COMMON FORM FOR ENGINEERED OPTION PERMIT

See Instructions for Use in Appendix A

PART 1: Notice of Intent to Construct (NOI) - Please check all that apply

[ ] Single System  or  [ ] Multiple Systems

AND

[ ] New  [ ] Expansion  [ ] Relocation of all or part of the Existing System  [ ] Relocation of Repair Area

[ ] Repair – LHD Permit Number____________  [ ] Repair – EOP/LSS COVID 19/AOWE Permit Number ___________

1. Facility Owner’s name: (Owner, Company Name, Utility, Partnership, Individual, etc.): ____________________

Mailing address: ____________________________ City: __________________ State: _____ Zip: ______
Telephone number: ________________________ E-mail Address: ______________________________________

2. Professional Engineer (PE) name:_________________________ License number: ________________

Mailing address: ____________________________ City: __________________ State: _____ Zip: ______
Telephone number: ________________________ E-mail Address: ______________________________________

3. Licensed Soil Scientist (LSS) name: ___________________ License number: ________________

Mailing address: ____________________________ City: __________________ State: _____ Zip: ______
Telephone number: ________________________ E-mail Address: ______________________________________

4. Licensed Geologist (LG) (if applicable) name: _________________ License number: ______________

Mailing address: ____________________________ City: __________________ State: _____ Zip: ______
Telephone number: ________________________ E-mail Address: ______________________________________

5. On-Site Wastewater Contractor name: ____________________________ License number: ______________

Mailing address: ____________________________ City: __________________ State: _____ Zip: ______
Telephone number: ________________________ E-mail Address: ______________________________________

6. Proof of Errors and Omissions or other appropriate liability insurance for the following persons is attached

that includes the name of the insurer, name of the insured and the effective dates of coverage:

[ ] PE  [ ] LSS  [ ] LG  [ ] On-site Wastewater Contractor

LHD USE ONLY: Initial submittal of this NOI received: _____________________ by __________

Date            Initials
7. Property location (physical address, tax parcel identification number or subdivision lot, block number of the property to be permitted): ____________________________________________________________________
    County Name: ___________________

8. Type of facility: □ Place of residence    No. Bedrooms: _______ No. Occupants:______
    □ Place of business     Basis for flow calculation:______________________________
    □ Place of public assembly    Basis for flow calculation:______________________________

9. Factors that would affect the wastewater load: ___________________________________________________
    ___________________________________________________________________________________

10. Type and location of proposed wastewater system: ________________________________________________
    ___________________________________________________________________________________

11. Design wastewater flow: _________ gpd (For flow > 3,000 gpd and industrial process, duplicate plans shall be sent to the State.)
    Design wastewater strength: □ domestic □ high strength □ industrial process

12. A plat as defined in G.S. 130A-334(7a) is attached: □ Yes   □ No

13. Location of proposed or existing wells (drinking water, irrigation, geothermal, groundwater monitoring, sampling, etc.) and any potable and non-potable water conveyance lines is indicated on attached plans and complies with 15A NCAC 18A .1950: □ Yes   □ No
    This is a saprolite system. □ Yes   □ No

14. Evaluation(s) of soil conditions and site features in accordance with G.S. 130A-335(a1) signed and sealed by a LSS is attached: □ Yes   □ No

15. Evaluation of geologic and hydrogeologic conditions signed and sealed by a LG is attached   □ Yes   □ NA

16. Proposed landscape, site, drainage, or soil modifications are attached: □ Yes   □ NA

**Attestation by Professional Engineer licensed in North Carolina pursuant to G.S. 89C**

I, ______________________________________ hereby attest that the information required to be included with this Notice of Intent to Construct is accurate and complete to the best of my knowledge and that the proposed system shall meet applicable federal, State, and local laws, regulations, rules, and ordinances in accordance with G.S. 130A-336-.1(e)(6).

_______________________________________________     _______________________
Signature of Licensed Professional Engineer                Date

**Designation of Registered Professional Engineer as legal representative of Owner for this Notice of Intent:**

I, ______________________________________ hereby designate ______________________________________
Print Name of Owner Print Name of Registered Professional Engineer
as my legal representative for purposes of this Notice of Intent pursuant to G.S. 130A-336.1.

______________________________________________     _______________________
Signature of Owner                Date

**Owner self-submittal of NOI:**

I, ______________________________________ hereby submit this NOI prepared by __________________________
Print Name of Owner Print Name of Licensed PE
pursuant to G.S. 130A-336.1.

______________________________________________     _______________________
Signature of Owner                Date
PART 3: Authorization to Operate (ATO)

The following items are included in this Authorization to Operate for an EOP:

1. Signed and sealed copy of the Engineer’s report that includes the information in G.S. 130A-336.1(k)(1) and 15A NCAC 18A .1971(f)  Yes  No
2. Operation and management program and ORC contract, if applicable  Yes  No
3. Letter documenting Owner’s acceptance of the system from the PE  Yes  No
4. Owner meets requirements of ownership or control of the system per 15A NCAC 18A .1938(j)  Yes  No
5. Easement, right of way, or encroachment agreement required per 15A NCAC 18A .1938(j)  Yes  No
6. Multi-party agreements required, as applicable, pursuant to 15A NCAC 18A .1937(h)  Yes  No
   If yes, agreements filed in _____________ County Register of Deeds in Deed Book ______ Page _____

Attestation by the Owner or the PE for Authorization to Operate

I, ________________________________ hereby attest that all items indicated above have been provided

and the system meets applicable federal, State, and local laws, regulations, rules, and ordinances in accordance with G.S. 130A-336-.1(e)(6).

______________________________   __________________
Signature of Owner or Professional Engineer   Date

NOTES:
LIABILITY: The Department, the Department’s authorized agents, or local health departments shall have no liability for wastewater systems designed, constructed, and installed pursuant to an Engineer Option Permit [G.S. 130A-336.1(f)]