# IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 243311

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

PIN # 4834946329

APPLICANT/OWNER: CASEY JOLLY | APPLICANT ADDRESS: 184 DOE TRAIL LANE, STATESVILLE, N.C. 28625

SITE ADDRESS: 298 BRUSHY CREEK ROAD, UNION GROVE, NC. 28689 | PHONE: 704-872-4587 | ALT. PHONE 704-880-3728

SITE DIRECTIONS: (N) ON 77, (L) ON 901, (R) ON WARREN BRIDGE, (L) ON BUTCH BRANCH, (R) ON BRUSHY CREEK, LOT ON (R)

SAP CONTROLLED: [x] YES [ ] NO | REPAIR

SUBDIVISION: — | SECTION: — | LOT # — | LOT AREA: 5.732 AC | DESIGN FLOW: 360GPD | L.T.A.R.: 0.3 / 0.25

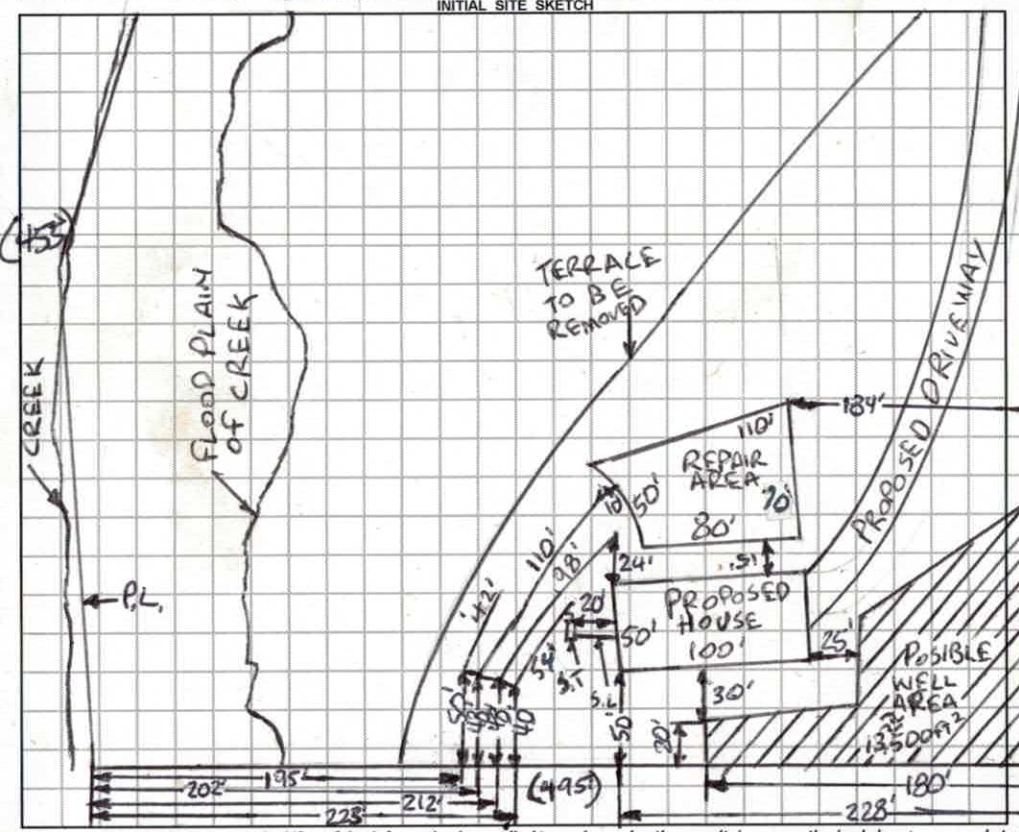
| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 (gal) | STB | 1012. | Date | 2-11-20 | [x] New System | [ ] Repair | [ ] Expansion | System Type: I II (III) IV V VI |
| Pump Tank | — (gal) | PT | — | Date | — | System Description: | 25% REDUCTION | | |
| Pump Make | — | Model | — | Serial # | — | Repair System Description: | 25% REDUCTION | | |
| # Nitrification Fields | 1 | # Lines | 4 | Linear Ft | 304 | Maintenance Agreement Required: | [ ] YES | [x] NO | |
| Trench Width | 36 IN | Trench Bottom Depth(Low side) | 27 IN | Gravel Depth | — | [x] GRAVITY | [ ] PRESSURE | | |

| | | | |
|---|---|---|---|
| [x] Residence | No. Bedrooms | 3 | Water Supply |
| [ ] Business | No. Persons | 6 | [x] Private |
| [ ] Other | No. Employees | | [ ] Public |
| [ ] Slab | [ ] Crawl Space | | [ ] Community |
| [x] Basement w/plumbing | [ ] Basement w/o plumbing | | |

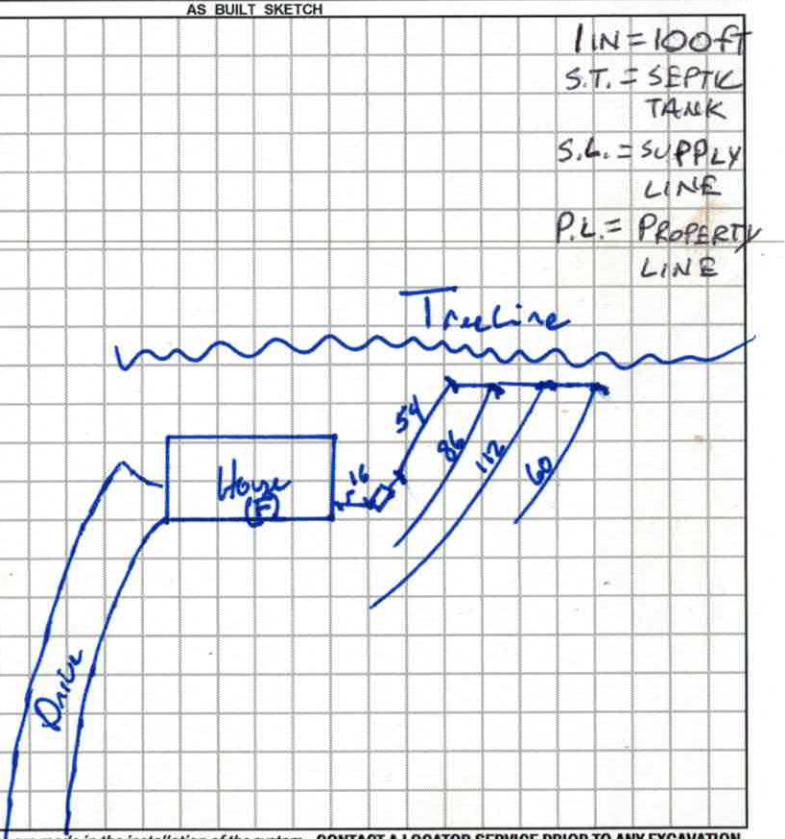
Comments / Conditions: INSTALL ON CONTOUR, INSTALL ON 9FT CENTERS. DO NOT EXCEED A MAX LOW SIDE TRENCH BOTTOM OF 27 IN. GRADEAWAY TERRACE TO PROMOTE POSITIVE DRAINAGE OVER SYSTEM

STABILIZE COVER OVER SYSTEM AS BEST AND QUICKLY AS POSSIBLE

INITIAL SITE SKETCH




AS BUILT SKETCH




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

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

Owner / Applicant Signature: [signature] Date: 7-3-19 | Installed by: Steve Jordan

IMPROVEMENT PERMIT by: Bryant C. White Date: 6-19-19 | OPERATION PERMIT by: Brigman A Bolton Date: 6-9-2020

AUTHORIZATION TO CONSTRUCT by: Bryant C. White Date: 7-3-19 | Existing System Inspected by: Date:

**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.**

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

Sheet 1 of 2
PROPERTY ID #: 4834946
COUNTY: IREDELL

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

OWNER: CASEY JOLLY
ADDRESS: 184 DOE TRAIL LANE, STATESVILLE, NC 28625
APPLICATION DATE: 3-29-19
DATE EVALUATED: 4-11-19
PROPOSED FACILITY: 3BR
PROPOSED DESIGN FLOW (.1949): 360GPD
PROPERTY SIZE: 5.732 AC
LOCATION OF SITE: 298 BRUSHY CREEK ROAD, UNION GROVE, NC 28689
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) .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 | NOSE 12% | 0-14 | SCL, SBK | FR, SS, SP, SEXP | -O.M. | | | | PS .25 |
| | | 14-34 | C, SBK | FR, S, P, SEXP | -GRAVELLY | | | | |
| | | 34-54 | SC, WABK | FI, S, P, SEXP | -Y/B MOTS WET + LITHO 36-54 10YR 6/3 @ 34" WET | 54"+ | NA | NA | |
| 2 | NOSE 12% | 0-12 | SCL, SBK | FR, SS, SP, SEXP | -O.M | | | | PS .25 |
| | | 12-33 | C, SBK | FR, S, P, SEXP | -GRAVELLY | | | | |
| | | 33-50 | SC, WABK | FI, S, P, SEXP | -Y/B CHROMA 1+2 @ 36" + 50" "TIGER" | 50"+ | NA | NA | |
| 3 | NOSE 12% | 0-10 | SCL, SBK | FR, SS, SP, SEXP | Y/B SAP INC THRU OUT | 44" | PS II ~~SL~~ SL NON-CONTINOUS FI-STAY ABOVE | NA | PS .3 |
| | | 10-30 | C, SBK | FR, S, P, SEXP | | | | | |
| | | 30-44 | CL, WSBK | FR, SS, SP, SEXP | | | | | |
| | | 44-50 | SAP, MAS | FI, NS, NP, SEXP | | | | | |
| 4 | LINEAR SIDE 12% | 0-12 | SCL, SBK | FR, SS, SP, SEXP | Y/B SAP INC THRU OUT | 42" | PS II L | NA | PS .3 |
| | | 12-24 | C, SBK | FR, S, P, SEXP | | | | | |
| | | 24-42 | CL, WSBK | FR, SS, SP, SEXP | | | | | |
| | | 42-60 | SAP, MAS | FR, NS, NP, SEXP | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | PS | PS |
| System Type(s) | 25% | 25% |
| Site LTAR | 0.3 | 0.25 |

OTHER FACTORS (.1946): PS
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Bryant C. White
OTHER(S) PRESENT:

COMMENTS:

# LEGEND

***use the following standard abbreviations***

| LANDSCAPE POSITION | GROUP | SOIL TEXTURE | CONVENTIONAL .1955 LTAR* | LPP .1957 LTAR* | MINERALOGY/ CONSISTENCE | STRUCTURE |
|---|---|---|---|---|---|---|
| CC (Concave Slope) | I | S (Sand) | 1.2 - 0.8 | 0.6 - 0.4 | SEXP (Slightly Expansive) | G (Single Grain) |
| CV (Convex Slope) | | LS (Loamy Sand) | | | EXP (Expansive) | M (Massive) |
| D (Drainage Way) | | | | | | CR (Crumb) |
| DS (Debris Slump) | II | SL (Sandy Loam) | 0.8 - 0.6 | 0.4 - 0.3 | | GR (Granular) |
| FP (Flood Plain) | | L (Loam) | | | | SBK (Subangular Blocky) |
| FS (Foot Slope) | | | | | | ABK (Angular Blocky) |
| H (Head Slope) | III | Si (Silt) | 0.6 - 0.3 | 0.3 - 0.15 | | PL (Platy) |
| L (Linear Slope) | | SiCL (Silty Clay Loam) | | | | PR (Prismatic) |
| N (Nose Slope) | | CL (Clay Loam) | | | | |
| R (Ridge) | | SCL (Sandy Clay Loam) | | | **MOIST** | **WET** |
| S (Shoulder Slope) | | SiL (Silt Loam) | | | | |
| T (Terrace) | | | | | VFR (Very Friable) | NS (Non-sticky) |
| | IV | SC (Sandy Clay) | 0.4 - 0.1 | 0.2 - 0.05 | FR (Friable) | SS (Slightly Sticky) |
| | | SiC (Silty Clay) | | | FI (Firm) | S (Sticky) |
| | | C (Clay) | | | VFI (Very Firm v. Very Sticky) | VS (Very Sticky) |
| | | O (Organic) | None | None | EFI (Extremely Firm) | NP (Non-plastic) |
| | | | | | | SP (Slightly Plastic) |
| | | | | | | P (Plastic) |
| | | | | | | VP (Very Plastic) |

