RECEIVED OCT 2 4 2014

IREDELL COUNTY HEALTH DEPARTMENT

Paid $195.00 # 205736

ENVIRONMENTAL HEALTH DIVISION

Application for IMPROVEMENT PERMIT, AUTHORIZATION TO CONSTRUCT, or EXISTING SYSTEM INSPECTION

(THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED - APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS)

1. APPLICATION FOR: ___ Improvement Permit X Authorization To Construct ___ BOTH ___ Existing System Inspection

2. Page 2: *Site Plan Worksheet* Form MUST Accompany This Application
The following optional attachments may also be submitted: ___ Survey Plat, Scaled no more than 1 Inch = 60 Feet
Place check ( ) beside whichever is submitted if applicable ___ Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

House plans should be on file already

3. Applicant Information:

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Mark Morgan		704-582-3818	
Owner Name	Mailing Address	Home Phone #	Alternate Phone #
	Kathleen Saunders, LSS	704-578-4951	

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
	Riverwood Bend	Lot 8

Driving Directions: Hwy 150 W, L McCrary Rd, rear of lot on L before Riverwood Rd

5. RESIDENTIAL Site Development Information: *(Check or Complete ALL that apply)*

(X) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
( ) Repair To Failing Septic System
( ) Other

Maximum Number of Bedrooms 3
Maximum Number of Occupants 6
If Expansion, Current Number of Bedrooms ___

(X) Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) Basement w/Plumbing?
( ) Basement w/out Plumbing?

IF Non-Residential Site Development:
Type of Business
Square Footage of Building
Maximum Number of Employees
Maximum Number of Seats

6. Proposed Water Supply:

(X) New Well ( ) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

7. Desired Septic System Type: *(You may rank in order of preference, if any)*

( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other_____ ( ) No Preference

8. Please Answer The Following To The Best of Your Ability:

( ) Yes (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industry) to be generated?
( ) Yes (X) No Is the site subject to approval by any other public agency?

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

9. Signature: Kathleen Saunders — 10-24-14

Property owner or owner's legal representative signature (SIGNATURE REQUIRED) — DATE

IREDELL COUNTY HEATLH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAGE 2: *SITE PLAN WORKSHEET*

SEE THE "SAMPLE SITE PLAN" BELOW. *INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!*

Place an (X) beside each item as you complete the site plan:

- ✓ Property Line measurements are clearly identified...
- ✓ All proposed structures are indicated...
  SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site
- ✓ Front and side setbacks from property line...
- ✓ Preferred driveway location and configuration, preferred well location...
- ✓ Area you prefer your septic system to be placed...
- ✓ North arrow, or other sufficient indicator of direction...

Circle N/A on the following if appropriate:

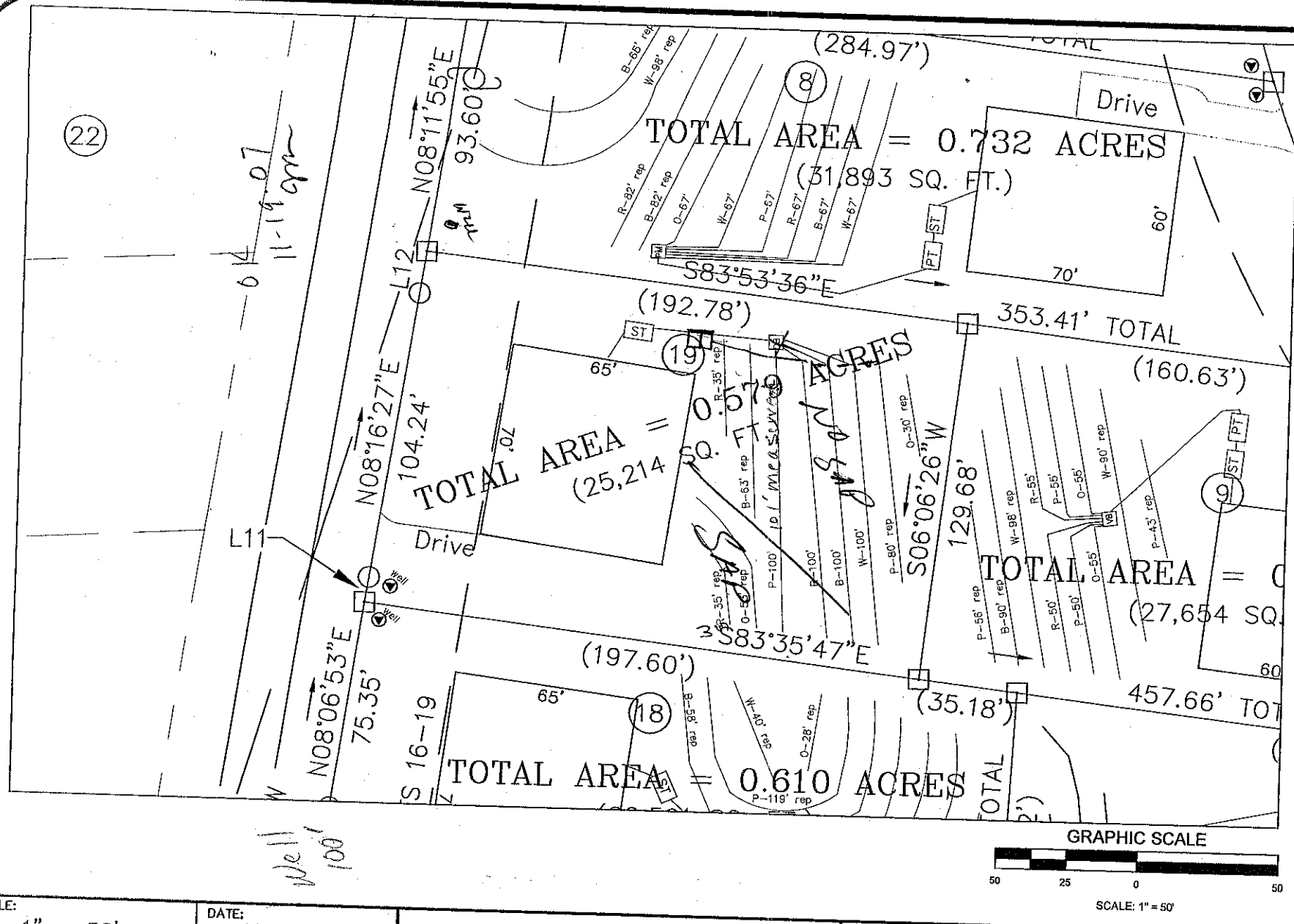
- ____ Location of septic systems and wells within 100' of your property... (N/A)
- ____ Location of easements and rights of ways on your property... (N/A)
- ____ Location of any designated wetlands on the property... (N/A)

Signature: Kathleen Samuelus
REQUIRED property owner or owner's legal representative signature.

10-24-14
DATE

USE THIS SPACE TO DRAW YOUR SITE PLAN

Please see Hached



SCALE: 1" = 50'	DATE: 11-14-07	S&ME 3718 OLD BATTLEGROUND ROAD GREENSBORO, NC 27410 PH. 336-288-7180 FAX. 336-288-8980 WWW.SMEINC.COM	Lot 19 Riverwood Bend Subdivision – McCrary Rd. Iredell County, NC
PROJECT NO. 1588-07-051	DRAWN BY: JBP		FIGURE NO. 1
	CHECKED BY: PLM		

RECEIVED SEP 2 3 2014

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) Septic Improvement Permit (✓) Authorization to Construct ( ) Existing System Inspection ( ) Septic System Repair

THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS.

Page 2: *Site Plan Worksheet* form MUST accompany this application

The following optional attachments may also be submitted: ( ) Survey Plat, scaled no more than 1 inch = 60 feet
Place an (X) beside whichever is submitted if applicable (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: Mark Morgan

Applicant Name: R. Morgan Homes **Address:** PO Box 375 Huntersville, NC 28070 **Phone:** 704-582-3918

Owner Name: Thomas Borman **Address:** PO Box 821 Goshen, NY 10924 **Phone:** 845-649-4360

Property Information:

Street Address: 142 Riverwood Rd. Mooresville, NC 28117

Subdivision Name: Riverwood Bend **Section/Phase:** ____ **Lot Number:** 8

Driving Directions: I-77S, Exit 36 (HWY 150), West on 150 2 miles to Left on McCrary, to end of road to Left on Riverwood Rd., property is approx. 1,200 ft. on left.

