IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 22315

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

PIN # 4761498714

APPLICANT: C S & S C APPLICANT ADDRESS: PO BOX 1703 MOORESVILLE NC

SITE ADDRESS: 132 WYLIE TR - Stwl. 28677 PHONE: ALT. PHONE: 704 202 5791

SITE DIRECTIONS: ~~HWY I~~ OSWALT AMITY - TL BETHESDA TR NORTHLAKE - TL MT ISLAND - TR WYLIE - ONRT

SUBDIVISION: NORTHLAKE SECTION: 2 LOT # 34 LOT AREA: .65AC DESIGN FLOW: 360 L.T.A.R.:

Septic Tank 1000 (gal) STB 1760 Date 2-20-2020 ☑ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI

Pump Tank (gal) PT Date System Description: GRAVITY 25% REDUCTION

Pump Make Model Serial # Repair System Description: LP PBBPS

Nitrification Fields 1 # Lines 5 Linear Ft: 300 Maintenance Agreement Required: ☐ YES ☐ NO

Trench Width 36" Max. Trench Bottom Depth 30" Gravel Depth N/A ☑ GRAVITY ☐ PRESSURE

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

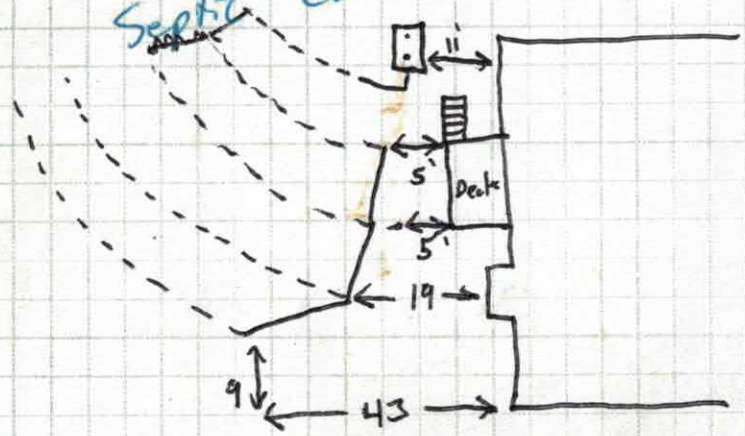
Water Supply: ☐ Private ☑ Public ☐ Community

Comments / Conditions:

INITIAL SITE SKETCH

See Carolina Soil & ~~Consultan~~ Consultants Plan

Septic



AS BUILT SKETCH

4/9/2020: Shoaf mid-seam 1000-gal conc tank w/a PL-68 effluent filter

2
30
50
68
78
+ 78
364

Verified ok by laser 30" TB.

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: 11/4/16 Installed by: Shane Cashion (Precision Excavating)

IMPROVEMENT PERMIT by: Date: 10/26/16 OPERATION PERMIT by: Tom Shuck Date: 4/9/2020

AUTHORIZATION TO CONSTRUCT by: Date: 7-26-19 Existing System Inspected by: Date:

WYLIE TRAIL
N 87°05'35" W 1451' POWER
1367.30' TOT.
100.00'
18" RCP
100.00'
1367.30' TOT.
L.POWER
100.00'
DRIVE
35'
22.5'
55'
HOUSE
0.68 AC.
35
55'
OLD ROAD
22.5'
20'
60'
HOUSE
0.65 AC.
34
50'
DRIVE
35'
20'
100.00'
5' SETBACK
DITCH TO BE FILLED
S.T.
T.S.
1 B 34'
2 R 58'
3 Y 62'
4 P 66'
5 O 80'
6 B 94'
7 R 76'
8 Y 55'
P1
P2
P3
P4
P5
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LOW AREA TO BE FILLED
DRAINAGE DITCH
S 86°26'41" W
100.61'
100.61'
20.0' PSDE
201.23' TOT.
S 02°46'30" W
290.37'
N 02°46'30" E
279.05'
S 02°46'30" W
297.61'
33
0.70 AC.
1" = 40'
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Carolina Soil & Septic Consulting, PLLC

P.O. Box 1703, Mooresville, NC 28115

Phone: (704) 202-5791 Email: adrianpruett@yahoo.com

NC Licensed Soil Scientist, SC Professional Soil Classifier,
Certified Septic System Operator, Licensed Septic Installer,
Certified Septic Inspector

Proposed Design for a 25% Reduction Septic System using Gravity distribution for a 3 bedroom single family residence on Lot 34 of Northlake Subdivision, 132 Wylie Trail in Troutman, Iredell County, North Carolina.

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Information for the Installer---------- 1

Design Information
Design Specifications---------- 2
Layout Specifications---------- 3

Site Plan/System Plan---------- 4

Dosing Calculations---------- 5

Soil Profile Descriptions---------- 6-7

September 21, 2016
Design By: Adrian L. Pruett

Non-Expiring

LICENSED SOIL SCIENTIST
ADRIAN L. PRUETT
1314
STATE OF NORTH CAROLINA

INFORMATION FOR INSTALLER:

- The permit should be read very carefully prior to submitting bid. The following are details that must be considered along with all other considerations.
- Tanks shall be approved by NC DHHS, and certification supplied by the manufacturer.
- All tanks shall be properly back filled and compacted to prevent slump at a later date.
- The installer is responsible for final grades and returning that grade to original, with exception of added structural features.
- The supply trench shall be compacted to eliminate any cavities left during initial fill placement.
- Installation of the system shall be during dry conditions in order to protect the soil structure.
- All fittings shall be pressure rated fittings.
- All joints shall be cleaned with PVC pipe cleaner and a heavy bodied glue applied to weld all joints.
- Where required by the county health department, post installation inspections by the designer must be scheduled 5 week days in advance.
- Trenches shall be carefully excavated so the bottom has no more than 1/4"fall in 10 feet with no high or low areas within. If high or low areas do exist after trench excavation, high areas should be removed rather than filling in low areas. Do not over excavate trenches! Any fine grading should be completed by hand with a rake and shovel, leaving no loose material.
- All pipe openings in the tanks shall be properly grouted. This also applies to the joints around the riser.
- Earth dams, constructed of relatively impervious material, shall be installed at the beginning and end of each lateral to prevent unwanted lateral water movement.
- Elevations at pin flag locations should be checked by the installer prior to beginning trenches to insure accuracy.
- If septic tank risers are used they should be a minimum of 6" above finished grade or within 6" of final grade if buried.
- Design precludes use of foundation drains on the residence.
- System is specified as an Accepted 25% Reduction Gravity installation.
- Repair is specified as PPBPS Low Pressure installation.
- Trench width is specified as 36" wide, rake and lime all trench sidewalls
- **If grading for slab foundation is utilized do not grade/create greater than 2 ft of elevation difference within 15 ft of any component of the septic or repair. If back filling do not backfill over any initial or repair septic line.**

OWNER INFORMATION

Owner:	Lakeside Vista Partners, LLC Michael Blackmon
Address:	12621 McGinnis Ln. Huntersville, NC 28078
Phone:	980-216-0652
County:	Iredell
Location:	NORTHLAKE LOT 34, 132 WYLIE TRAIL
Source of Wastewater Flow:	3 Bedroom Single Family Residence
Estimated Gallons Per Day Flow:	360
System Flow:	NA

