



Orange County Health Department Environmental Health Services

www.co.orange.nc.us/envhlth

Septic System Report Card

Invoiced \$125

PAID R12-000060



Acct #: CA05-00215

PIN: 9881355742

Location: 6030 OLD FIELD DR OCPL

Owner's Name RUBIN GEOFFREY D TRUSTEE	Mailing Address 6024 OLD FIELD DR CHAPEL HILL NC 27514-8234
Operator OWNER	System Type Other Trench

Date 09-21-2011	Time 2:00 PM	Date of last inspection	OCHD Inspection Frequency 60 Mo
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System Status: Compliant Structurally Noncompliant Malfunctioning
 (See reverse for information) Needs Maintenance Operationally Noncompliant Incomplete

Comments:

Improvements needed:

Facility:	Yes	No	REMARKS
Type, size, & sewage flow in accordance with permit?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	BARN
Tanks and Risers:			
Risers accessible,	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Riser type: CONCRETE
Risers structurally sound, watertight?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
No Settling, surface water diverted?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Sanitary tee in good condition?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Filter free of solids, in place, and secured?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Filter type: POLY LOK
Was the filter cleaned at this inspection?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Solids level <1/3 tank capacity is solids? Capacity: 8 "	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sludge depth: 8 " / scum depth: 42 "
Effluent Dosing System:			
Solids level acceptable, < 4"?	<input type="checkbox"/>	<input type="checkbox"/>	Sludge depth: "
Required pumps operating & cycling properly?	<input type="checkbox"/>	<input type="checkbox"/>	N/A
High water alarm operating properly?	<input type="checkbox"/>	<input type="checkbox"/>	
Vent/floats/piping/valves/disconnect in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	
Control panel/electrical components in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	
Ground Absorption Fields:			
No evidence of effluent surfacing?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Minimal ponding in subsurface trenches?	<input type="checkbox"/>	<input type="checkbox"/>	
Surface water diverted, no settling along trenches?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Line cover/vegetation adequate/maintained as needed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Protected from traffic, destructive uses?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Distribution devices accessible, working properly?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N/A
Repair area properly preserved, maintained?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N/A
Turn-ups/cleanouts/valves intact & accessible?	<input type="checkbox"/>	<input type="checkbox"/>	N/A

System Performance: PT **N/A**

Design Rate: gpm at ft.: Measured: " / min. X gpi = gpm at head

Date of Inspection: September 21, 2011 Victoria Hudson, PEHS
 ENVIRONMENTAL HEALTH SPECIALIST

DESCRIPTION OF SYSTEM STATUS:

Compliant:	The septic system was found to be functioning properly and was not in need of any maintenance at this time. Great job, keep up the good work
Needs Maintenance:	The septic system needs maintenance. Proper maintenance can add years of life to your wastewater system. See the items listed under "Improvements Needed". Some items may need to be performed by a Certified Wastewater System Contractor
Operationally Noncompliant:	A component of the septic system is not performing as efficiently as it could. Contact a Certified Wastewater System Contractor to perform the recommended improvements.**
Structurally Noncompliant:	A component of the septic system no longer meets the requirements of the rules. Contact a Certified Wastewater System Contractor to make the necessary corrections.**
Malfunctioning:	The septic system is not functioning properly or there is sewage discharging to the ground surface. This requires your immediate attention. Contact this office to discuss steps to correct the problem.
Incomplete Inspection:	The septic system could not be accessed for inspection. Please contact us to schedule a time to complete the inspection.

**If you would like to have the system re-inspected once corrections are completed for noncompliant systems, call our office to schedule a visit. There is no charge for the re-inspection if completed within 30-days of this report. Otherwise, there is a \$75.00 fee

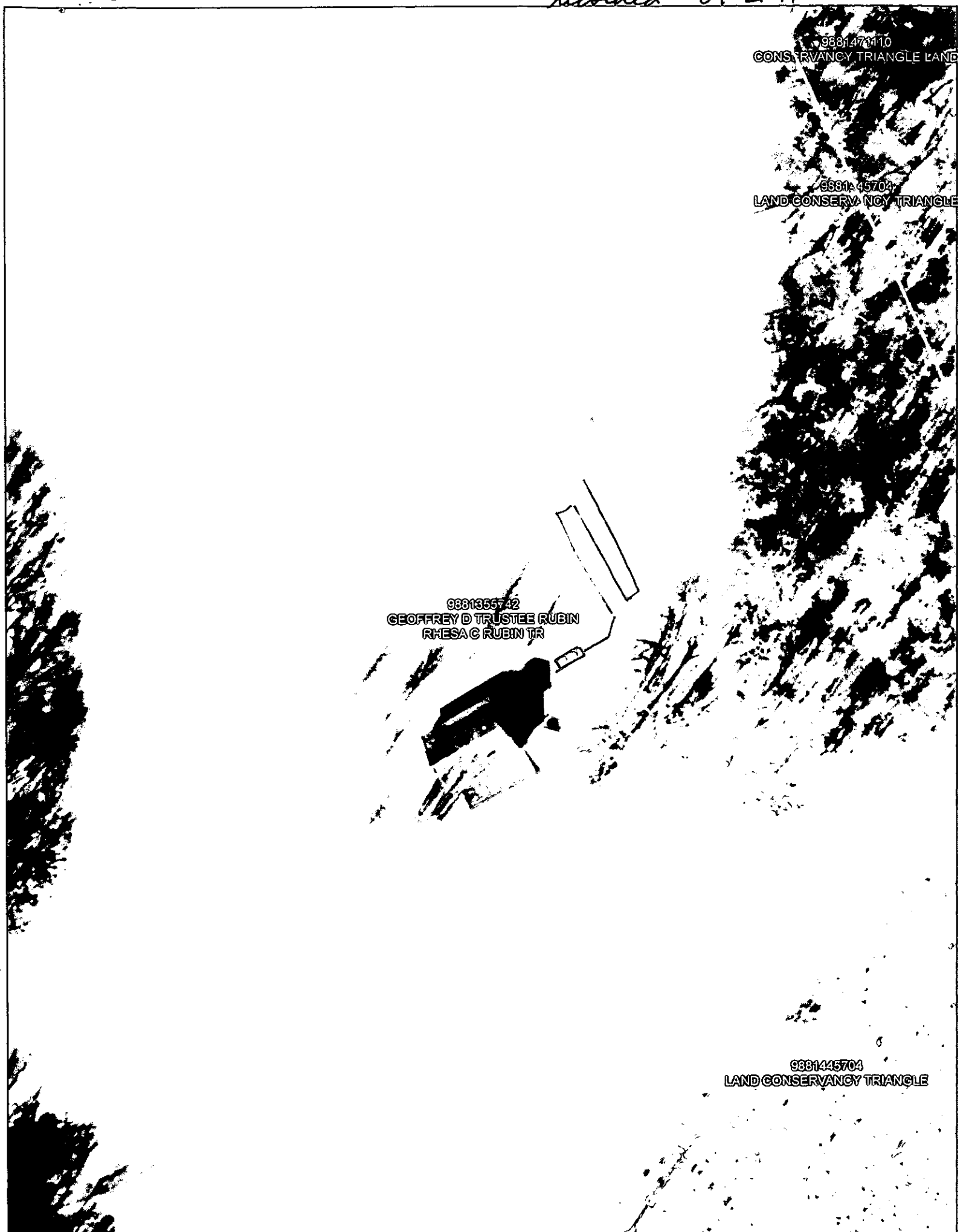
If you have any questions about this report, please contact Environmental Health Services at 919-245-2360 or email amills@co.orange.nc.us. Information on septic system maintenance and a list of Certified Septic Installers can be found on our website www.co.orange.nc.us/envhlth.

