



IMPROVEMENT PERMIT

Granville County Health Dept
Environmental Health
101 Hunt Drive
Oxford, NC 27565
Phone: (252) 492-5263 Fax: (252) 492-2361

For Office Use Only

*CDP File Number 415339 - 1
County ID Number: 183400164083
Evaluated For: NEW

PERMIT VALID UNTIL: 12/19/2029

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

Applicant: Sumner Construction
Address: PO Box 1011
City: Youngsville
State/Zip: NC 27596
Phone #: home: (919) 422-5713 cell : (919) 422-5713

Property Owner: JSW Partners
Address: 1225 Red Cedar
City: Youngsville
State/Zip: NC. 27596
Phone #:

Property Location & Site Information

Address: 1225 Red Cedar Youngsville, NC 27596 Subdivision: Cedar Knolls Block/Phase: NEW Lot: 28

Directions

Road #:
Structure: SINGLE FAMILY
of Bedrooms: 4
of People:
*Water Supply: NEW WELL

System Specifications

Initial System

Usable Soil Depth:
Design Flow: 480
Soil Application Rate: 0.3000

Minimum Trench Depth: 22 Inches
Maximum Trench Depth: 24 Inches

*System Classification/Description:
TYPE III B. SYSTEM W/SINGLE EFFLUENT PUMP

Septic Tank: 1000 Gallons

Pump Required ☒ Yes ☐ No ☐ May Be Required

*Proposed System:
25% REDUCTION

Pump Tank: 1000 Gallons

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

Repair System

Usable Soil Depth:
Soil Application Rate: 0.300

Minimum Trench Depth:
Maximum Trench Depth:
Inches
Inches

*System Classification/Description:
TYPE III B. SYSTEM W/SINGLE EFFLUENT PUMP

Pump Required: ☒ Yes ☐ No ☐ May Be Required

*Proposed System: HORIZONTAL PPBPS

Pump Tank:
Gallons

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

*Site Modifications

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.

*Permit Conditions

Initial/Repair lines laid out in field by REHS. Drain lines/Manifold min. 10' off property lines. Min. 50' off wells.

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 location, installing, operation, maintenance, monitoring, reporting, and repair (per rule .0301(fa)).

Authorized State Agent:

Bullock, Will



Date of Issue:

12/19/2024

Total Time: (HH:MM)



Hand Drawing



Import Drawing

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

____ : ____

Construction Authorization

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☐ Open Pump System Sheet

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Property Owner: JSW Partners
Address: 1225 Red Cedar
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Phone #:

Property Location & Site Information

Address/Road #: 1225 Red Cedar Youngsville, NC 27596 Subdivision: Cedar Knolls Phase: NEW Lot: 28

Directions:

Structure: SINGLE FAMILY
of Bedrooms: 4
of People:
*Water Supply: NEW WELL

System Specifications

Usuable Soil Depth: Minimum Trench Depth: 22 Inches
Design Flow: 480 Maximum Trench Depth: 24 Inches
Soil Application Rate: 0.3000

*System Classification/Description: Minimum Soil Cover: Inches
TYPE III B. SYSTEM W/SINGLE EFFLUENT PUMP Maximum Soil Cover: Inches

*Proposed System: 25% REDUCTION *Distribution Type: PRESSURE MANIFOLD

Nitrification Field: 1200 Sq. ft. Septic Tank: 1,000 Gallons
No. Drain Lines: 4 Pump Required: ☒ Yes ☐ No ☐ May Be Required
Total Trench Length: 400 ft. ☐ Inches O.C. Pump Tank: 1,000 Gallons
Trench Spacing: 9 - ☒ Feet O.C. Grease Trap: Gallons
Trench Width: 3 - ☐ Inches Septic Tank Installer
Aggregate Depth: inches ☒ Feet Grade Level Required: ☐ I ☒ II ☐ III ☐ IV

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.

***Permit Conditions:**

Initial/Repair lines laid out in field by REHS. Drain lines/Manifold min. 10' off property lines. Min. 50' off wells. Keep drain lines min. 15' off foundation of home (Upslope setback).

The Authorization for Wastewater System Construction shall be valid for a period equal to the period of validity of the Improvement Permit and may be issued at the same time the Improvement Permit issued (NCGS 130A-336(b)). If the installation has not been completed during the period of validity of the Construction Permit, the information submitted in the application for a permit or Construction Authorization shall become invalid, and may be suspended or revoked (.0204(k)(1)). 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 (per rule .0301(a)).

