



IMPROVEMENT PERMIT

Granville County Health Dept
Environmental Health
101 Hunt Drive
Oxford, NC 27565
Phone: (252) 492-5263 Fax: (252) 492-2361

For Office Use Only

*CDP File Number 364035 - 1
County ID Number: 191400025178
Evaluated For: NEW

PERMIT VALID UNTIL: 11/08/2026

***NOTE TO INSPECTIONS DIVISION:** Building Permits cannot be issued with this Improvement Permit.

Applicant: Steven Wright
Address: 119 Royall Rd
City: Oxford
State/Zip: NC 27565
Phone #: cell :(919) 418-5677

Property Owner: Whetson Family Trust
Address: 632 Saybrook Dr
City: Raleigh
State/Zip: NC. 27604
Phone #: _____

Property Location & Site Information

Address/Road #: Cornwall Rd Oxford, NC 27565 Subdivision: _____ Phase: NEW Lot: _____

Directions

Structure: SINGLE FAMILY
of Bedrooms: 4
of People: _____
*Water Supply: NEW WELL

System Specifications

Initial System

*Site Classification: Provisionally Suitable
Design Flow: 480
Soil Application Rate: 0.2500
*System Classification/Description:
TYPE III B. SYSTEM W/SINGLE EFFLUENT PUMP
*Proposed System:
25% REDUCTION

Minimum Trench Depth: 22 Inches
Maximum Trench Depth 24 Inches
Septic Tank: 1000 Gallons
1-Piece: ☐ Yes ☐ No
Pump Required: ☐ Yes ☐ No ☒ May Be Required
Pump Tank: 1000 Gallons
1-Piece ☐ Yes ☒ No

Repair System Required: ☒ Yes ☐ No ☐ No, but has Available Space

Repair System

*Site Classification: Provisionally Suitable
Soil Application Rate: 0.250
*System Classification/Description:
TYPE III B. SYSTEM W/SINGLE EFFL
*Proposed System:
25% REDUCTION

Minimum Trench Depth: 22 Inches
Maximum Trench Depth 24 Inches
Pump Required: ☐ Yes ☐ No ☒ May Be Required

***Site Modifications**

No grading or construction activity is allowed in areas designated for system and repair without approval of Health Department.

A surveyor must record the designated soil area on a plat before installation can occur. Do not remove any soil while grading and clearing the lot.

***Permit Conditions**

The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements.

Septic contractor is responsible for establishing and following contour. Contractor is responsible for maintaining all setbacks.

Site Plan



The Improvement Permit shall be valid for 5 years from date of issue with a site plan (means a drawing not necessarily drawn to scale that shows the existing and proposed property lines with dimensions, the location of the facility and appurtenances, the site for the proposed Wastewater system, and the location of water supplies and surface waters).

Plat



The Improvement Permit shall be valid without expiration with plat (means a property surveyed prepared by a registered land surveyor, drawn to a scale of one inch equals no more than 60 feet, that includes: the specific location of the proposed facility and appurtenances, the site for the proposed Wastewater system, and the location of water supplies and surface waters. Plat also means, for subdivision lots approved by the local planning authority and recorded with the county register of deeds, a copy of the recorded subdivisions plat that is accompanied by a site plan that is drawn to

The Department and Local Health Department may impose conditions on the issuance and may revoke the permits for failure of the system to satisfy the conditions, the rules, or this article. This permit is subject to revocation if the site plan, plat, or intended use changes (NCGS 130a-335(f)). The person owning or controlling the system shall be responsible for assuring compliance with the laws, rules, and permit conditions regarding system location, installation, operation, maintenance, monitoring, reporting, and repair (.1938(b)).

Applicant/Legal Resps. Signature Required ?



Yes



No

Applicant/Legal Reps. Signature: _____

Date: _____

*Issued By: Stiles, Bailey

Date of Issue: 11/08/2021

Authorized State Agent: _____



Valid without Expiration ?



Hand Drawing



Import Drawing

****Site Plan/Drawing attached.****



Well Construction Permit

Granville County Health Dept
Environmental Health
101 Hunt Drive
Oxford NC, 27565
Phone: (252) 492-5263 Fax: (252) 492-2361

For Office Use Only

*CDP File Number 364035
PIN Number: 191400025178
Tax Lot #: _____ Tax Block #: _____
Evaluated For: SINGLE FAMILY \ WELL

Property Owner: Whetson Family Trust
Address: 632 Saybrook Dr
City: Raleigh
State/Zip: NC / 27604
Phone #: _____

Applicant: Steven Wright
Address: 119 Royall Rd
City: Oxford
State/Zip: NC / 27565
Phone #: H: (919) 418-5677

Property Location & Site Information

Address/Road #: _____ Subdivision: _____ Phase: _____ Lot: _____
Cornwall Rd
Oxford NC, 27565
*Proposed use of Well: SINGLE FAMILY
Directions If Other: _____

Well Contractor Information

Drilling Contractor: _____ Driller Registration: _____

Permit Conditions

*Permit Conditions

See site sketch for well area. Well Contractor is responsible for maintaining all setbacks.

Well location, construction and protection must meet all state and local regulations and must be inspected and approved by an authorized representative of the Local Health Department. The permit may be revoked at any time for failure to comply with existing regulations. The siting of approved well construction area(s) by the Health Department is to provide protection from the known possible sources of contamination. The approved well area(s) may not be changed without permission from an authorized representative of the Local Health Department. No volume of quality of water is guaranteed by the Health Department.

*Issued By: Stiles, Bailey
Authorized State Agent: Bailey Stiles
Owner/Applicant: _____

*Date of Issue: 11/08/2021
☒ Hand Drawing ☐ Import Drawing
Site Plan/Drawing attached.

Granville County Health Department
Environmental Health

Pin 191400025178

Permit Number P-364035
S-253639
W-253641

☒ Improvement Permit

☒ Construction Authorization

Site Sketch

Steven Wright
Applicants Name
Bailey Stiles
Authorized State Agent

Cornwall Rd
Subdivision - Section - Lot
11-8-2021
Date

System components represent approximate contours only. The contractor must flag the system prior to beginning the installation to insure that proper grade is maintained.

