



PLEASE TAKE AN APPLICATION TO SUBMIT THAT APPLICATION:

- **BRING TO THE ENVIRONMENTAL HEALTH OFFICE
LOCATED IN THE COUNTY OFFICE BUILDING-
3RD FLOOR ROOM 308**
- **FAX THE APPLICATION TO: 336-651-7562**
- **SUBMIT APPLICATION THROUGH PUBLIC PORTAL
LOCATED ON WEBSITE: Wilkeshealth.com**
 - **EMAIL THE APPLICATION TO:
WILKESEH@WILKESCOUNTY.NET**
- **DROP IT IN THE DROP BOX LOCATED AT THE FRONT
DOOR OF THE COUNTY OFFICE BUILDING**
- **MAIL THE APPLICATION WITH PAYMENT TO:
WILKES COUNTY HEALTH DEPARTMENT
306 College Street
Wilkesboro, NC 28697**

**YOU MAY MAIL IN YOUR PAYMENT PAYABLE TO
WILKES COUNTY ENVIRONMENTAL HEALTH,
OR YOU MAY CALL IN YOUR PAYMENT TO:
336-651-7530**

please note that all card transactions will have a 3.5% service fee



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INSTRUCTIONS FOR APPLICATION

- Contact Planning and Zoning at (336) 651-7350 to ensure compliance with all regulations and requirements.**
- Submit a map of the property with property line dimensions and a directional arrow.** (If the property is in the jurisdiction of the town of Wilkesboro or North Wilkesboro or Ronda, please check with the town, you may also need Zoning and Watershed permits from the town. If you have recently purchased the property and your name is not shown as the owner in the Wilkes County GIS system please provide a copy your deed to provide proof of ownership)
- Follow the instructions you have been provided to prepare your site.
- Draw your site plan and submit your drawing with the completed application.
- If applying for repair of an existing septic system: Complete the Homeowner Questionnaire, Best Professional Judgment Form, and submit with your application.
- If applying for a church or business: Complete a Fact Sheet and Letter of Intent and submit with your application.

Turn in the application packet and all the required forms. ***Incomplete applications will not be accepted.*** A fee will be collected when you submit the application. A receipt and a copy of the application will be provided.

Contact (336) 651-7530 if you have questions regarding the application or fee schedule.

IMPORTANT NOTICES

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE:

If you wish to sign forms and are not the owner of the property; or if you own the property and want someone else to sign the necessary forms, see the Document to Authorize an Owner's Legal Representative form included.

1080 ELEVATION RULE:

The U. S. Army Corps of Engineers has determined that no structure (house, septic tank, septic nitrification field, lines, well, etc.) can be located below the elevation of 1080 feet for W. K. Scott Dam and Reservoir, applicant will need to contact the U. S. Army Corps of Engineers to determine whether or not the "1080 Elevation Rule" applies to their property,

SITE PREPARATION AND SITE PLAN DRAWING:

Applicants are responsible for preparing the site for the evaluation and for drawing the site plan (if required). Do not draw your site plan on the map you are submitting. Grading, excavation, or clearing with heavy equipment may remove or compact the soil required for septic systems and therefore is not recommended prior to evaluation.

REVISIT FEE:

An incomplete evaluation could result if any of the following apply when a representative of this department makes a site visit.

- The site was not prepared as specified (i.e. property lines not flagged, etc.).
- There is insufficient area clear enough to evaluate.
- Another area within the designated two acre area needs to be evaluated but is not cleared or was inaccessible during the initial visit.

If Property is Located in a Subdivision

Subdivision Evaluations

Subdivision lots will be evaluated by Wilkes County Environmental Health Specialists when the following conditions are met, along with the filing of an application for a new wastewater system. Site preparation as specified in the new system application packet including:

- Site plan must be to scale (1 inch equals no less than 60 feet).
- All property corners (irons, monuments, etc.) must be set by a licensed surveyor (i.e. no prospective or hypothetical property lines). Any material change to the site (house site moved, driveway moved, etc.) will require a new application to be filed for all affected lots.
- Proposed drainfield and repair area must be flagged on contour and a minimum of 3 pits must be dug within this area. The pits must be spaced to provide a representative sample of the soil within the area. The pits must be excavated to a depth specified by the Environmental Health Specialist, and a step must be provided to allow the EHS to safely enter and exit the pit. It shall be the responsibility of the applicant to keep pits accessible until the evaluation is completed.
- Drainfield area, house site, and path from house site to drainfield area must be cleared of undergrowth, fallen trees, etc. There must be a clear line of sight from drainfield area to a property iron or monument. If there is no iron or monument within 100 feet of the drainfield, a reference corner must be set by a licensed surveyor.
- Lot numbers must be clearly posted on each lot.
- Applicant must provide directions (road names and mileage) from subdivision entrance to each lot. Each application shall contain this information.



