



## Construction Authorization

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

### For Office Use Only

\*CDP File Number: 378002 - 2  
County ID Number: \_\_\_\_\_  
Evaluated For: NEW

PERMIT VALID UNTIL: 07/13/2027

☐ Open Pump System Sheet

COVER ADDED

Applicant: BRC HOMES INC  
Address: 12801 CAMP KANATA RD  
City: WAKE FOREST  
State/Zip: NC 27587  
Phone #: \_\_\_\_\_

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

### Property Location & Site Information

Address/Road #: 20 CARNATION RD  
YOUNGSVILLE, NC 27596  
Subdivision: LILYS MEADOW Phase: NEW Lot: 2  
Structure: SINGLE FAMILY  
# of Bedrooms: 4  
# of People: 2  
\*Water Supply: NEW WELL  
**Directions:**  
20 CARNATION DR

### System Specifications

\*Site Classification: PS w/Fill  
Design Flow: 480  
Soil Application Rate: 0.3000  
\*System Classification/Description:  
TYPE II A. CONV SYSTEM (SINGLE-FAMILY OR 480 GPD OR LESS)  
\*Proposed System:  
25% REDUCTION  
Minimum Trench Depth: \_\_\_\_\_ Inches  
Maximum Trench Depth: 16 Inches  
Minimum Soil Cover: 2 Inches  
Maximum Soil Cover: \_\_\_\_\_ Inches  
\*Distribution Type: GRAVITY - PARALLEL (eq. d-box)  
Nitrification Field: \_\_\_\_\_ Sq. ft.  
No. Drain Lines: 4  
Total Trench Length: 400 ft.  
Trench Spacing: \_\_\_\_\_ - 9  
Trench Width: \_\_\_\_\_ - 3  
Aggregate Depth: \_\_\_\_\_ inches  
Septic Tank: 1,000 Gallons  
Pump Required: ☐ Yes ☒ No ☐ May Be Required  
Pump Tank: \_\_\_\_\_ Gallons  
Grease Trap: \_\_\_\_\_ Gallons  
Septic Tank Installer  
Grade Level Required: ☐ I ☐ II ☐ III ☐ IV  
☐ Inches O.C.  
☒ Feet O.C.  
☐ Inches  
☒ Feet

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:

Please install septic system in accordance with attached design sheets submitted by CCSC. Respect all measurements indicated and setbacks.

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 (.1937(g)). 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

Authorized State Agent: Jones, Lori

Date of Issue: 07/13/2022

☐ Hand Drawing ☐ Import Drawing

\*\*Site Plan/Drawing attached,\*\*

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



## Well Construction Permit

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

For Office Use Only

\*CDP File Number 378002

PIN Number: \_\_\_\_\_

Tax Lot #: 2 Tax Block #: 048825

Evaluated For: SINGLE FAMILY \ WELL

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

Applicant: BRC HOMES INC  
Address: 12801 CAMP KANATA RD  
City: WAKE FOREST  
State/Zip: NC / 27587  
Phone #: \_\_\_\_\_

### Property Location & Site Information

Address/Road #: 20 CARNATION RD  
YOUNGSVILLE NC, 27596  
Subdivision: LILYS MEADOW Phase: \_\_\_\_\_ Lot: 2  
\*Proposed use of Well: SINGLE FAMILY  
If Other: \_\_\_\_\_  
Applicant Email: \_\_\_\_\_  
Owner Email: \_\_\_\_\_

Directions: 20 CARNATION DR

### Well Contractor Information

Drilling Contractor: \_\_\_\_\_ Driller Registration: \_\_\_\_\_

### Permit Conditions

#### \*Permit Conditions

Please install well in accordance with attached design sheets submitted by CCSC. Respect all measurements indicated and 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: Jones, Lori

\*Date of Issue: 07/13/2022

Authorized State Agent: \_\_\_\_\_

Owner/Applicant: \_\_\_\_\_

☐ Hand Drawing ☐ Import Drawing

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



Parcel ID: 048825  
File # 378502 PIN# \_\_\_\_\_

Property Address: 20 Carnation Rd. Yngs.

Applicant or Owner Name: BRC Home Inc.

### 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\*\*: 7-13-2022 EHS: Joni Jones

\*\*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 na Drainfield 3'X400' Gravity/Drbox Accepted Max Trench Depth 16", 2" cover  
Septic Contractor \_\_\_\_\_ Septic/Pump tank dates \_\_\_\_\_ Pump fee? NO YES pd \_\_\_\_\_  
Well Contractor \_\_\_\_\_ Well Grout date: \_\_\_\_\_

Bedrooms: 4

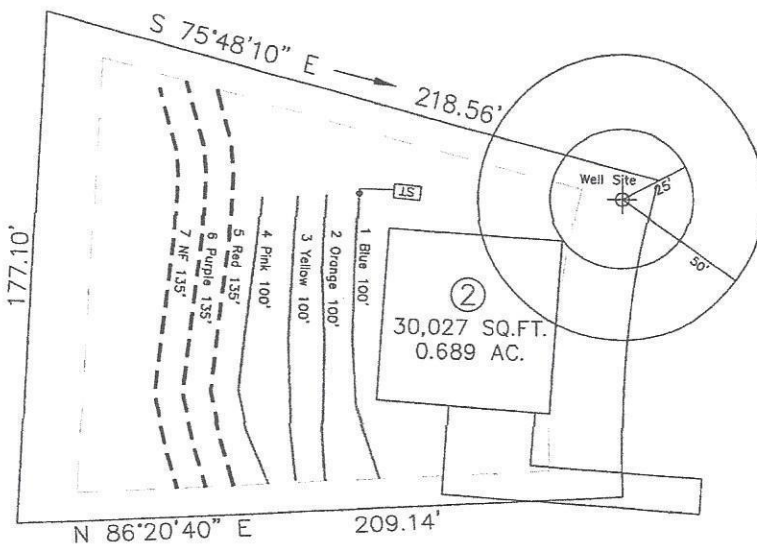
★ Drawing submitted by Soil Scientist

Please install septic system in accordance with attached design sheet(s) submitted by CCSC. Respect all setbacks.

> Enclosures / Attachments



System: ———  
Repair: - - -



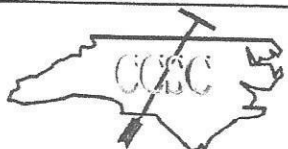
- \*Keep tanks and drain lines 10' from property lines.
- \*Not a survey.
- \*Not a guarantee of a septic permit.
- \*Keep supply lines >5' from property lines.
- \*Some lines are flagged longer in the field than lengths indicate.
- \*No grading septic area.

System: Gravity to D-Box  
Lines: 1-4, (400')  
Accepted Status System  
0.3 Soil LTAR

Repair: Gravity to D-Box  
Lines: 5-7, (405')  
Accepted Status System  
0.3 Soil LTAR

GRAPHIC SCALE

1" = 60'



Central Carolina Soil Consulting, PLLC  
1900 South Main Street, Suite 110  
Wake Forest, North Carolina 27587  
Phone (919)569-6704 Fax (919)569-6703

4-Bedroom Septic Layout  
Lot 2, Lilys Meadows Subdivision  
Franklin County, North Carolina

Job# : 2967  
Drawn By : AH & JH  
Date : 04/15/2022  
Revision: 5/26/22