Site Development Information: *(check or complete ALL that apply)*

(✓) New Single Family Residence
( ) New Multi-Family Residence
(✓) Accessory Building → detached garage (also a block fundation)
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 3
Maximum Number of Occupants: 3
( ) Swimming Pool
( ) Other Addition/Structure: ____

(✓) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

Non-Residential Site Development:
Type of Business: ____
Square Footage of Building: ____
Maximum Number of Employee: ____
Maximum Number of Seats/Beds/Other: ____

Water Supply:

(✓) New Well ( ) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* **Year existing system installed:** ____
( ) No Preference ( ) Alternative (✓) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other: ____

Please answer the following to the best of your ability:

( ) Yes (✓) No Does the site contain any jurisdictional wetlands?
( ) Yes (✓) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (✓) No Is the site subject to approval by any other public agency?

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

Signature: Richard M. Morgan
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

9/22/14
DATE

IREDELL COUNTY HEALTH DEPARTMENT

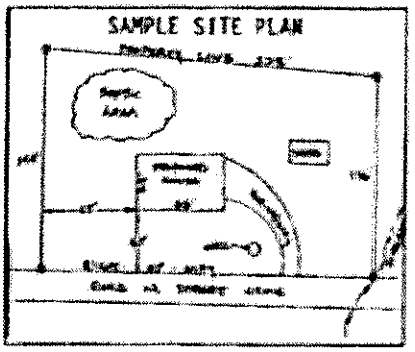
ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *SITE PLAN WORKSHEET*

SEE THE "SAMPLE SITE PLAN" BELOW. *INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!*

Place an (X) beside each item as you complete the site plan:

( ) Property Line measurements are clearly identified
( ) All proposed structures are indicated
( ) Front and side setbacks from property line
( ) Preferred driveway location and well location
( ) Area you prefer your septic system to be placed
( ) North arrow, or other sufficient indicator of direction



Circle N/A on the following if appropriate:

Location of septic systems and wells within 100' of your property	N/A
Location of easements and rights of ways on your property	N/A
Location of any designated wetlands on the property	N/A

USE THIS SPACE TO DRAW YOUR SITE PLAN

Show: proposed house or business footprint, walls, water lines, patios, ponds and decks, and any other item that will occupy space on the site

