



## 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 451099 - 1  
County ID Number: \_\_\_\_\_  
Evaluated For: NEW

PERMIT VALID UNTIL: 03/27/2030

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

Applicant: STAN JOYNER  
Address: 3986 HOPE VALLEY DRIVE  
City: WAKE FOREST  
State/Zip: NC  
Phone #: home: (919) 810-1976

Property Owner: STAN JOYNER  
Address: 3986 HOPE VALLEY DRIVE  
City: WAKE FOREST  
State/Zip: NC  
Phone #: home: (919) 810-1976

### Property Location & Site Information

Address: 3919 CEDAR KNOLLS DRIVE Subdivision: CEDAR Block/Phase: NEW Lot: 10  
YOUNGVILLE, NC Directions KNOLLS  
Road #: GPS  
Structure: SINGLE FAMILY  
# of Bedrooms: 4  
# of People:  
\*Water Supply: NEW WELL

### System Specifications

#### Initial System

Usable Soil Depth: 44

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: 22 Inches

Maximum Trench Depth: 28 Inches

Septic Tank: 1000 Gallons

Pump Required ☐ Yes ☒ No ☐ May Be Required

Pump Tank: \_\_\_\_\_ Gallons

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

### Repair System

Usable Soil Depth: 44

Soil Application Rate: 0.300

\*System Classification/Description:

TYPE III G. OTHER NON-CONV. TRENCH SYSTEMS

\*Proposed System: 25% REDUCTION

Minimum Trench Depth: 22 Inches

Maximum Trench: Depth: 28 Inches

Pump Required: ☐ Yes ☒ No ☐ May Be Required

Pump Tank: \_\_\_\_\_ 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 proposed septic 10ft min. from house and property lines. Keep septic 50ft min. from any well or well locations including neighboring lots.



## Construction Authorization

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: 451099 - 1

County ID Number: \_\_\_\_\_

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PERMIT VALID UNTIL: 03/27/2030

☐ Open Pump System Sheet

Applicant: STAN JOYNER

Address: 3986 HOPE VALLEY DRIVE

City: WAKE FOREST

State/Zip: NC

Phone #: home: (919) 810-1976

Property Owner: STAN JOYNER

Address: 3986 HOPE VALLEY DRIVE

City: WAKE FOREST

State/Zip: NC

Phone #: home: (919) 810-1976

### Property Location & Site Information

Address/Road #: 3919 CEDAR KNOLLS DRIVE  
YOUNGVILLE, NC

Subdivision: CEDAR  
KNOLLS

Phase: NEW Lot: 10

### Directions:

Structure: SINGLE FAMILY

GPS

# of Bedrooms: 4

# of People:

\*Water Supply: NEW WELL

### System Specifications

Usuable Soil Depth: 44

Minimum Trench Depth: 22 Inches

Design Flow: 480

Maximum Trench Depth: 28 Inches

Soil Application Rate: 0.3000

Minimum Soil Cover: \_\_\_\_\_ Inches

\*System Classification/Description:

TYPE III G. OTHER NON-CONV. TRENCH SYSTEMS

Maximum Soil Cover: \_\_\_\_\_ Inches

\*Proposed System:

25% REDUCTION

\*Distribution Type: GRAVITY - PARALLEL (eq. d-box)

Nitrification Field: 1200 Sq. ft.

Septic Tank: 1,000 Gallons

No. Drain Lines: 5

Pump Required: ☐ Yes ☒ No ☐ May Be Required

Total Trench Length: 400 ft.

☐ Inches O.C.

Pump Tank: \_\_\_\_\_ Gallons

☒ Feet O.C.

Trench Spacing: 9 -

☐ Inches

Grease Trap: \_\_\_\_\_ Gallons

Trench Width: 3 -

☒ Feet

Septic Tank Installer

Aggregate Depth: \_\_\_\_\_ inches

Grade Level Required: ☐ I ☐ II ☐ III ☐ IV

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 proposed septic 10ft min. from house and property lines. Keep septic 50ft min. from any well or well locations including neighboring lots.

The Authorization for Wastewater System Construction shall be valid for a period equal to the period of validity of the Improvement Permit and may be issued at the same time the Improvement Permit issued (NCGS 130A-336(b)). If the installation has not been completed during the period of validity of the Construction Permit, the information submitted in the application for a permit or Construction Authorization shall become invalid, and may be suspended or revoked (.0204(k)(1)). 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 (per rule .0301(a)).

