

LENOIR COUNTY
HEALTH DEPT.

OPERATIONS PERMIT
(GS 130A-337)

Permit #: 16190
System Type: II Low Prof.

Owner: LAWRENCE DEANER

Address: 2860 Silo Rd.

Location: Cobb Rd, (L) on Silo
Across from Pony Ln.

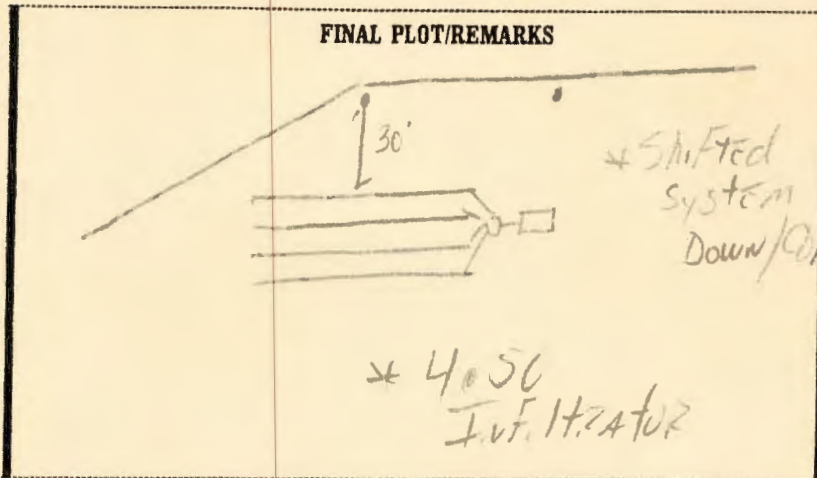
SR #

THIS DOES NOT CONSTITUTE A
WARRANTY OR GUARANTEE.

Installed By: HARRISON SEPTIC

Signed: T.C. BRANNON, REHS

Date: 6/6/23



LENOIR COUNTY
HEALTH DEPT.

CONSTRUCTION AUTHORIZATION
(GS 130A-336)
[Valid for 5 years from date of issuance]

Permit #: _____

Owner: LAWRENCE DEANER

Address: 2860 Silo Rd.

Location: 70 E, (R) on Cobb, (L) on Silo, Across from Pony Ln.

SR #

System type/description: II Low Prof. Chamber LTAR _____ gpd/ft²

Septic tank size: ≥ 900 gallons

Nitrification area: 600 sq. ft. 200 lin. ft.

No. of lines: 4 Line lengths: 50'

Trench bottom depth: ≤ 10 @ deep point (6" Soil Cover)

[SEE ATTACHED PAGES 1 - 2 of 2 FOR ADDITIONAL PERMIT CONDITIONS]

Signed: Chris Harrison REHS Date: 1/4/21

LENOIR COUNTY
HEALTH DEPT.

IMPROVEMENT PERMIT
(GS 130A-336)

Permit #: _____
FEE: _____

Owner: LAWRENCE DEANER

Address: 2860 Silo Rd.

Location: _____

SR#

System type/description: II Low Prof Chamber LTAR 4 gpd/ft²

Facility/Daily design flow: ≤ 2BR / ≤ 240 gpd / ≤ 4 people

Water supply: On-site well _____ Community Well _____ Public _____ Other _____

[SEE ATTACHED PAGES 1 - 2 of 2 FOR ADDITIONAL PERMIT CONDITIONS]

