Iredell County
ZONING PERMIT

227 South Center St. PO Box 788 Statesville, NC 28687 Phone 704-878-3118

Call Sanitarian between 8 a.m. & 9 a.m. Statesville 704-878-5305 Mooresville 704-664-5281

Permit #:	119372ZO	Subdivision:	
Proposed Use:	Accessory Dwelling Unit	Township:	1300 Chambersburg
Location of Property:	000 Amity Hill Rd. Statesville NC 28677		
Parcel #:	4752-10-5495	Zoning:	RA
Lot #:	Size: .79	Flood Plain:	No Watershed: None
Applicant:	Allen & Wilma McPhee	Owner:	Allen & Wilma McPhee
Address:	3145 Amity Hill Rd. Statesville NC 28677	Address:	3145 Amity Hill Rd. Statesville, NC 28677
Phone:	704-873-7410	Phone:	704-873-7410
Property Recorded: Yes	Site Plan Reviewed:	Community Water: No	Community Sewer:

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

Min. Lot Area: Min. Front Yard: Min. Left Side Yard:

Min. Lot Width: Min: Rear Yard: Min: Right Side Yard:

Min. Number Parking Spaces: Max. Built Upon Area:

Comments:

Hold permit until deed recorded to add more land;10' from existing house, R35 RS15 LS15; It shall be clearly subordinate to the principal structure or home. For detached dwelling units and those using separate septic and/or well systems, the minimum lot size shall be 2 times the minimum lot requirement for the district. Shall not be greater than 650 square feet. The accessory unit may be combined with a garage, workshop, etc. Must be owned by the same person who owns the principal dwelling or home. Shall not be served by separate driveway from that of the principal dwelling or home. Must be located in the rear or side yard and meet rear and side yard setback requirements of a principal

Directions:

77S, Exit 45, turn L, about a mile log cabin on the L.

FEES

Zoning Permit/Inspection Fee	☑	$45.00
Site Plan Review Fee	☐	$0.00
Environmental Health New System	☐	$0.00
Environmental Health Existing System	☑	$50.00
Total Fees:		$95.00

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 Planning & Enforcement Representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

Applicant: Allen R & Wilma McPhee Date: 2/26/04

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

REBECCA HARPER Printed: 2/26/2004