IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION* 22796

(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: ___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: ___Survey Plat, Scaled no more than 1 Inch = 60 Feet
Place check ( ) beside whichever is submitted if applicable X Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. Applicant Information:

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Americas Home Place Inc	1206 Greenland Dr Statesville	704-872-4400	704-746-7094
Owner Name	Mailing Address	Home Phone #	Alternate Phone #
Eric Robinson	1723 Newland Rd Denver NC 28037		352-804-3742

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
Talley Rd		

Driving Directions: 21 South to Troutman TR onto Talley Rd 2miles Lot 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
(X) Repair To Failing Septic System due to _____
( ) Other _____

Maximum Number of Bedrooms 4
Maximum Number of Occupants 5
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:

(X) New Well ( ) Existing Well ( ) Community Well ( ) 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: Chad Hall
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

8/6/15
DATE

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION:*

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:

X **Property Line measurements are clearly identified...** X **All proposed structures are indicated...**

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

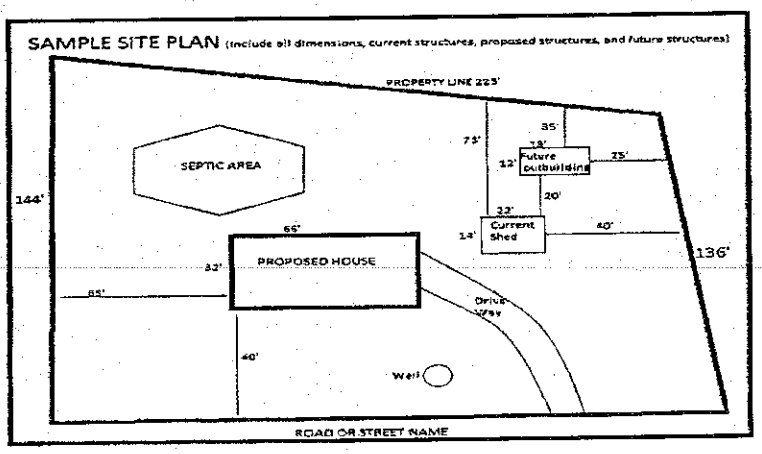
X **Front and side setbacks from property line...** X **Preferred driveway location and configuration, preferred well location...**

X **Area you prefer your septic system to be placed...** X **North arrow, or other sufficient indicator of direction...**

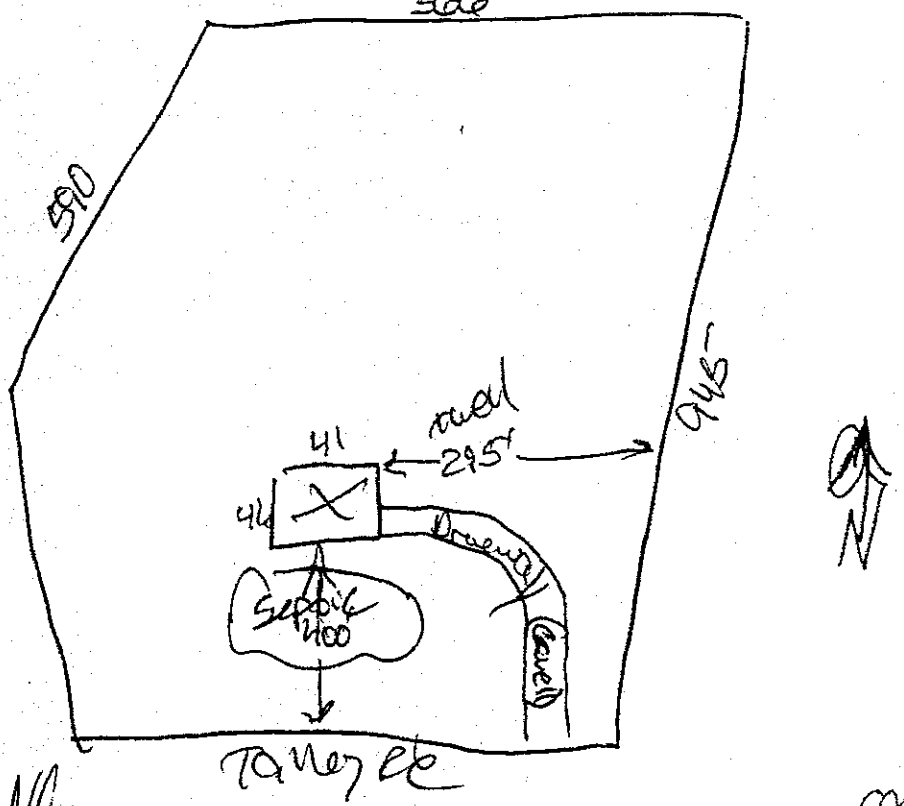
Circle N/A on the following if appropriate:

