



IMPROVEMENT PERMIT

Granville County Health Dept
Environmental Health
101 Hunt Drive
Oxford, NC 27565
Phone: (252) 492-5263 Fax: (252) 492-2361

For Office Use Only

*CDP File Number 390922 - 1
County ID Number: 182400909091
Evaluated For: NEW

PERMIT VALID UNTIL: 04/28/2028

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

Applicant: Sumner Construction
Address: PO Box 1011
City: Youngsville
State/Zip: NC 27596
Phone #: home: (919) 422-5713 cell : (919) 422-5713

Property Owner: Churchill Associates
Address: 986 Browning Pl
City: Youngsville
State/Zip: NC. 27596
Phone #: home: (919) 422-5713 cell : (919) 422-5713

Property Location & Site Information

Address: 986 Browning Place Youngsville, NC 27596 Subdivision: The Retreat at Merriweather Block/Phase: NEW Lot: 8

Directions

Road #:
Structure: SINGLE FAMILY
of Bedrooms: 4
of People:
*Water Supply: NEW WELL

System Specifications

Initial System

*Site Classification: Provisionally Suitable

Design Flow: 480

Soil Application Rate: 0.3000

Minimum Trench Depth: 18 Inches

Maximum Trench Depth: 20 Inches

*System Classification/Description:

TYPE III G. OTHER NON-CONV. TRENCH SYSTEMS

Septic Tank: 1000 Gallons

Pump Required ☐ Yes ☒ No ☐ May Be Required

*Proposed System:

25% REDUCTION

Pump Tank: Gallons

Repair System Required: ☒ 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

Minimum Trench Depth: 18 Inches

Maximum Trench Depth: 20 Inches

Pump Required: ☒ Yes ☐ No ☐ May Be Required

*Proposed System: 25% REDUCTION

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

Initial system laid out in field by REHS. Drain lines min. 10' off property lines. ANY part of septic min. 50' off creek/stream. Min. 50' off wells.

CDP File Number: 390922

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The Department and Local Health Department may impose conditions on the issuance 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 if 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:

Bullock, Will



Date of Issue:

04/28/2023

Total Time: (HH:MM)



Hand Drawing



Import Drawing

****Site Plan/Drawing attached.****

_____ : _____



Construction Authorization

Granville County Health Dept
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☐ Open Pump System Sheet

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Property Owner: Churchill Associates
Address: 986 Browning Pl
City: Youngsville
State/Zip: NC, 27596
Phone #: home: (919) 422-5713 cell: (919) 422-5713

Property Location & Site Information

Address/Road #: 986 Browning Place
Youngsville, NC 27596
Subdivision: The Retreat at Merriweather
Phase: NEW Lot: 8
Directions:
Structure: SINGLE FAMILY
of Bedrooms: 4
of People:
*Water Supply: NEW WELL

System Specifications

*Site Classification: Provisionally Suitable
Design Flow: 480
Soil Application Rate: 0.3000
Minimum Trench Depth: 18 Inches
Maximum Trench Depth: 20 Inches
Minimum Soil Cover: Inches
Maximum Soil Cover: Inches
*System Classification/Description:
TYPE III G. OTHER NON-CONV. TRENCH SYSTEMS
*Proposed System:
25% REDUCTION
*Distribution Type: GRAVITY - PARALLEL (eq. d-box)
Nitrification Field: 1200 Sq. ft.
No. Drain Lines: 3
Total Trench Length: 405 ft.
Trench Spacing: 9 -
Trench Width: 3 -
Aggregate Depth: inches
Pump Required: ☐ Yes ☒ No ☐ May Be Required
Septic Tank: 1,000 Gallons
Pump Tank: Gallons
Grease Trap: Gallons
Septic Tank Installer
Grade Level Required: ☐ I ☒ II ☐ III ☐ IV
☐ Inches O.C.
☒ Feet O.C.
☐ Inches
☒ Feet

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:

Initial system laid out in field by REHS. Drain lines min. 10' off property lines. ANY part of septic min. 50' off creek/stream. Min. 50' off wells.

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)). The person owning or controlling the system shall be responsible for assuring compliance with the laws, rules, and permit conditions regarding system location, installation, operation, maintenance, monitoring, reporting

Authorized State Agent: Bullock, Will *Will Bullock*

Date of Issue: 04/28/2023

☒ Hand Drawing ☐ Import Drawing

Site Plan/Drawing attached.

Total Time : (HH:MM)

Greenville County Health Department
Environmental Health

Permit Number P39092

No. _____

☒ Improvement Permit

4 bedroom

☒ Construction Authorization

S-284141

W-284141

Site Sketch

Retreat@mcminnva.com

Summer Const.

