ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 HS Mooresville Office (704) 660-3625 PERMIT # AP 317393

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

PIN # 4751.14.9011

APPLICANT/OWNER: Boyce Galliher APPLICANT ADDRESS: 165 Ashley Acres Rd. Statesville, NC 28677

SITE ADDRESS: 438 Pilch Rd Troutman, NC ~~28677~~ 28166 PHONE: ALT. PHONE

SITE DIRECTIONS: US21/Hwy115 TR Oswalt Amity Rd TL Pilch Rd lot on right

SUBDIVISION: SECTION: LOT # LOT AREA: .459 Ac. SAP CONTROLLED: ☐ YES ☐ NO

DESIGN FLOW: 360gpd 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	300'			
Trench Width	36"		Trench Bottom Depth(Low side)		Gravel Depth				

☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI

System Description: Gravity 25% Reduction

Repair System Description: PP&PS (Hart)

Maintenance Agreement Required: ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

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

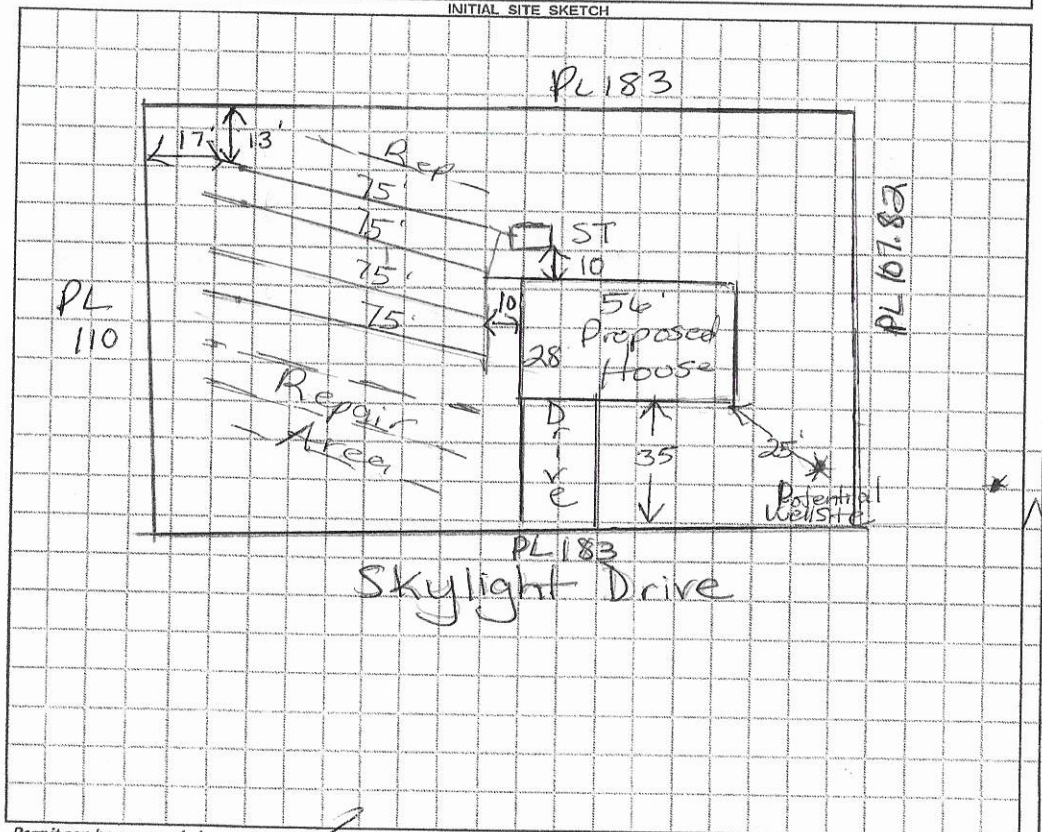
No. Bedrooms 3 No. Persons 10 No. Employees

☒ Crawl Space ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: No Foundation drain within 15ft (Side slope) of ST.

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.