25% GRAVITY DESIGN INFORMATION

Drainfield Design Flow (gpd):	300
Loading/Soil Application Rate (gpd/ft.^{2}):	0.300
Depth of Gravel in Trench:	NA (25% reduction)
Gravel Size:	NA (25% reduction)
Total Lateral Length From Layout:	300
Total Lateral Length Required:	300
Trench Depth:	30 in. Lowside
Trench Width:	36 in.
TOTAL AREA TRENCH BOTTOM:	900
Trench Spacing on Center:	9 ft.
Repair Trench Spacing on Center:	8 or 9 ft.
Repair Trench Depth:	36 in.
Septic Tank Size:	1000 gal.
Estimated Supply Line Length:	3
Supply Line Diameter:	3 in. SCH 40 PVC
Supply Line Volume:	1.08
Dosing Volume:	NA
Supply Manifold:	SERIAL DISTRIBUTION
Additional Comments:	Soil suitability was performed by Adrian L. Pruett LSS

NORTHLAKE LOT 34, 132 WYLIE TRAIL
FIELD LAYOUT SPECIFICATIONS

LAYOUT FOR 3 BEDROOM RESIDENCE

September 21, 2016

LINE #	FLAG COLOR	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM			NA		
HOUSE CRN		NA	NA		
P. TANK		NA	NA		
1	***BLUE***	*NA*	*NA*	*35*	*34*
2	***RED***	*NA*	*NA*	*58*	*58*
3	***YELLOW***	*NA*	*NA*	*62*	*62*
4	***PINK***	*NA*	*NA*	*68*	*66*
5	***ORANGE***	*NA*	*NA*	*80*	*80*
5	ORANGE	NA	NA	30	30
6	BLUE	NA	NA	94	94
7	RED	NA	NA	76	76
8	YELLOW	NA	NA	55	55
			Total	**558**	**555**

	LINE LENGTH	SYSTEM TYPE	SOIL LTAR GPD/FT^2	TRENCH SYSTEM	DISTRIBUTION
System	***300***	***ACCEPT.***	***0.300***	***25% RED.***	***GRAVITY***
Repair	255	*MOD.*	0.250	PPBPS	LOW PRESSURE

Notes: ** TBM Is Not Required.
**All measures in feet
**Nitrification lines are demonstrated on contour via colored pin flags

Comments: **Small ditch behind house to be filled and low area below system to be filled, see site plan**
Do not fill large drainage ditch at rear of property.
Iredell County has CS&SC's permission to change septic tank location and distribution type

DOSING CALCULATIONS

Location NORTHLAKE
Lot No: 34
Address: 132 Wylie Trail

No. of Bedrooms	3
Design Flow	360 $^{gal}/_{day}$
LTAR	0.300 $^{gal}/_{ft^2\ day}$
25% REDUCTION? (YES OR NO)	YES
Supply Line Length	3 ft.
Supply Line Volume	1.08 gal.
Required Feet of 25% RED. Line	300 ft.
Amount of Line from Layout	300 ft.
Gallons per Minute	NA $^{gal}/_{min}$
Septic Tank Capacity	1000 gal.
Minimum Septic Tank Capacity	1000 gal.
Lateral Line Volume	195.9 gal.

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

PROPERTY ID #: 4761498714
COUNTY: Iredell

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

OWNER: Lakeside Vista Partners, LLC APPLICATION DATE
ADDRESS: 12621 McGinnis Ln., Huntersville, NC 28078 DATE EVALUATED: 8/2016
PROPOSED FACILITY: 3 BRM PROPOSED DESIGN FLOW (.1949): 360 gpd PROPERTY SIZE: 0.65 ac
LOCATION OF SITE: 132 Wylie Trail, Troutman, NC Northlake Lot 34 PROPERTY RECORDED: Yes
WATER SUPPLY: ☐ Private X Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: X Auger Boring X Pit ☐ Cut TYPE OF WASTEWATER: X Sewage ☐ Industrial Process ☐ Mixed

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	
B 1	LSS 10%	0-4	B CL WFSBK	FR SS SP SEXP	N/A -COM MICA	48"	N/A	N/A	PS 0.3 GPD/SQFT
		4-20	R C MFSBK	FR SS SP SEXP					
		20-48	R CL WFSBK	FR SS SP SEXP	-COM. SAP, COM. MICA				
B 2	LSS 8%	0-4	RB CL WFSBK	FR SS SP SEXP	N/A -COM MICA	38"	PS	N/A	PS 0.35 GPD/SQFT
		4-18	R CL WFSBK	FR SS SP SEXP					
		18-38	YR CL WFSBK	FR SS SP SEXP	-FEW/COM SAP., COM MICA				
		38-48	RY L SAP M	FR SS SP SEXP	-FEW CL				
B 3	LSS 12%	0-13	RB CL WFSBK	FR SS SP SEXP	N/A -COM MICA	48"	N/A	N/A	PS 0.3 GPD/SQFT
		13-24	R C MFSBK	FR SS SP SEXP					
		24-36	R CL WFSBK	FR SS SP SEXP	-COM MICA				
		36-48	YR CL WFSBK	FR SS SP SEXP	-COM SAP, COM MICA				
B 4	LSS 8%	0-8	B SCL GR	FR SS SP SEXP	N/A -COM MICA	48"	N/A	N/A	PS 0.35 GPD/SQFT
		8-28	R C MFSBK	FR SS SP SEXP					
		28-30	R CL WFSBK	FR SS SP SEXP	-COM MICA				
		30-34	VAR SL SAP M	FR SS SP SEXP					
		34-48	R CL WFSBK	FR SS SP SEXP	-COM SAP, COM MICA				

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	GRAVITY 25%	LP PPBPS
Site LTAR	0.3	0.25

OTHER FACTORS (.1946): NONE
SITE CLASSIFICATION (.1948): PS

EVALUATED BY: ADRIAN L. PRUETT
OTHER(S) PRESENT: NONE

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

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

PROPERTY ID #: 4761498714
DATE OF EVALUATION: 8/2016
COUNTY: IREDELL

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
B 5	FS 5%	0-6	B SL GR	FR SS SP SEXP	N/A -COLLUVIAL FILL	48"	N/A	N/A	PS
		6-14	BR SL GR	FR SS SP SEXP	-COLLUVIAL FILL				
		14-30	B SCL WFSBK	FR SS SP SEXP	-FEW MN				0.25 GPD/SQFT
		30-48	YR C WFSBK	FI SS SP SEXP	-FEW YB, FEW/COM MN				
P 1	LSS 12%	0-12	B SCL GR	FR SS SP SEXP	N/A	75"	N/A	N/A	PS
		12-28	R C MFABK	FR SS SP SEXP					
		28-50	R CL WFSBK	FR SS SP SEXP	-FEW/COM SAP				0.3 GPD/SQFT
		50-75	R CL WFSBK	FR SS SP SEXP	-COM/MANY SAP				
P 2	LSS 15%	0-14	R C MFSBK	FR SS SP SEXP	N/A -COM SAP	35"	PS	N/S	PS
		14-35	R CL WFSBK	FR SS SP SEXP					
		35-72	VAR L SAP M	FR SS SP SEXP					0.325-0.35 GPD/SQFT
P 3	LSS 12%	0-12	B SCL GR	FR SS SP SEXP	N/A -FEW SAP	32"	PS	N/A	PS
		12-28	R C MFSBK	FR SS SP SEXP					
		28-32	R CL WFSBK	FR SS SP SEXP	-MANY SAP				0.3 GPS/SQFT
		32-70	VAR L SAP M	FR SS SP SEXP					
P 4	FS 5%	0-20	B SCL GR	FR SS SP SEXP	N/A -FEW MN	68"	N/A	N/A	PS
		20-32	B SCL WFSBK	FR SS SP SEXP					
		32-68	YR SC/C WFSBK	FR SS SP SEXP	-FEW YB 34-48", FEW/COM MN				0.25 GPD/SQFT

COMMENTS:

#222315
AC
7-23-19

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) Septic Improvement Permit (X) 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: (PRINT CLEARLY)

Applicant Name: Cynthia Bladning **Address:** 3401 Saint Vardell Lane, Suite B, Charlotte, NC **Zip:** 28217

Applicant Email: submit@majpermits.com **Phone:** (704) 621-4664 **Alt. Phone:** (704) 884-1548

Owner Name: Adams Homes AEC, LLC **Address:** 3401 Saint Vardell Lane, Suite B, Charlotte, NC **Zip:** 28217

Owner Email: charlottewarranty@adamshomes.com **Phone:** (704) 558-4527 **Alt. Phone:**

Property Information:

Street Address: 132 Wylie Trail , Statesville, NC 28677

Subdivision Name: Northlakes **Section/Phase:** **Lot Number:** 34

Driving Directions: I-77 North, exit 42, right onto NC-115 / US-21 toward Troutman , Turn left onto US-21 N / NC-115 N, Turn right onto Ostwalt Amity Rd, Turn left onto Bethesda Rd, Turn right onto Northlake Dr

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:
( ) Swimming Pool
( ) Other Addition/Structure:

CHECK FOUNDATION TYPE
X Stem Wall
( ) 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 ( ) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* **Year existing system installed:**
(X) No Preference ( ) Alternative ( ) 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: Cynthia Blanding July 23, 2019
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

RECEIVED OCT 7 - 2016

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

Paid $350.00 # 222315

(THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED - APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS)

1. APPLICATION FOR: ✓ **Improvement Permit** ___ **Authorization To Construct** ___ **Existing System Inspection**

* NON-EXPIRING *

2. Page 2: *Site Plan Worksheet* Form MUST Accompany This Application

The following optional attachments may also be submitted: ___ **Survey Plat, Scaled no more than 1 Inch = 60 Feet**

Place check ( ) beside whichever is submitted if applicable ✓ **Custom Site Plan, Scaled no more than 1 Inch = 60 Feet**

3. Applicant Information:

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
CS to SC	PO Box 1703, Mooresville NC 28115		704-202-5791
Owner Name	**Mailing Address**	**Home Phone #**	**Alternate Phone #**
Lakeside Vista Partners	12621 McGinnis Ln, Huntersville NC 28078		980-216-0652

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
132 Wylie Trl	Northlake	34

Driving Directions: Hwy 115 N, TR Shinnville, TL Brawley, TL Oswalt Ferry, TR Bethesda, TR Northlake, TL Mountain Island, TR Wylie, Lot on R

5. RESIDENTIAL Site Development Information: *(Check or Complete ALL that apply)*

- (✓) New, Single Family Residence
- ( ) New, Multi-Family Residence
- ( ) Expansion of Existing Septic System
- ( ) Repair To Failing Septic System due to ___
- ( ) Other ___

Maximum Number of Bedrooms 3
Maximum Number of Occupants 6
If Expansion, Current Number of Bedrooms ___

- ( ) Crawl Space Foundation?
- (✓) Concrete Slab Foundation?
- ( ) Basement w/Plumbing?
- ( ) Basement w/out Plumbing?

IF Non- Residential Site Development:
Type of Business ___
Square Footage of Building ___
Maximum Number of Employees ___
Maximum Number of Seats ___

6. Proposed Water Supply:

( ) New Well ( ) Existing Well ( ) Community Well (✓) City Water ( ) Other Public Water

7. Desired Septic System Type: *(You may rank in order of preference, if any)* ( ) **EXISTING SYSTEM installed** ___ *Year*

(✓) **Alternative** ( ) **Conventional** ( ) **Innovative** ( ) **Modified Conventional** ( ) **Other** ___

8. Please Answer The Following ( ) Yes (✓) No **Does the site contain any jurisdictional wetlands?**
To The Best of Your Ability: ( ) Yes (✓) No **Is any non-domestic sewage (i.e. industry) 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.

9. Signature: ___ 10-7-16
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, Lakeside Vista Partners LLC (Shane Alexander), am the legal owner(s) of the property located at 132 Wylie Trl, Statesville NC, identified as PIN (Parcel Identification Number) 4761-49-8714, located in Iredell County, North Carolina.

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

Shane Alexander 8/4/16 — Signature of Owner(s) — Date

Dana Cobb 8-4-16 — Signature of Witness — Date

Please return this signed form to the appropriate office:

Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*:

SITE PLAN WORKSHEET

SEE THE "SAMPLE SITE PLAN" BELOW. *INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!*

Place an (X) beside each item as you complete the site plan:

✓ **Property Line measurements are clearly identified…** ✓ **All proposed structures are indicated…**

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

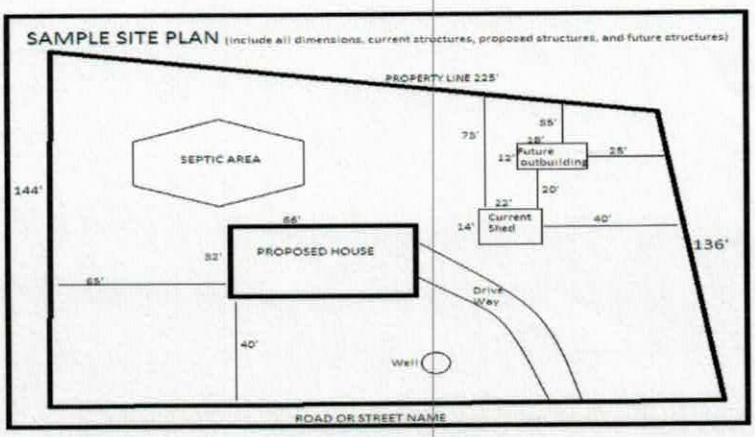
✓ **Front and side setbacks from property line…** ✓ **Preferred driveway location and configuration, preferred well location…**