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

NTS

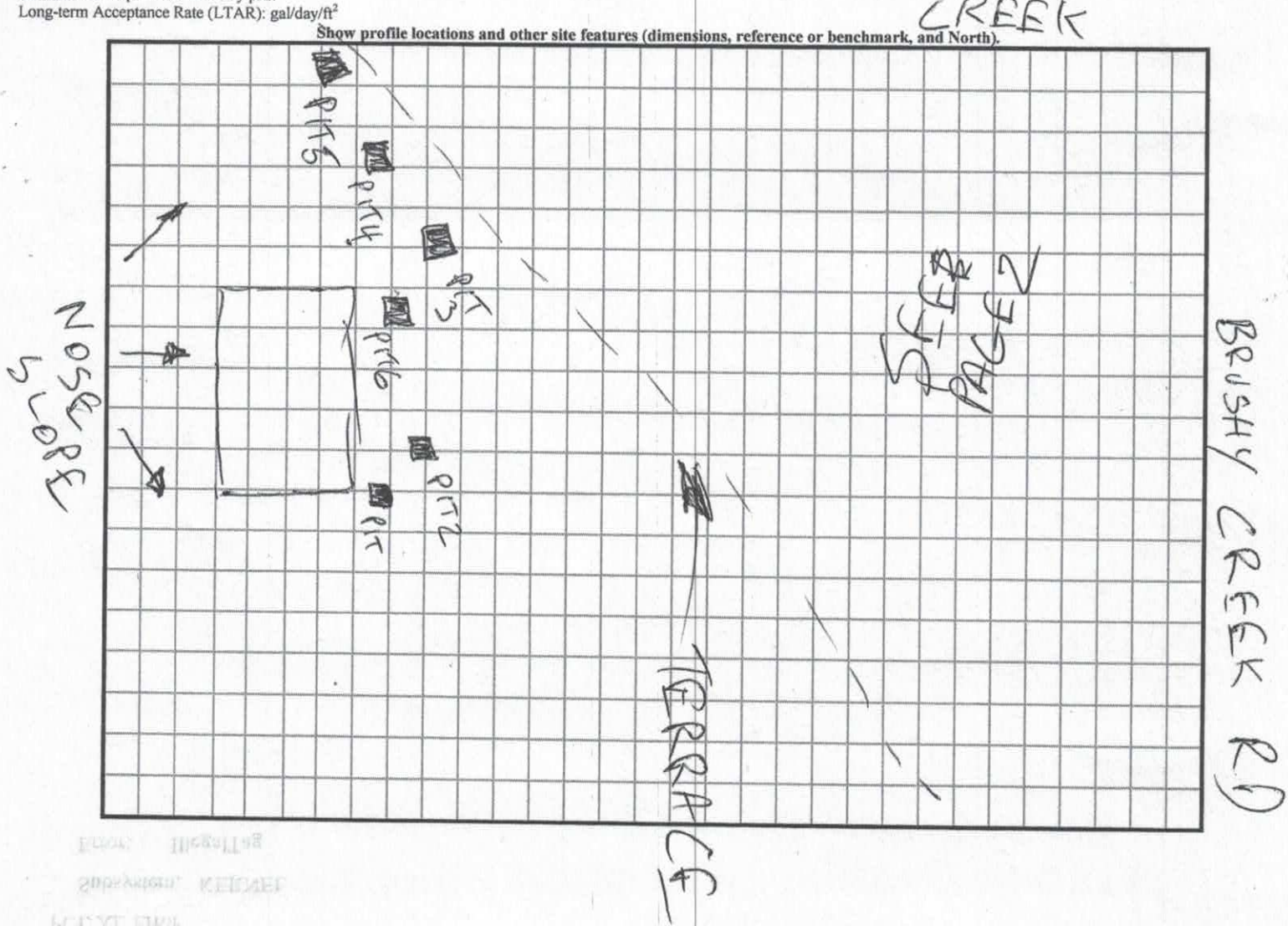
***NOTES***

| | |
|---|---|
| *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).**



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


PROPERTY ID #: 4834946
COUNTY: IREDELL

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

OWNER: SEE PAGE 1
ADDRESS:
PROPOSED FACILITY:
LOCATION OF SITE:
APPLICATION DATE
DATE EVALUATED:
PROPOSED DESIGN FLOW (.1949):
PROPERTY SIZE:
PROPERTY RECORDED:

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 | .1941 CONSISTENCE/ MINERALOGY | OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR | .1943 SOIL DEPTH | .1956 SAPRO CLASS | .1944 RESTR HORIZ | PROFILE CLASS & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| 5 | LINEAR SIDE 12% | 0-10 | SCL, SBK | FR, SS, SP, SEXP | Y/B MOT WET SUITABLE 10-24 | 48" | PS II L | NA | PS .3 |
| | | 10-24 | C, SBK | FR, S, P, SEXP | | | | | |
| | | 24-48 | CL, WSBK | FR, SS, SP, SEXP | | | | | |
| | | 48-60 | SAP, MAS | FR, NS, NP, SEXP | | | | | |
| 6 | LINEAR SIDE 12% SHOT 25% | 0-8 | SCL, SBK | FR, SS, SP, SEXP | Y/B MOT SAP INC | 53" | PS II L | NA | PS .3 |
| | | 8-20 | C, SBK | FR, S, P, SEXP | | | | | |
| | | 20-53 | CL, WSBK | FR, SS, SP, SEXP | | | | | |
| | | 53-67 | SAP, MAS | FR, NS, NP, SEXP | | | | | |
| 3 | | | | | | | | | |
| 4 | | | | | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | | SEE PAGE 1 |
| System Type(s) | SEE | |
| Site LTAR | | |

