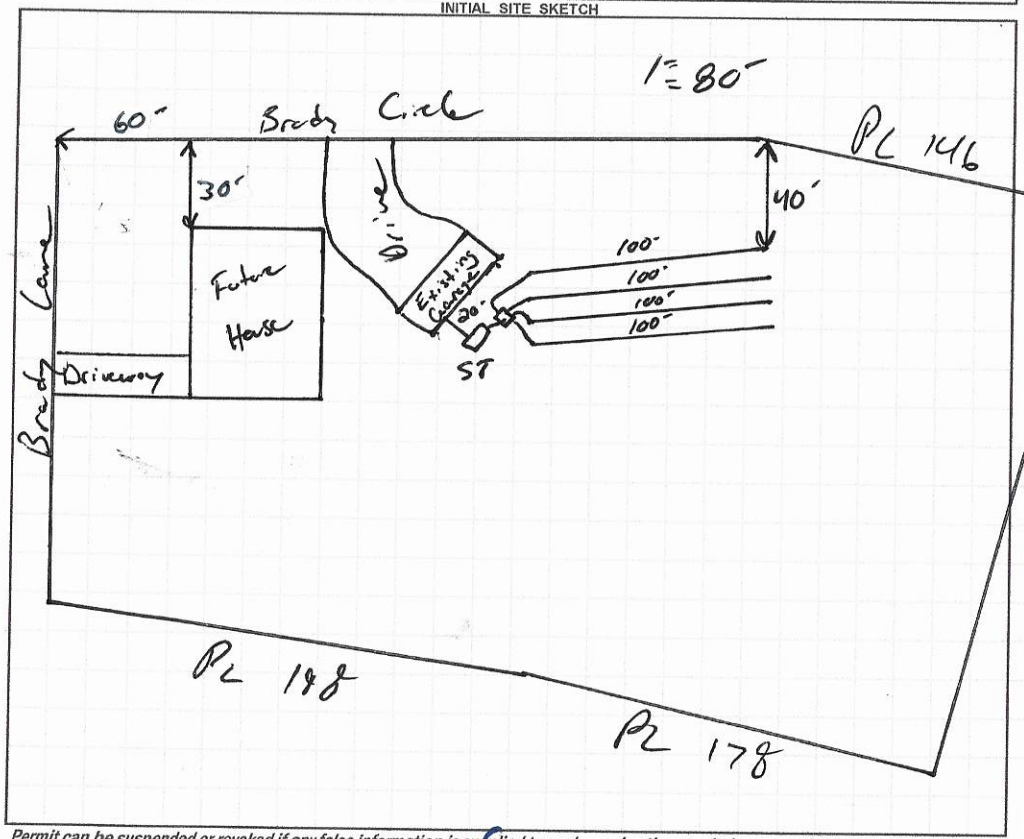
SUBDIVISION: Bruce Hedrick & Lyndra Hedrick SECTION: — LOT # 1 LOT AREA: 2.07 Acre DESIGN FLOW: Existing L.T.A.R.: Existing

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

Water Supply: ☐ Private ☒ Public ☐ Community

Comments / Conditions: Existing System functioning properly at time of inspection. Recommend pumping Tank & inspect D Box.

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: 9-22-20 Installed by:

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

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: [signature] Date: 9-17-2020

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

4 SB

RECEIVED AUG 2 6 2020

AP-310361

$250.00

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

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM*

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) 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: Bruce Hedrick Address: 182 Wedge View WAY Zip: 28677
Applicant Email: b.hedrick@live.com Phone: 704-408-2702 Alt. Phone: 704-450-2747
Owner Name: Bruce Hedrick Address: 182 Wedge View WAY Zip: 28677
Owner Email: b.hedrick@live.com Phone: 704-408-2702 Alt. Phone: 704-450-2747

Property Information:

Street Address: 116 BRADY LN STATESVILLE NC 28625
Subdivision Name: Bruce T Hedrick & Lyndral Hedrick Section/Phase: _____ Lot Number: 1
Driving Directions: From STATESVILLE GO 40 WEST TO OLD MT Rd Turn Right GO THY LIGHT 3rd Rd on Right Brady LN 116 on corner of Brady Ln & Brady Cir

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

CHECK FOUNDATION TYPE

(✓) New Single Family Residence Maximum Number of Bedrooms: 3 (✓) Crawl Space Foundation
( ) New Multi-Family Residence Maximum Number of Occupants: 4 ( ) 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: 2370 SQFT Max. Number of Employees: _____ Max. Number of Seats/Beds/Other: _____

Water Supply: ( ) Replacement Well – Reason: _____
( ) Multi-connection Well Number of Houses: 1 Number of Persons: 4
( ) New Well ting Well ( ) Community Well ( ) City Water (✓) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: 80's
(✓) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other: _____

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. industrial) to be generated?
( ) Yes (✓) 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:

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*) Bruce Hedrick Lynden Hedrick

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, Bruce Hedrick, am the legal owner(s) of the property located at 116 BRADY LN, identified as PIN (Parcel Identification Number) 4704488001, located in Iredell County, North Carolina.

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

Bruce Hedrick Lynden Hedrick — Signature of Owner(s)

8-4-20 — Date

Mooresville - Environmental Health
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

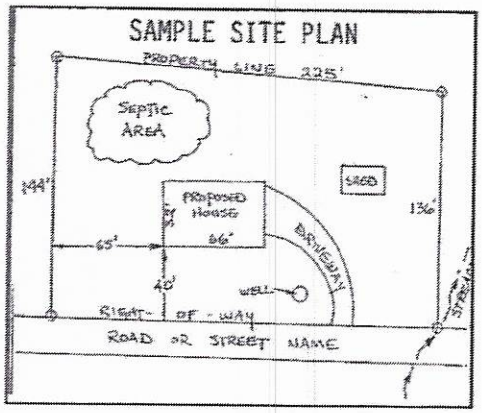
Statesville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

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:

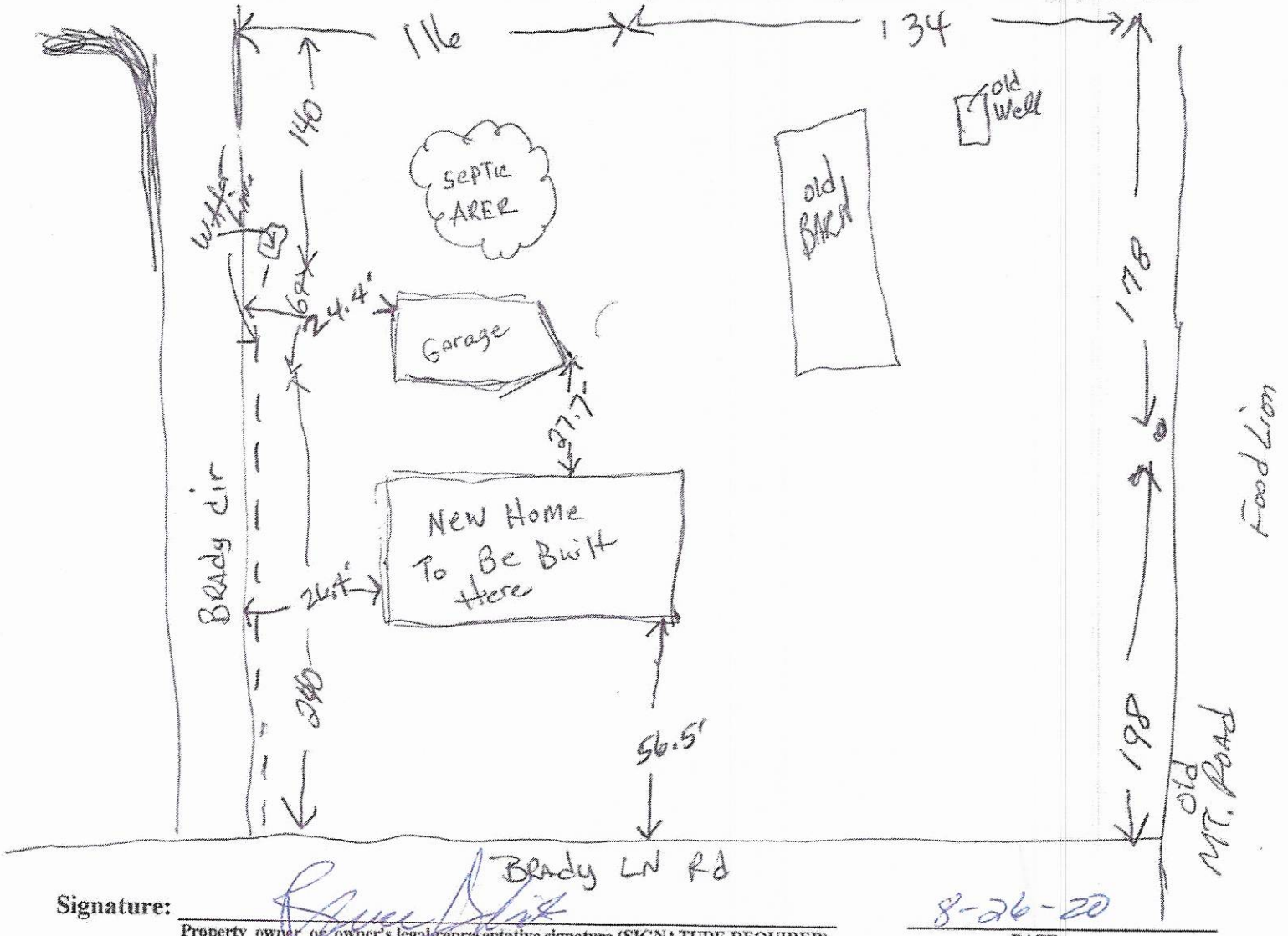
( ) Property Line measurements are clearly identified
( ) All proposed structures are indicated
( ) Front and side setbacks from property line
( ) Preferred driveway location and well location
( ) Area you prefer your septic system to be placed
( ) North arrow, or other sufficient indicator of direction

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

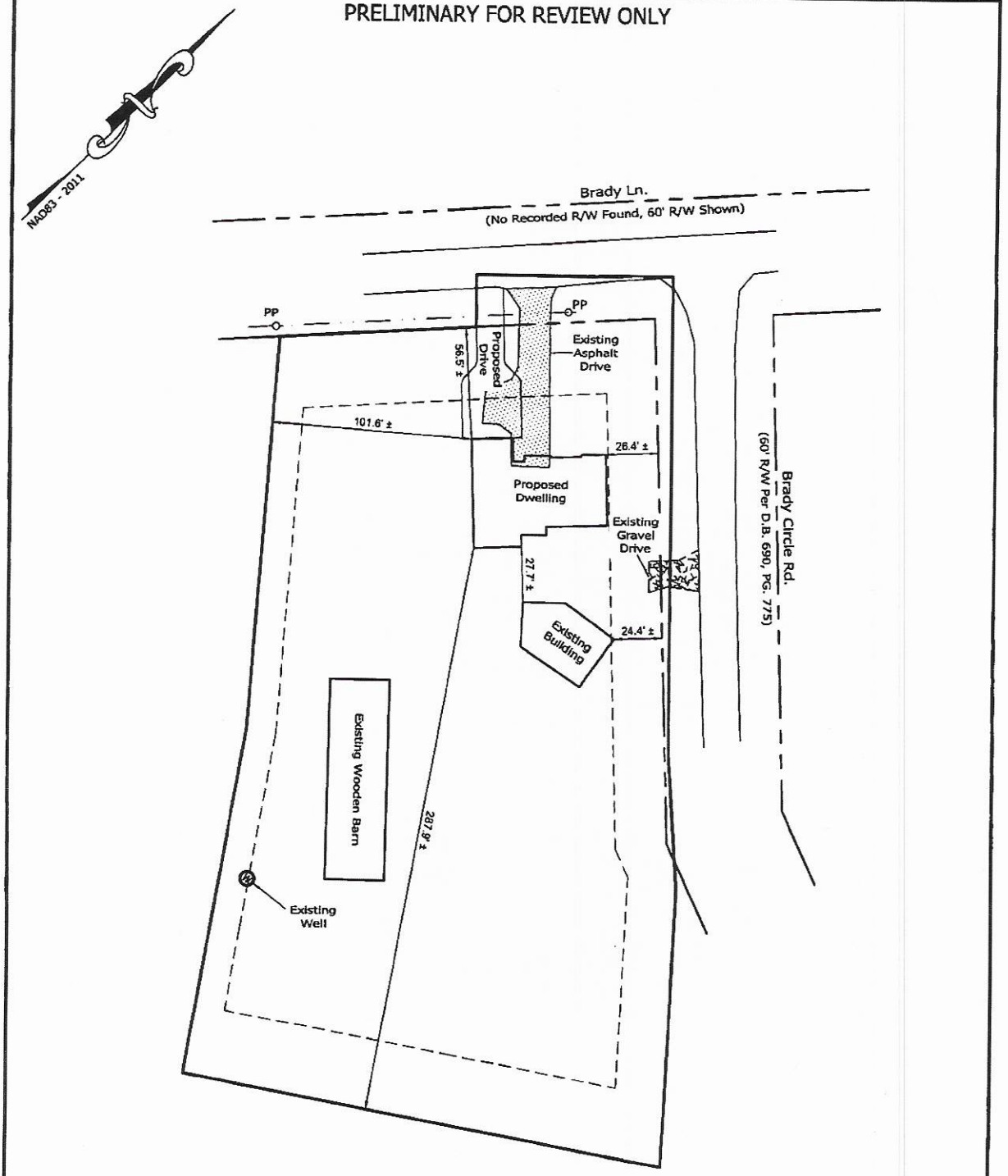
Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site



