Large Layout on Back

PERMIT NUMBER _____

Pump

GRANVILLE-VANCE DISTRICT HEALTH DEPARTMENT
IMPROVEMENT AND OPERATION PERMITS

COUNTY: Granville

TAX NO. 18340 006 2039

SR. NO. 1715

OWNER: Steven Hayes

APPLICANT'S ADDRESS: 28 Hayes Court Franklinton, NC 27525

PROPERTY ADDRESS/LOCATION: Evansong Court off Hugh Davis Rd

SUBDIVISION: Silver Leaf

LOT NUMBER: 63

REFERENCE SKETCH (SEE PLAT FOR DETAILS)

See sketch on back Dig Trenches 18"-24" deep level on contour. Stay at least 10' from house foundation drain down slope, 25' from house foundation drain up slope, 10' from property line +100' from any well

TYPE OF ESTABLISHMENTS			
RESIDENCE ✓ BUSINESS — OTHER —	NUMBER OF BEDROOMS: 5	NUMBER OF OCCUPANTS:	
WATER SUPPLY	WELL ✓ PUBLIC —	OTHER —	
TYPE OF WASTEWATER SYSTEM	INITIAL INSTALLATION Type LPP6	REPAIR Type LPP6	
DESIGN FLOW:	600 Sq.ft.		
LTAR:	.3		
ABSORPTION AREA:	2000 sq.ft.		
TRENCH WIDTH:	3'		
TRENCH DEPTH:	18"-24"		
TRENCH SPACING:	9' on center		
TOTAL TRENCH LENGTH:	667 ft. → 500 ft.		
NUMBER OF TRENCHES:	5-7		
GRAVEL DEPTH:	12" → proprietary product		
TANK SIZE:	1250 gal.		
PUMP TANK SIZE:	1250 gal.		
DISTRIBUTION DEVICE:	pressure manifold		

*THIS PERMIT SHALL BE ACCOMPANIED BY A LAYOUT SHOWN ON A PLAT, INCLUDING SYSTEM REQUIREMENTS.

*THIS IMPROVEMENT PERMIT IS SUBJECT TO REVOCATION IF THE INTENDED USES CHANGE FROM THOSE SHOWN ON THE IMPROVEMENT PERMIT. CHANGES SHALL REQUIRE HEALTH DEPARTMENT APPROVAL.

PERMIT VALID FOR: 5 YEARS (YES) NO

NO EXPIRATION YES NO

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IMPROVEMENT PERMIT DATE: 1-31-07

FOR: Steven Hayes

ISSUED BY: M.E. Mount, R.S.

****

CONSTRUCTION AUTHORIZATION FOR IMPROVEMENT PERMIT# 00157

Unless otherwise indicated, the same conditions above apply regarding system type, layout, location and installation requirements.
(The wastewater system cannot be installed until authorization is signed)

Comments: _____

Date: 1-31-07 Environmental Health Specialist: M.E. Mount, R.S.

Construction Authorization Addendum ☐ Yes ☒ No

****

OPERATION PERMIT DATE:

SYSTEM INSTALLED BY: _____

ISSUED BY: _____

PERFORMANCE, MONITORING, MAINTENANCE AND OPERATION
AS REQUIRED BY RULE .1961

GRANVILLE-VANCE HEALTH DEPARTMENT—Sewage Disposal Record

Owner or Contractor Steven Hayes Date 12-31-07 S.R. No. 1715

Location/Address Ensenada Court

Subdivision/Mobile Home Park Name Silverleaf Lot Size

Permit No. # 6157 Lot No. 63

New System ✓ Repair

House ✓ Mobile Home Business

No Bedrooms 5 No. People No. Toilets

Water Supply: Private ✓ Approved

Semi-Public Unapproved

Public None

Nitrification System

Tank Size 1250 gal.

Distribution Box Manifold No. Lines 6

Nitrification Field 1500 Sq. Ft.

Lines:	1	2	3	4	5	6
Width	3'	3'	3'	3'	3'	3'
Length	85'	85'	85'	85'	85'	85'
Grade	0"	0"	0"	0"	0"	0"
Stone Depth		E-Z Flow				

Layout to be followed by installer:

* Sketch on back

Improvements Permit By ME Yount Installer David Brantley & Sons

Certificate of Completion By David Rembert Date of Inspection 2-5-08

* Construction must comply with all other applicable state and local regulations, but the permit is not a guarantee that the system will not malfunction and the Granville-Vance Health District will not be held responsible for a malfunctioning system.

NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.