Authorized State Agent: Wilkerson, Austin

Date of Issue: 03/27/2025



Hand Drawing



Import Drawing

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

Total Time : (HH:MM)



## 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 451099

PIN Number: \_\_\_\_\_

Tax Lot #: 10

Tax Block #: \_\_\_\_\_

Evaluated For: \_\_\_\_\_

PERMIT VALID UNTIL: 03/27/2030

Property Owner: STAN JOYNER  
Address: 3986 HOPE VALLEY DRIVE  
City: YOUNGSVILLE  
State/Zip: NC  
Phone #: H: (919) 810-1976

Applicant: STAN JOYNER  
Address: 3986 HOPE VALLEY DRIVE  
City: YOUNGSVILLE  
State/Zip: NC  
Phone #: H: (919) 810-1976

### Property Location & Site Information

Address/Road #: 3919 CEDAR KNOLLS DRIVE Subdivision: CEDAR KNOLLS Phase: \_\_\_\_\_ Lot: 10  
\*Proposed use of Well: \_\_\_\_\_  
If Other: \_\_\_\_\_  
Applicant Email: \_\_\_\_\_  
Owner Email: \_\_\_\_\_

Directions:GPS

### Well Contractor Information

Drilling Contractor: \_\_\_\_\_ Driller Registration: \_\_\_\_\_

### Permit Conditions

#### \*Permit Conditions

Keep proposed well 50ft min. from any part of the septic including neighboring lots. Keep well 25ft min. from house.  
Drilling responsible for 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. Issuance of this well permit does not guarantee water quality or adequate water production from the well once it is installed or repaired.

\*Issued By: Wilkerson, Austin  
Authorized State Agent: Alan C. DEHS  
Owner/Applicant: Stan Joyner

\*Date of Issue: 03/27/2025

☒ Hand Drawing ☐ Import Drawing

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

Granville-Vance Dist. Health Department  
Environmental Health

Pin \_\_\_\_\_

Permit Number 451099

☒ Improvement Permit

☐ Construction Authorization

SITE SKETCH

Stan Joyner  
Applicants Name

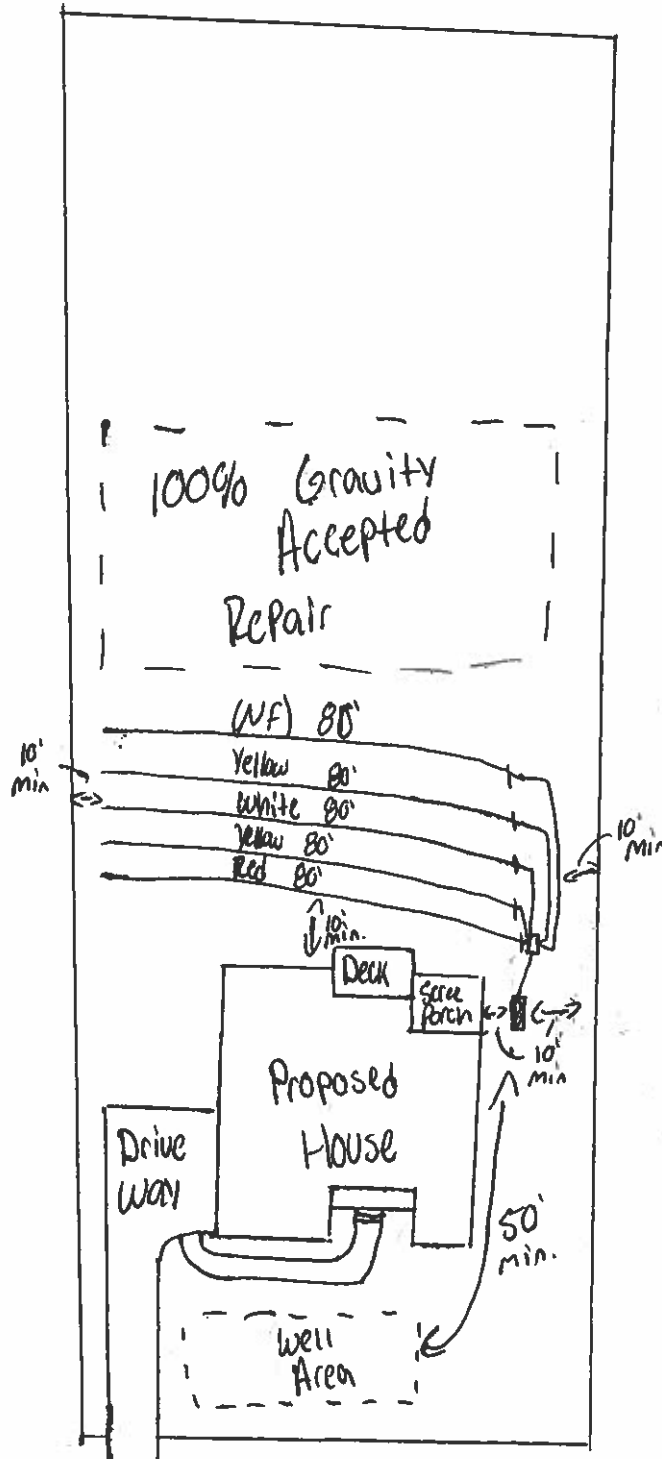
3919 Cedar Knolls DR  
Address

Cedar Knolls Lot 10  
Subdivision - Section - Lot

Art W. W.  
Authorized State Agent

3/27/25  
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.



Cedar Knolls DR