

|                           |  |                         |
|---------------------------|--|-------------------------|
| Assigned To: _____        | <b>For office use only</b>   | IP Number: _____        |
| Date submitted _____      | NC PIN# _____  |                         |
| Payment Received \$ _____ | <input type="checkbox"/> Renewal (same site plan and design flow as original permit) | Original Permit # _____ |

## Caldwell County Health Department

### Application for Septic Improvement Permit and/or Construction Authorization



**Initial one:**     New System (IP/CA)     Expansion of existing     Redesign (CA only)  
                           Repair (failing system)     Reconnect

**Applicant Information** (Permits are issued to the applicant)

|  |               |            |             |           |                         |
|--|---------------|------------|-------------|-----------|-------------------------|
| Owner _____                            | Address _____ | City _____ | State _____ | Zip _____ | Home & Work Phone _____ |
| Applicant _____                        | Address _____ | City _____ | State _____ | Zip _____ | Home & Work Phone _____ |
| Applicant's Legal Representative _____ | Address _____ | City _____ | State _____ | Zip _____ | Home & Work Phone _____ |

**Property Information**    Lot Size: \_\_\_\_\_

Street Address \_\_\_\_\_    Subdivision Name \_\_\_\_\_    Section/Phase/Lot# \_\_\_\_\_

Directions to Site: \_\_\_\_\_

**Residential Specifications**

|   |  |
|---|--|
| <input type="checkbox"/> House<br><input type="checkbox"/> Mobile Home<br><input type="checkbox"/> Modular<br><input type="checkbox"/> Multi-family - No of Units _____ | Max number of bedrooms: _____<br>Max number of occupants: _____<br>If expansion: Current number of bedrooms: _____<br>Will there be a basement? <input type="checkbox"/> yes <input type="checkbox"/> no<br>Plumbing Fixtures in basement <input type="checkbox"/> yes <input type="checkbox"/> no |
|---|--|

**Non-Residential Specifications:**

Type of business/assembly: \_\_\_\_\_ (additional information may be required)  
 Maximum number of employees: \_\_\_\_\_    Total Square Feet of Building \_\_\_\_\_  
 Restaurant/ Assembly - No. of seats \_\_\_\_\_    Sq. Feet of Dining Area \_\_\_\_\_  
 Food Stand - Sq. Feet of Food Stand \_\_\_\_\_     Day Care -No. of Children / Adults \_\_\_\_\_

**Water Supply:**

New well     Existing Well     Community Well     Public Water     Spring

**Desired System Type** (systems can be ranked in order of your preference)

Alternative     Conventional     Innovative     Modified Conventional     Other (specify)     Any

The Applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. Check yes or no for each question below. If the answer to any question is "yes", applicant must attach supporting documentation.

yes     no    Does the site contain any jurisdictional wetlands?  
 yes     no    Is any wastewater going to be generated on the site other than domestic sewage?  
 yes     no    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     no    Applicant will be able to meet the EHS at the site. (It is recommended that the applicant or a representative meet the EHS at the site prior to the evaluation.)

**Notes to EHS:**

**Site Plan Instructions:** (Required Per 15A NCAC 18A .1937 (d))

**Applications will not be accepted without a complete site plan (except repairs)**

To ensure your site plan is complete check each of the items below that is depicted on your plan or write N/A if this is not applicable to your site.

- Existing and proposed property lines with dimensions. Indicate the location of any property irons or survey markers
- The location of all existing and proposed structures (e.g. house, garage, driveway, pool, outbuildings, etc.). Include the dimensions of the proposed structures and denote their location with measurements to nearby property lines or other fixed reference points. (e.g. irons, power poles, roads, etc.) If you are unsure as to the proposed structure size, please show the dimensions of the MAXIMUM area on the lot that you anticipate the structure will cover. This includes decks and patios.
- The site you would prefer your septic system go in (tank and nitrification field)
- Proposed or existing well or spring locations (including those on adjoining lots within 100')
- The location of any easements, right of ways, or underground utilities (electrical, water, etc.)
- The location of any existing septic tank systems (tank and nitrification field)
- The location of any grading or proposed grading (removal or addition of soil)

**Site Preparation for New Septic Systems:** (Required Per 15A NCAC 18A .1937 (d))

**The permitting process cannot be started until site preparation is complete.** Have you completed the following? (Check in box if completed)

- Mark all property corners and sidelines with flags, paint, stakes, etc.
- Any property line used to reference house and septic areas without a clear view from pin to pin, must be marked every 50 feet.
- Clearly identify area for house placement and other planned structures (deck, garage, pool, driveway, etc.)
- Clear undergrowth from the proposed septic drain field and repair area to allow easy accessibility and visibility in the area to be evaluated (at least 50 feet of visibility in any direction).
- Consider the following setbacks for septic systems: At least 50 feet from a creek or spring, 10 feet from any property line, 100 feet from any existing or proposed well location

**If the EHS is unable to conduct a site evaluation due to inadequate site preparation the applicant may be charged a \$60 revisit fee before rescheduling the evaluation.**

**Important Notes to the Applicant:**

- Once this application is submitted an Environmental Health Specialist will contact you with-in the next few days to discuss your site and to schedule the evaluation.
- It is recommended not to do any grading on the site before the site evaluation occurs. Grading on sites with shallow soil may cause the site to be unsuitable. Septic tail lines cannot be installed in fill.
- Backhoe pits may be required for soil evaluation.
- This application is valid for 2 years.
- IP/CAs (septic permits) are transferable and valid for 60 months.
- IP/CAs are without expiration if issued in conjunction with a complete survey plat depicting all improvements including septic and well areas to scale and filed with the Register of Deeds.
- **Permits are subject to revocation if the site plan, plat, or intended use changes (NCGS 130A-335)**
- **Permits are subject to revocation if the site is altered. (15A NCAC 18A .1937(g))**
- In issuing or denying permits for septic systems, Environmental Health Specialists, although employed by Caldwell County, are acting as agents of the State of North Carolina, and are applying rules and regulations promulgated by the State.

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By signing below I acknowledge that I have read this entire application. I certify that the information provided on this application and the attached site plan (if applicable) is true, complete, and correct. With this application, authorized county and state officials are granted right of entry to this property to conduct necessary inspections and to determine compliance with applicable laws and rules.

\_\_\_\_\_  
**Property owner's or owner's legal representative signature (required)**

\_\_\_\_\_  
**Date**

\*\*Documentation must be provided to support claim as owner's legal representative.

Rev 120216