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
Home Venture	376-7600	PO 37174	CLT	NC	2
Shawenden Dev. Group LLC		1143 D Eve Cir	Cary	NC	27511
Current Property Owner		Mailing Address	City	State	Zip Code

PROPERTY INFORMATION:

(Proposed) Subdivision Name	(Proposed) Lot #	(Proposed) Block/Section #	State Road #
Shawenden Bluff	31	Phase 1 Section 6	Beaten Path

(Proposed) Water Supply: Public, Private Well	**Preliminary Plat Approval Date** (DEVELOPERS ONLY)	Tax Map #
Private		2LA13

Specific Directions to Property: Brawley Rd to Lon Bluem Rd left on to Beaten Path

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

House ✓ Mobile Home _____ Commercial _____ No. Bedrooms 4 No. Baths 3

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.

7/24/96 DATE Barbara Lee SIGNATURE OF OWNER/AUTHORIZED AGENT

CURVE	ARC	RADIUS	CHORD LENGTH	CHORD BEARING
C1	15.00	855.79	15.00	S 63°28'40" E
C2	126.18	742.77	126.03	S 70°01'25" E

N/F
SHAVENDER DEVELOPMENT GROUP, LLC.

VICINITY MAP
NOT TO SCALE

N 73°33'08" W 170.00'

S 17°39'11" W 190.27'

N 20°54'42" E 203.38'

LOT 30

LOT 31

LOT 32

96'

50

40 FULL BASEMENT 40

44'

50 4 BED

55'

55

*WBL

C2

C1

BEATEN PATH ROAD
SR 1444
60' R/W

BUILDING ENVELOPE

THIS IS A PHYSICAL SURVEY ONLY. DOES NOT MEET 0947-30: NOT FOR RECORDATION

BOOK 28 PAGE 49 DEED BOOK PAGE IREDELL COUNTY

LOT 31 PHASE ONE SECTION 3 SHAVENDER'S BLUFF SUBDIVISION

I HEREBY CERTIFY THAT THIS MAP IS CORRECT AND THAT THE BUILDING FOUNDATION LIES WHOLLY ON THE LOT AND THAT THERE ARE NO ENCROACHMENTS ON SAID LOT EXCEPT AS NOTED.

SURV'D WCM | DRAWN LYNNIE | CHK'D LHS | JOB # | 1 JULY 1996 | SCALE: 1" = 40'

LEONARD H. SULLIVAN, JR.
LAND SURVEYOR
1143-D EXECUTIVE CIRCLE
CARY, NORTH CAROLINA 27511
TELEPHONE 919/ 469-4739

SURVEY FOR:

HOME VENTURE

DAVIDSON TOWNSHIP IREDELL COUNTY NORTH CAROLINA

76-76000