

CONSTRUCTION AUTHORIZATION



Lenoir County Health Department
110 S Queen St.
Kinston, NC 28501
Phone: (252) 526-4248

For Office Use Only	
CDP File Number:	<u>453302 - 1</u>
PIN Number:	_____
Evaluated For:	<u>NEW</u>

PERMIT VALID UNTIL: 07/22/2030

Applicant: Gammon Construction
 Address: 4787 Hwy 70 East
 City: Princeton
 State/ZIP: NC 27569
 Phone #: _____

Property Owner: Gammon Construction
 Address: 4787 Hwy 70 East
 City: Princeton
 State/ZIP: NC 27569
 Phone #: _____

Address: 1774 Walnut Run Dr **Property Location & Site Information**
 Road #: Deep Run, NC 28525 Subdivision: Walnut Run Phase: _____ Lot: 34
 Township: _____ **Directions**
 Structure: SINGLE FAMILY 1774 Walnut Run Dr
 # of Bedrooms: 3
 # of People: _____
 Water Supply: PUBLIC

System Specifications

Usable Soil Depth: <u>48"</u>	Minimum Trench Depth: _____ Inches
Saprolite System: <u>No</u>	Maximum Trench Depth: <u>26</u> Inches
Design Flow: <u>360</u>	Minimum Soil Cover: _____ Inches "natural Ground Level"
Soil Application Rate: <u>.5</u>	Maximum Soil Cover: _____ Inches "natural Ground Level"
System Classification/Description: <u>TYPE II A. CONV SYSTEM (SINGLE-FAMILY OR 480 GPD OR LESS)</u>	Distribution Type: <u>GRAVITY - PARALLEL (eq. d-box)</u>
Proposed System: <u>CONVENTIONAL</u>	Septic Tank: <u>1000</u> Gallons
Nitrification Field: <u>720</u> Sq. Ft.	Pump Required: <u>May be required</u>
No. Drain Lines: <u>4</u>	Pump Tank: _____ Gallons
Total Trench Length: <u>60ft.</u>	Grease Trap: _____ Gallons
Trench Spacing: <u>9Feet O.C.</u>	Septic Tank Installer Grade Level Required: _____
Trench Width: <u>3Feet</u>	
Aggregate Depth: <u>12 inches</u>	

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 Gravity flow shall be achieved or pump system shall be required.
 System area and repair area shall be protected from vehicular traffic.

This Authorization for Wastewater System Construction shall be valid for a person equal to the period of validity of the Improvement Permit, not to exceed five years, 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 is found to have been incorrect, falsified or changed, or the site is altered, the permit or Construction Authorization shall become invalid, and may be suspended or revoked (per rule .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: 1362 - Beamon, T.C. Date of Issue: 07/22/2025
 Authorized State Agent Signature: TC Beamon
 Owner/Applicant Signature: _____