Justin
704-902-8621

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

Application for SEPTIC REPAIR PERMIT

(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 ___✓___ BOTH ___ 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 #
Justin Harris	124 Joshua Ln. Mooresville	704-902-8621	704-239-3693 Deina Abee
Owner Name	Mailing Address	Home Phone #	Alternate Phone #
Tilda Baggarly	1035 W. Memorial Hwy Harmony		

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
334 Allen Rd.		

Driving Directions: 77N - exit 165 (R) on 901 - (L) on Eagle Mills - (R) W. Haustonville, (R) on Allen, property on left - beyond #380

5. RESIDENTIAL Site Development Information: *(Check or Complete ALL that apply)*

(✓) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
(X) Repair To Failing Septic System due to _____
( ) Other _____

Maximum Number of Bedrooms 3
Maximum Number of Occupants 5
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

7. Desired Septic System Type: *(You may rank in order of preference, if any)* ( ) EXISTING SYSTEM installed _____ 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: Deina Abee — 5/26/15
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) — DATE

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*:

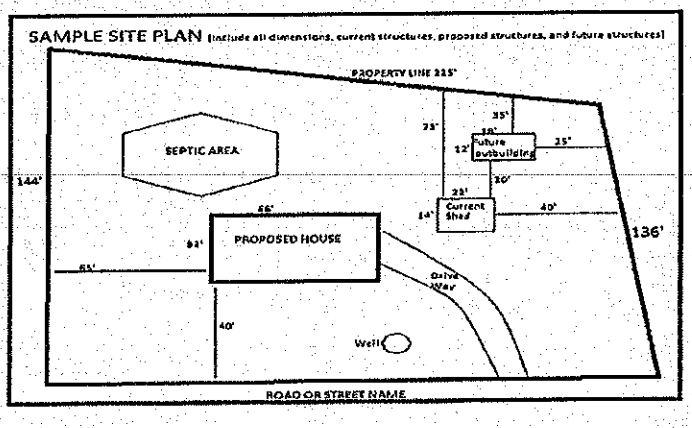
SITE PLAN WORKSHEET

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!!!***

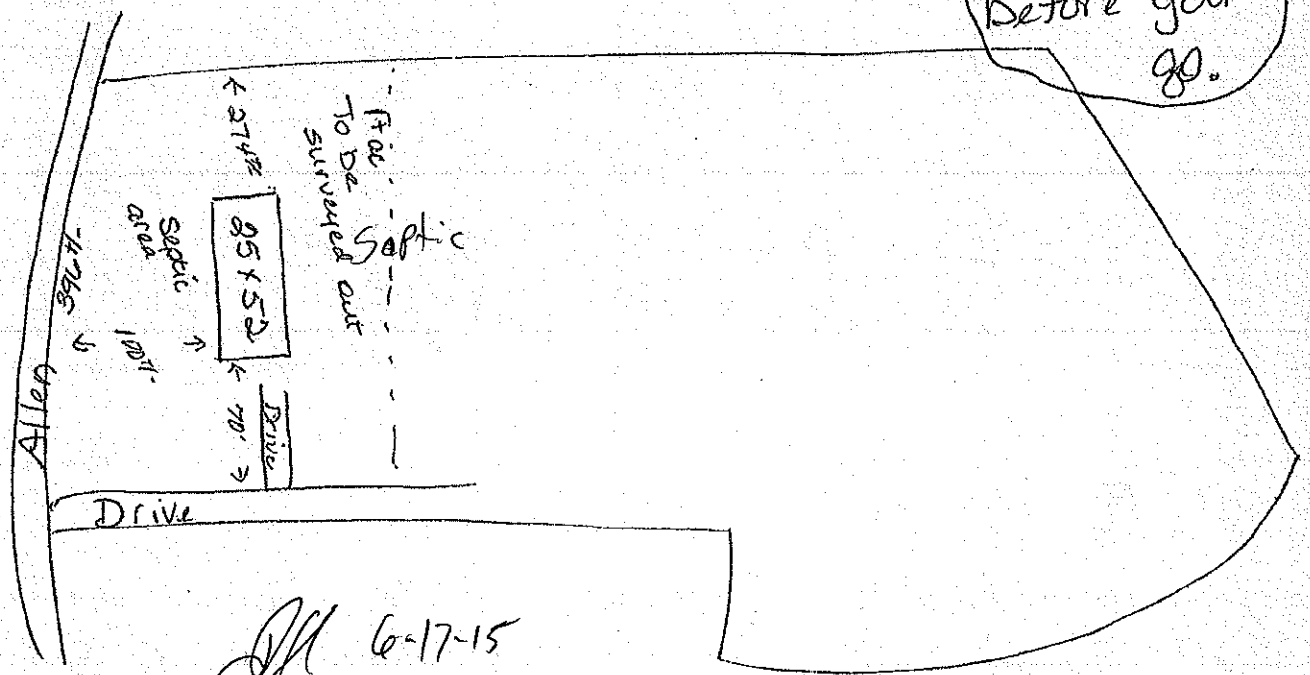
Place an (X) beside each item as you complete the site plan:
____ Property Line measurements are clearly identified... **____ All proposed structures are indicated...**

SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site
____ Front and side setbacks from property line... **____ Preferred driveway location and configuration, preferred 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



6-17-15

Signature: Debra O'Neil
REQUIRED **property owner or owner's legal representative signature.**

5/26/15
DATE

AUTHORIZATION TO ACT AS AGENT FOR OWNER

Any application/document/permit requiring a signature must be signed by the property owner or their authorized agent. This form shall be provided by the owner to allow specified individuals to act as agents for the owner. This form allows the specified individuals to sign or receive any application/document/permit on behalf of the owner. This form allows the authorized agent to make decisions on behalf of the owner pertaining to modifications of permits in the field. It is the responsibility of the owner to assure that any/all permit conditions specified on permits issued by this Division are followed.

I, Tilda Baggerly, am the legal owner of the property located at Allen Rd., identified as PIN(Parcel Identification Number) 4816282511 1, located in Iredell County, North Carolina.

I do hereby authorize (print authorized agent/company name) Deena Abee Clayton (CMH) Homes, _____, _____, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

1. Improvement Permit (IP)/ Authorization to Construct (AC).
2. Application for soil-site evaluation (new/repair).
3. Application/permit for water well/well abandonment.
4. Application for existing system.
5. Application for Improvement Permit (IP)/ Authorization to Construct (AC).

I agree to abide by any and all decisions and/or conditions between the agent acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division. This form must be fully executed before the individual's specified above will be recognized as the authorized agent.

Tilda D Baggerly — Signature of Owner — 5/22/15 — Date

Kristen Hay — Signature of Witness — 5/22/15 — 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

or

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

Type: CONSOLIDATED REAL PROPERTY
Recorded: 8/31/2015 4:47:49 PM
Fee Amt: $28.00 Page 1 of 3
Revenue Tax: $2.00
Iredell County, NC
Matthew J. McCall Register of Deeds

BK 2377 PG 97 - 99

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: $2.00

Parcel Identifier: Out of 4862-82-5111 - Verified by _____ County on the ____ day of_____, 20_____
By:_____

Mail/Box to: Gottholm, Ralston & Benton, PLLC, 117 N. Kelly Street, Statesville, NC 28677

This instrument was prepared by: C. Jason Ralston

Brief description for the Index: 0.828 acre, more or less.

THIS DEED made this 31st day of August, 2015, by and between

GRANTOR	GRANTEE
Tilda S. Baggarly and husband, Charles Allen Baggarly Whose address is: 1035 W. Memorial Highway Harmony, NC 28634	**Justin Lewis Harris and wife, Kristin Perkins Harris** Whose address is: 124 Joshua Lane Mooresville, NC 28117

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 Eagle Mills Township, Iredell County, North Carolina and more particularly described as follows:

SEE EXHIBIT A ATTACHED HERETO.

The property hereinabove described being a portion of the property acquired by Tilda S. Baggarly by deed recorded in Book 672, page 919, Iredell County Registry.

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

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

NC Bar Association Form No. 3 © 1976, Revised © 1/1/2010
Printed by Agreement with the NC Bar Association

R.O.T.C.

Page Count 3
☐NS ☐PO ☐SI

EXHIBIT A

BEGINNING at an iron pin found 4.3 feet West of the centerline of Allen Road, otherwise known as S.R. 1834 and along the northern margin of the Billy S. Martin and wife, Kathleen C. Martin property as described in Book 651, page 571; thence North 19 deg. 24 min. 50 sec. West 66.95 feet to an unmarked point in the pavement; thence North 16 deg. 42 min. 00 sec. West 50.00 feet to an unmarked point in the pavement; thence North 10 deg. 35 min. 40 sec. West 50.00 feet to an unmarked point in the pavement; thence North 05 deg. 30 min. 10 sec. West 50.00 feet to an unmarked point in the pavement; thence South 82 deg. 7 min. 20 sec. East 210.59 feet to a #4 rebar set; thence South 13 deg. 33 min. 10 sec. East 215.97 feet to a #4 rebar set along the Northern margin of the Billy S. Martin and wife, Kathleen C. Martin property as described in Book 651, page 571; thence running with the line of Martin North 82 deg. 07 min. 20 sec. West 210.59 feet to the point and place of BEGINNING, said tract containing 0.828 acres, more or less, and designated as Lot 1 on survey identified as Minor Subdivision of: "Tilda S. Baggarly Property" as prepared by Marty S. Cline, PLS, on April 8, 2015.

I further certify that:

a) there are no deed restrictions which wil be violated by the requested subdivision; and

b) there are no governmental regulations of any kind, other than those for which a variance has been applied for under the Iredell County Subdivision Ordinance regulations, which will be violated by the requested subdivision; and

c) I understand that enforcement of deed restrictions and any other contractual agreements is not the responsibility of Iredell County, will not be undertaken by Iredell County, and is the sole responsibility of the parties affected by violations of such deed restrictions and contractual agreements.

_____ _____
OWNER DATE

OWNERS' NOTARIZATION

_____ County, North Carolina

I, _____, a Notary Public of of the county and state aforesaid, hereby certify that Tilda S. Baggarly personally appeared before me this day and acknowledged the execution of the foregoing instrument.

Witness my hand and official stamp this _____

My commission expires _____.

_____
Notary Public

WATERSHED STATEMENT

To the best of my knowledge, the subdivision hereon lies within the WS-III Balance of the Hunting Creek watershed designated by the NC Division of Environmental Management as appears on the Watershed Protection Map of Iredell Co.

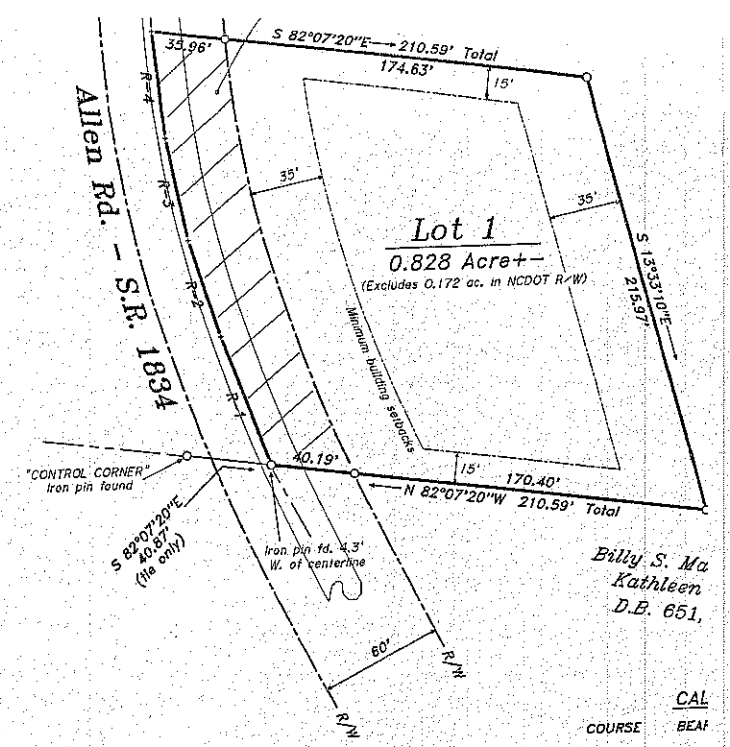
_____ _____
Subdivision Administrator Date

REVIEW OFFICER'S APPROVAL

Iredell County, North Carolina

I, _____, a Review Officer of Iredell County, certify that the map or plat to which this certification is affixed meets all statutory requirements for recordation.

