



Repair

File # _____ PIN# _____

Property Address: 105 Bunn Ave Zeb

Applicant or Owner Name: Virginia Perry

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**: 4-14-21 EHS: Lori Jones

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

Installation/grouting inspections may be scheduled the day before, or, the day of installation until 9am by contacting 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 permits 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.

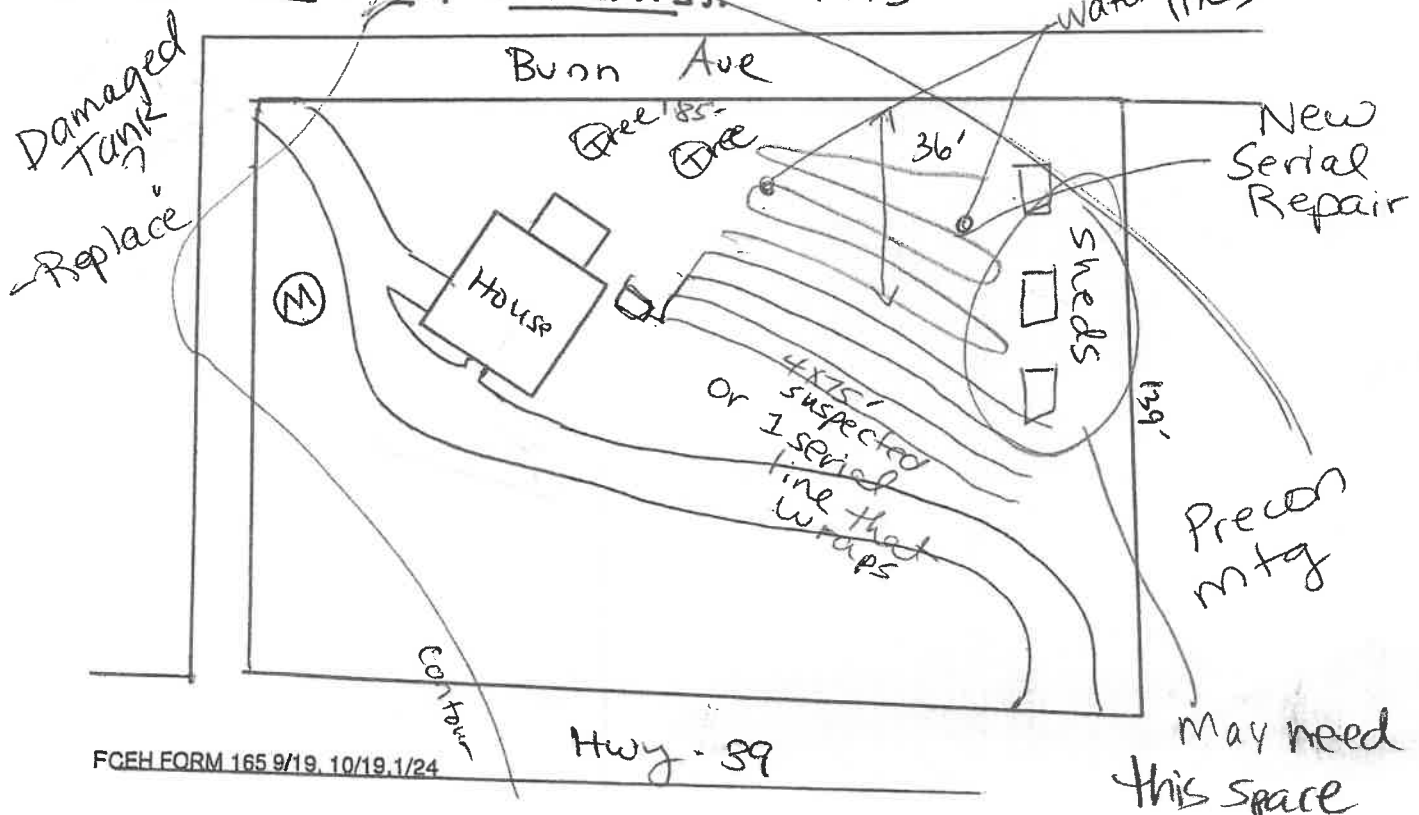
Septic Tank 1000 Pump Tank NA Drainfield 3X 300' Type System Gravity Max Trench Depth TBD

Septic Contractor _____ Septic/Pump tank dates _____ Pump Fee Paid _____

Well Contractor _____ Well Head Date: _____ Pump Final: _____ N/A (circle)

bedrooms: 3 parcel #: 000237

* Drawing not to scale; contour should be determined with laser by septic installer (contact EHS with any concerns). 1973



COUNTY OF FRANKLIN
ENVIRONMENT HEALTH APPLICATION (919)496-8100

Permit Type (PLEASE CIRCLE): <u>septic repair</u> / well abandonment		
Application Date: _____		
Project Address: <u>65 Bunn Ave Zebulon NC 27597</u>		
Location: <u>Rear yard</u>	Size/Acreage #: <u>.70</u>	
Subdivision: <u>Bunn Lake Estate</u>	Lot #: <u>5</u>	
Applicant: <u>Virginia Perry</u>	Phone: <u>919-818-4264</u>	Email: <u>ginnyperry6@gmail.com</u>
Owner Name and Address: <u>Virginia Perry</u>		
<u>10 Ray Ave Zebulon NC 27597</u>		
Pin #: <u>2716-66-5519</u>	Parcel #: <u>000237</u>	
Septic Contractor: _____		
Proposed Use: _____	# of bedrooms: <u>3</u>	# of people: _____
Year House was built: <u>1973</u>	Name of Builder: <u>N/A</u>	

Please complete all sections below

___ Yes ☒ No	___ Yes ☒ No	Does this site contain any previously identified jurisdictional wetlands?
___ Yes ☒ No	___ Yes ☒ No	Is any wastewater, other than domestic, going to be generated?
___ Yes ☒ No	___ Yes ☒ No	Is the site subject to approval by any other public agency?
*If the answer to any of the above is "yes", applicant must submit supporting documentation.		

Please indicate desired system type(s). Systems can be ranked in order of preference.	
<u>1</u> Conventional	___ Alternative ___ Innovative ___ Modified Conventional
___ Other ___ No Preference	

Reason for repair (please describe conditions): <u>Back up in bath tub</u> <u>Tank is full - water are in lines</u>	
Last date septic tank was pumped: <u>3-23-26</u>	Have lines been flagged? YES / <u>NO</u>

I hereby certify that I am the owner or authorized by the owner to act as his/her legal representation. Furthermore, as legal representative (if applicable) I have advised the owner of my intention to apply for this wastewater treatment and disposal system.

I also certify that all of the statements made in this application and any attached documents are true, complete, and correct, to the best of my knowledge and belief and are made in good faith. If information I application for improvement permit is falsified changed or site is altered, then improvement permit and authorization to construct shall become invalid. Authorized county representatives are granted right of entry to make evaluations or inspections, and to release information upon public request.

Virginia Perry
Signature of Owner or Owner's Legal Representative

Also you can contact
Mike Wrenn - Parrish Reddy
919-880-~~7050~~ 7050



Construction Authorization

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

For Office Use Only

*CDP File Number: 470412 - 1

County ID Number: 2716-66-5519

Evaluated For: REPAIR

PERMIT VALID UNTIL: 04/14/2031

☐ Open Pump System Sheet

Applicant: Virginia Perry
Address: 10 Ray Ave
City: Zebulon
State/Zip: NC 27597
Phone #: home: (919) 818-4264

Property Owner: Virginia Perry
Address: 10 Ray Ave
City: Zebulon
State/Zip: NC 27597
Phone #: home: (919) 818-4264

Property Location & Site Information

Address/Road #: 65 Bunn Ave Zebulon, NC 27597 Subdivision: Bunn Lake Estates Phase: NEW Lot:
Directions: 65 Bunn Ave
Structure: SINGLE FAMILY
of Bedrooms: 3
of People: 6
*Water Supply: EXISTING WELL

System Specifications

Usable Soil Depth: Minimum Trench Depth: Inches
Design Flow: 360 Maximum Trench Depth: Inches
Soil Application Rate: Minimum Soil Cover: Inches
*System Classification/Description: Maximum Soil Cover: Inches
*Proposed System: 25% REDUCTION *Distribution Type: GRAVITY - SERIAL
Nitrification Field: Sq. ft. Septic Tank: 1,000 Gallons
No. Drain Lines: 1 Pump Required: ☐ Yes ☒ No ☐ May Be Required
Total Trench Length: 300 ft. ☐ Inches O.C. Pump Tank: Gallons
Trench Spacing: 7 - ☒ Feet O.C. Grease Trap: Gallons
Trench Width: 3 - ☐ Inches Septic Tank Installer
Aggregate Depth: inches ☒ Feet 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:

*trench depth to be determined based on details of existing system and options

- 1- Appears tank might be compromised at surface (covers) - if so, it will be replaced
- 2- Possible 4 lines detected or 1 serial line; can be determined at more thorough investigation at dbx; would like to meet a septic contractor on site PRECONSTRUCTION MEETING: EHS AND SEPTIC CONTRACTOR
- 3- Water lines will need to be moved where possible repair can be added to existing system. Not much room for full system; need to see if any of existing system is still usable. Sheds may need to be moved for new lines.
- 4- Homeowners to see if there is a leaking/running toilet which is feeding this system constantly

* Lets camera existing
lines be 2 lines
(may that wrap
around)



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☐ Open Pump System Sheet

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: Jones, Lori

Date of Issue: 04/14/2026



Hand Drawing



Import Drawing

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

Total Time : (HH:MM)