

Wash Refire 573-8356

**Franklin County Health Department
Division of Environmental Health
107 Industrial Drive-Suite C
Louisburg, North Carolina 27549**

PAGE 1 OF 2

Phone: 919-496-8100

SEPTIC PERMIT

Fax: 919-496-8136

Permit Number: 3825 Type: I PIN : 1833-64-5031 Date: 8/1/2007

Applicant: BLANDO CUSTOM HOMES INC Owner:
35 WOODCROFT DR
YOUNGSVILLE, NC 27596 LOUISBURG, NC 27549

Telephone: (919) 556-1427 Telephone:

Subdivision: WOODCROFT ESTATES Lot Number: 228 Size: 1.039

20

Physical Address/ Location /Directions TORRANCE WAY

Description: LifeTime 5 Year ☒

TYPE FACIL BES # EMPLOY _____ # BEDRMS 3 GPD 360 LTAR 1.3

TYPE WAT Public TYPE SYS C TYPE REP PhC BSMT N/A BST FX No

SIZE TANK 1000 SIZE CHB _____ SIZE NITR 3'X400' MTD 24"

COMMENTS Maintain all setbacks. Install drain lines on contour.

Septic Contractors are responsible for notifying the health department for final inspections, between 8:00-9:00 AM on the day of completion, Monday - Friday. Any request for final inspections received afterwards will be scheduled the same day, if possible, or the next workday. Have permit number and owner/applicant's name ready when making the call.

Actions of representatives of state or local agencies engaged in the evaluation and determination of measures required to effect the compliance with the provisions of this permit shall in no way be taken as a guarantee that wastewater disposal systems permitted and approved will function in a satisfactory manner for any given period of time, or that such employees assume any liability for damages, consequential or direct which are caused, or may be caused, by a malfunction of this wastewater treatment and disposal system.

Proper precautions must be taken to assure the proper functioning of the system after it has been covered. Do not run any heavy equipment over the system, as soft earth will allow damage to the tank and lines. Pipe all roof drains away from the septic system site to prevent flooding of the lines from surface water. Terrace the ground to prevent excessive drainage from higher areas adjacent to the system. Do not construct driveways over any part of the septic system unless proper provisions were made when the septic system was constructed. Only grass, not trees or shrubbery, should be cultivated over the lines. All plumbing fixtures should be carefully inspected periodically and any problems repaired immediately. All septic tanks should be pumped off by a permitted pump operator on a regular schedule, not to exceed every five years.

The improvement permit and construction authorization is a site approval, for the future installation of a wastewater treatment and disposal system. Changes in ownership of the site do not affect the validity of this permit. However, any alteration of the site or soil conditions, changes in the location of the proposed facility, changes to the wastewater flow and/or characteristics, or submittal of false information with the application or misrepresentation of the property lines may subject this permit to suspension or revocation.

**FOR THIS TO BE A VALID CONSTRUCTION AUTHORIZATION, A LAYOUT SHEET MUST BE
ATTACHED**

IMPROVEMENT PERMIT DATE 8-8-07 EHS

CONSTRUCTION AUTHORIZATION DATE 8-8-07 EHS

[Signature]
[Signature]

