IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 245906

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

PIN # 4842250895

APPLICANT/OWNER: Clayton Homes Statesville APPLICANT ADDRESS: 2026 Northside Drive Statesville 28625

SITE ADDRESS: 1047 Eupepti Springs Olin NC 28660 PHONE: 704 929-1552 ALT. PHONE 704 873-2547

SITE DIRECTIONS: Hwy 115 N Ron Harris Grove Ln N Chipley Ford Continue to MT Vernon Church Ln Eupepti Springs SAP CONTROLLED: ☐ YES ☐ NO

SUBDIVISION: ✓ – SECTION: – LOT # – LOT AREA: 14 Acres DESIGN FLOW: 240gpd L.T.A.R.: Existing

Septic Tank 1000 (gal) STB Date

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields X # Lines Linear Ft

Trench Width Trench Bottom Depth (Low side) Gravel Depth

☐ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI

System Description: Existing

Repair System Description:

Maintenance Agreement Required: ☐ YES ☐ NO

☐ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 2

☐ Business No. Persons 4

☐ Other No. Employees

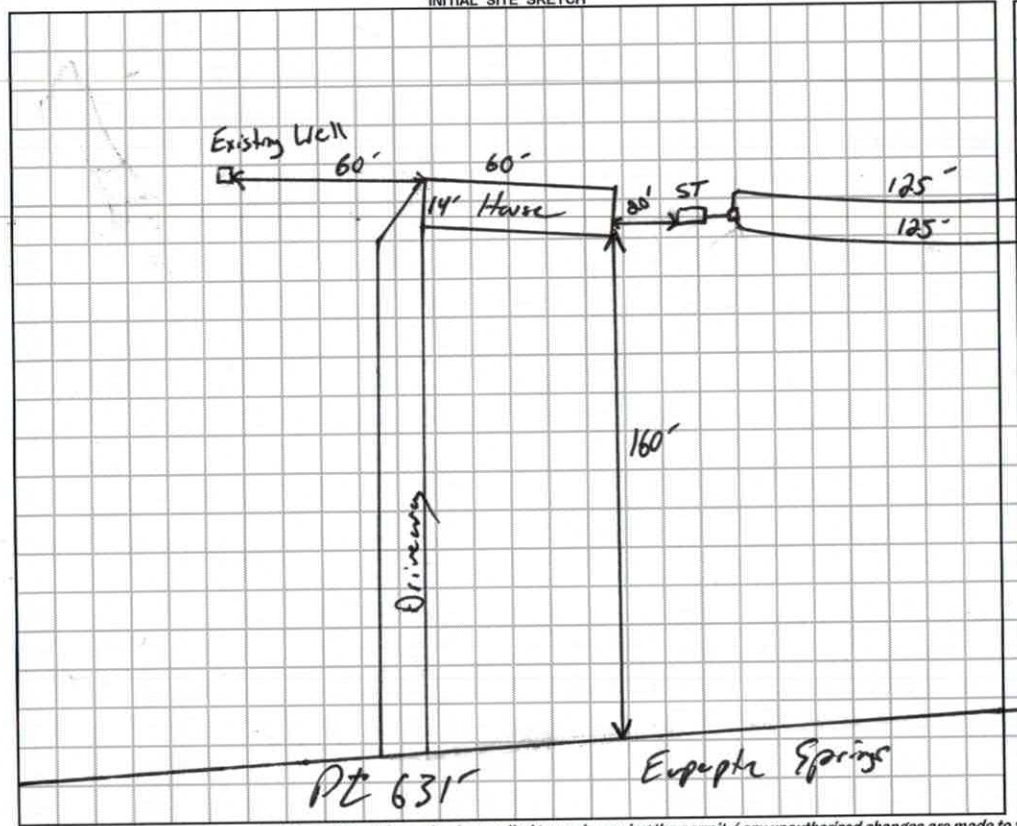
☐ Slab ☒ Crawl Space

☐ Basement w/plumbing ☐ Basement w/o plumbing

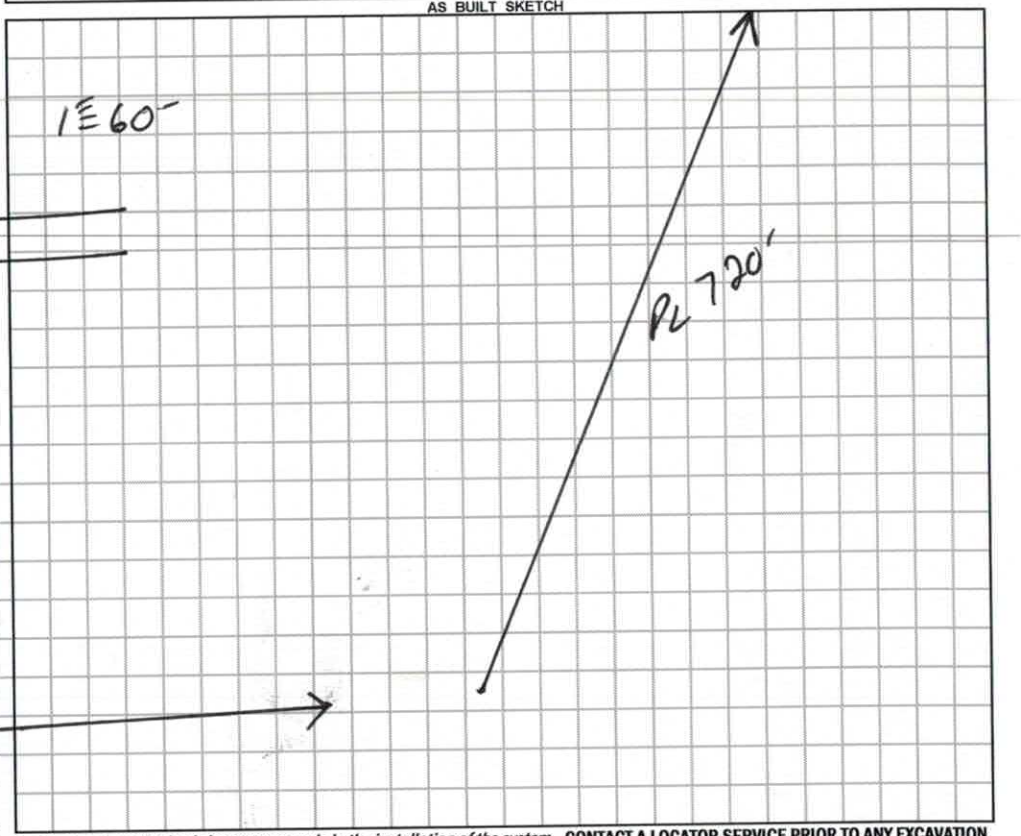
Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: System Properly Functioning at time of Inspection

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.* ☐ **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: Date: 9/15/19 Installed by:

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

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Date: 6-25-19

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.

#245906
6.20.19
$250.00

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 (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: Clayton Homes Statesville Address: 2020 Northside Dr Statesville Zip: 28625
Applicant Email: alan.carstens@clayhomes.com Phone: 7048732547 Alt. Phone: 704 929 1552
Owner Name: Sheridan Stanton Address: 844 Lingsbury Rd Lexington KY Zip: 40509
Owner Email: _____ Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 1047 Eupeptic Springs Rd Olin
Subdivision Name: — Section/Phase: — Lot Number: —
Driving Directions: _____

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: 2
Maximum Number of Occupants: 2
( ) 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: 1992
( ) 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?
( ) Yes (X) No Is the site subject to approval by any other public agency?

