ICHD–ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 235130

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

PIN # 4722-84-7401

APPLICANT/OWNER: Bell Construction Co. Inc / Dwayne Bell APPLICANT ADDRESS: P.O. Box 1102 Statesville, NC

SITE ADDRESS: 114 Troutman Farm Rd. Statesville, NC 28677 PHONE: 704-902-0869 ALT. PHONE 704-873-6378

SITE DIRECTIONS: Old Mtn Rd → L on Troutman Farm Rd → 1st lot on Right SAP CONTROLLED: ☐ YES ☒ NO

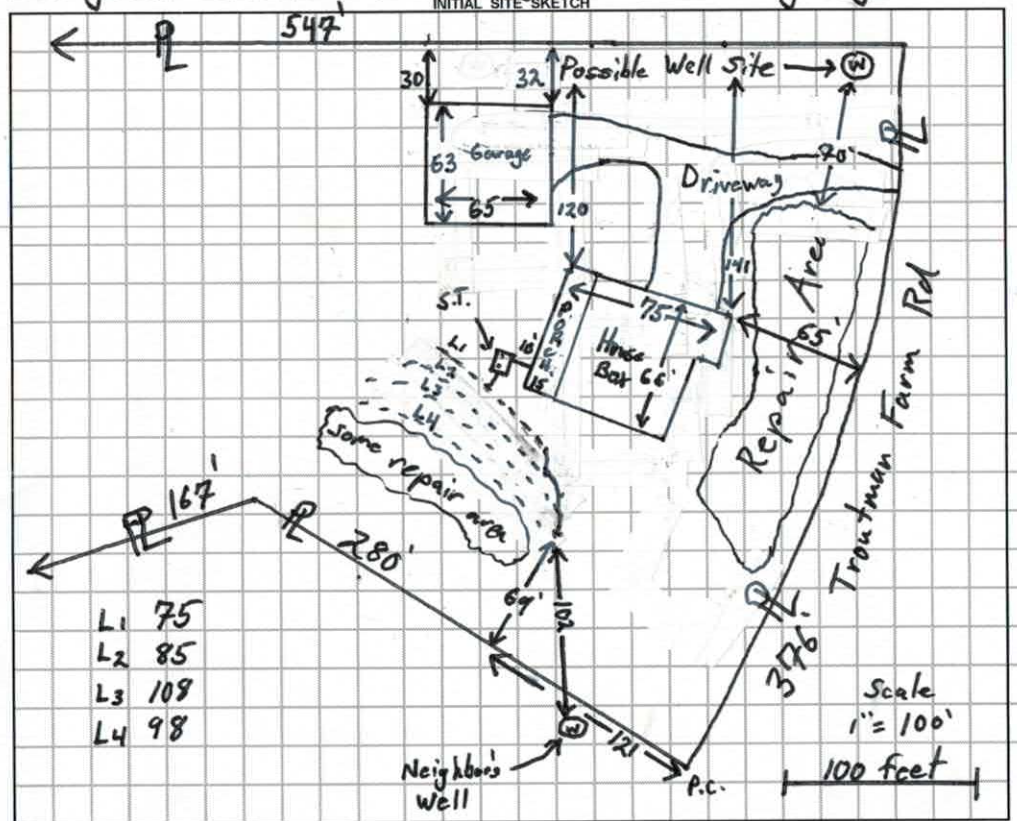
SUBDIVISION: Howard E. Sherrill SECTION: — LOT # PT4 LOT AREA: 3.51 acres DESIGN FLOW: 360 GPD L.T.A.R.: 0.275

Septic Tank	1000	(gal)	STB		Date		☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	
Pump Tank	—	(gal)	PT	—	Date	—	System Description: 25% Reduction (serial distribution)				
Pump Make	—	Model		—	Serial #	—	Repair System Description: PM 25% Reduction				
# Nitrification Fields	1	# Lines	4		Linear Ft	328	Maintenance Agreement Required:	☐ YES	☒ NO		
Trench Width	36"	Trench Bottom Depth(Low side)			32"-33"		Gravel Depth	—	☒ GRAVITY	☐ PRESSURE	

☒ Residence	No. Bedrooms	3	Water Supply
☐ Business	No. Persons	6	☒ Private
☐ Other	No. Employees		☐ Public
☐ Slab	☒ Crawl Space		☐ Community
☐ Basement w/plumbing			☐ Basement w/o plumbing