Scale 1:50

Installed As Drawn

Exist Neighbor's well

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: Date: 6/14/21

IMPROVEMENT PERMIT by: Date: 6/5/21

AUTHORIZATION TO CONSTRUCT by: Date: 8/16/21

Installed by: Craig Thompson Grading

OPERATION PERMIT by: Cory Hicks Date: 9-20-21

Existing System Inspected by: Date:

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

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

Sheet ___ of ___
PROPERTY ID #: 4751240000
COUNTY: Iredell

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

OWNER: Boyce Galliher
ADDRESS: 165 Ashley Acres Rd Statesville NC
PROPOSED FACILITY: House
LOCATION OF SITE: 438 Pilch Rd Troutman, NC
APPLICATION DATE 4/17/21
DATE EVALUATED: 5/19/21
PROPERTY SIZE: .454
PROPERTY RECORDED: NO
PROPOSED DESIGN FLOW (.1949): 3 Bed
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	10% Initial	0-5 5-25 25-48	Brw SCL/SiCL RCm SCL RCm w/ SAP Inclus	wSBK, SS, SP, SExP wSBK SS, SP, SExP wSBK SS SP SExP	FR FR FR				PS .3
2	7% Repair	0-23 23-50 50-56	Brw SCL RCm RCL	wSBK SS, SP, SExP wSBK SS SP SExP wSBK SS, SP, SExP	Fi-FR (Compacted) FR FR				PS .3 > 23"
3	7% Rep.	0-20 20-48 48-56	Brw SCL RCL/CLm RCL	wSBK wSBK wSBK SS, SP, SExP, Fi-FR w/ Inclus of W. Rock > 48"	SS, SP, SExP, FR				PS .3
4	Poss. Rep. 7%	0-12 12-33 33-48 Lyr	Brw SCL RCm RCL Yel/Brw Inclus	wSBK SS, SP, SExP, Fi-FR wSBK SS, SP, SExP, Fi-FR & W. Rock					PS .25

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	25% Red	PP,BPS
Site LTAR	.3	.25-.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: Maria Dotson
OTHER(S) PRESENT: Boyce Galliher, Chris w/ Tim Abee

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

Sheet ____ of ____

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

PROPERTY ID #: 475240000
DATE OF EVALUATION: 5/19/21
COUNTY: Iredell

87' to front RL 140 to well 5/19/21

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	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
	5% Pit 5 Initial	0-5	Brw CL	WSBK SS	SP, SE, FR				PS, 3
		5-27	R Cm-w	SBK SS, SP, SE, FR					
		27-47	R Cw	SBK SS, SP, SE, FR					
			w/SAP	Inclus					
		47-51	C	SAP massive, FR					

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		
					MOIST	**WET**
	IV	SC (Sandy Clay) SiC (Silty Clay) C (Clay)	0.4 - 0.1	0.2 - 0.05	VFR (Very Friable) FR (Friable) FI (Firm) VFI (Very Firm v. Very Sticky) EFI (Extremely Firm)	NS (Non-sticky) SS (Slightly Sticky) S (Sticky) VS (Very Sticky) NP (Non-plastic) SP (Slightly Plastic) P (Plastic) VP (Very Plastic)
		O (Organic)	None	None		

*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

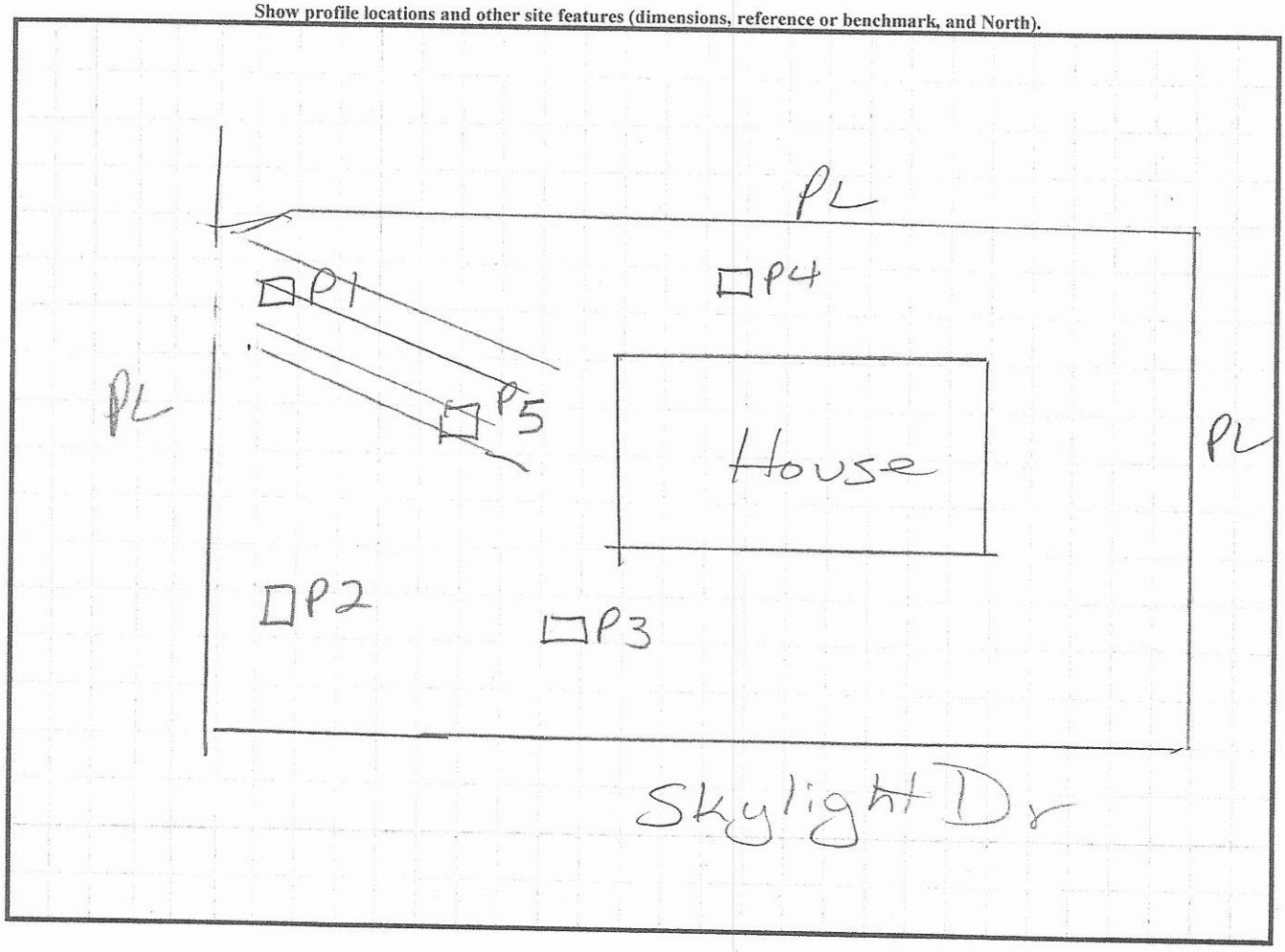
NOTES

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).



OWNER CERTIFICATION

I (we) hereby certify that I am (we are) the owner(s) of the property shown and described hereon, which is located in the subdivision jurisdiction of the County of Iredell and that I (we) hereby adopt this plan of subdivision with my free consent and establish minimum building setbacks as noted.

a. there are no deed restrictions which will be violated by the requested subdivision; and
b. there are no governmental regulations of any kind, other than those for which a variance has been applied for under the Iredell County Subdivision Ordinance regulations, which will be violated by the requested subdivision; and
c. I understand that enforcement of deed restrictions and any other contractual agreements is not the responsibility of Iredell County, will not be undertaken by Iredell County, and is the sole responsibility of the parties affected by violations of such deed restrictions and contractual agreements.

Owner Date

Owner Date

DEREK A. JOHNSON NOTARY PUBLIC IREDELL COUNTY NC

Iredell County North Carolina,
I, Derek A. Johnson a Notary Public of the County and State aforesaid, certify that personally appeared before me this day and acknowledged the execution and foregoing instrument. Witness my hand and seal this day of , 2020.

My commission expires Notary Public

VICINITY MAP

Not to Scale



SCALE

30 0 30 60 90

GRAPHIC SCALE – FEET

Legend

... rebar set unless noted
... computed point
... light pole
... utility pole
... overhead electrical line
... well
... right of way
...

SUBDIVISION ADMINISTRATOR

I hereby certify that the subdivision plat shown hereon has been found to comply with the Subdivision Regulations of the County of Iredell, North Carolina and this plat has been approved by the Subdivision Administrator for recording in the Register Deeds of Iredell County.

Subdivision Administrator
Iredell County, North Carolina

The Subdivision shown hereon to the best of my knowledge does not lie within a designated watershed by the North Carolina Division of Environmental Management and as appears on the Watershed Protection Map of Iredell County.

Date: Subdivision Administrator

STATE OF NORTH CAROLINA
COUNTY OF IREDELL

I, Review Officer of Iredell County, certify that the map or plat to which this certification is affixed meets all statutory requirements for recording.

Date: Review Officer

As of the date of this recording the lots represented on this plat have not been inspected or approved by the Iredell County Health Department. Until inspected there is no assurance that a Building Permit will be issued.

SURVEYOR CERTIFICATION

I, David B. Jordan, hereby certify that this survey creates a subdivision of land within the area of a county or municipality that has an ordinance that regulates parcels of land.

I, David B. Jordan certify that this plat was drawn under my supervision from an actual survey performed under my supervision (deed description recorded in Book 2865, page 1727); that the boundaries not surveyed are clearly indicated as drawn from information found in Book NA, page NA; that the ratio of precision as calculated is 1: 10,000 +; that the Global Positioning System (GPS) survey and the following information was used to perform the GPS (GNSS Field constellations are used) survey:
Class of survey: AA
Positional accuracy: 0.05+
Type of GPS field procedure: RTK networks
Dates of survey: 05-18-20
Datum/Epoch: NAD 83(2011) epoch 2010
Published/Fixed-control use: NCGS CORS Network
Geoid model: geoid12
Combined grid factor(s): 0.9999077547213
Units: US Survey feet
That this plat was prepared in accordance with G.S. 47-30 as amended.

Witness my original signature and seal this the _____ day of June 2020.

NORTH CAROLINA PROFESSIONAL SEAL L-3940 LAND SURVEYOR DAVID B. JORDAN

Preliminary Plat for Review Purposes

David B. Jordan, P.L.S. License-3940

SURVEY NOTES

1) Subject Property and adjoining property is Zoned R-A.
2) Subject property is on FIRM Panel # 3710474000J having an effective date of 03-16-2009.
3) All areas shown are by Coordinate Computation Method.
4) Linear feet in proposed street N/A.
5) Setback information: 35' Front, 30' Rear & 15' Side (per Iredell County Zoning Ordinance) See Lot 1 as typical.
6) It is the purpose of this plat to subdivide the property as shown.
7) This survey was prepared without the benefit of a title abstract and is made subject to any discrepancies which may be disclosed by a thorough and accurate title search.
8) Subject property is a portion of Tax PIN # 4751-24-0000.
9) All lots shown are to be served by Individual Septic Systems.
10) All lots shown are to be served by individual wells.
11) There shall exist along all property lines a 10' Drainage & Utility Easement. If restrictions permit the recombination or re-division of lots then the Drainage & Utility Easements along all interior lines shall be relinquished. This does not apply to any easement or right-of-way of record prior to the recordation of this plat. See Lot 1 for typical.

Surveyed by:
David B. Jordan
P.L.S. #3940
592 Bowles Farm Road
Statesville, NC, 28625
(704)-838-0028

Drwn By: D.A.J.	Deed Ref: 2865-1727
Aprvd By: D.B.J.	Tax Id#: 4751-24-0000
Field Date: 05-18-20	Date:
Plat Date: 05-20-20	Revision:
Scale: 1" = 30'	Date:
	Revision:

Record Plat For:
Ashley N. Plyler
&
Jeremy L. Plyler

Owner Information: Ashley N. Plyler
Jeremy L. Plyler
281 Pitch Road
Troutman, NC, 28166

Project Address:	436 Pitch Road
Project Location:	Barringer Twsp.
Project Location:	Iredell Co., N.C.
Job Number:	200511

Wed 5/19 @ 2:30

RECEIVED MAY 3 - 2021 317393

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED

Paid $500.00

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM*

Application For:

(✓) Septic Improvement Permit (X) Authorization to Construct ( ) New Well Permit ( ) Well Repair Permit ( ) Existing System Inspection ( ) Well Abandonment ( ) 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:

Place an (X) beside whichever is submitted if applicable

( ) Survey Plat, scaled no more than 1 inch = 60 feet

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

Applicant Information: (PRINT CLEARLY)

Applicant Name: Boyce Galliher Address: 165 Ashley Acres Rd. Statesville Zip: 28677

Applicant Email: boycegalliher@icloud.com Phone: 704.402.2795 Alt. Phone: _____

Owner Name: Jeremy Plyler Address: 313 Pilch Rd. Troutman NC. Zip: 28166

Owner Email: plylerw@bellsouth.net Phone: 704.902-1968 Alt. Phone: _____

Property Information:

Street Address: 438 Pilch Rd Troutman N.C. 28166 4365

Subdivision Name: _____ Section/Phase: _____ Lot Number: 1

Driving Directions: HW70 East - Rt on Shiloh - Rt on Pilch - Lot on Rt

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

(X) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____

Maximum Number of Bedrooms: 3
Maximum Number of Occupants: 4
( ) Swimming Pool
( ) Other Addition/Structure: _____

CHECK FOUNDATION TYPE

(X) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

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 (X) 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: Boyce Galliher 4-17-21

3/7393

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, Jeremy Z Plyler, am the legal owner(s) of the property located at _____, identified as PIN (Parcel Identification Number)_____, located in Iredell County, North Carolina.

I do hereby authorize **(print legal representative/company name)** _____, _____, 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.