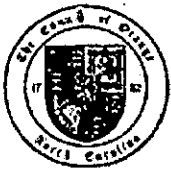
9881471110
CONSERVANCY TRIANGLE LAND

9881445704
LAND CONSERVANCY TRIANGLE

9881355742
GEOFFREY D TRUSTEE RUBIN
RHESA C RUBIN TR

9881445704
LAND CONSERVANCY TRIANGLE





Orange County Health Department

Environmental Health Section
PO Box 8181, 306C Revere Rd.
Hillsborough, NC 27278
Phone 919-245-2360 Fax 919-644-3006

www.co.orange.nc.us

FOR BARN
6030 old field rd

Wastewater System Operation Permit

Parcel Pin: 9881355742
Property Description: E/S OLD FIELD DR P96/25

TMBL: 7.16A..2D
Permit Number: CA05-00215
Lot Size: 16.191

Property Location: E/S OLD FIELD DR P96/25 / E/S OLD FIELD DRIVE OFF CUL-DE-SAC

Owner: HEFFNER THOMAS H
Address 103 PORTER PLACE
CHAPEL HILL NC
27514

System Operator: HEFFNER THOMAS H

REQUIRED INSPECTIONS

ORC Inspection every: N/A N/A
ORC Report every: N/A
OCHD Inspection every: 60 Months

Phone:

Septic Contractor: GULICKS EXCAVATING

Type of Facility: RES ACCESSORY STRUCTURE System Classification: IIIg

System Type: Other Trench / EZ FLOW - acc

In accordance with NCGS 130A-11 and 15A NCAC 18A Section .1900, This Operation Permit is issued to:

HEFFNER THOMAS H

For the operation of a 240 GPD wastewater treatment and disposal system.

Conditions

1. This permit shall be effective only with respect to the nature and volume of the waste specified. Water softener backwash is not allowed in the system.
2. This permit is transferable, however any conditions imposed on this permit shall also transfer to the subsequent owner.
3. The system shall be properly maintained and operated at all times in accordance with *The Schedule of Operation and Maintenance*.
4. The owner is responsible for compliance with 15A NCAC 18A section .1900-Laws and Rules for Sanitary Sewage Collection, Treatment, and Disposal as amended by the Orange County Board of Health.
5. In the event of failure of the system to perform satisfactorily (as determined by the OCHD), the owner shall take such corrective actions as required by the Department within the specified period of time.
6. No traffic, vehicles, or excavation shall be allowed on the system or the repair area.
7. Appropriate permits shall be obtained from the OCHD prior to any repairs on the system.
8. The owner (and ORC) shall notify the OCHD of any system malfunction or necessary repairs.
9. The owner is responsible for keeping the plumbing system of the structure in good repair and eliminating leaks, drips, or excess flows as they are found.
10. A useable repair area as designated by the OCHD, shall be maintained and reserved for the addition to or replacement of the initial system drainfield.
11. Refer to the "as-built" inspection record on file at OCHD for system installation specifications.

SCHEDULE OF OPERATION AND MAINTENANCE

FOR ALL SYSTEMS:

- * Every 12 months: Septic tank shall be inspected for influent/effluent line blockage, tank/riser leakage, and solids accumulation. Blockages or leaks shall be repaired. Septic tanks shall be pumped when solids (scum & sludge) reach 1/3 of the liquid volume. Effluent filters shall be inspected and cleaned as necessary.
- * Every 6 months: Drainfield shall be inspected for seepage or saturation, settled ground surface, broken pipes, maintenance of vegetation, protection from traffic, and diversion of surface water.
- * Every 6 months: Ground surface around the tanks and drainfield shall be inspected for areas of depression or ponding.
- * For grassed sites - Grass shall be cut regularly and when it exceeds 8 inches in height. Lightweight mowers shall be used for cutting grass.
- * For wooded sites - Saplings, briars, brush and grass shall be eliminated by hand cutting and/or herbicides as often as necessary. Dead trees shall be removed by cutting at or near ground level. Stumps should not be removed.

FOR SYSTEMS WITH PUMPS (TYPE III OR IV SYSTEMS):

- * Every 6 months: Pump tank shall be inspected for leaks and solids accumulation. Leaks shall be repaired and solids removed as necessary. Pump, controls, floats and alarm shall be checked for proper operation. All components of the pump/control system shall be kept in compliance with the current design standards.
- * Every 6 months: A pump delivery rate shall be determined. Pipe and fittings shall be checked for leakage.
- * Every 6 months: Drainlines shall be flushed of solids accumulation with the valves opened. Pressure head adjustment shall be made to obtain the designed delivery rate. pressure head measurements shall be recorded.
- * Every 6 months: Water meters, pump meters and counters shall be read and recorded.
- * Additional O & M Requirements attached.

FOR TYPE IV, V, AND VI SYSTEMS

1. The permittee, as well as any subsequent owners, shall keep an operator (ORC) under contract who is certified for subsurface wastewater treatment and disposal systems. The permittee or owner shall notify any future or subsequent system owners of the requirements contained in this permit, including the requirement for a management entity contract. Notification of any changes to the owner's contract with the system ORC or a change of ORC shall be submitted in writing to the OCHD at least 30 days in advance of the change.
2. All monitoring data and maintenance records shall be kept on file by the ORC and a copy submitted to the owner and the OCHD as specified:
Orange County Health Department, Environmental Health Division, 306-C Revere Rd. Hillsborough, N.C. 27278

Type III systems and higher require an inspection by the OCHD on a periodic basis as indicated above. An inspection fee will be assessed for each inspection.

ISSUED: 10/26/2005

[Signature]
ENVIRONMENTAL HEALTH SPECIALIST

OP 05/05 Pick-up _____ Mail _____ File _____ Reviewed _____

WASTEWATER SYSTEM INSTALLATION RECORD

Applicant: **HEFFNER THOMAS H** Property Description: **E/S OLD FIELD DR P96/25**

System Installer: Gulick Excavating System Type: ~~Conventional (2480 gpd)~~ **EZ-Flow accepted**

STB	MANU. <u>BTS</u>	PT	MANU. _____	CONTROL PANEL	PUMP
	STB - <u>345</u>		PT - _____	BRAND _____	BRAND _____
	<u>1000</u> GAL		_____ GAL	MODEL _____	MODEL _____
	DATE <u>NO DATE</u>		DATE _____	# FLOATS _____	ALARM OK _____
	<u>5500</u> PSI		_____ PSI	LEAK TEST _____	PULL ROPE _____
	LEAK TEST _____		LEAK TEST _____	SUPPLY LINE	FLOAT SUPPORT _____
	PRETEST # _____		PRETEST # _____	SIZE: _____	FLOAT ADJUSTED _____
	RISERS: INLET <input checked="" type="checkbox"/> OUTLET <input checked="" type="checkbox"/>		INLET RISER _____	OK TO COVER _____	ENCLOSURE/CONDUIT _____
EFFLUENT FILTER			OUTLET RISER _____	PRESSURE TEST _____	DUCT SEAL/GROUT _____
	BRAND <u>Poly-luc</u>		GPI = _____	INITIAL: _____	TIME _____
	MODEL <u>R/W/B</u>			ENDING: _____	TIME _____
	PIPE SEALS OK <input checked="" type="checkbox"/>			RESULT: _____	MINUTE = _____ GPM

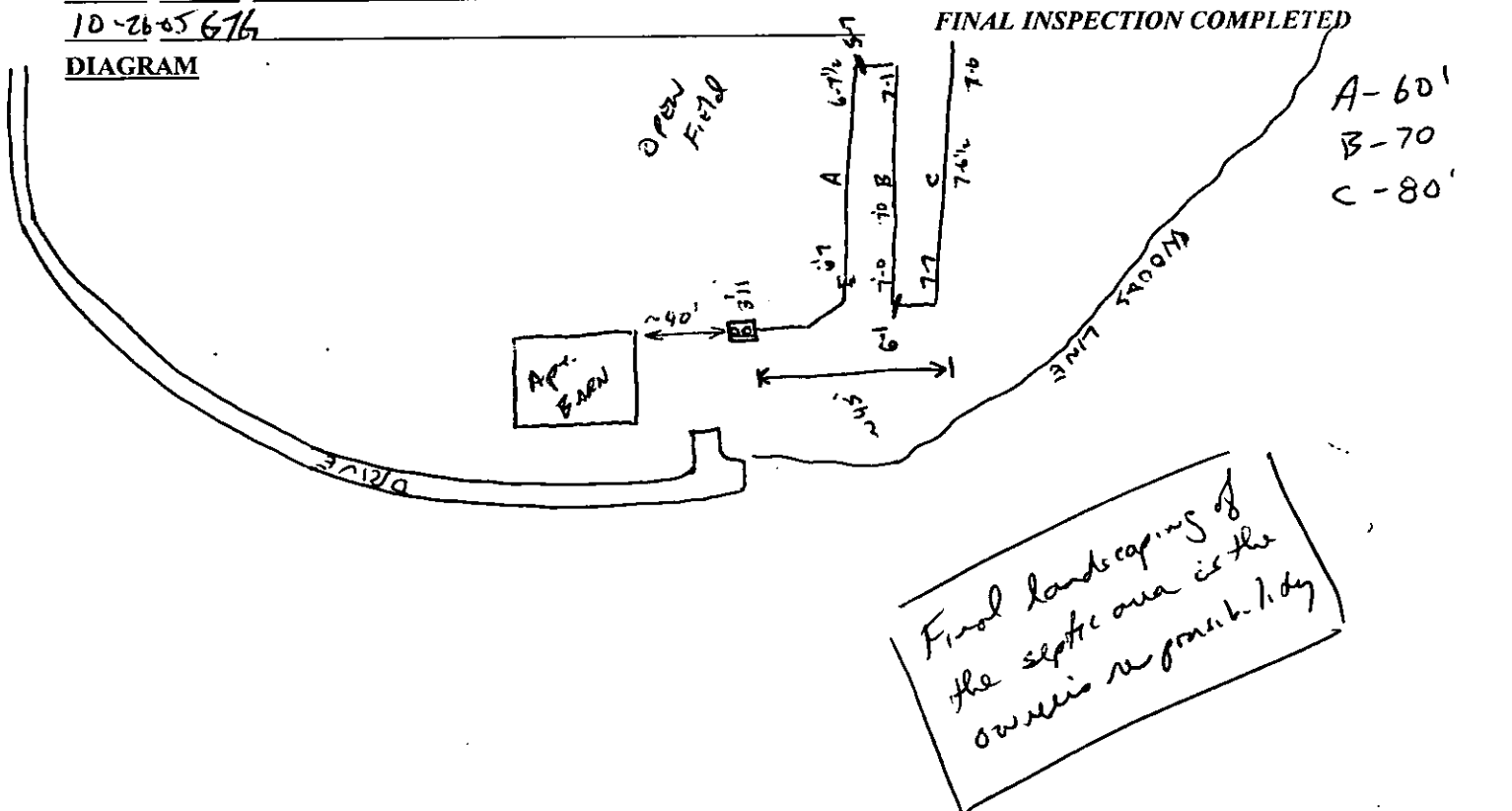
SUBSTITUTED SYSTEM TYPE INSTALLED EZ-Flow (25%) Accepted By this signature, the installer certifies that the

decision to substitute the accepted system for the system type permitted was made by the Owner. A H M M M

DATE	EHS	NOTES	YET TO DO
10-26-05	676	D.F., Tank	

10-26-05 676

DIAGRAM



Orange County Health Department

Environmental Health Division
P.O. Box 8181, 306-C Revere Road
Hillsborough, NC 27278
Phone 245-2360 Fax 644-3006
www.co.orange.nc.us



WASTEWATER SYSTEM CONSTRUCTION AUTHORIZATION

Parcel Pin: 9881355742
Application Date: 05/27/2005

TMBL: 7.16A..2D
Permit #: CA05-00215

Applicant: HEFFNER THOMAS H
Address: 103 PORTER PLACE
CHAPEL HILL NC
27514
Phone: 929-0518 /

Owner: HEFFNER THOMAS H
Address: 103 PORTER PLACE
CHAPEL HILL NC
27514
Phone: /

Property Desc.: E/S OLD FIELD DR P96/25 Lot Size: 16.191
Prop Address: E/S OLD FIELD DRIVE OFF CUL-DE-SAC
Permit Type: RESIDENTIAL NEW SYSTEM
Facility Type: RES ACCESSORY STRUCTURE IP Number: IP05-00342 Expires: 07/28/2010
Water Supply: Private Well

SYSTEM SPECIFICATIONS

Wasteflow: 240 GPD Primary System Type: Conventional (<480 gpd) EZ-Flow accepted System Class: -Ha IIIg
No. of Bedrooms: 2 Nitrification: 270 Ft. X 3 Ft. Wide
Septic Tank: 1000 GAL Maximum Trench Depth: 24 In. 210 X 5
Min. Pump Tank: 0 GAL Horiz. Trench Separation: 9 Ft.
Other: Innovative System Type:
Repair System Type: Conventional (<480 gpd) System Class: Ha

COMMENTS:

- 1: Permit for apartment to be constructed above existing barn.
PRECONSTRUCTION CONFERENCE REQUIRED.
2: THIS SYSTEM NOT DESIGNED FOR GARBAGE DISPOSAL !

PERMIT CONDITIONS

- * REFER TO THE ATTACHED SITE PLAN SHOWING THE SYSTEM AND FACILITY LOCATIONS AND OTHER SYSTEM SPECIFICATIONS
* THIS AUTHORIZATION SHALL BECOME INVALID AND MAY BE REVOKED IF:
* THE INFORMATION SUBMITTED ON THE APPLICATION IS INCORRECT, FALSIFIED, OR CHANGES.
* THE SITE IS ALTERED, OR
* THE SYSTEM INSTALLATION IS NOT COMPLETED BEFORE THE EXPIRATION DATE.
* THE SYSTEM SHALL BE INSTALLED IN ACCORDANCE WITH:
* ORANGE COUNTY RULES FOR WASTEWATER TREATMENT AND DISPOSAL SYSTEMS AS ADOPTED BY THE ORANGE COUNTY BOARD OF HEALTH
* ORANGE COUNTY WASTEWATER SYSTEM SPECIFICATIONS, AND OCHD POLICIES.
* SYSTEMS WITH A CLASSIFICATION OF III OR HIGHER WILL REQUIRE PERIODIC INSPECTIONS BY THE O.C. HEALTH DEPARTMENT

ISSUED: 07/29/2005

Signature of Environmental Health Specialist

EXPIRES: 07/28/2010

Installer change

for ECE Flood Acceptal

required 210' x 5'

required amount would

be 200' x 3'

Typical Setbacks Required By State and Local Rules Unless Otherwise Specified In Writing:

(1)	Any private water supply source, including any well or spring	100 feet
(2)	Any public water supply source	100 feet
(3)	Streams classified as WS-I	100 feet
(4)	Any other stream, canal, marsh, or other surface water	50 feet
(5)	Any Class I or Class II reservoir	100 feet from normal pool elevation
(6)	Any permanent storm water retention pond	50 feet from flood pool elevation
(7)	Any other lake or pond	50 feet from normal pool elevation
(8)	Any building foundation or building footing	15 feet
(9)	Any basement	15 feet
(10)	Any property line	10 feet
(11)	Top of slope of embankments or cuts of 2 feet or more vertical height	15 feet
(12)	Any water line	10 feet
(13)	Drainage systems:	
	(A) Interceptor drains, foundation drains, and storm water diversions	
	(I) upslope from system	10 feet
	(II) sideslope from system	15 feet
	(III) downslope from system	25 feet
	(B) groundwater lowering ditches and devices	25 feet
(14)	Any swimming pool	25 feet
(15)	Any other nitrification field (except repair area)	20 feet
(16)	Drip line (Outermost edge of a structure)	5 feet

Any changes to the proposed plans must be approved by the OCHD

*

Please do not allow any traffic, construction, excavation, utilities, material storage, or any other disturbance to take place on the designated septic area or repair area. These activities may void your permit.

*

The owner is responsible for marking any property lines and corners. The Contractor is responsible for ensuring that the well or septic system is installed in the proper location and that all setbacks are met.

*

The system must be installed/repared by an Orange County Registered Septic System Contractor.

*

A list of Orange County Registered Septic System Contractors is available upon request.

*

The system installation must be inspected by OCHD at certain stages during the installation.

*

For systems with pumps, the Registered Septic System Contractor is responsible for insuring the proper installation of the electrical components. An electrical permit must be obtained and a person with a valid North Carolina SP-PH Electrical license must provide electrical service to the pump controller and alarm.

*

It is the responsibility of the Registered Septic System Contractor to call the OCHD to schedule the installation inspections.

*

The OCHD must issue an Operation Permit (indicating system approval) before the facility can be occupied, before the Certificate of Occupancy can be issued by the Planning jurisdiction, and before permanent electrical can be released.

*

The Registered Septic System Contractor is responsible for backfilling the system components so that no areas are subject to the retention or ponding of surface water.

*

After the installation is completed, some settling of the backfill material may take place. The system owner is responsible for eliminating settled or sunken area, stabilization, and final landscaping of the ground surface.

*

When the Construction Authorization is issued for a Conventional System or an Accepted System, the Owner may choose to substitute any Accepted System for the permitted system, provided there are no changes necessary in the specific line locations, depths, or distribution system. When a substitution is made, verification that the Owner made the system choice will be required prior to issuance of the Operation Permit.

