NE 1165

4656 61 2775

MOORESVILLE JURISDICTION

PROPERTY DESCRIPTION

APPLICATION FOR- (Not a Permit) ( ) Improvements Permit (X) Zoning Permit ( ) Special Use ( ) Subdivision ( ) Other Approval Enclosed deck

Proposed Use: Addition (23X14 SUNROOM) FRONT PORCH 8X12

Location: MACKWOOD ROAD SR 1148

Tax Map No.	Township	Jurisdiction	Zoning
ID-1A-A-42	Coddle Creek	Inside	R-20A

Subdivision/Mobile Home Park	Lot No.	Lot Size	Flood Plain ( ) yes (X) no

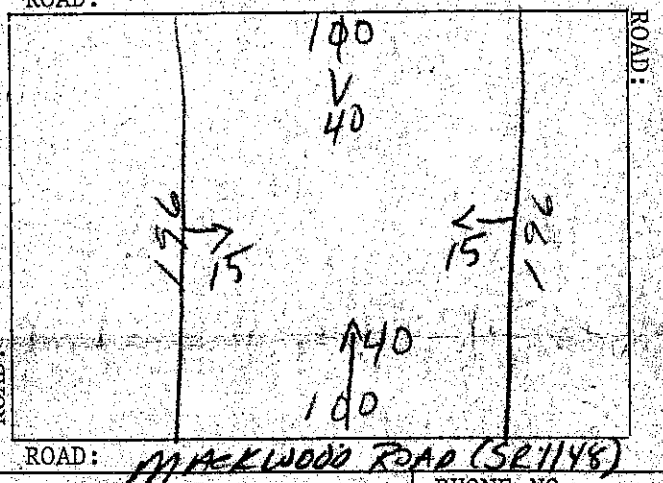
Approx. Area to be disturbed	Engineering Firm	Contact	Phone	Street Address

TAX MAP NO. ID-1A-A-42

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 NO.
John F. Holbrook	Rt 11 Box 210 Mooresville	

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.

Mark R Scott Scott Constr. — 5-10-85

Signature of Owner or Authorized Agent — Application 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 20000 sq. ft. Front yard depth 40* ft. Corner yard depth 25 ft.

Lot width 100 ft. Side yard depth 15 ft. Rear yard depth 40 ft.

Pre-existing NON-conforming lot *FROM ROW

LAND USE INDICATED (~~is~~) (~~is not~~) PERMITTED IN THE ZONING DISTRICT.

REMARKS: NOT ON city water or sewer

ZONING ADMINISTRATION DIVISION

M. Erskine Sowell — 5-10-85

Approved by — Date

WHITE: Original CANARY: Inspection Copy PINK: Health Dept. GOLD: Owner

No. 0456

MOORESVILLE JURISDICTION

PROPERTY DESCRIPTION

APPLICATION FOR- (Not a Permit) ( ) Improvements Permit (✓) Zoning Permit ( ) Special Use ( ) Subdivision Approval ( ) Other

Proposed Use: Addition of 3 room to house 16'12" increasing

Location: Macwood Rd off Highway 115 South

Tax Map No.	Township	Jurisdiction	Zoning
1D1A-A-42	Coddle Creek	Mooresville	R-20A

Subdivision/Mobile Home Park	Lot No.	Lot Size	Flood Plain ( ) yes (✓) no

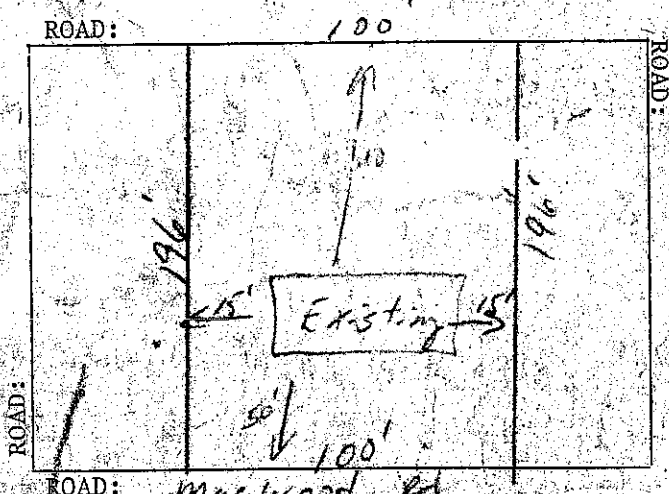
Approx. Area to be disturbed	Engineering Firm	Contact	Phone	Street Address

MAP NO. 1D1A-A-42

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 NO.
John Holbrook	Rt. 2 Box 290	664-2173

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 — 7-21-86 Application 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 20,000 sq. ft. Front yard depth 50 ft. Corner yard depth N/A ft.

Lot width 100 ft. Side yard depth 15 ft. Rear yard depth 40 ft.

LAND USE INDICATED (is) (~~is not~~) PERMITTED IN THE ZONING DISTRICT.

REMARKS: No on lot water or sewer

ZONING ADMINISTRATION DIVISION

Approved by Cindy Lee — 7-21-86 Date

WHITE: Original CANARY: Inspection Copy PINK: Health Dept. GOLD: Owner