



Construction Authorization

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

For Office Use Only

*CDP File Number: 395844 - 1

County ID Number: _____

Evaluated For: NEW

PERMIT VALID UNTIL: 06/13/2028

☐ Open Pump System Sheet

Applicant: NATHAN WATSON

Address: 1866 KELLY RD

City: HENDERSON

State/Zip: NC 27537

Phone #: _____

Property Owner: VANDERBUILT LLC

Address: 3300 JEFFERSON DAVIS HWY

City: SANFORD

State/Zip: NC. 27332

Phone #: _____

Property Location & Site Information

Address/Road #: 55 STERLING DR
FRANKLINTON, NC 27525

Subdivision: STERLING
MEADOWS

Phase: NEW Lot: _____

Directions:

Structure: SINGLE FAMILY

55 STERLING DR

of Bedrooms: 4

of People: 8

*Water Supply: _____

System Specifications

*Site Classification: PS Shallow Placement

Minimum Trench Depth: _____ Inches

Design Flow: 480

Maximum Trench Depth: 20 Inches

Soil Application Rate: 0.3000

Minimum Soil Cover: _____ Inches

*System Classification/Description:

TYPE II A. CONV SYSTEM (SINGLE-FAMILY OR 480 GPD OR LESS)

Maximum Soil Cover: _____ Inches

*Proposed System:

25% REDUCTION

*Distribution Type: GRAVITY - PARALLEL (eq. d-box)

Nitrification Field: _____ Sq. ft.

Septic Tank: 1,000 Gallons

No. Drain Lines: 4

Pump Required: ☐ Yes ☒ No ☐ May Be Required

Total Trench Length: 400 ft.

☐ Inches O.C.

Pump Tank: 1,000 Gallons

Trench Spacing: _____ - 9

☒ Feet O.C.

Grease Trap: _____ Gallons

Trench Width: _____ - 3

☐ Inches

Septic Tank Installer

Aggregate Depth: _____ inches

☒ Feet

Grade Level Required:

☐ I ☐ II ☐ III ☐ IV

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:

I.P. issued under a2 rules. see attached package from Harold Kelly LLS.

CA hand drawn by EHS. Bottom line should be 200 feet from front property line. If contour becomes an issue and 5 lines or more are required, pressure manifold must be used. High grass made assessing contour a challenge.

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: 06/14/2023

☒ Hand Drawing

☐ Import Drawing

Site Plan/Drawing attached.

Total Time : (HH:MM) _____



File # 395844 Parcel PIN# 031668

Property Address: 55 Sterling Dr, FRK

Applicant or Owner Name: Nathan Watson

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**: 6-13-23 / 6-14-2023

EHS: Thaddeus Paul 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 1000 Drainfield 3'x400' Type System Accepted Pump / Dbox (*see note below) Max Trench Depth 20"

