



## IMPROVEMENT PERMIT

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

### For Office Use Only

\*CDP File Number 451315 - 1  
County ID Number: \_\_\_\_\_  
Evaluated For: NEW

PERMIT VALID UNTIL: 04/15/2030

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

Applicant: Brandywine Homes  
Address: PO BOX 910  
City: Wake Forest  
State/Zip: NC 27588  
Phone #: \_\_\_\_\_

Property Owner: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_  
Phone #: \_\_\_\_\_

### Property Location & Site Information

Address: 190 Cherry Bark Dr Youngsville, NC 27596 Subdivision: Sorrell Oaks Block/Phase: NEW Lot: 33

### Directions

Road #: \_\_\_\_\_  
Structure: SINGLE FAMILY 190 Cherry Bark Dr

# of Bedrooms: 4  
# of People: 4  
\*Water Supply: N/A

### System Specifications

#### Initial System

Usable Soil Depth: 40  
Design Flow: 480  
Soil Application Rate: 0.3000

Minimum Trench Depth: \_\_\_\_\_ Inches  
Maximum Trench Depth: 23 Inches

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

Septic Tank: 1000 Gallons

Pump Required ☐ Yes ☒ No ☐ May Be Required

\*Proposed System:  
25% REDUCTION

Pump Tank: \_\_\_\_\_ Gallons

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

### Repair System

Usable Soil Depth: 36  
Soil Application Rate: 0.300

Minimum Trench Depth: \_\_\_\_\_ Inches  
Maximum Trench: Depth: 19 Inches

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

Pump Required: ☐ Yes ☒ No ☐ May Be Required

\*Proposed System: 25% REDUCTION

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

CDP File Number: 451315

County ID Number:

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 (NCGS 130A-335(f)). The person owning or controlling the system location, installing, operation, maintenance, monitoring, reporting, and repair (per rule .0301(fa)).

Authorized State Agent: Leonard, Shad Date of Issue: 04/15/2025

Total Time: (HH:MM)

☐ Hand Drawing

☐ Import Drawing

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

       :



## Construction Authorization

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

### For Office Use Only

\*CDP File Number: 451315 - 1  
County ID Number: \_\_\_\_\_  
Evaluated For: NEW

PERMIT VALID UNTIL: 04/15/2030

☐ Open Pump System Sheet

Applicant: Brandywine Homes  
Address: PO BOX 910  
City: Wake Forest  
State/Zip: NC 27588  
Phone #: \_\_\_\_\_

Property Owner: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_  
Phone #: \_\_\_\_\_

### Property Location & Site Information

Address/Road #: 190 Cherry Bark Dr Youngsville, NC 27596 Subdivision: Sorrell Oaks Phase: NEW Lot: 33  
**Directions:**  
Structure: SINGLE FAMILY 190 Cherry Bark Dr  
# of Bedrooms: 4  
# of People: 4  
\*Water Supply: PUBLIC

### System Specifications

Usuable Soil Depth: 40 Minimum Trench Depth: \_\_\_\_\_ Inches  
Design Flow: 480 Maximum Trench Depth: 23 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)  
Nitrification Field: \_\_\_\_\_ Sq. ft. Septic Tank: 1,000 Gallons  
No. Drain Lines: 3 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 - \_\_\_\_\_ ☐ Inches ☒ Feet Septic Tank Installer  
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:

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: Leonard, Shad Date of Issue: 04/15/2025



Hand Drawing



Import Drawing

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

Total Time : (HH:MM) \_\_\_\_\_



File # 451315 PIN# \_\_\_\_\_

Property Address: 190 Cherry Bark Dr

Applicant or Owner Name: Brandywine 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\*\*: 4-15-25 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.

