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
N. block Development	704 331 ~~4547~~ 4745	330 McGill Ave NW	Concord	NC	28027
Current Property Owner		Mailing Address	City	State	Zip Code
same		same	same	same	same

PROPERTY INFORMATION:

(Proposed) Subdivision Name	(Proposed) Lot #	(Proposed) Block/Section #	State Road #
Edgewater Park	6	Phase I	Culpeze

(Proposed) Water Supply: Public, Private Well	**Preliminary Plat Approval Date** (DEVELOPERS ONLY)	Tax Map #
Private Well		4637-12-2391.(

Specific Directions to Property Brawley School, Rt on Blume, Lt on Beaten Path, Rt on Culpeze, 6th Lot on Rt.

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

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

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.

3/20/03 DATE Samuel A Kelly SIGNATURE OF OWNER/AUTHORIZED AGENT

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
Application For Improvement Permit
Site Plan Form

INSTRUCTIONS TO APPLICANT: (Items in Parentheses are to be performed by DEVELOPERS ONLY)

All property corners must be staked and flagged with dimensions matching those shown on an approved final (preliminary) plat (**and** proposed house dimensions must be staked and flagged) before the Iredell County Health Department can begin review work on this proposed site. An application for an Improvement Permit is considered complete **only** when this site plan form is completed, signed, and attached to the application form.

As Close To Scale As Is Possible: 1. Draw in the proposed lot showing **all** proposed lot dimensions and orientation to proposed streets or roads. 2. Draw in the proposed structure showing dimensions and distances to property lines (include decks, walkways, etc.). E. Draw in the proposed driveway location. 4. Draw in all wells, both existing and proposed, including those on adjacent property (if known). 5. Draw in any other structure ie. sheds, outbuildings, pools, etc. which will occupy space on the proposed lot.

I hereby convenant that the above representation is correct to the best of my knowledge and ability.

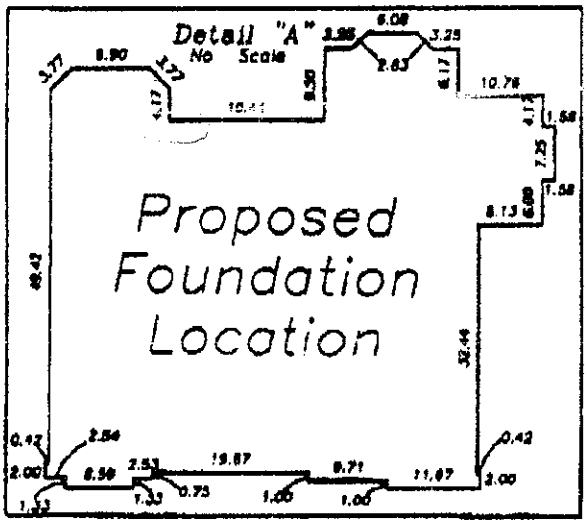
3/20/03 Date Samuel A Keller SIGNATURE OF OWNER/AUTHORIZED AGENT

See Attached Site Plan

I, Mark S. Peace hereby certify, that this Plat was drawn from an actual Survey made under my direct supervision, (Deed Descriptions recorded in Deed Book _____ Page _____ and in Deed Book _____ Page _____), that the Ratio of Precision is 1 : _____ as calculated, that the Boundaries not Surveyed are shown as broken lines, that this Plat was prepared in accordance with the N. C Standards of Practice for Land Surveying (Board Rules Section .1600 as ammended).

