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 X 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:**

Robert S. Munday Applicant Name	130 Heritage Hill DR Marion NC 28752 Mailing Address	828-655-1235 Home Phone	828-652-0692 Work Phone
Edith B. Munday Owner Name	278 Bell Farm Road Statesville NC 28625 Mailing Address	704-872-6859 Home Phone	Retired Work Phone

4. **Property Information:**

278 Bell Farm Road Street Address	None Subdivision Name	 Section/Phase and Lot Number

Driving Directions: US 64 East; Turn Right in Front of Main Cool Spring Vol Fire Dept on Bell Farm Rd; Procede 3/4 of 1 mile To Brick home with Double Carport on Right side of Road going South.

****

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

Maximum Number of Bedrooms 3
Maximum Number of Occupants 2
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)*

( ) Alternative (✓) Conventional (X) Innovative SAR ( ) Modified Conventional ( ) Other___ ( ) No Preference

****

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

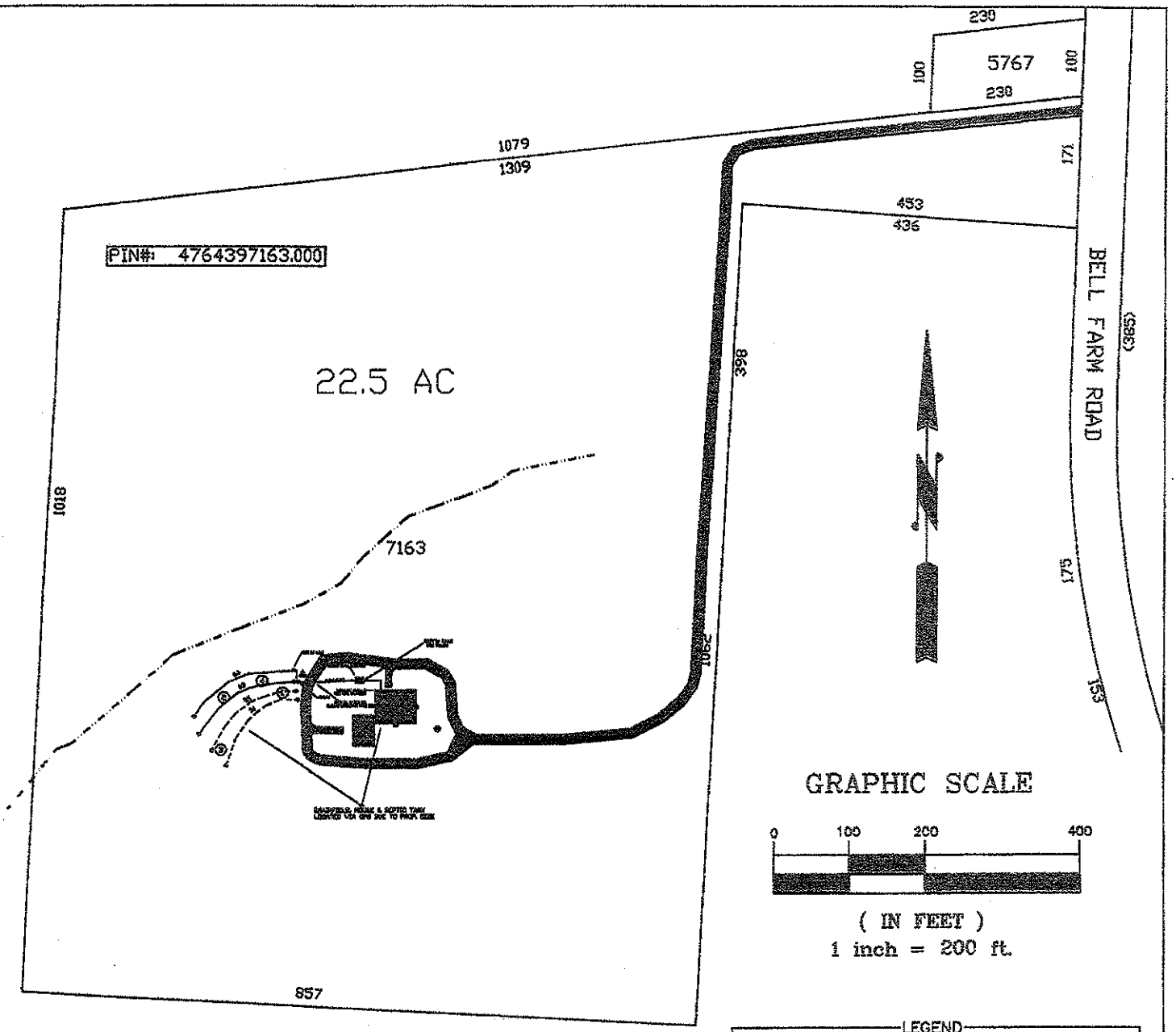
( ) Yes (✓) No Does the site contain any jurisdictional wetlands?
( ) Yes (✓) No Is any non-domestic sewage (i.e. industry) to be generated?
( ) Yes (✓) No Is the site subject to approval by any other public agency?

****

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: Samuel S. Munday — 5/15/05

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



LINE	COLOR	ELEV.	LENGTH
TBM		100.0	
ST		107.5	
HSE CNR		108.1	
#1	GREEN	106.3	150'
#2	WHITE	105.0	150'
#3	RED	103.5	150'
#4	BLUE	101.8	150'

LEGEND

- (5) Boring locations.
- House & driveway location.
- System lines.
- Repair lines.
- Well location.
- Temporary Bench Mark (TBM); Nail in Oak.
- Perennial Stream

SHEET 1 OF 1

ROLLANS SOIL & ENVIRONMENTAL SERVICES
2120 GRAHAM ROAD
MOUNT ULLA, NC 28125
PHONE/FAX: (704) 278 - 0989
ASHLEY ROLLANS, NC LICENSED SOIL SCIENTIST
MOBILE: (704) 746 - 5046
EMAIL: ROLLANSFORTC@AOL.COM

SHEET TITLE:
"FAST TRACK" EVALUATION

PROJECT NAME:
ROBERT MURRAY
– BELL FARM ROAD 22.5 AC –
IREDELL COUNTY, NORTH CAROLINA
MAY 2005

FILE: G:\WORK\01-109\
DWG SCALE ON MAP:
SCALE:
FIELD WORK:
S.A.R.
DRAWN BY:
S.A.R.
PROJECT MGR.:
S.A.R.
PROJECT NO.:
01-109