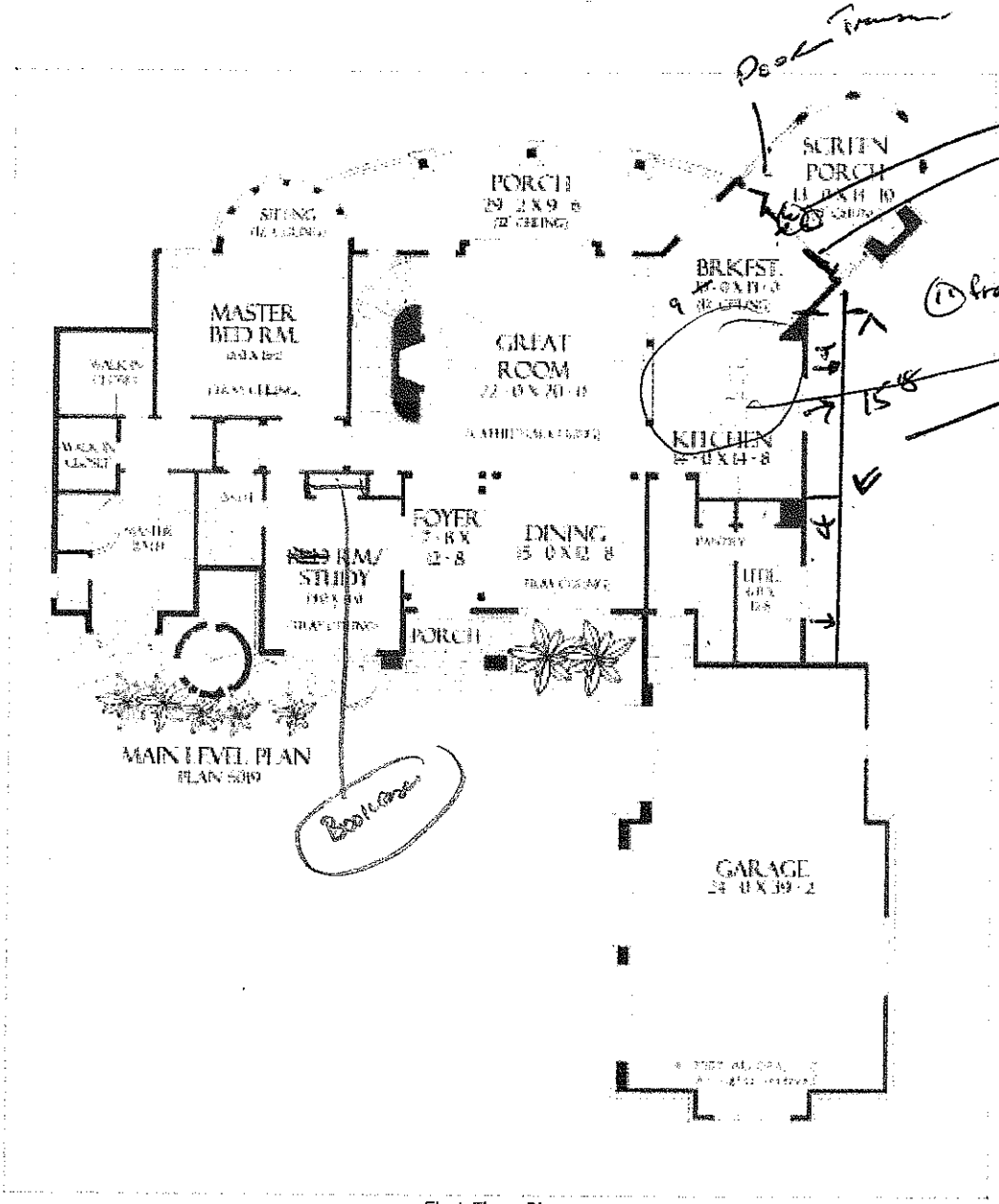
