5254

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: Replace mobile Home w/ 28x80

Location: Foursquare Rd

TAX MAP NUMBER	TOWNSHIP	JURISDICTION	ZONING	WS DISTRICT
4656440099	Coddle Creek	Outside	R20A	IVSIV CA

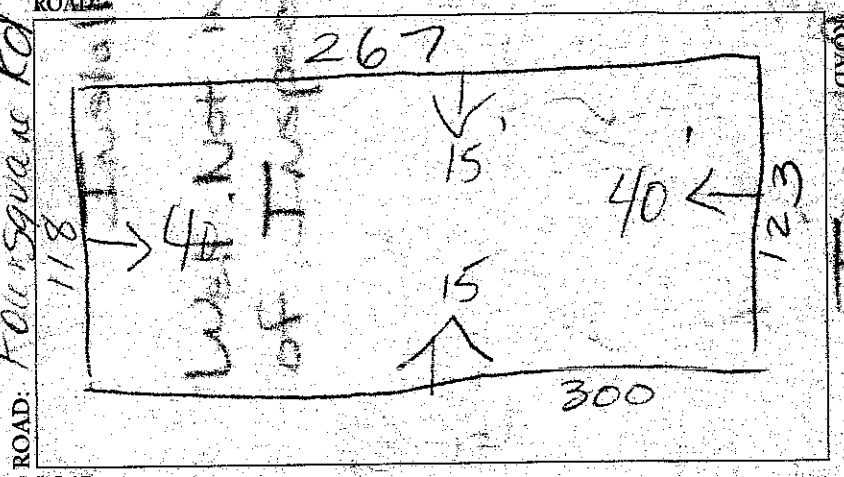
SUBDIVISION / MOBILE HOME PARK	LOT NUMBER	LOT SIZE	FLOOD PLAIN
	2	1.6 acre	☐ Yes ☑ No

TAX MAP NO. 4656440099

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.



OWNER	ADDRESS	PHONE NUMBER
Allen Sloop	8131 Bridge View Ct	6628436

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.**

Paul Sprinkle — SIGNATURE OF OWNER OR AUTHORIZED AGENT

12-2-97 — 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.	40 FT.	FT.

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

REMARKS: Is not on City water + sewer

Has Existing Tank

Will Have To Put well in

ZONING ADMINISTRATION DIVISION — APPROVED BY: Steve E. Mann — DATE: 12/2/97

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

BCF 5/94