



Henderson County Environmental Health Department

Steven E. Smith, MPA, Health Director | Seth Swift, Environmental Health Supervisor

1200 Spartanburg Highway, Suite 100, Hendersonville, NC 28792

Main Phone: (828) 694-6060 | Environmental Health FAX: (828) 697-4523

IMPROVEMENT PERMIT AND/OR CONSTRUCTION AUTHORIZATION APPLICATION

Improvement Permit

Construction Authorization

Applicant: _____
 Mailing Address: _____

 Phone #: _____
 Email: _____

Owner: _____
 Mailing Address: _____

 Phone #: _____
 Email: _____

PIN/Lot Identifier: _____ Property Acreage: _____

Date Parcel Originally Deeded and Recorded: _____

Property Address: _____

Subdivision (if applicable) _____ Lot #: _____ Block: _____ Section: _____

Directions to property: _____

Wastewater System Request: New Expansion System Relocation Change of Use Repair

Please describe your project: _____

Facility Type (House, Restaurant, Office, etc.): _____

Number of bedrooms: _____ Number of Occupants: _____ Other: _____

Number of seats: _____ Number of Employees: _____ Other: _____

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 existing waterlines on this property? Yes No

If applying for a Construction Authorization, please indicate desired system type(s):

Accepted Conventional Innovative Other _____ Any

If the answer to any of the following questions 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?

I acknowledge that pursuant to 15A NCAC 18E .0202 (c) – that the application for the IP, CA, or existing system authorization will expire after 12 months with no action by the applicant. There will be no refunds for applications which expire.

*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.**

SITE PLAN

Please include on this site plan:

- dimensions of the property;
- existing and proposed facilities, structures, appurtenances, and wastewater systems;
- proposed wastewater system showing setbacks to property line(s) or other fixed reference point(s);
- existing and proposed vehicular traffic areas;
- existing and proposed water supplies, wells, springs, and water lines; and
- surface water, drainage features, and all existing and proposed artificial drainage, as applicable;

