215875

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

(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)

1. APPLICATION FOR: X **Improvement Permit** X **Authorization To Construct** ___ **Existing System Inspection**

2. 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 check ( ) beside whichever is submitted if applicable ___ **Custom Site Plan, Scaled no more than 1 Inch = 60 Feet**

3. Applicant Information:

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Andrew Ventresca	7931 Baylis Dr, Huntersville	704-615-4970	704-878-3561
Owner Name	**Mailing Address**	**Home Phone #**	**Alternate Phone #**
Margaret Ranke	5051 Golf View Dr. Locke NY	315-497-1915	315-730-3463

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
256 State Park Rd	~~N/A~~ PHILIP A + MARGARET H RANK PROP	1

Driving Directions: US 21 South to Wagner St. (Troutman) Rt. on Wagner, Rt. on State Park approx. ½ mile on right

5. RESIDENTIAL Site Development Information: *(Check or Complete ALL that apply)*

(X) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
( ) Repair To Failing Septic System due to _____
( ) Other _____

Maximum Number of Bedrooms 3
Maximum Number of Occupants 4
If Expansion, Current Number of Bedrooms ___

(X) Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) Basement w/Plumbing?
( ) Basement w/out Plumbing?

IF Non-Residential Site Development:
Type of Business _____
Square Footage of Building _____
Maximum Number of Employees _____
Maximum Number of Seats _____

6. Proposed Water Supply:

( ) New Well ( ) Existing Well ( ) Community Well (X) City Water ( ) Other Public Water

7. Desired Septic System Type: *(You may rank in order of preference, if any)* ( ) EXISTING SYSTEM installed _____ *Year*

( ) Alternative (X) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other _____

8. Please Answer The Following ( ) Yes (X) No Does the site contain any jurisdictional wetlands?
To The Best of Your Ability: ( ) Yes (X) No Is any non-domestic sewage (i.e. industry) 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.

9. Signature: A R ___ 1/8/16

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

Instrument Prepared By: R. Patrick Snoddy, Attorney
Mail After Recording To: Grantee

Excise Tax: $ 0.00 Tax ID No.:4730-36-2825

QUITCLAIM DEED

State of North Carolina
County of Iredell

THIS DEED, made this ____day of _____, 2016 by and between

Grantor(s): Philip A. Ranke and wife, Margaret H. Ranke
5057 Golf View Drive, Locke, NY 13092

Grantee(s): Andrew R. Ventresca and wife, Wendy J. Ventresca
7931 Baylis Drive, Huntersville, NC 28078

WITNESSETH:

That said Grantor(s), for and in the consideration of the sum of $1.00 Dollar(s) to his in hand paid, the receipt of which is hereby acknowledged, have remised and by these presents do remise, release, and forever quitclaim unto the Grantee(s) or his heirs and assigns all right, title, claim, and interest of the said Grantor(s) in and to a certain tract or parcel of land lying and being in the County of Iredell , and State of North Carolina, in Troutman Township, and more particularly described as follows:

Being all of Lot #1 consisting of 1.20 acres as shown on map of survey by Sparks Surveying dated November 25, 2015 recorded in Plat at Book 64, page 28, Iredell County Public Registry.

Being a 1.20 acre portion in the Northern part of the property conveyed to Philip A. Ranke and wife, Margaret H. Ranke by NC General Warranty Deed recorded in Book 2384, at page 129, Iredell County Public Registry.

TO HAVE AND TO HOLD the aforesaid tract or parcel of land and all privileges thereunto belonging to the Grantee(s) and his heirs and assigns, free and discharged of all right, title, claim, or interest of the Grantor(s) or anyone claiming by, through, or under them.

IN TESTIMONY WHEREOF, said Grantor(s) have hereunto set their hands and seals the day and year first above written.

_____ (seal)
Philip A. Ranke

_____ (seal)
Margaret H. Ranke

STATE of _____
COUNTY of _____

I, _____, a Notary Public of the above County and State, certify that **Philip A. Ranke Margaret H. Ranke** personally appeared before me this day and acknowledged the execution of the foregoing instrument.

Witness my hand and official stamp or seal this _____Day of _____, 2016.

_____
Notary Public

My Commission Expires: _____