



# Brunswick County Health Services

25 Courthouse Drive N.E.; Post Office Box 9  
Bolivia, North Carolina 28422-0009  
910-253-2250 1-888-428-4429



*David M. Stanley III, Executive Director  
Health and Human Services Agency*

*Cris Harvelson, Director  
Department of Health Services*

**Date: 11/17/2017**

**BCHS # 2017072902**

**Tax Parcel # 1951A021**

**Applicant: Est of Barrie E. Finnemeyer/James Finnemeyer**

**Address: c/o Conver 1800 Pennbrook Parkway, Suite 200**

**Lansdale, PA 19446**

**Facility Description:**

Name of owner: Est of Barrie E. Finnemeyer

Address/Location: 906 Grove Circle, Ocean Isle Beach, NC 28469

Type of Facility: 3 Bedroom Residential House

Number of Occupants: 6 Maximum

Dear Est of Barrie E Finnemeyer/James Finnemeyer:

As requested on your application, an Improvement Permit for a wastewater collection, treatment, and disposal system has been issued and may be obtained once all applicable fees have been paid. Please submit pump plans to this office for the site listed above using the design criteria below. These plans must be reviewed and approved prior to the issuance of the Construction Authorization Permit.

**Design Criteria:**

Site served: 3 Bedroom Residential House

Design flow rate: 3 Bedrooms X 120gal/br = 360gpd

Loading rate (LTAR): 0.3

System type: IVA-Low Pressure Pipe

Trench depth: 18"

Pump system: Pump to Low Pressure Pipe Manifold

Number of lines: 4

Length of lines: 60'

**Additional Criteria:**

- 1) Septic System must be located in specified area (see site plan attached to Improvement Permit)
- 2) Septic System must meet all setbacks
- 3) Fill shall be installed in accordance with the fill plan prior to the issuance of the Construction Authorization Permit.
- 4) This wastewater system will require a contract with a NC Certified Subsurface Operator prior to the issuance of the Operation Permit.

If you have any questions, please contact the BCCHS at 910-253-2150.

Sincerely,

  
\_\_\_\_\_  
Jason Gore

**Brunswick County Health Department  
Environmental Health Section  
Wastewater Collection, Treatment  
And Subsurface Disposal System**

**Application # 2017072902  
Tax Parcel # 1951A021  
Type: IVA**

**IMPROVEMENT PERMIT  
FOR WASTEWATER COLLECTION, TREATMENT, AND DISPOSAL  
SYSTEM**

In accordance with the provisions of Article 11 of Chapter 130A, General Statutes of North Carolina, 15A NCAC 18A.1900 et seq., and other applicable Laws and Rules

**PERMISSION IS HEREBY GRANTED TO:**

**Applicant: Est. of Barrie E. Finnemeyer/James Finnemeyer  
Address: c/o Conver 1800 Pennbrook Parkway, Suite 200  
Lansdale, PA 19446  
Phone: 215-362-2474**

FOR THE  
Installation of a wastewater collection, treatment, and disposal system to serve:

**Residential: X    Bedroom: 3    Commercial: NA    Employees: NA    Max Occupancy: 6  
Comments/Use: 3 Bedroom Residential House**

Pursuant to 15A NCAC 18A.1900 as amended and in conformity with the application and other supporting data subsequently filed and approved by the DEHNR/ or the Brunswick County Health Department and considered a part of this permit.

**Facility to be served: 3 Bedroom Residential House  
GIS Address: 906 Grove Circle, Ocean Isle Beach, NC 28469  
Lot 14, Block B, Forest Grove  
Description: LPP-Low Pressure Pipe System**

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The owner shall be subject to the following conditions, limitations, and construction requirements for the installation and operation of this system:

1. This permit is effective only with respect to the specific design flow facilities, and the nature and volume of waste described in the Permit Application, and other supporting data. Changes in the proposed use, waste flow, nature or volume of waste render this Permit void.
2. All documents, including but no limited to site evaluation, design review plans and specifications, Triparty Agreements, Easements, and other legal agreements will become a part of the Permit. This includes operation and maintenance procedures and other pertinent documents relating to system operation and maintenance.  
**All legal documents must be recorded with the Brunswick County Register of Deeds, and proof of filing submitted before the Operations Permit or Authorization to Construct is issued, conditional on recordation and enforcement of easement.**

- 3. The issuance of this permit does not preclude the permittee from complying with any and all statues, regulation, or ordinances, which may be imposed by other government agencies which have jurisdiction, or any other permits issued by this department.
- 4. The permit shall become invalid if the information submitted in the application was falsified or changed, if the permit was based on inaccurate or incomplete information, or if the designated site is altered.
- 5. Before Authorization to Construct a Wastewater Treatment and Disposal System is issued, all site modifications, plans, specifications, draft legal paperwork must be completed and approved.
- 6. Sites requiring complex designs for wastewater systems may require approval of plans and specifications before the Improvements Permit is issued.
- 7. Must meet following criteria:
  - a. **System is permitted for a IVA system**
  - b. **Septic System must meet all setbacks (See Attached Drawing)**
  - c. **Pump plans must be submitted prior to approval**
  - d. **Fill shall be installed in accordance with the attached fill plan prior to the issuance of the Construction Authorization**

PERMIT ISSUED THIS 17th DAY OF November, 2017.

DATE OF PERMIT EXPIRATION 11/17/22

BRUNSWICK COUNTY HEALTH DEPARTMENT ENVIRONMENTAL  
HEALTH DIVISION



\_\_\_\_\_  
Jason Gore

BRUNSWICK COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH DIVISION  
PO BOX 9, BOLIVIA, NC 28422

CONVENTIONAL FILL WASTEWATER SYSTEM

**Fill**

In some cases your property can be modified in order to install a conventional or modified conventional septic tank system. A commonly accepted Site Modification is the use of fill.

Fill is a specific amount of soil (sand to sandy loam) placed in an area designated for the septic system to overcome limitations of the soil and site due to shallow soils, shallow seasonal high water tables, restrictive soil horizons and other soil characteristics. Fill can be placed on a site to raise the area for the nitrification drain lines. The area and depth of the fill will vary due to the limiting soil condition.

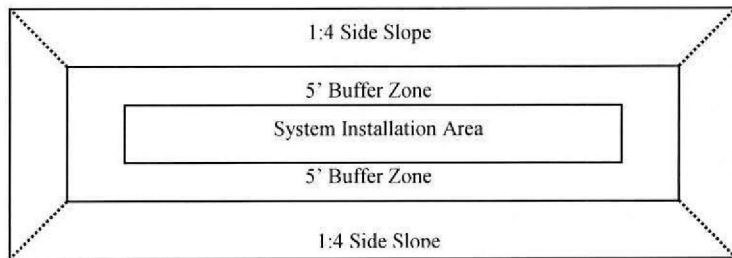
The following fill plan is for your proposed site and may be subjected to revision if the information changes on your Improvement Permit.

Fill Plan for EST OF BARRIE E. FINNEMEYER / JAMES FINNEMEYER

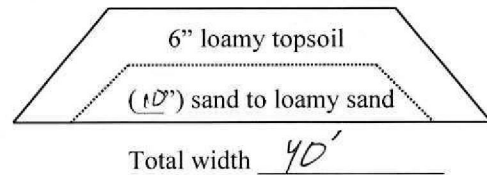
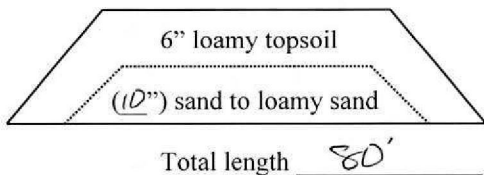
Fill Proposal by JASON GOSS Date 11/17/17

- Design Flow/day 360
- Application rate .3
- Total depth of fill 16"
- Total area of fill 40' x 80'
- 1. System and Buffer zone 30' x 90'
- 2. Length of Side slope 5'

Top view (not to scale)



Cross sections (not to scale)



**Fill Procedure:**

1. Prior to installation of fill, remove vegetation and root mat and disk fill area
2. After the addition of 4" to 6" of sand or loamy sand fill, disk fill site again to provide a mix of fill and natural soil to a depth of 6" below the natural ground surface.
3. Add enough additional sand or loamy sand fill to achieve a depth of (    " ) in system installation and buffer zone area. This area including side slopes shall be covered with an additional 6" of fine textured soil (group II or group III) to establish vegetative ground cover after system is installed at grade. Total depth of fill is (    " ).
4. Construct a 1:4 side slope as shown from the top edge of the fill tapered down to the natural ground surface.
5. Achieve level grade along long axis of fill.
6. The fill system shall be shaped to shed surface water.
7. Call for re-inspection by Health Department.
8. After installation of the sewage system, the fill area shall be reshaped to shed surface water and seeded with grass and covered with hay, pine straw or an approved landscape fabric to establish vegetative ground cover.

