ICHD - ENVIRONMENTAL HEALTH DIVISION

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

cw MANF-2023-39910

PERMIT # AP-307939

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

PIN # 4779 - 44 - 8374

APPLICANT/OWNER: VANDERBILT MORTGAGE

APPLICANT ADDRESS: 500 ALCOA TRAIL, MARYVILLE, T.N. 37804

SITE ADDRESS: 235 MARSHALL FARM ROAD, HARMONY, N.C. 28634

PHONE: 336-317-7200 ALT. PHONE —

SITE DIRECTIONS: (N) ON 21, (R) ON MT. BETHEL, (R) ON MARSHALL FARM, LOT ON (L)

SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: SANFORD EDWARD HEDRICK JR.

SECTION: — LOT # 2 LOT AREA: 0.961 AC

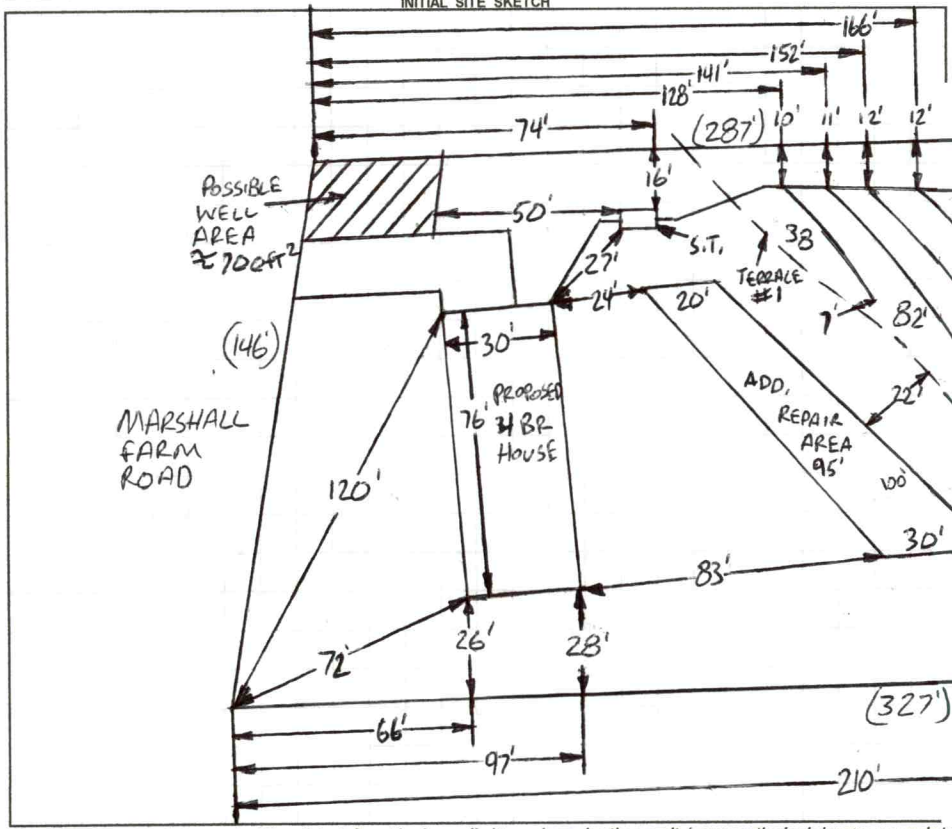
DESIGN FLOW: 480GPD L.T.A.R.: 0.3

Septic Tank	1000	(gal)	STB	760	Date	7/9/23	☑ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	
Pump Tank	—	(gal)	PT	—	Date	—	System Description:	25% REDUCTION			
Pump Make	—	Model	—	Serial #	—		Repair System Description:	25% REDUCTION			
# Nitrification Fields	1	# Lines	5	Linear Ft	40		Maintenance Agreement Required:	☐ YES	☑ NO		
Trench Width	36 IN	Trench Bottom Depth(Low side)	28 IN	Gravel Depth	—		☑ GRAVITY	☐ PRESSURE			

☑ Residence	No. Bedrooms	4	Water Supply	
☐ Business	No. Persons	8	☑ Private	
☐ Other	No. Employees	—	☐ Public	
☐ Slab	☑ Crawl Space		☐ Community	
☐ Basement w/plumbing			☐ Basement w/o plumbing	

Comments / Conditions: INSTALL ON CONTOUR, INSTALL ON 9FT CENTERS, UTILIZE SERIAL DISTRIBUTION, RECOMMEND GRADING TERRACE #2 TO PROMOTE POSITIVE DRAINGE

INITIAL SITE SKETCH



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.

1 IN = 50 FT

S.T. = SEPTIC TANK

R = REPAIR

Installed as drawn

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: D. Bryan Bassett Date: 8/27/23

Installed by: Steve Jordan

IMPROVEMENT PERMIT by: Bryant C. White Date: 8-5-2020

OPERATION PERMIT by: Matt Wi Date: 10/26/23

AUTHORIZATION TO CONSTRUCT by: Matt Wi Date: 10/26/23

Existing System Inspected by: Date:

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

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

Sheet 1 of 1
PROPERTY ID #: 4779448374
COUNTY: IREDELL

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

OWNER: VANDERBILT MORTGAGE — APPLICATION DATE 6-1-2020
ADDRESS: 500 ALCOA TRAIL, MARYVILLE, T.N. 37804 — DATE EVALUATED: 6-15-2020
PROPOSED FACILITY: 4BR — PROPOSED DESIGN FLOW (.1949): 480GPD — PROPERTY SIZE: 0.961AC
LOCATION OF SITE: 235 MARSHALL FARM ROAD, HARMONY, N.C 28634 — PROPERTY RECORDED: YES
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)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
1									
2			SEE ATTACHED						
3									
4									