Authorized State Agent: Bullock, Will *Will Bullock* Date of Issue: 12/19/2024

☒ Hand Drawing ☐ Import Drawing

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

Total Time : (HH:MM)

**Granville County Health Department
Environmental Health**

Permit Number P-415339

File _____

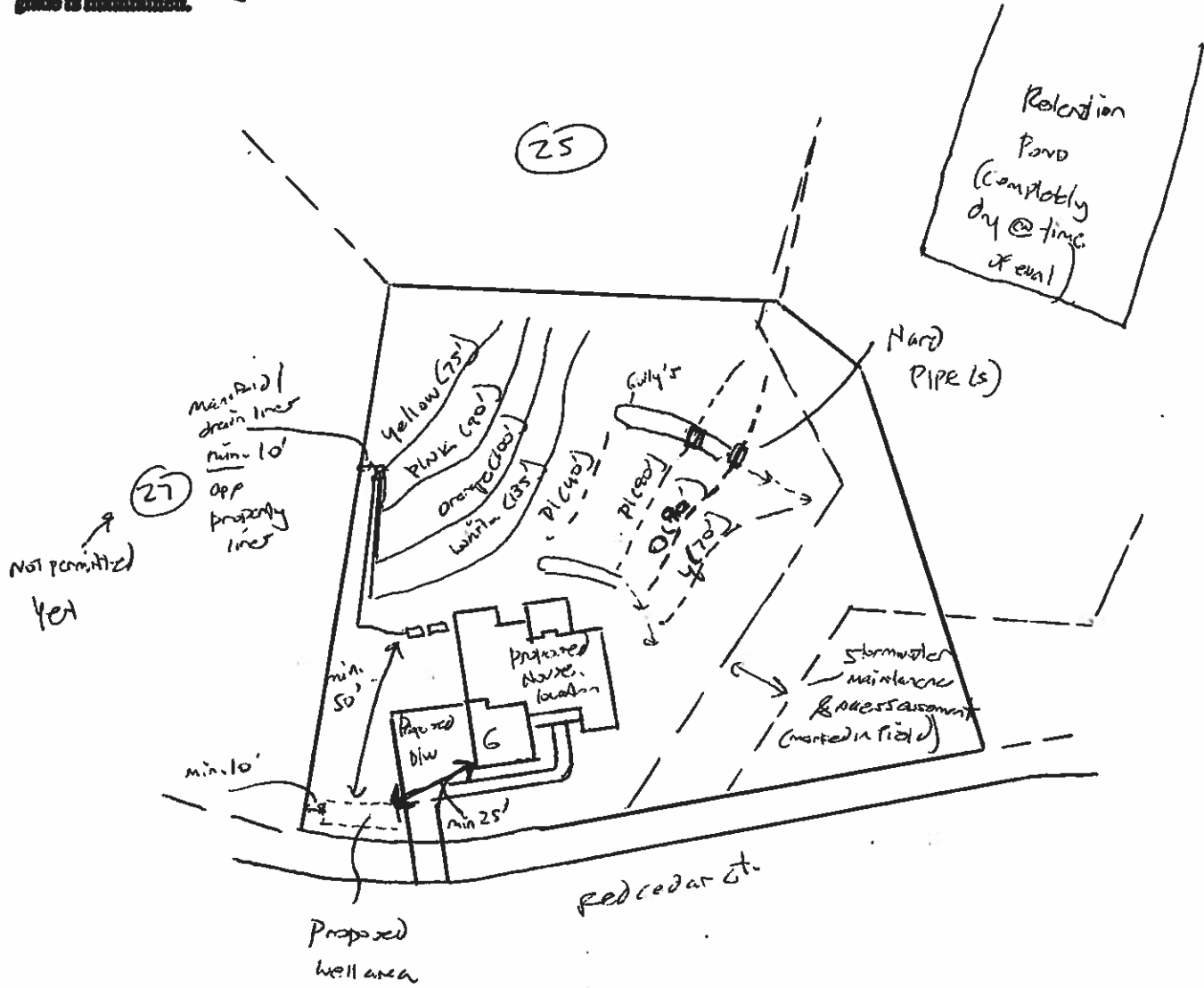
☒ Improvement Permit 460rm. ☒ Construction Authorization

Site Sketch

Summer const.
Applicant's Name
Will R. H. Smith
Authorized State Agent

1225 Redcedar Ct. / Cedar Knolls 28
Subdivision - Section - Lot
12/19/24
Date

System components represent approval plate opinions only. The contractor must flag the system prior to beginning the installation to insure that proper grade is maintained.



KEY
 ——— Existing lines
 - - - Repair lines

(27)
Not permitted
yet



Well Construction Permit

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*CDP File Number 415339

PIN Number: 183400164083

Tax Lot #: 28 Tax Block #: _____

Evaluated For: _____

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Property Owner: JSW Partners
Address: 1225 Red Cedar
City: Youngsville
State/Zip: NC / 27596
Phone #: _____

Applicant: Sumner Construction
Address: PO Box 1011
City: Youngsville
State/Zip: NC / 27596
Phone #: H: (919) 422-5713 C: (919) 422-5713

Property Location & Site Information

Address/Road #: 1225 Red Cedar Subdivision: Cedar Knolls Phase: _____ Lot: 28
Youngsville NC, 27596
*Proposed use of Well: _____
If Other: _____
Applicant Email: bobby@sumnerconstruction.com
Owner Email: _____

Directions: _____

Well Contractor Information

Drilling Contractor: _____ Driller Registration: _____

Permit Conditions

*Permit Conditions

Keep proposed well min. 50' off any part of septic (Including neighboring lots). Min. 25' off structural foundations. Stay out of all easements and right of ways. Well driller responsible for maintaining all setbacks.

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: Bullock, Will
Authorized State Agent: [Signature]
Owner/Applicant: JSW Partners

*Date of Issue: 12/19/2024

☒ Hand Drawing ☐ Import Drawing

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



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