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

COMMENTS:

# LEGEND

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| D (Drainage Way) | | | | | | CR (Crumb) |
| DS (Debris Slump) | II | SL (Sandy Loam) | 0.8 - 0.6 | 0.4 - 0.3 | | GR (Granular) |
| FP (Flood Plain) | | L (Loam) | | | | SBK (Subangular Blocky) |
| FS (Foot Slope) | | | | | | ABK (Angular Blocky) |
| H (Head Slope) | III | Si (Silt) | 0.6 - 0.3 | 0.3 - 0.15 | | PL (Platy) |
| L (Linear Slope) | | SiCL (Silty Clay Loam) | | | | PR (Prismatic) |
| N (Nose Slope) | | CL (Clay Loam) | | | | |
| R (Ridge) | | SCL (Sandy Clay Loam) | | | **MOIST** | **WET** |
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| | | SiC (Silty Clay) | | | FI (Firm) | S (Sticky) |
| | | C (Clay) | | | VFI (Very Firm v. Very Sticky) | VS (Very Sticky) |
| | | O (Organic) | None | None | EFI (Extremely Firm) | NP (Non-plastic) |
| | | | | | | SP (Slightly Plastic) |
| | | | | | | P (Plastic) |
| | | | | | | VP (Very Plastic) |

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

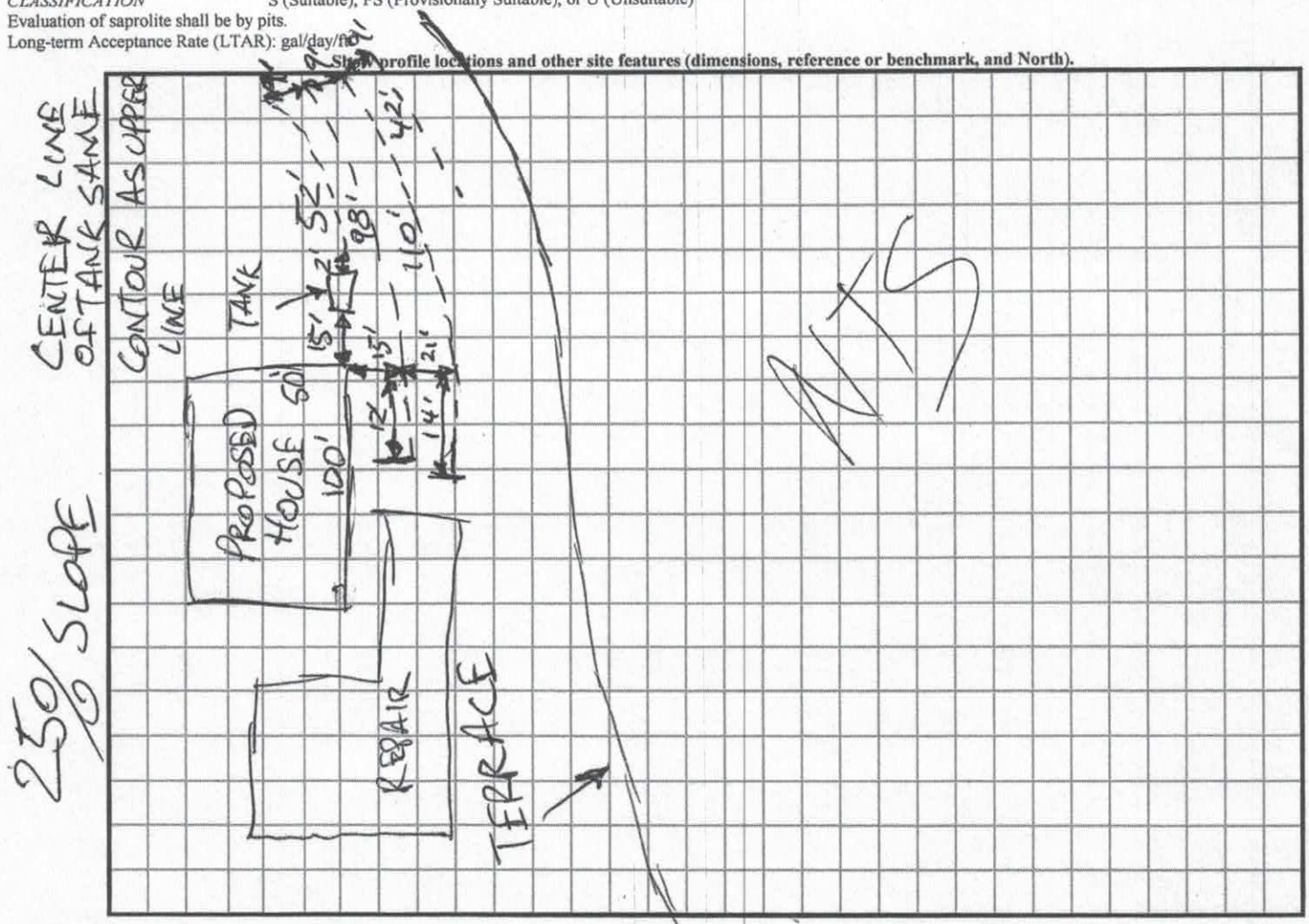
***NOTES***

| | |
|---|---|
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| *DEPTH OF FILL* | In inches from land surface |
| *RESTRICTIVE HORIZON* | Thickness and depth from land surface |
| *SAPROLITE* | S(suitable) or U(unsuitable) |
| *SOIL WETNESS* | Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation |
| *CLASSIFICATION* | S (Suitable), PS (Provisionally Suitable), or U (Unsuitable) |

Evaluation of saprolite shall be by pits.