Comments / Conditions: Though 366 l.f. of line has been laid out, only 328 need be installed. Recommend pumping septic tank every 3-5 years. No business activity to occur in garage. Garage may have sink + commode, but no kitchen / living space without prior health department approval. Recommend 1500 gallon tank. Divert house foundation + down spout drains + garage drains away from any septic components

INITIAL SITE SKETCH



AS BUILT SKETCH

Tank 11.5' off House

Installed as Shown

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: Dwayne M. Bell Date: 7/9/19 Installed by: Bell Construction

IMPROVEMENT PERMIT by: Tom Shuck Date: 7/8/19 OPERATION PERMIT by: Date: 5-8-2020

AUTHORIZATION TO CONSTRUCT by: Tom Shuck Date: 7/9/19 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.

Sheet 1 of 3

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

PROPERTY ID #: 4732-84-9401
COUNTY: Iredell

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

OWNER: Dwayne Bell
ADDRESS: 114 Trentman Farm Rd. Statesville
PROPOSED FACILITY: 3BR-3FR
PROPOSED DESIGN FLOW (.1949): 360 GPD
LOCATION OF SITE: 114 Trentman Farm Rd Statesville

APPLICATION DATE: 6/24/19
DATE EVALUATED: 7/25/19
PROPERTY SIZE: 3.5 acres
PROPERTY RECORDED: Yes

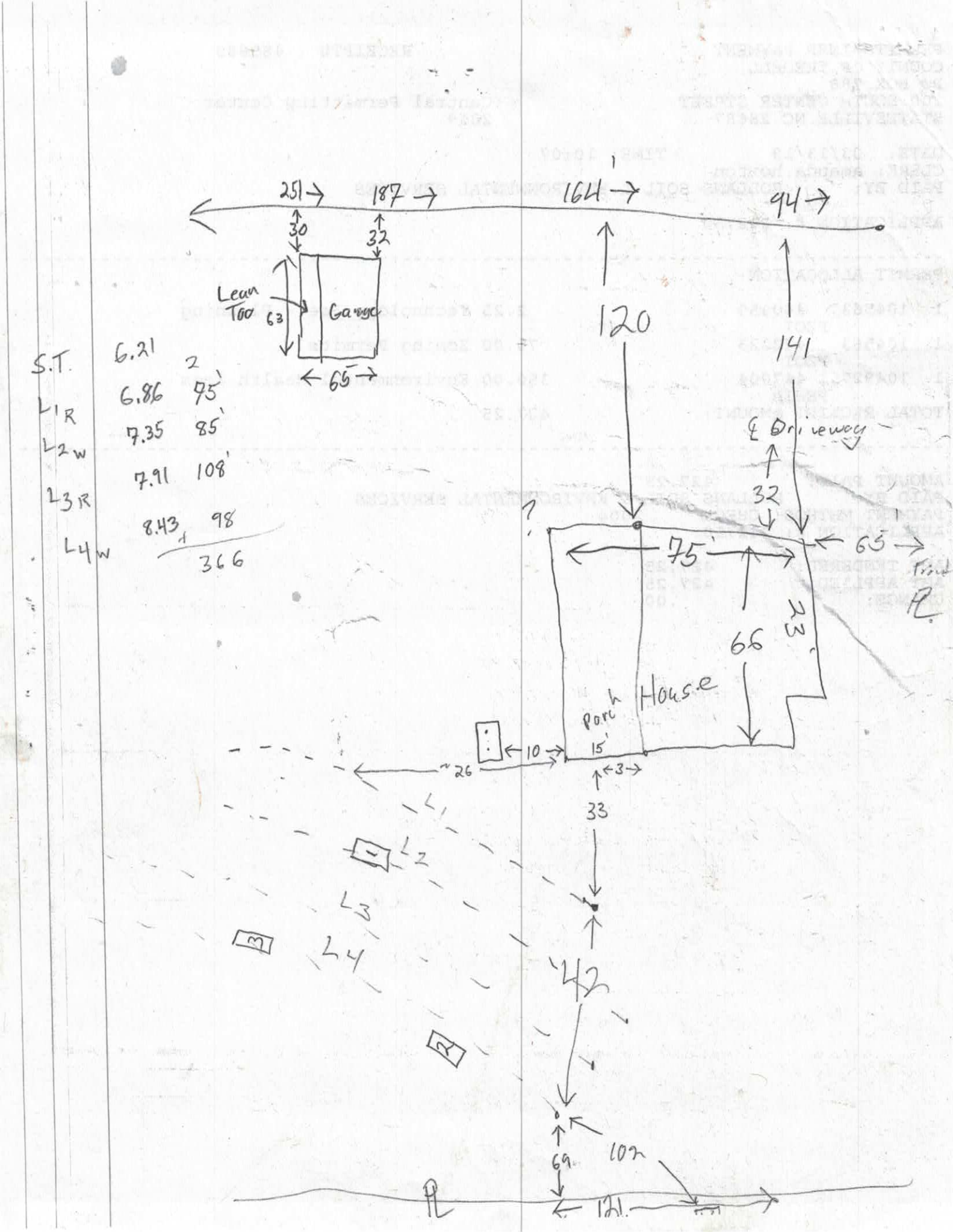
WATER SUPPLY: ☒ Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut
TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LSS 6%	0-8	SCL V.W.SBK	sl. Friable, SS, Sp, Sexp	–	60"	–	–	0.275 PS
		8-32	Clay m-s ABK/SBK	sl. Firm, Sticky, Sp, Sexp					
		32-60	Clay Loam w. ABK/SBK common Sap/mica	sl. Friable, SS, Sp, Sexp					
2	LSS 5%	0-8	SCL V.W.SBK	sl. Friable, SS, Sp, Sexp	–	50"	–	–	0.30 PS
		8-34	Clay m. ABK/SBK	sl. Firm, Sticky, Sp, Sexp					
		34-50	Clay Loam common sap/mica w/ SBK	sl. Friable, SS, Sp, Sexp					
		50-60	MA Loamy Saprolite	moderately Drained + Friable					
3	LSS 6%	0-7	SCL V.W.SBK	sl. Friable, SS, Sp, Sexp	–	50"	–	–	0.275 PS
		7-34	Clay m-s ABK	sl. Firm, Sticky, Sp, Sexp					
		34-50	Clay Loam w. ABK common Mica	sl. Friable, SS, Sp, Sexp					
		50-59"	MA Loamy Saprolite	Friable + Moderately Drained					
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	366 l.f.	500+ l.f.
System Type(s)	25% Reduction	25% Reduction
Site LTAR	0.275	0.30

