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 #:	144967ZO	Subdivision:	
Proposed Use:		Township:	1100 Bethany
Location of Property:	160 BETHANY RD STATESVILLE NC 28625		
Parcel #:	4757248751.000	Zoning:	RA
Lot #:	Size: 1.77	Flood Plain:	No Watershed: None
Applicant:	PATSY S COMBS	Owner:	PATSY S COMBS
Address:	160 BETHANY RD. STATESVILLE NC 28625	Address:	160 BETHANY RD. STATESVILLE, NC 28625
Phone:	704-876-0600	Phone:	704-876-0600
Property Recorded:	Site Plan Reviewed:	Community Water:	YES Community Sewer: NO

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: 35 ft	Min. Left Side Yard: 15 ft
Min. Lot Width:	Min: Rear Yard: 35 ft	Min: Right Side Yard: 15 ft
Min. Number Parking Spaces:		Max. Built Upon Area:

Comments:

MUST BE AT LEAST 50' FROM CLOSEST POINT OF HOUSE... SEE SETBACK SHEET: Only one accessory mobile shall be permitted per lot or parcel. The lot or parcel shall contain sufficient land area for the principal residential structure or home and the accessory mobile home to be considered independent principal dwelling units with both individually meeting the minimum lot size and required setbacks. The mobile home cannot be used as a rental and only relatives including in-laws and son or daughter by legal adoption shall occupy the accessory mobile home. The mobile home will meet the requirements of SR-7

Directions:

70' behind House

HWY 21 N, LFT. ON BETHANY, PROPERTY ON RT.

~~Elaine~~ Alma 35' Rear Property Line

9-19-07

FEES

25' Gilead

15 - other line

Zoning Permit/Inspection Fee	☑	$45.00
Site Plan Review Fee	☐	$0.00
Environmental Health New System	☑	$400.00
Environmental Health Existing System	☐	$0.00
Total Fees:		Public Water $445.00

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: Patsy D. Combs Date: 08/24/07

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

PAULA WOODY Printed: 8/24/2007