

# APPENDIX C

(Water, Sewer and Reuse Permit Applications)



# Planning & Development

Public Utilities Department  
 For all development projects within Raleigh's  
 ETJ, please submit to: One Exchange Plaza, 1  
 Exchange Plaza Suite 400 Raleigh NC 27601  
 phone 919-996-2495 Fax 919-516-2684

## Public Water Application and Engineers Report

See <a href="#">Development Fee Schedule</a> for current fee - Check made payable to: City of Raleigh		
This application for a <b>Water Extension</b> is being made under the approved <b>City of Raleigh Water System Management Plan and Engineers Report</b> .		
<b>Applicant Information</b>		
<b>Applicant</b>		
<b>Organization</b>		
<b>Mailing Address</b>		
<b>Phone</b>		
<b>Project Information</b>		
<b>Project Name</b>		
<b>Project Location</b>		
<b>Description</b>		
<b>Number of Units Served</b>		
<b>Pressure Zone</b>	<b>Site Static Pressure</b>	
<b>Estimated Completion Date</b>		
<b>Engineering Firm Information</b>		
<b>Engineering Firm</b>	<b>Contact</b>	
<b>Mailing Address</b>	<b>Phone</b>	<b>Email</b>
<b>Pursuant: City of Raleigh Code Ordinance Chapter 800 N.C. General Statutes Chapter 130 A-317</b>		<b>SEAL</b>
<b>Applicant's Signature</b>	<b>Title</b>	
<b>Date</b>		
<b>Engineer's Certification</b> I _____, as a duly registered <b>Professional Engineer</b> in the State of North Carolina, hereby certify that the plans and specifications attached hereto are consistent with the above summary.		
Engineer's Signature _____ Registration # _____		





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## Private Water Application and Engineers Report

See <a href="#">Development Fee Schedule</a> for current fee - Check made payable to: City of Raleigh			
This application for a <b>Water Extension</b> is being made under the approved <b>City of Raleigh Water System Management Plan and Engineers Report</b> .			
<b>Applicant Information</b>			
Applicant			
Organization			
Mailing Address			
Phone			
<b>Project Information</b>			
Project Name			
Project Location			
Description			
Number of Units Served			
Pressure Zone	Site Static Pressure		
Estimated Completion Date			
<b>Engineering Firm Information</b>			
Engineering Firm	Contact		
Mailing Address	Phone	Email	
<b>Pursuant: City of Raleigh Code Ordinance Chapter 800 N.C. General Statutes Chapter 130 A-317</b>		<b>SEAL</b>	
Applicant's Signature	Title		Date
<b>Engineer's Certification</b> I _____ as a duly registered <b>Professional Engineer</b> in the State of North Carolina, hereby certify that the plans and specifications attached hereto are consistent with the above summary.  Engineer's Signature _____ Registration # _____			





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## Public Gravity Sewer Application

See <a href="#">Development Fee Schedule</a> for current fee - Check made payable to: City of Raleigh			
<b>Applicant Information</b>			
Applicant			
Organization			
Mailing Address			
Phone			
<b>Project Information</b>			
Project Name			
Project Location			
Project Description			
Number of Units Served			
<b>Wastewater Information</b>			
Type of Wastewater	<input type="checkbox"/> Domestic	<input type="checkbox"/> Industrial	Average Daily Flow (gallons)
Tributary to Wastewater Plant	<input type="checkbox"/> Little River	<input type="checkbox"/> Neuse River	<input type="checkbox"/> Smith Creek
<b>Contractor Information</b>			
Contractor Installing Sewer			
Company Name		Contact	
Company Address		Mailing Address	
Phone		Estimated Completion Date	
<b>Engineering Firm Information</b>			
Engineering Firm		Contact	
Mailing Address		Phone	Email
Pursuant: City of Raleigh Code Ordinance Chapter 800 N.C. General Statutes Chapter 130 A-317			SEAL
Applicant's Signature	Title	Date	
Engineer's Certification I _____, as a duly registered Professional Engineer in the State of North Carolina, hereby certify that the plans and specifications attached hereto are consistent with the above summary.  Engineer's Signature _____ Registration # _____			

## Non-Discharge Application Form Attachment for Gravity Sewers

1	Owner/Project Name (as shown on application)					
2	Total length of sewer pipe (by diameter size)					
Diameter (inches)	Length (linear feet)	Material	Minimum Cover	Slope Maximum	Slope Minimum	
3	Maximum sewer reach length between manholes				Linear Feet	
Does Owner/Operator have the ability to clean this?					Yes	No
4	Sewer subject to traffic bearing loads?				Yes	No
5	Maximum allowable infiltration/exfiltration test rate in GPM/in/mile				100 GPM/in/Mile	
6	Minimum separation distances as shown on the plans or addressed in the specifications					
100 feet horizontal separation from wells or other water supplies					Yes	No
24 inch vertical separation from storm sewers,					Yes	No
or Ferrous pipe sanitary sewer specified with concrete cradle					Yes	No
10 feet horizontal separation from water mains,					Yes	No
or 18 inch vertical separation,					Yes	No
or Ferrous pipe sanitary sewer specified					Yes	No
7	100 year-flood elevation					
Are manholes subject to flooding?					Yes	No
If yes, are manhole rim elevations two (3) feet above 100-year flood level?					Yes	No
<p><b>Engineer's Certification</b> I _____, as a duly registered Professional Engineer in the State of North Carolina, hereby certify that the plans and specifications attached hereto are consistent with the above summary.</p> <p>Signature _____ Registration # _____</p>						
<p><b>Amended</b> North Carolina Department of Natural Resources and Community Development Division of Environmental Management Non-discharge Application Form Attachment Gravity Sewers PA-1(7-1-87)</p>						



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 Exchange Plaza Suite 400 Raleigh NC 27601  
 phone 919-996-2495 Fax 919-516-2684

## Private Gravity Sewer Application

See [Development Fee Schedule](#) for current fee - Check made payable to: City of Raleigh

### Applicant Information

Applicant

Organization

Mailing Address

Phone

### Project Information

Project Name

Project Location

Project Description

Number of Units Served

### Wastewater Information

Type of Wastewater  Domestic  Industrial

Average Daily Flow (gallons)

Tributary to Wastewater Plant  Little River  Neuse River  Smith Creek

### Contractor Information

Contractor Installing Sewer

Company Name

Contact

Company Address

Mailing Address

Phone

Estimated Completion Date

### Engineering Firm Information

Engineering Firm

Contact

Mailing Address

Phone

Email

Pursuant: City of Raleigh Code Ordinance Chapter 800 N.C. General Statutes Chapter 130 A-317

SEAL

Applicant's Signature

Title

Date

Engineer's Certification I \_\_\_\_\_, as a duly registered  
 Professional Engineer in the State of North Carolina, hereby certify that the plans and specifications attached hereto are  
 consistent with the above summary.

Engineer's Signature \_\_\_\_\_ Registration # \_\_\_\_\_



## Non-Discharge Application Form Attachment for Gravity Sewers

1	Owner/Project Name (as shown on application)					
2	Total length of sewer pipe (by diameter size)					
Diameter (inches)	Length (linear feet)	Material	Minimum Cover	Slope Maximum	Slope Minimum	
3	Maximum sewer reach length between manholes				Linear Feet	
Does Owner/Operator have the ability to clean this?					Yes	No
4	Sewer subject to traffic bearing loads?				Yes	No
5	Maximum allowable infiltration/exfiltration test rate in GPM/in/mile				100 GPM/in/Mile	
6	Minimum separation distances as shown on the plans or addressed in the specifications					
100 feet horizontal separation from wells or other water supplies					Yes	No
24 inch vertical separation from storm sewers,					Yes	No
or Ferrous pipe sanitary sewer specified with concrete cradle					Yes	No
10 feet horizontal separation from water mains,					Yes	No
or 18 inch vertical separation,					Yes	No
or Ferrous pipe sanitary sewer specified					Yes	No
7	100 year-flood elevation					
Are manholes subject to flooding?					Yes	No
If yes, are manhole rim elevations two (3) feet above 100-year flood level?					Yes	No
<p><b>Engineer's Certification</b> I _____, as a duly registered Professional Engineer in the State of North Carolina, hereby certify that the plans and specifications attached hereto are consistent with the above summary.</p> <p>Signature _____ Registration # _____</p>						
<p><b>Amended</b> North Carolina Department of Natural Resources and Community Development Division of Environmental Management Non-discharge Application Form Attachment Gravity Sewers PA-1(7-1-87)</p>						



# Development SERVICES

FIRE • INSPECTIONS • PLANNING  
PUBLIC UTILITIES • PUBLIC WORKS

Customer Service Center  
One Exchange Plaza, Suite 400, Raleigh, NC 27601  
Phone 919-516-2495 Fax 919-516-2685

**Inspections Department Satellite Location**  
8320-10 Litchford Road, Raleigh, NC 27615  
Phone 919-713-4200 Fax 919-713-4221

Reclaimed Water Distribution System Application Form: CORRWDS 11-07						
(This form may be photocopied for use as an original)			Application Number _____ (to be completed by COR)			
<b>General Information</b>						
<b>1. Applicant's Name</b>						
<b>Applicant Type</b>						
	Individual		Corporation		General Partnership	Privately Owned Public Utility
	Federal		State		Municipal	County
Signature Authority's Name				Title		
Applicant's Mailing Address						
City			State		Zip	
Phone		Fax		Email		
<b>2. Project type</b> (Business, subdivision, shopping center, etc.)						
Project County				USGS Map Name		
<b>3. Consulting Engineer's name</b>				License Number		
Engineer's mailing address				Firm		
City			State		Zip Code	
Phone		Fax #		Email		
<b>Permit Information</b>						
1. Project is: <input type="checkbox"/> New <input type="checkbox"/> Modification    ( Existing Permit # _____ Date Issued _____ )						
2. Fee Submitted						
3. Does the project comply with all setbacks found in the river basin rules (15A NCAC 2B .0200)? <input type="checkbox"/> Yes    or <input type="checkbox"/> No						
If no, list non-compliant setbacks						
<b>Information on Reclaimed Water</b>						
1. Provide a description specifying the destination of the reclaimed water (e.g., residential lawns, golf courses, parks, landscape areas, industrial process/cooling water, etc.)						
2. Has a utilization permit been applied for? <input type="checkbox"/> Yes    or <input type="checkbox"/> No						
3. Volume of reclaimed water utilized by this project _____ gallons per day (GPD)						
4. Explanation of how reclaimed water flow was determined						

**Distribution Line Information**

**1. Summary of distribution line to be permitted, by diameter and length:**

Diameter (inches)	Length (linear feet)	High Elevation (feet)	Discharge Elevation (feet)	Pump-Off Elevation (feet)

**2. Station location of air-release valves (15A NCAC 2T.0305(h)(5))**

**3. Are there any additional lines, pumps, or equipment needed for this project?**  Yes or  No  
 If yes, list equipment here:

**Professional Engineer's Certification**

I, \_\_\_\_\_, attest that this application for \_\_\_\_\_ has been reviewed by me and is accurate, complete and consistent with the information supplied in the engineering plans, calculations, and all other supporting documentation to the best of my knowledge. I further attest that to the best of my knowledge, the proposed design has been prepared in accordance with this application package as well as all applicable regulations and statutes. Although other professionals may have developed certain portions of this submittal package, inclusion of these materials under my signature and seal signifies that I have reviewed this material and have judged it to be consistent with the proposed design. **Note: In accordance with NC General Statutes 143-215.6A and 143-215.6B, any person who knowingly makes any false statement, representation, or certification in any application package shall be guilty of a Class 2 misdemeanor, which may include a fine not to exceed \$10,000 as well as civil penalties up to \$25,000 per violation.**

North Carolina Professional Engineer's seal, signature and date:  
 \_\_\_\_\_ Date \_\_\_\_\_

**Applicant's Certification** (signing authority must be in compliance with 15A NCAC 2T .0106(b):

I, \_\_\_\_\_ (signing authority name) \_\_\_\_\_ (title) attest that this application for \_\_\_\_\_ (facility name) has been reviewed by me and is accurate and complete to the best of my knowledge. I understand that any discharge of wastewater from this non-discharge system to surface waters or the land will result in an immediate enforcement action that may include civil penalties, injunctive relief, and/or criminal prosecution. I will make no claim against the City of Raleigh should a condition of this permit be violated. I also understand that if all required parts of this application package are not completed and that if all required supporting information and attachments are not included, this application package will be returned to me as incomplete. I further certify that the applicant or any affiliate has not been convicted of an environmental crime, has not abandoned a wastewater facility without proper closure, does not have an outstanding civil penalty where all appeals have been exhausted or abandoned, are compliant with any active compliance schedule, and do not have any overdue annual fees under Rule 2T .0105. **Note: In accordance with NC General Statutes 143-215.6A and 143-215.6B, any person who knowingly makes any false statement, representation, or certification in any application package shall be guilty of a Class 2 misdemeanor, which may include a fine not to exceed \$10,000 as well as civil penalties up to \$25,000 per violation.**

Signature \_\_\_\_\_ Date \_\_\_\_\_



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## Public Sewer Pump Station and Force Main Application

See <a href="#">Development Fee Schedule</a> for current fee - Check made payable to: City of Raleigh			
<b>Applicant Information</b>			
Applicant			
Organization			
Mailing Address			
Phone			
<b>Project Information</b>			
Project Name			
Project Location			
Project Description			
Number of Units Served		Estimated Completion Date	
<b>Wastewater Information</b>			
Type of Wastewater	<input type="checkbox"/> Domestic	<input type="checkbox"/> Industrial	Average Daily Flow (gallons)
Tributary to Wastewater Plant	<input type="checkbox"/> Little River	<input type="checkbox"/> Neuse River	<input type="checkbox"/> Smith Creek
<b>Contractor Information</b>			
Contractor			
Company Name		Contact	
Company Address		Mailing Address	
Phone		Estimated Completion Date	
<b>Engineering Firm Information</b>			
Engineering Firm		Contact	
Mailing Address		Phone	Email
Pursuant: City of Raleigh Code Ordinance Chapter 800 N.C. General Statutes Chapter 130 A-317			<b>SEAL</b>
Applicant's Signature	Title	Date	
Engineer's Certification I _____, as a duly registered <b>Professional Engineer</b> in the State of North Carolina, hereby certify that the plans and specifications attached hereto are consistent with the above summary.  Engineer's Signature _____ Registration # _____			

## Non-Discharge Application Form Attachment Pump Station and Force Main

1	Owner/Operator Name (as shown on application)				
2	Pump Station # _____ (Please submit a separate sheet for each pump station and a project location map showing this pump station and closest creek, river, lake, etc.)				
3	Number and size of pumps		GPD		each
	Maximum Capacity of Station		GPD		
4	Pump Station Requirements				
	Generator		Area Light		
	Wet Well Vented with Screen		110V Convenience Outlet at Control Panel		
	Fillets in Wet Well		Flood/Buoyancy Protection		
	Air Release Valve (number)		High Water Alarms	audible	visual
	Check and Gate Valves		CORPUD SCADA		
	Security Fencing		Odor Control		
	Lockable Wet Well Cover		All weather driveway with vehicle turnaround		
5	Pumping cycles		per hour		
6	Ductile Iron Force Main				
	Length	Diameter	Minimum Cover	High Point	Low Point
					Total Dynamic Head (design)
7	Is pump station subject to flooding?	Yes	No		
8	100 year-flood elevation			Feet MSL	
Engineer's Certification I _____, as a duly registered <b>Professional Engineer</b> in the State of North Carolina, hereby certify that the plans and specifications attached hereto are consistent with the above summary.  Signature _____  Registration # _____ Date _____					SEAL
<b>Amended</b> North Carolina Department of Natural Resources and Community Development Division of Environmental Management Non-discharge Application Form Attachment Pump Station and Force Main PA-2(7-1-8)					



# Development SERVICES

FIRE • INSPECTIONS • PLANNING  
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**Inspections Department Satellite Location**  
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Phone 919-713-4200 Fax 919-713-4221

Reclaimed Water Utilization Permit Application Form: CORRWCS 11-07							
(This form may be photocopied for use as an original)				Application Number _____ (to be completed by COR)			
<b>General Information</b>							
<b>1. Applicant's Name</b>							
<b>Applicant Type</b>							
	Individual		Corporation		General Partnership		Privately Owned Public Utility
	Federal		State		Municipal		County
<b>Renewal</b> (if no changes to Ownership or system components, complete parts 1 and 2 of this Section only. The City of Raleigh reserves the right to request additional information.)							
<b>Signature Authority's Name</b>				<b>Title</b>			
<b>Applicant's Mailing Address</b>							
<b>City</b>				<b>State</b>		<b>Zip</b>	
<b>Phone</b>		<b>Fax</b>		<b>Email</b>			
<b>2. Facility type</b> (Residence, subdivision, shopping center, etc.)							
<b>Facility's Physical Address</b>							
<b>City</b>			<b>State</b>		<b>Zip</b>		<b>County</b>
<b>3. Consulting Soil Scientist's name</b>				<b>License Number</b>			
<b>Soil Scientist's mailing address</b>					<b>Firm</b>		
<b>City</b>				<b>State</b>		<b>Zip</b>	
<b>Phone</b>		<b>Fax #</b>		<b>Email</b>			
<b>Permit Information</b>							
<b>Project is:</b> <input type="checkbox"/> <b>New</b> <input type="checkbox"/> <b>Modification</b> (Existing Permit # _____ Date Issued _____)							
<b>1. Facility Status:</b> <input type="checkbox"/> <b>Proposed</b> <input type="checkbox"/> <b>Existing</b> (If Existing, complete the next line.)							
<b>Was this system approved for reclaimed disposal under 15A NCAC 2H .0219(k)?</b> <input type="checkbox"/> <b>Yes</b> or <input type="checkbox"/> <b>No</b>							
<b>2. List the intended uses for the reclaimed water</b>							
<b>3. Does the project comply with all setbacks found in the river basin rules (15A NCAC 2B .0200)?</b> <input type="checkbox"/> <b>Yes</b> or <input type="checkbox"/> <b>No</b> If no, list non-compliant setbacks:							

Information on Wastewater Generation				
1. Volume of wastewater flow for this project: _____ gallons per day (GPD)				
2. Explanation of how wastewater flow was determined (15A NCAC 2T .0114(c):				
Type of Establishment	Basis of Flow	Flow Per Unit	Number of Units	Total
	Gallons/ _____			
	Gallons/ _____			
	Gallons/ _____			
	Gallons/ _____			
	Gallons/ _____			
	Gallons/ _____			
	Gallons/ _____			
			<b>Total</b>	
General Project Information				
1. Brief project description				
2. In accordance with 15A NCAC 2T .0901 and .0910, what is the intended beneficial utilization of this reclaimed water?				
3. In accordance with 15A NCAC 2T .0912, provide the minimum distance in feet from the facility's utilization system to each parameter (distances greater than 500 feet may be left blank):				

Setback Parameter	Utilization System
Any habitable residence or place of assembly under separate ownership or not to be maintained as part of the project site	
Any private or public water supply source	
Any well with exception of monitoring wells	
Any property line	

4. Briefly describe the measures being taken to restrict unauthorized access to controls	
5. What is the 100-year flood elevation? _____ feet mean sea level	Source
Are any utilization areas located within the 100-year flood plain? <input type="checkbox"/> Yes or <input type="checkbox"/> No	
If yes, briefly describe which utilization areas are affected and the measures being taken to protect them against flooding	
If yes, does the Applicant have documentation of compliance with State Statute 143 Article 21 Part 6? <input type="checkbox"/> Yes or <input type="checkbox"/> No	

Design Information for Utilization System					
1. The utilization system is: <input type="checkbox"/> Solid set (e.g. buried installation) <input type="checkbox"/> House mounted <input type="checkbox"/> Manual/Automatic					
If automatic, describe equipment used to control operation during rain fall events					
2. Utilization system is: <input type="checkbox"/> Proposed <input type="checkbox"/> Existing					
3. Will there be onsite storage? <input type="checkbox"/> Yes    or <input type="checkbox"/> No    If yes, state storage capacity: _____ gallons					
4. Have you reviewed current DMR data to verify water quality? <input type="checkbox"/> Yes    or <input type="checkbox"/> No					
5. Is the water quality sufficient for the intended use of this project? <input type="checkbox"/> Yes    or <input type="checkbox"/> No					
6. Will there be any chemicals applied to the reclaimed water before usage? <input type="checkbox"/> Yes    or <input type="checkbox"/> No					
If yes, what chemicals will be applied?					
If chemicals are applied, water quality monitoring shall be performed prior to chemical addition.					
7. List any equipment not specifically mentioned above (pumps, controls, etc.)					
8. Loading rates recommended by the Soil Scientist Evaluation:					
Soil Series	Fields within Soil Area	Recommended Loading Rate (in/hr)	Recommended Loading Rate (in/yr)	Loading Recommended	If Seasonal, list appropriate months
				<input type="checkbox"/> Annual <input type="checkbox"/> Seasonal	
				<input type="checkbox"/> Annual <input type="checkbox"/> Seasonal	
				<input type="checkbox"/> Annual <input type="checkbox"/> Seasonal	
				<input type="checkbox"/> Annual <input type="checkbox"/> Seasonal	
				<input type="checkbox"/> Annual <input type="checkbox"/> Seasonal	
*Note: For lots 1 acre or less, Applicant may use the _____ agronomist report supplied by the City of Raleigh. The City of Raleigh reserves the right to require a site specific agronomist report.					
9. Design loading rates are equal or less than the loading rates recommended by Soil Scientist? <input type="checkbox"/> Yes    or <input type="checkbox"/> No					
If No, explain why 15A NCAC 2T .0907(g) is not met					
10. In accordance with 15A NCAC 2T .0910(a)(1) and (b)(1), how will the public and /or employees be notified of the use of reclaimed water?					



