THE SITE IS ALTERED: THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR INDEFINITE 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:

Applicant Name	Mailing Address	Home Phone	Work Phone
Teglad-Brann Const. Inc.	19550 Weavers Cr. Cornelius NC 28031		704-895-8045
Owner Name	**Mailing Address**	**Home Phone**	**Work Phone**

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
	Woodstream Estates	Lot 7

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 4
Maximum Number of Occupants 8
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: _____ 6/28/07
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**

IREDELL COUNTY HEATLH DEPARTMENT

PAGE 2: *SITE PLAN WORKSHEET*

SEE THE SAMPLE SITE PLAN BELOW. INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!

Place an (X) beside each item as you complete the site plan:

- X — **Property Line measurements are clearly identified...**
- X — **All proposed structures are indicated...**
  SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site
- X — **Front and side setbacks from property line...**
- X — **Preferred driveway location and configuration, preferred well location...**
- X — **Area you prefer your septic system to be placed...**
- X — **North arrow, or other sufficient indicator of direction...**

Circle N/A on the following if appropriate:

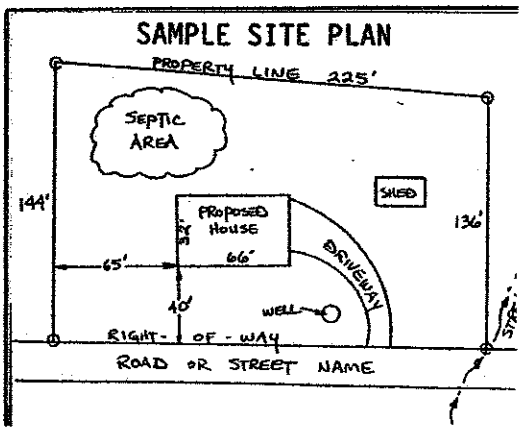
- ____ **Location of septic systems and wells within 100' of your property...** **N/A**
- ____ **Location of easements and rights of ways on your property...** **N/A**
- ____ **Location of any designated wetlands on the property...** **N/A**

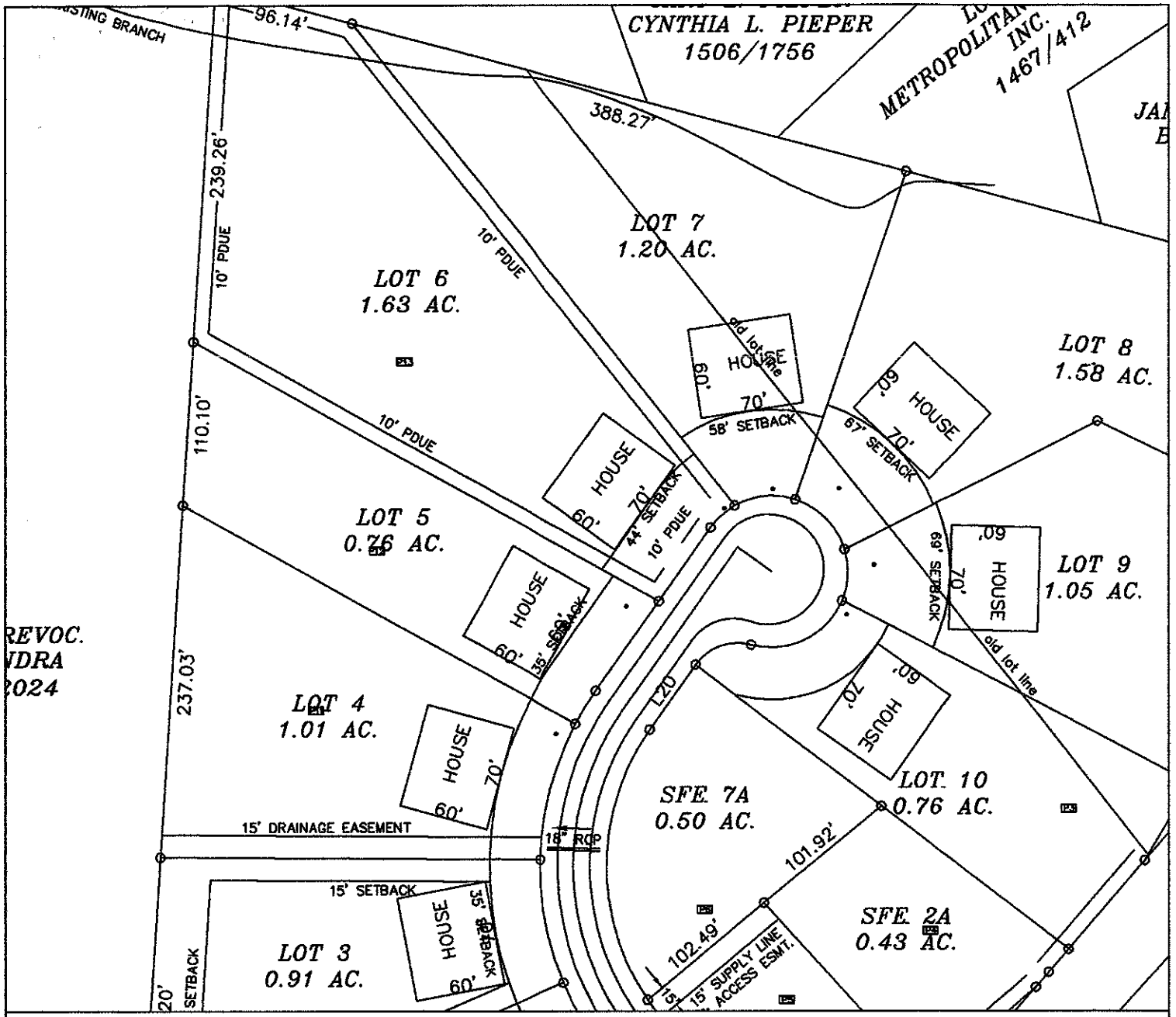
Signature: Michael Byfield
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

