Off site septic on PIN 4764-64-3054 *

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PERMIT# 107487 ~~81299~~ PIN# 4764-64-~~2375~~ 2355 DATE 07-26-02

OWNER OR CONTRACTOR Stevin & Robin Porter PHONE: Business Home 871-0549 / 880-5479

ADDRESS P.O. BOX 135 / Rt 97 Box 135 BRENTON, WV 24818

LOCATION 64 E, (R) BELL FARM, (R) FARMWOOD; LOT 2/3 ON LEFT

SUBDIVISION MAYWOOD BLOCK / SECTION LOTS 2/3 4 LOT AREA 2.0 AC + 1/3 AC SITE CLASS PS SEWER OVERLOAT DESIGN FLOW 480 L.T.A.R. .26

Septic Tank: 1000 Gallons; STB 714 Date 4-21-00

Pump Tank: 1000 Gallons; PT 283 Date 2-25-03

Pump Make: GOULDS Model WE1012H Serial No. 1PWE1012H

Nitrification Field: No Fields 1 Square Feet 600 Linear Feet 300'

No Lines 4 Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: LP PANEL

Repair System Description: LP PANEL

Maintenance Agreement Required: ☒ Yes ☐ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Bathrooms 3 No. Employees

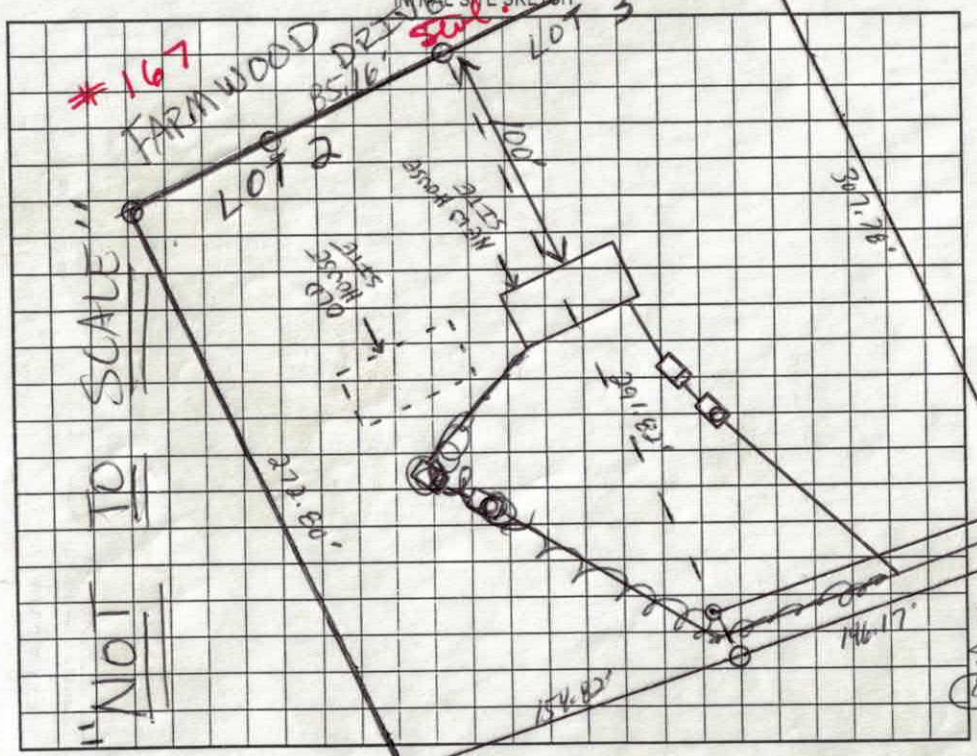
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

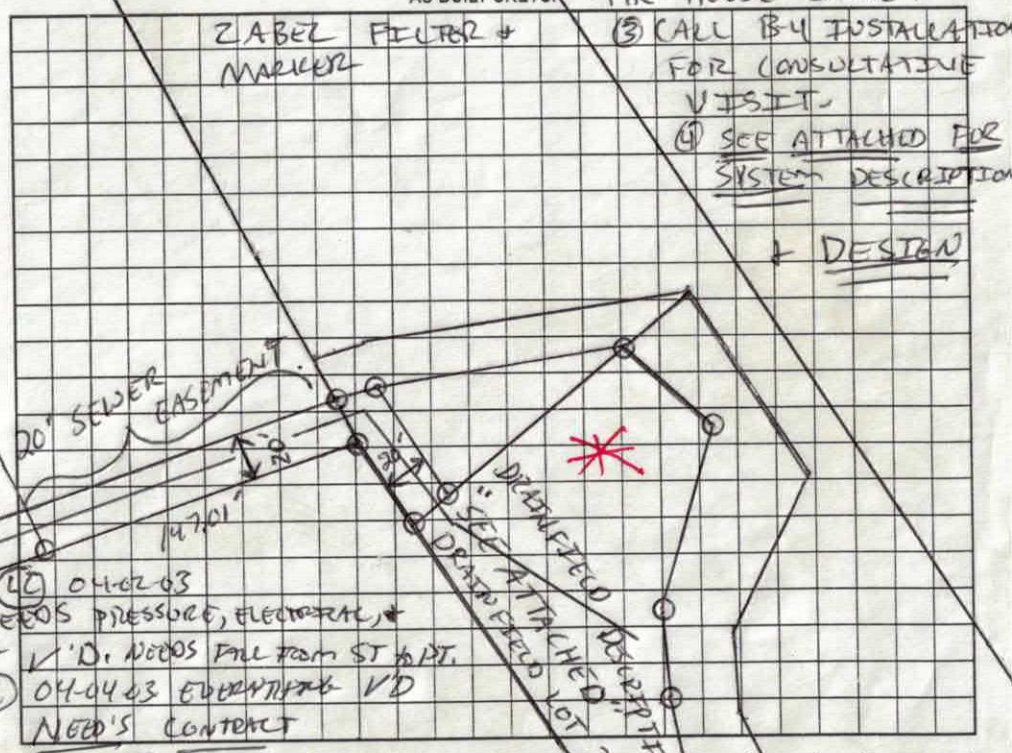
Comments/Conditions: (1) SYSTEM HAS NOT CHANGED. HOUSE HAS BEEN CENTERED ON LOT LINE BETWEEN LOTS 2 & 3 AS DRAWN BELOW (2) USED PROGRAM SPECIALIST

Comments/Conditions: PREVIOUS WORK (PUMP SIZING, SOILS, SYSTEM DESIGN) & PERFORMED A LIMITED RELAYOUT BY JUST MOVING THE HOUSE SITE. (3) CALL BY INSTALLATION FOR CONSULTATIVE VISIT. (4) SEE ATTACHED FOR SYSTEM DESCRIPTION & DESIGN

