(88)

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP-310288

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

PIN # 4740 - 10 - 4906

APPLICANT/OWNER: CLAYTON HOMES/ IRON IVEY LLC. APPLICANT ADDRESS: 2026 NORTHSIDE DRIVE, STATESVILLE, N.C. 28625

SITE ADDRESS: 171 BROOK CREEK DRIVE, TROUTMAN, N.C. 28166 PHONE: 704-239-1249 ALT. PHONE 704-360-2874

SITE DIRECTIONS: (S) ON 21, (R) ON FLOWER HOUSE, (R) ON CLONTZ HILL, (L) ON RIDGE CREEK (R) ON BROOK CREEK, LOT ON (L) SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: ROCKY CREEK COVE SECTION: SHTS LOT # 85 LOT AREA: 0.57 AC DESIGN FLOW: 480 GPD L.T.A.R.: 0.25

Septic Tank	1000	(gal)	STB	60	Date	7-24-21	☑ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	
Pump Tank	1000	(gal)	PT	363	Date	10-8-21	System Description:	25% REDUCTION - P.M.			
Pump Make	Champion	Model	CPSTEP525		Serial #	[illegible]	Repair System Description:	50% REDUCTION - PPBPS			
# Nitrification Fields	1	# Lines	5		Linear Ft	484 FT	Maintenance Agreement Required:	☐ YES	☑ NO		
Trench Width	36 IN	Trench Bottom Depth (Low side)	MAX 24 IN		Gravel Depth	—		☐ GRAVITY	☑ PRESSURE		

☑ Residence	No. Bedrooms	4	**Water Supply**
☐ Business	No. Persons	8	☑ Private
☐ Other	No. Employees	—	☐ Public
☐ Slab	☑ Crawl Space		☐ Community
☐ Basement w/plumbing			☐ Basement w/o plumbing

Comments / Conditions: SITE PLAN MUST BE ATTACHED AT ALL TIMES

10/5/21 Set 20# pressure checked/alarm

INITIAL SITE SKETCH

5T - 6FT to house

16 1/2 to Supply 21 1/2 to drainlines

AS BUILT SKETCH

This permit is issued pursuant to Section 11 . (C) of S.L. 2018-114 using the signed and sealed LSS Evaluation by:

SOIL AND FORESTRY SERVICES OF THE CAROLINAS, PA

LSS # 1231

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.

	Date	Initials
Drain Lines Checked ✓	9/16/21	MD
Tanks Checked	9/16/21	MD
Pressure Manifold or Valve Box Checked	9/16/21	MD
Pressure Head Set	10/5/21	MD
Electrical Checked	10/5/21	MD
Floats Set		
Alarm Checked		
Maintenance Contract Y / (N)		

