GRANVILLE VANCE public health

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: 3623342
County ID Number: 191500196784
Evaluated For: NEW

PERMIT VALID UNTIL: 09/01/2026

***NOTE TO INSPECTIONS DIVISION:** Building Permits cannot be issued with this Improvement Permit.

Applicant:	Carolina Custom Homes of Burlington
Address:	2450 N. Church St
City:	Burlington
State/Zip:	NC 27217
Phone #:	home: (336) 226-9066 cell :(336) 226-9066

Property Owner:	Carlos & Yolanda Ector
Address:	5605 Country Club Rd
City:	Greensboro
State/Zip:	NC. 27406
Phone #:	336 226 9066

Property Location & Site Information

Address/Road #: 3014 Splitwood Ct Oxford, NC 27565
Subdivision: Bent Tree
Phase: NEW
Lot: 41

Directions

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

System Specifications

Initial System

*Site Classification: Provisionally Suitable
Design Flow: 360
Soil Application Rate: 0.3000

*System Classification/Description:
TYPE III B. SYSTEM W/SINGLE EFFLUENT PUMP

*Proposed System:
25% REDUCTION

Minimum Trench Depth: 18 Inches
Maximum Trench Depth: 20 Inches

Septic Tank: 1000 Gallons
Pump Required (X) Yes ( ) No ( ) May Be Required
Pump Tank: 1000 Gallons

pump fee paid 5-17-22

Repair System Required: (X) Yes ( ) No ( ) No, but has Available Space

Repair System

*Site Classification: Provisionally Suitable
Soil Application Rate: 0.300

*System Classification/Description:
TYPE III B. SYSTEM W/SINGLE EFFLUENT PUMP

*Proposed System:
25% REDUCTION

Minimum Trench Depth: 18 Inches
Maximum Trench Depth: 20 Inches

Pump Required: (X) Yes ( ) No ( ) May Be Required
Pump Tank: 1000 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**

* Installer Note: trenches should be 18" - 20" (22" MAX if needed to achieve grade. No out crops or boulders but rocks present.

e Department and Local Health Department may impose conditions on the issurance and may revoke the permits for failure of e system to satisfy the conditions, the rules, or this article. This permit is subject to revocation it the site plan, plat, or intended use changes (NCGS 130A-335(f)). The person owning or controlling the system location, installing, operation, maintenance, monitoring, reporting, and repair (.1938(b)).

Authorized State Agent: Stiles, Bailey Bailey Stiles
Date of Issue: 09/01/2021

(✓) Hand Drawing ( ) Import Drawing ****Site Plan/Drawing attached.****

Total TIme: (HH:MM) ____ : ____

Granville – Vance District Health Department
Environmental Health

P-362342

Pin 1915001916784

Permit Number S-251161

W-252203

Final Sketch

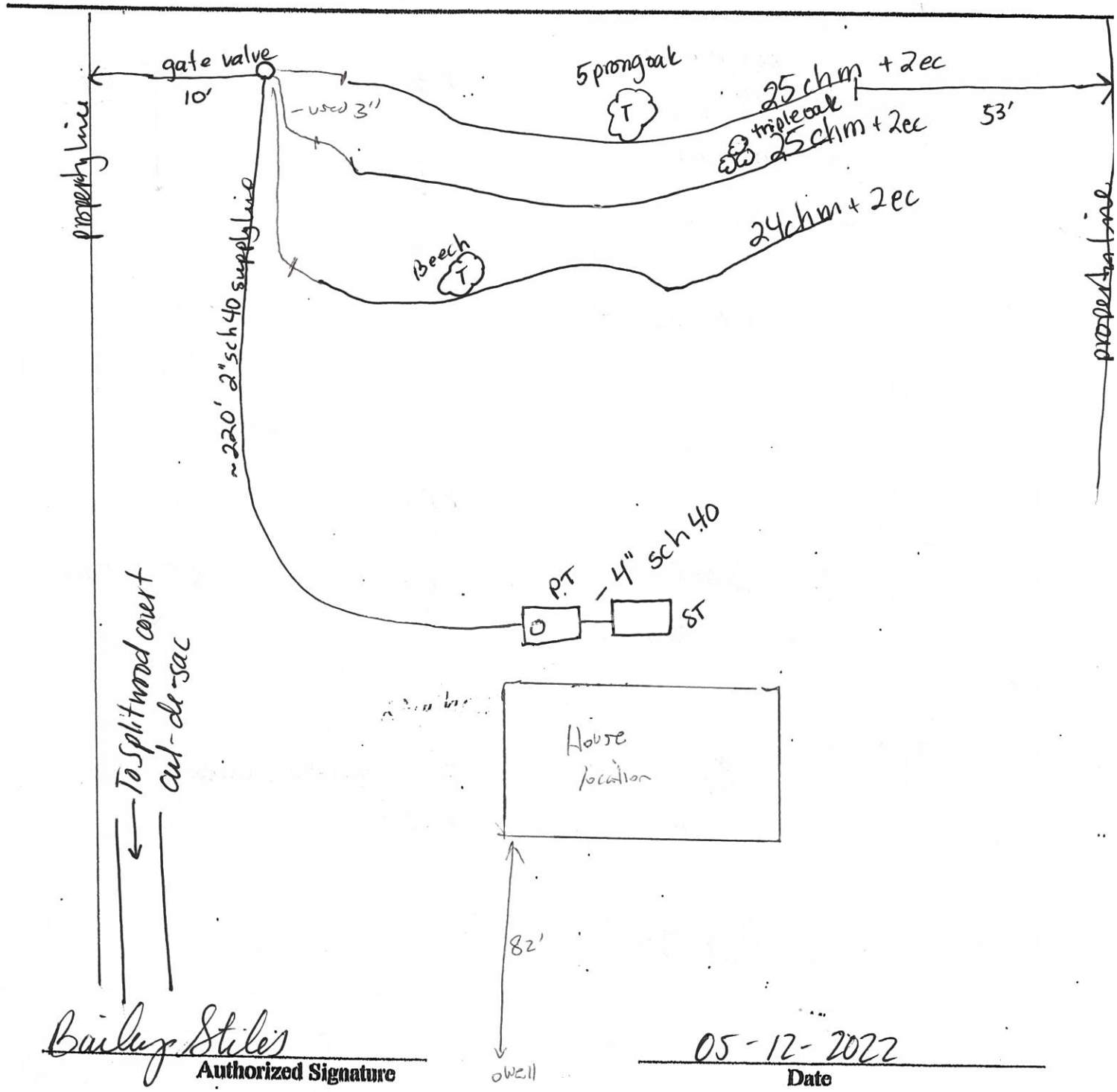
Carolina Custom Homes of Burlington
Applicants Name

Bent Tree - #41
Subdivision – Section – Lot

Physical Address: 3014 Splitwood Ct **Number of Bedrooms** 3

Chambers Backhoe + Grading
System Installer

05-12-2022
Date



Bailey Stiles
Authorized Signature

05-12-2022
Date

GRANVILLE VANCE public health

Well Construction 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 362342

PIN Number: 191500196784

Tax Lot #: 41 Tax Block #:

Evaluated For: SINGLE FAMILY \ WELL

Property Owner:	Carlos & Yolanda Ector	Applicant:	Carolina Custom Homes of Burlington
Address:	5605 Country Club Rd	Address:	2450 N. Church St
City:	Greensboro	City:	Burlington
State/Zip:	NC / 27406	State/Zip:	NC / 27217
Phone #:		Phone #:	

Property Location & Site Information

Address/Road #: 3014 Splitwood Ct
Oxford NC, 27565

Subdivision: Bent Tree

Phase:

Lot: 41

*Proposed use of Well: SINGLE FAMILY

Directions

If Other:

Well Contractor Information

Drilling Contractor:

Driller Registration:

Permit Conditions

*Permit Conditions
See site sketch for well area. Driller to maintain all setbacks.

WG 11-28-22
well permit paid for 5-12-22

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. No volume of quality of water is guaranteed by the Health Department.

*Issued By: Stiles, Bailey

*Date of Issue: 09/01/2021

Authorized State Agent: Bailey Stiles

(1) Hand Drawing ( ) Import Drawing

Owner/Applicant:

Site Plan/Drawing attached.