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
The Point on Norman	663-6905 214	Brawley Sch. Rd.	Mooresville	NC	28115

Current Property Owner	Mailing Address	City	State	Zip Code
SAME				

PROPERTY INFORMATION:

(Proposed) Subdivision Name	(Proposed) Lot #	(Proposed) Block/Section #	State Road #
The Point	293	PH. 3	

(Proposed) Water Supply: Public, Private Well	**Preliminary Plat Approval Date** (DEVELOPERS ONLY)	Tax Map #
		4625941684(7)

Specific Directions to Property Brawley Sch. Rd. TL Godat Pt. At intersection of Whaling Ct.

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

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

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

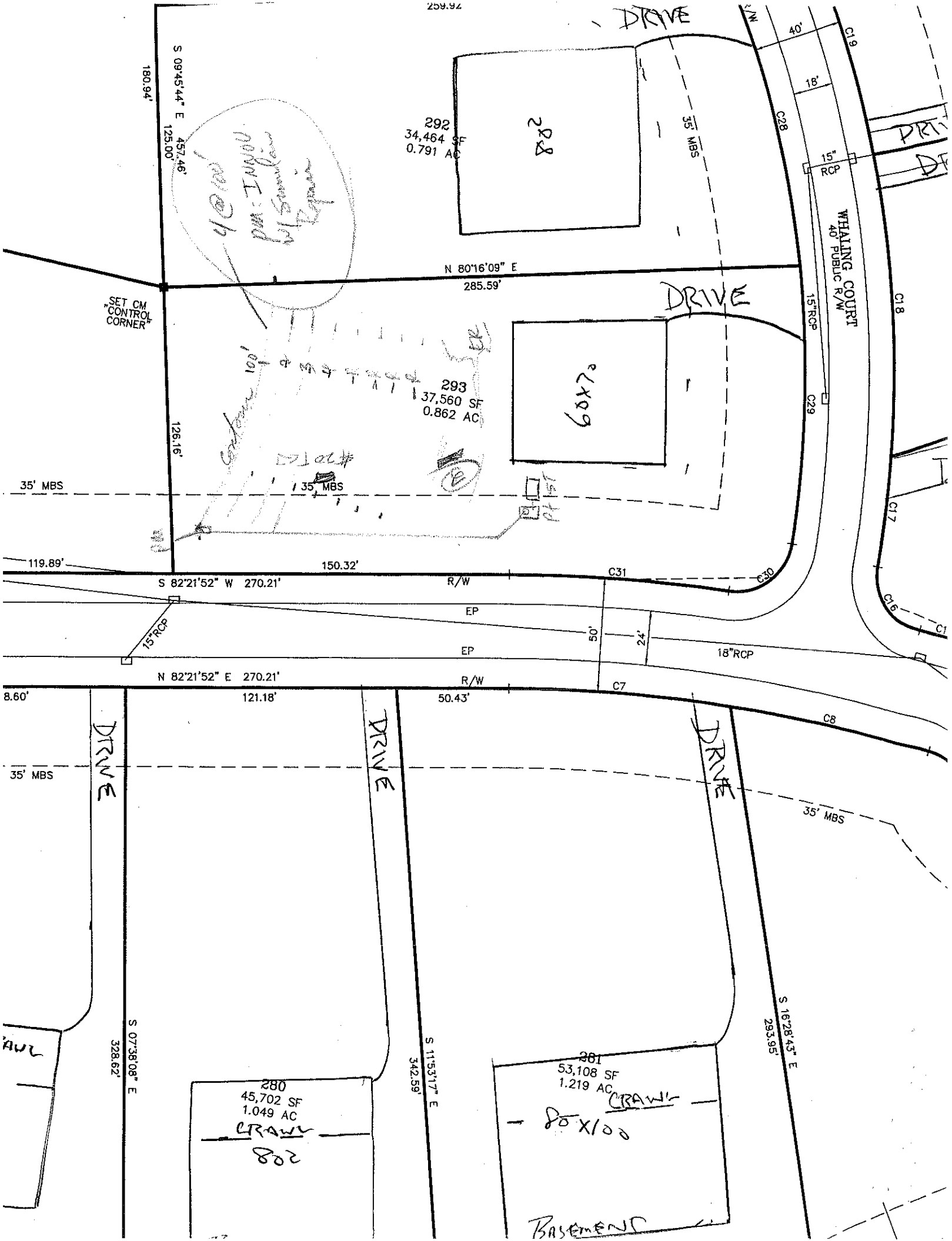
Crawl Space X Concrete Slab _____ Garbage Disposal _____ Jaccuzi or spa _____

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.

1-18-99 DATE Pat E. Rey SIGNATURE OF OWNER/AUTHORIZED AGENT


259.92
DRIVE
S 09°45'44" E
180.94'
125.00'
457.46'
292
34,464 SF
0.791 AC
28x28
35' MBS
C28
40'
C19
18'
15" RCP
WHALING COURT
40' PUBLIC R/W
N 80°16'09" E
285.59'
SET CM
"CONTROL
CORNER"
DRIVE
293
37,560 SF
0.862 AC
60x72
C29
C18
126.16'
35' MBS
35' MBS
C17
119.89'
150.32'
S 82°21'52" W 270.21'
R/W
C31
C30
EP
15"RCP
50'
24'
EP
18"RCP
C16
N 82°21'52" E 270.21'
R/W
C7
8.60'
121.18'
50.43'
C8
DRIVE
DRIVE
DRIVE
35' MBS
35' MBS
S 07°38'08" E
328.62'
S 11°53'17" E
342.59'
S 16°28'43" E
293.95'
280
45,702 SF
1.049 AC
CRAWL
802
281
53,108 SF
1.219 AC
CRAWL
80 X 100
BASEMENT