

ON-SITE WASTEWATER SYSTEM APPLICATION

IMPROVEMENT PERMIT

Pamlico County Health Department
Division Environmental Health
PO Box 306
Bayboro, NC 28515
252-745-5634 Fax: 252-745-7684

- [X] New/Renewal
[] Flow Addition
[] Redesign
[] Existing
[] Repair

Map # K051-2 site 2
Application Date: 5/22/06
Fee:
Receipt #:
Appointment []

Applicant FURNAN C Gibbs Home Phone 745-4896

Current Address PO BOX 412 101500/MSF Work Phone

City/State/Zip Bayboro NC 28515 Fax

Mailing Address PO BOX 412 City/State/Zip Bayboro NC 28515

Owner Home Phone

Current Address Work Phone

City/State/Zip Fax

Subdivision Phase Lot 1 B Parcel Size (acres)

Residence: (check one) House [X] Manufactured Home Other (describe)

Number of Bedrooms 3 Number of Occupants Square Footage

A SITE PLAN MUST BE SUBMITTED WITH THE APPLICATION. It must show 1. Proposed Facility, 2. Desired Wastewater System Site, 3. Utilities (water & electric), 4. Any surface waters, marsh, etc. (AERIAL PHOTOGRAPHS NOT ACCEPTABLE)

[] Site Plan Provided - Drawing prepared by owner - 5 year permit

I understand that a site plan will be required prior to the issuance of an A/C. initial

Emergency 911 Address: (For the lot to be evaluated) OSWALD BRINSON Rd

REQUIRED BY ART. 9 SEC. 8 OF PAMLICO COUNTY ROAD NAMING & ADDRESSING ORDINANCE: No Health Improvement or Sewer Permit shall be issued prior to an address being assigned by the address administrator.

Specific Directions to property required for site evaluation:

Bell Point Rd - Left on OSWALD BRINSON Rd

Please check the following questions regarding the property to be evaluated:

- YES NO
[] [X] Will water other than sewage be generated? (Environmental Health)
[] [X] Is property in a sewer district? (Bay River Sewer)
[X] [] Is the site subject to approval by other agencies? (CAMA, DWQ, Etc.)
[X] [] Are there designated wetlands? (Army Corps of Engineers)
[] [X] Are there any existing wastewater systems?
[X] [] Are there any easements or rights of ways?
[X] [] Are there any wells, springs, ponds, or creeks? (Owner MUST locate any well within 100ft)
[X] [] Is there access to county water system? (Water Dept.)

If you answered Yes to any of these questions, please show their location on the plat or site plan.

AREA MUST BE ACCESSIBLE, PROPERTY IDENTIFIED (IE. LOT NUMBER OR 911 ADDRESS NUMBER AT ROAD FRONT), AND MARKED WITH IDENTIFIABLE CORNERS IN ORDER TO PERFORM THE EVALUATION OR THE APPLICATION WILL NOT BE PROCESSED. A REVISIT FEE OF \$50.00 WILL INCURRED IF THE LOT IS NOT READY FOR EVALUATION. _____ initial/date

If your property is not marked and ready at the time the application is submitted, your application will go in a waiting file until YOU CALL and say that your lot is ready for evaluation. (_____ initial/date when ready for evaluation)

The undersigned person hereby agrees that he/she has read this application. It is understood that any permits issued hereafter are subject to suspension or revocation if the site plan or the intended use of property changes or if information submitted in this application is falsified or changed. By signing the application, the property owner authorizes Pamlico County Health Department personnel to go onto said property to perform the lot inspection.

****Incomplete applications will not be processed.**

Applicant Furman C. Debbis Witness Vanessa Harkness
No. of Attachments _____ Note: You must pay for an Authorization to Construct before a septic system can be installed.

If you do not have a survey with a site plan, in the space below please draw a site plan showing the proposed home site, driveway, location of surface waters, and water line/well.

