BLDR - 2023 - 34984

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # OSWP-2023-34854

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

PIN # 4737 -- 78 -- 7244

APPLICANT/OWNER: Winchester Grant APPLICANT ADDRESS: 1302 South Potter Rd, Monroe, NC 28110

SITE ADDRESS: 244 Bluegill Ln, Statesville, NC 28625 PHONE: 704-493-0572 ALT. PHONE -

SITE DIRECTIONS: Chipley Ford, Bluegill SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: Poplar Ridge SECTION: - LOT # 12 LOT AREA: 1.4 DESIGN FLOW: 480 L.T.A.R.: .3

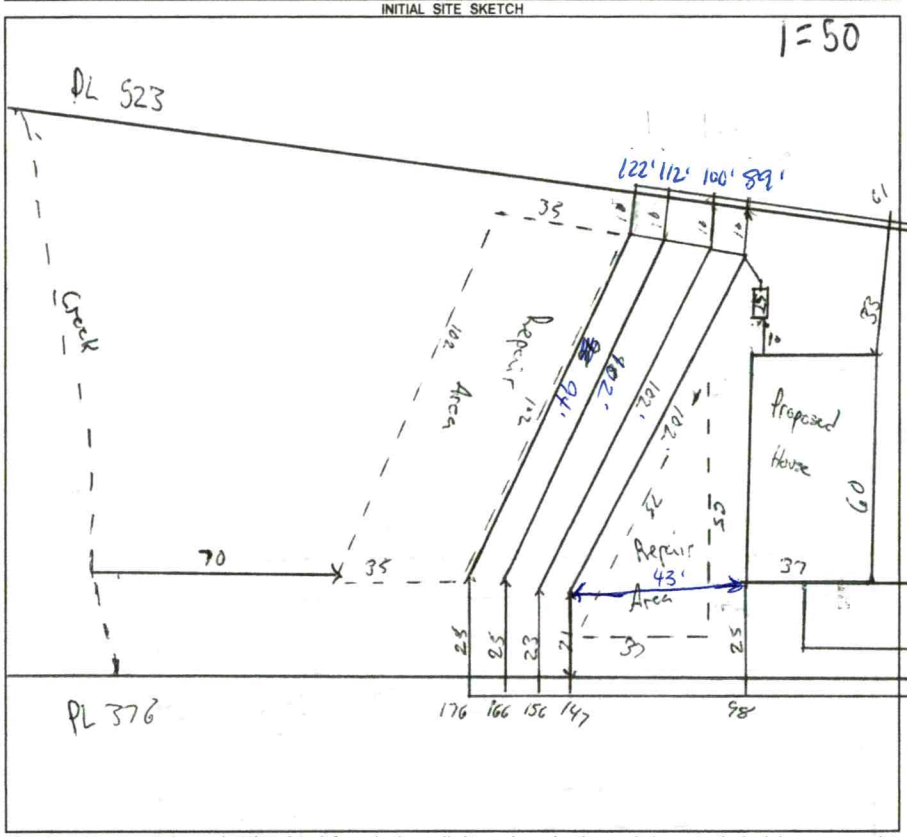
Septic Tank	1000	(gal)	STB		Date	11/28/23	☑ New System	☐ Repair	☐ Expansion
Pump Tank		(gal)	PT		Date		System Type: I II (III) IV V VI		
Pump Make			Model		Serial #		System Description:	Gravity - 25% Reduction - Serial	
# Nitrification Fields	1	# Lines	4	Linear Ft	400		Repair System Description:	Gravity - 25% Reduction - Serial	
Trench Width	36 in	Trench Bottom Depth(Low side)	22 in	Gravel Depth	N/A		Maintenance Agreement Required:	☐ YES	☑ NO
								☑ GRAVITY	☐ PRESSURE

☑ Residence No. Bedrooms 4
☐ Business No. Persons 8
☐ Other No. Employees
☐ Slab ☑ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☑ Public ☐ Community

Comments / Conditions: Install on contour with 4ft centers. Do not drive, park or construct on septic area.

INITIAL SITE SKETCH



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 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: Online Signature Date: Installed by: Stutts Grading

IMPROVEMENT PERMIT by: Matt Wilkie Date: 9/22/23 OPERATION PERMIT by: D Webber Date: 2/1/24

AUTHORIZATION TO CONSTRUCT by: Matt Wilkie Date: 9/22/23 Existing System Inspected by: Date:

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

Item	Date	Initials
Drain Lines Checked		
Tanks Checked		
Pressure Manifold or Valve Box Checked		
Pressure Head Set		
Electrical Checked		
Floats Set		
Alarm Checked		
Maintenance Contract Needed? Y / N		
Comments:		

Repairs Only	
	State Code
Failing System Code	
Type of Distribution	G or P
Type of Failure/Malfunction	
Primary Cause of Failure/Malfunction	
Age of System? _____	
Initial or Repair? _____	

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 (BB) Mooresville Office (704) 660-3625 PERMIT # OSWP-2023-34854

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

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SITE DIRECTIONS: Chipley Ford, Bluegill SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: Poplar Ridge SECTION: - LOT # 12 LOT AREA: 1.4 DESIGN FLOW: 480 L.T.A.R.: .3

Septic Tank	1000	(gal)	STB		Date						
Pump Tank		(gal)	PT		Date						
Pump Make			Model		Serial #						
# Nitrification Fields	1	# Lines	4		Linear Ft	400					
Trench Width	36 in	Trench Bottom Depth(Low side)	22 in		Gravel Depth	N/A					

☑ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI

System Description: Gravity - 25% Reduction - Serial

Repair System Description: Gravity - 25% Reduction - Serial

Maintenance Agreement Required: ☐ YES ☑ NO

☑ GRAVITY ☐ PRESSURE

☑ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing

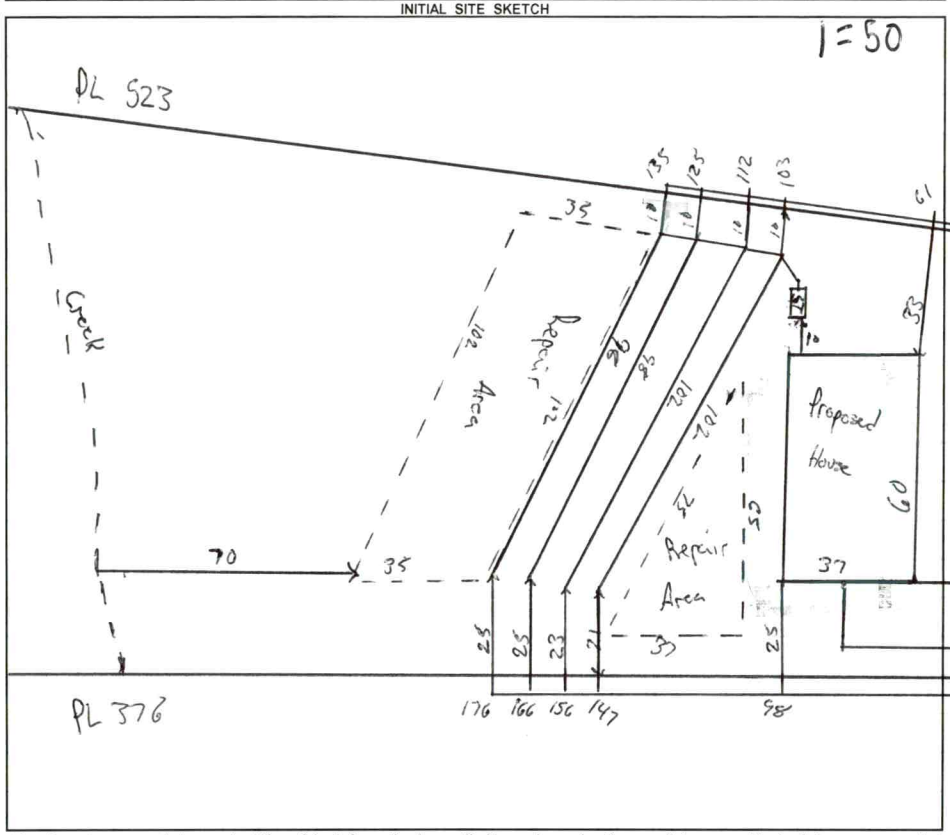
No. Bedrooms 4 No. Persons 8 No. Employees

☑ Crawl Space ☐ Basement w/o plumbing

Water Supply: ☐ Private ☑ Public ☐ Community

Comments / Conditions: Install on contour with 4ft centers. Do not drive, park or construct on septic area.

INITIAL SITE SKETCH



AS BUILT SKETCH

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☐ **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: Online Signature Date: Installed by:

IMPROVEMENT PERMIT by: Matt Wilkie Date: 9/22/23 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Matt Wilkie Date: 9/22/23 Existing System Inspected by: Date:

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

Item	Date	Initials
Drain Lines Checked		
Tanks Checked		
Pressure Manifold or Valve Box Checked		
Pressure Head Set		
Electrical Checked		
Floats Set		
Alarm Checked		
Maintenance Contract Needed? Y / N		
Comments:		

Repairs Only	
	State Code
Failing System Code	
Type of Distribution	G or P
Type of Failure/Malfunction	
Primary Cause of Failure/Malfunction	
Age of System? _____	
Initial or Repair? _____	

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

Sheet 1 of 1
PROPERTY ID #: 4737787244
COUNTY: Iredell

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

OWNER: Winchester Grant
APPLICATION DATE 6/23/23
ADDRESS: 1302 South Potter Rd, Monroe, NC 28110
DATE EVALUATED: 6/26/23
PROPOSED FACILITY: SFR
PROPOSED DESIGN FLOW (.1949): 480
PROPERTY SIZE: 1.4Ac
LOCATION OF SITE: 294 Hoegill
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	LS 17%	0-7	Disturbed		—	50	Heavy inc	SAP 35+	.3 PS
		7-26	C SBK	SS sp friSE					
		26-50	CL SBK	SS sp friSE					
2	LS 17%	0-26	C/SBK	SS sp friSE	—	48	Heavy Inclusions in CL	Sap	PS .3
		26-48	CL/SBK	SS sp friSE					
3	LS 15?	0-30	C SBK	SS sp friSE	—	48	Heavy SAP & Mang inc in CL layer		.3 PS
		30-48	CL SBK	SS sp friSE					
4	LS 17%	0-32	C	SS sp friSE	—	50	Heavy in CL	Sap	PS .3
		32-50	CL	SS sp friSE					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	480	480
System Type(s)	25%	25%
Site LTAR	.3	.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Matthew W
OTHER(S) PRESENT:

COMMENTS: 704-941-9625

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	SEXP (Slightly Expansive)	G (Single Grain)
CV (Convex Slope)		LS (Loamy Sand)			EXP (Expansive)	M (Massive)
D (Drainage Way)						CR (Crumb)
DS (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
FP (Flood Plain)		L (Loam)				SBK (Subangular Blocky)
FS (Foot Slope)						ABK (Angular Blocky)
H (Head Slope)	III	Si (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
L (Linear Slope)		SiCL (Silty Clay Loam)				PR (Prismatic)
N (Nose Slope)		CL (Clay Loam)				
R (Ridge)		SCL (Sandy Clay Loam)			**MOIST**	**WET**
S (Shoulder Slope)		SiL (Silt Loam)				
T (Terrace)					VFR (Very Friable)	NS (Non-sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FR (Friable)	SS (Slightly Sticky)
		SiC (Silty Clay)			FI (Firm)	S (Sticky)
		C (Clay)			VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
		O (Organic)	None	None	EFI (Extremely Firm)	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

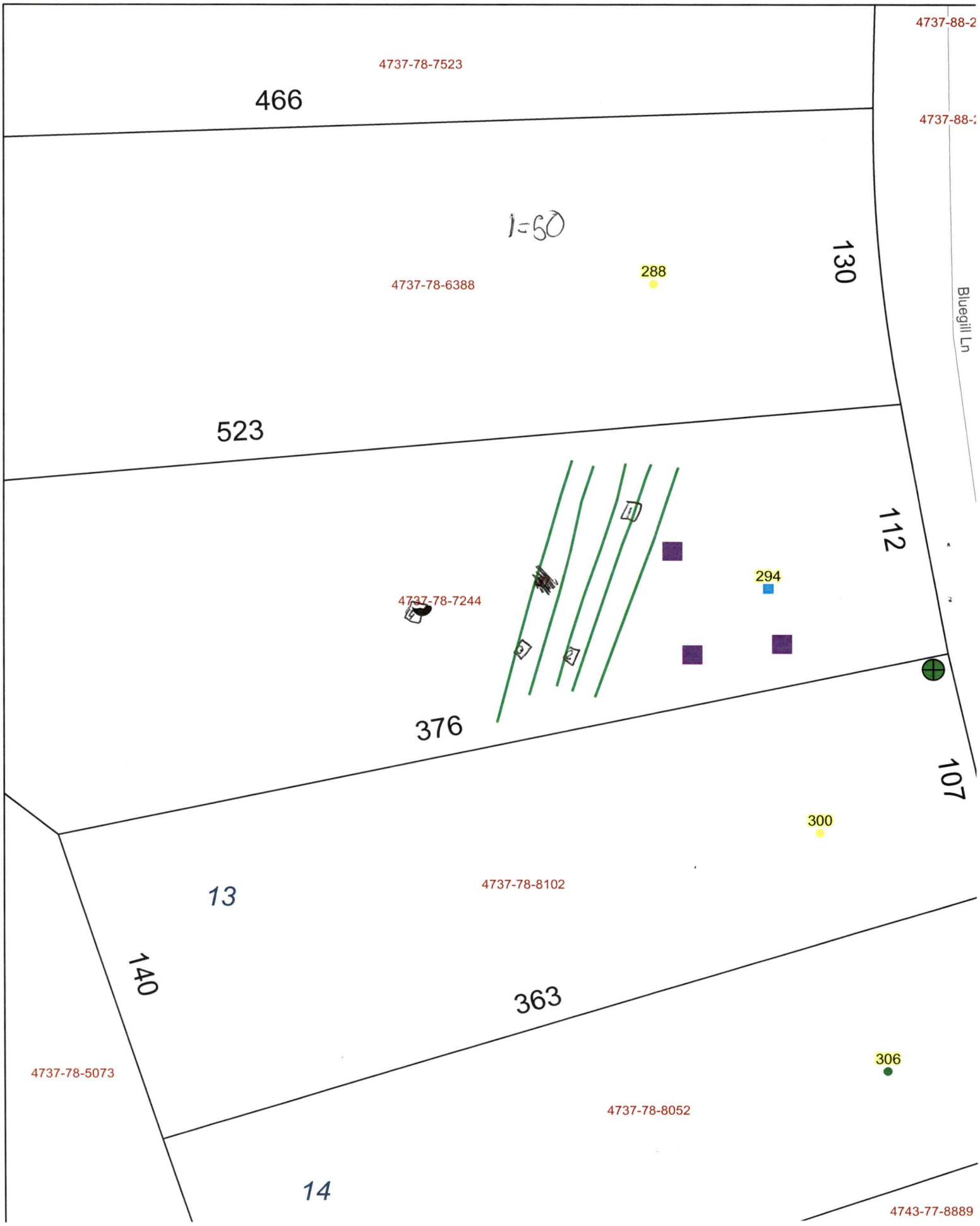
HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or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

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).




4737-88-2
4737-78-7523
466
4737-88-
1=50
130
288
4737-78-6388
Bluegill Ln
523
112
294
4737-78-7244
376
107
300
13
4737-78-8102
140
363
306
4737-78-5073
4737-78-8052
14
4743-77-8889

PERMIT SNAPSHOT REPORT OSWP-2023-34854 FOR IREDELL COUNTY

Permit Type: Environmental Health OSWP
Work Class: EH Septic Permit
Status: In Progress
Valuation: $0.00

Project:
District: Iredell County
Square Feet: 0.00
Assigned To: Wilkinson, Matthew

App Date: 08/23/2023
Exp Date: NOT AVAILABLE
Completed: NOT COMPLETED
Approval Expire Date:

Description: we are needing to apply for a comprehensive relayout for a septic permit that we already have. needing to pull the house forward. ******Contact Robert Poole*****Want to move driveway See notes 8/28 Called Grant Winchester left VM GM. 8/29 Contractor stated Applicant called him and wants Robert to make all contact with us. Robert Poole 704-941-9625. They want to move driveway to left side.. Robert stated site ready. 8/29 Site visit, site ready.

Parcel: 4737787244.000 Main

Address: 294 Bluegill Ln Main
Statesville, NC 28625

Zone: RA(Residential Agricultural District)

Applicant/Authorized Agent
WINCHESTER GRANT
1302 SOUTH POTTER RD.
MONROE, NC 28110
Business: (704) 993-0572

Property Owner
BLUEWAVE CUSTOM BUILDERS
2113 WRIGHT RD.
INDAIN TRAIL, NC 28079
Business: (704) 993-0572

Permit Custom Fields

How is your site plan being submitted	Survey Plat	Septic Application/Permit Type	Authorization to Construct, Improvement Permit, Re-Layout/change septic permit (sys not installed)	Does the site contain any jurisdictional wetlands	No
Non-domestic Sewage Generated	No	Other Public Agency	No	All proposed structure dimensions	46'x37'
What are the proposed structures	New Single-Family Residence - Modular	Type of New Single-Family Residence	Stick Built	Maximum Number of Bedrooms	4
If other Addition/Structure, please explain		Number of Occupants	4	Foundation Type	Crawl Space Foundation
Residential/Business/Other	Residential	Number of Employees	1	Water Supply	Municipal Water
Desired Septic System Type	Conventional (most common)	Has this project been approved by TRC	No	Lot Acreage	1.4
Front Setback	35	Back Setback	35	Left Setback	15
Right Setback	15	Zoning Permit Issued Date	Aug 28 2023 12:00AM	Zoning Permit Expiration Date	Feb 24 2024 12:00AM
Is the structure or development in the floodplain	No	Is the property in a local historic district?	No	Is the property located downtown?	No
Additional Unique Setbacks Apply	No	Watershed	WSIV PA SOUTH YADKIN		

Type of Hold	Created By	Date Created	Hold Origin	Comments	Active
Awaiting Additional Documents	Ronda Hart	08/29/2023 16:43	BLDR-2023-34984	SEPTIC PERMIT IS BEING REDRAWN - NEW IP/AC NEEDS TO BE ISSUED.	Yes

Attachment File Name	Added On	Added By	Attachment Group	Notes
Signature_WINCHESTER_GRANT_8/23/2023.jpg	08/23/2023 16:48	GRANT, WINCHESTER		Uploaded via CSS
2023-08-23 16-39_v1.pdf	08/24/2023 8:14	COMEAUX, DEBRA	Available Online	Authorize to Act as Agent
Plan_v1.pdf	08/24/2023 8:14	COMEAUX, DEBRA	Available Online	Floor Plan(s)
2023-08-24 15-04_v1.pdf	08/25/2023 9:39	Sloan, Chrystal	Available Online	Site Plan

Inspection Number	Status	Inspection Type	Request Date	Scheduled Start Date	Scheduled End Date	Actual Start Date	Actual End Date
2023-133283	Passed - Permit	OSWP Septic/Well Preliminary Site Visit	08/29/2023	08/29/2023 0:00	08/29/2023 0:00	08/29/2023 15:04	08/29/2023 15:04

PERMIT SNAPSHOT REPORT (OSWP-2023-34854)

Inspectors: McLeod, Grace (Primary)

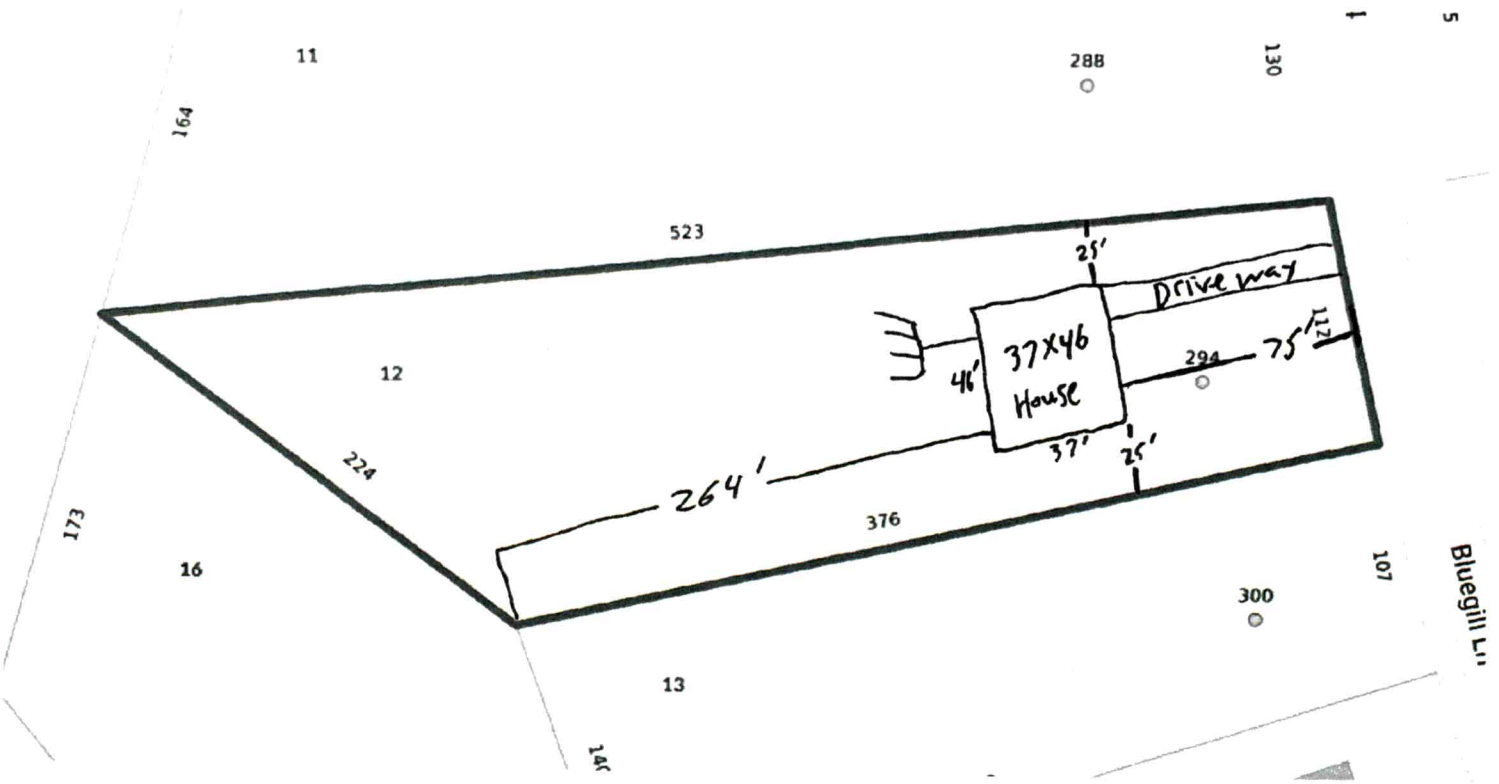
Checklist Item	Description	Passed	Comments
General Comments	Checklist item used to track general comments, not specific to any other checklist item	No	

