ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 3061216

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

PIN # 4728044128

APPLICANT/OWNER: America's Home Place APPLICANT ADDRESS: 1206 Greenland Dr, Statesville

SITE ADDRESS: 1916 Treebark Rd, Statesville 28625 PHONE: 704-657-0840 ALT. PHONE 704-746-7094 (Chad)

SITE DIRECTIONS: 115 N → L Pisgah Ch Rd → L Treebark → on R SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Treebark Acres SECTION: 3 LOT # 10 LOT AREA: 3ac DESIGN FLOW: 360 gpd L.T.A.R.: .275 (.25R)

Septic Tank	1000	(gal)	STB 760	Date	2-24-20	☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI
Pump Tank		(gal)	PT	Date		System Description:	25% reduction		
Pump Make		Model		Serial #		Repair System Description:	25% reduction		
# Nitrification Fields	1	# Lines	3	Linear Ft:	330'	Maintenance Agreement Required:	☐ YES	☒ NO	
Trench Width	36"	Trench Bottom Depth	[redacted]	27" max	Gravel Depth	—	☒ GRAVITY	☐ PRESSURE	

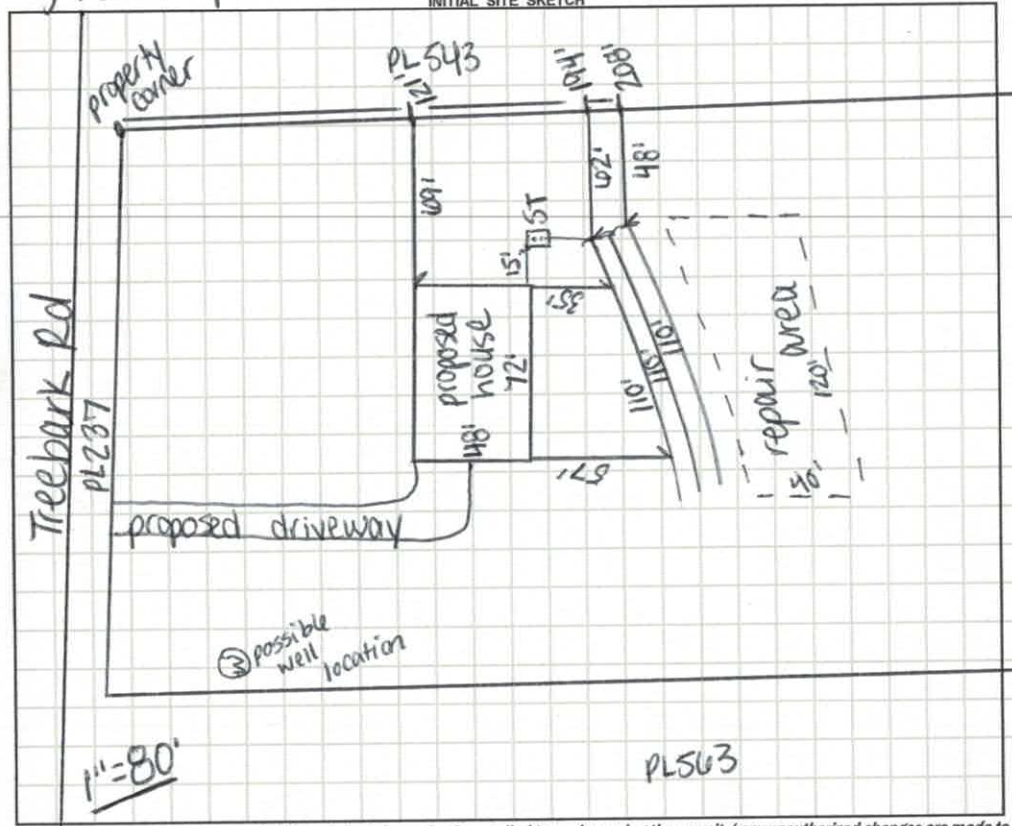
☒ Residence ☐ Business ☐ Other ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement w/o plumbing

