Porch & 10x12 acc.

11-19-12
pd $40.00 @ Start for Office review 1/8

11/19/12
$ PAID 194.50 Debit

# 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: X 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:**

| Applicant Name | Mailing Address | Home Phone # | Alternate Phone # |
|---|---|---|---|
| Morey Herendeen | 129 Billy Joe Rd. Mooresville 28117 | (704) 622-3833 | |
| **Owner Name** | **Mailing Address** | **Home Phone #** | **Alternate Phone #** |
| Same as above | | | |

4. **Property Information:**

| Street Address | Subdivision Name | Section/Phase and Lot Number |
|---|---|---|
| 129 Billy Joe Rd. Mooresville 28117 | Mallard Head | |

Driving Directions: 77S to Exit 36, R onto Hwy 150, L onto Williamson Rd., R onto Bradley School Rd., L onto Connesback Rd., R (3rd) onto Old Squaw Rd., L onto Billy Joe Rd. (approx) 5th house on L.

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
(X) Other ADD FRONT PORCH AND ADD 10X12 SHED

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 (X) 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 (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] 11/19/2012
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE