SEWAGE DISPOSAL SYSTEM INSTALLATION REVIEW

SEPTIC AND PUMP TANK INSPECTION

SEPTIC TANK		INITIAL	DATE
Manufacturer	Mids	VTB	10-23-17
Date of Manufacture	8/14/17		
Stamp	STD858		
Capacity	1000		
Tee			
Baffle			
Sealant			
AIR GAP_____,FILTER_____, RISER_____			

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	✓	awc	10-26-17
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	L
Trench Width	3'	3'	3'	3'	3'	–
Trench Length	80'	80'	80'	80'	80'	–
Trench Grade	✓	✓	✓	✓	✓	–
~~Stone~~ Depth	–	–	–	–	–	–

EZ-Flow

WELL INSPECTION

LOCATION OF WELL_____

COMMENTS:

_____

_____

_____

Granville – Vance District Health Department
Environmental Health

Final Sketch

Pin _____

___Improvement Permit **___Construction Authorization**

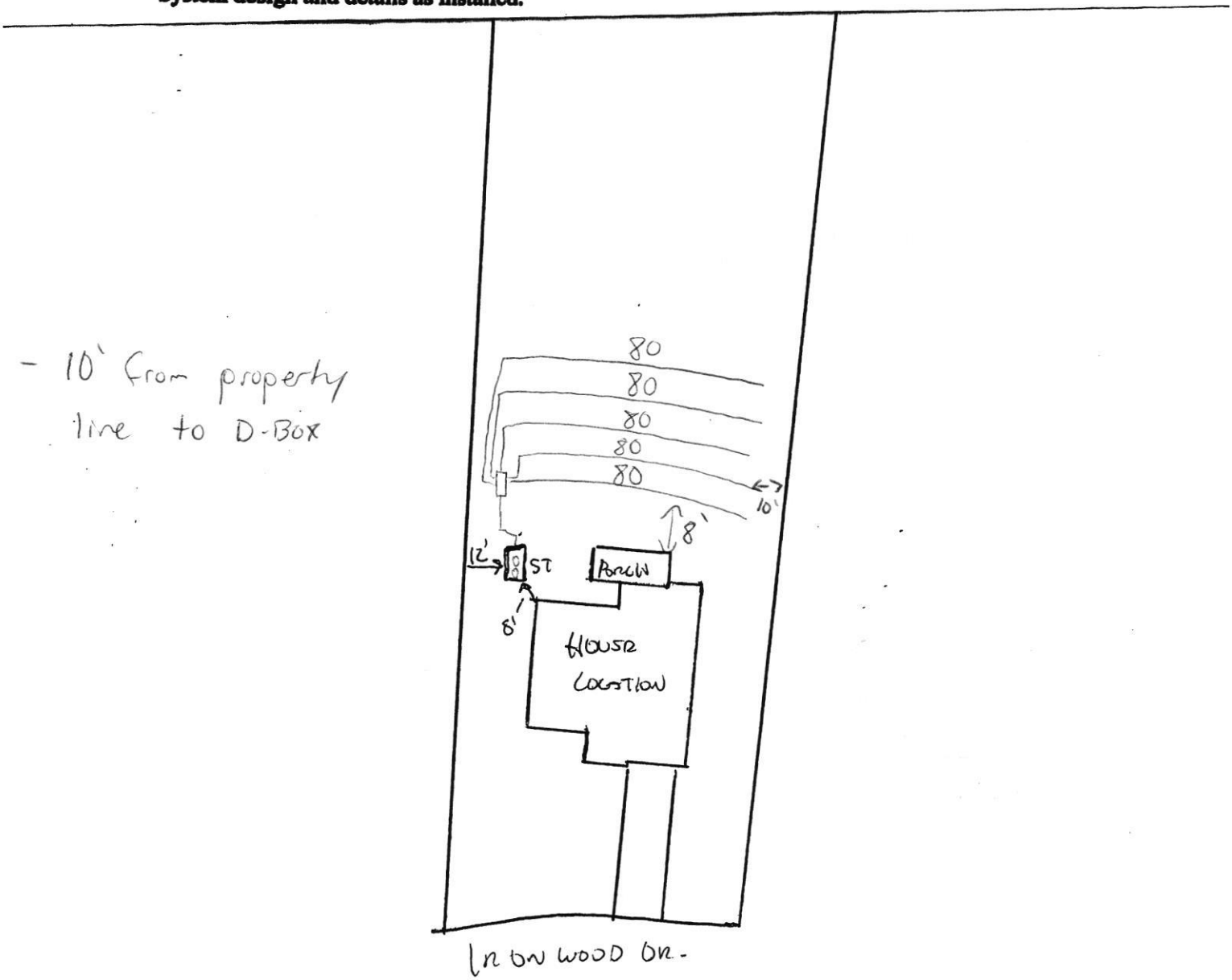
Sidney Homes **Permit No.** 9101 Ironwood 49
Applicant's Name **Subdivision – Section – Lot**

Physical Address: 3812 Ironwood Dr.

Glenn Todd **System Installer**

10-23-17 (tank) WTB **Date**

System design and details as installed.



- 10' from property line to D-Box

Neil Bell

TANKS SAND (10-23-17) WTB

Granville - Vance District Health Department
Environmental Health
Well Construction Permit

2074

Owner/Applicant: Savvy Homes Date: 5-8-17
Address or Location of Property: 3812 Ironwood Dr

Subdivision & Lot #: Ironwood / 49 Septic Permit #: 9101
Zoning Permit #: 19855 Environmental Health Specialist: AWC

This well permit is to locate and site the area that a private groundwater well may be established on the property listed above by the Environmental Health Specialists of Granville County. If one does not locate the well in the approved area and complete the well as specified by the 15A NCAC .02C rules, then permits may be revoked. At completion of drilling of the well, grout must be witnessed by EHS and a well log turned into Environmental Health.

Minimum Setbacks: (these are the main setbacks, but not all required setbacks)

Setback from property lines – 10 ft Setback from septic tank and drain field, including repair area – 100 ft
Setback from structural foundations – 25 ft Setback from ponds, lakes or other bodies of water – 50 ft

Site Sketch:

See attached site sketch for location details.

As Built Drawing:

Conditions:

Authorized Agent: Adam Currin
Date: 5-8-17

 # 1 Well Grout: (Circle or write in)
Witnessed: ~~Yes~~ or No EHS Agent: [illegible]
Date: 8-31-17 Annular Space Open: Yes or No
Over reamed: ~~Yes~~ or No Depth Grouted: 204
Method: ____ Pump ✓ Poured ____ Pressure
Well Log received: Yes or No (EHS to Attach to Permit)
Driller Name: SOUTHERN Cert. # ____
Depth: 315 Casing Depth: 120 GPM: 30

 # 2 Well Final: (Place a check mark when finalized)
Seal Present and Intact: ✓ Air Vent: ✓
Hose Spigot: ✓ Electrical Box: ✓
Pump Installer Tag: ✓ Well Installer Tag: ✓
All holes sealed: ✓ 12" above grade: ✓
Comments:

 # 3 Well Completion Permit: Adam Currin **EHS**
Date Completed: 11-29-17

 # 4 Water Samples Taken: Date: ____
EHS: ____ **Results:** ____
Retest: ____ **Results:** ____

PERMIT NUMBER 9101

GRANVILLE-VANCE DISTRICT HEALTH DEPARTMENT
IMPROVEMENT AND OPERATION PERMITS

COUNTY: Granville	TAX NO.	TYPE OF ESTABLISHMENTS		*THIS PERMIT SHALL BE ACCOMPANIED BY A LAYOUT SHOWN ON A PLAT, INCLUDING SYSTEM REQUIREMENTS.
	SR. NO.	RESIDENCE ✓ BUSINESS — OTHER —	NUMBER OF BEDROOMS: 4	NUMBER OF OCCUPANTS: 8 MAX
APPLICANT: Savvy Homes		WATER SUPPLY	WELL ✓ PUBLIC —	OTHER —
APPLICANT'S NAME & ADDRESS: 8025 Creedmoor Rd Raleigh, NC 27613		TYPE OF WASTEWATER SYSTEM	INITIAL INSTALLATION Type III a	REPAIR
PROPERTY ADDRESS/LOCATION: 3812 Ironwood Dr		DESIGN FLOW:	480 gpd	
		LTAR:	.3 gpd/ft²	
SUBDIVISION: Ironwood		ABSORPTION AREA:	1,200 ft²	
LOT NUMBER: 49		TRENCH WIDTH:	36"	
REFERENCE SKETCH (SEE PLAT FOR DETAILS)		TRENCH DEPTH:	20-22"	*THIS IMPROVEMENT PERMIT IS SUBJECT TO REVOCATION IF THE INTENDED USES CHANGE FROM THOSE SHOWN ON THE IMPROVEMENT PERMIT. CHANGES SHALL REQUIRE HEALTH DEPARTMENT APPROVAL.
		TRENCH SPACING:	9' O.C.	
		TOTAL TRENCH LENGTH:	400'	
		NUMBER OF TRENCHES:	4 or 5	
		GRAVEL DEPTH:	N/A	**PERMIT VALID FOR 5 YEARS** YES NO
		TANK SIZE:	1000 gal	
		PUMP TANK SIZE:	N/A	**NO EXPIRATION** YES NO
		DISTRIBUTION DEVICE:	D-BOX	

****

IMPROVEMENT PERMIT DATE: 5-8-17

FOR: Savvy Homes

ISSUED BY: Adam Currin

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CONSTRUCTION AUTHORIZATION FOR IMPROVEMENT PERMIT# 9101

Unless otherwise indicated, the same conditions above apply regarding system type, layout, location and installation requirements.
(The wastewater system cannot be installed until authorization is signed)

Comments: Contractor to establish & follow contour.

Date: 5-8-17 Environmental Health Specialist: Adam Currin

Construction Authorization Addendum ❑ Yes ❑ No

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OPERATION PERMIT DATE: 10-23-17 (Tank) WTD

SYSTEM INSTALLED BY: Glenn Todd 10-26-17 Lines

ISSUED BY: Adam Currin

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