

FRANKLIN COUNTY HEALTH DEPARTMENT

919 826 6177

PERMIT NUMBER: 14480C CONST IMPROVE PERMIT	DATE: 20000914	33599	SIZE: 1.01A
APPLICANT: MAESTRO HOMES PO BOX 99032 RALEIGH NC 27624		OWNER: MAESTRO HOMES PO BOX 99032 RALEIGH NC 27624	
TELEPHONE: 818-9776			
COMMENT: SFD	DESCRIPTION: 5 YEAR ☒	LIFETIME: ☐	
LOCATION / DIRECTIONS: SPENCER GATE #118			
FEE: 175.00	SIGNATURE OR OWNER OR AUTHORIZED AGENT:		

THE ABOVE SIGNATURE INDICATES THAT I HAVE READ, UNDERSTAND, AND AGREE WITH ALL PROVISIONS AND INFORMATION AS OUTLINED ON THE BACK SIDE OF THIS FORM

TOPO <u>PS</u>	TEXTURE <u>PS</u>	STRUCTURE <u>PS</u>	DEPTH <u>PS</u>
R. HOR <u>1</u>	SOIL. WET <u>1</u>	AVAIL. SP <u>1</u>	OTHER <u>1</u>
MINRL <u>5642</u>	OVERALL <u>PS</u>	LTAR <u>35411</u>	
#BEDRMS <u>3</u>	GPD <u>360</u>	DISPOSAL <u>1</u>	TYPE. SYS <u>1</u>
SZ. TANK <u>600</u>	SZ. CHAMB <u>1</u>	NITRIFI <u>35411</u>	TYPE. WAT <u>1</u>
SITE. LOC <u>1</u>	MAX TRENCH DEP <u>30"</u>	TYP. FAC <u>SFD</u>	
REMARKS:			

Stay 10' from property lines.
5' from voids, foundation

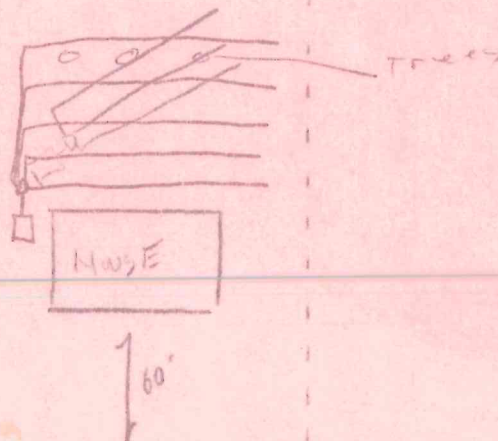
CONTRACTOR: Quality landscape

TANK MANUF: M. 11/5/1000

MANUF DATE: 11/25/2000

EZ by
35 pieces

Ruph
Area



Wembley Court

IMPROVEMENT PERMIT DATE: 9/18/2000

ENV HEALTH SPEC: [Signature]

CONSTRUCTION AUTHORIZATION DATE: 9/18/2000

ENV HEALTH SPEC: [Signature]

OPERATION PERMIT DATE: 1/31/2001

ENV HEALTH SPEC: [Signature]

FRANKLIN COUNTY HEALTH DEPARTMENT

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PERMIT NUMBER: 14480C CONST IMPROVE PERMIT	DATE: 20000914	33599	SIZE: 1.01A
APPLICANT: MAESTRO HOMES PO BOX 99032 RALEIGH NC 27624		OWNER: MAESTRO HOMES PO BOX 99032 RALEIGH NC 27624	
TELEPHONE: 818-9776			
COMMENT: SFD	DESCRIPTION: 5 YEAR ☒		LIFETIME: ☐
LOCATION / DIRECTIONS: SPENCER GATE #118			
FEE: 175.00		SIGNATURE OR OWNER OR AUTHORIZED AGENT:	

THE ABOVE SIGNATURE INDICATES THAT I HAVE READ, UNDERSTAND, AND AGREE WITH ALL PROVISIONS AND INFORMATION AS OUTLINED ON THE BACK SIDE OF THIS FORM

TOPO <u>09</u>	TEXTURE <u>09</u>	STRUCTURE <u>09</u>	DEPTH <u>09</u>
R. HOR <u>1</u>	SOIL. WET <u>1</u>	AVAIL. SP <u>1</u>	OTHER <u>1</u>
MINRL <u>0.02</u>	OVERALL <u>0.02</u>	LTAR <u>0.02</u>	
#BEDRMS <u>3</u>	GPD <u>360</u>	DISPOSAL <u>0.02</u>	TYPE. SYS <u>1</u>
SZ. TANK <u>0.02</u>	SZ. CHAMB <u>1</u>	NITRIFI <u>0.02</u>	TYPE. WAT <u>0.02</u>
SITE. LOC <u>1</u>	MAX TRENCH DEP <u>30"</u>	TYP. FAC <u>0.02</u>	

REMARKS:

Stay 10' from property line.
1/1/2000

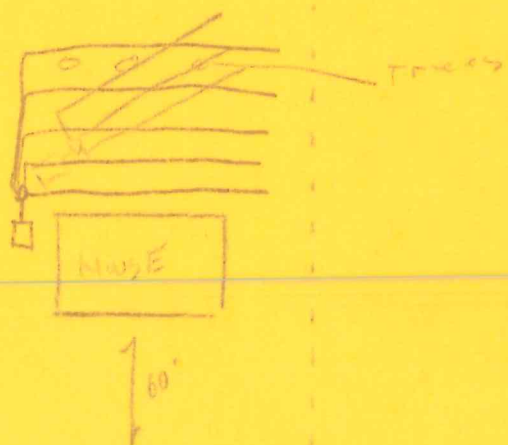
CONTRACTOR: Quality Landscape

TANK MANUF: 11/19/000

MANUF DATE: 11/25/2000

E24y
35 00000

Reph'd
Area



IMPROVEMENT PERMIT DATE: 9/14/2000

ENV HEALTH SPEC: [Signature]

CONSTRUCTION AUTHORIZATION DATE: 9/14/2000

ENV HEALTH SPEC: [Signature]

OPERATION PERMIT DATE: 1/31/2001

ENV HEALTH SPEC: [Signature]

COUNTY OF FRANKLIN

ENVIRONMENT HEALTH APPLICATION (496-8100)

Permit #: 00-16119

Permit Type: EH

14480C

Date Issued: 09-12-00

Project Address: SPENCER GATE 118

Location: SPENCER GATE 118

Subdivision: SPENCER GATE

Lot #: 118

Size: 1.01

Owner Name: MAESTRO HOMES

Address: PO BOX 99032

City: RALEIGH

Phone: (919)-818-9776

State: NC Zip: 27624

Contractor: MAESTRO HOMES

Address: PO BOX 99032

City: RALEIGH

Phone: (919)-846-7468

State: NC Zip: 27624

Proposed use: MAESTRO HOMES

Work: SFD

Desc:

Bldg Cost:	Fees due: \$ 175.00	Fees Paid: \$ 175.00
Zoned: AR	Setbacks Front: 30	Rear: 25 Side: 10
Tax Rec #: 33599	Pin #:	Parcel#: F10E00 118
Township: HARRIS	Public Water/Sewer:	ST Road #:

Special conditions: _____

# of bedrooms: 3	# of bathrooms: 2	Approved for Issuance by 
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I certify that all 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. I understand that false information may be grounds for rejection of this application. Authorized county representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

Call Environment Health (496-8100) between 8:00 AM and 9:00 AM Monday thru Friday to schedule an appointment with the environment health specialist to evaluate your lot. He/She will show you where to locate the well and septic system, in relation to the desired dwelling location and any property lines. If approved, an improvements permit will be issued. After the septic tank has been installed and approved, the Sanitarian will issue a certification of completion.


(Signature of Contractor or Authorized Agent)

9/12/00
Date

PRELIMINARY PLOT PLAN FOR

LOT 118, SPENCER'S GATE SUBD., PH. 2

REF: B.M. 1997 - 412, D.B. 1086, PG. 556

HARRIS TOWNSHIP

FRANKLIN COUNTY, NORTH CAROLINA

MAY 23, 2000

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