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IMPROVEMENT PERMIT AND/OR CONSTRUCTION AUTHORIZATION APPLICATION

Improvement Permit

Construction Authorization

Owner: _____
Mailing Address: _____

City: _____
State: _____ Zip: _____
Phone #: _____
Email: _____

Applicant: _____
Mailing Address: _____

City: _____
State: _____ Zip: _____
Phone #: _____
Email: _____

Parcel number: _____ 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

Pits Required: REHS to flag location of pits Contractor will call to schedule pit excavation

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 Garbage Disposal? Yes No

Is a grinder pump proposed before the septic tank? Yes No

Type of Water Supply: Private 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



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

- | | | |
|------------------------------|-----------------------------|---|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Does the site contain any jurisdictional wetlands? |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Is any wastewater going to be generated on the site other than domestic sewage? |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Is the site subject to approval by any other public agency? |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Is the site subject to the 1080 line identified by Corps of Engineers for W. Kerr Scott Dam? |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Are there any easements or right of ways on this property? |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Has 811 been contacted and identified any underground utilities on the property? If yes, please list: |

The permit is valid for either 60 months or without expiration depending upon documentation submitted. (complete site plan = 60 months; complete plat = without expiration).

I _____ as property owner/applicant have determined compliance with all applicable laws and rules with the planning and zoning department necessary for this application.

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE PERMITS SHALL BECOME INVALID.

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 evaluations and 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 complex site evaluation can be performed.

Signature of Owner, Owner’s Authorized Agent, or Legal Representative

Date

MUST PROVIDE DOCUMENTATION TO SUPPORT CLAIM AS OWNER.

OFFICE HOURS ARE 8:30 AM THROUGH 5:00 PM, MONDAY THROUGH FRIDAY. APPLICATIONS ARE TAKEN BETWEEN THE HOURS OF 8:30 AM AND 4:30 PM.

THIS APPLICATION AND FEES PAID WILL BE VALID FOR A PERIOD OF TWELVE MONTHS FROM DATE OF RECEIPT. IF ONE WISHES TO REAPPLY AFTER 12 MONTHS, A NEW APPLICATION AND FEE MUST BE SUBMITTED. AFTER A PERMIT IS ISSUED A REFUND WILL NOT BE GRANTED.

A REVISIT FEE OF \$125.00 WILL BE CHARGED TO EVALUATE SITES NOT PREPARED AS SPECIFIED ON INSTRUCTION SHEET. PLEASE PREPARE YOUR SITE PLAN ACCORDING TO INSTRUCTIONS BEFORE MAKING AN APPOINTMENT WITH AN ENVIRONMENTAL HEALTH SPECIALIST TO EVALUATE YOUR SITE. ****



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DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

Applications for permits require the "signature of the owner or owner's legal representative" (15A NCAC 18A .1937). If the owner does not sign the application himself or herself, they can submit any one of the following documents to designate their legal representative:

1. Power of Attorney
2. Real Estate Contract
3. Estate executor
4. Bankruptcy trustee
5. Court ordered guardianship

In the absence of the above documentation, the property owner may provide the local health department with documentation that designates a legal representative. A property owner may:

1. Complete this form to document his or her legal representative, or
2. Provide his or her own form that contains the information in this form.

If there are multiple property owners, then all property owners must sign the form that designates a legal representative.

By signing a form that designates a legal representative for purposes of 15A NCAC 18A .1937, the property owner authorizes that representative to act on their behalf in matters pertaining to the application and permitting process, including signing or receiving any application, document or permit. The owner retains full responsibility to meet all permit conditions specified by the local health department.

I, _____, am the legal owner(s) of the property located at _____, identified as (Parcel Identification Number) _____, located in Wilkes County, North Carolina.

I do hereby authorize (print legal representative/company name) _____, _____, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

- Application for Improvement Permit (IP) / Authorization to Construct (AC)
- Improvement Permit (IP) / Authorization to Construct (AC)
- Application for soil-site evaluation (new/repair)
- Application/permit for private drinking water well/well abandonment
- Application for Compliance Inspection

I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Wilkes County Department of Public Health, Environmental Health Division.