Orange County Health Department



CONSTRUCTION AUTHORIZATION APPLICATION FIELD NOTES THIS IS NOT A PERMIT

Parcel Pin: **9881355742**
Application Date: **05/27/2005**

TMBL: **7.16A..2D**

Permit #: **CA05-00215**

Applicant: **HEFFNER THOMAS H**
Phone: **929-0518 /**

Owner: **HEFFNER THOMAS H**
Phone: **/**

Property Desc.: **E/S OLD FIELD DR P96/25**

Lot Size: **16.191**

Prop Address:

Permit Type: **RESIDENTIAL NEW SYSTEM**

Facility Type: **1030 RES ACCESSORY STRUCTURE** Improv. #: **IP05-00342** Expires

GPD Requested: **240**

Water Supply: **Private Well**

ACTIVITY LOG AND NOTES

Wasteflow : _____ GPD	Primary System Type: _____	Sys Class _____
No. of Bedrooms: _____	Nitrification: _____ Ft. X _____	Ft. Wide _____
STB Tank: _____ gal	Max. Trench Depth: _____ In.	
Pump Tank: _____ gal	Horz. Trench Sep: _____ Ft.	
	Repair System Type: _____	Sys Class: _____

Comments:

Date	EHS	Notes



Orange County Health Department

Environmental Health Division
P.O. Box 8181, 306-C Revere Road
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Phone 919-245-2360 Fax 919-644-3006
www.co.orange.nc.us

IMPROVEMENT PERMIT

Parcel Pin: 9881355742
Application Date: 05/27/2005

TMBL: 7.16A..2D
Permit #: IP05-00342

Applicant: HEFFNER THOMAS H
Address: 103 PORTER PLACE
CHAPEL HILL NC
27514
Phone: 929-0518 /

Owner: HEFFNER THOMAS H
Address: 103 PORTER PLACE
CHAPEL HILL NC
27514
Phone: /

Property Desc.: E/S OLD FIELD DR P96/25
Prop Address: OLD FIELD DRIVE
Permit Type: RESIDENTIAL NEW SYSTEM
Facility Type: RES ACCESSORY STRUCTURE
Water Supply: PRIVATE WELL

Lot Size(Acres): 16.191
Square Footage: 0 0

Initial System

Wasteflow : 240 GPD
No. of Bedrooms: 2
Site Classification
PROVISIONALLY SUITABLE

System Type: Conventional (<480 gpd)
System Class: IIa
Useable Soil Depth: 36 "
LTAR: 0.3 gpd/ft²

Replacement System

System Type: Conventional (<480 gpd)
System Class: IIa
Useable Soil Depth: 36 "
LTAR: 0.3 gpd/ft²

Conditions:

1: Permit for apartment to be built on second floor of existing barn.

Refer to the attached site plan for specific information regarding location of the designated area. Soil and site descriptions are located on file at Environmental Health.

There may be other types of systems which are applicable to this site.

The applicant for the Construction Authorization must specify the system types to be considered.

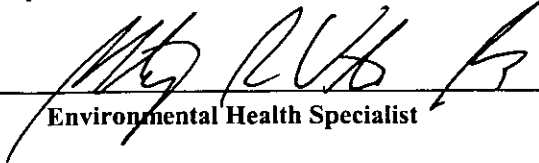
The permit and evaluation are valid only for the site as designated on the attached site plan.

A Construction Authorization must be issued prior to the issuance of the Building Permit and before any construction or system installation can commence.

This permit is subject to revocation if the site plan, plat, or intended use changes or if the site is altered.

Subsequent changes to the site plan or information in the application requires a new application and additional fees.

ISSUED: 07/28/2005


Environmental Health Specialist

EXPIRES: 07/28/2010

Environmental Health Division
 P.O. Box 8181, 306-C Revere Road
 Hillsborough, NC 27278
 Phone 919-245-2360 Fax 919-644-3006
 www.co.orange.nc.us

Application Date: 05/27/2005

Soil / Site Evaluation Field Sheet

Activity #: IP05-00342

Applicant: HEFFNER THOMAS H
 Address: 103 PORTER PLACE
 CHAPEL HILL NC 27514
 Prop Desc: E/S OLD FIELD DR P96/25

Owner: HEFFNER THOMAS H # Bedrooms Requested: 2
 Address: 103 PORTER PLACE GPD requested: 240
 CHAPEL HILL NC 27514 Lot Size: 16.191

SOIL BORING PROFILE INFORMATION

Factors	Rule	1	2	3	4	5	6	7	8	9	10
Landscape Position	.1940	L	→	→							
Slope (%)	.1940	5-10	→	→							
Horizon 1 Depth	.1943	0-30"	0-20"	0-8"							
Texture	.1941(a)(1)	C	→	CL							
Consistence	.1941	F/S/P	→	F/S/SP							
Structure	.1941(a)(2)	2-3f30k	→	2f/1f30k							
Clay Mineralogy	.1941(a)(3)	SE 2-5/12/46	→	20-32" SE							
Horizon 2 Depth	.1943	30-32"	→	8-32"							
Texture	.1941(a)(1)	C+PM	→	C							
Consistence	.1941	F/S/P	→	F/S/P							
Structure	.1941(a)(2)	2-1f30k	→	2-3f30k							
Clay Mineralogy	.1941(a)(3)	SE	→	SE 2-5/12/46							
Horizon 3 Depth	.1943			32-38"							
Texture	.1941(a)(1)			C+PM							
Consistence	.1941			F/S/P							
Structure	.1941(a)(2)			2-3f30k							
Clay Mineralogy	.1941(a)(3)			SE							
Horizon 4 Depth	.1943										
Texture	.1941(a)(1)										
Consistence	.1941										
Structure	.1941(a)(2)										
Clay Mineralogy	.1941(a)(3)										
Soil Wetness	.1942										
Restrictive Horizon	.1944										
Saprolite	.1943/.1956										
Useable Soil Depth		>36"	32"	>38"							
Profile Classification	.1948	15	32	15							
LTAR (gpd/ft²)	.1955	0.3	0.3	0.3							

Available Space	.1945	5
Site Classification	.1948	15

*Indicates Reclassified PS per .1956 .1957 .1969

Primary System LTAR	0.3	System Type	IIA Conv	PS Soil Depth (in.)	≥ 36
Repair System LTAR	0.3	System Type	IIA "	PS Soil Depth (in.)	"

Comments:

Evaluated By: AVILAR, B Date: 7-8-05 Others Present: TOM HEFFNER



- Well 12.4hp
- ▬ Stream
- ▬ Street Twp
- ▬ Building
- ▬ Soil
- ▬ Soil Types
- ▬ Parcel Twp
- ▬ Parcel
- ▬ Major Road
- ▬ County

This map contains parcels prepared for the inventory of real property within Orange County, and is compiled from recorded deed, plats, and other public records and data. Users of this map are hereby notified that the aforementioned public primary information sources should be consulted for verification of the information contained on this map. The county and its mapping companies assume no legal responsibility for the information contained on this map.



