IREDELL COUNTY HEALTH DEPARTMENT

(704) 878-5366 (Statesville Office) (704) 660-3625 (Mooresville Office)

PERMIT # 223770

PIN # 4776124248

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

APPLICANT/OWNER: MJ Silversox Corp

APPLICANT ADDRESS: PO Box 428 King, NC

SITE ADDRESS: 149 Wheatfield Dr. Statesville, NC

PHONE: 336-302-1748

ALT. PHONE

SITE DIRECTIONS: Ostwalt Amity Rd → L on Wheatfield Dr → lot on L

SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: Wheatfield

SECTION: 1 LOT # 81 LOT AREA: .58 ac

DESIGN FLOW: 360 gpd L.T.A.R. .3 (.3 repair)

Septic Tank: 1000 (gal) SIR: 760 Date: 1-14-18

Pump Tank: 1000 (gal) PT: 363 Date: 10-16-17

Pump Make: Zoeller Model: EJ-0005 Rate: 9 GPM 11 PH

Nitrification Fields: 1 # Lines: 4 Linear Ft: 300'

Trench Width: 36" Trench Bottom Depth(Low side): 29"/36" Gravel Depth: —

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

System Description: PM 25% reduction

Repair System Description: LP PP825

Maintenance Agreement Required: ☐ YES ☑ NO

☐ GRAVITY ☑ PRESSURE

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

No. Bedrooms: 3

No. Persons: 6

No. Employees:

☑ Crawl Space ☐ Basement w/o plumbing

Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions:

INITIAL SITE SKETCH

See attached site plan by Rollans Soil + Environmental Services, PA

AS BUILT SKETCH

	Date	Initial
Drain Lines Checked	4/1	EB
Tanks Checked	4-6-18	KW
Pressure Manifold	4/1	EB
Valve Box Checked	4/1	EB
Pressure Head Set	4/7	CCC
Electrical Checked	4/9	BB
Floats Set	4/7	CCC
Alarm Checked	4/19	BB
Maintenance Contract	☑	

Comments: 4-6 DR checked 3ft drain lines last DR still needs to be checked KW

power not on - alarm needs to be checked

Authorization to Construct
FOR SEPTIC FINAL INSPECTION
CALL 704-664-3703

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 mos.

Owner / Applicant Signature: Date: 3-9-18

IMPROVEMENT PERMIT by: Kayla Wilson Date: 3-6-18

AUTHORIZATION TO CONSTRUCT by: Kayla Wilson Date: 3-6-18

Installed by: Frank Travigou Septic Date: 4/19/2018.

OPERATION PERMIT by: Benjamin Bolton Date:

Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-4pm the day the inspection is desired. Be sure to speak with an inspector to confirm your inspection time.

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 223770

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

PIN # 4761242488

APPLICANT/OWNER: MJ Silmser Corp. APPLICANT ADDRESS: PO Box 428 King, NC

SITE ADDRESS: 149 Wheatfield Dr. Statesville, NC PHONE: 336-302-1748 ALT. PHONE —

SITE DIRECTIONS: Ostwalt Amity Rd → L on Wheatfield Dr → lot on L SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: Wheatfield SECTION: 1 LOT # 81 LOT AREA: .58 ac DESIGN FLOW: 360 gpd L.T.A.R.: .3 (.3 repair)

Septic Tank 1000 (gal) STB 760 Date 1-14-18
Pump Tank 1000 (gal) PT 363 Date 10-26-17
Pump Make Zoeller Model 151-0005 Serial # 1PH
Nitrification Fields 1 # Lines 4 Linear Ft 300'
Trench Width 36" Trench Bottom Depth(Low side) 29"/36" highside Gravel Depth —

☑ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI
System Description: PM 25% reduction
Repair System Description: LP PPBPS
Maintenance Agreement Required: ☐ YES ☑ NO
☐ GRAVITY ☑ PRESSURE

☑ Residence No. Bedrooms 3
☐ Business No. Persons 6
☐ Other No. Employees —
☐ Slab ☑ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions:

INITIAL SITE SKETCH

See attached site plan by Rollans Soil + Environmental Services, PA

AS BUILT SKETCH

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**

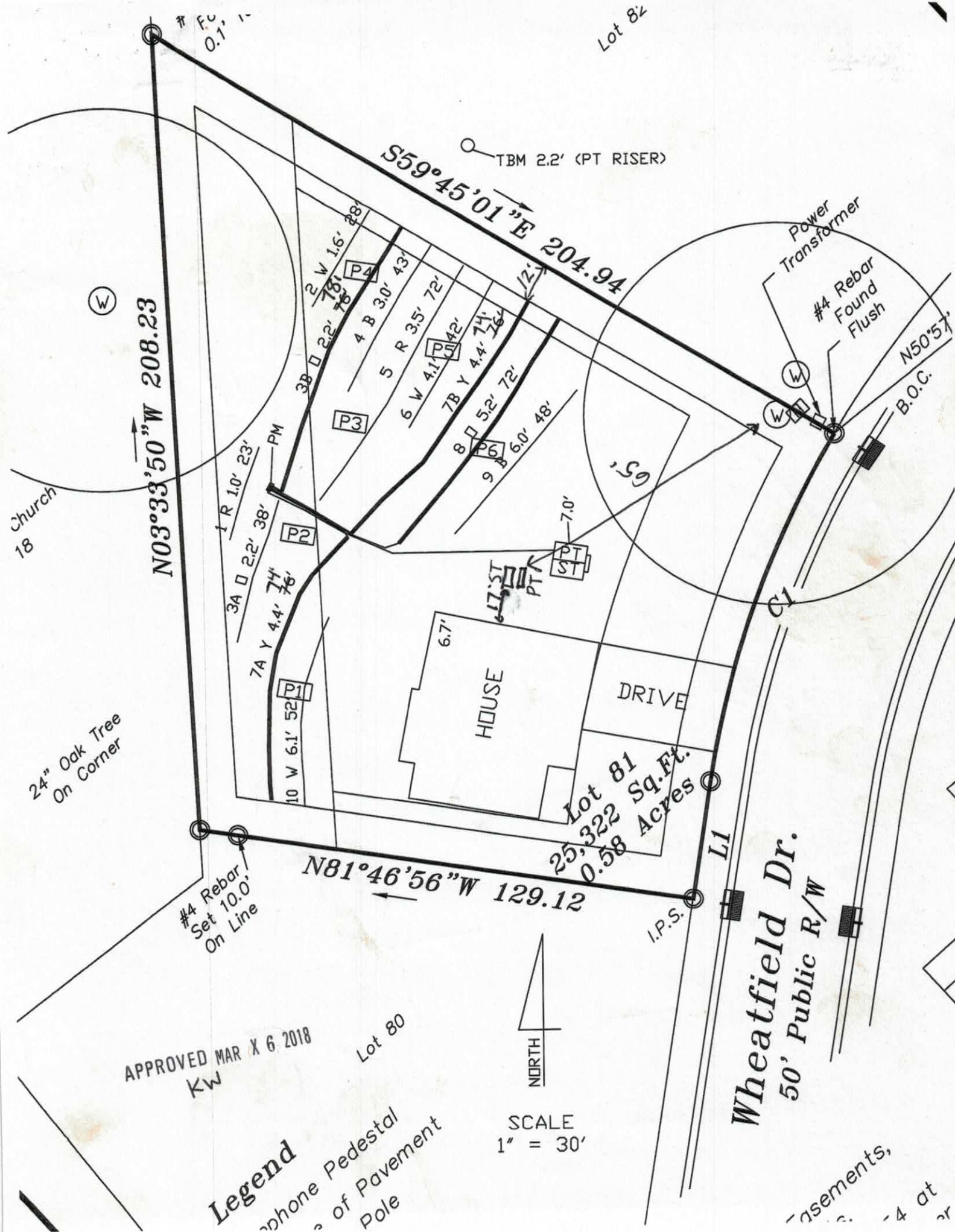
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☑ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☑ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Date: 3-9-18 Installed by: Frank Trawick Septic

IMPROVEMENT PERMIT by: Kayla Wilson Date: 3-6-18 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Kayla Wilson Date: 3-6-18 Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inpsector to confirm your inspection time.


