GRANVILLE-VANCE HEALTH DEPARTMENT—Sewage Disposal Record

1656 Owner or Contractor Pearlie E. Parrish Date Feb 1, 90 S.R. No. 1622

Location/Address Route # 1 Franklinton N.C.

Subdivision/Mobile Home Park Name Sandy Creek Lot Size 3.30 acre

Lot No. 32

New System ✓ Repair _____

House ✓ Mobile Home _____ Business _____

No. Bedrooms 3 No. People 1 No. Toilets 2

Water Supply: Private ✓ Approved _____

Semi-Public _____ Unapproved _____

Public _____ None _____

Nitrification System:

Tank Size 900 gal.

Distribution Box yes No. Lines 3

Nitrification Field 320 - 960 Sq. Ft.

Lines:	1	2	3	4	5	6
Width	36"	36"	36"			
Length	120	160	40			
Grade	2"	3"	0"			
Stone Depth	12"	12"	12"			

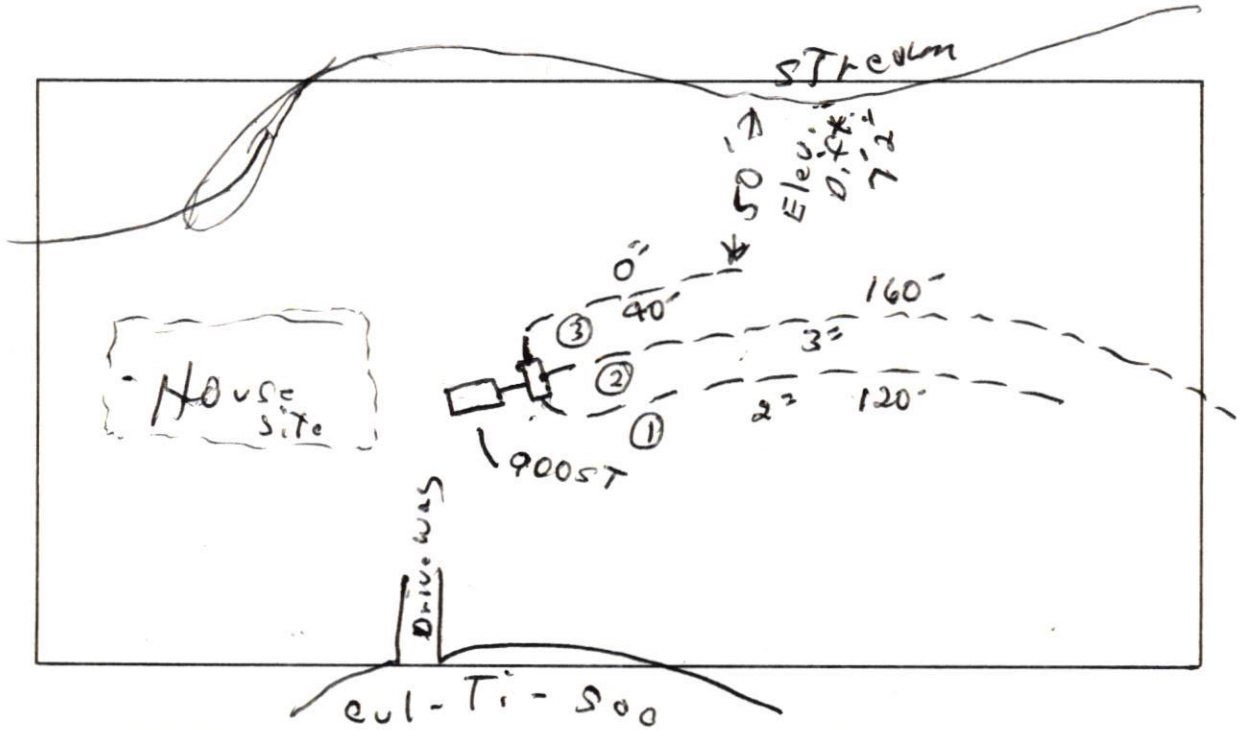
Layout to be followed by installer:

Improvements Permit By Bobby E. Greene Installer Robert Blackley

Certificate of Completion By Bobby E. Greene Date of Inspection April 16, 1990

* Construction must comply with all other applicable state and local regulations, but the permit is not a guarantee that the system will not malfunction and the Granville-Vance Health District will not be held responsible for a malfunctioning system.

NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.



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Granville - Vance District Health Department

Environmental Health

Well Construction Permit

Owner/Applicant: Kevin Bockelman Date: 9-11-12

Address or Location of Property: Connedy Mill Rd → Sandy Creek Dr. → go to end and house is in center of cul-de-sac

Subdivision & Lot #: Sandy Creek lot # 32 Septic Permit #: 1656

Zoning Permit #: - 0 - Environmental Health Specialist: Casey Champion

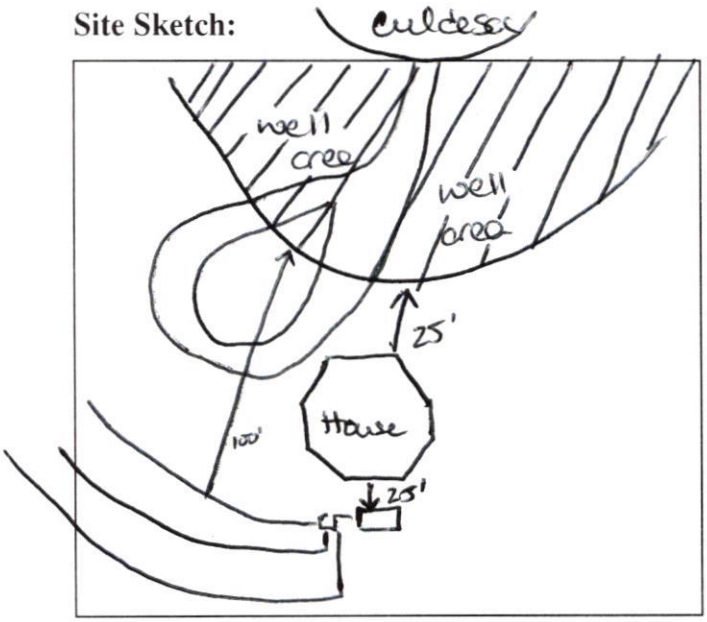
This well permit is to locate and site the area that a private groundwater well may be established on the property listed above by the Environmental Health Specialists of Granville County. If one does not locate the well in the approved area and complete the well as specified by the 15A NCAC .02C rules, 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 septic tank and drain field, including repair area – 100 ft

Setback from structural foundations – 25 ft Setback from ponds, lakes or other bodies of water – 50 ft

Site Sketch:



Conditions: _____

Authorized Agent: Casey Champion REHS

Date: 9-11-12

 # 1 Well Grout: (Circle or write in)

Witnessed: Yes or No EHS Agent: _____

Date: _____ Annular Space Open: Yes or No

Over reamed: Yes or No Depth Grouted: _____

Method: _____ Pump _____ Poured _____ Pressure

Well Log received: Yes or No (EHS to Attach to Permit)

Driller Name: _____ Cert. # _____

Depth: _____ Casing Depth: _____ GPM: _____

As Built Drawing:

 # 2 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: _____

 # 3 Well Completion Permit: _____ **EHS**

Date Completed: _____

 # 4 Water Samples Taken: Date: _____

EHS: _____ **Results:** _____

Retest: _____ **Results:** _____