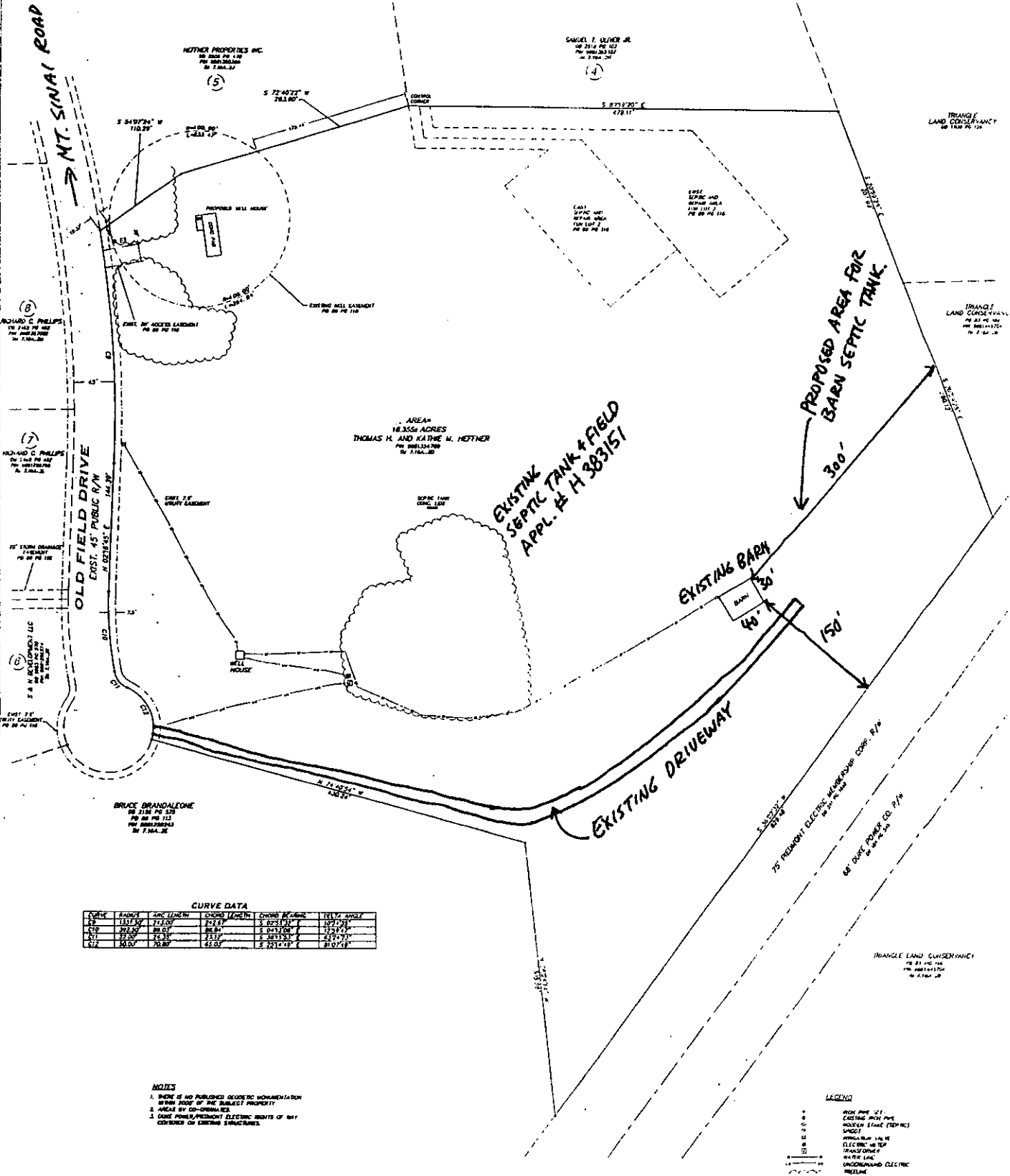
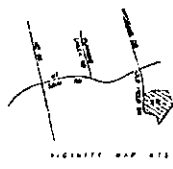
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Orange County GIS

SURVEYOR'S CERTIFICATE
 I, PHILIP W. WILES, SURVEYOR, DO HEREBY CERTIFY THAT THE ABOVE PREPARED MAP WAS PREPARED BY ME OR UNDER MY CLOSE PERSONAL SUPERVISION AND THAT I AM A LICENSED SURVEYOR IN THE STATE OF MISSISSIPPI. I AM NOT PROVIDING ANY GUARANTEE OF ACCURACY FOR THE INFORMATION OF THE CLIENTS AND THE STATE.

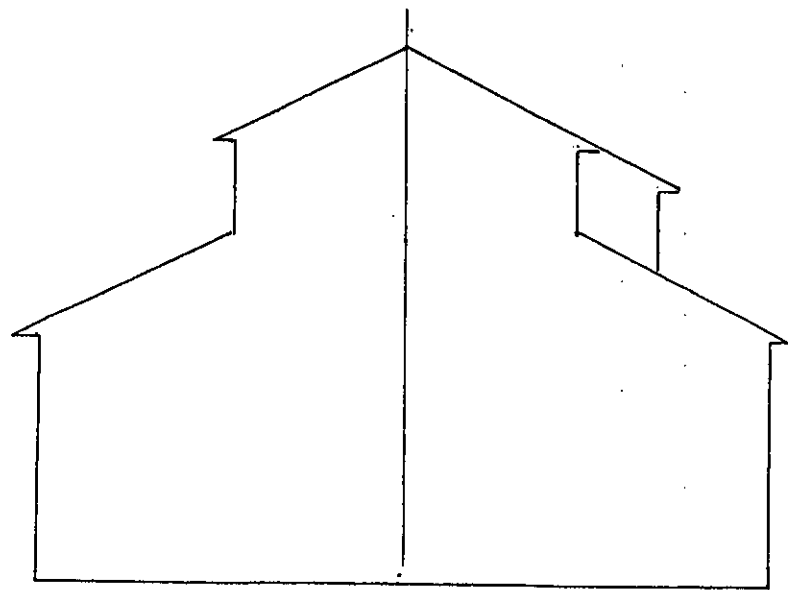
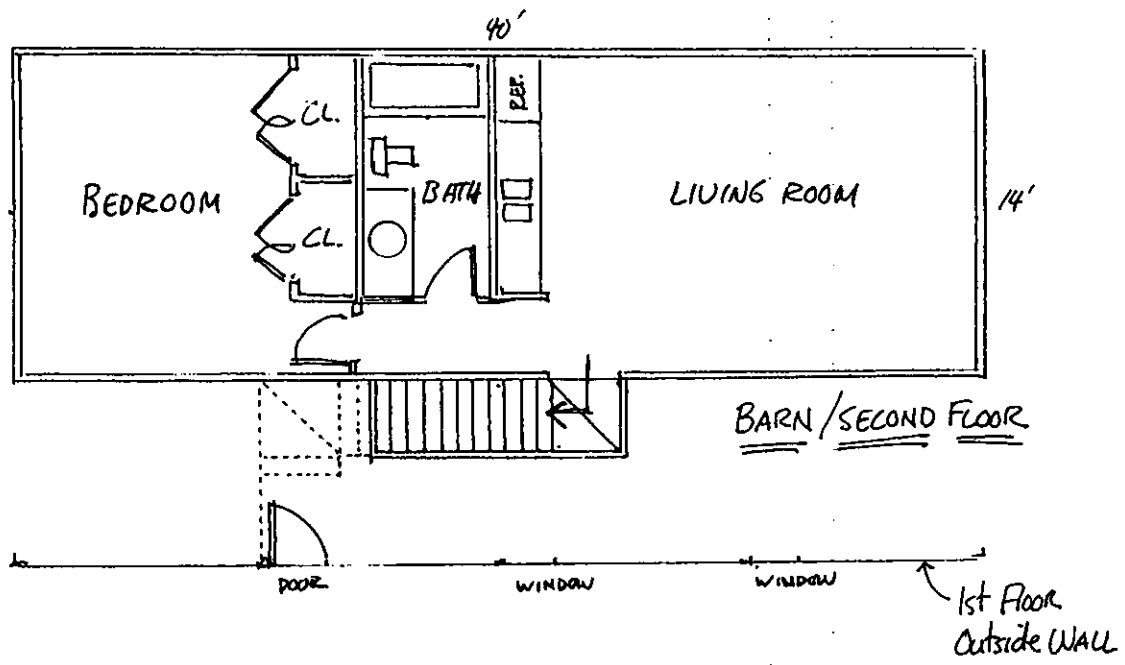


**THOMAS A. & KATHIE M. HEFFNER
 OLD FIELD DRIVE
 SITE PLAN
 APPROX SCALE: 1" = 150'**



CURVE DATA

STATION	CHORD BEARING	CHORD LENGTH	CHORD CURVATURE	TANGENT ANGLE
1+00.00	S 87°19'20" E	423.11	0.0000	0°00'00"
1+423.11	S 87°19'20" E	423.11	0.0000	0°00'00"
1+846.22	S 87°19'20" E	423.11	0.0000	0°00'00"
2+269.33	S 87°19'20" E	423.11	0.0000	0°00'00"
2+692.44	S 87°19'20" E	423.11	0.0000	0°00'00"
3+115.55	S 87°19'20" E	423.11	0.0000	0°00'00"
3+538.66	S 87°19'20" E	423.11	0.0000	0°00'00"
3+961.77	S 87°19'20" E	423.11	0.0000	0°00'00"
4+384.88	S 87°19'20" E	423.11	0.0000	0°00'00"
4+807.99	S 87°19'20" E	423.11	0.0000	0°00'00"
5+231.10	S 87°19'20" E	423.11	0.0000	0°00'00"
5+654.21	S 87°19'20" E	423.11	0.0000	0°00'00"
6+077.32	S 87°19'20" E	423.11	0.0000	0°00'00"
6+500.43	S 87°19'20" E	423.11	0.0000	0°00'00"
6+923.54	S 87°19'20" E	423.11	0.0000	0°00'00"
7+346.65	S 87°19'20" E	423.11	0.0000	0°00'00"
7+769.76	S 87°19'20" E	423.11	0.0000	0°00'00"
8+192.87	S 87°19'20" E	423.11	0.0000	0°00'00"
8+615.98	S 87°19'20" E	423.11	0.0000	0°00'00"
9+039.09	S 87°19'20" E	423.11	0.0000	0°00'00"
9+462.20	S 87°19'20" E	423.11	0.0000	0°00'00"
9+885.31	S 87°19'20" E	423.11	0.0000	0°00'00"
10+308.42	S 87°19'20" E	423.11	0.0000	0°00'00"
10+731.53	S 87°19'20" E	423.11	0.0000	0°00'00"
11+154.64	S 87°19'20" E	423.11	0.0000	0°00'00"
11+577.75	S 87°19'20" E	423.11	0.0000	0°00'00"
12+000.86	S 87°19'20" E	423.11	0.0000	0°00'00"
12+423.97	S 87°19'20" E	423.11	0.0000	0°00'00"
12+847.08	S 87°19'20" E	423.11	0.0000	0°00'00"
13+270.19	S 87°19'20" E	423.11	0.0000	0°00'00"
13+693.30	S 87°19'20" E	423.11	0.0000	0°00'00"
14+116.41	S 87°19'20" E	423.11	0.0000	0°00'00"
14+539.52	S 87°19'20" E	423.11	0.0000	0°00'00"
14+962.63	S 87°19'20" E	423.11	0.0000	0°00'00"
15+385.74	S 87°19'20" E	423.11	0.0000	0°00'00"
15+808.85	S 87°19'20" E	423.11	0.0000	0°00'00"
16+231.96	S 87°19'20" E	423.11	0.0000	0°00'00"
16+655.07	S 87°19'20" E	423.11	0.0000	0°00'00"
17+078.18	S 87°19'20" E	423.11	0.0000	0°00'00"
17+501.29	S 87°19'20" E	423.11	0.0000	0°00'00"
17+924.40	S 87°19'20" E	423.11	0.0000	0°00'00"
18+347.51	S 87°19'20" E	423.11	0.0000	0°00'00"
18+770.62	S 87°19'20" E	423.11	0.0000	0°00'00"
19+193.73	S 87°19'20" E	423.11	0.0000	0°00'00"
19+616.84	S 87°19'20" E	423.11	0.0000	0°00'00"
20+040.95	S 87°19'20" E	423.11	0.0000	0°00'00"
20+464.06	S 87°19'20" E	423.11	0.0000	0°00'00"
20+887.17	S 87°19'20" E	423.11	0.0000	0°00'00"
21+310.28	S 87°19'20" E	423.11	0.0000	0°00'00"
21+733.39	S 87°19'20" E	423.11	0.0000	0°00'00"
22+156.50	S 87°19'20" E	423.11	0.0000	0°00'00"
22+579.61	S 87°19'20" E	423.11	0.0000	0°00'00"
23+002.72	S 87°19'20" E	423.11	0.0000	0°00'00"
23+425.83	S 87°19'20" E	423.11	0.0000	0°00'00"
23+848.94	S 87°19'20" E	423.11	0.0000	0°00'00"
24+272.05	S 87°19'20" E	423.11	0.0000	0°00'00"
24+695.16	S 87°19'20" E	423.11	0.0000	0°00'00"
25+118.27	S 87°19'20" E	423.11	0.0000	0°00'00"
25+541.38	S 87°19'20" E	423.11	0.0000	0°00'00"
25+964.49	S 87°19'20" E	423.11	0.0000	0°00'00"
26+387.60	S 87°19'20" E	423.11	0.0000	0°00'00"
26+810.71	S 87°19'20" E	423.11	0.0000	0°00'00"
27+233.82	S 87°19'20" E	423.11	0.0000	0°00'00"
27+656.93	S 87°19'20" E	423.11	0.0000	0°00'00"
28+080.04	S 87°19'20" E	423.11	0.0000	0°00'00"
28+503.15	S 87°19'20" E	423.11	0.0000	0°00'00"
28+926.26	S 87°19'20" E	423.11	0.0000	0°00'00"
29+349.37	S 87°19'20" E	423.11	0.0000	0°00'00"
29+772.48	S 87°19'20" E	423.11	0.0000	0°00'00"
30+195.59	S 87°19'20" E	423.11	0.0000	0°00'00"
30+618.70	S 87°19'20" E	423.11	0.0000	0°00'00"
31+041.81	S 87°19'20" E	423.11	0.0000	0°00'00"
31+464.92	S 87°19'20" E	423.11	0.0000	0°00'00"
31+888.03	S 87°19'20" E	423.11	0.0000	0°00'00"
32+311.14	S 87°19'20" E	423.11	0.0000	0°00'00"
32+734.25	S 87°19'20" E	423.11	0.0000	0°00'00"
33+157.36	S 87°19'20" E	423.11	0.0000	0°00'00"
33+580.47	S 87°19'20" E	423.11	0.0000	0°00'00"
34+003.58	S 87°19'20" E	423.11	0.0000	0°00'00"
34+426.69	S 87°19'20" E	423.11	0.0000	0°00'00"
34+849.80	S 87°19'20" E	423.11	0.0000	0°00'00"
35+272.91	S 87°19'20" E	423.11	0.0000	0°00'00"
35+696.02	S 87°19'20" E	423.11	0.0000	0°00'00"
36+119.13	S 87°19'20" E	423.11	0.0000	0°00'00"
36+542.24	S 87°19'20" E	423.11	0.0000	0°00'00"
36+965.35	S 87°19'20" E	423.11	0.0000	0°00'00"
37+388.46	S 87°19'20" E	423.11	0.0000	0°00'00"
37+811.57	S 87°19'20" E	423.11	0.0000	0°00'00"
38+234.68	S 87°19'20" E	423.11	0.0000	0°00'00"
38+657.79	S 87°19'20" E	423.11	0.0000	0°00'00"
39+080.90	S 87°19'20" E	423.11	0.0000	0°00'00"
39+504.01	S 87°19'20" E	423.11	0.0000	0°00'00"
39+927.12	S 87°19'20" E	423.11	0.0000	0°00'00"
40+350.23	S 87°19'20" E	423.11	0.0000	0°00'00"
40+773.34	S 87°19'20" E	423.11	0.0000	0°00'00"
41+196.45	S 87°19'20" E	423.11	0.0000	0°00'00"
41+619.56	S 87°19'20" E	423.11	0.0000	0°00'00"
42+042.67	S 87°19'20" E	423.11	0.0000	0°00'00"
42+465.78	S 87°19'20" E	423.11	0.0000	0°00'00"
42+888.89	S 87°19'20" E	423.11	0.0000	0°00'00"
43+312.00	S 87°19'20" E	423.11	0.0000	0°00'00"
43+735.11	S 87°19'20" E	423.11	0.0000	0°00'00"
44+158.22	S 87°19'20" E	423.11	0.0000	0°00'00"
44+581.33	S 87°19'20" E	423.11	0.0000	0°00'00"
45+004.44	S 87°19'20" E	423.11	0.0000	0°00'00"
45+427.55	S 87°19'20" E	423.11	0.0000	0°00'00"
45+850.66	S 87°19'20" E	423.11	0.0000	0°00'00"
46+273.77	S 87°19'20" E	423.11	0.0000	0°00'00"
46+696.88	S 87°19'20" E	423.11	0.0000	0°00'00"
47+120.99	S 87°19'20" E	423.11	0.0000	0°00'00"
47+544.10	S 87°19'20" E	423.11	0.0000	0°00'00"
47+967.21	S 87°19'20" E	423.11	0.0000	0°00'00"
48+390.32	S 87°19'20" E	423.11	0.0000	0°00'00"
48+813.43	S 87°19'20" E	423.11	0.0000	0°00'00"
49+236.54	S 87°19'20" E	423.11	0.0000	0°00'00"
49+659.65	S 87°19'20" E	423.11	0.0000	0°00'00"
50+082.76	S 87°19'20" E	423.11	0.0000	0°00'00"
50+505.87	S 87°19'20" E	423.11	0.0000	0°00'00"
50+928.98	S 87°19'20" E	423.11	0.0000	0°00'00"
51+352.09	S 87°19'20" E	423.11	0.0000	0°00'00"
51+775.20	S 87°19'20" E	423.11	0.0000	0°00'00"
52+198.31	S 87°19'20" E	423.11	0.0000	0°00'00"
52+621.42	S 87°19'20" E	423.11	0.0000	0°00'00"
53+044.53	S 87°19'20" E	423.11	0.0000	0°00'00"
53+467.64	S 87°19'20" E	423.11	0.0000	0°00'00"
53+890.75	S 87°19'20" E	423.11	0.0000	0°00'00"
54+313.86	S 87°19'20" E	423.11	0.0000	0°00'00"
54+736.97	S 87°19'20" E	423.11	0.0000	0°00'00"
55+160.08	S 87°19'20" E	423.11	0.0000	0°00'00"
55+583.19	S 87°19'20" E	423.11	0.0000	0°00'00"
56+006.30	S 87°19'20" E	423.11	0.0000	0°00'00"
56+429.41	S 87°19'20" E	423.11	0.0000	0°00'00"
56+852.52	S 87°19'20" E	423.11	0.0000	0°00'00"
57+275.63	S 87°19'20" E	423.11	0.0000	0°00'00"
57+698.74	S 87°19'20" E	423.11	0.0000	0°00'00"
58+121.85	S 87°19'20" E	423.11	0.0000	0°00'00"
58+544.96	S 87°19'20" E	423.11	0.0000	0°00'00"
58+968.07	S 87°19'20" E	423.11	0.0000	0°00'00"
59+391.18	S 87°19'20" E	423.11	0.0000	0°00'00"
59+814.29	S 87°19'20" E	423.11	0.0000	0°00'00"
60+237.40	S 87°19'20" E	423.11	0.0000	0°00'00"
60+660.51	S 87°19'20" E	423.11	0.0000	0°00'00"
61+083.62	S 87°19'20" E	423.11	0.0000	0°00'00"
61+506.73	S 87°19'20" E	423.11	0.0000	0°00'00"
61+929.84	S 87°19'20" E	423.11	0.0000	0°00'00"
62+352.95	S 87°19'20" E	423.11	0.0000	0°00'00"
62+776.06	S 87°19'20" E	423.11	0.0000	0°00'00"
63+199.17	S 87°19'20" E	423.11	0.0000	0°00'00"
63+622.28	S 87°19'20" E	423.11	0.0000	0°00'00"
64+045.39	S 87°19'20" E			



HEFFNER BARN
SCALE 1/8" = 1'

APPLICANT'S NAME

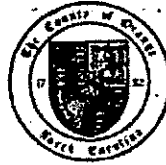
THOMAS H. HEFFNER

TMBL

7.16A..2D

PIN 9881354789

Orange County Health Department Environmental Health Division



APPLICATION FOR PERMITS

Improvement Permits Construction Authorizations Existing Well/Septic System Inspections Well Permits

This application is used to apply for any or all of the above permits or authorizations. The form must be filled out completely and accompanied with payment before services can be initiated

Completion of this form does not imply or guarantee any permit will be issued or an authorization granted. Please be sure all the information is correct as the information you provide will guide the staff in the evaluation and permitting of your property. Any permit may be suspended or revoked if the information is falsified, incorrect or if the site is altered after the permit/authorization is issued.

Orange County Health Department, Environmental Health Division
P.O. Box 8181, 306-C Revere Road
Hillsborough, NC 27278

PHONE: 919-245-2360 FAX: 919-644-3006

www.co.orange.nc.us

CA05 00215

APPLICATION #: DA05 00342

PIN #: _____

DATE RECEIVED: 5-27-05

OCPD CONFIRMED: _____

REVIEWED BY: TK

ASSIGNED TO: Phil

NOTES: _____

GENERAL INFORMATION

APPLICANT: THOMAS H. HEFFNER PROPERTY OWNER: THOMAS H. & KATHIE M. HEFFNER
 ADDRESS 103 PORTER PLACE ADDRESS 103 PORTER PLACE
CHAPEL HILL, NC 27514 CHAPEL HILL, NC 27514
 PHONE NUMBER (919) 929-0518 PHONE NUMBER (919) 929-0518
 LOT SIZE 16 A. SUBDIVISION / LOT# S/H DEVELOPMENT - LOT 2 P886-P113 DATE LOT RECORDED 9/13/2000
 PARCEL ADDRESS: OLD FIELD DRIVE DIRECTIONS / LOCATION: I-40 TO
NC 86. GO NORTH TO MT. SINAI ROAD. GO .7 MILE ON MT. SINAI TO OLD FIELD DR.
GO TO END OF OLD FIELD DRIVE. TAKE DRIVEWAY ON LEFT TO BARN.

Is this application for : NEW REPAIR EXPANSION RENEWAL SUBDIVISION/RECOMB.
 For a: SINGLE FAMILY DWELLING Size X Number of Bedrooms Number of occupants
 APARTMENT/EFFICIENCY/GUEST HOUSE
 BUSINESS/OTHER

Please describe the business, number of employees, square footage, etc. Use attachments if necessary.

TYPE OF WATER SUPPLY	PLEASE CHECK IF APPLICABLE:	REQUESTED SYSTEM TYPE:
<input type="checkbox"/> PUBLIC	<input type="checkbox"/> BASEMENT WITH PLUMBING	<input checked="" type="checkbox"/> CONVENTIONAL
<input checked="" type="checkbox"/> PRIVATE WELL	<input type="checkbox"/> WASTEWATER OTHER THAN SEWAGE GENERATED	<input type="checkbox"/> OTHER (SPECIFY)
<input type="checkbox"/> COMMUNITY WELL	<input type="checkbox"/> PROPERTY CONTAINS DESIGNATED WETLANDS	
<input type="checkbox"/> OTHER	<input type="checkbox"/> SITE IS SUBJECT TO APPROVAL BY OTHER AGENCY	<input type="checkbox"/> or see REQUEST FORM
Check All Sections That Apply	<input type="checkbox"/> FACILITY WILL HAVE A GARBAGE DISPOSAL OR WATER SOFTENER	

<input type="checkbox"/>	WELL PERMIT SECTION	#
<input type="checkbox"/>	WELL PERMIT - NEW	\$ 230
<input type="checkbox"/>	WELL PERMIT - RENEWAL / ALTERATIONS / REVISIT <i>EXISTING WELL</i>	\$ 100

CHECKLIST THE FOLLOWING ARE REQUIRED BEFORE PROCESSING THIS APPLICATION FOR A WELL PERMIT:

- o A **SITE PLAN OR PLAT** MUST BE PROVIDED SHOWING: THE LOCATION ANY STRUCTURES, PROPOSED ADDITIONS, EXCAVATIONS OR OTHER IMPROVEMENTS; AND PROPERTY LINES.
- o THE EXISTING AND PROPOSED PROPERTY LINES AND CORNERS MUST BE CLEARLY MARKED.

<input type="checkbox"/>	EXISTING WELL / WASTEWATER AUTHORIZATION SECTION	#
<input type="checkbox"/>	EXISTING SEPTIC SYSTEM INSPECTION WITH NO INCREASE IN WASTEFLOW	\$ 100
DESCRIPTION OF PROPOSED CHANGES / REASON FOR INSPECTION: _____		

ORIGINAL OWNER _____ SYSTEM IS: IN USE or VACANT since _____ (date)

CHECKLIST THE FOLLOWING ARE REQUIRED BEFORE PROCESSING THIS APPLICATION FOR AN INSPECTION:

- o A **SITE PLAN OR PLAT** MUST BE PROVIDED SHOWING: THE LOCATION OF ANY STRUCTURES, PROPOSED ADDITIONS, EXCAVATIONS OR OTHER IMPROVEMENTS; AND PROPERTY LINES.
- o FOR ADDITIONS, A COPY OF THE **FLOOR PLAN** MUST BE SUBMITTED FOR REVIEW.
- o EXISTING PROPERTY LINES, CORNERS, AND LOCATION OF PROPOSED STRUCTURES MUST BE CLEARLY MARKED ON THE SITE.

