

252 438 2407

FRANKLIN COUNTY HEALTH DEPARTMENT

PERMIT NUMBER: 14390C CONST IMPROVE PERMIT 20000914	DATE: 6372-30	SIZE: .94A
APPLICANT: ABERDEEN LLC PO BOX 20242 RALEIGH NC 27619	OWNER: ABERDEEN LLC PO BOX 20242 RALEIGH NC 27619	
TELEPHONE: 847-1800		
COMMENT: SFD	DESCRIPTION: 5 YEAR ☒	LIFETIME: ☐
LOCATION / DIRECTIONS: ABERDEEN #30 - 110 CANTER GABLE PLACE YNG Off 96W ≈ 3-4 miles west of US1		
FEE: 175.00	SIGNATURE OR OWNER OR AUTHORIZED AGENT:	

THE ABOVE SIGNATURE INDICATES THAT I HAVE READ, UNDERSTAND, AND AGREE WITH ALL PROVISIONS AND INFORMATION AS OUTLINED ON THE BACK SIDE OF THIS FORM

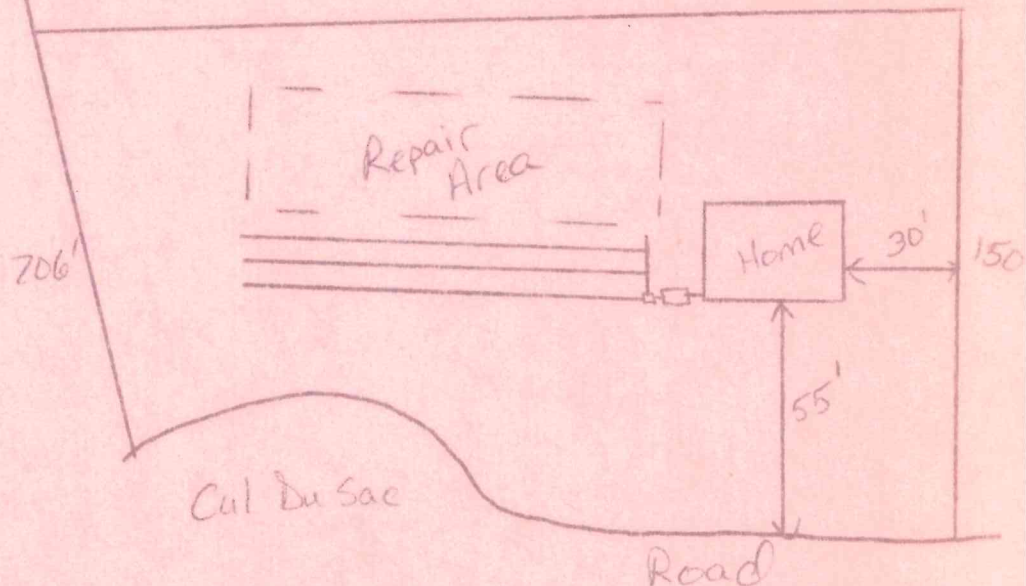
TOPO <u>S</u>	TEXTURE <u>PS</u>	STRUCTURE <u>PS</u>	DEPTH <u>PS</u>
R. HOR <u>S</u>	SOIL. WET <u>S</u>	AVAIL. SP <u>S</u>	OTHER <u>Z</u>
MINRL <u>S</u>	OVERALL <u>PS</u>	LTAR <u>.40</u>	
#BEDRMS <u>3</u>	GPD <u>360</u>	DISPOSAL <u>✓</u>	TYPE. SYS <u>Conu</u>
SZ. TANK <u>900</u>	SZ. CHAMB <u>✓</u>	NITRIFI <u>3' x 300'</u>	TYPE. WAT <u>County</u>
SITE. LOC <u>✓</u>	MAX TRENCH DEP <u>24"</u>	TYP. FAC <u>SFD</u>	

REMARKS: Stay 10' from water line, 5' from foundation, 10' from property line

Run drain lines with contour.

