

IMPROVEMENT PERMIT



Beaufort County Health Department
Environmental Health Section
220 North Market St.
Washington, NC 27889
Phone: 252-946-6048 FAX: 252-946-2074

For Office Use Only

*CDP File Number: 78197 - 7

County ID Number: 7646853559

Evaluated For: NEW

PERMIT VALID UNTIL: 04/28/2028

*NOTE TO INSPECTIONS DIVISION: Building Permits cannot be issued with only an Improvement Permit.

Applicant: Christopher Sanderson

Address: 201 Gen. Pettscrew Dr

City: Plymouth

State/Zip: NC 27962

Phone #: (252) 945-8276

Property Owner: Christopher Sanderson

Address: 201 Gen. Pettscrew Dr

City: Plymouth

State/Zip: NC 27962

Phone #: (252) 945-8276

Address: 18 Bateman Creek Road

Belhaven, NC 27810

Property Location & Site Information

Subdivision: Riverview

Block/Phase: Lot: 18

Road #:

Township:

Structure: SINGLE FAMILY

of Bedrooms: 4

of People: 8

Directions

HWY 264 E toward Hyde Co. approx. 8 miles, right on Gum Neck Road SR 1712.
(Just before Leechville Bridge) Left a Riverview sign. Property at end on right. See sign.

*Water Supply: PUBLIC

Initial System

*Site Classification: PS Shallow Placement

Saprolite System?

Design Flow: 480

Soil Group: III

Soil Application Rate: 0.3

*System Classification/Description:

TYPE II C. CONV. SYSTEM WITH SHALLOW PLACEMENT

System Specifications

Minimum Trench Depth: 12 Inches

Maximum Trench Depth: 12 Inches

Fill Depth: 6 Inches

Septic Tank: 1000 Gallons

Pump Required: May be required

Pump Tank: 1000 Gallons

*Proposed System: CONVENTIONAL

Repair System Required: Yes

Repair System

*Site Classification: PS Shallow Placement

Soil Application Rate: 0.3

*System Classification/Description:

TYPE II C. CONV. SYSTEM WITH SHALLOW PLACEMENT

*Proposed System: CONVENTIONAL

Minimum Trench Depth: 12 Inches

Maximum Trench Depth: 12 Inches

Fill Depth: 6 Inches

Pump Required: May be required

Pump Tank: 1000 Gallons

No grading or construction activity is allowed in areas designated for system and repair without approval of Health Department.

*Site Modifications

Trees and brush will have to be removed from system area

*Permit Conditions

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.

1000gal septic tank, distribution box, all piping and 5 (3' x 110') conventional drainlines for initial and repair; 6" topsoil cover required; Construction Authorization to be issued when final site plan is approved by Beaufort County Health Department

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: 2018 - Hager, Matthew

Date of Issue: 04/28/2023

Authorized State Agent Signature:

Owner/Applicant Signature: _____