

ARROWHEAD PROPERTY OWNERS' ASSOCIATION, INC. A NON-PROFIT CORPORATION
600 Sioux Trail
Edenton, NC 27932
(252) 221-8331

BUILDING PERMIT

DATE: _____

NAME _____

ADDRESS _____ PHONE NUMBER _____

SECTION: _____ LOT(S) _____

Reference: Restrictive Covenants: Article III A, B, C, D, E, F, G, H, Article IV A & B.

TYPE OF CONSTRUCTION

SINGLE DWELLING _____ UTILITY BLDG _____ BULKHEAD _____ MANUFACTURED HOME _____ CARPORT _____ COUNTY WATER _____ ADDITION _____ FENCE _____ WELL _____ GARAGE _____ PIER _____ OTHER _____
TREE: CLEAR CUT / PARTIAL CLEARING / SINGLE _____

AREA OF BUILDING SITE (sq. ft.) _____ AREA OF BUILDING (sq. ft.) _____

COUNTY BLDG PERMIT# _____ SEPTIC TANK PERMIT# _____

CAMA PERMIT# _____

1. I understand and agree to comply with all applicable laws, regulations, building codes, and health regulations for the State of North Carolina and Chowan County.
2. I understand and agree to abide by the Restrictive Covenants for the Arrowhead Beach Subdivision as they apply to my property.
3. I understand that in obtaining this permit I am not relieved of the responsibility for obtaining applicable Chowan County, CAMA, Health, and, when applicable, Division of Archives and History permits.
4. I understand that prior to the construction of a pier, bulkhead, groin, or other structures in the waters of the Chowan River, Indian Creek, or the canal, I must first contact the NC Division of Coastal Management (CAMA) for permit requirements. I also understand that I should follow this procedure when planning any land-disturbing activities, i.e., stump removal, lot grading, within 75' of the water bodies. I further understand that wetlands exist on many waterfront lots, and stringent regulations apply to such. The NC Division of Coastal Management (CAMA) and/or the U.S. Army Corps of Engineers should be contacted if wetlands are suspected within the boundaries of my property.
5. I have checked the location of the property lines (stakes) and they agree with the plat for Section _____
6. To avoid adverse effects on significant archaeological remains, I agree to submit plans for any major subsurface excavation or land disturbance to the Archaeology Branch, North Carolina Division of Archives and History for review. Should significant archaeological remains be known to exist, or suspected to exist, within the boundaries of my property, I agree to abide by reasonable and prudent measures developed by the North Carolina Division of Archives and History to mitigate said adverse effect. Should the property be considered a "high probability" area of archaeological remains, I agree to allow inspection and testing of the permanent site to determine the presence of unknown resources. Such inspections and testing shall be arranged and scheduled by the Arrowhead Property Owners Association in consultation with the Division.
7. This Permit is valid for one year after approval by the Building Control Committee.

SIGNATURE OF PROPERTY OWNER _____ DATE _____

PERMIT APPLICATION APPROVED BY _____ DATE _____
(Building Control Director / Committee Chairman)

APPROVED BY THE BOARD OF DIRECTORS.
_____ DATE _____ (President or Vice President)

Use the back to draw a plot of the building site. Provide: (1) lot numbers (2) street front (3) side street (4) name of street(s) (5) set back lines (6) location of structure on building site. Form approved BOD 12/30/1999; revised 01/16/2023.