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

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

COMMENTS: _____

Updated February 2014

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	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) SiL (Silt Loam)	0.6 - 0.3	0.3 - 0.15		
					MOIST	**WET**
	IV	SC (Sandy Clay) SiC (Silty Clay) C (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	None		

*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

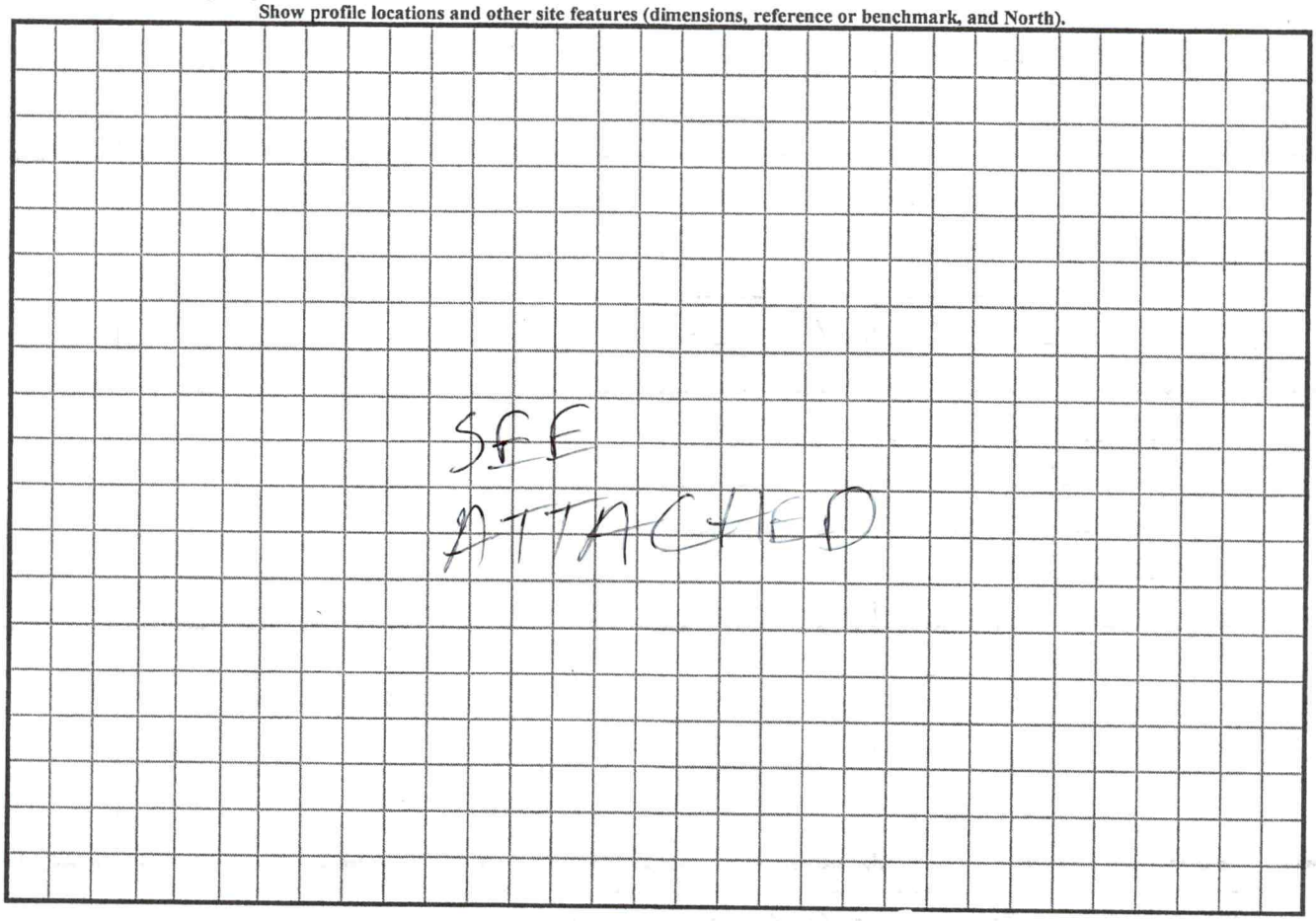
NOTES

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/ft^2

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



SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

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

235 MARSHALL FARM

PROPERTY ID #: 4779448374
DATE OF EVALUATION: 6-15-2020
COUNTY: IREDELL

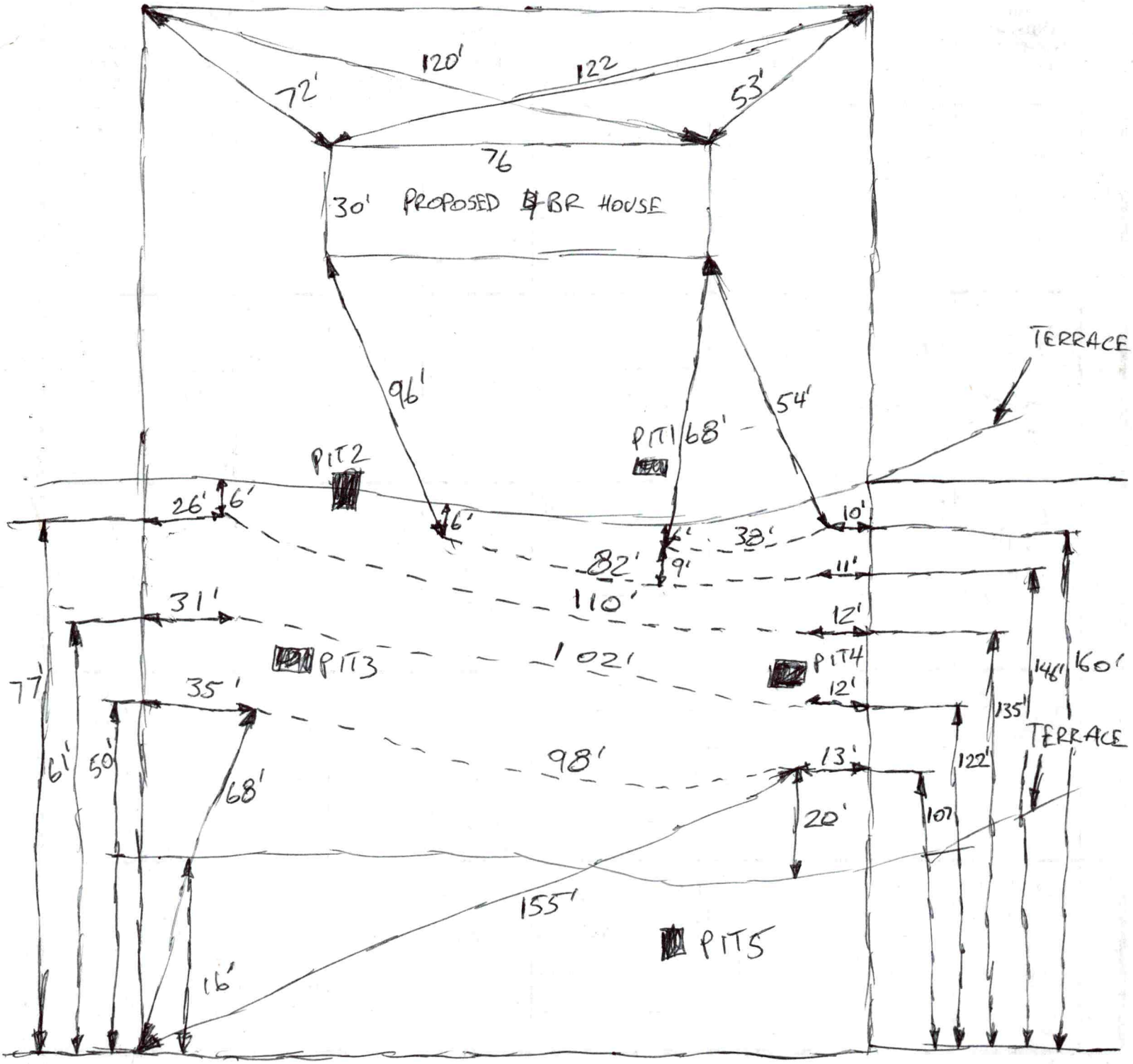
PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LINEAR SIDE 8%	0-10	SCL, SBK	FR, SS, SP, SEXP	SAP INC THRU OUT MICA COMMON	71"+	NA	NA	PS .3
		10-30	C, SBK	FR, S, P, SEXP					
		30-71	CL, WSBK	FR, SS, SP, SEXP					
2	LINEAR SIDE TERRACE 10%	0-14	FILL	FILL	SAP INC THRU OUT MICA COMMON	61"+	NA	NA	PS .3 IF FILL REMOVED
		14-37	C, SBK	FR, S, P, SEXP					
		37-61	CL, WSBK	VFR, SS, SP SEXP					