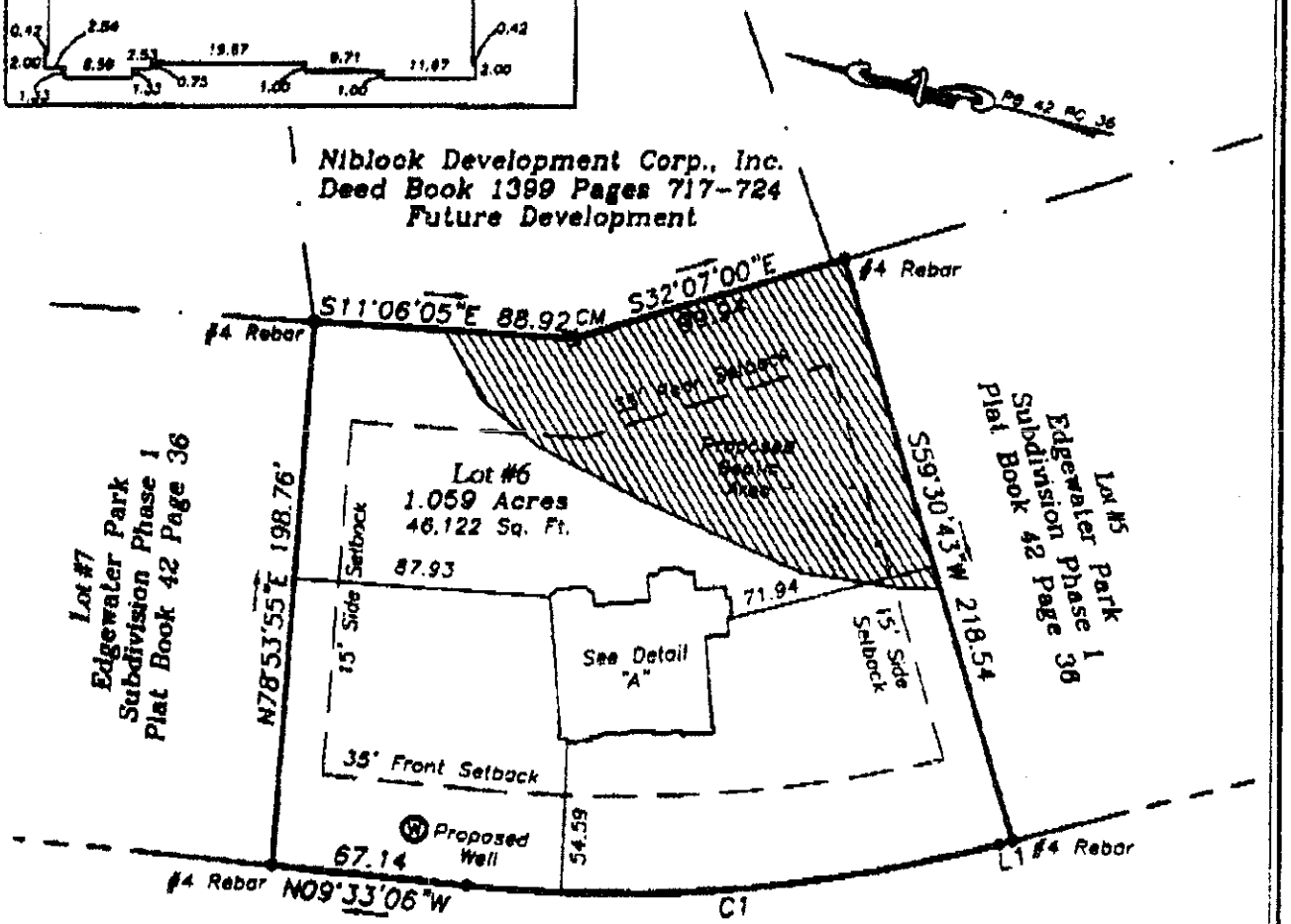
Date

N. C. Professional Land Surveyor L-3680



LINE TABLE		
LINE	LENGTH	BEARING
L1	4.57	N30°29'17"W

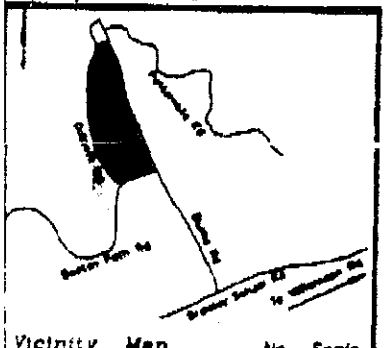
CURVE TABLE				
CURVE	RADIUS	LENGTH	CHORD BEARING	CHORD
C1	510.94	186.61	N20°00'54"W	185.57



Stake 5/15

Owner

Niblock Development Corp.
300 McGill Avenue, NW
Concord, N.C. 28027
(704) 331-4745



Vicinity Map No Scale

Preliminary Site Plan

Niblock Development Corp.

Davidson Township Iredell County N. C.
Scale 1"= 60' Reference April 30th, 2003
Plat Book 42 Page 36 Lot #6 Edgewater Park Subdivision

GRAPHIC SCALE
60 0 30 60 120 240
(IN FEET)
1 inch = 60 ft.

PIEDMONT DESIGN ASSOCIATES, P.A.
ENGINEERING - SURVEYING - PLANNING
125 E. Plaza Dr., Suite 104, Mooresville, N.C. 28115
Phone (704) 664-7868 Fax (704) 664-1778