

919 233 1970

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

Phone: 919-496-8100

Fax: 919-496-8136

Permit Number: 214 Type: I PIN: 1832-47-8842 Date: 2/13/04

Applicant: SALLINGER CONSTRUCTION INC Owner: JACKSON ROAD LLC
130 TRAYLEE DR PO BOX 1859
WAKE FOREST, NC 27587 WAKE FOREST, NC 27588

Telephone: (919) 556-0883

Telephone:

Subdivision: TRAYLEE

Lot Number: 28

Size: 0.690

Physical Address/ Location /Directions 145 TRAYLEE DR

Description: LifeTime _____ 5 Year ☒

TYPE FACIL Residence # EMPLOY _____ # BEDRMS 4 GPD 480 LTAR 0.35

TYPE WAT Public TYPE SYS Conv. TYPE REP Conv. BSMT N/A BST FX N/A

SIZE TANK 1000 SIZE CHB N/A SIZE NITR 3'x4'50' MTD 36"

COMMENTS * Install SYSTEM along Contour
* Install SYSTEM IN DRY Conditions
* DO NOT PARK or Drive over SYSTEM AREA

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 2/13/04 EHS

CONSTRUCTION AUTHORIZATION

DATE 2/13/04 EHS

Andy Smith, RS
Andy Smith, RS

Franklin County Health Department

Name: SALLINGER CONST

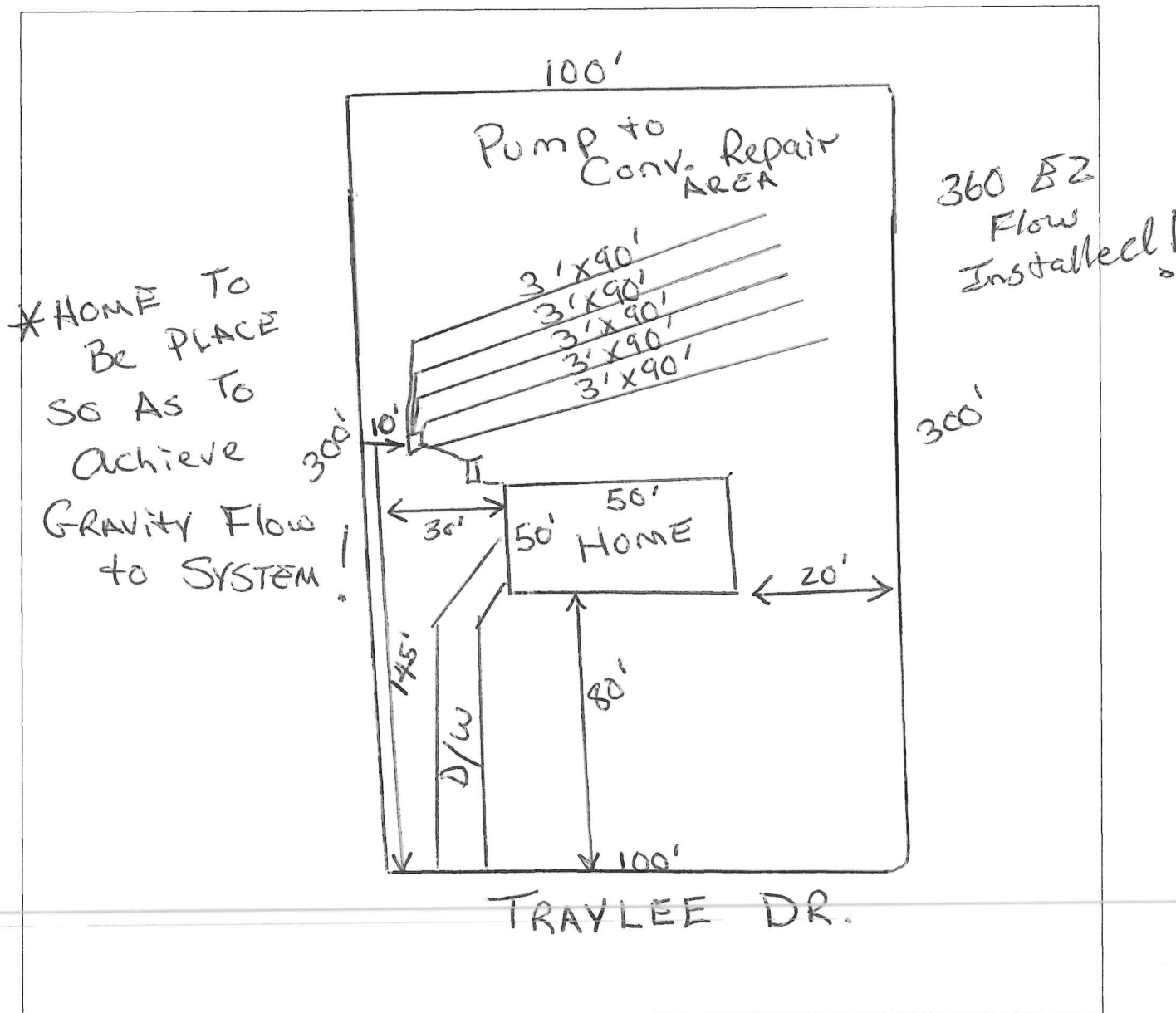
Permit Number

214

CONTRACTOR David Brantley Sons TANK MANU D-B 1000 MANU DATE 2/3/08WELL INSTALLED AT TIME OF INSPECTION YES ☐ NO ☐

SEPTIC SYSTEM LAYOUT "Community WATER"

(SKETCH SYSTEM LAYOUT HERE)



SEPTIC SYSTEM AS-BUILT

(IF DIFFERENT FROM INITIAL LAYOUT)

ON REVERSE

OPERATIONS PERMIT

DATE

5/17/08 EHS Andy Smith, R.S

FRANKLIN COUNTY SOIL/SITE EVALUATION SHEET

APPLICANT Sauerzger Constr.
 WATER SUPPLY Public
 LOCATION/DIRECTIONS Traylor Lot 28

PROPERTY ID _____
 DATE 2/13/04

FACTORS

PROFILES

		1	2	3	4	5	6
LANDSCAPE POSITION	1940	R	R				
SLOPE (%)	1940	2-4	2-4				
HORIZON I DEPTH	1943	0-10	0-10				
TEXTURE	1941(a) (1)	C	C				
CONSISTENCE	1941	Fi	Fi				
STRUCTURE	1941(a)(2)	0.5BK	0.5BK				
CLAY MINEROLOGY	1941(a)(3)	SXP	SXP				