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**

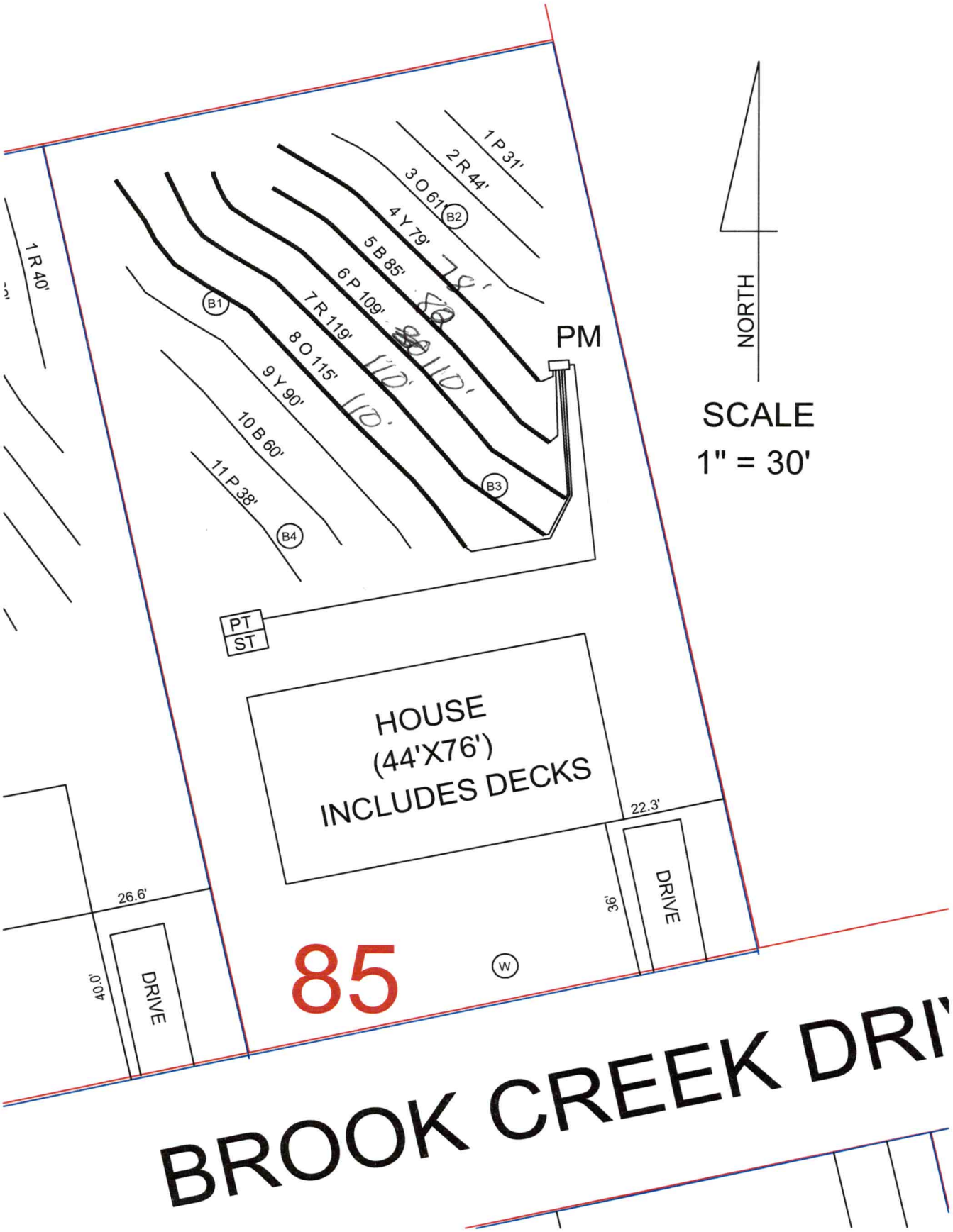
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☐ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: [signature] Date: 10-5-21 Installed by: Steve Jordan

IMPROVEMENT PERMIT by: Burgent C. White Date: 9-17-2020 OPERATION PERMIT by: Mina Dotson Date: 10/5/21

AUTHORIZATION TO CONSTRUCT by: Burgent C. White Date: 10-5-2020 Existing System Inspected by: Date:

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


1 P 31'
2 R 44'
3 O 61'
B2
4 Y 79'
5 B 85'
6 P 109'
7 R 119'
8 O 115'
9 Y 90'
10 B 60'
11 P 38'
B4
B1
B3
PM
1 R 40'
NORTH
SCALE
1" = 30'
PT
ST
HOUSE
(44'X76')
INCLUDES DECKS
22.3'
26.6'
40.0'
DRIVE
36'
DRIVE
85
W
BROOK CREEK DRI

SOIL & FORESTRY SERVICES
OF THE CAROLINAS, PA

www.soilandforestryservices.com

Project#: 20-0088
August 19th, 2020

CLAYTON HOMES
Attn: *Keith Wilkins*
Email: keith.wilkins@claytonhomes.com

RE: Soil & Site Evaluation for a 4 Bedroom Residence (Crawl Space) at Rocky Creek Cove, Lot 85, 0.57 ac Parcel, PIN# 4740104906, 171 Brook Creek Drive, Troutman, NC 28166.

Mr. Wilkins:

At your request Soil & Forestry Services of the Carolinas (S&FS) has performed soil/site evaluations on parcel noted above. The Lot size is noted on the attached survey map & soil evaluation form. The purpose of our work was to identify soil areas with potential to support subsurface wastewater disposal systems and provide design details for Session Law submittal to Iredell County Health Department.

Site Conditions

At the time of our evaluation land cover on the property was mixed pine/hardwood. Topography within the evaluated area was a gentle to moderate slope near the house site and proposed drainfield area. Property lines and corners were marked at the time of the evaluation by Jordan Grant Surveyors. A copy of the survey is attached. Iredell County Tax Parcel data was utilized as a basemap. The proposed septic layout was located via Trimble Submeter GPS and used to produce the attached *Site Plan*. The house envelope is also illustrated on the attached Site Plan. The attached Survey provided has house setbacks to property lines.

