

Granville - Vance District Health Department
Environmental Health

Pin _____

Permit Number 1314

Final Sketch

Traditions builder
Applicants Name

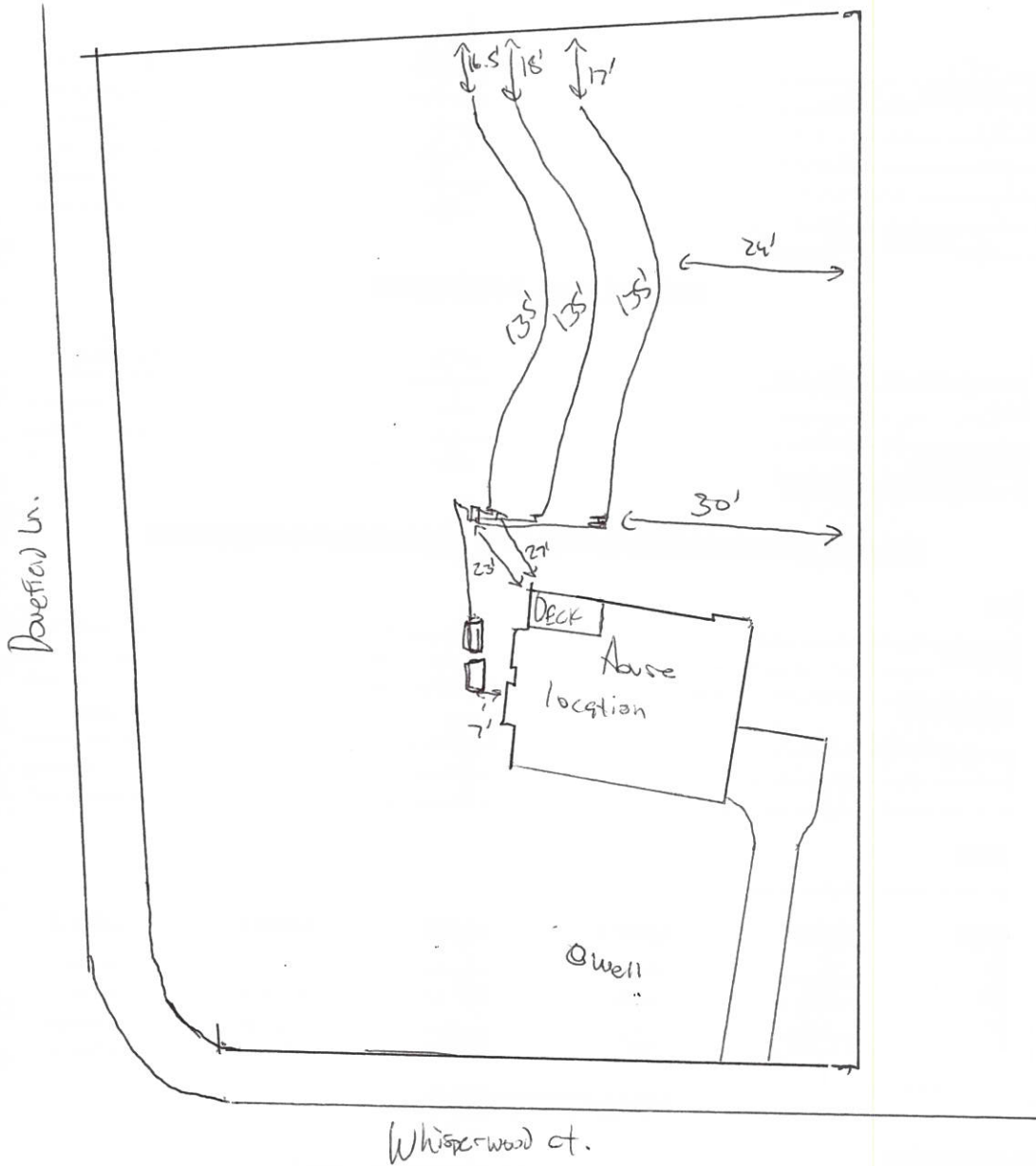
Silverleaf 114
Subdivision - Section - Lot

Physical Address: 3881 Whisperwood ct.

