

PERMIT NUMBER

GRANVILLE-VANCE DISTRICT HEALTH DEPARTMENT
IMPROVEMENT AND OPERATION PERMITS

COUNTY: <i>Granville</i>	TAX NO. <i>190700926731</i>	TYPE OF ESTABLISHMENTS			*THIS PERMIT SHALL BE ACCOMPANIED BY A LAYOUT SHOWN ON A PLAT, INCLUDING SYSTEM REQUIREMENTS.
SR. NO. <i>1428</i>	RESIDENCE <input checked="" type="checkbox"/> BUSINESS <input type="checkbox"/> OTHER <input type="checkbox"/>	NUMBER OF BEDROOMS: <i>3</i>	NUMBER OF OCCUPANTS: <i>2</i>		
OWNER: <i>John + Darlene Moyer</i>	WATER SUPPLY	WELL <input checked="" type="checkbox"/> PUBLIC <input type="checkbox"/>	OTHER <input type="checkbox"/>		*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.
APPLICANT'S ADDRESS: <i>201 Virginia Lane Place Raleigh NC 27610</i>	TYPE OF WASTEWATER SYSTEM	INITIAL INSTALLATION <i>Type 10 AB</i>	REPAIR <i>Type 10 AB</i>		
PROPERTY ADDRESS/LOCATION: <i>Sam Hill Rd</i>	DESIGN FLOW:	<i>360 G.D</i>			
SUBDIVISION: <i>Maple Pond</i>	LIAR:	<i>36 F²</i>			
LOT NUMBER: <i>6</i>	ABSORPTION AREA:	<i>1200 F²</i>			
REFERENCE SKETCH (SEE PLAT FOR DETAILS)	TRENCH WIDTH:	<i>3'</i>			
	TRENCH DEPTH:	<i>18-24"</i>			
	TRENCH SPACING:	<i>9'</i>			
	TOTAL TRENCH LENGTH:	<i>400'</i>			
	NUMBER OF TRENCHES:	<i>5 or 6</i>			
	GRAVEL DEPTH:	<i>12"</i>		PERMIT VALID FOR 5 YEARS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
	TANK SIZE:	<i>1000 gal</i>			
	PUMP TANK SIZE:			NO EXPIRATION <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
	DISTRIBUTION DEVICE:	<i>D-Box</i>			

***** IMPROVEMENT PERMIT DATE: *8-29-06* *****

FOR: *John + Darlene Moyer*
ISSUED BY: *Jimmy B. Clayburn*

***** CONSTRUCTION AUTHORIZATION FOR IMPROVEMENT PERMIT# *05748* *****
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: *locate system in area shown on Plat and Flagged on lot*

Date: *8-29-06* Environmental Health Specialist: *Jimmy B. Clayburn* Construction Authorization Addendum Yes No

***** OPERATION PERMIT DATE: *****

SYSTEM INSTALLED BY: _____
ISSUED BY: _____
PERFORMANCE, MONITORING, MAINTENANCE AND OPERATION AS REQUIRED BY RULE .1961

NOTICE TO APPLICANT AND HEALTH INSPECTION DEPTS.

Any changes made to this drawing prior to the physical siting of the structure or use herein permitted without written approval from the Granville County Planning Department shall render this Zoning Permit void and subject to legal action per Section VII-2, VIII-4 of the Granville County Zoning Ordinance.

5.0 ACRES

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107.75'

330'

30'

53'

5

225.45'

919 934 8610

Scale: 1"=100'

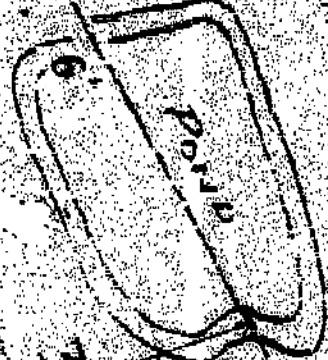
--- Drainage Swales

--- Gullies

House - Possible House site for Gravity System

1 - Soils Boundary & Symbol

Legend



SAM HALL ROAD

723'

280.00'

230'

Daniel J. Bittler