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS

EVALUATED BY: Tom Shuck
OTHER(S) PRESENT: Dwayne Bell


251
187
164
94
30
32
Lean Too
63
Garage
65
120
141
℄ Driveway
32
75'
65
Front
66
23'
House
Porch
15'
10
26
3
33
42
69
102
121
L1
L2
L3
L4
1
2
3
S.T.
L1 R
L2 W
L3 R
L4 W
6.21
6.86 95'
7.35 85'
7.91 108'
8.43 98
366

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

Sheet 2 of 3
PROPERTY ID #: 4922-84-9410
COUNTY: Iredell

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

OWNER: Bell Construction Co. Inc
ADDRESS: P.O. Box 1102 Statesville, NC
PROPOSED FACILITY: 3BR SFR
PROPOSED DESIGN FLOW (.1949): 360 GPD
LOCATION OF SITE: 114 Troutman Farm Rd. Troutman

APPLICATION DATE 3/21/18
DATE EVALUATED: 5/14/18
PROPERTY SIZE: 3.51 acres ?
PROPERTY RECORDED: Yes

WATER SUPPLY: ☒ Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut
TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

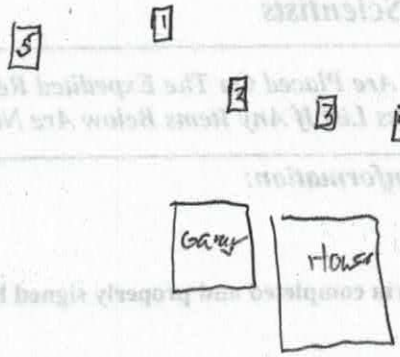
PROFILE #:	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	Top LSS 4%	0-11	SCL V,W.SBK	Sl. Friable, SS, Sp, Sexp	26"-30" Faint YO mottles	43	-	-	0.275
		11-22	Clay trace M.SBK/ABK mica	Sl. Firm, Sticky, Sp, Sexp					
		22-43	Clay Loam W.SBK some mica	Sl. Friable, SS, Sp, Sexp					
		43"-60"	MA Loamy Saprolite	Moderately Drained Friable					
2	middle LSS 6%	0-10	SCL V.W.SBK	Sl. Friable, SS, Sp, Sexp		58	-	-	0.30 PS
		10-25	Clay M.SBK/ABK Trace mica	Sl. Firm, Sticky, Sp, Sexp					
		25-58	Clay Loam W.SBK some Saprolite Abundant Mica	Friable, SS, Sp, Sexp					
3	Middle LSS 6%	0-10	SCL V,V.SBK	Sl. Friable, SS, Sp, Sexp		53	-	-	0.325 PS
