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
Tom Stevenson Builders	704-201 7270	631 Brawley School	Mooresville	N.C.	28117
Current Property Owner		Mailing Address	City	State	Zip Code
Jerry Merone					

PROPERTY INFORMATION:

(Proposed) Subdivision Name	(Proposed) Lot #	(Proposed) Block/Section #	State Road #
Point	425		White House

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

Specific Directions to Property ~~Marshan Mill~~ Brawley School to Marshan Mill Take Right Go to

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

House ✓ Mobile Home _____ Commercial _____ No. Bedrooms 4 No. Baths 5

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.

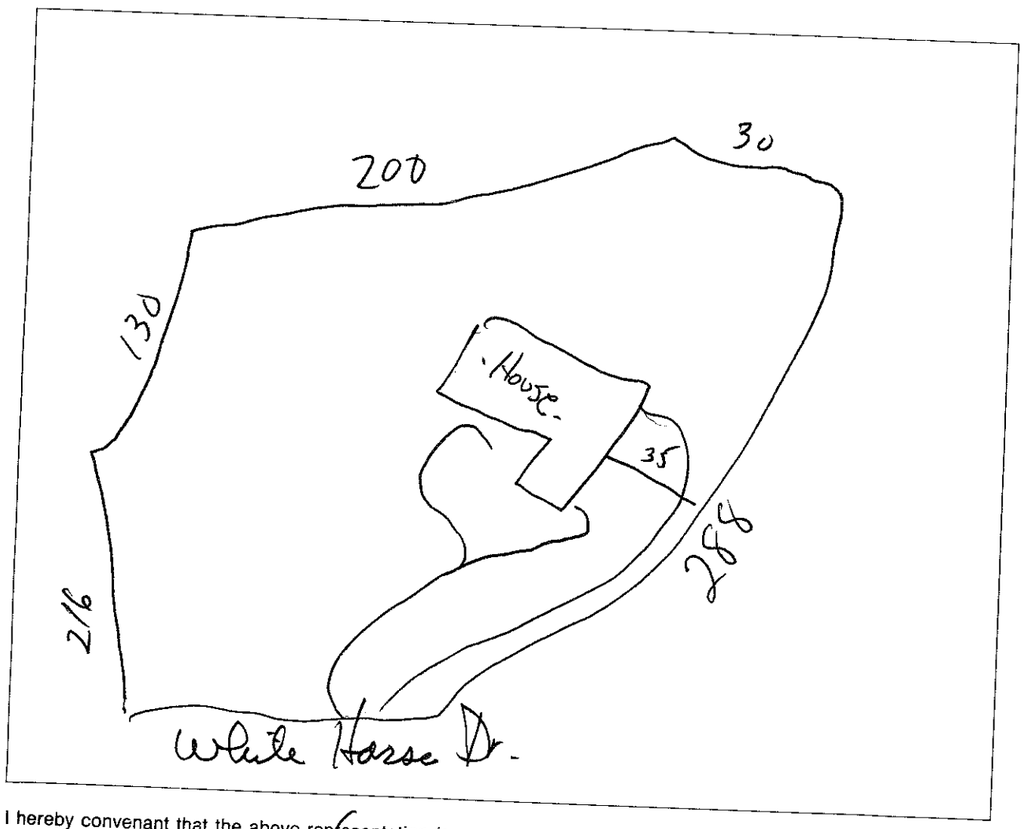
4-28-04 DATE Tom Stevens SIGNATURE OF OWNER/AUTHORIZED AGENT

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
Application For Improvement Permit
Site Plan Form

INSTRUCTIONS TO APPLICANT: (Items in Parentheses are to be performed by DEVELOPERS ONLY)

All property corners must be staked and flagged with dimensions matching those shown on an approved final (preliminary) plat (**and** proposed house dimensions must be staked and flagged) before the Iredell County Health Department can begin review work on this proposed site. An application for an Improvement Permit is considered complete **only** when this site plan form is completed, signed, and attached to the application form.

As Close To Scale As Is Possible: 1. Draw in the proposed lot showing **all** proposed lot dimensions and orientation to proposed streets or roads. 2. Draw in the proposed structure showing dimensions and distances to property lines (include decks, walkways, etc.). E. Draw in the proposed driveway location. 4. Draw in all wells, both existing and proposed, including those on adjacent property (if known). 5. Draw in any other structure ie. sheds, outbuildings, pools, etc. which will occupy space on the proposed lot.



I hereby convenant that the above representation is correct to the best of my knowledge and ability.