Methodology

We evaluated soil areas through the use of hand augers. Soil morphological conditions including color, texture, structure, etc. were reviewed in the field with four hand auger locations on the property flagged and located via GPS. All four of the hand augers are located in the proposed septic layout. Soil suitability was determined by referencing 15A NCAC 18A.1900 "Laws and Rules for Sewage Treatment and Disposal Systems". *Soil & Site Evaluation Forms* were utilized to record the soil morphological data for each pit. The house envelope with dimensions is specified on the attached Site Plan. An on-ground layout of system and repair was performed using a laser level. Pin flag locations of the layout were also located by GPS. Detailed system & repair information is summarized in the following paragraph for this Lot.

Lot 85 (*See Attached Design*)
The septic layout for this lot (9' centers) yielded a total of 831 linear feet of line. The primary system is proposed as 484 linear feet of Accepted (25% Reduction) drainfield with gravity distribution. Trench depth is specified at 24 inches. The repair system is proposed as 324 linear feet of PPBPS (50% Reduction) drainfield with low pressure distribution. Trench depth is specified at 30 inches.

Session Law Requirements

An LSS Evaluation may be submitted in conjunction with a complete application to the LHD. The application shall include all information described in 15A NCAC 18A .1937(d) and be accompanied by a signed and dated statement from the applicant (owner or owner's legal representative) that reads as follows:

"The LSS Evaluation attached to this application is to be used to produce design and construction features for permitting in accordance with SL 2018-114 Section 11.(c).".

Owner Clayton Homes Date

Print Name Jonathan Lanier Threet

Signature _____ 8/21/2020

The LSS Evaluation shall include a statement bearing the LSS seal and signature that reads as follows:

"The LSS Evaluation is being submitted pursuant to and meets the requirements of SL 2018-114 Section 11.(c)."

Disclaimer

This report reflects the findings of S&FS, PA. *This LSS Evaluation is being submitted pursuant to and meets the requirements of SL 2018-114 Section 11.(c).* **Any site modifications that impact the proposed septic areas on Lots 85 of Rocky Creek Cove Subdivision may nullify this design.** System design requirements and site requirements shall be adhered to for installation and Operations Permits to be issued by the local Health Department. If you have questions regarding these requirements a Pre-Construction meeting should be scheduled to discuss. Please contact S&FS if you have any questions regarding this report or the attached information. S&FS also offers septic system inspection, wetland delineation and forestry services.

Sincerely,

LICENSED SOIL SCIENTIST Samuel A. Rollans 1231 STATE OF NORTH CAROLINA

S. Ashley Rollans, LSS
Attachment: *Septic Design*

PRESSURE MANIFOLD SYSTEM
FOR WASTEWATER TREATMENT

Owner/Applicant:	Clayton Homes
Address:	2026 Northside Drive Statesville, NC 28677
Phone:	704.239.1249
County:	Iredell
Location:	171 Brook Creek Dr Troutman, NC 28166
Source of Wastewater Flow:	4 Bedroom Single Family Residence
Estimated Daily Wastewater Production:	480 gpd
System Flow:	32.29

Design Specifications

Drainfield Size:	484
Loading Rate:	0.25
Depth of Gravel in Trench:	NA (25% reduction)
Gravel Size:	NA (25% reduction)
Trench Depth:	24 in. Repair Trench Depth 30 in.
Trench Width:	36 in.
Septic Tank Size:	1000
Pump Tank Size:	1000
Estimated Supply Line Length:	121
Supply Line Diameter:	2 in. SCH 40 PVC
Supply Line Volume:	21.05
Dosing Volume:	221.24
Supply Manifold:	4 in. SCH 80 PVC
Supply Manifold Length:	4 ft. (minimum)
Supply Manifold Volume:	N/A
Recommended Float Controls:	SJE Sensor Float Control Switches as Required for Control Panel or County Approved Equivalents
Recommended Control Panel:	SJE-Rhombus Model 112 (NEMA 4x) Control Panel or County Approved Control Panel.
Pressure Head:	2 ft.
Friction Head:	2.87
Elevation Head:	13.50
Total Dynamic Head:	21.12
Threaded Union:	In Tank
Gate Valves:	1 in Tank 1 at Pressure Manifold
Check Valves:	In Tank
Anti-Siphon Hole:	NA
Additional Comments:	Soil suitability was performed by Soil & Forestry Services of the Carolinas, PA.