3	LINEAR SIDE 12%	0-6	SCL, SBK	FR, SS, SP, SEXP	SAP INC THRU OUT MICA COMMON	60"+	NA	NA	PS .3
		6-25	C, SBK	FR, S, P, SEXP					
		25-60	CL, WSBK	VFR, SS, SP, SEXP					
4	LINEAR SIDE 12%	0-6	SCL, SBK	FR, SS, SP, SEXP	SAP INC THRU OUT FEW FI MICA COMMON	53"+	NA	NA	PS .3
		6-29	C, SBK	FR, S, P, SEXP					
		29-53	CL, WSBK	FR, SS, SP, SEXP					
5	LINEAR SIDE 12%	0-6	SCL, SBK	FR, SS, SP, SEXP	SAP INC THRU OUT MICA COMMON	55"+	NA	NA	PS .3
		6-30	C, SBK	FR, S, P, SEXP					
		30-55	CL, WSBK	FR, SS SP, SEXP					

COMMENTS:

NTS

15% SLOPE

MARSHALL FARM



RECEIVED JUN 03 2020

AP-307939
$500.00

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM*

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(✓) 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 (✓) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: Vanderbilt Mortgage Address: 500 Alcoa Tr. Maryville, TN Zip: 37804
Applicant Email: bryan.bassett@vmf.com Phone: 336 317 7200 Alt. Phone: _____
Owner Name: Sanford E. Hedrick, Jr Address: 185 Glenwood Valley Dr Harmony Zip: 28634
Owner Email: _____ Phone: _____ Alt. Phone: _____

Property Information: Parcel ID: 4779448374.00 235
Street Address: TBD Marshall Farm Rd Harmony, NC (Lot 2)
Subdivision Name: N/A Section/Phase: _____ Lot Number: 2
Driving Directions: 77 N to Hwy 21, Rt on Mt. Bethel Rd, Rt on Marshall Farm Rd
Destination on left.