✓ **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

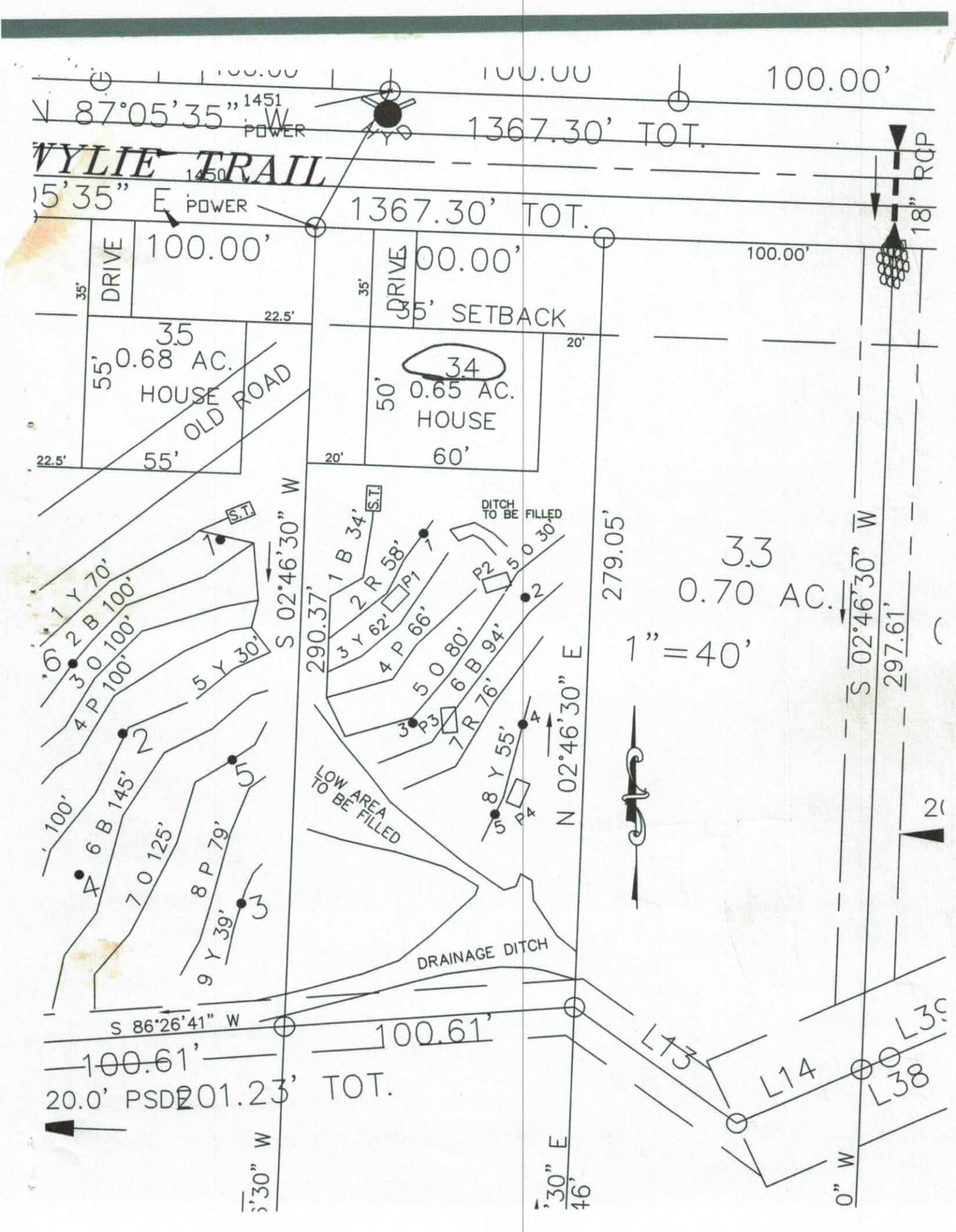
See Attached Site Plan

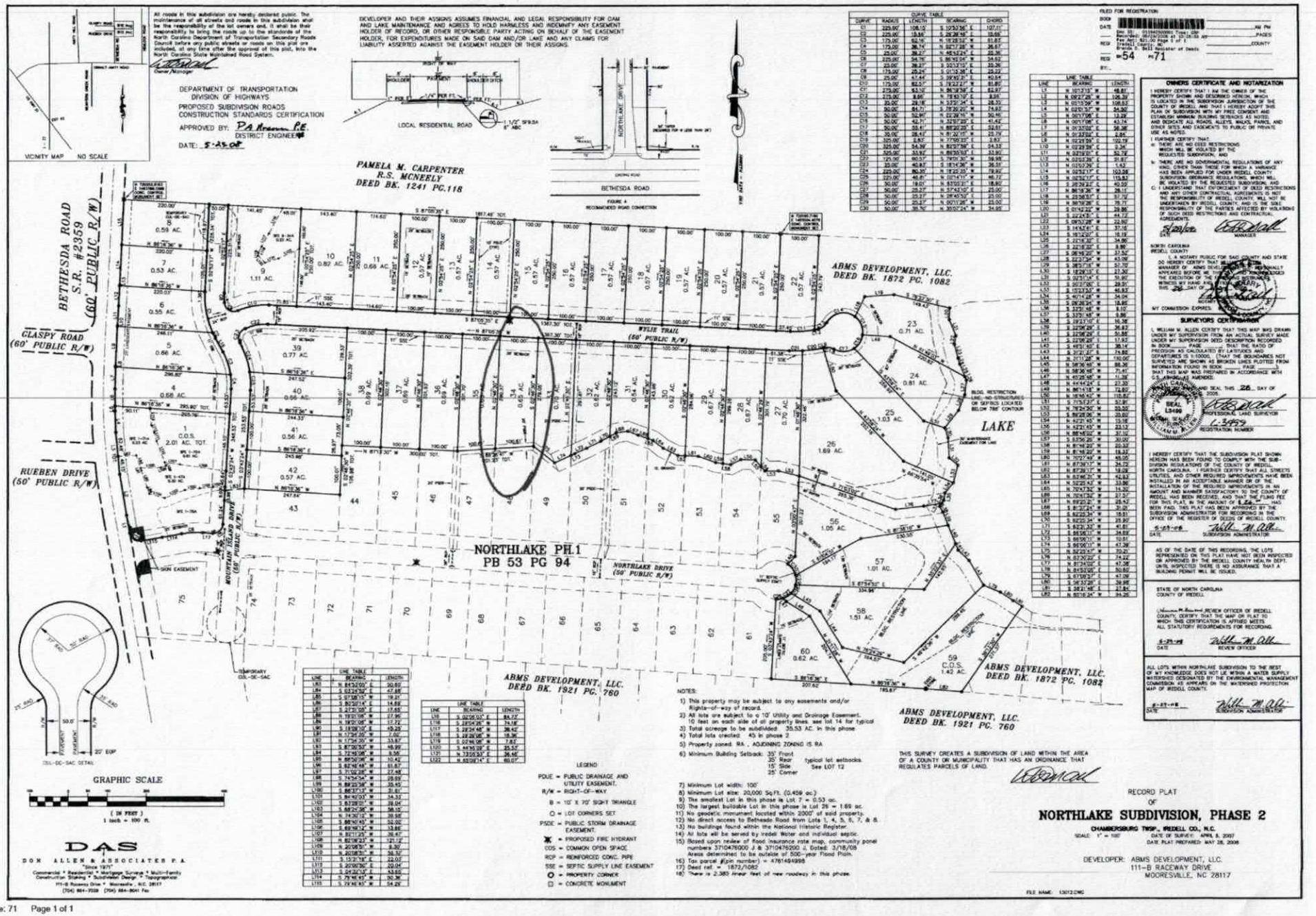
Signature: _____

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

10-7-16

DATE


100.00'
87°05'35" W
1451
POWER
1367.30' TOT.
WYLIE TRAIL
1450
POWER
18" RCP
100.00'
DRIVE
35'
22.5'
35
0.68 AC.
HOUSE
55'
OLD ROAD
34
0.65 AC.
HOUSE
50'
60'
20'
35' SETBACK
S 02°46'30" W
290.37'
279.05'
N 02°46'30" E
33
0.70 AC.
1" = 40'
297.61'
DITCH TO BE FILLED
LOW AREA TO BE FILLED
DRAINAGE DITCH
S 86°26'41" W
100.61'
201.23' TOT.
20.0' PSDE
L13
L14
L38
S.T.
1 Y 70'
2 B 100'
3 O 100'
4 P 100'
5 Y 30'
1 B 34'
2 R 58'
3 Y 62'
4 P 66'
5 O 80'
6 B 94'
7 R 76'
5 O 30'
8 Y 55'
6 B 145'
7 O 125'
8 P 79'
9 Y 39'
P1
P2
P3
P4



CURVE TABLE				
CURVE	RADIUS	LENGTH	BEARING	CHORD
C1	225.00'	108.15'	S. 13°53'36" E.	107.11'
C2	225.00'	13.46'	S. 26°28'48" E.	13.45'
C3	175.00'	62.16'	N. 19°28'32" W.	61.83'
C4	175.00'	38.74'	N. 32°27'58" W.	38.67'
C5	25.00'	38.27'	N. 45°43'24" E.	34.36'
C6	225.00'	34.76'	S. 86°43'24" W.	34.52'
C7	25.00'	39.27'	S. 33°31'12" E.	35.36'
C8	175.00'	25.24'	S. 01°15'28" E.	25.22'
C9	25.00'	25.14'	N. 31°32'27" W.	24.04'
C10	175.00'	82.51'	N. 77°59'27" E.	81.80'
C11	275.00'	63.10'	N. 84°38'56" E.	62.97'
C12	275.00'	8.86'	N. 78°53'10" E.	8.86'
C13	25.00'	29.18'	N. 53°22'34" W.	28.70'
C14	50.00'	84.71'	S. 78°20'20" W.	74.83'
C15	50.00'	52.90'	N. 22°28'10" W.	50.49'
C16	50.00'	42.71'	N. 32°57'25" E.	41.42'
C17	50.00'	53.41'	N. 80°20'25" E.	50.91'
C18	25.00'	26.42'	N. 81°22'17" E.	25.19'
C19	325.00'	2.83'	N. 77°55'32" E.	2.83'
C20	325.00'	54.39'	N. 83°01'56" E.	54.33'
C21	325.00'	53.93'	N. 88°39'01" E.	53.87'
C22	125.00'	80.51'	S. 79°01'30" W.	79.11'
C23	25.00'	40.84'	S. 18°14'26" W.	36.51'
C24	225.00'	80.50'	N. 78°25'20" W.	79.91'
C25	225.00'	46.81'	N. 69°14'11" W.	46.72'
C26	50.00'	19.01'	N. 83°03'51" W.	18.89'
C27	50.00'	25.27'	N. 57°43'10" E.	25.00'
C28	50.00'	25.27'	N. 26°45'10" E.	25.00'
C29	50.00'	23.27'	N. 00°11'26" E.	23.06'
C30	50.00'	39.76'	N. 35°07'24" W.	34.68'

LINE TABLE		
LINE	BEARING	LENGTH
L1	N. 10°13'15" W.	48.81'
L2	N. 09°27'26" W.	106.32'
L3	N. 05°05'39" W.	108.63'
L4	N. 02°01'57" W.	54.30'
L5	N. 00°17'08" E.	13.22'
L6	N. 00°17'08" E.	43.74'
L7	N. 01°37'02" E.	50.38'
L8	N. 01°37'02" E.	2.85'
L9	N. 02°23'28" E.	102.19'
L10	N. 02°23'28" E.	2.34'
L11	N. 87°16'51" E.	52.72'
L12	N. 02°52'28" E.	51.87'
L13	N. 01°52'29" E.	1.62'
L14	N. 02°52'11" E.	103.08'
L15	N. 02°52'11" E.	115.83'
L16	N. 02°52'11" E.	40.20'
L17	N. 86°16'36" E.	28.11'
L18	N. 03°08'53" E.	57.70'
L19	N. 86°16'36" E.	20.00'
L20	N. 03°08'53" E.	20.86'
L21	S. 02°43'18" E.	44.72'
L22	S. 09°53'37" E.	50.89'
L23	S. 01°43'41" E.	37.16'
L24	S. 16°42'00" E.	18.13'
L25	S. 22°16'30" E.	34.90'
L26	S. 23°18'55" E.	8.86'
L27	S. 06°16'29" E.	57.56'
L28	S. 03°23'11" E.	43.09'
L29	S. 08°57'16" W.	57.70'
L30	S. 18°28'15" E.	21.30'
L31	S. 18°28'15" E.	50.89'
L32	S. 20°27'00" E.	39.51'
L33	S. 14°43'41" E.	37.16'
L34	S. 13°53'53" E.	44.82'
L35	S. 22°16'30" E.	34.90'
L36	S. 26°28'34" E.	18.66'
L37	S. 13°21'48" E.	8.10'
L38	S. 33°13'48" E.	8.86'
L39	S. 29°23'10" E.	10.38'
L40	S. 23°56'29" E.	39.43'
L41	S. 23°56'29" E.	50.89'
L42	S. 23°21'49" E.	17.93'
L43	S. 23°21'49" E.	74.86'
L44	S. 21°11'48" W.	130.00'
L45	S. 68°36'36" E.	88.36'
L46	S. 58°36'46" E.	71.41'
L47	S. 45°25'45" E.	11.38'
L48	S. 44°41'41" E.	27.30'
L49	S. 86°14'18" E.	72.80'
L50	S. 86°14'18" E.	118.82'
L51	S. 71°57'37" E.	32.91'
L52	N. 78°24'56" E.	53.50'
L53	N. 84°28'26" E.	23.02'
L54	N. 62°21'45" E.	13.58'
L55	N. 62°21'45" E.	23.12'
L56	N. 62°21'45" E.	37.52'
L57	S. 53°56'25" E.	30.09'
L58	N. 81°46'29" E.	22.33'
L59	N. 81°46'29" E.	19.32'
L60	N. 70°27'49" E.	48.95'
L61	N. 87°38'17" E.	34.72'
L62	N. 87°38'17" E.	13.09'
L63	N. 53°46'30" E.	42.83'
L64	N. 52°25'11" E.	23.86'
L65	N. 39°23'54" E.	15.30'
L66	N. 70°26'39" E.	27.57'
L67	N. 89°22'11" E.	28.43'
L68	S. 89°22'34" E.	31.01'
L69	S. 62°22'34" E.	18.51'
L70	S. 62°22'34" E.	23.80'
L71	S. 62°23'32" E.	41.81'
L72	S. 84°56'11" E.	34.69'
L73	S. 84°56'11" E.	10.81'
L74	S. 84°56'11" E.	47.38'
L75	N. 52°03'47" E.	20.21'
L76	N. 52°03'47" E.	74.22'
L77	N. 81°24'09" E.	47.38'
L78	N. 81°53'09" E.	50.82'
L79	N. 73°07'35" E.	47.09'
L80	S. 06°37'39" E.	38.98'
L81	S. 09°21'46" E.	23.82'
L82	N. 86°16'24" W.	34.26'

