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	405671 - 1
County ID Number:	182400696528
Evaluated For:	NEW

PERMIT VALID UNTIL: 02/15/2029

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

Applicant:	Keith Building
Address:	2705 Alveston Circle
City:	Wake Forest
State/Zip:	NC 27587
Phone #:	home: (919) 427-2291 cell :(919) 427-2291

Property Owner:	Keith Building
Address:	3638 Wild Orchid CT
City:	Wake Forest
State/Zip:	NC. 27587
Phone #:	home: (919) 427-2291 cell :(919) 427-2291

Property Location & Site Information

Address: 3638 Wild Orchid CT Wake Forest, NC 27587 Subdivision: New Forest Block/Phase: NEW Lot: 4

Directions

Road #:

Structure: SINGLE FAMILY

# of Bedrooms: 3

# of People:

*Water Supply: NEW WELL

System Specifications

Initial System

Usable Soil Depth:

Design Flow: 360

Soil Application Rate: 0.3000

Minimum Trench Depth: 12 Inches

Maximum Trench Depth: 13 Inches

*System Classification/Description:
TYPE III G. OTHER NON-CONV. TRENCH SYSTEMS

Septic Tank: 1000 Gallons

Pump Required ◯ Yes (X) No ◯ May Be Required

*Proposed System:
25% REDUCTION

Pump Tank: _____ Gallons

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

Repair System

Usable Soil Depth:

Soil Application Rate:

*System Classification/Description:
TYPE V F. ANAEROBIC DRIP

*Proposed System: DRIP

Minimum Trench Depth: _____ Inches

Maximum Trench: Depth: _____ Inches

Pump Required: ◯ Yes ◯ No (X) May Be Required

Pump Tank: _____ 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**

Site permitted under G.S. 130A-335(a2). Refer to soil scientist site sketch/flagging in field. System flagged in field by others. NO grading/disturbing septic area. Haul in 6-8" of approved cover extending 5' past system, sloped to drain. Min. 50' off wells.

CDP File Number: 405671 County ID Number: 182400696528

The Department and Local Health Department may impose conditions on the issurance and may revoke the permits for failure of the 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 (per rule .0301(a).

Authorized State Agent: Bullock, Will Date of Issue: 02/15/2024

Total TIme: (HH:MM)

○ Hand Drawing ⊘ Import Drawing ****Site Plan/Drawing attached.****

GRANVILLE VANCE public health

Construction Authorization

Granville County Health Dept
Environmental Health
101 Hunt Drive
Oxford, NC 27565
Phone: (252) 492-5263 Fax: (252) 492-2361

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*CDP File Number: 405671 - 1
County ID Number: 182400696528
Evaluated For: NEW

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☐ Open Pump System Sheet

Applicant:	Keith Building
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State/Zip:	NC 27587
Phone #:	home: (919) 427-2291 cell :(919) 427-2291

Property Owner:	Keith Building
Address:	3638 Wild Orchid CT
City:	Wake Forest
State/Zip:	NC. 27587
Phone #:	home: (919) 427-2291 cell :(919) 427-2291

Property Location & Site Information

Address/Road #: 3638 Wild Orchid CT Wake Forest, NC 27587
Subdivision: New Forest Phase: NEW Lot: 4

Directions:

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

System Specifications

Usuable Soil Depth:
Design Flow: 360
Soil Application Rate: 0.3000
*System Classification/Description: TYPE III G. OTHER NON-CONV. TRENCH SYSTEMS
*Proposed System: 25% REDUCTION

Minimum Trench Depth: 12 Inches
Maximum Trench Depth: 13 Inches
Minimum Soil Cover: 6 Inches
Maximum Soil Cover: 8 Inches
*Distribution Type: GRAVITY - PARALLEL (eq. d-box)

Nitrification Field: 900 Sq. ft.
No. Drain Lines: 6
Total Trench Length: 300 ft.
Trench Spacing: 9 - ____
Trench Width: 3 - ____
Aggregate Depth: ____ inches