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

(✓) New Single Family Residence Maximum Number of Bedrooms: 4 (✓) Crawl Space Foundation
( ) New Multi-Family Residence Maximum Number of Occupants: _____ ( ) 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 ( ) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: _____
( ) No Preference ( ) Alternative (✓) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other: _____

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. industrial) 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.

Signature: Bryan Bassett/Vanderbilt Mortgage & Finance, Inc. 6/1/20
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

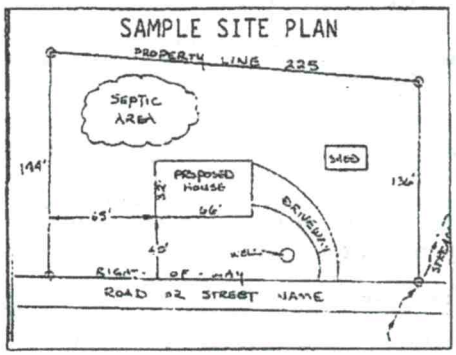
307939

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *SITE PLAN WORKSHEET*

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



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

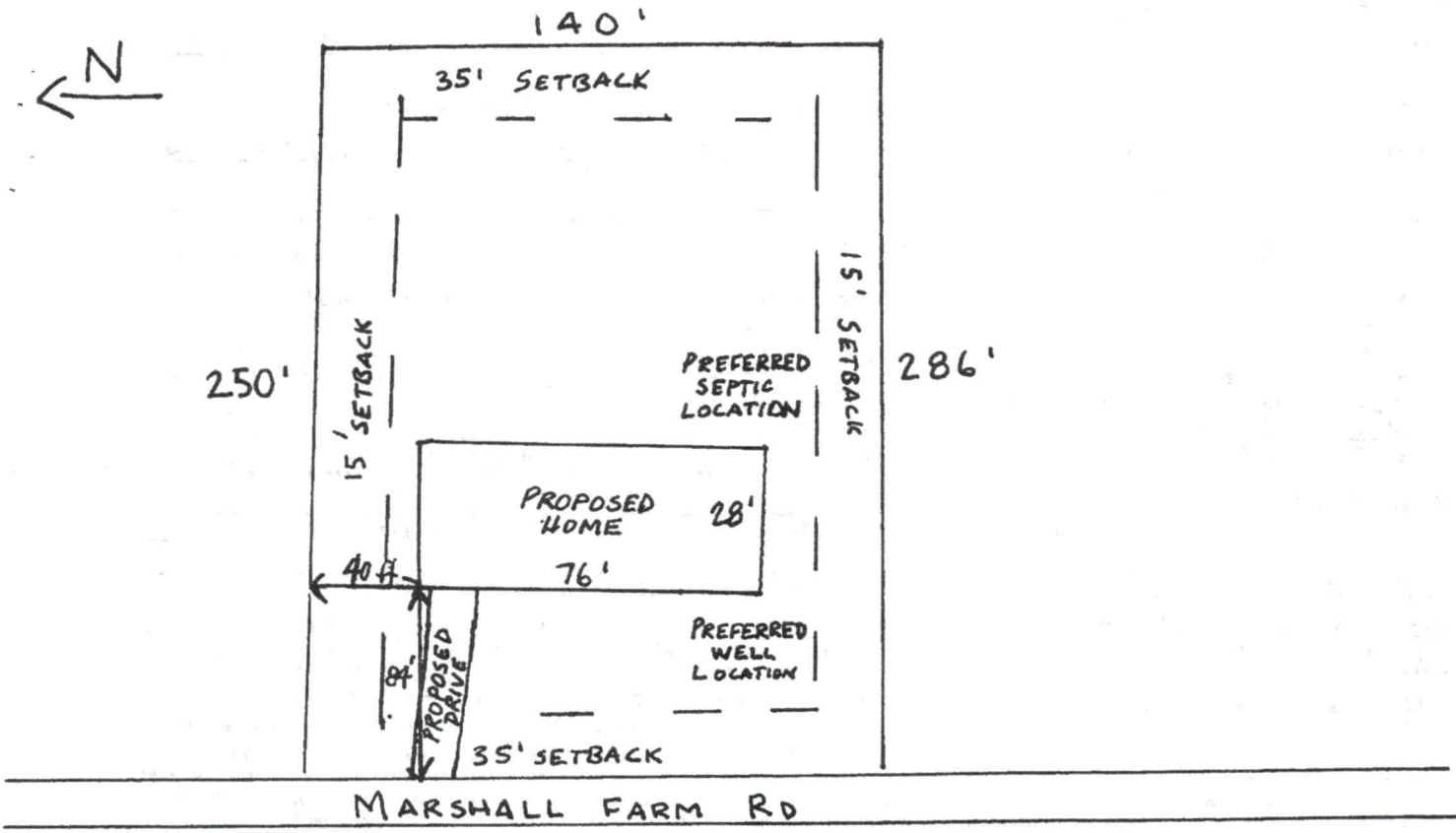
- (✓) Property Line measurements are clearly identified
- (✓) All proposed structures are indicated
- (✓) Front and side setbacks from property line
- (✓) Preferred driveway location and well location
- (✓) Area you prefer your septic system to be placed
- (✓) North arrow, or other sufficient indicator of direction

