

Granville - Vance District Health Department
Environmental Health

Final Sketch

Pin _____

☒ Improvement Permit

☒ Construction Authorization

Applicant's Name _____

Permit No. _____

Subdivision - Section - Lot _____

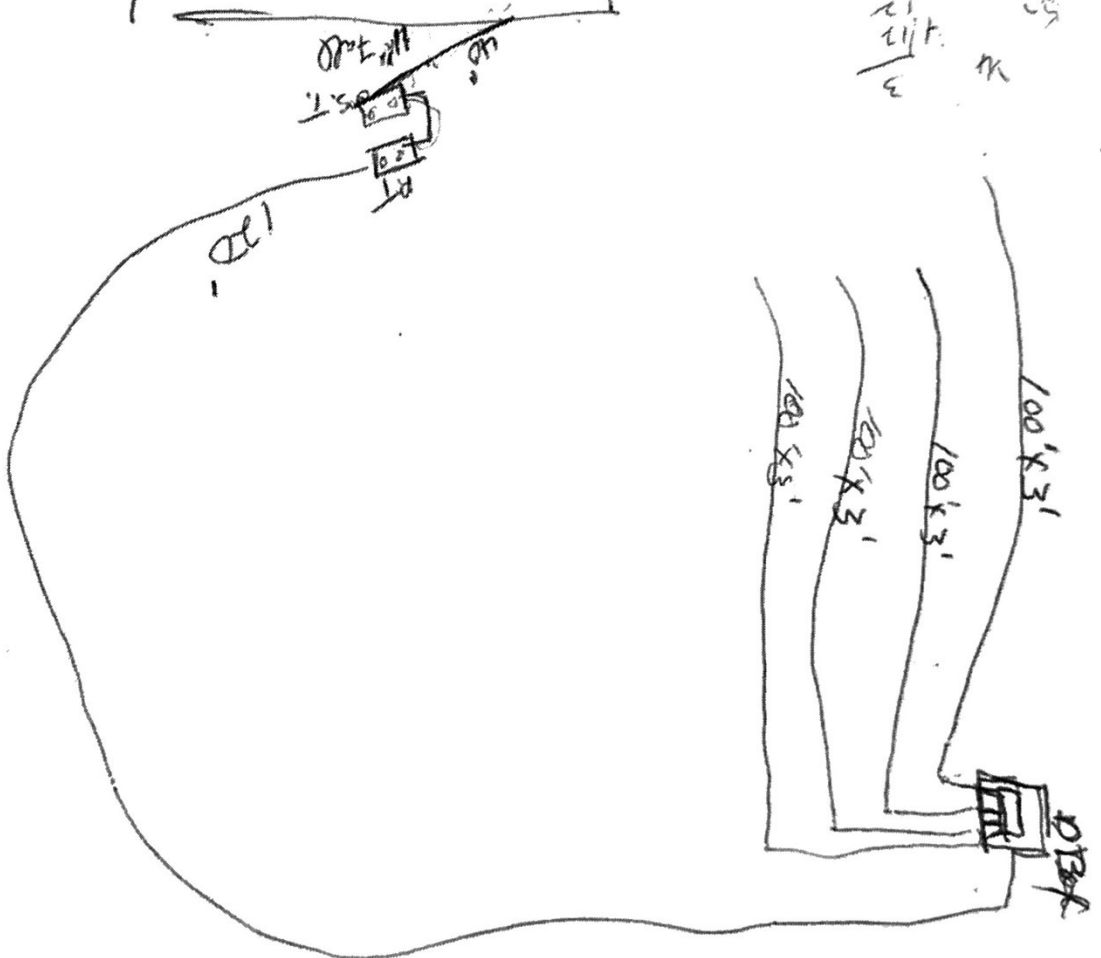
Physical Address: _____

Truework
System Installer

[Handwritten signature]

8-21-16
Date

System design and details as installed.



Authorized Signature

Date

SEWAGE DISPOSAL SYSTEM INSTALLATION REVIEW

SEPTIC AND PUMP TANK INSPECTION

SEPTIC TANK

Manufacturer Brantly
 Date of Manufacture 3-16-16
 Stamp ✓
 Capacity 1000
 Tee ✓
 Baffle ✓
 Sealant ✓
 AIR GAP ✓, FILTER ✓, RISER ✓

INITIAL

DATE

8-21-16

PUMP TANK

Manufacturer Brantly
 Date of Manufacture 7-14-16
 Stamp ✓
 Capacity 1000 gal
 Sealant ✓
 Manhole ✓
 RISER ✓, SEALANT ✓

MECHANICAL INSPECTION

PUMP

Manufacturer and Model # Zeller 153
 Control Panel ✓
 Alarm ✓
 Electrical Connection ✓
 SEALANT AROUND CONDUIT ✓

NITRIFICATION/DISTRIBUTION AND DRAINFIELD INSPECTION

DISTRIBUTION BOX

Level
 Equal Distribution
 Other

DISTRIBUTION MANIFOLD

Pipe Size 4" PVC SCH 80 with 2 tees
 Gate Valves ✓
 Other

OTHER DISTRIBUTION

Type

NITRIFICATION LINES

Trench Width
 Trench Length
 Trench Grade
 Stone Depth

LINE 1

LINE 2

LINE 3

LINE 4

LINE 5

LINE 6

3'

3'

3'

3'

100'

100'

100'

100'

8"

8"

8"

8"

1/2" E-Z-Flow

WELL INSPECTION

LOCATION OF WELL OK

COMMENTS:

11 inches of fall from House to tank
checked by laser level, 40 feet from House
to septic tank inlet note position of septic tank.

PERMIT NUMBER **8432**

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. *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.
Granville	SR. NO.	RESIDENCE ☒ BUSINESS ☐ OTHER ☐	NUMBER OF BEDROOMS: 4	NUMBER OF OCCUPANTS: 8	
APPLICANT:		WATER SUPPLY	WELL ☒ PUBLIC ☐	OTHER ☐	
APPLICANT'S NAME & ADDRESS:		TYPE OF WASTEWATER SYSTEM	INITIAL INSTALLATION	REPAIR	
PROPERTY ADDRESS/LOCATION:		DESIGN FLOW:	490 GPD		PERMIT VALID FOR: 5 YEARS YES ☒ NO ☐ NO EXPIRATION YES ☐ NO ☒
SUBDIVISION:		LTAR:	1.36 PD/ft ²		
LOT NUMBER:		ABSORPTION AREA:	1000 ft ²		
REFERENCE SKETCH (SEE PLAT FOR DETAILS)		TRENCH WIDTH:	3'		
		TRENCH DEPTH:	20"		
		TRENCH SPACING:	9' O.C.		
		TOTAL TRENCH LENGTH:	400'		
		NUMBER OF TRENCHES:	3		
		GRAVEL DEPTH:	400' deep		
		TANK SIZE:	1000 gal		
		PUMP TANK SIZE:	1000 gal		
		DISTRIBUTION DEVICE:	Pressure		

O-shot grade
 From House to
 Tank 11" - OK
 40 feet from House
 to tank
 note Position of
 spec tank

FOR: Brassfield Development Group
 ISSUED BY: Ch. Hill
 DATE: 12/9/15

CONSTRUCTION AUTHORIZATION FOR IMPROVEMENT PERMIT# **8432**

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: Letter to submit to local gov

Date: 12/9/15 Environmental Health Specialist: Ch. Hill
 Construction Authorization Addendum ☒ Yes ☐ No

OPERATION PERMIT
 SYSTEM INSTALLED BY: Trueblood
 ISSUED BY: Ch. Hill
 DATE: 8-22-16
 PERFORMANCE, MONITORING, MAINTENANCE AND OPERATION
 AS REQUIRED BY RULE .1961