○ Inches O.C.
(X) Feet O.C.
○ Inches
(X) Feet

Septic Tank: 1,000 Gallons
Pump Required: ○ Yes (X) No ○ May Be Required
Pump Tank: ____ Gallons
Grease Trap: ____ Gallons

Septic Tank Installer Grade Level Required: ○ I (X) II ○ III ○ IV

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:**

Site permitted under G.S. 130A-335(a2). Refer to soil scientist site sketch/flagging in field. System flagged in field by others. NO grading/disturbing septic area. Haul in 6-8" of approved cover extending 5' past system, sloped to drain. Min. 50' off wells.

The Authorization for Wastewater System Construction shall be valid for a period equal to the period of validity of the Improvement Permit and may be issued at the same time the Improvement Permit issued (NCGS 130A-336(b)). If the installation has not been completed during the period of validity of the Construction Permit, the information submitted in the application for a permit or Construction Authorization shall become invalid , and may be suspended or revoked (.0204(k)(1)). The person owning or controlling the system shall be responsible for assuring compliance with the laws, rules, and permit conditions regaurding system location, installation, operation, maintenance, monitoring, reporting and repair (per rule .0301((a)).

Authorized State Agent: Bullock, Will REHS Date of Issue: 02/15/2024

○ Hand Drawing ⊘ Import Drawing

****Site Plan/Drawing attached.****

Total Time : (HH:MM) ____

Harold Kelly
NC Licensed Soil Scientist
412 Clayton Ave.
Roxboro, NC 27573
(336) 322-4724 (office)
(336) 598-2382 (mobile)
hkelly0501@gmail.com

LSS Evaluation/Site Plan
G.S. 130A-335(a2) Submittal

For: **Tim Keith**
bldrkeith@aol.com

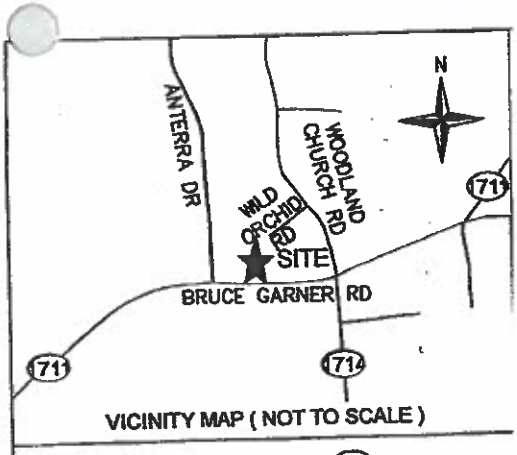
Property: PIN- 182400696528
Wild Orchid Ct.
Granville County, NC

Notes:
- Soil boring locations marked with orange flagging
- Soil borings locations are approximate
- Divert surface water away from system area.
- Site plan scale: 1" = 50"

Proposed System (IIIG)
- 3 bedrooms (360 gpd)
- LTAR 0.3 GPD/Ft2
- 300 LN FT (accepted) 5 lines@ 60'
- Very gently sloping (~2%)
- 13" Maximum trench depth w/ 6-8" loamy cover
- 1000 gallon septic tank
- Anaerobic drip repair

LICENSED SOIL SCIENTIST
Harold L. Kelly, Jr.
THE GREAT SEAL OF THE STATE OF NORTH CAROLINA
.1143
STATE OF NORTH CAROLINA

H. Kelly 3/20/23



VICINITY MAP (NOT TO SCALE)

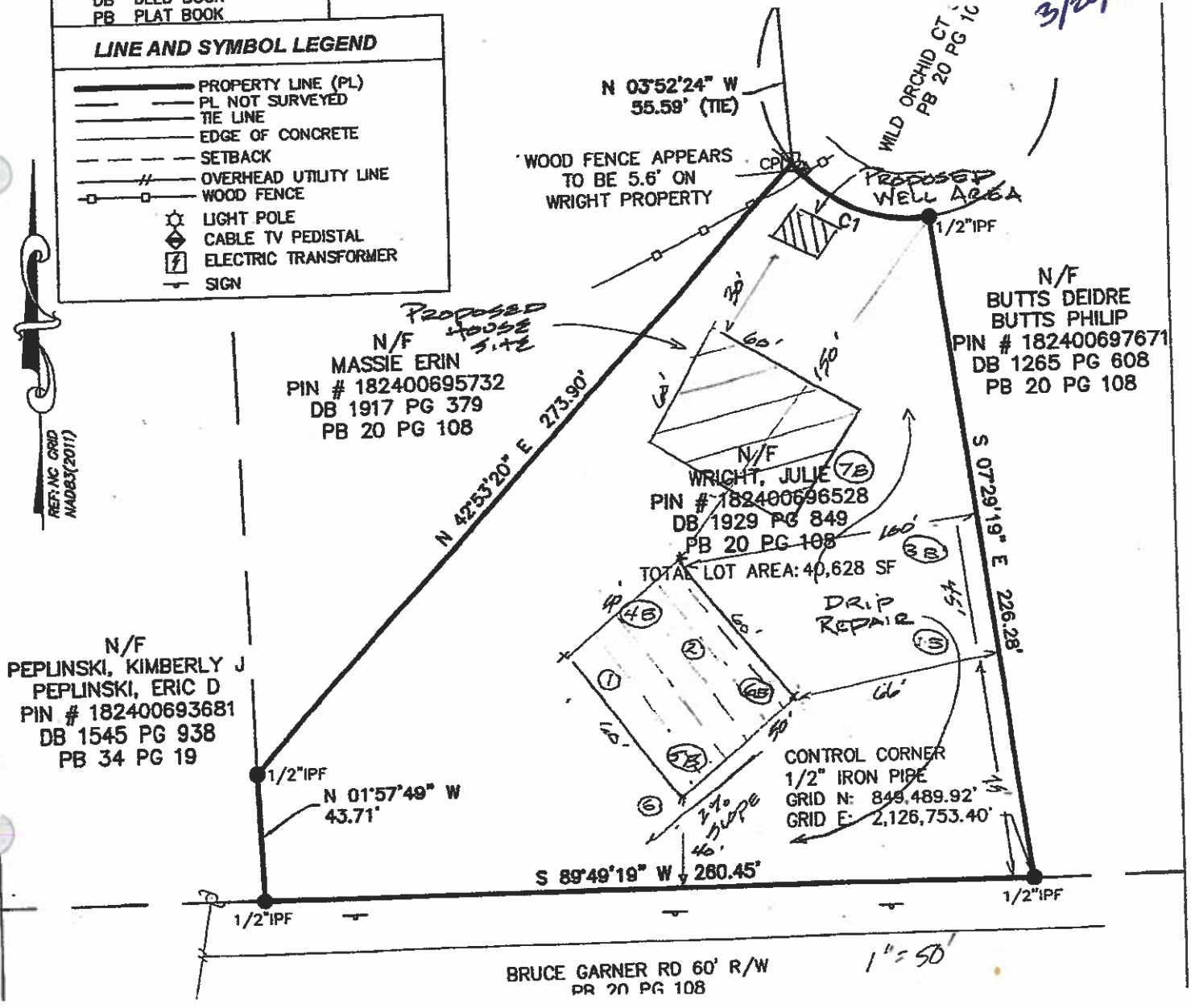
444

ABBREVIATION LEGEND

IRF	REBAR FOUND
IPF	IRON PIPE FOUND
N/F	NOW OR FORMERLY
CP	COMPUTED POINT
DB	DEED BOOK
PB	PLAT BOOK

LINE AND SYMBOL LEGEND

- PROPERTY LINE (PL)
- PL NOT SURVEYED
- TIE LINE
- EDGE OF CONCRETE
- SETBACK
- OVERHEAD UTILITY LINE
- WOOD FENCE
- LIGHT POLE
- CABLE TV PEDISTAL
- ELECTRIC TRANSFORMER
- SIGN



Harold Kelly
NC Licensed Soil Scientist, REHS, CPSS
412 Clayton Ave.
Roxboro, NC 27573
(336) 322-4724 (office)
(336-598-2382 (cell)

Tim Keith
bldrkeith@aol.com

March 20, 2023

RE: LSS Evaluation (G.S. 130A-335 (a2))/ PIN: 182400696528/ Wild Orchid Ct. / Granville County, NC

Dear Mr. Keith:

This LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335 (a2).

