

Existing System Release

PARCEL 87847

PERMIT NUMBER WLS2024-111082

Owner Christina Nussbaum

Location 7145 Stokestown St. John Rd, Ayden NC 28513

Tank Size	<u>Existing 1000 gal.</u>	System Type	<u>IIB</u>
Pump Tank	<u>-</u>	Nitrification Field	<u>Existing Eq. 600 Sq. ft</u>
Grease Trap	<u>-</u>	Estimated Flow	<u>480 gpd</u>
Max # of Occupants	<u>8</u>	# of Bedrooms	<u>4</u>

Remarks Proposed pool location meets required setbacks from septic. No signs of failure in septic system on day of evaluation. Maintain +15' off of any part of the septic system (and repair area) and the pool.

Reference Permits POP2022-100030

Scale: -

Date of Evaluation 3/11/2024



Issued By: Jared P Dixon

Date of Issue: 3/13/2024



PITT COUNTY
ENVIRONMENTAL HEALTH
 1717 W. 5th Street
 Greenville, NC 27834-1696
 Office (252) 902-3200
 Fax (252) 902-3208

APPLICATION FOR EXISTING SYSTEM RELEASE

Appointment Requested:
Date Site Ready: 2/21/2024
Fees Paid: Yes

Application Date: 02/21/2024

Project Number: PRJ2024-135099

Application Number: WLS2024-111082

Applicant:
 ELITE POOLS SPAS & HARDSCAPES
 BRIAN SCHUTZ
 1842 PROGRESS RD
 GREENVILLE, NC 27834
 (252) 689-6557

Owner:
 JAMIE WORTHINGTON
 NUSSBAUM CHRISTINA
 804 BREMERTON DRIVE
 GREENVILLE, NC 27858

*NTP issued
 2-29-24
 (Signature)*

*No FP
 No RD
 TS
 2/29/24*

Site Address: 7145 STOKESTOWN-ST. JOHNS RD AYDEN, NC 28513

Tax Parcel #(s): 87847

Subdivision Name:

Lot #:

Block/Phase:

Directions to Site: Directions - Total Distance: 18.82; Start at 1717 W 5th ST.; Go north on HOSPITAL DR toward W 6TH ST; Turn right on W 6TH ST; Turn right on S MEMORIAL DR; Turn left on DICKINSON AV; Turn right on TRUMAN ST; Turn left on MAY ST; Turn right on HOOKER RD; Turn left on E ARLINGTON BV; Continue on COUNTY HOME RD; Turn right on STOKESTOWN-ST. JOHNS RD; Finish at 7145 STOKESTOWN-ST. JOHNS RD , on the left;

Water Supply:

Are there any existing wells or springs on this property?

Type Use: Swimming/Wading Pool/Spa

If Residential

Proposed # of Bedrooms:

Existing # of Bedrooms:

If Commercial

of Children:

of Employees:

of Seats:

Release Conditions:

It is the responsibility of the owner to maintain a 5' minimum setback between the wastewater system and any part of the structure foundation, including porches, decks, and any other appurtenances. If you are unsure as to the exact location of the septic system, please have a licensed installer or inspector locate the septic system for you. The local county health department in no way implies that the proposed construction meets the required setbacks from the septic system unless otherwise noted. This release only shows that this property has an approved wastewater system that appears to have met the permitting requirements at the time it was installed.

This release in no way expresses or implies that the existing subsurface sewage treatment and disposal system serving the site will continue to function for any period of time.

I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed. If the information in the application for an Existing System Release is falsified, changed, or the site is altered, then the Existing System Release shall become invalid.

SEE APPLICATION FOR SIGNATURE

2/21/2024

Applicant/Legal Representative Signature

Date

Application Valid for Six (6) Months

*** DRAWING ATTACHED ***



**PITT COUNTY
ENVIRONMENTAL HEALTH**
1717 W. 5th Street
Greenville, NC 27834-1696
Office (252) 902-3200
Fax (252) 902-3208

APPLICATION FOR EXISTING SYSTEM RELEASE

Appointment Requested: *WS2024-111082*
Date Site Ready:
Fees Paid: *2-21-24*

Application Date: Project Number:

Application Number:

PAID
TOY

Applicant: *Elite Pools Spas & Hardscapes*

Owner: *Christina Nussbaum*

Site Address: *7145 Stokesstown St. John Rd. Ayden NC 28513* Tax Parcel #(s): *87847*

Subdivision Name: Lot #: Block/Phase:

Directions to Site:

Water Supply: *Eastern Pines*

Are there any existing wells or springs on this property? *No*

Type Use:

If Residential Proposed # of Bedrooms: Existing # of Bedrooms: *4*

If Commercial # of Children: # of Employees: # of Seats:

Release Conditions:

It is the responsibility of the owner to maintain a 5' minimum setback between the wastewater system and any part of the structure foundation, including porches, decks, and any other appurtenances. If you are unsure as to the exact location of the septic system, please have a licensed installer or inspector locate the septic system for you. The local county health department in no way implies that the proposed construction meets the required setbacks from the septic system unless otherwise noted. This release only shows that this property has an approved wastewater system that appears to have met the permitting requirements at the time it was installed.

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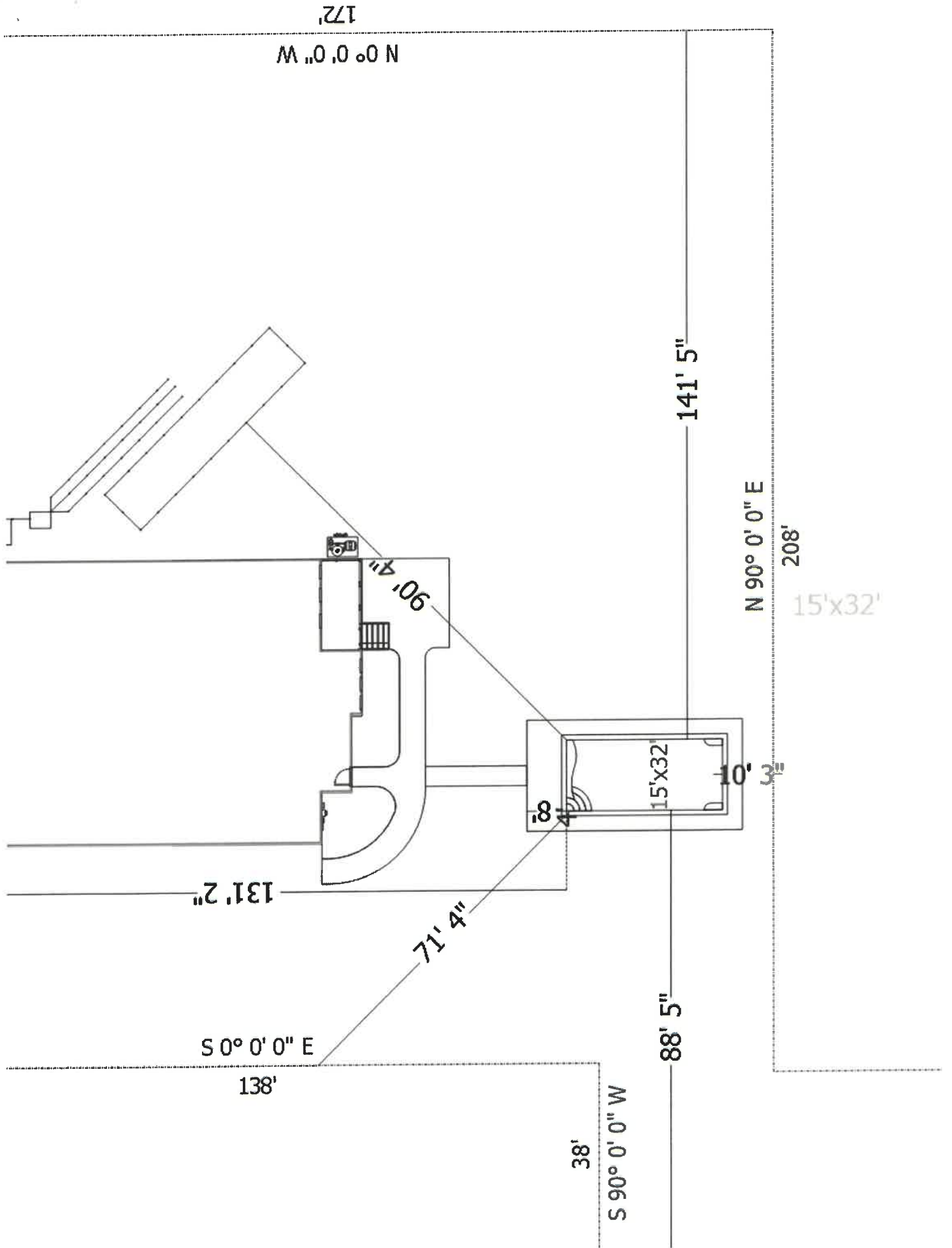
I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed. If the information in the application for an Existing System Release is falsified, changed, or the site is altered, then the Existing System Release shall become invalid.

[Signature]
Applicant/Legal Representative Signature

2/21/24
Date

Application Valid for Six (6) Months

*** DRAWING ATTACHED ***



Flynn, Lisinda

From: JP Lamphere <jplamphere@elitepoolsnc.com>
Sent: Wednesday, February 21, 2024 9:49 AM
To: Pitt County Environmental Health
Subject: Existing System Release
Attachments: Screenshot 2024-02-13 135802.png; 20240220_182103.jpg; PITT COUNTY (6).pdf

EXTERNAL EMAIL: This email originated from outside of Pitt County Government. Do not click any links or open any attachments unless you trust the sender and know the content is safe.

Good Morning,

Attached is an application for an Existing System Release and supporting documentation. If you have any questions please let me know.

Thank you,

JP Lamphere
Elite Pools
252-689-6557



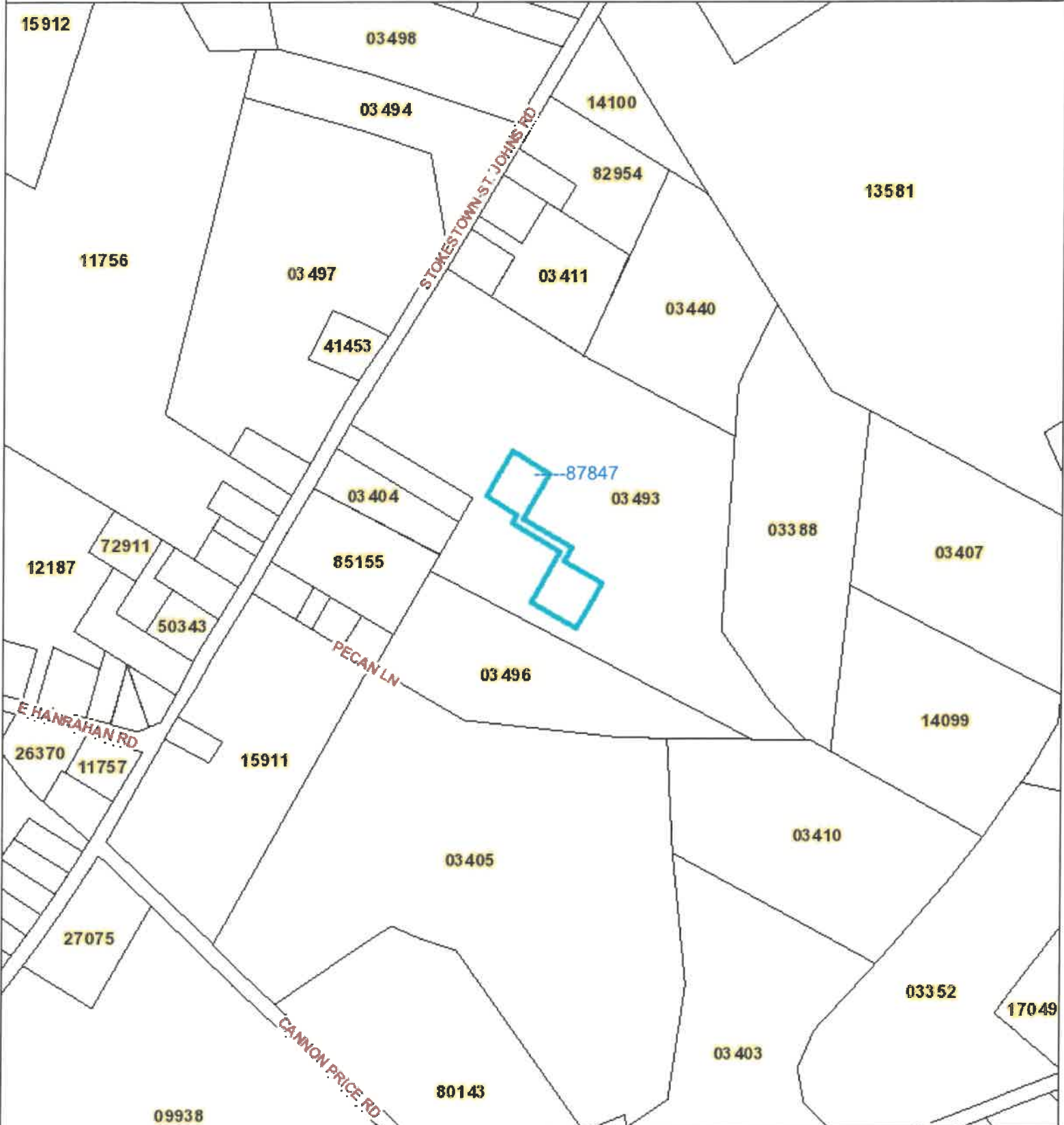
Pitt County Environmental Health

JD

jplamphere@elitepoolsnc.com

1717 W. Fifth St.
Greenville, NC 27834
252-902-3200

Application # **WLS2024-111082**



POP2022-100030

1 inch = 520 feet

Applicant: _____ Date: _____

This map is furnished by Pitt County for illustration purposes only. This map is NOT a certified survey.



**PITT COUNTY
PLANNING DEPARTMENT
DEVELOPMENT SERVICES BUILDING**
1717 W. 5TH STREET
GREENVILLE, NORTH CAROLINA 27834-1696
TELEPHONE: (252) 902-3250
FAX: (252) 830-2576

JAMES F. RHODES, AICP
DIRECTOR

Notice to Proceed with Environmental Health Application

Application Number: ZPT2024-114679 **Project Number:** PRJ2024-135099

Owner/Applicant Name: ELITE POOLS SPAS & HARDSCAPES **Jurisdiction:** Pitt County

State Road: SR 1753 STOKESTOWN-ST JOHNS ROAD **Parcel Number:** 87847

Legal Description:

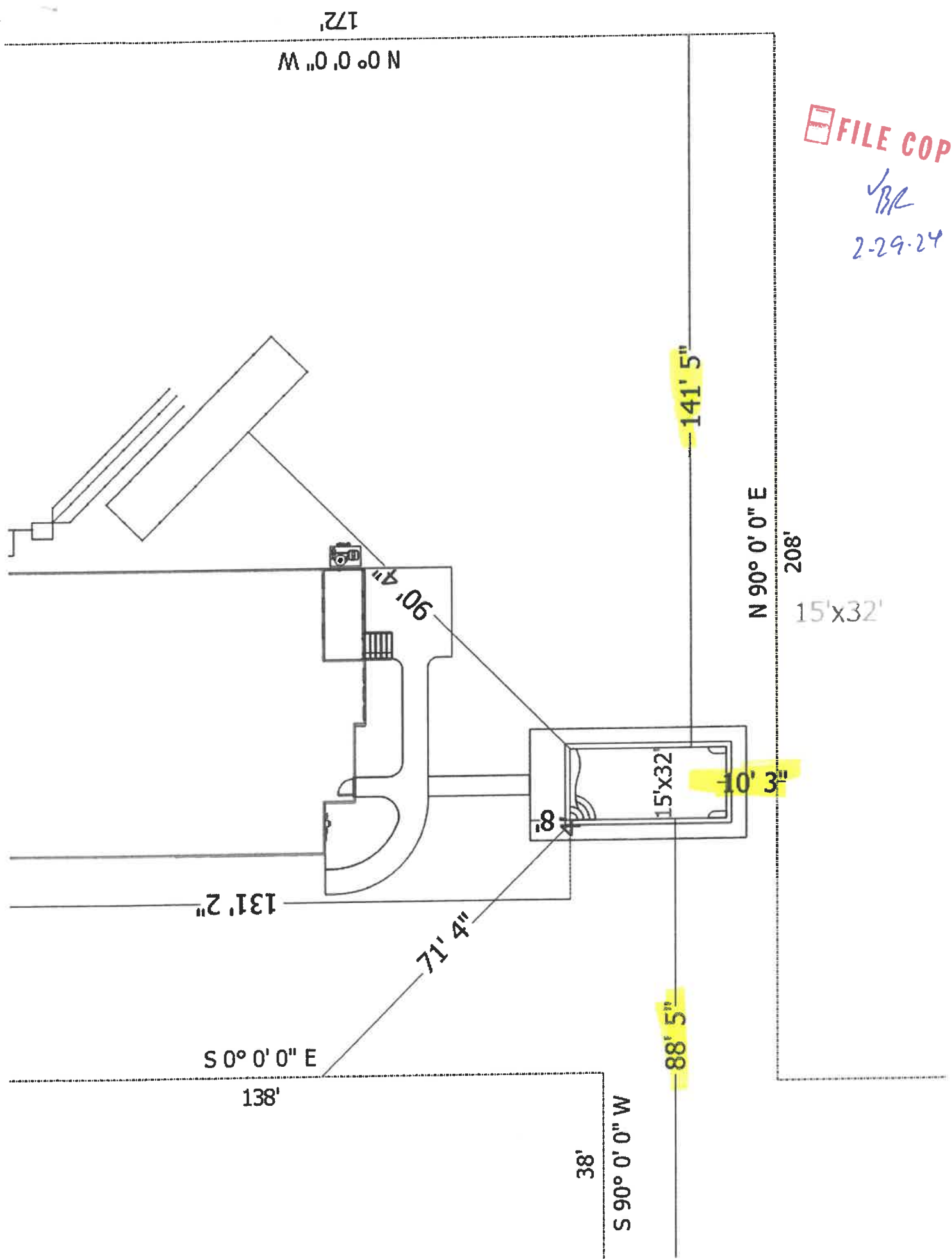
Zoning District: <u>RA (Rural Agricultural)</u>	Setbacks: Front	<u>10</u>
Riparian Buffer: <u>N</u>	Rear	<u>10</u>
Overlay District:	Side	<u>10</u>
	SideOnCorner	
Proposed Use: <u>RESIDENTIAL POOL</u>	Corner	

Conditions: When a property is served by a septic system, issuance of a Zoning Permit is contingent upon Environmental Health approval. Furthermore, all Pitt County Zoning regulations must be met prior to issuance.

