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 ___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
PAM Carolina Properties	31442 Ocean View St Laguna Beach, CA		949-226-8410 (office)
Owner Name	**Mailing Address**	**Home Phone**	**Work Phone**
Anita Michenaud	31442 Ocean View St. - Laguna Bch., CA 92651	949-735-1968 (Cell)	

4. **Property Information:**

Street Address	Subdivision Name	Section/Phase and Lot Number
144 Dogwood Estates Circle	Dogwood Estates	36

Driving Directions: 64 E off exit 153 on Hwy 40 E
Go thru 4 lights. At 5th light turn right onto Bell Farm Rd
Go 1.2 miles, turn left into Dogwood. Bare left around circle @ 5th trailer on right

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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

Maximum Number of Bedrooms 2
Maximum Number of Occupants 5
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

****

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: _____ 6/19/08
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:

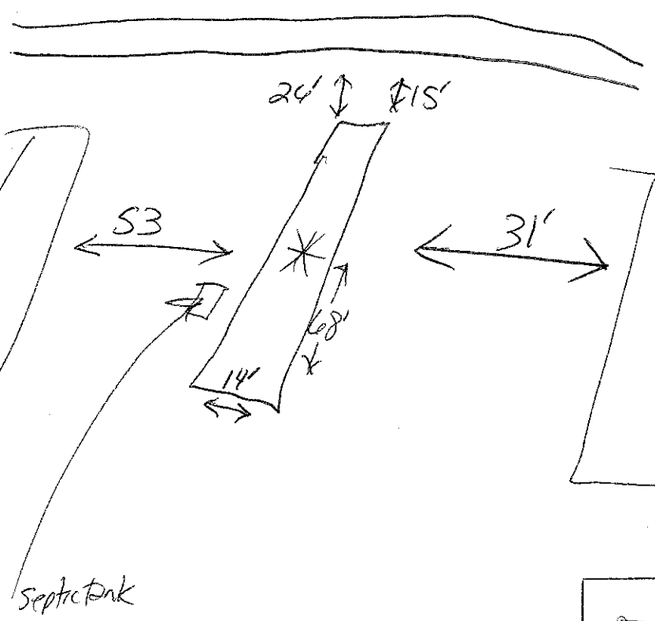
____ Property Line measurements are clearly identified…
____ All proposed structures are indicated…
SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site
____ Front and side setbacks from property line…
____ Preferred 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

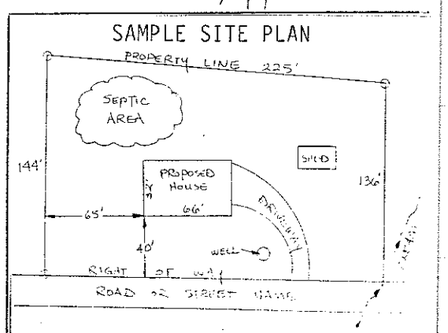
Signature: _____ 6-19-08
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

USE THIS SPACE TO DRAW YOUR SITE PLAN



144

SAMPLE SITE PLAN



4764687046.000
BELL SHIRLEY HUBBARD
DB 1191 & PG 1011
100 Ac.

4764862622.000
BELL LUCIUS P III
DB 0888 & PG 0093
137.97 Ac.

2438
1945 (1890)
240
246
301
260
259
312
310
108
DOGWOOD ESTATES CIR
Old Water Shed
Old Pool House
BELL FARM RD
915
811
811
481
350

4764575337.000
MAY PATRICIA
DB 1351 & PG 1905
0.735 Ac.

4764576277.000
BOWSER PATRICIA E
DB 1384 & PG 2388
0.802 Ac.

4764578107.000
JOHNSON JASON M
DB 1579 & PG 1284
0.64 Ac.

4764579029.000
CLARK KAREN T
DB 1735 & PG 1041
0.73 Ac.

4764674206.000
PAM CAROLINA PROPERTIES LLC
DB 1726 & PG 1732
14.54 Ac.

4764678037.000
PRITCHARD JULIE K+NICHOLSON W
DB 1555 & PG 2266
7.89 Ac.

4764565938.000
SIGMON HENRY A
DB 643 & PG 911
2.491 Ac.

4764567883.000
SIGMON JOHNNY E
DB 0798 & PG 0225
1.87 Ac.

4764669657.000
BELL L P JR + JOYCE B
DB 0888 & PG 0093
70.43 Ac.

4764669657.000
BELL L P JR + JOYCE B
DB 0888 & PG 0093
70.43 Ac.

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40
118 127 128 129 131 134 135 138 139 140 143 144 147 148 150 151 153 154 157 158 159 161 163 165 167 169 170 171 174 175 177 178 181 182 185 186 189 190 191 194 197 210 300 130 321 191 304 150 200 201 128 211 414 55 172 175 422 298 290 175 156 108 108 210 130 321 191 304 150 200 201 128 211 414 55 172 175 422 298 290 175 156 449 453 240 246 301 260 259 312 310 915 811 811 481 350

This map was prepared using Deeds, Plats, and Other Public Records. Iredell County assumes no legal responsibility for information contained upon this Map.

NAD 83 1000 ' Grid
North Carolina State Plane

Iredell County GIS

0 40 80 160 240 320
Feet