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: (X) 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:**

Applicant Name	Mailing Address	Home Phone	Work Phone
Patty Gorman	1712 Withers Dr Denver 28037		704 651-0706
Owner Name	**Mailing Address**	**Home Phone**	**Work Phone**
Countryfyme NC LLC	PO Box 1109		704 483-1457

4. **Property Information:** 115 Wildeman Trail (39)

Street Address	Subdivision Name	Section/Phase and Lot Number
Lot #19 ~~Sandalwood Dr~~	The Highlands at Maple Creek	19

Driving Directions: I77 North to Exit 54. Right on Hwy 21 North for 1 mile. Turn Left on Maple Creek drive. Turn Left on Ravencrest and Left on ~~Sandalwood~~ Wildeman. Lot on ~~Right~~ Left.

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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 4
Maximum Number of Occupants ___
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 _____

****

6. **Proposed Water Supply:**

( ) New Well ( ) Existing Well ( ) Community Well ( ) City Water (✓) Other Public Water

****

7. **Desired Septic System Type:** *(You may rank in order of preference, if any)* 25% reduction - gravity fed

( ) Alternative (1) Conventional ( ) Innovative ( ) Modified Conventional (2) 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?

****

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:** P Gorman for Countryfyme NC LLC — 5/26/09

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

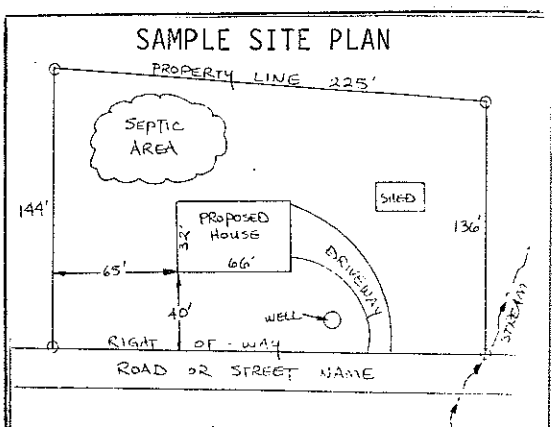
- ____ Location of septic systems and wells within 100' of your property… N/A
- ____ Location of easements and rights of ways on your property… N/A
- ____ Location of any designated wetlands on the property… N/A