No. Bedrooms 3 No. Persons 6 No. Employees

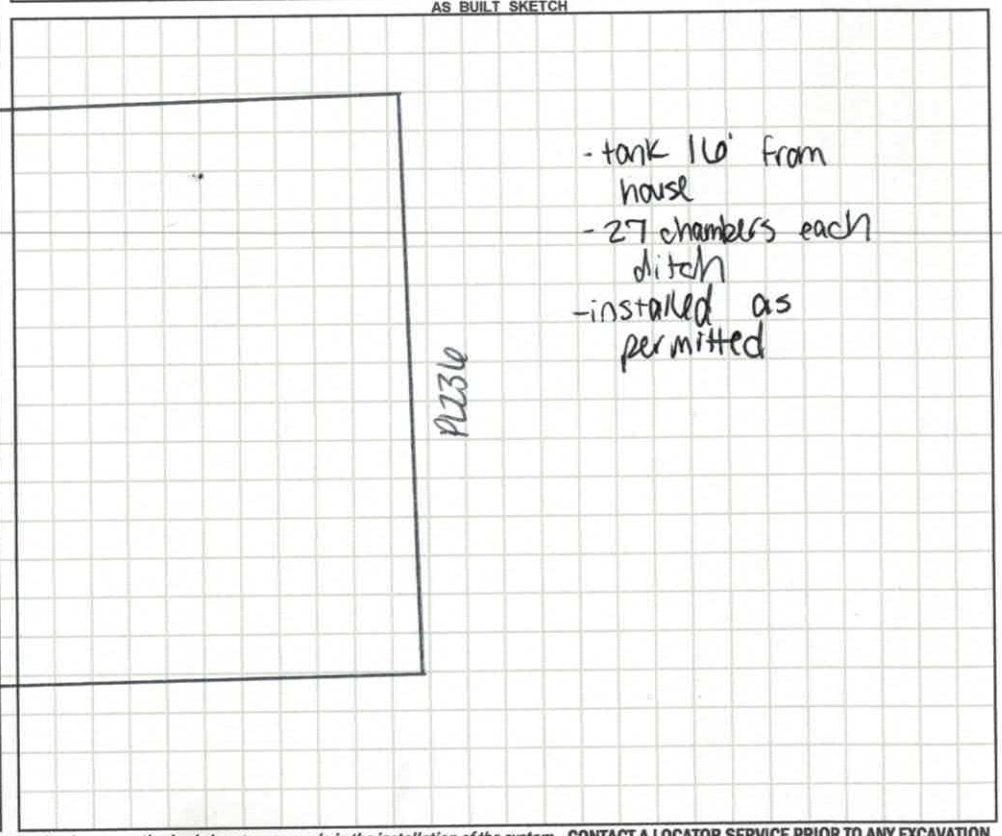
Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Install on contour + utilize serial distribution. Do not exceed max trench depth of 27". Do not grade septic area.

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: Acceptance of Permit Rec'd Date: 4-2-20 Installed by: Groundbreakers

IMPROVEMENT PERMIT by: Carla C. Nicks Date: 4-2-20 OPERATION PERMIT by: Carla C. Nicks Date: 5-1-20

AUTHORIZATION TO CONSTRUCT by: Carla C. Nicks Date: 4-2-20 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 HEALTH DEPARTMENT
JANE HINSON, RN BSN MS /
HEALTH DIRECTOR

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

ACKNOWLEDGEMENT OF ACCEPTANCE OF PERMIT DESIGN AND CONDITIONS

Any permit requiring a signature must have this form signed by the property owner or their authorized agent. Once this form is signed and returned to Environmental Health an official copy of the permit will be emailed to the email that you provide.

I, America's Home Place Inc, am the legal owner or the agent of the property located at 196 Treeback Rd Statesville NC, identified as PIN(Parcel Identification Number) 4728044128, located in Iredell County, North Carolina.
Permit # 306126.

I do hereby agree to the permit design and the conditions of this permit.

Chad Hall 4/2/2020
Signature of Owner Date

Signature of Witness Date

email

Central Office (Health Dept.)
318 Turnersburg Hwy
Statesville, NC 28625
704 878-5300

Mooresville – Environmental Health
610 E. Center Avenue
Mooresville, NC 28115
704 663-3625

Statesville - Environmental Health
349 N. Center Street
Statesville, NC 28677
704 878-5305 x3456

http://www.co.iredell.nc.us/Departments/Health/

ROLLANS *Soil & Environmental Services, PA.*

P.O. Box 832, Mooresville, NC 28115 Phone: (704) 746-5046 Fax: (704) 278-0989

Ashley Rollans, *NC Licensed Soil Scientist, Certified Septic Installer, Certified Wastewater Operator & Certified Septic Inspector* **Contacts**: *704.746.5046*
Email: *rollans.ashley@yahoo.com*

Project Number: *01-3396*
Date: *5/16/17*

Allen Tate Realtors
Attn: *Cathryn Salter*
Email: cathryn.salter@allentate.com

Re: On-Site Wastewater Evaluation for a 4 Bedroom Residence on a ±3.0 acre parcel at 196 Treebark Road, Statesville, Iredell County, NC.

Dear Ms. Salter,

Rollans Soil & Environmental Services, PA has performed a Preliminary Soil Evaluation on the above mentioned property in Iredell County, NC. The purpose of the evaluation was to determine available space requirement for a 4 bedroom onsite wastewater system. The evaluation was performed in May, 2017.

The findings from our evaluation are illustrated on the attached *Site Plan*. Additional documentation of the soil evaluation is detailed in the *Soil Profile Descriptions*.

Soil/Site Suitability
Six soil borings (B1 – B6) were performed beyond the possible location of the house (approximate location provided by the Realtor) to determine the overall soil suitability for an onsite wastewater system installation. Of these six borings all were found to be provisionally suitable for Conventional, Modified Conventional and/or Accepted subsurface wastewater systems. These soil profile descriptions are most similar to the Cecil/Pacolet Soil Series'. Recommended LTAR is 0.25 - 0.3gpd/ft2. The square footage requirement for a 4 bedroom Conventional or Accepted System (system and repair) is 10,000 – 14,000. **We have determined that there is sufficient available space to support a drainfield for the proposed 4 BR residence. There is also flexibility for house placement on this parcel to allow for a gravity flow system.** We started the evaluation approximately 180 feet off the front property line.

Rollans Soil & Environmental Services, PA has appreciates your business and looks forward to working with you in the future. Please let us know if you need any further assistance or have questions in regards to this project.

Thank you
S. Ashley Rollans
NC Licensed Soil Scientist #1231
NC Certified Operator
NC Certified Septic Installer
NC Certified Septic Inspector

5/16/17

See Attached: *Site Plan*
Soil Profile Descriptions

[redacted] AND NATURAL RESOURCES
[redacted]

Sheet 1 of 2
PROPERTY ID #: 7283044128
COUNTY: IREDELL

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Agent - Cathryn Salter
ADDRESS: 196 Treebark Road
PROPOSED FACILITY: House
LOCATION OF SITE: 115 N R(L) on Pisgah (L) Tree Bark
WATER SUPPLY: ☐ Private ☐ Public ☑ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut
APPLICATION DATE
PROPOSED DESIGN FLOW (.1949):
DATE EVALUATED: 5-4-17
PROPERTY SIZE: 1.3ac
PROPERTY RECORDED: YES
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
B1	5%	0-10	BSL	FR SS SP	F-C SAP	INC			.3
		10-15	BRCL WM SAK	FR SS SP					
		15-48	RC WM SAK	" " "					
B2	5%	0-7	BSL GR	FR SS SP	F-C SAP	INC			.3
		7-10	RBCL WM SAK	" " "					
		10-36	BRC "	" " "					
		36-48	BRCL WF SAK	" " "					
3	5%	0-11	BSL GR	FR SS SP	F SAP INC C SAP INC				.3
		11-21	RBCL WM SAK	" " "					
		21-35	BRCL "						
		35-48	RBCL WF SAK	" " "					
4	5%	0-7	BSL GR	FR SS SP	F.SAP, F-Fe Dep F.SAP, C-Fe Dep C SAP.				.25 .275
		7-13	RBCL WM SAK	" " "					
		13-30	RBC "	" " "					
		30-40	BRC "	" " "					
		40-48	BRCL WF SAK	" " "					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	Accepted	Accepted
Site LTAR	0.25-0.3	0.25-0.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Ashley Rollins, LSS
OTHER(S) PRESENT:

