

Initial Application Date: _____

Application Type Code: EHZ

Application #: _____

Appointment Requested ____yes ____no

Craven County

Centralized Permitting
2828 Neuse Blvd.
New Bern, NC 28562
(252) 636-6618
fax (252) 636-5190

Other Federal, State, and/or local agencies may have laws, rules and /or ordinances that affect the use of your property. You must comply with those laws, rules, ordinances and/or restrictive covenants before building, locating or relocating a structure onto your property.

Application for:

Authorization to use an Existing Septic Tank System

If you are **increasing** the number of bedrooms in your home, you must fill out an application for a New Septic Tank System Improvement Permit. This also applies to **businesses increasing** number of employees or retail space, **restaurants** increasing dining area or number of seats, **churches** increasing seating capacity, and **any other applicable factor that will increase flow to the existing septic tank system.**

Drinking water supply: Public Existing well Public, but there is also a well on site

The new structure will be a: (Check one below)

- Single family home that will have _____ bedrooms and _____ people living in the home
- Mobile Home: Double Wide _____ Single Wide _____ or Triple wide _____ that will have _____ bedrooms and _____ people living in the home
- A business: (Describe the business) _____

The most current structure connected to the septic system is (or was) a:

- Mobile Home: Double Wide _____ Single Wide _____ or Triple wide _____ with _____ number of bedrooms
- House with _____ number of bedrooms
- Business (Describe the business): _____
For business, how many employees _____ or customers (ex. children in a Day Care) _____ or seats (Church or Restaurant) _____

A foundation must remain at least 5 feet from any part of a septic tank system, including any tanks, drainlines, and the septic system's designated repair area.

Applications will be returned to the applicant if found to be incomplete, sites are not accessible for evaluation and/or the property is not properly identified.

(See Back)

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 rules and laws. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners, if required, and making the site accessible so that a complete evaluation can be performed.

CP Employee Witness

() Owner or () Applicant's Signature

If a map is not provided, please draw a sketch of the property showing the location of the home, business, driveway, septic tank, drain lines, repair area, well(s), water line(s), detached structure(s), water bodies, easements and rights-of-way.

