IP Only (1.78) 11-27-12 pd #500.00 @ Stovall W/S New System

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
Application for IMPROVEMENT PERMIT, AUTHORIZATION TO CONSTRUCT, or EXISTING SYSTEM INSPECTION

(THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED - APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS)

1. APPLICATION FOR: ___ Improvement Permit ___ Authorization To Construct ___ BOTH - ✓ Existing System Inspection

2. Page 2: *Site Plan Worksheet* Form MUST Accompany This Application
The following optional attachments may also be submitted: ___ Survey Plat, Scaled no more than 1 Inch = 60 Feet
Place check (✓) beside whichever is submitted if applicable ___ Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. **Applicant Information:** * Call before going

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Billy D. Miller	144 Greyfriars Rd		

Owner Name	Mailing Address	Home Phone #	Alternate Phone #
Billy D Miller	Mooresville NC 28117	704-662-9188	704-999-0277

4. **Property Information:**

Street Address	Subdivision Name	Section/Phase and Lot Number
144 Greyfriars Rd	NBH	Crescent 525

Driving Directions: I-40 E to Exit 150-L on Williamson Rd L on Brawley School Rd 6.1 miles to L on Greyfriars Rd. House on Right.

5. **RESIDENTIAL Site Development Information:** *(Check or Complete ALL that apply)* Per Billy Miller 12-4-12

(X) New, Single Family Residence — Maximum Number of Bedrooms 5 BR/3
( ) New, Multi-Family Residence — Maximum Number of Occupants 2
( ) Expansion of Existing Septic System — If Expansion, Current Number of Bedrooms ___
( ) Repair To Failing Septic System due to ___
( ) Other ___

(X) Crawl Space Foundation?
( ) Concrete Slab Foundation?
(X) Basement w/Plumbing?
( ) Basement w/out Plumbing?

IF Non-Residential Site Development: Type of Business 1½ Story home with basement
Square Footage of Building 4,000 ± sq ft
Maximum Number of Employees ___
Maximum Number of Seats ___

6. **Proposed Water Supply:**
( ) New Well (X) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

7. **Desired Septic System Type:** *(You may rank in order of preference, if any)* ( ) Existing system installed in Unknown Mod Neck (YEAR)
( ) Alternative (X) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other ___ ( ) No Preference

8. **Please Answer The Following To The Best of Your Ability:**
( ) Yes (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industry) to be generated?
( ) Yes (X) No Is the site subject to approval by any other public agency?

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

9. **Signature:** [signature] 11-27-2012
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

Does NOT want Pump System if at all possible!