SFH Redraw

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
Terratek Inc	630 Signal Hill Dr. Ext.	704-902-0119	Same
Owner Name	Mailing Address	Home Phone	Work Phone
Same as above	" "	" "	" "

4. **Property Information:**

127 Sain Rd — Street Address
Spring Forest — Subdivision Name
Lot # 11 — Section/Phase and Lot Number

Driving Directions: 64E TL on Sain Rd. TL on Winding Brook 1st Lot on R Right. (Corner of Winding Brook (NORTH) & Sain Rd.

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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 3
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 ___

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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

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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: J Todd Ellis — Property owner or owner's legal representative signature (SIGNATURE REQUIRED)
3/27/06 — DATE

I Lance D. Schamback, certify that this plat was drawn under my supervision from an actual survey made under my supervision (deed description and/or Map Book: 36, Page 130. That the boundaries not surveyed are clearly indicated as drawn from information as shown That the ratio of precision as calculated is 1: 10,000+ that this plat was prepared survey; that the ratio of precision as calculated is 1: 10,000+ that this plat was prepared in accordance with G.S. 89-C as amended. Witness my original signature, registration number and seal this 23 day of March, A.D. 2006.

NORTH CAROLINA PROFESSIONAL LAND SURVEYOR LANCE D. SCHAMBACK

Lance D. Schamback, PLS
L-4295

Notes:

1) This property may be subject to any Easements, Rights-of-way, and/or Restrictive Covenants.

2) Boundary information based on Plat Book: 36 at Page: 130 as recorded in the Iredell County Register of Deeds.

3) This survey is of an existing parcel or parcels of land.

4) Area by coordinate method.

Legend

R/W = Right-of-way

I.P.S. = #4 Rebar Set

= Not to scale

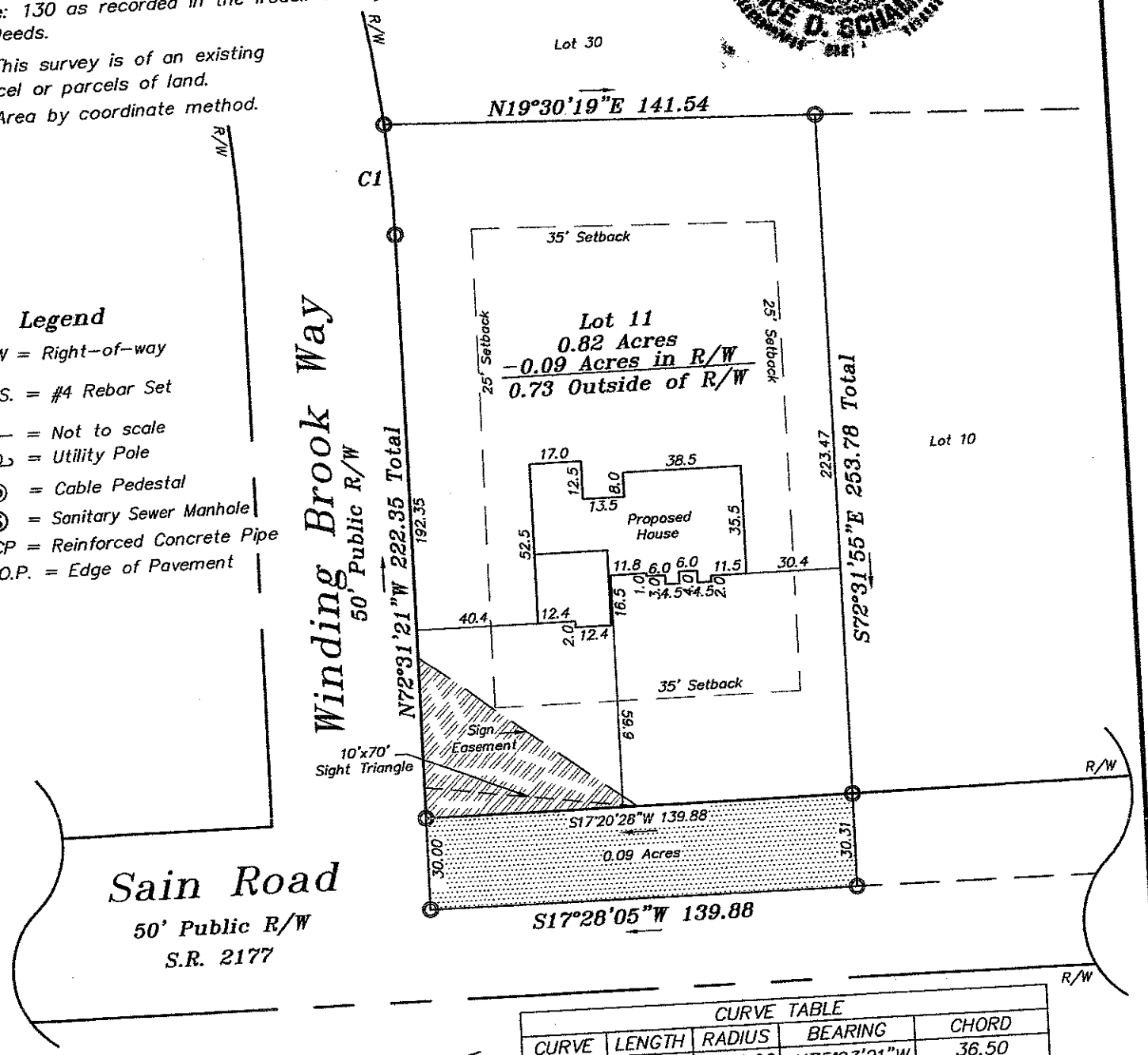
= Utility Pole

= Cable Pedestal

= Sanitary Sewer Manhole

RCP = Reinforced Concrete Pipe

E.O.P. = Edge of Pavement



CURVE TABLE				
CURVE	LENGTH	RADIUS	BEARING	CHORD
C1	36.51	425.00	N75°03'21"W	36.50

GRAPHIC SCALE

50 0 25 50 100 200

(IN FEET)

P.B. 36, Pg. 130