# IREDELL COUNTY

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

| APPLICATION NUMBER |
|---|
| 201996 |
| Issue Date: 03/04/2014 |

## ZONING PERMIT

| Parcel Number | Street Address | Jurisdiction |
|---|---|---|
| 3797916037.000 | 118 ELLER DRIVE, STONY POINT, NC 28678 | STONY POINT |

| Owner Information | Applicant Information |
|---|---|
| Owner: CARTER MARK E+BEVERLY | Applicant: CARTER, MARK |
| Address: 2743 HARMONY HWY<br>HARMONY, NC 28634 | Address: 4941 TAYLORSVILLE HWY<br>STONY POINT, NC 28678 |
| Phone: | Phone: 704-880-8179 |

| Use Requested | Zone Code |
|---|---|
| sfd | RA |

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

**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 | 7288 | TOTAL FEES: | $ 77.25 |
|---|---|---|---|

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| APPLICATION NUMBER |
|---|
| 201996 |
| Issue Date: 03/04/2014 |

## Permit Type: IMPROVEMENT PERMIT APPLICATION

| Parcel Number | Street Address | Jurisdiction |
|---|---|---|
| 3797916037.000 | 118 ELLER DRIVE | STONY POINT |

| Owner Information | Applicant Information | Contractor Information |
|---|---|---|
| Owner: CARTER MARK E+BEVERLY<br>Address: 2743 HARMONY HWY<br>HARMONY, NC 28634<br>Phone: | Applicant: CARTER, MARK<br>Address: 4941 TAYLORSVILLE HWY<br>STONY POINT, NC 28678<br>Phone: 704-880-8179 | Contractor: CARTER, MARK<br>Address: 4941 TAYLORSVILLE HWY<br>STONY POINT, NC 28678<br>Phone:<br>License Type License Number |

**Project Description**

NEW SINGLE FAMILY - IREDELL

**Scope of Work**

sfd

**Permit Details:**

| | | | |
|---|---|---|---|
| | 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.

Signature of Owner/Contractor

**Date:** 03/04/2014

***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 | 7290 | TOTAL FEES: | $ 500.00 |
|---|---|---|---|