Granville - Vance District Health Department

Environmental Health

Well Construction Permit

Owner/Applicant: Wynn Construction Date: 2-15-2010

Address or Location of Property: 2764 Longstreth Ct

Subdivision & Lot #: Ranchino 19 Septic Permit #: 6800

Zoning Permit #: 16595 Environmental Health Specialist: David Cumbee

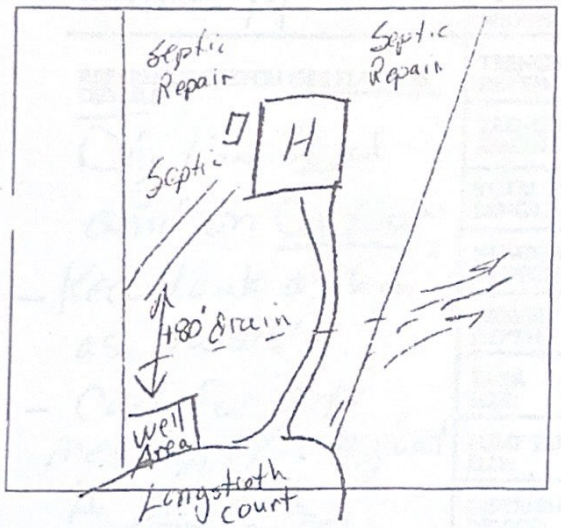
This well permit is to locate and site the area that a private groundwater well may be established on the property listed above by the Environmental Health Specialists of Granville County. If one does not locate the well in the approved area and complete the well as specified by the 15A NCAC .02C rules, 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: Call 693-2688 w/questions

Authorized Agent: David Cumbee

Date: 2-15-2010

Well Grout: (Circle or write in)

Witnessed: (Yes) or No EHS Agent: David Cumbee

Date: 5-10-10 Annular Space Open: (Yes) or No

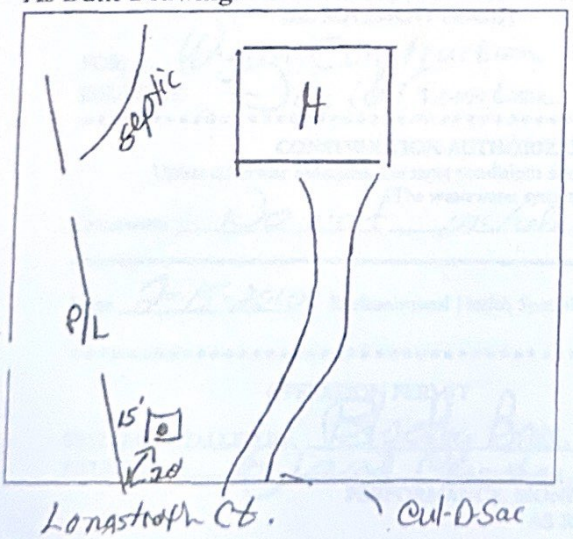
Over reamed: Yes or (No)

Method: ____ Pump ✓ Poured ____ Pressure

Depth Grouted: +20' ft

Well Log received: Yes or No (EHS to Attach to Permit)

As Built Drawing:



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: 200'

1/2 HP

Well Completion Permit: Cassandra Clapp EHS

Date Completed: 5-27-10

Water Samples Taken: Date: ____

EHS: ____ **Results:** ____

Retest: ____ **Results:** ____

Blackley 3:00 - 3:30 Pump

PERMIT NUMBER 06600

GRANVILLE-VANCE DISTRICT HEALTH DEPARTMENT
IMPROVEMENT AND OPERATION PERMITS

Zoning 16585

COUNTY: Granville	TAX NO. 183700360412	TYPE OF ESTABLISHMENTS		"THIS PERMIT SHALL BE ACCOMPANIED BY A LAYOUT SHOWN ON A PLAT, INCLUDING SYSTEM REQUIREMENTS.
	SR. NO. 1629	RESIDENCE ✓ BUSINESS — OTHER —	NUMBER OF BEDROOMS: 3	NUMBER OF OCCUPANTS: 6 max
OWNER: Wynn Construction		WATER SUPPLY	WELL ✓ PUBLIC —	OTHER —
APPLICANT'S ADDRESS: 2550 Capital Dr. Suite 105 Creedmoor		TYPE OF WASTEWATER SYSTEM	INITIAL INSTALLATION Type III g	REPAIR (Pump) Type III b g
PROPERTY ADDRESS/LOCATION: 2704 Longstroth Ct.		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.
		LTAR:	.275 gpd/ft²	
SUBDIVISION: Rennshire		ABSORPTION AREA:	1310 ft²	
LOT NUMBER: 19		TRENCH WIDTH:	3'	
REFERENCE SKETCH (SEE PLAT FOR DETAILS)		TRENCH DEPTH:	27"	# Changed to Pump due to house location & topo — DC 5-10-10
Dig lines level and on Contour		TRENCH SPACING:	9' o.c.	
- Keep tank as high as possible		TOTAL TRENCH LENGTH:	330'	
- Call for site meeting for layout if needed 693-2658		NUMBER OF TRENCHES:	4 or 5	
		GRAVEL DEPTH:	Accepted Status	(non-gravel)	PERMIT VALID FOR 5 YEARS (YES) NO
		TANK SIZE:	1000 gal.	
		PUMP TANK SIZE:	~~[illegible]~~ 1000 gal	
		DISTRIBUTION DEVICE:	~~D-box~~ ~~3 or~~ pressure manifold		NO EXPIRATION YES (NO)

