IREDELL COUNTY

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

APPLICATION NUMBER
210831
Issue Date: 05/29/2015

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4775040623.000	199 WINDING BROOK WAY, STATESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: VAN HOY BRYAN K+JANE B	Applicant: TODD ELLIS BUILDERS IN
Address: 199 WINDING BROOK WAY STATESVILLE, NC 28625	Address: 271 COOPER FARM ROAD STATESVILLE, NC 28625
Phone:	Phone: 704-873-7373

Use Requested	Zone Code
ADDING SCREENED IN PORCH AND COVERED PORCH TO EXISTING HOUSE	R20

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

Remarks:

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	39569	TOTAL FEES:	$ 77.25

IREDELL COUNTY

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210831
Issue Date: 05/29/2015

Permit Type: EXIST SEPTIC APPLICATION

Parcel Number	Street Address	Jurisdiction
4775040623.000	199 WINDING BROOK WAY	IREDELL COUNTY

Owner Information	Applicant Information	Contractor Information
Owner: VAN HOY BRYAN K+JANE B Address: 199 WINDING BROOK WAY STATESVILLE, NC 28625 Phone:	Applicant: TODD ELLIS BUILDERS IN Address: 271 COOPER FARM ROAD STATESVILLE, NC 28625 Phone: 704-873-7373	Contractor: TODD ELLIS BUILDERS IN Address: 271 COOPER FARM ROAD STATESVILLE, NC 28625 Phone: 704-902-0119 License Type: BLDG License Number: 31966

Project Description

ADDITION - IREDELL

Scope of Work

ADDING SCREENED IN PORCH AND COVERED PORCH TO EXISTING HOUSE

Permit Details:

EFT	EXISTING SYSTEM INSP REG SCHED	Amount:	250.00
		Amount:	
		Amount:	
		Amount:	
		Amount:	
		Amount:	
		Amount:	

I hereby certify that all information in this application is correct and all work will comply with the state code and all other applicable state and local laws, ordinances and regulations. The respective department will be notified of any changes in the approved plans, a change of contractor, and/or specifications for the project permitted herein. This application becomes a permit only when validated and approved.

Date: 05/29/2015

Signature of Owner/Contractor

ANY PERMIT ISSUED EXPIRES SIX (6) MONTHS AFTER ISSUANCE IF NO INSPECTIONS HAVE BEEN MADE. ANY PERMIT ISSUED SHALL EXPIRE TWELVE (12) MONTHS AFTER LAST INSPECTION IF THE WORK IS DISCONTINUED.

Permit Number	39570	TOTAL FEES:	$ 250.00