IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
Application For Improvement Permit

ALL items on this application form must be completed before Health Department can begin work. One application must be completed by the property owner or agent for each (proposed) site.

PERSONAL INFORMATION:

Applicant	Phone #	Mailing Address	City	State	Zip Code
Kyle Pace	704 451 4644	604 Dyrbury Rd	Mooresville	NC	28115

Current Property Owner	Mailing Address	City	State	Zip Code
Darrell & Kyle Pace	104 Dyrbury Rd	Mooresville	NC	2845

PROPERTY INFORMATION:

(Proposed) Subdivision Name	(Proposed) Lot #	(Proposed) Block/Section #	State Road #
Gibbs Cove	23		

(Proposed) Water Supply: Public, Private Well	**Preliminary Plat Approval Date** (DEVELOPERS ONLY)	Tax Map #

Specific Directions to Property Brawley School N Rt on Gibbs Rd Rt on Hickory Hill

TYPE OF FACILITY: (use check (X) or number as appropriate)

House ✓ Mobile Home _____ Commercial _____ No. Bedrooms 4 No. Baths 2 Full 1 Half

No. Persons or Employees (commercial only) _____ Basement _____ Basement with Plumbing _____

Crawl Space ✓ Concrete Slab _____ Garbage Disposal _____ Jaccuzi or spa _____

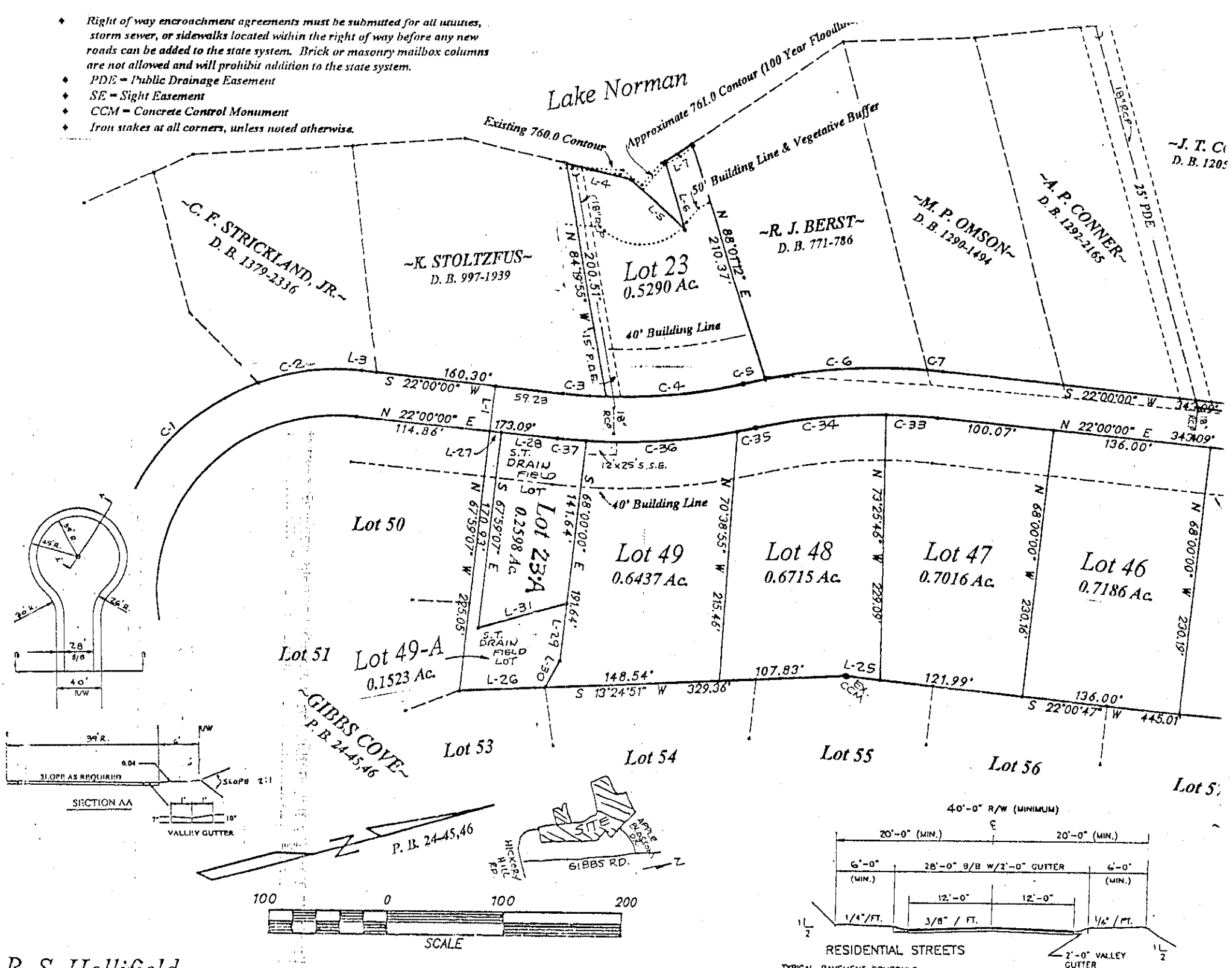
COVENANT AND SIGNATURE:

I hereby make application to the Iredell County Health Department for a soils/site evaluation of the property described above. This evaluation is to be conducted for the sole purpose of obtaining a septic system Improvement Permit. I hereby authorize Iredell County Health Department representatives to go onto the above property for purposes of conducting this evaluation. I understand that, by state law, any Improvement Permit issued on the above property may be voided if substantial changes are made to the designated sewage system site. The issuance of an Improvement Permit by the Iredell County Health Department does not relieve me from compliance with all other relevant state/local laws or regulations. As owner or authorized agent, I covenant that the contents of this application are true and represent the maximum facilities intended to be placed on this property to my knowledge to date.

I understand that any Improvement Permit issued on the above property is valid for five (5) years from the issuance date and is subject to revocation if the above described site plans or intended use changes.

17 Oct 03 DATE Richard Abernathy SIGNATURE OF OWNER/AUTHORIZED AGENT

- *Right of way encroachment agreements must be submitted for all utilities, storm sewer, or sidewalks located within the right of way before any new roads can be added to the state system. Brick or masonry mailbox columns are not allowed and will prohibit addition to the state system.*
- *PDE = Public Drainage Easement*
- *SE = Sight Easement*
- *CCM = Concrete Control Monument*
- *Iron stakes at all corners, unless noted otherwise.*



R. S. Hollifield land surveying / subdivision planning ~ P. O. Box 1036 Troutman, NC 28166