****

IMPROVEMENT PERMIT DATE: 2-15-2010

FOR: Wynn Construction

ISSUED BY: David Crumbee

****

CONSTRUCTION AUTHORIZATION FOR IMPROVEMENT PERMIT# 6800

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: Do not install in wet conditions

Date: 2-15-2010 Environmental Health Specialist: David Crumbee

Construction Authorization Addendum ☐ Yes ☑ No

****

OPERATION PERMIT DATE: 5-10-2010 (Pump tank Installed) / 7-12-2010

SYSTEM INSTALLED BY: Blackley Bros.

ISSUED BY: David Crumbee

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

RESIDENTIAL WELL CONSTRUCTION RECORD

North Carolina Department of Environment and Natural Resources – Division of Water Quality

WELL CONTRACTOR CERTIFICATION # 3104

1. WELL CONTRACTOR:
Van Elliott
Well Contractor (Individual) Name
SOUTHERN WELL DRILLING
Well Contractor Company Name
STREET ADDRESS 1530 Beaver Dam Road
Creedmoor NC 27522
City or Town State Zip Code
(919) 603-7165
Area code - Phone number

2. WELL INFORMATION:
SITE WELL ID #(if applicable) 00214
STATE WELL PERMIT#(if applicable)
DWQ or OTHER PERMIT #(if applicable)
WELL USE (Check Applicable Box): Residential Water Supply ☐
DATE DRILLED 5-4-10
TIME COMPLETED AM ☐ PM ☐

3. WELL LOCATION:
CITY: Franklinton COUNTY Granville
Rennshire Lot 19
(Street Name, Numbers, Community, Subdivision, Lot No., Parcel, Zip Code)
TOPOGRAPHIC / LAND SETTING:
☐ Slope ☐ Valley ☐ Flat ☐ Ridge ☐ Other
(check appropriate box)
LATITUDE 3 __ __
LONGITUDE __ __ __
May be in degrees, minutes, seconds or in a decimal format
Latitude/longitude source: ☐ GPS ☐ Topographic map
(location of well must be shown on a USGS topo map and attached to this form if not using GPS)

4. WELL OWNER
OWNER'S NAME Wynn Const.
STREET ADDRESS
Creedmoor N.C.
City or Town State Zip Code
( )
Area code - Phone number

5. WELL DETAILS:
a. TOTAL DEPTH: 300
b. DOES WELL REPLACE EXISTING WELL? YES ☐ NO ☑
c. WATER LEVEL Below Top of Casing: 30 FT.
(Use "+" if Above Top of Casing)
d. TOP OF CASING IS 4 FT. Above Land Surface*
*Top of casing terminated at/or below land surface may require a variance in accordance with 15A NCAC 2C .0118.
e. YIELD (gpm): 20 METHOD OF TEST Air

f. DISINFECTION: Type Amount
g. WATER ZONES (depth):
From 110 To 300 From To
From To From To
From To From To

6. CASING:

	Depth		Diameter	Thickness/ Weight	Material
From +1	To 100	Ft.	6		PVC
From	To	Ft.			
From	To	Ft.			

7. GROUT:

	Depth		Material	Method
From 0	To 20	Ft.	Portland	Poured
From	To	Ft.		
From	To	Ft.		

8. SCREEN:

	Depth		Diameter	Slot Size	Material
From	To	Ft.	In.	In.	
From	To	Ft.	In.	In.	
From	To	Ft.	In.	In.	

9. SAND/GRAVEL PACK:

	Depth		Size	Material
From	To	Ft.		
From	To	Ft.		
From	To	Ft.		

10. DRILLING LOG

From	To	Formation Description

11. REMARKS: Rennshire Lot 19

I DO HEREBY CERTIFY THAT THIS WELL WAS CONSTRUCTED IN ACCORDANCE WITH 15A NCAC 2C, WELL CONSTRUCTION STANDARDS, AND THAT A COPY OF THIS RECORD HAS BEEN PROVIDED TO THE WELL OWNER.

Van Elliott
SIGNATURE OF CERTIFIED WELL CONTRACTOR DATE

Nathaniel Burt
PRINTED NAME OF PERSON CONSTRUCTING THE WELL

Submit the original to the Division of Water Quality within 30 days. Attn: Information Mgt., 1617 Mail Service Center – Raleigh, NC 27699-1617 Phone No. (919) 733-7015 ext 568.

Form GW-1a
Rev. 7/05