

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

PAGE 1 OF 2

Phone: 919-496-8100

Fax: 919-496-8136

CDP-293875

Permit Number: 553 Type: I PIN: 1862-95-1900 Date: 5/28/04
Applicant: SMARTBUILT INC Owner: DENMARK CONSTRUCTION INC
PO BOX 877 416 US 1 HWY S STE A&B
WAKE FOREST, NC 27588 YOUNGSVILLE, NC 27596
Telephone: (919) 810-8225 Telephone:
Subdivision: GLEN OAKS Lot Number: 31 Size: 0.500

Physical Address/ Location /Directions 20 FALLING LEAF DR

Description: LifeTime _____ 5 Year ✓

TYPE FACIL Residence # EMPLOY _____ # BEDRMS 3 GPD 180 LTAR 0.295

TYPE WAT Public TYPE SYS Innov TYPE REP LPP BSMT N/A BST FX N/A

SIZE TANK 1000 SIZE CHB _____ SIZE NITR 3'x500' MTD 24"

COMMENTS: * Install Innov. SYSTEM along Contour
& IN DRY Conditions
* Do Not PARK or Drive over SYSTEM /

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 5/28/04 EHS

CONSTRUCTION AUTHORIZATION

DATE 5/28/04 EHS

Cindy Smith, RS
Cindy Smith, RS

Franklin County Health Department

Name: SMARTBUILT INC

Permit Number

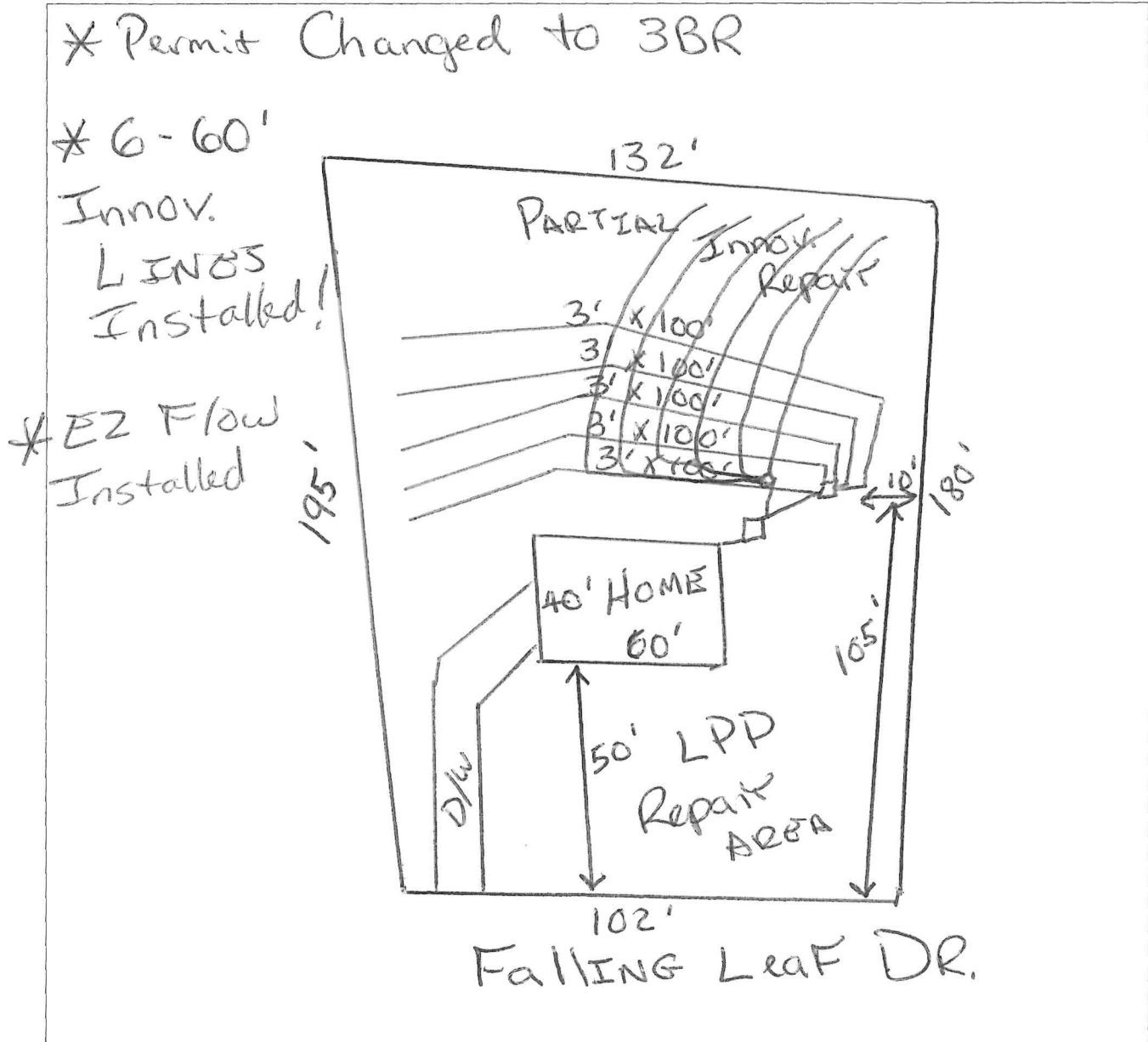
553

CONTRACTOR James Madden TANK MANU GCP 1000 MANU DATE 9/8/04

WELL INSTALLED AT TIME OF INSPECTION YES ☐ NO ☐

SEPTIC SYSTEM LAYOUT (SKETCH SYSTEM LAYOUT HERE)

"Community WATER"



SEPTIC SYSTEM AS-BUILT

(IF DIFFERENT FROM INITIAL LAYOUT)

ON REVERSE

OPERATIONS PERMIT

DATE

10/28/04 EHS

Andy Smith, RS

FRANKLIN COUNTY SOIL/SITE EVALUATION SHEET

APPLICANT Smart Built
 WATER SUPPLY Public
 LOCATION/DIRECTIONS Glen Oaks Lot 31

PROPERTY ID _____
 DATE 5/28/89

FACTORS

PROFILES

		1	2	3	4	5	6
LANDSCAPE POSITION	1940	S	S				
SLOPE (%)	1940	2-6	2-6				
HORIZON I DEPTH	1943	0-8	0-8				
TEXTURE	1941(a) (1)	SL	SL				
CONSISTENCE	1941	FR	FR				
STRUCTURE	1941(a)(2)	GR	GR				
CLAY MINEROLOGY	1941(a)(3)	NBTP	NBTP				
HORIZON II DEPTH	1943	8-16	8-16				
TEXTURE	1941(a) (1)	CL	CL				
CONSISTENCE	1941	FI	FI				
STRUCTURE	1941(a)(2)	SBUL	SBUL				
CLAY MINEROLOGY	1941(a)(3)	SBUL	SBUL				
HORIZON III DEPTH	1943	16-36	16-36				
TEXTURE	1941(a) (1)	C	C				
CONSISTENCE	1941	FI	FI				
STRUCTURE	1941(a)(2)	SBUL	SBUL				
CLAY MINEROLOGY	1941(a)(3)	SBUL	SBUL				
HORIZON IV DEPTH	1943						
TEXTURE	1941(a) (1)						
CONSISTENCE	1941						
STRUCTURE	1941(a)(2)						
CLAY MINEROLOGY	1941(a)(3)						
SOIL WETNESS	1941	364	364				
RESTRICTIVE HORIZON	1944	7364	7364				
SAPROLITE	1943/1955	7364	7364				
CLASSIFICATION	1948	PS	PS				
LTAR (gpa/ft2)	1955	0.24	0.24				
OTHER FACTORS (1946)							
		SITE LTAR (gpa/ft2) <u>0.24</u>					
AVAILABLE SPACE (1945)	PS	SYSTEM TYPE					
CLASSIFICATION (1948)	PS						
EVALUATED BY:	ANDY S.	OTHERS PRESENT					

ENVIRONMENT HEALTH APPLICATION (496-8100)

Permit #: 12020

Permit Type: SEPTIC PERMIT

Date Issued: 05/27/2004

Project Address: 20 FALLING LEAF DRIVE,

Location: 20 FALLING LEAF DRIVE

Size #: 0.500

Subdivision: GLEN OAKS (WATER)

Lot #: 31

Applicant: SMARTBUILT INC
PO BOX 877
WAKE FOREST, NC 27588

Phone: 810-8225

Owner: DEN MARK CONSTRUCTION INC
416 US 1 HWY S STE A&B
27596

Phone:

Tax record: 37042

Pin #: 1862-95-1900

Parcel #: E07H00 031

Zoned: R-15

Setbacks Front: 30

Rear: 25

Side: 10

Proposed Use: SFD

of bedrooms: 4

of people: 4

Township: YOUNGSVILLE Public Water/Sewer: COUNTY

ST Road #:

Desc:

Fees Due: \$225.00

Date Paid: 05/27/2004

* 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.

Glenn H. Bleas Jr.
Signature of Owner or Owner's Legal Representative

5/27/04
Date

Franklin County DRC Application

RESIDENTIAL

Zoning Permit #: 7856



ADDRESS: **20 FALLING LEAF DRIVE**
 PARCEL NO.: **1862-95-1900** ZONING: **R-15**
 SUBDIVISION: **GLEN OAKS (WATER)** LOT: **31**
 ISSUED TO: **SMARTBUILT INC**
PO OBX 877
WAKE FOREST, NC 27588
 PHONE NUMBER: **810-8225**
 SETBACK: FRONT: **30** RIGHT: **10** LEFT: **10** REAR: **25**
 COUNTY WATER: **YES** FLOODPLAIN: **NO**
 PERMIT TYPE: **ZONING PERMIT**
 TYPE OF CONSTRUCTION: **SFD - NEW SEPTIC**
 PERMIT DATE: **05/27/2004** WATERSHED **NO**
 TOWNSHIP **YNGS** EXPIRE DATE: **11/27/2004**

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:

[Handwritten 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 MASONRY MANUFACTURED
 PLAN SETS: MODULAR STICKBUILT
 ELECTRICIAN: MECHANICAL:
 PLUMBING:
 MULTI USE PLAN #
 COST OF CONSTRUCTION:

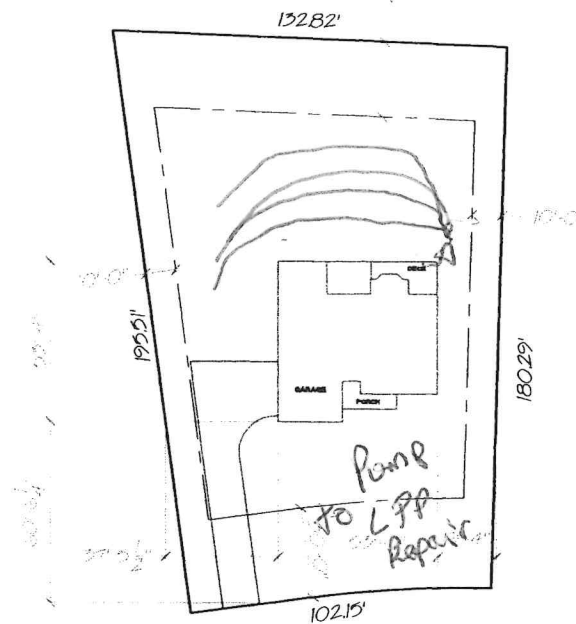
NO MORE THAN 2 STRUCTURAL DEVIATIONS OR PLANS MUST BE REDRAWN

DEPARTMENTAL USE ONLY

	INITIALS (IN)	DATE	INITIALS (OUT)	DATE
ZONING	<i>[Signature]</i>	<i>5/27/04</i>		
INITIAL PERMITTING				
ADDRESSING				
PLAN REVIEW				
FIRE REVIEW				
SEPTIC/SEWER				
FINAL PERMITTING				

SITE PLAN LOT-#31
 GLEN OAKS SUBDIVISION PHASE I
 FRANKLIN COUNTY

SCALE: 1/64" = 1' - 0"



FALLING LEAF DRIVE

GLEN OAKS SUBDIVISION
 MINIMUM BUILDING SETBACKS

FRONT	50
REAR	25
SIDE	10

LOT-#31



PO Box 877
 Wake Forest, NC 27588
 (919) 810-8225