



IMPROVEMENT PERMIT

Franklin County Health Department
107 Industrial Drive
Louisburg, NC 27549
Phone:

For Office Use Only

*CDP File Number 442864 - 1
County ID Number:
Evaluated For: NEW

PERMIT VALID UNTIL: 12/20/2029

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

Applicant: Angelo DeLuke
Address: 213 Plott Hound Ln
City: Wake Forest
State/Zip: NC 27587
Phone #:

Property Owner: J & G Estates LLC
Address: 3 Weeping Beach Way
City: Durham
State/Zip: NC. 27713
Phone #:

Property Location & Site Information

Address: 25 Serenity Woods Trail
Franklinton, NC 27525
Subdivision: The Manors at Harvest View
Block/Phase: NEW
Lot: 23
Road #: 25 Serenity Woods Trail
Structure: SINGLE FAMILY
of Bedrooms: 3
of People: 3
*Water Supply: N/A

System Specifications

Initial System

Usable Soil Depth: 36
Design Flow: 480
Soil Application Rate: 0.3000
Minimum Trench Depth: Inches
Maximum Trench Depth: 24 Inches
*System Classification/Description:
TYPE II A. CONV SYSTEM (SINGLE-FAMILY OR 480 GPD OR LESS)
*Proposed System:
25% REDUCTION
Septic Tank: 1000 Gallons
Pump Required ☐ Yes ☐ No ☒ May Be Required
Pump Tank: 1000 Gallons

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

Repair System

Usable Soil Depth: 36
Soil Application Rate: 0.300
Minimum Trench Depth: Inches
Maximum Trench Depth: 24 Inches
*System Classification/Description:
TYPE II A. CONV SYSTEM (SINGLE-FAMILY OR 480 GPD OR LESS)
*Proposed System: 25% REDUCTION
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

Lot had high grass and contour up and down. No house box out so had to rely on sketch. This system may need a pump.



Construction Authorization

Franklin County Health Department
107 Industrial Drive
Louisburg, NC 27549
Phone: _____

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*CDP File Number: 442864 - 1
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☐ Open Pump System Sheet

Applicant: Angelo DeLuxe
Address: 213 Plott Hound Ln
City: Wake Forest
State/Zip: NC 27587
Phone #: _____

Property Owner: J & G Estates LLC
Address: 3 Weeping Beach Way
City: Durham
State/Zip: NC, 27713
Phone #: _____

Property Location & Site Information

Address/Road #: 25 Serenity Woods Trail Subdivision: The Manors at Phase: NEW Lot: 23
Franklinton, NC 27525 **Directions:** Harvest View
Structure: SINGLE FAMILY 25 Serenity Woods Trail
of Bedrooms: 3
of People: 3
*Water Supply: _____

System Specifications

Usuable Soil Depth: 36 Minimum Trench Depth: _____ Inches
Design Flow: 480 Maximum Trench Depth: 24 Inches
Soil Application Rate: 0.3000 Minimum Soil Cover: _____ Inches
*System Classification/Description: TYPE II A. CONV SYSTEM (SINGLE-FAMILY OR 480 GPD OR LESS) Maximum Soil Cover: _____ Inches
*Proposed System: 25% REDUCTION *Distribution Type: PUMP TO GRAVITY
Nitrification Field: _____ Sq. ft. Septic Tank: 1,000 Gallons
No. Drain Lines: 4 Pump Required: ☐ Yes ☐ No ☒ May Be Required
Total Trench Length: 300 ft. ☐ Inches O.C. Pump Tank: 1,000 Gallons
Trench Spacing: _____ - 9 ☒ Feet O.C. Grease Trap: _____ Gallons
Trench Width: _____ - 3 ☐ Inches Septic Tank Installer ☐ I ☐ II ☐ III ☐ IV
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:

Lot had high grass and contour up and down. No house box out so had to rely on sketch. This system may need a pump. IF THIS IS/BECOMES A PUMP SYSTEM AND THE TOTAL LINES EXCEED 4, THEN A PRESSURE MANIFOLD IS REQUIRED. PLEASE NOTIFY EHS SO THAT THE PERMIT CAN BE CHANGED TO CALL FOR A PRESSURE MANIFOLD RATHER THAN A DBOX.

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: Jones, Lori Date of Issue: 12/20/2024

☒ Hand Drawing ☐ Import Drawing

Site Plan/Drawing attached.

Total Time : (HH:MM) _____

File# 442864

PIN#

Lot 23Harvest View

Property Address:

25 Serenity WoodsApplicant Or Owner Name: Angelo DeLuxeEnvironmental Health Septic/Well Permit Diagram

Building permits cannot be issued nor should construction begin without Construction Authorization issuance.

☒ Septic Improvement Permit ☒ Septic Construction Authorization (CA) ☐ CA Reissue** ☐ As Built
☒ Well Construction Authorization ☐ Additional Diagram/Specifications AttachedDiagram Date**: 12-20-2024 EHS: [Signature]****Any previously dated CA diagram is revoked and/or invalid. Confirm this is the valid diagram for the site before beginning any construction.**Installation inspections may be scheduled the day before or the day of installation by 9am. Contact the Environmental Health office at 919 496-8100. A revisit fee may apply if installation is not ready for inspection at the time requested.SEPTIC OPERATIONS PERMITS will be issued after installation is approved, all permit conditions are met, and any outstanding fees are paid. WELL CERTIFICATE OF COMPLETION will be issued after well head approval, all permit conditions are met, and any outstanding fees are paid.Septic Tank 1000 ^{maybe} Pump Tank 1000 Drain field 3' x 200' Type System Accepted Max trench depth 24"

Septic Contractor _____ Septic/Pump tank dates _____ PUMP FEE PAID _____

Well Contractor _____ Well Head Date: _____ PUMP FINAL: _____ N/A (CIRCLE)

Bedrooms: 3If Repair: naAcreage: 1.104Parcel ID: 050849***Drawing not to scale (if large acreage, may be portion)**

(If not as built, indicate changes on front or back of sheet.)

- High Grass during Soil Eval
- NO House Box