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

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



RECEIVED MAR 2 9 2019

Paid $500.00 #243311

# IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

*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: Casey Jolly Address: 184 Doe Trail Ln. Zip: 28625
Applicant Email: Caseyjjolly@yahoo.com Phone: (704)872-4587 Alt. Phone: (704)880-3728
Owner Name: Casey Jolly Address: _____ Zip: _____
Owner Email: _____ Phone: _____ Alt. Phone: _____

**Property Information:**

Street Address: 298 Brushy Creek Rd. Union Grove, NC 28689
Subdivision Name: None Section/Phase: _____ Lot Number: _____
Driving Directions: I-77 North to exit 65. Left onto 901. Right onto Warren Bridge Rd. Left onto Butch Branch Rd. Right onto Brushy Creek Rd. (Gravel Rd.)

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

(✓) 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: 4
( ) 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**

( ) 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 ( ) 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 (1) 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:** _____ 3/29/19
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

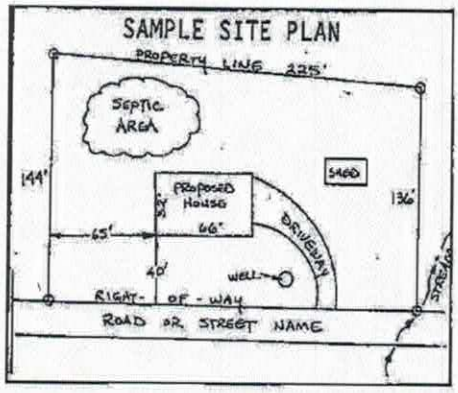
# IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

