

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

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

For Office Use Only

*CDP File Number 415338 - 1
County ID Number: 163400164083
Evaluated For: NEW

PERMIT VALID UNTIL: 08/08/2029

Applicant: Summer Construction
Address: PO Box 1011
City: Youngsville
State/Zip: NC 27596
Phone #: home: (919) 422-5713 cell: (919) 422-5713

Property Owner: JSW Partners
Address: 3909 Cedar Knolls
City: Youngsville
State/Zip: NC, 27596
Phone #: _____

Property Location & Site Information
Address: 3909 Cedar Knolls Youngsville, NC 27596
Subdivision: Cedar Knolls

Block/Phase: NEW Lot: 6

Directions
Road #: _____
Structure: SINGLE FAMILY
of Bedrooms: 4
of People: _____
*Water Supply: NEW WELL

System Specifications

Initial System
Usable Soil Depth: _____
Design Flow: 480
Soil Application Rate: 0.3000

Minimum Trench Depth: 22 Inches
Maximum Trench Depth: 24 Inches

*System Classification/Description:
TYPE III G. OTHER NON-CONV. TRENCH SYSTEMS
*Proposed System:
25% REDUCTION

Septic Tank: 1000 Gallons
Pump Required: ☐ Yes ☒ No ☐ May Be Required
Pump Tank: _____ Gallons

Repair System Required: ☒ Yes ☐ No ☐ No, but has Available Space

Repair System

Usable Soil Depth: _____
Soil Application Rate: 0.300

Minimum Trench Depth: _____ Inches
Maximum Trench Depth: _____ Inches

*System Classification/Description:
TYPE III E. PPBPS GRAVITY DOSED SYSTEM
*Proposed System: HORIZONTAL PPBPS

Pump Required: ☐ Yes ☒ No ☐ 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

Partial initial system laid out in field. Tank/D box/Drain lines min. 10' off property line(s). Stay off all easements. Min. 50' off wells.

CDP File Number: 415338

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The Department and Local Health Department may impose conditions on the issuance 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 if the site plan, plat, or intended use changes (MCGS 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:

08/08/2024

Total Time: (HH:MM)

☒ Hand Drawing

☐ Import Drawing

Site Plan/Drawing attached.

____ : ____

GRANVILLE VANCE

Construction Authorization

public health

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: 415338 - 1
County ID Number: 183400164083
Evaluated For: NEW

PERMIT VALID UNTIL: 08/08/2029

☐ Open Pump System Sheet

Applicant: Summer Construction
Address: PO Box 1011
City: Youngsville
State/Zip: NC 27596
Phone #: home: (919) 422-5713 cell: (919) 422-5713

Property Owner: JSW Partners
Address: 3909 Cedar Knolls
City: Youngsville
State/Zip: NC 27596
Phone #:

Property Location & Site Information

Address/Road #: 3909 Cedar Knolls Youngsville, NC 27596
Subdivision: Cedar Knolls Phase: NEW Lot: 6

Directions:

Structure: SINGLE FAMILY

of Bedrooms: 4

of People:

*Water Supply: NEW WELL

System Specifications

Usuable Soil Depth: 480 Minimum Trench Depth: 22 Inches

Design Flow: 0.3000 Maximum Trench Depth: 24 Inches

Soil Application Rate: 0.3000 Minimum Soil Cover: Inches

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

*Proposed System: 25% REDUCTION *Distribution Type: GRAVITY - PARALLEL (eq. d-box) Maximum Soil Cover: Inches

Nitrification Field: 1200 Sq. ft. Septic Tank: 1,000 Gallons

No. Drain Lines: 4 Pump Required: ☐ Yes ☒ No ☐ May Be Required

Total Trench Length: 400 ft. ☐ Inches O.C. ☒ Feet O.C. Pump Tank: Gallons

Trench Spacing: 9 ☐ Inches ☒ Feet Grease Trap: Gallons

Trench Width: 3 ☐ Feet ☒ Inches Septic Tank Installer: ☐ I ☒ II ☐ III ☐ IV

Aggregate Depth: inches Grade Level Required: ☐ I ☒ 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:

Partial initial system laid out in field. Tank/D" box/Drain lines min. 10' off property line(s). Stay off all easements. 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 regarding system location, installation, operation, maintenance, monitoring, reporting and repair (per rule .0301(a)).

Authorized State Agent: Bullock, Will Date of Issue: 08/08/2024

☒ Hand Drawing ☐ Import Drawing **Site Plan/Drawing attached.** Total Time : (HH:MM)

