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: ___ 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:

Owner ~~Applicant~~ Name	Mailing Address	Home Phone #	Alternate Phone #
Joel McDaniel	1912 010 Mocksville Rd Statesville	704-682-8563	
America's Home Pl. Stor. App ~~Owner~~ Name	Mailing Address	~~Home~~ Phone #	Alternate Phone #
	Greg Hawkins	704-872-4400	843-495-7880 Florence, SC (Cell)

4. Property Information:

Street Address	Subdivision Name	Section/Phase and Lot Number
Bussell Rd - Statesville NC		

Driving Directions: North on 77 8 miles to Exit 59 turn left .8 miles turn left on Jennings Rd go .3 miles turn right on Friendship Rd turn left on Bussell Rd first drive on right behind shed

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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 ___

Maximum Number of Bedrooms 3

Maximum Number of Occupants 3

If Expansion, Current Number of Bedrooms ___

- (✓) 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

****

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: ___ 9-15-20

Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY HEATLH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
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:

- X — Property Line measurements are clearly identified...
- X — 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
- X — Front and side setbacks from property line...
- X — Preferred driveway location and configuration, preferred well location...
- X — Area you prefer your septic system to be placed...
- X — North arrow, or other sufficient indicator of direction...

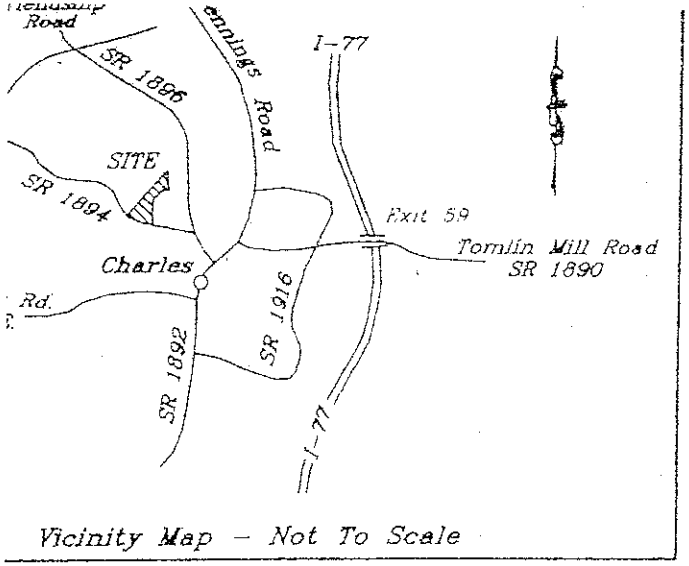
Circle N/A on the following if appropriate:

- N/A — Location of septic systems and wells within 100' of your property... N/A
- N/A — Location of easements and rights of ways on your property... N/A
- N/A — Location of any designated wetlands on the property... N/A

Signature: _____ 9-15-10
REQUIRED property owner or owner's legal representative signature. DATE

USE THIS SPACE TO DRAW YOUR SITE PLAN

see attached



Vicinity Map – Not To Scale

100' 200' 300'

GRAPHIC SCALE (1" = 100')

Now or Formerly
Joel Kent McDaniel
20028-737
Back Ref.: 121-274

A New Line
N 50°46'36" E 1051.00' Total
(900.94')

DB 121, PG 274
DB 1531-194

Total Area =
3.906 +/- ACRES

Now or Formerly
Joel Kent McDaniel
20028-737
Back Ref.: 121-274

ell Road
94 (Paved)

Now or Formerly
Stephen Skonie and wife,
Kitt Skonie
2029-804

well proposal

50
35
100

Shed

propose septic

Driveway
115'

EIR

S 01°10'12" E 280.00'

S 55°25'55" W 260.82'

N 89°41'17" W 170.75'

Electric Fence

Ditch

Branch

EAI AT
(12.00')

IRS AT
(74.83')

(12.00') N 81°41

N 81

Tie

TPD

IRS

EAI

(75.43')

(198.00')

R/W

Pavement

N 80°32'06" W 282.32' TOTAL

R/W MON. ORIENTATION LINE

CP

(84.32') PKS

N 80°24'58" W 182.32' TOTAL

(45.76')

CP

(116.56')

N 72°27'18" W 106.00'

EIR

TIE

EIR

697-300

TIE ONLY-EIR TO CP
N 06°43'44" E 40.70'

R/W MON.

NOTE:
NO R/W AGREEMENT OF RECORD FOUND FOR S.R. 1894, THE 60 FT. R/W SHOWN IS BASED ON THE WIDTH MAINTAINED BY THE D.O.T AND EXISTING MONUMENTATION.

r or Formerly
ra M. O'Carroll
607-654
697-300

Now or Formerly
Joseph B. Jordan & wife,
Kathryn E. Jordan
1219-1728

LINE TABLE

(For Centerline of Branch C...

LINE	BEARING	DISTAN
L1	S 26°03'11" W	30
L2	S 76°35'19" W	2
L3	S 16°04'27" E	5