171 Brook Creek Dr
PRESSURE MANIFOLD DESIGN

DESIGN FLOW:	480
SOIL APPLICATION RATE:	0.25
TOTAL AREA TRENCH BOTTOM:	1452
TOTAL LATERAL LENGTH:	484
NUMBER OF FIELDS:	1
LATERAL LENGTH REQUIRED PER FIELD:	480
SUPPLY LINE LENGTH:	121
TOTAL DYNAMIC HEAD:	21.12
MANIFOLD SIZE:	4 in.SCH 80 PVC
DOSING VOLUME:	221.24
PUMP TANK DRAW DOWN*:	10.5
SEPTIC TANK SIZE:	1000
PUMP TANK SIZE:	1000

**Pump tank draw down based on a volume basis of 21 gallons per inch. Draw down may vary among pump tank manufacturers.*

Layout Specifications - 171 Brook Creek Dr.

Project #: 20-0088

LAYOUT FOR 4 BEDROOM HOME August 19, 2020

LINE #	FLAG COLOR	BS	HI	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
PRESSURE	MANIFOLD				847.50		
HOUSE	Left Rear				838.50		
PUMP TANK					839.00		
INSTR. 1							
1	PINK				847.70	31	31
2	RED				848.00	44	44
3	ORANGE				847.50	61	61
4	***YELLOW***				***847.10***	***79***	***80***
5	***BLUE***				***846.70***	***85***	***80***
6	***PINK***				***845.30***	***109***	***108***
7	***RED***				***844.70***	***119***	***108***
8	***ORANGE***				***843.60***	***115***	***108***
9	YELLOW				842.40	90	90
10	BLUE				841.20	60	60
11	PINK				840.00	38	38
					Total	831	808

	LINE LENGTH	LTAR GPD/FT2	SYSTEM TYPE	SOIL LTAR GPD/FT2	TRENCH SYSTEM	DISTRIBUTION	TRENCH DEPTH
**** System***	***484***	***0.250***	***ACCEPT.***	***0.250***	***25% RED***	***GRAVITY***	24"
Repair	324	0.250	MOD. CONV.	0.250	PPBPS	LOW PRESSURE	30"

