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 SIG. HOMES	584 BRAWLEY SCHOOL RD STE 104 MOORESVILLE, NC 28117	704/799-1851	704/361-0402 PAUL PHILLIPS
Owner Name	Mailing Address	Home Phone	Work Phone

4. **Property Information:**

Street Address	Subdivision Name	Section/Phase and Lot Number
2501 BRAWLEY SCHOOL RD	THE POINT	1231

Driving Directions: BRAWLEY SCHOOL RD THRU TRAFFIC CIRCLE 2ND HOUSE PAST YACHT RD ON LEFT

****

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 4
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 ___

****

6. **Proposed Water Supply:**

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

****

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

( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other ___ (✓) No Preference

****

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?

****

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:** [signature] 11-17-05

Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**

IREDELL COUNTY HEATLH DEPARTMENT

PAGE 2: *SITE PLAN WORKSHEET*

SEE THE SAMPLE SITE PLAN BELOW. INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!

Place an (X) beside each item as you complete the site plan:

_____ **Property Line measurements are clearly identified…**
_____ **All proposed structures are indicated…**
SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site
_____ **Front and side setbacks from property line…**
_____ **Preferred driveway location and configuration, preferred well location…**
_____ **Area you prefer your septic system to be placed…**
_____ **North arrow, or other sufficient indicator of direction…**

Circle N/A on the following if appropriate:

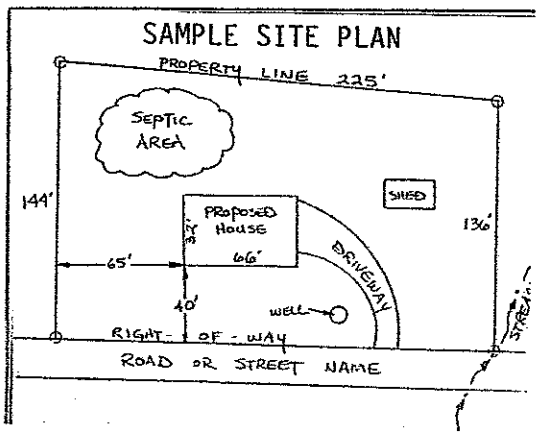
_____ **Location of septic systems and wells within 100' of your property…** **N/A**
_____ **Location of easements and rights of ways on your property…** **N/A**
_____ **Location of any designated wetlands on the property…** **N/A**

Signature: _____
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

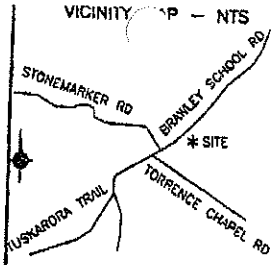
_____
DATE

USE THIS SPACE TO DRAW YOUR SITE PLAN

See Attached



VICINITY MAP – NTS



PLOT CERTIFICATION

THIS IS TO CERTIFY THAT ON THE 20TH DAY OF JUNE, 2005 THIS PLOT PLAN WAS MADE UNDER MY SUPERVISION OF THE PROPERTY SHOWN ON THIS PLAT, AND THAT THE BOUNDARY LINES WERE PLOTTED FROM INFORMATION PROVIDED BY OTHERS, AND THE IMPROVEMENTS, UNLESS OTHERWISE INDICATED, ARE PROPOSED. NO ACTUAL FIELD SURVEY WAS PERFORMED IN THE PREPARATION OF THIS MAP. THIS IS A PRELIMINARY MAP AND IS NOT INTENDED TO BE USED FOR CONVEYANCES, RECORDATION OR SALES.

SIGNED Dan A. Pharr L-4559

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
COMMUNITY PANEL 337513 0200 C

