ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 x3456 (BB) Mooresville Office (704) 660-3625

PERMIT # AP 324/365

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

PIN # 4765 - 91 - 2402

APPLICANT/OWNER: Hinson Properties LLC APPLICANT ADDRESS: 185 Shelburne Place Mooresville 28117

SITE ADDRESS: 215 Lone Pine Rd Statesville NC 28625 PHONE: 704-522-7415 ALT. PHONE —

SITE DIRECTIONS: 64 E RT on Lone Pine 1st on left SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Carson Creek SECTION: — LOT # 10 LOT AREA: .82 AC DESIGN FLOW: 360 L.T.A.R.: .275

Septic Tank 1000 (gal)	STB 760	Date 5-1-22	☒ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI		☒ Residence	No. Bedrooms 3	Water Supply	
Pump Tank 1000 (gal)	PT 363	Date 5-9-22	System Description: PM-25% Reduction		☐ Business	No. Persons 6	☐ Private	
Pump Make Gould	Model PE131	Serial #	Repair System Description: Low Pressure PPBPS-50% Red.		☐ Other	No. Employees	☒ Public	
# Nitrification Fields 1	# Lines 3	Linear Ft 330	Maintenance Agreement Required: ☐ YES ☒ NO		☐ Slab	☒ Crawl Space	☐ Community	
Trench Width 36 in	Trench Bottom Depth ~~(Low Side)~~ 30 in	Gravel Depth —	☐ GRAVITY ☒ PRESSURE		☐ Basement w/ plumbing		☐ Basement w/o plumbing	

Comments / Conditions: Keep septic system out of Riparian Easement. Easement to be marked during installation & inspection.

INITIAL SITE SKETCH

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

Soil + Forestry Services of the Carolinas, PA

LSS # 1231 Dated August 12th, 2021

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.

Tanks Lines Manifold - 6-10-22 - BB

	Date	Initials
Drain Lines Checked	6/10/22	BB
Tanks Checked	6-10-22	BB
Pressure Manifold or Valve Box Checked	6/10/22	BB
Pressure Head Set	6/24/22	CW
Electrical Checked	10/25/22	MW
Floats Set	6/24/22	CW
Alarm Checked	11/8/22	DW
Maintenance Contract Y (N)	Not Required	
Comments:		

Permit can be suspended or revoked if any false information is supplied toward securing the permit / any unauthorized changes are made to the site / any unauthorized changes are made in the installation of the system. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

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

Owner / Applicant Signature: [signature] Date: 1/21/22 Installed by: Tyler Gordy

IMPROVEMENT PERMIT by: Benjamin A. Botts Date: 1/20/2022. OPERATION PERMIT by: [signature] D. Wieberg Date: 11/8/22

AUTHORIZATION TO CONSTRUCT by: Benjamin A. Botts Date: 1/21/2022 Existing System Inspected by: Date:

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

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 x3456 Mooresville Office (704) 660-3625 (B3)

PERMIT : AP 324/365

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

PIN # 4765 - 91 - 2402

APPLICANT/OWNER: Hinson Properties LLC APPLICANT ADDRESS: 185 Shelburne Place Mooresville 28117

SITE ADDRESS: 215 Lone Pine Rd Statesville NC 28625 PHONE: 704-522-7415 ALT. PHONE –

SITE DIRECTIONS: 64 E RT on Lone Pine 1st on left SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Carson Creek SECTION: – LOT # 10 LOT AREA: .82 AC DESIGN FLOW: 360 L.T.A.R.: .275

Septic Tank	1000	(gal)	STB	760	Date	5-1-22	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	
Pump Tank	1000	(gal)	PT	363	Date	5-9-22	System Description:	PM-25% Reduction			
Pump Make	Gould	Model	PE131		Serial #		Repair System Description:	Low Pressure PBR-50% Red.			
# Nitrification Fields	1	# Lines	3		Linear Ft	330	Maintenance Agreement Required:	☐ YES	☒ NO		
Trench Width	36in	Trench Bottom Depth (~~Low Side~~)		30in	Gravel Depth	–		☐ 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: Keep septic system out of Riverine Easement. Easement to be marked during installation & inspection.

INITIAL SITE SKETCH

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

Soil + Forestry Services of the Carolinas, PA

LSS # 1231 Dated August 12th, 2021

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.

Turbo Chiles Manifold - 6-16-22 - Bottom

Permit can be suspended or revoked if any false information is supplied toward securing the permit / any unauthorized changes are made to the site / any unauthorized changes are made in the installation of the system. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

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

Owner / Applicant Signature: [signature] Date: 1/21/22 Installed by: Frye Grading

IMPROVEMENT PERMIT by: Benjamin A Batts Date: 1/20/2022 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Benjamin A Batts Date: 1/21/2022 Existing System Inspected by: Date:

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

SOIL & FORESTRY SERVICES
OF THE CAROLINAS, PA

www.soilandforestryservices.com

Project#: 18-0134
August 12th, 2021

KENSON PROPERTIES, LLC
Attn: *Kash Vessels*
Email: FKV4@aol.com

RE: Soil & Site Evaluation for a 3 Bedroom Residence (Crawl Space) at Carson Creek Subdivision Lot 10, 0.82 ac Parcel, PIN# 4765915263, Statesville, NC 28625.

Kash:

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

Site Conditions

At the time of our evaluation land cover on the property was mostly open/cleared. Topography within the evaluated area was gentle slope near the house site and gentle slope near the proposed drainfield area. Property lines and corners were marked at the time of the evaluation by survey. The Carson Creek Lot 10 Plot Plan provided by Blue Ridge Surveyors was utilized to produce a Site Plan for the design. The proposed septic layout was located via Trimble Submeter GPS and used to produce the attached *Site Plan*. The house envelope/pool area was staked by survey. Lot has public water.

Methodology

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

Carson Creek Lot 10 (*See Attached Design*)
The septic layout for this lot (9' centers) yielded a total of 570 linear feet of line. The primary system is proposed as 330 linear feet of Accepted (25% Reduction) drainfield with pressure manifold distribution. Trench depth is specified at 30 inches. The repair system is proposed as 240 linear feet of Modified Conventional (PPBPS) drainfield with low pressure distribution. Trench depth is specified at 30 inches.

Session Law Requirements

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

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

Owner Date

Print Name Frank Kayh Vessels
Signature _____ 1/3/2022

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

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

Disclaimer
This report reflects the findings of S&FS, PA. *This LSS Evaluation is being submitted pursuant to and meets the requirements of SL 2018-114 Section 11.(c).* Any site modifications that impact the proposed septic areas on Carson Creek Lot 10, Lone Pine Road, Statesville may nullify this design. System design requirements and site requirements shall be adhered to for installation and Operations Permits to be issued by the local Health Department. If you have questions regarding these requirements a Pre-Construction meeting should be scheduled to discuss. Please contact S&FS if you have any questions regarding this report or the attached information. S&FS also offers septic system inspection, wetland delineation and forestry services.

