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207391 Paid $40.00 Statesville

# IREDELL COUNTY HEALTH DEPARTMENT

*ENVIRONMENTAL HEALTH DIVISION*

PAGE 1: *APPLICATION FORM*

**Application For:** ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) Septic Improvement Permit ( ) Authorization to Construct (X) Existing System Inspection ( ) Septic System Repair

*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.*

**Page 2: *Site Plan Worksheet* form MUST accompany this application**

The following optional attachments may also be submitted: (X) Survey Plat, scaled no more than 1 inch = 60 feet
*Place an (X) beside whichever is submitted if applicable* ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

**Applicant Information:**

Applicant Name: Angela Tidwell Address: 116 Stamford Court Mooresville NC 28117 Phone: (402) 760-8747 cell

Owner Name: Scott + Angela Tidwell Address: " Phone: (704) 360-2568 home

**Property Information:**

Street Address: 116 Stamford Court Mooresville NC 28117

Subdivision Name: The Farms Section/Phase: 5 Lot Number: 577

Driving Directions: Exit 35, Brawley School Road west, Turn (R) on McKendree Rd, (R) on Grass hopper, 1st (R) on Cherry Tree, (L) on Stamford Ct.

**Site Development Information:** *(check or complete ALL that apply)*

( ) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: _____
Maximum Number of Occupants: _____
( ) Swimming Pool
( ) Other Addition/Structure: Changing crawlspace into Basement.

( ) Crawl Space Foundation
( ) Concrete Slab Foundation
(X) Basement with Plumbing
( ) Basement without Plumbing

Non-Residential Site Development:
Type of Business: _____
Square Footage of Building: _____
Maximum Number of Employee: _____
Maximum Number of Seats/Beds/Other: _____

**Water Supply:**

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

**Desired Septic System Type:** *(you may rank in order of preference)* Year existing system installed: 2012
( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other: _____

**Please answer the following to the best of your ability:**

( ) Yes (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (X) 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.*

**Signature:** Angela Tidwell
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

12/10/14
DATE

207391

# IREDELL COUNTY HEALTH DEPARTMENT

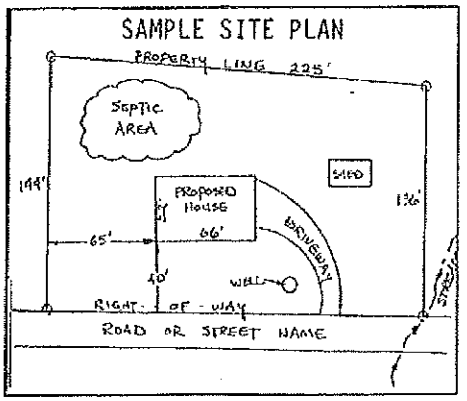
*ENVIRONMENTAL HEALTH DIVISION*

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
( ) Front and side setbacks from property line
( ) Preferred driveway location and 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:**

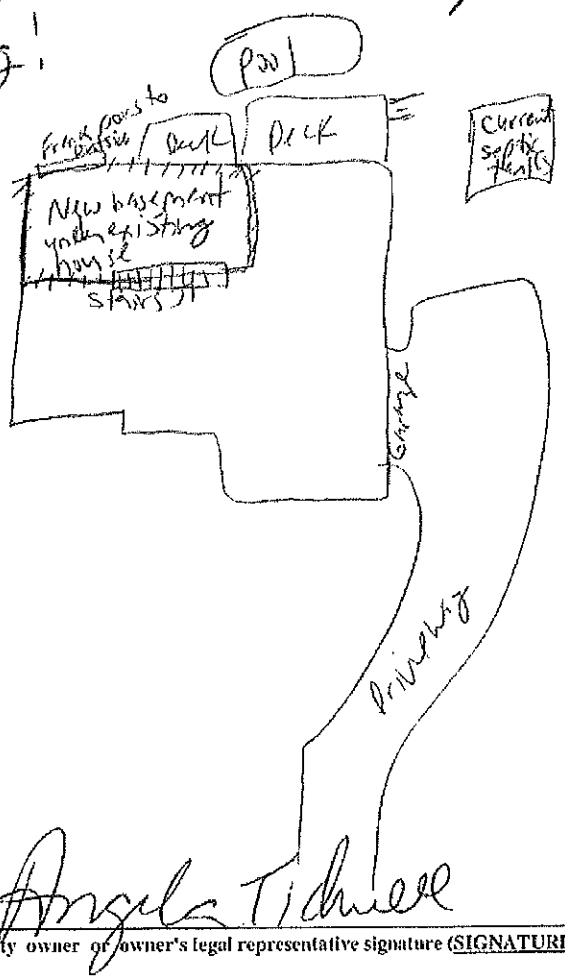
| | |
|---|---|
| Location of septic systems and wells within 100' of your property | N/A |
| Location of easements and rights of ways on your property | N/A |
| Location of any designated wetlands on the property | N/A |