6/28/07
DATE

USE THIS SPACE TO DRAW YOUR SITE PLAN

See Attached Site Plan





LEGEND

- House Footprint
- System lines.
- Repair lines.
- TBM.
- Well Location.
- 25 RS&ES Pit Location.
- 28 Health Dept. Pit Location.

GRAPHIC SCALE
1" = 100'

100 0 100 200

FOR PRELIMINARY PLANNING PURPOSES ONLY. ALL LOTS WILL REQUIRE FINAL APPROVAL BY THE COUNTY HEALTH DEPARTMENT ON A LOT BY LOT BASIS. THIS MAP SHOULD BY USED AS A GENERAL GUIDE, SOME ADJUSTMENTS WILL BE NECESSARY IN THE FIELD DUE TO SOIL VARIABILITY AND COMPLEX TOPOGRAPHIC FEATURES.
THIS MAP ONLY REFLECTS EXISTING SOIL SUITABILITY FOR ON-SITE SEPTIC TANK SYSTEMS.

PLEASE REFER TO ATTACHED SOIL REPORT FOR ADDITIONAL SITE SPECIFIC INFORMATION

ROLLANS SOIL & ENVIRONMENTAL SERVICES
470 E. BROAD ST. SUITE D
MOORESVILLE, NC 28115
PHONE (704) 658-1723
FAX (704) 658-1724

ASHLEY ROLLANS, NC LICENSED SOIL SCIENTIST
MOBILE: (704)746-5046
EMAIL: ROLLANSFORTC@AOL.COM

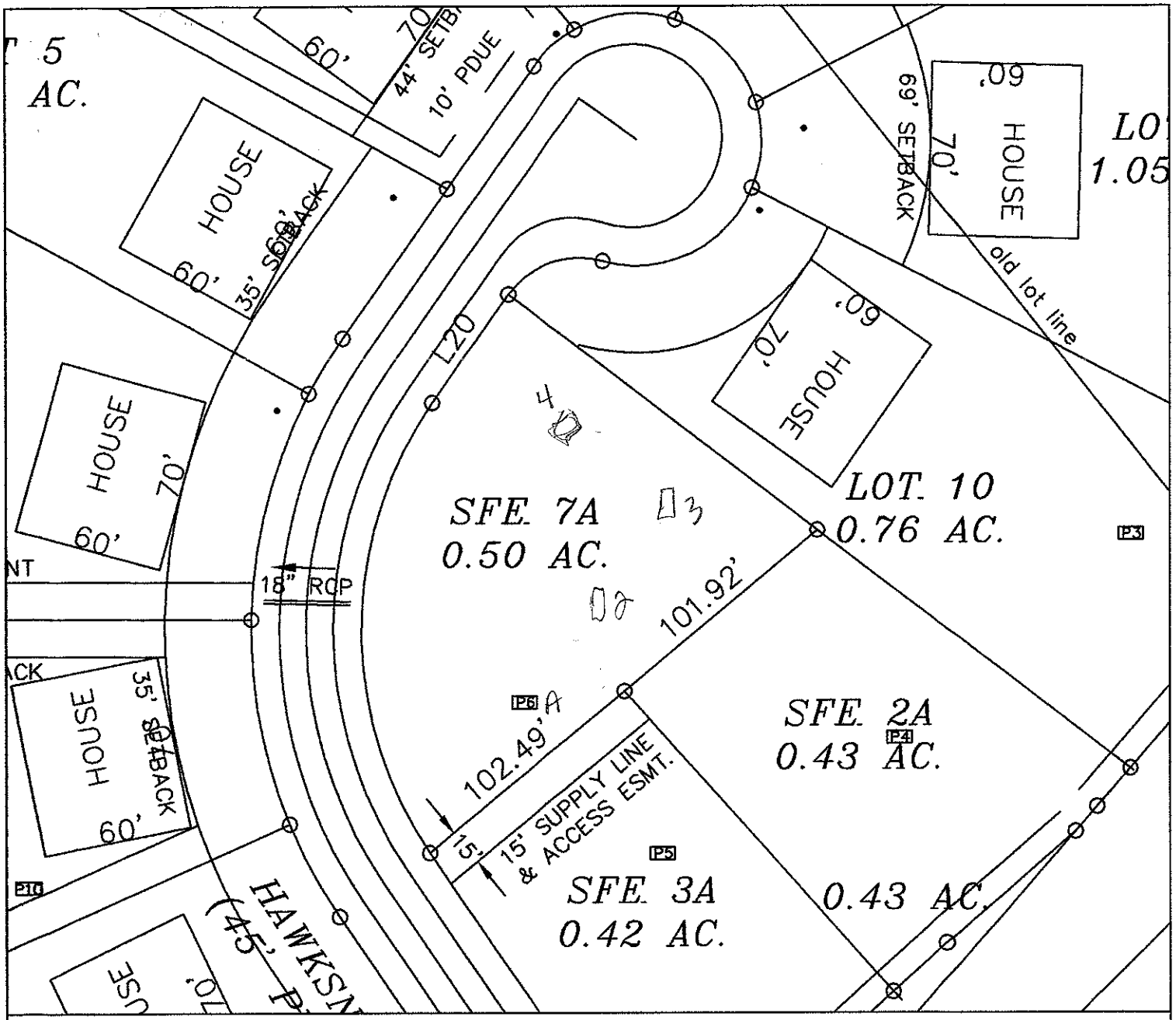
BRADY FREEMAN NC REGISTERED SANITARIAN
MOBILE: (704)746-6457
EMAIL: BFREE203@YAHOO.COM

MAP TITLE: SITE PLAN

PROJECT NAME: WOODSTREAM ESTATES

LOCATION/DATE: FERN HILL ROAD, IREDELL COUNTY, NORTH CAROLINA, JUNE 2007

JOB # :	01-1338
FILE:	C:\JOBS\01-1338
PROJECT MGR.:	C.B.F.
FIELD WORK:	S.A.R. & C.B.F.
DRAWN BY:	C.B.F.



LEGEND

- House Footprint
- System lines.
- Repair lines.
- TBM.
- 25 — RS&ES Pit Location.
- Well Location.
- 28 — Health Dept. Pit Location.

GRAPHIC SCALE
1" = 60'

