CID-112314

THE CITY of Statesville NORTH CAROLINA

City of Statesville Jurisdiction
ZONING APPROVAL

For building permit application 704-878-3575

General Information

Job Address	202 BROOKMEADE DRIVE	Permit Number	210092
Owner	BARIL GARY E II+JAMIE L	Tax Map	4765119639.000
Owner Addr.	202 BROOKMEADE DR	Zoning	R-15
	STATESVILLE NC 28625	Flood Hazard Area	NONE
Phone No.		Historic District	NO
Contractor	BARIL JAMIE	Architect	
Address	202 BROOKMEADE DR	Address	
	STATESVILLE NC 28625		
Phone No.	704-495-9542	Phone No.	

Type of Application ACCESSORY STRUCTURE - STATESVI

Utility Source

Electric
Water
Sewer

Required Information

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

	Lot Dimensions		Required Parking	Setbacks	
	Structure Size &		Landscaping	35	Front Yard
	Location		Utility Clearance	3	Rear Yard
	Easements		TRC Review	3	Right Yard
	Flood Certification		Other	3	Left Yard
	Driveway Cuts				

Department Approval

Planning Department [signature] Public Works

Comments 12 X 24 ACCESSORY STRUCTURE

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 Inspection Department Representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

[signature]
Applicant Signature

04/29/2015
Date

CID-112344

THE CITY of Statesville NORTH CAROLINA

City of Statesville Jurisdiction
ZONING APPROVAL

For building permit application 704-878-3575

General Information

Job Address	202 BROOKMEADE DRIVE	Permit Number	210093
Owner	BARIL GARY E II+JAMIE L	Tax Map	4765119639.000
Owner Addr.	202 BROOKMEADE DR	Zoning	
	STATESVILLE NC 28625	Flood Hazard Area	NONE
Phone No.		Historic District	NO
Contractor	BARIL JAMIE	Architect	
Address	202 BROOKMEADE DR	Address	
	STATESVILLE NC 28625		
Phone No.	704-495-9542	Phone No.	

Type of Application RESIDENTIAL POOL / SPA - STVL

Utility Source

Electric
Water
Sewer

Required Information

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

	Lot Dimensions		Required Parking	**Setbacks**	
	Structure Size &		Landscaping	35.00	Front Yard
	Location		Utility Clearance	6.00	Rear Yard
	Easements		TRC Review	6.00	Right Yard
	Flood Certification		Other	6.00	Left Yard
	Driveway Cuts				

Department Approval

Planning Department _____ Public Works _____

Comments RESIDENTIAL POOL

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 Inspection Department Representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

X _____
Applicant Signature

04/29/2015
Date