IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
Application For Improvement Permit

ALL items on this application form must be completed before Health Department can begin work. One application must be completed by the property owner or agent for each (proposed) site.

PERSONAL INFORMATION:

Applicant	Phone #	Mailing Address	City	State	Zip Code
Tim Christman	704-341-4453	118 Hawk Run Ln	Troutman	NC	28166
Current Property Owner		Mailing Address	City	State	Zip Code
Tim Christman					

PROPERTY INFORMATION:

(Proposed) Subdivision Name	(Proposed) Lot #	(Proposed) Block/Section #	State Road #
141 Hanes Bee Ln			

(Proposed) Water Supply: Public, Private Well	**Preliminary Plat Approval Date** (DEVELOPERS ONLY)	Tax Map #
Private Well		

Specific Directions to Property Brawley School Rd West to Stonemarker, Turn Right, to Hanes Bee Ln - Turn Rt - to End

TYPE OF FACILITY: (use check (X) or number as appropriate)

House X Mobile Home _____ Commercial _____ No. Bedrooms 4 No. Baths 3 1/2

No. Persons or Employees (commercial only) _____ Basement NO Basement with Plumbing NO

Crawl Space YES Concrete Slab NO Garbage Disposal YES Jaccuzi or spa YES

COVENANT AND SIGNATURE:

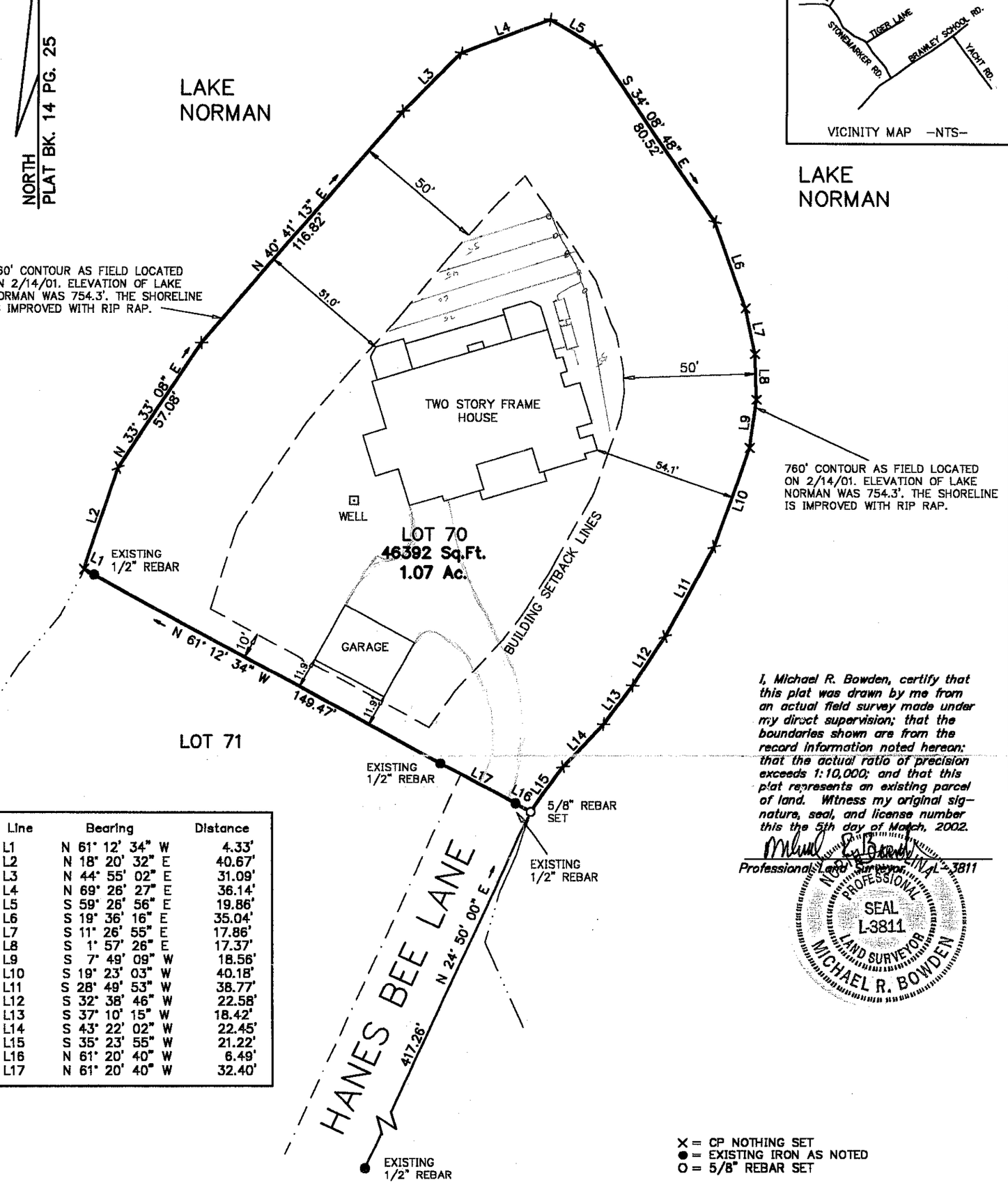
I hereby make application to the Iredell County Health Department for a soils/site evaluation of the property described above. This evaluation is to be conducted for the sole purpose of obtaining a septic system Improvement Permit. I hereby authorize Iredell County Health Department representatives to go onto the above property for purposes of conducting this evaluation. I understand that, by state law, any Improvement Permit issued on the above property may be voided if substantial changes are made to the designated sewage system site. The issuance of an Improvement Permit by the Iredell County Health Department does not relieve me from compliance with all other relevant state/local laws or regulations. As owner or authorized agent, I covenant that the contents of this application are true and represent the maximum facilities intended to be placed on this property to my knowledge to date.

