



IMPROVEMENT PERMIT

Davie County Health Department
 210 Hospital Street
 P.O. Box 848
 Mocksville NC 27028
 Phone: 336-753-6780 Fax: 336-753-1680

For Office Use Only

*CDP File Number 244168 - 1
 County ID Number: 5833072627
 Evaluated For: **NEW**
 Township:

PERMIT VALID UNTIL: 9/14/2022

***NOTE TO INSPECTIONS DIVISION: Building Permits cannot be issued with this Improvement Permit.**

Applicant: David Snow
 Address: 487 Kinder Rd
 City: Harmony
 State/Zip: NC 28634
 Phone #: (704) 546-7676

Property Owner: David Snow
 Address: 487 Kinder Rd
 City: Harmony
 State/Zip: NC 28634
 Phone #: (704) 546-7676

Property Location & Site Information

Address/Road #: Bonkin Lake Road
 Mocksville NC 27028
 Subdivision: _____
 Phase: _____
 Lot: _____

Directions
 Hwy 601 North to Hwy 801 on right, turn. to Bonkin Lake Rd. on Left

Structure: SINGLE FAMILY
 # of Bedrooms: 3
 # of People: 2
 *Water Supply: EXISTING WELL

System Specifications

Initial System
 *Site Classification: Provisionally Suitable

Saprolite System? Yes No

Design Flow: 3 6 0

Soil Application Rate: 0 . 1 7 5

*System Classification/Description:
 TYPE III G. OTHER NON-CONV. TRENCH SYSTEMS

*Proposed System: 25% REDUCTION

Minimum Trench Depth: 3 0 Inches
 Maximum Trench Depth: 3 0 Inches
 Septic Tank: 1 0 0 0 Gallons
 1-Piece: Yes No
 Pump Required: Yes No May Be Required
 Pump Tank: _____ Gallons
 1-Piece: Yes No

Repair System Required: Yes No No, but has Available Space

Repair System

*Site Classification: Provisionally Suitable

Soil Application Rate: 0 . 1 7 5

*System Classification/Description:
 TYPE III G. OTHER NON-CONV. TRENCH SYSTEMS

*Proposed System: 25% REDUCTION

Minimum Trench Depth: 3 0 Inches
 Maximum Trench Depth: 3 0 Inches
 Pump Required: Yes No May be Required

***Site Modifications**

Open Fill Sheet

No grading or construction activity is allowed in areas designated for system and repair without approval of Health Department.

Characters Remaining
750

***Permit Conditions**

The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements.

Characters Remaining
750

Site Plan The Improvement Permit shall be valid for 5 years from date of issue with a site plan (means a drawing not necessarily drawn to scale that shows the existing and proposed property lines with dimensions, the location of the facility and appurtenances, the site for the proposed Wastewater system, and the location of water supplies and surface waters).

Plat The Improvement Permit shall be valid without expiration with plat (means a property surveyed prepared by a registered land surveyor, drawn to a scale of one inch equals no more than 60 feet, that includes: the specific location of the proposed facility and appurtenances, the site for the proposed Wastewater system, and the location of water supplies and surface waters. Plat also means, for subdivision lots approved by the local planning authority and recorded with the county register of deeds, a copy of the recorded subdivisions plat that is accompanied by a site plan that is drawn to scale).

The Department and Local Health Department may impose conditions on the issuance and may revoke the permits for failure of the system to satisfy the conditions, the rules, or this article. This permit is subject to revocation if the site plan, plat, or intended use changes (NCGS 130A-335(f)). The person owning or controlling the system shall be responsible for assuring compliance with the laws, rules, and permit conditions regarding system location, installation, operation, maintenance, monitoring, reporting, and repair (.1938(b)).

Applicant/Legal Reps. Signature Required? Yes No

Applicant/Legal Reps. Signature: _____ Date: ____ / ____ / ____

*Issued By: 2140 - Nations, Robert Date of Issue: 09 / 14 / 2017

Authorized State Agent: _____ Valid without Expiration?
 Create CA?

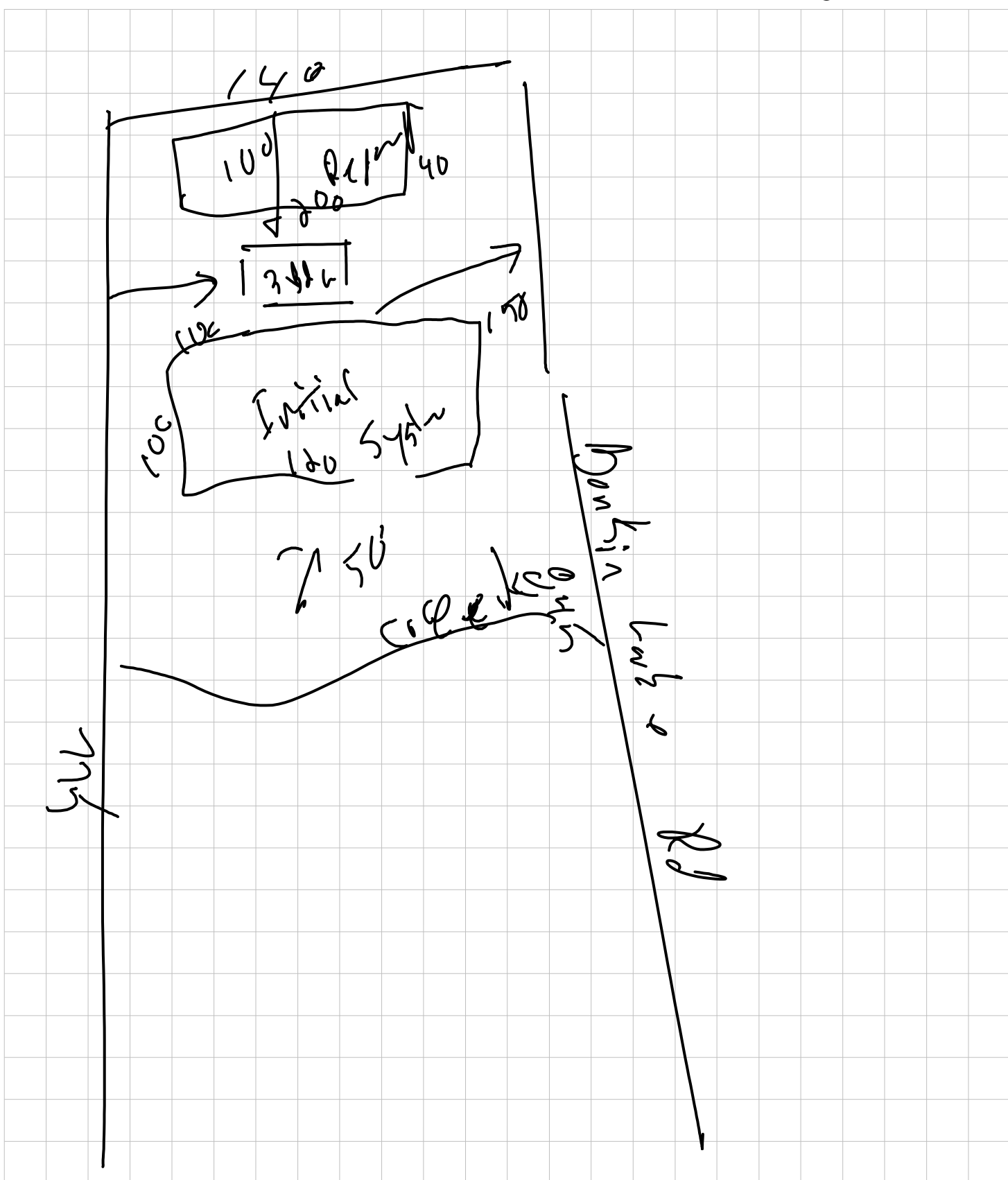
Hand Drawing Import Drawing

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



Drawing Drawing Type: Improvement Permit

Scale: _____
 Inch
 Block
 N/A = _____ ft.



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Date: 09 / 14 / 2017

Click below to import an image from an external location: Drawing Type: Improvement Permit