Call 704-632-5084

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 #: 151305ZO
Proposed Use: Accessory Mobile Home
Location of Property: 191 Jurney Ridge Ln. Olin NC 28660
Parcel #: 4831757586.000
Lot #: Size: 16.2
Applicant: Rickey D Jordan
Address: 191 Jurney Ridge Lane
Olin NC 28660
Phone: 704-539-5364
Property Recorded: Yes Site Plan Reviewed:

Subdivision:
Township: 0500 Union Grove
Zoning: RA
Flood Plain: No Watershed: None
Owner: Rickey D Jordan
Address: 191 Jurney Ridge Lane
Olin, NC 28660
Phone: 704-539-5364
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:
Min. Lot Width: 100
Min. Number Parking Spaces:
Min. Front Yard: 35 ft
Min: Rear Yard: 35 ft
Min. Left Side Yard: 15 ft
Min: Right Side Yard: 30 ft
Max. Built Upon Area:

Comments:

ACCESSORY MOBILE HOME - OWNER TO REMOVE STORAGE MOBILE HOME PRIOR TO C/O-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

Directions:

77 north, Tomlin Mill Road, left, right Jennings Road, left Trumpet Branch, left Eupeptic Springs, right Jurney Ridge Lane

FEES

Zoning Permit/Inspection Fee	☑	$45.00
Site Plan Review Fee	☐	$0.00
Environmental Health New System	☑	$485.00
Environmental Health Existing System	☐	$0.00
Total Fees:		$530.00

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: _____

PAULA WOODY

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

Printed: 6/25/2008