ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 319149

MJ 12:00

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

PIN # 4705 -- 24 -- 7136

APPLICANT/OWNER: Brian Adams APPLICANT ADDRESS: 109 Airplane Ct. Mooresville NC 28117

SITE ADDRESS: 307 Massey Dean Rd. Statesville NC 28625 PHONE: 704-500-8754 ALT. PHONE

SITE DIRECTIONS: I-40 → Old Mtn Rd → (N) Old Mtn Rd → (R) Massey Dean → lot on (L) SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Ponderosa Farms SECTION: N/A LOT # 7 LOT AREA: 0.77 ac DESIGN FLOW: 360 gpd L.T.A.R.: 0.3 (I & R)

Septic Tank	1000	(gal)	STB	760	Date	3-29-20	☒ 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:	25% Reduction			☐ Business	No. Persons	6	☐ Private	
Pump Make		Model			Serial #		Repair System Description:	50% Reduction			☐ Other	No. Employees		☒ Public	
# Nitrification Fields	1	# Lines	4		Linear Ft	304'	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☒ Crawl Space		☐ Community	
Trench Width	36"	Trench Bottom Depth(Low side)		30"	Gravel Depth	N/A	☒ GRAVITY	☐ PRESSURE			☐ Basement w/plumbing			☐ Basement w/o plumbing	

Comments / Conditions: Do not park, pave, grade, drive or bury utilities in drainfield. Divert all drainage from drainfield.

Red Filter installed
ST 10ft to house, ST - 11ft to PL
Installed Quick 4 as shown

INITIAL SITE SKETCH

See attached site plan by Michael Athanas & Associates 7/2/21

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 plan 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: 10/13/21 Installed by: Richard Abernathy Co.

IMPROVEMENT PERMIT by: D. Mabery Date: 7/2/21 OPERATION PERMIT by: Maria Dotson Date: 10/13/22

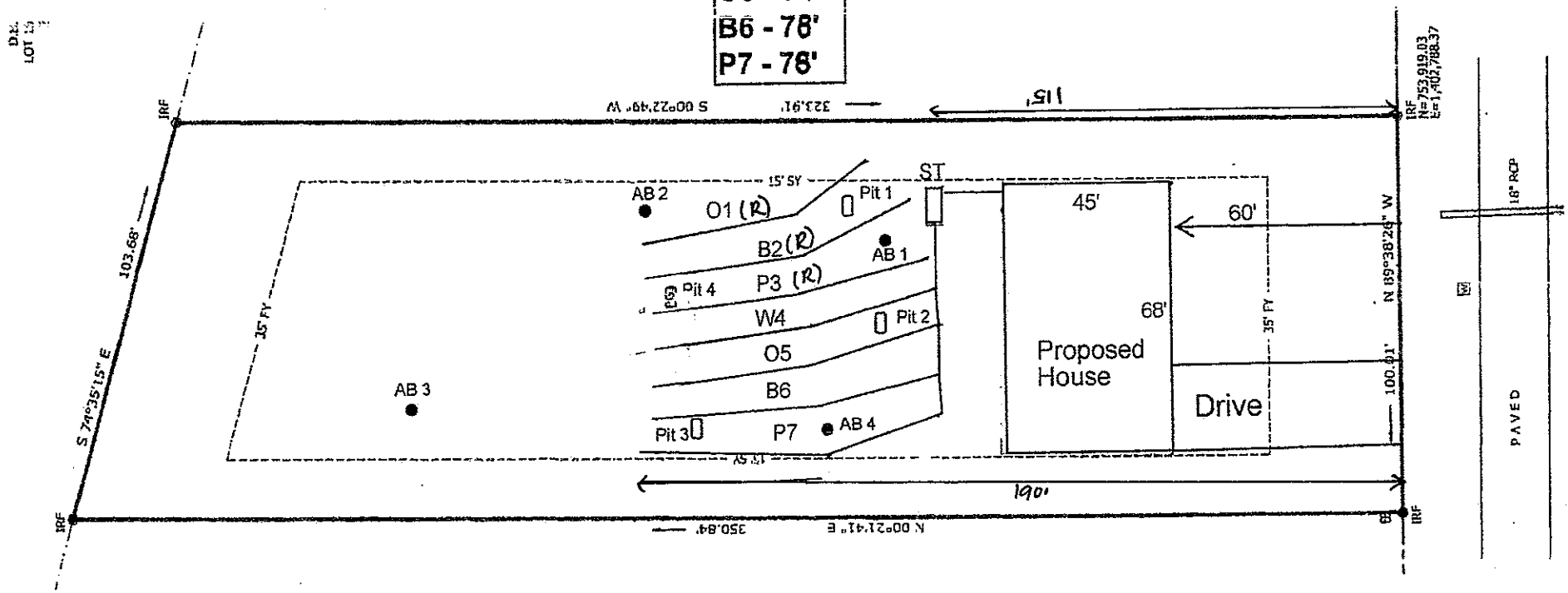
AUTHORIZATION TO CONSTRUCT by: [signature] Date: 9-21-2021 Existing System Inspected by: Date:

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

APPROVED JUL 0 2 2021

DW

O1 - 65'
B2 - 70'
P3 - 71'
W4 - 74'
O5 - 74'
B6 - 78'
P7 - 78'



N

Scale
1"=40'

MA&A
SOIL & ENVIRONMENTAL CONSULTANTS

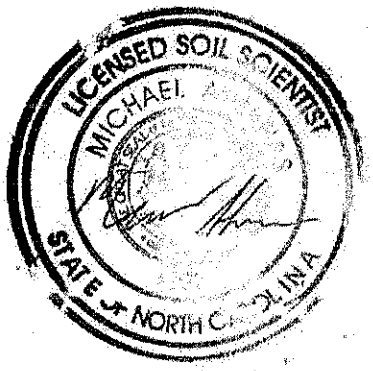
MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
556Walden Trail
Weddington, NC 28173
(704) 576-3887
6/25/2021

Reference: Data Sheet for 307 Massey Deal Rd, Ponderosa Farms Lot 7
House Footprint: See attached plan
Building Setbacks: 35' front/rear, 15' side
Water Source: County water
Number of Bedrooms/Daily Flow: 3/360 GPD
Proposed LTAR: 0.3 GPD/FT^2
Proposed System Type: 25% Reduction
Proposed Repair System Type: PPBPS
Distribution: Gravity-End Cap/Drop Boxes
Septic Tank Size: 1000 gallons
Proposed Trench Bottom: 24-36"

Line	Design Length	Actual Length
Orange 1		65'
Blue 2		70'
Pink 3		71'
White 4	**75'**	**75'**
Orange 5	**75'**	**75'**
Blue 6	**75'**	**75'**
Pink 7	**75'**	**75'**

Initial System: 300' **Repair System:** 206'

Comments:



PROPERTY ID #: 4705247136
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Christine Sheridan APPLICATION DATE
ADDRESS: PO Box 973, Mooresville, NC 28115 DATE EVALUATED: 6/2021
PROPOSED FACILITY: 3 BDRM PROPOSED DESIGN FLOW (.1949): 360 GPD PROPERTY SIZE: 0.77 AC
LOCATION OF SITE: 307 Massy Deal Rd, Ponderosa Farms Lot 7 PROPERTY RECORDED:
WATER SUPPLY: ☐ Private X Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: X Auger Boring X Pit ☐ Cut TYPE OF WASTEWATER: X Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
PIT 1	LS 6%	0-8	Br CL WSBK	FR SS SP SXP	N/A	48"	N/A	N/A	PS 0.3
		8-28	R C SBK	FR SS SP SXP					
		28-48	R CL WSBK	FR SS SP SXP	heavy sap incl		28"+		
PIT 2	LS 6%	0-6	Br CL WSBK	FR SS SP SXP	N/A	54"	N/A	N/A	PS 0.3
		6-33	R C SBK	FR SS SP SXP					
		33-54	R CL WSBK	FR SS SP SXP	Sap incl common 33"+				
					mica 6"+				
PIT 3	LS 6%	0-8	Br CL WSBK	FR SS SP SXP	N/A	50"	N/A	N/A	PS 0.3
		8-27	R C SBK	FR SS SP SXP					
		27-50	R CL WSBK	FR SS SP SXP	mica common 25"+				
					some WR incl		27"+		
PIT 4	LS 6%	0-7 /8-10	Br CL WSBK	FR SS SP SXP	N/A	53"	SAP/WR INCL	N/A	PS 0.3
		7-28	R C SBK	FR SS SP SXP					
		28-53	R CL WSBK	FR SS SP SXP					
					Band of weathered rock @ 32-36"				

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	900 FT^2	412 FT^2
System Type(s)	25% Reduction	PPBPS
Site LTAR	0.3	0.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: MA&A
OTHER(S) PRESENT:

COMMENTS:

