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 #:	122642zo	Subdivision:	
Proposed Use:	Single Wide	Township:	1300 Chambersburg
Location of Property:	132 Faith and Hope Ln. Statesville NC 28677		
Parcel #:	4752-62-1005	Zoning:	RA
Lot #:	3 Size: 1.37	Flood Plain:	No Watershed: None
Applicant:	Palthana Bourommavong	Owner:	Palthana Bourommavong
Address:	150 Faith and Hope Rd. Statesville NC 28677	Address:	150 Faith and Hope Rd. Statesville, NC 28677
Phone:	704-450-9925	Phone:	704-450-9925
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: 25,000	Min. Front Yard: 35 ft	Min. Left Side Yard: 15 ft
Min. Lot Width: 100	Min: Rear Yard: 35 ft	Min: Right Side Yard: 15 ft
Min. Number Parking Spaces:		Max. Built Upon Area:

Comments:

Permit fees already paid on original permit issued 7/22/04. Updated lot information - wrong lot # originally.Singlewide is replacing the single wide that is located on property. Must remove the towing apparatus, if it cannot be removed, it shall be screened; Must have a continuous underpinning; Must have 32 square foot front porch constructed within 12 inches of the floor elevation and fully underpinned; Must have concrete or similar approved steps at all other secondary entrances and exits; Must be parallel to the front property line or be no less than 20 degrees from parallel to the front property line

Directions:

77S, Amity Hill Rd make L, L on Shiloh, L Faith and Hope property 3rd on right

FEES

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

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:_____ Date: _____

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

STEPHANIE WHITLOCK Printed: 8/6/2004