Signed: Chris Harrison, REHS Date: 1/4/21

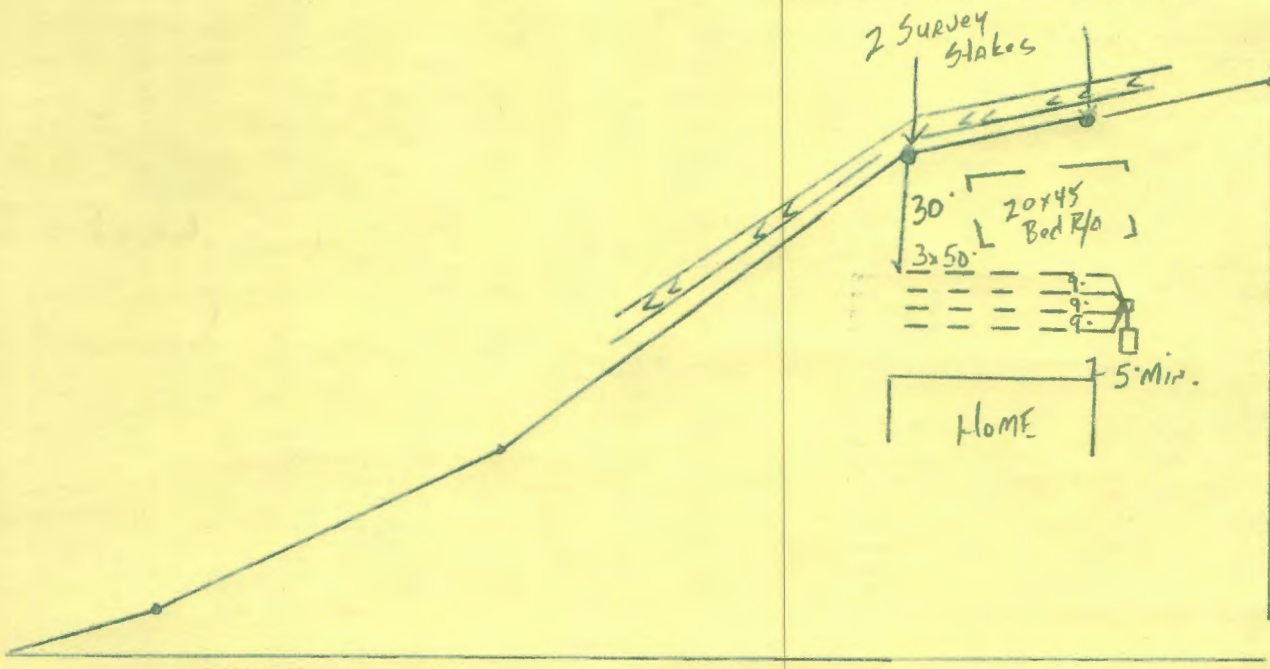
**NOTE: Permit shall be subject to revocation if site plans or intended use change.

Plot Plan

Owner: LAWRENCE DEANCE
 Address: 2860 Silo Rd.
 Location: _____

ADDITIONAL PERMIT CONDITIONS:

- 1) Do not park or drive on any part of system or repair area.
- 2) Nitrification trench aggregate shall be covered with straw or other approved materials prior to final cover/backfilling.
- 3) Do not install system under wet conditions.
- 4) Tank Location shall be altered to accommodate system/home/etc..
- 5) Rake sidewalls/trench bottoms as needed.
- 6) ≥ 6 " soil cover (GrpII) over entire system and 5' beyond
- * 7) **In order to achieve "Gravity Flow," plumbing shall accommodate the septic system, otherwise; a Pump System shall be required!**
- 8) Water lines shall be located $\geq 10'$ from system or repair area.
- 9) Septic systems shall be $\geq 10'$ from any proposed or existing property lines, unless otherwise stated.
- 10) House location/foundations shall have a 5' minimum setback from septic system/repair area.
- 11) Adhere to minimum set back requirements/requests as stated under GS 130A-ART 11 of NC Laws and Rules for Sewage Treatment and Disposal Systems..
- 12) Any Questions/changes on system/location, call LCHD prior to installation (526-4248, LCHD Env. Health).



Silo Rd

~~7/2/00~~
900

TUE
20th
9:00

Lenoir County Health Department
Application for
Improvement Permit and/or Authorization to Construct

<input checked="" type="checkbox"/> Survey plat to scale* submitted
<input type="checkbox"/> Scaled* site plan submitted
<input type="checkbox"/> Unscaled site plan submitted
* scale of 1" = no more than 60'

Improvement Permit Authorization to Construct

IF THE INFORMATION IN THE APPLICATION FOR AN IMPROVEMENTS PERMIT IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENTS PERMIT AND AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (complete site plan = 60 months; complete plat = without expiration)

Call two days before
before you go
04-7-80

APPLICANT INFORMATION

LAWRENCE DEEVER 449 GROUSE CT WILMINGTON 910 507 0328
Applicant Address NC 28403 Home & Work Phone

SAME
Owner Address Home & Work Phone

PROPERTY INFORMATION date originally deeded & recorded _____

SILO ROAD 14/388
Street Address Subdivision Name Section/Phase/Lot#

Directions to Site: HWY 70 EAST / COBB RD TURN RIGHT Lot Size ≈ 4 acres
APPROX. 3 MILES LEFT ON SILO RD. DRIVEWAY ON LEFT ACROSS
FROM PONY LANE

DEVELOPMENT INFORMATION

- New Single Family Residence
- Expansion of Existing System
- Repair to Malfunctioning Sewage Disposal System
- Non-Residential Type of Structure

Residential Specifications

Maximum number of bedrooms: 1
If expansion: Current number of bedrooms: _____
Will there be a basement? yes no
Plumbing fixtures in Basement yes no

Non-Residential Specifications:

Type of business: NA Total Square footage of Building: _____
Maximum number of employees: _____ Maximum number of seats: _____

Water Supply: Are there any existing wells, springs, or existing waterlines on this property? yes no

New well Existing Well Community Well Public Water Spring

NOT SURE
YET

If applying for Authorization to Construct: Please Indicate Desired System Type(s):
(systems can be ranked in order of your preference)

Accepted Alternative Conventional Innovative Other _____ Any

The Applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer to any question is "yes", applicant must attach supporting documentation.

- yes no Does the site contain any jurisdictional wetlands?
- yes no Does the site contain any existing wastewater systems?
- yes no Is any wastewater going to be generated on the site other than domestic sewage?
- yes no Is the site subject to approval by any other public agency?
- yes no Are there any easements or right of ways on this property?

I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

Lawrence Deever
Property owner's or owner's legal representative** signature (required)

6-9-20
Date

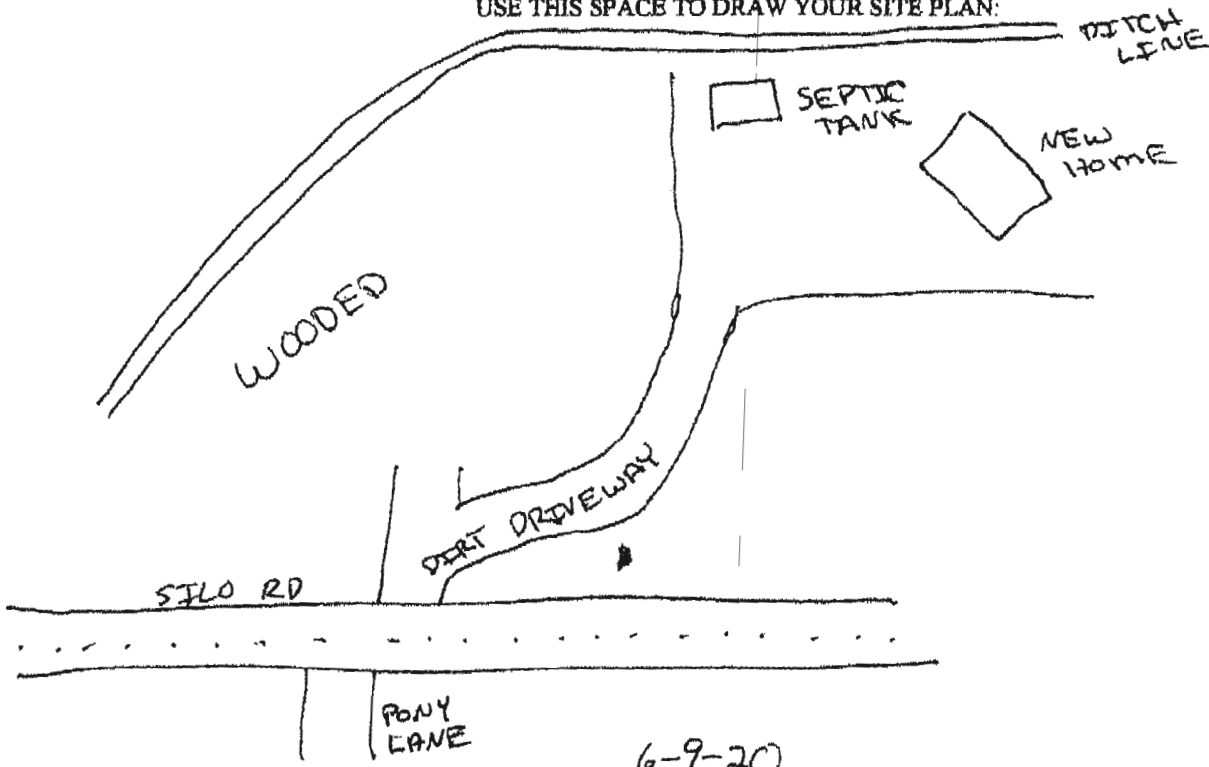
**Must provide documentation to support claim as owner's legal representative.

SITE PLAN WORKSHEET

Place a mark (X) beside each item that has been indicated on your site plan. Incomplete site plans will be returned to you for completion. Remember: your property will not be scheduled for an evaluation until we have received a completed application, site plan, and all proposed items are marked on the property. The True Property Corners (surveyor's iron pipes, rods, axles, etc.) must be identified. Flags will be provided to assist identification of permanent markers in the field.

- The dimensions of the property.
- The proposed location of all structures (e.g. facility, wells, water lines, outbuildings, pools). Show the distances from the road and the side property line to all structures. Be sure and give the dimensions for all the structures. If you are unsure as to the Structure size, please show the dimensions of the MAXIMUM area of the lot that you Anticipate the structure will cover.
- The site you would prefer the septic system to go in.
- The preferred driveway location.
- The proposed well location.
- A north arrow or other sufficient directional indicator.
- Any proposed structures or improvements to the property such as garages, workshops, pools, etc. If there are none, enter "N/A".
- The location of any existing septic tank systems and wells on your property and on the adjoining property within 100' of your property line. If there are none, enter "N/A".
- The location of any easements or rights of way on the property. If there are none, enter "N/A".
- The location of any designated wetlands on the property. If there are none, enter "N/A".

USE THIS SPACE TO DRAW YOUR SITE PLAN:



Signature

Laurence Deaver

Date

6-9-20

THE PROPERTY IS LOCATED IN THE COUNTY OF LENOVA, NORTH CAROLINA, AND IS BEING SURVEYED FOR THE PURPOSE OF RECORDING THE DEED.

DATE: 3/16/17

BY: [Signature]

FOR: [Signature]

THE PROPERTY IS LOCATED IN THE COUNTY OF LENOVA, NORTH CAROLINA, AND IS BEING SURVEYED FOR THE PURPOSE OF RECORDING THE DEED.

DATE: 3/16/17

BY: [Signature]

FOR: [Signature]

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BY: [Signature]

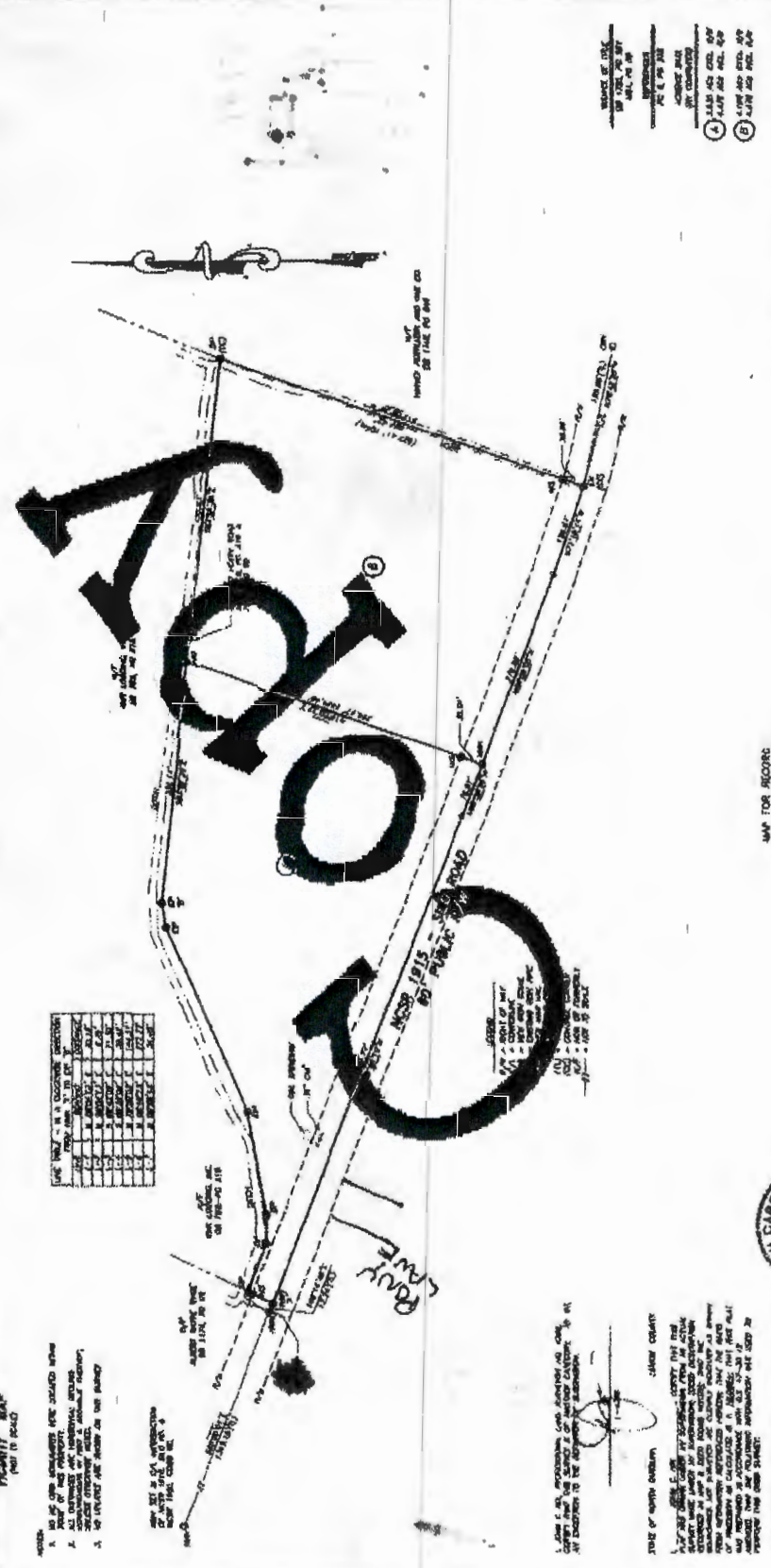
FOR: [Signature]

THE PROPERTY IS LOCATED IN THE COUNTY OF LENOVA, NORTH CAROLINA, AND IS BEING SURVEYED FOR THE PURPOSE OF RECORDING THE DEED.

DATE: 3/16/17

BY: [Signature]

FOR: [Signature]



LINE	BEARING	DISTANCE	REMARKS
1	N 89° 15' 00\"	100.00	...
2	S 89° 15' 00\"	100.00	...
3	N 00° 00' 00\"	100.00	...
4	S 00° 00' 00\"	100.00	...
5	N 89° 15' 00\"	100.00	...
6	S 89° 15' 00\"	100.00	...
7	N 00° 00' 00\"	100.00	...
8	S 00° 00' 00\"	100.00	...
9	N 89° 15' 00\"	100.00	...
10	S 89° 15' 00\"	100.00	...
11	N 00° 00' 00\"	100.00	...
12	S 00° 00' 00\"	100.00	...

MATRIX EAST, PLLC
 PROFESSIONAL LAND SURVEYORS
 904 N. GARDEN ST., SUITE A
 WASHINGTON, NC 27681
 TEL: 919-551-3300
 FAX: 919-551-3300
 EMAIL: info@matrixeast.com

PROJECT NO.: 20170308
 DATE: MARCH 3, 2017
 SURVEYED BY: JCR
 DRAWN BY: JCR
 SCALE: 1" = 50'

MAP FOR RECORD
 SURVEY FOR
LAWRENCE PETER DEEVER & DARRELL ANTHONY MARTIN
 SOUTHWEST TOWNSHIP
 LENOVA COUNTY, NC
 MARCH 3, 2017
 1" = 500'

100' 50' 100' 500'

DRAWING SCALE



STATE OF NORTH CAROLINA, LENOVA COUNTY

I, LAWRENCE PETER DEEVER, a duly licensed Professional Land Surveyor in the State of North Carolina, do hereby certify that the foregoing is a true and correct copy of the original survey as shown to me by the client, and that the same has been compared with the original and found to be correct.

DATE OF SURVEY: 3/16/17
 DATE OF THIS CERTIFICATE: 3/16/17
 SURVEYED BY: JCR
 DRAWN BY: JCR
 CHECKED BY: JCR
 PROJECT NO.: 20170308
 PROJECT NAME: NEW 1915 RD PUBLIC RD

914
 3/16/17
 JCR

375-20700

Tim Deaver

Anthony Smith

252-939-4612

160 ±

910-289-0957

Russel Brook

Diet

22

h2

240

h

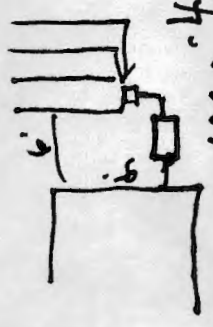
low profile

20

4/50

18 panel 74

4/75 chamber



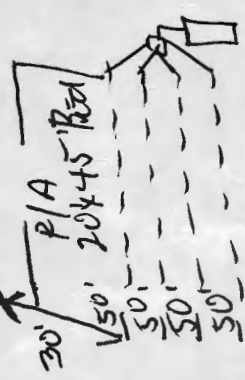
1000-4/10/00

25

25

25

25





LENOIR COUNTY
PLANNING & INSPECTIONS DEPARTMENT
E911 ADDRESS & DEVELOPMENT CERTIFICATION

PO Box 3289
101 North Queen Street
KINSTON, NC 28502
PHONE: 252-559-2260, Ext. 7253
FAX: 252-559-2261



NOTICE: COPY OF THIS FORM REQUIRED FOR BLDG/SETUP PERMITS

Date: 2-4-2021
Applicant Name: Lawrence Deaver
Env. Health Permit#: 16190
Requested Use: Residence

E911 Site Address: 2860 SILO RD
City/Town: KINSTON
Zip code: 28501

DEVELOPMENT INFORMATION:

Zoning District: R Requested Use Permitted: Yes / No
Floodplain: Zone: X NFIP MAP#: _____ Panel: 4542
Floodplain Development Permit Required: Yes / No Elevation Certificate: Yes / No
Watershed District: Yes / No Watershed Development Application Required: Yes / No (Lot size: _____)

GEOGRAPHIC INFORMATION:

Fire District: SOUTHWOOD
School Districts: Elem: SOUTHWOOD Middle: WOODRIDGE High: S. LENOIR
Voting Precinct: SOUTHWEST
Commissioner District: A Tax Parcel ID: 454200240502

ADDRESS DISPLAY REQUIREMENTS: (Per NC Building Code, Section R319)

Buildings shall have approved address numbers, building numbers or building identification placed in a position that is plainly legible and visible from the street or road fronting the property. Address numbers shall be Arabic numbers or alphabetical letters and shall contrast with their background. Numbers shall be a minimum of 4 inches high with a minimum stroke width of 1/2 inch. Where access is by means of a private road or the building address cannot be viewed from the public right-of-way, a monument, pole or other sign or means shall be used to identify the structure.

FAILURE TO COMPLY WITH ADDRESS DISPLAY REQUIREMENTS SHALL RESULT IN NON-ISSUANCE OF CERTIFICATE OF OCCUPANCY (C.O.).

Applicant shall provide a copy of this form to Inspections Department to obtain building/setup permits.