IREDELL COUNTY HEALTH DEPARTMENT

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

3. Applicant Information:

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Meritage Homes	2761 Ballantyne Commons, Charlotte, NC 28277	704-944-8915	704-944-8900
Owner Name	Mailing Address	Home Phone #	Alternate Phone #
Same	Same	Same	Same

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
218 Bells Crossing Dr.	Bells Crossing	72-1

Driving Directions: Hwy #150, North on Perth Rd. 3 miles, Subdivision on Left.

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

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

Maximum Number of Bedrooms ___
Maximum Number of Occupants ___
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:

( ) 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 (✓) No Does the site contain any jurisdictional wetlands?
( ) Yes (✓) No Is any non-domestic sewage (i.e. industry) 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.

9. Signature: _____ 5/2/13

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:

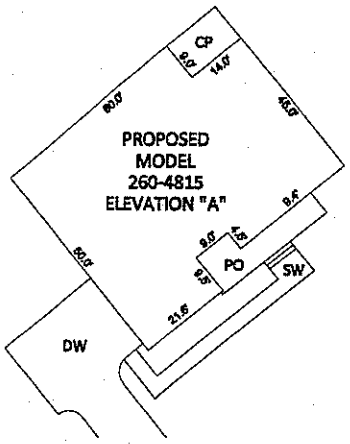
- ✓ **Location of septic systems and wells within 100' of your property…** **N/A**
- ✓ **Location of easements and rights of ways on your property…** **N/A**
- ___ **Location of any designated wetlands on the property…** **(N/A)**

Signature: _____ 5/2/13

REQUIRED **property owner or owner's legal representative signature.** **DATE**

USE THIS SPACE TO DRAW YOUR SITE PLAN

SEE ATTACHED DRAWINGS



INSET SCALE: 1"=30'

LOT INFORMATION:

LOT #72
DB 2187, PG 1123
PIN: 4639749693.000
ADDRESS: 218 BELLS CROSSING DRIVE
TOTAL LOT AREA = 0.815 AC = 35,496 SF
PROPOSED IMPERVIOUS = 4,281 SF
PERCENT IMPERVIOUS = 12.1 %