Linked Record Relationship	Module	Record Number	Linked Record Type	Linked Record Work Class
Parent	Permit	BLDR-2023-34984	Residential Building	New Single-Family Dwelling

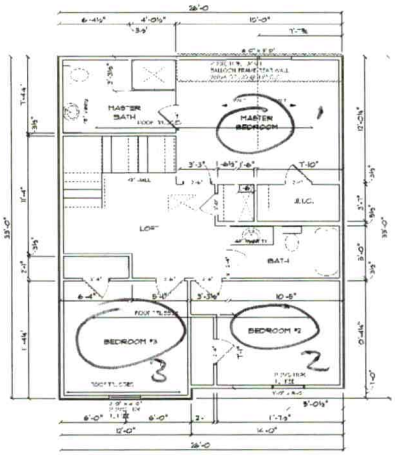
Note	Created By	Date and Time Created
1. 8/28 Called Grant Winchester left VM. GM	Grace McLeod	08/28/2023 16:35
2. 8/29 Contractor stated Applicant called him and wants Robert to make all contact with us. Robert Poole 704-941-9625. They want to move driveway to left side.. Robert stated site ready. 8/29 Site visit, site ready GM	Grace McLeod	08/29/2023 15:03

Invoice No.	Fee	Fee Amount	Amount Paid
INV-00019809	Iredell Zoning Permit Fee	$75.00	$75.00
	Iredell Zoning Tech Fee	$2.25	$2.25
	New Gravity System	$500.00	$500.00
	Total for Invoice INV-00019809	$577.25	$577.25
	Grand Total for Permit	**$577.25**	**$577.25**

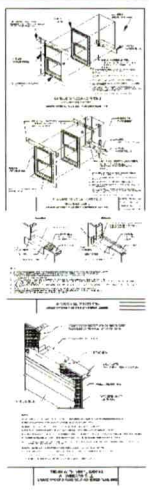
Workflow Step / Action Name	Action Type	Start Date	End Date
Application Completeness Check v.1		08/24/2023 8:15	08/24/2023 8:15
Confirm application complete v.1	Generic Action		08/24/2023 8:15
Fees v.1		08/25/2023 11:12	08/28/2023 8:18
Fees Paid v.1	Generic Action		08/28/2023 8:18
Issue Invoice v.1	Generic Action		08/25/2023 11:12
Lot Readiness Verification v.1		08/29/2023 15:04	
OSWP Septic Preliminary Site Visit v.1	Inspection	08/29/2023 15:04	08/29/2023 15:05
OSWP Site Evaluation v.1	Inspection		
Zoning Review v.1		08/25/2023 10:02	08/28/2023 8:18
~~Floodplain Admin Overview v.1~~	Task		08/25/2023 10:02
Iredell County Zoning Approval v.1	Task	08/25/2023 10:02	08/28/2023 8:18
Issue Invoice v.1	Generic Action		08/25/2023 10:02
Fees Paid v.1	Generic Action		08/28/2023 8:18
Issue Improvement Permit v.1			
Issue Invoice v.1	Generic Action		
Fees Paid v.1	Generic Action		
Issue Permit v.1	Generic Action		
Permit Completion Process v.1			
Authorization to Construct Permit v.1	Create Sub Permit		
Issue Authorization to Construct v.1	Generic Action		

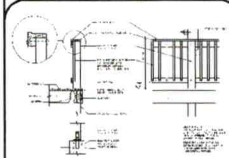

11
288
130
164
523
25'
Driveway
12
37X46
House
46'
294
75'
224
264'
37'
25'
376
173
16
107
300
Bluegill Ln
13
145

Acknowledgement Of
Plans Submittal ONLY!
Matt Wilk Date 9/22/23
Date



2ND FLOOR WALLS & CEILING NOTES:
1. ALL EXTERIOR LAOD BEARING HEADERS PER PLAN
2. ALL INTERIOR LOAD BEARING HEADERS PER PLAN
3. #JACKS = NUMBER OF JACK STUDS + NUMBER OF KING STUDS AT EACH END OF HEADER OR BEAM
4. ROOF TRUSS = ROOF TRUSSES AT 24" O.C. MAX PER MANUFACTURER





DECK AND RAILING OPT.