INITIAL SITE SKETCH



AS BUILT SKETCH



(2) 04-02-03
NEEDS PRESSURE, ELECTRICAL, & V.D. NEEDS FILL from ST & PT.
ST (2) 04-04-03 EQUIPMENT VD NEED'S CONTACT

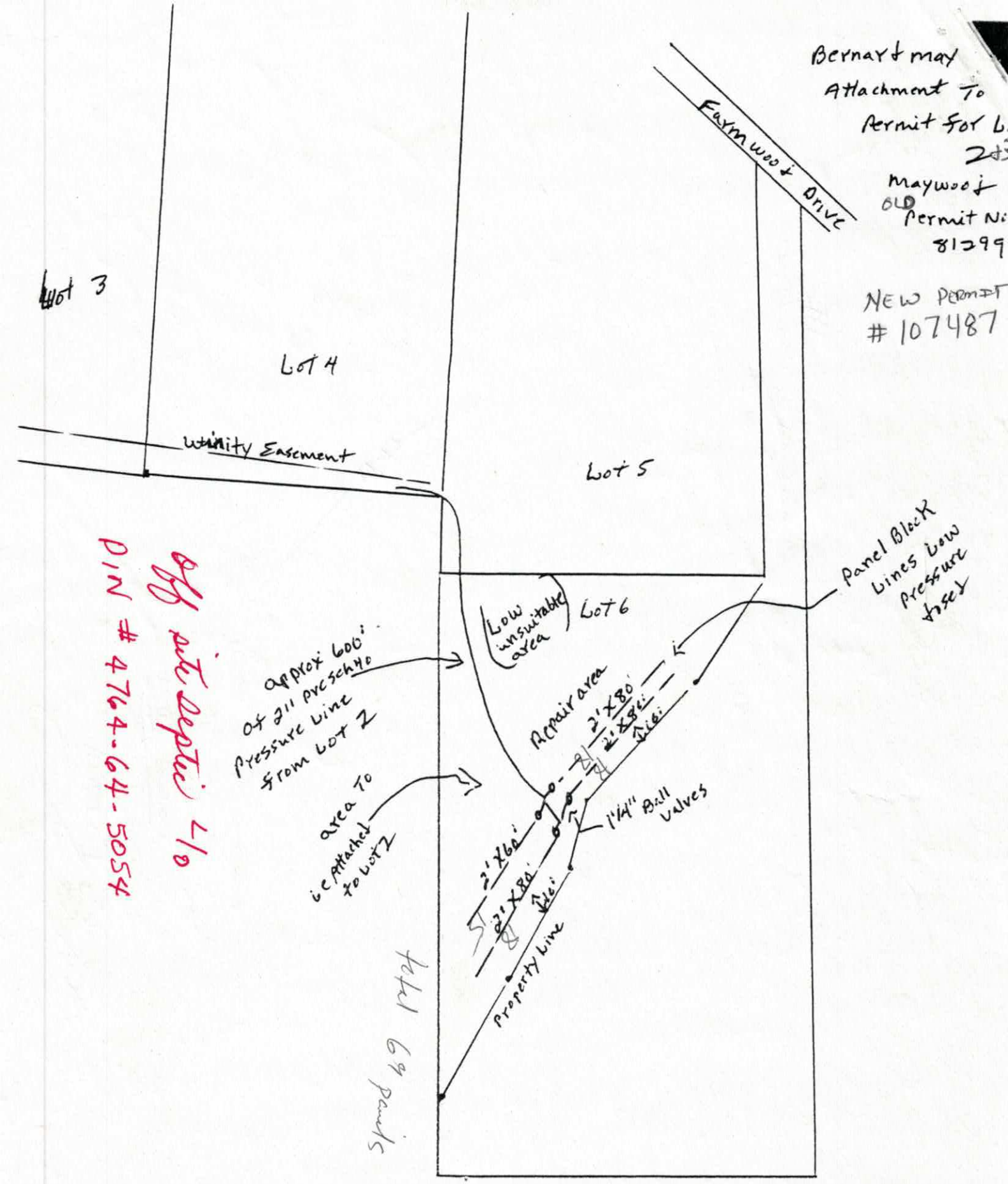
Permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months

Signed: Robin S Porter date 7-26-02 Installed by: MARTY TUCKER

Improvement Permit by: date 07-26-02 Operation Permit by: date 4-8-03

Authorization to Construct by: date 07-26-02 Existing System Inspection by: date

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK


Bernart may
Attachment To
Permit For L
2
Maywood
Old Permit Nu
81299
NEW PERMIT
#107487
Farmwood Drive
Lot 3
LOT 4
Utility Easement
Lot 5
Panel Block
Lines low
pressure
Asset
Low
insuitable
area
LOT 6
approx 600'
of 3" PVC Sch 40
Pressure Line
from Lot 2
Repair area
3' X 80'
3' X 80'
Dia:
area to
be attached
to Lot 2
3' X 60'
3' X 80'
Dia:
1 1/4" Ball
Valves
Property Line
Total 69 panels
Off site Septic L/D
PIN # 4764-64-5054

DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Bernart Mary APPLICANT: _____
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: _____
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
LOCATION OF SITE: Part of lot 6 for Drainfield PROPERTY RECORDED: _____
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other ~~for~~ lot 2
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	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFIL CLASS & LTAR
1	Heat Slope		unsuitable		Chroma 2	U			U
2	f. 6%	49"	Clay 56K	Fi SEAP	NA	PS	NA	NA	.3
3	f. 8%	48"	Clay 56K	Fi SEAP	NA	PS	NA	NA	.25
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: _____
OTHER(S) PRESENT: _____

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	NEXP (Non-expansive) 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) SLC (Silt Loam Clay)	0.6 - 0.3	0.3 - 0.15		
					MOIST	**WET**
	IV	SC (Sandy Clay) SIC (Silty 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			

