

To complete this application you will need:

- **A map of the property to be evaluated**

This map can be obtained from Land Records Office, down the hall from this office, 2nd door down on right.

- **10 digit parcel number for the property**

This number can be obtained from Land Records Office, down the hall from this office, 2nd door down on right.

- **A proposed site plan for the property**

- You can use the attached site plan worksheet or submit your own
- See sample site plan on last page of application
- Please follow the instructions on the site plan worksheet
- It is important that you be specific about locations of structures, driveways, wells, etc. or we cannot properly evaluate your site

All checks can be made Payable to: Beaufort County Health Department



**Beaufort County's Rwdle Health Department
Application for Improvement Permit and/or Authorization to Construct**

FOR OFFICE USE ONLY	
Received	_____
Receipt #	_____
Called	_____
File#	_____

___ **Improvement Permit** ___ **Authorization to Construct**

IF THE INFORMATION IN THE APPLICATION FOR AN IMPROVEMENTS PERMIT IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENTS PERMIT AND 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)

APPLICANT INFORMATION

Applicant _____	Address _____	Home & Work Phone _____
Owner _____	Address _____	Home & Work Phone _____
	Applicant Email Address: _____	

PROPERTY INFORMATION

State Road Number _____ **10 Digit Parcel Number** _____ - _____ - _____ Property Size _____

Street Address (if existing or repair) _____	Subdivision Name (if applicable) _____	Lot # _____
--	--	-------------

Directions to Site: _____

DEVELOPMENT INFORMATION

- New Single Family Residence (\$125.00)
- Existing System Inspection(\$75.00)
- Repair to Existing Septic System(\$50.00)
- Non-Residential Type of Structure (shop, business, etc.)(\$125.00)
- Flow Addition (\$125.00)

Residential Specifications

Max number of bedrooms: _____
 Max number of occupants: _____
 If expansion: Current number of bedrooms: _____

Non-Residential Specifications: (if applicable)

Type of business: _____
 Max # of employees: _____ Max # of seats: _____
 Total Square footage of Building: _____

Existing System Specifications: (if applicable)

- Replacing Home Addition
- Deck/Porch Storage Building/Garage
- Other _____

Water Supply:

- New Well Existing Well Public Water

If applying for an Authorization to Construct: Please indicate Desired system type(s): (systems can be ranked in order of your preference).

- ① Conventional (rock trench)
- ② Accepted (polystyrene, chamber, etc.)
- ③ Alternative
- ④ Innovative (pretreatment, drip, etc.)
- ⑤ Other _____

***** By signing this application, I am stating that the above order of system types is my preference*****

The Applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer to any question is "yes", applicant must attach supporting documentation and show their location on the plat or site plan.

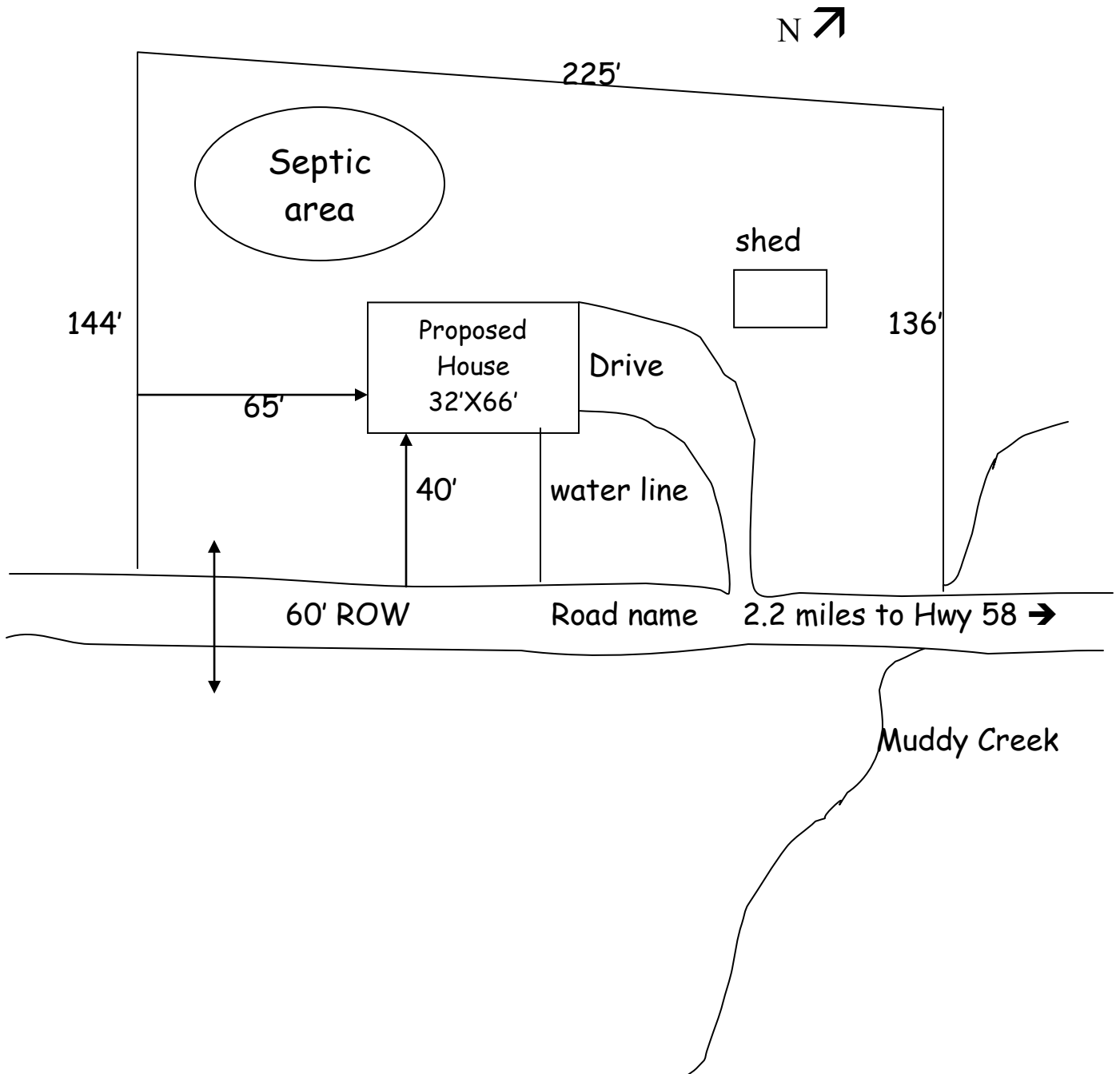
- yes no **Does the site have a previous permit, either current or expired from this department?**
- yes no Does the site contain any jurisdictional wetlands?
- yes no Is any wastewater going to be generated on the site other than domestic sewage?
- yes no Is the site subject to approval by any other public agency (CAMA, DWQ, etc.)?
- yes no Does this site contain any existing wastewater systems?
- yes no Are there any easements or right of ways on this 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 corners and making the site accessible so that a complete site evaluation can be performed or a revisit fee will be assessed. **I also understand that all fees paid to Beaufort County Environmental Health are non-refundable.**

Property owner's or owner's legal representative signature (required)** _____ **Date**
 **Must provide documentation to support claim as owner's legal representative.

Example Site Plan

This example was prepared to assist you in drawing your own site plan. Without your site plan we cannot perform the site evaluation. If you have any questions, please call us at (252) 946-6048



SITE PLAN WORKSHEET

Place a mark (X) beside each item that has been indicated on your site plan, incomplete site plans will be returned to you for completion. Remember: **Your property will not be scheduled for an evaluation until we have received a completed application, site plan, and all proposed items are marked on the property.**

- _____ - The dimensions of the property.
- _____ - The proposed location of all structures (e.g.: facility, wells, water lines, outbuildings, pools).
Show the distances from the road and the side property line to all structures. Be sure and give the dimensions for all the structures. If you are unsure as to the structure size, please show the dimensions of the MAXIMUM area of the lot that you anticipate the structure will cover.
- _____ - The site you would prefer your septic system to go in.
- _____ - The preferred driveway location.
- _____ - The proposed well location.
- _____ - A north arrow or other sufficient directional indicator.
- N/A _____ - Any proposed structures or improvements to the property such as garages, workshops, pools, etc.
If there are none, circle "N/A"
- N/A _____ - The location of any existing septic tank systems and wells on your property and on the adjoining property within 100' of your property line. **If there are none, circle "N/A"**.
- N/A _____ - The location of any easements or rights of way on the property. **If there are none, circle "N/A"**.
- N/A _____ - The location of any designated wetlands on the property. **If there are none, circle "N/A"**

USE THIS SPACE TO DRAW YOUR SITE PLAN:

Preparing your property for evaluation:

- **For new system evaluations:**
 - Property must be cleared (mowed, bush-hogged, etc.) to permit easy access. This may require mowing tall weeds in a field or cutting bushes and limbing trees in a wooded area. If wooded lots are cleared, it is very important not to disturb existing soil or reshape lots in any way. Clearing with heavy equipment should only be done in dry conditions. Disturbance of soil may cause sites to be unsuitable for a septic system or may require a more expensive system. A permit that has been issued could be revoked due to site disturbance or construction in the area permitted for the septic system or repair area.
 - Property corners must be flagged with provided yellow flags. All survey irons must be identified prior to calling for the site evaluation. If owner/agent cannot find irons, then a licensed surveyor should be hired by the owner/agent to identify irons.
 - Property must be identified by a marker on the road frontage.
 - Any designated wetlands must be identified prior to this evaluation. You are advised to check with Army Corps of Engineers at (252) 975-3025 and CAMA at (252)946-6481

- **For existing system evaluations:**
 - A portion of the septic tank must be uncovered. (1'x1' min.)
 - A yellow flag must be placed at the septic tank and another at the driveway or road frontage to aid in locating the site.

- **For repair evaluations:**
 - Place a yellow flag at the septic tank and another at the driveway.
 - Please indicate on the application what type of problem you are having. (backing up in house, in yard, at tank, etc.)

Once you have properly prepared the site for evaluation:

- ***Contact Environmental Health at (252)946-6048***
- ***If you do not call back, your site will not be scheduled for inspection***
- ***Failure to prepare property may result in additional fees***

Please note:

The septic system and any other improvements or conditions shall be installed and maintained as indicated on the permit issued. This permit shall in no way be taken as a guarantee or implied warranty that the septic system will function for any given period of time or that representatives of the Health Department assume any liability for related damages, consequential or direct, which are caused or which may be caused by a malfunctioning of such system.