SEAL FOR STRUCTURAL ONLY

ATTENTION

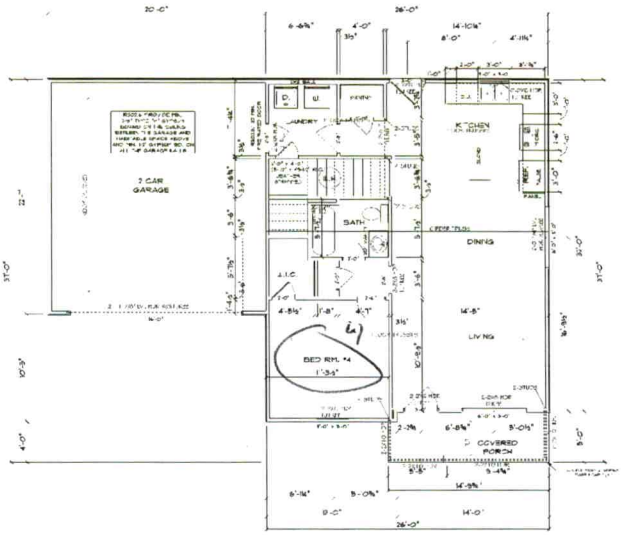
2ND. FLOOR PLAN
SCALE: 1/4" = 1'-0"

THE HARRIS PLAN
. 2 CAR GARAGE

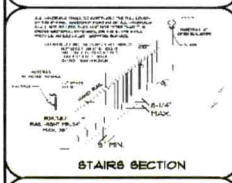
REVISIONS
10-01-2020

DATE DRAWN
01-01-2020

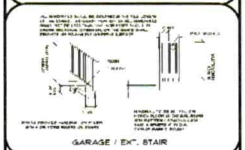
A-4



1ST FLOOR WALLS & CEILING NOTES:
1. ALL EXTERIOR LOAD BEARING HEADERS PER PLAN.
2. ALL INTERIOR LOAD BEARING HEADERS PER PLAN.
3. #JKEE. – NUMBER OF JACK STUDS & NUMBER OF KING STUDS AT EACH END OF HEADER OR BEAM.
4. FLOOR TRUSSES – 24" OPEN WEB FLOOR TRUSSES AT 24" O.C. MAX PER MANUFACTURER. DESIGN AT U480



STAIRS SECTION



GARAGE / EXT. STAIR

SQUARE FOOTAGE:
1st. FLOOR 868 SQFT. 2nd FLOOR 802 SQFT.
TOTAL HEATED 1680 SQFT.
GARAGE 451 SQFT. FRONT PORCH 59 SQFT.
TOTA. UNDER ROOF 2170

SEAL FOR STRUCTURAL ONLY

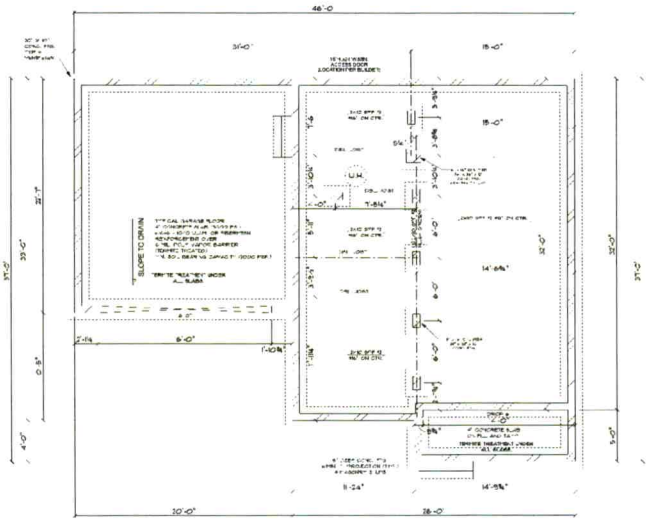
ATTENTION

1ST FLOOR PLAN
SCALE: 1/4" = 1'-0"

THE HARRIS PLAN
2 CAR GARAGE

REVISIONS
DATE DRAWN
JULY 2025

A-3



FOUNDATION NOTES:
1. ALL DIMENSIONS TO BE VERIFIED AGAINST THE ARCH. PLANS
2. ALL SOIL TO BE 2000 PSF BEARING CAPACITY, MINIMUM
3. ALL CONCRETE TO BE 3000 PSI, MINIMUM
4. SEE DETAILS FOR FOUNDATION SIZE & REINFORCING
5. ALL FOOTINGS TO BEAR MINIMUM 12" BELOW GRADE

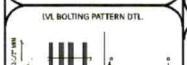


8LAB DETAIL
SCALE: 3/4"=1'-0"

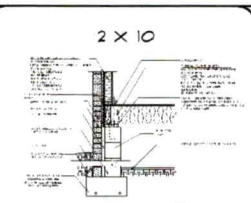
TYPICAL HANGERS FOR JOIST AND BEAM

MEMBER	HANGER
2 X 6	
2 X 8	
2 X 10	
2 X 12	
3 X 6	
3 X 8	
3 X 10	
3 X 12	
4 X 6	
4 X 8	
4 X 10	
4 X 12	
6 X 6	
6 X 8	
6 X 10	
6 X 12	

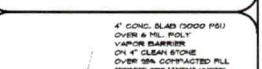
* ALL HANGERS BY SIMPSON STRONG-TIE CO., INC. (BRAND-NAME EQUIVALENTS ACCEPTABLE)







