IREDELL COUNTY HEALTH DEPARTMENT

Environmental Health Division

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

3. Applicant Information:

Jerry A. White	231 Templeton Rd., Mooresville 28117	704-663-1455	704-873-[redacted]5661 Ext 3406
Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Jerry A. White	231 Templeton Rd, Mooresville 28117	704-663-1455	704-873-5661 Ext 3406
Owner Name	Mailing Address	Home Phone #	Alternate Phone #

4. Property Information:

231 Templeton Rd. Mooresville (Street Address) ____ (Subdivision Name) ____ (Section/Phase and Lot Number)

Driving Directions: I77 South to Exit 33; Go up the exit ramp, cross over Williamson Rd. onto Alcov Rd.; go to Templeton Rd (2nd intersection on Alcov) turn right onto Templeton Rd.; go to 3rd house on the left.

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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
(✓) Other Porch 2010; Accessory Bldg 2011

Maximum Number of Bedrooms 2
Maximum Number of Occupants 2
If Expansion, Current Number of Bedrooms 2

(✓) 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 ____

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6. ~~Proposed~~ Water Supply:

( ) New Well (✓) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

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7. ~~Desired~~ Septic System Type: *(You may rank in order of preference, if any)*

( ) Alternative (✓) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other____ ( ) No Preference

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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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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: Jerry A. White
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

5/10/10
DATE