GRANVILLE VANCE public health

OPERATION 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: 331752 - 1
County ID Number: 183800242301
Evaluated For: NEW

Property Owner: Perrette Baughan Reid
Address: 15 Clover Hill Pl
Road #:
City: Durham
State/Zip: NC/ 27712
Phone #: (919) 884-6015
Township:
Subdivision:
Phase : NEW Lot:

Structure: SINGLE FAMILY
# of Bedrooms: 4
# of People:
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:
Certification #:

Specific System Installed: UNKNOWN
STB: 34
PT: 53

Septic Tank Date: 05/31/2021
Pump Tank Date: 05/31/2021

Comments:

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 .1961.

II. Monitoring: As required by Rule .1961.

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: Stiles, Bailey Bailey Stiles Date of Issue: 08/23/2021

Owner/Applicant: _____

GRANVILLE VANCE
public health

*File #: 331752 - 2
PIN #: 183800242301
Tax Lot #:
Tax Block #:

WELL CONSTRUCTION RECORD

Owner: Perrette Baughan Reid
15 Clover Hill Pl

Durham, NC 27712

Directions
Philo White to Overton Rd

Drilling Contractor: Triad Well Drilling
Driller Registration:
Date Drilled:
Use of Well: SINGLE FAMILY

Total Depth: Ft.
Static Water Level: Ft.
Replacement Well: NO
Yield: 0 gpm

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

Disinfection Type: GRANULAR Amount:

WELL HEAD CONSTRUCTION

Location:
Latitude:
Longitude:

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

EHS: Stiles, Bailey Bailey Stiles
Issue Date: 09/01/2021

Casing: Depth: 60 Ft. Thickness: In.
Diameter: In. Top of Casing: 12 In.
Material: PVC SCH 80

Grout:

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

*** Liner Date:** From 0 To Ft.

Grout:

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

Issued by: Stiles, Bailey
Date of Issue: 09/01/2021

Comments:
WG done on 5/26/21 by WTB. Still drilling at time of inspection.
WF done on 9/1/2021

Granville – Vance District Health Department
Environmental Health

Pin 1838002423O1

P-331752
Permit Number S-232278
W-232279

Final Sketch

Perrette Baligham Reid
Applicants Name

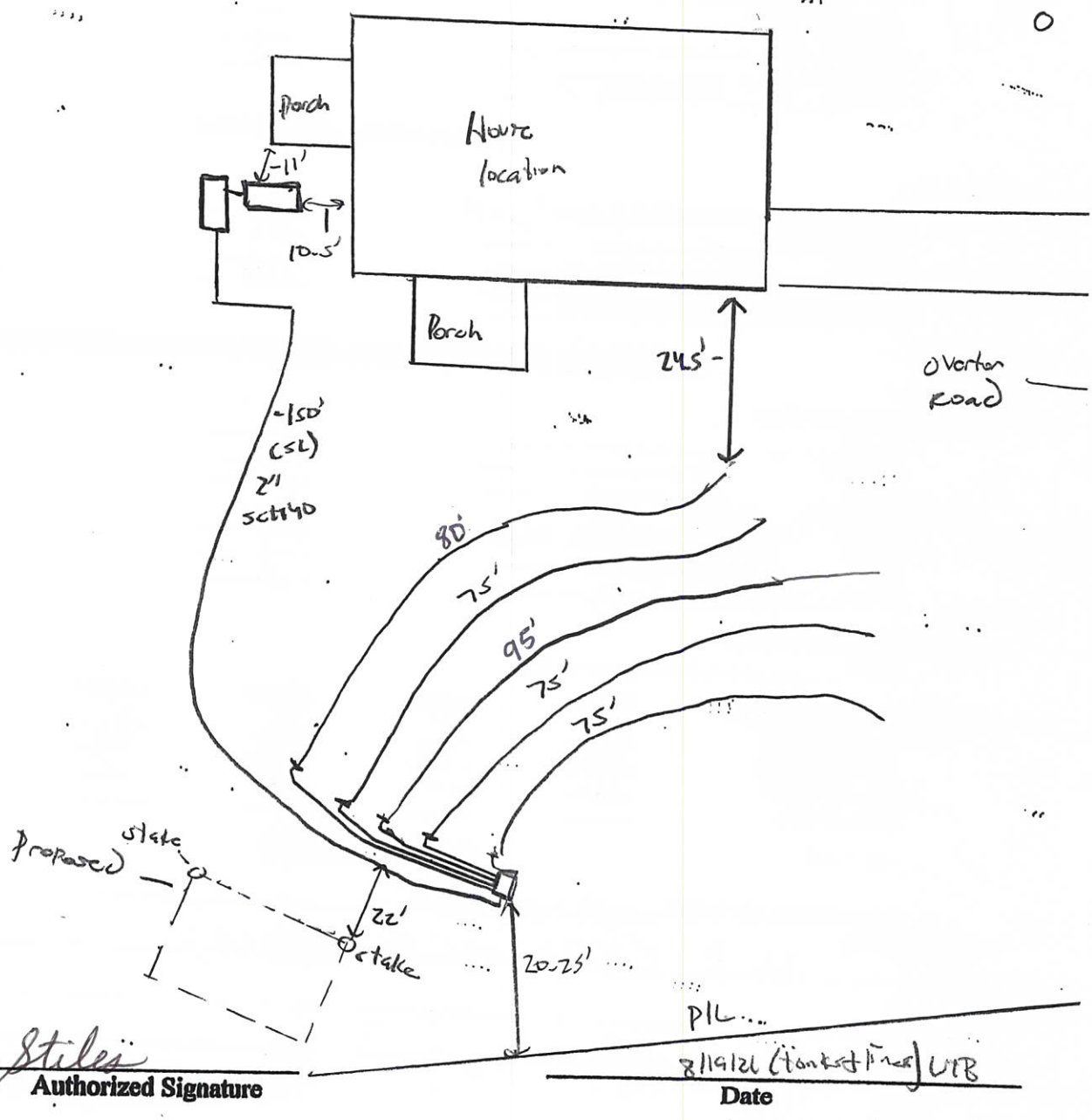
N/A
Subdivision – Section – Lot

Physical Address: 4045 Overton Rd.

Number of Bedrooms 4

Avila const.
System Installer

8/19/21 (tanks+lines) WTB
Date



Bailey Stiles
Authorized Signature

8/19/21 (tanks+lines) WTB
Date

8/20/21 (lines & pump) KBS