



Environmental Health Services – Onsite Water Protection

Carteret County Health Department

3820 Bridges Street, Suite A

Morehead City, NC 28557

Phone (252) 728-8499 Fax (252) 222-7753

Office Hours are 8:00am to 5:00pm,

Monday through Friday



Website: www.carteretcountync.gov/139/Environmental-Health

Email: EHcustomerservice@carteretcountync.gov

The application must be filled out completely and accompanied with the appropriate fee before services can be initiated. Completion of the application does not imply or guarantee any permit will be issued or an authorization granted. Please be sure all the information is correct as the information you provide will guide the staff in the evaluation and permitting of your property. If you change your plans after the permit is issued, a new application and fees will be required, so please be sure the information given is correct. Any permit may be suspended or revoked if the information is falsified, incorrect or if the site is altered after the permit/authorization is issued.

In the interest of processing your permit application as smoothly and quickly as possible, we ask that you:

- Make sure that you have submitted an accurate site plan (preferably to scale) that shows ALL proposed improvements to your lot. This includes:
 - Existing and proposed property lines with dimensions.
 - Location of existing and proposed structures showing setbacks, wells, driveways, etc.
 - Location of surface waters.
 - Your preferred site for the septic system and well. If your designated area is not suitable, one will be assigned, if available, by the CCHD staff performing the evaluation.
 - Please stake out any structures, additions, or future improvements on the ground. If you need wire flags for this, we have some available for you.
 - Make sure that property lines and property corners are clearly marked and that the site is accessible for a full evaluation. If we are unable to verify property line locations, it will be necessary for the property to be surveyed before a determination can be made.
 - When vegetation is too thick to permit movement through the site or observation of the topography, the area will need to be “bush-hogged” or thinned out. Be careful not to grade or excavate potential areas, as it is possible to damage sites beyond use. After the site is permitted, do not allow any disturbance of the area designated for the drainfield.
- You may need to provide backhoe pits in the following cases:
 - Evaluation of tracts for proposed subdivisions and large design flows,
 - Sites where existing fill is prevalent, or
 - Whenever deemed necessary by the Environmental Health Specialist.
- Proposed subdivision applications must include:
 - A stamped, surveyed plat with a scale no smaller than 1”=100’ and shall include all dimensions, roadways, utility and/or drainage easements, existing and proposed storm water controls, proposed minimum building setbacks and location of proposed waterlines or community wells, wetlands and mean high water marks (if applicable).
 - A set of storm water plans accepted by NCDEQ-DWR for review for final approval.
 - Surveyed, staked and numbered lots.

Applications must include the property owner's information. Property owners may designate an agent to represent them by completing the owner's statement which is included with the application package or a similar owner's authorization. Real Estate Agents or other agents contracted to act as property representatives must provide a copy of the signed contract verifying owner has acknowledged the agents representation of the property on the application.

Applications will be returned after sixty (60) days if Carteret County Environmental Health has not been notified that the site is staked and accessible. A re-inspection fee of thirty (30) dollars is required if the lot is not properly cleared and/or staked. Fees paid with applications are forfeited when the application is returned to the applicant or agent. Fees are non-refundable once site visit is initiated or already rendered.

An application for septic or well evaluation or a wastewater or well permit does NOT grant approval for development. It is the owners/agent/applicants responsibility to contact other permitting agencies to determine if the proposed development is allowed or if other permitting requirements are applicable.

This information is designed to outline the different agencies you may need to contact prior to any land disturbance or development.

<u>Local Jurisdiction</u>	<u>Address-Town Hall</u>	<u>Phone Number</u>
Atlantic Beach	125 W. Fort Macon Road	(252) 726-4456
Beaufort	701 Front Street	(252) 728-2141
Bogue	121 Chimney Branch Road	(252) 393-3055
Cape Carteret	102 Dolphin Street	(252) 393-7901
Carteret County Planning/Inspections	402 Broad St, Beaufort	(252) 728-8497
County Inspections/Western office	701 Cedar Point Blvd, Cedar Point	(252) 222-5833
Cedar Point	427 Sherwood Avenue	(252) 393-2753
Emerald Isle	7500 Emerald Drive	(252) 354-3338
Indian Beach	1400 Salter Path Road	(252) 247-3344
Morehead City	706 Arendell Street	(252) 726-6848 ext.125
Newport	200 Howard Boulevard	(252) 223-3733
Peletier	1603 Hwy 58	(252) 393-8666
Pine Knoll Shores	100 Municipal Circle	(252) 247-4353

Website for NC Government Agencies: <http://portal.ncdenr.org/web/guest>

Division of Coastal Management – 400 Commerce Avenue, Morehead City, NC, (252) 808-2808. Contact if any land disturbance or proposed coastal development.

CAMA handbook: http://portal.ncdenr.org/c/document_library/get_file?uuid=bda7e013-846e-488c-a9c2-3848b80658cd&groupId=38319

NC Department of Environmental Quality (NCDEQ), Energy, Mineral and Land Resources – Land Quality Division, Wilmington, NC, (910) 796-7215 or Raleigh, NC, (919) 707-9220. Land Quality Section Regulates and provides technical assistance related to mining, dams, sediment and erosion control and stormwater management. Contact if disturbing more than one acre of land or proposing subdivision drainage systems.

US Army Corps of Engineers (USACOE) – 404 Wetlands & Dredging, Wilmington, NC, (910) 251-4811. Contact if you are unsure if you have wetlands on the property or if you are disturbing land within wetlands or proposing dredging.

Fee Received _____
Check# _____ or Cash
Date Received _____
Received By: _____

CARTERET COUNTY HEALTH DEPARTMENT
3820 Bridges St. Morehead City, NC 28557
Phone: 252-728-8499 Fax: 252-222-7753
APPLICATION

Area _____
Priority _____
Date Staked _____ Staff Initial _____

Improvement Permit, Construction Authorization, and/or Well Permit

IF INFORMATION IS FALSIFIED, CHANGED OR SITE IS ALTERED, THE IMPROVEMENT PERMIT AND/OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. PERMIT IS VALID FOR 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED.

Permit Request Section

Type of Application(s): Mark all that apply

Parcel ID: _____

____ **Single Family:** (____ house _____ MH) _____ #Bedrooms _____ #Occupants _____ Sq.Ft.

____ **Multi-Family:** _____ # Buildings _____ Units/Building _____ #Bedrooms/Unit _____ #Occupants/Bdrm.

____ **Non-Residential:** describe _____ (see supplement to application)

Information required: _____

____ **Tap-In** (describe) _____

____ **Drinking Water Well** (required prior to C.A. when not connecting to a public water supply)

____ **Irrigation** (with new construction)

Improvement Permit: (New Construction or Expansion) (This is an evaluation of the soil for a septic system)

____ 5 years: Site plan only (Improvement Permit valid for 5 years from issue date)

____ Indefinite: Plat required showing proposed structures and appurtenances, and proposed system and repair or

Subdivision map with scaled site plan (Improvement Permit valid without expiration)

Authorization to Construct: Indicate order of desired system type or requested system type:

(This Authorization is needed to obtain a building permit and install a septic system)

New C.A. ____ Conventional (Includes Accepted Systems) ____ Alternative ____ Innovative ____ Other

Existing C.A. ____ Site re-visit to re-issue or modify a valid Construction Authorization

General Information

Owner

Name: First _____ Last _____

Mailing Address _____

City _____ State _____ Zip _____

Phone: Home _____ Work _____ Mobile _____ Fax _____

Email _____ Organization _____

Applicant If same as owner: ____ Yes

If no, complete this section and provide owners statement.

Name: First _____ Last _____

Mailing Address _____

City _____ State _____ Zip _____

Phone: Home _____ Work _____ Mobile _____ Fax _____

Email _____ Organization _____

Site Specific Information

Parcel Address: _____ City: _____

Subdivision: _____ Existing ____ *New ____

Lot _____ Phase _____ Section _____ Block _____ # of Acres _____

*Proposed Subdivision: Concept plan or a plat, prepared by a surveyor, and storm water plans that have been submitted to and accepted by NCDEQ-DWR for final approval must be submitted with applications.

