GRANVILLE VANCE public health

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: 430952 - 1
County ID Number: 182400888237
Evaluated For: NEW

PERMIT VALID UNTIL: 12/17/2029

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

Applicant:	Michael Perry
Address:	108 Tulliallan Lane
City:	Cary
State/Zip:	NC 27511
Phone #:	home: (919) 612-6611 cell :(919) 612-6611

Property Owner:	Steven Wheeler
Address:	Carper CT
City:	Wake Forest
State/Zip:	NC. 27587
Phone #:	home: (919) 413-4080 cell :(919) 413-4080

Property Location & Site Information

Address: Carper CT Wake Forest, NC 27587 Subdivision: Buckeyes Way Block/Phase: NEW Lot: 11

Directions

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

System Specifications

Initial System

Usable Soil Depth: 38
Design Flow: 480
Soil Application Rate: 0.3000

*System Classification/Description:
TYPE III G. OTHER NON-CONV. TRENCH SYSTEMS

*Proposed System:
25% REDUCTION

Minimum Trench Depth: 18 Inches
Maximum Trench Depth: 26 Inches

Septic Tank: 1000 Gallons
Pump Required (X) Yes ( ) No ( ) May Be Required
Pump Tank: 1000 Gallons

Repair System Required: (X) Yes ( ) No ( ) No, but has Available Space

Repair System

Usable Soil Depth: 38
Soil Application Rate: 0.300

*System Classification/Description:
TYPE III G. OTHER NON-CONV. TRENCH SYSTEMS

*Proposed System: 25% REDUCTION

Minimum Trench Depth: 18 Inches
Maximum Trench: Depth: 26 Inches

Pump Required: (X) Yes ( ) No ( ) May Be Required
Pump Tank: 1000 Gallons

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

***Site Modifications**

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.

***Permit Conditions**

Keep all parts of the septic 10ft from all property lines and the house.

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The Department and Local Health Department may impose conditions on the issurance 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 it the site plan, plat, or intended use changes (NCGS 130A-335(f)). The person owning or controlling the system location, installing, operation, maintenance, monitoring, reporting, and repair (per rule .0301((a).

Authorized State Agent: Wilkerson, Austin Date of Issue: 12/17/2024

Total TIme: (HH:MM)

Hand Drawing ◯ Import Drawing ****Site Plan/Drawing attached.****

Granville-Vance Dist. Health Department
Environmental Health

Pin _____ Permit Number 4130952

X Improvement Permit ____ Construction Authorization

SITE SKETCH

Mike Perry — Applicants Name
3659 Casper Ct — Address
Buckeyes Way #11 — Subdivision – Section – Lot
Authorized State Agent
12/20/24 — Date

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