See Attached Improvement Permit

Signature: _____ _____ 9/22/14

Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

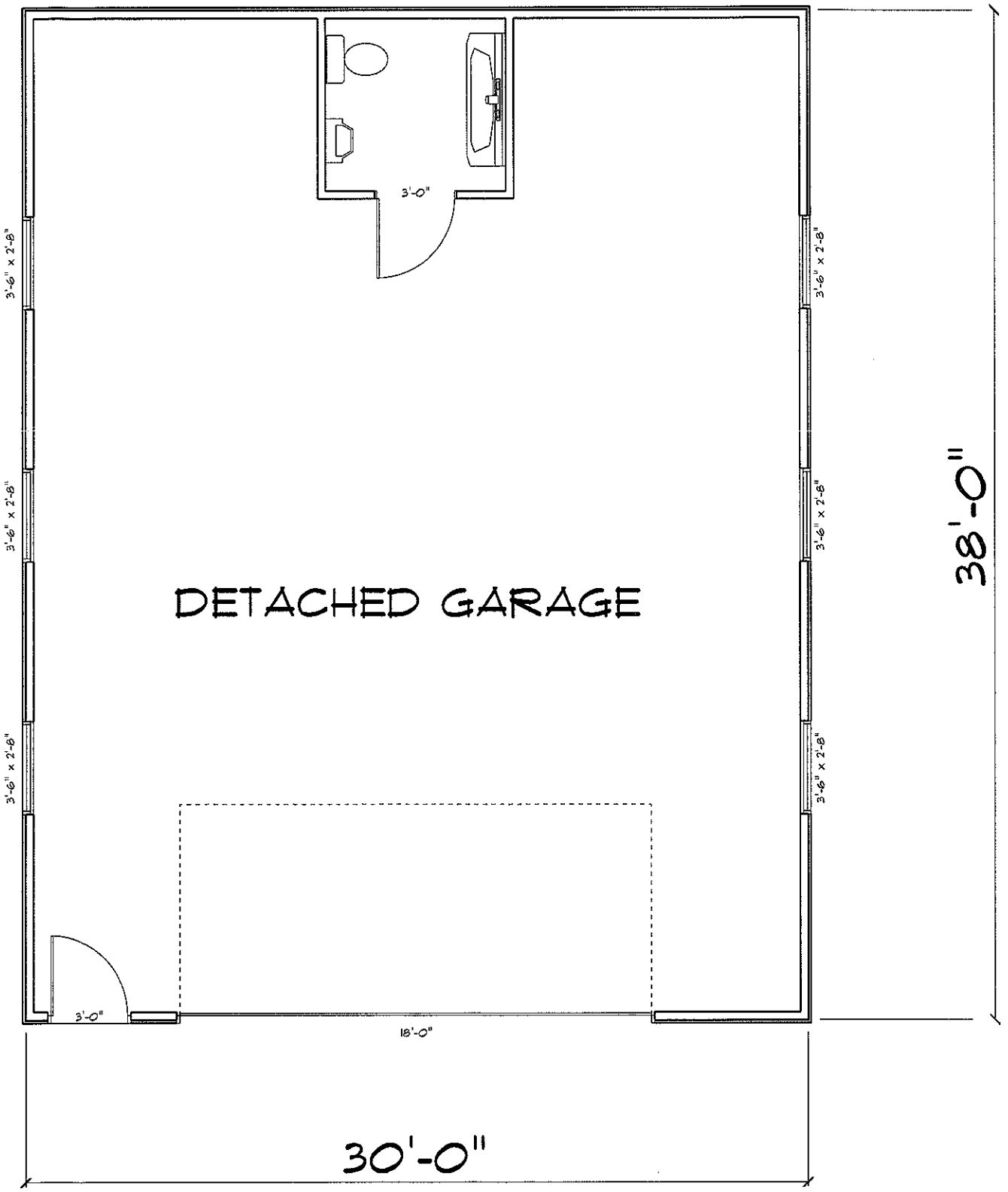
Acknowledgement Of
Plans Submittal ONLY!