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

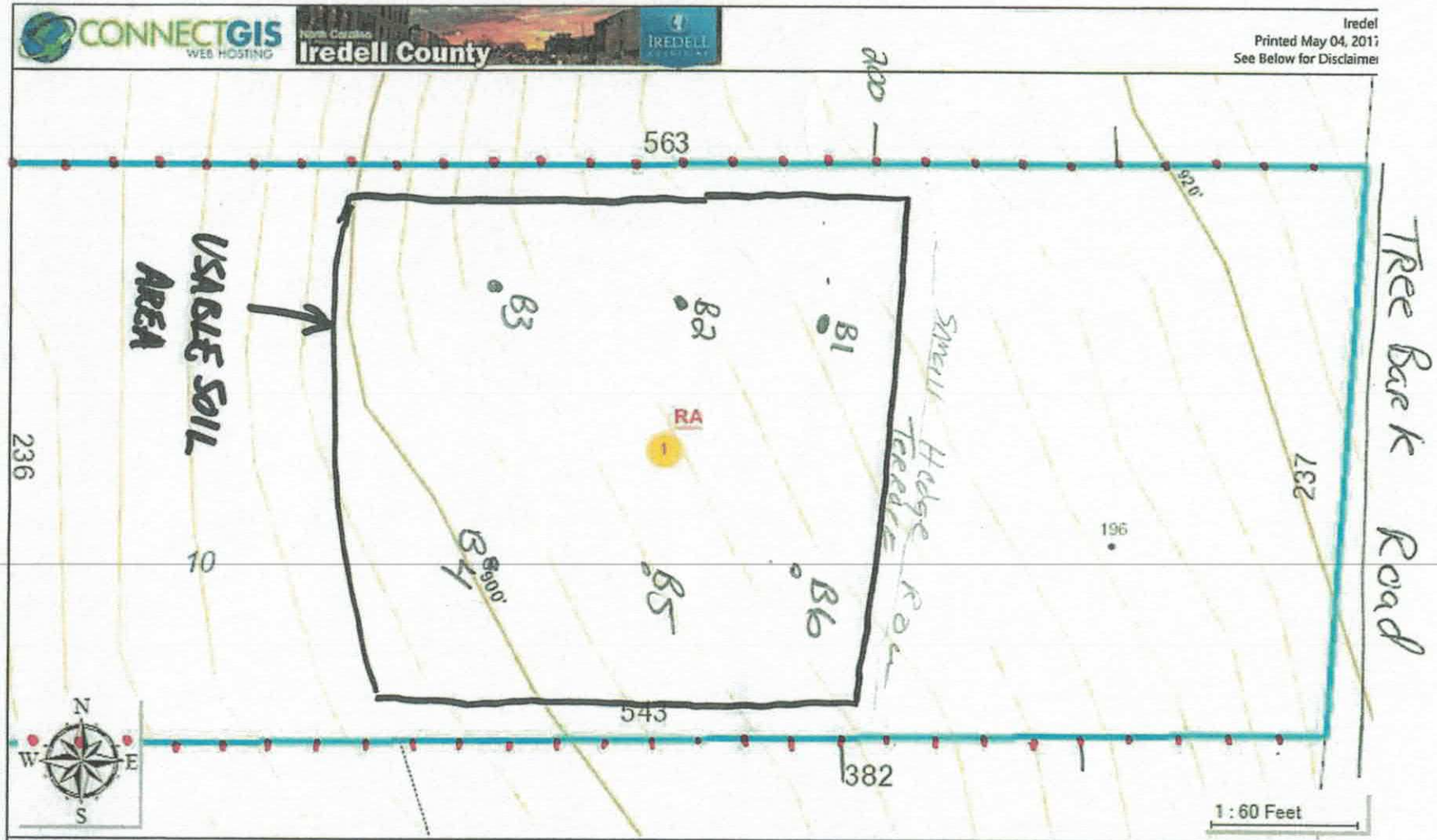
Sheet 2 of 2

[redacted] 196 Tree Bark

PROPERTY ID #: 4778044128
DATE OF EVALUATION: 5/4/17
COUNTY: Iredell

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
B5	5%	0-8	BSL GR	FR SS SP	F. SAP				.3
		8-12	RBCL wm SBK	" " "					
		12-40	RC "	" " "					
		40-48	RBCL wF SBK	" " "					
B6	5%	0-12	BSL GR	FR SS SP					.3
		12-20	RBCL wm SBK	" " "					
		20-48	BRC "	" " "					

COMMENTS:



The maps prepared for this website are generated from recorded deeds, plats, and other public records. Users of these maps are hereby notified that the information provided herein should be verified. Iredell County assumes no lega responsibilities for any of the information contained on this site. Users are advised that the use of any of this information is at their own risk. All maps on this site were prepared using a 1000â€™ Grid based upon the North Carolin State Plane Coordinate System from the 1983 North American Datum. The delinquent real property tax overlay is updated monthly. The information presented is not intended to be used or relied upon as official notice of tax liens. Fo additional information regarding delinquent taxes, contact the Iredell County Tax Collector's Office.

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

Sheet 1 of 1
PROPERTY ID #: 4720414128
COUNTY: Iredell

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

OWNER: AHP
ADDRESS: 120 Greenland Dr, Statesville
APPLICATION DATE 3-18-20
DATE EVALUATED: 3-30-20
PROPOSED FACILITY: 3BR
PROPOSED DESIGN FLOW (.1949): 360 gpd
PROPERTY SIZE: 3ac
LOCATION OF SITE: Mile Treebank Rd
PROPERTY RECORDED: Y
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	L 1%	0-9	GR SCL	Fr SS SP SBK/GR					
		9-42	SBK C	" "					
		42-57	SBK CL	" "	few SAP/ with inc in CL	57"	–	–	PS .3
2	L 7%	0-9	GR SCL	Fr SS SP SBK/GR					
		9-39	SBK/W C	" "					
		39-54	SBK CL	" "	few yds ~39" stay above	54"	–	–	PS .275
3	L 7%	0-10	GR SCL	Fr SS SP SBK/GR					
		10-38	SBK C	" "					
		38-55	SBK CL	" "	yds 28-41"	55"	–	–	PS .25
4	L 7%	0-7	GR SCL	Fr SS SP SBK/GR					
		7-32	ABK/SBK C	" "					
		32-52	SBK CL	" "	v few sap inc in CL	52"	–	–	PS .25

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	330'	360'
System Type(s)	25%	25%
Site LTAR	.275	.25

OTHER FACTORS (.1946): N/A
SITE CLASSIFICATION (.1948): C. Nicks PS
EVALUATED BY:
OTHER(S) PRESENT: N/A

COMMENTS:

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 None	0.2 - 0.05 None	MOIST VFR (Very Friable) FR (Friable) FI (Firm) VFI (Very Firm v. Very Sticky) EFI (Extremely Firm)	WET NS (Non-sticky) SS (Slightly Sticky) S (Sticky) VS (Very Sticky) 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

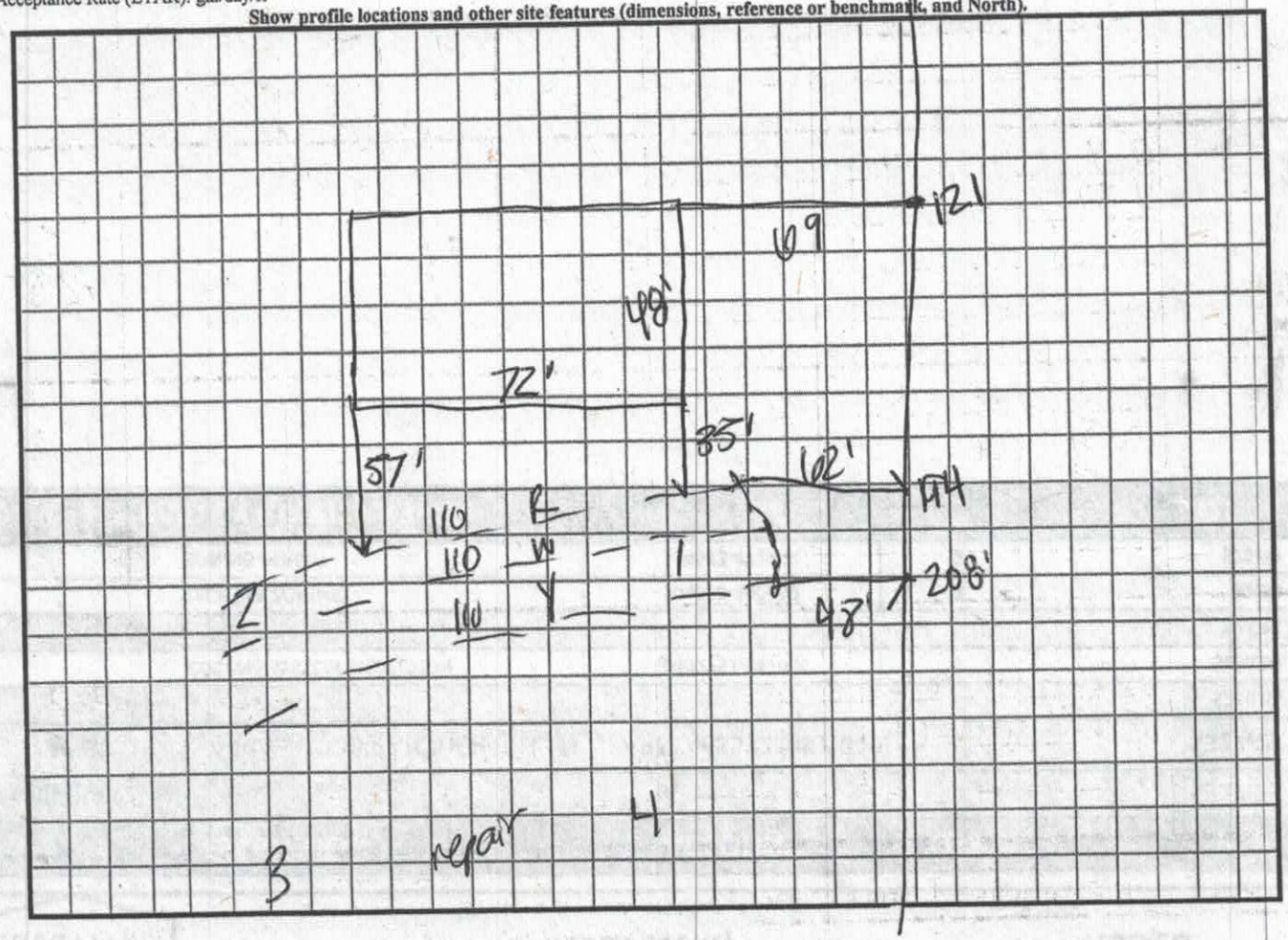
HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or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

Trenbark

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).



RECEIVED MAR 18 2020

Paid $300.00

AP- 306126

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Application For: (X) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) Septic Improvement Permit (X) 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: Lynn Barker Address: 1206 Greenland Dr, Statesville, NC Zip: 28677

Applicant Email: lbarker@americashomeplace.com Phone: 704-657-0840 Alt. Phone: _____

Owner Name: Barry Skeens Address: 512 Kenilworth Ct, Grayslake, IL Zip: 60030

Owner Email: mdipintoskeens@comcast.net Phone: 847-989-9373 Alt. Phone: _____

****

Property Information:

Street Address: 196 Treebark Rd, Statesville, NC 28625
Subdivision Name: Treebark Acres Section/Phase: n/a Lot Number: 10

Driving Directions: From I-40, turn north on Hwy 115, go 7 miles and turn left on Pisgah Church Rd, go 3/10 mile and turn left onto Treebark Rd, go 4/10 mile to site.

****

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: _____ ( ) 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 ( ) City Water ( ) 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: Lynn Barker 3-18-2020
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

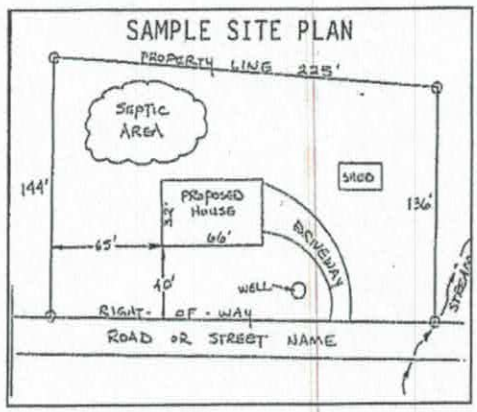
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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