I understand that any Improvement Permit issued on the above property is valid for five (5) years from the issuance date and is subject to revocation if the above described site plans or intended use changes.

3/6/02 DATE _____ SIGNATURE OF OWNER/AUTHORIZED AGENT

RECREATION LOTS SECTION #6

PLAT BK. 14 PG. 25



Line	Bearing	Distance
L1	N 61° 12' 34" W	4.33'
L2	N 18° 20' 32" E	40.67'
L3	N 44° 55' 02" E	31.09'
L4	N 69° 26' 27" E	36.14'
L5	S 59° 25' 56" E	19.86'
L6	S 19° 36' 16" E	35.04'
L7	S 11° 26' 55" E	17.86'
L8	S 1° 57' 26" E	17.37'
L9	S 7° 49' 09" W	18.56'
L10	S 19° 23' 03" W	40.18'
L11	S 28° 49' 53" W	38.77'
L12	S 32° 38' 46" W	22.58'
L13	S 37° 10' 15" W	18.42'
L14	S 43° 22' 02" W	22.45'
L15	S 35° 23' 55" W	21.22'
L16	N 61° 20' 40" W	6.49'
L17	N 61° 20' 40" W	32.40'

I, Michael R. Bowden, certify that this plat was drawn by me from an actual field survey made under my direct supervision; that the boundaries shown are from the record information noted hereon; that the actual ratio of precision exceeds 1:10,000; and that this plat represents an existing parcel of land. Witness my original signature, seal, and license number this the 5th day of March, 2002.

Professional Land Surveyor, L-3811

NORTH CAROLINA PROFESSIONAL SEAL L-3811 LAND SURVEYOR MICHAEL R. BOWDEN

X = CP NOTHING SET
● = EXISTING IRON AS NOTED
O = 5/8" REBAR SET

40 20 0 40 80

SCALE OF DRAWING IS 1 INCH = 40 FEET

NOTES:

1. TRAVERSE ADJUSTED BY COMPASS RULE ADJUSTMENT METHOD.
2. AREAS DETERMINED BY COORDINATE COMPUTATIONS.
3. ALL DISTANCES ARE HORIZONTAL GROUND DISTANCES.
4. THIS PLAT IS OF A SURVEY OF AN EXISTING PARCEL OR PARCELS OF LAND.

REFERENCES: DEEDS AND MAPS ARE SHOWN HEREON

Survey for:

KOEHLER HOMES

HANES BEE LANE
DAVIDSON TOWNSHIP
IREDELL CO., N. C.

Project # 010033-1 Date: 14 FEBRUARY 2001

BOWDEN SURVEYING & MAPPING (704) 506-2247
195-A WEST PLAZA DRIVE
MOORESVILLE, N.C. 28117