

YADKIN COUNTY ENVIRONMENTAL HEALTH OPERATION PERMIT FOR WASTEWATER SYSTEMS

NORTH CAROLINA	•
OWNER/APPLICANT: 2 C Landscaping	PERMIT #: 014340-2022
ADDRESS: 1071 Pine knoll Dr. Yadkinville	
NEW EXPANSION REPAIR WATER SUPPLY: W	Jell Lot size:
FACILITY TYPE: 5FO # BEDROOMS: # MAX OCCUPANTS	
SYSTEM TYPE: INITIAL: 05 % Reduction LTAR: 25 REPAIR: 25	% Reduction LTAR: 125
PRODUCT TYPE: Quick 4 MANUFACTURER: 1	5, Filtrator
5-2-22 SEPTIC TANK #: Shoaf \$78760 SIZE: 1000 gal PUMP TANK #:	SIZE; gal
TOTAL TRENCH LENGTH: 482ft. TRENCH DEPTH (LOWER SIDE) 24 ft. SOIL	COVER. 12 in. STONE DEPTH in.
PUMP REQUIREMENTS:ft. TDH vsgpm PUMP INFO:	installer: A. Laws
AS-BUILT DIAGRAM (Not to Scale)	18-017D- IWCo
& Divert a	Il surface water, ling gutter drains, from septic system
Includ	ling gutter drains,
away	from septic system
W Committee of the comm	
480 690	
10'	58 %
β	10 10
ě	
This system has been installed in compliance with applicable NC General Statutes, Rules for Scientific Conditions of the Improvements Permit and Construction Authorization. The system shall per	form in accordance with Rule .1961. Ground
absorption sewage treatment and disposal systems shall be checked and the sewage in the tank to ensure proper operation of the system. The contents of the tank shall be pumped whenever	the solids level is found to be more than 1/3 of
the liquid in any compartment. Any questions pertaining to the system should be directed to 3 849-7905.	3 on 8-16-22 T. O.
CONDITIONS:	1) 11 1000
ISSUED BY AUTHORIZED STATE AGENT DATE	8-16-22

YADKIN COUNTY ENVIRONMENTAL HEALTH SEPTIC SYSTEM LAYOUT FORM T ATC

MIMPROVEMENT PERMIT

□ OPERATION PERMIT

70.00				
NAME 2C Landscaping	E4		DATE 03-15-2027	_
ADDRESS 07/ Pine Knoll Dr.	Yaskinville	, NC 27055		***
PERMIT # 05 W W - 014340-2022 PI	N# 58440		LTAR_ 0, 25	
	STS SP	ECS		
NEW OR REPAIR NEW	SEPTIC TANK	1000 gal	TRENCH DEPTH 18" COVER DEPTH 6"	
SYSTEM TYPE ZSTOROLIGION	PUMP TANK	- 0		
REPAIR TYPE 286 Rebution	(i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) 	4821	SYS CLASS TIG	<u>- 11-11 (11-11)</u>
INSTALLER	NO. LINES	3	SYS CLASS 711 G	
Vo grading/Filling				
Vo af Could for mais		501/ to 1/C		
drainfield/repair		to 1/2		
beaute and maintain		1		
11 cokhales		107		
of line flagged orange		0		
of line to gg	1500 Re	poir A	sea so	
1 DOC DISPES		V		
de 11 35 xoce 120			,	
say from system		3'X94'	and the same of th	
say from sys		- 3×94	Minimum Ministry Ministry	
o well opplication made		31×981		
O Dec 11		3" X 95"	‡	
et com		3'x981		
eed all lines from	ſ	*****************************	32 12	
1 const	25.1	Proposed	1 30	
to fo	12	4 BR 43	500' to 11	2
	507	Sor		
		257'	0 : 0	
	Proposed	1/	Drise	
	Well	1801		
		1-5		
		PL		
The issuance of this permit by the Health Department in no appropriate governing bodies in meeting their requirements.	way guarantees the issu	ance of other permits. The	permit holder is responsible for checking wit	h ement
Permit shall not be affected by a change in ownership of the Treatment and Disposal and to conditions of this permit.	site. This permit is subj	ect to compliance with the	provisions of the Laws and Rules for Sewage	1
This Construction Authorization is subject to revocation if the when there is a change in ownership of the site. This Constru	ne site plan, plat, or the	intended use changes. The	Construction Authorization shall not be tran	isferred
Treatment and Disposal and to the conditions of this permit.	Any reference points n	nust be maintained until sys	stem is installed.	-6-

COMMENTS/CONDITIONS: ___ DATE: 03-15-2022