IREDELL COUNTY HEALTH DEPARTMENT

Application For Improvement Permit and/or Authorization To Construct, Existing System Inspection

(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	Work Phone
Lake Norman Signature Homes LLC	584 Brawley School Rd Ste 104 Mooresville NC 28117	704-799-1851	704-799-1851
Owner Name	Mailing Address	Home Phone	Work Phone

4. **Property Information:**

Street Address	Subdivision Name	Section/Phase and Lot Number
125 Brockton Lane	The Point	Phase 9 / 979

Driving Directions: _____

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

(✓) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
( ) Repair To Failing Septic System

Maximum Number of Bedrooms 4
Maximum Number of Occupants ___
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 _____

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6. **Proposed Water Supply:**

( ) New Well ( ) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

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7. **Desired Septic System Type:** ***(You may rank in order of preference, if any)***

( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other_____ ( ) No Preference

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8. **Please Answer The Following To The Best of Your Ability:**

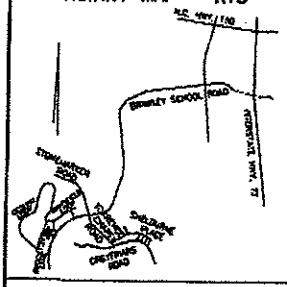
( ) Yes (✓) No **Does the site contain any jurisdictional wetlands?**
( ) Yes (✓) No **Is any non-domestic sewage (i.e. industry) to be generated?**
( ) Yes (✓) No **Is the site subject to approval by any other public agency?**

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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:** _____ 12/20/05
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**

VICINITY MAP – NTS



SURVEYOR CERTIFICATION

THIS IS TO CERTIFY THAT ON THE 23RD DAY OF AUGUST, 2005 AN ACTUAL SURVEY WAS MADE UNDER MY SUPERVISION OF THE PROPERTY SHOWN ON THIS PLAT, AND THAT THE BOUNDARY LINES AND THE IMPROVEMENTS, IF ANY, ARE AS SHOWN HEREON. THIS PLAT MEETS THE MINIMUM STANDARDS OF PRACTICE FOR LAND SURVEYING IN NORTH CAROLINA, BOARD RULE .1600 (21 NCAC 56) AND THE RATIO OF PRECISION DOES NOT EXCEED AN ERROR OF CLOSURE OF ONE (1) FOOT PER 10,000 FEET OF PERIMETER SURVEYED NOR 20 SECONDS TIMES THE SQUARE ROOT OF THE NUMBER OF ANGLES TURNED.