Septic Contractor _____ Septic/Pump tank dates _____ Pump fee? NO YES pd _____

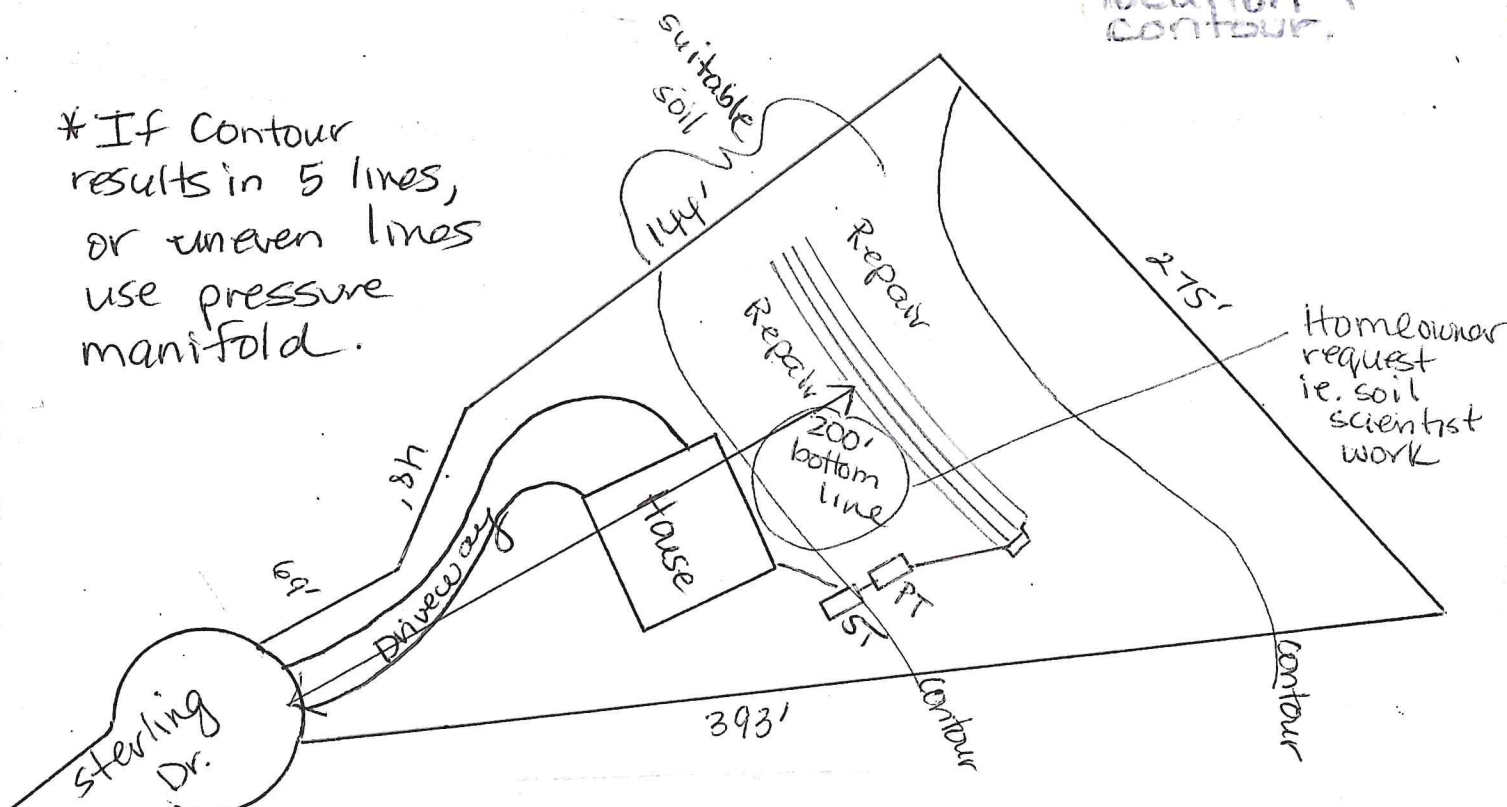
Well Contractor _____ Well Grout date: _____

48dvm

- Septic I.P. issued under "a2" rules
- See Package from Harold Kelly LSS attached.

