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
Peggy Lusk	McMahon Farm Ln	704-546-5821	704-400-7019
Owner Name	**Mailing Address**	**Home Phone**	**Work Phone**

4. **Property Information:**

Street Address	Subdivision Name	Section/Phase and Lot Number
McMahon Farm Ln.	N/A	

Driving Directions: I-77 N to 901 E to Dan McMahon Farm Ln. + go around 1st curve + then straight at 2nd

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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 ____
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:** _____ 5/12/06
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:

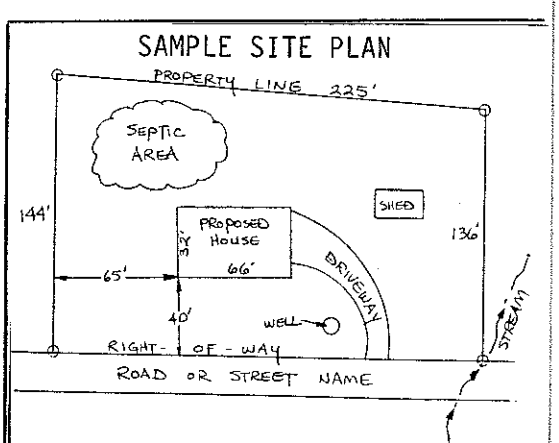
- ____ **Location of septic systems and wells within 100' of your property…** (N/A)
- ____ **Location of easements and rights of ways on your property…** (N/A)
- ____ **Location of any designated wetlands on the property…** (N/A)

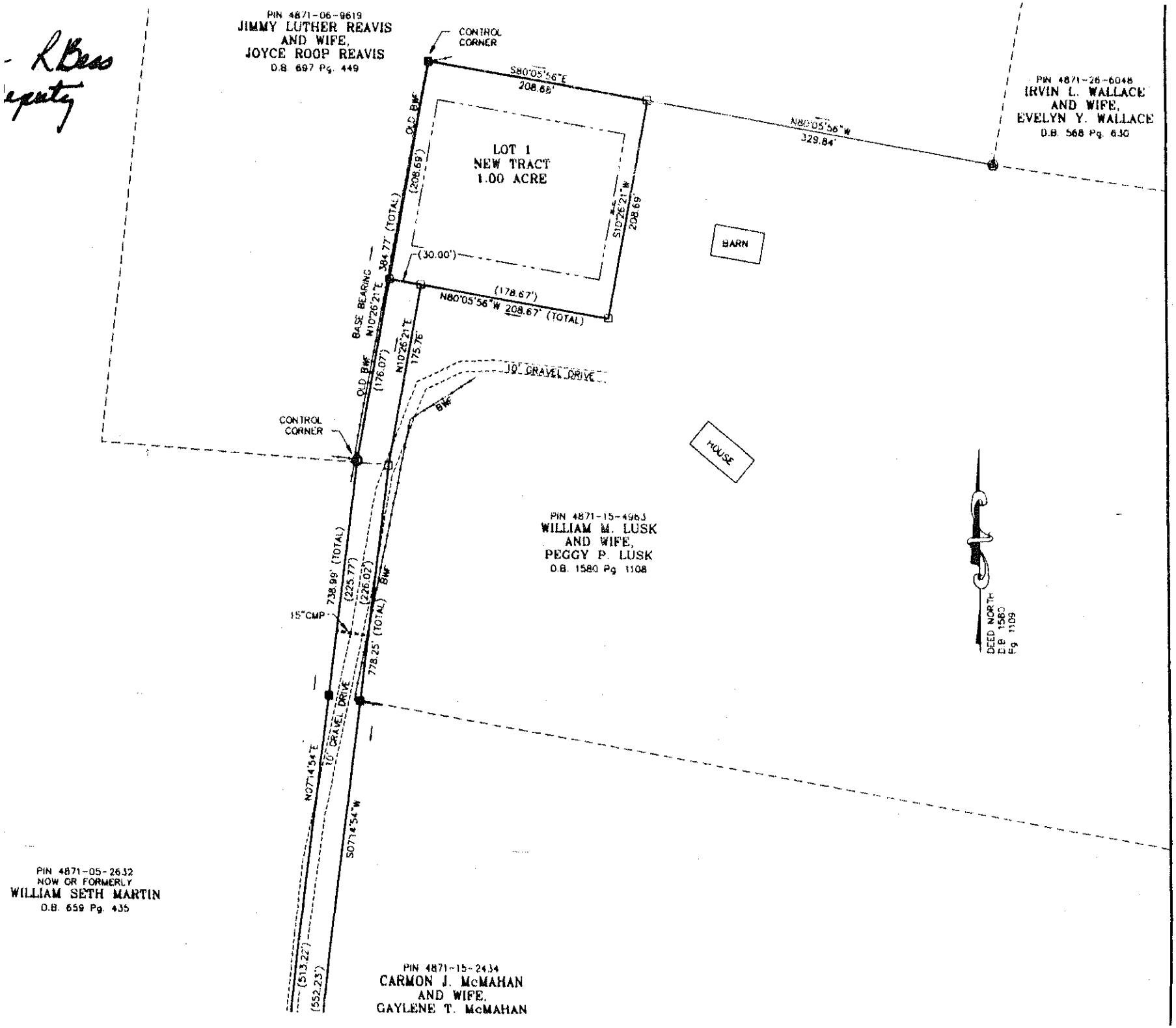
Signature: _____ 5/12/06

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

USE THIS SPACE TO DRAW YOUR SITE PLAN

See Plat Map




PIN 4871-06-9619
JIMMY LUTHER REAVIS
AND WIFE,
JOYCE ROOP REAVIS
D.B. 697 Pg. 449
CONTROL CORNER
S80°05'56"E
208.68'
LOT 1
NEW TRACT
1.00 ACRE
N80°05'56"W
329.84'
PIN 4871-26-6048
IRVIN L. WALLACE
AND WIFE,
EVELYN Y. WALLACE
D.B. 568 Pg. 630
O.C. BWF
(208.69')
384.77' (TOTAL)
S10°26'21"W
208.69'
BARN
(30.00')
(178.67')
N80°05'56"W 208.67' (TOTAL)
BASE BEARING
N10°26'21"E
OLD BWF
(176.07')
N10°26'21"E
175.76'
10' GRAVEL DRIVE
BWF
CONTROL CORNER
HOUSE
PIN 4871-15-4963
WILLIAM M. LUSK
AND WIFE,
PEGGY P. LUSK
D.B. 1580 Pg. 1108
DEED NORTH
D.B. 1580
Pg. 1159
738.99' (TOTAL)
(225.77')
(226.02')
BWF
15"CMP
778.25' (TOTAL)
N07°14'54"E
10' GRAVEL DRIVE
S07°14'54"W
(513.22')
(552.23')
PIN 4871-05-2632
NOW OR FORMERLY
WILLIAM SETH MARTIN
D.B. 659 Pg. 435
PIN 4871-15-2434
CARMON J. McMAHAN
AND WIFE,
GAYLENE T. McMAHAN