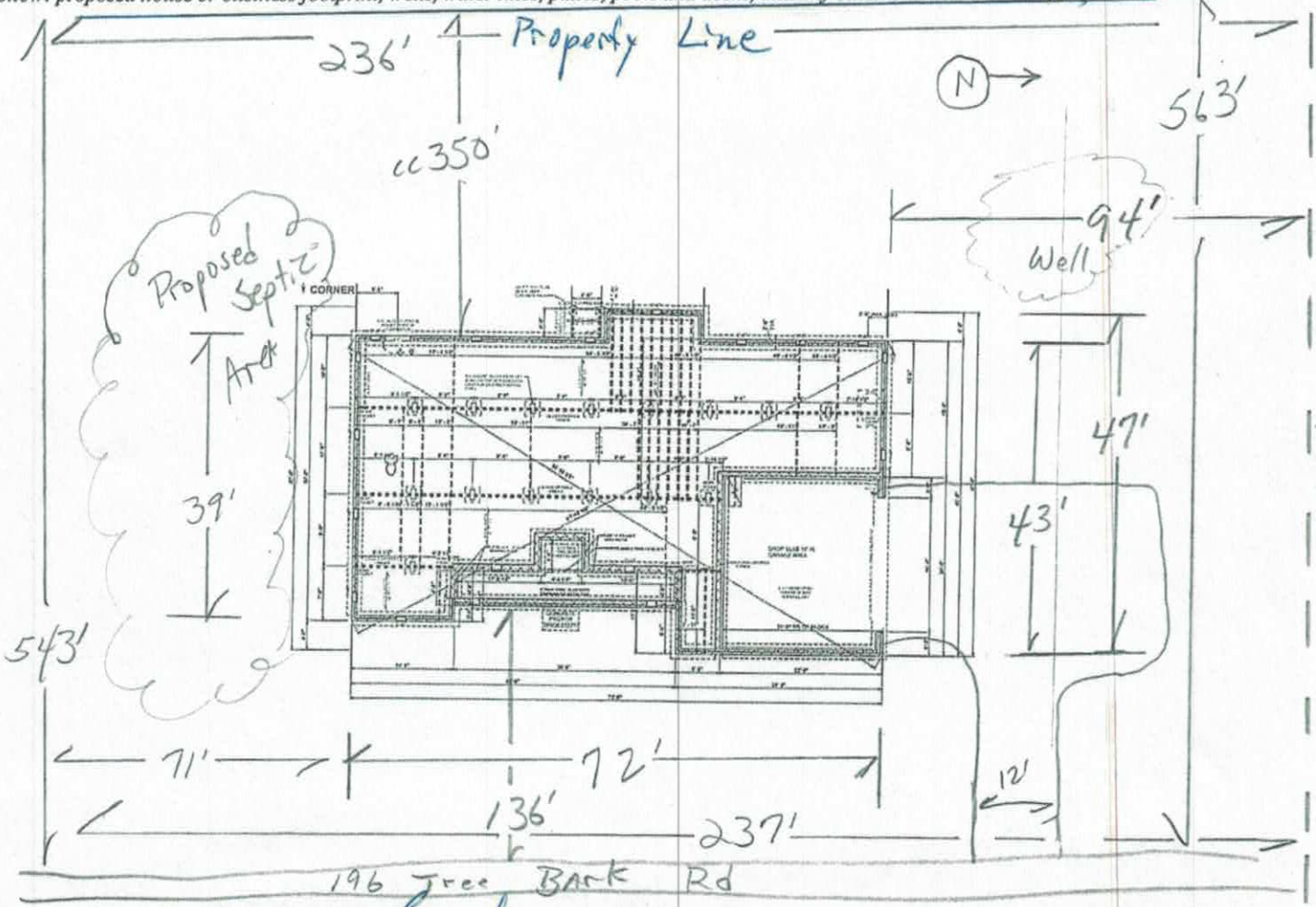


Circle N/A on the following if appropriate:

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

3-18-2020
DATE

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, Barry Skeens, am the legal owner(s) of the property located at 196 Treebark Road, Statesville, NC 28625, identified as

PIN (Parcel Identification Number) 4728-04-4128, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Lynn Barker/America's Home Place, 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.

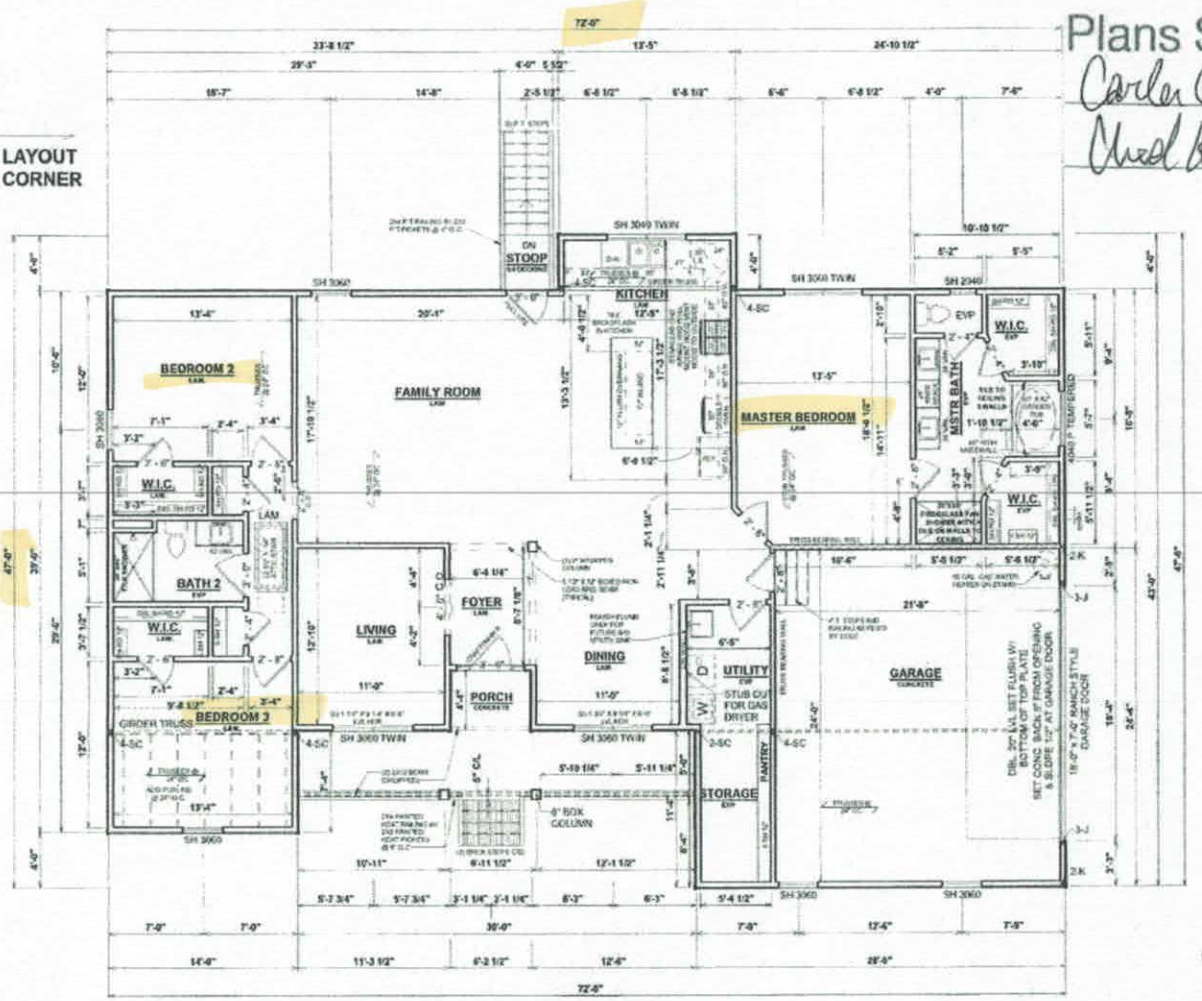
BY SK
_____
Signature of Owner(s)

