



**Guilford County
Environmental Health Division
Water Quality Section
400 W. Market Street
Greensboro, NC 27401
336.641.7613**



Operation Permit

Address: 1205 NC HIGHWAY 61, WHITSETT, NC 27377

Permit Number: 22-04-SCHR-02925

Contractor:

Initial System Type: 2a – Conventional
 Septic Tank Capacity: 1000 GAL
 Septic Tank ID #: HPPP STB 760
 Septic Tank Date: 03/30/2022
 Filter Type: Polylok
 Trench Type: Other
 Trench Length: 267 FT
 Trench Width: 36 IN

Comments:

Jessie Gywnn ran 5' of 3"pvc from existing septic tank and installed 267' of gravel trench with one stepdown

Drainfield Approval:	RNL _____	Date:	4/24/24 _____
	Environmental Health Specialist		
Tank Approval:	_____	Date:	_____
	Environmental Health Specialist		
Supply Line Approval:	_____	Date:	_____
	Environmental Health Specialist		
Pump/Alarm Approval:	_____	Date:	_____
	Environmental Health Specialist		
Operational Permit Approval:	<i>Robert M. Lowe</i> , REHS _____	Date:	04/25/2024 _____
	Environmental Health Specialist		

This System is in compliance with Article 11 of G.S. Chapter 130A .1900 "Sewage Treatment and Disposal Systems" and all conditions prescribed by the Authorization for Wastewater System Construction. This Operation Permit is subject to suspension or revocation if the stated conditions are not met.

CONDITIONS:

Initial system and designated repair areas must be protected from traffic, construction, destruction, cultivation, landscaping, erosion, or any other circumstances that may alter site conditions and may cause problems with the initial system or the future system as permitted.

Surface and/or subsurface drainage diversion around the system must be maintained as permitted.

Heavy vegetative growth over drainfields and the root system of many shallow-rooted trees are detrimental to the proper operation of subsurface sewage systems and must be controlled periodically.

All subsurface sewage disposal systems must be maintained and operated in a manner that prevents surface discharge or any other potential public health concerns. All public health concerns created by the operation of this system must be addressed immediately (within 48 hours). Required permits to correct the public health concern must be obtained from the Environmental Health Water Quality Unit and corrections to the system are to be completed within 30 days of the date of that permit.

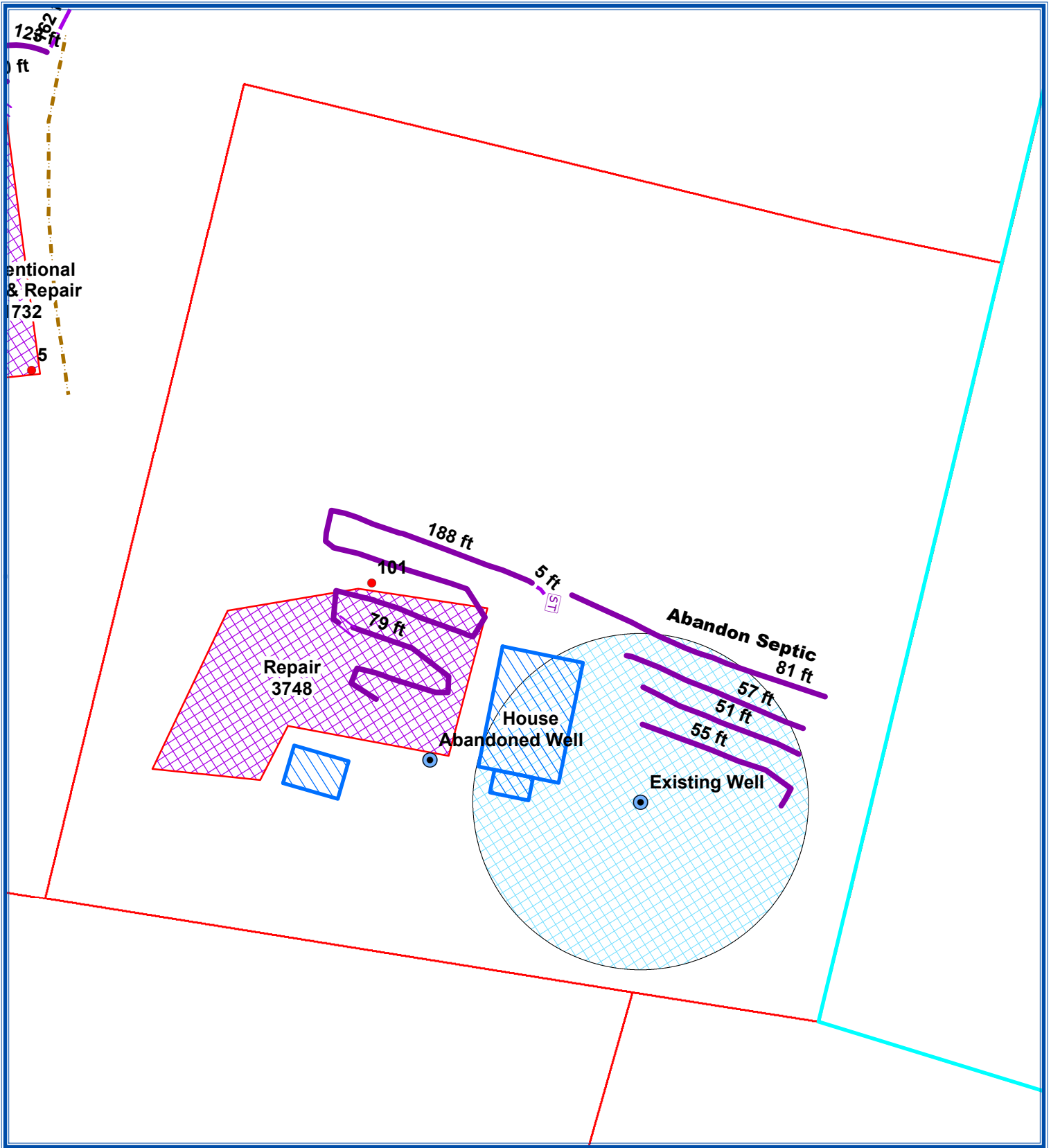
Establish cover over drainlines.

Access to tanks, tank components (pumps, float controls, valves, etc.), drainfields, or other system components must be maintained to allow periodic follow up inspections as required and/or to evaluate system concerns.

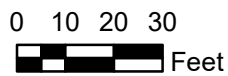
To avoid damage to the system, the septic tanks should be pumped out every 3-5 years.



Diagram



Address: 1205 NC Hwy 61
 Permit #: 22-04-SCHR-02925
 Issuer's Initials: RNL
 Date: 4/25/2024



1 inch = 40 feet

DISCLAIMER:
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Environmental Health Division
Water Quality Section
 400 W Market St.
 Greensboro, NC 27401
 (336) 641-7613



Authorization for Wastewater System Construction

Address: 1205 NC HIGHWAY 61, WHITSETT, NC 27377

Permit Number: 22-04-SCHR-02925

This Construction Authorization shall be valid for five years from the issue date of the Improvement Permit. The area designated for a Subsurface Sewage Treatment and Disposal System shall not be graded and appropriate measures shall be taken to prevent vehicular traffic, erosion, or any other disturbance to the site. Disturbance of this area, change of site plan, or change of intended use could result in the suspension or revocation of this Authorization.

Design Flow:	GPD	Septic Tank Capacity:	1000 GAL
Initial System Type:	2a – Conventional	Pump Tank Capacity:	GAL
Initial Trench Type:		Pump Dose Volume:	GAL to GAL
Gravity <input type="checkbox"/>	Pump <input type="checkbox"/>	Saprolite <input type="checkbox"/>	Number of Bedrooms: 2
Repair System Type:	2a – Conventional		
Repair Trench Type:		<u>Site Requirements:</u>	
Gravity <input type="checkbox"/>	Pump <input type="checkbox"/>	Saprolite <input type="checkbox"/>	Setback: FT off of the
Facility Type:			Offset: FT off of the
Trench Depth:	24 IN to 36 IN		Setup: FT
Trench Length:	270 FT		Basement: N
Trench Width:	36 IN		Well Site Available: N
Trench Separation:	FT On-Center		Repair Area Required: N
Soil Cover:	12 IN to 24 IN		
Gravel Depth:	12 IN		

Pre-Construction Meeting: N Post Construction Meeting: N Maintenance Agreement Required: N

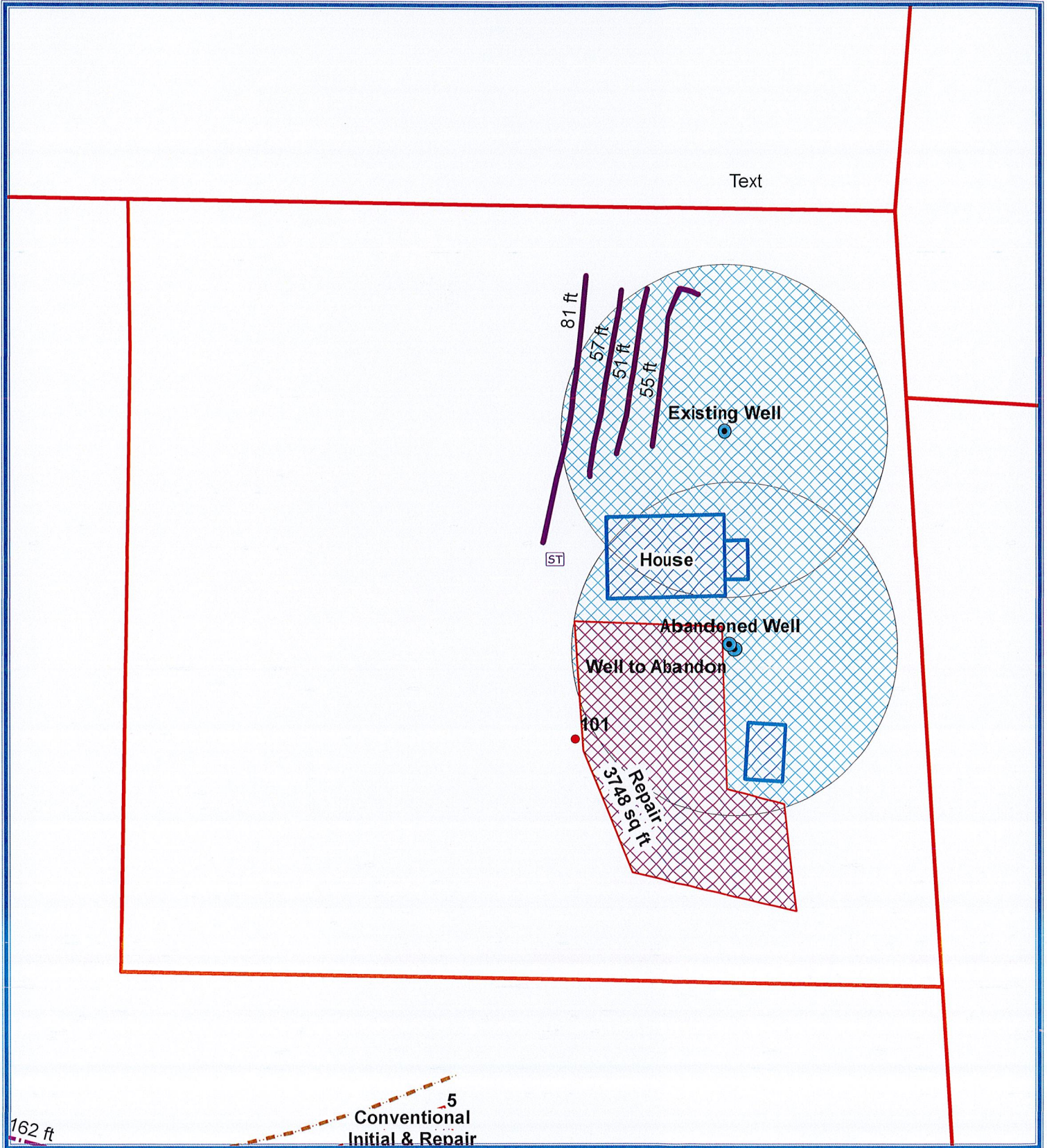
Authorization Issued: *Randy Hanna, REHS* Date Issued: 04/10/24
 Environmental Health Specialist

Owner or Authorized Agent: _____ Date: _____
 Owner or Authorized Agent

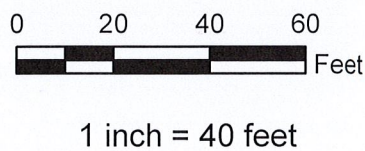
Comments: install 270' of conventional gravel type system in approved area as shown on permit - no reduction given for use of 3g system - maintain minimum setbacks - all surface water including gutter drains must be diverted away from septic system - all property lines must be well flagged at time of septic installation



Diagram



1205 NC Hwy 61
 Permit #:
 Issued by: Randy Duncan
 Date: 4/8/2024



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April 11, 2024

NOTICE OF VIOLATION

Janice Ragan
1205 NC Hwy 61 S
Re: Septic system too close to well

Dear, Mrs. Ragan

On, Friday April 05, 2024 our department made a visit to 1205 NC Hwy 61 S to investigate a complaint and found the septic system does not meet the minimum setback to the existing well. This violation endangers the public health and safety of this community and violates the **Laws and Rules for Sewage Treatment and Disposal, 15A NCAC 18E.1303(a)(1)(A), and Chapter 130A of the North Carolina General Statutes.**

Based on an initial inspection of the septic system located at 1205 NC Hwy 61 S, the septic system repair system must be installed in back yard to rectify this violation.

You are hereby notified that this violation must be corrected within 30 days of receipt of this notification. You may contact me directly to discuss this situation at *336 641-7833 or 336 641-7613*. If I am not available when you call, please leave a voice mail message with your phone number and I will return your call. Failure to comply with the directives of this notice will subject you to the following legal remedies, including but not limited to: Injunctive Relief [G.S. 130A-18], Administrative Penalties [G.S. 130A-22(c)], Suspension or Revocation of Permits [G.S. 130A-23], and Criminal Penalties [G.S. 130A-25]. **Prompt correction of this matter will avoid the expense and inconvenience of civil penalties and/or a court proceeding.** Thank you.

Sincerely,

A handwritten signature in black ink that reads "Randy Duncan, REHS".

Randy Duncan, REHS
Environmental Health Specialist

cc: Andrea Leslie-Fite
Guilford County Attorney

cc: Paula Cox, REHS
Environmental Health Director

**WASTEWATER TREATMENT AND DISPERSAL SYSTEMS
IN ACCORDANCE WITH 15A NCAC 18E .1306**

**This page to be completed by owner of property or owner's legal representative*

DATE: 02/05, 20 24

WASTEWATER SYSTEM OWNER – For a place of residence list the property owner(s). For all others, list name of the business or organization and person delegated signature authority:

Print Property Owner(s): INTERIOR COSTRUCTION CO.
Business/Organization/Contact: JANICE RAGAN
Mailing Address: 7147 SUMMERDALE RD.
City: ELON State: NC Zip Code: 27244 County: GUILFORD
Telephone Number(s): 336-684-5954
Email Address: buddy111@centurylink.net

PHYSICAL LOCATION OF WASTEWATER SYSTEM

Parcel Identification Number (PIN): _____
Physical Address (if different than mailing address): 1205 NC HWY 61,
City: WHITSETT State: NC Zip Code: 27377

OWNER ATTESTATION

I, X DELTON RAGAN, hereby request the use of best professional judgment in accordance
Owner's Printed Name

with 15A NCAC 18E .1306. I understand that the use of best professional judgment may be used to develop a repair that should enable my malfunctioning subsurface wastewater system to comply with 15A NCAC 18E .1303(a)(1) and give the system a reasonable expectation to function correctly. I agree to comply with all terms and conditions set forth on the associated repair permit, including any operation and maintenance requirements. By signing this document, I understand that I shall be liable for any damages associated with the use of best professional judgment to repair this malfunctioning subsurface wastewater system.

Owner's Signature: *Delton Ragan* Date: 02/05/2024

**This written agreement shall be attached to the Construction Authorization, Operation Permit, Notice of Intent to Construct, or Authorization to Operate, as applicable.*

Address: 100 NC 11901 City: WILMINGTON Parcel REID #: _____
 Development Name: _____ Section/Phase #: _____ Lot #: _____ Plat Book #: _____ Page #: _____
 Lot of Record First Lot Out Plat Required >5 acres (5-17-65 to 2-1-74) >10 acres (2-1-74 to present)
 Date Lot Originally Deeded & Recorded: _____

ZONING INFORMATION

Zoning: _____ Conditional Zoning (Describe): _____
 Watershed: _____ Watershed Critical Area: _____
 Building Setbacks (Zoning): Front Street: _____ Side Street: _____ Rear: _____
 Comments: _____

PLANNING DEPARTMENT OFFICIAL: _____

APPLICANT INFORMATION

Applicant Name: JANICE RAGAN Address: 7147 Summerdale Rd. Elon, NC, 27244
 Phone 1: 336-684-5954 Phone 2: _____ Email: Duddy11@Centurylink.net
 Owner Name: Interior Construction CO Address: 7147 Summerdale Rd. Elon, NC, 27244
 Phone 1: 336-210-0058 Phone 2: _____ Email: _____

DEVELOPMENT INFORMATION

NEW ACCESSORY SWMH MULTIFAMILY/DUPLEX ADDITION (TYPE) _____
 HOUSE MODULAR DWMH RENOVATION OTHER TYPE _____
 Residential Specifications: Max # of Bedrooms: _____ MAX # of Occupants: _____ Total # of Rooms: _____ Size of Structure (sq ft): _____
 Basement: Yes No Basement Fixtures: Yes No Other _____
 Non-Residential Type: Commercial Industrial Industrial Process _____
 Wastewater Strength: Domestic High Strength _____
 MAX # of Employees: _____ # of Fixtures: _____ Plumbing: _____ Size of Structure (sq ft): _____
 Description of Facility: _____
 Other Flow Related Info (# Seats (e.g. Restaurant), # Chairs (e.g. Beauty Shop), # Spaces, Etc.): _____

Water Supply Proposed: New Well Existing Well Community Well Public Water Spring
 Are there any existing wells, springs, or waterlines on this property? Yes No

Sewage Disposal: Please Indicate Desired System Type (see back)

Conventional Accepted Modified Alternative Other **Repair** Any/All

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 and is given in good faith. 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, making the site accessible so that a complete site evaluation can be performed, and compliance with applicable governing regulations.

IF THE INFORMATION IN THE APPLICATION FOR AN IMPROVEMENT PERMIT IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT AND AUTHORIZATION TO CONSTRUCT MAY BECOME INVALID.

PROPERTY SERVICE CHART

ADDRESS

REID #

SERVICE	COMMENTS	DATE	REHS
Site Visit	New ST Bored well to abandon - Existing well may too close to Existing septic field	4/25/22	MSR
	240' x 12" x 3' New ST		
RAC	Issued	4/27/22	MSR
Tank Replacement	Gearld Clapp Crushed existing tank set 13' off right side HPPP 1000 Gallon(STB 760 3/30/2022) w/Polylok Filter.	5/26/22	DWJ
OP	Issued	5/27/22	DWJ



Environmental Health Division
Water Quality Section
 400 W. Market St.
 Greensboro, NC 27401
 (336) 641-7613

Permit to Repair a Well

Address: 1205 S NC HIGHWAY 61, WHITSETT, NC 27377-9774

Permit Number: 22-03-WRHR-02059

Comments/Specifications:

- Extend casing 12" above grade.
- Grout from 6" below joint to surface.
- Complete well head according to Guilford County rules.
- Submit record of repair.

Above Information Certified By: John Rodney Gouin
 Owner or Authorized Agent

Date: 3-29-22

Permit Issued: [Signature] REHS
 Environmental Health Specialist

Date Issued: 3-23-22

I certify that a grout inspection was completed and is in compliance with Guilford County Well Rules.

Partial Grout Inspection: _____
 Environmental Health Specialist

Date: _____

Final Grout Inspection: [Signature] REHS-I
 Environmental Health Specialist

Date: 3/29/22

Permits for the Repair of Wells shall expire one year from date of issuance.

- **All property lines and corners shall be clearly flagged prior to construction of the well.**
- **All proposed structures shall be clearly flagged prior to construction of the well.**

Record of Construction, Repair, or Abandonment of a Well

Address of Well: 1205 S NC Hwy 61 LATITUDE 3

Well Permit Number: 22-03-WRHR-02059 LONGITUDE _____

Well Contractor Company: Willie Saul + Son Plumbing Completion Date: 3/29/22

Total Well Depth: 95 ft. Well Yield: _____ gpm Static Water Level: _____ ft.

~~Outer~~ ^{CuA} Casing Material: Steel
 Casing Diameter: 6 1/8 in. Casing Depth: 3 ft.

~~Inner~~ ^{Existing} Casing Material: Steel
 Casing Diameter: 6 in. Casing Depth: _____ ft.

Formation Log

Depth	Description
From: _____ ft. To: _____ ft.	_____
From: _____ ft. To: _____ ft.	_____
From: _____ ft. To: _____ ft.	_____
From: _____ ft. To: _____ ft.	_____
From: _____ ft. To: _____ ft.	_____
From: _____ ft. To: _____ ft.	_____
From: _____ ft. To: _____ ft.	_____

Grout

Depth	Material	Method
From: _____ ft. To: _____ ft.	_____	_____
From: _____ ft. To: _____ ft.	_____	_____
From: _____ ft. To: _____ ft.	_____	_____

Water Production Zones

Depth: _____ ft.	_____ ft.	_____ ft.	_____ ft.	_____ ft.	_____ ft.	_____ ft.
Yield: _____ gpm	_____ gpm	_____ gpm	_____ gpm	_____ gpm	_____ gpm	_____ gpm

Method of Repair: _____

Method of Abandonment: _____

I hereby certify that this well was constructed, repaired, or abandoned according to the Guilford County Well Rules in effect on this date and that a copy of this record has been provided to the well owner.

Well Contractor: John Rodney Garrison Certification #: 3882-C Date: 3-29-22

Record of Pump Installation

Pump Installation Company: Willie Saul and Son Plby. Completion Date: 3-29-22

Pump Depth: 63 ft. Static Water Level: 15 ft.

Pump Brand: GRUNDOS Pump Size and Rating: 3/4 hp 10 gpm

I hereby certify that this pump was installed and wellhead completed according to the Guilford County Well Rules in effect on this date and that a copy of this record has been provided to the well owner.

