

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: 122011 - 1

County ID Number: 6692903809

Evaluated For: NEW

PERMIT VALID UNTIL: 03/25/2027

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

Applicant: Scott Betts
Address: 63 Rainwater Ct
City: Clayton
State/Zip: NC 27527
Phone #: (919) 868-0508

Property Owner: Rain Water LLC
Address: 63 Rainwater Ct
City: Clayton
State/Zip: NC
Phone #:

Address: Lot 48 Smuggler's Cove
Road #: Belhaven, NC 27810
Township: Subdivision: Smuggler's Cove
Structure: SINGLE FAMILY
of Bedrooms: 3
of People: 6
*Water Supply: PUBLIC

Property Location & Site Information

Directions

Wheat Patch Road

Initial System

System Specifications

*Site Classification: PS @ Grade w/Cap
Saprolite System? No
Design Flow: 360
Soil Group: III
Soil Application Rate: 0.3
*System Classification/Description:

Minimum Trench Depth: 8 Inches
Maximum Trench Depth: 8 Inches
Fill Depth: Inches
Septic Tank: 1000 Gallons
Pump Required: May be required
Pump Tank: 1000 Gallons
*Proposed System: LOW PROFILE

TYPE III G. OTHER NON-CONV. TRENCH SYSTEMS

Repair System Required: Yes

Repair System

*Site Classification: PS LPP
Soil Application Rate: 0.15
*System Classification/Description:
TYPE IV A. ANY SYSTEM WITH LPP DISTRIBUTION
*Proposed System: LPP FILL/MOUND

Minimum Trench Depth: 18 Inches
Maximum Trench Depth: 18 Inches
Fill Depth: 12 Inches
Pump Required: Yes
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

The following must be done prior to issuance of an Authorization to Construct: (1) Clear septic area of all trees (do not remove topsoil). (2) Provide a detailed site plan approved by BCHD.

*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.

Septic system consists of a 1000 gal septic tank, 1 d-box, all piping, 6 (3' x 70') low profile chamber drainlines, & 6" topsoil cover. A pump tank may be required depending on elevation of plumbing.

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: 2319 - Dahlem, Blake

Date of Issue: 03/25/2022

Authorized State Agent Signature: *Blake Dahlem BEHS*

Owner/Applicant Signature: _____