Town of Mooresville Jurisdiction

Zoning Approval

for building permit application

Call Sanitarian Between
8 a.m. and 9 a.m.
664-5281

Number: 156612ZO Subdivision: Four Oaks

Proposed Use: Septic Easements
Location: 132 Sagewood Dr.
Tax PIN: 4666567579.000 Zoning: R-2
Lot: Size: 10.473 Flood Plain: Watershed:
Contractor: Owner: Travis and Jennifer M Kvapil
Address: 132 Sagewood Dr.
MOORESVILLE, NC 281150000 Phone: 704-664-4217

I certify that all 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 — Date: 5/15/09

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

Lot Area: Lot Width: Front Yard Depth: 30 ft Side Yard Depth: 15 ft
Rear Yard Depth: 40 ft Corner Yard Depth:

Remarks: Septic easements for accessory building at 132 Sagewood Drive. Accessory Bldg Permit # is 153173zo

Directions: From Exit 36 take Highway 150 east, turn right on Iredell (Highway 3), right on Kam Drive- at end

Maureen Gable — Approved By
5/15/2009 — Date
$50 paid — Application Fee

#2 Accessory Bldg.

NO # ISSUED - MOBILE HWY NOT FUNCTIONING

Town of Mooresville Jurisdiction

Zoning Approval

for building permit application

Call Sanitarian Between
8 a.m. and 9 a.m.
664-5281

Number:

Subdivision: Four Oaks

Proposed Use: Accessory Building - #2

Location: 132 Sagewood DR

Tax PIN: 4666567579.000

Zoning: R-2

Lot: Size: 10.473

Flood Plain: Watershed:

Contractor:

Owner: PERRY L & LISA J OLIVER

Address: 132 Sagewood Drive
MOORESVILLE, NC 281150000

Phone: 704-664-4217

I certify that all 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

Date

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

Lot Area: Lot Width: Front Yard Depth: 30' Side Yard Depth: 15'

Rear Yard Depth: 40' Corner Yard Depth:

Remarks: #2 Accessory bldg up to 3500 sf. Must be in rear yard of this parcel (maintain 15 ft sideyard setback) and stay out of Duke Power easement, gas line transmission easement, sanitary sewer easement, and 100 year flood line.

Directions: From Exit 36 take Highway 150 east, turn right on Iredell (Highway 3), right on Kam Drive- at end

ACCESSORY REAR SETBACK IS 5 ft. Amy

Maureen A. Gable
Approved By

10/15/2008
Date

$50.-
Application Fee