Franklin County Health Department

Name: BLANDO CUSTOM

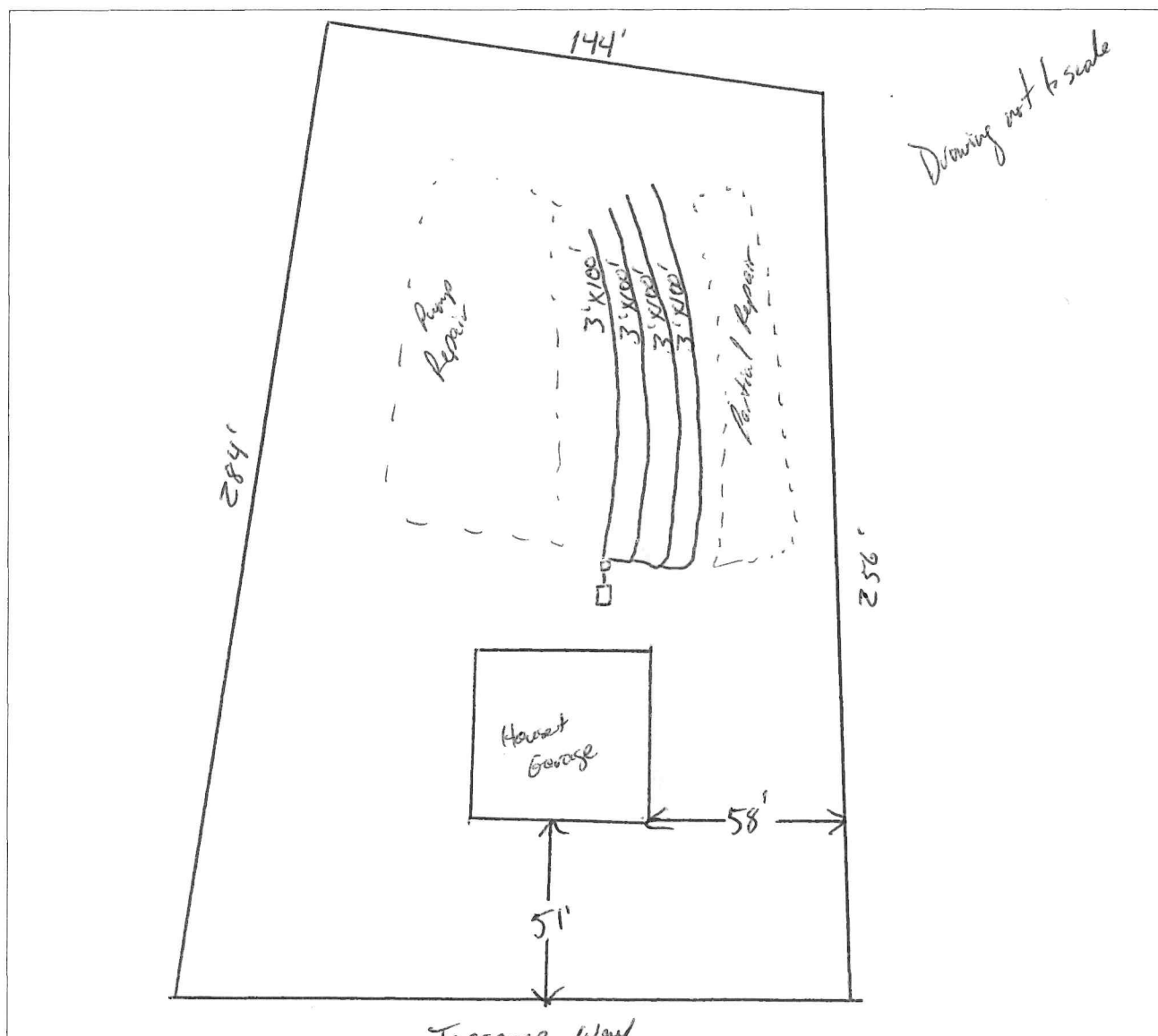
Permit Number

3825

CONTRACTOR M. Ke Brown TANK MANU M7151 000 MANU DATE 9/8/10WELL INSTALLED YES ☐ NO ☐ SYSTEM CODE 794

SEPTIC SYSTEM LAYOUT

(SKETCH SYSTEM LAYOUT HERE)



SEPTIC SYSTEM AS-BUILT

(IF DIFFERENT FROM INITIAL LAYOUT)

ON REVERSE

OPERATIONS PERMIT

DATE

12/3/10

EHS

COUNTY OF FRANKLIN

ENVIRONMENT HEALTH APPLICATION (496-8100)

Permit #: 21830

Permit Type: SEPTIC PERMIT

Date Issued: 07/30/2007

Project Address: TORRANCE WAY,

Location: TORRANCE WAY

Size #: 1.039

Subdivision: WOODCROFT ESTATES

Lot #: 228

Applicant: BLANDO CUSTOM HOMES, INC
35 WOODCROFT DR
YOUNGSVILLE NC 27596

Phone: 919-556-1427

Owner Name:

Phone:

Owners Address:

Tax record: 39764

Pin #: 1833-64-5031

Parcel #: BO5C00 228

Zoned: R-40

Setbacks Front: 50

Rear: 50

Side: 20

Proposed Use: SFD

of bedrooms: 3

of people: 3

Township: YOUNGSVILLE Public Water/Sewer: COUNTY

ST Road #:

Desc:

Fees Due: \$275.00

Date Paid: 07/30/2007

* Please complete all sections below*

☐ Yes ☒ No Does this site contain any previously identified jurisdictional wetlands?
☐ Yes ☒ No Is any wastewater, other than domestic, going to be generated?
☐ Yes ☒ No Is the site subject to approval by any other public agency?

*If the answer to any of the above is "yes", applicant must submit supporting documentation.

Please indicate desired system type(s). Systems can be ranked in order of preference.