Well Contractor: John Rodney Garrison Certification #: 3882-C Date: 3-29-22



GUILFORD COUNTY RECEIPT

Planning & Development

400 West Market Street
Greensboro, NC 27402
336-641-3334 - Planning
336-641-3707 - Permitting

Environmental Health

400 West Market Street
Greensboro, NC 27402
336-641-7613

RECEIPT INFO

<u>Receipt #</u>	<u>Receipt Date</u>	<u>Payor</u>	<u>Payment Method</u>	<u>Check/CC #</u>	<u>Receipt Amount</u>
165006	03/23/2022	Willie Saul and Son Plumbing	Visa		\$110.00

Cashier ID: SFLANAG

<u>Fee Item Description</u>	<u>Account Code</u>	<u>Amount</u>
Well Repair/No Camera	210545 45336	\$110.00
Total		\$110.00

APPLICATION INFO

<u>Application #</u>	<u>Application Type</u>	<u>Application Name</u>
22-03-WRHR-02059	Building/Guilford County/Health Residential/Well Repair	

PROPERTY INFO

<u>Property Address</u>	<u>Property Owner</u>	<u>Parcel #</u>
1205 S NC HIGHWAY 61 WHITSETT, NC 27377-9774	Dale & Janice Ragan 7147 Summerdale Rd Elon, Nc 27244	103428

CONTACT INFO

<u>Contact Name</u>	<u>Contact Type</u>
Dale & Janice Ragan 7147 Summerdale Rd Elon, Nc 27244	Applicant

LICENSED PROFESSIONAL INFO

<u>Primary</u>	<u>License #</u>	<u>License Type</u>	<u>Licensed Prof</u>	<u>Business Name</u>	<u>Lawson #</u>
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APPLICATION FOR ENVIRONMENTAL HEALTH SERVICE



NUMBER: 22-03-WRHR-02059

APPLICATION TYPE: Building/Guilford County/Health Residential/Well Repair

PROPERTY ADDRESS: 1205 S NC HIGHWAY 61, WHITSETT, NC 27377-9774

APPLICANT: Applicant

Dale & Janice Ragan
7147 Summerdale Rd
Elon, NC, 27244

Phone: 336-684-5954

Phone:

Fax:

Email:

#110
Melissa
336-584-6324

OWNER:

Dale & Janice Ragan
7147 Summerdale Rd
Elon, NC, 27244

Phone: 336-684-5954

PARCEL NUMBER: 103428

Subdivision:

Phase:

Lot:

Lot Size:

Recorded prior to 1983?:

Directions: I-85 north; Exit and T/R NC 61; take immediate left into driveway

EXISTING:

Water Supply: Yes

Location:

Septic System: Yes

Location:

PROPOSED:

Bedrooms:

Residents:

Water Supply: One Single Family Dwelling

Additional Type:

Facility Type:

Dining Area:

Building Size:

Floor Drains:

Employees/Seats:

Industrial Process:

Kitchen:

Shifts:

COMMENTS:

Extend Well Casing Above Grade

Rodney Garrison - Willie Saul Plumbing

IMPORTANT

I hereby grant authorized County and/or State officials right of entry to conduct necessary inspections and evaluations to determine compliance with the applicable rules.

OWNER/AUTHORIZED AGENT SIGNATURE

DATE



Guilford County
 Environmental Health Division
 Water Quality Section
 400 W. Market Street
 Greensboro, NC 27401
 336.641.7613



Operation Permit

Address: 1205 NC HIGHWAY 61 , WHITSETT, NC 27377

Permit Number: 22-04-SCHR-02925

Contractor:

Filter Type	Polylock	Product Name	Gravel
Septic Tank Size	1000 GAL	System Type	2a - Conventional
Septic Tank Type	HPPP STB 760	Trench Length	270 FT
		Trench Width	36 IN
		Wastewater Flow	240 GPD

Comments:

Geardl Clapp Crushed existing tank set 13' off right side HPPP 1000 Gallon

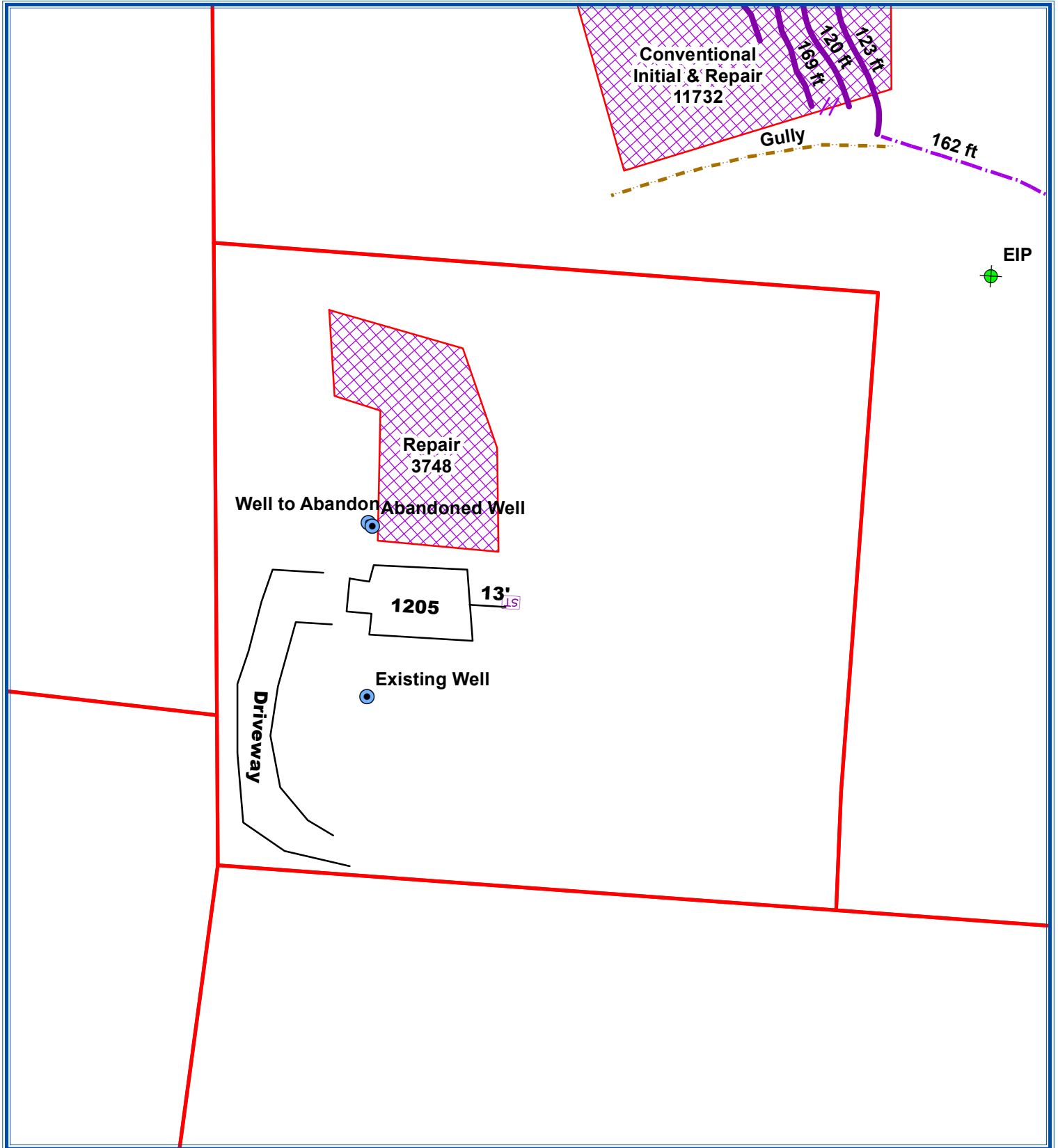
Drainfield Approval: _____ Date: _____
 Environmental Health Specialist
Dillon James, RCHS

Tank Approval: _____ Date: 5/26/22
 Environmental Health Specialist

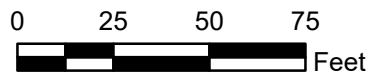
Operational Permit Approval: *Dillon James, RCHS* Date Issued: 5/27/22
 Environmental Health Specialist

This System is in compliance with Article 11 of G.S. Chapter 130A .1900 "Sewage Treatment and Disposal Systems" and all conditions prescribed by the Authorization for Wastewater System Construction. This Operation Permit is subject to suspension or revocation if the stated conditions are not met.

Diagram



Address: 1205 NC Highway 61
Permit #: 22-04-SCHR-02925
Issuer's Initials: DWJ
Date: 05/27/2022



1 inch = 50 feet

DISCLAIMER:
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CONDITIONS:

Initial system and designated repair areas must be protected from traffic, construction, destruction, cultivation, landscaping, erosion, or any other circumstances that may alter site conditions and may cause problems with the initial system or the future system as permitted.

Surface and/or subsurface drainage diversion around the system must be maintained as permitted.

Heavy vegetative growth over drainfields and the root system of many shallow-rooted trees are detrimental to the proper operation of subsurface sewage systems and must be controlled periodically.

All subsurface sewage disposal systems must be maintained and operated in a manner that prevents surface discharge or any other potential public health concerns. All public health concerns created by the operation of this system must be addressed immediately (within 48 hours). Required permits to correct the public health concern must be obtained from the Environmental Health Water Quality Unit and corrections to the system are to be completed within 30 days of the date of that permit.

Establish cover over drainlines.

Access to tanks, tank components (pumps, float controls, valves, etc.), drainfields, or other system components must be maintained to allow periodic follow up inspections as required and/or to evaluate system concerns.

To avoid damage to the system, the septic tanks should be pumped out every 3-5 years.



**Environmental Health Division
Water Quality Section**
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Authorization for Wastewater System Construction

Address: 1205 NC HIGHWAY 61, WHITSETT, NC 27377

Permit Number: 22-04-SCHR-02925

This Construction Authorization shall be valid for five years from the issue date of the Improvement Permit. The area designated for a Subsurface Sewage Treatment and Disposal System shall not be graded and appropriate measures shall be taken to prevent vehicular traffic, erosion, or any other disturbance to the site. Disturbance of this area, change of site plan, or change of intended use could result in the suspension or revocation of this Authorization.

System Type:	2a - Conventional	Wastewater Flow:	240	GPD
Repair System Type:	2a - Conventional	Facility Type:	Residence	
Trench Length:	270	ft	Bedrooms:	2
Trench Depth:	24	in to	36	in
Trench Width:	36	in	<u>Site Requirements:</u>	
Gravel Depth:	12	in	Setback:	ft off of the
Trench Separation:	9	ft On-Center	Offset:	ft off of the
Soil Cover:	12	in to	24	in
Septic Tank Size:	1000	gal	Setup:	ft off of the rear
Pump Tank Size:		gal	Basement:	N
Dosing Volume:		gal to	gal	Well Site: Left Front
			Repair Area Maintained:	N

Authorization Issued:


Environmental Health Specialist

Date Issued:

4/27/22

Owner or Authorized Agent:

Owner or Authorized Agent

Date:

Comments: Pump, crush, and fill old tank and replace with new tank of specified size. If cover over tank will exceed 6" depth, risers must be installed to bring to within 6" of ground surface. Maintain 50' + from any well unless otherwise noted on permit or site plan. Property owner is responsible for marking property lines for septic contractor. Recommend locating the existing nitrification lines (septic drainfield /leach field/ leach lines) to ensure proper separation from existing well (water supply). If the lines are found to be less than 50 feet from the existing water supply then use the comments below and all the specifications: Abandon the bored well located in the rear prior to starting installation. Pump, crush, and fill old tank and replace with new tank of specified size. If cover over tank will exceed 6" depth, risers must be installed to bring to within 6" of ground surface. Install nitrification lines on contour and within designated repair area. No reduction granted for use of type 3g system. Maintain 50' + from any well unless otherwise noted on permit or site plan. Property owner is responsible for marking property lines for septic contractor.

