IREDELL COUNTY HEALTH DEPARTMENT

Application For Improvement Permit and/or Authorization To Construct, Existing System Inspection

(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)

1. APPLICATION FOR: (X) Improvement Permit (X) Authorization To Construct ___BOTH ___Existing System Inspection

2. 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 check ( ) beside whichever is submitted if applicable ___ Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. **Applicant Information:**

Applicant Name	Mailing Address	Home Phone	Work Phone
Carbon Homes of Cabarrus County	1700 Morrison Rd Concord, NC 28025		704-787-0490
Owner Name	**Mailing Address**	**Home Phone**	**Work Phone**
Rich Randall	175 Maple View Rd Troutman, NC	704-528-1704	

4. **Property Information:**

Street Address	Subdivision Name	Section/Phase and Lot Number
175 Maple View Rd Troutman, NC	Wildlife Bay	

Driving Directions: Exit 36 (off I-77S), turn right, right on Perth Rd, left on State Park Rd, left on Wildlife Rd, Right into Wildlife Bay, 1st right Maple View

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5. **RESIDENTIAL Site Development Information:** *(Check or Complete ALL that apply)*

( ) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
( ) Repair To Failing Septic System

Maximum Number of Bedrooms ____
Maximum Number of Occupants ____
If Expansion, Current Number of Bedrooms ____

( ) Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) Basement w/Plumbing?
( ) Basement w/out Plumbing?

IF Non- Residential Site Development: Type of Business ____
Square Footage ~~of Building~~ detached garage 24x22
Maximum Number of Employees ____
Maximum Number of Seats ____

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6. **Proposed Water Supply:**

( ) New Well (X) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

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7. **Desired Septic System Type:** *(You may rank in order of preference, if any)* Existing

( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other____ ( ) No Preference

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8. **Please Answer The Following To The Best of Your Ability:**

( ) Yes ( ) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industry) to be generated?
( ) Yes ( ) No Is the site subject to approval by any other public agency?

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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.

9. Signature: _____ 10.6.09
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY HEATLH DEPARTMENT

PAGE 2: *SITE PLAN WORKSHEET*

SEE THE SAMPLE SITE PLAN BELOW. INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!

Place an (X) beside each item as you complete the site plan:

____ **Property Line measurements are clearly identified…**
____ **All proposed structures are indicated…**
SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site
____ **Front and side setbacks from property line…**
____ **Preferred driveway location and configuration, preferred well location…**
____ **Area you prefer your septic system to be placed…**
____ **North arrow, or other sufficient indicator of direction…**

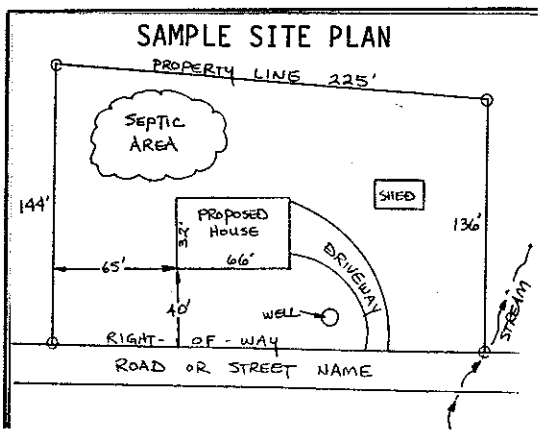
Circle N/A on the following if appropriate:

____ **Location of septic systems and wells within 100' of your property…** **N/A**
____ **Location of easements and rights of ways on your property…** **N/A**
____ **Location of any designated wetlands on the property…** **N/A**

Signature: _____ 10.6.09
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**

USE THIS SPACE TO DRAW YOUR SITE PLAN

See Attached

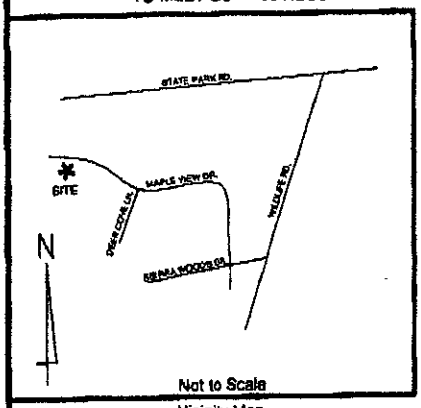


THIS IS TO CERTIFY THAT ON THE 18 DAY OF May 20 09 AN ACTUAL SURVEY WAS DONE UNDER MY SUPERVISION OF THE PROPERTY SHOWN HEREON. THIS MAP IS NOT INTENDED TO MEET GS 47-30 RECORDING REQUIREMENTS.

SIGNED Robert G. Bishop

Bishop Land Surveying, Inc.
10719 Trolley Run Dr.
Cornelius, N.C. 28031
Phone (704) 634-9356

NORTH CAROLINA PROFESSIONAL SEAL L-3957 LAND SURVEYOR ROBERT G. BISHOP



Not to Scale
Vicinity Map

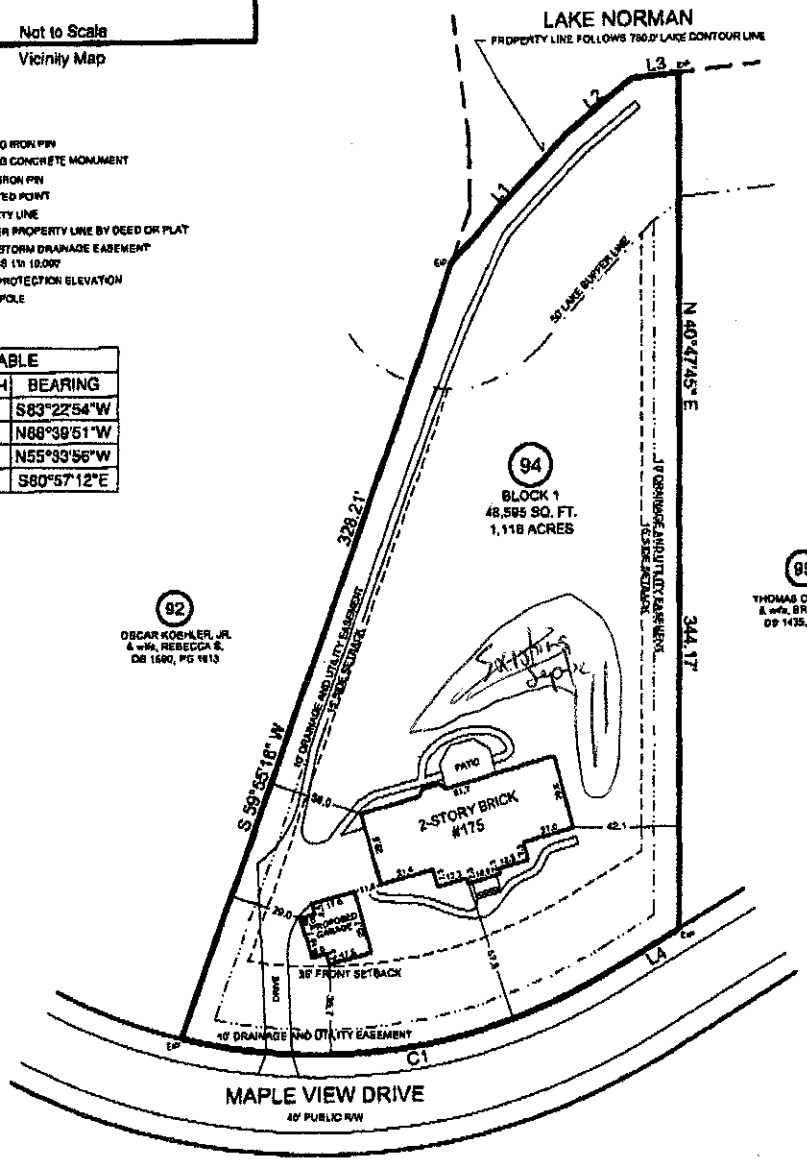
MB 32, PG 155

LAKE NORMAN
PROPERTY LINE FOLLOWS 760.0' LAKE CONTOUR LINE

LEGEND

E.I.P.	EXISTING IRON PIN
E.C.M.	EXISTING CONCRETE MONUMENT
S.I.P.	SET IRON PIN
CP	COMPUTED POINT
	PROPERTY LINE
	ADJOINER PROPERTY LINE BY DEED OR PLAT
P.S.D.E.	PUBLIC STORM DRAINAGE EASEMENT
CLOSURE	EXCEEDS 1 in 10,000'
F.P.E.	FLOOD PROTECTION ELEVATION
	POWER POLE

LINE TABLE		
LINE	LENGTH	BEARING
L1	69.10	S83°22'54"W
L2	35.42	N88°39'51"W
L3	18.47	N55°33'56"W
L4	26.53	S80°57'12"E



CURVE TABLE				
CURVE	LENGTH	RADIUS	BEARING	CHORD
C1	184.44	230.00	N67°58'52"W	179.54

Plot Plan SURVEY
OF
Lot 94, Block 1, Wildlife Bay, Phase 2
Davidson Twsp., Iredell County, N.C.

SCALE 1"= 60'

THE PROPERTY OF Richard W. Randall and wife, Joanne M. Randall

PLAT RECORDED IN BOOK 32 AT PAGE 155 DEED RECORDED IN BOOK 1630 PAGE 1331

Drawn By: RGB

FILE:C:\LAND PROJECTS 3\Iredell County\dwg\Wildlife Bay L94B1.dwg