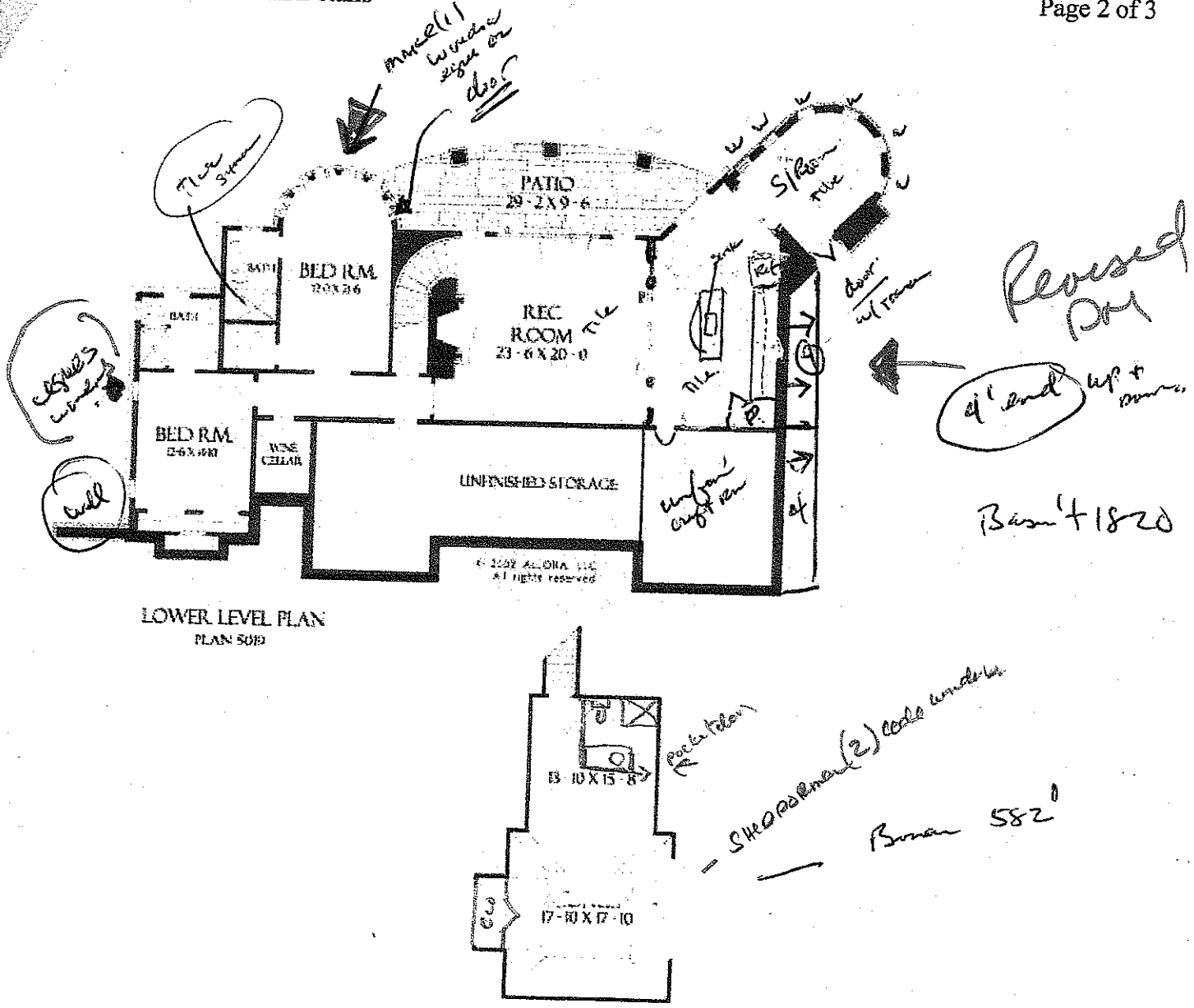