<input type="checkbox"/>	MOBILE HOME PARK RECONNECTION SECTION	#
<input type="checkbox"/>	MOBILE HOME SPACE RECONNECTION INSPECTION-PER SPACE	\$ 50

CHECKLIST THE FOLLOWING ARE REQUIRED BEFORE PROCESSING THIS APPLICATION FOR AN INSPECTION:

- o A **SITE PLAN OR PLAT** MUST BE PROVIDED SHOWING: THE DIMENSIONS AND LOCATION OF THE PROPOSED MOBILE HOME.
- o THE CORNERS OF THE PROPOSED HOME MUST BE CLEARLY STAKED ON THE SITE.
- o A COPY OF THE FLOOR PLAN MUST BE SUBMITTED FOR REVIEW.

X

SITE EVALUATION / IMPROVEMENT PERMIT SECTION

#

IMPROVEMENT PERMIT (Up to 600 GPD) / NUMBER OF SITES X \$ 310 PER SITE
 INDIVIDUAL LOT SUBDIVISION* RECOMBINATION* EXISTING SYSTEM EXPANSION

SITE REVISIT TO REISSUE OR MODIFY A VALID IMPROVEMENT PERMIT(Up to 600 GPD) \$ 100 PER SITE
EACH SITE EVALUATION CONSISTS OF UP TO 2 ACRES. FLOWS OVER 600 GPD REQUIRE ADDITIONAL FEES.

CHECKLIST THE FOLLOWING ARE REQUIRED BEFORE PROCESSING THIS APPLICATION FOR AN IMPROVEMENT PERMIT:

- o A SITE PLAN OR PLAT SHOWING THE EXISTING AND PROPOSED PROPERTY LINES WITH DIMENSIONS AND THE LOCATION OF ALL PROPOSED STRUCTURES, ADDITIONS, OR IMPROVEMENTS WITH LABELED SETBACKS.
- o EXISTING AND ANY PROPOSED PROPERTY LINES / CORNERS MUST BE CLEARLY MARKED ON SITE.
- o THE APPLICANT IS RESPONSIBLE FOR MAKING THE SITE ACCESSIBLE FOR THE EVALUATION.
- o FOR NON SINGLE-FAMILY DWELLING APPLICATIONS, ADDITIONAL INFORMATION TO DETERMINE WASTE FLOW AND CHARACTERISTICS WILL BE REQUIRED.
- o *FOR SUBDIVISIONS & RECOMBINATIONS, A CONCEPT PLAN APPROVAL OR A PLAT PREPARED BY A SURVEYOR.

X

CONSTRUCTION AUTHORIZATION SECTION

#

AUTHORIZATION TO CONSTRUCT FOR NEW CONSTRUCTION OR EXPANSION \$ 160 (Up to 600 GPD)
 SITE REVISIT TO REISSUE OR MODIFY A VALID CONSTRUCTION AUTHORIZATION \$ 100 (Up to 600 GPD)

CHECKLIST THE FOLLOWING ARE REQUIRED BEFORE PROCESSING THIS APPLICATION FOR A CONSTRUCTION AUTHORIZATION:

- o A FLOOR PLAN OF THE STRUCTURE MUST BE SUBMITTED.
- o A SITE PLAN OR PLAT MUST BE PROVIDED SHOWING: THE LOCATION OF THE PROPOSED STRUCTURES, DRIVEWAYS, ADDITIONS, EXCAVATIONS OR OTHER IMPROVEMENTS; PROPERTY LINES; DIMENSIONS; AND SETBACKS TO REFERENCE POINTS.
- o THE EXISTING AND ANY PROPOSED PROPERTY LINES / CORNERS MUST BE CLEARLY MARKED ON SITE.
- o THE LOCATION OF PROPOSED STRUCTURES AND IMPROVEMENTS MUST BE STAKED ON SITE.

THE CONSTRUCTION AUTHORIZATION MUST BE ISSUED PRIOR TO ANY CONSTRUCTION. SUBSEQUENT CHANGES TO THE SITE PLAN, FLOOR PLAN, OR APPLICATION WILL REQUIRE A NEW APPLICATION AND ADDITIONAL FEES. FLOWS OVER 600 GPD REQUIRE ADDITIONAL FEES.

SIGNATURE SECTION

o TOTAL AMOUNT DUE \$ 470.00 RECEIPT # 105-001882

IF THE RESULTING FLOW IS >600 GPD, FOR NON-DOMESTIC WASTEWATER SYSTEMS, OR IF ADDITIONAL PERMITS ARE NECESSARY, PLEASE CHECK WITH ENVIRONMENTAL HEALTH TO DISCUSS THE AMOUNT OF ADDITIONAL FEES.

THIS APPLICATION MUST BE SIGNED BY THE CURRENT OWNER OF THE PROPERTY OR THE OWNER'S LEGAL REPRESENTATIVE (eg. SPOUSE, POWER OF ATTORNEY, EXECUTOR, OR PERSON WHO HAS ENTERED INTO A CONTRACT OR LEASE WITH THE PROPERTY OWNER)

ONLY ORIGINAL SIGNATURES (NO FAXES) CAN BE ACCEPTED.

I AM THE PROPERTY OWNER OR THE PROPERTY OWNER'S LEGAL REPRESENTATIVE

I HAVE READ THIS APPLICATION AND AUTHORIZE THE OCHD TO ENTER THE PROPERTY AND PERFORM THE SERVICE(S) REQUESTED.

OWNER:

Ronnie H. Heffer

DATE: 5/25/2005

GENERAL INFORMATION

- PERMITS / AUTHORIZATIONS ARE SUBJECT TO REVOCATION IF THE SITE PLAN, PLAT, OR INTENDED USE CHANGES OR IF THE SITE IS ALTERED. SUBSEQUENT CHANGES TO THE SITE PLAN OR INFORMATION ON THE APPLICATION WILL REQUIRE A NEW APPLICATION AND ADDITIONAL FEES
- NO REFUNDS WILL BE GIVEN FOR SERVICES THAT ARE ALREADY RENDERED OR INITIATED.
- PAYMENT AS INDICATED IN THE INDIVIDUAL SECTIONS MUST ACCOMPANY THE APPLICATION IN ORDER TO PROCESS THE APPLICATION AND SCHEDULE A FIELD VISIT BY STAFF
- A WELL PERMIT OR A CONSTRUCTION AUTHORIZATION MUST BE ISSUED PRIOR TO ANY CONSTRUCTION OR REPAIR OF A WELL OR A WASTEWATER SYSTEM.
- A FINAL INSPECTION OF THE WELL AND WASTEWATER SYSTEM MUST BE COMPLETED AND APPROVED BY THE OCHD STAFF PRIOR TO PLACING EITHER INTO USE OR OCCUPYING A NEW HOME.
- YOU MUST CONTRACT WITH A WELL CONTRACTOR WHO IS REGISTERED IN ORANGE COUNTY AND HOLDS A VALID CERTIFICATION FROM THE STATE OF N.C. (A LIST IS AVAILABLE)
- YOU MUST CONTRACT WITH A SEPTIC CONTRACTOR WHO IS REGISTERED TO INSTALL OR REPAIR SYSTEMS IN ORANGE COUNTY. (A LIST IS AVAILABLE)
- EVERY APPLICATION FOR A CONSTRUCTION AUTHORIZATION MUST BE ACCOMPANIED BY EITHER A VALID IMPROVEMENT PERMIT OR BY AN APPLICATION FOR AN IMPROVEMENT PERMIT.
- ANY CHANGES THAT ARE PROPOSED FOR AN EXISTING PERMIT REQUIRES A NEW APPLICATION.
- FOR AN IMPROVEMENT PERMIT, IF A HOUSE SITE OR PROPOSED SEPTIC SITE IS NOT DESIGNATED ON THE SITE PLAN, ONE WILL BE ASSIGNED BY THE OCHD STAFF.

EXPIRATION OF PERMITS / AUTHORIZATIONS

WELL PERMITS	5 YEARS
EXISTING WELL/SYSTEM AUTHORIZATIONS	1 YEAR
IMPROVEMENT PERMITS	5 YEARS -WHEN A SITE PLAN IS SUBMITTED NO EXPIRATION -WHEN PLAT* [three copies] IS SUBMITTED
CONSTRUCTION AUTHORIZATIONS	5 YEARS MAXIMUM OR WHEN ACCOMPANYING IMPROVEMENT PERMIT EXPIRES WHICHEVER COMES FIRST.

*Plat = prepared by a Registered Land Surveyor to a scale of 1" = 60' showing the facility, appurtenances, site for the septic system, water supplies, and surface water. Or an approved and recorded subdivision plat accompanied by a site plan drawn to scale.

NOTES:
