

**Environmental Health Section**  
 Phone: (828) 694-6060 Fax: (828) 697-4523  
**Application for On-Site Wastewater System**  
**Application for Private Drinking Water Well**

<u>Owner</u>	<u>Mailing Address</u>	<u>Phone/Fax Number(s)</u>
<u>Applicant / Contact / Agent</u>	<u>Certification Type &amp; Number (if applicable)</u>	<u>Phone/Fax Number(s)</u>
<u>Parcel ID Number</u>	<u>Lot Size (acres)</u>	<u>Date Recorded</u>
<u>Street Address of Site</u>	<u>Subdivision Name</u>	<u>Lot Number</u>

Directions to Site: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Existing Water Supplies:  Spring  Single-Family Well  Shared Well  Regulated Facility Well (.1700 Rules)  Community/City  None

I am applying for an On-Site Wastewater System

New Non-Residential System

Purpose of Structure: \_\_\_\_\_

Number of Employees/Seating: \_\_\_\_\_

Square Footage of Structure: \_\_\_\_\_

New Residential System

Number of bedrooms: \_\_\_\_\_

Basement?  Yes  No Basement Plumbing?  Yes  No

Date Property Recorded: \_\_\_\_\_

Expansion of Existing System

Number of bedrooms to add: \_\_\_\_\_

(Please attach existing permit)

Repair to Malfunctioning System

Nature of failure: \_\_\_\_\_

(Please attach existing permit)

Preferred Drainfield Type: \_\_\_\_\_

I am applying for a NEW Private Drinking Water Well

I am applying for REPAIR of a Private Drinking Water Well

I am applying for ABANDONMENT of Private Drinking Water Well

Please Select Type of Private Drinking Water Well:

Single Family PDW Well (Serving one home)

Shared PDW Well (Serving more than 1 home)

PDW Well for Regulated Facility (ie: Restaurant)  
 (15A NCAC 18A .1700 Rules)

Irrigation only: \_\_\_\_\_

My Existing Water Supply is Dry

Comments: \_\_\_\_\_

**Please Select all that Apply:**

If the answer to any question is "yes", applicant must attach any existing supporting documentation.

Yes  No Are there any known landfills within 500 feet or waste storage within 100 feet of this property?

Yes  No Does the site contain any existing wastewater systems?

Yes  No Is any wastewater, other than domestic sewage, going to be generated on site? (Septic only)

Yes  No Are there any wells, springs or water lines on this property?

Yes  No Does the site contain any Army Corps of Engineers delineated jurisdictional wetlands? (Septic only)

Yes  No Is the site within a floodway or floodplain?

Yes  No Does the site contain any fertilizer, pesticide, herbicide, other chemical storage, or petroleum fuel storage?

Yes  No Are there any easements or right of ways on the property?

*I have read this application and certify that the information provided herein is true, complete and correct. If the information in this application is falsified, changed, or the site is altered, the permit shall become invalid. 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 clearing and proper identification and labeling of all property lines and corners marked. The site will be made accessible so that a complete site evaluation can be performed.*

*Note: Issuance of permit by Environmental Health does not guarantee or imply approval of future permit applications by this or any other agency.*

\_\_\_\_\_  
**Signature of property owner or legal representative (required)** **Date**  
 Must provide documentation to support claim as owner's legal representative