4-28-06 Date Jon Steven SIGNATURE OF OWNER/AUTHORIZED AGENT

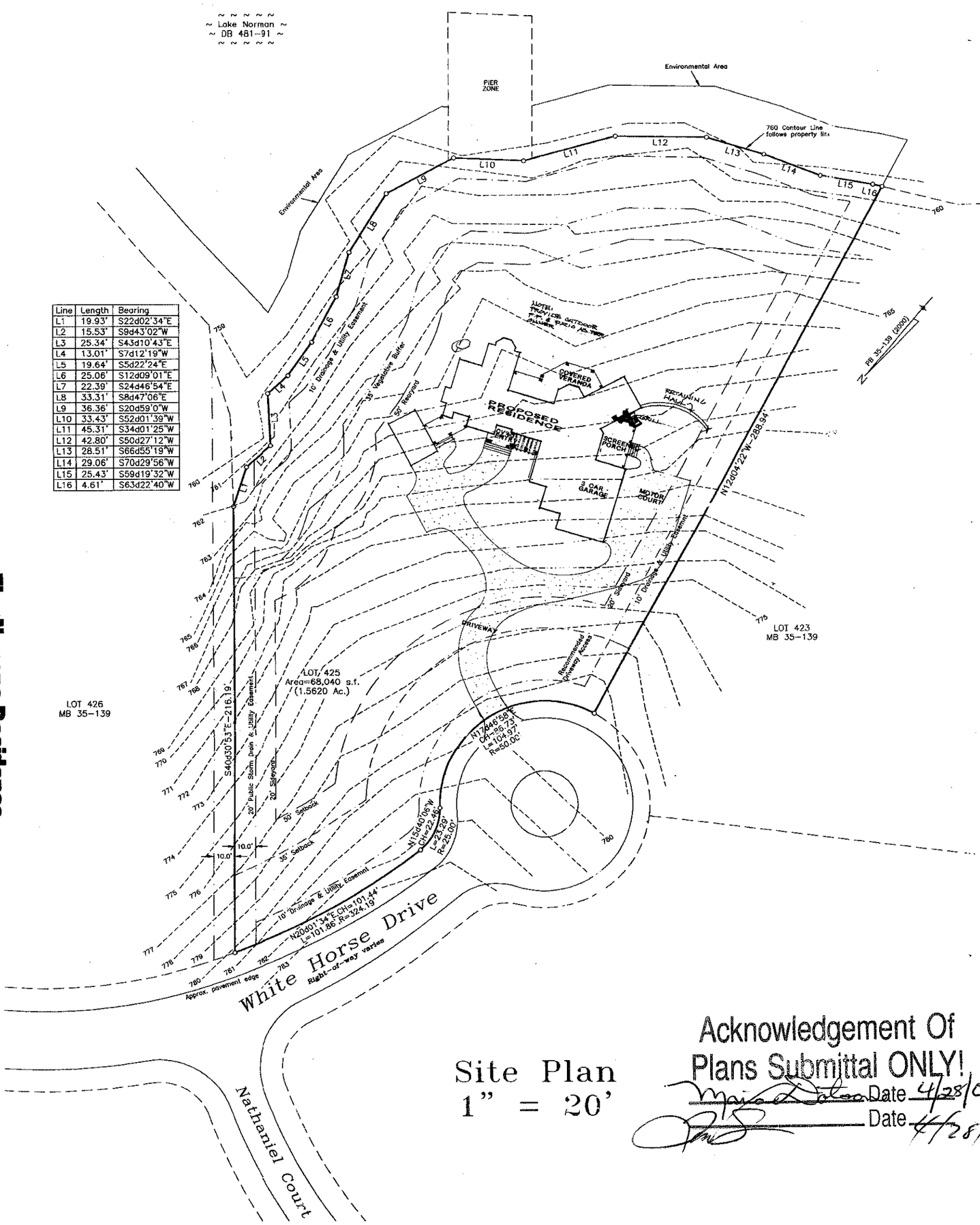
4. This site is subject to an Architectural Control Committee.
5. This site is zoned R-20 CUD; however, setbacks & contours are taken from dated 12-07-99.
6. Flood Protection Elevation for all lakefront lots is 761.0'. This property subject to 10' Flood Easement to Elevation 770' per Duke Power.
7. The area below the 760' Contour along the shoreline has been designated as Environmental Area by The Duke Power Shoreline Management Plan. This Environmental Area may not be disturbed, altered, or removed and no structures, piers, docks or fill of any type may be placed in or over it.
8. Chambered Septic System and Repair off-site on Lot 425A.

The Norcuna Residence

Lot 425, White Horse Drive

THE POINT

Line	Length	Bearing
L1	19.93'	S22d02'34"E
L2	15.53'	S9d43'02"W
L3	25.34'	S43d10'43"E
L4	13.01'	S7d12'19"W
L5	19.64'	S5d22'24"E
L6	25.06'	S12d09'01"E
L7	22.39'	S24d46'54"E
L8	33.31'	S8d47'06"E
L9	36.36'	S20d59'0"W
L10	33.43'	S52d01'39"W
L11	45.31'	S34d01'25"W
L12	42.80'	S50d27'12"W
L13	28.51'	S66d55'19"W
L14	29.06'	S70d29'56"W
L15	25.43'	S59d19'32"W
L16	4.61'	S63d22'40"W



Site Plan
1" = 20'

Acknowledgement Of
Plans Submittal ONLY!

Date 4/28/04

Date 4/28/04

Christopher Phipps & Associates
a residential design firm
225 East Worthington Avenue
Suite 200
Charlotte, NC 28203
TEL: 704-377-6566
FAX: 704-377-6596

FEBRUARY 19, 2004