____ **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



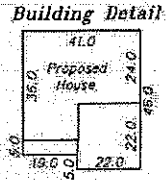
Signature: Chad Miller

REQUIRED **property owner or owner's legal representative signature.**

8/13/18

DATE

Building Detail



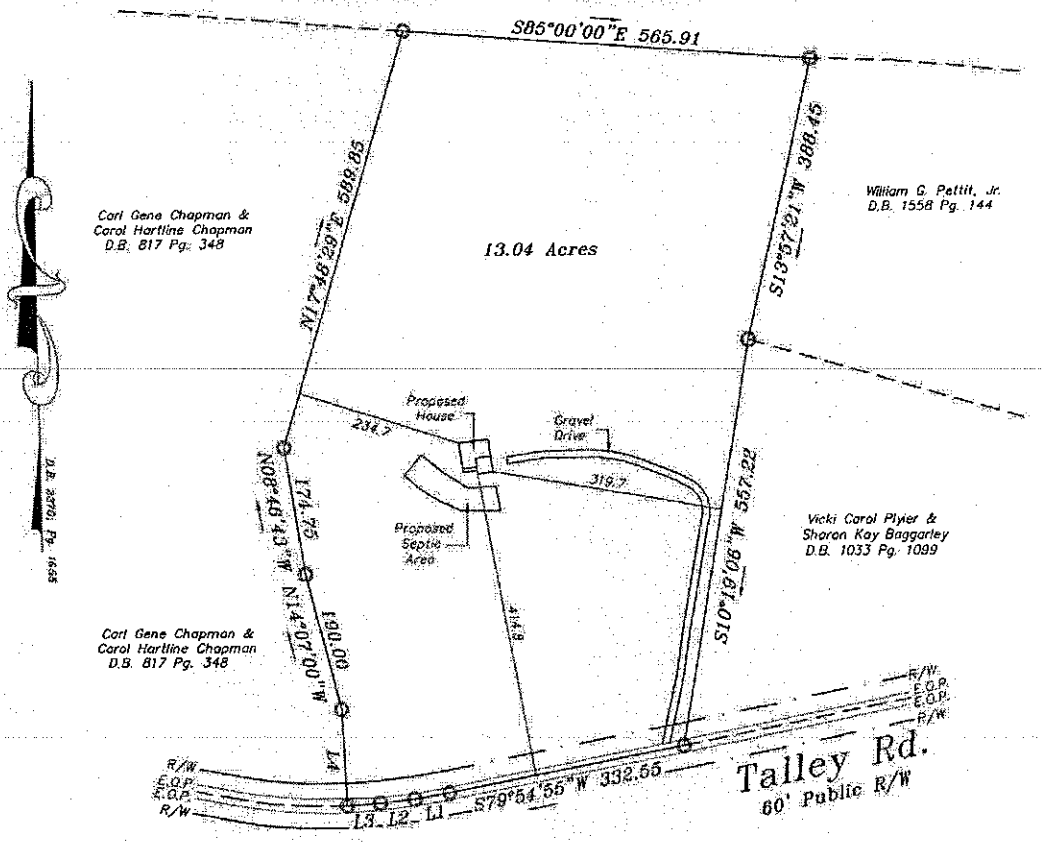
Not To Scale

LINE TABLE		
LINE	LENGTH	BEARING
L1	50.25	N81°10'45"E
L2	49.68	N83°48'14"E
L3	45.97	N86°42'47"E
L4	130.00	S02°20'00"E

NORTH CAROLINA PROFESSIONAL SEAL L-4295 LAND SURVEYOR LANCE D. SCHAMBACK

9/21/2015

Cory B. Knox & Clair L. Knox D.B. 2033 Pg. 1283



Notes:

1) This property may be subject to any Easements, Rights-of-way, and/or Restrictive Covenants.

2) Boundary information based on Deed Book: 2370 at Page: 1655 as recorded in the Iredell County Register of Deeds.

3) This survey is of an existing parcel or parcels of land.

4) No N.C.G.S. or U.S.G.S. Monuments could be located within 2000'.

5) Area by coordinate method.

GRAPHIC SCALE

200 0 100 200 400

(IN FEET)

1 inch = 200 ft.

Legend

R/W = Right-of-way

I.P.S. = #4 Rebar Set

= Not to scale

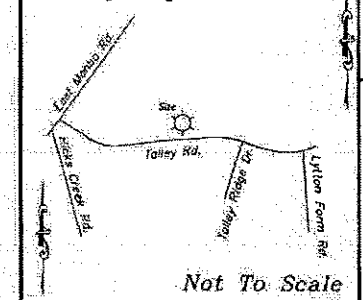
= Telephone Pedestal

= Utility Pole

= Water Valve

● = Calculated Point

Vicinity Map



Not To Scale

Plot Plan

FOR

Eric Howard Robinson & Teresa Kim Robinson

PROPERTY DESCRIPTION

Deed Book 2370, Page 1655

714 Talley Road

Fallstown Township, Iredell County, NC

SCALE: 1" = 50

FIELD BOOK:

FILE: 2015-177

TAX PARCEL #: 4731032636

Schamback Surveying, P.A.
Post Office Box 4143
Mooresville, NC 28117
(704) 622-9915
C-3218

AUTHORIZATION TO ACT AS AGENT FOR OWNER

Any application/document/permit requiring a signature must be signed by the property owner or their authorized agent. This form shall be provided by the owner to allow specified individuals to act as agents for the owner. This form allows the specified individuals to sign or receive any application/document/permit on behalf of the owner. This form allows the authorized agent to make decisions on behalf of the owner pertaining to modifications of permits in the field. It is the responsibility of the owner to assure that any/all permit conditions specified on permits issued by this Division are followed.

I, Eric Robinson, am the legal owner of the property located at Talley Rd Troutman NC, identified as PIN(Parcel Identification Number) 4731-03-2636, located in Iredell County, North Carolina.

I do hereby authorize (print authorized agent/company name) America's Home Place Inc. Chad Hollady, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

1. Improvement Permit (IP)/ Authorization to Construct (AC).
2. Application for soil-site evaluation (new/repair).
3. Application/permit for water well/well abandonment.
4. Application for existing system.
5. Application for Improvement Permit (IP)/ Authorization to Construct (AC).

I agree to abide by any and all decisions and/or conditions between the agent acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division. This form must be fully executed before the individual's specified above will be recognized as the authorized agent.

X Eric Robinson 8/6/15
Signature of Owner Date

Rebecca Fritz 8-6-15
Signature of Witness Date

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