

PERMIT NUMBER **9294**

GRANVILLE-VANCE DISTRICT HEALTH DEPARTMENT IMPROVEMENT AND OPERATION PERMITS

COUNTY:	TAX NO.	TYPE OF ESTABLISHMENTS			*THIS PERMIT SHALL BE ACCOMPANIED BY A LAYOUT SHOWN ON A PLAT, INCLUDING SYSTEM REQUIREMENTS.
Granville	SR. NO.	RESIDENCE ☒ BUSINESS ☐ OTHER ☐	NUMBER OF BEDROOMS: 3	NUMBER OF OCCUPANTS: 6 MAX	
APPLICANT: Billy Ellington		WATER SUPPLY	WELL ☒ PUBLIC ☐	OTHER ☐	
APPLICANT'S NAME & ADDRESS:		TYPE OF WASTEWATER SYSTEM	INITIAL INSTALLATION	REPAIR	
PROPERTY ADDRESS/LOCATION:		DESIGN FLOW:	360 gpd		*THIS IMPROVEMENT PERMIT IS SUBJECT TO REVOCATION IF THE INTENDED USES CHANGE FROM THOSE SHOWN ON THE IMPROVEMENT PERMIT. CHANGES SHALL REQUIRE HEALTH DEPARTMENT APPROVAL.
3224 Old 75		LTAR:	.225 gpd/ft²		
SUBDIVISION:		ABSORPTION AREA:	1,200 ft²		
LOT NUMBER:		TRENCH WIDTH:	36"		
REFERENCE SKETCH (SEE PLAT FOR DETAILS) * Stay upslope as far as possible * Do not install when wet		TRENCH DEPTH:	18"		PERMIT VALID FOR 5 YEARS YES ☒ NO ☐
		TRENCH SPACING:	9' o.c.		
		TOTAL TRENCH LENGTH:	400'		
		NUMBER OF TRENCHES:	3		
		GRAVEL DEPTH:	N/A		NO EXPIRATION YES ☐ NO ☒
		TANK SIZE:	1000 gal		
		PUMP TANK SIZE:	N/A		
		DISTRIBUTION DEVICE:	D-Box		

***** IMPROVEMENT PERMIT DATE: **1/25/18** *****

FOR: **Billy Ellington**
ISSUED BY: **Adam Curran**

CONSTRUCTION AUTHORIZATION FOR IMPROVEMENT PERMIT# **9294**

Unless otherwise indicated, the same conditions above apply regarding system type, layout, location and installation requirements.
(The wastewater system cannot be installed until authorization is signed)

Comments: _____

Date: **1/25/18** Environmental Health Specialist: **Adam Curran**
Construction Authorization Addendum ☒ Yes ☐ No

OPERATION PERMIT DATE:

SYSTEM INSTALLED BY: _____
ISSUED BY: _____

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

PIN _____

Granville-Vance District Health Department

Permit Number S-9294
W-2434

Environmental Health

☒ **Improvement Permit**

☒ **Construction Authorization**

Site Sketch

Billy Ellington

Applicant's Name

Adrian Green

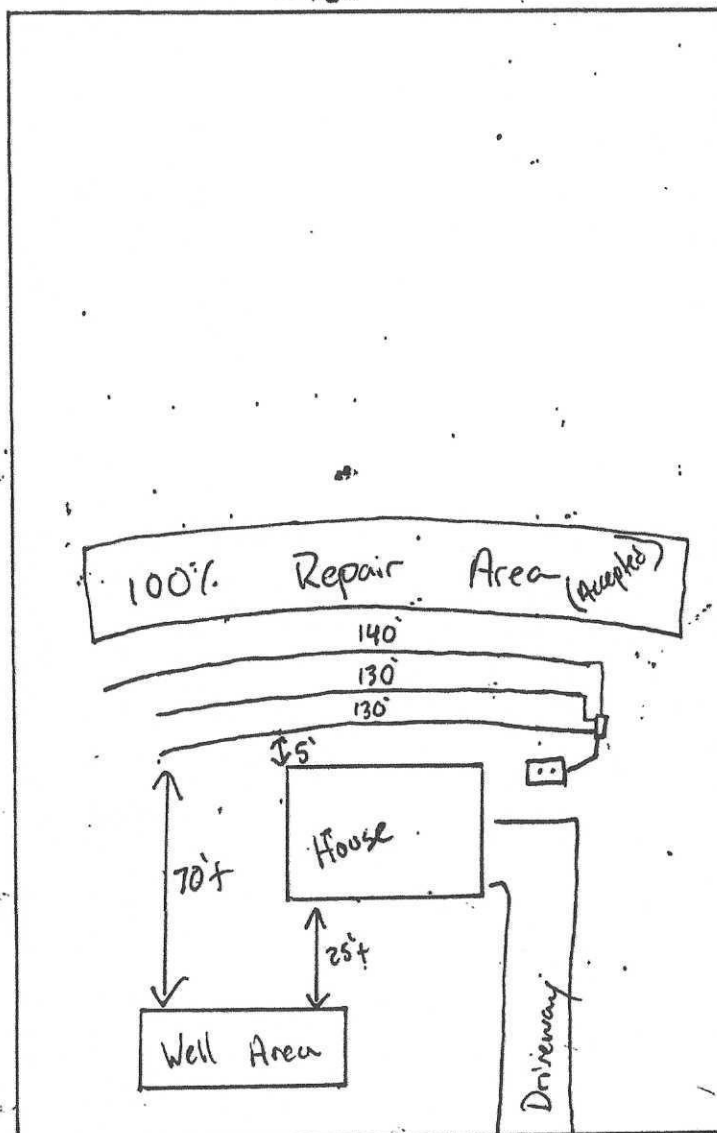
Authorized Signature

Old 75 (stem)

Address/Subdivision-Lot Number

1/25/18

Date



Old 75

Granville - Vance District Health Department

Environmental Health

2434

Well Construction Permit

Owner/Applicant: Billy Ellington Date: 1-25-18
 Address or Location of Property: Old 75 (stem)

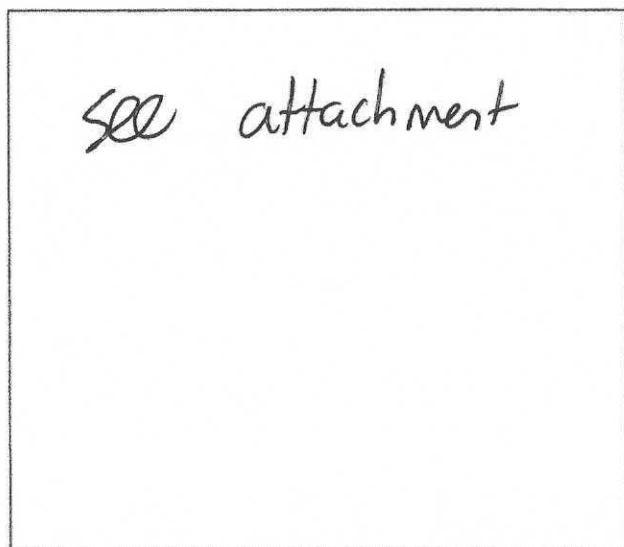
Subdivision & Lot #: _____ Septic Permit #: 9294
 Zoning Permit #: _____ Environmental Health Specialist: AWC

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

Site Sketch:



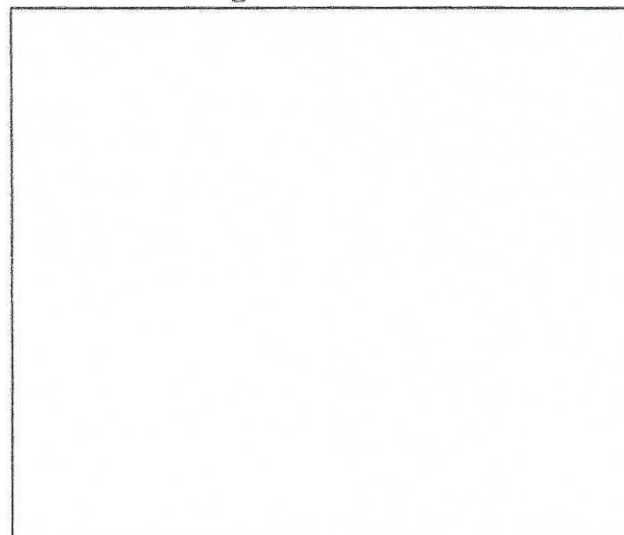
Conditions: _____

Authorized Agent: [Signature]
 Date: 1/25/18

1 Well Grout: (Circle or write in)

Witnessed: Yes or No EHS Agent: _____
 Date: _____ Annular Space Open: Yes or No
 Over reamed: Yes or No Depth Grouted: _____
 Method: _____ Pump _____ Poured _____ Pressure
 Well Log received: Yes or No (EHS to Attach to Permit)
 Driller Name: _____ Cert. # _____
 Depth: _____ Casing Depth: _____ GPM: _____

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: _____

4 Water Samples Taken: Date: _____
 EHS: _____ Results: _____
 Retest: _____ Results: _____

PIN _____

Granville-Vance District Health Department

Permit Number 5-9294
W-2434

Environmental Health

☒ Improvement Permit

☒ Construction Authorization

Site Sketch

Billy Ellington

Applicant's Name

[Signature]

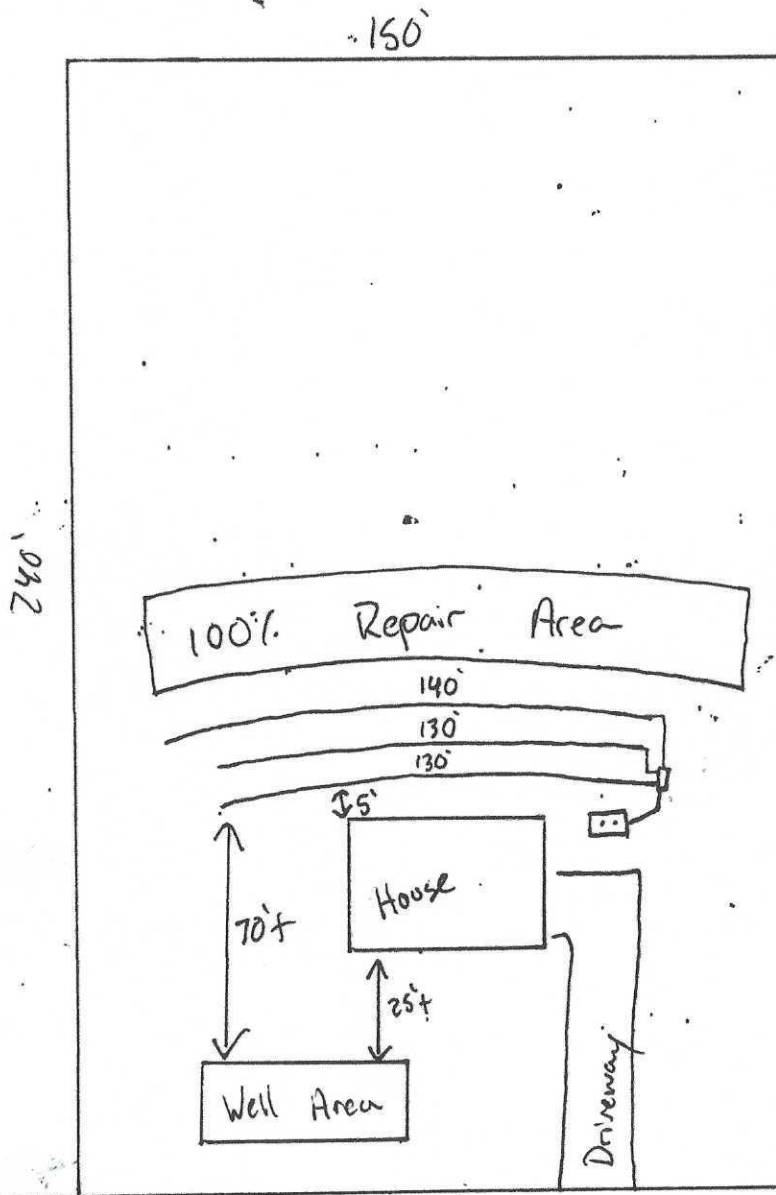
Authorized Signature

Old 75 (stem)

Address/Subdivision-Lot Number

1/25/18

Date



Old 75

Zoning Permit

GRANVILLE COUNTY

Granville, North Carolina
Granville County Development Services
122 Williamsboro Street, Oxford, North Carolina 27565
(919) 603-1331

Permit Number: 21477



OWNER: ELLINGTON BILLY J & SHIRLEY ZONING: AR-40
N

3224 OLD ROUTE 75

SUBDIVISION:

PARCEL NO.: 087808886175

LOT NO:

ISSUED TO Billy Ellington

BEDROOMS: 3

3224 Old Route 75

Stem, NC 27581

PERMIT DATE: 10/10/2019

PROJECT:

EXPIRATION DATE: 04/09/2020

SETBACKS:

Front: 50 feet

Left: 15 feet

Right: 15 feet

Rear: 25 feet

FEE: 95.00

Modular single-family dwelling. 1/2 acre or more of land disturbance requires the approval of a storm water plan. Preliminary site plan indicates 11,349 square feet of proposed land disturbance for this permit. A final survey will be required indicating all actual land disturbance before a certificate of occupancy (CO) is issued. A survey may be required to verify compliance with zoning setbacks. Lot created by Plat Book 47, Page 4.

I certify that all of the statements made in this application and any attached documents are true, complete and correct to the best of my knowledge and belief and are made in good faith.

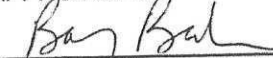
I understand that false information may be grounds for rejection of this application. Authorized County Representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

ZONING PERMIT EXPIRES IN SIX MONTHS FROM ISSUE DATE


Signature of Applicant or Owner

DATE: 10/10/2019

APPROVED BY:



Land Development Ordinance Administrator or Deputy

Zoning Permit

GRANVILLE COUNTY

Granville, North Carolina
Granville County Development Services
122 Williamsboro Street, Oxford, North Carolina 27565
(919) 603-1331
Permit Number: 21477

INSPECTIONS

HEALTH DEPT

COPY



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N
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ZONING PERMIT EXPIRES IN SIX MONTHS FROM ISSUE DATE

Billy J. Ellington
Signature of Applicant or Owner

DATE: 10/10/2019

APPROVED BY:

Bay B. B.
Land Development Ordinance Administrator or Deputy

Any changes made to this drawing/plan or to the subsequent setting of the structure or use herein are permitted without written approval from the Granville County Planning Department staff. Under this Zoning Permit void and subject to legal action per Section VIII-2, VIII-4 of the Granville County Zoning Ordinance.

permitted without written approval from the Granville County Planning Department shall render this Zoning Permit void and subject to legal action per Section VIII-2, VIII-4 of the Granville County Zoning Ordinance.

Billy J. Ellington and wife
Shirley N. Ellington
p. 14 - 27

Billy J. Ellington and wife
Shirley N. Ellington
p 8 14 - 27

James R. Wilson
Professional Land Surveyor
2173 Will Suitt Rd. - Creedmoor, N.C.
919-818-1022
jwsurvey@ix.netcom.com

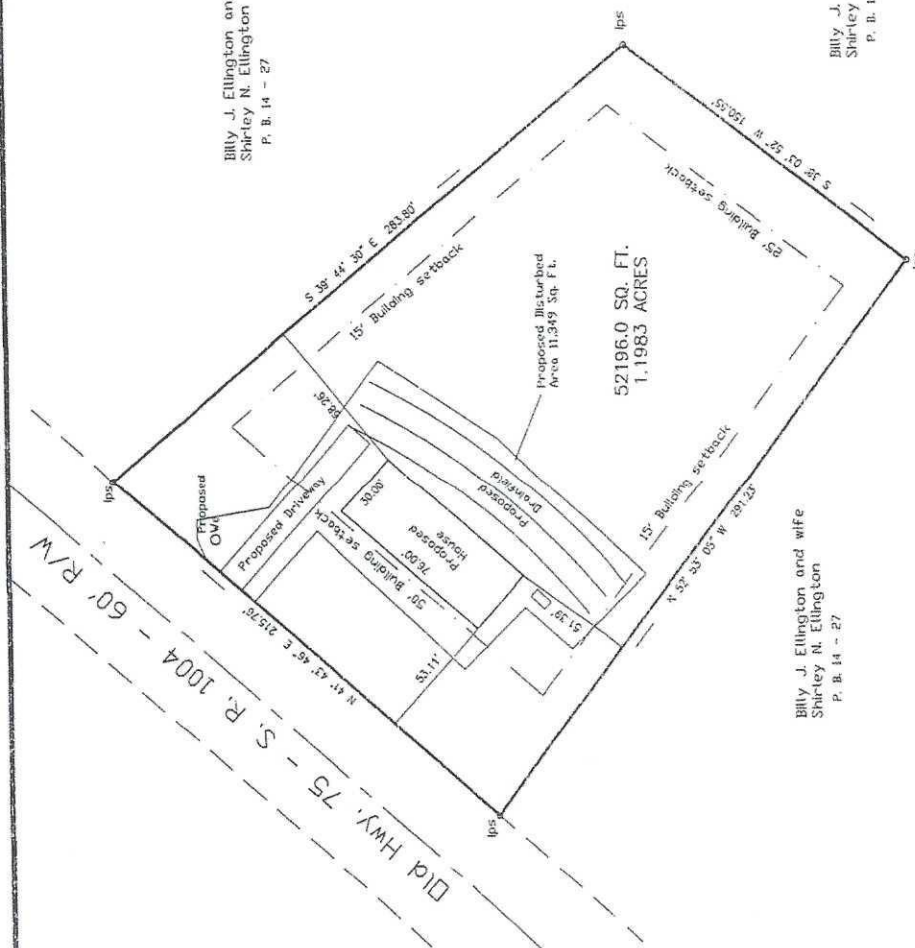
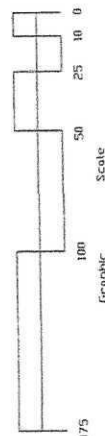
Danny R. Ellington and wife
Amy M. Ellington

Tolly Ho Township
Franklin County, North Carolina

Scale: 1"=50'

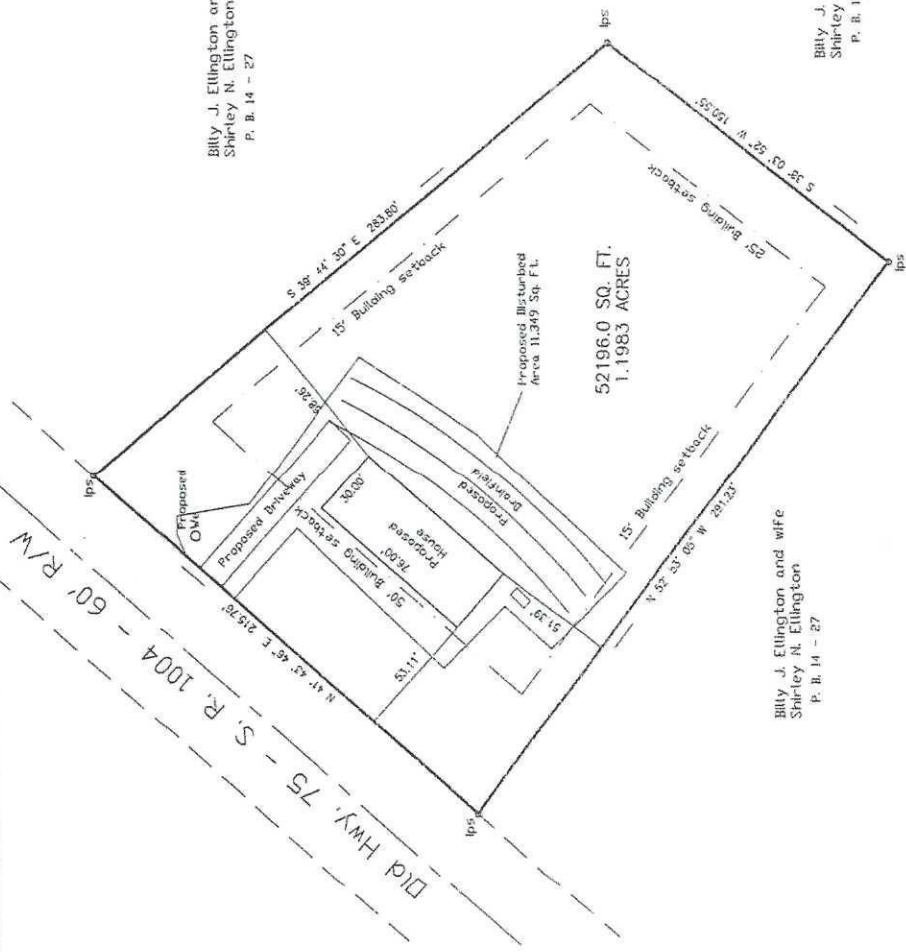
Date: 9-29-19

File No.: 2018-012



NOTICE TO APPLICANT AND HEALTH/INSPECTION DEPARTMENTS
 Any changes made to this drawing/plot or to the subject property of the structure or use herein permitted without written approval from the Granville County Planning Department shall render this Zoning Permit void and subject to legal action per Section VIII-2, VIII-4 of the Granville County Zoning Ordinance.

Billy J. Ellington and wife
 Shirley N. Ellington
 P. B. 14 - 27



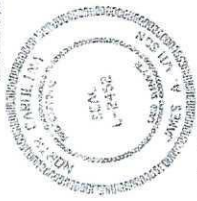
Billy J. Ellington and wife
 Shirley N. Ellington
 P. B. 14 - 27

Billy J. Ellington and wife
 Shirley N. Ellington
 P. B. 14 - 27

I, James R. Wilson, do hereby certify that this property as determined by the Department of Housing and Urban Development.

James R. Wilson P.L.S. No. L-2452 Date
 I, James R. Wilson, certify that this plot was drawn under my supervision from an actual survey made under my supervision; that the error of closure as calculated by latitudes and departures is not surveyed are shown as broken lines plotted from information found in Book _____, Page _____; that this plot was prepared in accordance with G.S. 47-30 as amended. Witness my original signature, registration number and seal this 29th day of Sept., A.D., 2019.

Signed Electronically
 Professional Land Surveyor
 L-2452
 Registration Number



James R. Wilson
 Professional Land Surveyor
 2173 Will Suitt Rd. - Creedmoor, N.C.
 919-818-1022
 jwsurvey@ix.netcom.com

Survey For: Plot Plan for
 Danny R. Ellington and wife
 Amy M. Ellington
 Tally Ho Township
 Granville County, North Carolina

Scale: 1"=50' Date: 9-29-19 File No.: 2019-012

