

This application expires 6 months from the initial date if permits have not been issued

This application to be filled out when applying for a septic system inspection.

County Health Department Application for Improvement Permit and/or Authorization to Construct

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT
OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration)

| П | EI | Environmental Health New Septic System | | | | |
|---|----|--|--|--|--|--|
| | | All property irons must be made visible. Place "pink property flags" on each corner iron of lot. All property lines must | | | | |
| | | be clearly flagged approximately every 50 feet between corners. | | | | |
| | • | Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, ou | | | | |
| | | buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting. | | | | |

Place orange Environmental Health card in location that is easily viewed from road to assist in locating property.

 If property is thickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. Do not grade property.

 All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.

☐ Environmental Health Existing Tank Inspections

Follow above instructions for placing flags and card on property.

Prepare for inspection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (if possible) and then put lid back in place. (Unless inspection is for a septic tank in a mobile home park)

DO NOT LEAVE LIDS OFF OF SEPTIC TANK

"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"

| SEPTIC | |
|--|--|
| If applying for authorization | on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one. |
| {} Accepted | {} Innovative {} Conventional {} Any |
| {_}} Alternative | {}} Other |
| The applicant shall notify question. If the answer is | the local health department upon submittal of this application if any of the following apply to the property in "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION: |
| YES NO | Does the site contain any Jurisdictional Wetlands? |
| YES NO | Do you plan to have an <u>irrigation system</u> now or in the future? |
| YES NO | Does or will the building contain any drains? Please explain. |
| YES NO | Are there any existing wells, springs, waterlines or Wastewater Systems on this property? |
| {_}}YES { | Is any wastewater going to be generated on the site other than domestic sewage? |
| {_}}YES { | Is the site subject to approval by any other Public Agency? |
| YES NO | Are there any Easements or Right of Ways on this property? |
| YES YNO | Does the site contain any existing water, cable, phone or underground electric lines? |
| concepts of a security of a more security of the security of t | If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service. |

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.



| Initial Application Date: | Application # | | | | | | | |
|--|--|--|--|---|--|--|--|--|
| | twist research start | | CU# | | | | | |
| Central Permitting 108 E. F | COUNTY OF H. Front Street, Lillington, N | ARNETT RESIDENTIAL LAND USE AI IC 27546 Phone: (910) 893-7525 ex | | arnett.org/permits | | | | |
| | | FFER TO PURCHASE) & SITE PLAN ARE REC | | | | | | |
| LANDOWNER: Grant | nan Ted a | Tudy Mailing Address: | 230 Clarks Col | ner RD | | | | |
| city: Holly Springs | State: NC Zip: | 27590 Contact No: 91924406 | 526 Email: Truly blesse | 7 | | | | |
| APPLICANT : Chatham | Custom Hom | Mailing Address: 526 T | 10th 18. New | Hill NC | | | | |
| city: New Hill | State: N Zip: | 2756 Contact No: 919 33 76 | 152 Email: Chathan Co | ston bomesé | | | | |
| *Please fill out applicant information if difference and the second seco | Tarks (o | rner 1d. PIN: 0614 | 1-99-8198 | 9.2 | | | | |
| Zoning:Flood: Watershed: Deed Book / Page: | | | | | | | | |
| Setbacks - Front: 220 Back: 400 Side: 150 Corner: 175 | | | | | | | | |
| PROPOSED USE: | | | | V 1'4' | | | | |
| □ SFD: (Sizex) # Be | drooms:# Baths: | _ Basement(w/wo bath): Garage: | Deck: Crawl Space: Slab: | Monolithic Slab: | | | | |
| TOTAL HTD SQ FTGARAGE | SQ FT (Is the b | onus room finished? () yes () no | w/ a closet? () yes () no (if yes ad | ld in with # bedrooms) | | | | |
| ☐ Modular (Size x)# | Bedrooms # Baths | Basement (w/wo bath) Garage | e: Site Built Deck: On Frame | e Off Frame | | | | |
| TOTAL HTD SQ FT | | d floor finished? () yes () no Any | | | | | | |
| | A STATE OF THE PARTY OF THE | TO SEE BUILDING THE AUGUST ENDING | | SEPTIC | | | | |
| ☐ Manufactured Home:SW _ | DWTW (Size | x) # Bedrooms: Garag | ge:(site built?) Deck:(site t | built?) | | | | |
| ☐ Duplex: (Sizex) No | . Buildings: | No. Bedrooms Per Unit: | TOTAL HTD SQ FT_ | transporter 1 | | | | |
| ☐ Home Occupation: # Rooms; | Use: | Hours of Operation | n:#Emp | loyees: | | | | |
| 4/ | 38 26 | Covered Carpor | Closets in addition? (| agential growing | | | | |
| | 30 x) Use: | EN CALLON | Closets in addition? (|) yes (2) no | | | | |
| TOTAL HTD SQ FT | Carpect | desired seem now or it me have | | | | | | |
| Water Supply: County | Existing Well! | New Well (# of dwellings using well |) *Must have operable water be | efore final | | | | |
| Sewage Supply: New Septic T | ank Expansion | RelocationExisting Septic Tank | County Sewer | | | | | |
| Does owner of this tract of land, own | land that contains a ma | n other side of application if Septic) nufactured home within five hundred fee | et (500') of tract listed above? () yes | () no | | | | |
| Does the property contain any easem | ents whether undergro | und or overhead () yes () no | | | | | | |
| Structures (existing or proposed): Sin | gle family dwellings: | Manufactured Homes: | Other (specify): | | | | | |
| If permits are granted I agree to confo I hereby state that foregoing statement | orm to all ordinances and ts are accurate and co | d laws of the State of North Carolina re | egulating such work and the specification mit subject to revocation if false information | ons of plans submitted. ation is provided. | | | | |
| March March March | 12 | court of observe hapters the attendance | 8/16/23 | | | | | |
| sign | nature of Owner or Ownsibility to provide the | ner's Agent county with any applicable informa | Date (tion about the subject property, incli | uding but not limited | | | | |

to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.***

*This application expires 6 months from the initial date if permits have not been issued**

APPLICATION CONTINUES ON BACK

strong roots • new growth