		10-27	Clay W.ABK strong SBK	Sl. Firm, Sticky, Sp, Sexp					
		27-53	Clay Loam W,SBK Abundant Saprolite	Friable, SS, Sp, Sexp					
		53-59	MA Loamy Saprolite	Well Drained + very Friable					
4	Lower 5%	0-12	SCL V.V.SBK	Sl. Friable, SS, Sp, Sexp					0.30
		12-30	Clay W. ABK/SBK	Sl. Firm, Sticky, Sp, Sexp					
		30-63	Clay Loam W.SBK common Mica and Saprolite	Friable, SS, Sp, Sexp					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	350	300+
System Type(s)	25% Reduction	50% Reduction
Site LTAR	0.30	0.275

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS.
EVALUATED BY: Tom Shuck
OTHER(S) PRESENT:

COMMENTS:

Trentman Farm Rd



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

Sheet 2 of 2
PROPERTY ID #: 4922-84-44
COUNTY: Iredell

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

OWNER: Bell Construction Co. SEE SHEET 1 APPLICATION DATE
ADDRESS:
PROPOSED FACILITY: PROPOSED DESIGN FLOW (.1949): DATE EVALUATED: 5/14/18
LOCATION OF SITE: 114 Troutman Farm Rd PROPERTY SIZE:
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other PROPERTY RECORDED:
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
5	Shoulder [sloping] 3%	0-8	SCL w. 30%	Sl. Friable, SS, Sp, Sop		43	=	-	0.275
		8-19	Clay Loam w. 30%	Sl. Firm, Sticky, Sp, Sop					
		19-43	Clay Loam w. 30% comp	Friable, SS, Sp, Sop					
		43-58	Loamy Saprolite MA ↑ some Clay Plugs	Friable + Mineral Brands					
2									
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY:
OTHER(S) PRESENT:
COMMENTS:

L P 8.65 55'

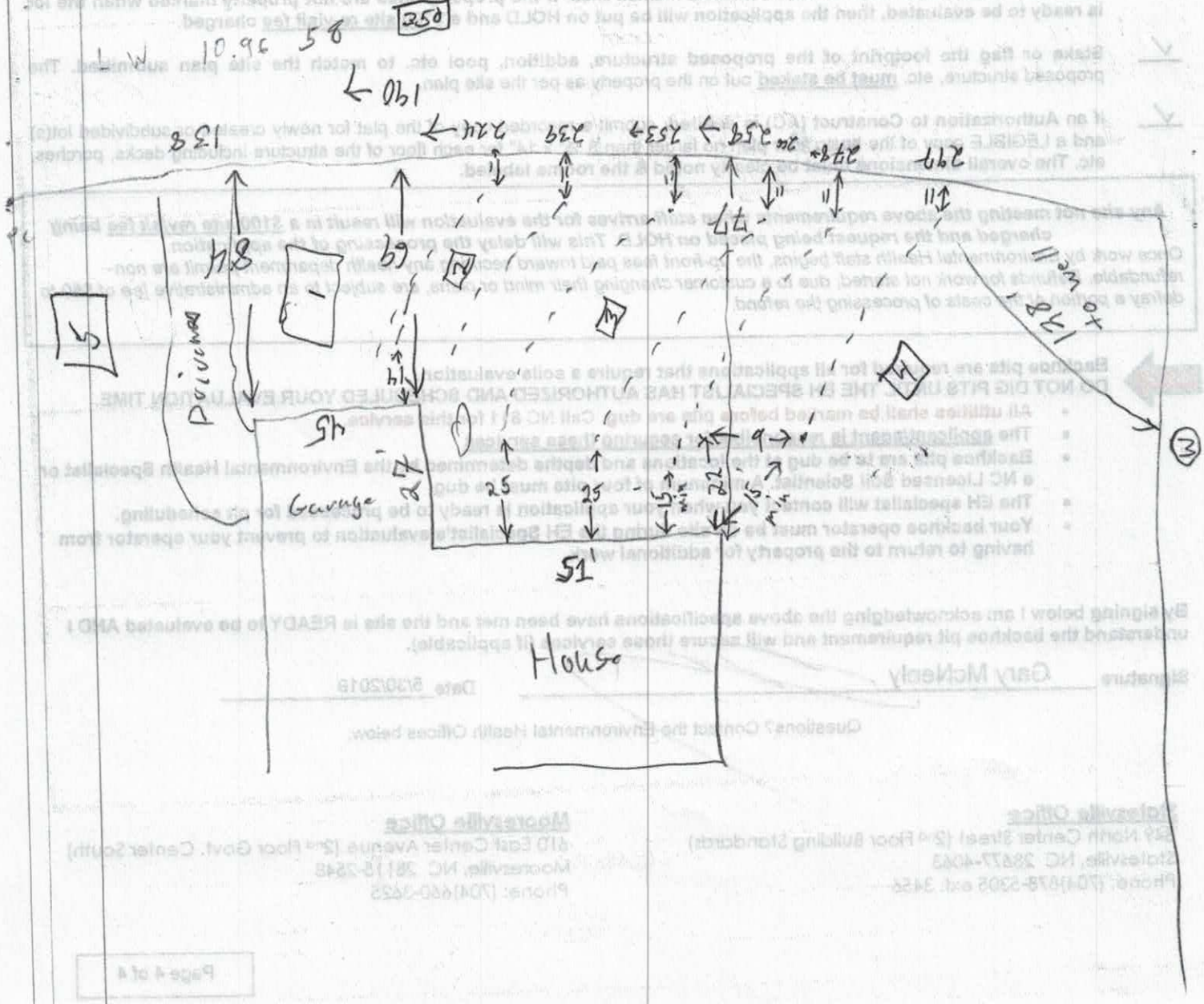
L W 9.11 51'

