



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 415334 - 1
County ID Number: 183400164083
Evaluated For: NEW

PERMIT VALID UNTIL: 07/23/2029

***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: JSW Partners
Address: 3913 Cedar Knolls
City: Youngsville
State/Zip: NC. 27598
Phone #:

Property Location & Site Information

Address: 3913 Cedar Knolls Youngsville, NC 27596 Subdivision: Cedar Knolls Block/Phase: NEW Lot: 7

Directions

Road #:
Structure: SINGLE FAMILY
of Bedrooms: 3
of People:
*Water Supply: NEW WELL

System Specifications

Initial System

Usable Soil Depth: 42

Design Flow: 360

Soil Application Rate: 0.3000

Minimum Trench Depth: Inches

Maximum Trench Depth: 30 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

Usable Soil Depth: 42

Soil Application Rate: 0.300

Minimum Trench Depth: Inches

Maximum Trench: Depth: 30 Inches

*System Classification/Description:

TYPE III G. OTHER NON-CONV. TRENCH SYSTEMS

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

Keep proposed septic 10ft min. off all property lines and 50ft from well location. Also repair location should stay 50ft min. from retention pond.



Construction Authorization

Granville County Health Dept
Environmental Health
101 Hunt Drive
Oxford, NC 27565

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☐ Open Pump System Sheet

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

Property Owner: JSW Partners
Address: 3913 Cedar Knolls
City: Youngsville
State/Zip: NC, 27598
Phone #:

Property Location & Site Information

Address/Road #: 3913 Cedar Knolls Youngsville, NC 27596 Subdivision: Cedar Knolls Phase: NEW Lot: 7

Directions:

Structure: SINGLE FAMILY

of Bedrooms: 3

of People:

*Water Supply: NEW WELL

System Specifications

Usuable Soil Depth: 42
Design Flow: 360
Soil Application Rate: 0.3000

Minimum Trench Depth: Inches

Maximum Trench Depth: 30 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: 900 Sq. ft.

Septic Tank: 1,000 Gallons

No. Drain Lines: 3

Pump Required: ☐ Yes ☒ No ☐ May Be Required

Total Trench Length: 300 ft. ☐ Inches O.C.

Pump Tank: Gallons

Trench Spacing: 9 - ☒ Feet O.C.

Grease Trap: Gallons

Trench Width: 3 - ☒ Inches

Septic Tank Installer

Aggregate Depth: inches ☒ Feet

Grade Level Required: ☒ I ☐ II ☐ III ☐ IV

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:

Keep proposed septic 10ft min. off all property lines, 50ft from well location, and 5ft min. from the house. Also repair location should stay 50ft min. from retention pond.

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 (.0204(k)(1)). 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 and repair (per rule .0301((a)).

Authorized State Agent: Wilkerson, Austin *ALAN WIN REHS*

Date of Issue: 07/23/2024

☒ Hand Drawing

☐ Import Drawing

Site Plan/Drawing attached.

Total Time : (HH:MM)

Granville-Vance Dist. Health Department
Environmental Health

Pin _____

Permit Number 415334

☒ Improvement Permit

☒ Construction Authorization

SITE SKETCH

Summer Construction
Applicants Name

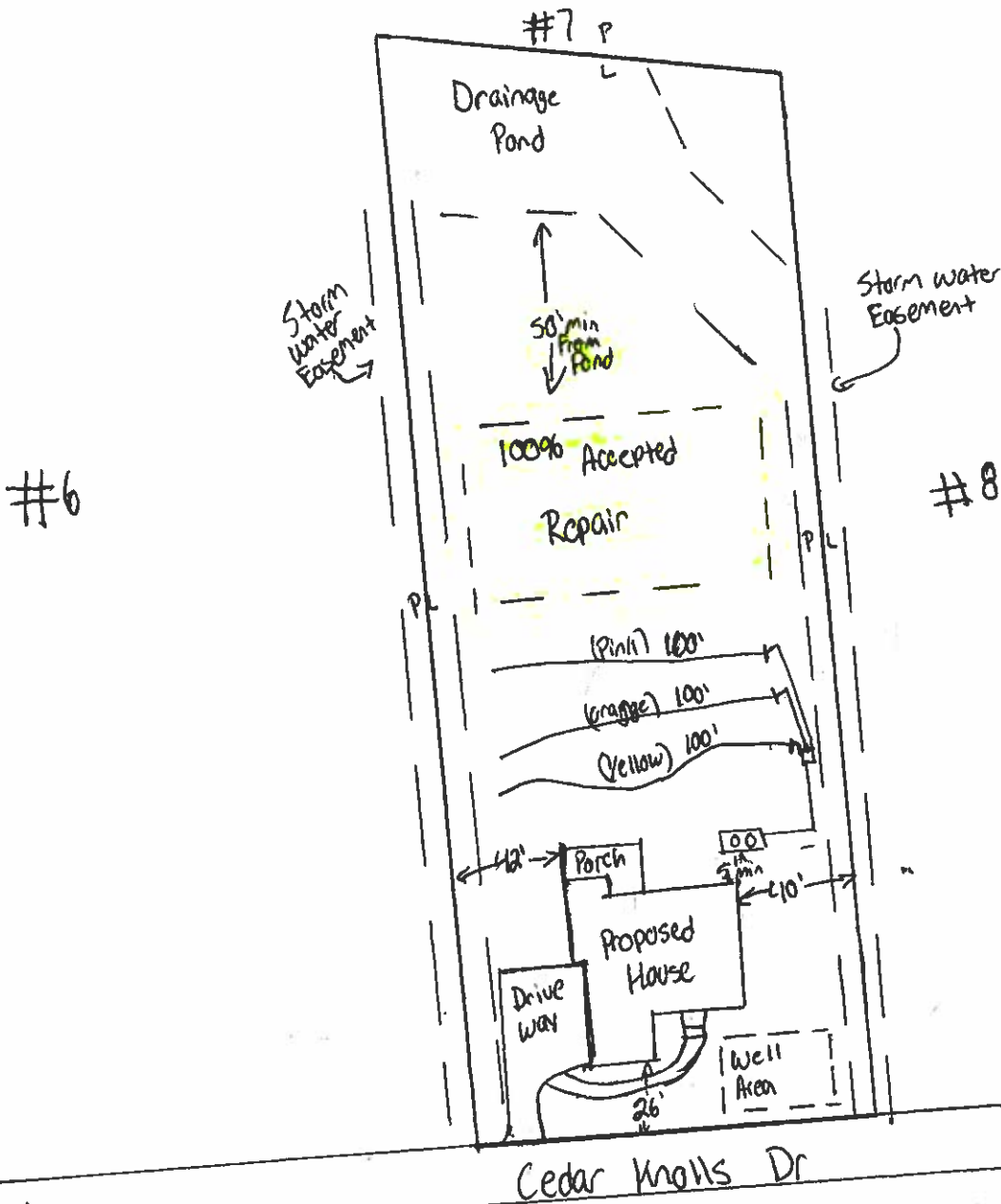
3913 Cedar Knolls
Address

Cedar Knolls #7
Subdivision - Section - Lot

Alan W. W.
Authorized State Agent

7-23-24
Date

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





Well Construction Permit

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

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*CDP File Number 415334

PIN Number: 183400164083

Tax Lot #: 7

Tax Block #: _____

Evaluated For: _____

PERMIT VALID UNTIL: 07/23/2029

Property Owner: JSW Partners

Address: 3913 Cedar Knolls

City: Youngsville

State/Zip: NC / 27596

Phone #: _____

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: Cedar Knolls

Phase: _____

Lot: 7

3913 Cedar Knolls

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 50ft min. from any part of the septic and 10ft min. from the property line. Stay out of easement.

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: Wilkerson, Austin

Authorized State Agent: [Signature]

Owner/Applicant: JSW Partners

*Date of Issue: 07/23/2024

☒ Hand Drawing

☐ Import Drawing

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

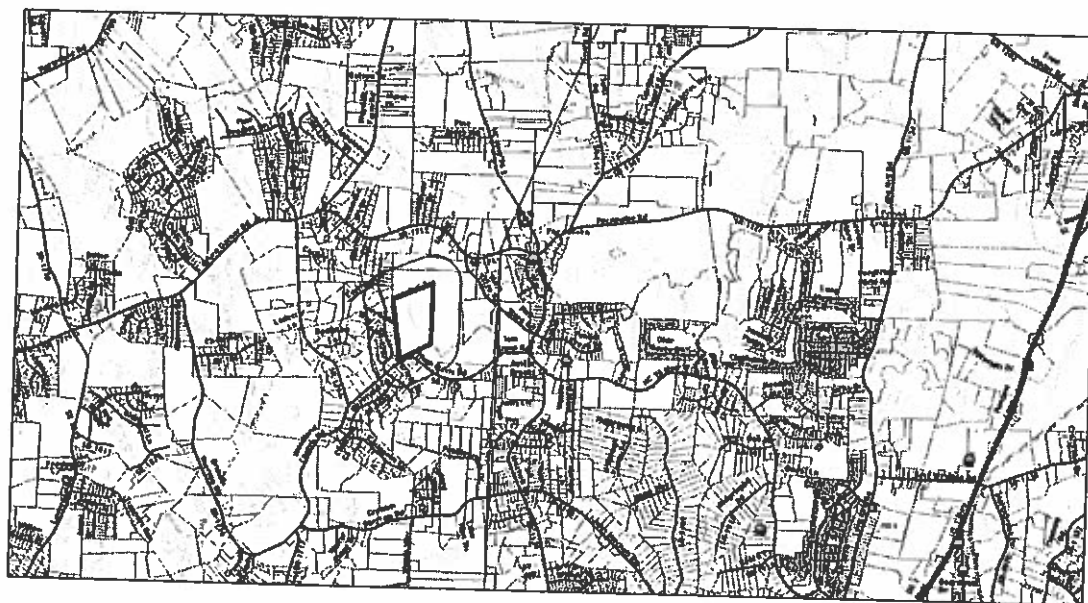


WPDT Screening Report

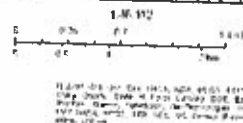
Area of Interest (AOI) Information

Area : 12,982,537.06 ft²

Jul 23 2024 14:36:26 Eastern Daylight Time



Pre-Regulatory Landfill Sites
 No Further Action
 Has UST Incidents
 High Risk
 Low Risk
 UST Incidents
 Low Risk
 North Carolina Parcel (Polysym) Parcels
 County Boundary
 Non-System Roads
 Non System
 Other System Roads
 Major Road Areas (New Roads)
 Secondary Roads
 Primary Roads
 US Route
 NC Route



~~#~~ NO Found contaminates within 1000ft Radius of Property.