BRICK PIER & CURTAIN DETAIL
SCALE: 1/2"=1'-0"



8LAB DETAIL
SCALE: 3/4"=1'-0"

GENERAL NOTES:

1. FLOOR JOIST SHALL BE 2X10 SPF #2 @ 16" O.C. U.N.O.
2. DOUBLE JOIST UNDER ALL PARALLEL PARTITION WALLS GREATER THAN 5'-0" IN LENGTH.
3. 8" X 16" C.M.U. PIER ON 24" X 32" X 10" CONC. FOOTING (TYP.)
4. CONCRETE TO HAVE 3000 PSI, MIX (MIN.)
5. ALL SOIL TO HAVE 2000 PSF. BEARING CAPACITY

VENTILATION NOTE:

THE MINIMUM NET AREA OF VENTILATION OPENINGS SHALL NOT BE LESS THAN 1 SQ.FT. FOR EACH 150 SQ.FT. OF UNDER FLOOR AREA. ONE SUCH VENTILATING OPENING SHALL BE WITH IN 3' OF EACH CORNER OF SAID BUILDING



SEAL FOR STRUCTURAL ONLY

ATTENTION

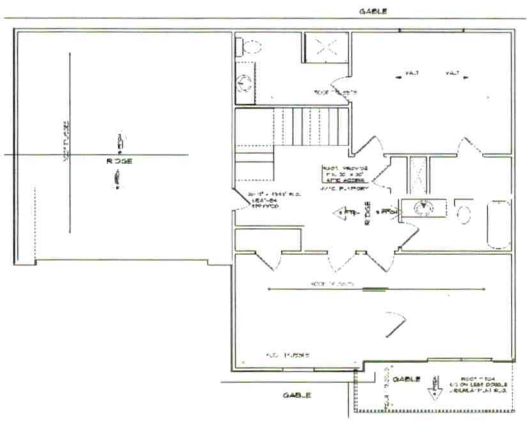
FOUNDATION PLAN
SCALE: 1/4" = 1'-0"

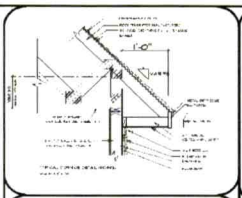
THE HARRIS PLAN
2 CAR GARAGE

REVISIONS
01-01-2020

DATE DRAWN
01-01-2020

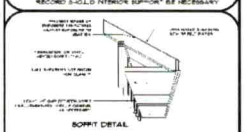
A-2





STRUCTURAL NOTES:

1. M.T. + ROOF TRUSS PER MANUFACTURER
   + 24" O.C. MAX.
2. G.T. + GIRDER TRUSS PER MANUFACTURER
2. DESIGN AND LAYOUT OF ROOF TRUSSES SHALL BE PROVIDED BY MANUFACTURER. INSTALLATION SHALL BE PER MANUFACTURERS INSTRUCTIONS.
4. ROOF TRUSS STRUCTURAL DESIGN FOR EXTERIOR L.L. BEARING WALLS - CONSULT WITH ENGINEER OF RECORD IF SOLID INTERIOR SUPPORT BE NECESSARY



SOFFIT DETAIL

ROOF VENTILATION CALCULATIONS



SEAL FOR STRUCTURAL ONLY

ATTENTION

ROOF PLAN

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

THE HARRIS PLAN

2 CAR GARAGE

REVISIONS:
07.17.2020
09.15.2020

A-5

DocuSign Envelope ID: 822833F2-A7B1-4C4B-A74E-CA86876B42D1

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*)** DocuSigned by: C3EB4D62D3254CB...

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, THOMAS TORRONE, am the legal owner(s) of the property located at 294 BLUEGILL LANE STATESVILLE, NC, identified as PIN (Parcel Identification Number) 4737-78-7244.000, located in Iredell County, North Carolina.

I do hereby authorize **(print legal representative/company name)** SAVANNAH CHAPMAN - CAROLINA LANDMARK REALTY ~~AND/OR MELISSA BEAVER - RE/~~MAX PROPERTIES PLUS, 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.

DocuSigned by: _____ 6/23/2021

Signature of Owner(s) Date

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

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

IREDELL COUNTY · NC

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

APPLICATION NUMBER
319451 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4737787244.000	294 BLUEGILL LN	Iredell County

Owner Information	Applicant Information
Name: TORRONE THOMAS	Name: EDGAR LOPEZ
Address: 14930 CENTER ST	Address: 802 SUGAR MAPLE ST
FORT MYERS, FL 33905	VICKSBURG, MT 49097
Phone:	Phone: (269)251-9851

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
1.4	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: 07/07/2021

Signature of Owner/Contractor

Permit Number	319451	TOTAL FEES:	$77.25