

**MAKE PAYMENT TO: WARREN COUNTY HEALTH DEPARTMENT
APPLICATION FOR COPY OF IMPROVEMENT PERMIT CONSTRUCTION AUTHORIZATION**

**WARREN COUNTY ENVIRONMENTAL HEALTH
544 WEST RIDGEWAY STREET - WARRENTON, NC 27589
PHONE: (252) 257-1538 FAX: (252) 257-4460**

FEE SCHEDULE

**25 cent PER COPY ON ALL COMPLETED SEPTIC PERMIT
Effective November 1, 2009**

PAID _____
DATE _____
CHECK# _____
CASH _____

Signature _____ Date _____

1. Name of Applicant: _____

2. Mailing Address: _____

3. Telephone Number: Business _____ Home _____

Fax Number _____

4. Directions to Property (use state road numbers) _____

5. Subdivision Name: _____ Lot # _____ Section # _____

6. Septic Tank System serves: () House () Mobile Home () other _____

7. Number of Bedrooms _____ Number of People _____

8. Building has: () Basement () Plumbing Fixtures in Basement () Concrete Slab Foundation
() Deck () Crawl Space () Garage () Workshop () Pool or Other _____

9. Is a kitchen garbage grinder installed in kitchen sink? () Yes () No

Name of original owner who had septic tank system installed and year installed _____

If you do not have this original owner information please call the register of deeds or tax office.

Septic Permits are issued by name of owner or builder at the time of septic installation. We can not find permit unless we are given correct information.

Note: If you would like to set up an account with this office, please mail a check payable to Warren County Health Department with your dollar amount. This will allow us to deduct the fee charge for each copy and mail or fax the septic tank copy to your office.