NAME:	Davidson Ho	omes, LLC		APPLICATION #:
	:	*This annlication to be	a filled out when annlying	WELLERS KNOLL LOT 13 for a septic system inspection.*
Com				t Permit and/or Authorization to Construct
IF THE IN	IFORMATION IN	THIS APPLICATION IS	FALSIFIED, CHANGED, O	R THE SITE IS ALTERED, THEN THE IMPROVEMENT
				The permit is valid for either 60 months or without expiration
			site plan = 60 months; Comple	
	910-893-7525 ( ironmental He	opuon 1 ealth New Septic Sys	stemCode 800	CONFIRMATION #
• <u>LIIV</u>	All property i	ons must be made	visible. Place "pink pro	pperty flags" on each corner iron of lot. All property
			imately every 50 feet bety	
				osed structure. Also flag driveways, garages, decks,
				developed at/for Central Permitting.  asily viewed from road to assist in locating property.
				that you clean out the <u>undergrowth</u> to allow the soil
				lk freely around site. <b>Do not grade property</b> .
				onfirmation. \$25.00 return trip fee may be incurred
				property lines, etc. once lot confirmed ready.
8	800 (after sele	cting notification perm	nit if multiple permits exis	n at 910-893-7525 option 1 to schedule and use code st) for Environmental Health inspection. Please note
			recording for proof of rec	<u>quest.</u> eed to Central Permitting for permits.
			nspections Code 800	
			flags and card on proper	
•	Prepare for ins <i>possible</i> ) and t	spection by removing hen put lid back in p	soil over <b>outlet end</b> of <b>lace</b> . (Unless inspection	tank as diagram indicates, and lift lid straight up (it is for a septic tank in a mobile home park)
		LIDS OFF OF SEPTIC		
i	if multiple perr	nits, then use code	800 for Environmental H	at 910-893-7525 option 1 & select notification permit Health inspection. <u>Please note confirmation number</u>
	•	recording for proof of		ed to Central Permitting for remaining permits.
<b>SEPTIC</b>	OSE OIICKZGOV	or ivit to flear results	s. Office approved, proces	so to Gential Fermitting for Fernanning permits.
	ng for authorization	on to construct please ind	licate desired system type(s):	can be ranked in order of preference, must choose one.
{}} Ac	ecepted	{}} Innovative	{ <b>✓</b> } Conventional	{}} Any LSS PLAN FROM ALEX ADAMS
{}} Al	ternative	{} Other		
			ment upon submittal of this ΓATTACH SUPPORTIN	application if any of the following apply to the property in IG DOCUMENTATION:
{}}YES	{ <b>⊻</b> } NO	Does the site contain a	any Jurisdictional Wetlands	?
{}}YES	{ <b>⊻</b> } NO	Do you plan to have a	n <u>irrigation system</u> now or i	in the future?
{}}YES	S { <u>✓</u> } NO	Does or will the buildi	ing contain any <u>drains</u> ? Plea	ase explain
{}}YES	{ <u>✓</u> } NO	Are there any existing	wells, springs, waterlines of	or Wastewater Systems on this property?

{**⊻**} NO Is any wastewater going to be generated on the site other than domestic sewage? {\_\_\_}}YES {\_\_}}YES Is the site subject to approval by any other Public Agency? {**✓**} NO {**⊻**} NO Are there any Easements or Right of Ways on this property? {\_\_}}YES {\_\_}}YES {**⊻**} 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.

U	Murdi	Ster	shous	DAVIDSON HOMES RALEIGH DIVISION PERMITTING COORDINATO	R

04/23/2025

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

DATE