X Jeremy Z Plyler _____
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

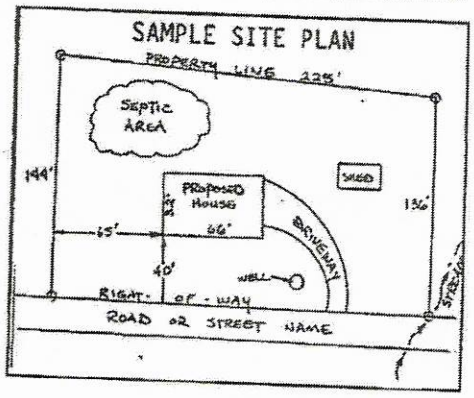
317393

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *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:

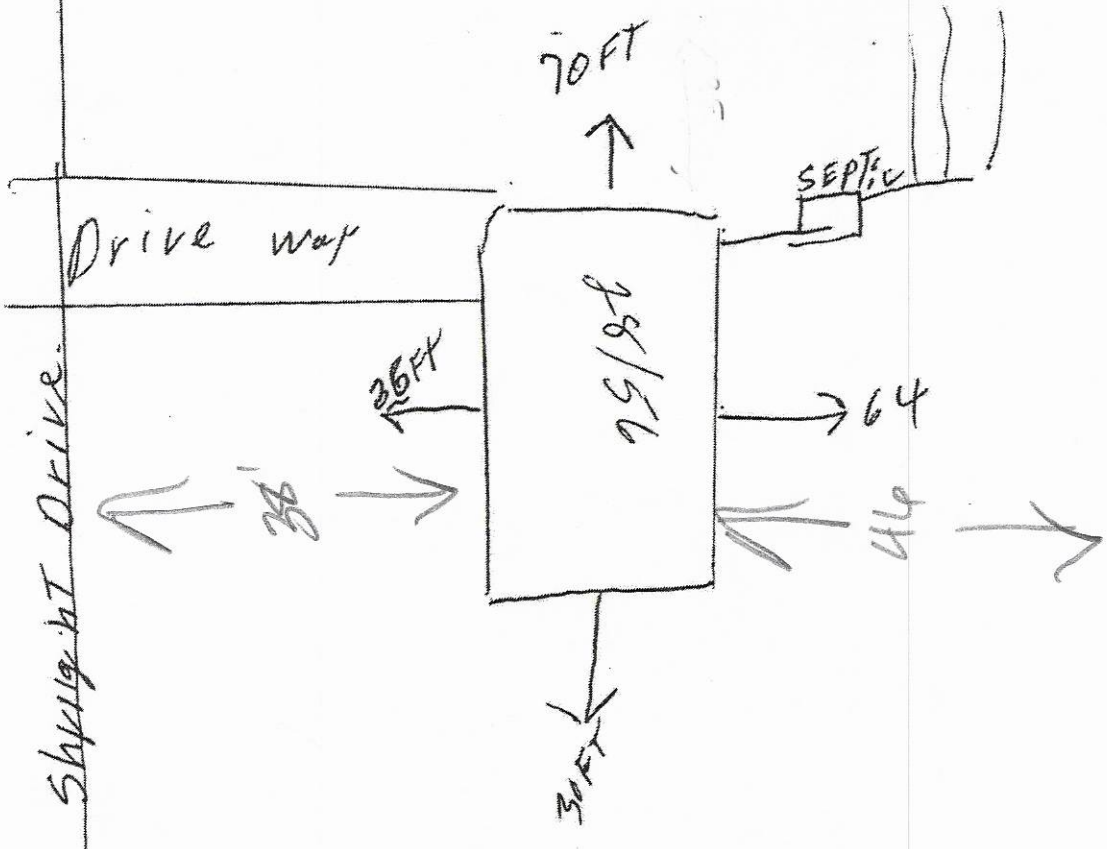
( ) Property Line measurements are clearly identified
( ) All proposed structures are indicated
( ) Front and side setbacks from property line
( ) Preferred driveway location and well location
( ) Area you prefer your septic system to be placed
( ) North arrow, or other sufficient indicator of direction

Circle N/A on the following if appropriate:

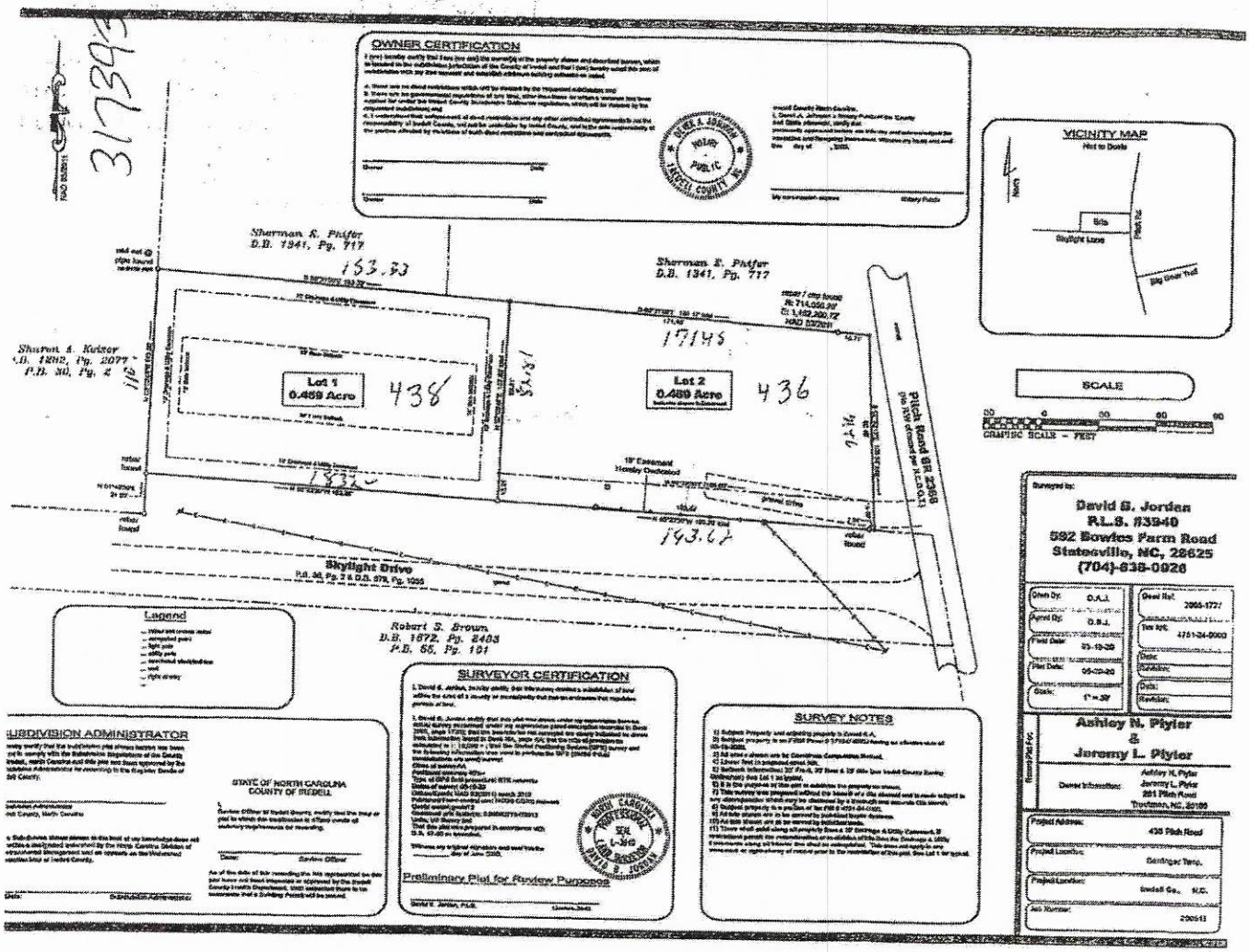
Location of septic systems and wells within 100' of your property	N/A
Location of easements and rights of ways on your property	N/A
Location of any designated wetlands on the property	N/A

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: Bryan Cashwell 4-28-21


OWNER CERTIFICATION
VICINITY MAP
Not to Scale
Site
Skylight Lane
Pilot Rd
Big Bear Trail
Sherman K. Phifer
D.B. 1341, Pg. 717
153.33
Sherman K. Phifer
D.B. 1341, Pg. 717
17145
Sharon A. Keiter
D.B. 1282, Pg. 2077
P.B. 30, Pg. 2
116.00
Lot 1
0.459 Acre
438
Lot 2
0.459 Acre
436
54.81
19' Easement
Hereby Dedicated
Pilot Road SR 2368
(50' R/W) (Private per R.L.S.O.S.)
143.67
Skylight Drive
P.B. 30, Pg. 2 & D.B. 378, Pg. 1055
Robert S. Brown
D.B. 1872, Pg. 2483
P.B. 65, Pg. 191
SCALE
GRAPHIC SCALE - FEET
Legend
SURVEYOR CERTIFICATION
SURVEY NOTES
SUBDIVISION ADMINISTRATOR
STATE OF NORTH CAROLINA
COUNTY OF IREDELL
Preliminary Plat for Review Purposes
Surveyed by:
David S. Jordan
R.L.S. #3940
592 Bowles Farm Road
Statesville, NC, 28625
(704)-638-0926
Drawn By: D.A.J.
Deed Ref: 2066-1727
Agent By: D.S.J.
Tax Id#: 4751-24-0000
Field Date: 05-19-20
Date:
Plat Date: 05-22-20
Subdivision:
Scale: 1" = 30'
Date:
Revision:
Ashley N. Plyler
&
Jeremy L. Plyler
Owner Information: Ashley N. Plyler
Jeremy L. Plyler
281 Pilot Road
Statesville, NC, 28625
Project Address: 438 Pilot Road
Project Location: Bentgrass Temp.
Project Location: Iredell Co., N.C.
Job Number: 200513