Notes: **All measures in feet

**Nitrification lines are demonstrated on contour via colored pin flags

**Nitrification lines were located by GPS & Tape Measure.

PRESSURE MANIFOLD TAPSHEET - 171 Brook Creek Drive

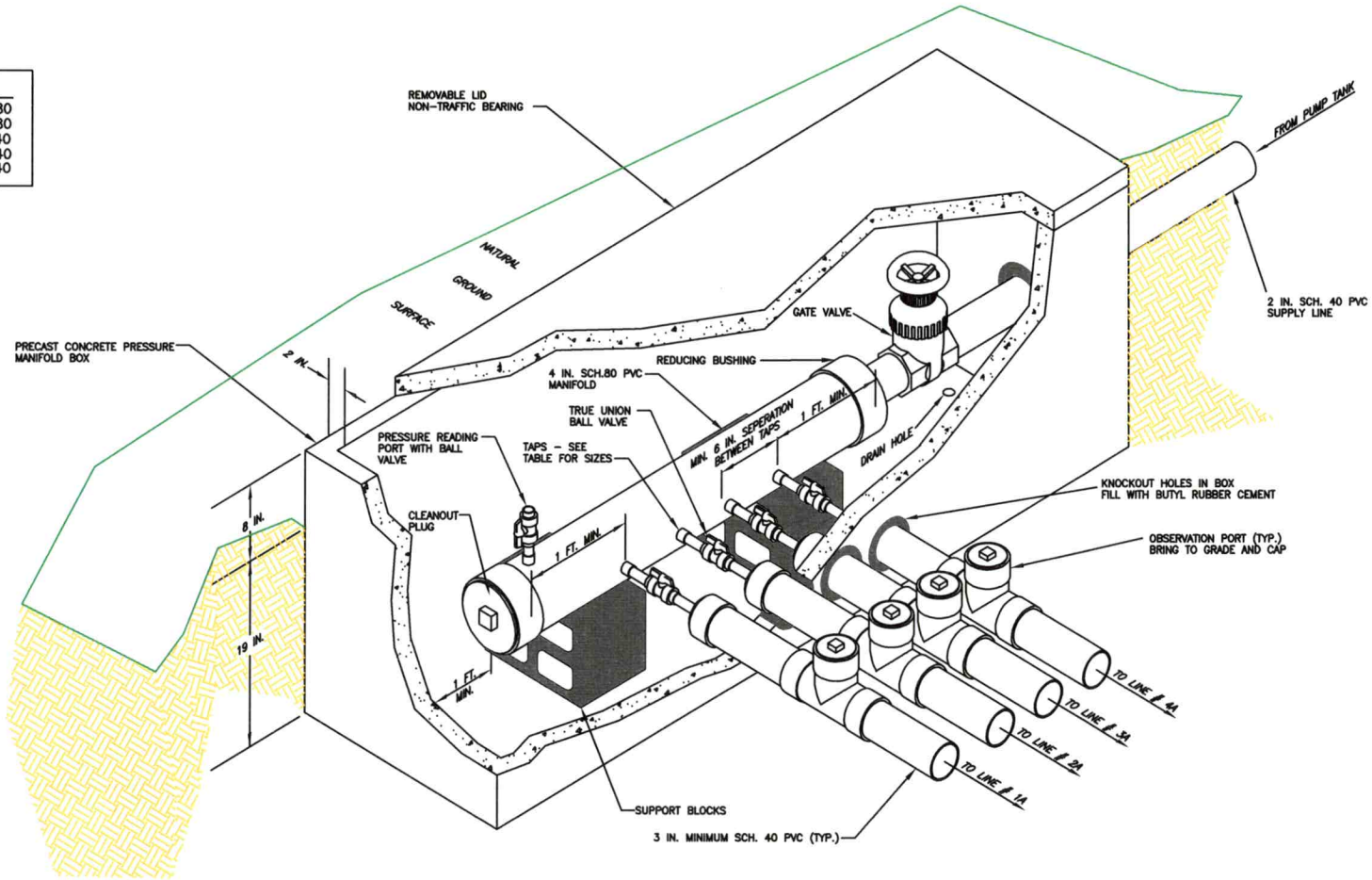
SYSTEM

Line #	Color	Elevation	Length	Hole Size	Flow/Tap	Trench Area	Line LTAR
4	*YELLOW*		*80*	SCH 80 1/2	**5.48**	240	0.16
5	*BLUE*		*80*	SCH 80 1/2	**5.48**	240	0.16
6	*PINK*		*108*	SCH 40 1/2	**7.11**	324	0.15
7	*RED*		*108*	SCH 40 1/2	**7.11**	324	0.15
8	*ORANGE*		*108*	SCH 40 1/2	**7.11**	324	0.15
	total	**feet =**	**484**	**gal/min =**	**32.29**		
			Des. Flow	**480**			
			Pump Run=	**6.85**			
			soil LTAR	**0.25**			
			LTAR +5%	**0.2625**			
			LTAR with ACCEPTED	**0.333333333**			
			LTAR with ACCEPTED + 5%	**0.35**			

PRESSURE MANIFOLD DETAILS
FOR
171 BROOK CREEK DRIVE

TAP SIZES

LINE No.	TAP SIZE
4	1/2" SCH. 80
5	1/2" SCH. 80
6	1/2' SCH. 40
7	1/2" SCH. 40
8	1/2" SCH. 40



CALCULATIONS

Location	171 Brook Creek Dr. Troutman, NC 28166	
Project Number	20-0088	
Lot No:	85	
No. of Bedrooms	4	
Design Flow	480	$^{gal}/_{day}$
LTAR	0.250	$^{gpd/ft^2}$
25% RED.? (YES OR NO)	YES	
Supply Line Length	121	ft.
Supply Line Volume	21.054	gal.
Required Feet of Line	480	ft.
Amount of Line from Layout	484	ft.
Gallons per Minute	32.29	$^{gal}/_{min}$
Required Septic Tank Capacity	1000	gal.
Minimum Standard Tank Size	1000	
Lateral Line Volume	316.052	gal.
Dosing Volume	221.24	gal.
	Note: Dosing Volume based on 70% of lateral line volume	
Tank Draw Down	10.5	*Generic Draw Down of 21 gal.per in.*
Pump Run Time	6.85	minutes
Elevation Head	13.5	ft.
Pressure Head	2	ft.
Friction Factor	2.37	ft./100 ft. *(From the interpolater.)*
Friction Head	2.87	ft.
Total Dynamic Head (+15%)	21.12	ft.

