| NAME:     | Davidson H          | omes, LLC                     |                             | APPLICATION #:   |            |
|-----------|---------------------|-------------------------------|-----------------------------|--|------------|
|           |                     | ۶/171. <sup>و</sup>           | 11 - 1411t 6                | PRINCE PLACE LOT 53  |            |
| •         |                     |                               |                             | or a septic system inspection.*  |            |
|           |                     |                               |                             | Permit and/or Authorization to Construct THE SITE IS ALTERED, THEN THE IMPROVEMENT |            |
|           |                     |                               |                             | The permit is valid for either 60 months or without expiration                     |            |
| dependin  | g upon documentati  | ion submitted. (Complete sit  | e plan = 60 months; Complet | te plat = without expiration)  | 11         |
| acpenan   | 910-893-7525        |                               | e pian — oo monais, compie  | CONFIRMATION #   |            |
| ✓ En      |                     | alth New Septic Syste         | <b>m</b> Code 800           |  | _          |
| •         |                     |                               |                             | perty flags" on each corner iron of lot. All prope                                 | rtv        |
|           |                     |                               | ately every 50 feet betw    |  |            |
| •         |                     |                               |                             | sed structure. Also flag driveways, garages, dec                                   | KS.        |
|           |                     |                               |                             | eveloped at/for Central Permitting.  | ,          |
| •         |                     |                               |                             | ily viewed from road to assist in locating property                                |            |
| •         |                     |                               |                             | nat you clean out the <b>undergrowth</b> to allow the s                            |            |
|           | evaluation to be    | e performed. Inspectors       | s should be able to walk    | freely around site. <b>Do not grade property</b> .                                 |            |
| •         | All lots to be a    | addressed within 10 bu        | usiness days after con      | nfirmation. \$25.00 return trip fee may be incuri                                  | <u>ed</u>  |
|           |                     |                               |                             | roperty lines, etc. once lot confirmed ready.                                      |            |
| •         |                     |                               |                             | at 910-893-7525 option 1 to schedule and use co                                    |            |
|           |                     |                               |                             | ) for Environmental Health inspection. Please no                                   | <u>ote</u> |
|           |                     |                               | cording for proof of requ   |  |            |
| •         |                     |                               |                             | ed to Central Permitting for permits.  |            |
| <u>En</u> |                     | alth Existing Tank Ins        |                             |  |            |
| •         |                     |                               | ags and card on propert     |  |            |
| •         |                     |                               |                             | ank as diagram indicates, and lift lid straight up                                 | (If        |
|           | possible) and the   | <b>LIDS OFF OF SEPTIC T</b>   | ce. (Unless inspection is   | s for a septic tank in a mobile home park)   |            |
| _         |                     |                               |                             | at 910-893-7525 option 1 & select notification per                                 | ∞i+        |
| •         |                     |                               |                             | ealth inspection. Please note confirmation number                                  |            |
|           |                     | recording for proof of re     |                             | ealth inspection. <u>Hease note communation name</u>                               | <u>/C1</u> |
| •         |                     |                               |                             | d to Central Permitting for remaining permits.                                     |            |
| SEPTIO    |                     | or tvit to modi roodito.      | onico approvoa, process     | a to contrain community for remaining permite.                                     |            |
|           |                     | on to construct please indica | ate desired system type(s): | can be ranked in order of preference, must choose one.                             |            |
| {}} A     | ccepted             | {}} Innovative                | { <b>✓</b> } Conventional   | {}} Any LSS SUBMITTAL BY ALEX ADAMS  |            |
| {}} A     | lternative          | {}} Other                     |                             |  |            |
| The app   | licant shall notify | the local health departmen    | nt upon submittal of this a | pplication if any of the following apply to the property                           | in         |
|           |                     |                               | ATTACH SUPPORTING           |  |            |
| *         |                     |                               |                             |  |            |
| {}}YE     | S { <u>✓</u> } NO   | Does the site contain any     | Jurisdictional Wetlands?    |  |            |

| {}} Alte | rnative         | {} Other  |  |  |
|----------|-----------------|---|--|--|
|          | •               | the local health department upon submittal of this application if any of the following apply to the property "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION: |  |  |
| {}}YES   | { <b>⊻</b> } NO | Does the site contain any Jurisdictional Wetlands?  |  |  |
| {}}YES   | { <b>⊻</b> } NO | Do you plan to have an <u>irrigation system</u> now or in the future?   |  |  |
| {}}YES   | { <u>✓</u> } NO | Does or will the building contain any <u>drains</u> ? Please explain  |  |  |
| {}}YES   | { <u>✓</u> } NO | Are there any existing wells, springs, waterlines or Wastewater Systems on this property?   |  |  |
| {}}YES   | { <u>✓</u> } NO | Is any wastewater going to be generated on the site other than domestic sewage?   |  |  |
| {}}YES   | { <u>✓</u> } NO | Is the site subject to approval by any other Public Agency?   |  |  |
| {}}YES   | { <b>✓</b> } NO | Are there any Easements or Right of Ways on this property?  |  |  |
| {}}YES   | { <b>✓</b> } NO | Does the site contain any existing water, cable, phone or underground electric lines?   |  |  |
|          |                 | 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.

DAVIDSON HOMES RALEIGH DIVISION PERMITTING COORDINATOR 09/28/23 **DATE** 

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