Forsyth County - Construction Authorization

(NEW)

Forsyth County
Division of Environmental Health
799 North Highland Avenue
Winston-Salem, NC 27102-0686
(336) 703-3225

PIN : Tax Lot No: 45J Tax Block No: 5147 File : 151 - 3

The Authorization for Wastewater System Construction is subject to revocation if the site plan or plat changes, the intended use of the property changes, or if the site is altered or is misrepresented in any way.
The Construction Authorization is valid until: May 13, 2013

Applicant: Carlos Espinal
283 Stanleyville Manor

Rural Hall, NC 27045

Property: Hickory Trails Road

Winston Salem, 27105

Subdivision : N/A

Owner: Carlos Espinal
283 Stanleyville Manor

Rural Hall, NC 27045

Directions to site:
HWY 52 N/GERMANTON RD EX/TL HWY 8/OLD HOLLW RD(HWY 66) TR/ 1 MI TL ON PROVIDENCE CH RD/TR ON HICKORY TRLS/SITE DEAD END

Facility Type:	SINGLE FAMILY	Evaluated for:	NEW
		Saprolite System:	NO
System Desc:	25% REDUCTION	Reinforced Septic Tank:	NO
Repair System Desc:	25% REDUCTION	Daily Flow:	360 GPD
Water Supply:	NEW WELL	LTAR:	0.2750

System Requirements

Trench Length:	330 ft.	Trench Separation:	From [9] To [9] ft.
Trench Depth:	From [18] To [31] in.	Soil Cover Depth:	From [6] To [19] in.
Trench Width:	From [3] To [3] ft.	Septic Tank Size:	1000 gal. 1 Piece: NO
Aggregate Depth:	0 in.	Pump Tank Size:	gal. 1 Piece: NO
Pretreatment:	N/A	Dosing Volume:	gal.
		Gravity/Pressure:	GRAVITY

See site plan on attached sheet

Applicant/legal reps. Signature: _____ Date: 5/13/08

Issued by: Cahill, Charles Date of Issue: 5/13/2008

Authorized State Agent: Chas Cahill

SEPTIC TANK CONTRACTOR'S COPY

Forsyth County - Improvement Permit

Forsyth County
Division of Environmental Health
799 North Highland Avenue
Winston-Salem, NC 27102-0686
(336) 703-3225

PIN : Tax Lot No: 45J Tax Block No: 5147 File: 151 - 3

NOTE TO INSPECTIONS DIVISION: The Improvement Permit may not be used to obtain a building permit. It will be necessary to make application to the Health Department for a Construction Authorization before a building permit may be issued.

If the information on the Improvement Permit is falsified, changed or the site altered, then the Improvement Permit shall become invalid.

Permit is Valid until : 05/13/2013

Applicant: Carlos Espinal
283 Stanleyville Manor

Rural Hall, NC 27045

Owner: Carlos Espinal
283 Stanleyville Manor

Rural Hall, NC 27045

Property: Hickory Trails Road

Winston Salem, 27105

Subdivision: N/A

Directions to site:
HWY 52 N/GERMANTON RD EX/TL HWY 8/OLD HOLLW RD(HWY 66) TR/ 1 MI TL ON PROVIDENCE CH RD/TR ON HICKORY TRLS/SITE DEAD END

Facility Type: SINGLE FAMILY

Evaluated for: NEW

System Type: 25% REDUCTION

Water Supply: NEW WELL

Repair System Type: 25% REDUCTION

Saprolite System: NO LTAR: 0.2750

Projected Daily Flow: 360 GPD

Every sanitary sewage treatment and disposal system shall be located at least the minimum horizontal distance from the following:

- Any private water supply source, including any well or spring-100 feet, Any building foundation - 5 feet
- Any basement-15 feet, Any property line - 10 feet, Top slope of embankments or cuts of 2 feet or more vertical height - 15 feet,
- Any swimming pool - 15 feet, Any other nitrification field (except repair area) - 20

Improvement Permits shall be valid upon a showing satisfactory to this department that the site and soil conditions are unaltered, that the facility, design wastewater flow, and wastewater characteristics are not increased, and that a wastewater system can be installed that meets the permitting requirements in effect on the date the improvement

See site plan on attached sheet

Applicant/legal reps. Signature: _____ Date: 5/9/08

Issued by: Cahill, Charles Date of Issue: 5/13/2008

Authorized State Agent: _____

SEPTIC TANK
CONTRACTOR'S COPY

Site Plan

File # 151

Carlos Espinal
Applicant's Name

Application #

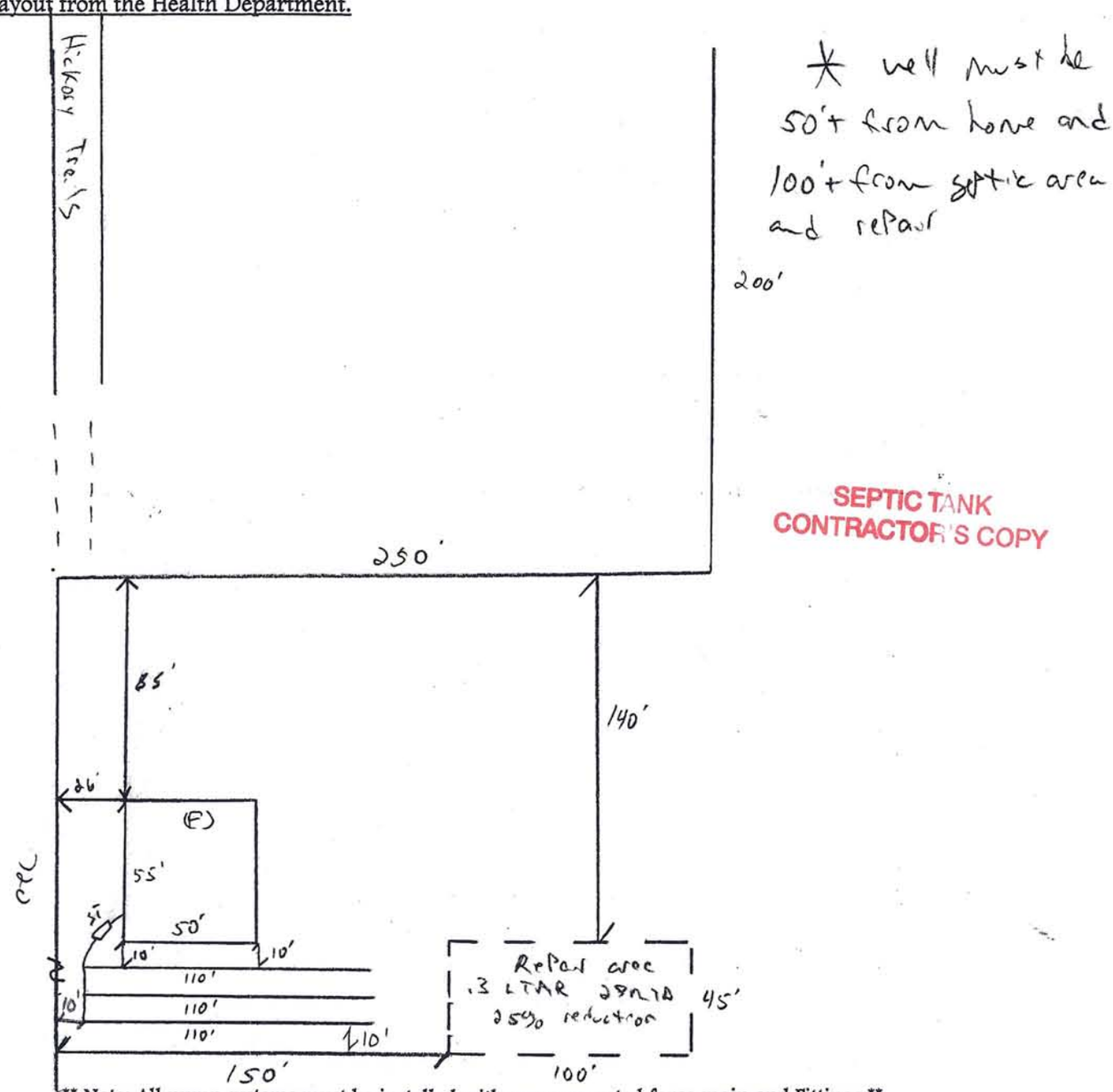
Charles Cahill
Authorized State Agent

Tax Block 5147 Tax Lot 455

5-13-08 5-13-13
Date Expiration Date

Sub-Division

System components represent approximate location only. Exact final system placement will be dependent upon site conditions at time of septic tank layout. The contractor must flag the system prior to beginning the installation to insure that proper grade is maintained. Do not grade, alter or park on Septic System. You may not install the system until you have received a Septic System Layout from the Health Department.



SEPTIC TANK CONTRACTOR'S COPY

** Note: All pump systems must be installed with pressure-rated force main and Fittings.**

Permit Specifications Scale 1"= 60 ft.

