



# Stanly County Environmental Health Property Development Application

Dept. Use Only	
Date Submitted	_____
Fee Paid	_____
Assigned to:	_____
CDP# _____ TR# _____	
Date Scheduled	_____

**Section 1** Please complete the following information

Owner	Mailing Address	City	Zip Code	Telephone Number(s) daytime
Applicant (if different than owner)	Mailing Address	City	Zip Code	Telephone Number(s) daytime

**Property Location**      Address: \_\_\_\_\_      Subdivision: \_\_\_\_\_      Section#/Lot \_\_\_\_\_

**APPLICATION FOR:**

New System       Improvement Permit       Construction Authorization - required to obtain building permit

Expansion       Improvement Permit       Construction Authorization - required to obtain building permit

Existing System       Reconnection       Renovation       Addition       Repair

**If applying for Authorization to Construct: Please Indicate Desired System Type(s): (systems can be ranked in order of your preference)**

Conventional     Innovative     Accepted     Other \_\_\_\_\_     Any

**TYPE OF FACILITY**

<input type="checkbox"/> Single Family	<input type="checkbox"/> Multi-family	<input type="checkbox"/> Business Type of business: _____
# Bedrooms _____	# Units _____	Number of employees _____
# Occupants _____	# Bedrooms/unit _____	Number of seats _____

Garbage disposal: Yes    No	Basement: Yes    No	Basement Fixtures: Yes    No	<b>Water Supply (check one)</b>	
Crawl Space: Yes    No	Slab foundation: Yes    No		Public	Existing Well
			New Well	Shared well

Are there any existing wells, springs, or existing waterlines on this property?    Yes    No

Is a grinder pump proposed before the septic tank?    Yes    No

**Existing System Approval ( Reconnection)**

Reconnection      # of bedrooms in original home: \_\_\_\_\_      # bedrooms in new home: \_\_\_\_\_

Addition (no bedroom)      Type of addition: \_\_\_\_\_      Square footage: \_\_\_\_\_

Detached Accessory Structure      Type of structure: \_\_\_\_\_      Square footage: \_\_\_\_\_

Will there be any water using fixtures installed in the addition or detached accessory structure?    Yes    No

In what name was the **original** septic tank permit issued? \_\_\_\_\_

In what year was the septic tank system installed? \_\_\_\_\_

If the answer to any of the following questions is "yes", applicant must attach supporting documentation.

Yes     No      Does the site contain any jurisdictional wetlands?

Yes     No      Does the site contain any existing wastewater systems?

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?

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. I understand that if the information in the application is falsified, changed, or the site is altered, then the Improvement Permit and/or Construction Authorization shall be invalid. I understand that the permit is valid for either 60 months or without expiration depending upon documentation submitted. (complete site plan = 60 months; complete plat = without expiration)

_____	_____
<i>Signature of Owner or Authorized Agent</i>	<i>Date</i>

**Directions**

---



---



---



---



---

## Existing Septic Tank Inspection Instructions.

Inspection of existing septic tank systems, where there will not be an increase in daily design flow, are conducted to verify compliance with the minimum required setbacks. If there is an increase in daily design flow such as adding a bedroom or adding employees to a business, the system will need to be expanded and a soil/site evaluation is required.

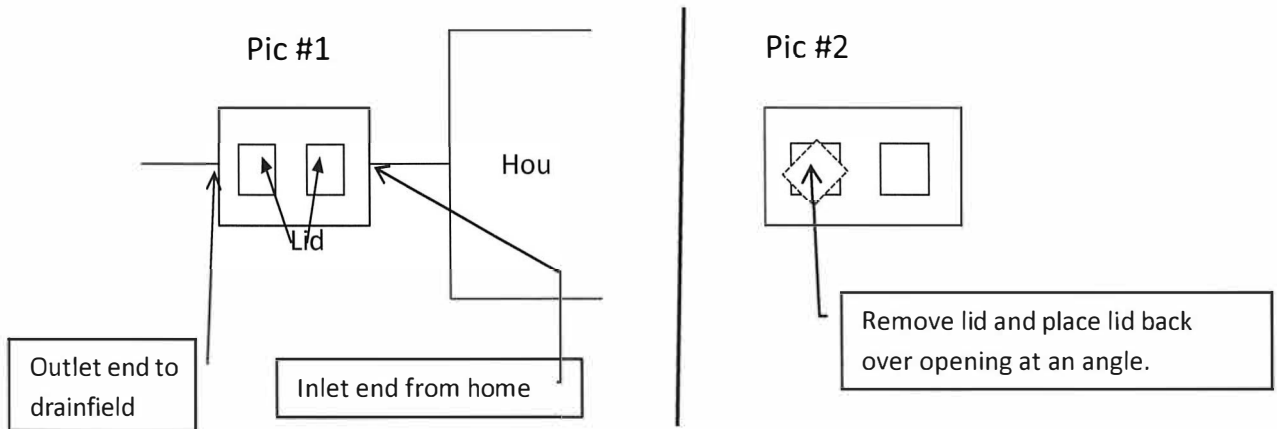
The following options are available for an existing system approval where there is **not** an increase in design daily flow:

- 1 – Sign the affidavit attesting that required setbacks will be maintained and there is not an increase in design daily flow,
- 2 – Apply for an existing system inspection with Stanly County Environmental Health,
- 3 – or, contract with an authorized on-site wastewater evaluator or a certified inspector to conduct an existing system inspection.

**The items below must be initialed in the space provided and signed at the bottom when complete.**

If you are requesting a reconnection to an existing system, **PRIOR** to submitting this application you must:

- \_\_\_\_\_ 1 Uncover the top of the outlet end of the septic tank and remove the lid. (see pic. #1) Place the lid at an angle on the top of the tank so that an inspector can easily remove the lid to check the tee inside the tank. (See pic. # 2) If it is a slab lid a septic tank installer must be present to remove the lid.
- \_\_\_\_\_ 2 If a permit cannot be located the first 5 feet of the nitrification line must be uncovered.
- \_\_\_\_\_ 3 Stake the **EXACT** dimensions of the proposed home on the property.
- \_\_\_\_\_ 4 Submit a site plan showing the proposed improvements.



If you are adding to an existing structure or building an accessory structure you must:

- \_\_\_\_\_ 1 **Locate and mark** the location of the septic tank and nitrification lines.
- \_\_\_\_\_ 2 Stake the exact dimensions of the proposed addition/structure on the property.
- \_\_\_\_\_ 3 Submit a sketch of the proposed improvements on the reverse side of the application. It may be necessary to uncover the septic tank.

Please be advised that if the site is not properly prepared in accordance with these instructions the existing system inspection will not be conducted and an additional fee of \$50.00 is required before the inspection will be rescheduled.

Signature \_\_\_\_\_ Date \_\_\_\_\_