Signature: _____ _____ 8-26-20

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

PRELIMINARY FOR REVIEW ONLY



REFERENCE:

BEING ALL OF LOT 1 - RECOMBINATION PLAT FOR BRUCE T. HEDRICK & LYNDRA L. HEDRICK - AS RECORDED IN P.B. 71, PG. 150 - IREDELL COUNTY REGISTRY.

SETBACKS:

PROPERTY SUBJECT TO A 35' FRONT YARD (FY), 15' SIDE YARD (SY), 25' CORNER YARD (CY) & 35' REAR YARD (RY) PER IREDELL COUNTY ZONING ORDINANCE.

0 50 100 150

LEGEND	
FY	FRONT YARD SETBACK
RY	REAR YARD SETBACK
SY	SIDE YARD SETBACK
CY	CORNER YARD SETBACK
PP	POWER POLE
R/W	RIGHT OF WAY
P.B.	PLAT BOOK
PG.	PAGE

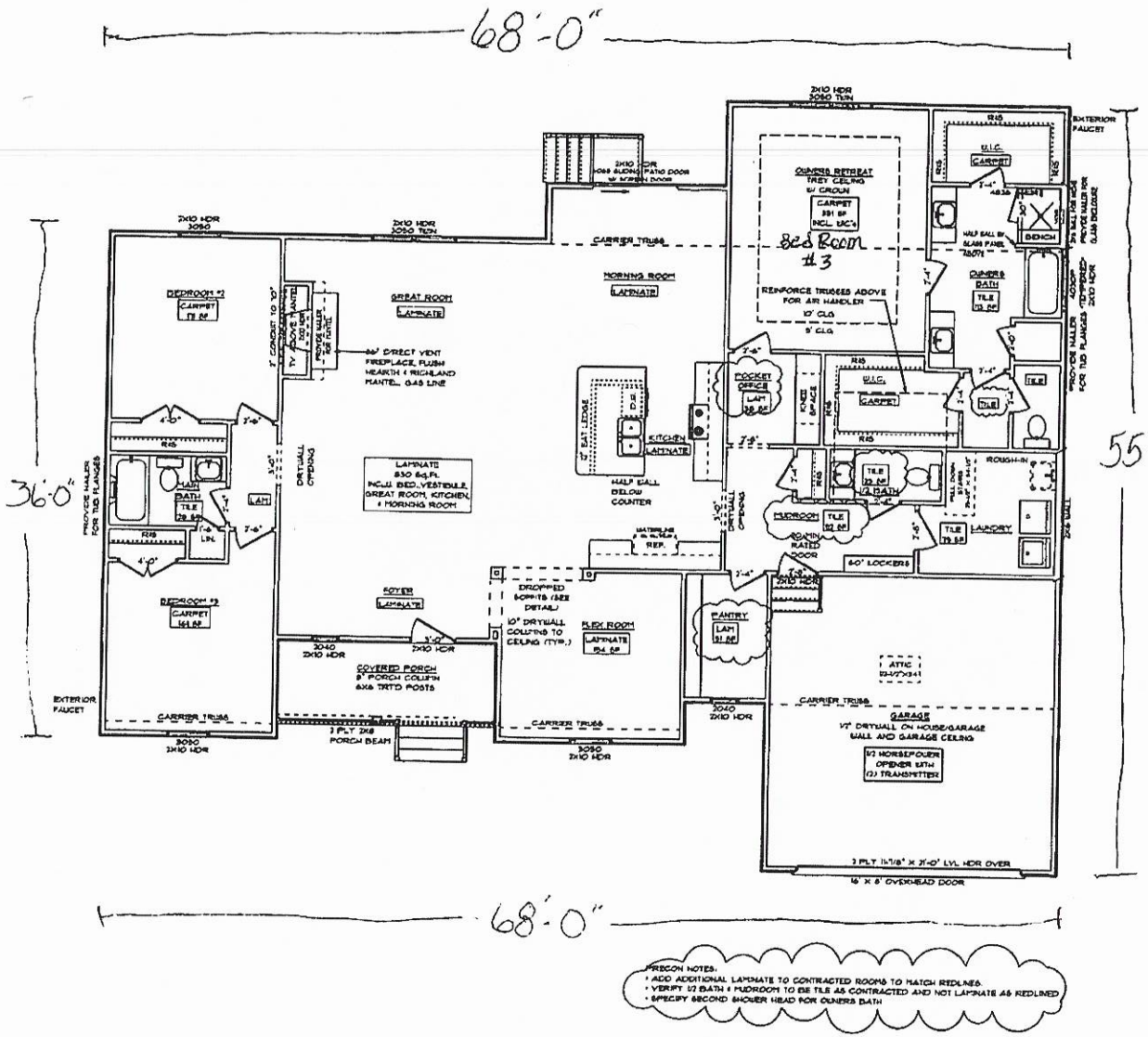
JORDAN GRANT
ENGINEERING • SURVEYING • PLANNING
JORDAN GRANT & ASSOCIATES, PLLC
P.O. BOX 151 * STATESVILLE, NC 28687
mattg@jordan-grant.com (704) 928-7919
FIRM # P-1227

Plot Plan For:

Hedrick

DRAWN BY: JWE	CHECKED BY: MIG
SCALE: 1" = 50'	
DEED REF: 2597 - 1281	PIN NO: 4704-48-8001
DATE OF MAP: 07-10-20	SURVEY DATE: 07-09-20
REVISION: 08-04-20	DRAWING FILE: 20200322

116 Brady Ln, Statesville, NC 28625
Shiloh TWSP - Iredell County - North Carolina



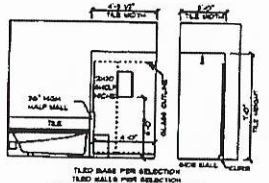
GENERAL FRAMING NOTES:
- DRYWALLED OPENINGS TO BE 8'-0" HEIGHT UNLESS OTHERWISE NOTED
- HEADERS TO BE 2-PLY 2X10 W/ (2) KING & (1) JACK STUDS UNLESS OTHERWISE NOTED
- ALL LVL'S AND CARRIER TRUSSES TO HAVE A MIN. OF (2) KING & (2) JACK STUDS, UNLESS NOTED OTHERWISE