3/18/2020
Date

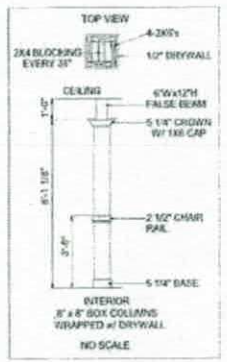
Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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
Carlen C. Nicks Date 4-2-20
Chad Bolt Date 4/2/2020



1 FIRST FLOOR PLAN
1/8" = 1'-0"



2 8" interior column detail
1/8" = 1'-0"

AREAS	
FIRST FLOOR HEATED	2,191 SF
	2,191 SF
COVERED PORCH	117 SF
GARAGE	518 SF
	712 SF
TOTAL UNDER ROOF	2,944 SF
4x4 STOOP	16 SF

No.	Description	Date
1	PRELIM SET	3/13/20
2	PRELIM SET	3/23/20
3	FINAL PLAN	03/26/20
4	REVISIONS	3/27/20

TMS: OXFORD A
JOB#: 87-20-003
XWALLS: 2x4 EXTERIOR WALLS UNLESS OTHERWISE NOTED
FOUNDATION TYPE: CRAWL SPACE
DRAWN BY: BLS
CHECKED BY: RT
PRINT DATE: 3/4/2020 8:49:40 AM
PROPERTY OF:
BARRY & MARY LOU SKEENS
196 TREEBARK ROAD
STATESVILLE NC 28625
SOLD BY: JILL SCHOOLEY
OFFICE: STATESVILLE, NC
SHEET NUMBER: F-2
FIRST FLOOR PLAN

OPT. PAPER SIZE: for 1/4" = 1'-0" on 24"x36" PAPER SIZE ENLARGE PRINTS TO 209%
FINAL CONSTRUCTION PLANS

TO REPORT COPYRIGHT VIOLATIONS CALL (770)532-1126 THE USE OF THIS PLAN BY ANYONE OTHER THAN AN AGENT OF "AMERICA'S HOME PLACE, INC." IS IN VIOLATION OF THE FEDERAL COPYRIGHT VIOLATION ACT. $100 REWARD FOR RECOVERING AN ACTUAL COPYRIGHT INFRINGEMENT.
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PAPER SIZE: 11" x 17" SCALE: 1/8" = 1'-0"

IREDELL COUNTY · NC

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

APPLICATION NUMBER

306126
Issue Date: 03/18/2020

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4728044128.000	196 TREEBARK RD	Iredell County

Owner Information	Applicant Information
Name: SKEENS BARRY+MARY LOU	Name: AMERICA'S HOME PLACE INC
Address:	Address: 1206 GREEN LAND DRIVE STATESVILLE, NC 28677
Phone:	Phone: (704)872-4400

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
3	35	35	15	15	WSIV-PA 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.

Date: 03/18/2020

Signature of Owner/Contractor

Permit Number	306126	TOTAL FEES:	$77.25