CONSTRUCTION AUTHORIZATION

Beaufort County Health Department
Environmental Health Section
220 North Market St.
Washington NC 27889
Phone: 252-946-6048 Fax: 252-946-2074

For Office Use Only
*CDP File Number: 51914 - 2
County ID Number: 7611375562
Evaluated For: NEW

PERMIT VALID UNTIL: 12 / 31 / 2016

☐ Open Pump System Sheet

Applicant:	Andrea Heekin
Address:	239 W. Main Street
City:	Washington
State/Zip:	NC 27889
Phone #:	(252) 940-1010

Property Owner:	Ray Tarpley
Address:	267 Pitch Kettle Ct
City:	Belhaven
State/Zip:	NC 27810
Phone #:	(423) 288-7563

Address Lot 6 Crosswinds West
Road # Belhaven NC 27810 Subdivision: Crosswinds West Phase: Lot: 6
Township:

Property Location & Site Information

Structure: SINGLE FAMILY
# of Bedrooms: 3
# of People: 6
*Water Supply: PUBLIC

Directions
At Winsteadville, turn right onto Pamlico Beach Road, Drive approx 3 miles and turn left onto Wilco Road, subdivision entrance on left approx 1/4 mile. Lot 6 is on left after turning right at stop sign. Waterfront lot on Salterwaite Creek.

System Specifications

*Site Classification: Provisionally Suitable
Saprolite System? ○Yes ◉No
Design Flow: 360
Soil Application Rate: .4
*System Classification/Description: TYPE II A. CONV SYSTEM (SINGLE-FAMILY OR 480 GPD OR LESS)
*Proposed System: CONVENTIONAL
Nitrification Field: 900 Sq. ft
No. Drain Lines: 4
Total Trench Length: 300 ft.
Trench Spacing: 9 – ○Inches O.C. ◉Feet O.C.
Trench Width: 3 – ○Inches ◉Feet
Aggregate Depth: 12 Inches

Minimum Trench Depth: 18 Inches
Maximum Trench Depth: 18 Inches
Minimum Soil Cover: ____ Inches from *Natural Ground Level*
Maximum Soil Cover: 18 Inches *Natural Ground Level*
*Distribution Type: GRAVITY - PARALLEL (eg. d-box)
Septic Tank: 1000 Gallons
Pump Required: ○Yes ◉No
Pump Tank: ____ Gallons
Grease Trap: ____ Gallons
Septic Tank Installer 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: Set 1000gal septic tank, distribution box, all piping and install 4 (3' x 75') conventional rock tranches on contour of slope; maintain setbacks; landscape system area to shed surface water; Conventional repair

This Authorization for Wastewater System Construction shall be valid for a person equal to the period of validity of the Improvement Permit, not to exceed five years, 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 is found to have been incorrect, falsified or changed, or the site is altered, the permit or Construction Authorization shall become invalid, and may be suspended or revoked (.1937(g)). 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 (1936(b)).

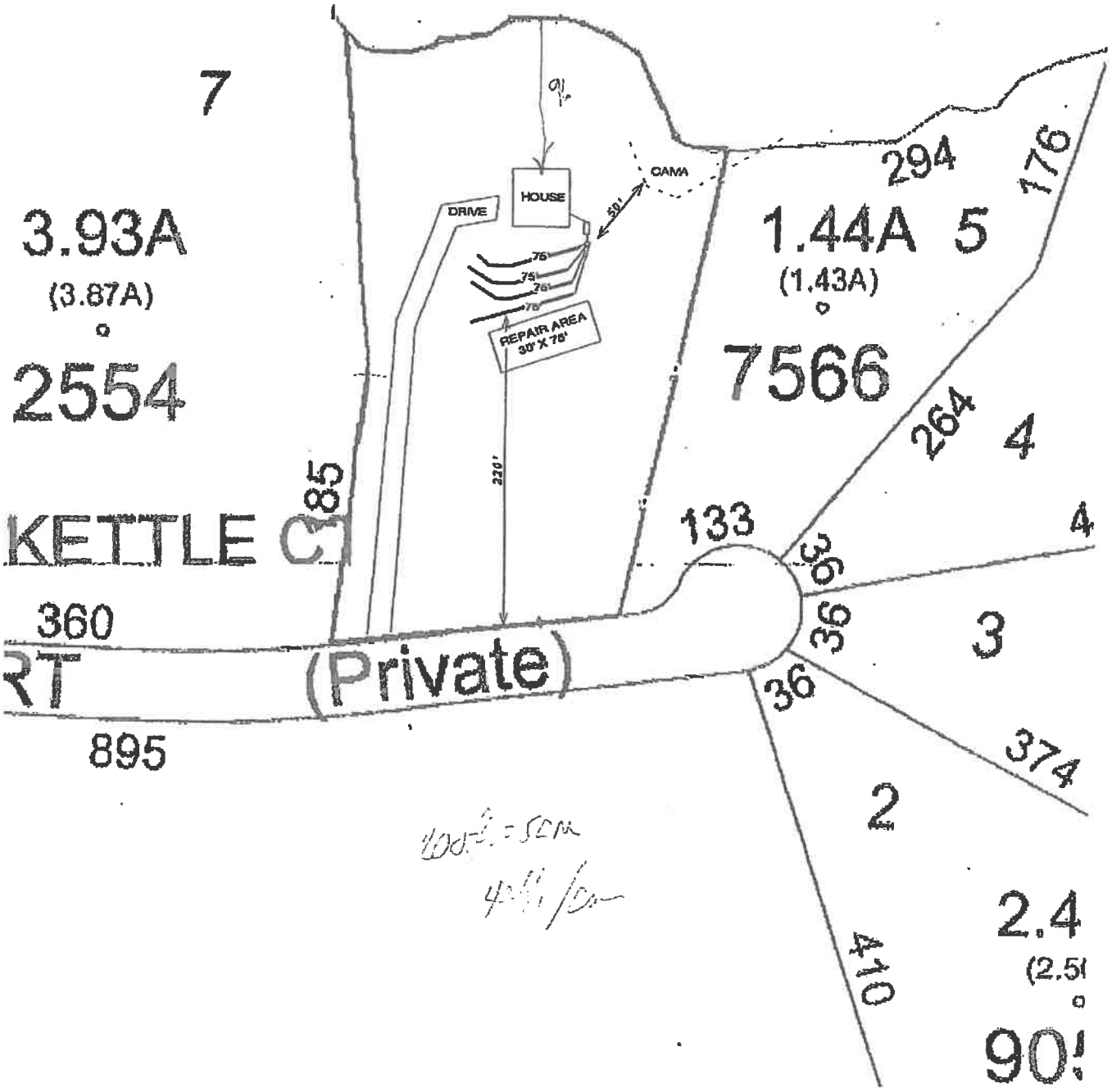
*Authorized State Agent: 2018 - Hager, Matthew *Date of Issue: 07 / 24 / 2014

○Hand Drawing ○Import Drawing **Site Plan/Drawing attached.**
Malfunction Log ○Yes

07-24-2014

IMPROVEMENT PERMIT

100.00 feet
1:1200



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