TBM 2.2' (PT RISER)
S59°45'01"E 204.94
N03°33'50"W 208.23
N81°46'56"W 129.12
Power Transformer
#4 Rebar Found Flush
N50°57'
B.O.C.
Lot 81
25,322 Sq.Ft.
0.58 Acres
HOUSE
DRIVE
6.7'
7.0'
17.5'
PT
PI
ST
PM
P1
P2
P3
P4
P5
P6
2 W 1.6' 38'
4 B 3.0' 43'
5 R 3.5' 72'
6 W 4.1' 42'
7B Y 4.4' 74'
8 D 5.2' 72'
9 B 6.0' 48'
1 R 1.0' 23'
3A D 2.2' 38'
7A Y 4.4' 74'
10 W 6.1' 52'
3B D 2.2' 76'
C1
L1
Lot 82
Lot 80
Church
18
24" Oak Tree On Corner
#4 Rebar Set 10.0' On Line
I.P.S.
Wheatfield Dr.
50' Public R/W
APPROVED MAR X 6 2018
Kw
NORTH
SCALE
1" = 30'
Legend
Telephone Pedestal
Edge of Pavement
Pole
Easements,

PRESSURE MANIFOLD SYSTEM
FOR WASTEWATER TREATMENT

Owner:	M J Silmser Corp
Address:	P.O. Box 428 King, NC 27021
Phone:	336.362.1748
County:	Iredell
Location:	Wheatfeild Lot # 81

Source of Wastewater Flow:	3 Bedroom Single Family Residence
Estimated Daily Wastewater Production:	360 gpd
System Flow:	21.92

Design Specifications

Drainfield Size:	300
Loading Rate:	0.3
Depth of Gravel in Trench:	NA (25% reduction)
Gravel Size:	NA (25% reduction)
Trench Depth:	30 in. Repair Trench Depth 30 in.
Trench Width:	36 in.
Septic Tank Size:	1000
Pump Tank Size:	1000
Estimated Supply Line Length:	80
Supply Line Diameter:	2 in. SCH 40 PVC
Supply Line Volume:	13.92
Dosing Volume:	137.13
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:	1.02
Elevation Head:	10.80
Total Dynamic Head:	15.89
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 Rollans Soil & Environmental Services.

APPROVED MAR X 6 2018
KW

Wheatfeild Lot # 81
PRESSURE MANIFOLD DESIGN

DESIGN FLOW:	360	
SOIL APPLICATION RATE:	0.3	
TOTAL AREA TRENCH BOTTOM:	900	
TOTAL LATERAL LENGTH:	300	
NUMBER OF FIELDS:	1	
LATERAL LENGTH REQUIRED PER FIELD:	300	
SUPPLY LINE LENGTH:	80	
TOTAL DYNAMIC HEAD:	15.89	
MANIFOLD SIZE:	4 in.SCH 80 PVC	
DOSING VOLUME:	137.13	
PUMP TANK DRAW DOWN*:	6.5	
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.*

APPROVED MAR X 6 2018
KW

WHEATFIELD LOT #81

Project #: 01-3394

LAYOUT FOR 3 BEDROOM HOME

October 16, 2017

LINE #	FLAG COLOR	BS	HI	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM		2.2			100.00		
INSTR. 1			102.20				
HOUSE CNR				6.70	95.50		
P. TANK				7.00	95.20		
1	RED			1.00	101.20	23	23
2	WHITE			1.60	100.60	28	28
3A	ORANGE			2.20	100.00	38	38
3B	***ORANGE***			***2.20***	***100.00***	***76***	***76***
4	BLUE			3.00	99.20	43	43
5	RED			3.50	98.70	72	72
6	WHITE			4.10	98.10	42	42
7A	***YELLOW***			***4.40***	***97.80***	***76***	***76***
7B	***YELLOW***			***4.40***	***97.80***	***76***	***76***
8	***ORANGE***			***5.20***	***97.00***	***72***	***72***
9	BLUE			6.00	96.20	48	48
10	WHITE			6.10	96.10	52	52
					Total	**646**	**646**

	LINE LENGTH	LTAR GPD/FT^2	SYSTEM TYPE	SOIL LTAR GPD/FT^2	TRENCH SYSTEM	DISTRIBUTION
**** System***	***300***	***0.300***	***ACCEPT.***	***0.300***	***25% RED.***	**PRESSURE MANIFOLD**
Repair	346	0.300	*MOD.*	0.300	PPBPS	LOW PRESSURE

Notes:

** TBM located on top of ground at EIP (SEE SITE PLAN)
**TBM is assumed to be 100'
**All measures in feet
**Nitrification lines are demonstrated on contour via colored pin flags
**BS, HI, and FS indicate rod readings

APPROVED MAR X 6 2018
KW

PRESSURE MANIFOLD TAPSHEET - WHEATFIELD LOT# 81

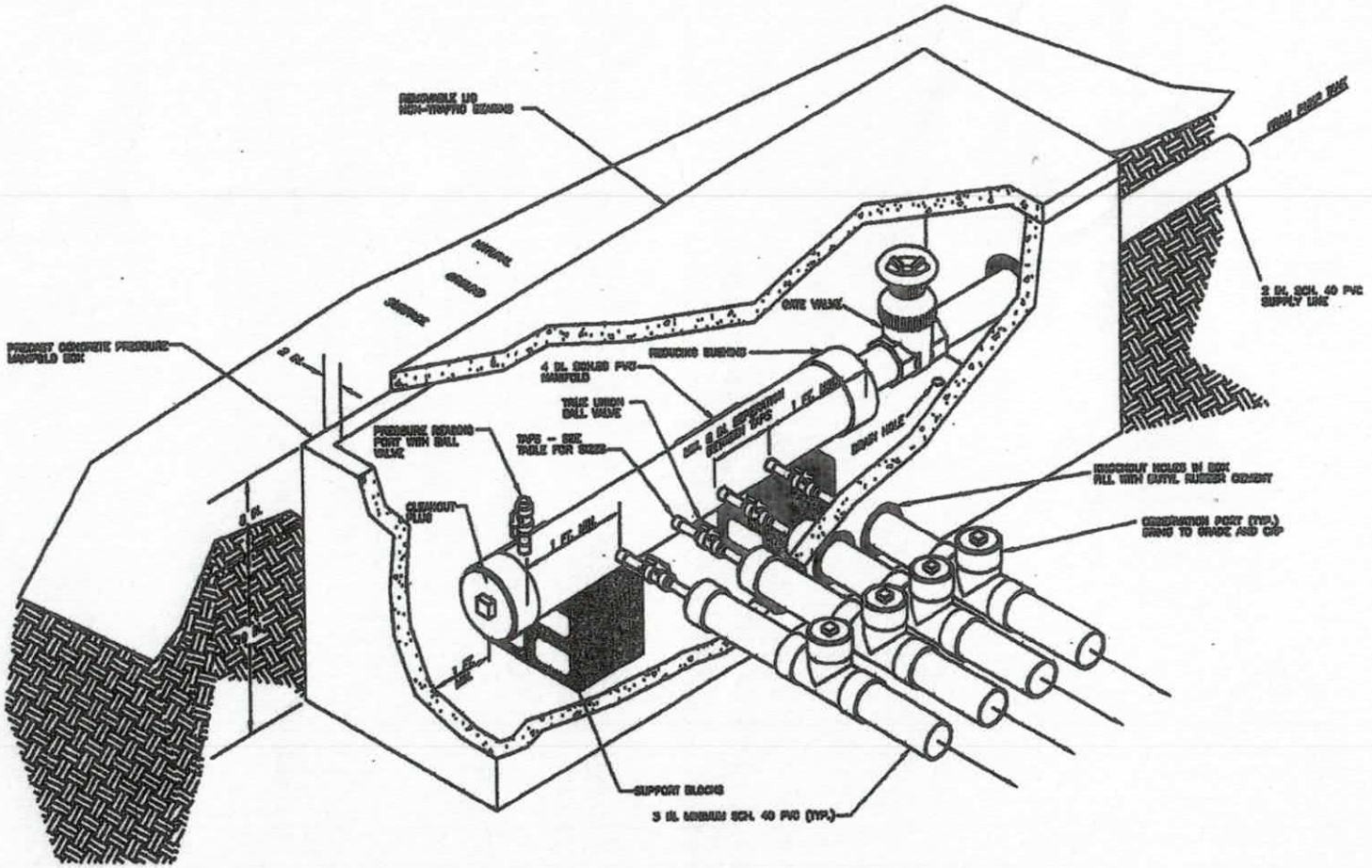
SYSTEM

Line #	Color	Elevation	Length	Hole Size	Flow/Tap	Trench Area	Line LTAR
3B	ORANGE	100.00	76	SCH 80 1/2	**5.48**	228	0.15
7A	YELLOW	97.80	76	SCH 80 1/2	**5.48**	228	0.15
7B	YELLOW	97.80	76	SCH 80 1/2	**5.48**	228	0.15
8	ORANGE	97.00	72	SCH 80 1/2	**5.48**	216	0.16

total	**feet =**	**300**	**gal/min =**	**21.92**
		Des. Flow	**360**	
		Pump Run=	**6.26**	
		soil LTAR	**0.3**	
		LTAR +5%	**0.315**	
		LTAR with ACCEPTED	**0.4**	
		LTAR with ACCEPTED + 5%	**0.42**	

APPROVED MAR X 6 2018
KW

TYPICAL PRESSURE MANIFOLD DETAIL



CALCULATIONS

Location 149 Wheatfield Drive

Project Number 01-3394

Lot No: 81