HORIZON II DEPTH	1943	10-30	10-30				
TEXTURE	1941(a) (1)	CL	CL				
CONSISTENCE	1941	Fi	Fi				
STRUCTURE	1941(a)(2)	SBK	SBK				
CLAY MINEROLOGY	1941(a)(3)	SXP	SXP				
HORIZON III DEPTH	1943	30-48	30-48				
TEXTURE	1941(a) (1)	SiCL	SiCL				
CONSISTENCE	1941	FR	FR				
STRUCTURE	1941(a)(2)	SBK	SBK				
CLAY MINEROLOGY	1941(a)(3)	SXP	SXP				
HORIZON IV DEPTH	1943						
TEXTURE	1941(a) (1)						
CONSISTENCE	1941						
STRUCTURE	1941(a)(2)						
CLAY MINEROLOGY	1941(a)(3)						
SOIL WETNESS	1941	748"	748"				
RESTRICTIVE HORIZON	1944	748"	748"				
SAPROLITE	1943/1956	48"	48"				
CLASSIFICATION	1948	PS	PS				
LTAR (gpd/ft2)	1955	0.35	0.35				
OTHER FACTORS (1946)							
		SITE LTAR (gpd/ft2) <u>0.35</u>					
AVAILABLE SPACE (1945)	<u>PS</u>	SYSTEM TYPE <u>CONV.</u>					
CLASSIFICATION (1948)	<u>PS</u>						
EVALUATED BY:	<u>ANDY S.</u>	OTHERS PRESENT					

ENVIRONMENT HEALTH APPLICATION (496-8100)

Permit #: 11232

Permit Type: SEPTIC PERMIT

Date Issued: 02/12/2004

Project Address: 145 TRAYLEE DRIVE, WAKE FOREST, NC 27587

Location: 145 TRAYLEE DRIVE

Size #: 0.690

Subdivision: TRAYLEE (WATER)

Lot #: 28

Applicant: SALLINGER CONSTRUCTION, INC
130 TRAYLEE DR
WAKE FOREST, NC 27587

Phone: 919-556-0883

Owner: JACKSON ROAD LLC
P O BOX 1859
27588

Phone:

Tax record: 35884

Pin #: 1832-47-8842

Parcel #: A04B00 028

Zoned: R 40

Setbacks Front: 50

Rear: 50

Side: 20

Proposed Use: SFD

of bedrooms: 4

of people: 5

Township: YOUNGSVILLE Public Water/Sewer: COUNTY

ST Road #:

Desc: 1832-47-8842

Fees Due: \$225.00

Date Paid: 02/12/2004

* 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 ☐ Alternative ☐ Innovative ☐ Modified Conventional
☐ 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 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.)

