



## YADKIN COUNTY ENVIRONMENTAL HEALTH

213 E. ELM STREET/PO BOX 1278 YADKINVILLE, NC 27055

PHONE: (336) 849-7905 FAX: (336) 849-7925

www.yadkincountync.gov



**Application For:**  New Well Permit  Well Repair Permit  Well Abandonment  Well Camera  
 Improvement Permit  Authorization to Construct  Existing System Inspection  Septic System Repair  Expansion

THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED.  
THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED. (APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION). SEE 15A NCAC 18A .1937(f) FOR DETAILS.

### **Applicant Information:** (PRINT CLEARLY)

Applicant Name: \_\_\_\_\_ Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Applicant E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_  
Owner Name: \_\_\_\_\_ Address: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_  
Owner E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

### **Property Information:**

Street Address: \_\_\_\_\_ Lot Size: \_\_\_\_\_ Subdivision Name: \_\_\_\_\_  
Section/Phase: \_\_\_\_\_ Lot Number: \_\_\_\_\_ Driving Directions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **Site Development Information:** (check or complete ALL that apply)

New Single Family Residence Maximum Number of Bedrooms: \_\_\_\_\_  Crawl Space Foundation  
 New Multi-Family Residence Maximum Number of Occupants: \_\_\_\_\_  Concrete Slab Foundation  
 Accessory Building or Other Structure: \_\_\_\_\_  Basement with Plumbing  
 Bedroom(s) Addition  Basement without plumbing  
 Repair to Failing Septic System: Tank \_\_\_\_\_ Drain Lines \_\_\_\_\_ Describe Problem: \_\_\_\_\_

### **Check Foundation Type**

**Non-Residential Site Development:** Type of Business: \_\_\_\_\_

Square Footage of Building: \_\_\_\_\_ Max. Number of Employees: \_\_\_\_\_ Max. Number of Seats/Beds/Other: \_\_\_\_\_

**Water Supply:**  Replacement Well Reason: \_\_\_\_\_

Multi-Connection Well Number of Houses: \_\_\_\_\_ Number of Persons: \_\_\_\_\_

New well  Existing Well  Community Well  City Water  Other Public Water

**Desired Septic System Type:** (you may rank in order of preference) Year existing system installed: \_\_\_\_\_

No Preference  Alternative  Conventional  Innovative  Modified Conventional  Other: \_\_\_\_\_

**Please answer the following**  Yes  No Does the site contain any jurisdictional wetlands?

**to the best of your ability:**  Yes  No Is any non-domestic sewage (i.e. industrial) to be generated?

Yes  No Are there any underground storage tanks?

Yes  No Is the site subject to approval by any other public agency?

Yes  No Are there any easements located on the property?

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 making the site accessible so that a complete site evaluation can be performed.

**Signature:** \_\_\_\_\_

Property Owner or Owner's legal representative signature (SIGNATURE REQUIRED)

Date

## **ENVIRONMENTAL HEALTH REQUIREMENTS FOR SEPTIC PERMITS**

**The following items must be completed *PRIOR* to the *SUBMITTAL* of any Environmental Health Applications.**

**\*\* Initial each statement to indicate you have read and agree. \*\***

\_\_\_\_\_ Complete all Environmental Health Forms: Application; Site Plan with dimensions of proposed structure, addition, pool etc.; Documentation to Authorize Owner Agent (if the property owner is not the applicant); and Voluntary Relinquishment Form (for re-layouts of Improvement Permits). Sign this sheet after you have completed all items. Include a copy of the Zoning permit when applicable. Incomplete applications will be returned to the applicant and cannot be processed or placed on the work list.

\_\_\_\_\_ Lot must be cleared of heavy undergrowth. In order to evaluate the lot, the footprint of the proposed structure must be visible and an adequate area for the septic drain field and repair area must be sufficiently cleared of heavy undergrowth. Inspectors must be able to evaluate the property, shoot laser level elevations, layout the drain field, do soil work, etc. If the lot is not cleared sufficiently, then a \$60.00 site revisit fee will be charged and the evaluation will be put on HOLD until the requirement is met.

\_\_\_\_\_ Clearly mark all property corners by locating existing iron or concrete markers. Flag all property lines every 50 feet if adjacent are not visible when standing on any given corner. Property lines must be flagged and easily identified. Mow lines and/or fence lines do not constitute marked lines. If the property lines are not properly marked when the lot is ready to be evaluated, then the application will be put on HOLD and a site re-visit of \$60.00 will be charged.

\_\_\_\_\_ The structures to be constructed now and in the future must be staked/flagged on the property. If the structures are not marked the application will be put on HOLD and a site re-visit of \$60.00 will be charged.

\_\_\_\_\_ If an Authorization to Construct (AC) is desired, submit a recorded copy of the plat for newly created or subdivided lot(s).

**NOTE: Any site not meeting the above requirements when staff arrives for the evaluation will result in a \$60.00 revisit fee and the request being put on hold. This will delay the processing of the application.**

By Signing below I am acknowledging the above specifications have been met and the site is READY to be evaluated.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

**SEE THE "SAMPLE SITE PLANS" ATTACHED. INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT.**

Place an (X) beside each item as you complete the site plan:

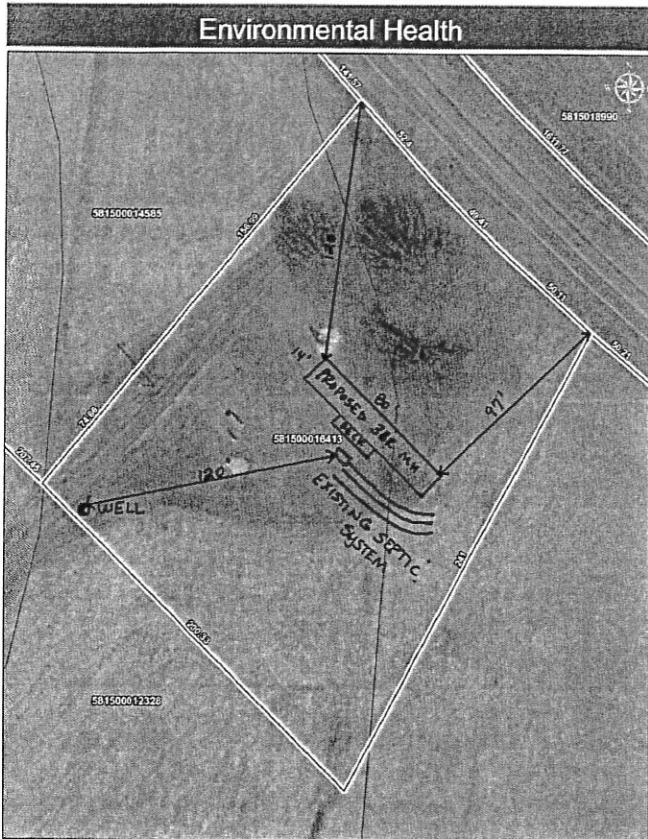
- Property line measurements are clearly identified
- All proposed structures are indicated
- Front, side and back setbacks from property lines
- Preferred driveway location and well location
- Area you prefer your septic system to be placed
- North Arrow

Circle N/A on the following of appropriate:

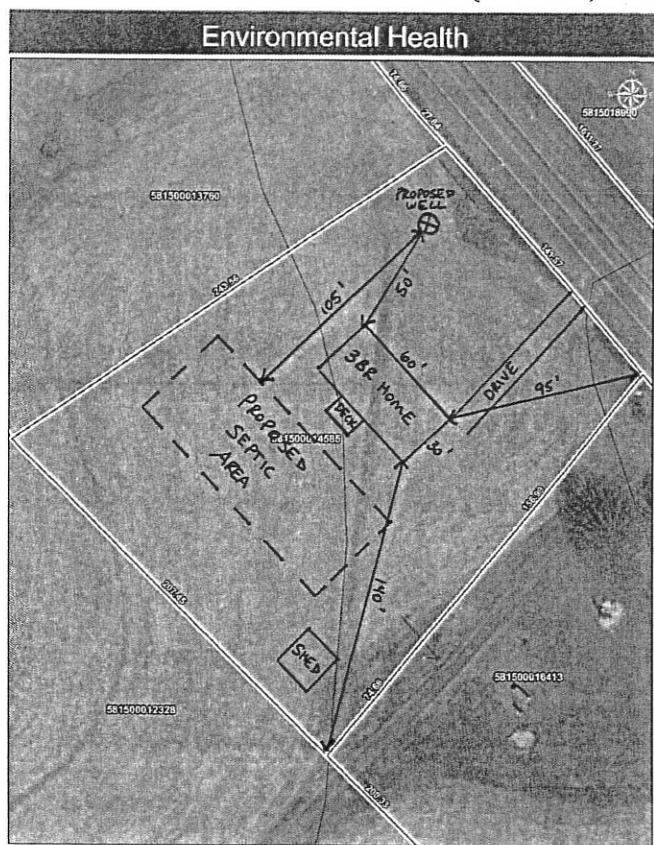
|   |     |
|---|-----|
| Location of septic systems and wells within 100' of your property | N/A |
| Location of easements and right of ways on your property          | N/A |
| Location of any designated wetlands on the property               | N/A |

**PLEASE USE THE ATTACHED MAP TO DRAW YOUR SITE PLAN**

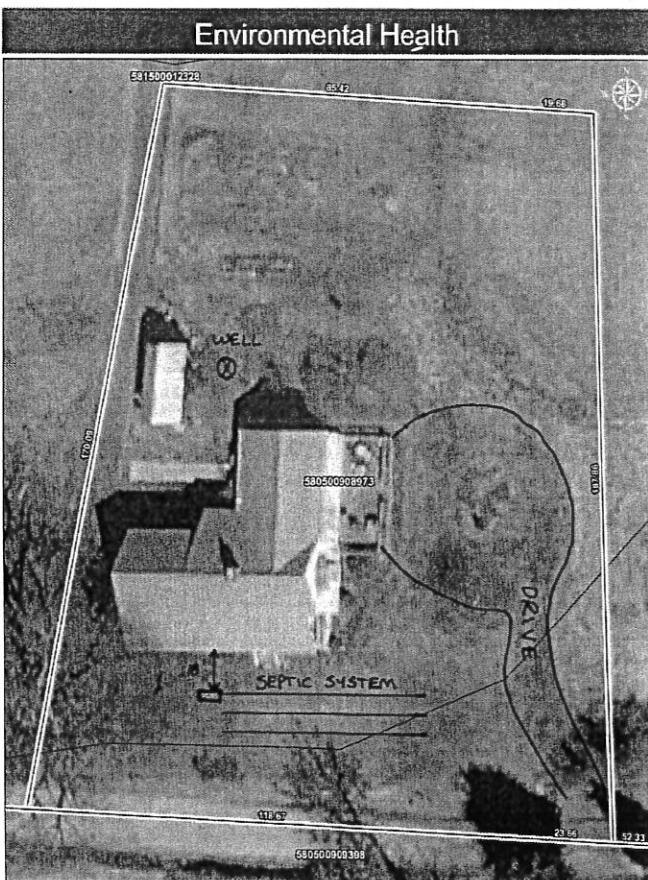
EXAMPLE (EXISTING SYSTEM)



EXAMPLE (IP / ATC)



EXAMPLE (REPAIR)



(WELL)