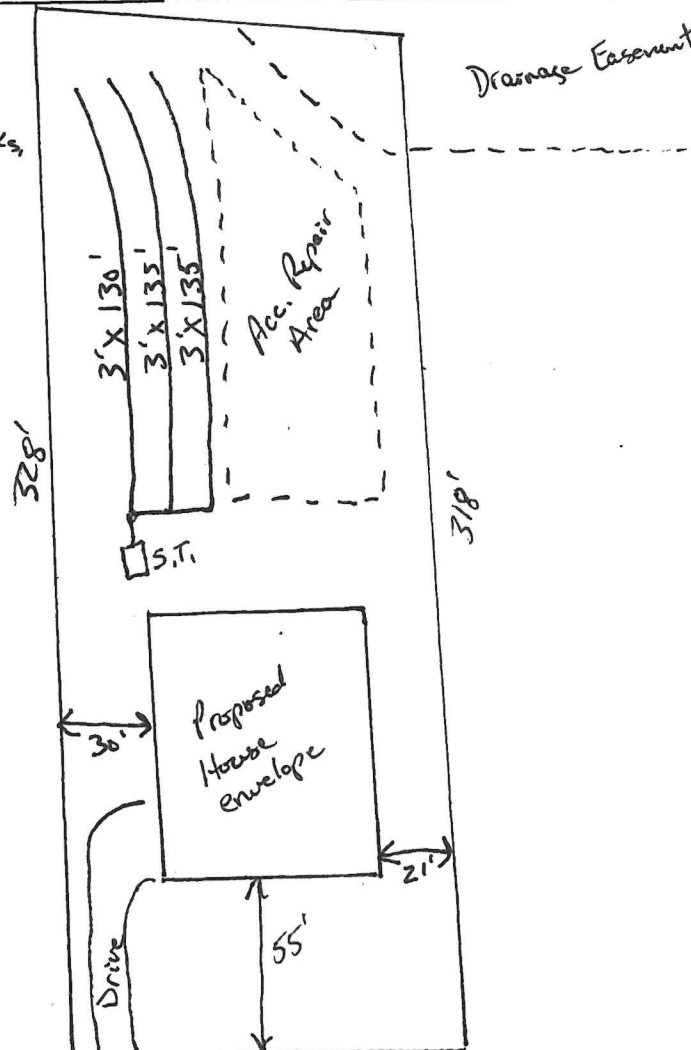
Installation/grouting inspections may be scheduled the day before, or, the day of installation until 9am by contacting the Environmental Health office at 919 496 8100. A revisit fee may apply if installation is not ready for inspection at the time requested. Septic Operations Permits will be issued after installation is approved, all permits 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'x400' Type System Acc Max Trench Depth 23"

Septic Contractor \_\_\_\_\_ Septic/Pump tank dates \_\_\_\_\_ Pump Fee Paid \_\_\_\_\_

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

- \* Drawing not to scale
- \* Maintain proper setbacks
- \* Install drainlines on contour.
- \* Layout may vary slightly





Cdp-451315  
Franklin County Environmental Health  
127 S Bickett Blvd.  
Louisburg, NC 27549  
Phone (919) 496-8100  
www.franklincountync.gov

Issued to: Brandywine Homes

Location: 190 CHERRY BARK Drive YOUNGSVILLE , NC 27596

**NEW SEPTIC APPLICATION**

Application Type: NEW SEPTIC

Application Number: E-25-189

Building Type:

Project Type: Single Family Dwelling

# of Bedrooms: 4

Residential Project Type: Single Family Dwelling

Building Foundation: Crawlspace

Water Source: New Well

Date: April 15, 2025

Acreage:

Zoning: R-30

# of Occupants: 4

Commercial Project Type:

Square Footage of Facility:

Number of Employees:

Number of Seats:

Preferred Type of Septic System: (2) Accepted  
(polystyrene, chamber)

Notes:

Parcel ID #: 050372

Subdivision:

Somrel Oaks #33

**Applicant Information**

Applicant Name: Brandywine Homes

Address: P.O. Box 910 Wake forest , Nc 27588

Phone: 919-427-8982

Email: bwhomesfranklin@gmail.com

**Property Owner Information**

Owner Name: NULL

Address: NULL NULL , NULL NULL

Phone:

Email:

**General Contractor Information**

Contractor Name: Brandywine Homes, Inc.

Address: PO Box 910 Wake Forest, NC 27588 ,

Phone: (919) 554-3351

Email: bwhomes02@gmail.com

**Zoning**

Zoning Permit #: Z-25-361

County Water: Yes

Front Setback: 30

Right Setback: 10

Left Setback: 10

Rear Setback: 25

The applicant shall notify the Environmental Health Department upon submittal of this application if any of the following apply to the property/site in question. If this answer is "Yes" the applicant must attach supporting documentation and/or show their location on the plot/site plan.

Does the site contain any jurisdictional wetlands? No

Does the site contain, or have within 100 feet, any existing wells and/or septic systems? No

Is any wastewater going to be generate other than domestic sewage? No

Is the site subject to approval by an other public agency? No

Are there any easements or right-of-ways on this site? No

Are there any underground utilities on the site? No

**IF THE INFORMATION IN THE APPLICATION FOR A SEPTIC PERMIT IS FALSIFIED, CHANGED, OR THE STIE IS ALETERED, THEN ANY RELATED PERMITS AND CONSTRUCTION AUTHORIZATIONS SHALL BECOME INVALID.** This application is valid for one year from the date of application payment. The septic system approval (permit) is valid for five years from the date of Improvement Permit issuance, or without expiration by request with proper documentation. The applicant is responsible for the proper identification and labeling of all property lines, and existing utilities

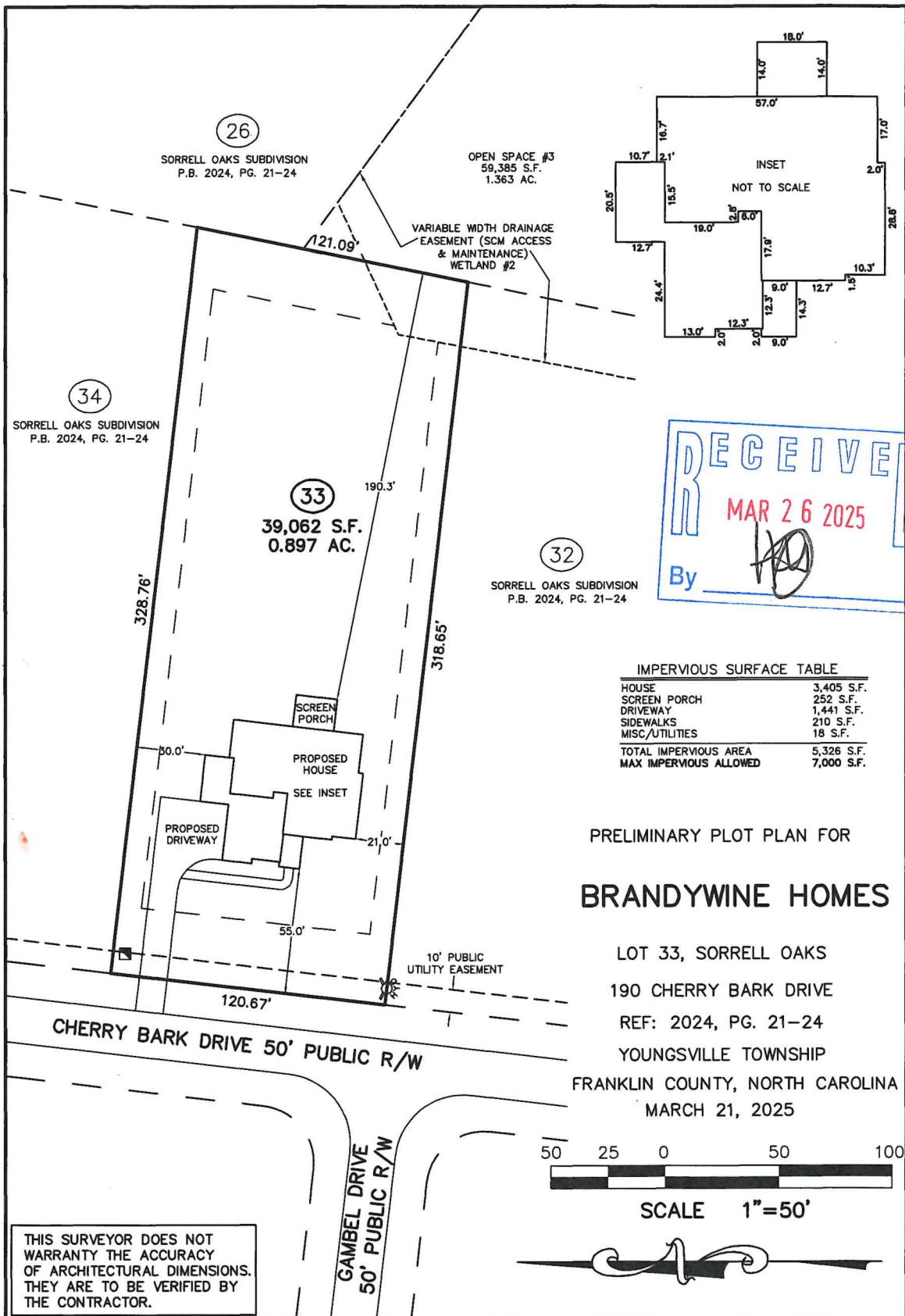
(including septic), and the desired features on site, as well as making the site accessible for evaluation. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. Permit issuance shall in no way be taken as a guarantee a septic system will function in a satisfactory manner for any given period of time. By signing below, the applicant attest he/she is the property owner or has been granted permission to be the property owner's legal representative, for the purposes of obtaining a septic permit for the referenced property.

Colleen M Cunningham

**April 15, 2025**

\_\_\_\_\_  
Signature of Owner or Owner's Legal Representative

**Expires: March 25, 2026**



**CMP**  
Professional Land Surveyors  
C-1525  
333 S. White Street  
Post Office Box 1253  
Wake Forest, N.C. 27588  
(919)556-3148

**NOTES:**  
-THIS PLAN DOES NOT REFLECT AN  
ACTUAL SURVEY. IT IS A PRELIMINARY  
PLAN AND SHOULD BE USED FOR ITS  
INTENDED PURPOSE ONLY.  
-NOT FOR RECORDATION, CONVEYANCES,  
OR SALES.