ConstructionAuth

NWS 4-27-22



Environmental Health Division
Water Quality Section
400 W Market St.
Greensboro, NC 27401
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Permit to Abandon a Well

Address: 1205 NC HIGHWAY 61, WHITSETT, NC 27377

Permit Number: 22-04-WAHR-02928

Comments/Specifications:

Existing bored well to be properly abandoned by property owner or certified well contractor according to Guilford County rules. Well contractor to schedule required inspections. Call at least two hours prior to abandonment to schedule inspection. Call the Guilford County Health Department if you have any questions.

Above Information Certified By: _____

Owner or Authorized Agent

Date: _____

Permit Issued:


Environmental Health Specialist

Date
Issued: _____

4/27/22

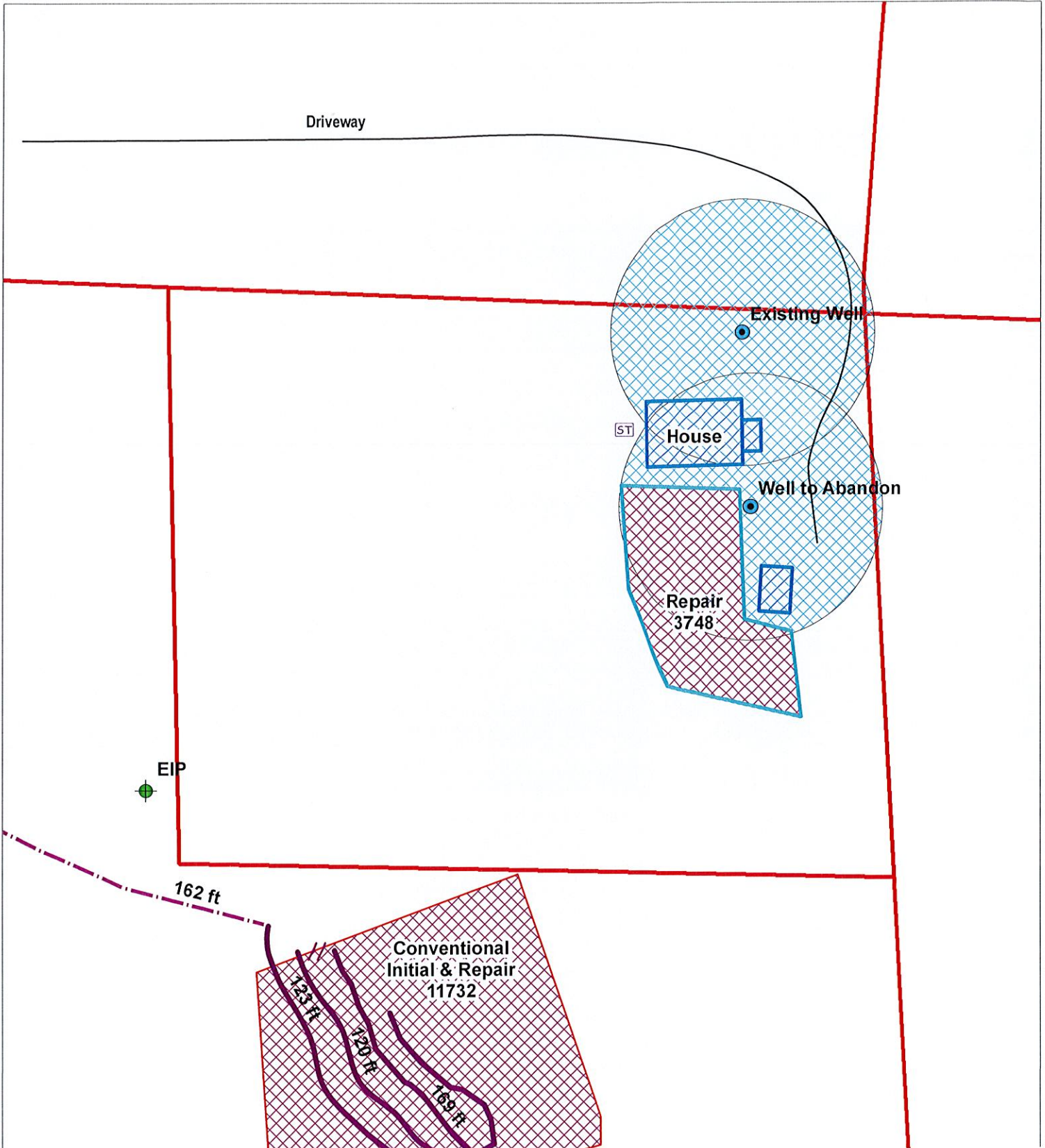
Permits for the Abandonment of Wells shall be valid without expiration.

All property lines and corners shall be clearly flagged prior to construction of the well.

All proposed structures shall be clearly flagged prior to construction of the well.



Diagram

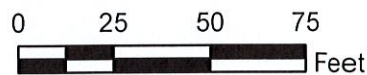


Address: 1205 NC HWY 61

Permit #: 22-04-SCHR-02925

Issuer's Initials: MSR

Date: 4/27/2022



1 inch = 50 feet

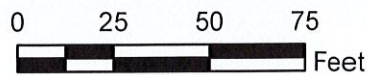
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Diagram



Address: 1205 NC HWY 61
Permit #: 22-04-SCHR-02925
Issuer's Initials: MSR
Date: 4/27/2022



1 inch = 50 feet

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APPLICATION FOR ENVIRONMENTAL HEALTH SERVICE



NUMBER: 22-04-SCHR-02925
APPLICATION TYPE: Building/Guilford County/Health Residential/Septic Complaints and Repairs
PROPERTY ADDRESS: 1205 NC HIGHWAY 61, WHITSETT, NC 27377

APPLICANT: Applicant

JANICE REGAN
PO BOX 899
GRAHAM, NC, 27253

Phone: 336-684-5954
Phone:
Fax:
Email: buddy111@centurylink.net

OWNER:

Interior Construction Inc Of Graham
PO BOX 899
GRAHAM, NC, 27253

Phone: 336-684-5954

PARCEL NUMBER: 103428

Subdivision: Phase: Lot:
Lot Size: Recorded prior to 1983?:
Directions: I40/85 to NC61 T/R NC61, property on left behind church

EXISTING:

Water Supply: Yes **Location:** front
Septic System: **Location:**

PROPOSED:

Bedrooms: 2 **Residents:**
Water Supply: **Additional Type:**
Facility Type: **Dining Area:**
Building Size: **Floor Drains:**
Employees/Seats: **Industrial Process:**
Kitchen: **Shifts:**

COMMENTS:

IMPORTANT

I hereby grant authorized County and/or State officials right of entry to conduct necessary inspections and evaluations to determine compliance with the applicable rules.