First Floor Plan

Donald A. Gardner Architects, Inc
(800) 388-7580
www.dongardner.com

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MASTER UP



Basement Floor Plan

Reverse R to Left

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Images

The Cedar Court House Plan

Plan# **W-GSE182-5004**

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Front Exterior



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Floor Plans
- Basement Floor Plan
- First Floor Plan

Photos
- Dining Room
- Front Exterior
- Front Exterior
- Great Room
- Great Room
- Kitchen
- Master Bath
- Master Bath
- Master Bedroom
- Rear Exterior
- Rear Exterior
- Sitting Room
- Staircase

Renderings
- Front Rendering
- Rear Rendering

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- View Pricing
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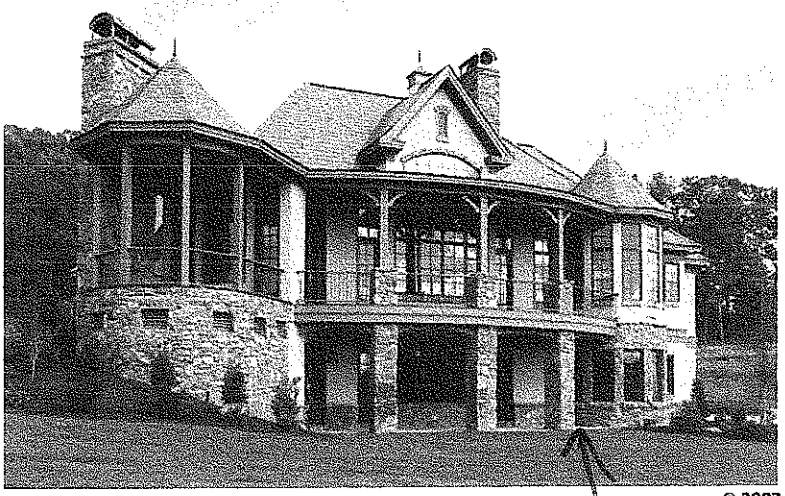
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Rear Exterior



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Iredell County
ZONING PERMIT

227 South Center St. PO Box 788 Statesville, NC 28687 Phone 704-878-3118

Call Sanitarian between 8 a.m. & 9 a.m. Statesville 704-878-5305 Mooresville 704-664-5281

Permit #:	146564ZO	Subdivision:	
Proposed Use:	Single Family	Township:	1700 Davidson
Location of Property:	658 NORMANDY RD Mooresville NC 28117		
Parcel #:	4638333629.000	Zoning:	R20
Lot #:	144 Size: 0.693	Flood Plain:	No Watershed: WSIV CRIT
Applicant:	Maltby/Ward Builders LLC	Owner:	DONALD S & CYNTHIA BRZEZINSKI
Address:	PO BOX 56	Address:	8624 NEW OAK LN
	Catawba NC 28609		HUNTERSVILLE, NC 280780000
Phone:	828-478-4497	Phone:	
Property Recorded:	Yes Site Plan Reviewed:	Community Water:	No Community Sewer:

If permitted the following minimum requirements must be met, unless Health Department requires more land area, or other qualifications are indicated in the comments.

Min. Lot Area:	Min. Front Yard: 35 ft	Min. Left Side Yard: 15 ft
Min. Lot Width: 100	Min: Rear Yard: 50 ft	Min: Right Side Yard: 15 ft
Min. Number Parking Spaces:		Max. Built Upon Area:

Comments:

SFD

Directions:

Perth Rd,tr Normandy,on Right(dirt Path)

FEES

Zoning Permit/Inspection Fee	☑	$45.00
Site Plan Review Fee	☐	$0.00
Environmental Health New System	☑	$400.00
Environmental Health Existing System	☐	$0.00
Total Fees:		$445.00

I certify that all statements made in this application and any attached documents are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that false information may be grounds for rejection of this application. Authorized Health Department and Planning & Enforcement Representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

Applicant:_____ Date: _____

A non-refundable fee of $45.00 is charged on all permit applications.

PAULA WOODY

Printed: 11/1/2007