PERMIT NUMBER 1116

GRANVILLE-VANCE DISTRICT HEALTH DEPARTMENT
IMPROVEMENT AND OPERATION PERMITS

COUNTY: Granville	TAX NO.	TYPE OF ESTABLISHMENTS			*THIS PERMIT SHALL BE ACCOMPANIED BY A LAYOUT SHOWN ON A PLAT, INCLUDING SYSTEM REQUIREMENTS.
	LOT SIZE	RESIDENCE ✓ BUSINESS ___ OTHER ___	NUMBER OF BEDROOMS: 4	NUMBER OF OCCUPANTS: 8 Max	
APPLICANT'S NAME & ADDRESS: Wynn Construction, Inc. 2550 Capitol Dr. STE. 105 Creedmoor, NC 27522		WATER SUPPLY WELL ☑ PUBLIC ☐	INITIAL INSTALLATION	REPAIR	
		TYPE OF WASTEWATER SYSTEM	Accepted	Same	
PROPERTY ADDRESS/LOCATION: 955 Weatherby Ln.		DESIGN FLOW:	480 gpd		*THIS IMPROVEMENT PERMIT IS SUBJECT TO REVOCATION IF THE INTENDED USE CHANGES FROM THOSE SHOWN ON THE IMPROVEMENT PERMIT. CHANGES SHALL REQUIRE HEALTH DEPARTMENT APPROVAL.
		LTAR:	.03 gpd/ft²		
SUBDIVISION: Weatherby		ABSORPTION AREA:	1200 ft²		
LOT NUMBER: 1		TRENCH WIDTH	3'		
REFERENCE SKETCH (SEE PLAT FOR DETAILS)		TRENCH DEPTH:	20-22"		
○ see soil scientist flagging in field (See attached) ~~of construction meeting required~~ ~~after house is~~ ~~staked~~ ○ maintain all setbacks! ○ 10' off property line with initial system ○ Do not install/call for inspection in wet conditions		TRENCH SPACING:	9' o.c.		
		TOTAL TRENCH LENGTH:	400' accepted		
		NUMBER OF TRENCHES:	(4) 100' lines		
		GRAVEL / ACCEPTED:	Accepted		PERMIT VALID FOR: 5 YEARS YES NO
		TANK SIZE:	1000 gallon		
		PUMP TANK SIZE:	1000 gallon		NO EXPIRATION YES NO
		DISTRIBUTION DEVICE:	pressure manifold		

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IMPROVEMENT PERMIT DATE: 6-19-18

FOR: Wynn Construction Inc.

ISSUED BY: [signature]

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CONSTRUCTION AUTHORIZATION FOR IMPROVEMENT PERMIT# 1116

Unless otherwise indicated, the same conditions above apply regarding system type, layout, location and installation requirement.

(The wastewater system cannot be installed until authorization is signed)

Comments: Contractor to establish + follow contour

Date: 6-27-18 Environmental Health Specialist: [signature]

Construction Authorization Addendum ☑ Yes ☐ No

OPERATION PERMIT DATE: 10-5-18 (tanks & lines) - WTB
11-2-18 (PA) WTB

SYSTEM INSTALLED BY: Blackley

ISSUED BY: [signature]

PERFORMANCE, MONITORING, MAINTENANCE AND OPERATION AS REQUIRED BY RULE .1961

Granville - Vance District Health Department
Environmental Health
Well Construction Permit

2549

Owner/Applicant: Wynn Construction, Inc. Date: 6-19-18
Address or Location of Property: 955 Weatherby Ln

Subdivision & Lot #: Weatherby lot #1 Septic Permit #: 1116
Zoning Permit #: 20449 Environmental Health Specialist:

This well permit is to locate and site the area that a private groundwater well may be established on the property listed above by the Environmental Health Specialists of Granville County. If one does not locate the well in the approved area and complete the well as specified by the 15A NCAC .02C rules, then permits may be revoked. At completion of drilling of the well, grout must be witnessed by EHS and a well log turned into Environmental Health.

Minimum Setbacks: (these are the main setbacks, but not all required setbacks)

Setback from property lines – 10 ft
Setback from structural foundations – 25 ft
Setback from septic tank and drain field, including repair area – 100 ft
Setback from ponds, lakes or other bodies of water – 50 ft

Site Sketch:

See attached

Conditions: -Stay off 30' right of way preservation
-Stayoff signeasement/5' drainage easement
-50' (min) off initial/repair with well
-25' off house
-10' off all property lines
-maintain all setbacks
Authorized Agent:
Date: 6-19-18

 # 1 Well Grout: (Circle or write in)
Witnessed: (Yes) or No EHS Agent: Adam Currin
Date: 7-11-18 Annular Space Open: (Yes) or No
Over reamed: (Yes) or No Depth Grouted: 204
Method: ____ Pump ✓ Poured ____ Pressure
Well Log received: (Yes) or No (EHS to Attach to Permit)
Driller Name: Southern Cert. # ____
Depth: 300 Casing Depth: 75 GPM: 15

As Built Drawing:

 # 2 Well Final: (Place a check mark when finalized)
Seal Present and Intact: ✓ Air Vent: ✓
Hose Spigot: ✓ Electrical Box: ✓
Pump Installer Tag: ✓ Well Installer Tag: ✓
All holes sealed: ✓ 12" above grade: ✓
Comments:

 # 3 Well Completion Permit: EHS
Date Completed: 7-2-18

 # 4 Water Samples Taken: Date:
EHS: **Results:**
Retest: **Results:**

Granville County Health Department
Environmental Health

Pin _____ Permit Number 1116 (septic)

___ Improvement Permit ___ Construction Authorization 2549 (well)

Site Sketch

Wynn construction Inc. — Applicants Name

Weatherby 1 (955 weatherby ln.) — Subdivision – Section – Lot

[signature] — Authorized State Agent

6-19-18 — Date

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

Key

+++ initial system

— repair lines

o proposed well location

o keep all drainlines min. 10' off property lines

o stay off easements w/ system & well