COMMON FORM FOR ENGINEERED OPTION PERMIT
See Instructions for Use in Appendix A

Except for “Date received”, this Section to be completed by the Professional Engineer licensed in accordance with G.S. 89C

| LHD USE ONLY: Initial submittal of this NOI received: ___________________ by __________ |
|-------------------------------|------------------|
| Date | Initials |

PART 1: Notice of Intent to Construct (NOI)

- New
- Expansion

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

2. Professional Engineer (PE) name: ____________________ License number: __________

3. Licensed Soil Scientist (LSS) name: ____________________ License number: __________

4. Licensed Geologist (LG) (if applicable) name: ____________________ License Number: __________

5. On-site Wastewater Contractor name: ____________________ License number: __________

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
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, location, and classification (per Rule .1961) of 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. Owner meets requirements of ownership or control of the system per 15A NCAC 18A .1938(j):  
   □ Yes   □ No

14. Easement, right of way or encroachment agreement required per 15A NCAC 18A .1938(j):  
   □ Yes   □ No

   If yes, documentation filed in ____________County Register of Deeds in Deed book ________ Page _______

15. 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 _______

16. 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

17. Evaluation(s) of soil conditions and site features signed and sealed by a LSS, a LG, as applicable, is attached:
   □ Yes   □ No

18. 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

Registered Professional Engineer (Print Name)
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
This section is for Owner use to either designate PE as their legal representative or to self-submit the NOI.

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

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 Engineered Option Permit. [NC General Statute 130A-336.1(f)]

RIGHT OF ENTRY: The submittal of this Notice of Intent to Construct grants right of entry to the Local Health Department and the State to the referenced property.

ISSUANCE OF BUILDING PERMIT: Once the LHD deems that the Notice of Intent to Construct is complete via signature in the section above, the owner may apply to the local permitting agency for a permit for electrical, plumbing, heating, air conditioning or other construction, location or relocation activity under any provision of general or special law pursuant to G.S. 130A-338.
This section for Local Health Department use only.

PART 2: LHD Completeness Review of the Notice of Intent to Construct

"(c) Completeness Review for Notice of Intent to Construct. – The local health department shall determine whether a notice of intent to construct, as required pursuant subsection (b) of this section, is complete within 15 business days after the local health department receives the notice of intent to construct. A determination of completeness means that the notice of intent to construct includes all of the required components. If the local health department determines that the notice of intent to construct is incomplete, the department shall notify the owner or the professional engineer of the components needed to complete the notice. The owner or professional engineer may submit additional information to the department to cure the deficiencies in the notice. The local health department shall make a final determination as to whether the notice of intent to construct is complete within 10 business days after the department receives the additional information from the owner or professional engineer. If the department fails to act within any time period set out in this subsection, the owner or professional engineer may treat the failure to act as a determination of completeness."

The review for completeness of this Notice of Intent was conducted in accordance with G.S. 130A-336.1(c). This NOI is determined to be:

☐ INCOMPLETE (If box is checked, information in this section is required.)

Based upon review of information submitted by the PE in Part 1, the following items are missing: ______________

_____________________________________________________________________________________________

Copies of this form listing missing items were sent to the design PE and the Owner on _________________ Date
via _____________________ with directions to re-submit missing items using Page 5 of this form.

Email, FAX, USPS, hand-delivered

Print Name of Authorized Agent of the LHD Signature of Authorized Agent of the LHD Date

☐ COMPLETE (If box is checked, information in this section is required.)

Based upon review of information submitted by the PE in Part 1 of this form, this NOI is deemed COMPLETE.

Copies of this signed form were sent to the design PE and the Owner on ________ via _____________________.

Date Email, FAX, USPS, hand-delivered

A copy of this NOI and tracking information was sent to the State on_____________ via___________________.

Date Email, FAX, USPS, hand-delivered

______________________________    _______________________________   __________________
Print Name of Authorized Agent of the LHD  Signature of Authorized Agent of the LHD           Date
**Re-submittal of NOI with missing items included**

This Section is for use by PE to submit items noted as missing during LHD Completeness Review above. Resubmittals must be accompanied by a cover letter from the PE.

<table>
<thead>
<tr>
<th>Item # from initial NOI</th>
<th>Resubmittal description</th>
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<tbody>
<tr>
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Attestation by Professional Engineer licensed in North Carolina pursuant to G.S. 89C

I, ___________________________ hereby attest that the information re-submitted for 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

LHD Follow-up Completeness Review of Notice of Intent to Construct

This follow-up review for completeness of this Notice and Intent was conducted in accordance with G.S. 130A-336.1(c). This NOI is determined to be:

☐ INCOMPLETE

Based upon review of information submitted by the PE in the RESUBMITTAL above, this Notice of Intent remains INCOMPETE because the following items from Part 1 of this form remain missing: ________________________________

_______________________________     _______________________
Print name of authorized Agent of the LHD     Signature of authorized Agent of the LHD     Date

☐ COMPLETE

Based upon review of information submitted by the PE in the RESUBMITTAL above in addition to information provided in Part 1 of this form, this NOI is deemed complete.

Copies of this signed form were sent to the PE and the Owner on _____________ via ____________________________.

_______________________________     _______________________
Print name of authorized Agent of the LHD     Signature of authorized Agent of the LHD     Date

A complete copy of this form with tracking information was sent to the State: _____________ via ____________________________.

_______________________________     _______________________
Print name of authorized Agent of the LHD     Signature of authorized Agent of the LHD     Date
PART 3: Authorization to Operate (ATO)

Except for date received, the Section below is to be completed by the Owner or by the PE designated to act as their legal representative for the EOP.

LHD USE ONLY: Initial submittal of request for ATO received: _____________ by _____________ Date _____________ Initials
 Date of Post-construction Conference: _____________

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

1. Signed and sealed copy of the Engineer’s report that includes:
   a. Signed and sealed evaluation of soil conditions and site features  [ ] Yes  [ ] No
   b. Drawings, specifications, plans  [ ] Yes  [ ] No
   c. Reports on special inspections and final inspection  [ ] Yes  [ ] No
   d. Management Program manual  [ ] Yes  [ ] No
   e. On-site Wastewater Contractor’s signed statement  [ ] Yes  [ ] No
   f. Signed and sealed statement pursuant to 15A NCAC 18A.1938(h)  [ ] Yes  [ ] No

2. Fee (as applicable)  [ ] Yes  [ ] No

3. Notarized letter documenting Owner’s acceptance of the system from the PE  [ ] Yes  [ ] No

Attestation by the Owner or the PE for Authorization to Operate

I, __________________________________ hereby attest that all items indicated above have been provided to the County LHD and the system shall meet applicable federal, State, and local laws, regulations, rules and ordinances in accordance with G.S. 130A-336-.1(e)(6).

____________________County LHD
Print name of Owner or Professional Engineer
[ ] [ ]
Signature of Owner or Professional Engineer Date

LHD Review of required information for the ATO

[ ] INCOMPLETE

Based upon review of information submitted by the Owner or PE in the Section above, the following items are missing from the information required for an Authorization to Operate for an EOP: ________________________

Copies of this signed form were sent to the design PE and the Owner on ______________ via ___________________.

[ ] [ ]
Print name of authorized Agent of the LHD Signature of authorized Agent of the LHD Date

[ ] COMPLETE

Based upon review of information submitted by the Owner or PE in the Section above, this Authorization to Operate is hereby issued in accordance with G.S. 130A-336.1(m).

A copy of this complete NOI/ATO with tracking information was sent to the State on ______________ via ___________________.

[ ] [ ]
Print name of authorized Agent of the LHD Signature of authorized Agent of the LHD Date

ISSUANCE OF CERTIFICATE OF OCCUPANCY: Once the LHD determines completeness based upon the PE submission, the owner may apply to the local permitting agency for permanent electrical service to a residence, place of business or place of public assembly pursuant to G.S. 130A-339.