



OPERATION PERMIT

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

For Office Use Only

*CDP File Number 458273 - 1
County ID Number: _____
Evaluated For: NEW

Property Owner: John Szalecki
Owner Address: 1016 Mockingbird Dr

City: Raleigh
State/Zip: NC/ 27615
Phone #:
Address: 960 Duke Valentine Wynne Road
Louisburg, NC 27549

Road #:
Township:
Subdivision:
Phase : NEW Lot: 5

Structure: SINGLE FAMILY
of Bedrooms: 3
of People: 6
Water Supply: NEW WELL

Saprolite System?: ☐ Yes ☒ No

Pump Required?: ☐ Yes ☒ No

Design Flow: 360
System Classification/Description: TYPE III G. OTHER
NON-CONV. TRENCH SYSTEMS

Installer: DB & SONS

Certification #: 1036

Specific System CHAMBER
Installed:

STB: 502

PT:

Septic Tank Date: _____

Pump Tank Date: _____

Comments: 300' CHAMBER INSTALLED. 72 PANELS PLUS END CAPS- 12 PANELS PER LINE. SIX 50' DRAINLINES

This system has been installed in compliance with applicable NC General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.

PERMIT CONDITIONS:

I. Performance: System shall perform in accordance with Rule .1301.

II. Monitoring: As required by Rule .1301.

III. Maintenance: Ground absorption sewage treatment and disposal systems shall be checked, and the contents of the septic tank removed, periodically from all compartments, to ensure proper operation of the system. The contents shall be pumped whenever the solids level is found to be more than 1/3 of the liquid depth in any compartment.

Other:

Subsurface Operator Required: ☐ Yes ☒ No

If yes, see attached sheet for additional operation conditions, maintenance and reporting.

Operation:

Other: 300' CHAMBER INSTALLED. 72 PANELS PLUS END CAPS- 12 PANELS PER LINE. SIX 50' DRAINLINES

Authorized State Agent: Ennis, Crystal *Crystal Ennis*

Date of Issue: 12/01/2025

Owner/Applicant: _____

File# 458273PIN# 2827-36-9735Property Address: 960 Duke Valentine Wynne Rd.Applicant Or Owner Name: John SzaleckiEnvironmental Health Septic/Well Permit Diagram

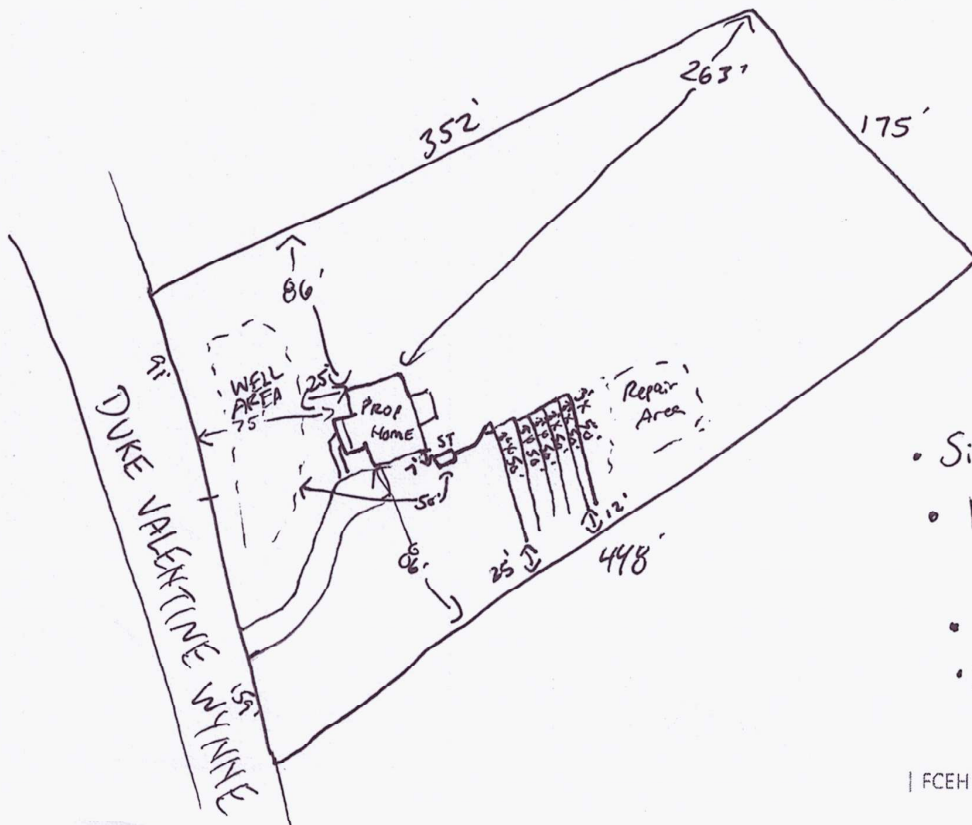
Building permits cannot be issued nor should construction begin without Construction Authorization issuance.

☐ Septic Improvement Permit ☐ Septic Construction Authorization (CA) ☐ CA Reissue** ☒ As Built
☐ Well Construction Authorization ☐ Additional Diagram/Specifications Attached

Diagram Date**: 12-1-25EHS: Crystal Enz

**Any previously dated CA diagram is revoked and/or invalid. Confirm this is the valid diagram for the site before beginning any construction.

Installation inspections may be scheduled the day before or the day of installation by 9am. Contact 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 permit 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 1000 Pump Tank / Drain field 3'x300' Type System ACC Max trench depth 24"Septic Contractor DB & Sons Septic/Pump tank dates 5RB502 PUMP FEE PAID DB1000Well Contractor _____ Well Head Date: _____ PUMP FINAL: (N/A) (CIRCLE)**Drawing not to scale**

360'
Chamber installed
CHM36-N-G-II

- Six lines - 50' each
- 12 panels plus end caps each line
- 72 panels total
- Serial distribution