FRICTION FACTOR INTERPOLATER
2" SCH 40 PVC

GPM	*f*
20	0.84
	-0.88
25	1.27
	-1.28
30	1.78
	-1.76
35	2.37
	-2.25
40	3.03
43.07	3.48
45	3.77
48.14	4.28
50	4.58
57.11	5.89
60	6.42

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

Sheet 1 of
PROPERTY ID #: 4794104906
COUNTY: Iredell

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

OWNER: Iron Ivey LLC
ADDRESS: 935 Bronx River Avenue, Bronx NY 10473
APPLICATION DATE
PROPOSED FACILITY: 4BR
PROPOSED DESIGN FLOW (.1949): 480 gpd
DATE EVALUATED: 4/15/2020
LOCATION OF SITE: 171 Brook Creek Drive, Troutman NC 28166 Lot 85
PROPERTY SIZE: 0.57 AC
WATER SUPPLY: ☐ Private ☐ Public ☑ Well ☐ Spring ☐ Other
PROPERTY RECORDED: Yes
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
B 1	L/6%	0-3	RBCL wmsbk	Fr SS SP					PS .3
		3-32	RC wmsbk	Fr SS SP					
		32-52	RBCL wfsbk	Fr SS SP	Few SAP	52	–	–	
B 2	L/4%	0-5	BSL Gr	Fr SS SP					PS .3
		5-11	RBCL wfsbk	Fr SS SP					
		11-40	BRC wmsbk	Fr SS SP		4°	–	–	
		40-48	RBCL wfsbk	Fr SS SP	Few SAP				
B 3	L/5%	0-7	BSL Gr	Fr SS SP					PS .25
		7-13	RBCL wfsbk	Fr SS SP					
		13-40	BRC wmsbk	Fr SS SP		45	–	45	
		40-45	RBCL wmsbk / Alt	Fr SS SP	C, Fe Dep/ Few SAP Few foC, Wh Rock				
		45-48	CR						
B 4	L/5%	0-4	BSL Gr	Fr SS SP					PS .25-.275
		4-10	RBCL wmsbk	Fr SS SP					
		10-40	RC wmsbk	Fr SS SP	Few Fe Dep @ 38"	4°	–	–	
		40-48	RBCL wfsbk	Fr SS SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	Accepted	Panel
Site LTAR	.25	.25

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

LICENSED SOIL SCIENTIST Samuel A. Rollins 1231 STATE OF NORTH CAROLINA

COMMENTS:

RECEIVED AUG 2 1 2020

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Paid $120.00 Session Law

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) 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 AP- 310288

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 (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

****

Applicant Information: (PRINT CLEARLY)

Applicant Name: Clayton Homes **Address:** 2026 Northside Dr. Statesville NC **Zip:** 28677

Applicant Email: Keith.wilkins@Claytonhmes.com **Phone:** 704-239-1249 **Alt. Phone:**

Owner Name: Iron Ivey LLC **Address:** 935 Bronx River Avenue, Bronx NY **Zip:** 10473

Owner Email: dfspred4@gmail.com **Phone:** 704-360-2874 **Alt. Phone:**

****

Property Information:

Street Address: 171 Brook Creek Dr. Troutman NC 28166

Subdivision Name: Rocky Creek Cove **Section/Phase:** SHT5 **Lot Number:** 85

Driving Directions: Hwy 150, Right on Perth Rd, Right Clontz Hill, Right on Ridge Creek Drive,

****

Site Development Information: ***(check or complete ALL that apply***

CHECK FOUNDATION TYPE

(✓) New Single Family Residence — Maximum Number of Bedrooms: 4 — (✓) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: 8 — ( ) 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:

(✓) 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 Accepted

****

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: Samuel A Tallent 8/19/20

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

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

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.

I, Iron Ivey LLC, am the legal owner(s) of the property located at 171 Brook Creek Dr. Troutman NC 28166, identified as PIN (Parcel Identification Number) 4794104906, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) Samuel Ashley Rollans, Rollans Soil & Environmental Services, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below. CLAYTON HOMES STATESVILLE

- 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.

