5/21/14 Pd.
Only Well & btw Septic

RECEIVED MAR 2 5 2014 DH
Paid $150.00 Statesville

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 ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information:

Applicant Name: Same Address: _____ Phone: _____

Owner Name: PRESTON CORNELIUS Address: 2027 Charlotte Hwy Mooresville NC Phone: 704-664-5460

Property Information:

Street Address: 132 Bluefield Rd. - Mrsal - 28117

Subdivision Name: — Section/Phase: — Lot Number: —

Driving Directions: _____

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

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 1
Maximum Number of Occupants: 2
( ) 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: _____

Mobile Home Replacement

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: Preston Cornelius 3-25-2014
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

PAID $ 227.25
#1316 3-25-14
CP

IREDELL COUNTY

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

APPLICATION NUMBER
202410
Issue Date: 03/25/2014

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4648660276.000	122 BLUEFIELD ROAD, MOORESVILLE, NC 28117	MOORESVILLE

Owner Information	Applicant Information
Owner: CORNELIUS C PRESTON	Applicant: C. PRESTON CORNELIUS
Address: 2027 CHARLOTTE HWY MOORESVILLE, NC 28115	Address: 2027 IREDELL CO, NC 28625
Phone:	Phone:

Use Requested	Zone Code
SW MH TO BE REPLACED ON SITE	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
59.669	35.00	35.00	15.00	25.00	CACL	X

Remarks:

REPLACING SW MH ON SITE; EXISTING SEPTIC & WELL ON SITE;REQUIREMENTS FOR ALL SINGLEWIDE MOBILE HOMES Must remove the towing apparatus, if it cannot be removed, it shall be screened; Must have a continuous underpinning; Must have 36 square foot front porch constructed within 12 inches of the floor elevation and fully underpinned; Must have concrete or similar approved steps at all other secondary entrances and exits; Must face front property line and be no less than 20 degrees from parallel to the front property line. Original home must be removed before Certificate of Occupancy can be approved.

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: Preston Cornelius Date: 3-25-2014

Permit Number	8531	TOTAL FEES:	$ 77.25