L P 9.60 60'

L W 10.01 62'

L P 10.35 56

L W 10.96 58



RECEIVED JUN 2 7 2019

#235130
Paid $ 500.00

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* Comprehensive Relayout

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: Bell Construction Co., Inc. Dwayne F. Bell Address: P.O. Box 1102 Statesville Zip: 28687

Applicant Email: dwayne@bellconstruction-nc.com Phone: (704) 902-0869 Alt. Phone: (704) 873-6378

Owner Name: Dwayne F. & Cheryl F. Bell Address: 9208 Cub Run Dr Concord, NC Zip: 28027

Owner Email: bellcf@ctc.net Phone: (704) 796-1688 Alt. Phone: (704) 723-9151

Property Information:

Street Address: 114 Troutman Farm Road Statesville, NC 28677

Subdivision Name: Howard E. Sherrill Section/Phase: _____ Lot Number: PT 4

Driving Directions: Old Mountain Road to Troutman Farm Road, Approx. 300' on Right

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: 3
( ) Swimming Pool
( ) Other Addition/Structure: _____

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

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 ( ) 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?

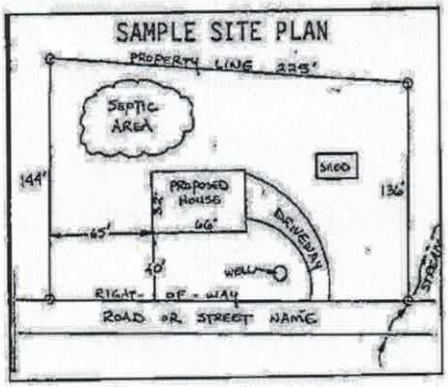
I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible 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: Dwayne F. Bell 6/27/19
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:

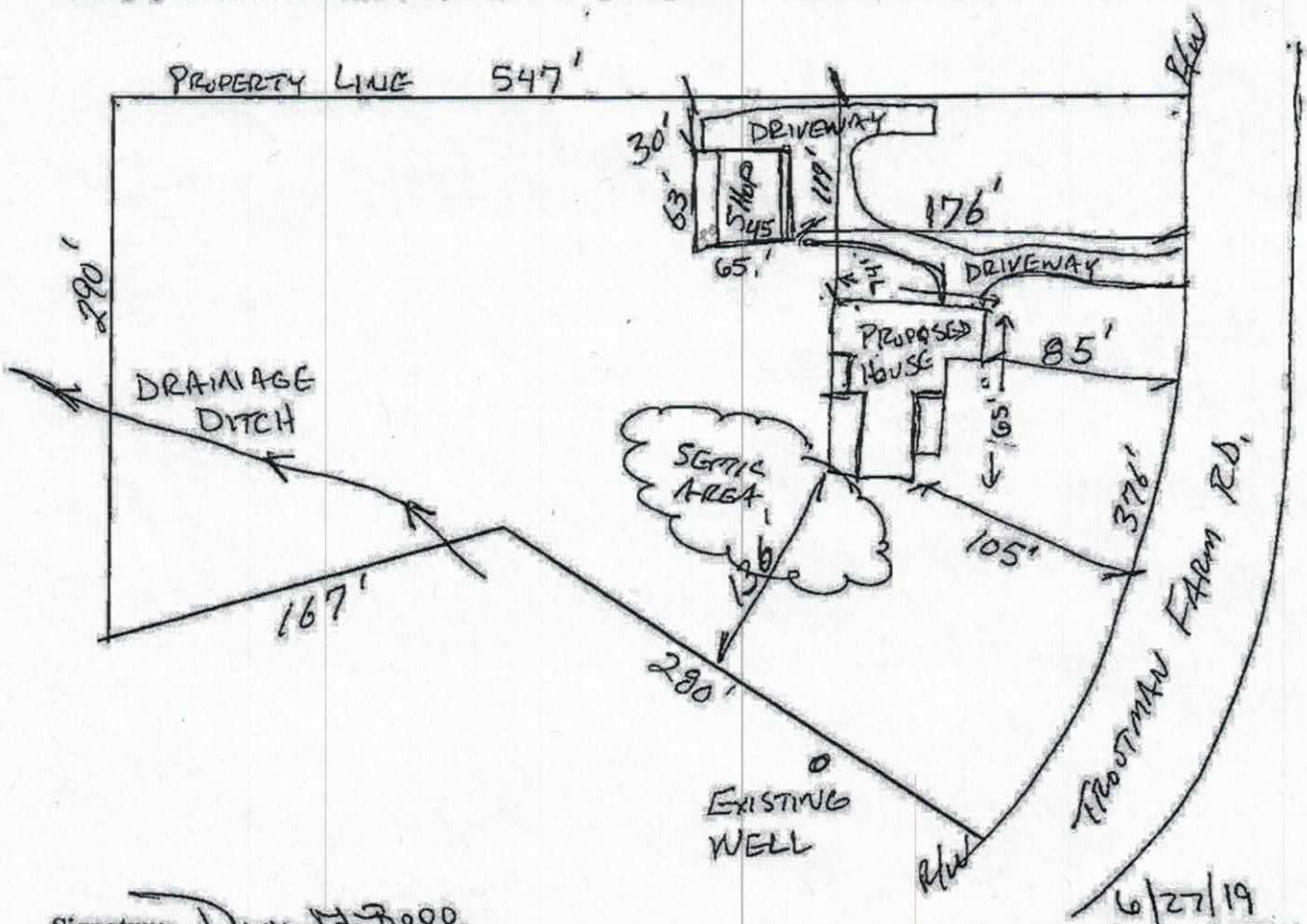
( ) Property Line measurements are clearly identified
( ) All proposed structures are indicated
( ) Front and side setbacks from property line
( ) Preferred driveway location
( ) Preferred well location
( ) Preferred septic system location
( ) North arrow, or other sufficient indicator of direction

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: Doug M. Bell

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

DATE 6/27/19

IREDELL COUNTY HEALTH DEPARTMENT

KW Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 235130

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

PIN # 4722-84-7401

APPLICANT/OWNER: Bell Construction Co. Inc. APPLICANT ADDRESS: P.O. Box 1102 Statesville, NC

SITE ADDRESS: 114 Troutman Farm Rd. Statesville, NC 28677 PHONE: 704-873-6378 ALT. PHONE

