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
Barger Construction	704-663-3611	P.O. Box 30	Mooresville	NC	28115

Current Property Owner	Mailing Address	City	State	Zip Code
Centre Presbyterian Church	129 Centre Church Rd	Mooresville	NC	28115

PROPERTY INFORMATION:

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

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

Specific Directions to Property Hwy 115 South to Mt Mourne turn right on Fairview Rd - go past Hospital to 2nd Centre Church Rd - turn right - Church on left

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

House _____ Mobile Home _____ Commercial X No. Bedrooms _____ No. Baths _____

No. Persons or Employees (commercial only) 200 Basement ✓ Basement with Plumbing ✓

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

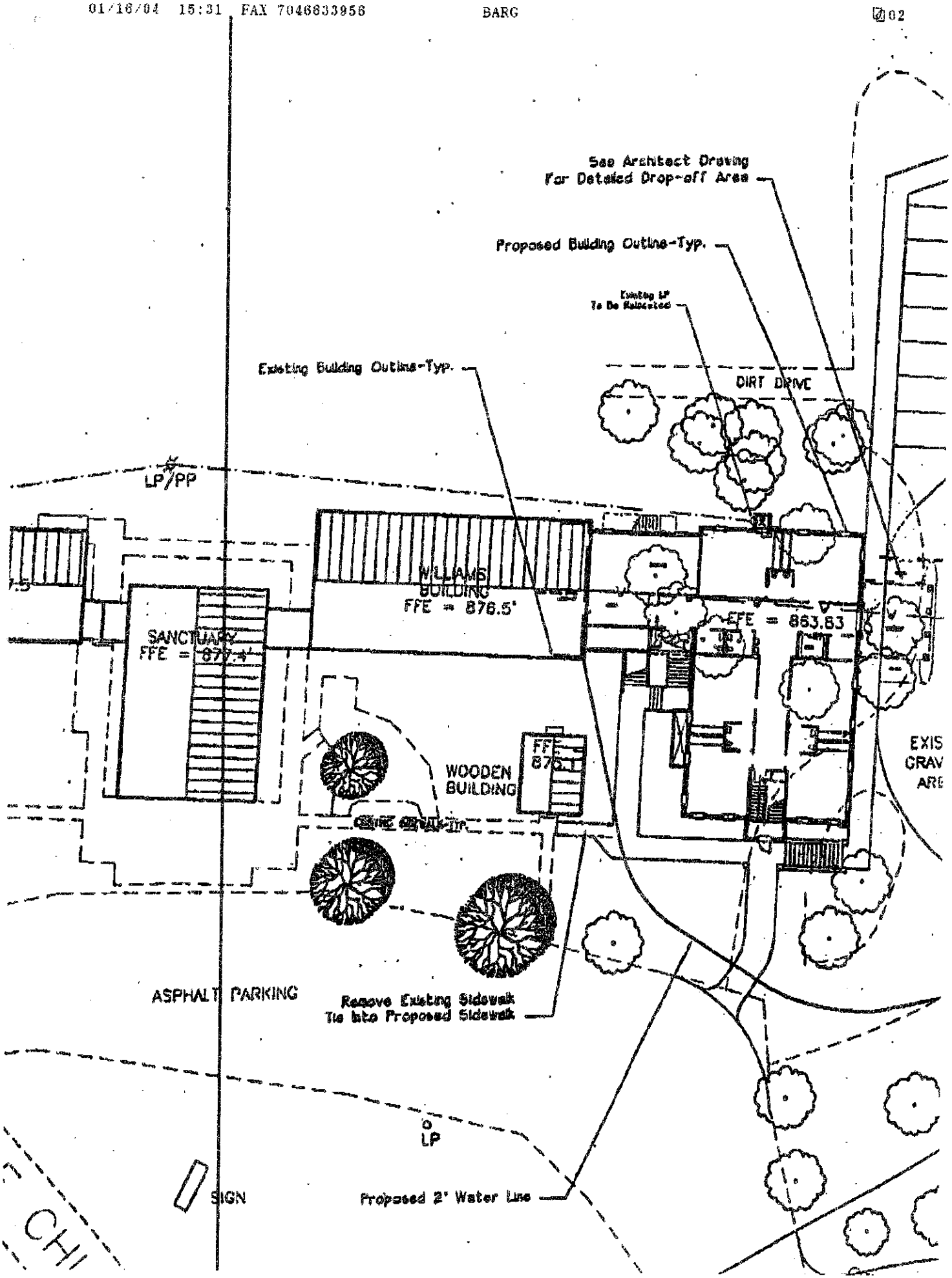
COVENANT AND SIGNATURE:

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.

1/16/04 DATE Paul M. Barger SIGNATURE OF OWNER/AUTHORIZED AGENT

Barger Construction


See Architect Drawing
For Detailed Drop-off Area
Proposed Building Outline-Typ.
Existing LP
To Be Relocated
Existing Building Outline-Typ.
DIRT DRIVE
LP/PP
WILLIAMS
BUILDING
FFE = 876.5'
FFE = 863.63
SANCTUARY
FFE = 877.4'
WOODEN
BUILDING
FFE
876
EXIS
GRAV
ARE
ASPHALT PARKING
Remove Existing Sidewalk
Tie into Proposed Sidewalk
LP
SIGN
Proposed 2" Water Line
CHI