SIGNED _____

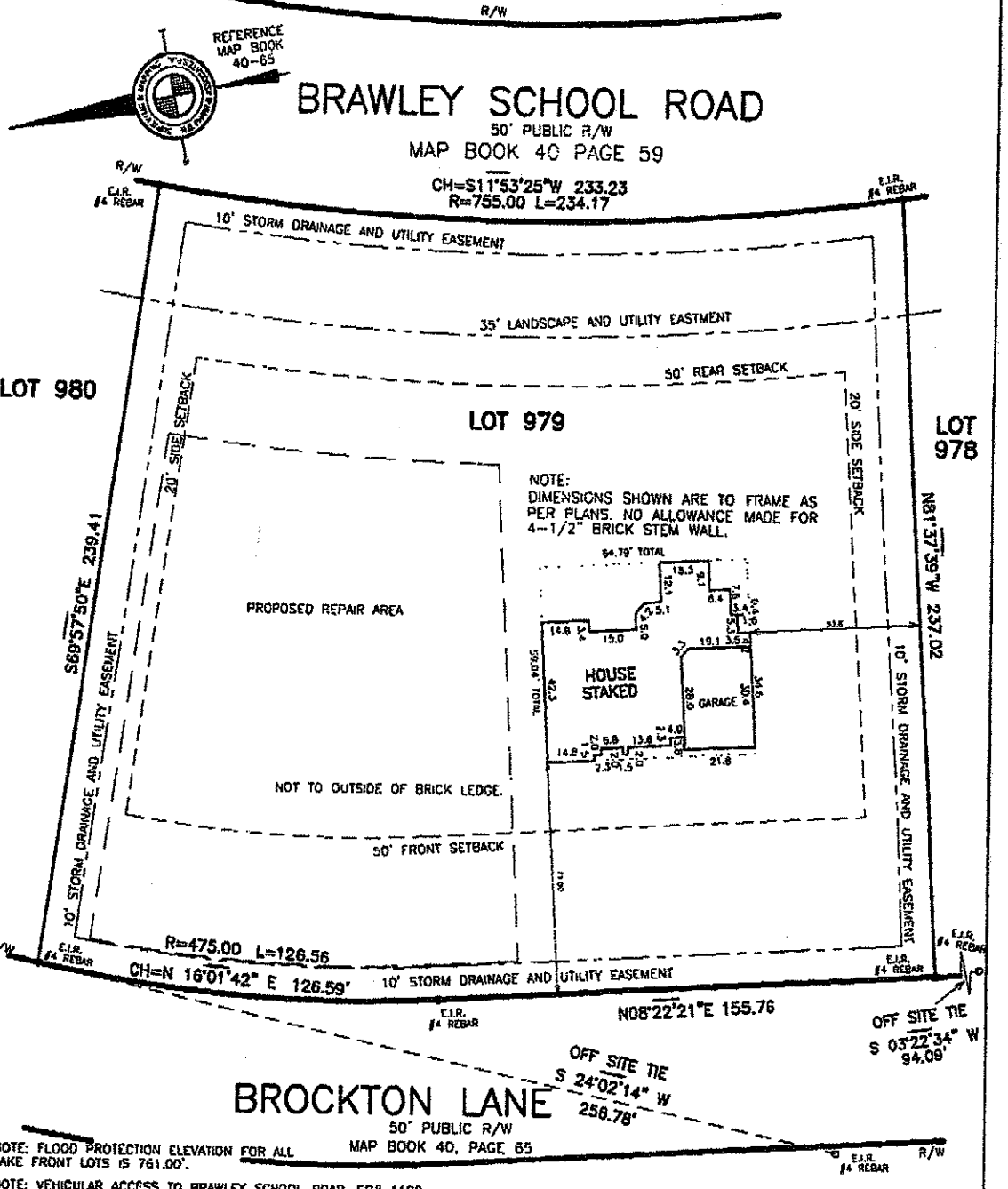
FLOOD CERTIFICATION

THIS IS TO CERTIFY THAT THE SUBJECT PROPERTY IS NOT LOCATED IN A SPECIAL FLOOD HAZARD AREA AS SHOWN ON MAPS PREPARED BY THE FEDERAL EMERGENCY MANAGEMENT AGENCY, FEDERAL INSURANCE ADMINISTRATION, DATED JUNE 22, 1998 & JANUARY 19, 2000. F.I.R.M. COMMUNITY PANEL NO. 370313 0020 C & 370156 0005 D

1 INCH = 40 FEET

40 0 40 80

LEGEND
E.I.R. = EXISTING IRON ROD
N.I.R. = NEW IRON ROD
R/W = RIGHT OF WAY
SQ.FT. = SQUARE FEET



NOTE: FLOOD PROTECTION ELEVATION FOR ALL LAKE FRONT LOTS IS 761.00'.

NOTE: VEHICULAR ACCESS TO BRAWLEY SCHOOL ROAD, SR# 1100 FROM INDIVIDUAL LOTS IS PROHIBITED.

PROPERTY SUBJECT TO DECLARATION OF COVENANTS, CONDITIONS AND RESTRICTIONS RECORDED IN DEED BOOK 1095, PAGE 1206 OF THE IREDELL COUNTY REGISTRY.

AREA LOT 979
61,222 SQ.FT.
OR 1.4055 ACRES

SURVEY OF
LOT 979, THE POINT, PHASE 9, MAP, SHEET 1 OF 2

R. B. PHARR & ASSOCIATES
PROFESSIONAL SURVEYORS
15801 S. MAIN STREET
CORNELIUS, NC 28031
TEL: 704-895-1750
FAX: 704-895-1964

DAVIDSON TOWNSHIP, IREDELL COUNTY, N.C.
PREPARED FOR
LAKE NORMAN SIGNATURE HOMES

REFERENCE: MAP BOOK 40, PAGE 65
TAX PARCEL: 4624-27-7879.000

CREW:	DRAWN:	REVISED:	JOB NUMBER:
FH	TOM K		621818