IREDELL COUNTY

PO Box 788
349 North Center St.
Statesville, NC 28677

APPLICATION NUMBER
213032
Issue Date: 08/20/2015

FILE COPY

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4752613203.000	866 SHILOH ROAD, STATESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: PARKER JAMES R+JUDY	Applicant: FREEDOM HOMES-TROUTMAN
Address: 866 SHILOH RD STATESVILLE, NC 28677	Address: 1042 CHARLOTTE HWY- ERIC TROUTMAN, NC 28166
Phone:	Phone:

Use Requested	Zone Code
REPLACE SWH WITH DWH	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.870	35.00	35.00	15.00	25.00	NOT	X

Remarks:

$ PAID

REQUIREMENTS FOR ALL MULTI -SECTIONAL MOBILE HOMES Minimum size of main body is at least 22 feet by 40 feet; Must have standard residential shingles; Minimum of 3/12 roof pitch; Must have continuous masonry underpinning; Must have minimum roof eave and raker projections of 6 inches; Must have a 36 square foot deck or porch at all front and rear entrances; Exterior siding must consist of vinyl or aluminum lap siding, wood, or hardboard, comparable in composition, appearance and durability to residential siding; Must remove towing apparatus; Must face front property line and be no less than 20 degrees from parallel to the front property line. Original mobile home must be removed before Certificate of Occupancy can be approved.

The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions, plat conditions and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

Applicant: _____ Date: _____

Permit Number	See Attached 47170	TOTAL FEES	$ 77.25

Zoning Permit # 212993 See reverse for new construction.

Fee $ 45.00 **Code 104**

Zoning Permit

LOCATION	Date (mm/dd/yy)	08 | | 2015	Tax Parcel #	4639-39-0910
	Business Name or Property Owner	Danny & Joanna McConnell		
	Street Address	195 Timber Lake Dr Troutman, NC 28166		
	Business Type and/or Project Description	New single family Residential home		
APPLICANT	Applicant	Danny McConnell	Preferred Phone	704 682-4477
	Address City/State/Zip	1452 Robinson Rd. Mooresville, NC		
	E-Mail	jmcruiser@bellsouth.com, danny.c.mcconnell@gmail.com		
	Would you like your e-mail address added to: (check any of interest)	☐ The Whistle Stop (Town of Troutman newsletter) ☐ Troutman Business Council (Local Chamber of Commerce) ☐ Sunshine List (Agenda for Town Board Meetings)		

Following approval of this permit proceed to Iredell County Building Inspections (349 N Center St, Statesville, NC 28677). All Applicants, please note that final inspection by the Town is required prior to occupancy (exception, single family residential additions/expansions). Business Applicants, please note that proof of RPZ (backflow) inspection is required prior to occupancy (in addition, restaurants may be required to have a grease trap inspection).

Office Use Only

Zoning District(s)	RS	Plans Attached	Yes ☑ No ☐
Utilities	P. water | Septic	Floodplain	Yes ☐ No ☑
Permitted Use of Property	single family Residential | Side Entry Garage		
Minimum Setback Requirements	Front 50' Rear 50' Right Side 15' Left Side 15' *Setback measured from nearest projecting point of structure to Property Line.*		

Comments: 2 Front Yard Trees required | Roof pitch between 4:12 - 12:12 Property is within HOA other rules Apply

I hereby certify that all of the information provided for this application is, to the best of my knowledge, accurate and complete. I understand that this permit will expire and become invalid unless the work for which it was issued is started within six (6) months of the date of issue or is the work authorized is suspended or abandoned for a period of one (1) year.

Signature of Applicant

To the best of my knowledge, this application is deemed complete and approved based on the information provided to me and my knowledge of the Town of Troutman Unified Development Ordinance.

Signature of Zoning Administrator