Henderson County
Department of Public Health
Environmental Health

1200 Spartanburg Highway, Suite 100
Hendersonville, NC 28792
Phone: (828) 694-6060
Fax: (828) 697-4523

IMPROVEMENT PERMIT AND/OR CONSTRUCTION AUTHORIZATION APPLICATION

☐ Improvement Permit ☐ Construction Authorization

Applicant Contact Information

Name: _____
Mailing Address: _____
_____
Phone #: _____
Email: _____

Owner Contact Information

Name: _____
Mailing Address: _____
_____
Phone #: _____
Email: _____

Property Address: _____
PIN/Lot Identifier: _____ Property Acreage: _____ Date Parcel Originally Deeded & Recorded: _____
Subdivision (*if applicable*): _____ Lot #: _____ Block: _____ Section: _____

Directions to property: _____
_____

Type of Wastewater System Permit Requested: ☐ New ☐ Expansion ☐ System Relocation ☐ Change of Use ☐ Repair
Project Description: _____
Facility Type (House, Restaurant, Office, etc.): _____
Number of Bedrooms: _____ Number of Occupants: _____ Other (Employees, Seats, etc.): _____
Basement? ☐ Yes ☐ No Basement Fixtures? ☐ Yes ☐ No
Crawl Space? ☐ Yes ☐ No Slab Foundation? ☐ Yes ☐ No
Is a grinder pump proposed before the septic tank? ☐ Yes ☐ No
Type of Water Supply: ☐ Private well ☐ Public well ☐ Shared well ☐ Municipal Supply ☐ Spring ☐ Other: _____
Are there any existing wells, springs, or waterlines on this property? ☐ Yes ☐ No
Desired wastewater system type: ☐ Any ☐ Accepted ☐ Conventional ☐ Innovative ☐ Other: _____

If the answer to any of the following questions is "yes," the applicant must attach supporting documentation.

☐ Yes ☐ No Does the site contain any previously identified 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 agencies?
☐ Yes ☐ No Are there any easements or right of ways on this property?

☐ I acknowledge that pursuant to 15A NCAC 18E .0202 (d) – pending applications will expire after 12 months with no action by the applicant. There will be no refunds for expired applications.

I have read this application and certify that 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 labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed. ***I understand that if the information in the application is falsified, changed, or the site is altered, then the Improvement Permit and/or Construction Authorization shall be invalid. I understand that the permit is valid for either 60 months or without expiration depending upon documentation submitted****. (complete site plan = 60 months; complete plat = without expiration)*

_____ _____ _____ _____
Property owner's signature (required) Date Applicant's signature (required) Date

Must provide documentation to support claim as owner's legal representative.