☒ Conventional ☐ Accepted ☐ Modified Conventional ☐ Alternative
☐ Other ☐ No Preference

Call Environmental Health (919.496.8100) between 8:00 - 9:00 am Monday - Friday in order to schedule an appointment with an environmental health specialist for your lot evaluation. This application for an improvement permit/construction authorization and well permit does not constitute approval for zoning, septic or building permits. It will be necessary to meet all guidelines for zoning, septic and building permits prior to construction. The permit is valid for either 60 months or without expiration, depending upon documentation submitted. (complete site plan=60 months---complete surveyed plat=without expiration.)

I hereby certify that I am the owner, or authorized by the owner to act as his/her legal representation. Furthermore, as legal representative (if applicable) I have advised the owner of my intention to apply for this wastewater treatment and disposal system and drinking water and well system permit.

I also certify that all of 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. If information in this application for these improvements is falsified, changed or site is altered, then improvement permits and authorization to construct these improvements shall become invalid. Authorized county representatives are granted right of entry to make these evaluations or inspections, and to release information upon public request.

X *[Signature]*

07/30/2007

Print & Signature of Owner or Owner's Legal Representative

Franklin County DRC Application

RESIDENTIAL



Zoning Permit #: 12864

ADDRESS: **TORRANCE WAY**

PARCEL NO.: **1833-64-5031**

ZONING: **R-40**

SUBDIVISION: **WOODCROFT**

LOT: **228**

ISSUED TO: **BLANDO CUSTOM HOMES**

35 WOODCROFT DRIVE

YOUNGSVILLE NC 27596

PHONE NUMBER: **919 427-3863**

SETBACK: FRONT: **50** RIGHT: **20** LEFT: **20** REAR: **50**

COUNTY WATER: **YES** FLOODPLAIN: **N/A** MISC FEE: **UCF**

PERMIT TYPE: **ZONING PERMIT**

TYPE OF CONSTRUCTION: **SFD**

PERMIT DATE: **07/30/2007**

WATERSHED **IV**

TOWNSHIP **YNGS**

EXPIRE DATE: **/ /**

collect zoning

It is hereby certified that the above use as shown on the plats and plans submitted with this application conforms with all applicable provisions of the Franklin County Zoning Ordinance. The issuance of this application does not allow the violation of Franklin County Zoning Ordinance or other governing regulations. The applicant is responsible for obtaining a building permit (if required) prior to commencing work on the proposed improvement. A final zoning inspection must be scheduled by the applicant.

NOTES:

I hereby certify that all information I have provided to the Planning Department is true and accurate.

APPLICANTS SIGNATURE:

UTILITY COMPANY: PROGRESS ENERGY WAKE ELECTRIC OTHER

NUMBER OF STORIES: 1 _____ 1 1/2 _____ 2 _____ 2 1/2 _____

SQUARE FOOTAGE: HEATED _____ UNHEATED _____ TOTAL _____

BASEMENT: YES _____ NO _____

FIREPLACE: NO _____ MASONRY _____ MANUFACTURED _____

PLAN SETS: MODULAR _____ STICKBUILT _____

NAME OF:

ELECTRICIAN: _____ MECHANICAL: _____

PLUMBING: _____

COST OF CONSTRUCTION: _____

NO MORE THAN 2 STRUCTURAL DEVIATIONS OR PLANS MUST BE REDRAWN

DEPARTMENTAL USE ONLY

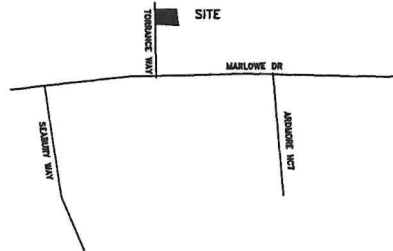
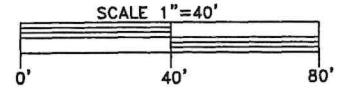
	INITIALS (IN)	DATE	INITIALS (OUT)	DATE
ZONING	<u>Dpw</u>	<u>7-30-07</u>	_____	_____
INITIAL PERMITTING	_____	_____	_____	_____
ADDRESSING	_____	_____	_____	_____
PLAN REVIEW	_____	_____	_____	_____
FIRE REVIEW	_____	_____	_____	_____
SEPTIC/SEWER	_____	_____	_____	_____
FINAL PERMITTING	_____	_____	_____	_____

Book of maps 2007 Vol. ____ Page 70 Book ____ Page ____ County FRANKLIN

Block ____ Lot 228 Subdivision WOODCROFT ESTATES

EIP=Existing Iron Pipe NIP=New Iron Pipe

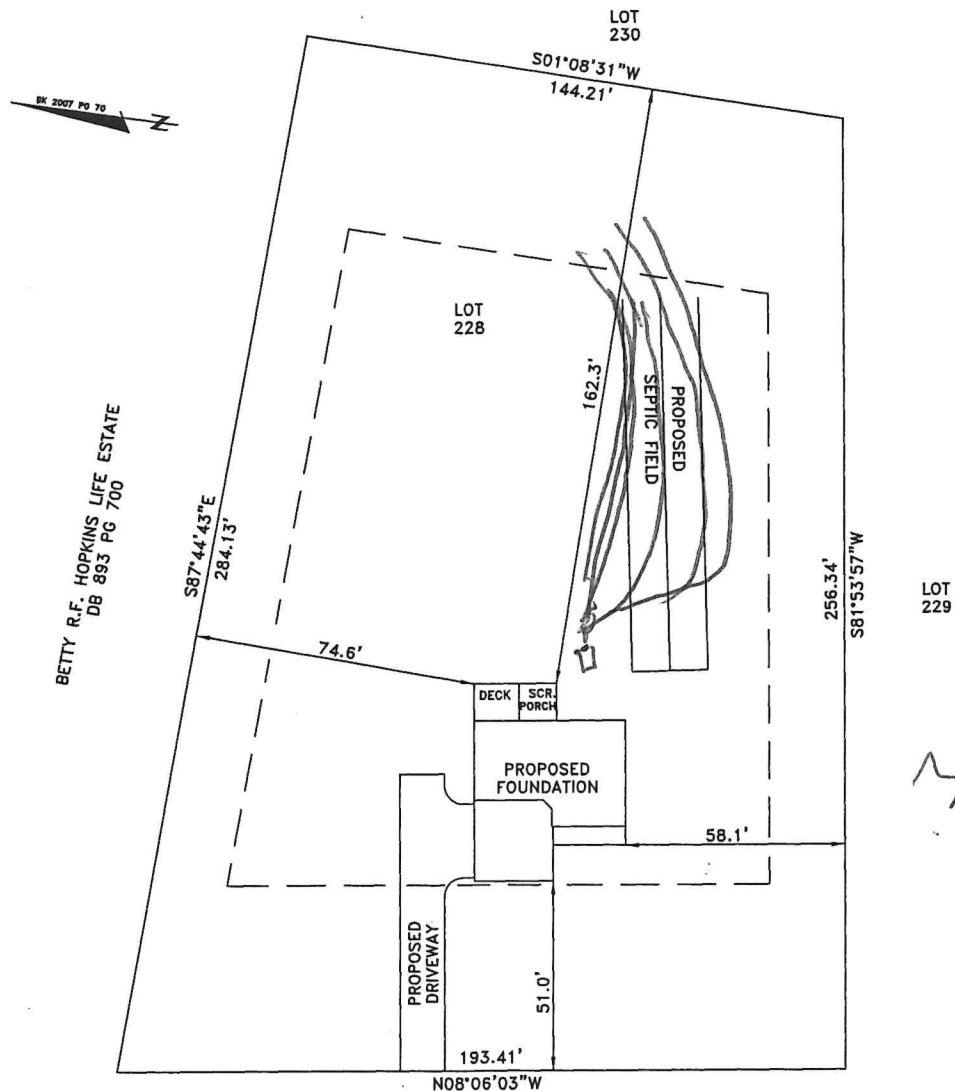
PROPERTY IS NOT IN A DESIGNATED FLOOD AREA



VICINITY MAP NOT TO SCALE

I, Jackie Ray Thomason, PLS, certify
That the survey is of an existing parcel or parcels of land;
and that this plat was drawn under my supervision from an actual
survey made under my supervision deed description recorded in
Book ____ Page ____; that the boundaries not surveyed are
clearly indicated as drawn from information found in
Book ____ Page ____; that the ratio of precision as calculated
is 1: ____; Witness my original signature, registration
number and seal this ____ day of ____, A.D., 20__.

Jackie Ray Thomason, PLS, L-3076



3
28' 11" 28' 11" 28' 11"

TORRANCE WAY
(50' PUBLIC R/W)

MAP NOT FOR RECORDATION, SALES OR CONVEYANCES

Drawn By JRT Surveyed By ____ Date 07-24-07 Dwg.# JB1110

PROPERTY OF:
BLANDO CUSTOM HOMES

JACK R. THOMASON, PLS
4969 US HWY 401 SOUTH
YOUNGSVILLE, NC 27596
PHONE: 919-556-3307