Signature: Thomas for Countryfyme NC LLC — 5/26/09

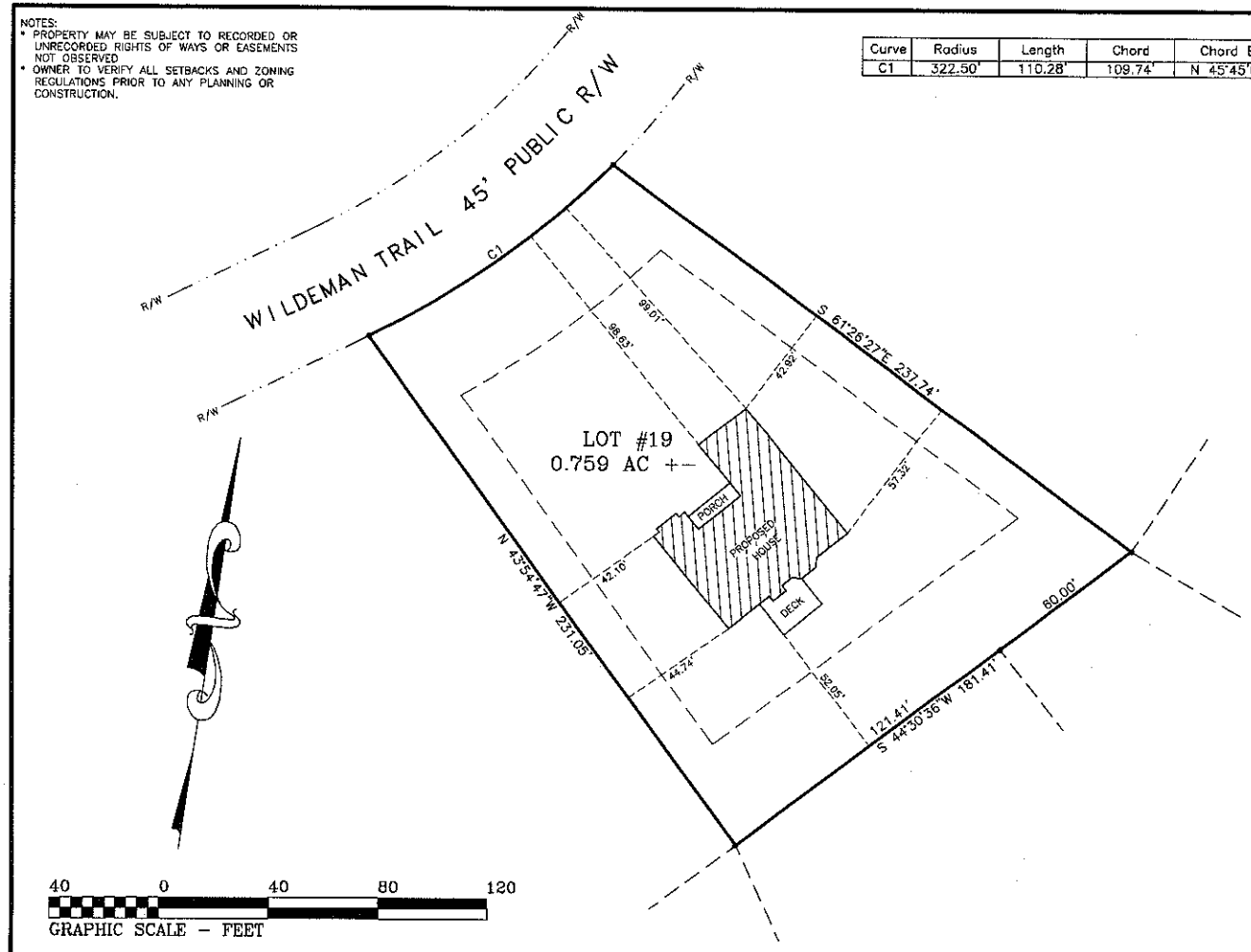
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) — DATE

USE THIS SPACE TO DRAW YOUR SITE PLAN

See attached



NOTES:
* PROPERTY MAY BE SUBJECT TO RECORDED OR UNRECORDED RIGHTS OF WAYS OR EASEMENTS NOT OBSERVED
* OWNER TO VERIFY ALL SETBACKS AND ZONING REGULATIONS PRIOR TO ANY PLANNING OR CONSTRUCTION.



Curve	Radius	Length	Chord	Chord Bear.
C1	322.50'	110.28'	109.74'	N 45°45'06" E

PHYSICAL SURVEY
FOR

TOM PALMER CONSTRUCTION

BEING ALL OF LOT #19 OF
THE HIGHLANDS AT MAPLE CREEK

DATE: MAY 20, 2009	DB:	PG:
SCALE: 1" = 40'	DB:	PG:
	PB:	PG:

BETHANY TOWNSHIP
IREDELL COUNTY, NORTH CAROLINA

DEDMON SURVEYS

RONNIE DEDMON, PLS #1222
CHUCK POOVEY, PLS #3762
ROBERT DEDMON, PLS #3899
PHILLIP HARRIS, PLS #4164
3704 NC HIGHWAY #16 NORTH
P.O. BOX 494 - DENVER, NC 28037
PHONE: 704/483/4908
FAX: 704/483/2170

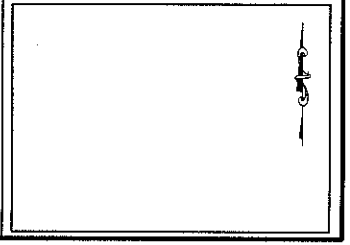
NORTH CAROLINA PROFESSIONAL SEAL L-4164 LAND SURVEYOR PHILLIP A. HARRIS

"THIS IS A DRAFTED SITE PLAN. NO SITE SURVEY WAS COMPLETED IN THE PREPARATION OF THIS SURVEY MAP."

4164
PROFESSIONAL LAND SURVEYOR — LICENSE NO.

SURV. BY:	DRAWN:	JOB# P509HMC19

VICINITY MAP



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