

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

PAGE 1 OF 2

Phone: 919-496-8100

Fax: 919-496-8136

Permit Number: 449 Type: I PIN: 1779-79-6116 Date: 4/29/04

Applicant: MACK BUILDERS
20 DANA CIRCLE
YOUNGSVILLE, NC 27596

Owner: DENMARK CONSTRUCTION INC
416 US HWY 1 SUTIE B
YOUNGSVILLE, NC 27596

Telephone: (919) 669-7820

Telephone:

Subdivision: BARHAM PLACE

Lot Number: 69

Size: 1.320

Physical Address/ Location /Directions BARHAM HOLLOW DR

Description: LifeTime _____ 5 Year ☒

TYPE FACIL Residence # EMPLOY _____ # BEDRMS 4 GPD 480 LTAR 0.35
TYPE WAT Private TYPE SYS Innov TYPE REP Innov BSMT N/A BST FX N/A
SIZE TANK 1000 SIZE CHB _____ SIZE NITR 34360 MTD 36"

COMMENTS * Install Innov. System along Contour
* IN DRY Conditions
* Do Not PARK or Drive over system!

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 5/3/04 EHS

CONSTRUCTION AUTHORIZATION

DATE 5/3/04 EHS

Andy Smith, RS
Andy Smith, RS

FRANKLIN COUNTY SOIL/SITE EVALUATION SHEET

APPLICANT Mack Builders
 WATER SUPPLY PRIVATE
 LOCATION/DIRECTIONS Barham place lot 69

PROPERTY ID
 DATE 5/3/04

FACTORS

PROFILES

		1	2	3	4	5	6
LANDSCAPE POSITION	1940	S	S				
SLOPE (%)	1940	2-6	2-6				
HORIZON I DEPTH	1943	0-8	0-8				
TEXTURE	1941(a) (1)	SL	SL				
CONSISTENCE	1941	FR	FR				
STRUCTURE	1941(a)(2)	GR	GR				
CLAY MINEROLOGY	1941(a)(3)	NEAR	NEAR				
HORIZON II DEPTH	1943	8-30	8-30				
TEXTURE	1941(a) (1)	CL	CL				
CONSISTENCE	1941	Fi	Fi				
STRUCTURE	1941(a)(2)	SBL	SBL				
CLAY MINEROLOGY	1941(a)(3)	SEAP	SEAP				
HORIZON III DEPTH	1943	30-48	30-48				
TEXTURE	1941(a) (1)	SCL	SCL				
CONSISTENCE	1941	FR	FR				
STRUCTURE	1941(a)(2)	SBL	SBL				
CLAY MINEROLOGY	1941(a)(3)	SEAP	SEAP				
HORIZON IV DEPTH	1943						
TEXTURE	1941(a) (1)						
CONSISTENCE	1941						
STRUCTURE	1941(a)(2)						
CLAY MINEROLOGY	1941(a)(3)						
SOIL WETNESS	1941	748 ⁰	748 ⁴				
RESTRICTIVE HORIZON	1944	748 ⁰	748 ⁰				
SAPROLITE	1943/1956	748 ⁰	748 ⁴				
CLASSIFICATION	1948	P5	P5				
LTAR (gpd/ft2)	1955	0.35	0.35				
OTHER FACTORS (1946)							
				SITE LTAR (gpd/ft2)	0.35		
AVAILABLE SPACE (1945)		~~PS~~ PS		SYSTEM TYPE	Zonov.		
CLASSIFICATION (1948)		PS					
EVALUATED BY:		ANDY S.		OTHERS PRESENT			

ENVIRONMENT HEALTH APPLICATION (496-8100)

Permit #: **11802**Permit Type: **SEPTIC PERMIT**Date Issued: **04/28/2004**Project Address: **BARHAM HOLLOW DRIVE,**Location: **BARHAM HOLLOW DRIVE**Size #: **1.320**Subdivision: **BARHAM PLACE**Lot #: **69**Applicant: **MACK BUILDERS
20 DANA CIRCLE
YOUNGSVILLE, NC 27596**Phone: **919-669-7820**Owner: **DEN MARK CONSTRUCTION INC
P O BOX 610
YOUNGSVILLE, NC 27596**

Phone:

Tax record: **35273**Pin #: **1779-79-6116**Parcel #: **E09A00 069**Zoned: **R 40**Setbacks Front: **50**Rear: **50**Side: **20**Proposed Use: **SFD**# of bedrooms: **4**# of people: **4**Township: **HARRIS**Public Water/Sewer: **PRIVATE**

ST Road #:

Desc:

Fees Due: **\$225.00**Date Paid: **04/28/2004***** 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 ☐ Alternative ☐ Innovative ☐ Modified Conventional
☐ 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 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.

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 application for improvement permit is falsified, changed or site is altered, then improvement permit and authorization to construct shall become invalid. Authorized county representatives are granted right of entry to make evaluations or inspections, and to release information upon public request.

Signature of Owner or Owner's Legal Representative

Date

Franklin County DRC Application

RESIDENTIAL

Zoning Permit #: 7728



ADDRESS: **BARHAM HOLLOW DRIVE**

PARCEL NO.: **1779-79-6116**

ZONING: **R 40**

SUBDIVISION: **BARHAM PLACE**

LOT: **69**

ISSUED TO: **MACK BUILDERS**

20 DANA CIRCLE

YOUNGSVILLE NC 27596

PHONE NUMBER: **919 669-7820**

SETBACK: FRONT: **50**

RIGHT: **20**

LEFT: **20**

REAR: **50**

COUNTY WATER: **N/A**

FLOODPLAIN: **N/A**

PERMIT TYPE: **ZONING PERMIT**

TYPE OF CONSTRUCTION: **SFD**

PERMIT DATE: **04/28/2004**

WATERSHED **II**

TOWNSHIP **HAR**

EXPIRE DATE: **/ /**

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:

Chad Kuhn

UTILITY COMPANY: **PROGRESS ENGERY**

WAKE ELECTRIC

OTHER

NUMBER OF STORIES: **1**

1 1/2

2

2 1/2

SQUARE FOOTAGE: HEATED **2994**

UNHEATED **1414**

TOTAL **4408**

BASEMENT: **N/A**

YES **X**

NO

MANUFACTURED

FIREPLACE: **N/A**

MASONARY

MANUFACTURED **X**

PLAN SETS: **MODULAR**

STICKBUILT **X**

ELECTRICIAN: **Triangle Services**

MECHANICAL: **Fagan Heating**

PLUMBING: **Dupree**

MULTI USE PLAN #

COST OF CONSTRUCTION:

NO MORE THAN 2 STRUCTURAL DEVIATIONS OR PLANS MUST BE REDRAWN

DEPARTMENTAL USE ONLY

	INITIALS (IN)	DATE	INITIALS (OUT)	DATE
ZONING	DPC	4-28-04		
INITIAL PERMITTING				
ADDRESSING				
PLAN REVIEW				
FIRE REVIEW				
SEPTIC/SEWER				
FINAL PERMITTING				

133'-8 $\frac{1}{2}$ "
BARHAM HOLLOW DRIVE

10'-1"

PROPOSED
HOUSE

(7308)

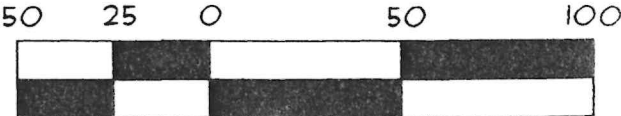
1.316 AC

428'-6"

420'-10"

83'-4 $\frac{1}{2}$ "

N



SCALE: 1"=50'

Inner
4-90's
36"

69