Granville County
107 Hunt Drive
Oxford, NC 27565
919-693-2688

Granville Vance Public Health
PO Box 367
Oxford, NC 27567
www.gvph.org

Vance County
125 Charles Rollins Road
Henderson, NC 27536
252-492-5263

☐ Survey plat to scale* submitted
☐ Scaled* site plan submitted
☐ Unscaled site plan submitted
* scale of 1" = no more than 60'

Vance County Health Department
Application for
Improvement Permit and/or Authorization to Construct and/or Well

S-254689
364752

_____ Improvement Permit _____ Authorization to Construct ____ Well 2405 Receipt # _____ CDP #

IF THE INFORMATION IN THE APPLICATION FOR AN IMPROVEMENTS PERMIT IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENTS PERMIT AND AUTHORIZATION TO CONSTRUCT MAY BECOME INVALID. **The permit is valid for either 60 months or without expiration depending upon documentation submitted.** **(complete site plan = 60 months; complete plat = without expiration)**

APPLICANT INFORMATION

Joseph & Karon Boggs — Applicant
19092 Musick Dr., Bristol, VA 24202 — Address
(Home 276-669-6174) — Home & Work Phone

Joe Bryan — Owner
P.O. Box 963, Oxford, NC 27565 — Address
_____ — Home & Work Phone

PROPERTY INFORMATION date originally deeded & recorded _____

Lot 20, Dabney Woods Ln. — Street Address
Dabney Woods Sub. — Subdivision Name
Lot 20 — Section/Phase/Lot#

Directions to Site _____

Lot Size 1.63 acres

DEVELOPMENT INFORMATION
☒ New Single-Family Residence
☐ Expansion of Existing System
☐ Repair to Malfunctioning Sewage Disposal System
☐ Non-Residential Type of Structure
☐ Recertification
☐ Home ☐ Mobile Home

Residential Specifications
Maximum number of occupants/bedrooms: 2 / 4
If expansion: Current number of bedrooms: _____
Will there be a basement? ☒ yes ☐ no
Plumbing fixtures in Basement ☒ yes ☐ no
☒ Single Family ☐ Multi Family

Non-Residential Specifications:
Type of business: _____ Total Square footage of Building: _____
Maximum number of employees: _____ Maximum number of seats: _____

Water Supply: Are there any existing wells, springs, or existing waterlines on this property? ☐ yes ☒ no

☐ New well ☐ Existing Well ☐ Community Well ☒ Public Water ☐ Spring ☐ Abandonment

If applying for Authorization to Construct: Please Indicate Desired System Type(s):

☐ Accepted ☐ Alternative ☐ Conventional ☐ Innovative ☐ Other_____ ☐ Any

The Applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer to any question is "yes", applicant must attach supporting documentation.

☐ Existing	☐ No	☐ Unknown	☐ Yes	Does the site contain any jurisdictional wetlands?
☐ Existing	☐ No	☐ Unknown	☐ Yes	Does the site contain any existing wastewater systems?
☐ Existing	☐ No	☐ Unknown	☐ Yes	Is any wastewater going to be generated on the site other than domestic sewage?
☐ Existing	☐ No	☐ Unknown	☐ Yes	Is the site subject to approval by any other public agency?
☐ Existing	☐ No	☐ Unknown	☐ Yes	Are there any easements or right of ways on this property?
☐ Existing	☐ No	☒ Unknown	☐ Yes	Has any grading, removal or addition of soil been done to this property?

I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

Joseph Boggs / Karon Boggs — **Property owner's or owner's legal representative** signature** (required)
October 14, 2021 — **Date**
**Must provide documentation to support claim as owner's legal representative.

GRANVILLE VANCE public health

Construction Authorization

Vance County Health Dept
Environmental Health
115 Charles Rollins Road
Henderson, NC 27536
Phone: (252) 492-5263 Fax: (252) 492-2361

For Office Use Only

*CDP File Number: 364752 - 1
County ID Number: 0407C02013
Evaluated For: NEW

PERMIT VALID UNTIL: 10/27/2026

☐ Open Pump System Sheet

Applicant:	Joseph & Karon Boggs	Property Owner:	Joe Bryan
Address:	19092 Musick Dr	Address:	PO Box 963
City:	Bristol	City:	Oxford
State/Zip:	NC 24202	State/Zip:	NC. 27565
Phone #:	cell :(276) 669-6741	Phone #:	

Property Location & Site Information

Address/Road #: Dabney Woods Ln Henderson, NC 27537
Subdivision: Dabney Woods Phase: NEW Lot: 20

Directions:
See attachment

Structure: SINGLE FAMILY
# of Bedrooms: 4
# of People: 2
*Water Supply: PUBLIC

System Specifications

*Site Classification: Provisionally Suitable
Design Flow: 480
Soil Application Rate: 0.3000
*System Classification/Description: TYPE III G. OTHER NON-CONV. TRENCH SYSTEMS
*Proposed System: 25% REDUCTION

Minimum Trench Depth: 18 Inches
Maximum Trench Depth: 22 Inches
Minimum Soil Cover: 6 Inches
Maximum Soil Cover: _____ Inches
*Distribution Type: GRAVITY - PARALLEL (eq. d-box)

Nitrification Field: 1200 Sq. ft.
No. Drain Lines: 5
Total Trench Length: 400 ft.
Trench Spacing: 9 - _____
Trench Width: 3 - _____
Aggregate Depth: _____ inches

◯ Inches O.C.
(X) Feet O.C.
◯ Inches
(X) Feet

Septic Tank: 1,000 Gallons
Pump Required: ◯ Yes ◯ No (X) May Be Required
Pump Tank: _____ Gallons
Grease Trap: _____ Gallons
Septic Tank Installer Grade Level Required: ◯ I (X) II ◯ III ◯ IV

The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements.

***Permit Conditions:**

SEPTIC TANK SHOULD BE PLACED AS HIGH AS POSSIBLE FOR GRAVITY INITIAL AND REPAIR.
GULLY MUST BE AVOIDED WITH LINES. PUMP MAY BE REQUIRED DEPENDING ON TANK PLACEMENT.

The Authorization for Wastewater System Construction shall be valid for a period equal to the period of validity of the Improvement Permit and may be issued at the same time the Improvement Permit issued (NCGS 130A-336(b)). If the installation has not been completed during the period of validity of the Construction Permit, the information submitted in the application for a permit or Construction Authorization shall become invalid, and may be suspended or revoked (.1937(g)). Ther person owning or controlling the system shall be responsible for assuring compliance with the laws, rules, and permit conditions regaurding system location, installation, operation, maintenance, monitoring, reporting

Authorized State Agent: Adcock, Jordan
Date of Issue: 10/27/2021

◯ Hand Drawing ◯ Import Drawing

****Site Plan/Drawing attached.****
Total Time : (HH:MM) _____

GRANVILLE VANCE public health

IMPROVEMENT PERMIT OFFICE

Vance County Health Dept
Environmental Health
115 Charles Rollins Road
Henderson, NC 27536
Phone: (252) 492-5263 Fax: (252) 492-2361

For Office Use Only

*CDP File Number
County ID Number: 0407C02013
Evaluated For: NEW

PERMIT VALID UNTIL: 10/27/2026

***NOTE TO INSPECTIONS DIVISION:** Building Permits cannot be issued with this Improvement Permit.

Applicant:	Joseph & Karon Boggs
Address:	19092 Musick Dr
City:	Bristol
State/Zip:	VA 24202
Phone #:	cell :(276) 669-6741

Property Owner:	Joe Bryan
Address:	PO Box 963
City:	Oxford
State/Zip:	NC. 27565
Phone #:	

Property Location & Site Information

Address/Road #: Dabney Woods Ln Henderson, NC 27537
Subdivision: Dabney Woods Phase: NEW Lot: 20
Structure: SINGLE FAMILY
# of Bedrooms: 4
# of People: 2
*Water Supply: PUBLIC

Directions
See attachment

System Specifications

Initial System

*Site Classification: Provisionally Suitable
Design Flow: 480
Soil Application Rate: 0.3000
*System Classification/Description:
TYPE III G. OTHER NON-CONV. TRENCH SYSTEMS
*Proposed System:
25% REDUCTION

Minimum Trench Depth: 18 Inches
Maximum Trench Depth 22 Inches
Septic Tank: 1000 Gallons
Pump Required ◯ Yes ◯ No (X) May Be Required
Pump Tank: _____ Gallons

Repair System Required: (X) Yes ◯ No ◯ No, but has Available Space

Repair System

*Site Classification: Provisionally Suitable
Soil Application Rate: 0.300
*System Classification/Description:
TYPE III G. OTHER NON-CONV. TRENCH SYSTEMS
*Proposed System:
25% REDUCTION

Minimum Trench Depth: 18 Inches
Maximum Trench Depth 22 Inches
Pump Required: ◯ Yes ◯ No (X) May Be Required
Pump Tank: _____ Gallons

No grading or construction activity is allowed in areas designated for system and repair without approval of Health Departmen

***Site Modifications**
WATER LINE SHOULD BE PLACED 10FT FROM SEPTIC FIELD.

The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements.

***Permit Conditions**
SEPTIC TANK SHOULD BE PLACED AS HIGH AS POSSIBLE FOR GRAVITY INITIAL AND REPAIR.
GULLY MUST BE AVOIDED WITH LINES. PUMP MAY BE REQUIRED DEPENDING ON TANK PLACEMENT.

The Department and Local Health Department may impose conditions on the issurance and may revoke the permits for failure of the system to satisfy the conditions, the rules, or this article. This permit is subject to revocation it the site plan, plat, or intended use changes (NCGS 130A-335(f)). The person owning or controlling the system location, installing, operation, maintenance, monitoring, reporting, and repair (1938(b)).

Authorized State Agent: Adcock, Jordan Date of Issue: 10/27/2021

✓ Hand Drawing ◯ Import Drawing ****Site Plan/Drawing attached.****

Total Time: (HH:MM) ____ : ____

Granville-Vance Dist. Health Department
Environmental Health

Pin 0407C02013 Permit Number 364752

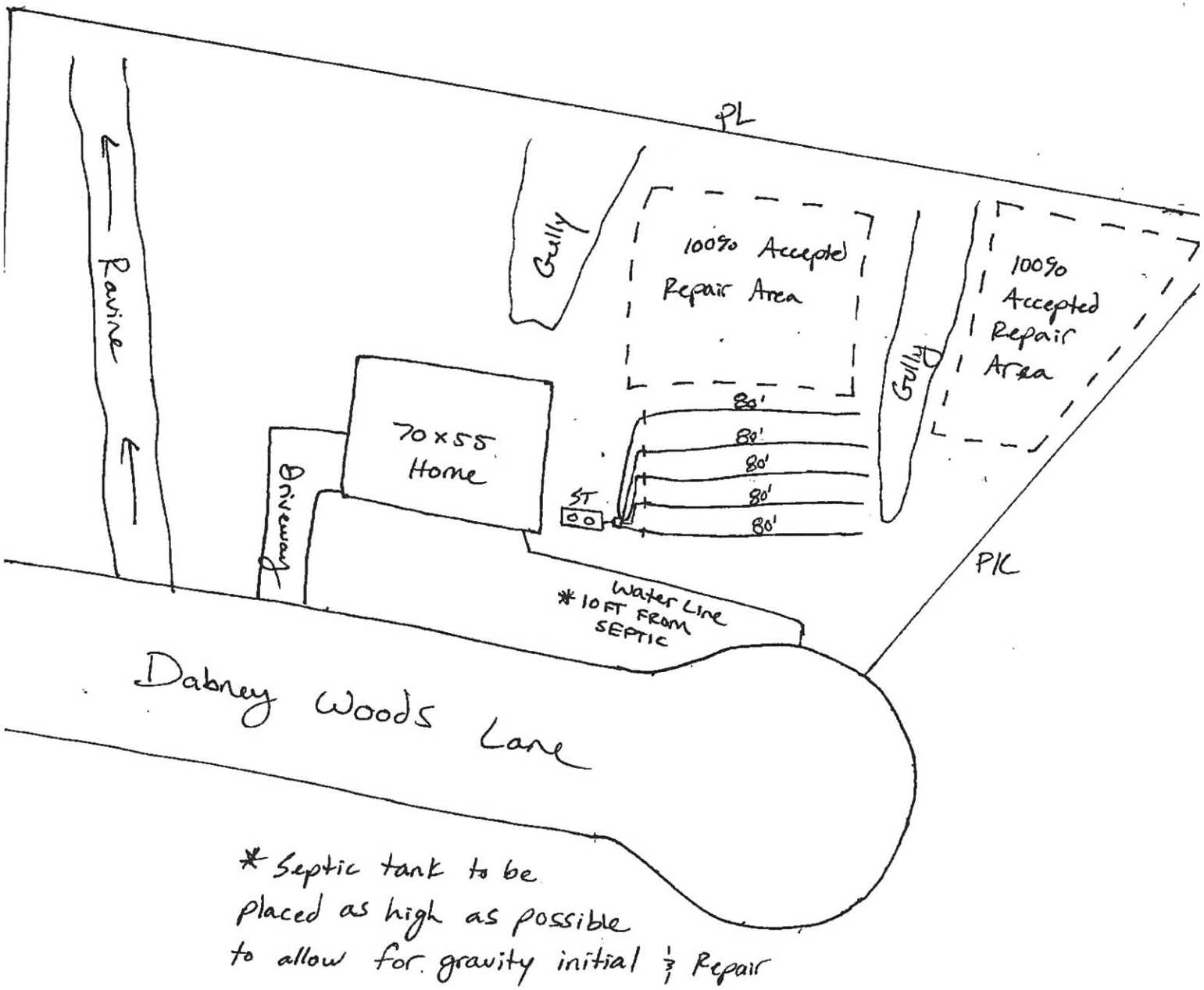
✓ Improvement Permit ✓ Construction Authorization

SITE SKETCH
ON-SITE / WELL

Joseph & Karon Boggs — Applicants Name
Dabney Woods Ln — Address
Dabney Woods Lot 20 — Subdivision – Section – Lot

Authorized State Agent
10/27/2021 — Date

System components represent approximate contours only. The contractor must flag the system prior to beginning the installation to ensure that proper grade is maintained.



PERK/RECERT AUTHORIZATION

Issue Date: October 14, 2021

PROJECT DESCRIPTION: perk test

PROJECT #
ZPERK-21-1832

(252) 738-2080
Inspections

Vance County Planning & Development

156 Church St, Suite 3
Henderson, NC 27536

(252) 738-2080 Voice
(252) 738-2089 Fax

LOCATION
0000 Dabney Woods Ln.
Henderson, NC 27537

LEGAL
Dabney Woods

CONTRACTOR

Owner

OWNER

Real Estate Developers Inc
C/O J Bryan
P O Box 963
Oxford, NC 27565

INFORMATION

Building - Bathrooms	2.5
Building - Bedrooms	4
Lot Number	20
Parcel ID	0407C02013

FEES **TOTAL = $ 25.00**

Perk Test Only Permit	$ 25.00

NOTICES

THIS IS NOT A ZONING PERMIT! This determination confirms that the proposed use for the site is a permitted use as per the zoning regulations; however this document is not to be substituted for a zoning permit. This determination expires 6 months from the issuance date.

The applicant may now proceed with having the Health Department determine the suitability for on-site wastewater disposal or for a recertification if an existing system is present. Once the Health Department permits are received the applicant shall return to the Planning and Development Department to obtain final zoning permits and building permits. Any work commenced prior to having those permits is grounds for enforcement and/or a fine.

ISSUED BY

Faye R Middleton — 10/14/21

Issuer's Signature — Date