

CARTERET COUNTY HEALTH DEPARTMENT
RE-PERMITTING APPLICATION FOR TYPE V AND TYPE VI
WASTEWATER SYSTEMS
Carteret County Environmental Health
3820-A Bridges Street
Morehead City, NC 28557
(252) 728-8499

Carteret County Health Department Permit Number _____ (if known)

PLEASE PRINT OR TYPE

1. Mailing address of applicant/permittee:

Facility Name _____
Owner Name _____
Facility Contact Person _____
Address _____
City _____ Zip Code _____
Telephone Number (____) _____ Fax Number (____) _____
E-mail Address _____

(HOA's and Utility's shall provide a list of current board officers, include addresses of officers requiring copies of correspondence)

2. Location of facility:

Street Address or State Road _____
City / Zip Code _____

Is the property on which the collection system, lift stations, wastewater treatment system, disposal area under control (easements) or ownership of the Owner listed above? ____ Yes ____ No

3. Wastewater treatment system:

Design flow of facility _____ GPD
Is this an Industrial Process Wastewater System? ____ Yes ____ No
Are groundwater monitoring wells on site? ____ Yes ____ No
Wastewater treatment facility currently serves (provide description, i.e. # units with # bedrooms, # employees, shopping center units, # houses with # bedrooms, swimming pool bath house, restaurant and/or lounge (include # seats), or foodstand):

Please note any changes that have occurred since last permit was issued: _____

Is there current system construction? ____ Yes ____ No
Are repairs or new construction proposed? ____ Yes ____ No If yes, describe: _____

4. Certified Operator

Name _____
Mailing Address _____ City / Zip Code _____
Phone/ Cell/Pager _____ E-mail _____

Current contract included with application ____ Yes ____ No
(Copy of a contract with certified operator required prior to permit renewal.)

I certify that I am familiar with the information contained in the application and that to the best of my knowledge and belief such information is true, complete, and accurate.

Printed Name of Person Signing _____ Title _____

Signature of Applicant _____ Date Signed _____

**CARTERET COUNTY HEALTH DEPARTMENT
RE-PERMITTING APPLICATION FOR TYPE V AND TYPE VI
WASTEWATER SYSTEMS**

May 1, 2003

To: Type V and Type VI Wastewater facility owners
Certified Wastewater Operators

From: Len Gilstrap, RS
Carteret County Environmental Health

RE: Application and Re-permitting for Type V and Type VI Wastewater Systems

As many of you already know, the Operation Permits issued to the above wastewater facilities expire every five years based on rule .1937(j). The rule became effective August 1, 1998 and states:

For a Type V or VI system as specified in Rule .1961, Table V(a) of Paragraph (b)(9) of this Section the Operation Permit shall expire either;

- 1. 60 months after the Operation Permit is issued for any system installed on or after the effective date of the Rules, or*
- 2. 60 months after the effective date of these Rules for any system with a valid Operation Permit issued prior to the effective date of these Rules.*

The NCDENR On-site Engineering Branch has just released guidelines on the re-permitting requirements of the above systems. The guidelines require that the above systems meet the conditions of their existing operation permit, improvement and construction permits, and approved plans and specification in order to re-permit. Those conditions include but are not limited to operator contracts, required monitoring and sampling reports, maintenance of treatment facility, safety concerns, permitted connections, and proper functioning of treatment and disposal system. An inspection will be scheduled within the next two months (if not already completed) to evaluate the collection, treatment and disposal system for re-permitting.

Items requiring significant improvement will be given a reasonable time frame under "Specific Conditions" in the new Operation Permit to complete the improvement.

All wastewater facilities requiring re-permitting shall complete the enclosed application and return within two weeks. It is highly recommended that the facilities Operation Permit be used to obtain some of the required information for the application. The Certified Operator for the facility will also be a source of valuable information. Please be sure to include a copy of a contract with a certified operator. A sample copy is enclosed. A copy of a current contract may be used if one already exist.

Please do not hesitate to call our office at (252) 728-8499 if you have questions or need assistance.