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
HUGHES & ASSOC.	704-542-6816	6425A BANNINGTON DR.	CHAR.	N.C.	28027
SAME					
Current Property Owner		Mailing Address	City	State	Zip Code

PROPERTY INFORMATION:

(Proposed) Subdivision Name	(Proposed) Lot #	(Proposed) Block/Section #	State Road #
THE POINT	364		

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

Specific Directions to Property Out BRAWLEYS SCHOOL - LEFT ON GREAT POINT DR - LEFT ON WILD HARBOR - LEFT ON CORAL BELL - LOT IN CENTER of cul-de-sac.

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

House X Mobile Home _____ Commercial _____ No. Bedrooms 4/5 No. Baths 4

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

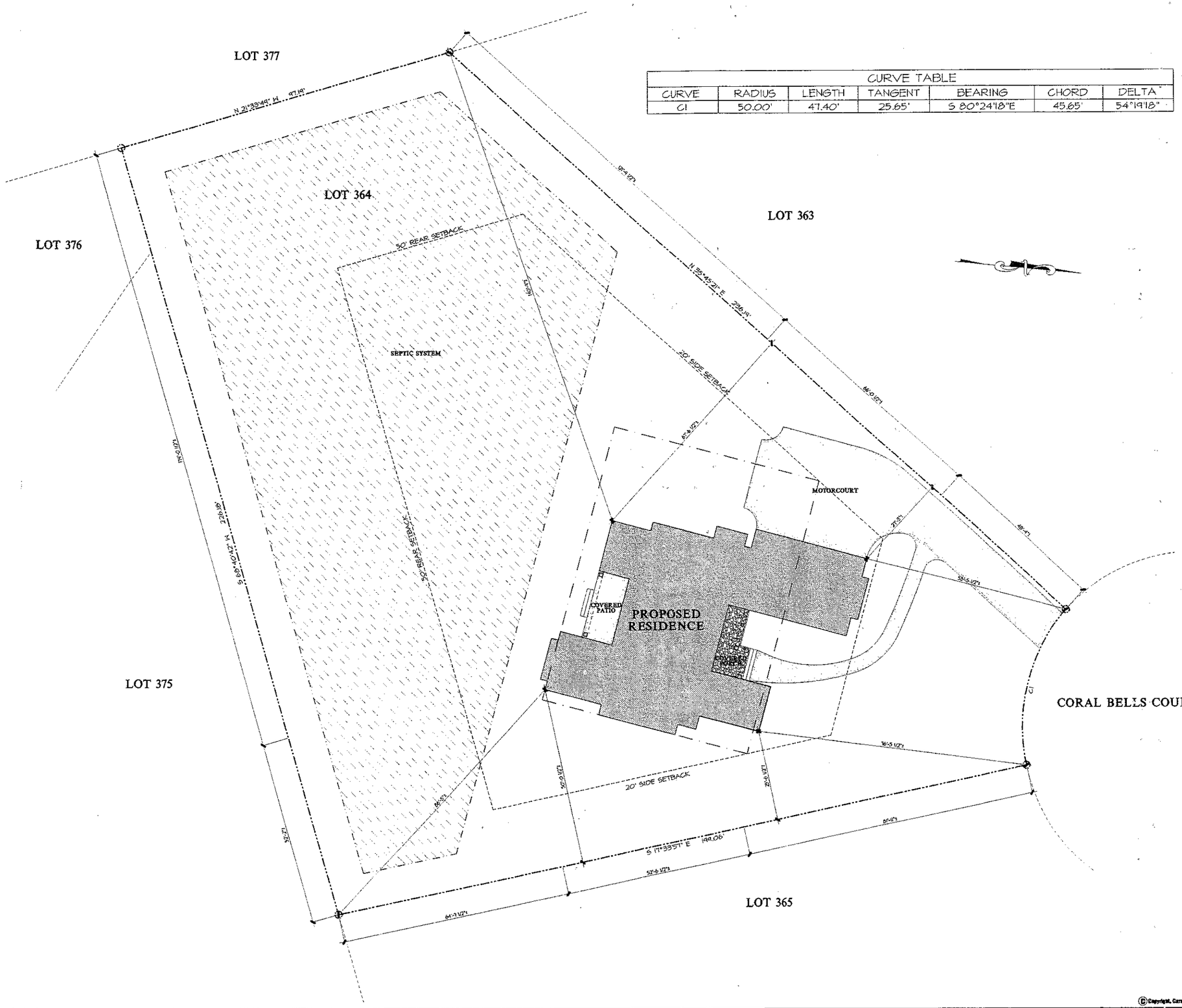
Crawl Space X Concrete Slab _____ Garbage Disposal X Jaccuzi or spa X

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.

7-21-23 DATE Bill Poplin SIGNATURE OF OWNER/AUTHORIZED AGENT



CURVE TABLE						
CURVE	RADIUS	LENGTH	TANGENT	BEARING	CHORD	DELTA
C1	50.00'	47.40'	25.65'	S 80°24'18"E	45.65'	54°19'18"

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A New Custom Plan For

Hughes & Associates

lot 364

The Point

SEAL

DRAWN BY: Troy S. Smith / Jonathon Rogers

DATE: July 2, 2008

DRAWING TITLE: SITE PLAN

SCALE: 1" = 10'

SHEET NO. 2

OF 17 SHEETS

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