388

IREDELL COUNTY HEALTH DEPARTMENT

Application For Improvement Permit and/or Authorization To Construct, 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; ___ Custom Site Plan, Scaled no more than 1 Inch = 60 Feet
   Place check ( ) beside whichever is submitted if applicable

3. **Applicant Information:**
   LAKE NORMAN SIGNATURE HOMES (Applicant Name) — Mailing Address — 704/799-1851 (Home Phone) — 704/361-0402 (Work Phone)
   [illegible] (Owner Name) — 584 BRAWLEY SCHOOL RD STE104 MOORESVILLE, NC 28117 (Mailing Address) — Home Phone — Work Phone

4. **Property Information:**
   484 AGNEW RD (Street Address) — THE FARMS (Subdivision Name) — 3 LOT 388 (Section/Phase and Lot Number)
   Driving Directions: _____

5. **RESIDENTIAL Site Development Information:** ***(Check or Complete ALL that apply)***
   (✓) New, Single Family Residence
   ( ) New, Multi-Family Residence
   ( ) Expansion of Existing Septic System
   ( ) Repair To Failing Septic System
   Maximum Number of Bedrooms ___
   Maximum Number of Occupants ___
   If Expansion, Current Number of Bedrooms ___
   (✓) Crawl Space Foundation?
   ( ) Concrete Slab Foundation?
   ( ) Basement w/Plumbing?
   ( ) Basement w/out Plumbing?

   IF Non-Residential Site Development: Type of Business ___ Square Footage of Building ___ Maximum Number of Employees ___ Maximum Number of Seats ___

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

7. **Desired Septic System Type:** ***(You may rank in order of preference, if any)***
   ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other_____ ( ) No Preference

8. **Please Answer The Following To The Best of Your Ability:**
   ( ) Yes ( ) No Does the site contain any jurisdictional wetlands?
   ( ) Yes ( ) No Is any non-domestic sewage (i.e. industry) to be generated?
   ( ) Yes ( ) 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:** _____ 11-29-06
   Property owner or owner's legal representative signature (SIGNATURE REQUIRED) — DATE

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   Place check ( ) beside whichever is submitted if applicable ___ Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. **Applicant Information:**

Applicant Name	Mailing Address	Home Phone	Work Phone
The Farms, LLC	2214 Brawley School Rd Mooresville, NC 28117		660-1185
Owner Name	Mailing Address	Home Phone	Work Phone
SAME			

4. **Property Information:**

Street Address	Subdivision Name	Section/Phase and Lot Number
	The Farms	388 Ph. 3

Driving Directions: _____

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5. **RESIDENTIAL Site Development Information:** *(Check or Complete ALL that apply)*

- X New, Single Family Residence
- ( ) New, Multi-Family Residence
- ( ) Expansion of Existing Septic System
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Maximum Number of Bedrooms 4
Maximum Number of Occupants ___
If Expansion, Current Number of Bedrooms ___

- X Crawl Space Foundation?
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IF Non- Residential Site Development:
Type of Business _____
Square Footage of Building _____
Maximum Number of Employees _____
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(4) Alternative (1) Conventional (2) Innovative (3) Modified Conventional ( ) Other_____ ( ) No Preference

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8. **Please Answer The Following To The Best of Your Ability:**

( ) Yes (X) No Does the site contain any jurisdictional wetlands?
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9. Signature: _____ 11-3-04
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE