



File # 447839 PIN# _____

Property Address: 60 Stream View Way

Applicant or Owner Name: Todd Marshburn

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**: 12-31-24 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 _____ Pump Tank _____ Drainfield _____ Type System _____ Max Trench Depth _____

Septic Contractor _____ Septic/Pump tank dates _____ Pump Fee Paid _____

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

Well location marked on septic layout page (attached)



Well Construction Permit

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

For Office Use Only

*CDP File Number 447839

PIN Number: _____

Tax Lot #: 18 Tax Block #: 051296

Evaluated For: SINGLE FAMILY \ WELL

PERMIT VALID UNTIL: 12/31/2029

Property Owner: Todd Marshburn Builders

Address: 103 Lake Wendell Rd

City: Wendell

State/Zip: NC / 27591

Phone #: _____

Applicant: Todd Marshburn

Address: 103 Lake Wendell Rd

City: Wendell

State/Zip: NC / 27591

Phone #: _____

Property Location & Site Information

Address/Road #: _____

Subdivision: Tantallon

Phase: _____

Lot: 18

60 Stream View Way

Spring Hope NC, 27882

*Proposed use of Well: SINGLE FAMILY

If Other: _____

Applicant Email: _____

Owner Email: _____

Directions: 60 Stream View Way

Well Contractor Information

Drilling Contractor: _____

Driller Registration: _____

Permit Conditions

*Permit Conditions

well location marked on septic layout page (attached)

Well location, construction and protection must meet all state and local regulations and must be inspected and approved by an authorized representative of the Local Health Department. The permit may be revoked at any time for failure to comply with existing regulations. The siting of approved well construction area(s) by the Health Department is to provide protection from the known possible sources of contamination. The approved well area(s) may not be changed without permission from an authorized representative of the Local Health Department. Issuance of this well permit does not guarantee water quality or adequate water production from the well once it is installed or repaired.

*Issued By: Leonard, Shad

Authorized State Agent: _____

Owner/Applicant: _____

*Date of Issue: 12/31/2024



Hand Drawing



Import Drawing

****Site Plan/Drawing attached.****



Well Construction Permit

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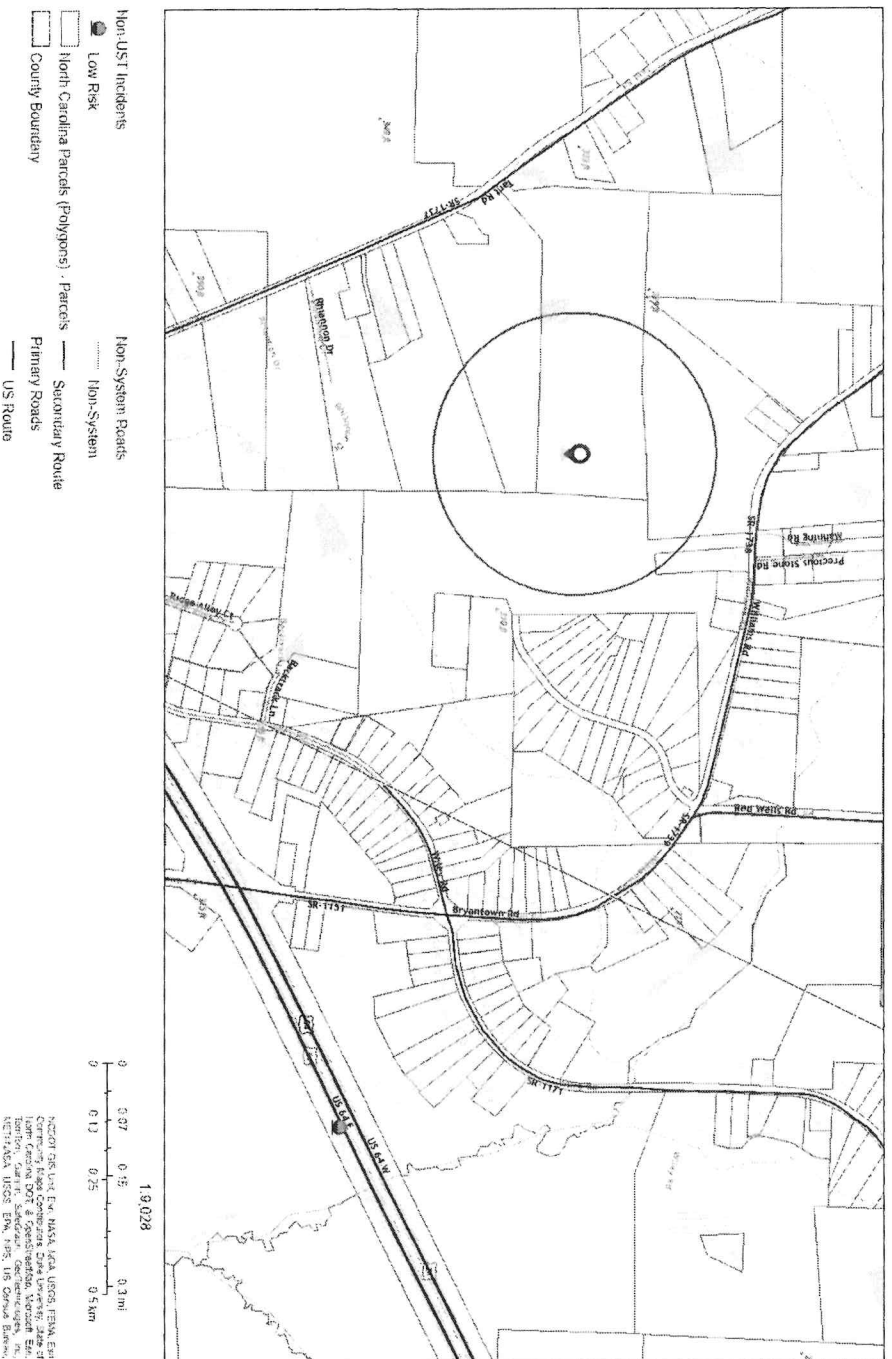
Evaluated For: SINGLE FAMILY \ WELL

PERMIT VALID UNTIL: 12/31/2029



Area : 3,134,508.76 ft²

Dec 31 2024 15:28:21 Eastern Standard Time



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