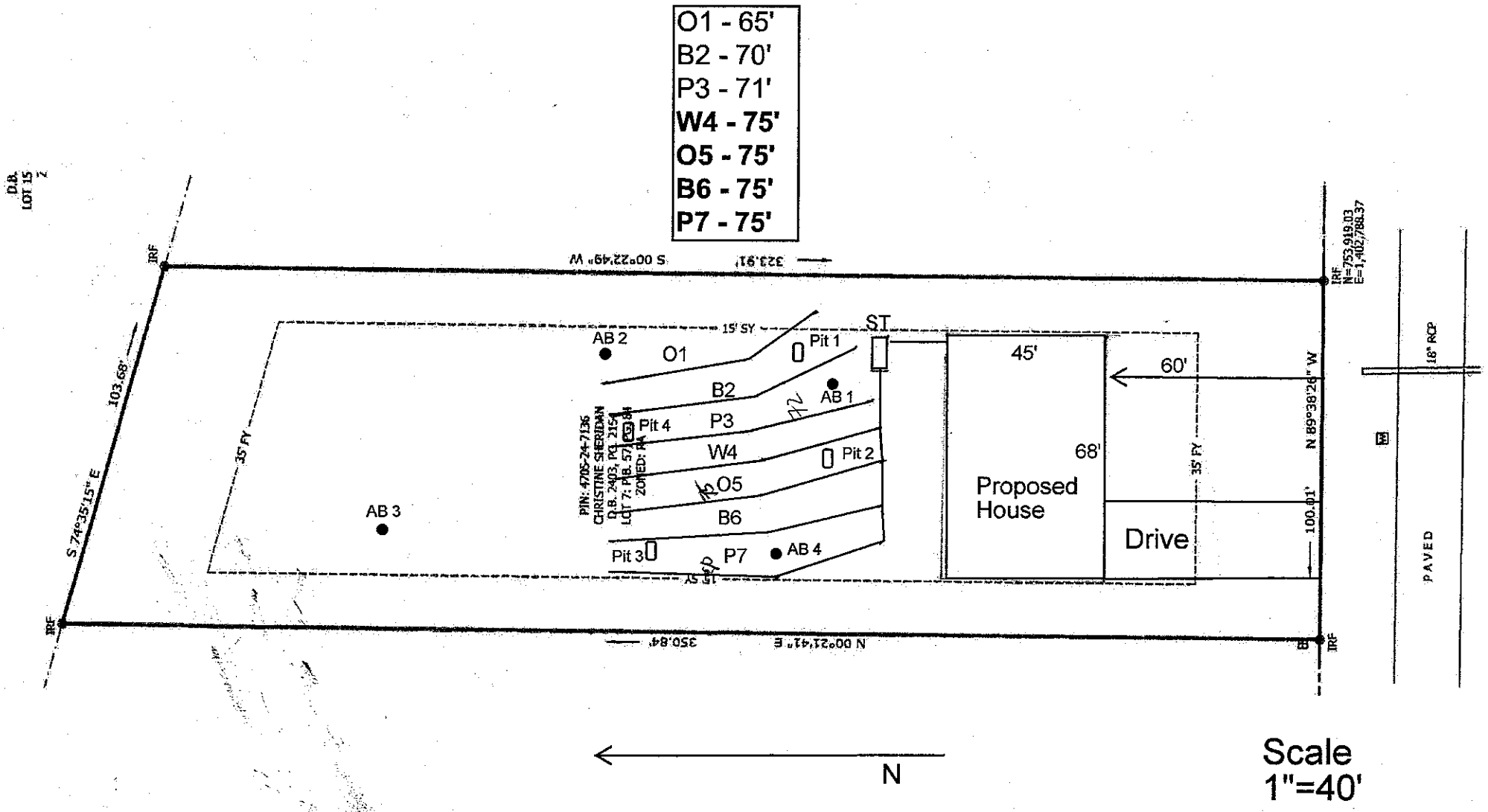
SOIL/SITE EVALUATION

(Continuation Sheet)

PROPERTY ID #: 4705247136
DATE OF EVALUATION: _____
COUNTY: IREDELL

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
AB 1	LS 6%	0-6	Br CL WSBK	FR SS SP SXP	N/A	48"	N/A	N/A	PS 0.3
		6-24	R C SBK	FR SS SP SXP					
		24-48	R CL WSBK	FR SS SP SXP					
AB 2	LS 6%	0-4	Br CL WSBK	FR SS SP SXP	N/A	48"	F-C SAP	N/A	PS 0.3
		4-24	R C SBK	FR SS SP SXP					
		24-48	R CL WSBK	FR SS SP SXP					
AB 3	LS 6%	0-7	Br CL WSBK	FR SS SP SXP	N/A	48"	Com SAP	N/A	PS 0.3
		7-26	R C SBK	FR SS SP SXP					
		26-48	R CL WSBK	FR SS SP SXP					
AB 4	LS 6%	0-6	Br CL WSBK	FR SS SP SXP	N/A	48"	N/A	N/A	PS 0.3
		6-24	R C SBK	FR SS SP SXP					
		24/48	R CL WSBK	FR SS SP SXP					