GPD 360 LTAR .275 Trench Length 330' SystemType 25% o
Trench Depth 31" Water Supply well Saprolite System (Y / N)

Site Plan Void Without Improvement Permit and/or Construction Authorization

I have reviewed and hereby approve of this Site Plan. I understand that changes made to the site, including grading, clearing, house placement, driveway placement, utilities, well location, or plumbing stub out, may necessitate changes in the location or design of the wastewater system or could render the site unsuitable for a wastewater system.

Applicant's Signature

5/15/08
Date

SEPTIC TANK CONTRACTOR'S COPY

C:\Documents and Settings\cahillcw\Local Settings\Temporary Internet Files\OLKA\SitePlanLegal.DOC

;yth County Health Department
Invoice

Client Information

Name: J & E MASONRY INC

Address: 3970 NORTH LIBERTY ST
WINSTON SALEM, NC 27105

Home Phone:

Work Phone: 336-744-3488

Transaction Information

Number: 200805190008 **Date:** 05/19/2008

Services	CPT	ICD9	Quantity	Amount
CONVENTIONAL GRAVITY, Permit #: 200870341			1	190.00
WELL CONSTRUCTION PER Permit #: 200880076			1	290.00

			480.00	
Check 14619			480.00	
Change:			0.00	

Printed on 05/19/2008 **at** 14:22:31

Forsyth County
Application for Improvement Permit and/or Construction Authorization

North Carolina Public Health
EveryWhere. EveryDay. EveryBody.

TAX LOT # 0455

TAX BLOCK # 5147

Improvement Permit (Soil Test only) ✓ ***CHECK ONE OR BOTH***
Construction Authorization (Building within 5 years) ✓

IF THE INFORMATION IN THE APPLICATION FOR AN IMPROVEMENT PERMIT IS FALSIFIED CHANGED OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT AND CONSTRUCTION AUTHORIZATION SHALL BECOME INVALID.

APPLICANT INFORMATION

Carlos Espinal	283 Stanleyville manor Ct	Kernersville	27284	336-399-6256 / 744-3488
Applicant	Mailing Address	City	Zip	Home & Work Phone
				/
Owner	Mailing Address	City	Zip	Home & Work Phone

PROPERTY INFORMATION

Please call listed telephone number to obtain required information below.

1. Date That Property was last platted. **Call 703-2300 Menu choice # 2** May 1996
2. Minimum Setback Requirements. **Call 727-2628** Front 35' Back 40' Left 10' Right 15'

Hickory Trails Road	5147 0455	6839-73-0293
Street Name:	**Subdivision Name:**	**Pin Number**

Directions to Property: 52 N exit Germanton, turn left on Germanton, turn right on old Hollow Rd (66), turn left on Providence Church Rd, turn right on Hickory Trails Rd

DEVELOPMENT INFORMATION

New Single Family Dwelling ✓ New Mobile Home___ Expansion to Existing Dwelling (Current # of Bedrooms___)
Non-Residential Type: Commercial___ Industrial___ Church___ Other___

Residential Specifications: # of Bedrooms 3 Basement Fixtures (YES) ____ (NO) ____
Basement (YES) ✓ (NO) ____ # of Occupants 4

Non – Residential Specifications: # of Employees____ Total Square Footage of Building____
Type of Business____

Church: Fellowship Hall____ Maximum # of seats in sanctuary/fellowship hall ____

System type Requested (RANK in order of preference from 1 to 4)
1 CONVENTIONAL 2 INNOVATIVE 3 ALTERNATIVE 4 OTHER(SPECIFY____)
(If you have any questions about system types please contact your septic contractor.)
Water Supply: NEW WELL ✓ EXISTING WELL___ PUBLIC___ COMMUNITY WELL___

A plat or site plan of your property must be attached as a part of the completed Application. This site plan must include the location of all property lines and corners, any proposed buildings and driveways, the proposed area for your septic tank system, any proposed or existing wells on your property, and all existing neighboring wells within 100 feet of your property lines on adjoining properties. See accompanying Checklist for all requirements for the plat or site plan.

The Applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question : (1) If the site is located in any designated wetlands. (2) If the site is subject to approval by any other public agency. (3) If any wastewater is going to be generated on the site other than domestic sewage. If yes please explain:

I have read this application and certify that I am the owner of subject property and that the information provided herein is true, complete and correct to the best of my knowledge and is given in good faith. Authorized County and State Officials are granted right of entry to conduct necessary inspections to determine compliance with applicable rules. **I understand that I am solely responsible for the proper identification and labeling of all property lines and making the site accessible so that a soil site evaluation can be performed. You will be charged $45.00 to re-visit your site if not marked.**

Property Owner's or Owner's Legal Representative Signature (Required)	12/8/08 **Date**
Applicant's Signature (If different from owner)	**Date**