





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



## Authorization for Wastewater System Construction

Address: 519 S BUNKER HILL RD, COLFAX, NC 27235

Permit Number: 23-09-SNHR-00744

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:	360 GPD	Septic Tank Capacity:	1000 GAL	
Initial System Type:	3b – Single Pump or Siphon	Pump Tank Capacity:	1000 GAL	
Initial Trench Type:	Chamber	Pump Dose Volume:	138 GAL to 157 GAL	
Gravity <input type="checkbox"/>	Pump <input checked="" type="checkbox"/>	Saprolite <input type="checkbox"/>	Number of Bedrooms: 3	
Repair System Type:	3b – Single Pump or Siphon	<u>Site Requirements:</u>		
Repair Trench Type:	Chamber	Setback:	105 FT off of the Front	
Gravity <input type="checkbox"/>	Pump <input checked="" type="checkbox"/>	Saprolite <input type="checkbox"/>	Offset:	65 FT off of the Left
Facility Type:	Single Family	Setup:	FT	
Trench Depth:	18 IN to 29 IN	Basement:	N	
Trench Length:	330 FT	Well Site Available:	Y	
Trench Width:	36 IN	Repair Area Required:	Y	
Trench Separation:	9 FT On-Center			
Soil Cover:	6 IN to 17 IN			
Gravel Depth:	IN			

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

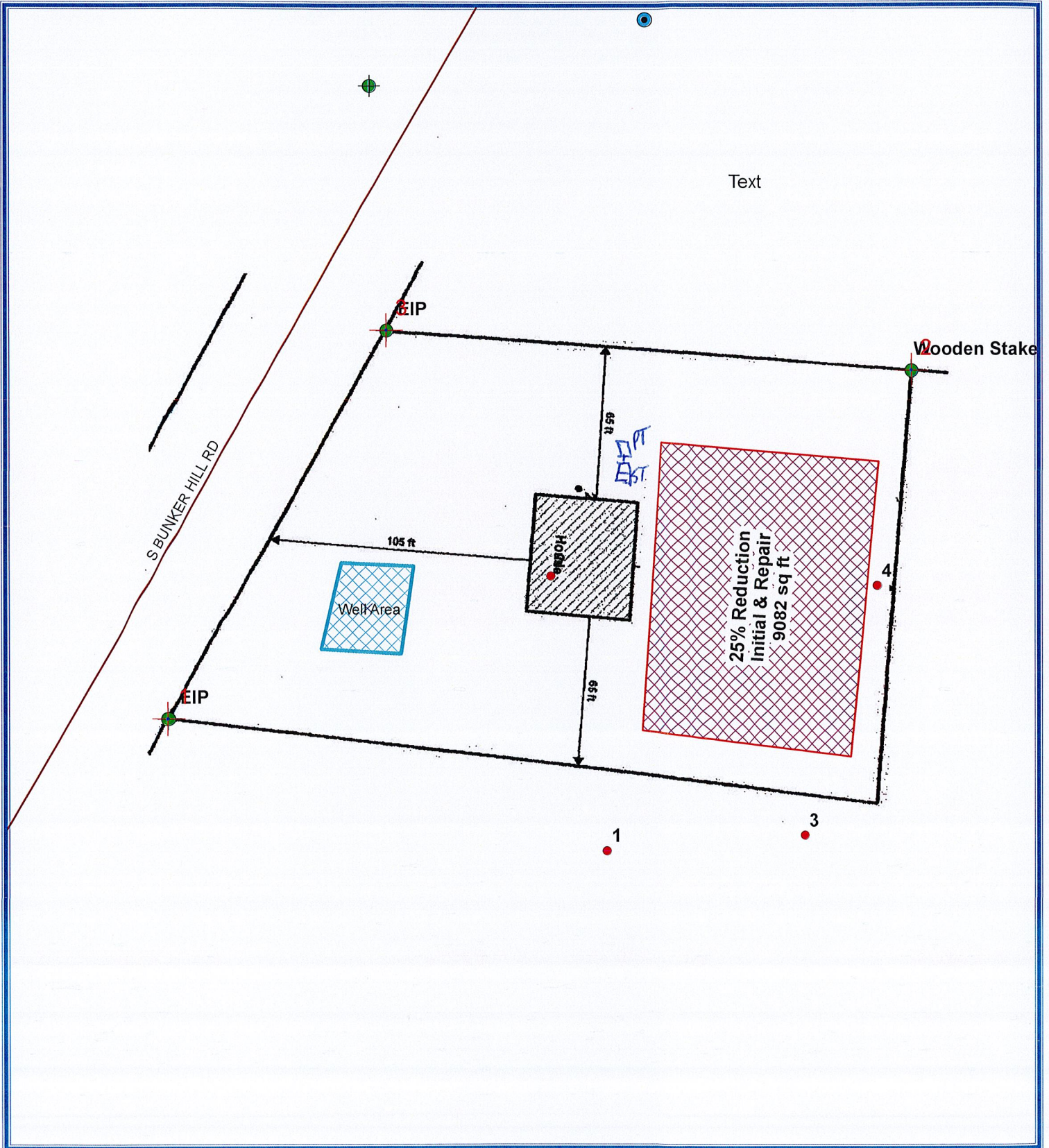
Authorization Issued: *Randy Dunson, REHS*      Date Issued: 03/15/24  
 Environmental Health Specialist

Owner or Authorized Agent: *[Signature]*      Date: 03/25/24  
 Owner or Authorized Agent

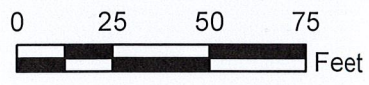
Comments: This permit issued under .1900 rules - plumb out left side of house to septic tank and pump tank - run schedule 40 supply line to highest point in approved area - install 330' of 25% reduction type drainfield on contour in approved area - maintain minimum setbacks - all surface water including gutter drains must be diverted away from septic system - all property lines must be well flagged at time of septic installation - this type of septic system requires periodic inspections by Guilford County Health Department with applicable fees



# Diagram



519 S Bunker Hill Rd  
 Permit #:  
 Issued by: Randy Duncan  
 Date: 3/15/2024



1 inch = 50 feet

**DISCLAIMER:**  
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**Guilford County  
Department of Public Health  
Water Quality Unit**

**Type IIIb Attachment**

The attached construction authorization (permit# 23-09-SNAR-00744) for the on-site sewage treatment and disposal system to be constructed at 5195. Bunker Hill Rd has been issued for a "single effluent pump," system classification type IIIb.

**The North Carolina Laws and Rules for Sewage Treatment, and Disposal Systems 15A NCAC 18A. 1961 requires the local health department to conduct routine inspections of this system at least once every five years in order to protect the public health. To recover the cost of providing this state mandated service, the Guilford County Board of County Commissioners approved a fee to be assessed of the system owner. At present, the fee is \$150.00 every five years billed at time of inspection.**

If you have any questions regarding this system type, health department inspection policies or the current fee schedule please contact this office at 336-641-7613. Thank you.

 3/25/24  
Owner/Authorized Agent                      Date



# Environmental Health Division Water Quality Section

400 W Market St.  
Greensboro, NC 27401  
(336) 641-7613

## Permit to Construct a Well

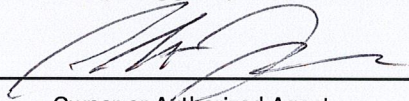
**Address:** 519 S BUNKER HILL RD  
COLFAX, NC 27235

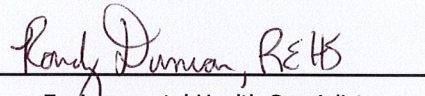
**Permit Number:** 24-02-WNHR-00545

### Comments/Specifications:

Well shall be located and constructed according to North Carolina and Guilford County Well Rules. Well site must meet minimum separation distances.

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

Above Information Certified By:  Date: 3/25/24  
Owner or Authorized Agent

Permit Issued:  Date Issued: 03/15/24  
Environmental Health Specialist

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

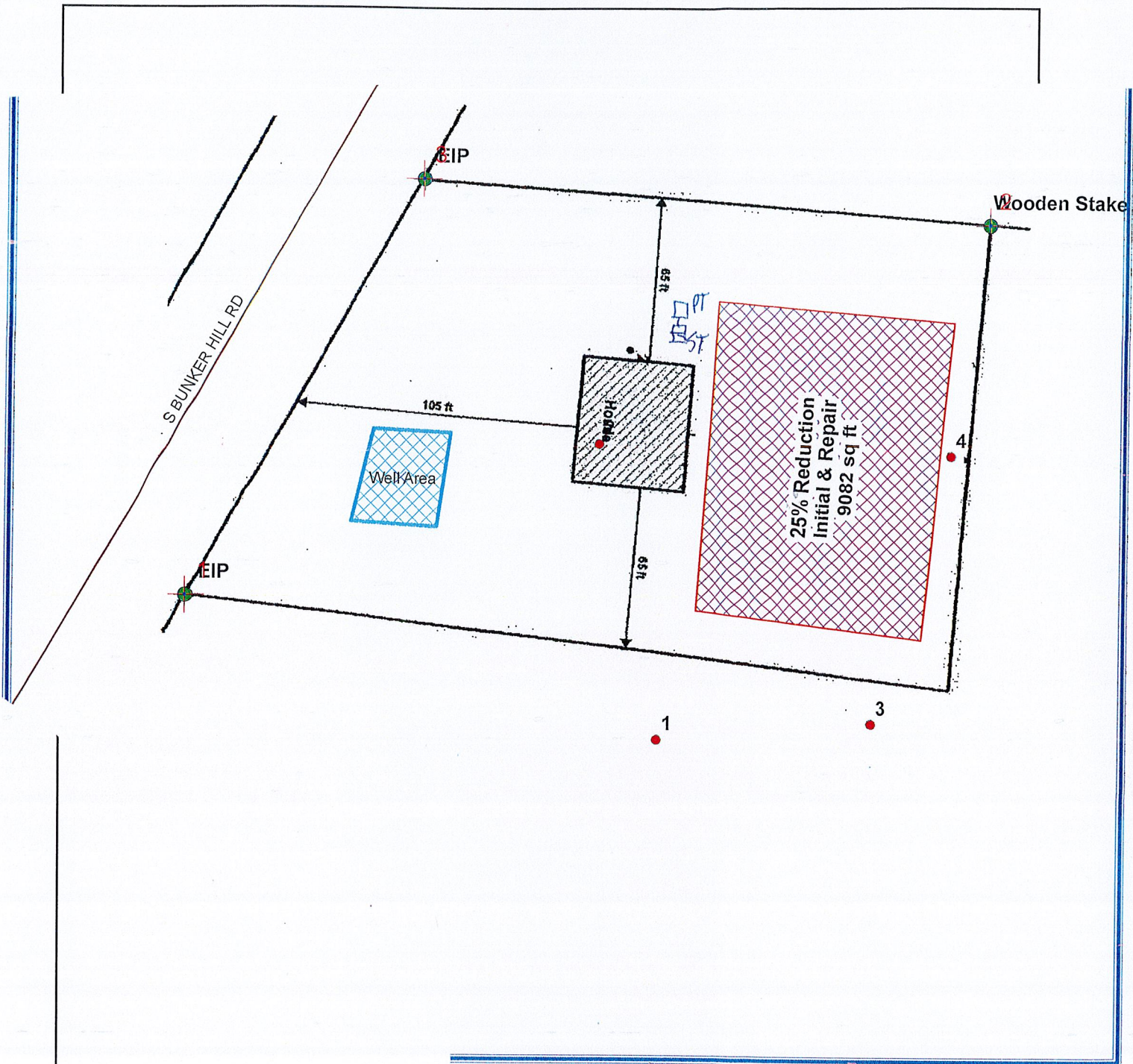
Partial Grout Inspection: \_\_\_\_\_ Date: \_\_\_\_\_  
Environmental Health Specialist