COMMENTS: _____


O1 - 65'
B2 - 70'
P3 - 71'
W4 - 75'
O5 - 75'
B6 - 75'
P7 - 75'
D.B. LOT 15
IRF
S 00°22'49" W
323.91'
IRF
N=753,919.03
E=1,402,788.37
103.68'
S 74°35'15" E
35' FY
15' SY
AB 2
O1
Pit 1
ST
B2
AB 1
P3
Pit 4
W4
Pit 2
O5
AB 3
B6
Pit 3
P7
AB 4
45'
60'
68'
Proposed House
Drive
35' FY
N 89°38'26" W
100.01'
18" RCP
PAVED
IRF
IRF
N 00°21'41" E
350.84'
N
Scale
1"=40'

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: (X) 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: Brian Adams Address: 109 Airplane Court Zip: 28117
Applicant Email: bwAdams85@gmail.com Phone: 704 500 8754 Alt. Phone: _____
Owner Name: BwA Builders LLC Address: 11 Zip: 11
Owner Email: 11 Phone: 11 Alt. Phone: _____

Property Information:

Street Address: 307 Mossey Dean Road, Statesville, NC 28625
Subdivision Name: Shiloh North / Ponderosa Farm Section/Phase: _____ Lot Number: 7
Driving Directions: Parcel ID: 4705247136

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

(✓) 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: 6
( ) Swimming Pool
( ) Other Addition/Structure: _____
Non-Residential Site Development: Type of Business: _____
Square Footage of Building: _____ Max. Number of Employees: _____ Max. Number of Seats/Beds/Other: _____

CHECK FOUNDATION TYPE

(✓) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

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

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: _____
(✓) 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: _____ 9-13-21
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

Public Health
Iredell County Health Department

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public Health
Iredell County Health Department

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*) Ben Adam

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, Ben Adam, am the legal owner(s) of the property located at 307 Massey Dean Road, identified as PIN (Parcel Identification Number) 4705247136, located in Iredell County, North Carolina.
I do hereby authorize (**print legal representative/company name**) BWA 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.

Ben Adam
Signature of Owner(s)

9/13/21
Date

Mooresville - Environmental Health

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

Statesville - Environmental Health

Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

RECEIVED JUN 25 2021

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM AP-319149 Paid: $350.00

Expedited Review

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) 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)** Please contact Gary McNeely (704-310-1832) prior to evalution

Applicant Name: Brian Adams **Address:** 109 Airplane Court **Zip:** 28117

Applicant Email: bwadams85@gmail.com **Phone:** 704-500-8754 **Alt. Phone:** _____

Owner Name: BWA BUILDERS LLC **Address:** 118 Magnolia Park Drive **Zip:** 28117

Owner Email: bwadams85@gmail.com **Phone:** 704-500-8754 **Alt. Phone:** _____

****

Property Information:

Street Address: 307 Massey Deal Road, Statesville NC

Subdivision Name: Ponderosa Farms **Section/Phase:** _____ **Lot Number:** 7

Driving Directions: _____

****

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

CHECK FOUNDATION TYPE

(X) New Single Family Residence — **Maximum Number of Bedrooms:** 3 — (X) Crawl Space Foundation
( ) New Multi-Family Residence — **Maximum Number of Occupants:** 6 — ( ) 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:** _____
(X) New Well ( ) Existing Well ( ) Community Well (X) City Water ( ) Other Public Water

****

Desired Septic System Type: ***(you may rank in order of preference)*** **Year existing system installed:** _____
(X) 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: Brian Adams 6/21/2021

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, BWA BUILDERS LLC, am the legal owner(s) of the property located at 307 Massey Deal Road, Statesville NC, identified as PIN (Parcel Identification Number) 4705247136, located in Iredell County, North Carolina.

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

Signature of Owner(s)	Date	Signature of Witness	Date
[signature]	6/21/2021		

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

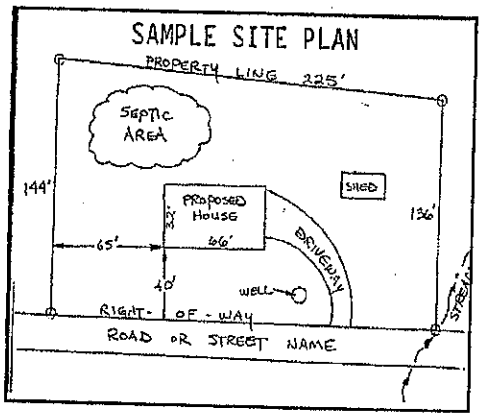
Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

IREDELL COUNTY 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:

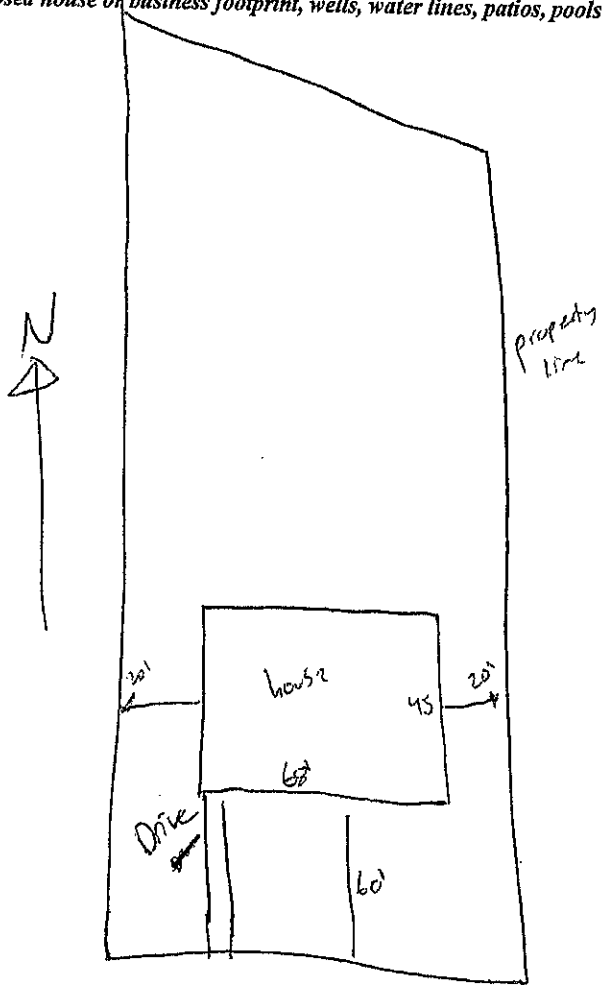
- (✓) Property Line measurements are clearly identified
- (✓) All proposed structures are indicated
- (✓) Front and side setbacks from property line
- (✓) Preferred driveway location and well location
- (X) Area you prefer your septic system to be placed
- (X) North arrow, or other sufficient indicator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

Circle N/A on the following if appropriate:

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: Erin Adam

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

9/13/2021

DATE

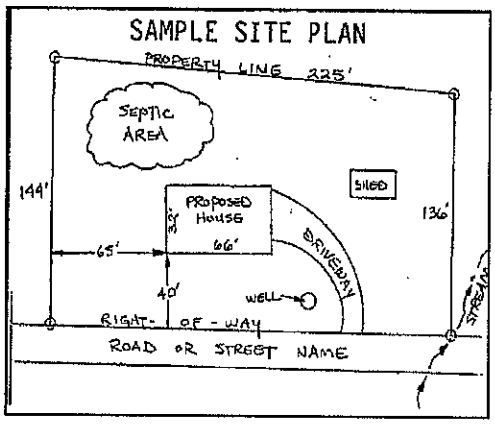
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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

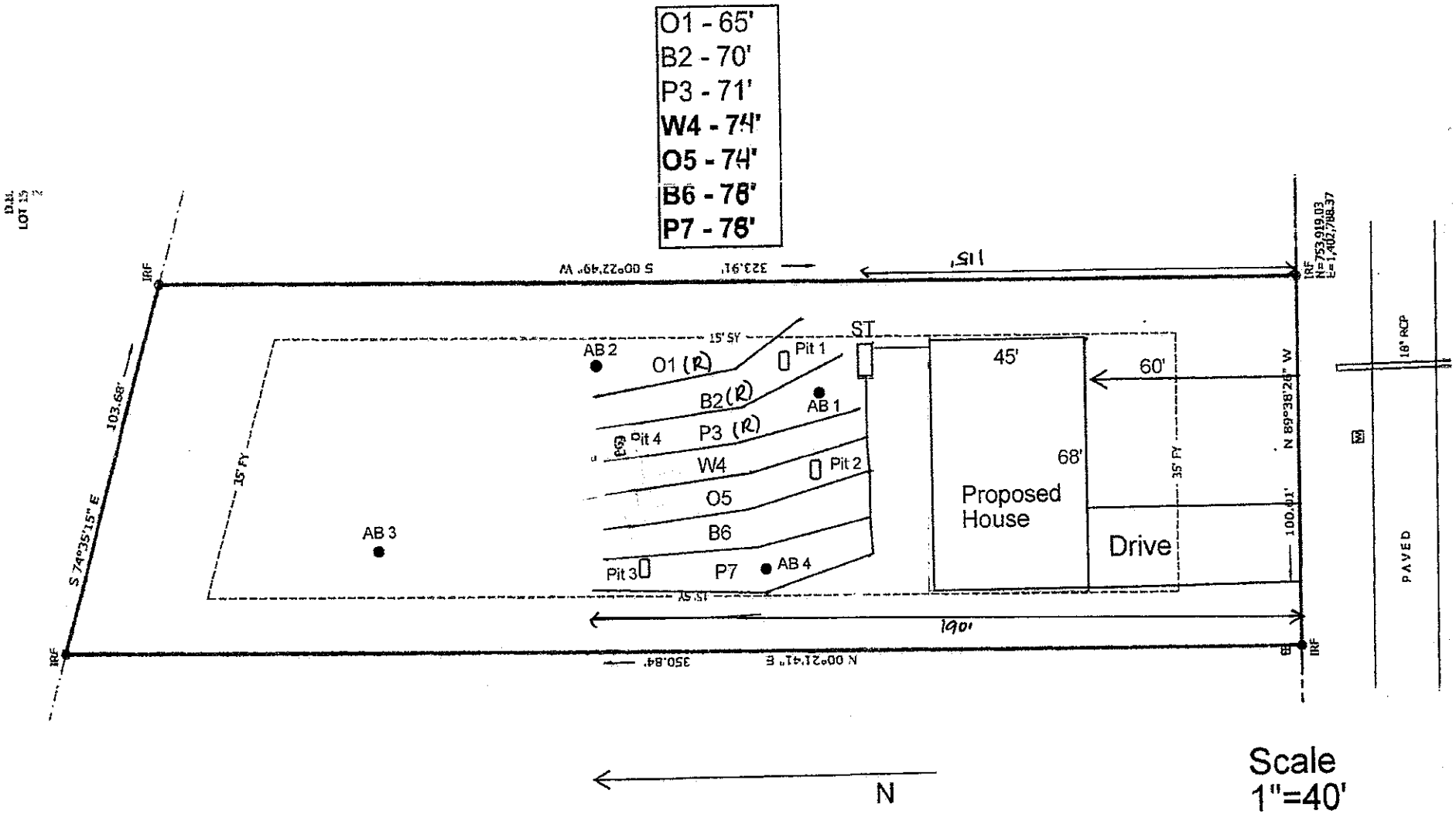
See Attached Plan

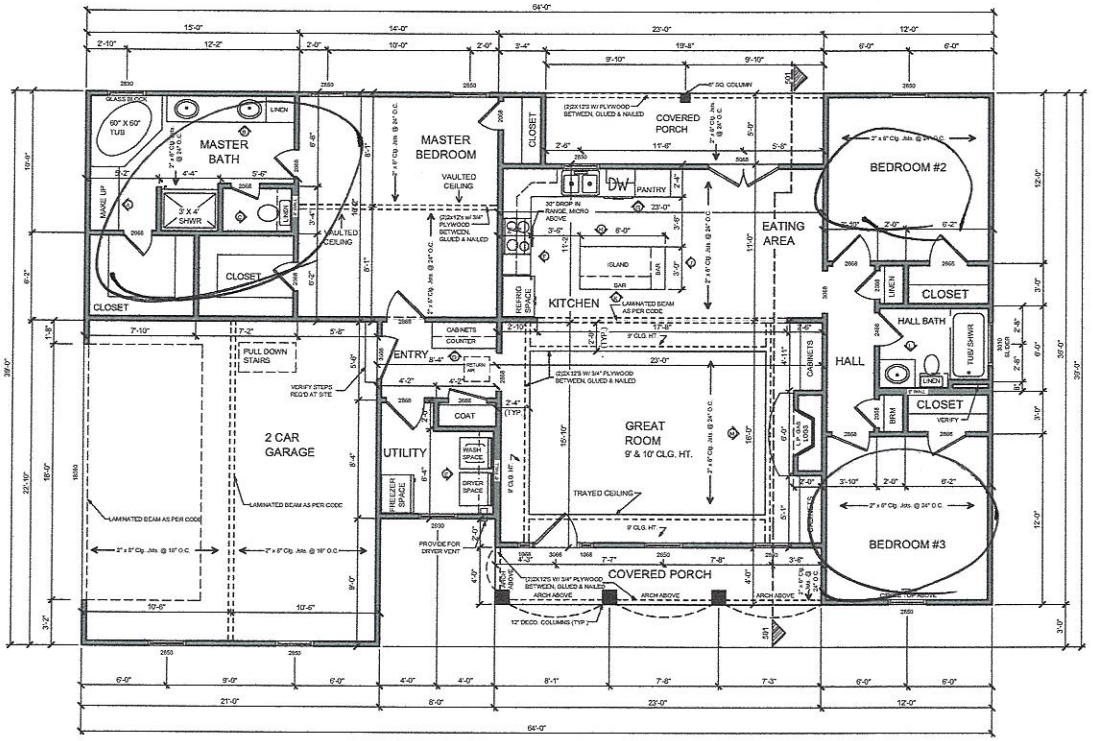
Signature: Brian Eden

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

6/21/2021

DATE


O1 - 65'
B2 - 70'
P3 - 71'
W4 - 74'
O5 - 74'
B6 - 76'
P7 - 76'
IRF
S 74°35'15" E
103.68'
S 00°22'49" W
323.91'
115'
IRF
N=753,919.03
E=1,402,788.37
ST
15' SY
AB 2
O1 (R)
Pit 1
B2 (R)
AB 1
P3 (R)
Pit 4
W4
Pit 2
O5
B6
AB 3
Pit 3
P7
AB 4
15' SY
35' FY
45'
60'
68'
Proposed House
Drive
35' FY
N 89°38'26" W
100.01'
190'
N 00°21'41" E
350.84'
IRF
18" RCP
PAVED
N
Scale
1"=40'



NOTES:

1. CONTRACTOR TO VERIFY ALL DIMENSIONS & EXISTING SITE CONDITIONS PRIOR TO CONSTRUCTION.
2. DOOR & WINDOW SIZES ARE GIVEN IN FEET AND INCHES IN WIDTH AND HEIGHT RESPECTIVELY. DOOR EXAMPLE: 3068 3'-0" WIDE BY 6'-8" TALL WINDOW EXAMPLE: 3040 3'-0" WIDE BY 4'-0" TALL