1 INCH = 50 FEET

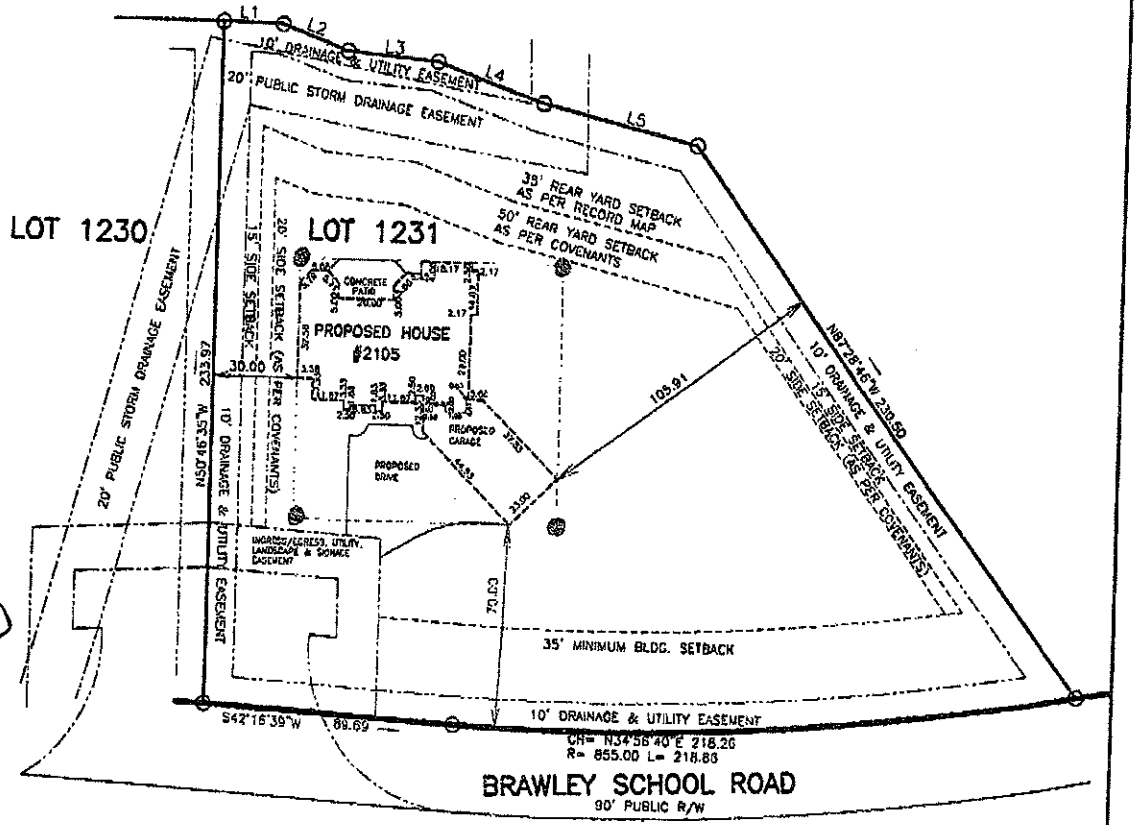
50 0 50 100

LEGEND:
E.I.R. = EXISTING IRON ROD
N.I.R. = NEW IRON ROD
R/W = RIGHT OF WAY
C/L = CENTER LINE
SQ.FT. = SQUARE FOOT

NOTE
EACH LOT HAS A 10' STORM DRAINAGE & UTILITY EASEMENT WHICH RUNS WITH THE PERIMETER OF THE LOT.
FLOOD PROTECTION ELEVATION FOR ALL LAKE FRONT LOTS IS 761.00'.

REFERENCE MAP BOOK 43-106

HOLE # 16
THE POINT ON NORMAN, LLC
DEED BOOK 1088 PAGE 89
MAP BOOK 30 PAGE
110-118



AREA 1231
51,648 SQ.FT.
OR 1.185 ACRES

LINE TABLE		
LINE	LENGTH	BEARING
L1	21.13	S40°05'21"W
L2	25.57	N58°33'42"E
L3	32.47	N43°53'55"E
L4	39.66	N58°47'41"E
L5	55.98	N52°35'21"E

PLOT PLAN OF
LOT 1231 THE POINT, PHASE 12 MAP 1

B. PHARR & ASSOCIATES
PROFESSIONAL SURVEYORS
19801 S. MAIN STREET
CORNELIUS, NC 28031
TEL: 704-895-1730
FAX: 704-895-1984

CITY OF MOORESVILLE, IREDELL COUNTY, NORTH CAROLINA
PREPARED FOR
LAKE NORMAN SIGNATURE HOMES

REFERENCE: MAP BOOK 43 PAGE 106
TAX PARCEL: 4625-61-9860-000
DRAWN: RAY | REVISED: | VERIFIED: | JOB NUMBER: 85198

11-17-05