Signature of Owner(s)

Date

Signature of Witness

Date



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SEPTIC SITE PLAN DRAWING INSTRUCTIONS

(This form is required for new septic systems only.)

Do not draw your site plan on the map you are submitting.

NOTE: Our Environmental Health Specialists try to position septic tank and tail lines in area you choose. This is why we have you designate this on your site plan. However, if area chosen is not suitable, an alternate area within the two acre site will be evaluated for the septic system.

Your site plan drawing should include all the following items that apply to your site:

- The dimensions of the prepared site.
- The dimensions of the home (including deck) and the preferred location.
- The proposed septic system location.
- The proposed well location.
- The proposed driveway location.
- The reference point.
- The proposed location of any structures or improvements to property, such as (garages, workshops, pools, etc.).
- The location of any existing wells or septic tank systems (including repair area) on your property and on adjoining property within 100' of the site to be evaluated.
- The location of any easements or rights of way on the property.
- The location of any streams, rivers, ponds, etc. on the property.
- The location of any designated wetlands on the property.
- If grading has been done or is to be done, fill material, or where fill material is to be placed is indicated on the drawing.
- **Is your property larger than 2 acres?** Draw the site boundaries and property lines you have flagged on your site plan (see site preparation instructions for new septic systems) and indicate the distance of the site boundaries to the nearest property lines. Also draw an asterisk "*" on the map you are submitting to indicate the location of your site.
- **If applying for a well and septic permit, only one site plan drawing is necessary but must include any items from the septic and well site plan drawing instructions that apply to your site.**
- Directional arrow (North)

By signing this you certify that you have read the above and all that apply are included on your site plan drawing, and accurate measurements have been taken.

Signature of Owner, Owner's Authorized Agent, or Legal Representative

Date



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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;



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WILKES COUNTY HEALTH DEPARTMENT Promoting health and preventing disease in our community.

ENVIRONMENTAL HEALTH DEPARTMENT FEE SCHEDULE

WASTEWATER SYSTEMS – NEW Septic System \$1.25/gallon/day

CURRENT

SYSTEMS UP TO 480 GALLONS PER DAY...(1-4 BDR).....	\$150-600
SYSTEMS 481 TO 900 GALLONS PER DAY ..(5-7 BDR).....	\$750-1,050
SYSTEMS 901 TO 3000 GALLONS PER DAY .(PUMP SYSTEMS)....	\$1,126-3,700
SYSTEMS GREATER THAN 3000 GALLONS PER DAY	\$1.25 PER GAL/DAY

FEEES BASED ON \$1.25 PER GALLON PER DAY, I.E. 3 BDR HOUSE REQUIRES 360 GALLONS PER DAY AND THE FEE WOULD BE \$450.00.

PERMIT OPTIONS:

EOP/AOWE.....	\$35.00
A2.....	40% - 100% of Current Fee

WASTEWATER SYSTEMS – EXISTING

INSPECTION	\$125.00
EXPANSION	\$1.25 PER GAL/DAY
REPAIR	\$125.00

WASTEWATER SYSTEMS – OTHER

REDRAW FEE	\$ 50.00
PERMIT NAME CHANGE	\$ 50.00
PERMIT DENIAL RETENTION FEE.....	\$ 100.00

WELL- NEW

NEW WELL (INCLUDES 1 WATER SAMPLE).....	\$350.00
RE-SAMPLE.....	\$150.00

WELL – OTHER

ABANDONMENT	\$125.00
REPAIR.....	\$125.00

MISCELLANEOUS

MOBILE HOME PARK ANNUAL OPERATION PERMIT	\$125.00
MOBILE HOME MOVING PERMITS (HOMES USED FOR STORAGE)	\$ 25.00
REVISIT FEE (BROKEN APPOINTMENTS INADEQUATE PREP.)	\$100.00
WATER SAMPLES (BACTERIOLOGICAL, INORGANIC, Nitrate)	\$ 150.00
FOLLOW-UP BT FOR PERMITTED WELLS	\$ 75.00
RETURN CHECK FEE	\$ 25.00

REFERENCE NUMBERS

Environmental Health Dept.	651-7530	Register of Deeds	651-7351
Building Inspections	651-7303	Town of North Wilkesboro	667-7129
Mapping Department	651-7309	Town of Wilkesboro	838-3951
Planning Department	651-7350	U.S. Army Corps of Engineers	921-3390