3. FURTHERMORE, IT SHALL BE THE SOLE RESPONSIBILITY OF THE CONTRACTOR TO VERIFY CLEARANCES OF THE AFOREMENTIONED ITEMS PRIOR TO CONSTRUCTION.
4. REFER TO MANUFACTURERS SPECS FOR ROUGH OPENING DIMENSIONS
5. IF HVAC UNIT(S) AND WATER HEATER(S) ARE NOT SHOWN ON FLOOR PLAN, CONTRACTOR TO LOCATE

FLOOR PLAN

SCALE: 1/4" ========== 1'-0"

AREAS:	1654	S.F. HEATED
	665	S.F. UNHEATED
	2319	S.F. TOTAL UNDER ROOF
		MASONRY NOT INCLUDED

NOTE:
LOCATE HVAC AND W.H. IN ATTIC.
ALL CEILING HEIGHTS SHALL BE APPROX. 9'-0",
UNLESS OTHERWISE NOTED.

Acknowledgement Of
Plans Submittal ONLY!

Date 9-21-2021

Date 10/13/21

HOUSE PLAN GALLERY, INC.
6659 HWY. 98 WEST, HATTIESBURG MS, 39402
EMAIL: HOUSEPLANGALLERY@COMCAST.NET \\ FAX: (601) 264-4483
DRAWINGS AND CONCEPTION TO BE VERIFIED BY CONTRACTOR. © COPYRIGHTED ANY AND ALL UNAUTHORIZED REPRODUCTION PROHIBITED

DATE: 02/12/04

DRAWN BY: C.T.B.

CHECKED BY: G.L.M.

