



Well Construction Permit

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

For Office Use Only

*CDP File Number 374617

PIN Number: _____

Tax Lot #: _____ Tax Block #: 048192

Evaluated For: SINGLE FAMILY \ WELL

Property Owner: WILLIAM & JODY BRANTLEY

Address: 5316 JADE FOREST TRL

City: RALEIGH

State/Zip: NC / 27616

Phone #: _____

Applicant: KALLIE TAYLOR

Address: 12809 UD HWY 70 BUSINESS

City: CLAYTON

State/Zip: NC / 27520

Phone #: _____

Property Location & Site Information

Address/Road #:

371 WILLIAMS WHITE RD

Subdivision: _____

Phase: _____

Lot: _____

*Proposed use of Well: SINGLE FAMILY

If Other: _____

Applicant Email: _____

Owner Email: _____

Directions: 371 WILLIAMS WHITE RD

Well Contractor Information

Drilling Contractor: _____

Driller Registration: _____

Permit Conditions

*Permit Conditions

50+' from septic

Well location, construction and protection must meet all state and local regulations and must be inspected and approved by an authorized representative of the Local Health Department. The permit may be revoked at any time for failure to comply with existing regulations. The siting of approved well construction area(s) by the Health Department is to provide protection from the known possible sources of contamination. The approved well area(s) may not be changed without permission from an authorized representative of the Local Health Department. Issuance of this well permit does not guarantee water quality or adequate water production from the well once it is installed or repaired.

*Issued By: Bendel, Joel

Authorized State Agent: _____

Owner/Applicant: _____

*Date of Issue: 06/03/2022

☒ Hand Drawing

☐ Import Drawing

****Site Plan/Drawing attached.****



File # 3746/7 PIN# _____
Property Address: 371 Williams White Rd
Applicant or Owner Name: Kallie Taylor

Environmental Health Septic/Well Permit Diagram

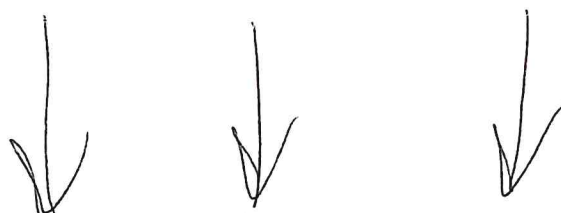
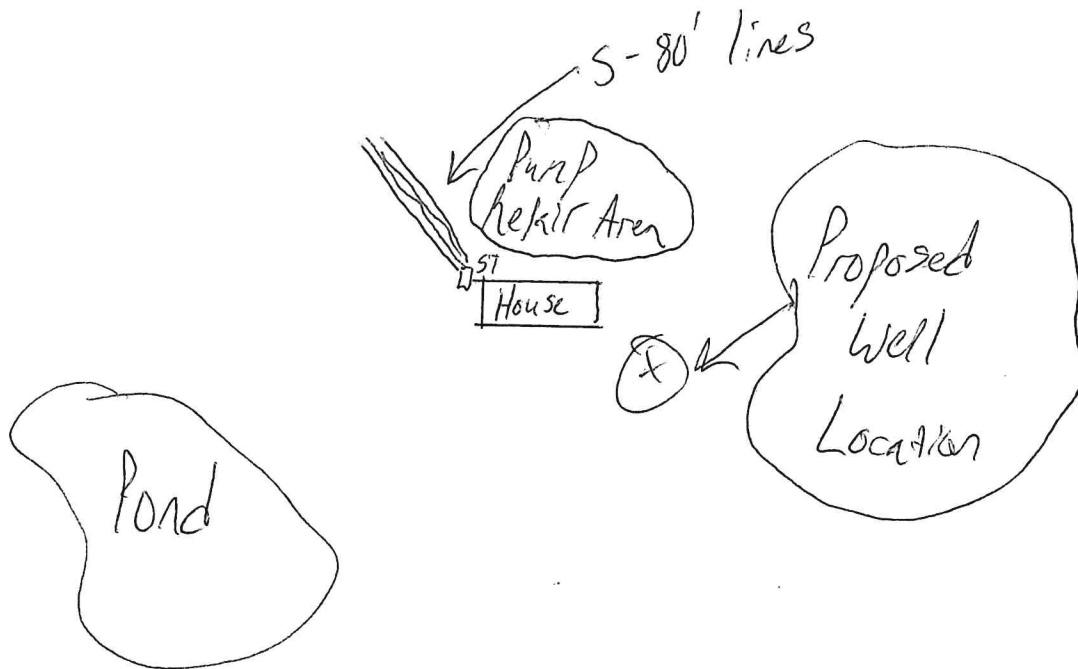
Building permits cannot be issued nor should construction begin without Construction Authorization issuance.
☒ Septic Improvement Permit ☒ Septic Construction Authorization (CA) ☐ CA Reissue** ☐ As Built
☒ Well Construction Authorization ☐ Additional Diagram/Specifications Attached

Diagram Date**: 5-25-22 EHS: Joel Berndel

**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 permits 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 N/A Drainfield 3'x400' Type System Acc Max Trench Depth 24"
Septic Contractor _____ Septic/Pump tank dates _____ Pump fee? ☒ YES ☐ NO pd _____
Well Contractor _____ Well Grout date: _____



Williams White Rd.