No. of Bedrooms	3	
Design Flow	360	$^{gal}/_{day}$
LTAR	0.300	$^{gpd/ft^2}$
25% RED.? (YES OR NO)	YES	
Supply Line Length	80	ft.
Supply Line Volume	13.92	gal.
Required Feet of Line	300	ft.
Amount of Line from Layout	300	ft.
Gallons per Minute	21.92	$^{gal}/_{min}$
Required Septic Tank Capacity	1000	gal.
Minimum Standard Tank Size	1000	
Lateral Line Volume	195.9	gal.
Dosing Volume	137.13	gal.

Note: Dosing Volume based on 70% of lateral line volume

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

Tank Draw Down	6.5	*Generic Draw Down of 21 gal.per in.*
Pump Run Time	6.26	minutes
Elevation Head	10.8	ft.
Pressure Head	2	ft.
Friction Factor	1.27	ft./100 ft. *(From the interpolater.)*
Friction Head	1.02	ft.
Total Dynamic Head (+15%)	15.89	ft.

APPROVED MAR X 6 2018
KW

APPROVED MAR X 6 2018
KW

Sheet 1 of 2
PROPERTY ID #: 4761742
COUNTY: Iredell

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

OWNER: MJ Simcer Corp
ADDRESS: PO. Box 428 King NC 27021
PROPOSED FACILITY: 3BR
LOCATION OF SITE: Wheatfeild Lot 81 189 Wheatfield Drive
APPLICATION DATE: 10/2017
DATE EVALUATED: 9/28/17
PROPERTY SIZE: 0.58ac
PROPERTY RECORDED: Y/S
PROPOSED DESIGN FLOW (.1949): 360 gpd