Sincerely,

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

SOIL & FORESTRY SERVICES
OF THE CAROLINAS, PA

www.soilandforestryservices.com

Attached is a proposed design for an Accepted (25% reduction) Septic System with Pressure Manifold distribution for a 3 bedroom single family residence on Carson Creek Subdivision Lot 10 PIN#(4765915263)

Contents: **Page**

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

Design Information
- Design Specifications---------- 2-3
- Layout Specifications---------- 4
- System Tapsheet---------- 5
- Pressure Manifold Diagram---------- 6

Site Plan/System Plan---------- 7

Calculations---------- 8

Profile Descriptions---------- 9

Application---------- 10-11

Agent Authorization Form---------- 12

Green Sheet---------- 13

August 12, 2021
Project No. 18-0108
Design By: Soil & Forestry Services of the Carolinas, PA

INFORMATION FOR THE INSTALLER:

- The permit should be read very carefully prior to bidding. The following are details that must be considered along with all other considerations.
- Tanks shall be approved by DHHS, and certification supplied by the manufacturer.
- The installer shall be responsible to the owner for placement of the tanks and to insure that final grades are returned to the original natural grade, with exception of added structural features.
- The supply trench shall be compacted to eliminate 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.
- Trenches shall be carefully excavated so the bottom is within 2" from the highest to . the lowest points of elevation within the trench. If the bottom elevation needs adjusting after it has been trenched, it will be done by removing high points rather than filling low points. It is extremely important to insure that trenches are not over excavated during initial trenching. All fine grading within the trench will be hand done with a shovel. No loose material will be left in the trench
- All pipe openings in the tanks shall be properly grouted. This also applies to the joints around the riser.
- All tanks shall be properly back filled and compacted to prevent slump at a later date.
- Earth dams, constructed of relatively impervious material, shall be installed at the beginning and end of each lateral.
- No heavy equipment shall be used on the field during or after installation. The use of a small loader (i.e. Bobcat) or a trencher (i.e. Ditch Witch 2300/2310) may be used for installation.
- Elevations at pinflag locations should be checked by the installer prior to beginning trenches.
- Pumptank riser should be 6" above grade, control panel should be 12" above grade.
- Septic tank riser shall be a minimum of 6" above finished grade.
- System is specified as an Accepted 25% reduction installation w/Pressure Manifold.
- Repair is specified as a PPBPS 50% reduction installation w/Low Pressure.
- **Proposed Powerline Easement must be staked prior to installation.**

PRESSURE MANIFOLD SYSTEM
FOR WASTEWATER TREATMENT

Owner/Applicant:	Kenson Properties LLC
Address:	185 Shelborne Place Mooresville, NC 28117
Phone:	760.522.7415
County:	Iredell
Location:	Carson Creek - Lot 10
Source of Wastewater Flow:	3 Bedroom Single Family Residence
Estimated Daily Wastewater Production:	360 gpd
System Flow:	21.33

Design Specifications

Drainfield Size:	330
Loading Rate:	0.275
Depth of Gravel in Trench:	NA (25% reduction)
Gravel Size:	NA (25% reduction)
Trench Depth:	30 in. Repair: 30 in.
Trench Width:	36 in.
Septic Tank Size:	1000
Pump Tank Size:	1000
Estimated Supply Line Length:	120
Supply Line Diameter:	2 in. SCH 40 PVC
Supply Line Volume:	20.88
Dosing Volume:	150.84
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:	1.52
Elevation Head:	11.30
Total Dynamic Head:	15.05
Threaded Union:	In Tank
Gate Valves:	1 in Tank 1 at Pressure Manifold
Check Valves:	In Tank
Anti-Siphon Hole:	NA
Additional Comments:	Soil suitability was performed by Soil & Forestry Services of the Carolinas, PA.

Carson Creek - Lot 10
PRESSURE MANIFOLD DESIGN

DESIGN FLOW:	360
SOIL APPLICATION RATE:	0.275
TOTAL AREA TRENCH BOTTOM:	990
TOTAL LATERAL LENGTH:	330
NUMBER OF FIELDS:	1
LATERAL LENGTH REQUIRED PER FIELD:	327.2727273
SUPPLY LINE LENGTH:	120
TOTAL DYNAMIC HEAD:	15.05
MANIFOLD SIZE:	4 in.SCH 80 PVC
DOSING VOLUME:	150.84
PUMP TANK DRAW DOWN*:	7.2
SEPTIC TANK SIZE:	1000
PUMP TANK SIZE:	1000

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

Layout Specifications - Carson Creek Subdivision - Lot 10

Project #: 18-0134

LAYOUT FOR 3 BEDROOM HOME

August 12, 2021

LINE #	FLAG COLOR	BS	HI	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM		2.20			100.00		
HOUSE				7.00	95.20		
PUMP TANK				9.50	92.70		
INSTR. 1			102.2				
1	RED			2.00	100.20	90	90
2	ORANGE			2.50	99.70	108	108
3	***YELLOW***			***3.50***	***98.70***	***110***	***110***
4	***BLUE***			***4.50***	***97.70***	***110***	***110***
5	***PINK***			***5.35***	***96.85***	***110***	***110***
6	RED			6.00	96.20	42	42
					TOTAL	570	570

	LINE LENGTH	LTAR GPD/FT2	SYSTEM TYPE	SOIL LTAR GPD/FT2	TRENCH SYSTEM	DISTRIBUTION
**** System***	***330***	***0.275***	***ACCEPT.***	***0.275***	***25% RED***	***PRESSURE MANIFOLD***
Repair	240	0.275	MOD. CONV.	0.275	PPBPS	LOW PRESSURE

Notes: **All measures in feet

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

**Nitrification lines were located by GPS.

**Proposed Power Line Easement must be staked before install.

PRESSURE MANIFOLD TAPSHEET - Carson Creek - Lot 10

SYSTEM

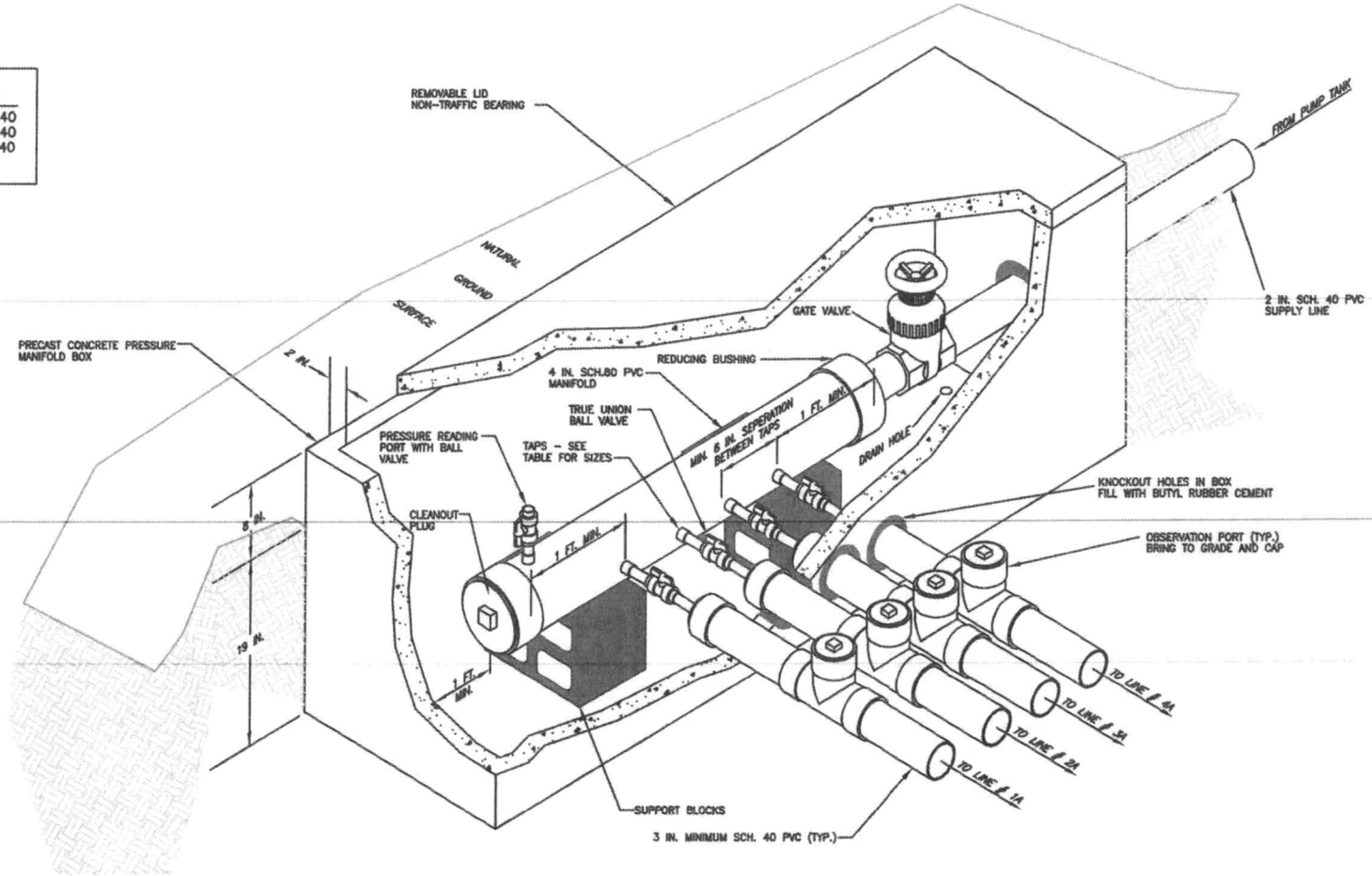
Line #	Color	Elevation	Length	Hole Size	Flow/Tap	Trench Area	Line LTAR
3	***YELLOW***	***98.70***	110	SCH 40 1/2	**7.11**	330	0.15
4	***BLUE***	***97.70***	110	SCH 40 1/2	**7.11**	330	0.15
5	***PINK***	***96.85***	110	SCH 40 1/2	**7.11**	330	0.15

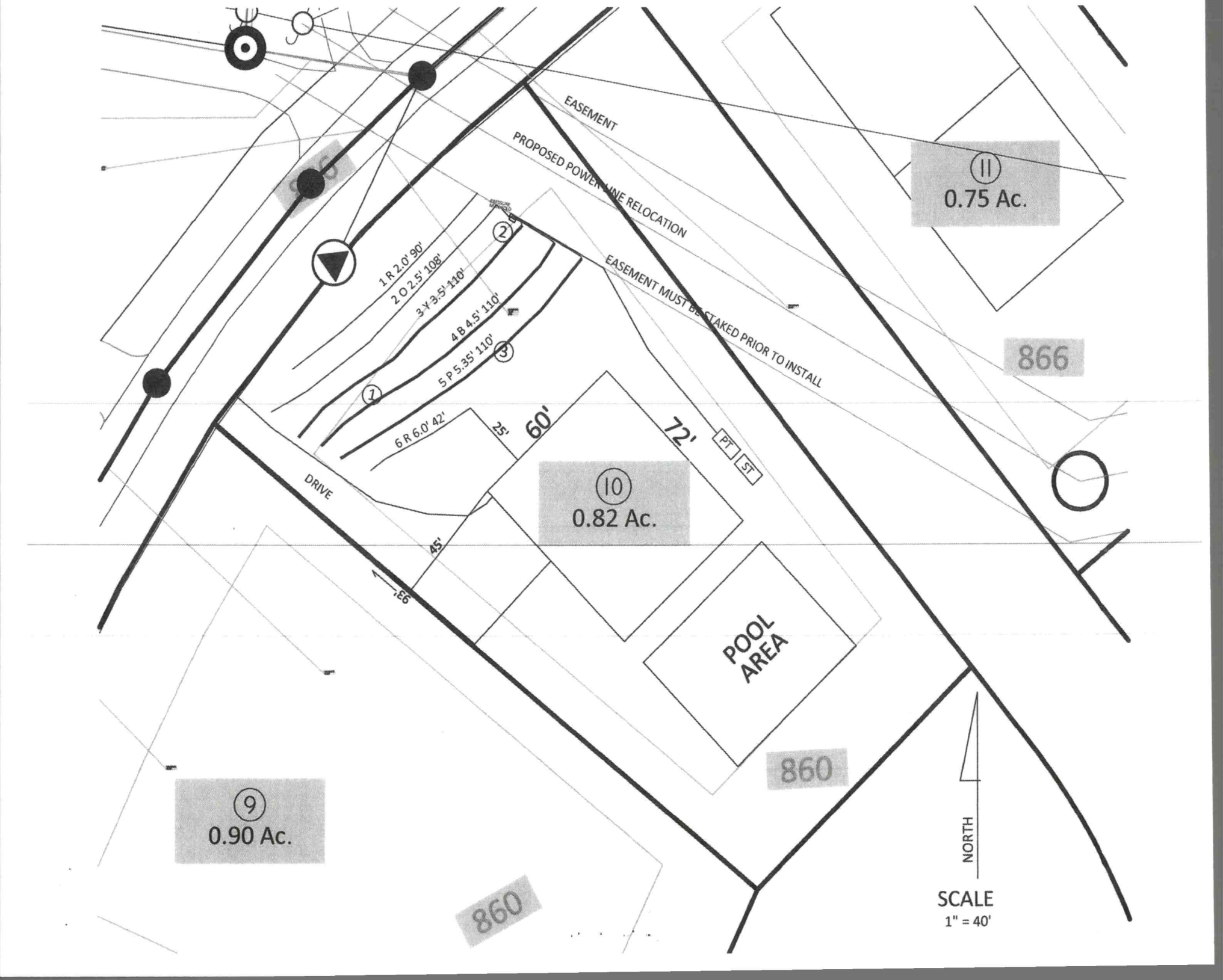
total	**feet =**	**330**	**gal/min =**	**21.33**
		Des. Flow	**360**	
		Pump Run=	**7.07**	
		soil LTAR	**0.275**	
		LTAR +5%	**0.28875**	
		LTAR with ACCEPTED	**0.366666667**	
		LTAR with ACCEPTED + 5%	**0.385**	

PRESSURE MANIFOLD DETAILS
FOR
CARSON CREEK LOT#10 SEPTIC SYSTEM

TAP SIZES

LINE No.	TAP SIZE
3	1/2" SCH. 40
4	1/2" SCH. 40
5	1/2' SCH. 40




EASEMENT
PROPOSED POWER LINE RELOCATION
EASEMENT MUST BE STAKED PRIOR TO INSTALL
1 R 2.0' 90'
2 O 2.5' 108'
3 Y 3.5' 110'
4 B 4.5' 110'
5 P 5.35' 110'
6 R 6.0' 42'
25'
60'
72'
PT
ST
DRIVE
45'
93'
11
0.75 Ac.
10
0.82 Ac.
9
0.90 Ac.
866
860
860
POOL AREA
NORTH
SCALE
1" = 40'

CALCULATIONS

Location	Carson Creek Subdivision	
Project Number	18-0134	
Lot No:	10	
No. of Bedrooms	3	
Design Flow	360	$^{gal}/_{day}$
LTAR	0.275	$^{gpd/ft^2}$
25% RED.? (YES OR NO)	YES	
Supply Line Length	120	ft.
Supply Line Volume	20.88	gal.
Required Feet of Line	327.2727	ft.
Amount of Line from Layout	330	ft.
Gallons per Minute	21.33	$^{gal}/_{min}$
Required Septic Tank Capacity	1000	gal.
Minimum Standard Tank Size	1000	
Lateral Line Volume	215.49	gal.
Dosing Volume	150.84	gal.

