IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PERMIT# 112902 PIN# ~~4649-05-5544.30~~ 4649-06-4021 V DATE 5/20/05

OWNER OR CONTRACTOR Corinthian Bldrs. PHONE: Business _____ Home _____

ADDRESS PO Box 990 Denver NC 28037

LOCATION Perth (W), TR Gray cliff on Rt

SUBDIVISION Gray cliff BLOCK / SECTION — LOT 30 LOT AREA 0.637 Ac SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.3

Septic Tank: 1000 Gallons; STB 785 Date 2/21/05

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 600 Linear Feet 200

No Lines 4 @ 50 Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth —

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: Gravity Panel Block

Repair System Description: LP Panel Block

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms ____ No. Employees ____

☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

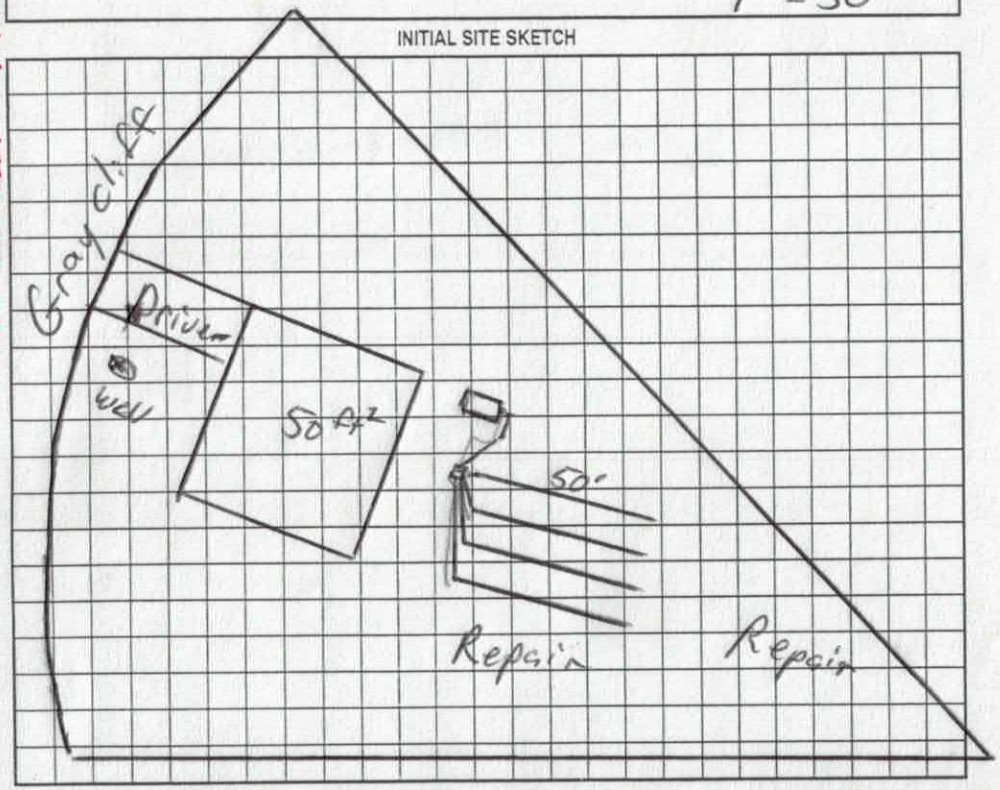
Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions:

1" = 50'

Comments:/Conditions:

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed As Drawn

Permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: Drew Hendrix date 5/23/05 Installed by: Corinthian Bldrs

Improvement Permit by: RS date 5/20/05 Operation Permit by: Gary RS date 5/24/05

Authorization to Construct by: RS date 5/20/05 Existing System Inspection by: _____ date _____

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK

Lot Address: 114 Gray Cliff Dr. Mooresville

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:

Applicant	Phone #	Mailing Address	City	State	Zip Code
Carolina Developers	704-450-1258	P.O. Box 990	Mooresville	NC	28037.

Current Property Owner	Mailing Address	City	State	Zip Code
Same				

PROPERTY INFORMATION:

(Proposed) Subdivision Name	(Proposed) Lot #	(Proposed) Block/Section #	State Road #
Graycliff	30.		

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

Specific Directions to Property Portland North 1st Lot on Rt 4.

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

House ✓ Mobile Home _____ 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.

5-3-05 DATE _____ SIGNATURE OF OWNER/AUTHORIZED AGENT

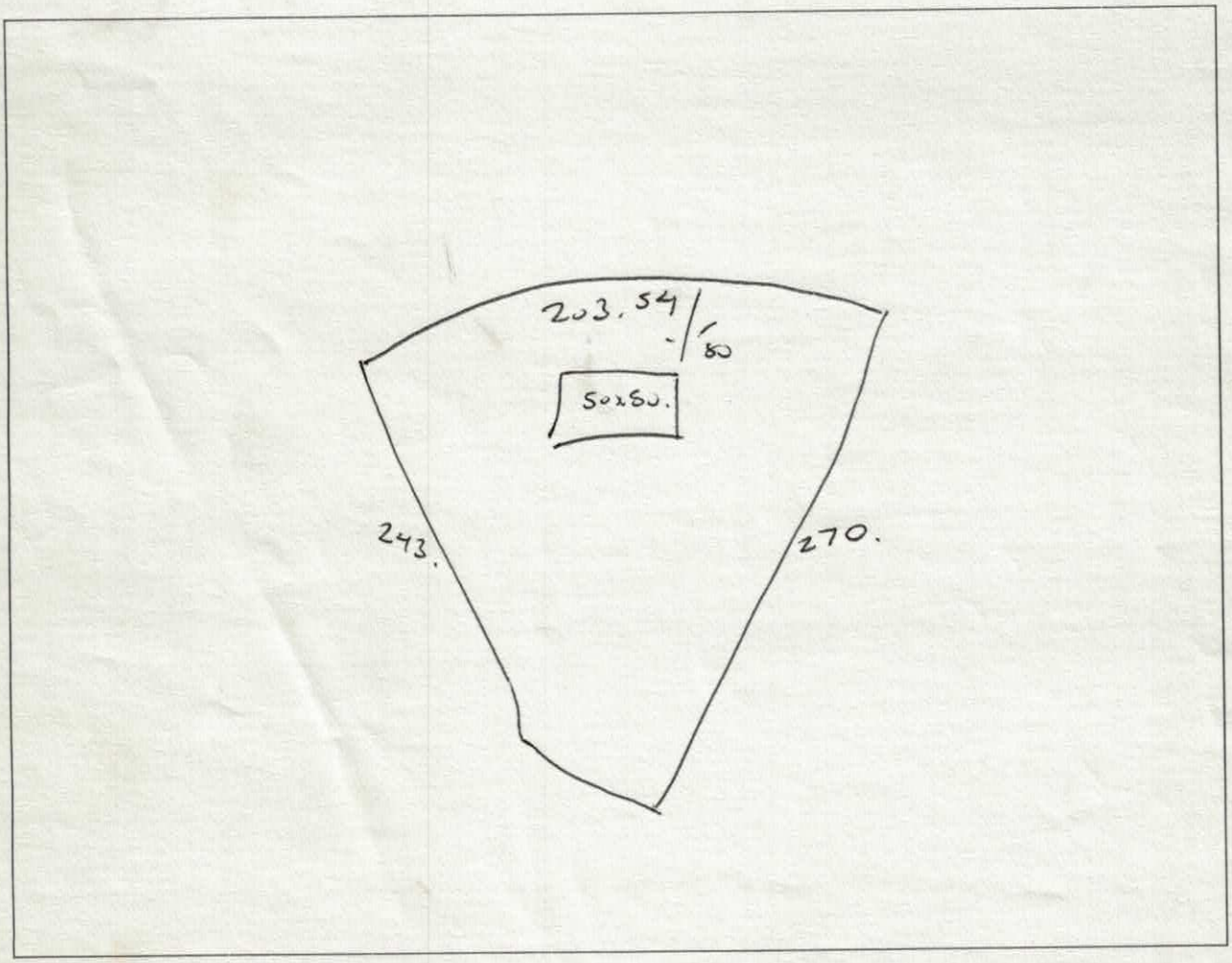
IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
Application For Improvement Permit
Site Plan Form

INSTRUCTIONS TO APPLICANT: (Items in Parentheses are to be performed by DEVELOPERS ONLY)

All property corners must be staked and flagged with dimensions matching those shown on an approved final (preliminary) plat (**and** proposed house dimensions must be staked and flagged) before the Iredell County Health Department can begin review work on this proposed site. An application for an Improvement Permit is considered complete **only** when this site plan form is completed, signed, and attached to the application form.

Lot 30 Gray Cliff.

