IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
Application For Improvement Permit

ALL items on this application form must be completed before Health Department can begin work. One application must be completed by the property owner or agent for each (proposed) site.

PERSONAL INFORMATION:

CRI	663-6905	PO Box 1003	Charlotte	NC	
Applicant	Phone #	Mailing Address	City	State	Zip Code
Current Property Owner		Mailing Address	City	State	Zip Code

PROPERTY INFORMATION:

Harbour	48		
(Proposed) Subdivision Name	(Proposed) Lot #	(Proposed) Block/Section #	State Road #
(Proposed) Water Supply: Public, Private Well	94 **Preliminary/Plat Approval Date** (DEVELOPERS ONLY)		Tax Map #

Specific Directions to Property _____

TYPE OF FACILITY: (use check (X) or number as appropriate)

House X Mobile Home ____ Commercial ____ No. Bedrooms 4 No. Baths 4

No. Persons or Employees (commercial only) ____ Basement No Basement with Plumbing No

Crawl Space Yes Concrete Slab No Garbage Disposal Yes Jaccuzi or spa No

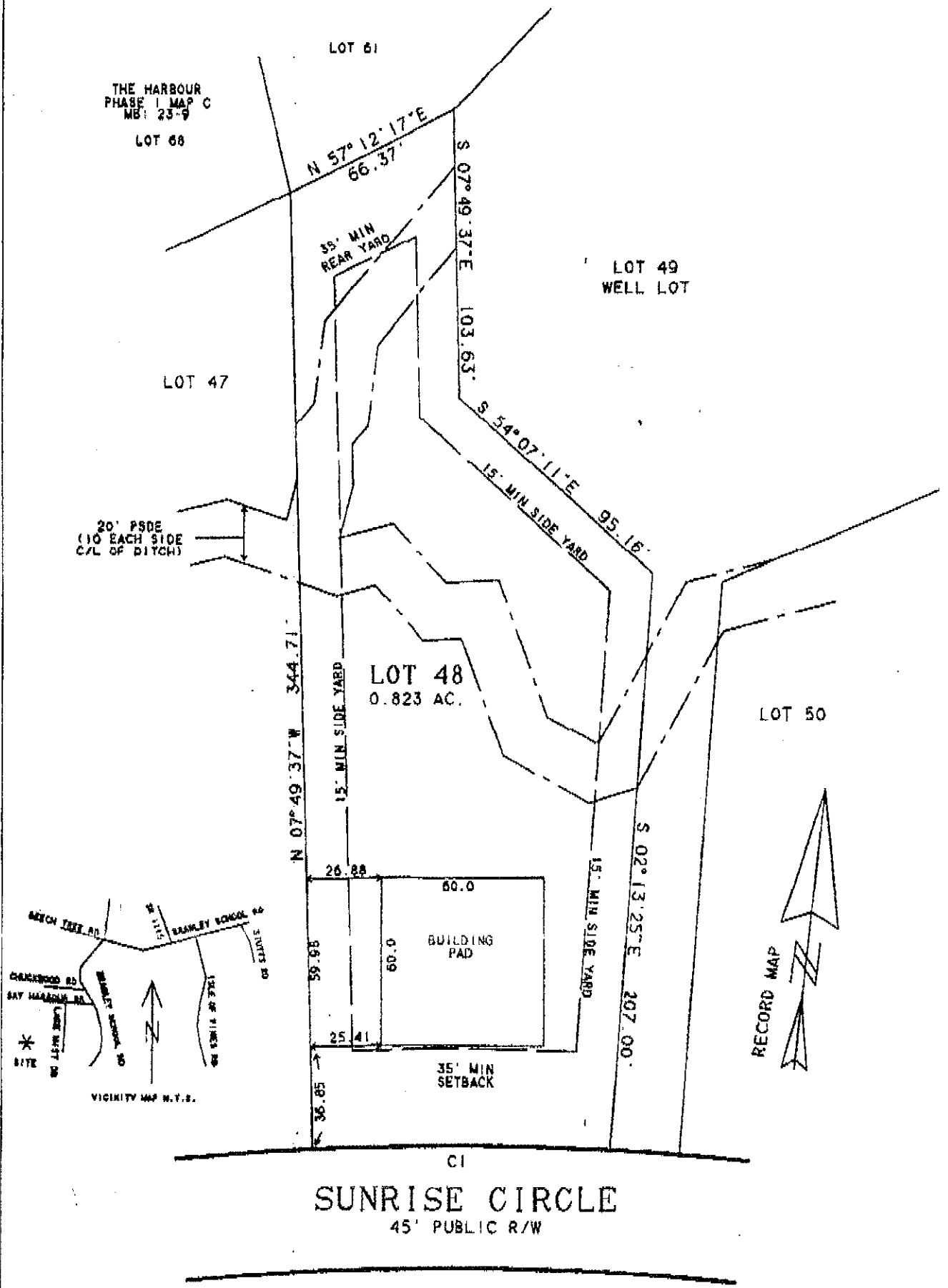
COVENANT AND SIGNATURE:

I hereby make application to the Iredell County Health Department for a soils/site evaluation of the property described above. This evaluation is to be conducted for the sole purpose of obtaining a septic system Improvement Permit. I hereby authorize Iredell County Health Department representatives to go onto the above property for purposes of conducting this evaluation. I understand that, by state law, any Improvement Permit issued on the above property may be voided if substantial changes are made to the designated sewage system site. The issuance of an Improvement Permit by the Iredell County Health Department does not relieve me from compliance with all other relevant state/local laws or regulations. As owner or authorized agent, I covenant that the contents of this application are true and represent the maximum facilities intended to be placed on this property to my knowledge to date.

I understand that any Improvement Permit issued on the above property is valid for five (5) years from the issuance date and is subject to revocation if the above-described site plans or intended use changes.

4/5/95 DATE Terry C. Graham, Pres. SIGNATURE OF OWNER/AUTHORIZED AGENT

DISK 50
HR48



SUNRISE CIRCLE

45' PUBLIC R/W

CURVE	DELTA ANGLE	RADIUS	ARC	TANGENT	CHORD	CHORD BEARING
C 1	06° 05' 54"	1022.50'	108.83'	54.47'	108.78'	S 83° 34' 43" W