***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:**

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

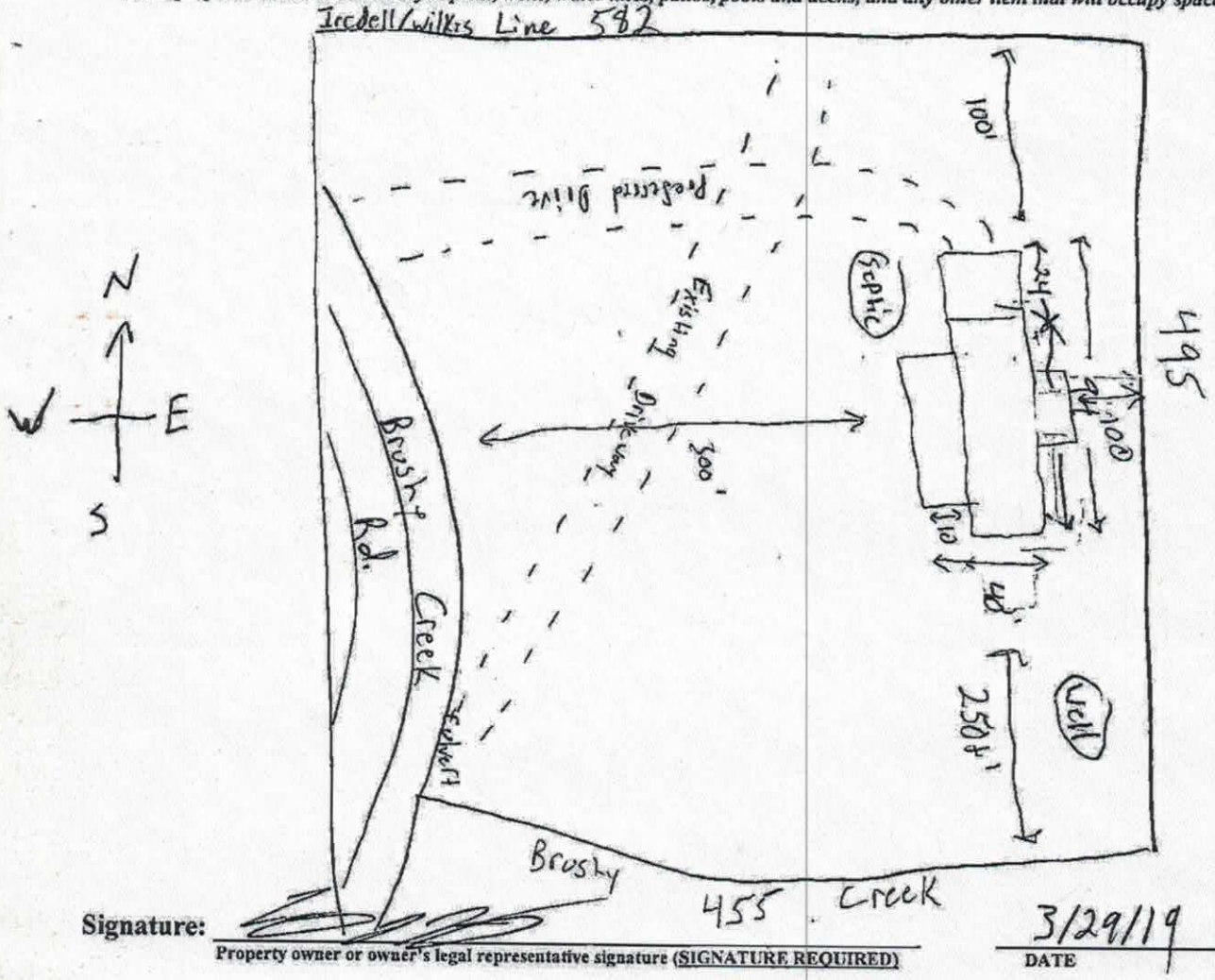



**Circle N/A on the following if appropriate:**

| | |
|---|---|
| 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 |

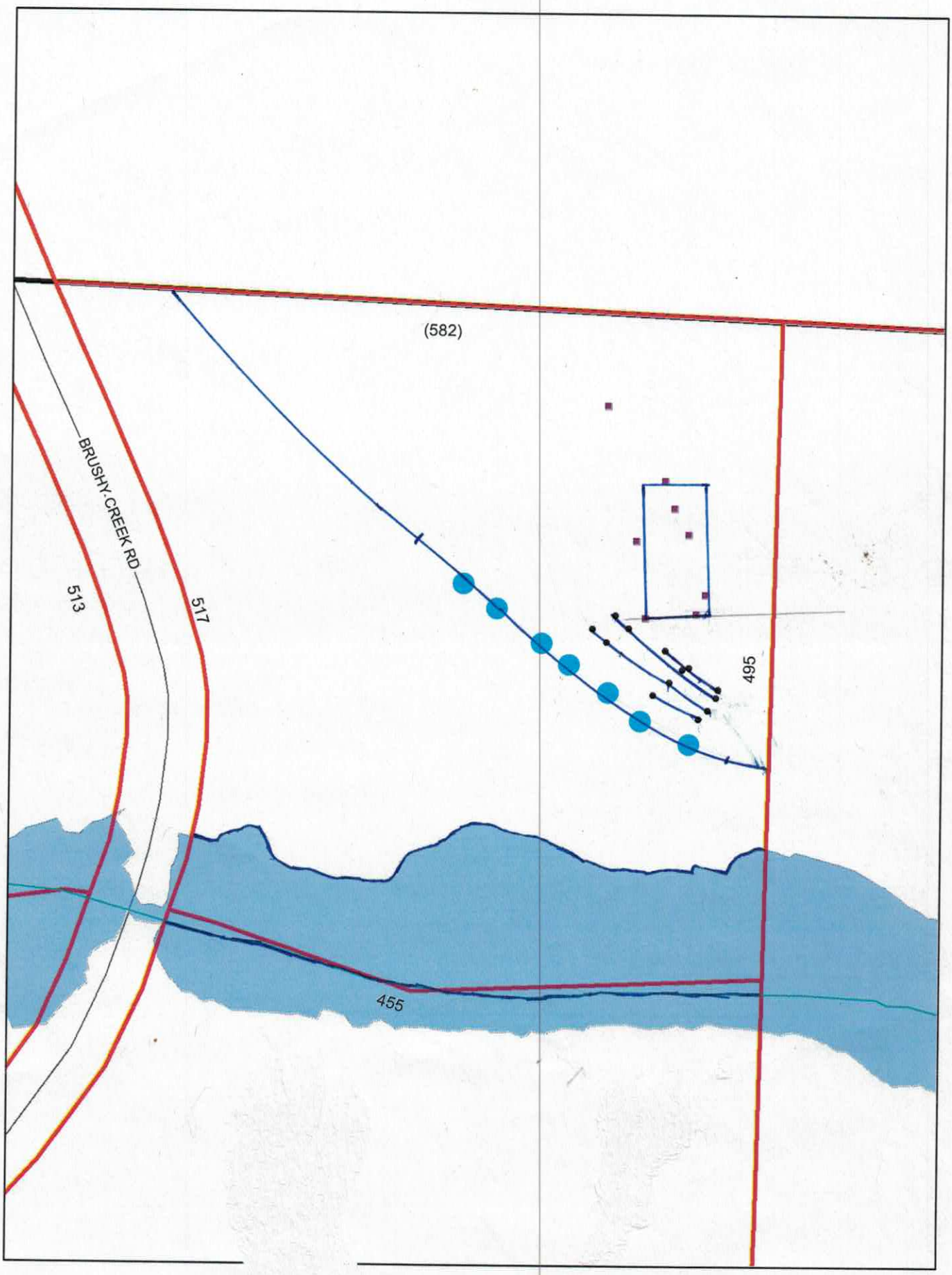
## USE THIS SPACE TO DRAW YOUR SITE PLAN

