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 #:	116126ZO	Subdivision:	
Proposed Use:	Single Wide	Township:	0400 New Hope
Location of Property:	124 Bulldozer Rd. Olin NC 28660		
Parcel #:	4833-40-9727	Zoning:	R-20
Lot #:	Size: 29.71	Flood Plain:	No Watershed: None
Applicant:	Clayton Homes - Statesville	Owner:	Dale Williams
Address:	2026 Northside Drive Statesville NC 28677	Address:	124 Bulldozer Dr. Olin, NC 28660
Phone:	704-873-2547	Phone:	
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: 20,000	Min. Front Yard: 50 ft	Min. Left Side Yard: 100 ft
Min. Lot Width: 100	Min: Rear Yard: 50 ft	Min: Right Side Yard: 100 ft
Min. Number Parking Spaces:		Max. Built Upon Area:

Comments:

Per applicant, new single wide is replacing an exising single wide on the parcel. Parcel is zoned R-20, therefore the new single wide must be placed in the exact location of the original single wide inorder to be grandfathered. 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 face front property line and be no less than 20 degrees from parallel to the front property line.

Directions:

I77N, Exit 64 L on 901, Myers Mill Rd. make R, half mile to Bulldozer Dr., on the left side of the street.

FEES

Zoning Permit/Inspection Fee	☑	$45.00
Site Plan Review Fee	☐	$0.00
Environmental Health New System	☐	$0.00
Environmental Health Existing System	☑	$50.00
Total Fees:		$95.00

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: 9/23/03

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

ELLIOTTE BLACKWELL Printed: 9/23/03