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

Tank Draw Down	7.2	*Generic Draw Down of 21 gal.per in.*
Pump Run Time	7.07	minutes
Elevation Head	11.3	ft.
Pressure Head	2	ft.
Friction Factor	1.27	ft./100 ft. *(From the interpolater.)*
Friction Head	1.52	ft.
Friction Head +15%	1.7526	
Total Dynamic Head	15.05	ft.

FRICTION FACTOR INTERPOLATER
2" SCH 40 PVC

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

RECEIVED JAN 06 2022

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

S.L

APPLICATION FORM AP- 324365 $1200.00

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

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

Page 2: *Site Plan Worksheet* form MUST accompany this application

The following optional attachments may also be submitted: ( ) Survey Plat, scaled no more than 1 inch = 60 feet
Place an (X) beside whichever is submitted if applicable (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: Benson Properties LLC **Address:** 185 Shelburne Place Mooresville **Zip:** 28117
Applicant Email: EKV4@aol.com **Phone:** 760-322-7415 **Alt. Phone:**
Owner Name: Same **Address:** Same **Zip:**
Owner Email: **Phone:** **Alt. Phone:**

Property Information:

Street Address: 215 Lone Pine Rd, Statesville NC 28625
Subdivision Name: Carson Creek **Section/Phase:** **Lot Number:**
Driving Directions: 64E, Rt on Lone Pine, Lt on Lt.

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

CHECK FOUNDATION TYPE

(X) New Single Family Residence — Maximum Number of Bedrooms: 3 — (X) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: 6 — ( ) Concrete Slab Foundation
( ) Accessory Building — ( ) Swimming Pool — ( ) Basement with Plumbing
( ) Bedroom(s) Addition — ( ) Other Addition/Structure: — ( ) Basement without Plumbing
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem:
Non-Residential Site Development: Type of Business:
Square Footage of Building: Max. Number of Employees: Max. Number of Seats/Beds/Other:

Water Supply: ( ) Replacement Well – Reason:
( ) Multi-connection Well Number of Houses: Number of Persons:
( ) New Well ( ) Existing Well ( ) Community Well ( ) City Water (X) 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 (X) Other: Accepted

Please answer the following to the best of your ability:
( ) Yes (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (X) No Is the site subject to approval by any other public agency?

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

Signature: [redacted] 8/12/21
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

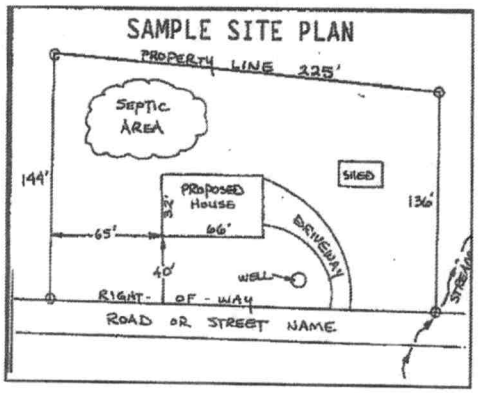
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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 OR WELL PERMIT!!!*

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

- (X) **Property Line measurements are clearly identified**
- (X) **All proposed structures are indicated**
- (X) **Front and side setbacks from property line**
- (X) **Preferred driveway location**
- (X) **Preferred well location**
- (X) **Preferred septic system location**
- (X) **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

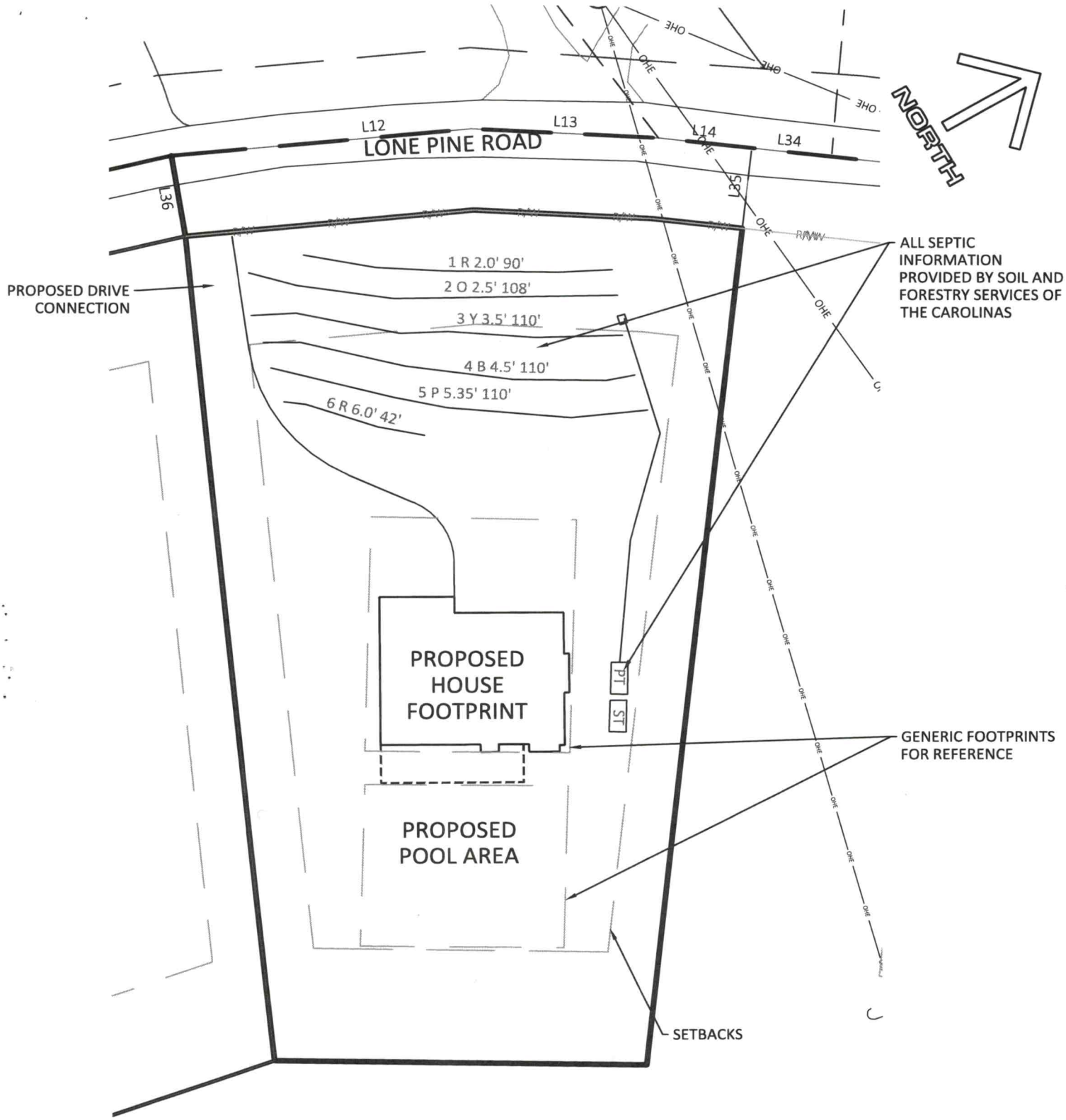
USE THIS SPACE TO DRAW YOUR SITE PLAN

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

See Attached

Signature: _____
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

8/[redacted]/12/21
DATE



EXHIBIT

THIS IS AN EXHIBIT INTENDED TO SHOW COMPLIANCE WITH THE SEPTIC PERMIT FOR EACH LOT. THIS IS NOT A CONSTRUCTION PLAN.

CARSON CREEK LOT 10 SEPTIC EXHIBIT

01/03/2022

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, Frank Kash Vessels of Kenson Homes LLC am the legal owner(s) of the property located at Lone Pine Road, Statesville, NC 28625, identified as PIN (Parcel Identification Number) 4765915263, located in Iredell County, North Carolina.

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

- Application for Improvement Permit (IP) / Authorization to Construct (AC)
- Improvement Permit (IP) / Authorization to Construct (AC)
- Application for soil-site evaluation (new/repair)
- Application/permit for private drinking water well/well abandonment
- Application for Compliance Inspection

I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

Signature of Owner(s)	Date	Signature of Witness	Date
[signature]	8/7/19	Kelly Vessels	8.7.19

Please return this signed form to the appropriate office:

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

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

Sheet 1 of 1
PROPERTY ID #: 4765915263
COUNTY: Iredell

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

OWNER: Kenson Homes
ADDRESS: 195 Shelbourne Place Mooresville NC 28117
PROPOSED FACILITY: 3BR
PROPOSED DESIGN FLOW (.1949): 360gpd
LOCATION OF SITE: Carson Creek Lot 10
APPLICATION DATE
DATE EVALUATED: 7/2/21
PROPERTY SIZE: 0.82
PROPERTY RECORDED: No

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
B 1	4/6%	0-10	BSlCr	FrSSSPSExP	-f(Fe)dep	48	—	—	PS 0.275
		10-48	BRCwmAbk/sbk	" " " "					
B 2	L/6%	0-7	BSCl wfsbk	FrSSSPSExP	-f(Fe)dep	48	—	—	PS 0.275
		7-48	BRCwmAbk/sbk	" " " "					
B 3	L/8%	0-8	BSlCr	FrSSSPSExP		48	—	—	PS 0.275
		8-15	RBSCl wfsbk	FrSSSPSExP	comp.				
		15-48	BR wmAbk/sbk	FrSSSPSExP	-f(Fe)dep				
4									

LICENSED SOIL SCIENTIST Samuel A. Rollins

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	Accepted	PPBPS
Site LTAR	0.275	0.275

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

COMMENTS:

Updated February 2014

Acknowledgement Only
Plans Submitted
1/21/22
Date

SECOND FLOOR PLAN

FRANK BETZ ASSOCIATES, INC.
DESIGNERS OF CUSTOM AND STOCK HOMEPLANS
12045 HIGHWAY 92
WOODSTOCK, GEORGIA 30188
770-431-0868 800-717-3003

SECOND FLOOR PLAN

THE WOOD HOLLOW

HOMEPLANS
Designed for Today's Market®
www.frankbetz.com

SHEET 4 OF 5

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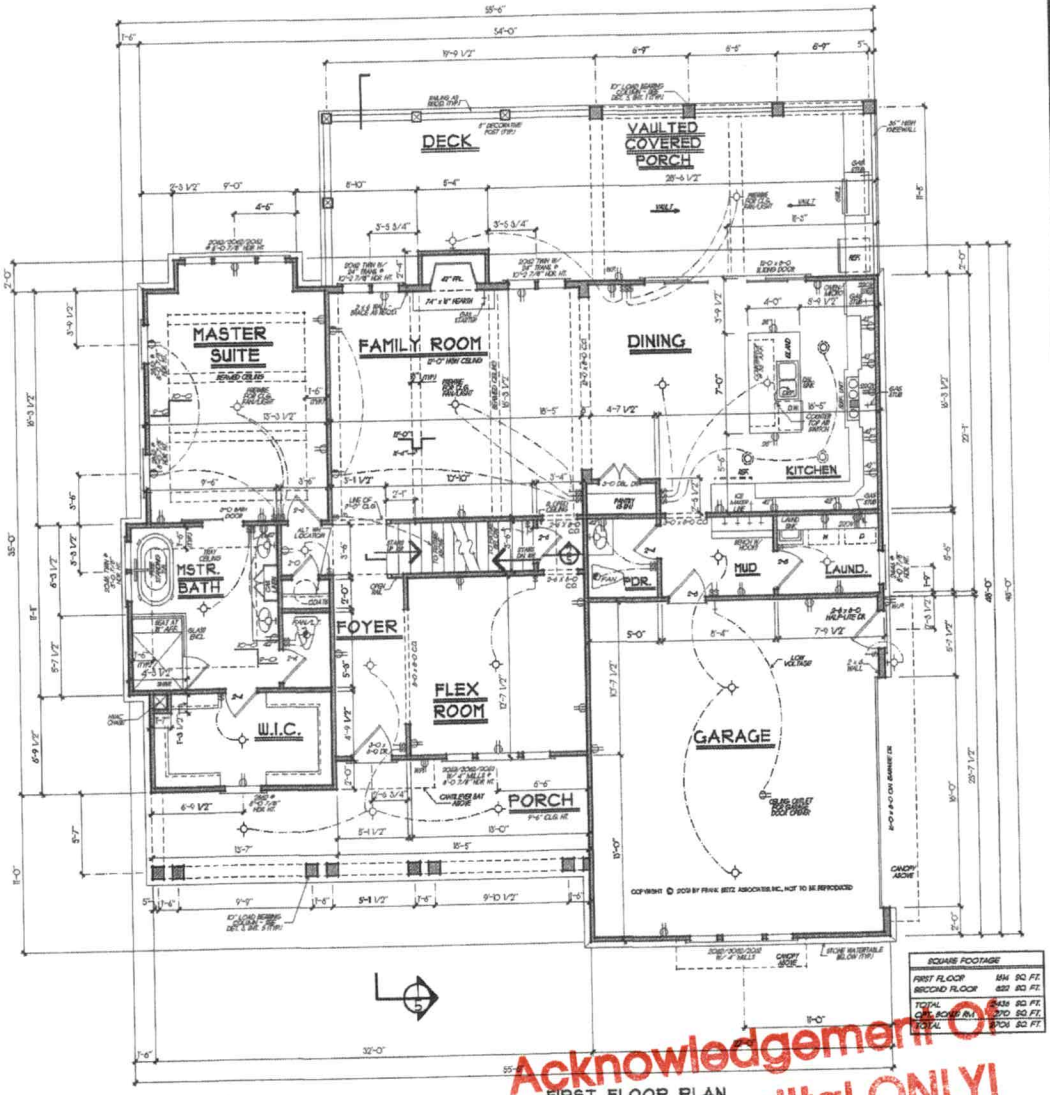
GENERAL NOTES

1. ALL WORK SHALL BE PERFORMED IN ACCORDANCE WITH ALL APPLICABLE CODES AND REGULATIONS OF THE GOVERNING BODIES HAVING JURISDICTION OVER THE CONSTRUCTION OF THIS PROJECT. IN CASE OF CONFLICT BETWEEN THESE DRAWINGS AND ANY APPLICABLE CODE, THE CODE SHALL GOVERN. THE CONTRACTOR SHALL BE RESPONSIBLE FOR ALL CORRECTIONS REQUIRED BY THE BUILDING DEPARTMENT.
2. ALL DIMENSIONS SHALL BE VERIFIED BY CONTRACTOR AND ANY DISCREPANCIES SHALL BE REPORTED TO ARCHITECT PRIOR TO CONSTRUCTION. DO NOT SCALE DRAWINGS.
3. ALL MATERIALS TO BE NEW UNLESS NOTED OTHERWISE AND SHALL BE INSTALLED AS PER MANUFACTURER'S RECOMMENDATIONS AND SPECIFICATIONS.
4. ALL WORKMANSHIP SHALL BE NEAT IN APPEARANCE AND SHALL BE PERFORMED BY WORKMEN COMPLETELY FAMILIAR WITH THE PROPER TRADE PRACTICES.
5. ALL EXCAVATIONS SHALL BE MADE TO CONFORM TO THE LINES, GRADES AND DIMENSIONS SHOWN ON THE DRAWINGS AND AS NECESSARY FOR THE PROPER EXECUTION OF THE WORK. EXCAVATIONS SHALL BE KEPT FREE FROM WATER AND PROTECTED AGAINST FREEZING. THE BOTTOM OF ALL FOOTINGS SHALL BE PLACED ON UNDISTURBED SOIL OR COMPACTED FILL.
6. CONCRETE SHALL ACHIEVE A MINIMUM COMPRESSIVE STRENGTH OF 3000 PSI AT 28 DAYS.
7. ALL REINFORCING STEEL SHALL BE GRADE 60 DEFORMED BARS AND SHALL BE PLACED AS SHOWN ON THE DRAWINGS AND IN ACCORDANCE WITH ACI STANDARDS.
8. ALL CONCRETE SHALL BE PROTECTED FROM WEATHER AND MAINTAINED IN A MOIST CONDITION FOR A MINIMUM OF 7 DAYS AFTER PLACEMENT.
9. ALL MASONRY SHALL BE LAID IN RUNNING BOND WITH FULL MORTAR JOINTS AND SHALL BE TOOLED TO A CONCAVE FINISH.
10. ALL STRUCTURAL STEEL SHALL BE DESIGNED, FABRICATED AND ERECTED IN ACCORDANCE WITH THE AISC SPECIFICATIONS.
11. ALL WELDING SHALL BE PERFORMED BY CERTIFIED WELDERS AND SHALL CONFORM TO AWS STANDARDS.
12. ALL BOLTED CONNECTIONS SHALL BE TIGHTENED TO THE SNUG-TIGHT CONDITION UNLESS NOTED OTHERWISE.
13. ALL STRUCTURAL STEEL SHALL BE PRIMED WITH ONE COAT OF RUST-INHIBITIVE PRIMER.
14. ALL WORK SHALL BE PERFORMED IN A WORKMANLIKE MANNER BY EXPERIENCED MECHANICS.
15. THE CONTRACTOR SHALL PROVIDE ADEQUATE BRACING AND SHORING DURING CONSTRUCTION TO ENSURE THE STABILITY OF THE STRUCTURE.
16. ALL DIMENSIONS ARE TO FACE OF STUD OR FACE OF MASONRY UNLESS NOTED OTHERWISE.
17. ALL WORK SHALL BE PERFORMED IN ACCORDANCE WITH THE LATEST EDITION OF THE INTERNATIONAL RESIDENTIAL CODE (IRC) AND ALL APPLICABLE LOCAL CODES AND ORDINANCES.
18. THE CONTRACTOR SHALL VERIFY ALL EXISTING CONDITIONS AND DIMENSIONS PRIOR TO THE COMMENCEMENT OF CONSTRUCTION. ANY DISCREPANCIES SHALL BE REPORTED TO THE ARCHITECT IMMEDIATELY.
19. ALL MATERIALS SHALL BE STORED AND HANDLED IN ACCORDANCE WITH MANUFACTURER'S RECOMMENDATIONS TO PREVENT DAMAGE.
20. THE CONTRACTOR SHALL MAINTAIN A CLEAN AND ORDERLY JOB SITE AT ALL TIMES.
21. ALL WORK SHALL BE GUARANTEED FOR ONE YEAR FROM THE DATE OF SUBSTANTIAL COMPLETION.
22. THE CONTRACTOR SHALL OBTAIN ALL NECESSARY PERMITS AND INSPECTIONS.
23. ALL WORK SHALL BE PERFORMED IN A SAFE MANNER AND IN COMPLIANCE WITH OSHA REGULATIONS.
24. THE CONTRACTOR SHALL PROVIDE TEMPORARY UTILITIES AS REQUIRED FOR THE PROJECT.
25. ALL WORK SHALL BE PERFORMED IN A WORKMANLIKE MANNER BY EXPERIENCED MECHANICS.

GENERAL FRAMING NOTES

THE FOLLOWING NOTES ARE INTENDED FOR GENERAL REFERENCE ONLY. FOR THE SPECIFIC REQUIREMENTS OF THIS PLAN, PLEASE REFER AND COMPLY WITH ALL NOTES LOCAL CODES CONFLICT WITH LOCAL ORDINANCES FOR ALL STRUCTURAL REQUIREMENTS.