## USE THIS SPACE TO DRAW YOUR SITE PLAN

*Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site*

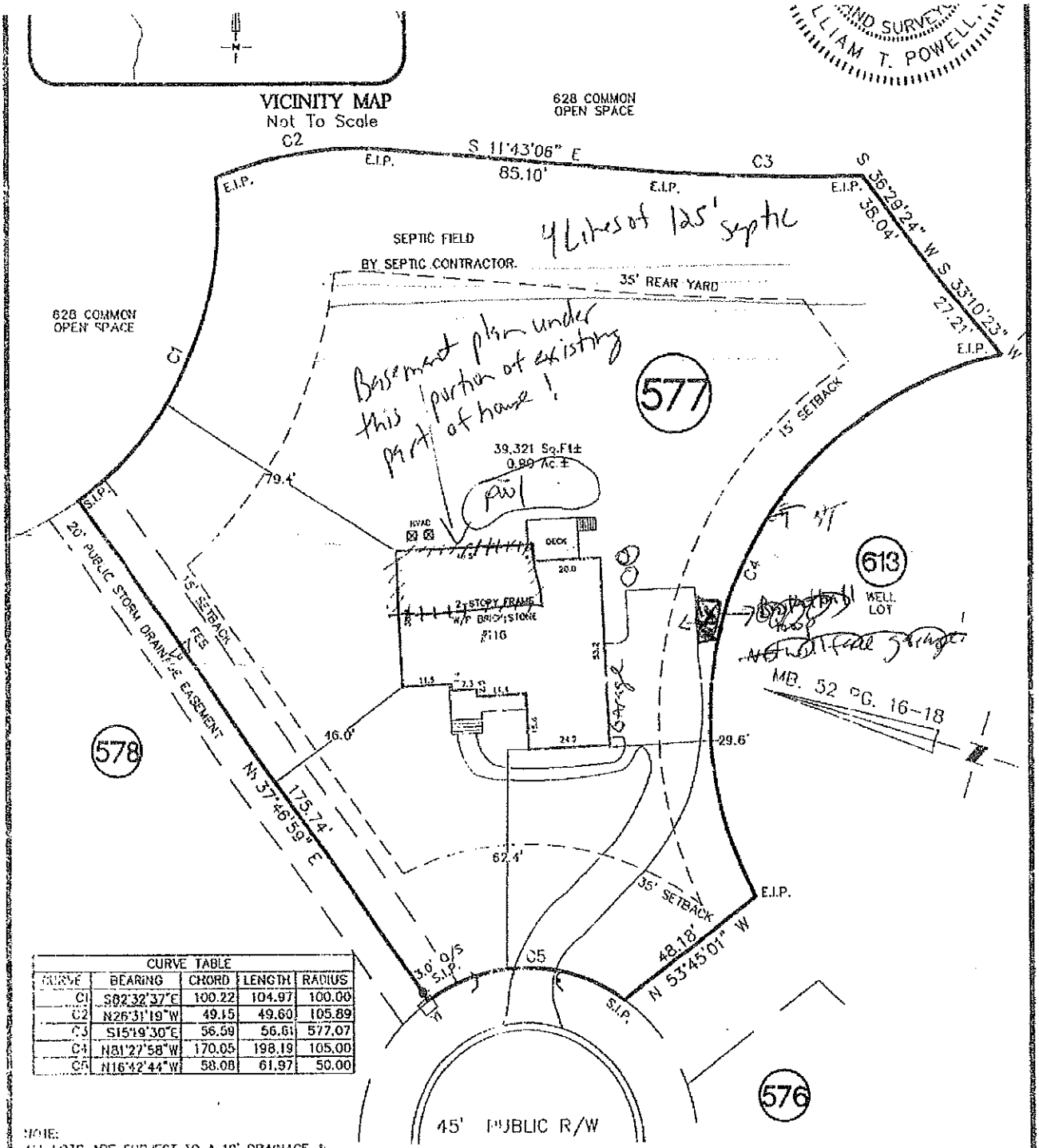
I have attached The current Floor plan with basement plan outlined, survey, + tentative architectural basement drawing!

LOT #577
"The Farms Community"
Community well




**Signature:** Angela Tidwell
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

12/10/14
DATE




| CURVE TABLE | | | | |
|---|---|---|---|---|
| CURVE | BEARING | CHORD | LENGTH | RADIUS |
| C1 | S02°32'37"E | 100.22 | 104.97 | 100.00 |
| C2 | N26°31'19"W | 49.15 | 49.60 | 105.89 |
| C3 | S15°19'30"E | 56.59 | 56.61 | 577.07 |
| C4 | N81°27'58"W | 170.05 | 198.19 | 105.00 |
| C5 | N16°42'44"W | 58.08 | 61.97 | 50.00 |

NOTE:
ALL LOTS ARE SUBJECT TO A 10' DRAINAGE & UTILITY EASEMENT ALONG THE FRONT, REAR, AND SIDE PROPERTY LINES OF ALL LOTS.

# STAMFORD COURT

THIS PROPERTY MAY BE SUBJECT TO ANY AND ALL APPLICABLE DEED RESTRICTIONS, EASEMENTS, RIGHT-OF-WAY, UTILITIES AND RESTRICTIVE COVENANTS WHICH MAY BE OF RECORD OR IMPLIED

40 0 40
SCALE: 1" = 40'

EASTOVER
LAND SURVEYING COMPANY, P.A.
LAND SURVEYORS - PLANNERS - (C-1933)
[illegible] POINTE DRIVE, BOULEVARD, SUITE #309
PINEVILLE, NORTH CAROLINA 28134
PHONE (704) 927-8080
FAX (704) 521-1078

## PHYSICAL SURVEY
FOR

LOT 631, THE FARMS PHASE 5, MAP 2
Davidson Township, Iredell County, North Carolina

PROPERTY OF: SCOTT NOWELL

MAP BOOK 52 PAGE 16-18 DEED REFERENCE

DRAWN BY: RJH | DATE: AUGUST 15, 2012