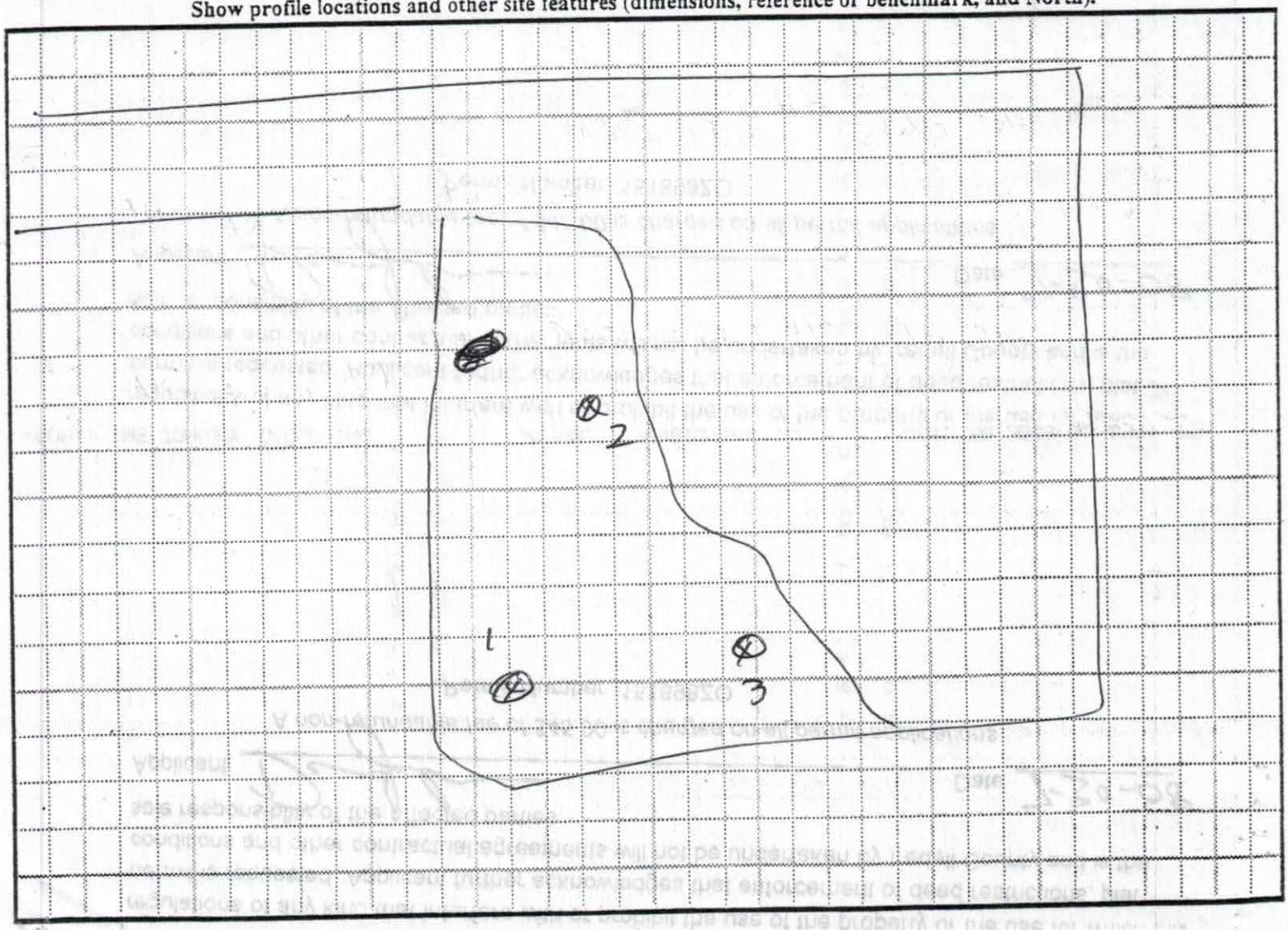
NOTES

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)

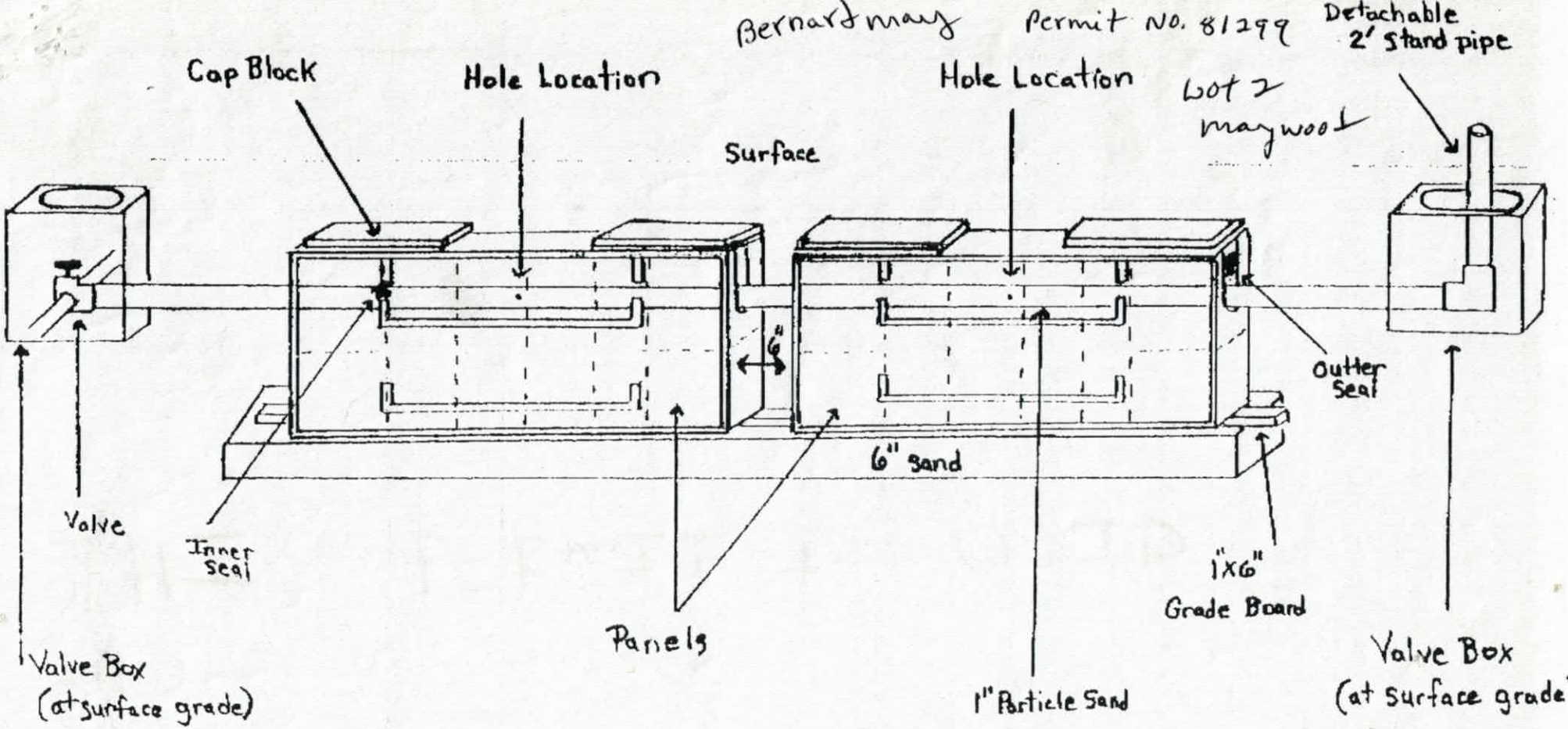
Evaluation of saprolite shall be by pits.

Long-term Acceptance Rate (LTAR): gal/day/ft²

Show profile locations and other site features (dimensions, reference or benchmark, and North).



Bernard may Permit No. 81299



Pressure Dosed PPBPS

# of panels 69.
Size holes 3/16". 1 hole per panel.
Approximate amount of sand needed 50 Tons
100lbs. of partical sand per 8 panels.
Sidewalls raked and limed.
GPM 41.
TDH 46.

