IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 234369

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

PIN # 4773453311.162

APPLICANT/OWNER: Freedom Homes / Bertha Davidson APPLICANT ADDRESS: 1124 Charlotte Hwy.

SITE ADDRESS: 162 Hezekiah Rd. Statesville, NC 28625 PHONE: 704-881-2326 ALT. PHONE 704-880-3656

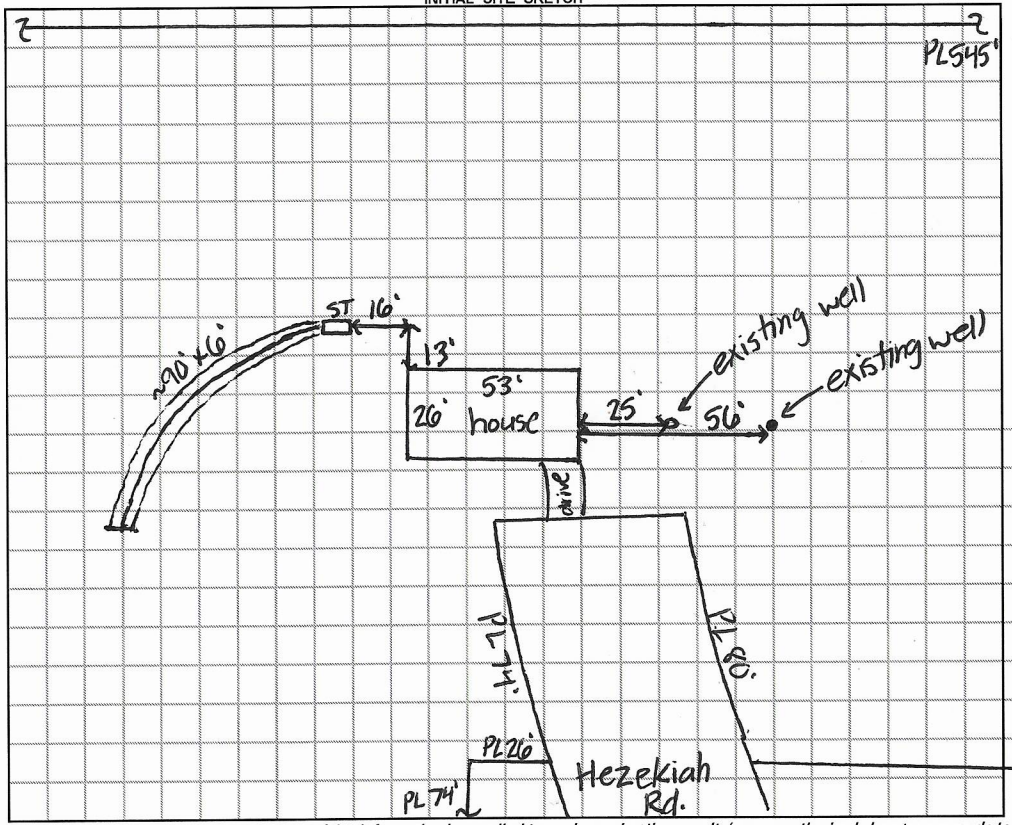
SITE DIRECTIONS: US 70E → L on Knox Farm → L on Salisbury Hwy → R on Hezekiah → lot at end SAP CONTROLLED: ☐ YES ☐ NO

SUBDIVISION: — SECTION: — LOT # — LOT AREA: 2.39 ac DESIGN FLOW: 360gpd L.T.A.R.: —

Septic Tank	existing	(gal)	STB		Date		☐ New System	☐ Repair	☐ Expansion	System Type: I	II	III	IV	V	VI	☑ Residence	No. Bedrooms	3	Water Supply
Pump Tank		(gal)	PT		Date		System Description: EXISTING									☐ Business	No. Persons	6	☑ Private
Pump Make			Model		Serial #		Repair System Description:									☐ Other	No. Employees		☐ Public
# Nitrification Fields	EXISTING		# Lines		Linear Ft.		Maintenance Agreement Required:		☐ YES	☑ NO						☐ Slab	☑ Crawl Space		☐ Community
Trench Width			Trench Bottom Depth (Low side)	EXISTING			Gravel Depth		☑ GRAVITY	☐ PRESSURE						☐ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions: * Home must maintain a minimum of 25' off any well.