IREDELL COUNTY · NC

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

APPLICATION NUMBER
317393 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4751240000.000	438 PILCH RD	IREDELL COUNTY

Owner Information	Applicant Information
Name: PLYLER ASHLEY N+JEREMY L PLYLER	Name: BOYCE GALLIHER
Address:	Address: 165 ASHLEY ACRES
	STATESVILLE, NC 28677
Phone:	Phone: (704)402-2795

Use Requested	Zone Code
Double-Wide Mobile Home	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.927	35	35	15	25		NO

Remarks

DOUBLE WIDE

REQUIREMENTS FOR ALL MULTI -SECTIONAL MOBILE HOMES Must meet requirement R9 of the LDC. Minimum size of main body is at least 22 feet by 40 feet; Must have standard residential shingles; Minimum of 3/12 roof pitch; Must have continuous masonry underpinning; Must have minimum roof eave and raker projections of 6 inches; Must have a 36 square foot deck or porch at all front entrances; Exterior siding must consist of vinyl or aluminum lap siding, wood, or hardboard, comparable in composition, appearance and durability to residential siding; Must remove towing apparatus; Must face front property line and be no less than 20 degrees from parallel to the front property line. Original mobile home must be removed before Certificate of Occupancy can be approved.

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.

Signature of Owner/Contractor

Date: 05/03/2021

Permit Number	317393	TOTAL FEES:	$77.25

317393

Half Price Homes

Plyler Floor plans and footer plans
Mar 22, 2021 at 4:10:06 PM
boycegalliher@icloud.com

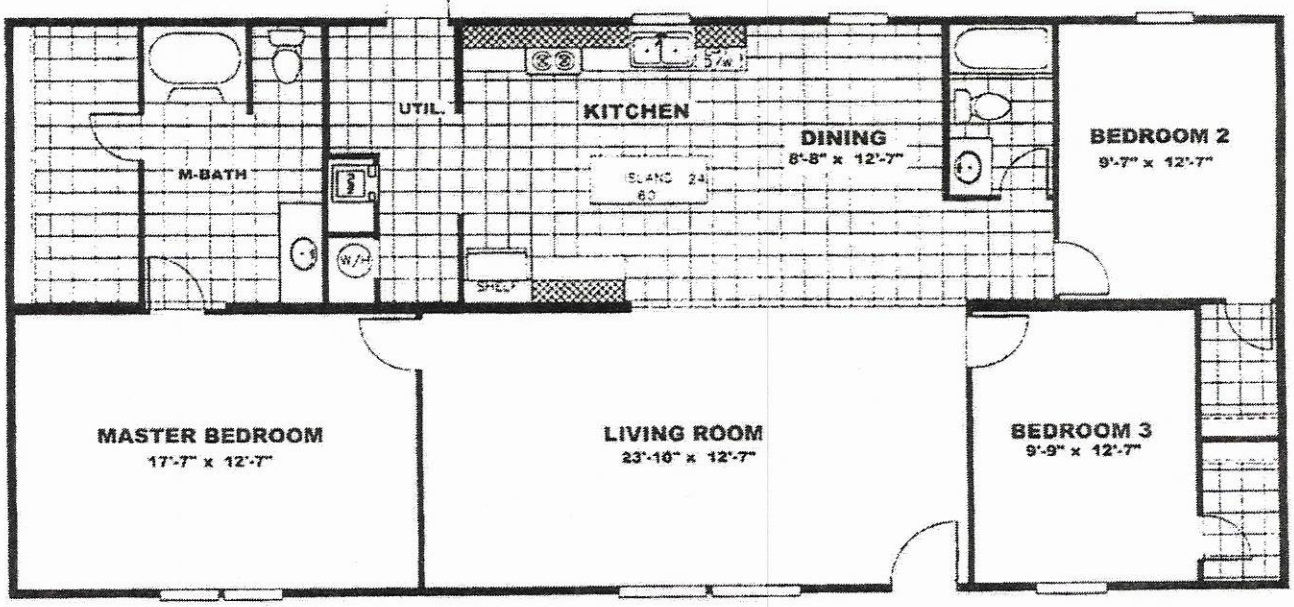
Hey Boyce,

I have Jeremy and Walt's floor plan and footer plan attached for you. I also have the 28x48 2 bed with an office plan attached for you.

