704-546-2602 213383 pd $250 10/23/15

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

(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 _X_ 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 _X_ Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. **Applicant Information:**

Tyson Farms	501 Sheffield Road, Harmony, NC 28634		704-546-2602
Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Tyson Foods, Inc.	P.O. Box 2020, Springdale, AR 72762		479-290-7156
Owner Name	Mailing Address	Home Phone #	Alternate Phone #

4. **Property Information:**

501 Sheffield Road, Harmony, NC 28634		
Street Address	Subdivision Name	Section/Phase and Lot Number

Driving Directions: take Sheffield Road (2126) east from E. Memorial Hwy (901). Project location is on the right.

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 due to _____
( ) Other _____

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	Rendering Plant
Square Footage of Building	New Building = 1,148 SF
Maximum Number of Employees	N/A
Maximum Number of Seats	N/A

6. **Proposed Water Supply:**

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

7. **Desired Septic System Type:** *(You may rank in order of preference, if any)* (X) EXISTING SYSTEM installed unknown *Year*

( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other_____

8. **Please Answer The Following To The Best of Your Ability:** ( ) Yes (X) No Does the site contain any jurisdictional wetlands?
   (X) Yes ( ) No Is any non-domestic sewage (i.e. industry) to be generated?
   (X) 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:** _____ 10-21-15
   Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

Applications for permits require the "signature of the owner or owner's legal representative" (15A NCAC 18A .1937). If the owner does not sign the application himself or herself, they can submit any one of the following documents to designate their legal representative:

Power of Attorney; Real Estate Contract; Estate executor; Bankruptcy trustee; Court ordered guardianship

In the absence of the above documentation, the property owner may provide the local health department with documentation that designates a legal representative. A property owner may:
Complete this form to document his or her legal representative, or provide his or her own form that contains the information in this form.
If there are multiple property owners, then all property owners must sign the form that designates a legal representative.

By signing a form that designates a legal representative for purposes of 15A NCAC 18A .1937, the property owner authorizes that representative to act on their behalf in matters pertaining to the application and permitting process, including signing or receiving any application, document or permit. The owner retains full responsibility to meet all permit conditions specified by the local health department.

I, Gregg Wilkstrom, am the legal owner(s) of the property located at River Valley Animal Foods Harmony, NC, identified as PIN (Parcel Identification Number) 4189006820 7, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Gregg Wilkstrom Tyson Foods Inc, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

- Application for Improvement Permit (IP) / Authorization to Construct (AC)
- Improvement Permit (IP) / Authorization to Construct (AC)
- Application for soil-site evaluation (new/repair)
- Application/permit for private drinking water well/well abandonment
- Application for Compliance Inspection

I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

Signature of Owner(s)	Date	Signature of Witness	Date
[signature]	1.21.16	Kari Haynes	1-21-16

Please return this signed form to the appropriate office:

Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

Reid Engineering Company, Inc.

Environmental and Civil Engineering Consultants
• Wastewater • Water /Sewer • Reuse
1210 Princess Anne Street | Fredericksburg, Virginia 22401
540-371-8500 | www.reidengineering.com

November 30, 2015

Adrienne Shea
Iredell County Health Department
349 North Center Street
Statesville, North Carolina 28687

Subject: Tyson Foods, Inc., Harmony North Carolina

Dear Adrienne,

Reid Engineering Company is submitting the enclosed application for an Existing Septic System Inspection on behalf of our client Tyson Foods, Inc. for their Harmony, North Carolina plant at 501 Sheffield Road, Harmony, NC. Enclosed are the following:

- Iredell County Health Department – Application for Existing System Inspection
- Site Plan – Sheet C200 – Overall Site Plan

A review fee of $250 was previously submitted to the department in October of 2015 for the Existing System Inspection.

If you need additional information or have questions, please let me know. Thank you for your assistance.

Best regards,

Wade Tanner, Director of Engineering
REID ENGINEERING COMPANY, INC.