

### RESIDENT DIGGING PERMIT

If a resident wishes to perform any digging (regardless of depth, with the exception of planting flowers and small shrubs) within any managed property, to include yards and common areas such as parks and playgrounds, authorization must be obtained from the Community Manager or AMCC Representative. All buried utilities must be located and marked by the appropriate authority.

**This form must be filled out and returned to the Community Manager for approval prior to any digging.**

Resident Name: \_\_\_\_\_ Address: \_\_\_\_\_

#### PLEASE COMPLETE THE APPLICABLE SECTIONS

##### STEP I. PURPOSE OF DIG

Describe the purpose of the dig and provide a drawing of the location(s) where soil is to be disturbed. Include measurements where appropriate and indicate depth. You may use the back of this application or separate document.

Remove Existing Item

New Item Installation

Other

Describe Work: \_\_\_\_\_

##### STEP II. COMMUNITY MANAGER INITIAL APPROVAL

If new installation, is this item allowed by lease, regulations, policies, and any applicable guidelines?  Yes  No

Are there restrictions in this area due to PI soils, historical, or other considerations?  Yes  No

This dig will not weaken or otherwise jeopardize any structures or trees?  Yes  No

Removal of this item will not be required upon move out?  Yes  No

Approved  Disapproved

AMCC Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

##### STEP III. LOCATION SERVICES

It is necessary to verify any utilities located underground are not compromised, which if disturbed, may cause an interruption in service and/or possible danger. Please complete ALL the following steps to obtain proper approval and marking of your Base installation site to ensure safe and timely set up. Each of the entities listed below must be contacted and either, sign and date this form or provide documentation of having located and marked all buried utilities.

MCB Camp Lejeune and MCAS New River Properties

*Signed*

NC One Source (800) 632-4949

Professional Locating Service (910) 347-7519

##### STEP IV. COMMUNITY MANAGER FINAL APPROVAL

Approved  Disapproved

AMCC Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

##### STEP V. COMMUNITY MANAGER (OR REPRESENTATIVE) COMPLETE INSPECTION

Approved  Disapproved

AMCC Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Notes: \_\_\_\_\_