Pump(?)

PERMIT NUMBER 06795

GRANVILLE-VANCE DISTRICT HEALTH DEPARTMENT
IMPROVEMENT AND OPERATION PERMITS

COUNTY: Granville	TAX NO. 182500201458	TYPE OF ESTABLISHMENTS			*THIS PERMIT SHALL BE ACCOMPANIED BY A LAYOUT SHOWN ON A PLAT, INCLUDING SYSTEM REQUIREMENTS.
	SR. NO. 1711	RESIDENCE ✓ BUSINESS __ OTHER __	NUMBER OF BEDROOMS: 4	NUMBER OF OCCUPANTS: 8 max.	
OWNER: Pinnacle Homes		WATER SUPPLY	WELL ✓ PUBLIC —	OTHER —	
APPLICANT'S ADDRESS:		TYPE OF WASTEWATER SYSTEM	INITIAL INSTALLATION Type III b,g	REPAIR Type III b,g	
PROPERTY ADDRESS/LOCATION: Cottonfield Court		DESIGN FLOW:	480 gpd		*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.
		LTAR:	.275 gpd/ft²		
SUBDIVISION: The Preserve @ Smith Creek		ABSORPTION AREA:	1745 ft²		
LOT NUMBER: 77		TRENCH WIDTH:	3'		
REFERENCE SKETCH (SEE PLAT FOR DETAILS)		TRENCH DEPTH:	24"		
– Dig lines level and on contour		TRENCH SPACING:	9' o.c.		
		TOTAL TRENCH LENGTH:	440'		
– Site meeting required prior to installation		NUMBER OF TRENCHES:	5		
		GRAVEL DEPTH:	Accepted Status	(non-gravel)	PERMIT VALID FOR: 5 YEARS (YES) NO
– follow tap chart design for manifold		TANK SIZE:	1200 gal		
		PUMP TANK SIZE:	1200 gal		NO EXPIRATION YES (NO)
– Do not install in wet conditions		DISTRIBUTION DEVICE:	Pressure manifold *	See Tap chart	

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IMPROVEMENT PERMIT DATE: 2-2-2010

FOR: Pinnacle Builders

ISSUED BY: David Cumbee

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CONSTRUCTION AUTHORIZATION FOR IMPROVEMENT PERMIT# 6795

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: Call 693-2688 w/ questions

Date: 2-2-2010 Environmental Health Specialist: David Cumbee

Construction Authorization Addendum ☐ Yes ☐ No

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OPERATION PERMIT DATE:

SYSTEM INSTALLED BY:

ISSUED BY:

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

Granville County Health Department
Environmental Health

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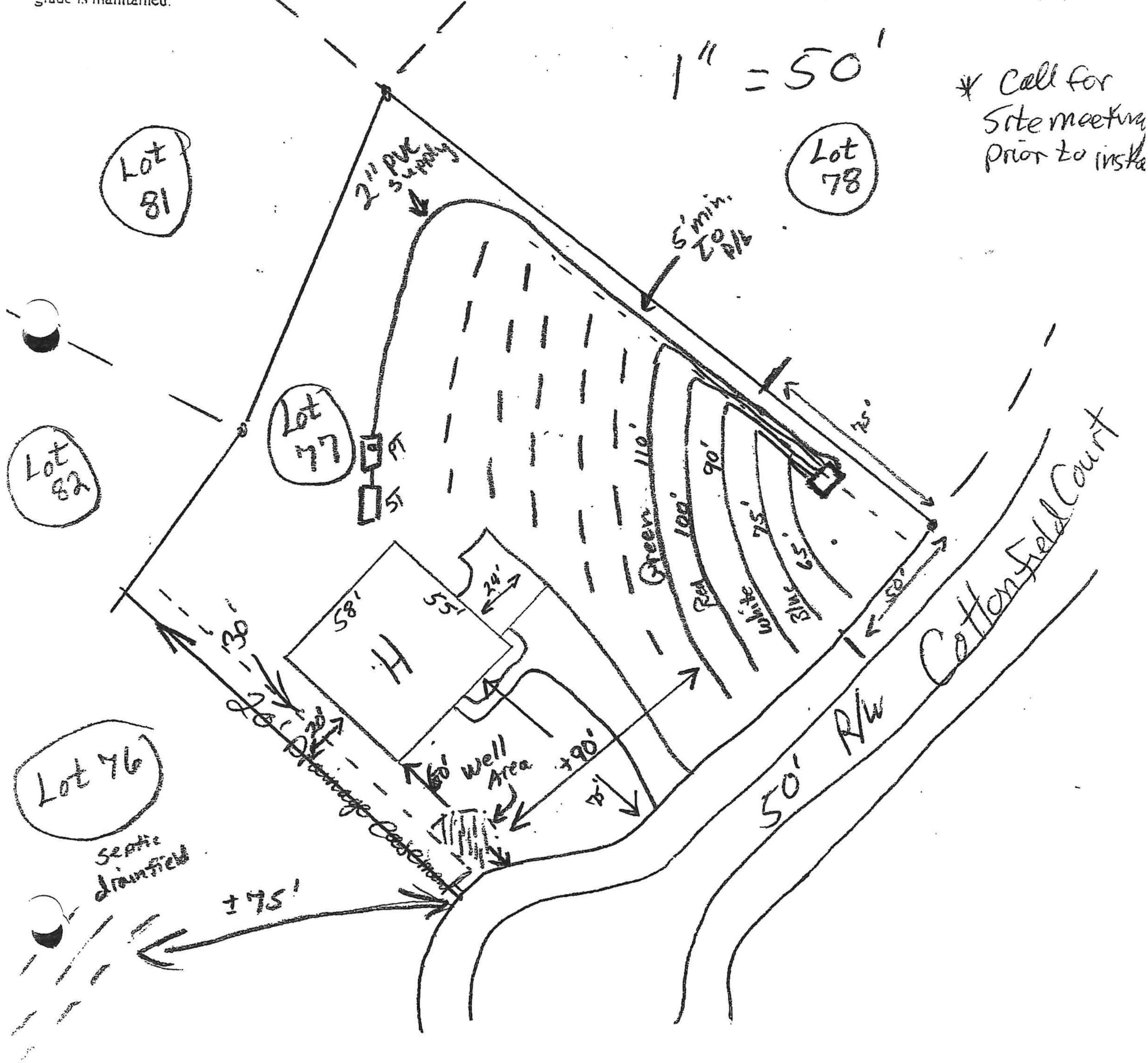
Permit Number 6795

✓ Improvement Permit ✓ Construction Authorization

SITE SKETCH

Mike McNally	The Preserve @ Smith Cr. 77
Applicants Name	Subdivision – Section – Lot
[signature]	2-2-2010
Authorized State Agent	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.



Granville - Vance District Health Department
Environmental Health
Well Construction Permit

Owner/Applicant: Pinnacle Builders Date: 2-2-2010
Address or Location of Property: 68 Harvard Court

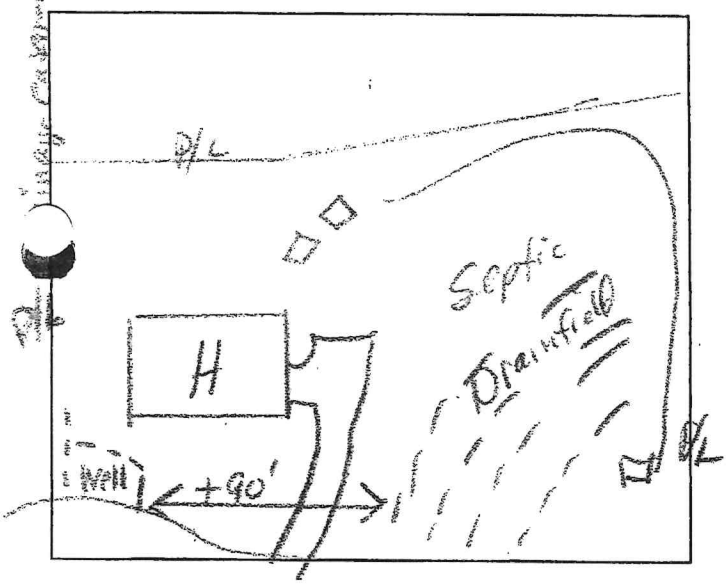
Subdivision & Lot #: The Preserve 77 Septic Permit #: 6795
Zoning Permit #: _____ Environmental Health Specialist: David Ruiz

This well permit is to locate and site the area that a private groundwater well may be established on the property listed above by the Environmental Health Specialists of Granville County. If one does not locate the well in the approved area and complete the well as specified by the 15A NCAC .02C rules, then permits may be revoked. At completion of drilling of the well, grout must be witnessed by EHS and a well log turned into Environmental Health.

Minimum Setbacks: (these are the main setbacks, but not all required setbacks)

Setback from property lines – 10 ft
Setback from structural foundations – 25 ft
Setback from septic tank and drain field, including repair area – 100 ft
Setback from ponds, lakes or other bodies of water – 50 ft

Site Sketch:



Conditions: Call 693-2698 with questions

Authorized Agent: David Ruiz
Date: 2-2-2010

Well Grout: (Circle or write in)
Witnessed: Yes or No EHS Agent: _____
Date: _____ Annular Space Open: Yes or No
Over reamed: Yes or No
Method: _____ Pump _____ Poured _____ Pressure
Depth Grouted: _____ ft
Well Log received: Yes or No (EHS to Attach to Permit)

As Built Drawing:

Well Final: (Place a check mark when finalized)
Seal Present and Intact: _____ Air Vent: _____
Hose Spigot: _____ Electrical Box: _____
Pump Installer Tag: _____ Well Installer Tag: _____
All holes sealed: _____ 12" above grade: _____
Comments: _____

Well Completion Permit: _____, **EHS**
Date Completed: _____

Water Samples Taken: Date: _____
EHS: _____ **Results:** _____
Retest: _____ **Results:** _____