CREEKWOOD VILLAGE
SUBDIVISION
PB 41, PG 149

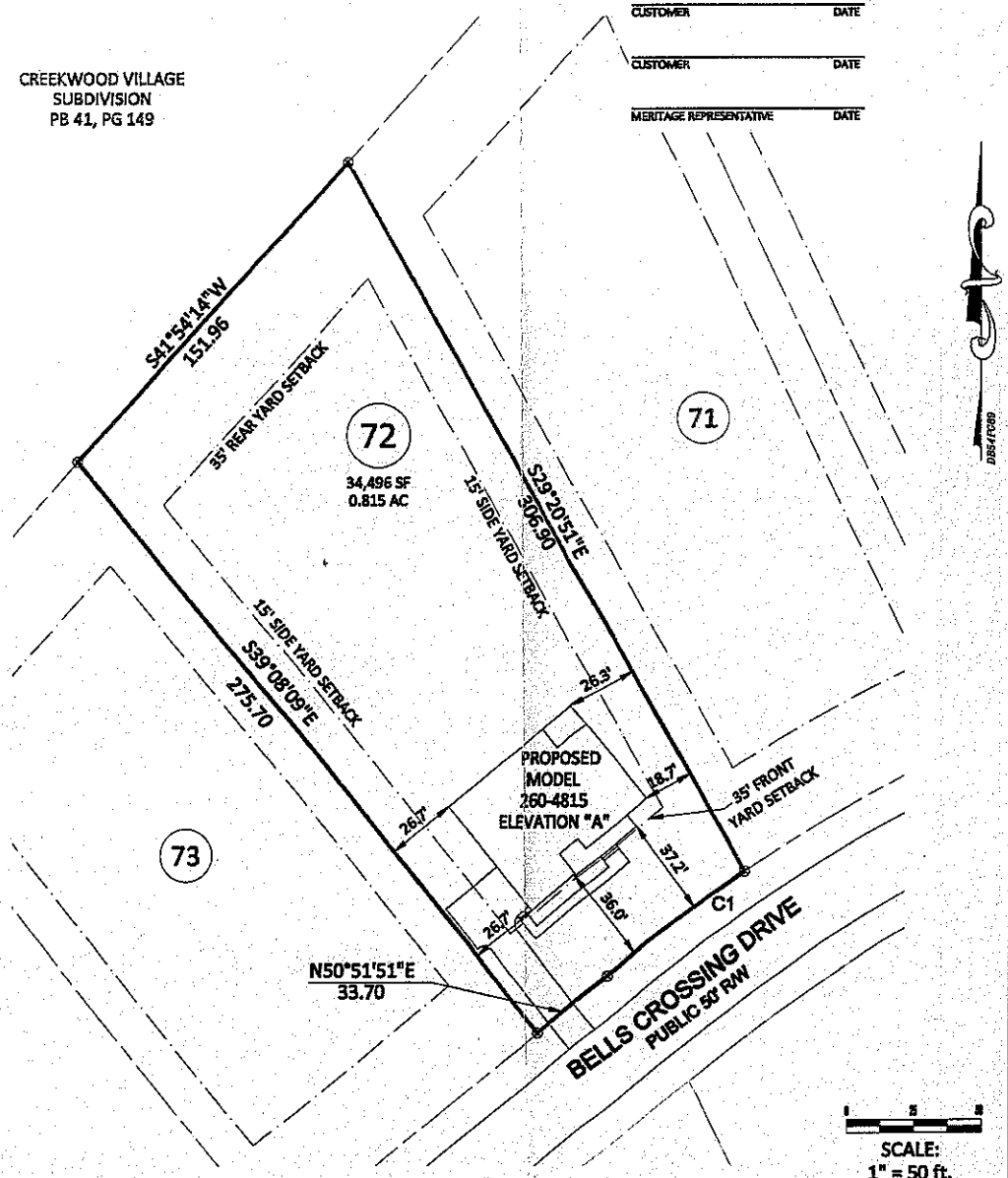
NOTE:

ALL DIMENSIONS, LOCATIONS AND FEATURES SHOWN ON THIS PLOT PLAN ARE APPROXIMATE AND ARE ONLY AN ARTISTS RENDITION, EXACT LOCATION OF ALL FEATURES ARE SUBJECT TO CHANGE AND MAY NOT BE INSTALLED EXACTLY AS SHOWN ON PLANS AND/OR IN MODELS. PLACEMENT OF HOME, DRIVEWAY, SIDEWALKS AND EXTERIOR FEATURES ARE SUBJECT TO MODIFICATION AS DEEMED NECESSARY BY FIELD PERSONNEL.

CUSTOMER DATE

CUSTOMER DATE

MERITAGE REPRESENTATIVE DATE



SCALE:
1" = 50 ft.

NOTES:

1. THIS SURVEY WAS PREPARED BY BATEMAN CIVIL SURVEY CO., UNDER THE SUPERVISION OF STEVEN P. CARSON, PLS.
2. THIS PLAN HAS BEEN PREPARED FOR LAYOUT AND PERMITTING PURPOSES ONLY.
3. THIS IS NOT A BOUNDARY SURVEY. PROPERTY LINES SHOWN WERE TAKEN FROM EXISTING FIELD EVIDENCE, EXISTING DEEDS AND PLATS OF PUBLIC RECORD, AND INFORMATION SUPPLIED TO THE SURVEYOR BY THE CLIENT
4. VERTICAL DATUM IS ASSUMED. THE LATITUDE, LONGITUDE AND STATE PLANE COORDINATES, IF SHOWN, ARE GIVEN IN NORTH AMERICAN DATUM OF 1983 (NAD83).
5. FIELD EQUIPMENT USED: NIKON TOTAL STATION, EPOCH 35.
6. ALL DISTANCES ARE HORIZONTAL GROUND DISTANCES AND ALL BEARINGS ARE NORTH CAROLINA STATE PLANE COORDINATE SYSTEM UNLESS OTHERWISE SHOWN.
7. THIS MAP IS NOT A CERTIFIED SURVEY AND HAS NOT BEEN REVIEWED BY A LOCAL GOVERNMENT AGENCY FOR COMPLIANCE WITH ANY APPLICABLE LAND DEVELOPMENT REGULATIONS.
8. THE PROPERTY LIES IN ZONES "X" & "AE" PER NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP NUMBER 3710463900J, DATED MARCH 18, 2008.
9. ZONING IS RA.
10. PROPERTY OWNER: MERITAGE HOMES OF NC, INC.
    7761 BALLANTYNE COMMONS PARKWAY
    CHARLOTTE, NC 28277

CURVE	LENGTH	RADIUS	TANGENT	CHD BEARING	CHD LENGTH
C1	64.33	675.00	32.19	S53°35'39"W	64.30

Bateman Civil Surve
Engineers • Surveyor
200 N. Main Street, Holly Springs, NC 27540 Ph:
www.batemancivilsurvey.com Info@
NCBELS Firm No. C-2



VICINITY MAP

(Not to Scale)

LEGEND

PO = PORCH
CP = COVERED PORCH
P = CONCRETE PATIO
WD = WOOD DECK
SW = SIDEWALK
DW = CONC DRIVEWAY
⊗ = CONTROL POINT
○ = IRON PIPE FOUND
◉ = IRON PIPE SET
● = DRILL HOLE FOUND
WM = WATER METER
CO = CLEAN OUT
AC = AIR CONDITIONER
Ⓢ = SEWER MANHOLE
EB = ELECTRIC BOX
Ⓒ = CABLE BOX
T = TELEPHONE PEDESTAL
CI = CURB INLET
TUA = TRANSITIONAL USE AREA
☼ = LIGHT POLE

BUILDING SETBACKS:

FRONT = 35 ft
REAR = 35 ft
SIDE = 15 ft
CORNER = 25 ft

I hereby certify
correct and tha
wholly on the l
are no visible e
said lot.

PRELIM

Steven P. Carso
Date

This map is of an e
and is only intende
purposes shown
recordation. No th

APPROVAL FOR STAKING:

THIS PLOT PLAN AS PREPARED BY BATEMAN CIVIL SURVEY
AND IS HEREBY APPROVED FOR STAKING ON THE DATE AS S

MERITAGE HOMES REPRESENTATIVE

PRELIMINARY PLOT PLAN

FOR

MeritageHomes

BELLS CROSSING - PHASE ONE -
218 BELLS CROSSING DRIVE, MOORES
DAVIDSON TOWNSHIP, IREDELL C

DATE: 5/6/13 DRAWN BY: JKF CHE

REFERENCE: BM 54, PGS 89-91 SC

IREDELL COUNTY HEALTH DEPARTMENT

Application For Improvement Permit and/or Authorization To Construct, Existing System Inspection

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1. APPLICATION FOR: ✓ Improvement Permit ___Authorization To Construct ___BOTH ___Existing System Inspection

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   Place check ( ) beside whichever is submitted if applicable
   ✓ Survey Plat, Scaled no more than 1 Inch = 60 Feet
   ✓ Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. **Applicant Information:**

Applicant Name	Mailing Address	Home Phone	Work Phone
Ryan west Developers	127B Promenade Dr. Mooresville NC 28117		704 361-1084
Owner Name	**Mailing Address**	**Home Phone**	**Work Phone**
Same			

4. **Property Information:**

Street Address	Subdivision Name	Section/Phase and Lot Number
	Bells Crossing	Lot 72

Driving Directions: See attached zoning permit

****

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

Maximum Number of Bedrooms 4
Maximum Number of Occupants 8
If Expansion, Current Number of Bedrooms ___

( ) 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:**

( ) New Well ( ) Existing Well (X) 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___ (X) 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?

****

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9. Signature: [signature] 5/16/08

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

IREDELL COUNTY HEATLH DEPARTMENT

PAGE 2: *SITE PLAN WORKSHEET*

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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: Mark O Wansley
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

5/16/08
DATE

USE THIS SPACE TO DRAW YOUR SITE PLAN

See Attached SITE PLAN