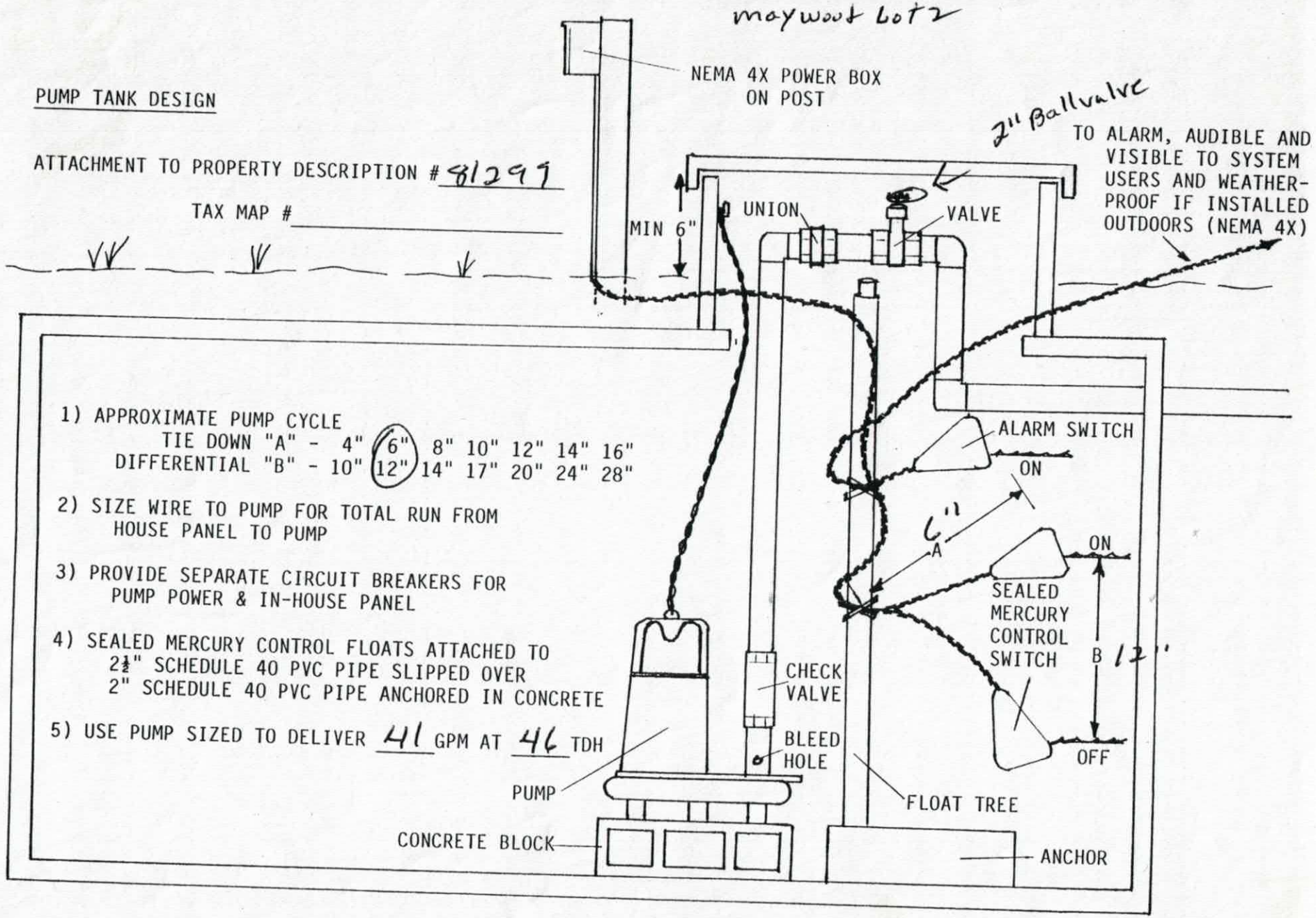
Comments

Bernard may
maywood Lot 2

PUMP TANK DESIGN

ATTACHMENT TO PROPERTY DESCRIPTION # 81299

TAX MAP # _____



1) APPROXIMATE PUMP CYCLE

TIE DOWN "A" -	4"	(6")	8"	10"	12"	14"	16"
DIFFERENTIAL "B" -	10"	(12")	14"	17"	20"	24"	28"

2) SIZE WIRE TO PUMP FOR TOTAL RUN FROM HOUSE PANEL TO PUMP

3) PROVIDE SEPARATE CIRCUIT BREAKERS FOR PUMP POWER & IN-HOUSE PANEL

4) SEALED MERCURY CONTROL FLOATS ATTACHED TO 2½" SCHEDULE 40 PVC PIPE SLIPPED OVER 2" SCHEDULE 40 PVC PIPE ANCHORED IN CONCRETE

5) USE PUMP SIZED TO DELIVER 41 GPM AT 46 TDH

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
Application For Improvement Permit

ALL items on this application form must be completed before Health Department can begin work. One application must be completed by the property owner or agent for each (proposed) site.

PERSONAL INFORMATION:

Stephen D. Porter	(304) 782-7371	POB 135	Brenton	WV	24818
Applicant	Phone #	Mailing Address	City	State	Zip Code

Stephen D. Porter	Same as above			
Current Property Owner	Mailing Address	City	State	Zip Code

PROPERTY INFORMATION:

Maywood Subdivision			
(Proposed) Subdivision Name	(Proposed) Lot #	(Proposed) Block/Section #	State Road #

Public Iredell Water		
(Proposed) Water Supply: Public, Private Well	**Preliminary Plat Approval Date** (DEVELOPERS ONLY)	Tax Map #

Specific Directions to Property Rt. 64 E. to Bell Farm Rd. to Farmwood Dr. located on ~~left~~. Right. Property located on left.

TYPE OF FACILITY: (use check (X) or number as appropriate)

Modular
House X Mobile Home _____ Commercial _____ No. Bedrooms 3 No. Baths 2

SIZED FOR 4 BEDROOM & DID LIMITER RELIEF

No. Persons or Employees (commercial only) 2 Basement _____ Basement with Plumbing _____

Crawl Space X Concrete Slab _____ Garbage Disposal _____ Jaccuzi or spa _____

COVENANT AND SIGNATURE:

I hereby make application to the Iredell County Health Department for a soils/site evaluation of the property described above. This evaluation is to be conducted for the sole purpose of obtaining a septic system Improvement Permit. I hereby authorize Iredell County Health Department representatives to go onto the above property for purposes of conducting this evaluation. I understand that, by state law, any Improvement Permit issued on the above property may be voided if substantial changes are made to the designated sewage system site. The issuance of an Improvement Permit by the Iredell County Health Department does not relieve me from compliance with all other relevant state/local laws or regulations. As owner or authorized agent, I covenant that the contents of this application are true and represent the maximum facilities intended to be placed on this property to my knowledge to date.

I understand that any Improvement Permit issued on the above property is valid for five (5) years from the issuance date and is subject to revocation if the above described site plans or intended use changes.

6/20/02 DATE Stephen D Porter SIGNATURE OF OWNER/AUTHORIZED AGENT

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PERMIT# 8299 PIN# 4764641326 DATE 5-24-99

OWNER OR CONTRACTOR Bernard may PHONE: Business Home 7044641326

ADDRESS 5153 Glenwood St Sherrills Ford N.C.

LOCATION 645 TR Bell Rd TR Farmwood on left

SUBDIVISION maywood BLOCK / SECTION LOT 2 LOT AREA 1.0 + 1/2 acre core sewer area SITE CLASS PS DESIGN FLOW 480 L.T.A.R. .26

Septic Tank: 1000 Gallons; STB Date

Pump Tank: 1000 Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 600 Linear Feet 300

No Lines 4 Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth

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

System Description: LPP Panels

Repair System Description: " "

Maintenance Agreement Required: ☑ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees

☐ Other

☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

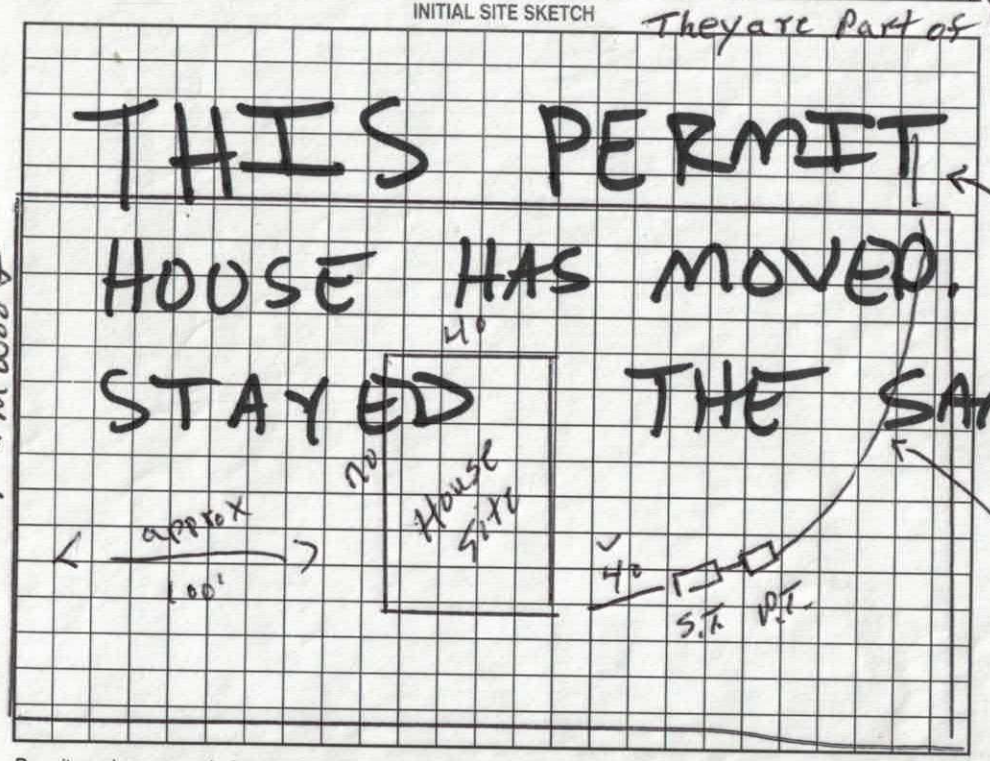
Comments:/Conditions:

See Attached Detail Drawings for Drainfield area, Pump Tanks, Drain Line set up They are Part of This Permit

Comments:/Conditions:

A signed agreement with a certified Subsurface operator must be on File with Health Dept Before an operation Permit can be issued for This System

INITIAL SITE SKETCH



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. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: Bernard May date 7-29-99 Installed by:

Improvement Permit by: P.C. Moore date 5-24-99 Operation Permit by: date

Authorization to Construct by: P.C. Moore date 5-24-99 Existing System Inspection by: date

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
Application For Improvement Permit

ALL items on this application form must be completed before Health Department can begin work. One application must be completed by the property owner or agent for each (proposed) site.

PERSONAL INFORMATION:

BERNARD MAY	483-1218	5153 GLENWOOD ST	Sherrills-Ford	NC	28673
Applicant	Phone #	Mailing Address	City	State	Zip Code

BERNARD MAY	SAme			
Current Property Owner	Mailing Address	City	State	Zip Code

PROPERTY INFORMATION:

MAYwood subdivision	2	169 FARMWOOD Drive	FARMwood
(Proposed) Subdivision Name	(Proposed) Lot #	(Proposed) Block/Section #	State Road #

(Proposed) Water Supply: Public, Private Well	**Preliminary Plat Approval Date** (DEVELOPERS ONLY)	Tax Map #

Specific Directions to Property FROM STATESVILLE TAKE 64 EAST TO Bell FARM Road, TURN South (Right) TURN Right ON TO FARM wood - property is on Left.

TYPE OF FACILITY: (use check (X) or number as appropriate)

House ✓ Mobile Home _____ Commercial _____ No. Bedrooms 4 No. Baths 2

No. Persons or Employees (commercial only) _____ Basement _____ Basement with Plumbing _____

Crawl Space ✓ Concrete Slab _____ Garbage Disposal _____ Jaccuzi or spa _____

COVENANT AND SIGNATURE:

I hereby make application to the Iredell County Health Department for a soils/site evaluation of the property described above. This evaluation is to be conducted for the sole purpose of obtaining a septic system Improvement Permit. I hereby authorize Iredell County Health Department representatives to go onto the above property for purposes of conducting this evaluation. I understand that, by state law, any Improvement Permit issued on the above property may be voided if substantial changes are made to the designated sewage system site. The issuance of an Improvement Permit by the Iredell County Health Department does not relieve me from compliance with all other relevant state/local laws or regulations. As owner or authorized agent, I covenant that the contents of this application are true and represent the maximum facilities intended to be placed on this property to my knowledge to date.

I understand that any Improvement Permit issued on the above property is valid for five (5) years from the issuance date and is subject to revocation if the above described site plans or intended use changes.