Notes: Home site may need to be modified/raised to insure gravity flow to system. Any setbacks required are measured from the outer edge of the fill.

EHS Signature \_\_\_\_\_ Date \_\_\_\_\_

This signature affirms that the fill as described above has been checked and approved by the above Environmental Health Specialist.

\*\*\*\*\* SEE FILL PLAN SKETCH \*\*\*\*\*

FILL PAD MUST BE INSTALLED IN AREA DESIGNATED BY HEALTH DEPT

Fill Plan By: JASON GORE  
Date: 11/17/17

Environmental Health File No. 2017072902

**Brunswick County Health Department**  
*Fill Plan Sketch (Not to Scale)*

Fill pad must be located in specific area indicated. Variations may result in the revocation of the Improvement Permit.

\*\*\*Not to Scale!!!\*\*\*

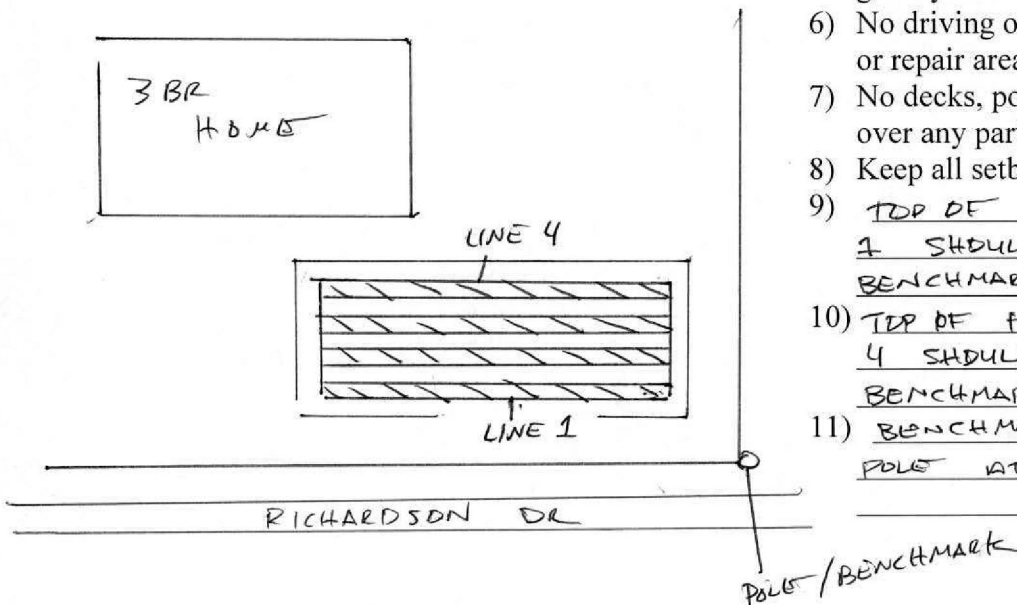
**SYSTEM REQUIREMENTS:**

System Type: ITA  
Number of Bedrooms: 3  
Type of Business: —  
Number of Employees: 6 OCCUPANTS MAX.  
Septic Tank Size: 900  
LTAR: .3 Sq. Ft. 1200  
No. Lines: 4 Length Ea. 60'  
Line Width: 24" Line Center: 5'  
Line Depth: 18"  
Fill Depth: 16"  
Fill Area: 40' X 80'

\*SEE ATTACHED SITE PLAN \*

**CONDITIONS!!!**

- 1) Read fill plan very carefully!
- 2) Properly prepare approved septic location for required fill to be added.
- 3) Landscaping of site by addition of fill only!
- 4) Place fill on site in EXACT location shown. LEVEL surface of fill over system area and buffer zone. Slope as required. Call for a FILL CHECK when ready.
- 5) Raise plumbing of structure to allow sufficient gravity flow to septic system in fill.
- 6) No driving over any part of the septic system or repair area!!!
- 7) No decks, porches, sheds, patios, pools, etc. over any part of septic system or repair area.
- 8) Keep all setbacks as shown!!!
- 9) TOP OF FILL PAD AT LINE 1 SHOULD BE 12.5" BELOW BENCHMARK
- 10) TOP OF FILL PAD AT LINE 4 SHOULD BE 27-25" BELOW BENCHMARK
- 11) BENCHMARK IS NAIL IN POWER POLE AT FRONT RIGHT CORNER





BRUNSWICK COUNTY HEALTH

BCHD File No: 2017072902

Well Permit

County Code:

Permit Subject to Revocation if Site Plan or intended Use Changes.

