OPERATION PERMIT

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

133 Ottawa Michael Keith

For Office Use Only

*CDP File Number: 353268 - 1
County ID Number: 2830-98-5914
Evaluated For: NEW

Property Owner: MATTHEW NIXON JR
Address: 5617 FULTON AVE
Road #:
City: CASTLE HAYNE
State/Zip: NC/ 28429
Phone #:
Township:
Subdivision: LAKE ROYALE
Phase : NEW Lot: 2158

Structure: SINGLE FAMILY
# of Bedrooms: 3
# of People: 4
Water Supply: N/A
Saprolite System?: [ ] Yes [X] No
Pump Required?: [ ] Yes [X] No
Design Flow: 360
System Classification/Description: TYPE II A. CONV SYSTEM (SINGLE-FAMILY OR 480 GPD OR LESS)

Installer: DBS
Certification #:
Specific System Installed: UNKNOWN
Septic Tank Date: 03/01/2022
STB: 1000
Pump Tank Date:
PT:
Comments:

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 .1961.

II. Monitoring: As required by Rule .1961.

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 [X] No

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

Operation:

Other:

Authorized State Agent: Bendel, Joel
Date of Issue: 04/06/2022

Owner/Applicant: _____

Franklin County
NORTH CAROLINA

File # 353268 PIN# _____

Property Address: 133 Ottawa Dr

Applicant or Owner Name: Michael Keith

Environmental Health Septic/Well Permit Diagram

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

(X) Septic Improvement Permit ( ) Septic Construction Authorization (CA) ( ) CA Reissue** (X) As Built

( ) Well Construction Authorization ( ) Additional Diagram/Specifications Attached

Diagram Date:** 3-17-21 **EHS:** Joel Bendel

****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 N/A Drainfield 3'X300' Type System Acc Max Trench Depth 36"

Septic Contractor DBS Septic/Pump tank dates 3-1-22 ST Pump fee? Yes (X)

Well Contractor _____ Well Grout date: _____