**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 |
|---|---|---|---|---|---|
| Crescent Resources | 663-6905 | PO Box 1003 | Cher | NC | 28201 |
| Current Property Owner | | Mailing Address | City | State | Zip Code |
| same | | | | | |

PROPERTY INFORMATION:

| (Proposed) Subdivision Name | (Proposed) Lot # | (Proposed) Block/Section # | State Road # |
|---|---|---|---|
| Harbour III | 68 | III | |

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

Specific Directions to Property South Brawley
R Chuckwood
L Morraws Ridge
on left

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 partial ✓ Basement with Plumbing ✓

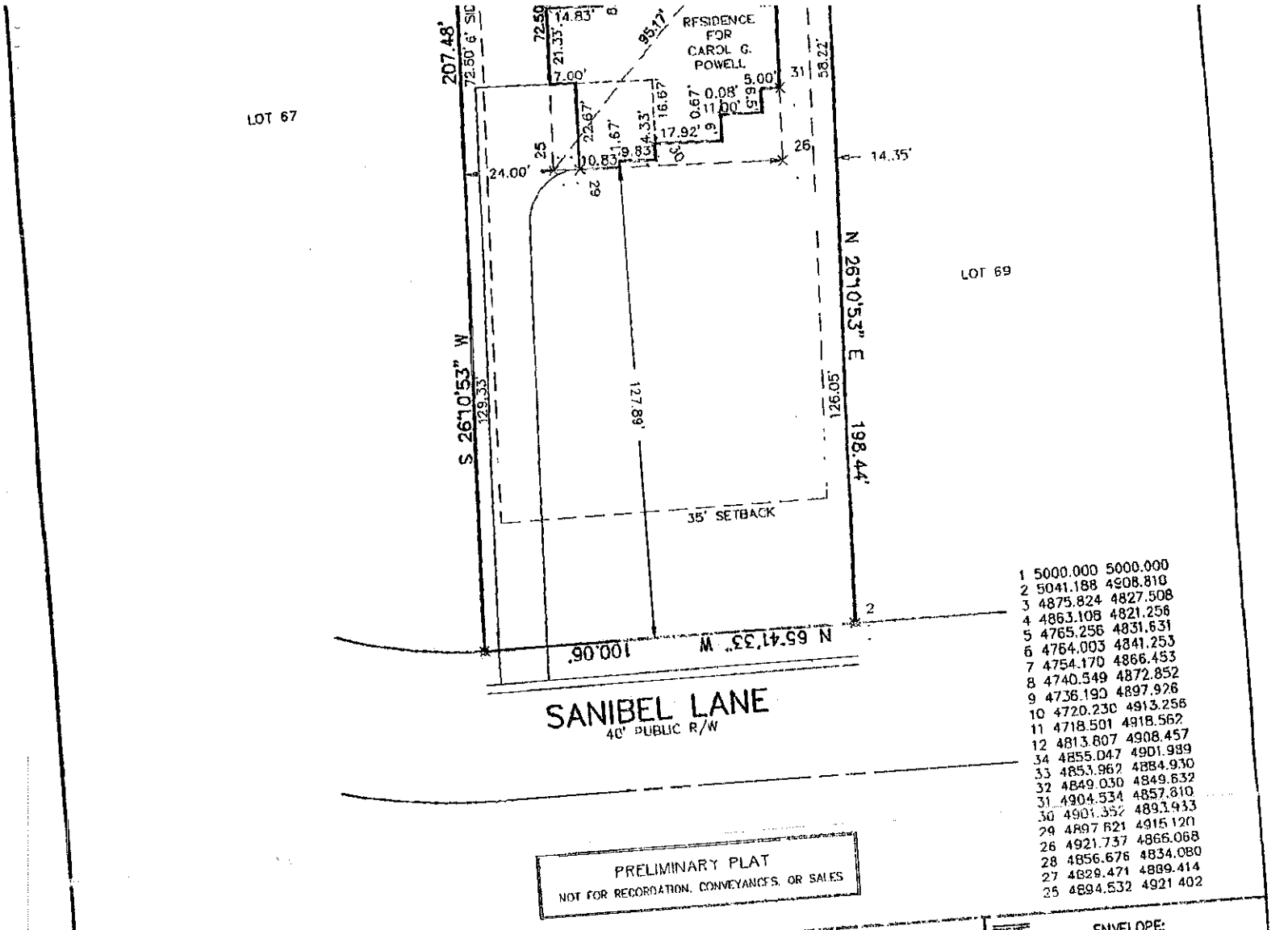
Crawl Space ✓ Concrete Slab _____ Garbage Disposal ✓ Jaccuzi or spa _____

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.

3-19-96 DATE Tony C Jacobs CPSS SIGNATURE OF OWNER/AUTHORIZED AGENT




PRELIMINARY PLAT
NOT FOR RECORDATION, CONVEYANCES, OR SALES

| REV. 1 | 1-5-98 | SBM | MOVED HOUSE RIGHT |
|---|---|---|---|

0" 1" SCALE: 1" = 40'

Lucas-Forman Incorporated
Land Surveying
Planning & Engineering
4000 Stuart Andrew Boulevard
Charlotte, North Carolina 28217
P.O. Box 11386 28220-0386
(704) 527-6626 Fax 527-9640

# PLOT & HUBBING PLAN
of
## LOT 68 at SANIBEL ROAD
DAVIDSON TOWNSHIP, IREDELL COUNTY, N.C.

LOT 68 BLOCK 3 MAPBOOK 29 PAGE 6
SUBDIVISION SUNSET POINTE II at THE HARBOUR
DEED REFERENCE:
for
McCRANIE BUILDERS

| REVIEWED BY | DATE: 1-5-98 | REV. 0 |
|---|---|---|
| DRAWN: S.B. McCARN | UPDATE: | |

SCALE: ENVELOPE: A

JOB# 97455 FILE# IRE

JAN-06-98 TUE 09:59 LUCAS FORMAN FAX NO. 7045279640 P.02