142 RIVERWOOD RD MOORESVILLE NC 28117

Date 9/24/14

Robert Mark Morgan Date

DETACHED GARAGE



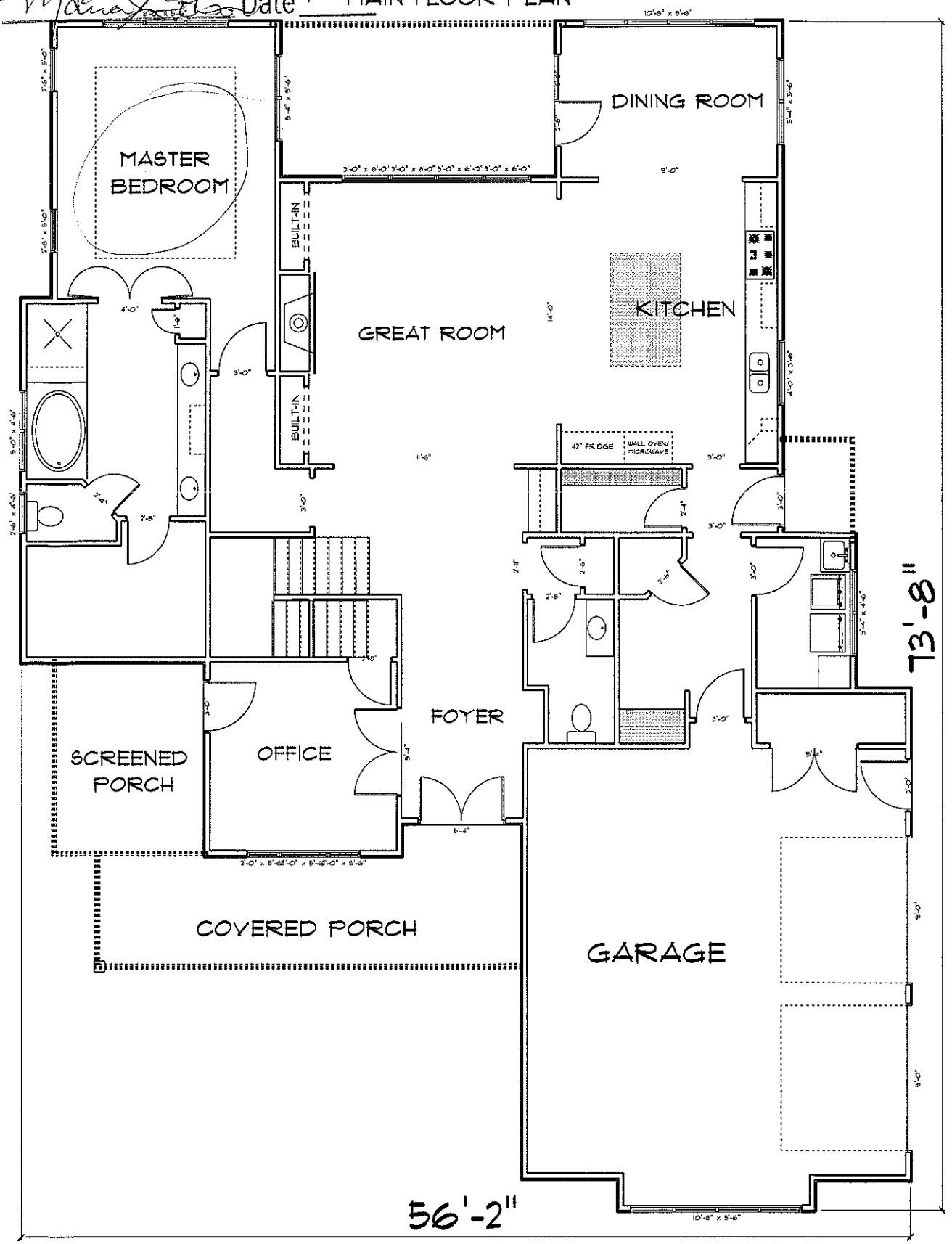
Acknowledgement Of
Plans Submittal ONLY!