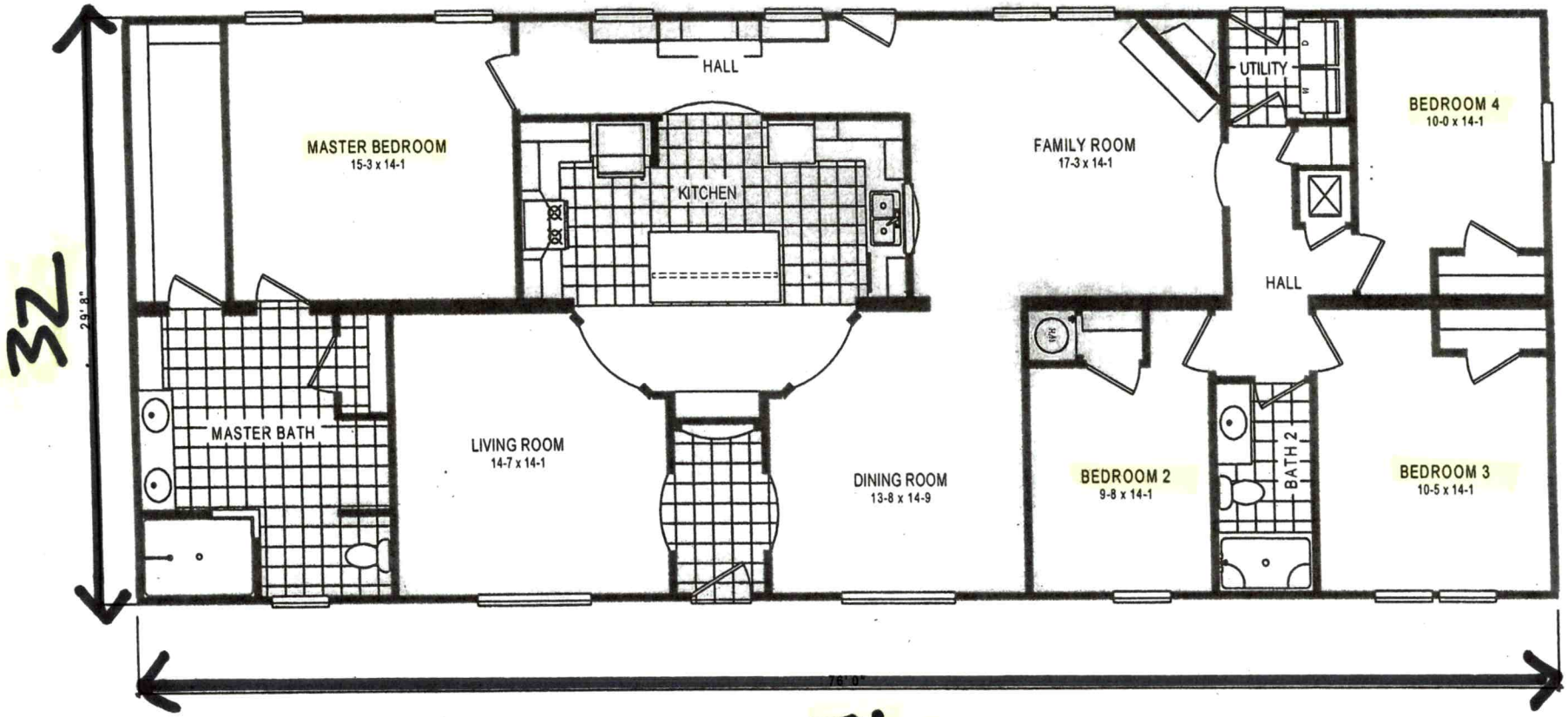
Signature of Owner(s)	Date	Signature of Witness	Date
	9/27/19		9/27/19.

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

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

171 Brook Creek
Lot 85



76

4 BEDroom

Acknowledgement Of Plans Submittal ONLY!

Date 9-30-2020

Date 10-5-2020

IREDELL COUNTY · NC

IREDELL COUNTY

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

APPLICATION NUMBER

310288
Issue Date: 08/21/2020

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4740104906.000	171 BROOK CREEK DR	IREDELL COUNTY

Owner Information	Applicant Information
Name: IRON IVEY LLC	Name: CLAYTON HOMES OF STATESVILLE
Address: 935 BRONX RIVER AVENUE	Address: 2026 NORTHSIDE DR
BRONX, NY 10473	STATESVILLE, NC 28677
Phone:	Phone: (704)873-2547

Use Requested	Zone Code
Modular	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0	35	35	15	15	WSIV-CA Catawba/Lake Norman	NO

Remarks
MODULAR HOME

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: 08/21/2020

Signature of Owner/Contractor

Permit Number	310288	TOTAL FEES:	$77.25