5-10-11 $120.00 Paid

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:

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Robert Conley	140 Keats Road, Mooresville NC 28117	704 534 9221	—
Owner Name	Mailing Address	Home Phone #	Alternate Phone #
Robert Conley	140 Keats Rd, Mooresville NC 28117	704 534 9221	

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
140 Keats Road, Mooresville NC 28117		

Driving Directions: Alcove Road S, Right on Templeton, Right on Irish, Right on Keats. 140 is second home on Right.

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 building a deck + need to make sure we do not hit septic

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: Robert Conley — 5/6/11

Property owner or owner's legal representative signature (SIGNATURE REQUIRED) — DATE

07-08-13 Pd $40.00 @ Stool

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3. **Applicant Information:**

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Robert Conley	140 Keats Road, Mooresville NC 28117	704 534 9221	
Owner Name	Mailing Address	Home Phone #	Alternate Phone #
same			

4. **Property Information:**

Street Address	Subdivision Name	Section/Phase and Lot Number
140 KEATS RD Mooresville NC 28117		

Driving Directions: I77 South to exit 33. Continue through light onto Alcove Rd turn Right on Templeton Rd. Right on Henry Lane, left on Keats. On left

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 due to
(*) Other New garage 24 foot x 36 foot

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

$ PAID

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)* ( ) Existing system--installed in ____ YEAR
( ) 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?

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9. Signature: _____ 7/8/2013
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE