County of Moore Planning and Inspections



Inspections/Permitting: (910) 947-2221

Planning: (910) 947-5010 Fax: (910) 947-1303

EXTERNAL CHECKLIST FOR A SWIMMING POOL PERMIT APPLICATION

Completed permit application. Applications can be obtained from our department, Planning and
Inspections located at 1048 Carriage Oaks Drive, Carthage, NC 28327, or online at
www.moorecountync.gov, Department Planning & Inspections, Applications. If you would like to speak
with someone regarding the application our phone number 910-947-5010 or 910-947-2221.

- ☐ For a new septic system, an improvement permit issued by the Moore County Environmental Health Department for the proposed use. The Environmental Health Department is located at 1042 Carriage Oaks Drive, Carthage, NC 28327. Their phone number is 910-947-6283.
- ☐ Existing septic systems: A septic system recertification permit is required by the County of Moore Health Department, Environmental Health Division for the following:
 - Additions extending outside the existing foundation.
 - Interior renovations that result in an increased number of bedrooms.
 - Replacement or addition of storage buildings, swimming pools, decks, concrete pads, irrigation systems, geothermal systems, driveways, etc...

The Environmental Health Department is located at 1042 Carriage Oaks Drive, Carthage, NC 28327. Their phone number is 910-947-6283.

- A completed residential plot plan included with your permit application. The purpose of the residential plot plan is to clearly identify where the proposed and existing structure(s)/building(s) are/ will be located on the property. The residential plot plan shall identify the structure(s)/building(s) distances measured to all property lines. The residential plot plan also ensures the proposed structure(s)/building(s) are not being located on top of the existing septic system, septic lines or septic repair area.
- US Fish and Wildlife may require approval if located in a Red Cockaded Woodpecker red zone. Phone (919) 856-4520 x28
- ☐ If applicable, a copy of the designated lien agents contact information per NC §44A-11.1 See www.liensnc.com for further details and registration of your project.
- ☐ A copy of recorded deed may be required to verify ownership. A survey may also be required if lot configuration does not reflect the current records of the county.
- A zoning permit may be required if the subject property is located within one of the following municipalities or their ETJ.

Cameron: 910-245-3212 Taylor Town: 910-295-4010

Carthage: 910-947-2331 Vass: 910-245-4676

Foxfire: 910-295-5107 Whispering Pines: 910-949-3141

Robbins: 910-948-2431

All swimming pools as defined by the 2018 North Carolina Building Codes shall have the required fencing/barrier installed and approved by the building inspections department before any water can be placed in the pool. A swimming pool is defined as "any structure, basin, chamber or tank containing an artificial body of water for swimming, diving or recreational bathing <u>having a depth of 2 feet or more at any point.</u>" This means that any in-ground or above ground swimming pool that can hold 2 feet or more of water must have the required fencing/barrier.

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Sw	vimming Pool Permit Application	on				
Application Date: E	Email Address:					
Location/Address of Property:						
Description of Proposed Work:						
Applicant:				Phone:		
Owner:	ner:			Phone:		
Owner Address:	City	City		Zip:		
Type of Permit:						
	☐ Swimming Pool] Other:				
If the project is for a pool please list the estimated	d cost of the project	Total Estimate	ed Cost \$			
Please list the names of the contractors who will be performing the work for this project. If the work will be performed by the owner just write owner or self in the name field. Please put N/A in any fields that are not applicable to the project.						
General Contractor:			License:			
Address:	City		St	Zip		
Electrical Contractor:	Phone:	Phone:		License:		
Address:	dress: City		St	Zip		
Design Professional:	Phone:	Phone:		License:		
Address:	City	City		Zip		
Pool Contractor:	Phone:	Phone:		License:		
Address:	City		St	Zip		
I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other applicable State and local laws, ordinances and regulations. The Inspection Department will be notified of any changes in the approval plans and specifications for the project permitted herein. I understand if this application is incomplete, no inspections will be performed on the project. Owner/Agent Signature:						