ENVIRONMENTAL HEALTH REQUIREMENTS

The following numbered items MUST BE COMPLETED PRIOR TO THE SUBMITTAL of the Improvement Permit (IP) / Authorization to Construct (AC) / Existing System application packet. **Questions? Call Iredell County Environmental Health between 8:00-9:00a.m., Monday-Friday to speak with a Registered Sanitarian.**

Statesville Office (704)878-5305 Mooresville Office (704)664-5281

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1. **Complete all Environmental Health forms**: septic system application, site plan, new well water application (if applicable), and sign this green sheet **after** you completed all items. **Include in submittal a copy of the Zoning Permit.** A Zoning Permit is not required for septic system repairs or expansion where no addition is being made to an existing structure.

2. Clearly **mark all property corners**. Flag side lines every twenty-five feet if rear corners are not visible when standing on front corners.

3. **Stake or flag the footprint of the building structure**.

4. Where an **Authorization to Construct (AC) is desired**, submit a recorded copy of the **plat for the subdivision lot** (if not already on file at Environmental Health) and **include two(2) legible copies of the basic floor plan** not larger than 11" x 17" for each floor in the structure.

5. **Any site not having adequate visibility**(50' in any direction) **must be cleared of "undergrowth"** to allow access and provide good visibility.

6. All completed paperwork must be submitted to the Environmental Health Division of the Iredell County Health Department for review before any name will be placed on the service request (appointment) list. **Only properly completed applications will be placed on the service request list on a first come, first serve basis. Incomplete applications will be returned to the applicant.**

Completed permits must be picked up promptly. If it becomes necessary to send a certified letter (return receipt), postage will be charged and **any permit not picked up by the deadline in the letter will be voided. All monies paid to that point are non-refundable.**

Any site not ready when staff arrive for the evaluation will result in the applicant being charged a site revisit fee and the request being returned to the bottom of the service request list.

By signing below I am acknowledging the above specifications have been met and the site is ready to be evaluated.

Signature _____ **Date** 3/24/14

PERMITS/INSP PAYMENT
COUNTY OF IREDELL
PO BOX 788
200 SOUTH CENTER STREET
STATESVILLE NC 28687

RECEIPT# 326641

DATE: 03/24/14 TIME: 15:05
CLERK: esomers
PAID BY: ROWLAND DEVELOPMENT CORPORATION

APPLICATION #: 202379ZO

PERMIT ALLOCATION:

1	104563 472223 PZOI	75.00	Zoning Permits
1	104563 460450 PZOI	2.25	Technology Fee - Planning
1	10492751 447004 47472 PEHSA	40.00	In Office Septic Rev & Plan Ap

TOTAL RECEIPT AMOUNT: 117.25

AMOUNT PAID: 117.25
PAID BY: ROWLAND DEVELOPMENT CORPORATION
PAYMENT METHOD: CREDIT CARREC 1 600033
APPLICATION #: 202379ZO

AMT TENDERED: 117.25
AMT APPLIED: 117.25
CHANGE: .00