919 562 1820

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

Phone: 919-496-8100 **SEPTIC PERMIT** Fax: 919-496-8136

Permit Number: 4094 Type: I PIN : 1833-70-3814 Date: 11/29/2007

Applicant: SHARPE HOME CONCEPTS INC
1420 KEITH RD
WAKE FOREST, NC 27587
Telephone: (919) 569-9530

Owner: JAMES CHARLES WILSON JR &
10 LANCE LANE
YOUNGSVILLE, NC 27596
Telephone:

Subdivision: LANCE RIDGE Lot Number: 9 Size: 1.000

Physical Address/ Location /Directions 105 LANCE LANE/LANCE CIRCLE

Description: LifeTime ____ 5 Year ✓

TYPE FACIL RES # EMPLOY # BEDRMS 4 GPD 480 LTAR .3

TYPE WAT County TYPE SYS A TYPE REP Fix A BSMT No BST FX N/A

SIZE TANK 1000 SIZE CHB n/a SIZE NITR 3'x400' MTD 24"

COMMENTS Maintain all setbacks, use serial distribution

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 malfuction 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 facilty, 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 12-7-07 EHS Thad Leonard

CONSTRUCTION AUTHORIZATION DATE 12-7-07 EHS Thad Leonard

919 562 1820

Franklin County Health Department

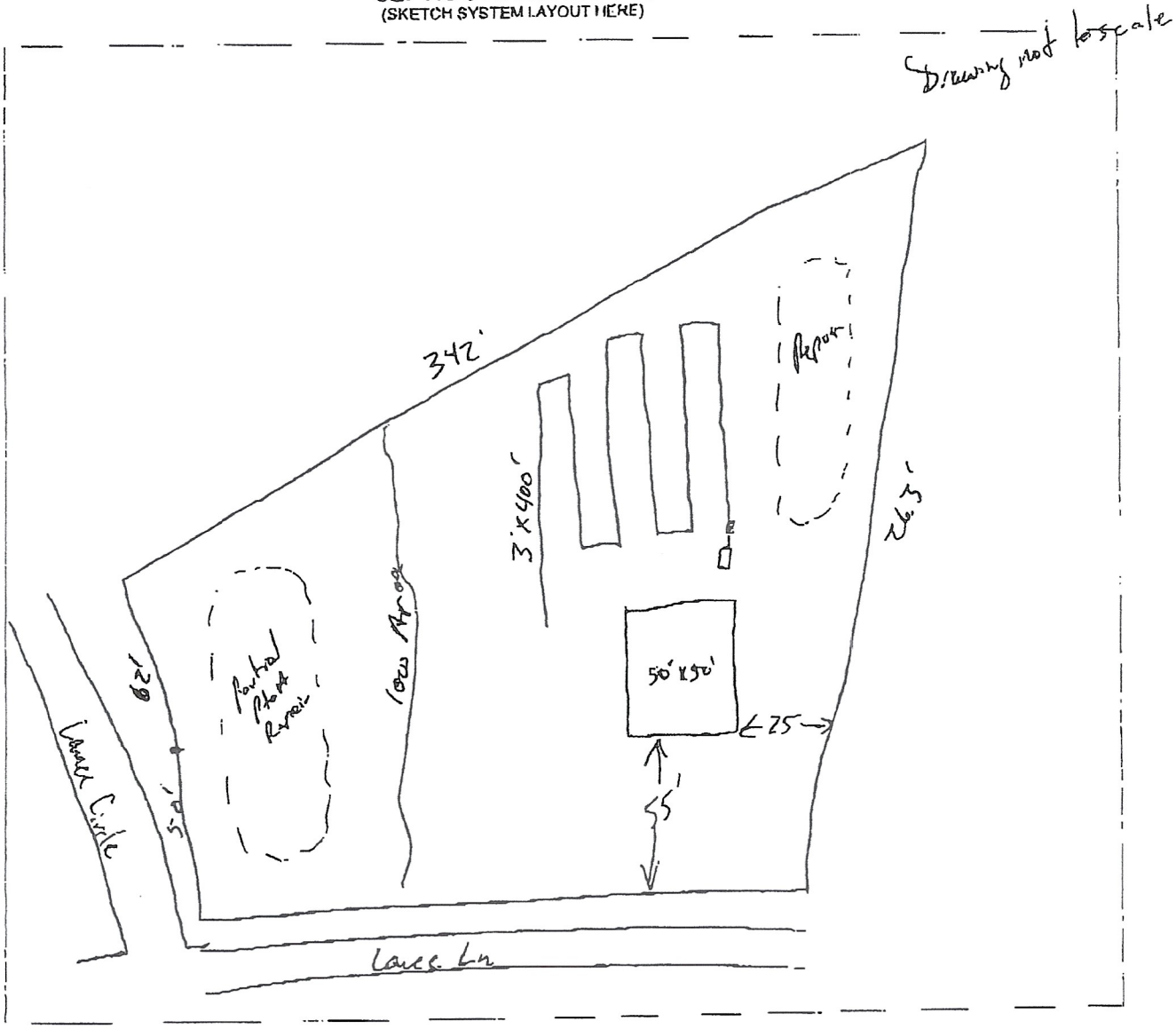
Name: SHARPE HOME CO Permit Number 4094

CONTRACTOR . ____ ____ TANK MANU ___ ___ ___ ___MANU DATE .___ -

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 ____ - __ EHS ___- ___ ____