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:

C.R. Dobson Builders	548-0067	8220 University Exec. Park	Charlotte	NC	28262
Applicant	Phone #	Mailing Address	City	State	Zip Code

Same as above				
Current Property Owner	Mailing Address	City	State	Zip Code

PROPERTY INFORMATION:

Kings Landing	16	1/1	
(Proposed) Subdivision Name	(Proposed) Lot #	(Proposed) Block/Section #	State Road #

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

Specific Directions to Property _____

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

House X Mobile Home — Commercial — No. Bedrooms 3 No. Baths 4

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

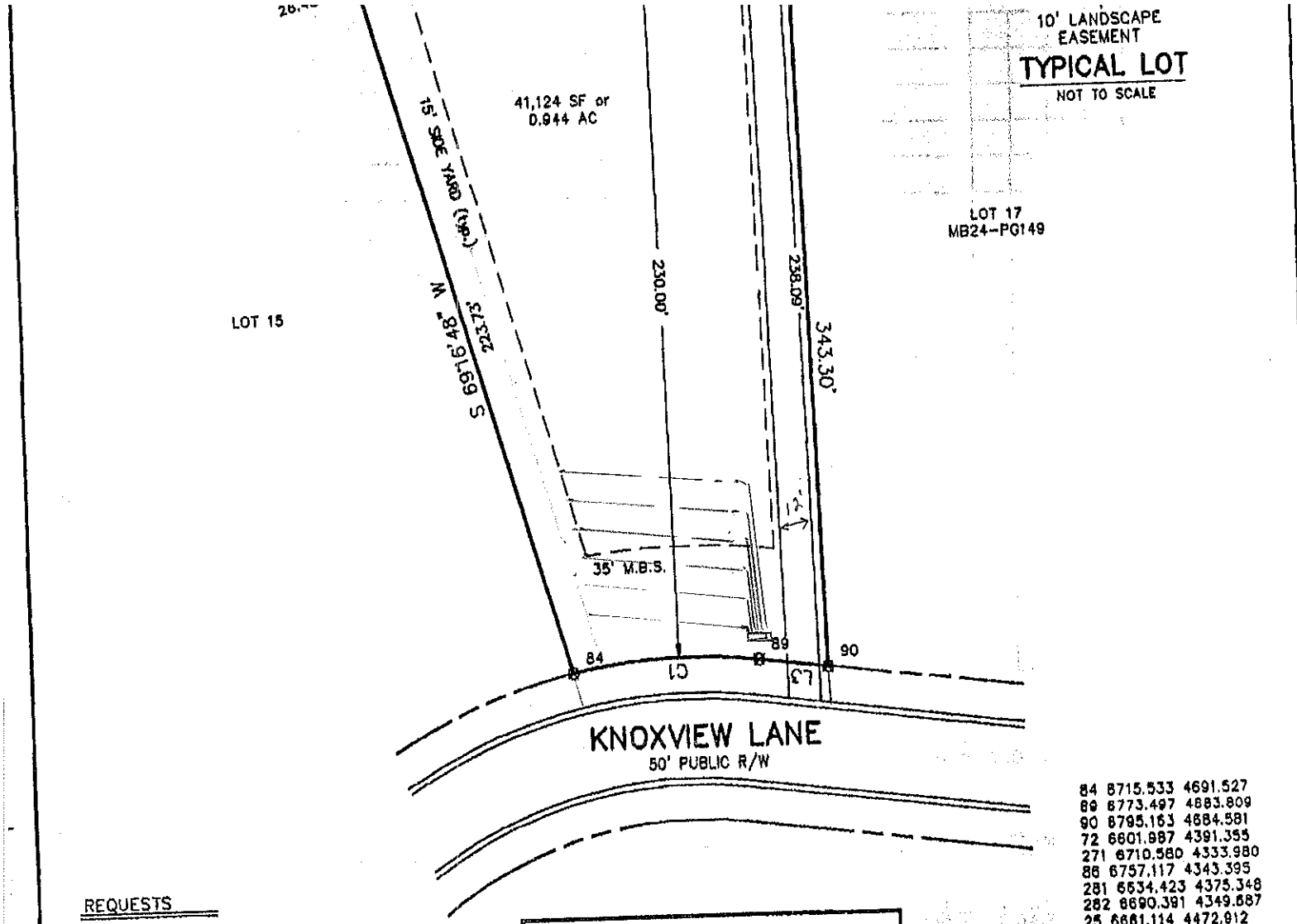
Crawl Space X Concrete Slab — Garbage Disposal — Jaccuzi or spa —

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.

5-9-95 DATE _____ SIGNATURE OF OWNER/AUTHORIZED AGENT



84 8715.533 4691.527
89 8773.497 4883.809
90 8795.163 4684.581
72 6601.987 4391.355
271 6710.580 4333.980
86 6757.117 4343.395
281 6534.423 4375.348
282 6690.391 4349.687
25 6661.114 4472.912
27 6646.285 4417.760
28 6728.343 4395 661
26 6743.192 4450.814

REQUESTS
5-2-95
CRAWL FOUNDATION
DRIVE RIGHT
DECK AS SHOWN
CUSTOM PLAN

PRELIMINARY PLAT
NOT FOR RECORDATION, CONVEYANCES, OR SALES

REV. 1	5/3/95	KES	MOVED HOUSE TO 230'

0" 1" SCALE: 1" = 50 '

Lucas-Forman Incorporated
Land Surveying
Planning & Engineering
645 Pressley Road, Suite N
Charlotte, North Carolina 28217
P.O. Box 11386 28220-0386
(704) 527-6626 Fax 527-9640

PLOT & HUBBING PLAN
of
KNOXVIEW LANE
DAVIDSON TOWNSHIP, IREDELL COUNTY, N.C.

LOT 16 BLOCK ___ MAPBOOK 25 PAGE 10
SUBDIVISION KING'S LANDING MAP 1
DEED REFERENCE: ___
for
C. RICHARD DOBSON BUILDERS, INC.

REVIEWED:	DATE: 5-2-95	REV. 0

ENVELOPE:
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