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## **OPERATION PERMIT**

Beaufort County Health Department

**Environmental Health Section** 

220 North Market St.

Washington

NC

27889

Phone: 252-946-6048 Fax: 252-946-2074

OTHER

roperty Owner:

John Venters, Jr.

Address:

1127 Old New Bern Road

City: Chocowinity

State/Zip:

NC

27817

27817

Lot:

Phone #:

(252) 623-7420

Address Road # Township:

Subdivision:

1127 Old New Bern Road

Chocowinity

Phase:

Structure:

# of Bedrooms:

\*CDP File Number

County ID Number:

Evaluated For:

# of People:

**PUBLIC** Water Supply:

Saprolite System?

Yes X No Pump Required? Yes X No

Page 1 of 2

Character Remainin 3972

Characte

4000

4000

4000

1 Ø Ø Design Flow:

System Classification/Description:

TYPE II C. CONV. SYSTEM WITH SHALLOW PLACEMENT

For Office Use Only

276422 - 2

5652808309

**NEW** 

Installer:

Michael Broadway

Specific System

Quik-4 Chambers

Installed:

11 STB:

PT:

Comments:

See attachment for as built.

5270 Certification #:

Septic Tank Date: 0 3 / 2 3 / 2 0 2 0

Pump Tank Date:

/ /

This system has been installed in compliance with applicable NC General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.

# PERMIT CONDITIONS:

I. Performance: System shall perform in accordance with Rule .1961.

II. Monitoring: As required by Rule .1961.

III. Maintenance: Ground absorption sewage treatment and disposal systems shall be checked, and the contents of the septic tank removed, periodically from all compartments, to ensure proper operation of the system. The contents shall be pumped whenever the solids level is found to be more than 1/3 of the liquid depth in any compartment.

Other:

⊗ No Subsurface Operator Required ○ Yes

If yes, see attached sheet for additional operation conditions, maintenance and reporting.

Operation:

Other:

Date of Issue: 0 6 / 1 2 / 2 0 2 0

**As-Built Drawing Attached** 

O Saprolite System?

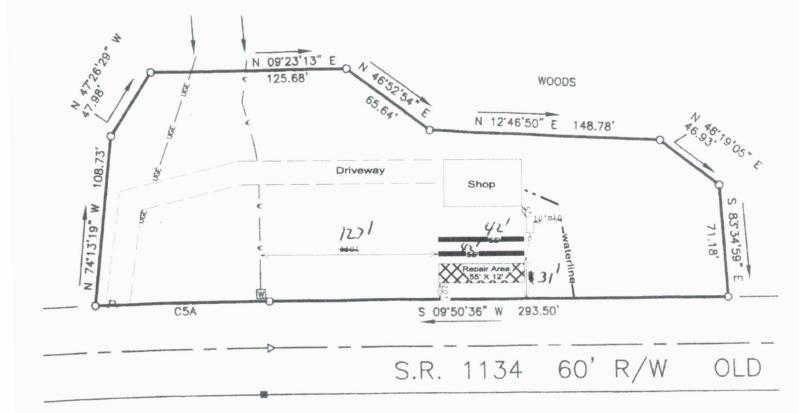
Authorized State Agent: 2319 - Dahlem, Blake Authorized State Agent Signature:

Owner/Applicant Signature:

OP Checklist

Hand Drawing

Import Drawing



60.00 feet 1:720

**IMPROVEMENT PERMIT** 

beautort County Flean	iii Departi	Hent
Environmental Health	Section	
220 North Market St.		
Washington	NC	2788

For Office Use Only Page 1 of 2 \*CDP File Number 276422 - 2 5652808309 County ID Number:

Car Char votes	bit	NO 07000		Evaluated For:	NEV	V	
	ashington	NC 27889		PERMIT VAI	ID LINTII ·	Ø 1 / 1	29/2025
	none: 252-946-6048				,	Fill S	
	SPECTIONS DIVISION: John Venters, Jr.	Building Permits can	not be issued with				heet ⊗CA?
Applicant.	10556 Hwy 17		Property	Owner.	Venters, Jr.		
7,001000.	Vanceboro		Address	1127	Old New Be	rn Road	
			City:	Choco	owinity		
1 (E. 15.7% - 0.6.15/c) 3 (Fine-4.0.) ■ (1.4.1)	NC	28586	State/Zip	: NC			27817
T Hono III	(252) 623-7470		Phone #	(252)	623-7420		
Address 1127 Old New E			cation & Site Info	rmation			
Road # Chocowinity	NC 27817	Subdivision:			Phase:		Lot:
Township:			Directions				
Structure: C	OTHER		17 toward Wilm 1 mile on right	ar, left at H & H	Golf Cart s	ign, right o	on Old New Bern,
# of Bedrooms:			i mile on right				
# of People:							
*Water Supply: P	PUBLIC						
Initial System		Syst	em Specification	S			
*Site Classification:	PS @ Grade w/Cap						
Saprolite System?	○Yes ⊗No		Minimum Tre	ench Denth		1 2	Inches
Design Flow:	100						
Soil Group:	III		Maximum Tr	ench Depth:		1,2	Inches
Soil Application Rate:	0.3		Fill Depth:				Inches
		-	Septic Tank:		1	Ø Ø Ø	Gallons
*System Classification TYPE II C. CONV.	SYSTEM WITH SHALL	OW PLACEMENT	Pump Requi	red:	Yes	○ No	May Be Required
*Proposed System	: CONVENTIONAL		Pump Tank:		1	0 0 0	Gallons
Repair System Required	d: ⊗Yes ○N	lo No, but has	Available Space				
Repair System							
*Site Classification:	PS @ Grade w/Cap		Minimum Tre	nch Depth:		1,2	Inches
Soil Application Rate:	Ø . 3	_	Maximum Tr	ench Depth:		1,2	Inches
*System Classificati	ion/Description: . SYSTEM WITH SHALL	OW PLACEMENT	Fill Depth:				Inches
			Pump Requi	·ed:	Yes	No	May be Required
*Proposed System:	: CONVENTIONAL		Pump Tank:		1	0 0 0	Gallons
No	grading or construction	activity is allowed in a	reas designated fo	r system and repair	r without app	proval of He	alth Department.
*Site Modifications							
Т	he issuance of this perm						
	is respon	sible for checking with	appropriate gove	rning bodies in mee	eting their re	quirements	
*Permit Conditions	conventional drainline						

The Department and Local Health Department may impose conditions on the issuance and may revoke the permits for failure of the system to satisfy the conditions, the rules, or this article. This permit is subject to revocation if the site plan, plat, or intended use changes (NCGS 130A-335 (f)). 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 (.1938(b)).
\*Authorized State Agent: \_\_2319 - Dahlem, Blake \_\_\_\_\_\_ Date of Issue: \_\_01 \_\_/ \_\_2 \_\_9 \_\_/ \_\_2 \_\_0 \_\_2 \_\_0

Additionized State Agent	4
Authorized State Agent Signature:	Kell
Owner/Applicant Signature:	

750

482

# SAR

Applicant:

Address: City:

State/Zip:

# **CONSTRUCTION AUTHORIZATION**

Beaufort County Health Department

**Environmental Health Section** 

220 North Market St.

John Venters, Jr.

10556 Hwy 17

Vanceboro

NC

Washington

NC

27889

28586

Phone: 252-946-6048 Fax: 252-946-2074

For Office Use Only

Page 1 of 2

\*CDP File Number

Evaluated For:

**276422 - 2** 5652808309

County ID Number:

NEW

PERMIT	VALID	UNTIL:	Ø	Τ	/	2	9	/	2	Ø	2	

	☐ Oper	Pump System Shee	t
Property Owner:	John Venters, Jr.		1
Address:	1127 Old New Bern Roa	ad	
City:	Chocowinity		
State/Zip:	NC	27817	
Phone #:	(252) 623-7420		/

Phone #:	(252) 623-7470			Phone #:	(252) 623-7420	
Address 1127 Old	New Bern Road		Property Locat	ion & Site Informat	tion	
Road # Chocowin	ity NC	27817	Subdivision:		Phase:	Lot:
Township:			The second secon	rections		
Structure:	OTHER			′ toward Wilmar, left <sub>l</sub> ht	at H & H Golf Cart sign, right on	Old New Bern, 1 mile on
# of Bedrooms:						
# of People:						
*Water Supply:	PUBLIC					
			System Sp	ecifications		
*Site Cla	ssification: PS @ G	rade w/Cap		Missi	imum Transh Dauth. 1 2 I.a.	
Sanrolite	System?	Voc V No		IVIIII	imum Trench Depth: $12$ Inc	hes

10: 0: 11:	System Specification	15	
*Site Classification: P	S @ Grade w/Cap	Minimum Trench Depth: 1 2 Inches	
Saprolite System?	Yes X No	Minimum Trendit Depth. 1 2 miches	\
Design Flow:	1 0 0	Maximum Trench Depth: 1 2 Inches	
Soil Application Rate:	<u>Ø</u> . <u>3</u>	Minimum Soil Cover:6 Inches from "Natural Ground Level"	н
*System Classification TYPE II C. CON	/Description: V. SYSTEM WITH SHALLOW PLACEMENT	Maximum Soil Cover: Inches "Natural Ground Level"	
*Proposed System:	CONVENTIONAL	*Distribution Type: GRAVITY - PARALLEL (eq. d-b	ox)
	OOM ENTIONAL	Septic Tank: 1 0 0 0 Gallons	
Nitrification Field	3_ <b>3</b> _ <b>Ø</b> _ Sq. ft.	Pump Required: Yes No	
No. Drain Lines	2	Pump Tank: 1 0 0 Gallons	
Total Trench Length:	<b>1_1_Ø</b> ft.		
Trench Spacing:	9 - Inches O.C.	Grease Trap: Gallons	
Trench Width:	3 - Inches	Septic Tank Installer ⊗I ○II ○III ○IV Grade Level Required:	/
Aggregate Denth	1 7 inches		/

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

System sized for a shop. Remove tree from septic area. Install a 1000 gal. septic tank, 1 d-box, all piping, 2 (3' x 55') conventional drainlines, & 6" topsoil cover. A pump tank may be required depending on elevation of plumbing. Landscape septic area to shed water.

Characters Remaining 1732

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*Authorized State Agent: 2319 - Dahle	em, Blake	*Date of I	ssue: Ø	1	/ [	9	/	2	Ø	2	Q
Authorized State Agent Signature:	Ster Stelling 1781	<i>5</i>	**Site	Plar	ı/Dr	awii	าต	atta	che	ed.	**
Owner/Applicant Signature:			Malf				_				
	O Hand Drawing	O Import Drawing				3			0		

IMPROVEMENT PERMIT
Beaufort County Health Department

**Environmental Health Section** 

220 North Market St.

For Office Use Only

Page 1 of 2

\*CDP File Number

277247 - 2 5652806157

County ID Number:

NEW

	M/I-it NO 07000	Evaluated	For: NEW	, )
	Washington NC 27889	PERM	IT VALID UNTIL: Ø 2 / Ø	3/2025
*NOTE TO	Phone: 252-946-6048 Fax: 252-946-20	14		
	INSPECTIONS DIVISION: Building Permits cannot John Venters, Jr.	not be issued with only an Imp	rovement i emit. —	SEL OCA!
Applicant:	1127 Old New Bern Road	Property Owner:	John Venters, Jr.	
Address: City:		Address:	1127 Old New Bern Road	
	Chocowinity	City:	Chocowinity	
State/Zip:	NC 27817	State/Zip:	NC 2	27817
Phone #:	(252) 623-7420	Phone #:	(252) 623-7420	)
Address Old New Be	rn Road Property Loc	cation & Site Information		
Road # Chocowinity	NC 27817 Subdivision:		Phase:	Lot: 2
Township:		Directions		
Structure:	SINGLE FAMILY		cart sign, right on Old New B	ern Road
# of Bedrooms:	2			
of People:	4			
Water Supply:	PUBLIC			
Initial System				
Site Classificatio	n: PS Shallow Placement	m Specifications		
Saprolite System?	○Yes XNo	Minimum Trench Depth:	12	nches
Design Flow:	240	Maximum Trench Depth:	1 4	nches
Soil Group:	III	Fill Depth:		nches
Soil Application Rate	· Ø · 4	Septic Tank:	1 0 0 0	Gallons
	cation/Description:	Control of the Contro		
TYPE II C. CON	NV. SYSTEM WITH SHALLOW PLACEMENT	Pump Required:		May Be Required
*Proposed Syste	em: CONVENTIONAL	Pump Tank:	1 0 0 0	Gallons
		"		
Repair System Requi	ired:   Yes   No   No, but has A	vailable Space		
Repair System			1.0	
Site Classification	n: PS Shallow Placement	Minimum Trench Depth:	1,2	nches
oil Application Rate:	0 . 4	Maximum Trench Depth:	1 4	nches
•	cation/Description:	Fill Depth:		nches
TYPE II C. COI	NV. SYSTEM WITH SHALLOW PLACEMENT	5 C		Control Contro
		Pump Required:	○Yes ○No ⊗	) May be Required
*Proposed Syste	em: CONVENTIONAL	Pump Tank:	1000	Gallons
	No grading or construction activity is allowed in are	as designated for system and		
N N	Provide site plan approved by Planning prior	to issuance of an Authorization	on to Construct.	п рераптелт.
	1 Tovide site plan approved by Flanning prior			
*Site Modification	ns			
	15			
	The issuance of this permit by the Health Depart	ment in no way guarantees th	e issuance of other permits. The	e permit holder
	The issuance of this permit by the Health Depart is responsible for checking with Septic system consists of a 1000 gal. septic	ment in no way guarantees that appropriate governing bodies tank, 1 d-box, all piping, 3 (3'	in meeting their requirements. x 70') approved drainlines (no re	
*Site Modification	The issuance of this permit by the Health Depart is responsible for checking with	ment in no way guarantees that appropriate governing bodies tank, 1 d-box, all piping, 3 (3'	in meeting their requirements. x 70') approved drainlines (no re	
*Site Modification	The issuance of this permit by the Health Depart is responsible for checking with a Septic system consists of a 1000 gal. septic topsoil cover. Apump tank may be required or	ment in no way guarantees th appropriate governing bodies tank, 1 d-box, all piping, 3 (3' depending on elevation of plur	in meeting their requirements. x 70') approved drainlines (no re nbing.	eduction), & 6"
*Site Modification  *Permit Condition  Department and L	The issuance of this permit by the Health Depart is responsible for checking with Septic system consists of a 1000 gal. septic topsoil cover. Apump tank may be required cocal Health Department may impose condition	ment in no way guarantees th appropriate governing bodies tank, 1 d-box, all piping, 3 (3' depending on elevation of plur as on the issuance and may	in meeting their requirements. x 70') approved drainlines (no rentite of the control of the cont	of the system to
*Site Modification  *Permit Condition  Department and Lisfy the conditions,	The issuance of this permit by the Health Depart is responsible for checking with a Septic system consists of a 1000 gal. septic topsoil cover. Apump tank may be required cocal Health Department may impose condition the rules, or this article. This permit is subject	ment in no way guarantees th appropriate governing bodies tank, 1 d-box, all piping, 3 (3' depending on elevation of plur as on the issuance and may to revocation if the site pla	in meeting their requirements.  x 70') approved drainlines (no rentite of the control of the con	of the system to
*Site Modification  *Permit Condition  Department and Lisfy the conditions, The person owning arding system loca	The issuance of this permit by the Health Depart is responsible for checking with Septic system consists of a 1000 gal. septic topsoil cover. Apump tank may be required cocal Health Department may impose condition the rules, or this article. This permit is subject g or controlling the system shall be responsibition, installation, operation, maintenance, more	ment in no way guarantees the appropriate governing bodies tank, 1 d-box, all piping, 3 (3' depending on elevation of plures on the issuance and may to revocation if the site plate for assuring compliance intoring, reporting, and reparates.	in meeting their requirements.  x 70') approved drainlines (no rentition)  revoke the permits for failure  an, plat, or intended use chang  with the laws, rules, and permit  ir (.1938(b)).	of the system to ges (NCGS 130A-335 it conditions
*Permit Condition  Department and Lisfy the conditions, The person owning arding system local	The issuance of this permit by the Health Depart is responsible for checking with Septic system consists of a 1000 gal. septic topsoil cover. Apump tank may be required cocal Health Department may impose condition the rules, or this article. This permit is subject g or controlling the system shall be responsibition, installation, operation, maintenance, moragent: _2319 - Dahlem, Blake	ment in no way guarantees the appropriate governing bodies tank, 1 d-box, all piping, 3 (3' depending on elevation of plures on the issuance and may to revocation if the site plate for assuring compliance intoring, reporting, and reparates.	in meeting their requirements.  x 70') approved drainlines (no rentline)  revoke the permits for failure  an, plat, or intended use chang  with the laws, rules, and perm	of the system to ges (NCGS 130A-335 it conditions
*Permit Condition  *Permit Condition  Department and Lisfy the conditions, The person owning arding system local	The issuance of this permit by the Health Depart is responsible for checking with Septic system consists of a 1000 gal. septic topsoil cover. Apump tank may be required to cocal Health Department may impose condition the rules, or this article. This permit is subject g or controlling the system shall be responsibilition, installation, operation, maintenance, more agent:2319 - Dahlem, Blake	ment in no way guarantees the appropriate governing bodies tank, 1 d-box, all piping, 3 (3' depending on elevation of plures on the issuance and may to revocation if the site plate for assuring compliance intoring, reporting, and reparates.	in meeting their requirements.  x 70') approved drainlines (no rentition)  revoke the permits for failure  an, plat, or intended use chang  with the laws, rules, and permit  ir (.1938(b)).	of the system to ges (NCGS 130A-335 it conditions