LINE TABLE		
LINE	BEARING	LENGTH
L83	N. 88°53'00" E.	50.80'
L84	S. 03°24'39" E.	47.88'
L85	S. 07°38'15" W.	19.21'
L86	S. 80°37'14" E.	14.88'
L87	S. 27°32'05" E.	17.65'
L88	N. 19°31'08" W.	27.96'
L89	N. 19°31'08" W.	17.72'
L90	S. 18°38'10" E.	45.25'
L91	N. 17°34'55" W.	7.00'
L92	N. 17°34'55" W.	33.87'
L93	S. 87°38'53" W.	48.99'
L94	S. 72°48'08" E.	8.96'
L95	N. 88°38'08" E.	8.96'
L96	S. 82°48'48" E.	51.67'
L97	S. 75°52'28" E.	27.68'
L98	S. 74°54'54" E.	29.99'
L99	N. 89°23'36" E.	39.45'
L100	S. 88°37'17" E.	51.81'
L101	S. 84°40'03" E.	34.32'
L102	S. 83°28'02" E.	38.04'
L103	S. 85°24'36" E.	56.95'
L104	N. 74°36'19" E.	30.98'
L105	S. 88°40'45" E.	52.00'
L106	S. 88°38'13" E.	19.86'
L107	N. 82°11'25" E.	36.47'
L108	N. 82°38'23" E.	121.12'
L109	N. 20°08'31" E.	8.30'
L110	N. 20°08'31" E.	58.30'
L111	S. 15°21'16" E.	22.03'
L112	S. 15°21'16" E.	20.04'
L113	S. 04°30'04" E.	43.80'
L114	S. 79°46'45" E.	50.36'
L115	S. 79°46'45" E.	54.29'

LINE TABLE		
LINE	BEARING	LENGTH
L35	S. 02°06'01" E.	84.72'
L116	S. 23°04'26" W.	74.18'
L117	S. 22°34'48" W.	38.42'
L118	S. 22°22'06" W.	18.36'
L119	S. 02°06'06" W.	7.82'
L120	S. 44°35'39" E.	25.53'
L121	N. 73°05'33" E.	36.46'
L122	N. 65°09'14" E.	60.07'

LEGEND
PDUE = PUBLIC DRAINAGE AND UTILITY EASEMENT.
R/W = RIGHT-OF-WAY
B = 10' X 70' SIGHT TRIANGLE
O = LOT CORNERS SET
PSDE = PUBLIC STORM DRAINAGE EASEMENT.
⧓ = PROPOSED FIRE HYDRANT
COS = COMMON OPEN SPACE
RCP = REINFORCED CONC. PIPE
SSE = SEPTIC SUPPLY LINE EASEMENT
O = PROPERTY CORNER
□ = CONCRETE MONUMENT

NOTES:
1) This property may be subject to any easements and/or Rights-of-way of record.
2) All lots are subject to a 10' Utility and Drainage Easement. 10 feet on each side of all property lines, see lot 14 for typical
3) Total acreage to be subdivided: 35.53 AC. in this phase
4) Total lots created: 45 in phase 2
5) Property zoned: RA , ADJOINING ZONING IS RA
6) Minimum Building Setback: 35' Front
25' Rear typical lot setbacks.
15' Side See LOT 12
25' Corner
7) Minimum Lot width: 100'
8) Minimum Lot size: 20,000 Sq.Ft. (0.459 ac.)
9) The smallest Lot in this phase is Lot 7 = 0.53 ac.
10) The largest buildable Lot in this phase is Lot 26 = 1.69 ac.
11) No geodetic monument located within 2000' of said property.
12) No direct access to Bethesda Road from Lots 1, 4, 5, 6, 7, & 8.
13) No buildings found within the National Historic Register.
14) All lots will be served by Iredell Water and individual septic.
15) Based upon review of flood insurance rate map, community panel numbers 3710478000 J & 3710479200 J, Dated: 3/18/08 Areas determined to be outside of 500-year Flood Plain.
16) Tax parcel #(pin number) = 4761494998
17) Deed ref: = 1872/1082
18) There is 2,380 linear feet of new roadway in this phase.

THIS SURVEY CREATES A SUBDIVISION OF LAND WITHIN THE AREA OF A COUNTY OR MUNICIPALITY THAT HAS AN ORDINANCE THAT REGULATES PARCELS OF LAND.

FILED FOR REGISTRATION
BOOK
DATE
Doc. ID:
Received: 05/29/2008 01:25:06 PM
Fee Amt: $21.00 Page 1 of 1
Rec'd By:
Brenda C. Bell Register of Deeds
RGS =54 PG71
BY:

OWNERS CERTIFICATE AND NOTARIZATION
I HEREBY CERTIFY THAT I AM THE OWNER OF THE PROPERTY SHOWN AND DESCRIBED HEREON, WHICH IS LOCATED IN THE SUBDIVISION JURISDICTION OF THE COUNTY OF IREDELL AND THAT I HEREBY ADOPT THIS PLAN OF SUBDIVISION WITH MY FREE CONSENT AND ESTABLISH MINIMUM BUILDING SETBACKS AS NOTED, AND DEDICATE ALL ROADS, ALLEYS, WALKS, PARKS, AND OTHER SITES AND EASEMENTS TO PUBLIC OR PRIVATE USE AS NOTED.
I FURTHER CERTIFY THAT:
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 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.
5/28/08 DATE
MANAGER
NORTH CAROLINA
IREDELL COUNTY
I, A NOTARY PUBLIC FOR SAID COUNTY AND STATE DO HEREBY CERTIFY THAT [redacted] PERSONALLY APPEARED BEFORE ME THIS DAY AND ACKNOWLEDGED THE EXECUTION OF THE FOREGOING INSTRUMENT. WITNESS MY HAND AND OFFICIAL SEAL THIS 28 DAY OF [illegible], 2008.
NOTARY PUBLIC
MY COMMISSION EXPIRES: [illegible]