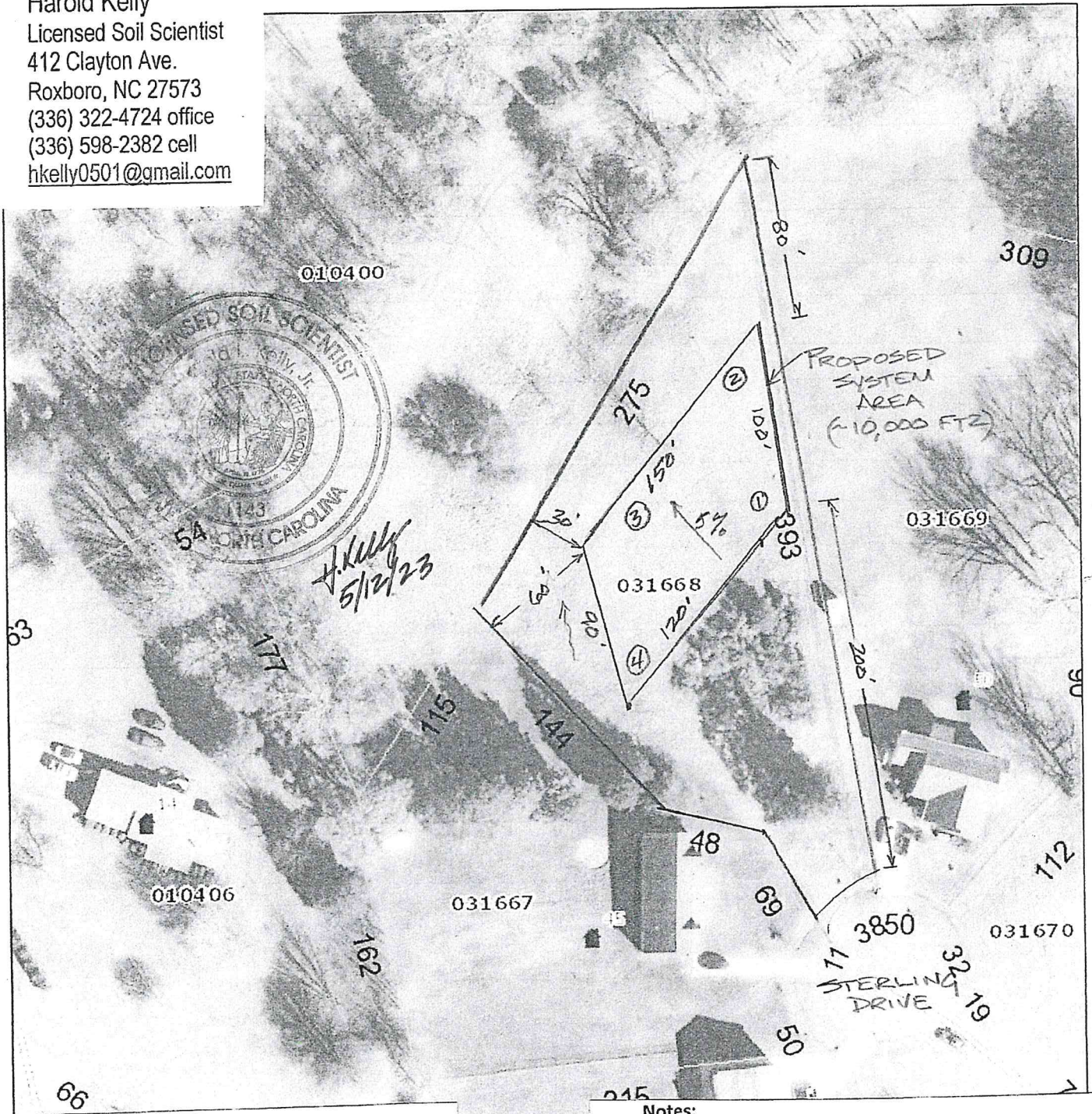
High grass + only 2 noted residential stakes made diff. to see exact house location + contour.

*If Contour results in 5 lines, or uneven lines use pressure manifold.



GoMaps

Harold Kelly
 Licensed Soil Scientist
 412 Clayton Ave.
 Roxboro, NC 27573
 (336) 322-4724 office
 (336) 598-2382 cell
hkelly0501@gmail.com



**LSS Evaluation/Site Plan
 G.S. 130A-335(a2) Submittal**

For: Nathan Watson
 Northern Point Realty
Nwatson07181986@gmail.com

Site: PIN: 031668
 55 Sterling Drive
 Franklinton, NC
 Franklin County

Notes:

PS Soil borings locations marked with orange flagging
 System perimeter marked with blue flagging
 System area ~ 10,000 FT²

System Requirement/ Soil Characteristics

4 bedrooms (480gpd)
 LTAR 0.3 GPD/Ft²
 400 Linear Feet- Accepted (IIIg)
 533 Linear feet- Conventional (IIa)
 5% uniform slope
 20" maximum trench depth
 Evaluation of saprolite recommended for deeper trenches.

Site plan scale: 1" = 75'

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM
(Complete all fields in full)

Lot: _____

OWNER: Nathan Watson

ADDRESS: 1886 Kelly Rd Henderson

PROPOSED FACILITY: Resid J PROPOSED DESIGN FLOW (.1949): _____

LOCATION OF SITE: 55 Sterling Dr

APPLICATION DATE 6-5-23

DATE EVALUATED: 6-14-23

PROPERTY SIZE: _____

PROPERTY RECORDED: _____

WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____

EVALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut

TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SPRO CLASS	.1944 RESTR HORIZ	
1	Slope	0-4	Gr / L	FRNslpSE	36"				PS
		4-22	F / C	F SPSE					
		22-36	F / SIC	F ISPSE					
	5-7%		changed at 36"						.3
2			confirmed SS findings				36		20" install
							+12		
							24	-4 =	
								SC	
3			Slope Correction of 2-4"						
			Lot tall grass						

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM	OTHER FACTORS (.1946):
available Space (.1945)			SITE CLASSIFICATION (.1948): PS
tem Type(s)			EVALUATED BY: J. J. Jones
LTAR	.3	.3	OTHER(S) PRESENT: _____

MENTS: Some revenues (may affect line)

could not locate all 4 corners of house by knee generated area to confirm soil over