***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:** _____ 3/29/19

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



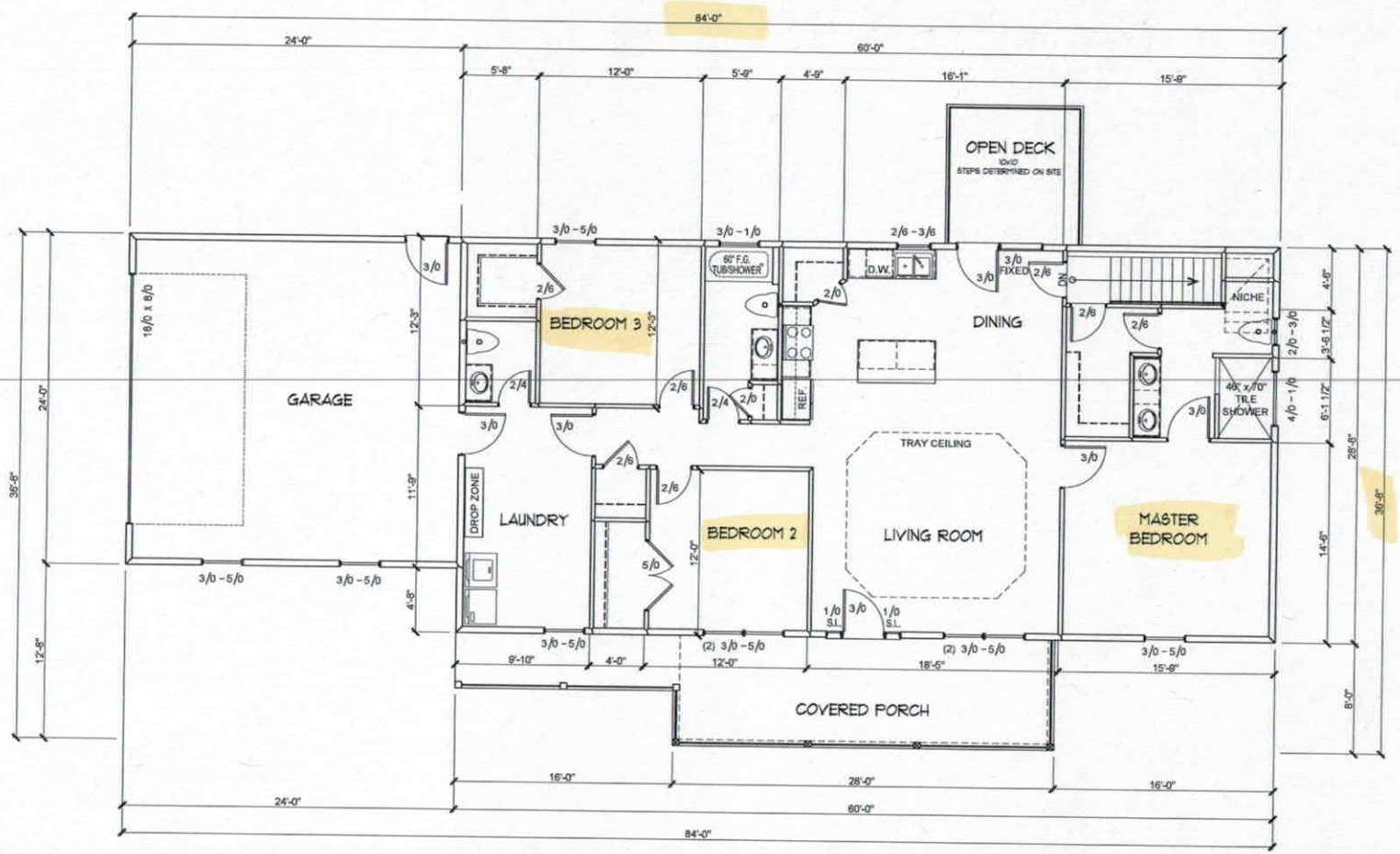

1 inch = 100 feet

Acknowledgement Of
Plans Submittal ONLY!

Date 7-3-19

Date 7-3-19

PRELIMINARY
PRELIMINARY INFORMATION ONLY
NOT FOR CONSTRUCTION





1270 Northside Drive
Statesville, NC
(704) 872-1591



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# JOLLY RESIDENCE
UNION GROVE NC 28689
299 BRUSHY CREEK RD

## MAIN LEVEL PLAN

| SQUARE FOOTAGE | |
|---|---|
| MAIN LEVEL | 1720 S.F. |
| UNHEATED BASEMENT | 1691 S.F. |
| FRONT PORCH | 224 S.F. |
| GARAGE | 576 S.F. |
| TOTAL HEATED - | 1720 S.F. |

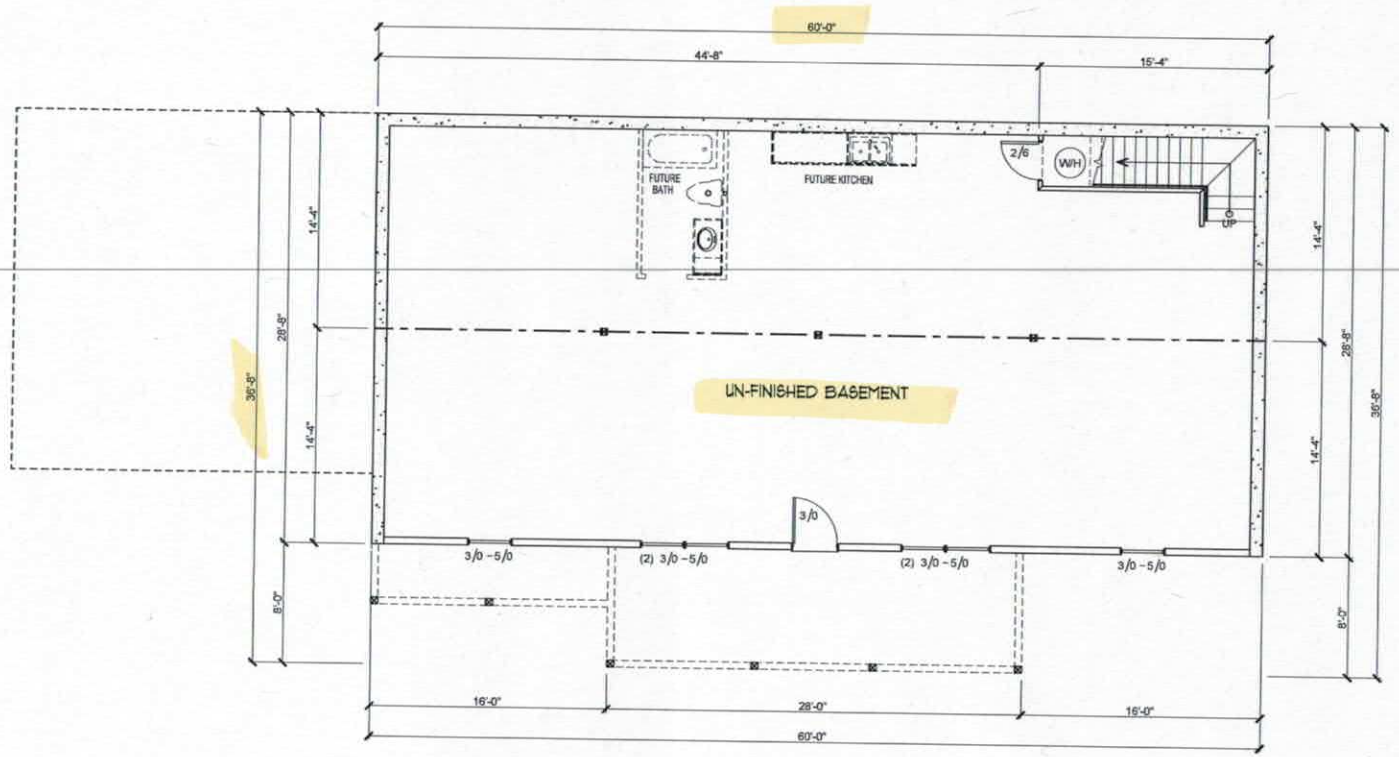
DRAWN BY:
DOUG GAITHER
DESIGN NO:
DH-2019-130
SCALE:
1/8" = 1'-0"
BASE PLAN:

REVISION:
07/02/19
MANAGER
KENT JACKSON
DATE DRAWN:
06/22/19

B2.1

Acknowledgement Of
Plans Submittal ONLY!
Bonfrust C. White Date 7-3-2019
Date 7-3-19

PRELIMINARY
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1270 Northside Drive
Statesville, NC
(704) 872-1591

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# JOLLY RESIDENCE

298 BRUSHY CREEK RD ◆ UNION GROVE NC 28689

## BASEMENT PLAN

| SQUARE FOOTAGE | |
|---|---|
| MAIN LEVEL | 1720 S.F. |
| UN-HEATED BASEMENT | 1851 S.F. |
| FRONT PORCH | 224 S.F. |
| GARAGE | 576 S.F. |
| TOTAL HEATED | 1720 S.F. |

DRAWN BY:
DOUG GAITHER
DESIGN NO:
DH-2019-130
SCALE:
1/8" = 1'-0"
BASE PLAN:

REVISION:
07/02/19
MANAGER
KENT JACKSON
DATE DRAWN:
06/22/19

B2.0

# 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.**

**2.** I, _____, am the legal owner(s) of the property located at _____, identified as

PIN (Parcel Identification Number)_____, located in Iredell County, North Carolina.