Initial _____ Date _____

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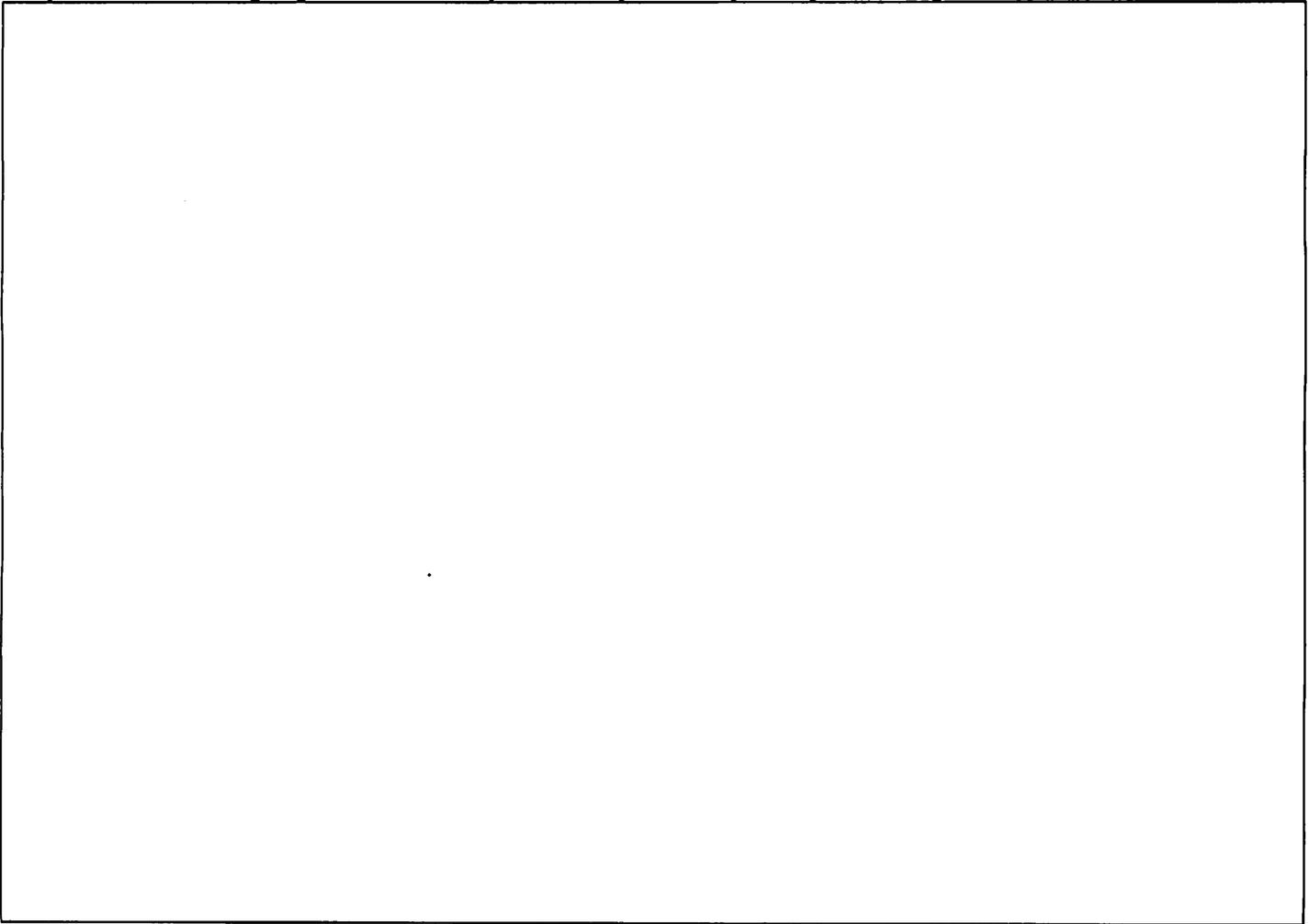
APPLICATION

Improvement Permit, Construction Authorization, and/or Well Permit

Owner _____

Parcel ID: _____

Site Sketch: Provide an accurate diagram of property with dimensions, proposed building location with dimensions and setbacks to two property lines, proposed or existing wastewater system location, existing or proposed water source location(s), bordering roads, driveways and parking area, wetlands, ditches and water bodies, and any other features that may be relative to designing the wastewater system. (A separate site plan or plat showing above details may be attached)



(Initial) Property is staked _____ Applicant will call when property is staked _____

A re-inspection fee of \$30 is required if the lot is not accessible and/or staked.

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Signature Section

The site evaluation is performed based on the information contained in this application. Any changes to the site or soil conditions, the property lines, the proposed use, the proposed design waste flow or characteristics shall be cause to revoke the Improvement Permit. **I have read this application and certify 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 staking of all property lines and corners and making the site accessible so a complete site evaluation can be performed.*

Property Owner's signature or authorized agent (REQUIRED)

Date

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APPLICATION

Improvement Permit, Construction Authorization, and/or Well Permit

Parcel ID: _____

Project Information

New Construction Expansion Change of Use Permit Revision

Guesthouse/Apartment/Above Garage Living Unit (describe) _____

Additional Information: _____

Type Water Supply: Private Well Shared Well Public Community

P=Proposed E= Existing

Foundation: Crawlspace Slab

Easements Right of Ways

Water lines

Grading or soil removal

Garbage grinder

Swimming pool: in ground above ground

Buried Utility Lines

Basement: plumbing w/o plumbing

Additional structures on property

Applicant must inform Local Health Department if any of the following apply and attach supporting documentation (if applicable). Check all that apply:

Previous permit evaluation or denial

Zoning approval

Wastewater, other than domestic

Existing well on property

Site subject to approval by other public agency

Existing septic tank system

Designated wetlands

Stump holes/buried debris

Any proposed development must be reviewed by the local jurisdiction for compliance with local ordinances and regulations. Additionally, you must consult with any state or federal agency with jurisdiction over the proposed development.

Initial _____ Date _____

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OWNER'S STATEMENT

TO: The Environmental Health Division

SUBJECT: Authorization for Representation as Agent for Owner and Permission to Access Property

I, _____ (print), hereby authorize _____ (print) to act as my agent in the process of application for an on-site wastewater system permit or a water well permit for the property listed below:

(Real Estate Agents or other agents contracted to act as property representatives shall provide a copy of the signed contract verifying owner has acknowledged their representation of below property).

Location: _____ **PIDN #** _____

In addition to the above, the Environmental Health Division has my permission to access the above listed property.

Should you need additional information, please contact:

Owner's Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____

Email: _____

Owner's Signature: _____ **Date:** _____