Applicant's Name

Wade W. Deaton

Authorized State Agent

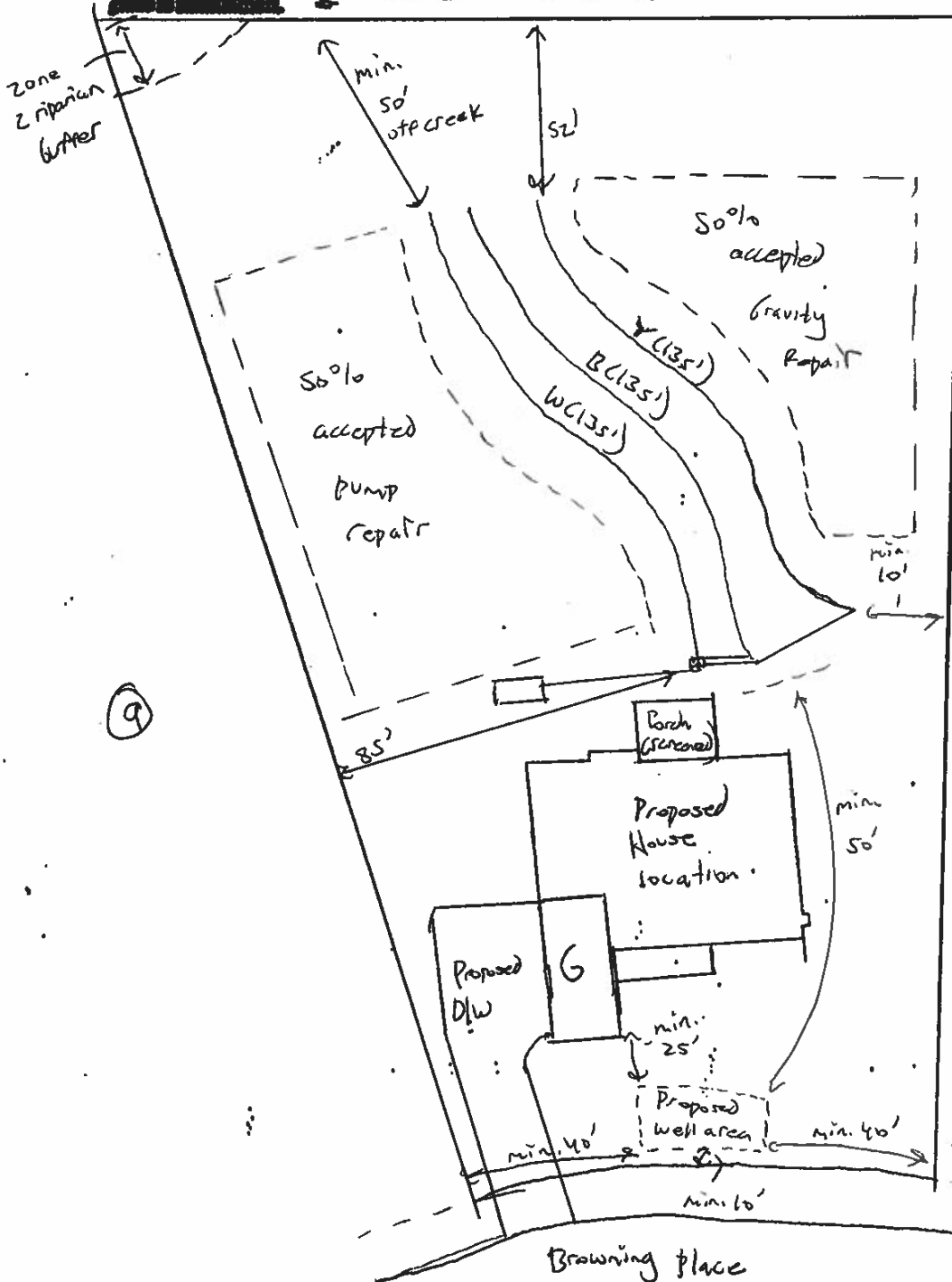
986 Browning Pl. / lot #8

Subdivision - Section - Lot

4/28/23

Date

Before any construction begins, the contractor must log the system prior to beginning the installation to insure it meets the requirements.





Well Construction Permit

Granville County Health Dept
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Oxford NC, 27565
Phone: (252) 492-5263 Fax: (252) 492-2361

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*CDP File Number 390922

PIN Number: 182400909091

Tax Lot #: 8 Tax Block #: _____

Evaluated For: _____

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Property Owner: Churchill Associates
Address: 986 Browning Pl
City: Youngsville
State/Zip: NC / 27596
Phone #: H: (919) 422-5713 C: (919) 422-5713

Applicant: Sumner Construction
Address: PO Box 1011
City: Youngsville
State/Zip: NC / 27596
Phone #: H: (919) 422-5713 C: (919) 422-5713

Property Location & Site Information

Address/Road #: _____ Subdivision: The Retreat at Merriweather Phase: _____ Lot: 8
986 Browning Place
Youngsville NC, 27596
*Proposed use of Well: _____
If Other: _____
Applicant Email: bobby@sumnerconstruction.com
Owner Email: _____

Directions: _____

Well Contractor Information

Drilling Contractor: _____ Driller Registration: _____

Permit Conditions

*Permit Conditions

Keep proposed well min. 50' off any part of septic (including neighboring lots). Min. 25' off structural foundations. Min. 10' off front property line. Well driller responsible for maintaining all setbacks.

Well location, construction and protection must meet all state and local regulations and must be inspected and approved by an authorized representative of the Local Health Department. The permit may be revoked at any time for failure to comply with existing regulations. The siting of approved well construction area(s) by the Health Department is to provide protection from the known possible sources of contamination. The approved well area(s) may not be changed without permission from an authorized representative of the Local Health Department. Issuance of this well permit does not guarantee water quality or adequate water production from the well once it is installed or repaired.

*Issued By: Bullock, Will

*Date of Issue: 04/28/2023

Authorized State Agent: Will Bullock

Owner/Applicant: Churchill Assoc / Bobby Sumner (Sumner Const.)

☒ Hand Drawing ☐ Import Drawing

****Site Plan/Drawing attached.****

GRANVILLE VANCE

public health

Well Construction Permit

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PIN Number: 182400909091

Tax Lot #: 8

Tax Block #: _____

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