

**Nash County Health Department
Application for
Improvement Permit and/or Authorization to Construct
(Required Fields in Bold)**

___ **Improvement Permit** ___ **Authorization to Construct (seeking building permit)** **Email:** _____

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	Complete Address	Home & Work Phone
Owner (If Different)	Complete Address (If Different)	Home & Work Phone

PROPERTY INFORMATION

Township: _____ **Tax Map Number/ParID:** _____

Street Address (If Different)	Subdivision Name	Section/Phase/Lot#
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Directions to Site if 911 address is not posted: _____

TYPE OF BUILDING: Site/Stick Built House Mobile Home: SWMH / DWMH Modular House Other
(circle one)

DEVELOPMENT INFORMATION

Specifications

- | | |
|---|---|
| <input type="checkbox"/> New Subsurface Disposal System (\$300.00) | <input type="checkbox"/> Repair to Existing Subsurface Sewage Disposal System (No Charge) |
| <input type="checkbox"/> Permit Revision* (\$50.00 septic system not installed) | <input type="checkbox"/> Engineered Option Permit (EOP) (\$35.00) |
| <input type="checkbox"/> (Voluntary Relinquishment of Administrative Appeal Rights.) | <input type="checkbox"/> Authorized On-site Wastewater Evaluator (AOWE a1) (\$35.00) |
| <input type="checkbox"/> Upgrade, Expansion, Relocation of Existing System (\$100.00) | <input type="checkbox"/> Authorized On-site Wastewater Evaluator (AOWE a2) (\$120.00) |
| <input type="checkbox"/> Permit Extension (\$100.00) (Original Permit #: _____) | |

Details (answer all that apply):

Max number of bedrooms: _____ If residential expansion: Current number of bedrooms: _____
Max number of occupants: _____ If non-residential expansion: Current system for: _____
Will there be a basement? yes no
Type of non-residential use: _____ Total Square footage of non-residential: _____
Maximum number of employees: _____ Maximum number of seats: _____ Other: _____

Water Supply: Are there any existing wells, springs, or existing waterlines on this property? yes no
 New well Existing Well Community Well Public Water Other _____

Rank system type(s) by preference: (leave blank if all are acceptable)
____ Alternative ____ Conventional ____ Innovative ____ Modified Conventional ____ Other (specify)

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.

- 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 Does this site contain any existing wastewater systems?

Yes I have read this application and certify that the information provided herein is true, complete and correct. I understand the information on the **front and back** of this application. Authorized county and state officials are granted the right of entry to conduct necessary evaluations and inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper **identification of property lines and corners and making the site accessible so that a complete site evaluation can be performed**. I will relay all information to the appropriate parties.

Property owner or owner's legal representative signature (required)

Date

- **A site plan is required** and must include House (or other structure) location, driveways, parking area, property lines, easements, decks, pools, wells, springs, existing water lines, underground utilities, additional buildings and other land uses. Please include measurements from the structure to property lines. Environmental Health will attempt to accommodate these in the design of the septic system.
- At time of application the most recent recorded map of the property to be evaluated must be provided.
- House or primary structure location must be marked on the property. Location of any other desired improvements (driveways, decks, detached buildings, pools, etc.) property lines, driveway, decks, detached buildings, pools, etc) should also be marked on the property. All property lines must be identified prior to calling for the site evaluation, which may include location of survey irons. If owner/agent cannot mark property lines, then a licensed survey should be hired by owner/agent to identify property lines.
- Nash County Planning/Zoning Department (or any other applicable Planning/Zoning authority) regulations must be met. It is the owner/agent's responsibility to make sure required setbacks are met.
- The site must be made accessible for a complete evaluation. This may require mowing tall weeds in a field or cutting bushes and limbing trees in a forest. If a wooded property is cleared, it is very important not to disturb existing soil or reshape the property in anyway. Clearing with heavy equipment should only be done in dry conditions. Disturbance of soil may cause the property 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.
- Any mistakes in locating structures on property that results in a setback violation may cause structures, septic system and well to be moved at the expense of the owner/agent. If there are concerns about setbacks, we recommend that your planning authority and/or a licensed surveyor be consulted.
- The septic system and any other improvements or conditions shall be installed and maintained as indicated on the permit. This permit shall in no way be taken as a guarantee or implied warranty that this 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.
- Once you have completed the application and prepared the property, call the Environmental Health Specialist (business card provided) between 8:00 and 9:00 a.m. to notify him/her that the property is ready for evaluation.

Permits expire five (5) years from "Improvements Permit Date" located on the bottom of the septic permit

Property owner or owner's legal representative signature (required)

Revised 9/2023

Date