



OPERATION PERMIT

Franklin County Health Department
107 Industrial Drive
Louisburg, NC 27549
Phone:

For Office Use Only

*CDP File Number 453788 - 1
County ID Number: _____
Evaluated For: NEW

Property Owner:

Owner Address:

City:

State/Zip: /

Phone #:

Address: 100 Purslane Dr
Franklinton, NC 27525

Road #:

Township:

Subdivision: Woodland Park

Phase : NEW Lot: 85

Structure: SINGLE FAMILY

of Bedrooms: 3

of People: 6

Water Supply: NEW WELL

Saprolite System?: ☐ Yes ☒ No

Pump Required?: ☐ Yes ☒ No

Design Flow: 360

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

Installer: **DB + Sons**

Specific System Installed: INFILTRATOR QUICK 4 STANDARD

STB: 502

PT:

Comments:

Certification #:

Septic Tank Date: _____

Pump Tank Date: _____

This system has been installed in compliance with applicable NC General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.

PERMIT CONDITIONS:

I. Performance: System shall perform in accordance with Rule .1301.

II. Monitoring: As required by Rule .1301.

III. Maintenance: Ground absorption sewage treatment and disposal systems shall be checked, and the contents of the septic tank removed, periodically from all compartments, to ensure proper operation of the system. The contents shall be pumped whenever the solids level is found to be more than 1/3 of the liquid depth in any compartment.

Other:

Subsurface Operator Required: ☐ Yes ☒ No

If yes, see attached sheet for additional operation conditions, maintenance and reporting.

Operation:

Other:

Authorized State Agent: Leonard, Shad

Date of Issue: 10/14/2025

Owner/Applicant: _____



File # 453 788 PIN# _____

Property Address: 100 Purslane

Applicant or Owner Name: Brachlyn Homes

Environmental Health Septic/Well Permit Diagram

Building permits cannot be issued nor should construction begin without Construction Authorization Issuance.

☒ Septic Improvement Permit ☒ Septic Construction Authorization (CA) ☒ CA Reissue** ☒ As Built
☒ Well Construction Authorization ☒ Additional Diagram/Specifications Attached

Diagram Date**: 10-14-25 EHS: [Signature]

**Any previously dated CA diagram is revoked and/or invalid. Confirm this is the valid diagram for the site before beginning any construction.

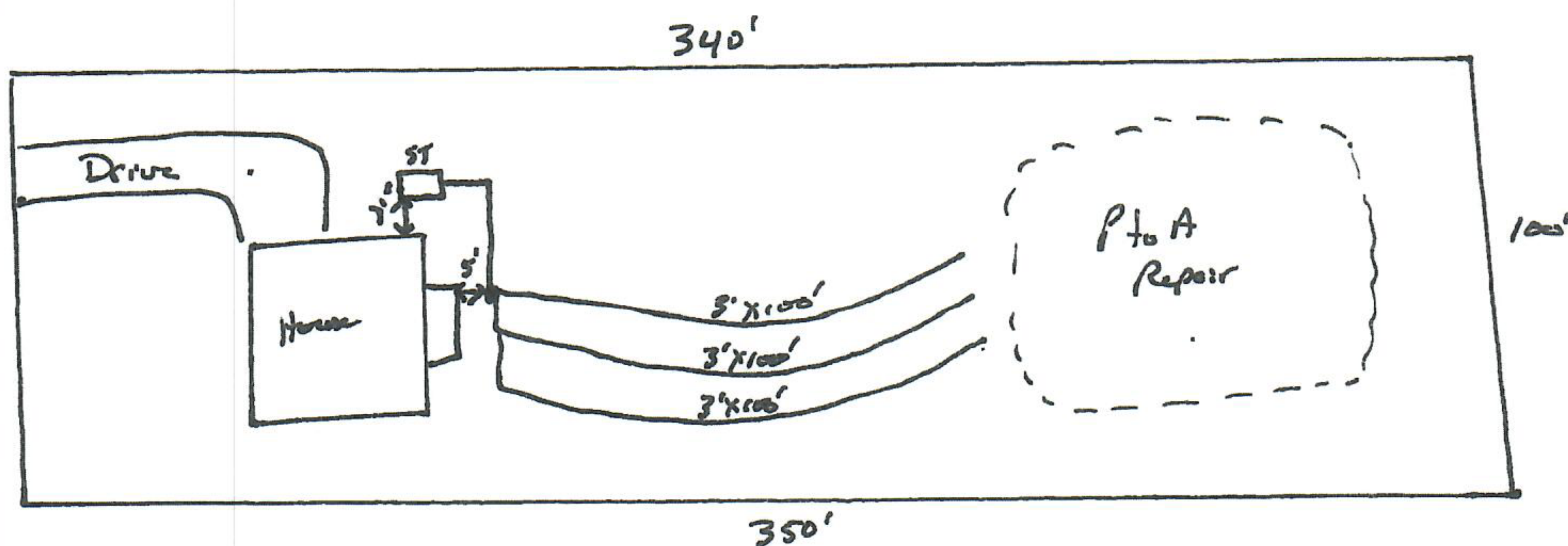
Installation/grouting inspections may be scheduled the day before, or, the day of installation until 9am by contacting the Environmental Health office at 919 496 8100. A revisit fee may apply if installation is not ready for inspection at the time requested. Septic Operator Permits will be issued after installation is approved, all permit conditions are met, and any outstanding fees are paid. Well Certificate of Completion will be issued after well head approval, all permit conditions are met, and any outstanding fees are paid.

Septic Tank 1000 Pump Tank _____ Drainfield 3' x 300' Type System Acc Max Trench Depth 30"

Septic Contractor DB+ Sons Septic/Pump tank dates DB 1000 502 Pump Fee Paid _____

Well Contractor _____ Well Head Date: _____ Pump Final: _____ N/A (circle)

As Built (Not to scale)



3' x 300' I Q4 - D box

✓ d Tank + lines 10/14/25 SEL

~~SEL~~