Zoning Permit # 2042 ~~00~~ 620
Fee $ 45 Code 104

See reverse for new construction.

Zoning Permit

LOCATION	Date (mm/dd/yy)	8/25/15	Tax Parcel # 4629 84 9914
	Business Name or Property Owner	Livewell Homes	
	Street Address	518 Stillwater Rd	
	Business Type and/or Project Description	SFR	
APPLICANT	Applicant	The Oaks Group PA	Preferred Phone 704-578 4951
	Address City/State/Zip	121 Holt LN 28117	
	E-Mail	KathleenMSaunders@gmail.com	
	Would you like your e-mail address added to: (check any of interest)	☐ The Whistle Stop (Town of Troutman newsletter) ☐ Troutman Business Council (Local Chamber of Commerce) ☐ Sunshine List (Agenda for Town Board Meetings)	

Following approval of this permit proceed to Iredell County Building Inspections (349 N Center St, Statesville, NC 28677). All Applicants, please note that final inspection by the Town is required prior to occupancy (exception, single family residential additions/expansions). Business Applicants, please note that proof of RPZ (backflow) inspection is required prior to occupancy (in addition, restaurants may be required to have a grease trap inspection).

Office Use Only

Zoning District(s)	RP	Plans Attached	Yes ☑ No ☐
Utilities	Town Water / Private Septic	Floodplain	Yes ☐ No ☑
Permitted Use of Property	Single family residential		
Minimum Setback Requirements	Front 50', Rear 50', Right Side 30', Left Side 30' *Setback measured from nearest projecting point of structure to Property Line.*		

Comments: & trees (2 in front required) total (use of existing encouraged).

I hereby certify that all of the information provided for this application is, to the best of my knowledge, accurate and complete. I understand that this permit will expire and become invalid unless the work for which it was issued is started within six (6) months of the date of issue or is the work authorized is suspended or abandoned for a period of one (1) year.

Kathleen Saunders
Signature of Applicant

To the best of my knowledge, this application is deemed complete and approved based on the information provided to me and my knowledge of the Town of Troutman Unified Development Ordinance.

Signature of Zoning Administrator