I do hereby authorize **(print legal representative/company name)** _____, _____, 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.

_____ 3/29/19

Signature of Owner(s) Date

**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

# IREDELL COUNTY

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

| APPLICATION NUMBER |
| --- |
| 243311 |
| Issue Date: 03/29/2019 |

## ZONING PERMIT

| Parcel Number | Street Address | Jurisdiction |
| --- | --- | --- |
| 4834946329.000 | 298 BRUSHY CREEK ROAD, UNION GROVE, NC 28689 | |

| Owner Information | Applicant Information |
| --- | --- |
| Owner: JOLLY | Applicant: CASEY JAMES JOLLY |
| Address: 184 DOE TRAIL LN | Address: 184 DOE TRAIL LN |
| STATESVILLE, NC 28625 | STATESVILLE, NC 28625 |
| Phone: | Phone: 704-880-3728 |

| Use Requested | Zone Code |
| --- | --- |
| | |

| Lot Acreage | F Setback | B Setback | L Setback | R Setback | Watershed | Flood Zone |
| --- | --- | --- | --- | --- | --- | --- |
| | 35.00 | 35.00 | 15.00 | 15.00 | BOWH | AE |

**Remarks:**

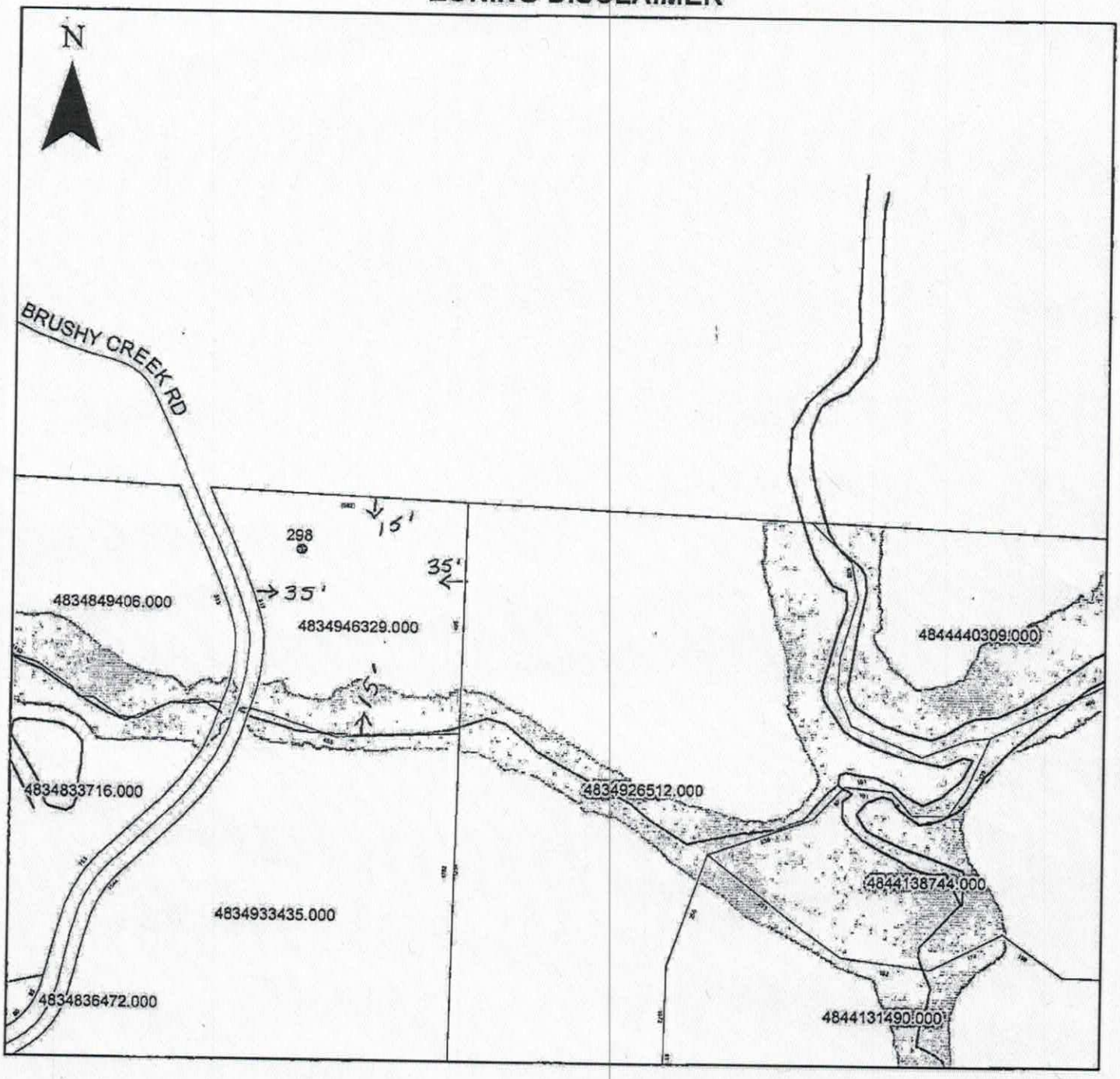
PLEASE KEEP ALL BUILDING OUT OF FLOOD ZONE.

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 | 172415 | TOTAL FEES: | $ 77.25 |
| --- | --- | --- | --- |

# ZONING DISCLAIMER




Property Address 298 Brushy Creek 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

3/29/19
Date