

PERMIT IS SUBJECT TO REVOCATION IF SITE PLANS OR INTENDED USE CHANGE  
WARREN COUNTY HEALTH DEPARTMENT

7-27-05  
42

- ( ) Suitable  
( ) Provisionally Suitable  
( ) Upgrading of existing system  
( ) Repair of existing system  
( ) Pump system

ENVIRONMENTAL HEALTH DIVISION

544 720 WEST RIDGEWAY STREET  
WARRENTON, NC 27589  
PHONE (252) 257-1538  
FAX (252) 257-4460

Permit No. 4892

Fee 175.00

Paid 10/6/04

IMPROVEMENT PERMIT

Owner Jonathan Lee Carroll Phone #: 257-2115  
Address 310 Hester Rd Warrenton NC  
Subdivision Name Pasture Gate Lot # 44 Block # Section #  
Directions to lot (RPR#) Pasture Gate @ on Pasture Gate Dr, end of cul-de-sac

Application Date 10/6/04

— Improvement permit with scale drawing on plat is valid without expiration

IMPROVEMENT PERMIT APPROVAL

Date 10/20/04 [Signature]

Environmental Health Specialist

— Improvement permit with site plan is valid for 60 months

CONSTRUCTION AUTHORIZATION

Original Deed Date Land Use House # of bedrooms 3 # of people 6

Water Supply private Distance from well and/or water lines

Well installed at time of inspection ( ) Yes (X) No

Dist. from septic system 100 + / 10

Design daily flow of sewage 360 gals.

Kitchen garbage grinder Other

Septic tank capacity 1000 gals.

Nitrification field 675 Sq. Ft.

Maximum trench depth 18 inches

Artificial drainage required  
(if yes, see attached plan)

CONSTRUCTION AUTHORIZATION APPROVAL

Date 10/25/04 [Signature]

Environmental Health Specialist

\*CONSTRUCTION AUTHORIZATION IS VALID FOR 5 YEARS FROM DATE OF ISSUE

see attached

COMMENTS: (1) RUN TRENCHES 3' WIDE AND AT LEAST 9' ON CENTERS  
(2) RUN LINES CONTOUR TO SLOPE 3) RUN LINES OF EQUAL LENGTH  
(4) EFFLUENT FILTER REQUIRED 5) TANK MARKERS/RISERS NECESSARY  
6) IF TANK LOCATION IS SPECIFIED ON SITE PLAN SEPTIC PERMIT-  
HOUSE, MH OR STRUCTURE TO BE PLUMBED ACCORDINGLY. 7) INSTALL INITIAL SYSTEM IN DESIGNATED AREA

THE SEPTIC TANK SYSTEM AND OTHER IMPROVEMENTS THAT ARE MADE SHALL BE  
INSTALLED AS SHOWN IN THE SITE SKETCH PLAN. NO CHANGES SHALL BE MADE WITH-  
OUT APPROVAL FROM THE HEALTH DEPARTMENT.

ANY VARIATIONS FROM THE CONDITIONS AND REQUIREMENTS PREVIOUSLY  
DESCRIBED WILL VOID THE PERMIT. THIS IS AN OFFICIAL DOCUMENT. PLEASE RETAIN WITH

OTHER VALUABLE PAPERS.

\*DO NOT LANDSCAPE LOT BEFORE HEALTH DEPARTMENT APPROVAL. DO NOT LOCATE  
DRIVEWAYS, PARKING AREAS, OR OTHER BUILDINGS OVER SEPTIC TANK SYSTEM. LAND-  
SCAPE AREA OVER SEPTIC TANK SYSTEM TO PREVENT PONDING OF WATER. SEED WITH  
GRASS TO HELP PREVENT SOIL EROSION AND TO IMPROVE EVAPOTRANSPIRATION.

OPERATION PERMIT

OPERATION PERMIT APPROVAL

DATE 7-21-05 [Signature]

ENVIRONMENTAL HEALTH  
SPECIALIST

CONTRACTOR: GREG WALTER

Jay Myrick

NOTE: THE SEPTIC TANK, AND NITRIFICATION FIELD MUST BE INSPECTED BY A REPRESENTATIVE OF THE HEALTH DEPARTMENT BEFORE THEY ARE COVERED.

THE SIGNING OF THIS CERTIFICATE SHALL INDICATE THAT THIS SYSTEM HAS BEEN  
INSTALLED IN COMPLIANCE WITH THE CURRENT LAW & RULES FOR SANITARY SEWAGE  
COLLECTION, TREATMENT AND DISPOSAL SET FORTH IN ARTICLE 11 OF GENERAL  
STATUTE 130A. SECTION. 1900 OF THE NORTH CAROLINA ADMINISTRATIVE CODE TITLE  
10, HEALTH SERVICES. ENVIRONMENTAL HEALTH SUBCHAPTER 10A SANITATION AND  
SHALL IN NO WAY BE A GUARANTEE THAT THE SEPTIC TANK SYSTEM WILL FUNCTION  
SATISFACTORILY FOR ANY GIVEN PERIOD OF TIME.

WHITE - OWNER'S COPY - YELLOW - HEALTH DEPT. COPY - PINK - INSPECTION DEPT. COPY

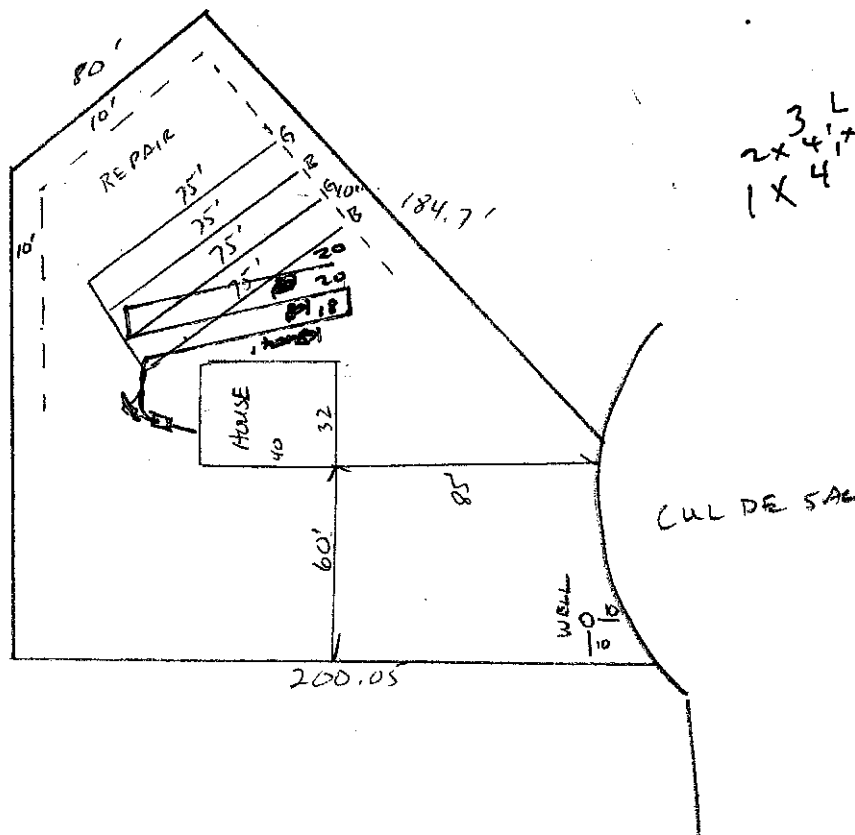
WARREN COUNTY ENVIRONMENTAL HEALTH SECTION

**SITE PLAN/SYSTEM LAYOUT**

Applicant JONATHAN LEE CARROLL Subdivision/Lot# Pasture Gate #44

Authorized State Agent Fred D. Sate Date 10/25/04

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



B = BLUE FLAG  
G = GREEN FLAG

2x3 LINES  
2x4x20  
1x4x18 Chambers  
5# TOTAL

**CONDITIONS OF THE PERMIT**

Linear feet of conventional trench \_\_\_\_\_ Linear feet of 25% reduction trench 300 # of panels/bundles \_\_\_\_\_  
Maximum trench depth 18 SETBACKS: House foundation-5 ft; Basement-15ft; well- \_\_\_\_\_ ft  
Property line \_\_\_\_\_ ft; Stream/Lake-50ft; Gully-15ft; water pipe-10ft; Other \_\_\_\_\_  
Trenches on 9-ft centers, 3-ft wide, on contour, and installed in area shown.

PASTURE GATE #44

# WARREN COUNTY HEALTH DEPARTMENT OPERATION PERMIT CHECKLIST

## 1. LOCATION AND SEPARATION DISTANCES

- A) System meets .1950 setback requirements \_\_\_\_\_
- B) Distance from system to any wells NOT IN
- C) Distance from septic tank to foundation 12
- D) Distance from system to all property lines 10' plus

## 2. SEPTIC TANK

- A) Visually inspect the exterior walls and top of the tank ☒
  - B) Visually inspect the interior walls, baffle, tee, lids, air vent, Bottom, and water tight outlet ☒
  - C) Date of tank manufacture 5-18-05
  - D) Liquid capacity of tank 1000 gallons
  - E) Tank level Yes ☒ No ☐
- E1115  
STB 789

## 3. SUPPLY LINE TO TRENCHES

- A) Grade Okay Yes \_\_\_\_\_ No \_\_\_\_\_
- B) Supply line material SCM 40
- C) Diameter 4"
- D) Length \_\_\_\_\_
- E) Distance from tank to drainfield/distribution device 14'

## 4. DISTRIBUTION DEVICE (S)

- A) Type NA
- B) Is Device water tight NA
- C) Minimum of 2 feet undisturbed earth to trench NA
- D) Proper center to center trench spacing maintained? ☒
- E) Is the device on a solid foundation NA All outlet inverts properly adjusted NA

## 5. NITRIFICATION FIELD

- A) Trench depth 24" inches
- B) Trench width 36 inches
- C) Trench spacing 3 OC 5 OC Other \_\_\_\_\_
- D) Number of trenches 3
- E) Length(s) of trenches 18 x 4' CHAMBERS
- F) Aggregate depth \_\_\_\_\_ inches Yes \_\_\_\_\_ No \_\_\_\_\_
- G) Aggregate material: ROCK \_\_\_\_\_ SYNTHETIC \_\_\_\_\_ CHAMBER 56 4' x
- H) Trench elevations (record on reverse of sheet)
- I) Step downs LASER
  - a. Minimum of 2' of undisturbed earth \_\_\_\_\_
  - b. Proper rise over step down \_\_\_\_\_
  - c. Solid pipe used \_\_\_\_\_
  - d. Elevations of step downs \_\_\_\_\_ (Record elevations and show on as built)

SEE "as built" plan on attached sheet.