As Close To Scale As Is Possible: 1. Draw in the proposed lot showing **all** proposed lot dimensions and orientation to proposed streets or roads. 2. Draw in the proposed structure showing dimensions and distances to property lines (include decks, walkways, etc.). E. Draw in the proposed driveway location. 4. Draw in all wells, both existing and proposed, including those on adjacent property (if known). 5. Draw in any other structure ie. sheds, outbuildings, pools, etc. which will occupy space on the proposed lot.



I hereby convenant that the above representation is correct to the best of my knowledge and ability.

_____Date_____SIGNATURE OF OWNER/AUTHORIZED AGENT

FRANK BETZ ASSOCIATES INC

HOMEPLANS *Designed for Today's Market.*

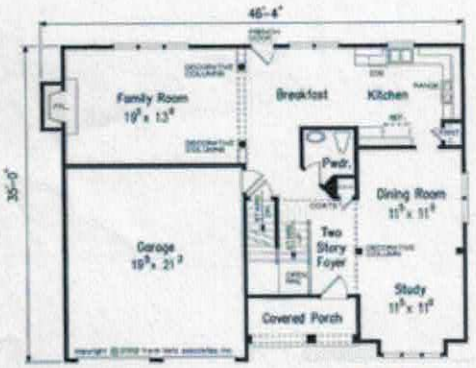
FAIRGREEN



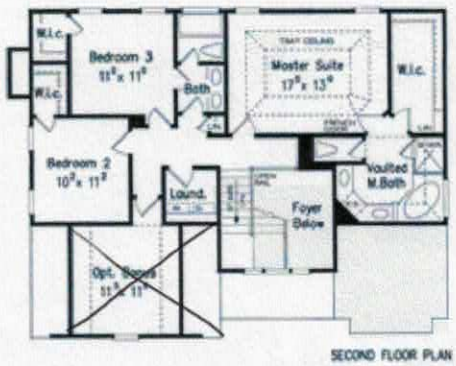
1st Floor	1019 sq. ft.
2nd Floor	933 sq. ft.
Total	1952 sq. ft.
Opt. Bonus	153 sq. ft.

Overall Dimensions: 46'-4" x 35'-0"

Lot 29



FIRST FLOOR PLAN



SECOND FLOOR PLAN



Floorplans and Elevations are subject to change. Floorplan dimensions are approximate. Consult working drawings for actual dimensions and information. Elevations are artists' conceptions.

Acknowledgement Of
Plans Submittal ONLY!

Date 9-30-04

Date 9/30/04

Iredell County
Planning & Enforcement
227 S. Center St. PO Box 788
Statesville, NC 28687
704-878-3113

Zoning Permit

Permit Number: 112902ZO

Printed: 5/1/2003

Master #: 112902

Associated Permits:
112902ZO Zoning

Applicant

Name: Corinthian Developers, LTD
Phone: 704-827-9697
Address: P.O. Box 990
Denver, NC 28037

Parcel

Parcel Number: 4649-05-5541.30
Zoning: RA
Address: Gray Cliff Dr.
Mooresville, NC 28117
Township: 1700
Area: .637
Subdivision: Gray Cliff
Lot(s): 30
Directions to Parcel: Hwy 21S, right on Perth, left on Gray Cliff, 1st on right

Owners

Name: Corinthian Developers, LTD
Phone: 704-827-9697
Address: P.O. Box 990
Denver, NC 28037

Fees and Receipts:

Number	Description	Amount
FEE-59876-03	Zoning - Permit / Inspection	$45.00
FEE-59877-03	Environmental Health - Type I or II System	$200.00
	Total Fees:	**$245.00**
REC-37480-03		$245.00
	Total Receipts:	**$245.00**

Permit Information:

Max Built Upon Area:

Watershed:	WSIV-PA
Flood Zone:	No
Set Backs:	F35 S15 R35
Minimum Lot Size:	21780
Minimum Lot Width:	100
Min # Parking Spaces:	
Land Use Permitted:	Yes
Site Plan Reviewed:	
Staff:	
Zoning Permit:	No
Septic Typet:	New System
Proposed Use:	Single Family
Property Recorded:	No
Community Water:	No
Provider:	
Community Sewer:	No
Provider:	
Date:	
# of Stories:	2
# of Bedrooms:	4
# of Units in Building	0
Additional Conditions:	Hold building permit until plat is recorded
Comments:	

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. 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 responsibilty of the affected parties.

Applicant: _____ Date _____

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

Permit Number: 112902ZO