check # 1100 $50

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

(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

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 #
Robert Crosswhite	353 Seven Springs Loop Statesville NC 28625	704-437-0376	
Owner Name	**Mailing Address**	**Home Phone #**	**Alternate Phone #**

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
353 Seven Springs Loop Statesville NC 28625	Seven Springs	37 - new Lot 38 - existing

Driving Directions: Chestnut Grove to Seven Springs Loop

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 New system garage w/ bed apartment

Maximum Number of Bedrooms 1
Maximum Number of Occupants 1
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 (county water)

7. Desired Septic System Type: *(You may rank in order of preference, if any)* ( ) EXISTING SYSTEM installed 2004 (Year)

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

8. Please Answer The Following To The Best of Your Ability:
( ) Yes (✓) No Does the site contain any jurisdictional wetlands?
( ) Yes (✓) No Is any non-domestic sewage (i.e. 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: ___ 6-2016
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

Robert & Heather Crosswhite

219700

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, Lowell Harmon, am the legal owner(s) of the property located at 343 Seven Springs Loop (Lot 37), identified as PIN (Parcel Identification Number) 4766-63-9197, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Robert N Crosswhite (Robert Crosswhite), 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.

Lowell E Harmon 6-20-16 — Signature of Owner(s) — Date

[signature] 6-20-16 — 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

A/C
Rec. 9/14/16

Type: CONSOLIDATED REAL PROPERTY
Recorded: 9/9/2016 1:44:07 PM
Fee Amt: $26.00 Page 1 of 2
Revenue Tax: $0.00
Iredell County, NC
Ronald N. Wyatt Register of Deeds

BK 2444 PG 511 - 512

NO OPINION OF TITLE IS EXPRESSED OR IMPLIED

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: $0.00 **Parcel Identifier No: 4766-63-9197 & 4766-63-9397**

Mail after recording to: Crosswhite Crosswhite & Johnson, PLLC, 239 E. Broad Street, Statesville, NC 28677.
This instrument was prepared by: Robert N. Crosswhite, Attorney At Law, 239 E. Broad Street, Statesville, NC 28677.

Brief Description for the index Lts 37 & 38, Seven Springs, PB 30-65

THIS DEED made this 9 day of SEPTEMBER, 2016, by and between

GRANTOR	GRANTEE
Robert N. Crosswhite and wife, Heather R. Crosswhite Address: 353 Seven Springs Loop Statesville, NC 28625	Robert N. Crosswhite and wife, Heather R. Crosswhite Address: 353 Seven Springs Loop Statesville, NC 28625

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated in COOL SPRINGS Township, IREDELL County, North Carolina and more particularly described as follows:

BEING all of Lot Nos. THIRTY-SEVEN (37) and THIRTY-EIGHT (38) of SEVEN SPRINGS, Phase I, as the same is platted, planned and recorded in Plat Book 30, Pages 65 and 66 in the Iredell County Registry.

Parcel #: 4766-63-9197 & 4766-63-9397
Also known as: 353 Seven Springs Loop & 343 Seven Springs Loop, Statesville, NC 28625

All or a portion of the property herein conveyed X includes or __ does not include the primary residence of Grantor.

Page Count: 2
NS PQ SI

R.O.T.C.

The property hereinabove described was acquired by Grantor by instrument recorded in Book 2444 Page 509 and Book 2267, Page 228 in the Iredell County Registry.

THE PURPOSE OF THIS DEED is to combine two contiguous parcels, 4766-63-9197 and 4766-63-9397, into one tract for tax purposes.

TO HAVE AND TO HOLD the aforesaid0 lot or parcel of land and all privileges and appurtenances thereto belonging to the Grantee in fee simple.

And the Grantor covenants with the Grantee, that Grantor is seized of the premises in fee simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever, other than the following exceptions:

1. Easements and rights of way of record.
2. Restrictions as of record.
3. Year 2016 Ad Valorem Taxes which the Grantee(s) assume(s) and agree(s) to pay.

IN WITNESS WHEREOF, the Grantor has duly executed the foregoing as of the day and year first above written.

Robert N. Crosswhite (Seal)

Heather R. Crosswhite (Seal)

State of NORTH CAROLINA, County of Iredell;

I certify that ROBERT N. CROSSWHITE and HEATHER R. CROSSWHITE, personally appeared before me this day, and I have seen satisfactory evidence of the principal(s)' identity, by a current state or federal identification with the principal(s)' photograph in the form of a NC Drivers License; the principal(s) each acknowledging to me that he or she voluntarily signed the foregoing document for the purpose stated therein and in the capacity indicated.

Witness my hand and official stamp or seal, this 9th day of SEPTEMBER, 2016.

(Seal)

KRISTI KAYE WISHON NOTARY PUBLIC IREDELL COUNTY, NC

Notary Public

My Commission Expires: 3/16/2018