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.

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

Signature of Owner or Owner's Legal Representative

2/12/04
Date

Franklin County DRC Application

RESIDENTIAL

Zoning Permit #: 7418



ADDRESS: 145 TRAYLEE DRIVE
PARCEL NO.: 1832-47-8842 ZONING: R 40
SUBDIVISION: TRAYLEE (WATER) LOT: 28
ISSUED TO: SALLINGER CONSTRUCTION INC
130 TRAYLEE DR
WAKE FOREST, NC 27587
PHONE NUMBER: 919-614-1754
SETBACK: FRONT: 50 RIGHT: 20 LEFT: 20 REAR: 50
COUNTY WATER: COUNTY FLOODPLAIN: NO
PERMIT TYPE: ZONING PERMIT
TYPE OF CONSTRUCTION: SFD
PERMIT DATE: 02/12/2004 WATERSHED NO
TOWNSHIP YNGS EXPIRE DATE: 08/12/2004

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.

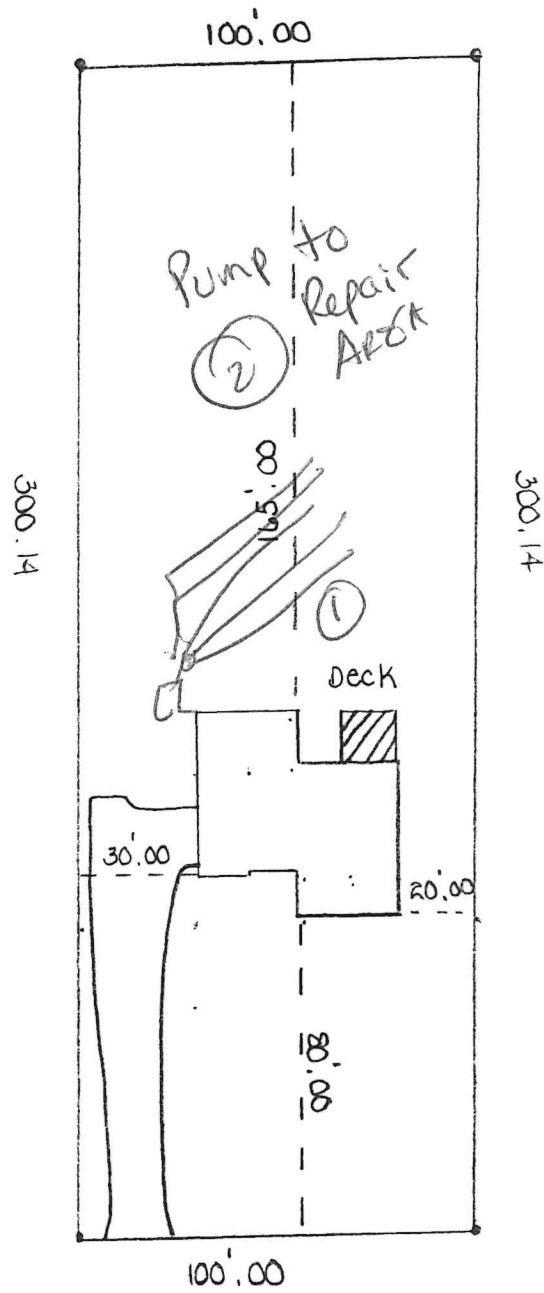
APPLICANTS SIGNATURE:

UTILITY COMPANY : PROGRESS ENGERY WAKE ELECTRIC OTHER
NUMBER OF STORIES: 1 1 1/2 2 2 1/2
SQUARE FOOTAGE: HEATED UNHEATED TOTAL
BASEMENT: N/A YES NO MANUFACTURED
FIREPLACE: N/A MASONARY MANUFACTURED
PLAN SETS: MODULAR STICKBUILT
ELECTRICIAN: MECHANICAL:
PLUMBING:
MULTI USE PLAN #
COST OF CONSTRUCTION:

NO MORE THAN 2 STRUCTURAL DEVIATIONS OR PLANS MUST BE REDRAWN

DEPARTMENTAL USE ONLY

	INITIALS (IN)	DATE	INITIALS (OUT)	DATE
ZONING		2/12/04		
INITIAL PERMITTING				
ADDRESSING				
PLAN REVIEW				
FIRE REVIEW				
SEPTIC/SEWER				
FINAL PERMITTING				



lot 28 Traylee
Sallinger Const.