

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

PAGE 1 OF 2

Phone: 919-496-8100

SEPTIC PERMIT

Fax: 919-496-8136

Permit Number: 5181 Type: I PIN: 2831-35-8006 Date: 10/16/2009
Applicant: DANIEL & WILMA ELLIS Owner: DANIEL & WILMA ELLIS
810 LOOP RD 810 LOOP RD
CLAYTON, NC 27527 CLAYTON, NC 27527
Telephone: 91(9-5) 53--734 Telephone: 91(9-5) 53--734
Subdivision: LAKE ROYALE Lot Number: 524C Size: 1.000

Physical Address/ Location /Directions 210 SAGAMORE DR

Description: LifeTime _____ 5 Year X

TYPE FACIL Compt # EMPLOY - # BEDRMS - GPD 240 LTAR 35912
TYPE WAT Com TYPE SYS PtoI TYPE REP N/A BSMT N BST FX N/A
SIZE TANK 1000 SIZE CHB 1000 SIZE NTR 3x180 MTD 30'

COMMENTS: Pump to 180' Inflow / Accepted drainline

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 10/22/09 EHS

CONSTRUCTION AUTHORIZATION

DATE 10/22/09 EHS

Visit www.franklincountyenvironmentalhealth.com for permit information and tracking.

Franklin County Health Department

Name: ELLIS

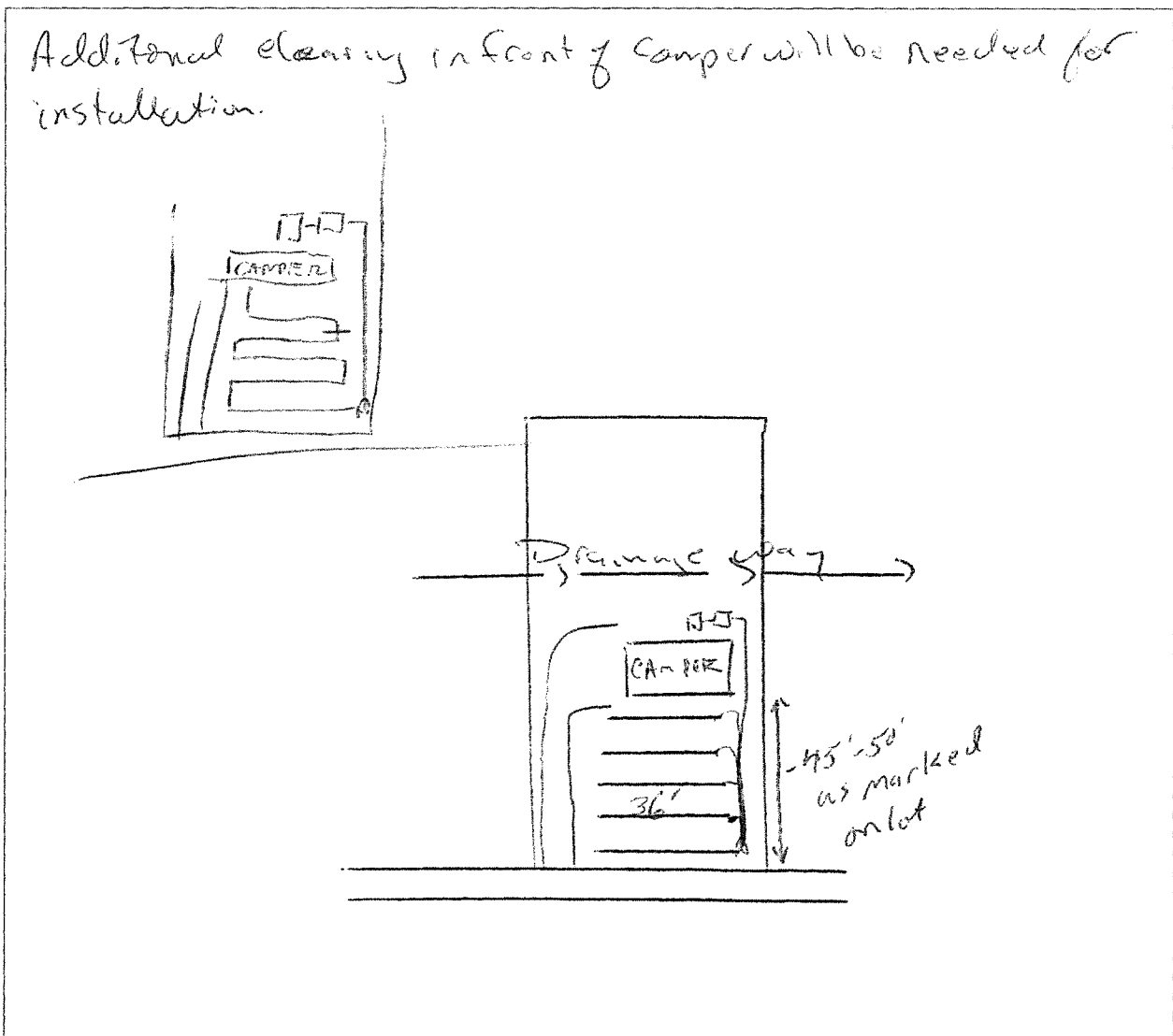
Permit Number

5181

CONTRACTOR Daniel Barth TANK MANU DDB1000 MANU DATE 3/6/09
 WELL INSTALLED YES _____ NO _____ SYSTEM CODE E21203
DDB1000 PT 6.1.3/09

SEPTIC SYSTEM LAYOUT (SKETCH SYSTEM LAYOUT HERE)

Additional clearing in front of camper will be needed for installation.



SEPTIC SYSTEM AS-BUILT

(IF DIFFERENT FROM INITIAL LAYOUT)

ON REVERSE

OPERATIONS PERMIT

DATE

11/24/09 EHS

COUNTY OF FRANKLIN

ENVIRONMENT HEALTH APPLICATION (496-8100)

Permit #: **26562**

Permit Type: **SEPTIC PERMIT**

Date Issued: **10/15/2009**

Project Address: **210 SAGAMORE DR, LOUISBURG NC 27549**

Location: **210 SAGAMORE DR**

Size #: **1.000**

Subdivision: **LAKE ROYALE**

Lot #: **524C**

Applicant: **ELLIS DANIEL & WILMA**
810 LOOP RD
CLAYTON, NC 27527

Phone: **919-553-7345**

Owner Name: **ELLIS DANIEL & WILMA**

Phone: **919-553-7345**

Owners Address: **810 LOOP RD**

CLAYTON, NC 27527

Tax record: **19460**

Pin #: **2831-35-8006**

Parcel #: **LR0502 0524C**

Zoned: **A R**

Setbacks Front: **30**

Rear: **5**

Side: **5**

Proposed Use: **CAMPER LOT**

of bedrooms: **2**

of people: **2**

Township: **CYPRESS**

Public Water/Sewer: **TESI (LK ROY)**

ST Road #:

Desc:

Fees Due: **\$325.00**

Date Paid: **10/15/2009**

*** 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 ☐ Accepted ☐ Modified Conventional ☐ Alternative
☐ 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 and well permit 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.)

Please contact the Environmental Health Department at 919.496.8100 or visit their website at www.franklincountyenvironmentalhealth.com to determine the status of your application prior to contacting the Planning & Inspections Department.

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 and drinking water and well system permit.

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 this application for these improvements is falsified, changed or site is altered, then improvement permits and authorization to construct these improvements shall become invalid. Authorized county representatives are granted right of entry to make these evaluations or inspections, and to release information upon public request.

X Daniel Terrence Ellis Daniel Terrence Ellis
Print & Signature of Owner or Owner's Legal Representative

10/15/2009

Franklin County DRC Permit RESIDENTIAL

Zoning Permit #: 14883



ADDRESS: 210 SAGAMORE DR

PARCEL NO.: 2831-35-8006

ZONING: A R

SUBDIVISION: LAKE ROYALE

LOT: 524C

ISSUED TO: ELLIS DANIEL & WILMA

810 LOOP RD

CLAYTON, NC 27527

PHONE NUMBER: 919-553-7345

SETBACK: FRONT: 30

RIGHT: 5

LEFT: 5

REAR: 5

COUNTY WATER: TESI

FLOODPLAIN: NO

MISC FEE:

PERMIT TYPE: ZONING PERMIT

TYPE OF CONSTRUCTION: CAMPER LOT - NEW SEPTIC

PERMIT DATE: 10/15/2009

WATERSHED NO

TOWNSHIP CYP

EXPIRE DATE: 04/15/2010

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:

Daniel Lawrence Ellis

UTILITY COMPANY: PROGRESS ENERGY WAKE ELECTRIC OTHER

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

SQUARE FOOTAGE: HEATED _____ UNHEATED _____ TOTAL _____

BASEMENT: YES _____ NO _____

FIREPLACE: NO _____ MASONRY _____ MANUFACTURED _____

PLAN SETS: MODULAR _____ STICKBUILT _____

NAME OF:

ELECTRICIAN: _____ MECHANICAL: _____

PLUMBING: _____

COST OF CONSTRUCTION: _____

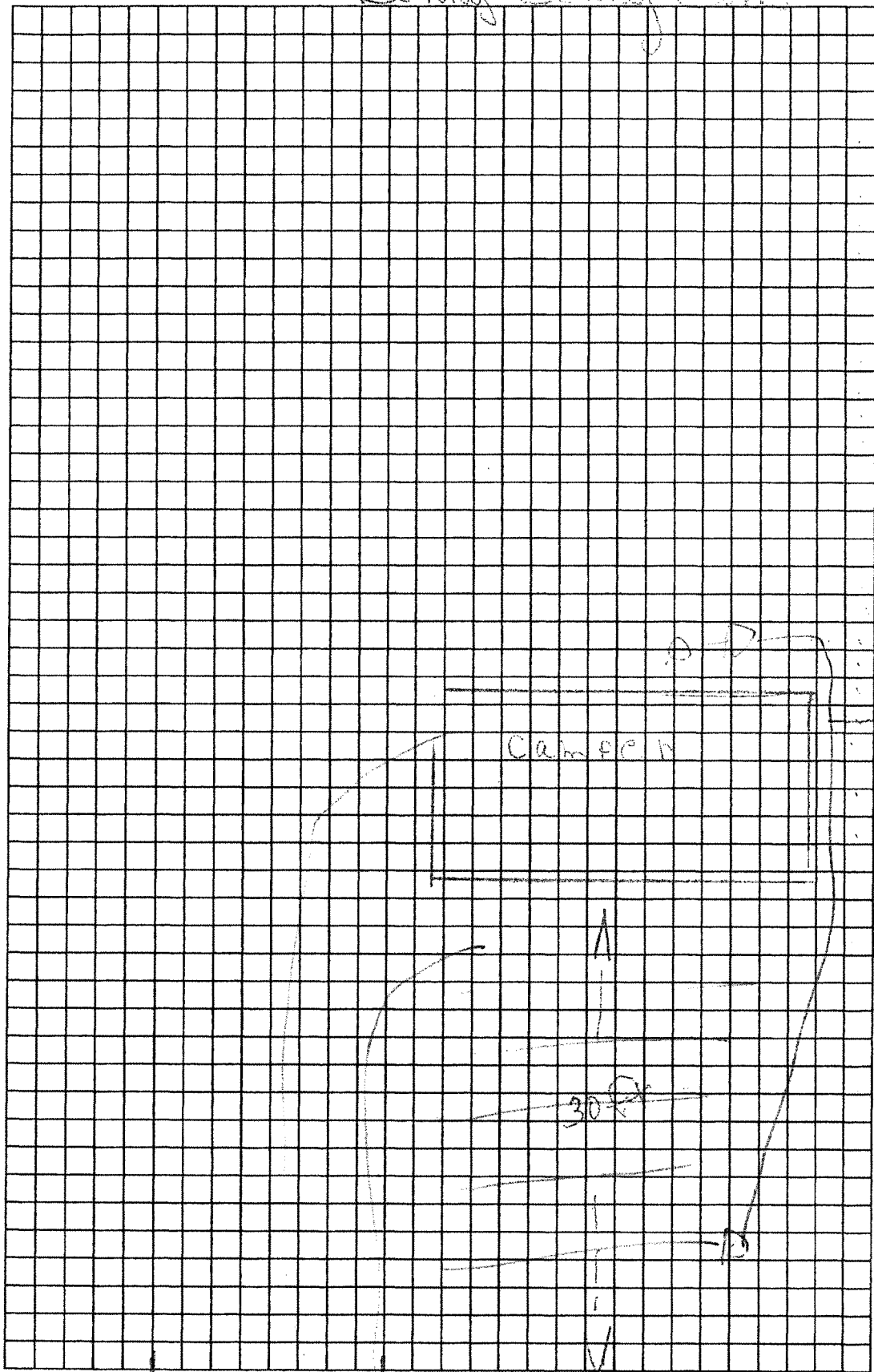
NO MORE THAN 2 STRUCTURAL DEVIATIONS OR PLANS MUST BE REDRAWN

DEPARTMENTAL USE ONLY

	INITIALS (IN)	DATE	INITIALS (OUT)	DATE
ZONING	<i>TWD</i>	<i>10/15/09</i>	_____	_____
INITIAL PERMITTING	_____	_____	_____	_____
ADDRESSING	_____	_____	_____	_____
PLAN REVIEW	_____	_____	_____	_____
FIRE REVIEW	_____	_____	_____	_____
SEPTIC/SEWER	_____	_____	_____	_____
FINAL PERMITTING	_____	_____	_____	_____

2009
Denny Denny Ellis

2009



POA 1/17/09 Drive way

5

210 Square ft