**Granville-Vance Dist. Health Department
Environmental Health**

Pin _____

☒ Improvement Permit

☒ Construction Authorization

Permit Number P-415338

SITE SKETCH

Applicants Name Syner Const-

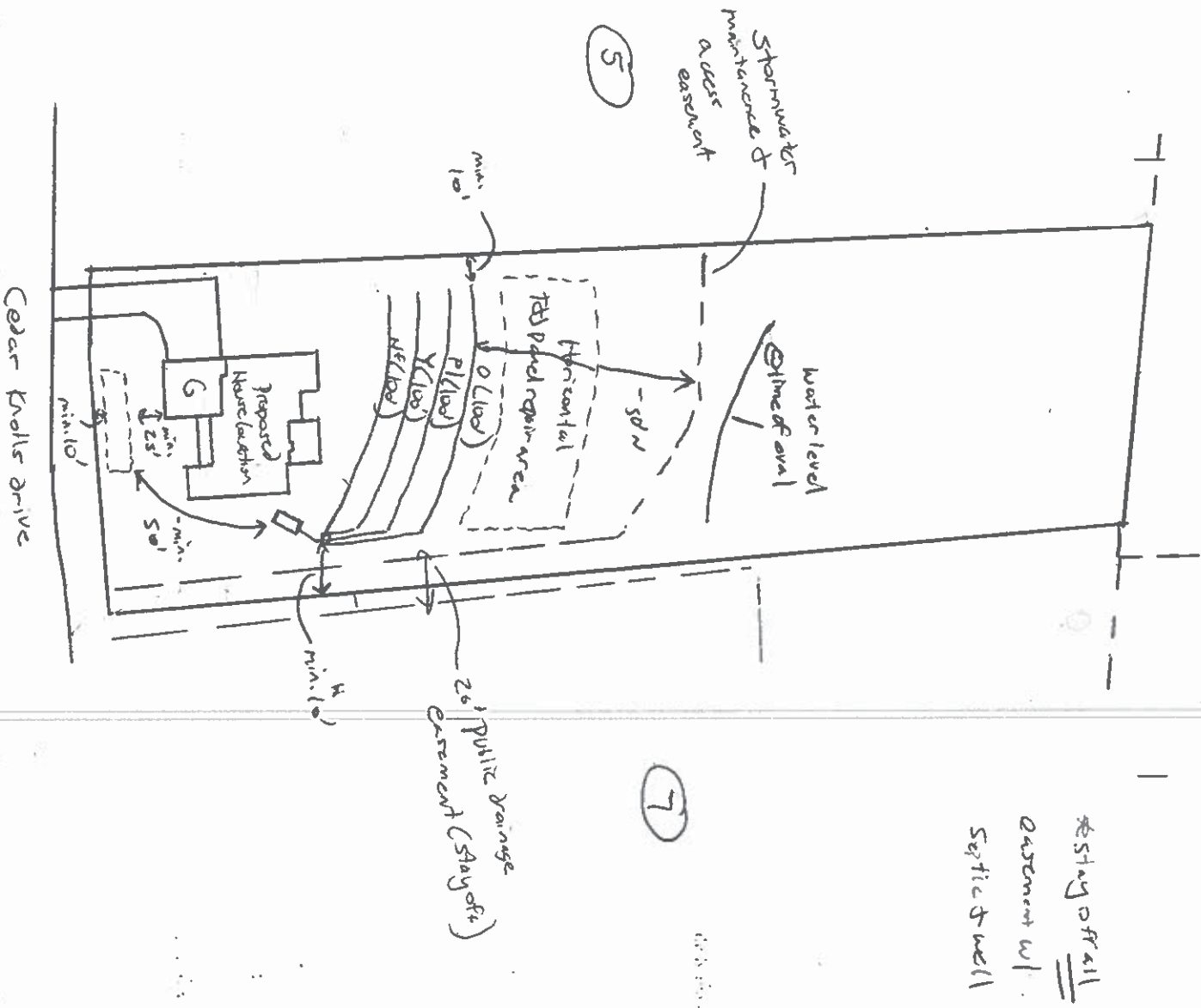
Address 399 Cedar Knolls Dr.

Subdivision - Section - Lot Cedar Knolls lot #6

Authorized State Agent Mike Rose, CEHS

Date 8/8/24

System components represent approximate contours only. The contractor must flag the system prior to beginning the installation to ensure that proper grade is maintained.



GRANTVILLE VANCE



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 415338
PIN Number: 183400164083
Tax Lot #: 6 Tax Block #:
Evaluated For:

PERMIT VALID UNTIL: 08/08/2029

Property Owner: JSW Partners
Address: 3909 Cedar Knolls
City: Youngsville
State/Zip: NC / 27596
Phone #:

Applicant: Summer Construction
Address: PO Box 1011
City: Youngsville
State/Zip: NC / 27596
Phone #: H: (919) 422-5713 C: (919) 422-5713

Property Location & Site Information

Address/Road #: Subdivision: Cedar Knolls
3909 Cedar Knolls
Youngsville NC, 27596

*Proposed use of Well: Phase: Lot: 6
If Other:
Applicant Email: bobby@summerconstruction.com
Owner Email:

Directions:

Well Contractor Information

Drilling Contractor:

Driller Registration:

Permit Conditions

*Permit Conditions
Keep proposed well min. 50' off any part of septic (including neighboring lots). Min. 25' off structural foundations. Min. 10' off front property line. Stay off all easements/right of ways. 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
Authorized State Agent: *Will Bullock*
Owner/Applicant: *JSW Partners / Summer Const.*

*Date of Issue: 08/08/2024
☒ Hand Drawing ☐ Import Drawing
Site Plan/Drawing attached.

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Well Construction Permit

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PIN Number: 183400164083

Tax Lot #: 6 Tax Block #:

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