Construction Authorization

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

For Office Use Only

*CDP File Number: 452164 - 1
County ID Number:
Evaluated For: NEW

PERMIT VALID UNTIL: 10/13/2030

☐ Open Pump System Sheet

Applicant:	Lilium Homes
Address:	5 W Mason St
City:	Franklinton
State/Zip:	NC 27525
Phone #:	home: (919) 422-0355

Property Owner:	
Address:	
City:	
State/Zip:	
Phone #:	

Property Location & Site Information

Address/Road #: 40 Serenity Woods Trail, Franklinton, NC 27525
Subdivision: The Manors at Harvest View
Phase: NEW
Lot: 25

Directions: 40 Serenity Woods Trail

Structure: SINGLE FAMILY
# of Bedrooms: 4
# of People: 4
*Water Supply: NEW WELL

System Specifications

Usuable Soil Depth: 30
Design Flow: 480
Soil Application Rate: 0.3000
*System Classification/Description: Type IIIb - Wastewater System with a Single Pump o
*Proposed System: 25% REDUCTION

Minimum Trench Depth: _____ Inches
Maximum Trench Depth: 18 Inches
Minimum Soil Cover: _____ Inches
Maximum Soil Cover: _____ Inches
*Distribution Type: PRESSURE MANIFOLD

Nitrification Field: _____ Sq. ft.
No. Drain Lines: 3
Total Trench Length: 400 ft.
Trench Spacing: 9 - _____
Trench Width: 3 - _____
Aggregate Depth: _____ inches

◯ Inches O.C.
(X) Feet O.C.
◯ Inches
(X) Feet

Septic Tank: 1,000 Gallons
Pump Required: (X) 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 SYSTEM AS DESIGNED BY SOIL AND ENVIRONMENTAL CONSULTANTS, INC.

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 regaurding system location, installation, operation, maintenance, monitoring, reporting and repair (per rule .0301((a)).

Authorized State Agent: Ennis, Crystal
Date of Issue: 10/13/2025

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

◯ Hand Drawing ◯ Import Drawing

Total Time : (HH:MM) _____

Well Construction Permit

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

For Office Use Only

*CDP File Number 452164

PIN Number:

Tax Lot #: 25 Tax Block #: 050851

Evaluated For: SINGLE FAMILY \ WELL

PERMIT VALID UNTIL: 10/13/2030

Property Owner:		Applicant:	Lilium Homes
Address:		Address:	5 W Mason St
City:		City:	Franklinton
State/Zip:	NC	State/Zip:	NC / 27525
Phone #:		Phone #:	H: (919) 422-0355

Property Location & Site Information

Address/Road #: 40 Serenity Woods Trail
Franklinton NC, 27525

Subdivision: The Manors at Harvest View Phase: Lot: 25

*Proposed use of Well: SINGLE FAMILY

If Other:

Applicant Email:

Owner Email:

Directions: 40 Serenity Woods Trail

Well Contractor Information

Drilling Contractor:

Driller Registration:

Permit Conditions

*Permit Conditions

Well location, construction and protection must meet all state and local regulations and must be inspected and approved by an authorized representative of the Local Health Department. The permit may be revoked at any time for failure to comply with existing regulations. The siting of approved well construction area(s) by the Health Department is to provide protection from the known possible sources of contamination. The approved well area(s) may not be changed without permission from an authorized representative of the Local Health Department. Issuance of this well permit does not guarantee water quality or adequate water production from the well once it is installed or repaired.

*Issued By: Ennis, Crystal

*Date of Issue: 10/13/2025

Authorized State Agent:

Owner/Applicant:

○ Hand Drawing ○ Import Drawing

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

Franklin County
NORTH CAROLINA
A Research Triangle Region Community

File# 452164 PIN# _____

Property Address: 40 Serenity Woods Trl.

Applicant Or Owner Name: Lilium Homes

Environmental Health Septic/Well Permit Diagram

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

(X) Septic Improvement Permit (X) Septic Construction Authorization (CA) ( ) CA Reissue** ( ) As Built

(X) Well Construction Authorization (X) Additional Diagram/Specifications Attached

Diagram Date:** 10-13-25 **EHS:** Cyndi Ea

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

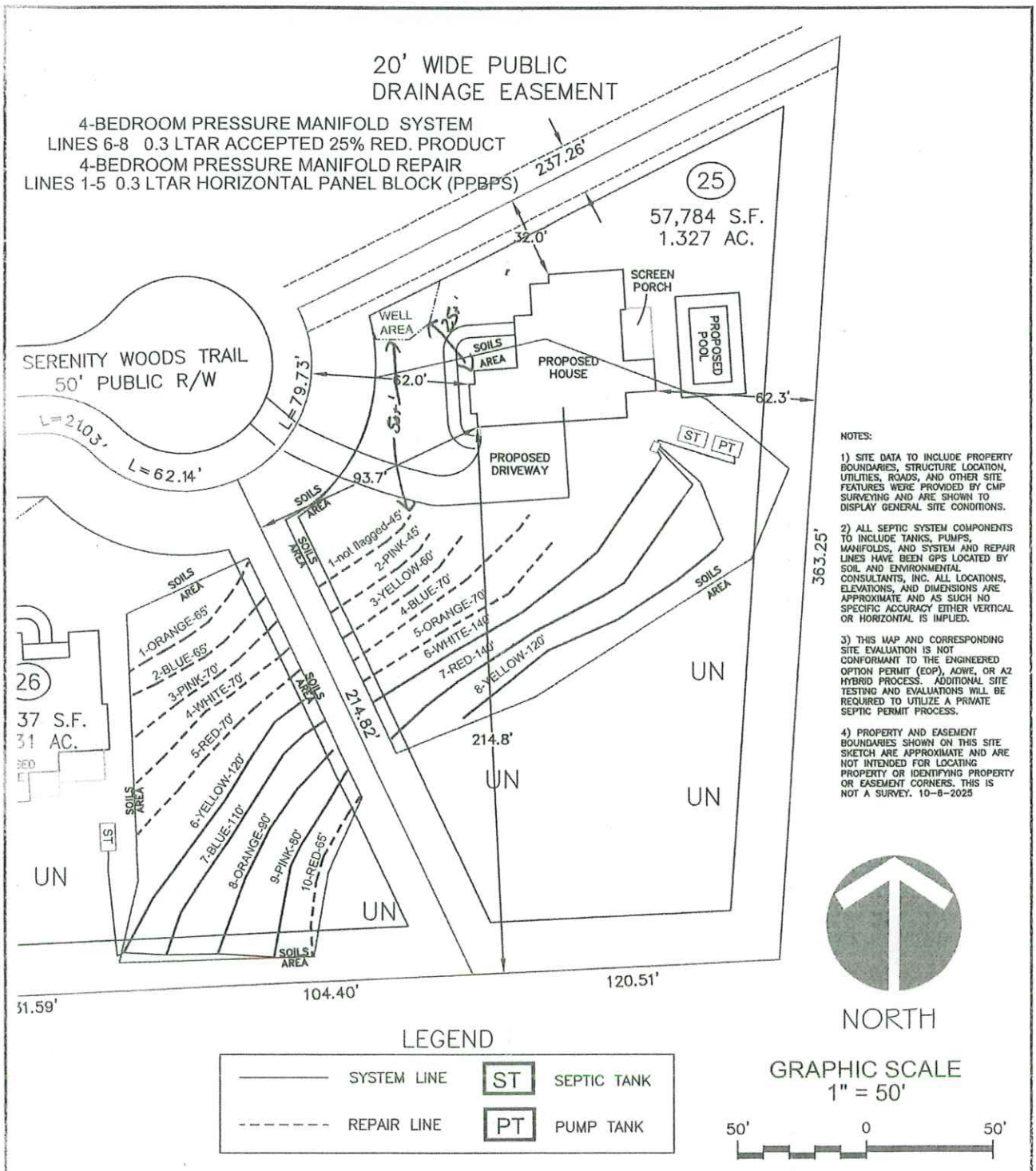
Installation inspections may be scheduled the day before or the day of installation by 9am. Contact the Environmental Health office at 919 496-8100. A revisit fee may apply if installation is not ready for inspection at the time requested. SEPTIC OPERATIONS PERMITS will be issued after installation is 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'x400' Type System Pd/Acc Max trench depth 18"

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

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

* See attached layout and tap charts designed by Soil & Environmental Consultants, Inc.



NOTES:

1) SITE DATA TO INCLUDE PROPERTY BOUNDARIES, STRUCTURE LOCATION, UTILITIES, ROADS, AND OTHER SITE FEATURES WERE PROVIDED BY CMP SURVEYING AND ARE SHOWN TO DISPLAY GENERAL SITE CONDITIONS.

2) ALL SEPTIC SYSTEM COMPONENTS TO INCLUDE TANKS, PUMPS, MANIFOLDS, AND SYSTEM AND REPAIR LINES HAVE BEEN GPS LOCATED BY SOIL AND ENVIRONMENTAL CONSULTANTS, INC. ALL LOCATIONS, ELEVATIONS, AND DIMENSIONS ARE APPROXIMATE AND AS SUCH NO SPECIFIC ACCURACY EITHER VERTICAL OR HORIZONTAL IS IMPLIED.

3) THIS MAP AND CORRESPONDING SITE EVALUATION IS NOT CONFORMANT TO THE ENGINEERED OPTION PERMIT (EOP), AOWE, OR A2 HYBRID PROCESS. ADDITIONAL SITE TESTING AND EVALUATIONS WILL BE REQUIRED TO UTILIZE A PRIVATE SEPTIC PERMIT PROCESS.

4) PROPERTY AND EASEMENT BOUNDARIES SHOWN ON THIS SITE SKETCH ARE APPROXIMATE AND ARE NOT INTENDED FOR LOCATING PROPERTY OR IDENTIFYING PROPERTY OR EASEMENT CORNERS. THIS IS NOT A SURVEY. 10-6-2025

NORTH

LEGEND

SYSTEM LINE — ST — SEPTIC TANK

REPAIR LINE — PT — PUMP TANK

GRAPHIC SCALE
1" = 50'

50' 0 50'

S&EC

Soil & Environmental Consultants, Inc.

8412 Falls of Neuse Rd., Suite 104 • Raleigh, North Carolina 27615 • www.SandEC.com
Phone: (919) 846-5900 • Fax: (919) 846-9467

Project: LOT 25 THE MANORS AT HARVEST VIEW 40 SERENITY WOODS TRAIL		Project No.: 15540.53	
		Project Manager: CC	Drawn: CC
Location: FRANKLIN CO., NC	Client: LILIUM HOMES	Scale: 1" = 50'	Field Work: MB
Sheet Title: SEPTIC LAYOUT MAP		Sheet No.: 1 of 1	