				Department Use Only
Parcel ID#:				Application #:
	(Available at Tax Office)			Application Date:
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Montgomery County Central Permitting **Environmental Health Section**

444 N. Main St., Troy, NC 27371

(910) 572-8175 (office) (910) 576-0043 (fax) **Application for Services** ☐ Improvement Permit ("Perc" test) (5 year expiration) ☐ Improvement Permit LSS/LG Evaluation: The LSS/LG evaluation(s) attached to this application is to be used to issue an Improvement Permit in accordance with G.S. 130A-335(a2) and (a3).) (See fees below) ☐ Improvement Permit (No Expiration) (additional survey required + other requirements) Residential - ☐ MINIMUM - 2 Bedrooms (\$200.00) ☐ 3 Bedrooms (\$300.00) ☐ 4 Bedrooms (\$400.00) Commercial - □ up to 480+gpd(\$500.00 + \$1 per gallon over 480 gallons) ☐ Improvement Permit for Expansion to existing system. (\$150.00) less than 480 gallons (\$200.00) 480 gallons and up or commercial ☐ Authorization for Wastewater System Construction (Expires 5 years from IP date -Needed for building permit and installing **system**) (\$150.00 – no pump or \$200.00 – with pump) ☐ Repair Existing Septic System (\$0.00) (additional paperwork must be completed) **Clearing/underbrushing/backhoe pits may be required. **Mark existing utilities. The Montgomery County Health Department is not responsible for damages. *** Authorization for Wastewater System Construction must be complete prior to issuance of any building permits. Home Phone: Applicant's Name: _____ Mailing Address: Work Phone: Email Address: Owner's Name: Home Phone: Mailing Address: Work Phone: 911 Address / Road Name: Section #: _____ Lot #: ____ Subdivision/Mobile Home Park Name: ______ **Proposed Facility** House ____ Manufactured Home ___ Commercial ___ Other (describe): ___ Number of Occupants: _____ Number of Employees:(businesses only) _____ Number of Bedrooms: ____ *If applying for **expansion**, please indicate number of bedrooms before _____ and after expansion ____ Maximum Dimensions of Residence/Building: ___ Plumbing Fixtures in Basement: Yes __ No __□ Type of Water Supply Private____ (new or existing) Other_____ County/Town Please indicate desired system type: _____ Conventional/Modified Conventional/Accepted _____ Innovative _____ Alternative/Other Please answer the following. If the answer to any question is "yes", applicant must attach supporting documentation. \square Yes \square No Is the site located in any designated 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? **Permits are subject to revocation if the site plan or plat, whichever is applicable, or the intended use changes. I have read this application and certify that the information provided herein is true, complete, and correct to the best of my knowledge, and is given in good faith. I understand that any or all permits applied for or granted shall be void if any of the information is incorrect or false, or if the site is altered. Permission is granted to the Montgomery County Health Department to perform the necessary evaluations and inspections on the property. Owner/Legal Representative

Date

Montgomery County Central Permitting

Environmental Health Section 444 N. Main St., Troy, NC 27371 (910) 572-8175 (office) (910) 576-0043 (fax)

PREPARING YOUR PROPERTY FOR EVALUATION

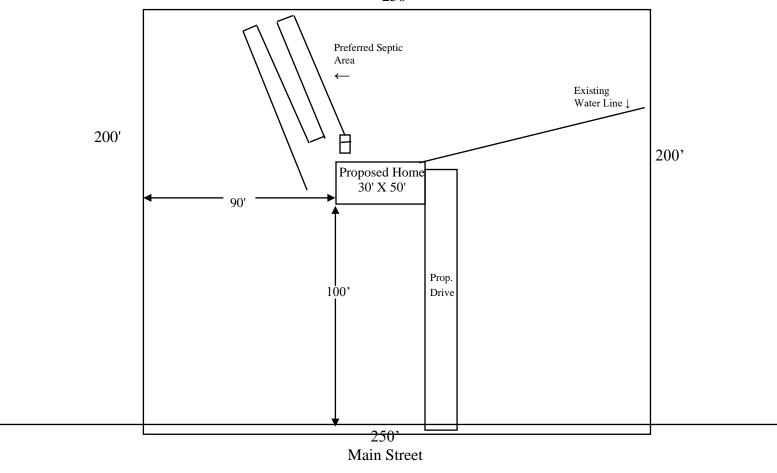
- 1. Obtain appropriate permits and information regarding setbacks from the planning/zoning authority having jurisdiction over the property.
- 2. Complete the enclosed application. Missing information will result in a delay in processing.
- 3. Include a survey plat of the property showing all property dimensions. This can be obtained from the Register of Deeds Office. If a plat is not available, a copy of the tax map can be obtained at the Montgomery County Tax Office. Your plat or tax map must indicate the location and dimensions of proposed structures. Indicate all proposed structures, planning for both short and long term development. Indicate preferred location of driveways, parking, and waterlines. You must indicate where you would prefer to locate your septic system.
- 4. The plat must indicate the locations of existing wells, septic systems, residences, easements/right of ways, wetlands, and utilities.
- 5. Prepare the property by flagging all permanent corner markers. If applying for an Improvement Permit only, wooden stakes may be used. However, the permanent corner markers must be located and flagged prior to the issuance of the Construction Authorization.
- **6.** Mark the property lines with surveying ribbon at minimum intervals of 50 feet so they are clearly visible.
- 7. Stake all proposed structures with wooden stakes. These stakes should be at least three feet high. All structures such as outbuildings, swimming pools, etc., <u>must</u> be staked and identified. Structures staked in the field must match structures indicated on the site plan.
- **8.** Mark any existing utility lines (phone, electric, water, underground irrigation) on the property. The Health Department is not responsible for damages.
- **9.** Place the sign provided by our department at the property.
- 10. Up to two (2) acres will be looked at per application. If the first two acres is denied an Improvement Permit, the applicant may reapply for our Department to evaluate another 2 acres for another application fee. This process may be repeated until a site is found.
- 11. If applying for Improvement Permit for an expansion or a repair, place a stake at the septic tank location. Tank location must be able to be verified.
- 12. Return application along with appropriate fee to:

Montgomery County Health Department Environmental Health 444 North Main St. Troy, NC 27371

****Applications may not be submitted until all of the above items have been completed and the property is ready to be evaluated. A \$50.00 re-visit fee is required on lots that have not been prepared in accordance with the specifications outlined above. Applications must be processed to a final decision within one year of the submittal date. If after one ye the application process has not been completed, a new fee must be submitted before any additional work can be conducted.

SAMPLE SITE PLAN

250'



SITE PLAN CHECKLIST

Submit a surveyed plat/tax map of the property and a site plan with the following (initial each which applies):

eden which applies).
The dimensions of the property.
The proposed location of all structures (e.g., facility, wells, water lines, outbuildings, pools, etc.), with distances from the road and the side property line to all structures. Give dimensions for all
the structures
The location of any existing utility lines on the property. If there are none, write "N/A."
The extent of areas to be graded.
The preferred septic system location.
The preferred driveway location, and parking areas.
The proposed well location, water meter location, and proposed water lines.
A north arrow or other sufficient directional indicator.
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."
The location of any easements or rights of way on the property. If there are none, circle "N/A."
The location of any designated wetlands on the property. If there are none, circle "N/A."