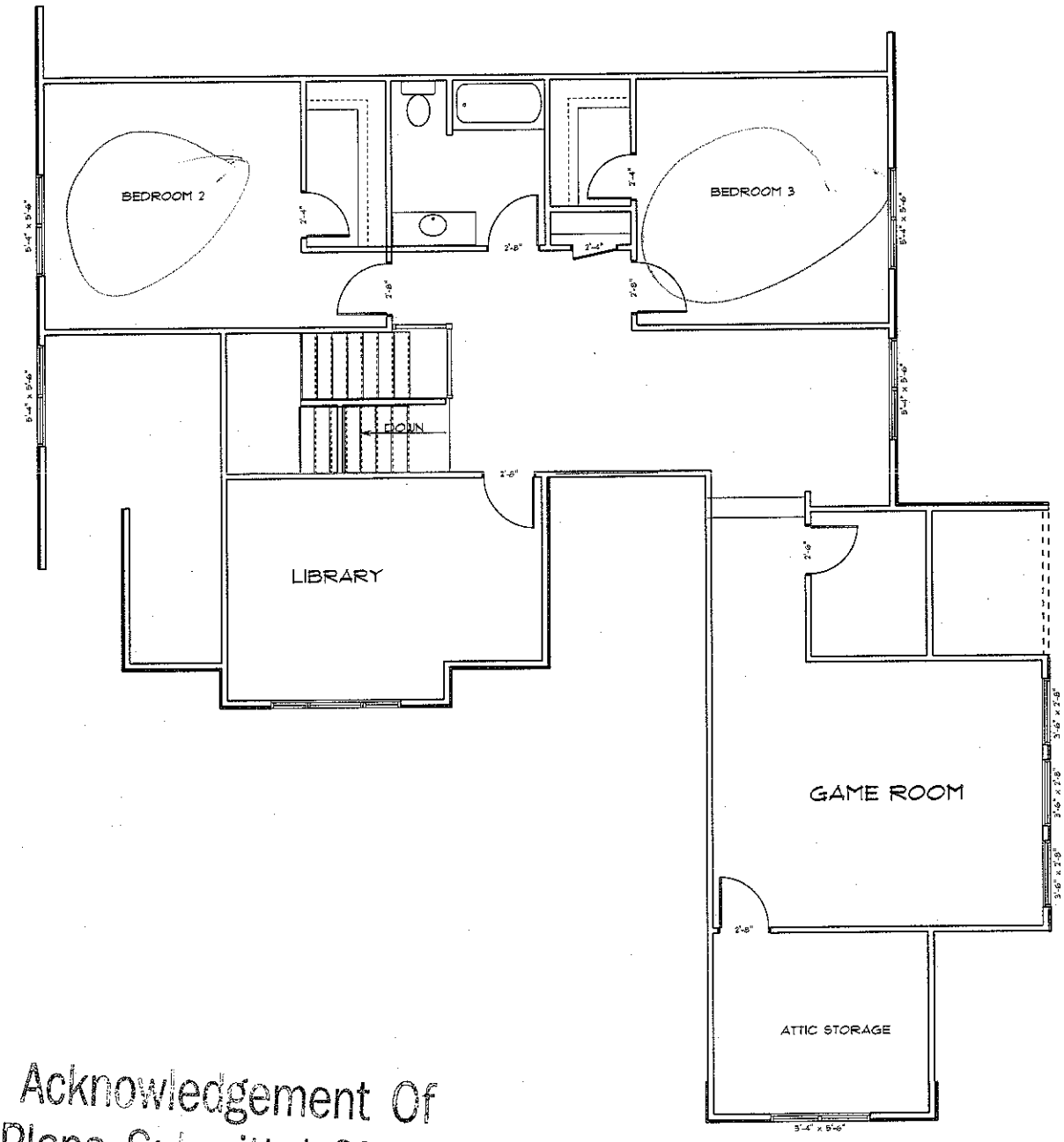
142 RIVERWOOD RD MOORESVILLE NC 28117

~~Robert Mark Morgan~~ Date 9/24/14

Date

MAIN FLOOR PLAN

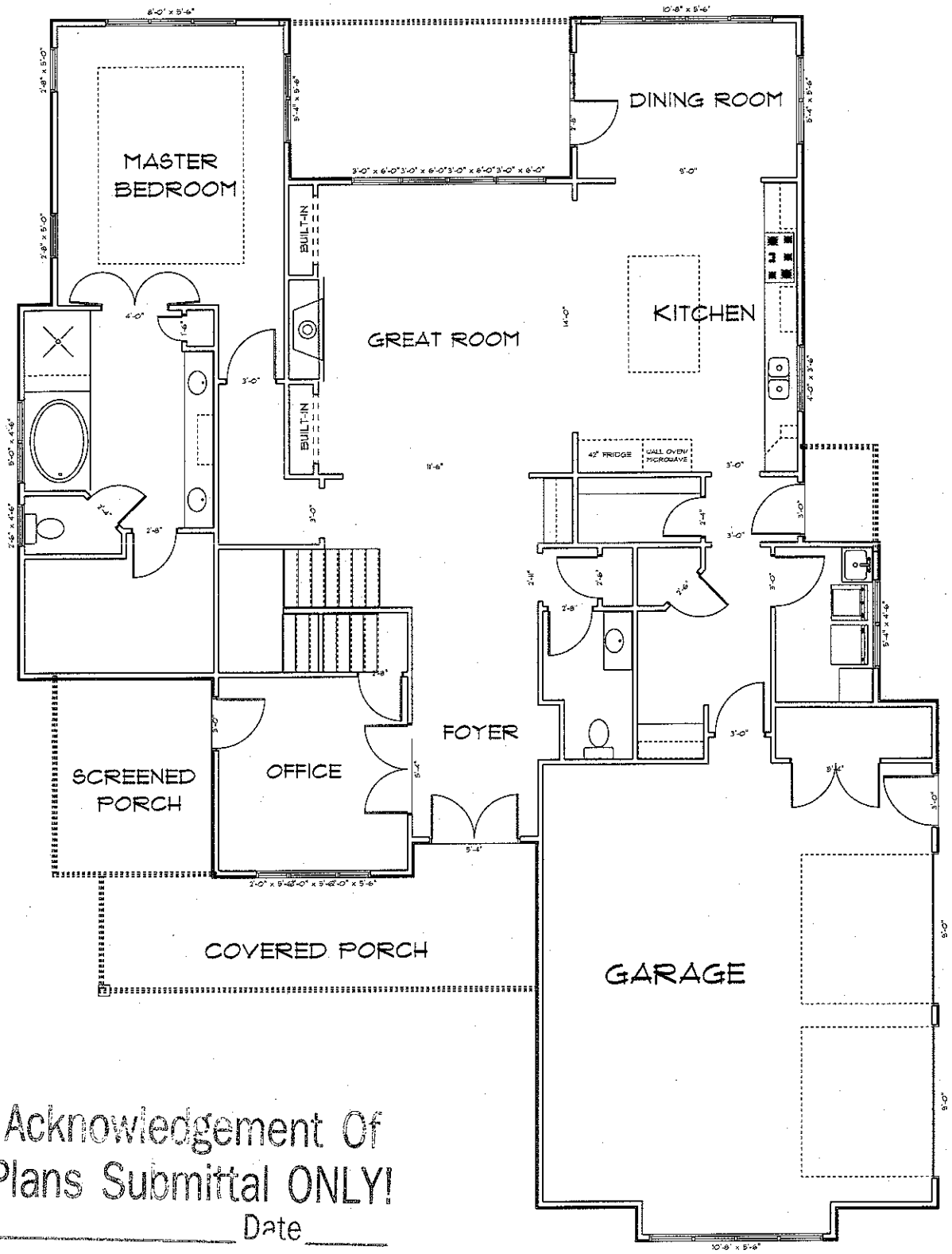




Acknowledgement Of
Plans Submittal ONLY!

Marie Leboeuf Date 9/24/14

_____ Date _____



Acknowledgement Of
Plans Submittal ONLY!

_____ Date_____

_____ Date_____

IREDELL COUNTY

PO Box 788
349 North Center St.
Statesville, NC 28677

APPLICATION NUMBER
205972
Issue Date: 09/23/2014

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4637250502.000	142 RIVERWOOD ROAD, MOORESVILLE, NC 28117	MOORESVILLE

Owner Information	Applicant Information
Owner: BOXMAN THOMAS J+MELISSA W JAYNE	Applicant: R MORGAN HOMES LLC
Address: P O BOX 821 GOSHEN, NY 10924	Address: PO BOX 375 HUNTERSVILLE, NC 28070
Phone:	Phone:

Use Requested	Zone Code
DETACHED GARAGE- APPROVAL ON PERMIT 205736	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.732		35.00	10.00	10.00	CACL	X

Remarks:

35 FT S/B ON REAR- MCCRARY ROAD

Accessory Buildings and Structures Zoning Permit: Shall not be erected in front building line of the principal structure. Shall not be erected within 25 ft of any side street or corner lot. Shall not be erected within 10 ft of any line not a street line or within 10ft of any other building on the same lot. Shall not be erected within the 50ft buffer zone on lake front properties. Shall not exceed the height limitation of the principal structure. Exceptions to the front building line location: if the lot equals 1 acre or greater, and is double frontage lake lot or the location of the building/structure is 150 feet or greater than from the frontage street right of way line than the structure can be located in front of home. Any accessory building or structure over 1200 sq/ft shall be setback a minimum of fifty (50) feet from any property line.

The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions, plat conditions and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

Applicant: _____ Date: _____

Permit Number	22453	TOTAL FEES:	$ 77.25