PLAN NOTES:
- SMOOTH CEILINGS THROUGHOUT HOME
- PAINTED TRIM
- 5-1/4" BASEBOARDS
- 3-1/4" CASING ON INTERIOR DOORS AND WINDOWS HAVE DRYWALLED RETURNS
- 6-PANEL HOLLOW CORE MOLDED INTERIOR DOORS
- SILVERLINE, SINGLE-HUNG, LOW-E VINYL WINDOWS WITH SOLAR GLAZING

FLOORING NOTES:
- ALL FLOORING BREAKS OCCUR @ CENTER LINE OF DOOR OPENINGS UNLESS OTHERWISE NOTED
- FLOORING SQUARE FOOTAGES INCLUDE CLOSETS RELATIVE TO THE AREA UNLESS OTHERWISE NOTED
- SOME FLOORING SQUARE FOOTAGES MAY INCLUDE HALLS OR AREAS THAT CONNECT WITHOUT WALL SEPARATION IF THE SAME FINISH IS CONTINUED

WALL BRACING NOTES:

WALL BRACING IS UTILIZING AN ENGINEERED DESIGN AS FOLLOWS: ALL WALLS SHALL BE CONTINUOUSLY SHEATHED WITH MIN. 7/16" OSB FASTENED WITH 6d COMMON NAILS AT 6" O.C. ALONG EDGES AND 12" O.C. ALONG INTERMEDIATE FRAMING. ADD BLOCKING TO WALLS IF SHEATHING MAKES UP BETWEEN 25% AND 50% OF WALL AND REDUCE NAIL SPACING TO 3" O.C. ON EDGES AND 6" O.C. ON INTERMEDIATE FRAMING. PORTAL FRAME PER DETAIL SHALL BE CONSTRUCTED AT THE GARAGE DOOR OPENING.



TILED BASE PER SELECTION
TILED WALLS PER SELECTION
GLASS DOOR SIZE PER PLAN (6' TALL)
NICHE TO 24-7" LARGER THAN CALLOUT
4' TILED SHOWER DETAIL
(2) WALLS & HALF WALL TILE
PETERLINE WATERPROOFING ON FLOORS AND WALLS
PROVIDE NAILER FOR GLASS ENCLOSURE

SANTA BARBARA II AMERICAN TRADITION / CUSTOM
MAIN FLOOR PLAN
9' CEILING HEIGHT

PRECON NOTES:
- ADD ADDITIONAL LAMINATE TO CONTRACTED ROOMS TO MATCH REDLINES.
- VERIFY 1/2 BATH & MUDROOM TO BE TILE AS CONTRACTED AND NOT LAMINATE AS REDLINED
- SPECIFY SECOND SHOWER HEAD FOR OWNERS BATH

SQUARE FOOTAGES:
MAIN FLOOR - 2344 SQFT
GARAGE - 484 SQFT
PORCHES - 236 SQFT
PORCH - 93 SQFT

CUSTOM BUILT FOR: LYNDRA AND BRUCE HEDRICK
LOT: 34
BLK: 02
SUB: [illegible]
LOT #: 30364
DESCRIPTION: 116 BRADY LANE MOORESVILLE, NC 28673 IREDELL COUNTY

DRAWN BY: DHS
DATE: 8/6/2020
SCALE: 1/8" = 1'-0"
SHEET: 6

SCHUMACHER HOMES
Charlotte, NC
341 Alcove Road
Mooresville, NC 28117
(877) 267-3482
www.schumacherhomes.com

Acknowledgement Of
Plans Submittal ONLY!
Date 9-17-2020
Date 9-22-2

IREDELL COUNTY · NC

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

APPLICATION NUMBER
310361 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4704488001.000	116 BRADY LN	Iredell County

Owner Information	Applicant Information
Name: HEDRICK BRUCE T+LYNDRA L Address: , Phone:	Name: HEDRICK BRUCE T+LYNDRA L Address: , Phone:

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
2.07	35	35	15	25	WSIV-CA Catawba/Lake Norman	NO

Remarks
SFD

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.

