



**ALAMANCE COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SECTION**



**Improvement Permit- New**

A Construction Authorization must be purchased to obtain a building permit (This is not a Construction Authorization)

<b>Tax Map Number</b> --	<b>GPIN</b>	<b>Application Date</b> 9/4/2020	<b>Permit Number</b> 5922IMPR20
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**Site Address** 0010 JOHN LEWIS RD. , BURLINGTON, NC 27217  
EAGLES LANDING SOUTH LOT # 10

**Directions** HWY 49 TO JOHN LEWIS ROAD

<b>Requestee</b> BACKWOODS LAND, LLC 3095 CHAMPS WAY. MEBANE, NC 27302 (336) 213-9663	<b>Owner</b> BACKWOODS LAND CO LLC 3095 CHAMPS WAY. MEBANE, NC 27302 (336) 213-9663
<b>Phone</b>	<b>Phone</b>
<b>Fax</b>	<b>Fax</b>
<b>Other</b>	<b>Other</b>
<b>Email</b> backwoodslandco@gmail.com	<b>Email</b> backwoodslandco@gmail.com

<b>Type of Structure</b>	HOUSE	<b>Basement</b>	No
<b>Pump Required</b>	Yes	<b>Basement Plumbing</b>	No
<b>Grease Trap Required</b>	No	<b>Number of Bedrooms</b>	4
<b>Projected Daily Flow</b>	480 GPD	<b>Number of Occupants</b>	8
<b>Permit Valid For</b>	Expires 12/23/2025	<b>Type of Water Supply</b>	Well

<b>Wastewater System Type</b>	Pump Type IIIb
<b>System Description</b>	PUMP TO 25% REDUCTION SEPTIC SYSTEM WITH SHALLOW PLACEMENT
<b>System Distribution</b>	SERIAL
<b>Repair System Type</b>	Pump Type IIIb
<b>Repair Description</b>	Pump to 25% Reduction Septic System with Shallow Placement
<b>Repair System Distribution</b>	SERIAL

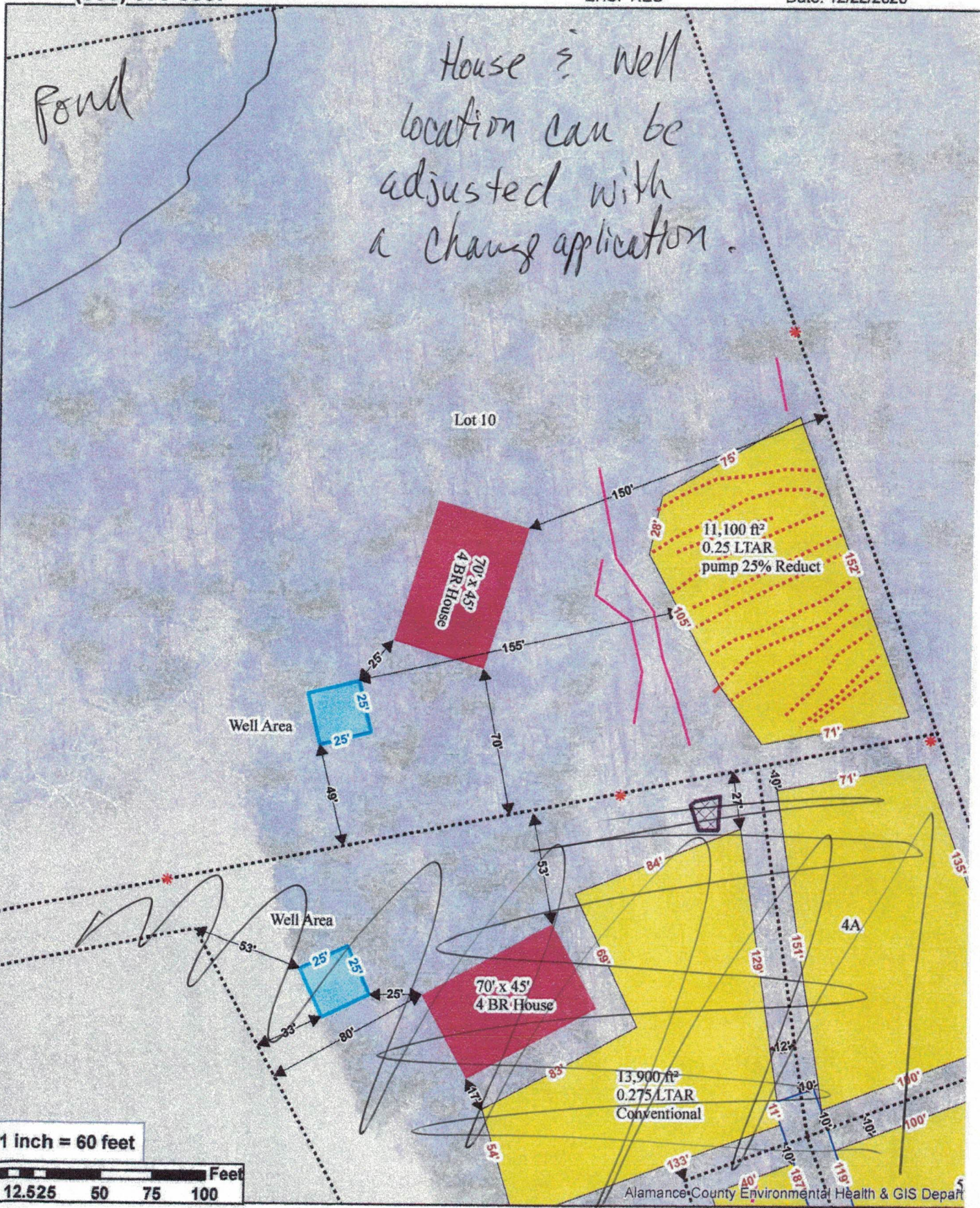
**Permit Conditions:**  
Additional soil cover needed  
**Other: 6" ADDITIONAL SOIL COVER REQUIRED OVER ENTIRE DRAINFIELD AREA. SOIL COVER MATERIAL MUST BE APPROVED BY ENVIRONMENTAL HEALTH. DO NOT CUT OR FILL SOIL AREA WHEN CLEARING LOT.**  
All pump designs and installations shall be in accordance with the Laws and Rules for Sewage Treatment, and Disposal Systems 15A NCAC 18A .1900 subject to approval by Alamance County Health Department.

\*See Attached Site Sketch\*

\*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.\* This permit is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sanitary Sewage Collection, Treatment and Disposal of the North Carolina Administrative Code and to conditions of this permit.

Authorized State Agent Rob Snow

Date 12/23/2020



Scale is approximate and may not be accurate on emailed, scanned, and faxed copies of this drawing.

Drawn By: RES

This Map is the best representation of field data based on information supplied to ACHD and is accurate within the limits of our equipment.