

GRANVILLE VANCE

public health

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 378457 - 1
County ID Number: 182300933178
Evaluated For: NEW

PERMIT VALID UNTIL: 04/20/2028

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

Applicant: Norman Dillard
Address: 14112 Bold Run Hill
City: Wake Forest
State/Zip: NC 27587
Phone #: home: (919) 369-4128

Property Owner: Abshire Ventures
Address: 7233 Thompson Mill Rd
City: Wake Forest
State/Zip: NC. 27587
Phone #:

Address: Wake Forest, NC 27587

Property Location & Site Information

Subdivision: Hope Valley Block/Phase: NEW Lot: 16

Directions

Road #:

Structure: SINGLE FAMILY

of Bedrooms: 4

of People: 4

*Water Supply: NEW WELL

Initial System

*Site Classification: Provisionally Suitable

Design Flow: 480

Soil Application Rate: 0.3000

*System Classification/Description:

TYPE III B. SYSTEM W/SINGLE EFFLUENT PUMP

*Proposed System:

HORIZONTAL PPBPS

System Specifications

Minimum Trench Depth: 16 Inches

Maximum Trench Depth: 18 Inches

Septic Tank: 1000 Gallons

Pump Required ☒ Yes ☐ No ☐ May Be Required

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

*Proposed System: HORIZONTAL PPBPS

Minimum Trench Depth: 16 Inches

Maximum Trench: Depth: 18 Inches

Pump Required: ☒ 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**

Horizontal T&J Panel system & repair. Refer to soil scientist site sketch and flagging in field. Tap chart attached. NO FOUNDATION DRAIN OR PERMIT IS VOID. Stay off all easements. Min. 50' off wells.

Hope Valley, Lot 16

S&EC Project # 12683.S7

Date: 3/29/2023

LINE #	FLAG COLOR	BS (ft)	HI (ft)	FS (ft)	ELEVATION (ft)	FLAGGED LINE LENGTH (ft)	DESIGN LINE LENGTH (ft)	PANELS PER TRENCH
TBM		22.00			100.00			
INSTR. 1			122.00					
	unflagged line			3.00	119.00	70	70	16
1	PINK			3.60	118.40	70	70	16
2	BLUE			4.80	117.20	75	70	16
3	YELLOW			5.70	116.30	77	70	16
4	WHITE			6.90	115.10	85	0	0
5	RED			8.70	113.30	85	0	0
		5.0	105.0					
6	ORANGE			4.00	101.00	73	60	14
7	YELLOW			5.60	99.40	130	60	14
					99.40		60	14
8	BLUE			8.00	97.00	53	50	12
9	WHITE			10.20	94.80	30	30	7
10	YELLOW			12.00	93.00	30	30	7

SPLIT

Total 778 570

System	LINE LENGTH (ft)	LTAR GPD/FT ²	SOIL SYSTEM TYPE	LTAR GPD/FT ²	SYSTEM DRAIN TYPE	DISTRIBUTION	DESIGN FLOW (GPD)	TOTAL # OF PANELS PER SYSTEM
	280	0.300	.1956 (3)(a)(ii)	0.300	HORIZONTAL PANEL BLOCK	PRESSURE MANIFOLD	480	64
Repair	290	0.300	.1956 (3)(a)(ii)	0.300	HORIZONTAL PANEL BLOCK	PRESSURE MANIFOLD	480	68

- Notes:**
- **TBM ground @ proposed septic tank location and north west property corner
 - **TBM is assumed to be 100.00'.
 - **All measures in feet.
 - **Nitrification lines are demonstrated on contour via colored pin flags.
 - **BS, FS indicate rod readings.
 - **Some flagged lines may be shown longer in the field.

*File #: 378457 - 2
PIN #: 182300933178
Tax Lot #: 16
Tax Block #:

WELL CONSTRUCTION RECORD

Owner: Abshire Ventures
7233 Thompson Mill Rd
Wake Forest, NC 27587

Directions

WELL HEAD CONSTRUCTION

Drilling Contractor: VAN ELLIOTT
Driller Registration: 3104
Date Drilled: 03/05/2024
Use of Well: SINGLE FAMILY

Total Depth: 540 Ft.
Static Water Level: 40 Ft.
Replacement Well: NO

Yield: 2 gpm

Water Zone: 1) Ft. 2) Ft.
3) Ft. 4) Ft.

Disinfection Type: GRANULAR Amount: 16oz

Location:

Latitude:

Longitude:

Enclosure	☐ Yes	☐ No	☒ N/A
Enclosure Floor	☐ Yes	☐ No	☒ N/A
Access Port	☐ Yes	☐ No	☒ N/A
Vent:	☒ Yes	☐ No	☐ N/A
Sample Tap	☒ Yes	☐ No	☐ N/A
Back Flow	☐ Yes	☒ No	☐ N/A
Tee (jet)	☐ Yes	☐ No	☒ N/A
Suction Line	☐ Yes	☐ No	☐ N/A
Temporary	☐ Yes	☐ No	☒ N/A
Well ID Plate	☒ Yes	☐ No	☐ N/A
Pump ID Plate	☒ Yes	☐ No	☐ N/A

EHS: N/A

Issue Date: 04/02/2024

Casing: Depth: 63 Ft. Thickness: 6.250 In. Comments:
Diameter: 6 In. Top of Casing: 12 In.
Material: SDR 26

Grout:

From	Depth	To	Material	Method
From	0	To 20	Ft. BENTONITE	POUR
From	0	To	Ft. N/A	N/A

* Liner Date: From 0 To Ft.

Grout:

From	Depth	To	Material	Method
From	0	To	Ft. N/A	N/A

Issued by: N/A

Date of Issue: 04/02/2024

This well was constructed, repaired or abandoned in compliance with the well permit and in accordance with 15A NCAC 02C .0100, .0300.
The well owner shall not place potential sources of groundwater contamination closer to the well than the separation distances specified
in 15A NCAC 02C .0100, .0300.

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OPERATION PERMIT

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County ID Number: 182300933178

Evaluated For: NEW

Property Owner: Abshire Ventures
Owner Address: 7233 Thompson Mill Rd

City: Wake Forest

State/Zip: NC/ 27587

Phone #:

Address: Wake Forest, NC 27587

Road #:

Township:

Subdivision: Hope Valley

Phase : NEW Lot: 16

Structure: SINGLE FAMILY

of Bedrooms: 4

of People: 4

Water Supply: NEW WELL

Saprolite System?: ☐ Yes ☒ No

Pump Required?: ☒ Yes ☐ No

Design Flow: 480

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

Installer: HBM SEPTIC

Certification #: 43001

Specific System PPBPS

Installed:

STB:

PT:

Comments:

Septic Tank Date: _____

Pump Tank Date: _____

This system has been installed in compliance with applicable NC General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.

PERMIT CONDITIONS:

I. Performance: System shall perform in accordance with Rule .1301.

II. Monitoring: As required by Rule .1301.

III. Maintenance: Ground absorption sewage treatment and disposal systems shall be checked, and the contents of the septic tank removed, periodically from all compartments, to ensure proper operation of the system. The contents shall be pumped whenever the solids level is found to be more than 1/3 of the liquid depth in any compartment.

Other:

Subsurface Operator Required: ☐ Yes ☒ No

If yes, see attached sheet for additional operation conditions, maintenance and reporting.

Operation:

Other:

Authorized State Agent: N/A

Walter D. Vaughn

Date of Issue: 04/02/2024

Owner/Applicant: _____