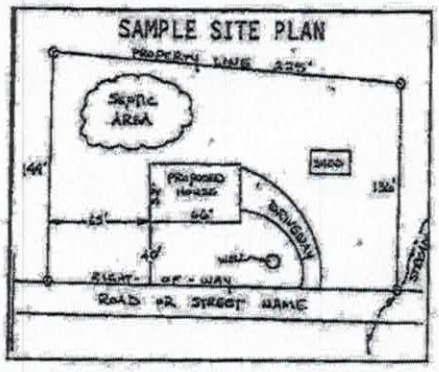
I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible 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: _____ Clayton Homes Statesville 6/18/19
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

SEE ATTACHED

Signature: [signature] CLAYTON HOMES STATESVILLE 6/10/19

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

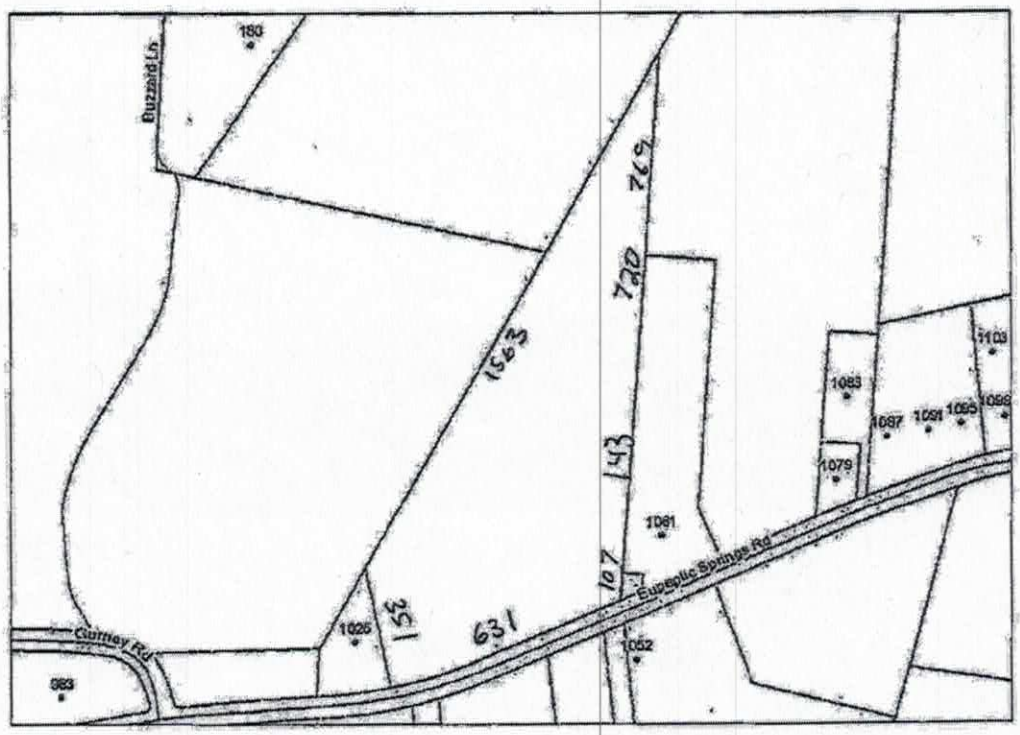
Iredell County

Property Data

Parcel Number: 4842250895.000
Inquiry Date: 6/12/2019

Disclaimer: While every effort is made to keep information provided over the Internet accurate and up-to-date, the County does not certify the authenticity or accuracy of such information. No warranties, express or implied, are provided for the records and/or mapping data herein, or for their use or interpretation by the User.

Property Map



Owner/Property Info

Tax Account Number: 77443951
Old Parcel Number: 0516G00000A076
Owner Name: STANTON SHERIDAN E+ANITA R
Mailing Address: 348 BEREA CHURCH QUINCY RD HIDDENITE NC 28636
Property Location: EUPEPTIC SPRING RD
Lot Number:
Legal Description: NORMAN SR1892

Municipal Information

Township Code: 05
City Code: 00
Neighborhood Code: 05000

Value Information - Current Year Property Record Card (PRC)

Building Value: 0
Other Building Features: 5200
Land Value: 95760
Tax Assessed Value: 100960
Deferred: 0

Land Information - Register of Deeds Online Search

Date Recorded	Document Type	Deed Book	Deed Page	Plat Book & Page	Land Area	Land Type	Zoning

45837

IREDELL COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

15477

OWNER OR CONTRACTOR LORI K. FLOYD DATE 12/15/92 PERMIT NO. PART OF 166-A-76

PHONE: Business _____ Home _____

LOCATION US 21 N TO JENNINGS ROAD, TO EUPEPTIC SPRINGS ROAD, ~0.25 MILE ON (R) S.R. No. _____

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

House ☐ Mobile Home ☑ SW Business ☐ Other _____

No. Bedrooms 2 No. Bathrooms 2 Soil Characteristics PS

Garbage Disposal Unit Yes ☐ No ☑ Application Rate 0.33 GPD / FT²

Asm. Dishwasher Yes ☑ No ☐ Topography 3-10% LINEAR

Asm. Wash. Machine Yes ☑ No ☐ Depth to Water Table 54

Lot Area ~1.5 AC Rock or other impervious formations SMALL SCATTERED ROCK

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement ✓ Crawl Space

CRS 8/11/92

Size of Tank 1000 Gals.

Nitrification Field:

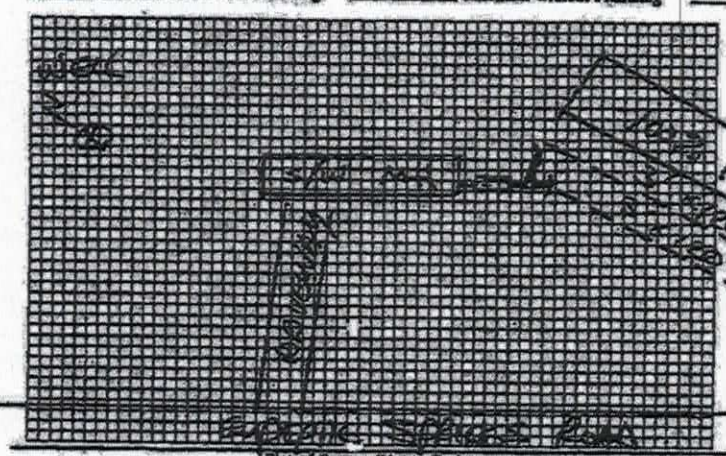
No. of Lines 2

Sq. Ft. 730 Linear Ft. 240

Depth of Slope in Lines 12"

Water Supply: Individual ☑ WELL

Public ☐



Plot of System (Not to Scale)

Installed by SAMMY REAVIS

I understand and agree to install a septic tank system as specified on this Improvement Permit.

Signed: _____

(IMPROVEMENT PERMIT IS VALID FOR 60 MONTHS FROM DATE OF ISSUE.)

IMPROVEMENT PERMIT BY STEVE HEDRICK

COMMENTS REPAIR AREA IS 100% CONVENTIONAL, GRAVITY-FED.

CERTIFICATE OF COMPLETION BY STEVE HEDRICK DATE 12/15/92

EXISTING SYSTEM CHECKED BY _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS

Permit is VOID if any unauthorized changes are made in installation of system, and/or if any unapproved changes are made to the site, and/or if any false information is supplied toward securing Improvement Permit.

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

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. _____, am the legal owner(s) of the property located at 1647 EUPEPTIC SPRINGS RD NE, identified as

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

I do hereby authorize (print legal representative/company name) Crafton Homes, Statesville, 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.

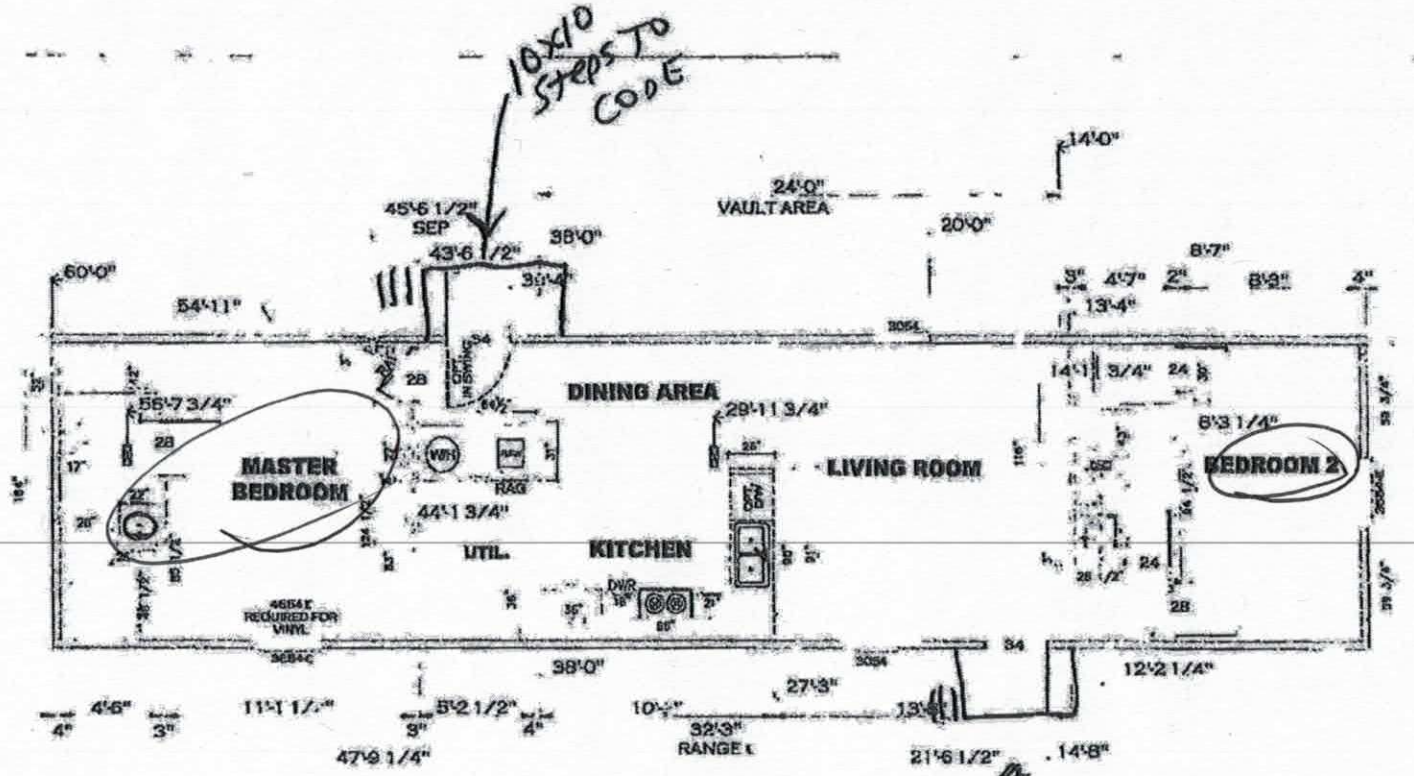
_____ Signature of Owner(s)

_____ Date

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

14X60



Acknowledgement Of
Plans Submittal ONLY!

Date 6-25-19

Date 8-15-19

820 SQ.FT. (STD PLAN "CONDITIONED")
N/A SQ.FT. (W/OPT. PORCH/RECESS "CONDITIONED")

HOMES

14' x 60' Delight

Floor Plan

Doc ID: 009721770003 Type: CRP
Recorded: 11/30/2005 at 04:25:48 PM
Fee Amt: $150.00 Page 1 of 3
Excise Tax: $130.00
Iredell County, NC
Brenda D. Bell Register of Deeds
BK 1703 PG 998-1000

NORTH CAROLINA GENERAL WARRANTY DEED

3

Excise Tax: $ 130.00

Parcel Identifier No. _____ Verified by _____ County on the ____ day of _____, 20__
By: _____

Mail/Box to: Grantee

This instrument was prepared by: Russell W. Chapman, Jr.

Brief description for the Index: _____

THIS DEED made this 30th day of November, 20 05, by and between

GRANTOR	GRANTEE
Craig Sloan aka Craig Lynn Sloan and wife, Crystal Sloan aka Crystal Emory Sloan	Sheridan E. Stanton and wife, Anita R. Stanton 844 Kingsbury Road Lexington, KY 40509-0000

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 the City of _____, Union Grove Township, Iredell County, North Carolina and more particularly described as follows:

Legal description attached

The property hereinabove described was acquired by Grantor by instrument recorded in Book _____ page _____.

A map showing the above described property is recorded in Plat Book _____ page _____.

NC Bar Association Form No. L-3 © 1976, Revised © 1977, 2002
Printed by Agreement with the NC Bar Association – 1981 SoftPro Corporation, 333 E. Six Forks Rd., Raleigh, NC 27609

TO HAVE AND TO HOLD the aforesaid 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:
SUBJECT TO such existing easements for public roadways and utilities, rights of way, and restrictive covenants of record, if any.

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

_____ (Entity Name)

By: _____
Title: _____

By: _____
Title: _____

By: _____
Title: _____

Craig Sloan (SEAL)
Craig Sloan aka Craig Lynn Sloan

Crystal Sloan (SEAL)
Crystal Sloan aka Crystal Emory Sloan

_____ (SEAL)

_____ (SEAL)

State of North Carolina - County of Iredell Warren

I, the undersigned Notary Public of the County and State aforesaid, certify that Craig Sloan aka Craig Lynn Sloan and Crystal Sloan aka Crystal Emory Sloan personally appeared before me this day and acknowledged the due execution of the foregoing instrument for the purposes therein expressed. Witness my hand and Notarial stamp or seal this 30th day of November, 2005.

My Commission Expires: 10-6-08

PATRICIA G. ABBOTT
NOTARY PUBLIC
Warren County
North Carolina
My Commission Expires 10-06-08

Patricia G. Abbott
Notary Public

State of North Carolina - County of _____

I, the undersigned Notary Public of the County and State aforesaid, certify that _____ personally came before me this day and acknowledged that he is the _____ of _____, a North Carolina or _____ corporation/limited liability company/general partnership/limited partnership (strike through the inapplicable), and that by authority duly given and as the act of such entity, he signed the foregoing instrument in its name on its behalf as its act and deed. Witness my hand and Notarial stamp or seal, this ____ day of _____, 20__.

My Commission Expires: _____

_____
Notary Public

State of North Carolina - County of _____

I, the undersigned Notary Public of the County and State aforesaid, certify that _____

Witness my hand and Notarial stamp or seal, this ____ day of _____, 20__.

My Commission Expires: _____

_____
Notary Public

The foregoing Certificate(s) of _____ is/are certified to be correct. This instrument and this certificate are duly registered at the date and time and in the Book and Page shown on the first page hereof.

_____ Register of Deeds for _____ County
By: _____ Deputy/Assistant - Register of Deeds

NC Bar Association Form No. L-3 © 1976, Revised © 1977, 2002
Printed by Agreement with the NC Bar Association – 1981 SoftPro Corporation, 333 E. Six Forks Rd., Raleigh, NC 27609

EXHIBIT A

Tax Pin 4842-25-0895 Map No. 05-16G00000A076

Beginning at an existing railroad spike found in the center of Eupeptic Springs Road (SR1858), said spike being North 04 degrees, 52 minutes, 16 seconds West 22.54 feet from a fire hydrant and also being North 85 degrees, 28 minutes, 22 seconds East 199.90 feet from a ½ inch existing iron rod located in the center of the road, said spike also being located in the southeast corner of Lori K. St. Clair (Deed Book 989, Page 1470) and thence from the point of beginning and with the eastern line of St. Clair, North 09 degrees, 00 minutes, 40 seconds West 31.33 feet to a ½ inch existing iron rod located in the northern right of way of the road and North 09 degrees, 00 minutes, 40 seconds West 319.29 feet to a ½ inch iron rod set in the line of Clyde D. Lippard and wife, Evadean R. Lippard (Deed Book 389, Page 184); and thence with the line of Lippard, North 31 degrees, 25 minutes, 00 seconds East 1562.35 feet to a ½ inch existing iron rod in the line of William C. Smith and wife, Gloria J. Smith (Deed Book 1090, Page 1364); and thence with the line of Smith, South 06 degrees, 16 minutes, 03 seconds West 1489.10 feet to a ½ inch existing iron rod in the northwest corner of William C. Smith and wife, Gloria J. Smith (Deed Book 1130, Page 743); and thence continuing with the line of Smith, South 06 degrees, 16 minutes, 03 seconds West 142.93 feet to a ½ inch existing iron rod in the northwest corner of Yadkin Valley Telephone Membership Corporation (Deed 915, Page 044); and thence with the line of Yadkin Valley Telephone Membership Corporation, South 06 degrees, 16 minutes, 03 seconds West 73.14 feet to a ½ inch existing iron rod and South 06 degrees, 16 minutes, 03 seconds West 33.86 feet to existing railroad spike in the center of Eupeptic Springs Road (SR1858); and thence with the center of the road the following courses and distances: South 68 degrees, 55 minutes, 49 seconds West 311.57 feet to a point; South 70 degrees, 00 minutes, 44 seconds West 128.44 feet to a point; South 74 degrees, 24 minutes, 25 seconds West 100.82 feet to a point; South 78 degrees, 29 minutes, 55 seconds West 74.16 feet to a point and South 84 degrees, 09 minutes, 59 seconds West 15.76 feet to the point and place of beginning, and being 13.99 acres, more or less, and all according to a survey for Craig Sloan and wife, Crystal Sloan by Ted M. Benbow, PLS, dated July 14, 2005.

The property conveyed herein is the identical property conveyed to Craig Sloan and wife, Crystal Sloan aka Craig Lynn Sloan and Crystal Emory Sloan by special warranty deed dated June 03, 2005 recorded at Deed Book 1671, Page 991, Iredell County Registry.

The property conveyed herein is SUBJECT TO an easement to Crescent Electric Membership Corp. recorded at Deed Book 879, Page 765, ICR; the easement for Eupeptic Springs Road (SR1858) recorded at Deed Book 202, Page 334 and Deed Book 568, Page 309, ICR; a utility easement to Duke Power Company recorded at Deed Book 129, Page 28, ICR and an easement to Yadkin Valley Telephone Membership Corporation recorded at Deed Book 397, Page 278, ICR..

IREDELL COUNTY

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

APPLICATION NUMBER
245906
Issue Date: 06/20/2019

ZONING PERMIT
Open Space

Parcel Number	Street Address	Jurisdiction
4842250895.000	1047 EUPEPTIC SPRINGS ROAD, OLIN, NC 28660	

Owner Information	Applicant Information
Owner: STANTON SHERIDAN E+ANITA R	Applicant: CLAYTON HOMES OF STATE
Address: 220	Address: 2026 NORTHSIDE DR
IREDELL CO, NC 28625	STATESVILLE, NC 28677
Phone:	Phone:

Use Requested	Zone Code
SINGLEWIDE	

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
14.000	35.00	35.00	15.00	15.00	NO	X

Remarks:

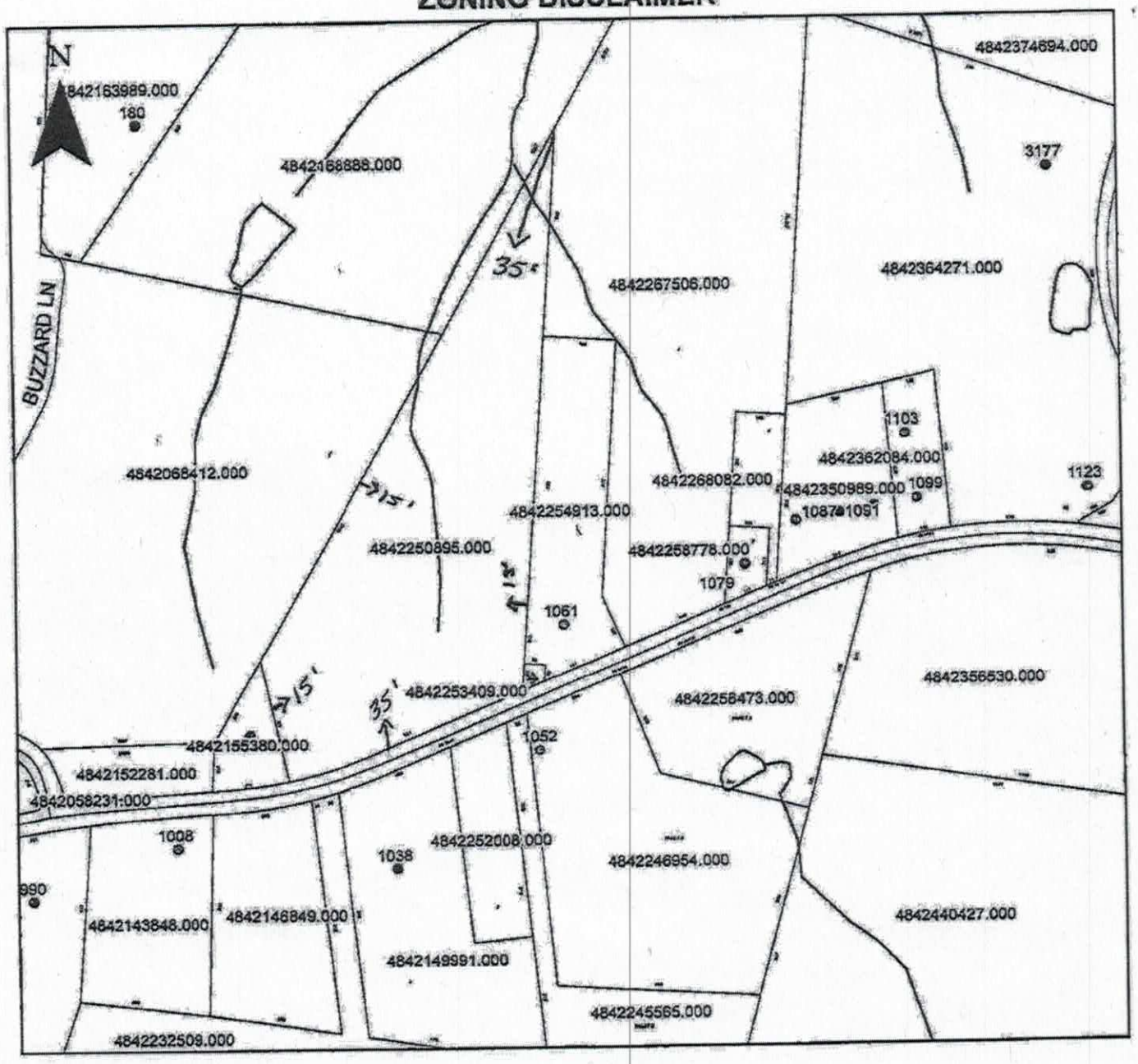
REQUIREMENTS FOR ALL SINGLEWIDE MOBILE HOMES Must meet requirement R10 of the LDC. Must remove the towing apparatus, if it cannot be removed, it shall be screened; Must have a continuous underpinning; Must have 36 square foot front porch constructed within 12 inches of the floor elevation; Must have approved steps at all other secondary entrances and exits; Must face front property line and be no less than 20 degrees from parallel to the front property line. Original 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.

Applicant: _____ Date: _____

Permit Number	182214	TOTAL FEES:	$ 77.25

ZONING DISCLAIMER



Property Address 1047 Eupeptic Springs 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

6/20/19
Date