At your request, a soil/site evaluation was performed on the property referenced above. The proposed system area is intended to serve a three bedroom home (360 GPD). The site/soil evaluation was performed in accordance with NC .1900 Rules for Sewage Treatment and Disposal Systems. A site plan and soil profile descriptions accompany this report.

The proposed system and repair area were delineated based on a series of auger borings. The locations of the soil auger borings/profile descriptions were marked with orange flagging. The location of the proposed initial system area was located by collecting measurements from property lines and property corners.

Soil depth to unsuitable characteristics (soil wetness condition), in the proposed system area was 25 to 27". The site is uniform and gently sloping (~2%), and approximately 3,000 FT2 in size. A maximum trench depth of 13" is proposed and will require 6 to 8" of loamy soil cover material. An assigned LTAR of 0.3 GPD/FT2 would require 300 linear feet of *Accepted* drain line, or 5 lines @ 60'. The system area must be carefully cleared to minimize site disturbance. Site topography will require an anaerobic drip system repair (soils depths in repair area are 18 to 36" in depth. A pump system may be required if gravity flow is not possible. This report will allow the Granville County Health Department to issue an *Improvement Permit* for this property in accordance with G.S. 130A-335 (a2). The system design and *Authorization to Construct* are the responsibility of Granville County Environmental Health.

In summary, in my professional opinion, there is an adequate area of provisionally suitable soil on the parcel for the permitting and installation of an initial accepted system and a drip system repair. The proposed locations of the home and well are shown on the site plan, and can be revised.

This report may be submitted to Granville County Environmental Health, along with the required application for an Improvement Permit. Thank you for the opportunity to provide you with this information. Please feel free to contact me if you, or Granville County Environmental Health, have any questions or concerns regarding this report (336-598-2382).

Sincerely,

H. Kelly

Harold Kelly
NC Licensed Soil Scientist

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

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*CDP File Number 405671

PIN Number: 182400696528

Tax Lot #: 4 Tax Block #:

Evaluated For:

PERMIT VALID UNTIL: 02/14/2029

Property Owner:	Keith Building
Address:	3638 Wild Orchid CT
City:	Wake Forest
State/Zip:	NC / 27587
Phone #:	H: (919) 427-2291 C: (919) 427-2291

Applicant:	Keith Building
Address:	2705 Alveston Circle
City:	Wake Forest
State/Zip:	NC / 27587
Phone #:	H: (919) 427-2291 C: (919) 427-2291

Property Location & Site Information

Address/Road #: 3638 Wild Orchid CT
Wake Forest NC, 27587

Subdivision: New Forest Phase: Lot: 4

*Proposed use of Well:

If Other:

Applicant Email: bldrkeith@aol.com

Owner Email: bldrkeith@aol.com

Directions:

Well Contractor Information

Drilling Contractor:

Driller Registration:

Permit Conditions

*Permit Conditions

Refer to soil scientist site sketch for proposed well area. Keep proposed well min. 50' off any part of septic (Including neighboring lots). Min. 25' off house foundation. Min. 10' off property lines. Stay out of road right of way. Well driller responsible for maintaining all setbacks.

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. Issuance of this well permit does not guarantee water quality or adequate water production from the well once it is installed or repaired.

*Issued By: Bullock, Will

*Date of Issue: 02/15/2024

Authorized State Agent: WBL FEHS

Owner/Applicant: Keith Building

○ Hand Drawing ⊖ Import Drawing

****Site Plan/Drawing attached.****

GRANVILLE VANCE
public health

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