

## **Stanly County Health & Human Services**

1000 North First Street, Suite 3 Albemarle, NC 28001 Phone (704) 986-3675 Fax (704) 986-3783 www.stanlycountync.gov

G. David Jenkins, MPA Health & Human Services Director

The North Carolina Administrative Code requires applications for permits (septic, well, etc.) to be signed by the owner of the property to be evaluated or by the owner's legal representative. Applications submitted by an owner's legal representative must include this completed and signed document. Please note that the person named the legal representative on this document must make the application. The signature of the person named the legal representative on this document must also appear at the bottom of this document.

,, herby au (property owner's full name)	uthorize	to serve as my legal
(property owner's full name) representative for submitting an applicatio the Stanly County Health Department of pr install, repair or expand an on-site wastewa submittal of the application for evaluation perform said evaluation on my property.	n for a soil/site evaluation or private dr operty owned by me for the purpose of ater system or a private drinking water	inking water well by fobtaining a permit to well. I understand that
Property Owner's Address:		
Property Owner's Phone:		
Гах Record #	Parcel Size	
Location of Site		
Signature:(property owner's full name)	Date:	_
Signature:(property owner's full name)	Date:	_
Signature:(property owner's full name)	Date:	_
Signature:(legal representative's full name)	Date:	_