



Construction Authorization

Franklin County Health Department
107 Industrial Drive
Louisburg, NC 27549
Phone: _____

For Office Use Only

*CDP File Number: 411779 - 1

County ID Number: _____

Evaluated For: NEW

PERMIT VALID UNTIL: 08/07/2029

☐ Open Pump System Sheet

Applicant: Jason Ammerman

Address: 144 Arapaho Drive

City: Louisburg

State/Zip: NC 27549

Phone #: _____

Property Owner: Jason Ammerman

Address: 144 Arapaho Drive

City: Louisburg

State/Zip: NC. 27549

Phone #: _____

Property Location & Site Information

Address/Road #: 104 Pinto Drive Louisburg, NC
27549

Subdivision: _____

Phase: NEW Lot: _____

Directions:

Structure: MOBILE HOME - camper per owner Suzanne 104 Pinto Drive

of Bedrooms: 2 Louisburg, NC 27549

of People: 2

*Water Supply: PUBLIC

System Specifications

Usable Soil Depth: 40"

Design Flow: 240

Soil Application Rate: 0.3500

Minimum Trench Depth: _____ Inches

Maximum Trench Depth: 24 Inches

*System Classification/Description:

TYPE III B. SYSTEM W/SINGLE EFFLUENT PUMP

Minimum Soil Cover: _____ Inches

Maximum Soil Cover: _____ Inches

*Proposed System:

25% REDUCTION

*Distribution Type: PUMP TO GRAVITY

Nitrification Field: _____ Sq. ft.

No. Drain Lines: 6

Total Trench Length: 180 ft.

Trench Spacing: _____ - 9

Trench Width: _____ - 3

Aggregate Depth: _____ inches

☐ Inches O.C.

☒ Feet O.C.

☐ Inches

☒ Feet

Septic Tank: 1,000 Gallons

Pump Required: ☒ Yes ☐ No ☐ May Be Required

Pump Tank: 1,000 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:

Install on contour. Maintain proper setbacks.

Water and electrical lines may have to be relocated to property line.

Do not cut or fill any soil in proposed septic area.

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: Ennis, Crystal

Date of Issue: 01/07/2025

☐ Hand Drawing

☐ Import Drawing

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

Total Time : (HH:MM) _____



File# 411779 PIN# 2831-24-8642

Property Address: 104 Pinto Dr.

Applicant Or Owner Name: Jason Ammerman

Environmental Health Septic/Well Permit Diagram

Building permits cannot be issued nor should construction begin without Construction Authorization issuance.

☐ Septic Improvement Permit ☒ Septic Construction Authorization (CA) ☐ CA Reissue** ☐ As Built
☐ Well Construction Authorization ☐ Additional Diagram/Specifications Attached

Diagram Date**: 1-6-25 EHS: Crystal Evers

**Any previously dated CA diagram is revoked and/or invalid. Confirm this is the valid diagram for the site before beginning any construction.

Installation inspections may be scheduled the day before or the day of installation by 9am. Contact the Environmental Health office at 919 496-8100. A revisit fee may apply if installation is not ready for inspection at the time requested.

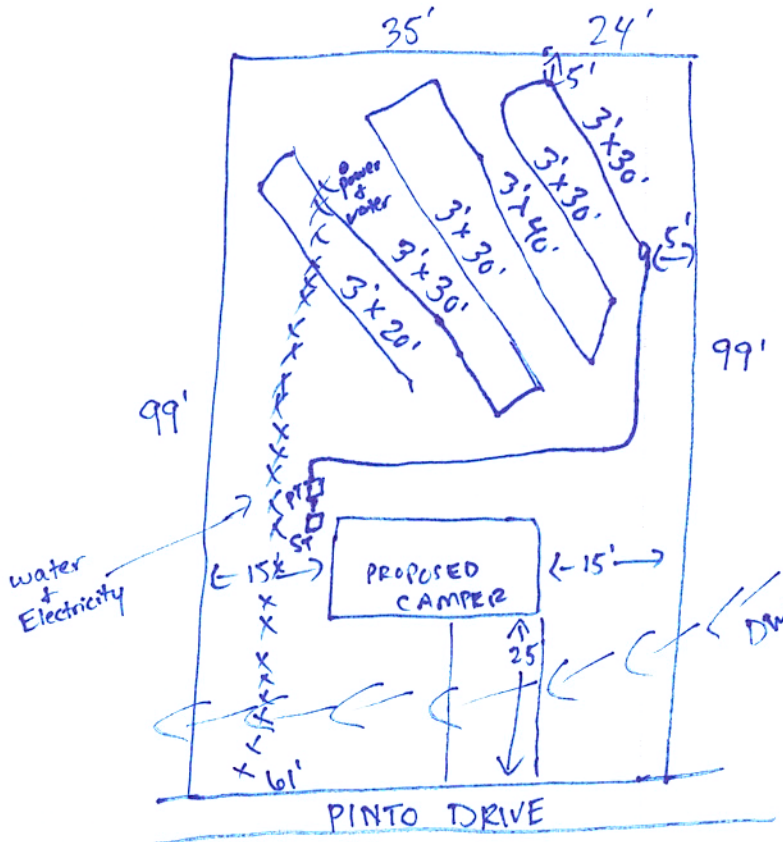
SEPTIC OPERATIONS PERMITS will be issued after installation is approved, all permit conditions are met, and any outstanding fees are paid. WELL CERTIFICATE OF COMPLETION will be issued after well head approval, all permit conditions are met, and any outstanding fees are paid.

Septic Tank 1000 Pump Tank 1000 Drain field 3'x180' Type System PtoAcc Max trench depth 24"

Septic Contractor _____ Septic/Pump tank dates _____ PUMP FEE PAID _____

Well Contractor _____ Well Head Date: _____ PUMP FINAL: _____ N/A (CIRCLE)

** Drawing not to scale **



- water + electricity
may have to be relocated
to property line

- Do not cut or fill
any soil in proposed
septic area

- layout may vary slightly
- pump to serial