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:

Greg Fisher	662-6607	PO Box 3302	Mooresville	NC	28117
Applicant	Phone #	Mailing Address	City	State	Zip Code

— SAME —				
Current Property Owner	Mailing Address	City	State	Zip Code

PROPERTY INFORMATION:

The Harbour Co	45		Ivanhoe Cove
(Proposed) Subdivision Name	(Proposed) Lot #	(Proposed) Block/Section #	State Road #

	'97	4625-94-1684-.1
(Proposed) Water Supply: Public, Private Well	**Preliminary Plat Approval Date** (DEVELOPERS ONLY)	Tax Map #

Specific Directions to Property _____

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

House ✓ Mobile Home _____ Commercial _____ No. Bedrooms 4 No. Baths 4

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

Crawl Space _____ Concrete Slab _____ Garbage Disposal _____ Jaccuzi or spa _____

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.

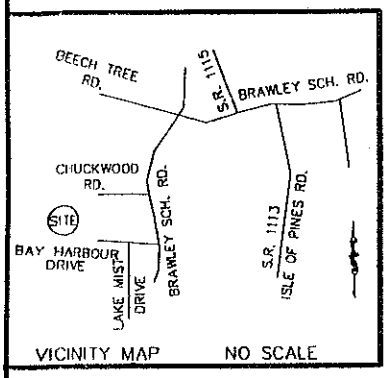
I understand that any Improvement Permit issued on the above property is valid for five (5) years from the issuance date and is subject to revocation if the above described site plans or intended use changes.

6/6/02 DATE Tony Clark, REHS SIGNATURE OF OWNER/AUTHORIZED AGENT

survey made under my supervision recorded in deed book_____, page_____, and/or plat book 29, page 8, that the ratio of precision is 1':10,000, that this map was prepared in accordance with the General Statutes of North Carolina, Chapter 89C.

my hand and seal on the 10, day of SEPTEMBER, A.D. 20H C 2014

SEAL
WILLIAM M. ALLEN, PLS
L-3499
NORTH CAROLINA
LAND SURVEYOR
WILLIAM M. ALLEN



LAKE NORMAN



LOT 46

LOT 45
0.61 AC.

LOT 44

LINE	DIRECTION	DISTANCE
L1	S 72°36'47" E	12.47'
L2	S 17°14'12" E	23.72'
L3	S 05°15'56" W	16.65'
L4	S 60°54'54" E	19.56'
L5	N 75°44'52" E	31.20'
L6	N 81°35'43" E	29.63'
L7	N 89°07'09" W	0.83'

0' 25' 50' 100'
SCALE IN FEET

NOTES
1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENT AND/OR RIGHTS-OF-WAY OF RECORD.

LEGEND
= P.P. = POWER POLE
= DUKE POWER TRANS.