SURVEYORS CERTIFICATION
I, WILLIAM M. ALLEN CERTIFY THAT THIS MAP WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION DEED DESCRIPTION RECORDED IN BOOK [illegible] PAGE [illegible] THAT THE RATIO OF PRECISION AS CALCULATED BY LATITUDES AND DEPARTURES IS 1:10000; (THAT THE BOUNDARIES NOT SURVEYED ARE SHOWN AS BROKEN LINES PLOTTED FROM INFORMATION FOUND IN BOOK [illegible] PAGE [illegible] THAT THIS MAP WAS PREPARED IN ACCORDANCE WITH G.S. 47-30 AS AMENDED.
WITNESS MY ORIGINAL SIGNATURE, REGISTRATION NUMBER AND SEAL THIS 26 DAY OF MAY, 2008.
SEAL L-3459
PROFESSIONAL LAND SURVEYOR
L-3459
REGISTRATION NUMBER

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. I FURTHER CERTIFY THAT ALL STREETS, UTILITIES, AND OTHER REQUIRED IMPROVEMENTS HAVE BEEN INSTALLED IN AN ACCEPTABLE MANNER OR IF THE INSTALLATION OF THE REQUIRED IMPROVEMENTS IN AN ACCEPTABLE MANNER SATISFACTORY TO THE COUNTY OF IREDELL HAS BEEN RECEIVED, AND THAT THE FILING FEE FOR THIS PLAT, IN THE AMOUNT OF $ [illegible] HAS BEEN PAID. THIS PLAT HAS BEEN APPROVED BY THE SUBDIVISION ADMINISTRATOR FOR RECORDING IN THE OFFICE OF THE REGISTER OF DEEDS OF IREDELL COUNTY.
5-29-08 DATE
SUBDIVISION ADMINISTRATOR

AS OF THE DATE OF THIS RECORDING, THE LOTS REPRESENTED ON THIS PLAT HAVE NOT BEEN INSPECTED OR APPROVED BY THE IREDELL COUNTY HEALTH DEPT. IF NOT INSPECTED THERE IS NO ASSURANCE THAT A BUILDING PERMIT WILL BE ISSUED.

STATE OF NORTH CAROLINA
COUNTY OF IREDELL
I, [illegible], REVIEW OFFICER OF IREDELL COUNTY, CERTIFY THAT THE MAP OR PLAT TO WHICH THIS CERTIFICATION IS AFFIXED MEETS ALL STATUTORY REQUIREMENTS FOR RECORDING.
5-29-08 DATE
REVIEW OFFICER

ALL LOTS WITHIN NORTHLAKE SUBDIVISION TO THE BEST OF MY KNOWLEDGE DOES NOT LIE WITHIN A WATER SUPPLY WATERSHED DESIGNATED BY THE ENVIRONMENTAL MANAGEMENT COMMISSION AS IT APPEARS ON THE WATERSHED PROTECTION MAP OF IREDELL COUNTY.
5-29-08 DATE
SUBDIVISION ADMINISTRATOR

RECORD PLAT
OF
NORTHLAKE SUBDIVISION, PHASE 2
CHAMBERSBURG TWSP., IREDELL CO., N.C.
SCALE: 1" = 100' DATE OF SURVEY: APRIL 8, 2007
DATE PLAT PREPARED: MAY 28, 2008

DEVELOPER: ABMS DEVELOPMENT, LLC.
111-B RACEWAY DRIVE
MOORESVILLE, NC 28117

FILE NAME: 13012.DWG

Northlake Lot: **34**

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, Aroma Home AEC, LLC, am the legal owner(s) of the property located at 132 Wylie Trail , Statesville, NC 28677, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Cynthia Blanding, MAJ Permits Inc., 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.

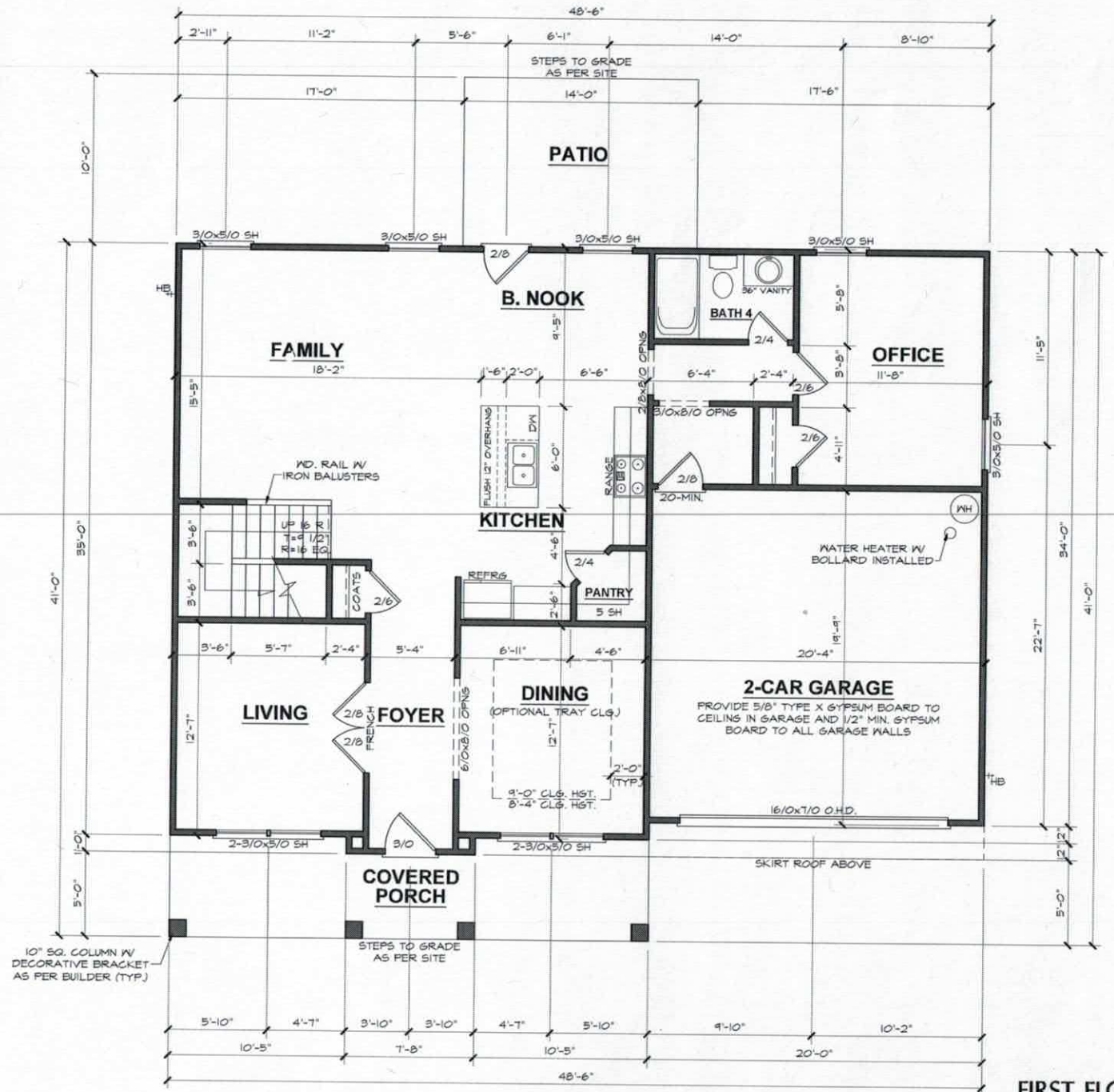
(X) MANAGER 7/9/2016
Signature of Owner(s) Date

(X) 7.19.16
Signature of Witness Date

Please return this signed form to the appropriate office:

Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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



FIRST FLOOR PLAN

9'-0" (NOM.) CLG. HGT. U.N.O.
SET WINDOWS @ 7'-0" U.N.O.