INITIAL SITE SKETCH



AS BUILT SKETCH

Scale 1"=60'

Using septic from old house @ #162

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: Kimberly Sweat Date: 4-4-18 Installed by:

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Kayla Watson Date: 4-4-18

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

2343809

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) Septic Improvement Permit ( ) Authorization to Construct (X) 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: Freedom Homes / Kimberly Sneed Address: 1124 Charlotte Hwy Troutman Zip: 28166
Applicant Email: kimsneed.sneed04@gmail Phone: 704-881-2326 Alt. Phone: _____
Owner Name: Bertha Davidson Address: 162 Hezekiah Rd Statesville Zip: 28625
Owner Email: _____ Phone: 704-880-3856 Alt. Phone: _____

Property Information:

Street Address: 162 Hezekiah Rd Statesville, NC 28625
Subdivision Name: _____ Section/Phase: _____ Lot Number: _____
Driving Directions: (1) Shelton Ave .3 miles (2) onto E gardner Bagnal Blvd (3) onto Salisbury Hwy (24) (4) onto Hezekiah LN lot at end, House is staged

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: 1
( ) Swimming Pool
( ) Other Addition/Structure: _____
Non-Residential Site Development: Type of Business: _____
Square Footage of Building: _____ Max. Number of Employees: _____ Max. Number of Seats/Beds/Other: _____

CHECK FOUNDATION TYPE

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

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

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: 1975 (38R)
( ) 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? (Drawing Attached)
( ) 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: Kimberly Sneed 3-23-18
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

$430 -
440

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, Bertha G Davidson, am the legal owner(s) of the property located at 162 Hezekiah Rd Statesville NC 28625, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Kimberly Sneed Freedom Homes, 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.

Bertha G. Davidson 11-21-2017 Kimberly Sneed 11-21-2017

Signature of Owner(s) Date 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

234309

[EXTERNAL] 162 Hezekiah Road - Davidson Property

William Allison <wallison@co.iredell.nc.us>

Fri 3/2/2018 10:33 AM

Workman, James <James.Workman@Freedom-Homes.com>

3/2/18

Re: 162 Hezekiah Road - Davidson Property

Jamie,

With regard to the ability to place a modular home on the parcel at the end of Hezekiah Road, there are (3) basic options. 1) Split the property so that only one home is on each tract; 2) demo the existing home at 162 Hezekiah, if it is in poor enough condition; or 3) Board up the old home at 162 with Plywood over all of the windows and doors, so that the County will know that it could not be occupied or entered. Lastly, they could put a s/wide or d/wide on the property (instead of a modular) and then would not have to do anything to the old home place at 162.

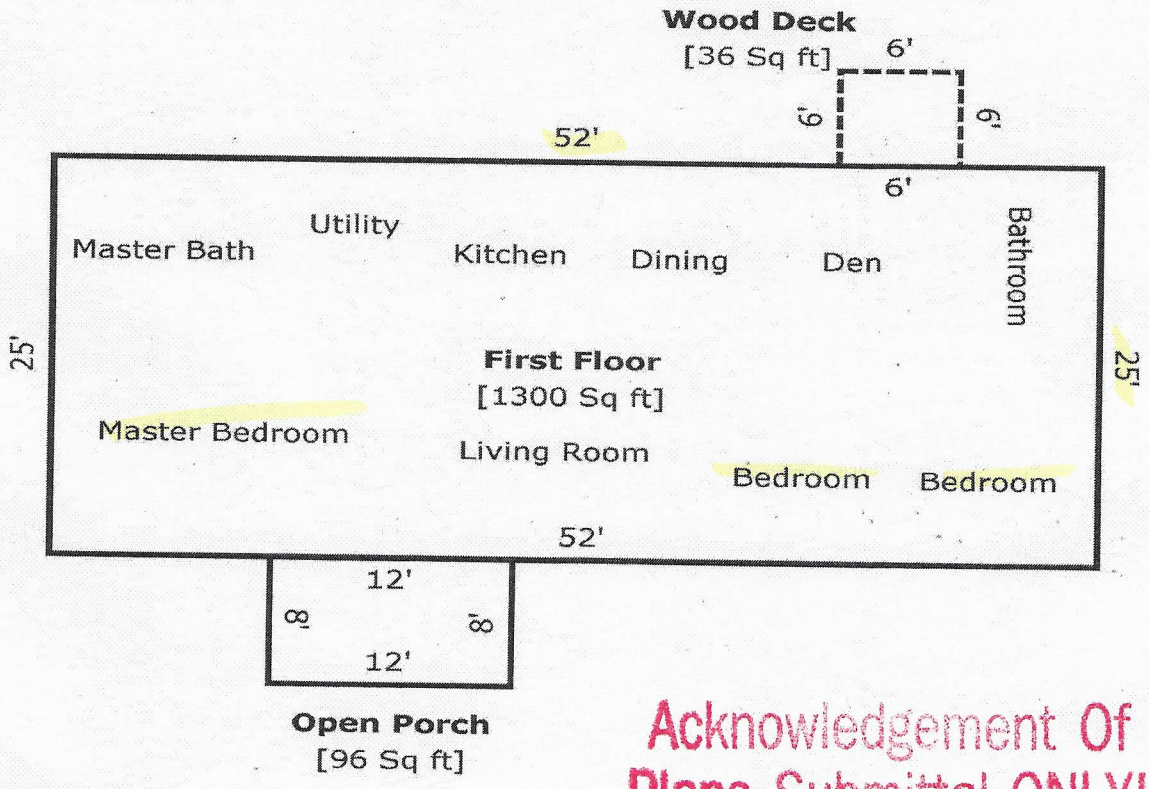
Please note that the issue here is that the code does not allow (2) homes on the same tract of land, yet it will allow one principle stick built home and one accessory mobile home for a family member.

The setbacks will be measured off the end of the rt/way. Please see the map I gave you showing where the rt/way comes into the property and stops. So, it would appear to me that she will have to clear some woods, as the land located in the cleared area (center of property) will not be able to meet the 35' front setback. Hope this helps. Thank you.

William Allison
Planner III / Subdivision Administrator
Iredell County Developmental Services - Planning Division
349 N. Center Street
PO Box 788
Statesville, NC 28687
704.878.3121, ext. 3121 (office)
704.928.2025 (fax)
wallison@co.iredell.nc.us

Building Sketch

Borrower/Client	Davidson, Bertha G.				
Property Address	162 Hezekiah Rd				
City	Statesville	County Iredell	State NC	Zip Code 28625	
Lender	Atlantic Bay Mortgage Group / VA				



Acknowledgement Of
Plans Submittal ONLY!
Date 4-4-18
Date 4-4-18

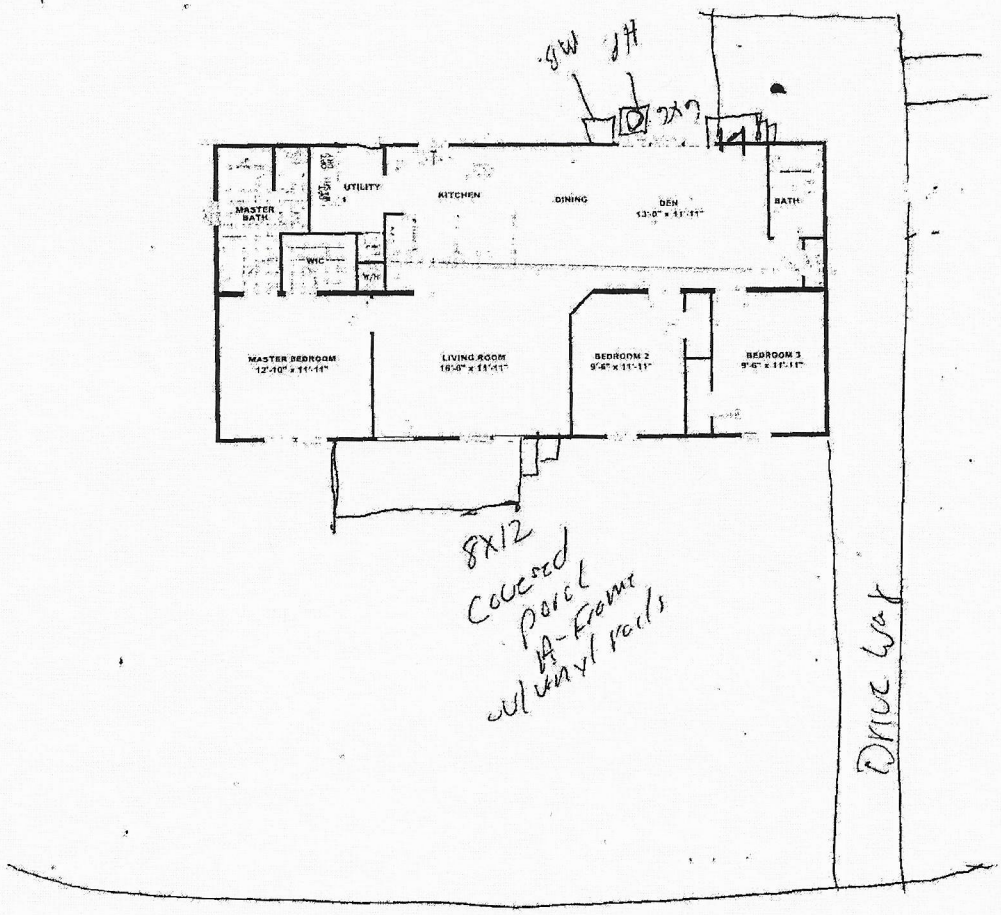
TOTAL Sketch by a la mode, inc.

Area Calculations Summary

Living Area		**Calculation Details**	
First Floor	1300 Sq ft		52 × 25 = 1300
Total Living Area (Rounded):	**1300 Sq ft**		
Non-living Area			
Wood Deck	36 Sq ft		6 × 6 = 36
Open Porch	96 Sq ft		12 × 8 = 96

Reverse plan

Acknowledgement Of
Plans Submittal ONLY!
Date
Bertha L. Davis Date 12-07-2017



Shelton mills

4773-45.3311.162

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Betty Anderson Hubbard Barnes DATE 3-26-75 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Highway 70 E. To near Elmwood - L on Rd 2488 across from Shelton Mills Dunwich mobile home and JRd S. R. No. _____

SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	
Auto. Dishwasher	Yes ( )	No (✓)	
Auto. Wash. Machine	Yes (✓)	No ( )	
Site Suitable	Yes (✓)	No ( )	

Lot Area Small Garage

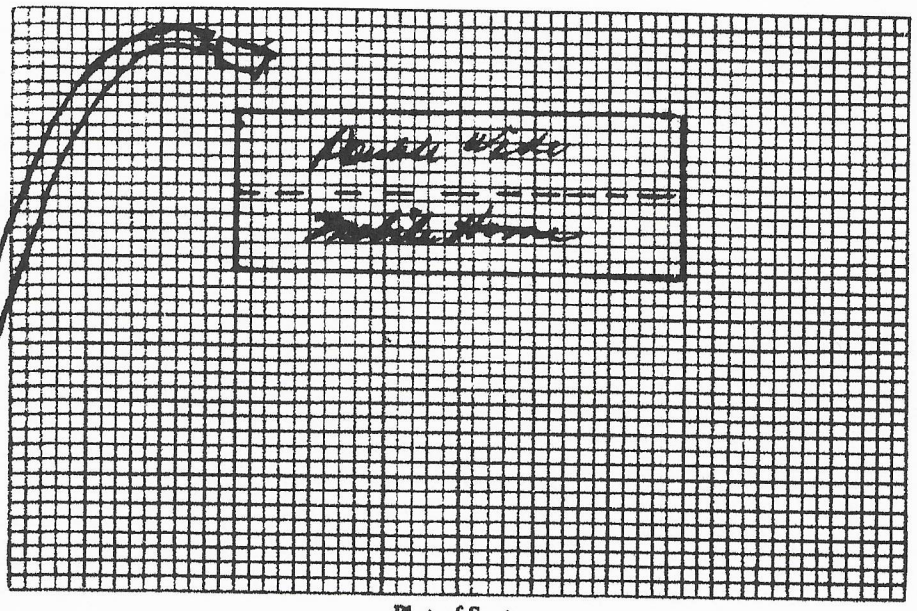
Character & Porosity of Soil _____

Percolation Rate Existing

Topography _____

Depth to Water Table _____

Rock or other impervious formations _____



Plot of System

Existing

Size of Tank _____ Gals.

Nitrification Field System

No. of Lines _____

Sq. Ft. _____ Linear Ft. _____

Depth of Stone in Lines _____

Water Supply: Individual ( )

Public ( )

Installed by _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Mobile home moved on lot before permit was issued.

CERTIFICATE OF COMPLETION BY Steve Todd DATE 3/26/75

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold

IREDELL COUNTY

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

APPLICATION NUMBER
234369
Issue Date: 03/23/2018

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4773453311.000	162 HEZEKIAH ROAD, STATESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: DAVIDSON BERTHA G	Applicant: FREEDOM HOMES-TROUTMAN
Address: 162 HEZEKIAH RD	Address: 1124 CHARLOTTE HWY
STATESVILLE, NC 28625	TROUTMAN, NC 28166
Phone:	Phone: 704-883-6148

Use Requested	Zone Code
MODULAR	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
2.390	35.00	35.00	15.00	15.00	NOT	X

Remarks:

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

Applicant: _____ Date: _____

Permit Number	133009	TOTAL FEES:	$ 77.25