



CARROLL COUNTY HEALTH DEPARTMENT

101 W. MAIN ST., DELPHI, IN 46929

765-564-3420

www.in.gov/localhealth/carrollcounty/

Dr. Emily Backer M.D

Health Officer

WAIVER REQUEST

Name: _____ Date: _____

General Site Information:

Site Address: _____

Site Parcel Number: _____

Owner Address: _____ Owner Phone: _____

Email Address: _____

Project Description (please describe what you are planning to do to your property):

ATTACH A SCALE DRAWING OF YOUR HOME SHOWING THE CHANGES THAT WILL BE MADE.

Will you be adding a bedroom to your building? _____

Signed By: _____ (Homeowner), Print: _____

Health Department Use Only:

Will the renovation project affect the On-site septic system? : _____ YES _____ NO

Comments:

Waiver Approved: _____ YES _____ NO By: _____