1. ALL STUDS WALLS UNDERNEATH ONE STORY OR 2-STORY SHALL BE 2x6 @ 16" O.C. UNLESS NOTED OTHERWISE.
2. ALL STUDS WALLS UNDERNEATH 2-STORY SHALL BE 2x6 @ 16" O.C. UNLESS NOTED OTHERWISE.
3. ALL INTERIOR WALLS SHALL BE 2x4 @ 16" O.C. UNLESS NOTED OTHERWISE.
4. ALL BEARING WALLS UNDERNEATH FLOOR JOISTS SHALL BE DOUBLED.
5. PROVIDE SOLID BLOCKING AT MID SPAN OF JOISTS OVER 8'-0" SPAN.
6. PROVIDE SOLID BLOCKING AT MID POINT OF SPAN OR 6'-0" O.C. MAXIMUM FOR ALL JOISTS OVER 12'-0" SPAN.
7. FLOOR JOISTS UNDER TUB SPA TO BE DOUBLED.
8. FLOOR JOISTS AT THE SPA TO BE RATED BELOW. SEE PLYWOOD SPECIFICATIONS.
9. ALL EXTERIOR WALLS SHALL BE SHEATHED WITH 1/2" APA RATED SHEATHING ACCORDING TO THE CONDITIONS AS STATED BELOW: 1/2" APA RATED SHEATHING WITH EXPOSURE 1 OR EXTERIOR GLUE FOR STUDS SPACED AT 16" O.C. OR LESS AND SUPPORTING A ROOF AND CEILING NOT EXCEEDING 25 FT. IN SPAN. 1/2" APA RATED SHEATHING WITH EXPOSURE 1 OR EXTERIOR GLUE FOR STUDS SPACED AT 16" O.C. OR LESS AND SUPPORTING A ROOF AND CEILING NOT EXCEEDING 25 FT. IN SPAN. 5/8" APA RATED SHEATHING WITH EXPOSURE 1 OR EXTERIOR GLUE FOR STUDS SPACED AT 24" O.C. AND SUPPORTING A ROOF AND CEILING NOT EXCEEDING 25 FT. IN SPAN.
10. PROVIDE SOLID TIE AT UPPER L/R OF VERTICAL CLEARER BETWEEN FRAMED FLOOR AND CEILING SPACES AT 10'-0" O.C. MAX.
11. ALL VALLEY RAFTERS, AND RIDGE SHALL BE ONE "N" SIZE LARGER THAN RAFTERS.
12. ALL ROOF RAFTERS TO BE 2x6 @ 16" O.C. UNLESS NOTED OTHERWISE. ROOFING SHALL BE 240 GRADE ASPHALT SHINGLES, UNDERLAYMENT, FLASHING, ETC. AS REQUIRED BY LOCAL CODES. ROOF SHALL BE 1/2" APA RATED SHEATHING WITH EXPOSURE 1 OR EXTERIOR GLUE.
13. ALL EXTERIOR WALLS SHALL BE 2x6 @ 16" O.C. UNLESS NOTED OTHERWISE. ALL EXTERIOR WALLS SHALL BE SHEATHED WITH 1/2" APA RATED SHEATHING WITH EXPOSURE 1 OR EXTERIOR GLUE. SEE PLYWOOD SPECIFICATIONS.
14. ALL INTERIOR WALLS SHALL BE 2x4 @ 16" O.C. UNLESS NOTED OTHERWISE.
15. ALL BEARING WALLS UNDERNEATH FLOOR AND ROOF CONSTRUCTION SHALL BE DOUBLED.
16. ALL EXTERIOR WALLS SHALL BE SHEATHED WITH 1/2" APA RATED SHEATHING WITH EXPOSURE 1 OR EXTERIOR GLUE. SEE PLYWOOD SPECIFICATIONS.
17. ALL INTERIOR WALLS SHALL BE 2x4 @ 16" O.C. UNLESS NOTED OTHERWISE.
18. ALL BEARING WALLS UNDERNEATH FLOOR AND ROOF CONSTRUCTION SHALL BE DOUBLED.
19. ALL EXTERIOR WALLS SHALL BE SHEATHED WITH 1/2" APA RATED SHEATHING WITH EXPOSURE 1 OR EXTERIOR GLUE. SEE PLYWOOD SPECIFICATIONS.
20. ALL INTERIOR WALLS SHALL BE 2x4 @ 16" O.C. UNLESS NOTED OTHERWISE.
21. ALL BEARING WALLS UNDERNEATH FLOOR AND ROOF CONSTRUCTION SHALL BE DOUBLED.
22. ALL EXTERIOR WALLS SHALL BE SHEATHED WITH 1/2" APA RATED SHEATHING WITH EXPOSURE 1 OR EXTERIOR GLUE. SEE PLYWOOD SPECIFICATIONS.
23. ALL INTERIOR WALLS SHALL BE 2x4 @ 16" O.C. UNLESS NOTED OTHERWISE.
24. ALL BEARING WALLS UNDERNEATH FLOOR AND ROOF CONSTRUCTION SHALL BE DOUBLED.
25. ALL EXTERIOR WALLS SHALL BE SHEATHED WITH 1/2" APA RATED SHEATHING WITH EXPOSURE 1 OR EXTERIOR GLUE. SEE PLYWOOD SPECIFICATIONS.
26. ALL INTERIOR WALLS SHALL BE 2x4 @ 16" O.C. UNLESS NOTED OTHERWISE.
27. ALL BEARING WALLS UNDERNEATH FLOOR AND ROOF CONSTRUCTION SHALL BE DOUBLED.
28. ALL EXTERIOR WALLS SHALL BE SHEATHED WITH 1/2" APA RATED SHEATHING WITH EXPOSURE 1 OR EXTERIOR GLUE. SEE PLYWOOD SPECIFICATIONS.
29. ALL INTERIOR WALLS SHALL BE 2x4 @ 16" O.C. UNLESS NOTED OTHERWISE.
30. ALL BEARING WALLS UNDERNEATH FLOOR AND ROOF CONSTRUCTION SHALL BE DOUBLED.



SQUARE FOOTAGE	
FIRST FLOOR	1614 SQ. FT.
SECOND FLOOR	622 SQ. FT.
TOTAL	2436 SQ. FT.
GAR. ROOMS (N.)	370 SQ. FT.
TOTAL	2806 SQ. FT.

FIRST FLOOR PLAN

1/4" = 1'-0"

FRANK BETZ ASSOCIATES, INC. ASSUMES NO LIABILITY FOR ANY CHANGES OR MODIFICATIONS MADE TO THESE PLANS BY OTHERS.

Acknowledgement Of
Plans Submittal ONLY!
Date 11/21/2022.
Date

REVISIONS	DATE	BY

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FIRST FLOOR PLAN

THE WOOD HOLLOW

FRANK BETZ ASSOCIATES, INC.
DESIGNERS OF CUSTOM AND STOCK HOMEPLANS
12045 HIGHWAY 92
WOODSTOCK, GEORGIA 30188
770-431-0888
888-717-3003

BY: RBA CBD: RLG

DATE: 6/20/21

SHEET:

3

OF: 5

IREDELL COUNTY · NC

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

APPLICATION NUMBER
324365 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4765912402.000	215 LONE PINE RD	Iredell County

Owner Information	Applicant Information
Name: KENSON HOMES LLC	Name: PECONIC BAY HOMES INC
Address:	Address: 127 BLUFF MEADOW RD
,	Mooresville, NC 28115
Phone:	Phone: (704)235-8489

Use Requested	Zone Code
Single Family Dwelling	R-20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.817	35	35	15	15	N/A	NO

Remarks
sfd/

The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions, plat conditions and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

Date: 01/06/2022

Signature of Owner/Contractor

Permit Number	324365	TOTAL FEES:	$77.25

IREDELL COUNTY PLANNING & DEVELOPMENT
PO BOX 788, STATESVILLE NC 28687-0788
349 N. Center Street / Building Standards Center
(704) 878-3118 / FAX (704)878-3171

Residential Zoning Permit Application

What are you building?(Please check) ***No building or addition shall be used for commercial, business, or other non-residential use unless appropriate permits and approval are obtained from Iredell County for commercial use.**

Stick built ✓ Modular___ Duplex___ Singlewide___ Doublewide___ Pier___ Addition___ Bedroom addition___

Accessory dwelling (ie: M-I-L Suite, guest house) ___ Accessory building (ie: garage, shed)___ Swimming pool___

Are there any other structures currently on the property such as dwellings, sheds, garages? (Please list type below)

Is there a septic tank on the property? Yes (No) If residence how many bedrooms? 3 and stories? 2

Please describe project (Details, Purpose, or Use): SINGLE FAMILY RESIDENTIAL

Please list square footage of project (Pier, Addition, Accessory Dwelling, Accessory Building only): _____

Does the property have community water? Yes (No) If yes, please list who provides it: _____

Does the property have community sewer? Yes (No) If yes, please list who provides it: _____

Owner Information

Property Owner's Name KENSON HOMES Phone # 760-522-7415

Owner's Current Address 185 SHELBURNE PL, MOORESVILLE NC 28117

Property Information

Property Address 215 LONE PINE RD Parcel # 4765915263

Subdivision: CARSON CREEK Lot: 10 Zoning: _____ Watershed: Y / (N) Flood Plain: Y / (N) Township: _____