60 0 60 120

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470 E. BROAD ST. SUITE D
MOORESVILLE, NC 28115
PHONE (704) 658-1723
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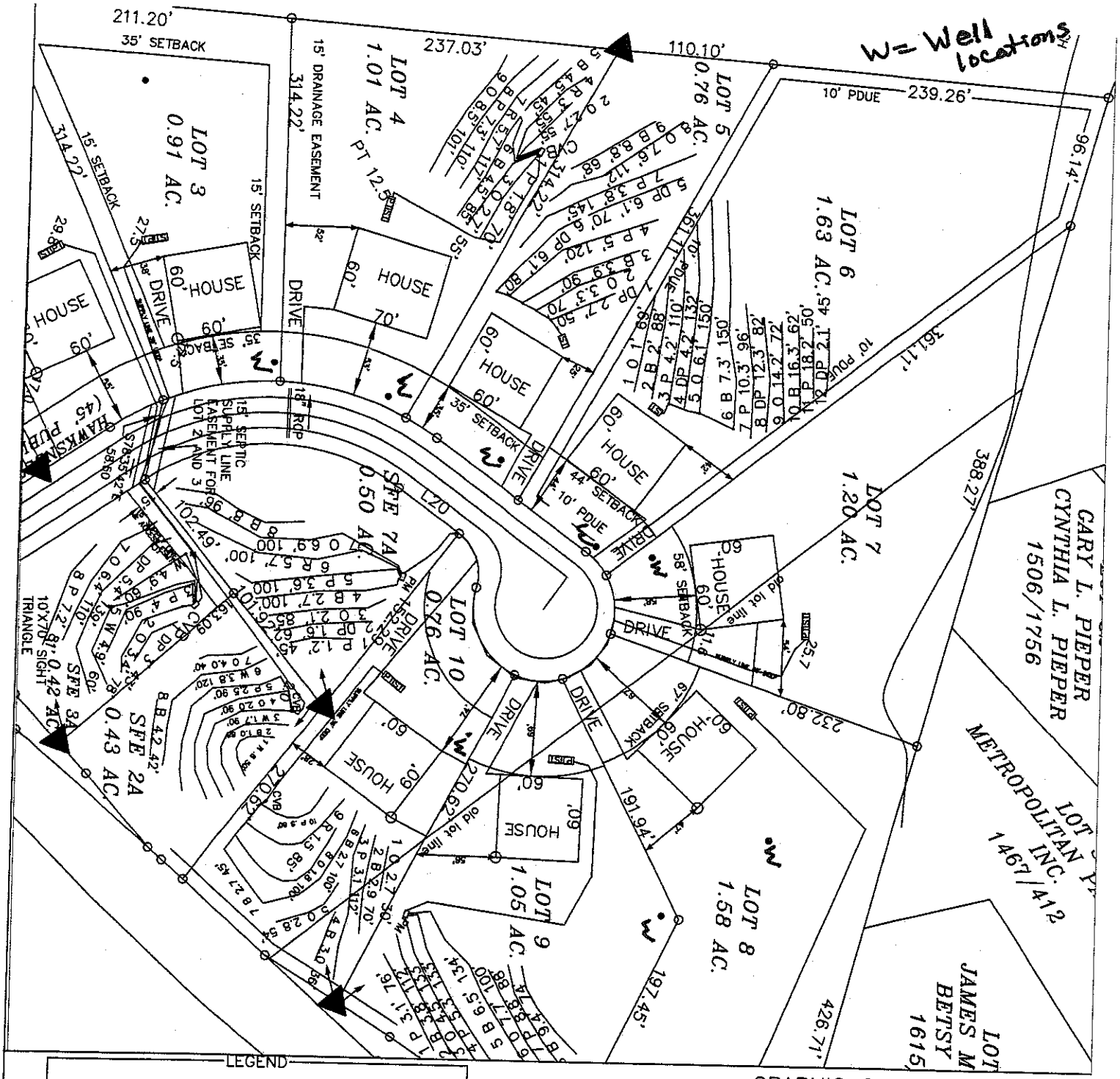
BRADY FREEMAN NC REGISTERED SANITARIAN
MOBILE: (704) 746-6497
EMAIL: BFREE209@YAHOO.COM

MAP TITLE: SITE PLAN

PROJECT NAME: WOODSTREAM ESTATES

LOCATION/DATE: FERN HILL ROAD, IREDELL COUNTY, NORTH CAROLINA, JUNE 2007

JOB # :	01-1338
FILE:	C:\JOBS\01-1338
PROJECT MGR.:	C.B.F.
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PLEASE REFER TO ATTACHED SOIL REPORT FOR ADDITIONAL SITE SPECIFIC INFORMATION

ROLLANS SOIL & ENVIRONMENTAL SERVICES
2120 GRAHAM ROAD
MOUNT ULLA, NC 28125
PHONE/FAX: (704) 278-0969
ASHLEY ROLLANS, NC LICENSED SOIL SCIENTIST
MOBILE: (704) 746-5046
EMAIL: ROLLANSFORTC@AOL.COM

MAP TITLE: SITE PLAN & DRAINFIELD AREAS

PROJECT NAME: TEXLAND-BROWN CONST. INC

LOCATION/DATE: FERNHILL, IREDELL COUNTY, NORTH CAROLINA FEBRUARY 2007

JOB # : 01-1338
FILE: C:\JOBS\01-1338
PROJECT MGR.: C.B.F.
FIELD WORK: C.B.F. & A.L.P.
DRAWN BY: C.B.F.