_____ _____
Review Officer Date



Billy S. Ma
Kathleen
D.B. 651,

CAL

COURSE	BEAR
R-1	N 19°
R-2	N 16°
R-3	N 10°
R-4	N 05°
R-5	S 06°
R-6	S 04°
R-7	S 00°

Certificate of Approval for Recording

I hereby certify that the subdivision plat shown hereon has been found to comply with the Subdivision Regulations of the County of Iredell, North Carolina and that this plat has been approved by the Subdivision Administrator for recording in the Office of the Register of Deeds of Iredell County.

_____ _____
Subdivision Administrator Date
Iredell County, North Carolina

O = #4 re
+ = Unma
—ww— = Ov
Ø = Powe

IREDELL COUNTY

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

APPLICATION NUMBER
210949
Issue Date: 06/02/2015

Permit Type: IMPROVEMENT PERMIT APPLICATION

Parcel Number	Street Address	Jurisdiction
4862825111.000	334 ALLEN ROAD	

Owner Information	Applicant Information	Contractor Information
Owner: BAGGARLY TILDA S Address: 1518 IREDELL CO, NC 28625 Phone:	Applicant: ABEE'S CLEARING & GRAD Address: 2381 US HIGHWAY 64 WEST MOCKSVILLE, NC 27028 Phone: 704-239-3693	Contractor: ABEE'S CLEARING & GRAD Address: 2381 US HIGHWAY 64 WEST MOCKSVILLE, NC 27028 Phone: 704-239-3693 License Type: UNLI License Number: NOT LICENSED

Project Description

NEW MODULAR HOME - IREDELL

Scope of Work

MODULAR

Permit Details:

EFT	IMPROVEMENT PERMIT FEE	Amount:	500.00
		Amount:	
		Amount:	
		Amount:	
		Amount:	
		Amount:	
		Amount:	

I hereby certify that all information in this application is correct and all work will comply with the state code and all other applicable state and local laws, ordinances and regulations. The respective department will be notified of any changes in the approved plans, a change of contractor, and/or specifications for the project permitted herein. This application becomes a permit only when validated and approved.

Date: 06/02/2015

Signature of Owner/Contractor

ANY PERMIT ISSUED EXPIRES SIX (6) MONTHS AFTER ISSUANCE IF NO INSPECTIONS HAVE BEEN MADE. ANY PERMIT ISSUED SHALL EXPIRE TWELVE (12) MONTHS AFTER LAST INSPECTION IF THE WORK IS DISCONTINUED.

Permit Number	39776	TOTAL FEES:	$ 500.00

IREDELL COUNTY

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

FILE COPY

APPLICATION NUMBER
210949
Issue Date: 06/02/2015

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4862825111.000	334 ALLEN ROAD, HARMONY, NC 28634	

Owner Information	Applicant Information
Owner: BAGGARLY TILDA S	Applicant: ABEE'S CLEARING & GRAD
Address: 1518 IREDELL CO, NC 28625	Address: 2381 US HIGHWAY 64 WEST MOCKSVILLE, NC 27028
Phone:	Phone: 704-239-3693

Use Requested	Zone Code
MODULAR	

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
21.160	35.00	35.00	15.00	15.00	BO	X

Remarks:

86329

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.

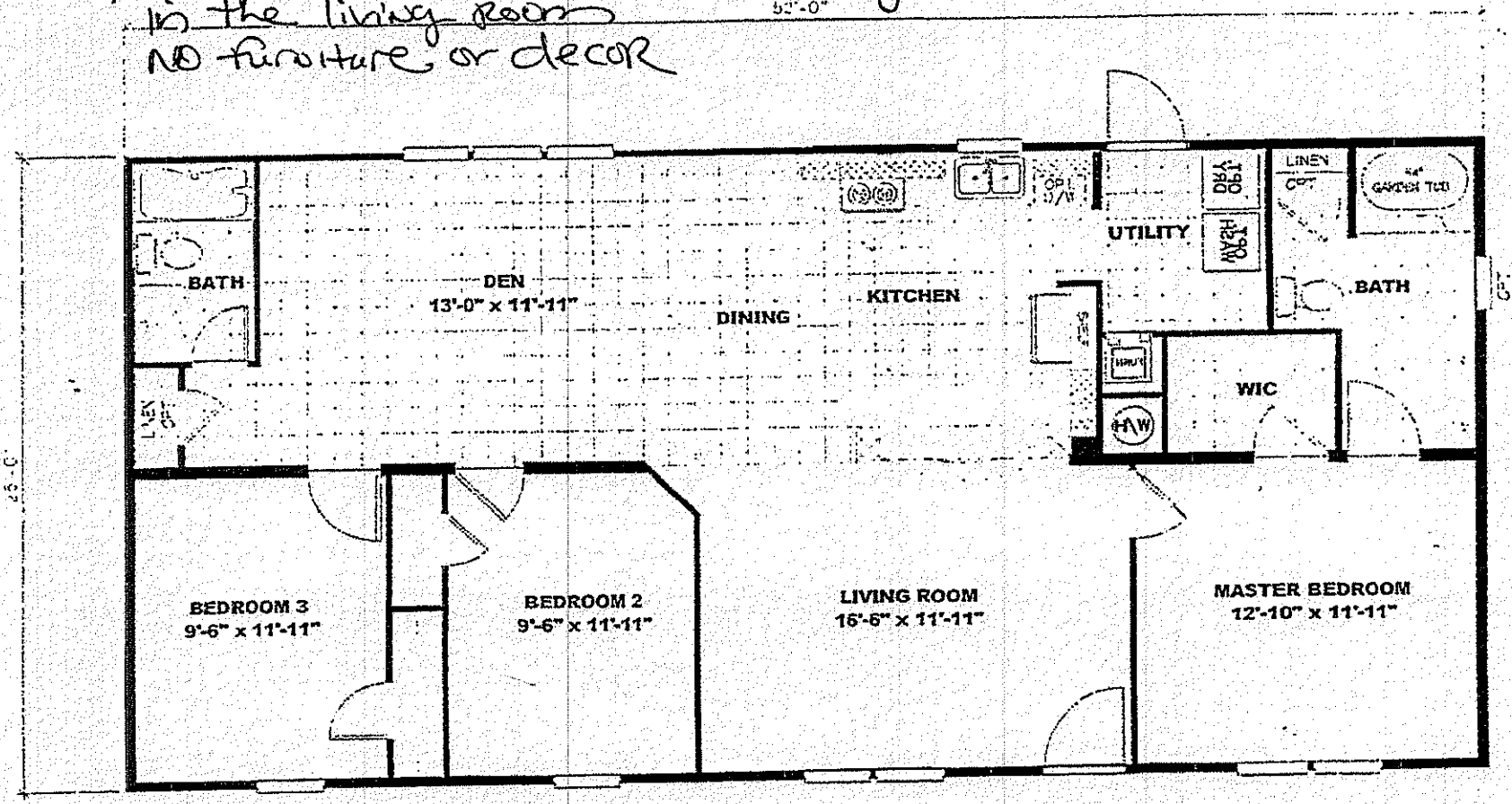
See Attached

Applicant: _____ Date: _____

Permit Number	39775	TOTAL FEES:	$ 77.25

WYNN

All options as shown in display model except carpet in the living room
NO furniture or decor



Deena Alve 5/20/15
Justin Henderson 6-29-15

25 WIDE
(THREE BEDROOM STANDARD)

Price also to include:
- 2x6 Outside walls w/ R-19 insulation
- Icemaker
- Outside faucet, dishwasher, upgrade insulation, 50 gal water heater
- Upgrade cabinets throughout