

Granville - Vance District Health Department
Environmental Health

Pin 098000016634

Permit Number 7864

☒ Improvement Permit

☒ Construction Authorization

Final Sketch

Phillip + Rhonda Turner
Applicants Name

Subdivision - Section - Lot

Physical Address: 4050 Culbreth Rd

John Byrd
System Installer

5-13-14

Date

System design and details as installed.

Septic Tank Information:

Date: 10-22-13

Manufacture: PT5-1000

ID #: SB-142

Pump Tank Information:

Date: /

Manufacturer: /

ID #: /

Distribution Box ☒

Pressure Manifold /

Serial Distribution /

Pump Info: /

Type of Facility: Residence

Number of Bedrooms: 3

Well Drilled at time of inspection Y or N

Type of System: ☒ Gravity / Pump / Gravel ☒ Polystyrene / Chamber / Other: /

Well Info: Date drilled: 4-3-13

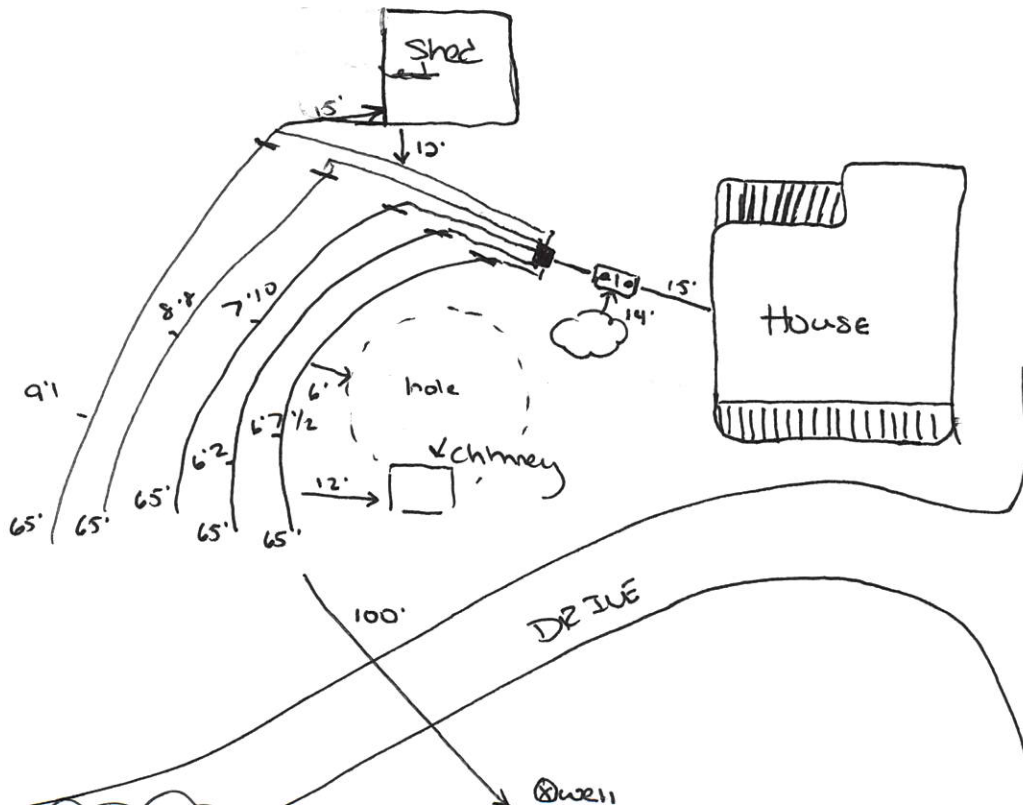
Driller Name: Barnette

Depth: 370 GPM: 10 Casing: 80

Pump Depth 375

Pump HP: 1

Installer Name: Barnette



John Byrd
Authorized Signature

5-13-14
Date

Granville - Vance District Health Department

Environmental Health

Well Construction Permit

00972

Owner/Applicant: Phillip or Rhonda Turner
Address or Location of Property: 4050 Culbreth Rd

Date: ~~1-9-13~~ 1-9-13

Subdivision & Lot #: _____

Zoning Permit #: 17673

Septic Permit #: 17673 2364

Environmental Health Specialist: 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)

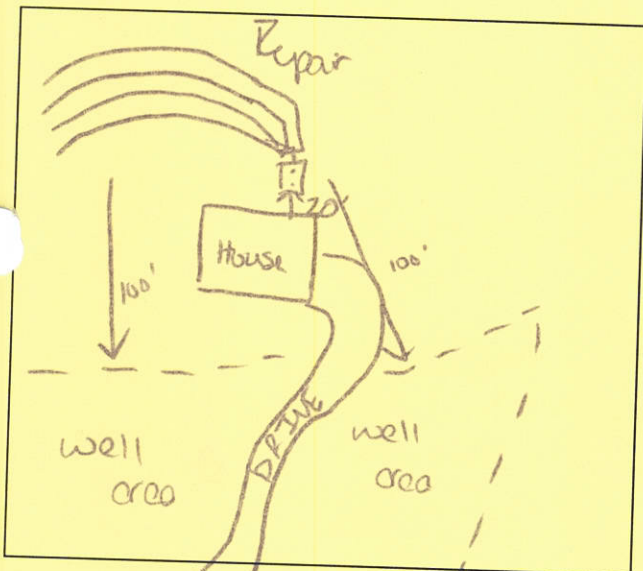
Setback from property lines – 10 ft

Setback from structural foundations – 25 ft

Setback from septic tank and drain field, including repair area – 100 ft

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

Site Sketch:



Conditions:

Authorized Agent: Carol Champion

Date: 1-9-13

1 Well Grout: (Circle or write in)

Witnessed: ☒ Yes or ☐ No EHS Agent: David Currier

Date: 4/3/13 Annular Space Open: Yes or No

Over reamed: Yes or No Depth Grouted: +20

Method: _____ Pump ☒ Poured _____ Pressure

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

Driller Name: Barnette's Cert. # _____

Depth: 520' Casing Depth: 80' GPM: 10

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:

3.75'
Barnette's

3 Well Completion Permit: Carol Champion EHS

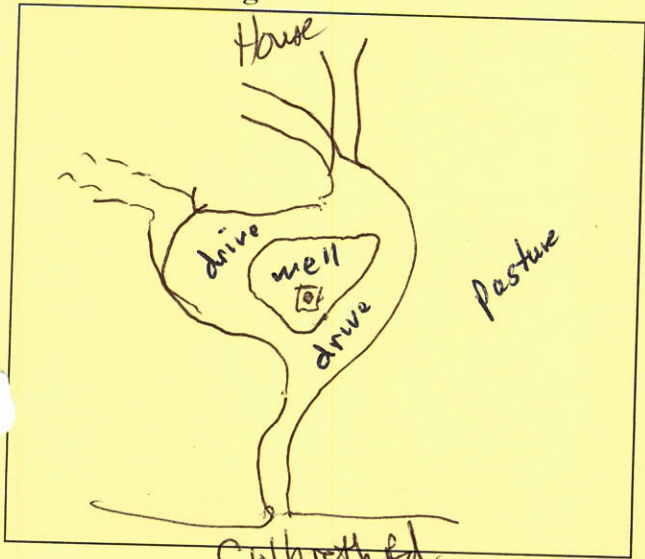
Date Completed: 5-19-14

4 Water Samples Taken: Date: 5-19-14

EHS: CA Results: _____

Retest: _____ Results: _____

As Built Drawing:



Culbreth Rd
→
TO Old 75

GRANVILLE-VANCE DISTRICT HEALTH DEPARTMENT IMPROVEMENT AND OPERATION PERMITS

PERMIT NUMBER **07364**

COUNTY: **Granville**

TAX NO. **093000016034**

SR. NO.

TYPE OF ESTABLISHMENTS

RESIDENCE ☒
BUSINESS ☐
OTHER ☐

NUMBER OF BEDROOMS: **3**

NUMBER OF OCCUPANTS: **max 6**

*THIS PERMIT SHALL BE ACCOMPANIED BY A LAYOUT SHOWN ON A PLAT, INCLUDING SYSTEM REQUIREMENTS.

WATER SUPPLY **Private**

WELL ☒
PUBLIC ☐

OTHER ☐

TYPE OF WASTEWATER SYSTEM

INITIAL INSTALLATION **IIA**

REPAIR **IIA**

DESIGN FLOW: **360**

LTAR: **.275**

ABSORPTION AREA: **1745 Ft²**

TRENCH WIDTH: **36"**

TRENCH DEPTH: **24" to 28"**

TRENCH SPACING: **9' on center**

TOTAL TRENCH LENGTH: **440 ft**

NUMBER OF TRENCHES: **4 or 5**

GRAVEL DEPTH: **12"**

TANK SIZE: **1000 gal**

PUMP TANK SIZE: **N/A**

DISTRIBUTION DEVICE: **Distribution Box**

*THIS IMPROVEMENT PERMIT IS SUBJECT TO REVOCATION IF THE INTENDED USES CHANGE FROM THOSE SHOWN ON THE IMPROVEMENT PERMIT. CHANGES SHALL REQUIRE HEALTH DEPARTMENT APPROVAL.

PERMIT VALID FOR: 5 YEARS
YES ☒ NO ☐

NO EXPIRATION
YES ☒ NO ☐

IMPROVEMENT PERMIT

DATE: **1-9-13**

FOR: **Phillip and Rhonda Turner**

ISSUED BY: **Cassie "Casey" Champion REHS**

CONSTRUCTION AUTHORIZATION FOR IMPROVEMENT PERMIT# **7364**

Unless otherwise indicated, the same conditions above apply regarding system type, layout, location and installation requirements.
(The wastewater system cannot be installed until authorization is signed)

Comments: **Mandatory Pre-Install Site Meeting**

DATE: **1-9-13** Environmental Health Specialist: **Cassie Champion**

Construction Authorization Addendum ☐ Yes ☒ No

OPERATION PERMIT

DATE: **5-13-14**

SYSTEM INSTALLED BY: **Jim B...**

ISSUED BY: **...**

PERFORMANCE, MONITORING, MAINTENANCE AND OPERATION
AS REQUIRED BY RULE .1961

Follow site sketch
Mandatory
Pre installation
Site visit