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: (M) 336-972-6481

Applicant	Phone #	Mailing Address	City	State	Zip Code
Shirley Koehn	336-969-2283	455 College St.	Rural Hall	N.C.	27045

Current Property Owner	Mailing Address	City	State	Zip Code
Shirley Koehn	Same			

PROPERTY INFORMATION: Hagers Pt. Mobile Home Park.

(Proposed) Subdivision Name	(Proposed) Lot #	(Proposed) Block/Section #	State Road #
see property description 24			

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

Specific Directions to Property _____

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

House _____ Mobile Home X Commercial _____ No. Bedrooms 3 No. Baths 2

No. Persons or Employees (commercial only) _____ Basement _____ Basement with Plumbing _____

Crawl Space _____ 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.

6-17-02 DATE Shirley V. Koehn SIGNATURE OF OWNER/AUTHORIZED AGENT

Town of Mooresville Jurisdiction
PROPERTY DESCRIPTION

Application for (not a permit)

Call Sanitarian Between
8 a.m. and 9 a.m.
664-5281

Number 21703 ☑ Improvements Permi ☐ Zoning Permi ☐ Subdivision Approval ☐ Other

Proposed Use: Single Family Residence

Location: 122 Hager Point Lane

Tax PIN: 4646-64-8942 Township: Davidson Jurisdictio: Outside Zoning: R@0

Subdivision: Hager Point Mobile Home Par Lot: 124 Size: 4.40 Flood Plain: No Watershed: WSIV PROT

Contractor: C & R Mobile Home Movers Owner: Johnny Butler & Shirley Loehn

Address: 455 College Street, Rural Hall 27045 Phone: (336) 969-2283

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 Inspection Department Representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

Shirley V. Loehn — Signature of Owner or Authorized Agen

6-17-02 — Date

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

Lot Area: 0 Lot Width: 0 Front Yard Depth: 0 Side Yard Depth: 0

Rear Yard Depth: 0 Corner Yard Depth: 0

LAND USE INDICATED [☑ IS ☐ IS NOT] PERMITTED IN THE ZONING DISTRICT

Remarks: Must not be older than 1976 model.

Holding Permits: no

Tree Board Review? no

Reason:

Has Property Been Recorded? yes

Erosion Plan Required: no

Directions: North on Alcove Road left Hager Point Lane

ZONING ADMINISTRATOR DIVISION

Steve Mann — Approved By:

6/17/02 — Date