IREDELL COUNTY HEALTH DEPARTMENT

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 X 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	Work Phone
GREG TALMER	191 CLEARVIEW RD	704-902-6033	SAME
Owner Name	**Mailing Address**	**Home Phone**	**Work Phone**
PINEREST LAND DEVELOPERS	191 CLEARVIEW RD STATESVILLE, NC 28625	704-902-6033	SAME

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
	PINEREST ESTATES	LOT 1

Driving Directions: N. HWY 115/21 BETWEEN TROUTMAN & BARIUM SPRINGS ① TAKE OLD MOUNTAIN RD NORTH 1/2 mile ② TAKE EAST MONBO RD (WEST APPROX. 3.8 miles (1 mile past TALLEY RD) ③ PROJECT IS ON THE LEFT (SOUTH) LOT 1.

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5. RESIDENTIAL Site Development Information: *(Check or Complete ALL that apply)*

- (X) New, Single Family Residence
- ( ) New, Multi-Family Residence
- ( ) Expansion of Existing Septic System
- ( ) Repair To Failing Septic System

Maximum Number of Bedrooms ~~X~~ (4)
Maximum Number of Occupants ___
If Expansion, Current Number of Bedrooms ___

- (X) 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 (X) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other_____ ( ) No Preference

****

8. Please Answer The Following To The Best of Your Ability:

( ) Yes (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industry) to be generated?
( ) Yes (X) 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: Greg Talmer
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

APRIL 17, 2006
DATE

IREDELL COUNTY HEATLH DEPARTMENT

PAGE 2: *SITE PLAN WORKSHEET*

SEE THE SAMPLE SITE PLAN BELOW. INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!

Place an (X) beside each item as you complete the site plan:

____ **Property Line measurements are clearly identified…**
____ **All proposed structures are indicated…**
SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site
____ **Front and side setbacks from property line…**
____ **Preferred driveway location and configuration, preferred well location…**
____ **Area you prefer your septic system to be placed…**
____ **North arrow, or other sufficient indicator of direction…**

Circle N/A on the following if appropriate:

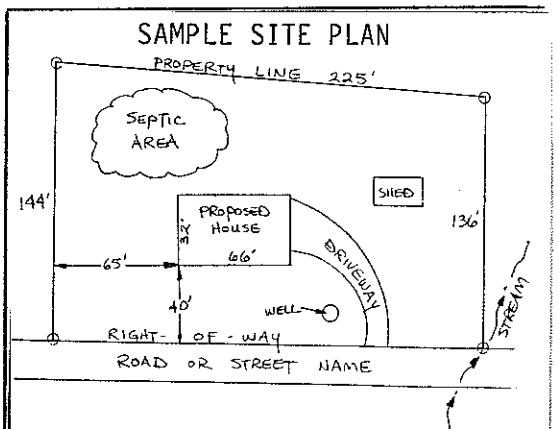
____ **Location of septic systems and wells within 100' of your property…** N/A
____ **Location of easements and rights of ways on your property…** N/A
____ **Location of any designated wetlands on the property…** N/A

Signature: Greg Palmer
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

APRIL 17, 2006
DATE

USE THIS SPACE TO DRAW YOUR SITE PLAN

SEE ATTACHED DRWG: LOT 1



R-20

-49-1758
DEMAKER HEIRS
PG. 448
R-20

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DATE

SITE DATA:

ACREAGE IN TOTAL TRACT TO BE SUBDIVI
TOTAL NUMBER OF PARCELS CREATED:
ACREAGE IN SMALLEST LOT:
LINEAR FEET IN NEW STREETS:

PROXIMITY TO VOLUNTARY FARMLAND PRE DISTRICT

This property, or portions thereof, is located wit designated voluntary farmland preservation distric has been developed to inform all purchasers of re certain agricultural activities, including but no pesticide spraying, manure spreading, machine operations, sawing, and similar activities may tak district any time during the day or n

STATE OF NORTH CAROLINA
IREDELL COUNTY

I, JAMES R. HOBBS, certify that this plo under my supervision (deed description recorded surveyed are clearly indicated as drawn from info of precision as calculated is 1: 10,000+; that thi Witness my original signature, registration number

PRELIM
NOT FOR RE

NOTE:
THIS PLAT IS OF A SURVEY THA
OF A COUNTY OR MUNICIPALITY

PIN 4720-49-
BARBARA O. SPRINK
D.B. 1234 PG.
ZONING: R-

Proposed driveway

LOT 1
TOTAL AREA = 1.392 ACRE
(60,641 S.F.)
(INCLUDING 8,001± S.F. IN ROAD R/W)
(52,641± S.F. FREE OF RD R/W)

N64°39'18"E
43.19'
21.00'
N25°32'37"W
(203.79')
224.79' (TOTAL)
(447.34')
S06°09'05"W
N80°57'24"W
119.94'
856.46' (TOTAL)

Exclude hatched area from Septic System

PROPOSED SEPTIC AREA

SCALE:
1"=60'