Circle N/A on the following if appropriate:

- Location of septic systems and wells within 100' of your property N/A
- Location of easements and rights of ways on your property N/A
- Location of any designated wetlands on the property N/A

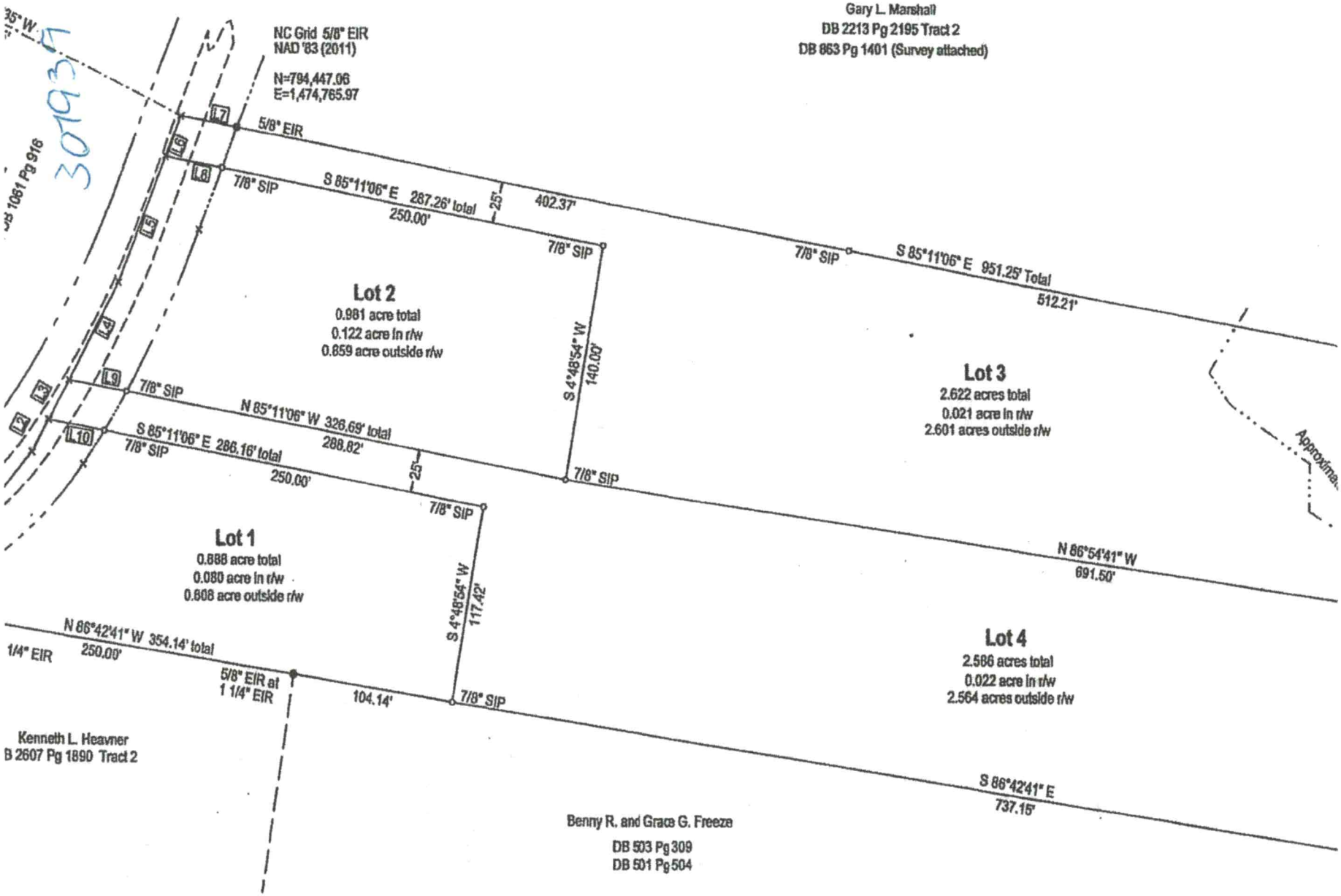
USE THIS SPACE TO DRAW YOUR SITE PLAN

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



Signature: Bryan Bassett/Vanderbilt Mortgage & Finance, Inc. 6/1/20

Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE



Certificate of Ownership and Dedication

DocuSign Envelope ID: C765E2D6-0E14-43B9-8B8D-A1F11DD88BC4

307A39

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

(Check and sign only ONE of the options below)

☐ **1. * APPLICANT AND OWNER ARE THE SAME. *** (*Sign here*) _____

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.

x ☒ **2.** I, Sanford Edward Hedrick Jr. Hedy Victoria Hedrick, am the legal owner(s) of the property located at L1 and L2 Marshall Farm Road, identified as PIN (Parcel Identification Number) Portion of 4779541286, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Vanderbuilt Mortgage & Finance, Inc., to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

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

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

DocuSigned by: Sanford Edward Hedrick Jr. 5BA370BC2AE34F9...
DocuSigned by: Hedy Victoria Hedrick 67A67E6B934DF...
Signature of Owner(s)

5/28/2020 Date

5/28/2020

Mooresville - Environmental Health
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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

307939

ENVIRONMENTAL HEALTH REQUIREMENTS for SEPTIC and WELL PERMITS

The following items must be completed *PRIOR* to the *SUBMITTAL* of any Environmental Health Application. Incomplete applications will be returned to the applicant and cannot be processed or placed on the work list.

