Franklin County
NORTH CAROLINA

File # 416367 PIN#_____

Property Address: 80 Bold Dr

Applicant or Owner Name:_____

Environmental Health Septic/Well Permit Diagram

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

(X) Septic Improvement Permit (X) Septic Construction Authorization (CA) ( ) CA Reissue** ( ) As Built
( ) Well Construction Authorization (X) Additional Diagram/Specifications Attached

Diagram Date:** 7-22-24 **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 1500 Pump Tank 1500 Drainfield 3'x540' Type System P to A P. manifold Max Trench Depth 24"

Septic Contractor _____ Septic/Pump tank dates_____ Pump Fee Paid_____

Well Contractor _____ Well Head Date:_____ Pump Final:_____N/A (circle)

- I, P, + C.A issued under "a2" rules
- See attached packet from CCSC

Franklin County
NORTH CAROLINA

Cdp-4116367

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

Issued to: Mungo Homes **Location: 80 BOLD Drive YOUNGSVILLE , NC 27596**

LICENSED SOIL SCIENTIST A2 PERMIT

Application Type: LICENSED SOIL SCIENTIST A2 PERMIT
Application Number: E-24-572
Date: July 22, 2024
Building Type:
Acreage: 0.73
Project Type: Single Family Dwelling
Zoning: R-30
# of Bedrooms: 5
# of Occupants: 5
Residential Project Type: Single Family Dwelling
Commercial Project Type:
Building Foundation: Crawlspace
Square Footage of Facility:
Water Source: Public Water
Number of Employees:
Number of Seats:
Preferred Type of Septic System: (2) Accepted (polystyrene, chamber)
Notes:
Parcel ID #: 050302
Subdivsion: MAISON RIDGE LOT #43

Applicant Information

Applicant Name: Mungo Homes
Address: 2521 Schieffelin Road Suite 116 Apex , North Carolina 27502
Phone: 9193373314 Email: klusk@mungo.com

Property Owner Information

Owner Name: LIBERTY LUCKY SEVEN LLC
Address: 575 MILITARY CUTOFF RD WILMINGTON , NC 28405
Phone: Email:

General Contractor Information

Contractor Name: Clayton Properties Group, Inc.
Address: 441 Western Ln Irmo , SC 29063
Phone: (803) 749-9000 Email: klusk@mungo.com

Zoning

Zoning Permit #: Z-24-1078
County Water: Yes
Front Setback: 25
Right Setback: 10
Left Setback: 10
Rear Setback: 20

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?
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? Yes
Are there any easements or right-of-ways on this site? No
Are there any underground utilities on the site? Yes

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.

Katherine Lusk

July 22, 2024

Signature of Owner or Owner's Legal Representative

Expires: July 22, 2025

NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

ROY COOPER • Governor
KODY H. KINSLEY • Secretary
MARK BENTON • Chief Deputy Secretary for Health
SUSAN KANSAGRA • Assistant Secretary for Public Health
Division of Public Health

Application for Services

This application, in conjunction with the common form established in G.S. 130A-335(a3) and (a5), is optional for local health departments to be used for applications submitted in accordance with G.S. 130A-335(a2), (a3), and (a5).
[hereinafter, G.S. 130A-335(a3) and (a5) permits referred to as (a2) Improvement Permit and (a2) Construction Authorization]

Applying for:
☑ (a2) Improvement Permit ☑ (a2) Construction Authorization ☐ (a2) Repair/Construction Authorization

If applying for a Construction Authorization, please indicate desired system type(s):
☑ Accepted ☐ Conventional ☐ Innovative ☐ Other _____ ☐ Any

☑ New Construction ☐ Expansion ☐ System Relocation ☐ Change of Use ☐ Repair
☑ 5-Year Expiration Requested (site plan provided) ☐ Non-Expiring Permit Requested (plat provided, defined in G.S.130A-334(7a)
Requesting DHHS review? (systems >3000 GPD or IPWW) ☐ Yes ☑ No

Applicant: Clayton Properties Group, Inc. dba Mungo Homes
Mailing Address: 2521 Schieffelin Road
Suite 116
City: Apex
State: NC Zip: 27502
Phone #: (919) 303-8525 x 811
Email: klusk@mungo.com

Owner: Clayton Properties Group
Mailing Address: 441 Western Lane
City: Irmo
State: SC Zip: 29063
Phone #: 803-749-9000
Email: klusk@mungo.com

If the answer to any of the following questions is "yes", applicant must attach supporting documentation.

☐ Yes	☑ No	Does the site contain any jurisdictional wetlands?
☐ Yes	☑ No	Is any wastewater going to be generated on the site other than domestic sewage?
☑ Yes	☐ No	Is the site subject to approval by any other public agency?
☐ Yes	☑ No	Are there any easements or right of ways on this property?

I understand that the documentation and fees, as required in G.S. 130A-335(a2), (a3), (a5), and (a6), attached to this application are to be used to issue an Improvement Permit and/or Construction Authorization pursuant to G.S. 130A-335(a2),(a3), and (a5). I understand that authorized county and state officials are granted right of entry to the property indicated on this application to conduct necessary inspections to determine compliance with applicable laws and rules. ***I understand that if the information in the application for an Improvements Permit and/or Construction Authorization is falsified, changed, or the site is altered, then the Improvement Permit and Construction Authorization shall become invalid.***

Applicant Signature: Katherine Lusk Date: 7/19/2024

Owner's Signature: Katherine Lusk Date: 7/19/2024