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
P 1	L/20%	0-4	BrSlG	frSSSP	0-10 com. 17-23 Plenty +F-SAP 0-30 few mottles	60	-	-	PS .3 - .325
		4-25	RC wmsbk	frSSSP					
		25-60	RBCl wmsbk	frSSSP					
P 2	L/15%	0-7	BSlG	frSSSP	0-20 C few mottles 20-31 C +F-SAP 31/48 CL 17-23 P	62	-	-	PS .3 - .325
		7-33	RC wmsbk	frSSSP					
		33-62	RBCl wfsbk	frSSSP					
P 3	L/10%	0-5	BSlG	frSSSP	+F-SAP	50	-	-	PS .3
		5-29	RC wmsbk	frSSSP					
		29-50	RBCl wmsbk	frSSSP					
P 4	L/7%	0-9	BSlG	frSSSP	+F-SAP	52	-	-	PS .3
		9-40	RC wmsbk	frSSSP					
		40-52	BRCl wfsbk	frSSSP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	Accepted	PP BPS
Site LTAR	0.3	0.3

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

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

PROPERTY ID #: 476124 4389

DATE OF EVALUATION: 9/28/17

COUNTY: Iredell

Lot 81

APPROVED MAR X 6 2018
KW

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
P5	L/6%	0-7	BSIG	frssSP	f-SCP 49" RC SAP pocket	55	—	—	PS .3
		7-38	RCwmsbk	frssSP					
		38-55	BRClwfsbk	frssSP					
P6	L/5%	0-8	BrSIG	frssSP		50	—	—	PS .3
		8-35	RCwmsbk	frssSP					
		35-50	BrClwmsbk	frssSP					

COMMENTS:

RECEIVED NOV 14 2017

IREDELL COUNTY HEALTH DEPARTMENT

Paid $850.00
#223770

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

Application For:

( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(✓) 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

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

Applicant Information:

Applicant Name: Same **Address:** Same **Phone:** Same

Owner Name: MJ Simmser corp **Address:** PO box 428 King NC 27021 **Phone:** 336 362 1748

Property Information:

Street Address: 149 wheatfield Dr cleveland NC 28677

Subdivision Name: Wheatfield **Section/Phase:** _____ **Lot Number:** 81

Driving Directions: Amity Rd East, Wheatfield Dr on Rt, Lot on Lt.

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

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 3
Maximum Number of Occupants: 6
( ) Swimming Pool
( ) Other Addition/Structure: _____

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

Non-Residential Site Development:

Type of Business: _____
Square Footage of Building: _____
Maximum Number of Employee: _____
Maximum Number of Seats/Beds/Other: _____

Water Supply:

(✓) 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 (✓) No **Does the site contain any jurisdictional wetlands?**
( ) Yes (✓) No **Is any non-domestic sewage (i.e. industrial) to be generated?**
( ) Yes (✓) 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: _____ 10/16/17
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, MATTHEW SILVESER, am the legal owner(s) of the property located at 9149 WHEATFIELD WHEATFIELD LOT 81, identified as PIN (Parcel Identification Number) 4761242480, located in Iredell County, North Carolina.

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

Signature of Owner(s)	11-18-17 Date	Betsy S. Weddle Signature of Witness	11-18-17 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

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

IREDELL COUNTY

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

APPLICATION NUMBER
223770
Issue Date: 12/13/2016

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4761242488.000	149 WHEATFIELD DRIVE, STATESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: FIRST CITIZENS BANK	Applicant: KATHLEEN SAUNDERS
Address: 100 E TRYON ST DAC-36 CLEVELAND, NC 27603	Address: 121 HOLT LANE MOORESVILLE, NC 28117
Phone:	Phone: 704-578-4951

Use Requested	Zone Code
SFD	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.580	35.00	35.00	15.00	15.00	NOT	X

Remarks:

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.

Applicant: Kathleen Saunders Date: 11/3/17

Permit Number	88109	TOTAL FEES:	$ 152.25