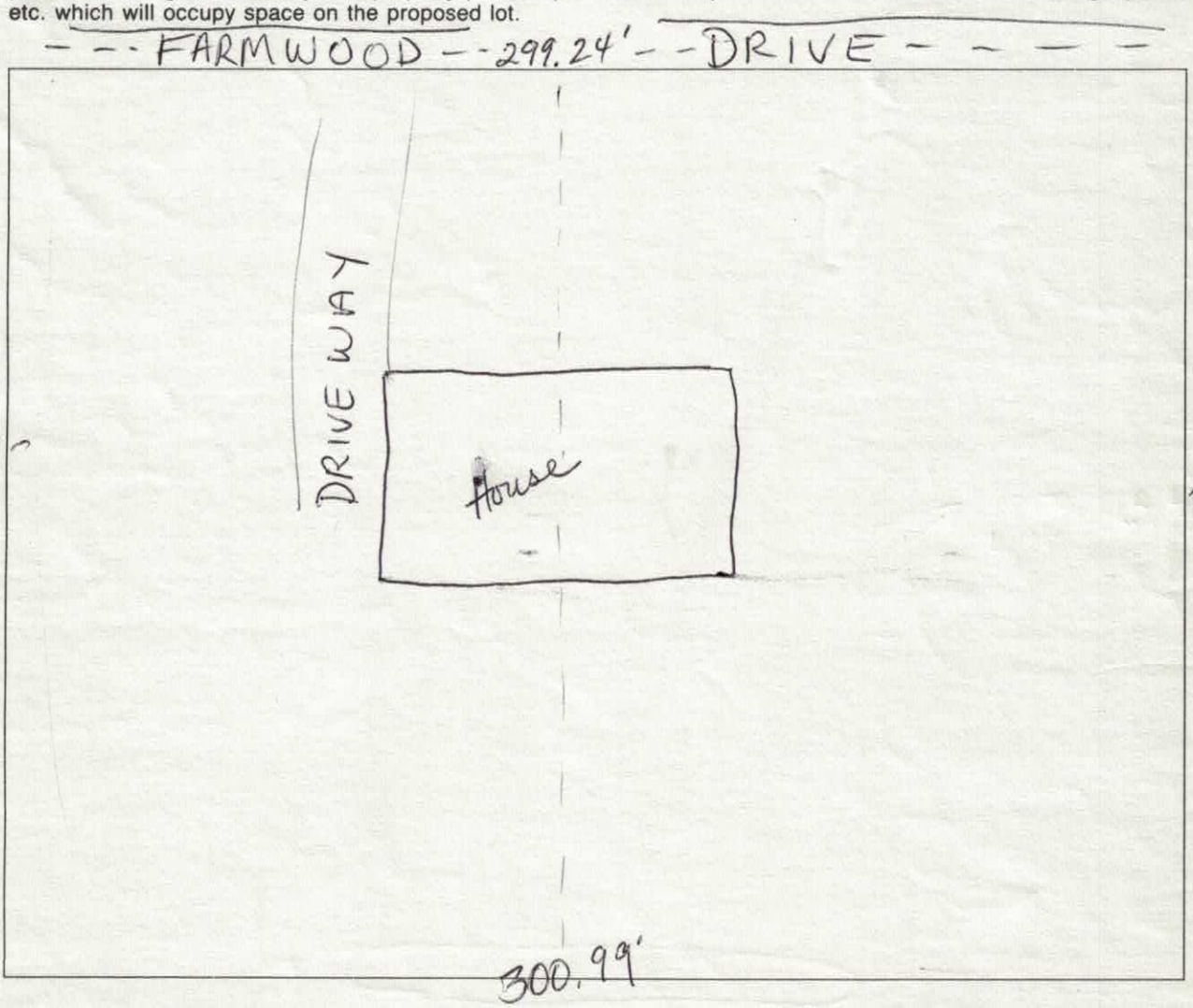
7 May 99 DATE Bernard May SIGNATURE OF OWNER/AUTHORIZED AGENT

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
Application For Improvement Permit
Site Plan Form

INSTRUCTIONS TO APPLICANT: (Items in Parentheses are to be performed by DEVELOPERS ONLY)

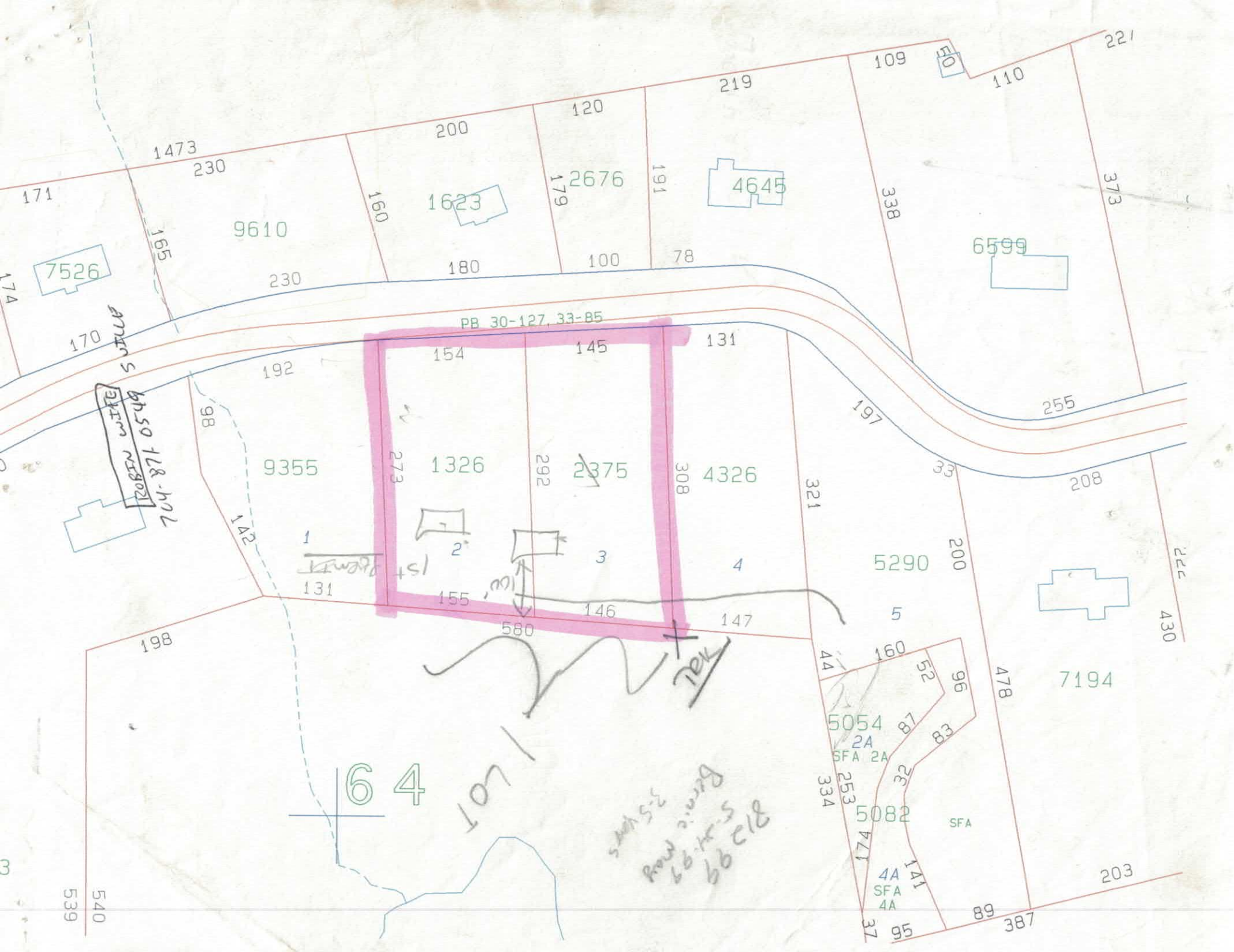
All property corners must be staked and flagged with dimensions matching those shown on an approved final (preliminary) plat (**and** proposed house dimensions must be staked and flagged) before the Iredell County Health Department can begin review work on this proposed site. An application for an Improvement Permit is considered complete **only** when this site plan form is completed, signed, and attached to the application form.

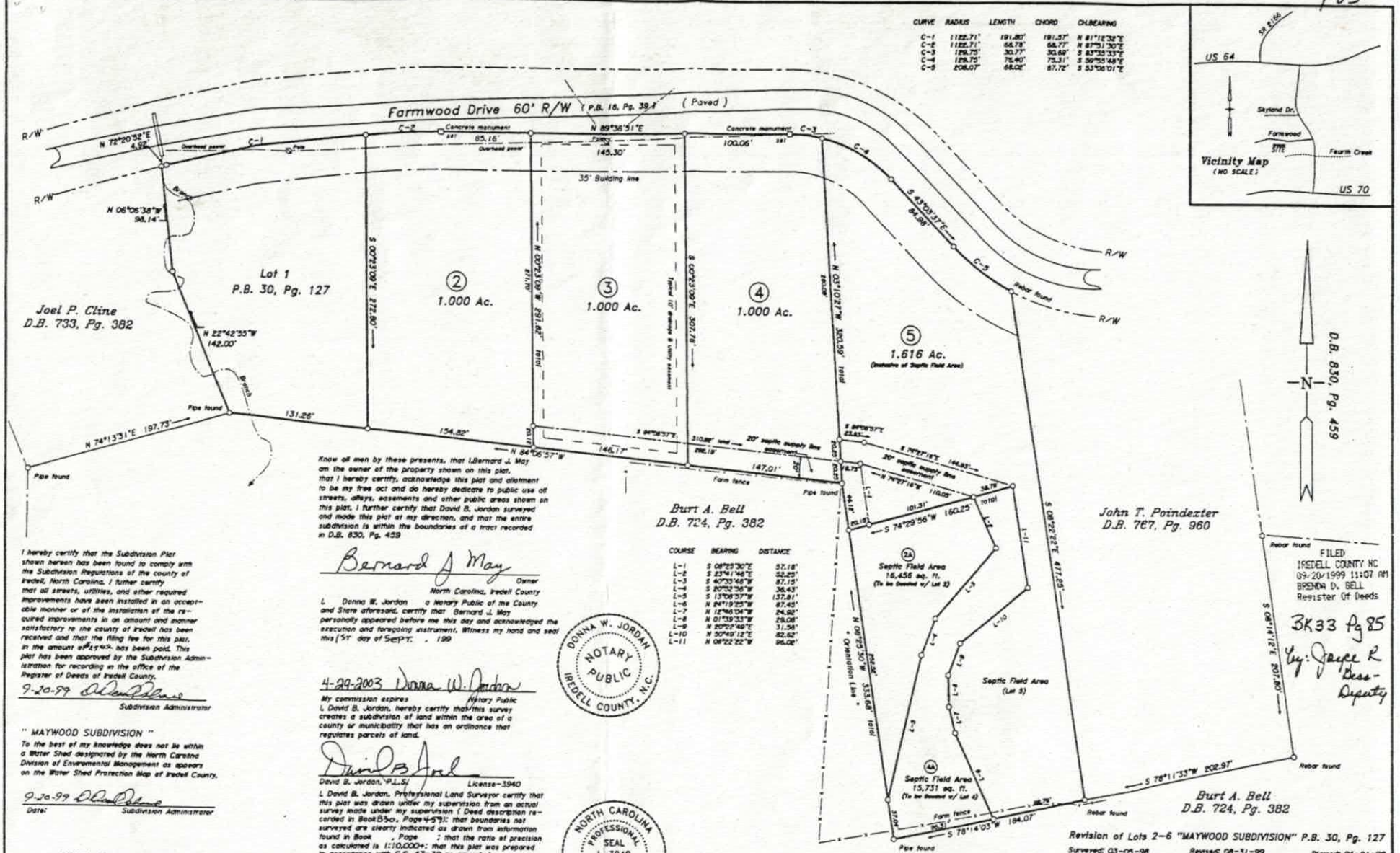
As Close To Scale As Is Possible: 1. Draw in the proposed lot showing **all** proposed lot dimensions and orientation to proposed streets or roads. 2. Draw in the proposed structure showing dimensions and distances to property lines (include decks, walkways, etc.). E. Draw in the proposed driveway location. 4. Draw in all wells, both existing and proposed, including those on adjacent property (if known). 5. Draw in any other structure ie. sheds, outbuildings, pools, etc. which will occupy space on the proposed lot.



I hereby convenant that the above representation is correct to the best of my knowledge and ability.

6/20/02 Date Stephen D. Porter SIGNATURE OF OWNER/AUTHORIZED AGENT


PB 30-127, 33-85
9610
1623
2676
4645
6599
7526
9355
1326
2375
4326
5290
7194
5054
2A
SFA 2A
5082
SFA
4A
SFA
4A
64
1473
230
171
165
160
179
191
338
373
109
110
219
120
200
180
100
78
230
174
170
192
98
142
154
145
131
273
292
308
321
197
255
208
33
200
131
155
146
147
580
198
539
540
44
160
52
96
87
83
32
253
334
478
430
174
141
203
89
387
37
95
Kiwanis
Drainage Easement
Book 8450 Page 1127



CURVE	RADIUS	LENGTH	CHORD	CHBEARING
C-1	1122.71'	191.80'	191.57'	N 81°18'32"E
C-2	1122.71'	64.78'	64.77'	N 87°51'30"E
C-3	1122.71'	30.77'	30.68'	S 83°38'33"E
C-4	1129.75'	75.40'	75.31'	S 39°55'48"E
C-5	208.07'	68.02'	67.72'	S 53°06'01"E

COURSE	BEARING	DISTANCE
L-1	S 08°25'30"E	57.18'
L-2	S 23°41'46"E	52.25'
L-3	S 40°33'48"W	87.15'
L-4	S 20°02'36"W	36.43'
L-5	S 13°08'37"W	137.81'
L-6	N 84°19'25"W	87.45'
L-7	N 15°46'04"W	24.92'
L-8	N 01°39'33"W	29.08'
L-9	N 20°22'48"E	31.56'
L-10	N 30°49'12"E	82.62'
L-11	N 08°22'22"W	96.08'

Know all men by these presents, that I,Bernard J May am the owner of the property shown on this plat, that I hereby certify, acknowledge this plat and allotment to be my free act and do hereby dedicate to public use all streets, alleys, easements and other public areas shown on this plat. I further certify that David B. Jordan surveyed and made this plat at my direction, and that the entire subdivision is within the boundaries of a tract recorded in D.B. 830, Pg. 459

Bernard J May
Owner
North Carolina, Iredell County

I Donna W. Jordan a Notary Public of the County and State aforesaid, certify that Bernard J May personally appeared before me this day and acknowledged the execution and foregoing instrument. Witness my hand and seal this 15T day of SEPT. , 199

4-29-2003 Donna W. Jordan
My commission expires Notary Public

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.