New Repair Abandonment

Owner/ Legal Representative: EST OF BARRIE E FINNEMEYER/ FINNEMEYER H JAMES

Tax Parcel: 1951A021 GIS Address: 906 GROVE CIR NW 28469

Mailing Address: 1800 PENNBROOK PARKWAY SUITE 200 LANSDALE PA 19446 Subdivision: FOREST GROVE

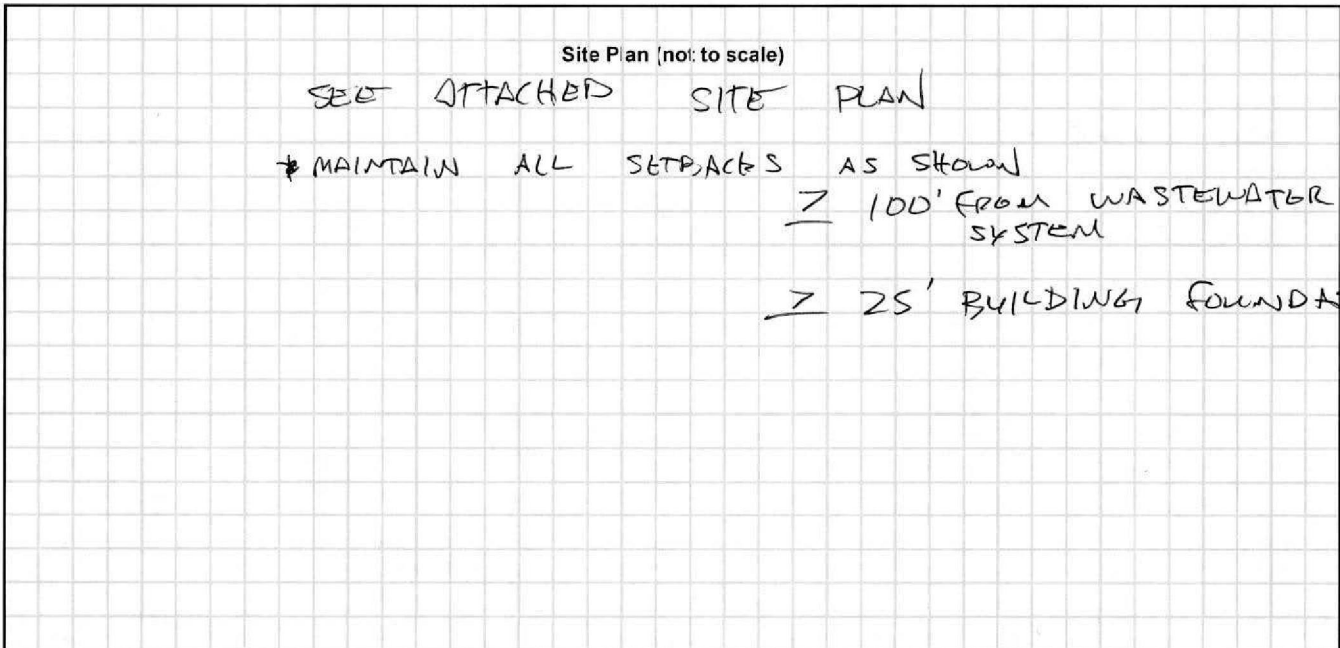
Telephone: 2153622474

Lot: 14 Block: B Section:

See the attached Site Plan for the well location

Well must be installed in accordance with the Brunswick County Well Ordinance and the North Carolina Well Construction Standards ( 15A NCAC 2C)

See Reverse Required Minimum Setback Distances



well shall be constructed with a minimum of 35 feet of casing if the well is located less than 100 feet from any part of a septic system

Signature of Authorized Agent: [Signature] Permit Issue Date: 11/17/17 (PERMIT EXPIRES 5 YEARS FROM DATE OF ISSUE)

Grout Inspection: Date: OR

Contractor Certification for Grouting Not Witnessed By Department: Date:

Well Abandoned By: Date:

CERTIFICATE OF COMPLETION

Well Installer: Certification No.: Date Installed:

GPS Coordinates:

Signature of Authorized Agent: Date:

Construction has been completed, a Residential Well Construction Record Form GW-1a has been submitted, and inspections have been completed in accordance with 15A NCAC 02C.

Issuance of Certificate of Completion is not to be taken as a guarantee of the quality of water obtained from this private water supply well.

Owner/Authorized Agent must contact BCHD for collection of water sample after the well has been properly disinfected and electrical power is provided. To request sample, call 253-2150 or 1-888-428-4429.