

**Orange County Health Department**

Environmental Health Division  
P.O. Box 8181, 306-C Revere Road  
Hillsborough, NC 27278



Phone: 245-2360

Fax: 644-3006

PIN # \_\_\_\_\_

TMBL \_\_\_\_\_

APPLICATION DATE \_\_\_\_\_

APPLICATION# \_\_\_\_\_

**OPERATION PERMIT  
RENEWAL APPLICATION**

APPLICANT \_\_\_\_\_

SYSTEM OWNER \_\_\_\_\_

ADDRESS \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE # \_\_\_\_\_

PHONE # \_\_\_\_\_

PROPERTY DESCRIPTION: \_\_\_\_\_

LOT SIZE \_\_\_\_\_

PROPERTY ADDRESS/DIRECTIONS LOCATION \_\_\_\_\_

SUBDIVISION \_\_\_\_\_ LOT#: \_\_\_\_\_ DATE LOT RECORDED \_\_\_\_\_

IS THE SYSTEM OWNED BY A HOMEOWNERS ASSOCIATION?  YES  NO IF YES, ATTACH A LIST OF THE BOARD OFFICERS, ADDRESSES, & PHONE #'S

EXISTING OPERATION PERMIT # \_\_\_\_\_ WHICH EXPIRES \_\_\_\_\_

TYPE OF WATER SUPPLY  PRIVATE WELL  PUBLIC  COMMUNITY WELL  OTHER \_\_\_\_\_

TYPE OF FACILITY \_\_\_\_\_ (eg. Mobile Home Park, Industrial, Kennel, Residential, School, Church)

# EMPLOYEES \_\_\_\_\_ # OF MOBILE HOME SPACES SERVED \_\_\_\_\_ # BEDROOMS (If Applicable) \_\_\_\_\_ # RUNS \_\_\_\_\_

# CAR WASH BAYS \_\_\_\_\_ SCHOOL/DAYCARE ENROLLMENT \_\_\_\_\_ # FOOD SERVICE FACILITIES \_\_\_\_\_ # CHURCH SEATS \_\_\_\_\_

HOURS OF OPERATION \_\_\_\_\_ / \_\_\_\_\_ FREQUENCY OF EVENTS \_\_\_\_\_

DESCRIPTION OF FACILITY (INCLUDE ANY CHANGES SINCE ORIGINAL OPERATION PERMIT WAS ISSUED):

\_\_\_\_\_  
\_\_\_\_\_

IS THE FACILITY UNDERGOING PROPOSED OR CURRENT CONSTRUCTION/EXPANSION? :  YES  NO

\*\*\*NOTE: A SEPARATE IMPROVEMENT PERMIT APPLICATION IS NEEDED FOR PROPOSED CONSTRUCTION/EXPANSION

IF YES EXPLAIN: \_\_\_\_\_

NAME OF CERTIFIED OPERATOR: \_\_\_\_\_ Phone #: \_\_\_\_\_  
ORC Address: \_\_\_\_\_  ORC CONTRACT ATTACHED

DOES THE FACILITY HAVE A COPY OF THE AS-BUILT PLANS OF THE WASTEWATER SYSTEM ON FILE?  YES  NO  
IF NO, EXPLAIN WHY NOT:

IF NEEDED, CAN YOU PROVIDE A COPY OF THE AS-BUILT PLANS TO THE ORANGE COUNTY HEALTH DEPT?  YES  NO

**THIS APPLICATION MUST BE SIGNED BY THE CURRENT OWNER OF THE SYSTEM OR THE OWNER'S LEGAL REPRESENTATIVE (eg. SPOUSE, POWER OF ATTORNEY, EXECUTOR, OR PERSON WHO HAS ENTERED INTO A CONTRACT OR LEASE WITH THE PROPERTY OWNER) ONLY ORIGINAL SIGNATURES CAN BE ACCEPTED.**

OWNER SIGNATURE \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_