# VOLUNTARY RELINQUISHMENT OF ADMINISTRTIVE APPEAL RIGHTS

Date prepared:

Owner(s):

Mailing Address:

Property location/site legal description:

Original Improvement Permit (IP) #

Date issued:

Original Authorization to Construct (AC) #

\_Date issued:

I,

(print full name)

, voluntarily relinquish my rights to pursue a formal appeal through the North

Carolina Office of Administrative Hearings pursuant to NC General Statute 130A-24 and 150B-23 and all other applicable provisions of Chapter 150B for the above referenced permit(s) (which includes the IPs and ACs) in order for the authorized agent/local health department to issue the applicable permit (new IP and/or CA) for the site. I understand by completing this form that the permit(s) for a

(System description)

will be revoked immediately by the authorized agent/local health department.

I understand that the local health department’s revocation of a permit can be appealed to the North Carolina Office of Administrative Hearings within 30 days of the revocation pursuant to the North Carolina Administrative Procedure Act. I understand that in order for the local health department to issue another IP and AC that the current IP and AC must be revoked. I understand that the local health department’s revocation of an IP or CA is not effective until 30 days from the revocation or, if the revocation is appealed, at the time that the Office of Administrative Hearings issues a final decision. I understand that by signing this form and relinquishing my right to appeal the permit revocation at the Office of Administrative Hearings that the local health department’s permit revocation will become effective immediately. I understand and agree that the revocation of a permit that takes effect immediately is in my best interest. I understand that by signing this form that I agree that I do not want to appeal the permit revocation.

I understand that I am not required to relinquish my appeal rights but that this is an option available to me so I do not have to wait 30 days for the revocation of the permit to take effect.

Signature of Property Owner:

Date signed: