GRANVILLE VANCE public health

IMPROVEMENT PERMIT

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	389040 - 1
County ID Number:	0312D01017
Evaluated For:	NEW

PERMIT VALID UNTIL: 04/20/2028

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

Applicant:	Stephen Shepherd
Address:	3214 Tw Wilkins Rd
City:	Stem
State/Zip:	NC 27581
Phone #:	cell :(919) 685-5931

Property Owner:	Stephen Shepherd
Address:	3214 Tw Wilkins Rd
City:	Stem
State/Zip:	NC. 27581
Phone #:	cell :(919) 685-5931

Property Location & Site Information

Address: Waterstone Ln Henderson, NC 27537 Subdivision: The Peninsula Block/Phase: NEW Lot: 26

Directions @ Kerr Lake

See attachment

Road #:

Structure: SINGLE FAMILY

# of Bedrooms: 3

# of People: 3

*Water Supply: NEW WELL

System Specifications

Initial System

*Site Classification: Provisionally Suitable

Design Flow: 360

Soil Application Rate: 0.3000

*System Classification/Description:
TYPE III B. SYSTEM W/SINGLE EFFLUENT PUMP

*Proposed System:
25% REDUCTION

Minimum Trench Depth: _____ Inches

Maximum Trench Depth: 24 Inches

Septic Tank: 1000 Gallons

Pump Required (X) Yes ( ) No ( ) May Be Required
42 gpm

Pump Tank: 1000 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 B. SYSTEM W/SINGLE EFFLUENT PUMP

*Proposed System: 50% REDUCTION

Minimum Trench Depth: _____ Inches

Maximum Trench: Depth: 24 Inches

Pump Required: (X) Yes ( ) No ( ) May Be Required

Pump Tank: _____ Gallons

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

***Site Modifications**

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**

OFF SITE SYSTEM

CDP File Number: 389040 County ID Number: 0312D01017

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: Hedrick, Chris Date of Issue: 04/20/2023

Total TIme: (HH:MM)

○ Hand Drawing ○ Import Drawing ****Site Plan/Drawing attached.****