Keith Brandon 919-691-5212 ZP# 166626

919-339-5550 PERMIT NUMBER 06813

GRANVILLE-VANCE DISTRICT HEALTH DEPARTMENT
IMPROVEMENT AND OPERATION PERMITS

COUNTY:	TAX NO.	TYPE OF ESTABLISHMENTS			
Granville	SR. NO.	RESIDENCE ✓ BUSINESS — OTHER —	NUMBER OF BEDROOMS: 3	NUMBER OF OCCUPANTS: max 6	*THIS PERMIT SHALL BE ACCOMPANIED BY A LAYOUT SHOWN ON A PLAT, INCLUDING SYSTEM REQUIREMENTS.
OWNER: Brandon Freedom Homes - Keith 336-597-5588		WATER SUPPLY	WELL ✓ PUBLIC —	OTHER —	
APPLICANT'S ADDRESS: 3970 Antioch Rd Roxboro, NC 27574		TYPE OF WASTEWATER SYSTEM	INITIAL INSTALLATION	REPAIR	
PROPERTY ADDRESS/LOCATION: Corner of Little Mon Cr Rd & Hwy 158		DESIGN FLOW:	360		*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:	.30		
SUBDIVISION: 3044 Little Mon Cr Rd LOT NUMBER:		ABSORPTION AREA:	1200 ft²		
		TRENCH WIDTH:	36"		
REFERENCE SKETCH (SEE PLAT FOR DETAILS) Pre-Construction Meeting Monday		TRENCH DEPTH:	24"		
		TRENCH SPACING:	9 on center		
		TOTAL TRENCH LENGTH:	1100 ft		
		NUMBER OF TRENCHES:	4-100		
		GRAVEL DEPTH:	12"		**PERMIT VALID FOR: 5 YEARS** YES NO
		TANK SIZE:	1000 gal		
		PUMP TANK SIZE:	N/A		**NO EXPIRATION** YES NO
		DISTRIBUTION DEVICE:	Distribution Box		

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IMPROVEMENT PERMIT DATE: 3-11-10

FOR: Freedom Homes

ISSUED BY: Cassandra Champion REHS

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CONSTRUCTION AUTHORIZATION FOR IMPROVEMENT PERMIT# 6813

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: Follow Site Sketch closely

Date: 3-11-10 Environmental Health Specialist: Cassandra Champion REHS

Construction Authorization Addendum ☐ Yes ☐ No

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OPERATION PERMIT DATE: 5-6-10

SYSTEM INSTALLED BY: Homeowner

ISSUED BY: Cassandra Champion REHS

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

00227

Granville - Vance District Health Department
Environmental Health
Well Construction Permit

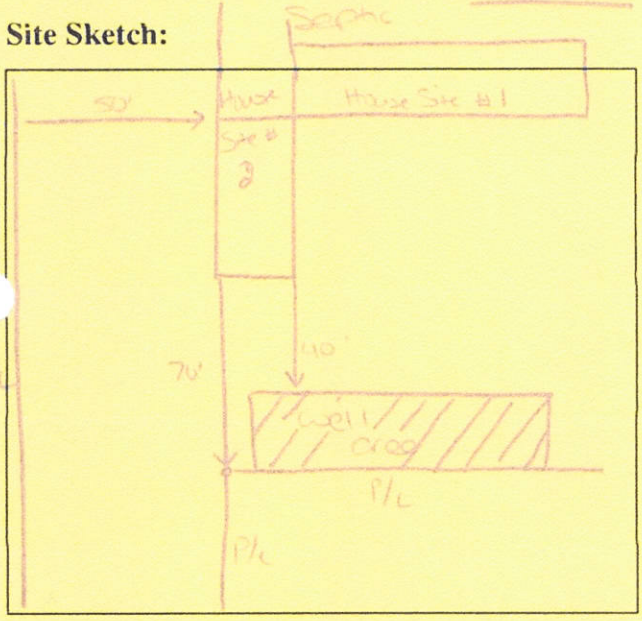
Owner/Applicant: Freedom Homes Date: 3-10-10
Address or Location of Property: Connell Rd → (R) on Little Mtn Creek Rd → 1st on (R) just after Thorpe Williams Rd one before 13 house on (R)
Subdivision & Lot #: NA Septic Permit #: 6813
Zoning Permit #: Waiable Environmental Health Specialist: Thompson

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:

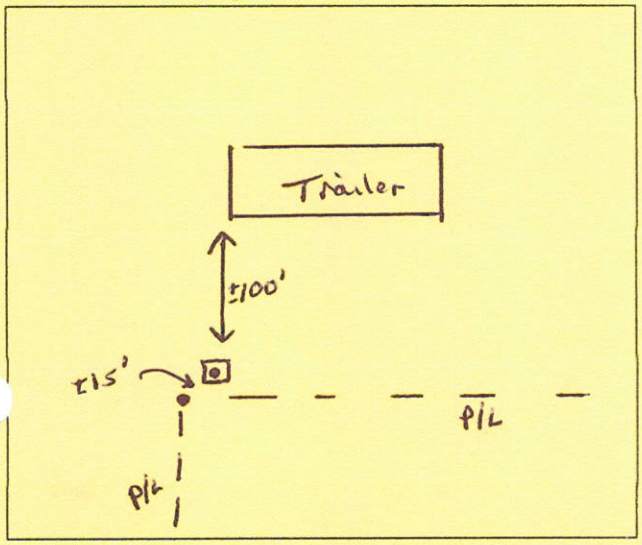


Conditions: _____

Authorized Agent: Chase Thompson EHS
Date: 3-10-10

Well Grout: (Circle or write in)
Witnessed: (Yes) or No EHS Agent: David Cumbee
Date: 4-1-10 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)
Barnett well Drilling

