3775

MOORESVILLE JURISDICTION

PROPERTY DESCRIPTION

Call Sanitarian Between 8 a.m. and 9 a.m.

664-5281

APPLICATION FOR (Not a Permit):

☐ Improvements Permit ☑ Zoning Permit ☐ Special Use ☐ Subdivision Approval ☐ Other

Proposed Use: Single Family Residence

Location: APPLE BLOSSOM DRIVE

TAX MAP NO. 2518A36

TAX MAP NUMBER	TOWNSHIP	JURISDICTION	ZONING	WS DISTRICT
2518A36	Davidson	Outside	R-20A	WSIV CA

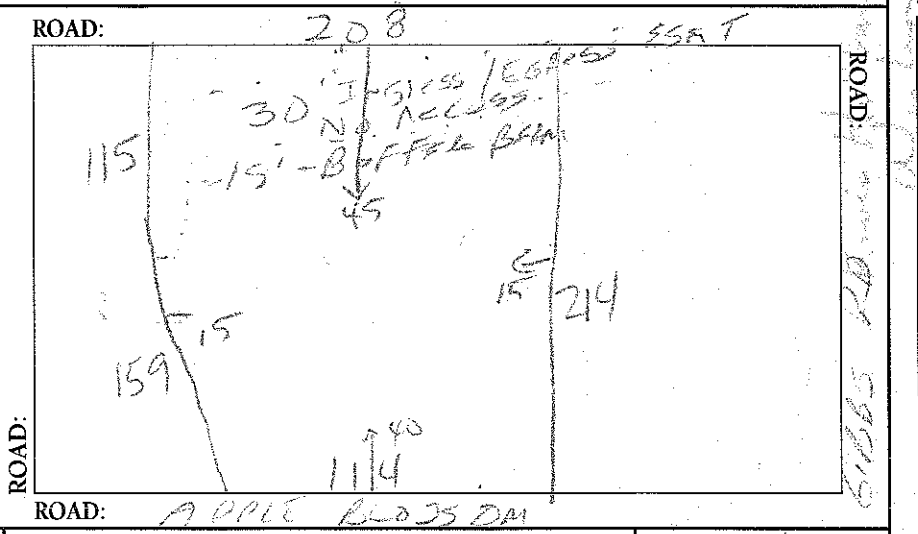
SUBDIVISION / MOBILE HOME PARK	LOT NUMBER	LOT SIZE	FLOOD PLAIN
Gibbs Cove Phase 2	36	.911	☐ Yes ☑ No

REQUIRED INFORMATION FOR IMPROVEMENTS PERMIT — IREDELL COUNTY HEALTH DEPARTMENT

SKETCH MAP

On the lot to be built on or to be used, show the property lines and the actual dimensions of the lot, the size and shape of any and all buildings located or to be located on the lot showing the distances from lot lines. Show setback of main building on adjacent lot and their use.

SEE ATTACHED



OWNER	ADDRESS	PHONE NUMBER
MIKE Ashe	3410 Ashs DRIVE Charlotte NC	28269 596 4501

I certify that all of the 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.**

SIGNATURE OF OWNER OR AUTHORIZED AGENT — 3-21-96 APPLICATION DATE

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

LOT AREA	LOT WIDTH	FRONT YARD DEPTH	SIDE YARD DEPTH	REAR YARD DEPTH	CORNER YARD DEPTH
20000 SQ. FT.	100 FT.	40 FT.	15 FT.	30 FT.	25 FT.

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

REMARKS: Well & Septic

NO ACCESS TO REAR ESMT;

15' REAR BUFFER/BERM - DO NOT DISTURB

ZONING ADMINISTRATION DIVISION — APPROVED BY — 3-21-96 DATE

WHITE: Original CANARY: Inspection Copy PINK: Health Department GOLD: Owner

BCP 5/94