PLAN NUMBER HPG- 1654

SHEET NUMBER 3

PROFESSIONAL MEMBER

IREDELL COUNTY · NC

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

APPLICATION NUMBER
319149 Issue Date: 06/25/2021

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4705247136.000	307 MASSEY DEAL RD	Iredell County

Owner Information	Applicant Information
Name: SHERIDAN CHRISTINE	Name: MICHAEL ATHANAS & ASSOCIATES
Address: PO BOX 973	Address: 561 ENNIS RD
MOORESVILLE, NC 28115	WEDDINGTON, NC 28173
Phone:	Phone: (704)576-3887

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0	35	35	15	15	N/A	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.

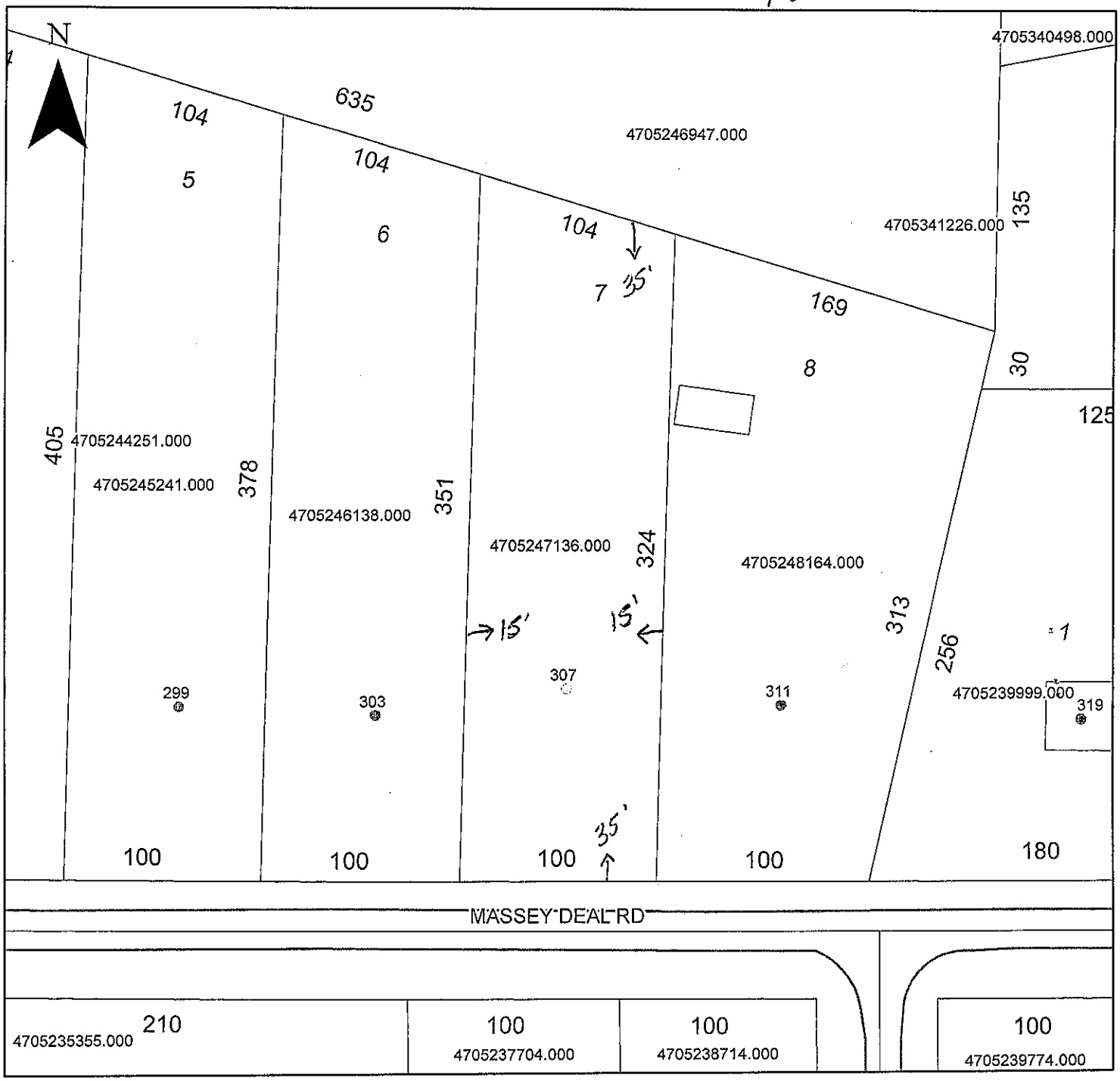
Date: 06/25/2021

Signature of Owner/Contractor

Permit Number	319149	TOTAL FEES:	$77.25

RA
WS - ND
FL - ND

ZONING DISCLAIMER



Property Address 307 Massey Deal Rd.

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

6/25/2021

Date