Have a blessed day!

Shane Houston
919-221-3548
www.half-pricehomes.com

56

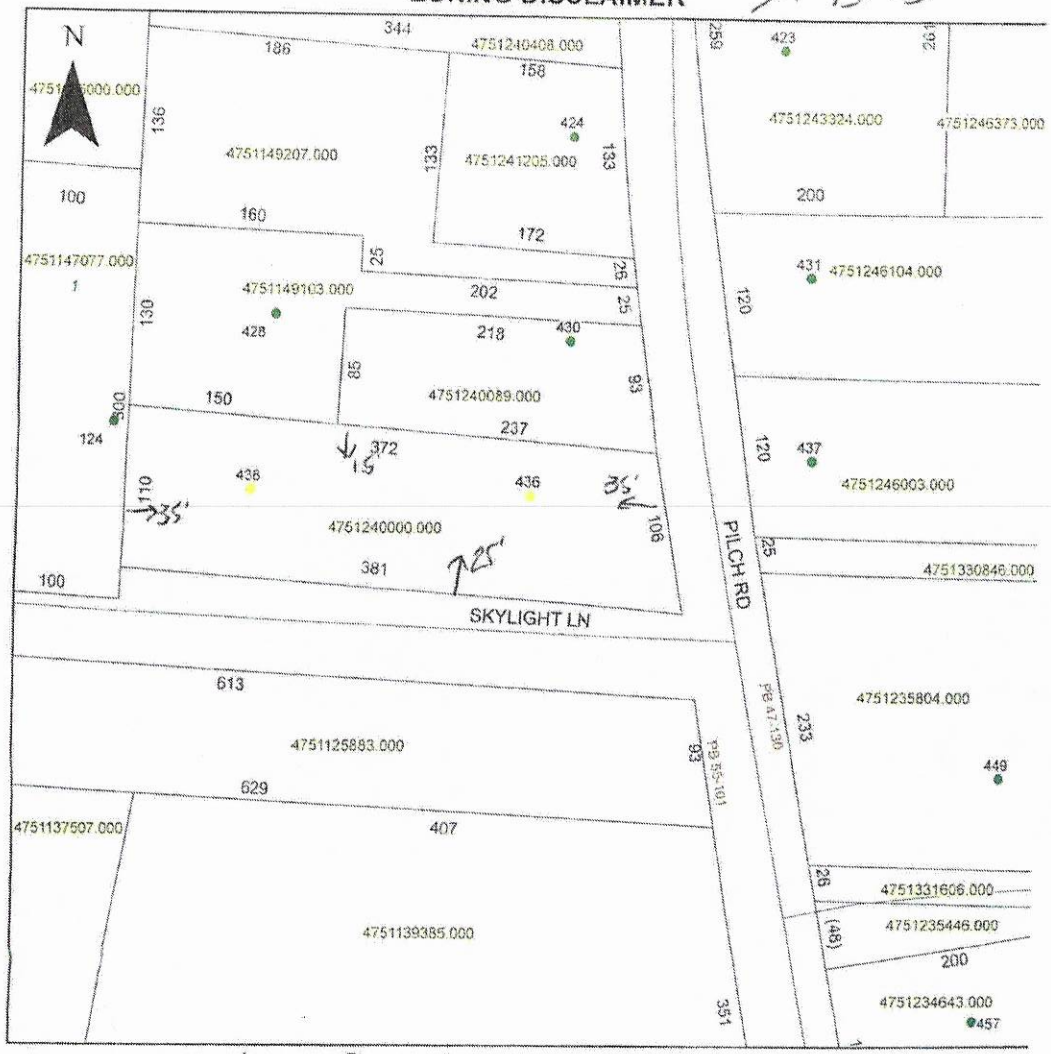


Acknowledgement Of
Plans Submittal ONLY!

Maria Tolson Date

Boyce Galliher Date 6-14-21

ZONING DISCLAIMER 317393



Property Address 438 Pilch Rd

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. Applicant further acknowledges that the 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.

Ben Mikki

5-3-21

Date