

PERMIT NUMBER 06600

GRANVILLE-VANCE DISTRICT HEALTH DEPARTMENT
IMPROVEMENT AND OPERATION PERMITS

zoning permit
15612

COUNTY:	TAX NO.	TYPE OF ESTABLISHMENTS			*THIS PERMIT SHALL BE ACCOMPANIED BY A LAYOUT SHOWN ON A PLAT, INCLUDING SYSTEM REQUIREMENTS.
<i>Granville</i>	<i>184600085000</i>	RESIDENCE ☒	NUMBER OF BEDROOMS:	NUMBER OF OCCUPANTS:	
	SR. NO.	BUSINESS ☐	<i>3</i>	<i>max 60</i>	
	<i>1625</i>	OTHER ☐			
OWNER:		WATER SUPPLY	WELL ☒	OTHER ☐	*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.
<i>Patrick Noel</i>		<i>Private</i>	PUBLIC ☐		
APPLICANT'S ADDRESS:		TYPE OF WASTEWATER SYSTEM	INITIAL INSTALLATION	REPAIR	
<i>5128 Lucy Averette Rd</i>			<i>IIa</i>	<i>IIIa</i>	
<i>Oxford, NC 27565</i>		DESIGN FLOW:	<i>360</i>	<i>360</i>	
<i>Grace Hill → Carson</i>		LTAR:	<i>.275</i>	<i>.275</i>	
PROPERTY ADDRESS/LOCATION:		ABSORPTION AREA:	<i>1309</i>		
<i>Wayne → 1st lot on (L)</i>		TRENCH WIDTH:	<i>36"</i>		
SUBDIVISION:		TRENCH DEPTH:	<i>24"</i>		
<i>Windsor</i>		TRENCH SPACING:	<i>9' on center</i>		
LOT NUMBER:		TOTAL TRENCH LENGTH:	<i>440 ft</i>		PERMIT VALID FOR: 5 YEARS YES ☒ NO ☐
<i>18</i>		NUMBER OF TRENCHES:	<i>layout as needed</i>		
REFERENCE SKETCH (SEE PLAT FOR DETAILS)		GRAVEL DEPTH:	<i>12"</i>		
		TANK SIZE:	<i>1000 gal</i>		NO EXPIRATION YES ☐ NO ☒
		PUMP TANK SIZE:	<i>—</i>		
		DISTRIBUTION DEVICE:	<i>Distribution Box</i>		

- Maintain setbacks
- Follow site sketch
- Layout to be done by contractor or by EHS.

***** IMPROVEMENT PERMIT DATE: *11-30-07* *****

FOR: *Patrick Noel*
ISSUED BY: *Carol O'Connor, RS - Cary*

CONSTRUCTION AUTHORIZATION FOR IMPROVEMENT PERMIT# 66000

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: *Follow site sketch* *Maintain Center*

Date: *11-30-07* Environmental Health Specialist: *Carol O'Connor, RS*
Construction Authorization Addendum ☐ Yes ☒ No

OPERATION PERMIT DATE:

SYSTEM INSTALLED BY: *CBS* *3-17-08*
ISSUED BY: *Sydney Knott RS*

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

Granville County Health Department
Environmental Health

Pin 184600085006

Permit Number 06600

☐ Improvement Permit

☐ Construction Authorization

Final Sketch

Patrick Noel

Applicants Name

Windsor-Lot 18

Subdivision - Section - Lot

Physical Address: 4511 Carson Layne

CBS

System Installer

3-17-08

Date

System design and details as installed.

Septic Tank Information:

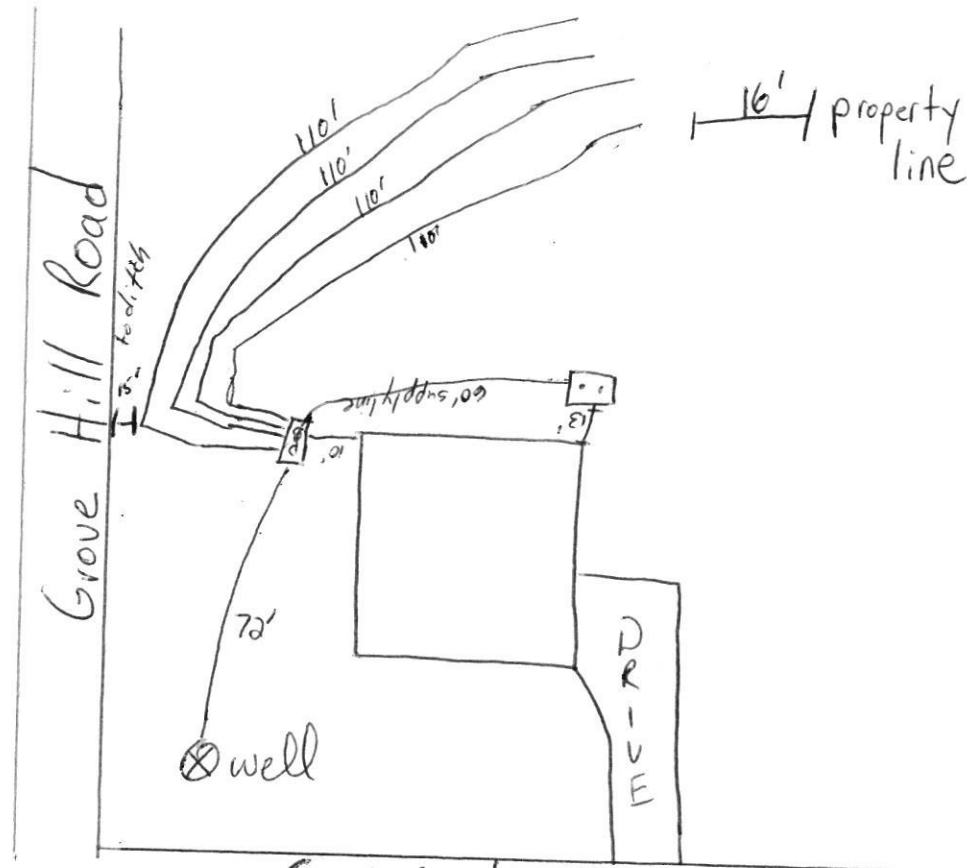
Date: 8-28-07
Manufacture: Ellis 1000
ID #: STB 789

Pump Tank Information:

Date: NA
Manufacturer: NA
ID #: NA

Distribution Box ☒

Pressure Manifold NA
Serial Distribution NA



Carson Layne

Suzanne Knott
Authorized Signature

3-17-08

Date