OWNER/AUTHORIZED AGENT SIGNATURE

DATE

Guilford County, NC



Parcel Number	103428	Total Out Building Value	0
PIN	8834310107	Total Land Value	35300
Owner	INTERIOR CONSTRUCTION INC OF GRAHAM	Total Deferred Value	0
Owner History	Card Image	Bldg Card	1
Mail Address	PO BOX 899	Appraisal Model Code	1
Mail City	GRAHAM	Deed Data	6/17/2020
Mail State	NC	Neighborhood	8833R04
Mail Zip	27253	Property Type	RESIDENTIAL
Property Address	1205 NC HIGHWAY 61 S	Structure Size	925
Legal Description	1.25 AC HOLT 82-43-769	Lot Size	1.25
Deed	008292-02334	Year Built	1965
Plat		Bedrooms	2
Condo		Bathrooms	1
Total Assessed	94700	Grade	C+5 105%
Total Building Value	59400		



Disclaimer: While every effort is made to keep information provided over the internet accurate and up-to-date, Guilford County does not certify the authenticity or accuracy of such information. No warranties, express or implied, are provided for the records and/or mapping data herein, or for their use or interpretation by the User.

Map Scale
1 inch = 63 feet
 4/11/2022



Environmental Health Division
Water Quality Section
400 W. Market St.
Greensboro, NC 27401
(336) 641-7613

Permit to Repair a Well

Address: 1205 S NC HIGHWAY 61, WHITSETT, NC 27377-9774 Permit Number: 22-03-WRHR-02059

Comments/Specifications:

- Extend casing 12" above grade.
- Grout from 6" below joint to surface.
- Complete well head according to Guilford County rules.
- Submit record of repair.

Above Information Certified By:

Date:

Owner or Authorized Agent

Permit Issued:

Date Issued:



Environmental Health Specialist

3-23-22

I certify that a grout inspection was completed and is in compliance with Guilford County Well Rules.

Partial Grout Inspection:

Date:

Environmental Health Specialist

Final Grout Inspection:

Date:

Environmental Health Specialist

Permits for the Repair of Wells shall expire one year from date of issuance.

- **All property lines and corners shall be clearly flagged prior to construction of the well.**
- **All proposed structures shall be clearly flagged prior to construction of the well.**



GUILFORD COUNTY RECEIPT

Planning & Development
400 West Market Street
Greensboro, NC 27402
336-641-3334 - Planning
336-641-3707 - Permitting

Environmental Health
400 West Market Street
Greensboro, NC 27402
336-641-7613

RECEIPT INFO

<u>Receipt #</u>	<u>Receipt Date</u>	<u>Payor</u>	<u>Payment Method</u>	<u>Check/CC #</u>	<u>Receipt Amount</u>
165006	03/23/2022	Willie Saul and Son Plumbing	Visa		\$110.00

Cashier ID: SFLANAG

<u>Fee Item Description</u>	<u>Account Code</u>	<u>Amount</u>
Well Repair/No Camera	210545 45336	\$110.00
		<u>Total</u> \$110.00

APPLICATION INFO

<u>Application #</u>	<u>Application Type</u>	<u>Application Name</u>
22-03-WRHR-02059	Building/Guilford County/Health Residential/Well Repair	

PROPERTY INFO

<u>Property Address</u>	<u>Property Owner</u>	<u>Parcel #</u>
1205 S NC HIGHWAY 61 WHITSETT, NC 27377-9774	Dale & Janice Ragan 7147 Summerdale Rd Elon, Nc 27244	103428

CONTACT INFO

<u>Contact Name</u>	<u>Contact Type</u>
Dale & Janice Ragan 7147 Summerdale Rd Elon, Nc 27244	Applicant

LICENSED PROFESSIONAL INFO

<u>Primary</u>	<u>License #</u>	<u>License Type</u>	<u>Licensed Prof</u>	<u>Business Name</u>	<u>Lawson #</u>
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APPLICATION FOR ENVIRONMENTAL HEALTH SERVICE



NUMBER: 22-03-WRHR-02059
APPLICATION TYPE: Building/Guilford County/Health Residential/Well Repair
PROPERTY ADDRESS: 1205 S NC HIGHWAY 61, WHITSETT, NC 27377-9774

APPLICANT: Applicant

Dale & Janice Ragan
7147 Summerdale Rd
Elon, NC, 27244

Phone: 336-684-5954
Phone:
Fax:
Email:

OWNER:

Dale & Janice Ragan
7147 Summerdale Rd
Elon, NC, 27244

Phone: 336-684-5954

PARCEL NUMBER: 103428

Subdivision: Phase: Lot:
Lot Size: Recorded prior to 1983?:
Directions: I-85 north; Exit and T/R NC 61; take immediate left into driveway

EXISTING:

Water Supply: Yes Location:
Septic System: Yes Location:

PROPOSED:

Bedrooms: Residents:
Water Supply: One Single Family Dwelling Additional Type:
Facility Type: Dining Area:
Building Size: Floor Drains:
Employees/Seats: Industrial Process:
Kitchen: Shifts:

COMMENTS:

Extend Well Casing Above Grade

Rodney Garrison - Willie Saul Plumbing

IMPORTANT

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OWNER/AUTHORIZED AGENT SIGNATURE

DATE

Guilford County, NC



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 3/23/2022