*Not to Scale

CONTRACTOR: David Brantley & Sons
TANK MANUF: D-B 1000 gal
MANUF DATE: 8-16-01



IMPROVEMENT PERMIT DATE: 9/15/00

CONSTRUCTION AUTHORIZATION DATE: 9/15/00

OPERATION PERMIT DATE: 1/31/02

ENV HEALTH SPEC: Dustin Funks

ENV HEALTH SPEC: Dustin Funks

ENV HEALTH SPEC: Andy Smith

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FRANKLIN COUNTY HEALTH DEPARTMENT

PERMIT NUMBER: 143900 CONST IMPROVE PERMIT 20000914	DATE: 6372-30	SIZE: .94A
APPLICANT: ABERDEEN LLC PO BOX 20242 RALEIGH NC 27619	OWNER: ABERDEEN LLC PO BOX 20242 RALEIGH NC 27619	
TELEPHONE: 847-1800		
COMMENT: SFD	DESCRIPTION: 5 YEAR ☒	LIFETIME: ☐
LOCATION / DIRECTIONS: ABERDEEN #30 - 110 CANTER GABLE PLACE YNG OH 916 W ≈ 3-4 miles west of USA		
FEE: 175.00	SIGNATURE OR OWNER OR AUTHORIZED AGENT:	

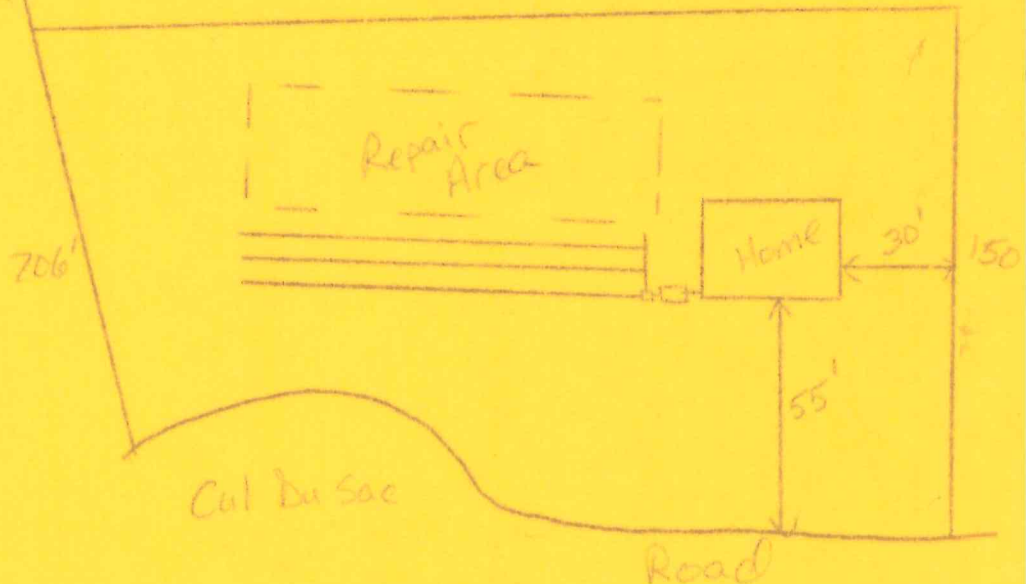
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TOPO <u>S</u>	TEXTURE <u>PS</u>	STRUCTURE <u>PS</u>	DEPTH <u>PS</u>
R. HOR <u>S</u>	SOIL. WET <u>S</u>	AVAIL. SP <u>S</u>	OTHER <u>S</u>
MINRL <u>S</u>	OVERALL <u>PS</u>	LTAR <u>.40</u>	
#BEDRMS <u>3</u>	GPD <u>360</u>	DISPOSAL <u>S</u>	TYPE. SYS <u>Conu</u>
SZ. TANK <u>900</u>	SZ. CHAMB <u>S</u>	NITRIFI <u>3/2 300'</u>	TYPE. WAT <u>County</u>
SITE. LOC <u>S</u>	MAX TRENCH DEP <u>24"</u>	TYP. FAC <u>SFD</u>	
REMARKS: <u>Stay 10' from water line, 5' from foundation, 10' from property line</u>			

Run drain lines with contour.

*Not to Scale

CONTRACTOR: David Brambley & Sons
TANK MANUF: D-B 1000 gal
MANUF DATE: 8-16-01



IMPROVEMENT PERMIT DATE: <u>9/15/00</u>	ENV HEALTH SPEC: <u>Dustin Finkbe</u>
CONSTRUCTION AUTHORIZATION DATE: <u>9/15/00</u>	ENV HEALTH SPEC: <u>Dustin Finkbe</u>
OPERATION PERMIT DATE: <u>1/31/02</u>	ENV HEALTH SPEC: <u>Indy Smith</u>

COUNTY OF FRANKLIN

ENVIRONMENT HEALTH APPLICATION (496-8100)

Permit #: 00-15907

Permit Type: EH

14390C

Date Issued: 08-15-00

Project Address: 110 CANTER GABLE PLACE, YOUNGSVILLE

Location: 110 CANTER GABLE PLACE, YOUNGSVILLE

Subdivision: ABERDEEN

Lot #: 30

Size: .94

Owner Name: ABERDEEN LLC

Address: PO BOX 20242

City: RALEIGH

Phone: (919)-847-1800

State: NC Zip: 27619

Contractor: OWNER

Address:

City:

Phone: ()- -

State: Zip:

Proposed use: ABERDEEN LLC

Work: SFD

Desc:

Bldg Cost:	Fees due: \$ 175.00	Fees Paid: \$ 175.00
Zoned: R-40	Setbacks Front: 50	Rear: 50 Side: 20
Tax Rec #: 6372	Pin #:	Parcel#: B04 00 016-030
Township: YNGS	Public Water/Sewer:	ST Road #:

Special conditions: _____

of bedrooms: 3 | # of bathrooms: 2 | Approved for Issuance by *ED*

I certify that all 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. I understand that false information may be grounds for rejection of this application. Authorized county representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

Call Environment Health (496-8100) between 8:00 AM and 9:00 AM Monday thru Friday to schedule an appointment with the environment health specialist to evaluate your lot. He/She will show you where to locate the well and septic system, in relation to the desired dwelling location and any property lines. If approved, an improvements permit will be issued. After the septic tank has been installed and approved, the sanitarian will issue a certification of completion.

William H. Tomlinson
Signature of Contractor or Authorized Agent)

8, 15, 00
Date

PROPERTY OF
ABERDEEN, LLC

LOT 30, ABERDEEN, PHASE 1

CANTER GABLE PLACE

SCALE: 1"=60'

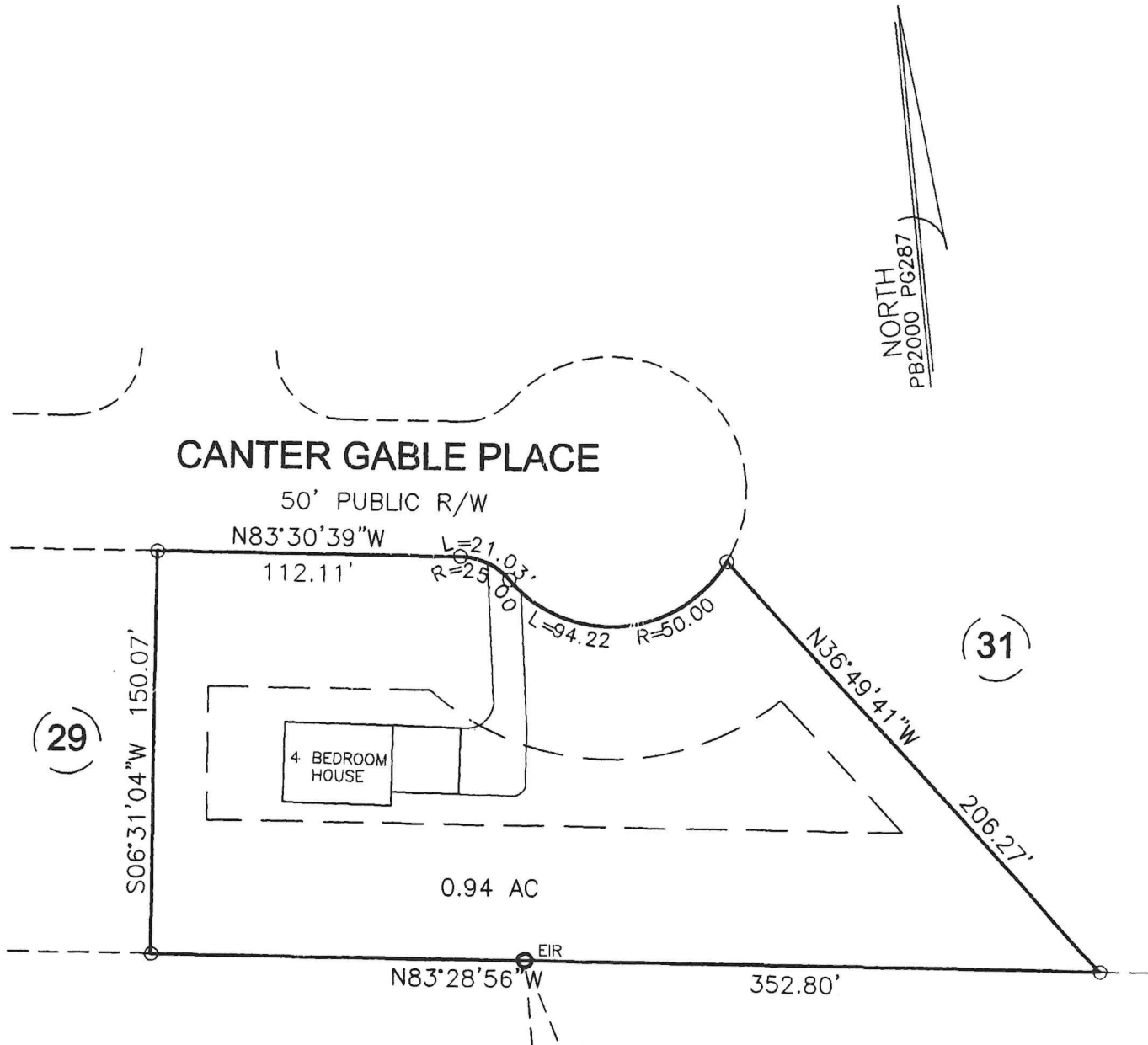
REFERENCES: PB 2000 PG 287

YOUNGSVILLE TOWNSHIP

FRANKLIN COUNTY

NORTH CAROLINA

AUGUST 14, 2000



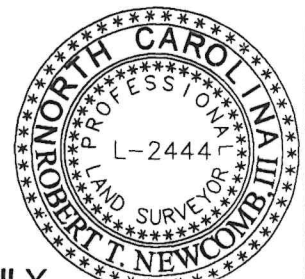
NORTH
PB2000 PG287

(31)

(29)

NOTE:
HOUSE AND DRIVEWAY LOCATIONS
ARE SUGGESTED ONLY; SEPTIC
TANK LOCATION BY HEALTH DEPT.
TAKES PRECEDENCE OVER PROPOSED
HOUSE OR DRIVE LOCATION.

NORTH RALEIGH FARMS
SECTION 4
PRF-2 SLIDE 66



PRELIMINARY PLAN FOR SEPTIC TANK PERMIT APPLICATION ONLY

COUNTY: _____ SHEET _____ OF _____
PROPERTY ID. # _____
TAX #: _____
DATE: _____

COUNTY: _____ SHEET _____ OF _____
PROPERTY ID. # _____
TAX #: _____
DATE: _____

COUNTY: _____ SHEET _____ OF _____
PROPERTY ID. # _____
TAX #: _____
DATE: _____