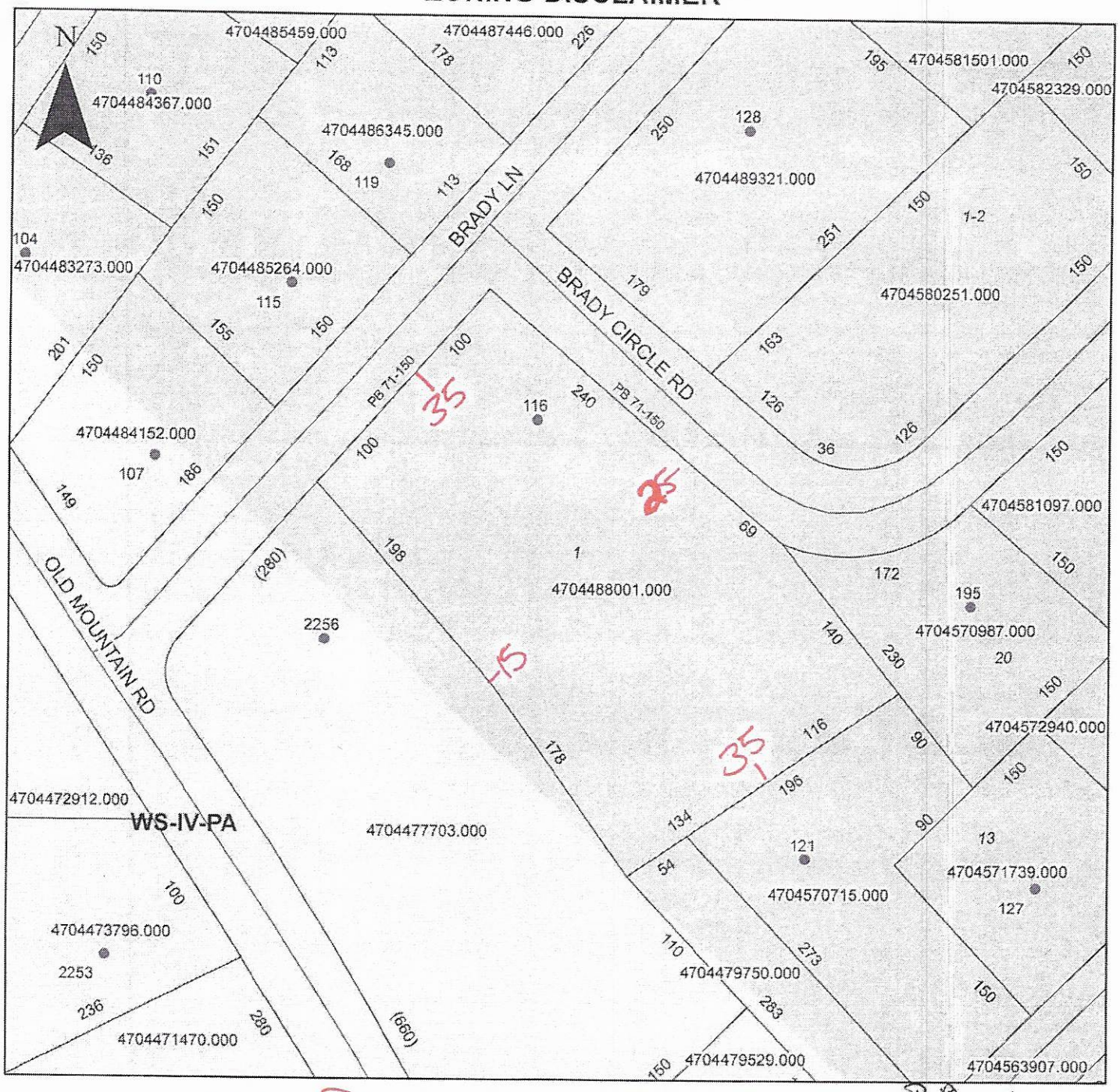
Signature of Owner/Contractor

Date: 08/26/2020

Permit Number	310361

TOTAL FEES:	$77.25

ZONING DISCLAIMER



Property Address 116 Brady Lane

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

8-26-20
Date