Directions to property (from a MAIN ROAD) _____

Application Information

Applicant's Name or Company PECONIC BAY HOMES Applicant's Phone # 704-235-8489

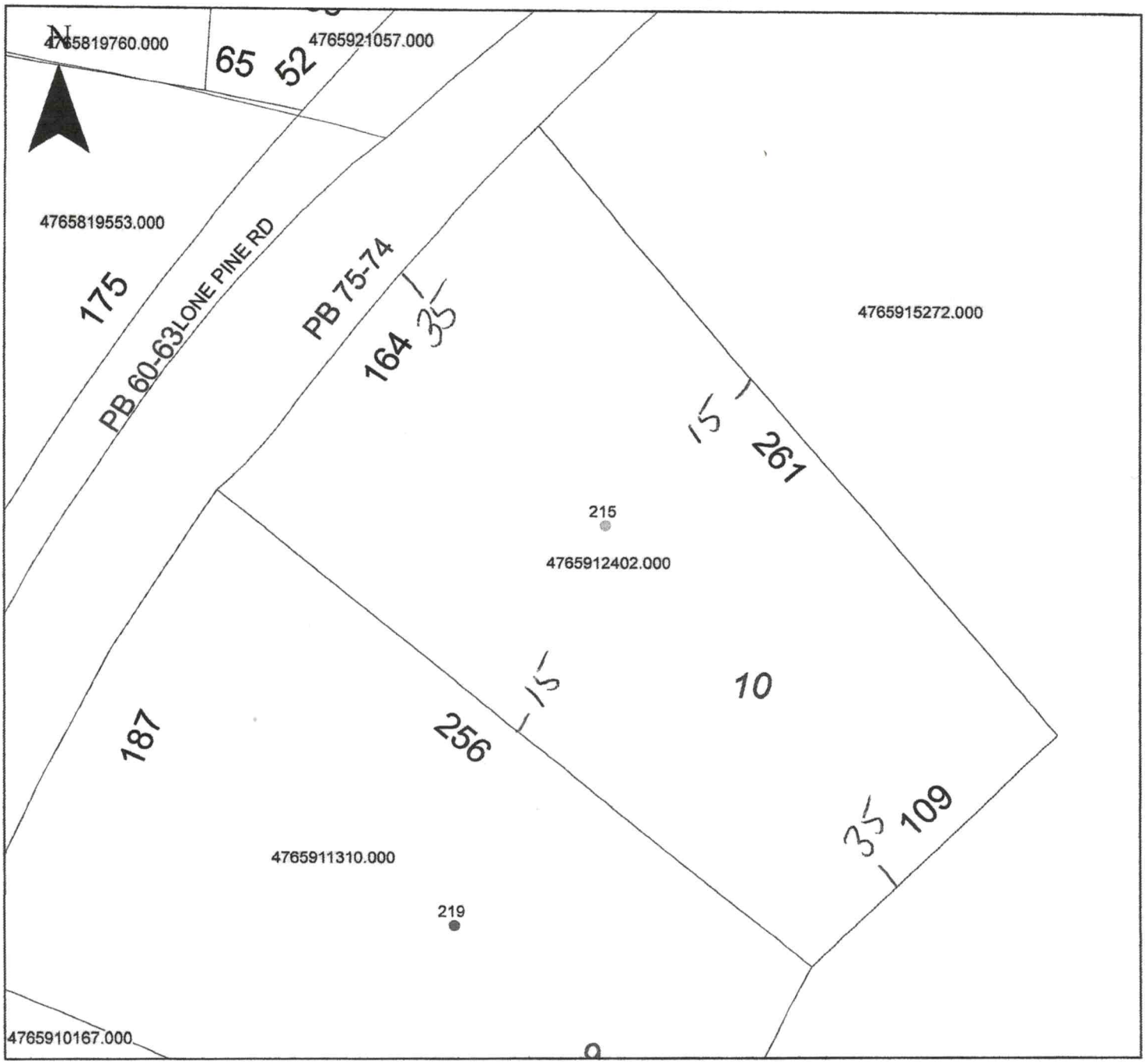
Applicant's Address 127 BLUFF MEADOW LANE, MOORESVILLE NC 28115

If Company, Representative's Name and Title PETER DENICOLA, PRESIDENT

IN APPLYING FOR A ZONING PERMIT I CERTIFY THAT ALL INFORMATION ON THIS APPLICATION IS CORRECT AND THAT ALL WORK WILL COMPLY WITH IREDELL COUNTY ZONING REGULATIONS. THE IREDELL COUNTY PLANNING & DEVELOPMENT DEPARTMENT WILL BE NOTIFIED OF ANY CHANGES THAT ARE MADE TO THIS PROJECT. I AM AWARE THAT THIS IS AN APPLICATION ONLY - NOT A PERMIT - AND DOES NOT CONSTITUTE APPROVAL OF THIS PROJECT. HOWEVER, IF THIS PROJECT IS APPROVED, THIS SIGNATURE IS VALID FOR MY PERMIT.

SIGNATURE OF APPLICANT _____ DATE 1/4/22

ZONING DISCLAIMER



Property Address 215 Lone Pine 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.

Applicant

1/4/22
Date

IREDELL COUNTY PLANNING & DEVELOPMENT
PO BO[illegible] ESVILLE NC 28687-0788
349 N[illegible]et / Building Standards Center
(704) 878-[illegible] 8 / FAX (704)928-2025

Residential Zoning Permit Application

What are you building?(Please check) ***No building or addition shall be used for commercial, business, or other non-residential use unless appropriate permits and approval are obtained from Iredell County for commercial use.**

Stick built ✓ Modular___ Duplex___ Singlewide___ Doublewide___ Pier___ Addition___ Bedroom addition___

Accessory dwelling (ie: M-I-L Suite, guest house) ___ Accessory building (ie: garage, shed)___ Swimming pool___

Are there any other structures currently on the property such as dwellings, sheds, garages? (Please list type below)

Is there a septic tank on the property? Yes (No) If residence how many bedrooms? 3 and stories? 2

Please describe project (Details, Purpose, or Use): Residential

Please list square footage of project (Pier, Addition, Accessory Dwelling, Accessory Building only): _____

Does the property have community water? (Yes) (No) If yes, please list who provides it: Iredell Water

Does the property have community sewer? Yes (No) If yes, please list who provides it: _____

Owner Information

Property Owner's Name Henson Properties LLC Phone # 760-522-7415

Owner's Current Address 185 Shelburne Place Mooresville NC 28117

Property Information

Property Address Lonefield. Statesville NC 28625 Parcel # 4765913[illegible]5263

Subdivision: Carson Creek Lot: 10 Zoning:____ Watershed: Y / N Flood Plain: Y / N Township:_____

Directions to property (from a MAIN ROAD) 64E, Rt on Lone Pine, Prop. on Lt.

Application Information

Applicant's Name or Company Henson Properties LLC Applicant's Phone # 760-522-7415

Applicant's Address 185 Shelburne Place Mooresville NC 28117

If Company, Representative's Name and Title Rashvessels Pres

IN APPLYING FOR A ZONING PERMIT I CERTIFY THAT ALL INFORMATION ON THIS APPLICATION IS CORRECT AND THAT ALL WORK WILL COMPLY WITH IREDELL COUNTY ZONING REGULATIONS. THE IREDELL COUNTY PLANNING & DEVELOPMENT DEPARTMENT WILL BE NOTIFIED OF ANY CHANGES THAT ARE MADE TO THIS PROJECT. I AM AWARE THAT THIS IS AN APPLICATION ONLY - NOT A PERMIT - AND DOES NOT CONSTITUTE APPROVAL OF THIS PROJECT. HOWEVER, IF THIS PROJECT IS APPROVED, THIS SIGNATURE IS VALID FOR MY PERMIT.

SIGNATURE OF APPLICANT [signature] DATE 8/[redacted]/21