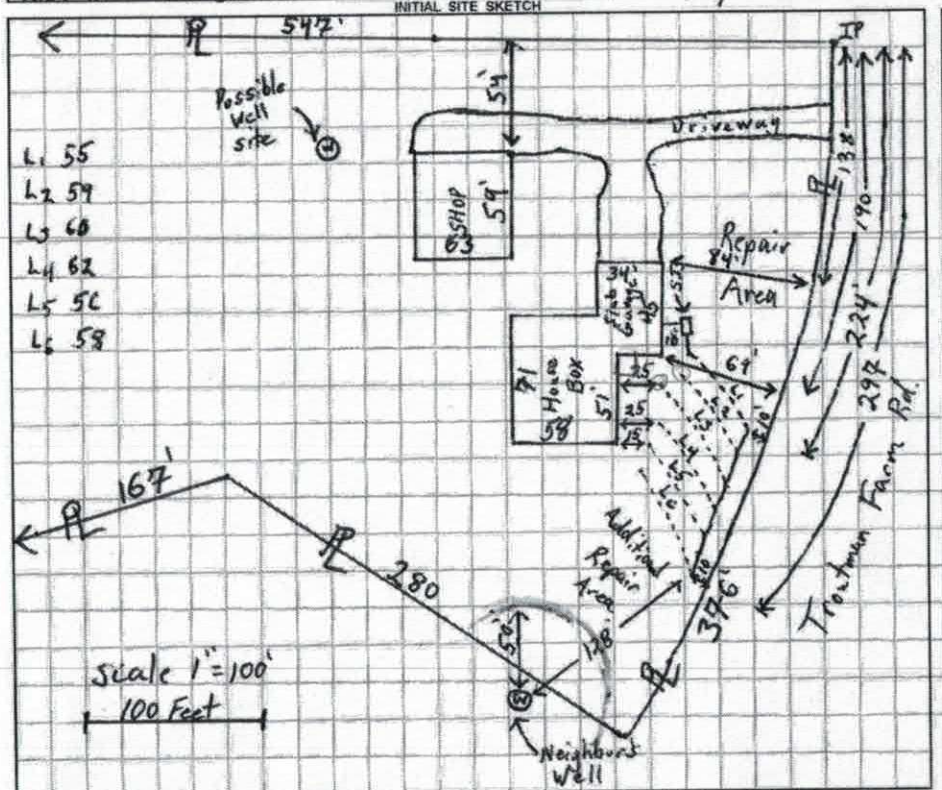
SITE DIRECTIONS: Old Mountain Rd N from Troutman → L on Troutman Farm Rd → Lot on Rt SAP CONTROLLED: ☒ YES ☐ NO

SUBDIVISION: Howard E. Sherrill SECTION: — LOT # PT4 LOT AREA: 3.51 acres DESIGN FLOW: 360 GPD L.T.A.R.: 0.30

Septic Tank	1000	(gal)	STB		Date		☒ 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 (PPBPS) Pump	☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	6		Linear Ft	300	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: Recommend a 1500 gallon tank be installed. Though 350 l.f. of drainfield has been laid out, only 300 need be installed. No business shall be ran out of the shop unless ICHD gives written permissions. A sink (with grinder/ejector pump) may be installed in the shop for handwashing purposes. Recommend pumping septic tank every 3-5 years. * Basement fixtures may need to be ejected * If a whole-house ejection system is used, then two septic tanks in a series (of equal size) are required.

INITIAL SITE SKETCH



AS BUILT SKETCH

---IMPROVEMENT PERMIT ONLY---

DO NOT ISSUE BUILDING PERMIT!

FLOOR PLAN STILL NEEDED!
(For BOTH house + shop)

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: Lucy W. Bell Date: 7/16/18 Installed by:

IMPROVEMENT PERMIT by: Tom Shuck Date: 6/26/18 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: 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.

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)* Dwayne F. Bell

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, Dwayne F. & Cheryl F. Bell, am the legal owner(s) of the property located at 114 Troutman Farm Road, identified as

PIN (Parcel Identification Number) 4722847401.000, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) Dwayne F. Bell Bell Construction Co., Inc., 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.

Dwayne F. Bell
Cheryl F. Bell
Signature of Owner(s)

6/27/19
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

Acknowledgement Of
Plans Submittal ONLY!

Date 6-27-19

Date 7/9/19

FIRST FLOOR PLAN "C"
2616 SQ. FT.

Bell Residence

Gray Design

* No bedrooms on 2nd Floor 7/9/19 (CSR)

Acknowledgement Of Plans Submittal ONLY!

Date 6-27-19

Date 7/9/19

Only the Bonus Room Will Be Finished.

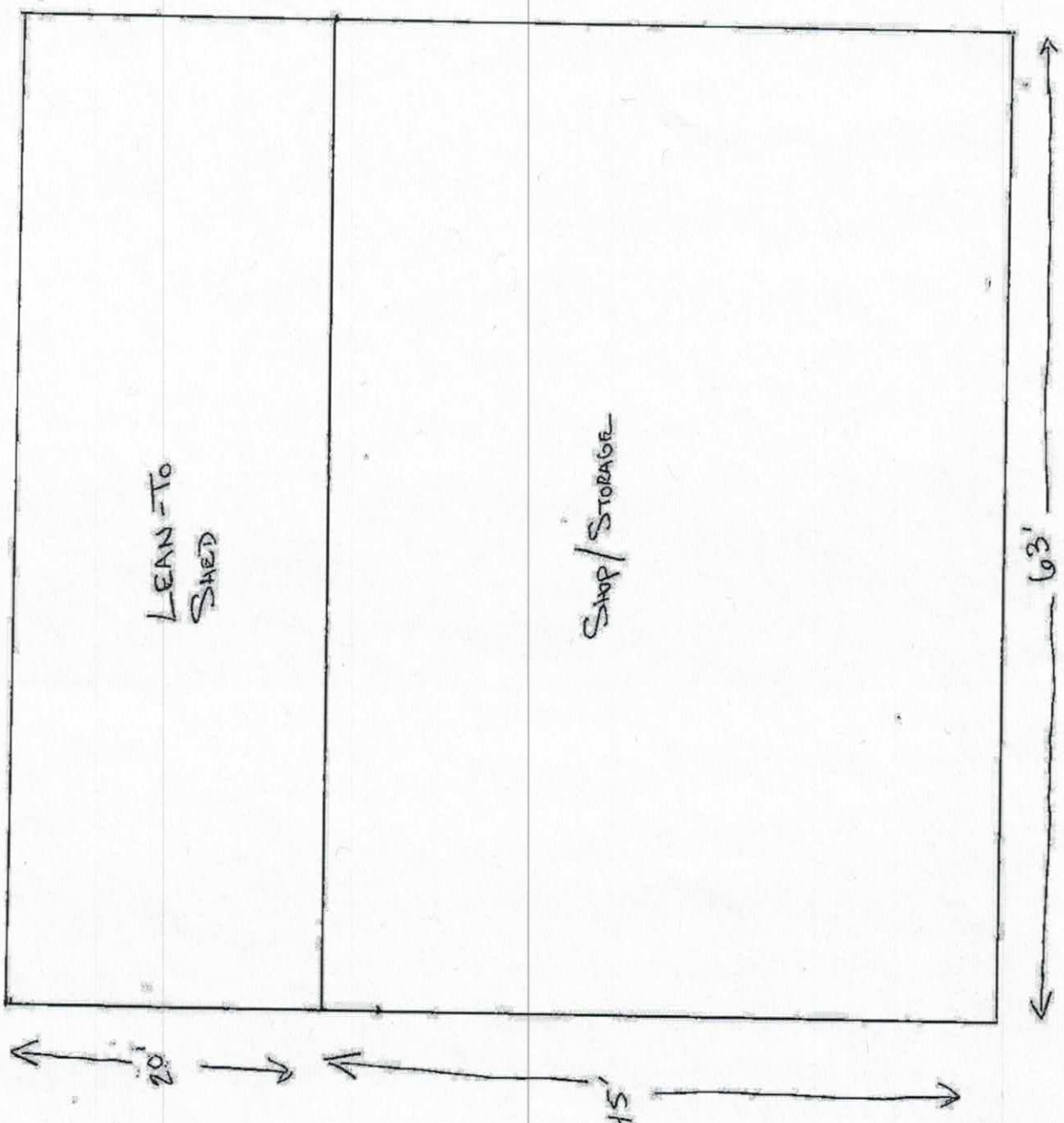
Media Room & Bath Room Will Not Be Finished.

Future

SECOND FLOOR PLAN "C"
957 SQ.FT.

Bell Residence

Gray Design



Acknowledgement Of
Plan Submittal ONLY!
Doug Bell Date 6-27-19
_____ Date _____

BELL ACCESSORY STRUCTURE - TO BE ADDED LATER

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)* Dwayne F. Bell

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, Dwayne F. & Cheryl F. Bell, am the legal owner(s) of the property located at 114 Troutman Farm Road, identified as

PIN (Parcel Identification Number) 4722847401.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Dwayne F. Bell, Bell Construction Co., Inc., 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.

Dwayne F. Bell
Cheryl F. Bell
Signature of Owner(s)

6/27/19
Date

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

Statesville - Environmental Health
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