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

I David B. Jordan, Professional Land Surveyor certify that this plat was drawn under my supervision from an actual survey made under my supervision (Deed description recorded in Book 830, Page 459); that boundaries not surveyed are clearly indicated as drawn from information found in Book , Page ; that the ratio of precision as calculated is 1:10,000+; that this plat was prepared in accordance with G.S. 47-30 as amended.

Witness my original signature, registration number and seal this 15T day of SEPT. , A.D., 1999

David B. Jordan, P.L.S. License-3940
North Carolina, Iredell County

I Donna W. Jordan, a Notary Public of the county and state aforesaid certify that David B. Jordan a Professional Land Surveyor personally appeared before this day and acknowledged the execution of the foregoing instrument. Witness my hand and seal this 15T day of SEPT. ,1999

4-29-2003 Donna W. Jordan
My commission expires: Notary Public

DONNA W. JORDAN NOTARY PUBLIC IREDELL COUNTY, N.C.

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

DONNA W. JORDAN NOTARY PUBLIC IREDELL COUNTY, N.C.

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 futher certify that all streets, utilities, and other required improvements have been installed in an acceptable manner or of the installation of the required improvements in an amount and manner satisfactory to the county of Iredell has been received and that the filing fee for this plat, in the amount of $15.00 has been paid. This plat has been approved by the Subdivision Administration for recording in the office of the Register of Deeds of Iredell County.

9-20-99
Subdivision Administrator

" MAYWOOD SUBDIVISION "
To the best of my knowledge does not lie within a Water Shed designated by the North Carolina Division of Environmental Management as appears on the Water Shed Protection Map of Iredell County.

9-20-99
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.

9-20-99
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.

" Surveyors Notes "
1) #4 rebar set at all corners unless otherwise noted.
2) Total area to be subdivided is 3.353 acres.
3) Minimum lot size is 1.000 acre.
4) Subject property and adjacent properties are zoned R-20
5) A 10' drainage and utility easement shall exist along each lot line.
6) Minimum setbacks: 35' front & rear, 15' side.
7) Property is not located in a flood hazard area as shown on FIRM# 370313 0125 B (scaled only)
8) Property is not located within 2000' of any published horizontal control.

Coord. File: H35 Screen File: H35SF

FILED
IREDELL COUNTY NC
09/20/1999 11:07 AM
BRENDA D. BELL
Register Of Deeds
BK33 Pg 85
By: Joyce R Bess - Deputy

Revision of Lots 2-6 "MAYWOOD SUBDIVISION" P.B. 30, Pg. 127
Surveyed: 03-05-98 Revised: 08-31-99 Planned: 04-21-98

RECORD PLAT
" MAYWOOD SUBDIVISION "

Date: 03-05-98	Deed Reference: 830-459		Drawn by: D.B.J.
Scale: 1" = 60'	Tax PIN: 4764-64-2374		Job: H35-3

Owner / Developer: Bernard J. May
5153 Glenwood Street
Sherrills Ford, N.C. 28673-9216

Location: Chambersburg Twsp., Iredell Co., N. C.

PIEDMONT LAND SURVEYING
P.O. Box 5911
Statesville, N.C. 28687
(704) 871-9197

IREDELL COUNTY
PROPERTY DESCRIPTION FORM
P.O. BOX 788 277 S. CENTER ST.
STATESVILLE, NC 28687
Call Sanitarian Between
8 a.m. and 9 a.m.
664-5281 / 878-5305

Permit No: 081299 Zoning Permit: X Improvements Permit: 1

Name: MAY BERNARD Address: 5153 GLENWOOD ST

City: SHERRILLS FORD State: NC Zip: 286730000

Phone: 7044831218

Proposed Use: 01

PIN #: 4764641326 Zoning: R20 Township: 1300

Street Address: FARMWOOD DR

Flood Zone: Panel #: Effective Date: / /

Subdivision/MHP: MAYWOOD Lot #: 2 Lot Size: 1.00

Has Property been recorded? Y Community Water? Sewer?

Provider:

Watershed: Approximate Area to be Disturbed: 0

Total Built-upon Area: 0 Erosion Plan Required?

Setbacks: F35 S15 R35

Minimum Lot Size: 20000 Minimum Lot Width: 100

Land Use Permitted in this Zoning District? Y

10-05-1999 129674
1092

Comments:

Hold Building Permits? Reason:

Location: 64E,TR BELL FARM,TR FARMWOOD,ON LEFT

Staff: RAM Date: 05/10/99

Fees: Zoning: $ 15.00 Health: $ 175.00

Signature of Applicant: _____
Owner: Agent:

Iredell County
Planning & Enforcement
227 S. Center St. PO Box 788
Statesville, NC 28687
704-878-3113

Zoning Permit

Permit Number: 107487ZO

Printed: 6/20/2002

Master #: 107487

Associated Permits:
107487ZO Zoning

Applicant

Name: Steven & Robin Porter
Address: P.O. Box 135 / Rt97 Box 135
Brenton, WV 24818

Phone:

Parcel

Parcel Number: 4764-64-2375
Address: 167 Farmwood Dr.
Statesville, NC 28625
Subdivision: Maywood

Zoning: R20
Township: 1300
Area: 2.0
Lot(s): 2-3

Directions to Parcel: 64 east, Bell farm Road, right, Right Farmwood Drive

Owners

Name: Steven & Robin Porter
Address: P.O. Box 135 / Rt97 Box 135
Brenton, WV 24818

Fees and Receipts:

Number	Description	Amount
FEE-40724-02	Zoning Permit	$35.00
FEE-40725-02	Environmental Health - Type I or II System	$200.00
	Total Fees:	**$235.00**
REC-26254-02		$235.00
	Total Receipts:	**$235.00**

Permit Information:

Max Built Upon Area:

Watershed:	None
Flood Zone:	No
Set Backs:	F35,R35,S15
Minimum Lot Size:	20000
Minimum Lot Width:	100
Min # Parking Spaces:	
Land Use Permitted:	Yes
Site Plan Reviewed:	
Staff:	
Zoning Permit:	Yes
Septic Typet:	New System
Proposed Use:	Modular
Property Recorded:	Yes
Community Water:	Yes
Provider:	Iredell Water Corp.
Community Sewer:	No
Provider:	
Date:	
# of Stories:	2
# of Bedrooms:	3
# of Units in Building	0
Additional Conditions:	HOLD BUILDING PERMIT UNTIL PLAT RECORDED SHOWING LOTS 2 & 3 COMBINED
Comments:	Combining lots 2 & 3, perking lots as one individual lot.

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 enforcement of deed restrictions, plat conditions and other contractual agreements will not be undertaken by Iredell County and is the sole responsibilty of the affected parties.

Applicant: _____ Date _____

A non-refundable fee of $35.00 is charged on all permit applications

Permit Number: 107487ZO