HEALTH DEPARTMENT REQUIREMENTS

The following numbered items must be completed prior to the submittal of the Improvement Permit / Authorization to Construct / Existing System application packet. Questions? Call the Iredell County Health Department between 8-9am, Monday-Friday. Statesville Office 704 878-5305, Mooresville Office 704 664-5281

1. Complete **all** Health Department forms: septic system application, site plan, signed green sheet and water well application (if applicable). Include in submittal a copy of the zoning permit (not required for septic system repair or expansion where no addition is made to the building structure).

2. Clearly mark **all** property corners. Flag side lines every twenty-five feet if rear corners are not visible when standing on front corners.

3. Stake or flag the footprint of the building structure.

4. Where an Authorization to Construct (AC) is desired, submit a recorded copy of the plat for a subdivision lot (if not already on file at the Health Dept.) and also include 2 legible copies of a basic floor plan not larger than 11" x 17" for each floor in the structure.

5. Any site not having adequate visibility (50' in any direction) must be cleared of "undergrowth" to allow access and provide good visibility.

6. All completed paperwork must be submitted to the Health Department for review before any name will be placed on the service request (appointment) list. **Only properly completed applications will be placed on the service request list on a first come, first serve basis. Incomplete applications will be returned to the applicant.**

Completed permits must be picked up promptly. If it becomes necessary to send a certified letter, postage will be charged (return receipt) and any permit not picked up by the deadline in the letter will be voided. **All monies paid to that point are non-refundable.**

Any site not ready when staff arrive for the evaluation will result in the applicant being charged a site revisit fee and the request being returned to the bottom of the service request list.

By signing below I am acknowledging the above specifications have been met and the site is ready to be evaluated.

Signature: Rhonda Sams **Date:** 7-2-09