Number of Bedrooms 4

Brantley
System Installer

7/13/20
Date



[Signature]
Authorized Signature

7/13/20
Date

SEWAGE DISPOSAL SYSTEM INSTALLATION REVIEW

SEPTIC AND PUMP TANK INSPECTION

SEPTIC TANK

Manufacturer DB
 Date of Manufacture 2-13-20
 Stamp 513-502
 Capacity 1000
 Tee /
 Baffle /
 Sealant /
 AIR GAP /, FILTER /, RISER /

INITIAL

WTB
/
/
/
/
/

DATE

7/13/20
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/
/
/
/

PUMP TANK

Manufacture DB
 Date of Manufacture 5-4-20
 Stamp PT 237
 Capacity 1000
 Sealant /
 Manhole /
 RISER /, SEALANT /

WTB
/
/
/
/
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7/13/20
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MECHANICAL INSPECTION

PUMP

Manufacturer and Model # Ashland EP-30
 Control Panel /
 Alarm /
 Electrical Connection /
 SEALANT AROUND CONDUIT /

WTB
/
/
/
/

7/13/20
/
/
/
/

NITRIFICATION/DISTRIBUTION AND DRAINFIELD INSPECTION

DISTRIBUTION BOX

Level /
 Equal Distribution /
 Other /

/
/
/

/
/
/

DISTRIBUTION MANIFOLD

Pipe Size 1/2" sch 40
 Gate Valves /
 Other /

WTB
/
/

7/13/20
/
/

OTHER DISTRIBUTION

Type /

NITRIFICATION LINES

Trench Width 3'
 Trench Length 135'
 Trench Grade /
 Stone Depth 24"

LINE 1

3'
135'
/
24"

LINE 2

3'
135'
/
24"

LINE 3

3'
135'
/
24"

LINE 4

/
/
/
/

LINE 5

/
/
/
/

LINE 6

/
/
/
/

E2 flow

WELL INSPECTION

LOCATION OF WELL

COMMENTS:

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	LOT SIZE 1.031 AC	RESIDENCE ☒	NUMBER OF BEDROOMS: 4	NUMBER OF OCCUPANTS: 8 max		
APPLICANT'S NAME & ADDRESS Traditions Builder		BUSINESS ☐	INITIAL INSTALLATION	REPAIR		
		OTHER ☐				
PROPERTY ADDRESS/LOCATION: 3881 Whisperwood Ct.		WATER SUPPLY WELL ☒ PUBLIC ☐	Accepted	Accepted	*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.	
		TYPE OF WASTEWATER SYSTEM				
SUBDIVISION: Silverleaf		DESIGN FLOW:	480 gpd	480 gpd		
		LTAR:	0.296 gpd/ft ²	0.3 gpd/ft ²		
LOT NUMBER: 114		ABSORPTION AREA:	1216.21 ft ²	1200 ft ²		
		TRENCH WIDTH	3'	3'		
REFERENCE SKETCH (SEE PLAT FOR DETAILS) o system layed out in field by REHS ok any part of septic min. (5') off house & porch o keep drainlines min. (10') off property lines o pump may not be needed, call HB@ 919-693-2688 if gravity can be done o Do not disturb septic area		TRENCH DEPTH:	22-24"	22-24"		
		TRENCH SPACING:	9' o.c.	9' o.c.		
		TOTAL TRENCH LENGTH:	405'	400'		
		NUMBER OF TRENCHES:	3 or 4	3 or 4		
		GRAVEL / ACCEPTED:	Accepted	Accepted		
		TANK SIZE:	1000 gallon	1000 gallon		
		PUMP TANK SIZE:	1000 gallon	1000 gallon		
		DISTRIBUTION DEVICE:	Pressure manifold	Pressure manifold		
						PERMIT VALID FOR: 5 YEARS YES NO
						NO EXPIRATION YES NO

IMPROVEMENT PERMIT DATE: 3/6/19

FOR: Traditions builder

ISSUED BY: [Signature]

CONSTRUCTION AUTHORIZATION FOR IMPROVEMENT PERMIT# 1314

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: 3/6/19 Environmental Health Specialist: [Signature]

Construction Authorization Addendum ☒ Yes ☐ No

OPERATION PERMIT

DATE: 7/13/20

SYSTEM INSTALLED BY: Brantley

ISSUED BY: [Signature]

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