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: _____

Well Completion Permit: [signature], **EHS**
Date Completed: 5-6-10

Water Samples Taken: Date: _____
EHS: _____ **Results:** _____
Retest: _____ **Results:** _____

Granville – Vance District Health Department
Environmental Health

Pin 1918001264 88 Permit Number 6813

✓ Improvement Permit ✓ Construction Authorization

Final Sketch

Ruby Kerney / Freedom Homes — Applicants Name

NA — Subdivision – Section – Lot

Physical Address: 3044 Little Mtn Cr Rd

Homeowner — System Installer

5-5-10 / 5-6-10 — Date

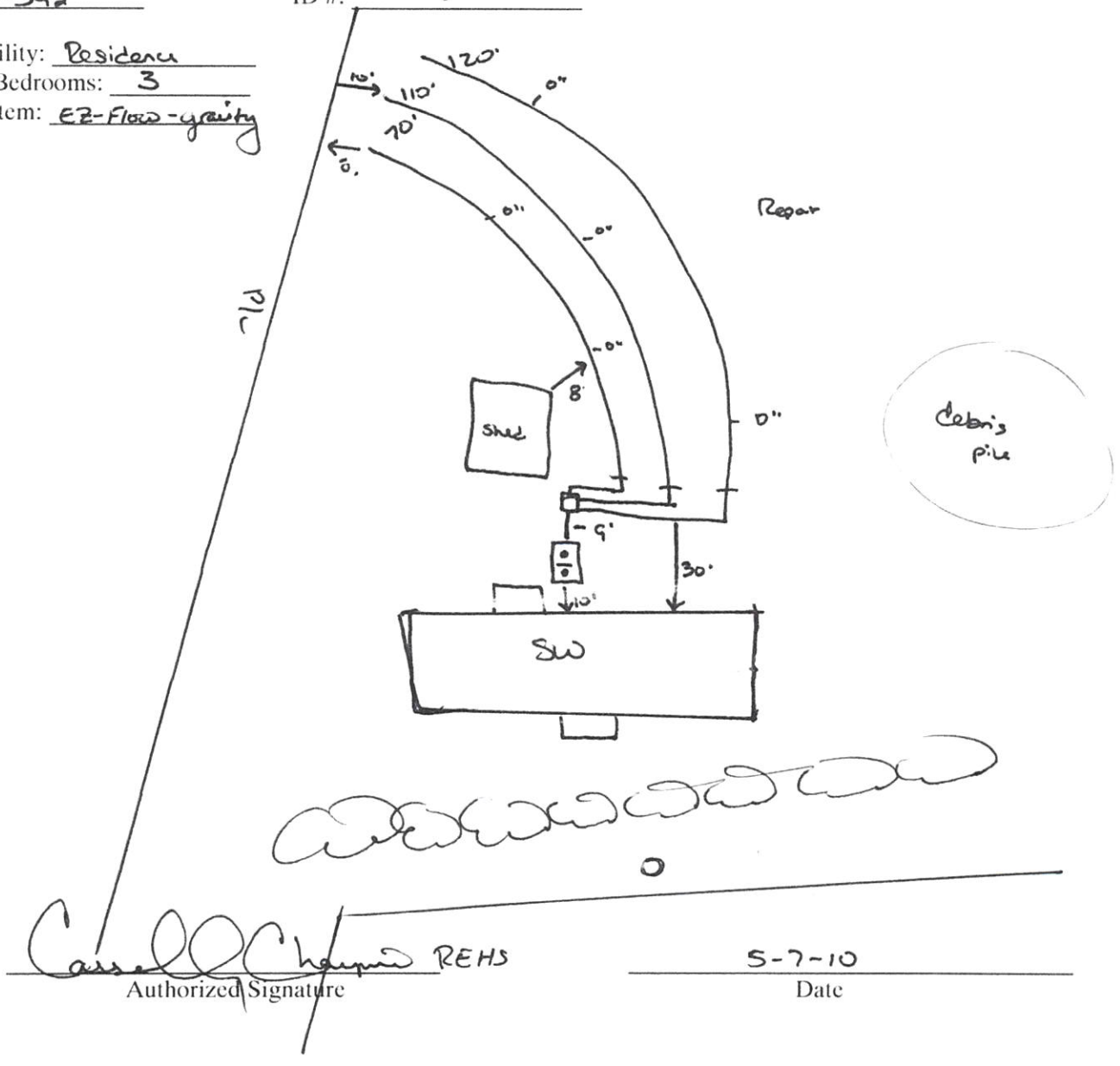
System design and details as installed.

Septic Tank Information:
Date: 4-29-09
Manufacture: GC8-1000
ID # : STB-392

Pump Tank Information:
Date:
Manufacturer:
ID #:

Distribution Box ✓
Pressure Manifold
Serial Distribution

Type of Facility: Residence
Number of Bedrooms: 3
Type of System: EZ-Flow - gravity



Cassell Champion REHS — Authorized Signature

5-7-10 — Date