***** Initial all lines below to indicate you have submitted each form and completed every site requirement *****

BBB **Complete all Environmental Health forms**:

- ✓ Application
- ✓ Site Plan including the dimensions of proposed structure, addition, pool etc.
- ✓ Documentation to Authorize Owner Agent (even if the property owner is the applicant – complete section 1 or 2)
- NA Copy of Zoning Permit when applicable
- ✓ Sign this sheet after you have completed all items

BBB **Lot must be cleared of heavy undergrowth**. In order to evaluate the lot, the footprint of the proposed structure must be visible. Adequate area for the septic drain field and repair area must be sufficiently cleared of heavy undergrowth, with 50 feet of visibility in all directions. Inspectors must be able to evaluate the property, shoot laser level elevations, layout the drain field, do soils work, etc. **If the lot is not cleared sufficiently, then a $100 site revisit fee will be charged and the evaluation will be put on HOLD until the requirement is met.**

BBB **Clearly mark all property corners by locating existing iron or concrete markers.** Flag all property lines every 25 feet if adjacent corners are not visible when standing on any given corner. Property lines must be flagged by a licensed NC surveyor & easily identified **prior to application submittal** (exception may apply for septic repair evaluations only). 'Mow lines' and/or fence lines do NOT constitute marked lines. **If the property lines are not properly marked when the lot is ready to be evaluated, then the application will be put on HOLD and a $100 site re-visit fee charged.**

BBB **Stake or flag the footprint of the proposed structure, addition, pool etc. to match the site plan submitted**. The proposed structure, etc. must be staked out on the property as per the site plan.

NA **If an Authorization to Construct (AC) is desired,** submit a recorded copy of the plat for newly created or subdivided lot(s) and a LEGIBLE copy of the basic floor plan no larger than 8 ½" x 14" for each floor of the structure including decks, porches, etc. **The overall dimensions must be clearly noted & the rooms labeled.**

Any site not meeting the above requirements when staff arrives for the evaluation will result in a $100 site revisit fee being charged and the request being placed on HOLD. This will delay the processing of the application. *Once work by Environmental Health staff begins, the up-front fees paid toward securing any health department permit are nonrefundable. Refunds for work not started, due to a customer changing their mind or plans, are subject to an administrative fee of $50 to defray a portion of the costs of processing the refund.*

Backhoe pits are required for all applications that require a soils evaluation.
DO NOT DIG PITS UNTIL THE EH SPECIALIST HAS AUTHORIZED AND SCHEDULED YOUR EVALUATION TIME.

- All utilities shall be marked before pits are dug. Call NC 811 for this service.
- The applicant/agent is responsible for securing these services
- Backhoe pits are to be dug at the locations and depths determined by the Environmental Health Specialist or a NC Licensed Soil Scientist. A minimum of four pits must be dug.
- The EH specialist will contact you when your application is ready to be processed for pit scheduling.
- Your backhoe operator must be on site during the EH Specialist's evaluation to prevent your operator from having to return to the property for additional work.

By signing below, I am acknowledging the above specifications have been met and the site is READY to be evaluated AND I understand the backhoe pit requirement and will secure those services (if applicable).

Signature Bryan Barnett/Vanderbilt Mortgage & Finance Date 6/1/20

Questions? Contact the Environmental Health Offices below:

Statesville Office
349 North Center Street (2nd Floor Building Standards)
Statesville, NC 28677-4063
Phone: (704)878-5305 ext. 3456

Mooresville Office
610 East Center Avenue (2nd Floor Govt. Center South)
Mooresville, NC 28115-2548
Phone: (704)660-3625

307939

IREDELL COUNTY PLANNING & DEVELOPMENT
PO BOX 788, STATESVILLE NC 28687-0788
349 N. Center Street / Building Standards Center
(704) 878-3118 / 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? 4 and stories? 1

Please describe project (Details, Purpose, or Use): Future placement of d/w mobile home

Please list square footage of project (Pier, Addition, Accessory Dwelling, Accessory Building only): 2000

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 Sanford Hedrick, Jr Phone # ___

Owner's Current Address 185 Glenwood Valley Dr Harmony, NC 28634

Property Information

Property Address 235 Marshall Farm Rd Harmony, NC Parcel # 4779448374.00

Subdivision: N/A Lot: ___ Zoning: ___ Watershed: Y (N) Flood Plain: (Y) N Township: Turnersburg

Directions to property (from a MAIN ROAD) ___

Application Information

Applicant's Name or Company Vanderbilt Mortgage Applicant's Phone # 336 317 7200

Applicant's Address 500 Alcoa Tr Maryville, TN 37804

If Company, Representative's Name and Title Bryan Bassett / Asset Mgr

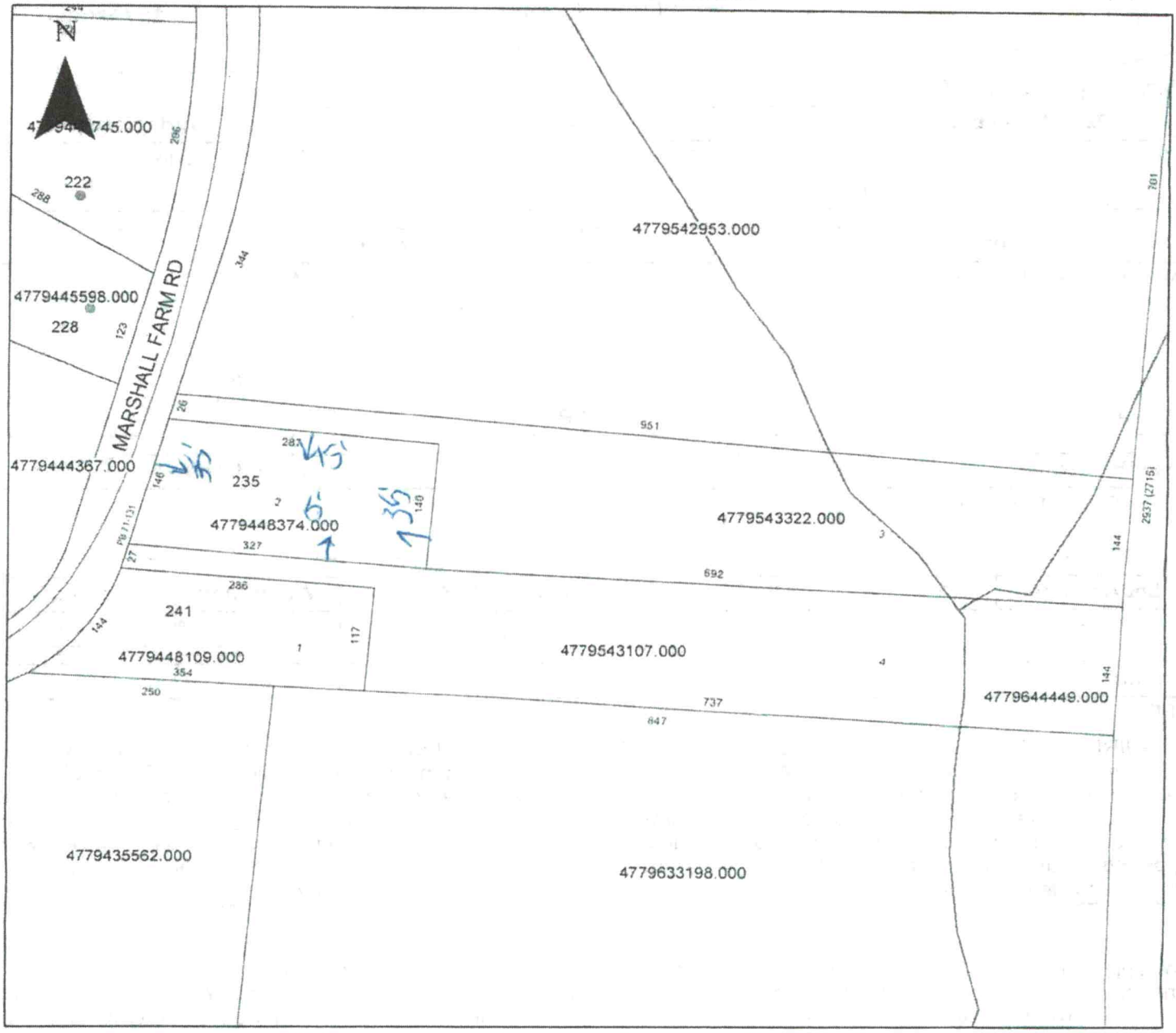
IN APPLYING FOR A ZONING PERMIT I CERTIFY THAT ALL INFORMATION ON THIS APPLICATION IS CORRECT AND THAT ALL WORK WILL COMPLY WITH IREDELL COUNTY ZONING REGULATIONS. THE IREDELL COUNTY PLANNING & DEVELOPMENT DEPARTMENT WILL BE NOTIFIED OF ANY CHANGES THAT ARE MADE TO THIS PROJECT. I AM AWARE THAT THIS 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 Bryan Bassett/Vanderbilt Mortgage DATE 6/4/20

acres 0.961
Iredell RA
Flood. no

307939

ZONING DISCLAIMER



Property Address 235 Marshall Farm Rd Harmony

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.

Bryan Bassett
Applicant

6/4/20
Date

IREDELL COUNTY · NC

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

APPLICATION NUMBER
307939 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4779448374.000	235 MARSHALL FARM RD	Iredell County

Owner Information	Applicant Information
Name: HEDRICK SANFORD E JR	Name: VANDERBILT MORTGAGE
Address:	Address: 500 ALCOA TR MARYVILLE, TN 37804
Phone:	Phone: (336)317-7200

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.961	35	35	15	15		NO

Remarks

SFD

REQUIREMENTS FOR ALL MULTI -SECTIONAL MOBILE HOMES Must meet requirement R9 of the LDC. Minimum size of main body is at least 22 feet by 40 feet; Must have standard residential shingles; Minimum of 3/12 roof pitch; Must have continuous masonry underpinning; Must have minimum roof eave and raker projections of 6 inches; Must have a 36 square foot deck or porch at all front entrances; Exterior siding must consist of vinyl or aluminum lap siding, wood, or hardboard, comparable in composition, appearance and durability to residential siding; Must remove towing apparatus; Must face front property line and be no less than 20 degrees from parallel to the front property line. Original mobile home must be removed before Certificate of Occupancy can be approved.

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.