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

ADAMS HOMES AEC, LLC

2913 "B" FE (R) NR034

DATE DRAWN
7-18-2019
REVISIONS
4003

SHEET
3

Acknowledgement Of
Plans Submittal ONLY!

Date 7-24-19

Date 7/25/19

SECOND FLOOR PLAN

8'-0" (NOM.) CLG. HGT. U.N.O.
SET WINDOWS @ 7'-2" U.N.O.

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

SHEET 4

DATE DRAWN 7-18-2019

REVISIONS 4003

2913 "B" FE (R) NR034

ADAMS HOMES AEC, LLC

IREDELL COUNTY

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

APPLICATION NUMBER
222315
Issue Date: 10/06/2016

Permit Type: IMPROVEMENT PERMIT APPLICATION

Parcel Number	Street Address	Jurisdiction
4761498714.000	132 WYLIE TRAIL	

Owner Information	Applicant Information	Contractor Information
Owner: ABMS DEVELOPMENT LLC Address: 1230 IREDELL CO, NC 28625 Phone:	Applicant: CAROLINA SOIL SEPTIC C Address: 162 WEST B ST KANNAPOLIS, NC 28081 Phone: 704-202-5791	Contractor: CAROLINA SOIL SEPTIC C Address: 162 WEST B ST KANNAPOLIS, NC 28081 Phone: 704-202-5791 License Type: UNLI License Number:

Project Description

NEW SINGLE FAMILY - IREDELL

Scope of Work

SFD

Permit Details:

EFT	IMPROVEMENT PERMIT FEE	Amount:	350.00
		Amount:	
		Amount:	
		Amount:	
		Amount:	
		Amount:	
		Amount:	

I hereby certify that all information in this application is correct and all work will comply with the state code and all other applicable state and local laws, ordinances and regulations. The respective department will be notified of any changes in the approved plans, a change of contractor, and/or specifications for the project permitted herein. This application becomes a permit only when validated and approved.

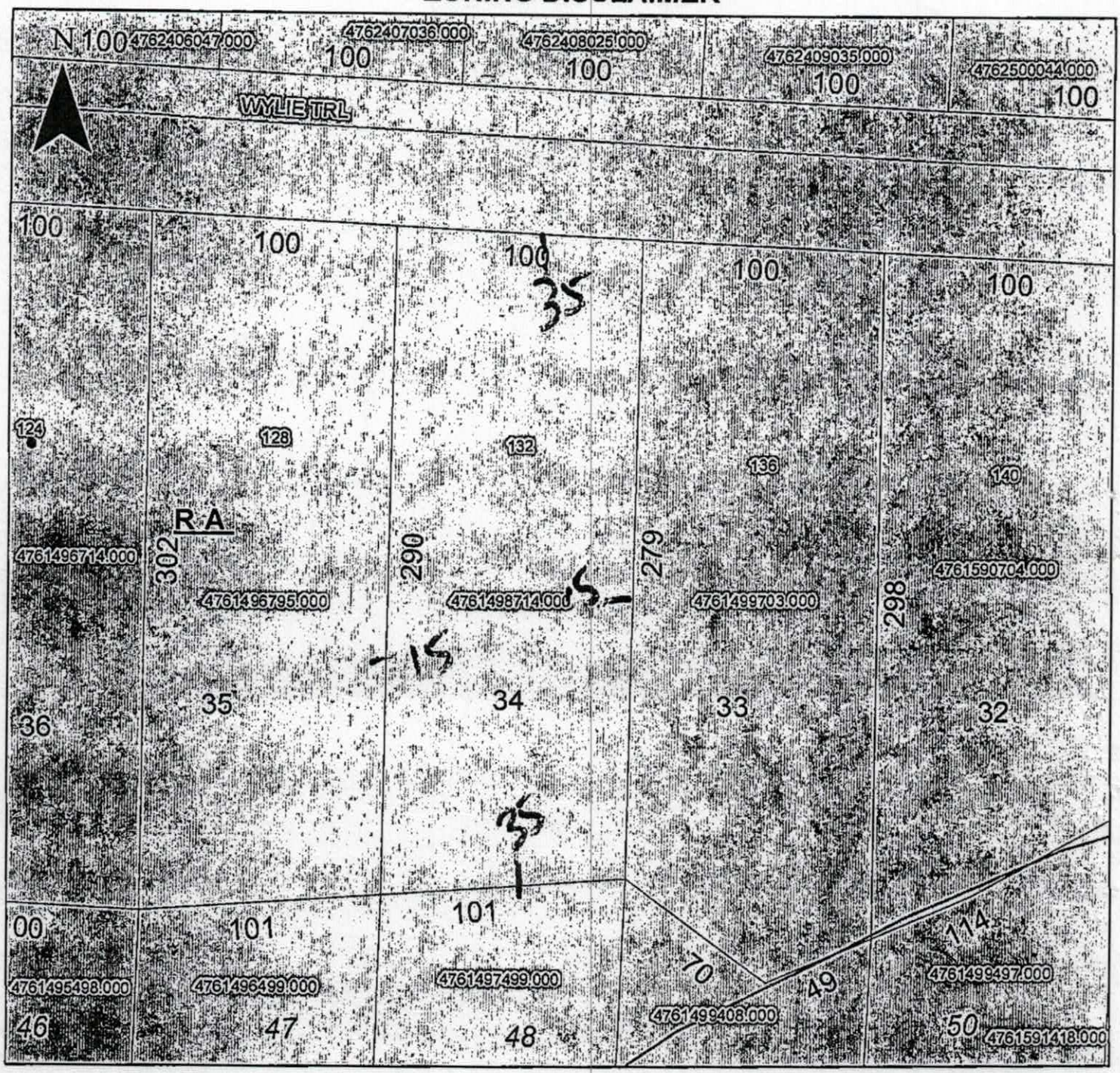
Date: 10/06/2016

Signature of Owner/Contractor

ANY PERMIT ISSUED EXPIRES SIX (6) MONTHS AFTER ISSUANCE IF NO INSPECTIONS HAVE BEEN MADE. ANY PERMIT ISSUED SHALL EXPIRE TWELVE (12) MONTHS AFTER LAST INSPECTION IF THE WORK IS DISCONTINUED.

Permit Number	82420	TOTAL FEES:	$ 350.00

ZONING DISCLAIMER



Property Address 132 Wylie Trl

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.

Applicant

10-6-16

Date