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 4745	300 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	5	Phase I	Culpeze

(Proposed) Water Supply: Public, Private Well	**Preliminary Plat Approval Date** (DEVELOPERS ONLY)	Tax Map #
Private Well		4637-12-2391.1

Specific Directions to Property: Brawley School, Rt on Blume, Lt on Beaten Path, Rt on Culpeze, 5th 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.

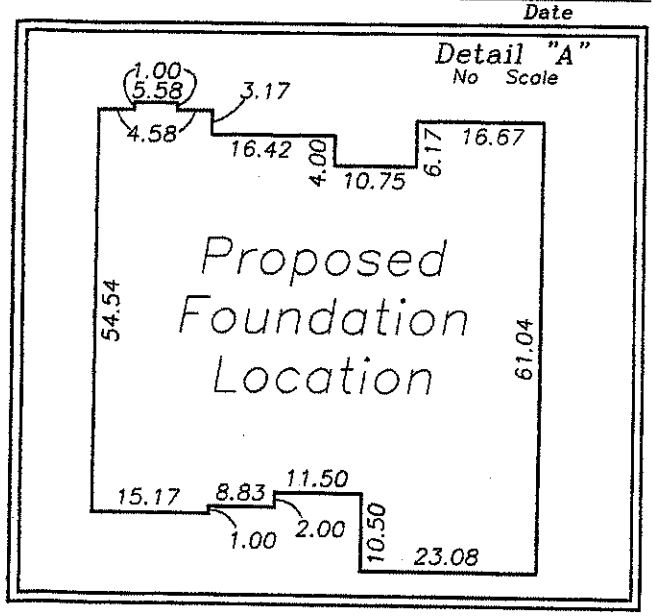
I understand that any Improvement Permit issued on the above property is valid for five (5) years from the issuance date and is subject to revocation if the above described site plans or intended use changes.

3/20/03 DATE _____ SIGNATURE OF OWNER/AUTHORIZED AGENT

I, Mark S. Pence 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



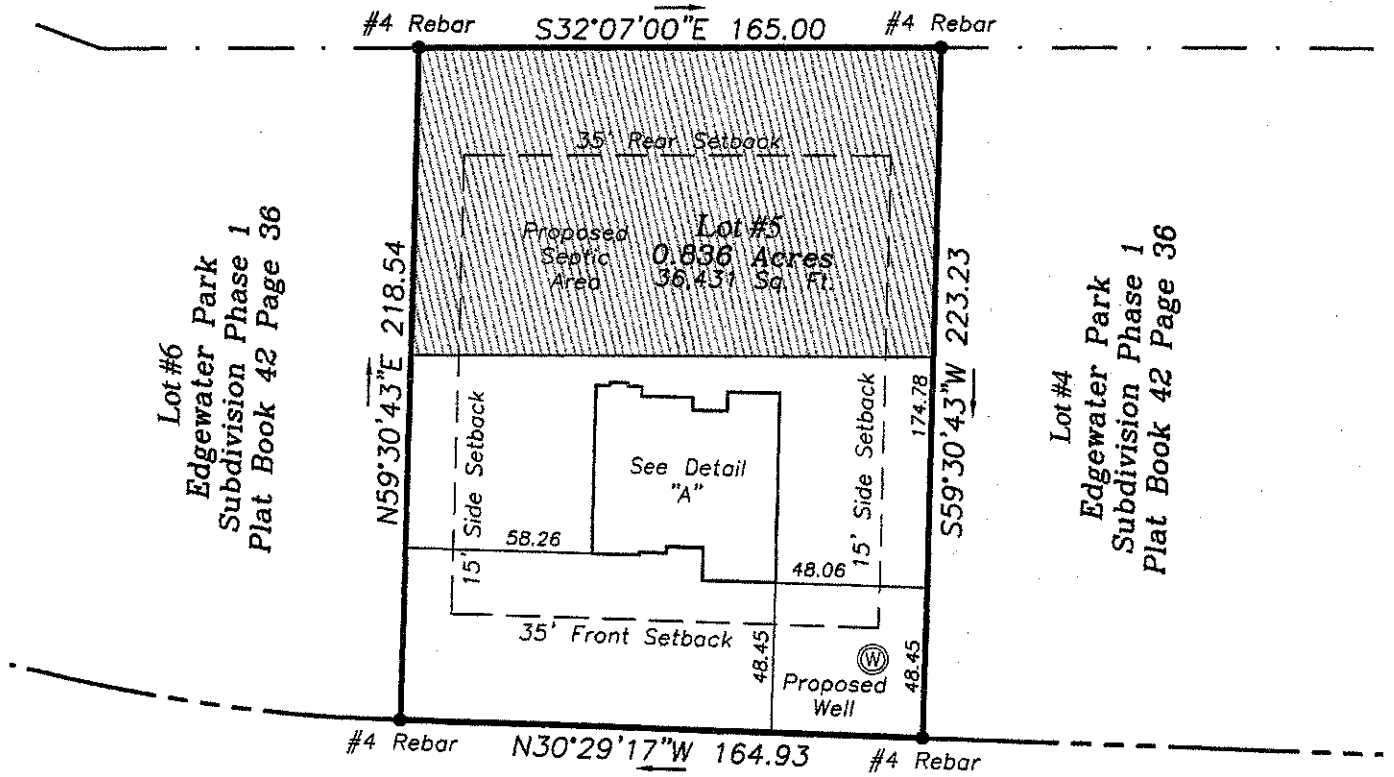
PB 42 PG 36

Acknowledgement Of
Plans Submittal ONLY!

Date 5/16/03

Date 5-16-03

Niblock Development Corp., Inc.
Deed Book 1399 Pages 717-724
Future Development



CULPEZE RD. S.R. #1239
60' Public Right of Way

Owner

Niblock Development Corp.
300 McGill Avenue, NW
Concord, N.C. 28027

Preliminary Site Plan
Niblock Development Corp