DAVIDSON COUNTY
HEALTH DEPARTMENT
Protecting, Caring, Serving Our County

Lillian Koontz, MPA, REHS
HEALTH DIRECTOR

Dr. Terry Ellington
CHAIR, BOARD OF HEALTH

Michael Garrison, MD
MEDICAL DIRECTOR

File/Permit Number: **IP-26-8**

Improvement Permit

Permit valid for: Five Years

New Wastewater System

Owner: Jack Watson
Applicant: Jack Watson
Property Address: 439 Boulder Ridge Drive Denton, NC 27239
Parcel Number: 09020F0000019
Subdivision (if applicable): THE SPRINGS AT HIGH ROCK Lot #: 19 Block: Section:
Facility Type: Residential
Number of bedrooms: 3 Number of Occupants: 6 Other:
Foundation Type: Basement Basement Fixtures: 0
Design Wastewater Strength: Domestic
Type of Water Supply: Private Well
Proposed Design Daily Flow: 360 GPD

Initial System Details
Proposed Wastewater System Type*: Type III b. Septic system with single effluent pump or siphon - Large Diameter Pipe 8"Large Diameter Pipe 8"
Effluent Standard: Domestic Strength Effluent
Min. Trench Depth (Initial)‡: 10
Proposed LTAR (Initial): 0.25
Pump Required: Yes
Max Trench Depth (Initial)‡: 10
‡Measured on the downhill side of the trench

Repair System Details
Proposed Wastewater System Type*: Type V a. Advanced pretreatment meeting NSF/ANSI 40, TS-I, or TS-II, approved under Section .1700, DDF 3,000 GPD or less
Effluent Standard: Domestic Strength Effluent
Min. Trench Depth (Repair)‡: 6
Proposed LTAR (Repair): 0.1
Pump Required: Yes
Max Trench Depth (Repair)‡: 6
‡Measured on the downhill side of the trench

Permit conditions:
- This permit does not allow for the installation of the described system, a separate Construction Authorization is required.
- This permit does not allow for the construction of a well, a separate Well Permit is required. All indicated possible well areas are hypothetical.
- Do not cut, fill, grade, or otherwise modify the initial or repair areas.
- Do not allow vehicle traffic on or over the initial or repair areas.
- Do not store construction materials on or in the initial or repair areas.
- A 10 ft setback must be maintained from any waterline to any septic component.
- Modifying the location, dimensions, or orientation of any structures, driveways, or any other appurtenances may lead to the revocation of this permit.
- The initial system must be installed in a 10 inch wide ditch.

Authorized Agent's Printed Name: Joshua Grubb
Authorized Agent's Signature: Joshua Tyler Grubb
Expiration Date: January 29, 2026
Date: January 29, 2026

This permit is issued by the Davidson County Health Department pursuant to applicable public health laws and administrative code. The Department's permitting process is limited in scope to public health requirements and does not constitute a comprehensive review for compliance with other regulatory agencies or other County departments. Responsibility for meeting all additional regulatory obligations rests solely with the applicant.

Permit not valid without Site Map

The issuance of this permit in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This permit is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subjected to compliance with the provisions of 15A NCAC 18E and the the conditions of this permit.