

Franklin County Health Department
Environmental Health Section
107 Industrial Drive-Suite C
Louisburg, North Carolina 27549

PAGE 1 OF 2

Phone: 919-496-8100

Fax: 919-496-8136

Permit Number: 2630 Type: I PIN : 1880-65-3902 Date: 5/2/2006

Applicant: MAESTRO HOMES INC
PO BOX 99032
RALEIGH, NC 27624-9032

Owner: ZULA BELLE LAND CO LLC
PO BOX 99032
RALEIGH, NC 27624

Telephone: (919) 848-3012

Telephone:

Subdivision: SPENCERS GATE

Lot Number: 205

Size: 1.020

Physical Address/ Location /Directions 80 CRICKETWOOD LN

Description: LifeTime _____ 5 Year X

TYPE FACIL Res # EMPLOY ✓ # BEDRMS 4 GPD 480 LTAR .25⁹/₄

TYPE WAT Com TYPE SYS I TYPE REP I BSMT 2 BST FX N/A

SIZE TANK 1000 SIZE CHB ✓ SIZE NITR 3'x480' MTD 30''

COMMENTS 480' Innovative / Accepted

Septic Contractors are responsible for notifying the health department for final inspections, between 8:00-9:00 AM on the day of completion, Monday - Friday. Any request for final inspections received afterwards will be scheduled the same day, if possible, or the next workday. Have permit number and owner/applicant's name ready when making the call.

Actions of representatives of state or local agencies engaged in the evaluation and determination of measures required to effect the compliance with the provisions of this permit shall in no way be taken as a guarantee that wastewater disposal systems permitted and approved will function in a satisfactory manner for any given period of time, or that such employees assume any liability for damages, consequential or direct which are caused, or may be caused, by a malfunction of this wastewater treatment and disposal system.

Proper precautions must be taken to assure the proper functioning of the system after it has been covered. Do not run any heavy equipment over the system, as soft earth will allow damage to the tank and lines. Pipe all roof drains away from the septic system site to prevent flooding of the lines from surface water. Terrace the ground to prevent excessive drainage from higher areas adjacent to the system. Do not construct driveways over any part of the septic system unless proper provisions were made when the septic system was constructed. Only grass, not trees or shrubbery, should be cultivated over the lines. All plumbing fixtures should be carefully inspected periodically and any problems repaired immediately. All septic tanks should be pumped off by a permitted pump operator on a regular schedule, not to exceed every five years.

The improvement permit and construction authorization is a site approval, for the future installation of a wastewater treatment and disposal system. Changes in ownership of the site do not affect the validity of this permit. However, any alteration of the site or soil conditions, changes in the location of the proposed facility, changes to the wastewater flow and/or characteristics, or submittal of false information with the application or misrepresentation of the property lines may subject this permit to suspension or revocation.

FOR THIS TO BE A VALID CONSTRUCTION AUTHORIZATION, A LAYOUT SHEET MUST BE ATTACHED

IMPROVEMENT PERMIT

DATE 6/2/06 EHS

CONSTRUCTION AUTHORIZATION

DATE 6/17/06 EHS

[Signature]
[Signature]

Franklin County Health Department

Name: MAESTRO HOMES I

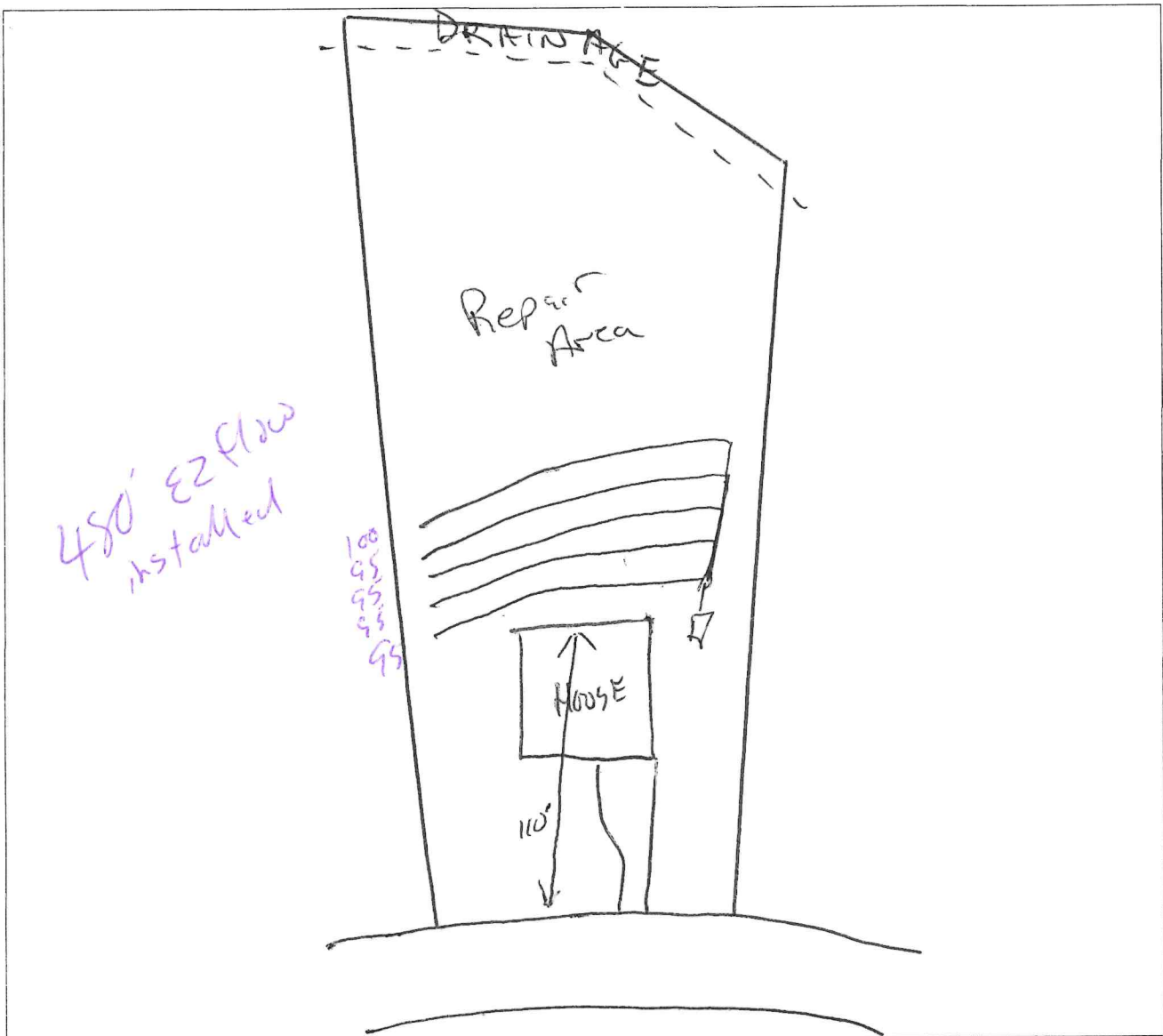
Permit Number

2630

CONTRACTOR Quality Landscape TANK MANU Mills 1000 MANU DATE 9/23/06

WELL INSTALLED YES _____ NO _____ SYSTEM CODE _____

SEPTIC SYSTEM LAYOUT (SKETCH SYSTEM LAYOUT HERE)



SEPTIC SYSTEM AS-BUILT (IF DIFFERENT FROM INITIAL LAYOUT) ON REVERSE

OPERATIONS PERMIT

DATE

10/25/06

EHS

[Signature]

COUNTY OF FRANKLIN

ENVIRONMENT HEALTH APPLICATION (496-8100)

Permit #: **17772**

Permit Type: **SEPTIC PERMIT**

Date Issued: **05/01/2006**

Project Address: **80 CRICKETWOOD LN, YOUNGSVILLE NC 27596**

Location: **80 CRICKETWOOD LN**

Size #: **1.020**

Subdivision: **SPENCERS GATE**

Lot #: **205**

Applicant: **MAESTRO HOMES, INC
PO BOX 99032
RALEIGH NC 27624-9032**

Phone: **919.848.3012**

Owner: **ZULA BELLE LAND COMPANY LLC
P O BOX 99032
27624**

Phone:

Tax record: **38302**

Pin #: **1880-65-3902**

Parcel #: **F10E00 205**

Zoned: **R 1**

Setbacks Front: **30**

Rear: **25**

Side: **10**

Proposed Use: **SFD**

of bedrooms: **4**

of people: **4**

Township: **HARRIS**

Public Water/Sewer: **COUNTY**

ST Road #:

Desc:

Fees Due: **\$275.00**

Date Paid: **05/01/2006**

*** Please complete all sections below***

☐ Yes ☒ No Does this site contain any previously identified jurisdictional wetlands?
☐ Yes ☒ No Is any wastewater, other than domestic, going to be generated?
☐ Yes ☒ No Is the site subject to approval by any other public agency?

*If the answer to any of the above is "yes", applicant must submit supporting documentation.

Please indicate desired system type(s). Systems can be ranked in order of preference.

☐ Conventional ☐ Alternative ☐ Innovative ☐ Modified Conventional
☐ Other ☒ No Preference

Call Environmental Health (919.496.8100) between 8:00 - 9:00 am Monday - Friday in order to schedule an appointment with an environmental health specialist for your lot evaluation. This application for an improvement permit/construction authorization does not constitute approval for zoning, septic or building permits. It will be necessary to meet all guidelines for zoning, septic and building permits prior to construction. The permit is valid for either 60 months or without expiration, depending upon documentation submitted. (complete site plan= 60 months---complete surveyed plat=without expiration.)

I hereby certify that I am the owner, or authorized by the owner to act as his/her legal representation. Furthermore, as legal representative (if applicable) I have advised the owner of my intention to apply for this wastewater treatment and disposal system.

I also certify that all of the statements made in this application and any attached documents are true, complete, and correct, to the best of my knowledge and belief, and are made in good faith. If information in application for improvement permit is falsified, changed or site is altered, then improvement permit and authorization to construct shall become invalid. Authorized county representatives are granted right of entry to make evaluations or inspections, and to release information upon public request.

X

E. Bane

Fees Are Nonrefundable

05/01/2006

Print & Signature of Owner or Owner's Legal Representative

1772

Franklin County DRC Application

RESIDENTIAL

Zoning Permit #: 10684



ADDRESS: 80 CRICKETWOOD LN

PARCEL NO.: 1880-65-3902

ZONING: R 1

SUBDIVISION: SPENCERS GATE

LOT: 205

ISSUED TO: MAESTRO HOMES, INC

PO BOX 99032

RALEIGH NC 27624-9032

PHONE NUMBER: 919.848.3012

SETBACK: FRONT: 30

RIGHT: 10

LEFT: 10

REAR: 25

COUNTY WATER: YES

FLOODPLAIN: NO

PERMIT TYPE: ZONING PERMIT

TYPE OF CONSTRUCTION: SFD-NEW SEPTIC

PERMIT DATE: 05/01/2006

WATERSHED NO

TOWNSHIP HAR

EXPIRE DATE: 11/01/2006

4 BED

It is hereby certified that the above use as shown on the plats and plans submitted with this application conforms with all applicable provisions of the Franklin County Zoning Ordinance. The issuance of this application does not allow the violation of Franklin County Zoning Ordinance or other governing regulations. The applicant is responsible for obtaining a building permit (if required) prior to commencing work on the proposed improvement. A final zoning inspection must be scheduled by the applicant.

NOTES:

I hereby certify that all information I have provided to the Planning Department is true and accurate.

APPLICANTS SIGNATURE:

RS

UTILITY COMPANY: PROGRESS ENGERY

WAKE ELECTRIC

OTHER

NUMBER OF STORIES: 1 _____ 1 1/2 _____ 2 _____ 2 1/2 _____

SQUARE FOOTAGE: HEATED _____ UNHEATED _____ TOTAL _____

BASEMENT: N/A _____ YES _____ NO _____ MANUFACTURED _____

FIREPLACE: N/A _____ MASONARY _____ MANUFACTURED _____

PLAN SETS: MODULAR _____ SURETY BOND _____ STICKBUILT _____

NAME OF:

ELECTRICIAN: _____ MECHANICAL: _____

PLUMBING: _____

COST OF CONSTRUCTION: _____

NO MORE THAN 2 STRUCTURAL DEVIATIONS OR PLANS MUST BE REDRAWN

DEPARTMENTAL USE ONLY

	INITIALS (IN)	DATE	INITIALS (OUT)	DATE
ZONING	JTB	5/11/06		
INITIAL PERMITTING				
ADDRESSING				
PLAN REVIEW				
FIRE REVIEW				
SEPTIC/SEWER				
FINAL PERMITTING				