Signature of Owner/Contractor

Date: 06/03/2020

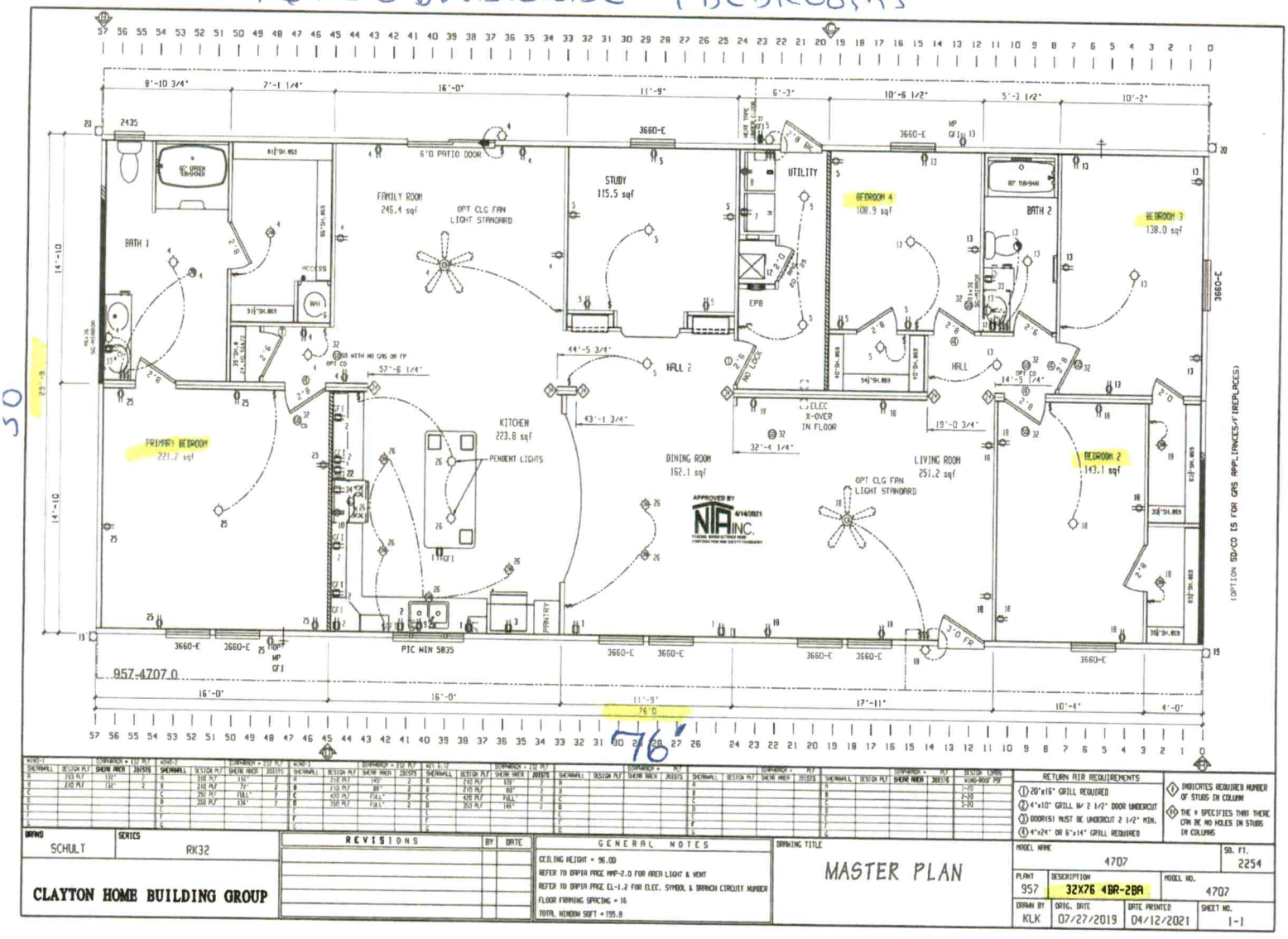
Permit Number	307939	TOTAL FEES:	$77.25

Acknowledgement Of Plans Submittal ONLY!

Date 10/26/23

Date

76X30 DOUBLEWIDE 4 BEDROOMS



BRAND	SERIES
SCHULT	RK32

CLAYTON HOME BUILDING GROUP

REVISIONS	BY	DATE

GENERAL NOTES

- CEILING HEIGHT = 96.00
- REFER TO DRPTR PAGE MP-2.0 FOR AREA LIGHT & VENT
- REFER TO DRPTR PAGE EL-1.2 FOR ELEC. SYMBOL & BRANCH CIRCUIT NUMBER
- FLOOR FRAMING SPACING = 16
- TOTAL WINDOW SQFT = 195.8

DRAWING TITLE

MASTER PLAN

RETURN AIR REQUIREMENTS

1. 20"x16" GRILL REQUIRED
2. 4"x10" GRILL W/ 2 1/2" DOOR UNDERCUT
3. DOOR(S) MUST BE UNDERCUT 2 1/2" MIN.
4. 4"x24" OR 6"x14" GRILL REQUIRED

(1) INDICATES REQUIRED NUMBER OF STUDS IN COLUMN

(X) THE X SPECIFIES THAT THERE CAN BE NO HOLES IN STUDS IN COLUMN

MODEL NAME	SQ. FT.
4707	2254

PLANT	DESCRIPTION	MODEL NO.
957	32X76 4BR-2BA	4707

DRAWN BY	ORIG. DATE	DATE PRINTED	SHEET NO.
KLK	07/27/2019	04/12/2021	1-1