Comments: 15X32 RESIDENTIAL POOL W BARRIER

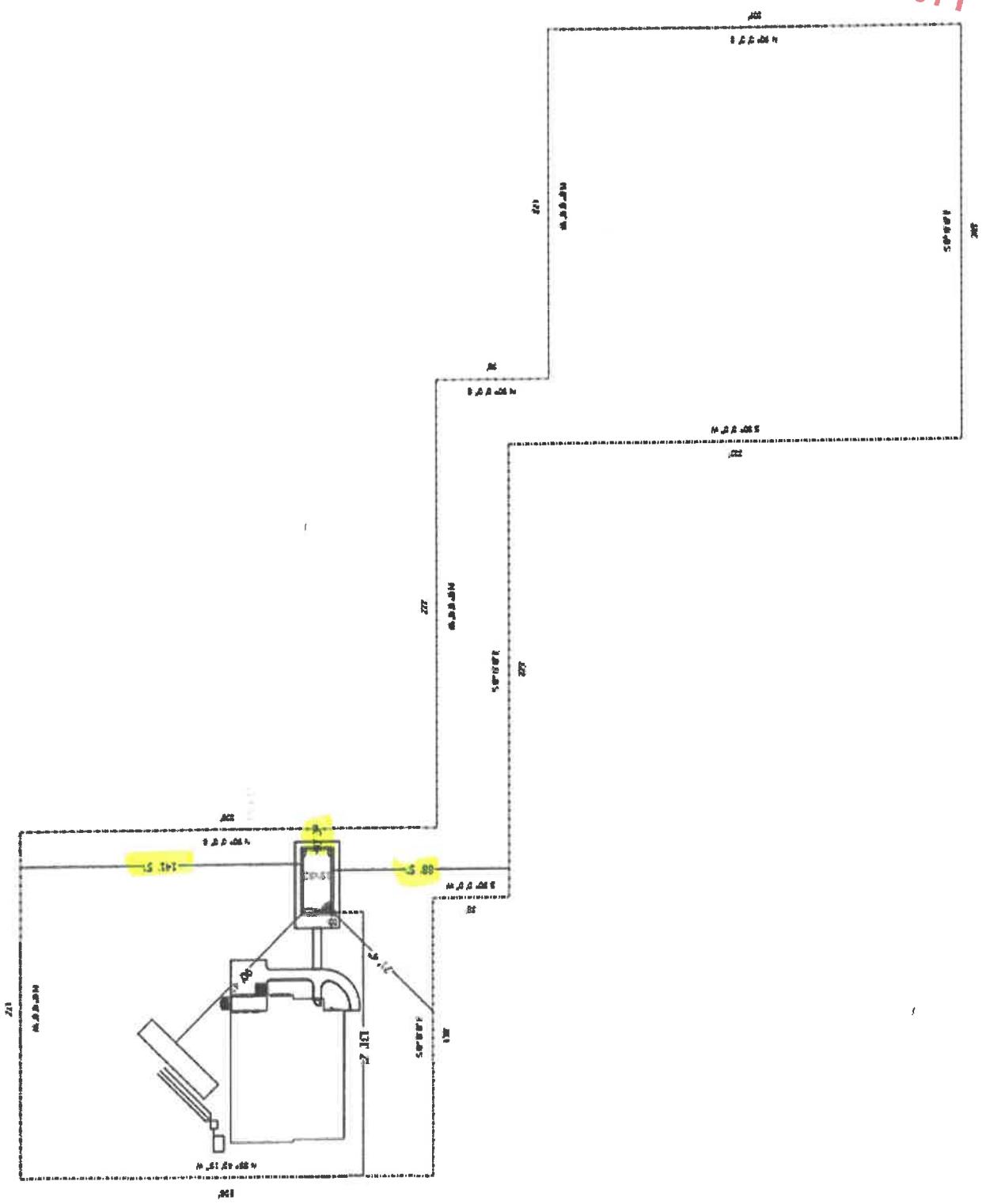
Authorized Signature Ben Ryz **Date** 2-29-24

FILE COPY
✓BR
2-29-24



✓ BR
2-29-24

FILE COPY



OWNER'S CONSENT FORM

Consent is required from the property owner(s) if an agent will act on their behalf. Consent is valid for one year from date of application, unless otherwise specified. All fields must be completed.

Project Name: Nussbaum Pool Address or PIN #: 87847

If existing septic system will be in use: Number of bedrooms inside dwelling 4
Maximum number of occupants _____

AGENT/APPLICANT INFORMATION:

Elite Pools Spas & Hardscapes

(Name - type, print clearly)

1841 Proxton Rd

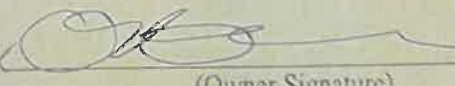
(Address)

Greenville, NC 27834

(City, State, Zip)

I hereby give CONSENT to the above referenced agent/applicant to act on my behalf, to submit applications, fees and all required materials, documents and to attend and represent me at all meetings and public hearings pertaining to the following processes (list applicable requests): Furthermore, I hereby give consent to the party designated above to agree to all terms and conditions which may arise as part of the approval of this application and the issuance of Environmental Health permits. I hereby certify that I have authority to execute this consent form as/on behalf of the property owner. I understand that any false, inaccurate or incomplete information provided by me or my agent will result in the denial, revocation or administrative withdrawal of this application, request, approval or permits. I further agree to all terms and conditions which may be imposed as part of the approval of this application.

OWNER(S) AUTHORIZATION:

Christina Nussbaum 920-585-0342 

(Owner Name - print clearly)

(Phone #)

(Owner Signature)

(Owner Name - print clearly)

(Phone #)

(Owner Signature)

(Owner Name - print clearly)

(Phone #)

(Owner Signature)