



OPERATION PERMIT

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

For Office Use Only

*CDP File Number 390015 - 1
County ID Number: _____
Evaluated For: NEW

Property Owner: ASHTON RALEIGH RESIDENTIAL

Owner Address: 900 RIDGEFIELD DR ST 335

City: RALEIGH

State/Zip: NC/ 27609

Phone #: _____

Address: 230 SCOTLAND DR
YOUNGSVILLE, NC 27596

Road #: _____

Township: _____

Subdivision: _____

Phase : NEW Lot: _____

Structure: SINGLE FAMILY

of Bedrooms: 4

of People: 5

Water Supply: NEW WELL

Saprolite System?: ☐ Yes ☒ No

Pump Required?: ☐ Yes ☒ No

Design Flow: 480

System Classification/Description: TYPE II A. CONV SYSTEM
(SINGLE-FAMILY OR 480 GPD OR LESS)

Installer: C and M Util

Specific System CHAMBER

Installed:

STB: 11

PT: _____

Comments: _____

Certification #: _____

Septic Tank Date: 03/02/2023

Pump Tank Date: _____

This system has been installed in compliance with applicable NC General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.

PERMIT CONDITIONS:

I. Performance: System shall perform in accordance with Rule .1961.

II. Monitoring: As required by Rule .1961.

III. Maintenance: Ground absorption sewage treatment and disposal systems shall be checked, and the contents of the septic tank removed, periodically from all compartments, to ensure proper operation of the system. The contents shall be pumped whenever the solids level is found to be more than 1/3 of the liquid depth in any compartment.

Other: _____

Subsurface Operator Required: ☐ Yes ☒ No

If yes, see attached sheet for additional operation conditions, maintenance and reporting.

Operation: _____

Other: _____

Authorized State Agent: Jones, Lori

Date of Issue: 05/18/2023

Owner/Applicant: _____

2-23-2023
appt

Lot 10



File # 390015 Parcel ID: 048671
PIN# _____

Property Address: 230 Scotland Dr. Ings

Applicant or Owner Name: Ashton Raleigh
Resid.

Environmental 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 Attached

Diagram Date**: 2-23-2023 EHS: Lori Jones

**Any previously dated CA diagram is revoked and/or invalid. Confirm this is the valid diagram for the site before beginning any construction.

Installation/grouting inspections may be scheduled the day before, or, the day of installation until 9am by contacting 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 Pump Tank na Drainfield 3'x400' Gravity → Dbox Type System Accepted Max Trench Depth 18"
Septic Contractor _____ Septic/Pump tank dates 3-2-2023 Pump fee? NO YES pd
Well Contractor _____ Well Grout date: _____

Bedrooms: 4 PPS 1020 / STB 11
*Drawing submitted by Soil Scientist

Please install septic system + well (added to design) in accordance with attached design sheet(s) submitted by CCSC. Respect all setbacks.

> Enclosures / Attachments

✓
Filter
Dbox ✓

Rained last night.
SC soil - no
ram on trenches,
Final inspect
5-18-23