

SEWAGE DISPOSAL SYSTEM INSTALLATION REVIEW

SEPTIC AND PUMP TANK INSPECTION

SEPTIC TANK

Manufacturer Premium
 Date of Manufacture 10-26-2021
 Stamp 1000 gallons
 Capacity STB 142
 Tee ✓
 Baffle ✓
 Sealant ✓
 AIR GAP ✓, FILTER ✓, RISER ✓

INITIAL

KBS

DATE

03-15-2022

PUMP TANK

Manufacture _____
 Date of Manufacture _____
 Stamp _____
 Capacity _____
 Sealant _____
 Manhole _____
 RISER _____, SEALANT _____

MECHANICAL INSPECTION

PUMP

Manufacturer and Model # _____
 Control Panel _____
 Alarm _____
 Electrical Connection _____
 SEALANT AROUND CONDUIT _____

NITRIFICATION/DISTRIBUTION AND DRAINFIELD INSPECTION

DISTRIBUTION BOX

Level ✓
 Equal Distribution ✓
 Other ✓

DISTRIBUTION MANIFOLD

Pipe Size _____
 Gate Valves _____
 Other _____

OTHER DISTRIBUTION

Type _____

NITRIFICATION LINES

	LINE 1	LINE 2	LINE 3	LINE 4	LINE 5	LINE 6
Trench Width	<u>3'</u>	<u>3'</u>	<u>3'</u>			
Trench Length	<u>75'</u>	<u>75'</u>	<u>75'</u>			
Trench Grade	<u>✓</u>	<u>✓</u>	<u>✓</u>			
Chamber Depth	<u>12"</u>	<u>12"</u>	<u>12"</u>			

WELL INSPECTION

LOCATION OF WELL

58' from drainfield (existing well)

COMMENTS:

R-G-C/M 36 (III)

KBS

03-15-20

Pln _____

Final Sketch

Subdivision -- Section -- Lot

Water Specialist (Hillsborough)
System Installer

03-08-2022
Date



03-15-2022
Date

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 Applicant's Name & Address Walnut Aghenor 267 Timber Dr #963 Garner, NC 27529	LOT SIZE	RESIDENCE ☒ BUSINESS ☐ OTHER ☐	NUMBER OF BEDROOMS: 3	NUMBER OF OCCUPANTS: 6 MAX	
	PROPERTY ADDRESS/LOCATION: 4660 Dorsey Rd	WATER SUPPLY WELL ☐ PUBLIC ☐	INITIAL INSTALLATION	REPAIR	
		TYPE OF WASTEWATER SYSTEM		III	
SUBDIVISION:		DESIGN FLOW:		360 gpd	*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.
LOT NUMBER:		LTAR:			
REFERENCE SKETCH (SEE PLAT FOR DETAILS) * Do not install when soil is wet. * Contractor is establish + maintain contour.		ABSORPTION AREA:			
		TRENCH WIDTH		3'	
		TRENCH DEPTH:		18-20"	
		TRENCH SPACING:		9' o.c.	
		TOTAL TRENCH LENGTH:		225'	
		NUMBER OF TRENCHES:		3	
	GRAVEL / ACCEPTED:		accepted	PERMIT VALID FOR: 5 YEARS YES NO	
	TANK SIZE:		1000 gal		
	PUMP TANK SIZE:		N/A		
	DISTRIBUTION DEVICE:		new 2 box		

IMPROVEMENT PERMIT

DATE:

FOR:

ISSUED BY:

CONSTRUCTION AUTHORIZATION FOR IMPROVEMENT PERMIT#

repair

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: replace tank + d-box install 225' of accepted product. water line must be fixed!

 Date: 2-2-2022 Environmental Health Specialist: Bailey Stiles

 Construction Authorization Addendum ☒ Yes ☐ No

OPERATION PERMIT

DATE:

03-08-22 (line) 03-15-22 (tank)

SYSTEM INSTALLED BY:

ISSUED BY:

Water Specialist (Hillsborough)
Bailey Stiles

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