Final Grout Inspection: \_\_\_\_\_ Date Issued: \_\_\_\_\_  
Environmental Health Specialist

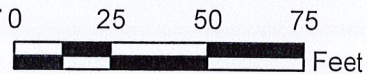
**Permits for the Construction of New Wells shall expire one year from date of issuance.**

- **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.**

# Diagram



Permit Number: 24-02-WNHR-00545



1 inch = 50 feet

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**Guilford County Application  
For Improvement Permit  
and/or Authorization to Construct**

- Scaled site plan submitted – (Valid 60 Months)
- Unscaled site plan submitted – (Valid 60 months)
- Survey plat to scale\* submitted – (Valid without expiration)
- \* scale of 1" = no more than 60'

*Layout*

Building Permit # 24-02-BLDR-02062 Septic Permit # 23-09-SNHR-00744 Well Permit # 24-02-WNHR-00545

**PROPERTY INFORMATION**

Address 519 S BUNKER HILL RD City COLFAX, NC 27235 Parcel REID # 168965  
 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: \_\_\_\_\_ Side Yard: \_\_\_\_\_ Rear: \_\_\_\_\_  
 Comments: \_\_\_\_\_

PLANNING DEPARTMENT OFFICIAL: \_\_\_\_\_

**APPLICANT INFORMATION**

Applicant Name: ROBERT TAYLOR DBA NEW CONSTRUCTION SERVICES Address: 7729 PEARMAN QUARRY RD KERNERSVILLE NC 27284  
 Phone 1: 336-362-4010 Phone 2: \_\_\_\_\_ Email: robertmtaylor3r@gmail.com  
 Owner Name: DARREN BOWDER Address: 1345 LAND GROVE DR KERNERSVILLE NC 27284  
 Phone 1: 336-337-2782 Phone 2: \_\_\_\_\_ Email: darrenandlynn@gmail.com

**DEVELOPMENT INFORMATION**

NEW  ACCESSORY  SWMH  MULTIFAMILY/DUPLEX  ADDITION (TYPE) \_\_\_\_\_  
 HOUSE  MODULAR  DWMH  RENOVATION  OTHER TYPE \_\_\_\_\_  
 Residential Specifications: Max # of Bedrooms: 3 MAX. # of Occupants: \_\_\_\_\_ Total # of Rooms: 6 Size of Structure (sq ft): 1820  
 Basement:  Yes  No Basement Fixtures:  Yes  No  
 Non-Residential Type:  Commercial  Industrial  Other \_\_\_\_\_  
 Wastewater Strength:  Domestic  High Strength  Industrial Process  
 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.): \_\_\_\_\_

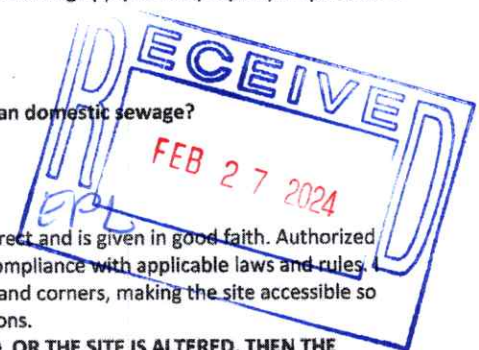
Water Supply Proposed:  New Well  Existing Well  Community Well  Public Water  Spring  
 Are there any existing wells, springs, or waterlines on this property?  Yes  No

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

Conventional  Accepted  Modified  Alternative  Other \_\_\_\_\_  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?



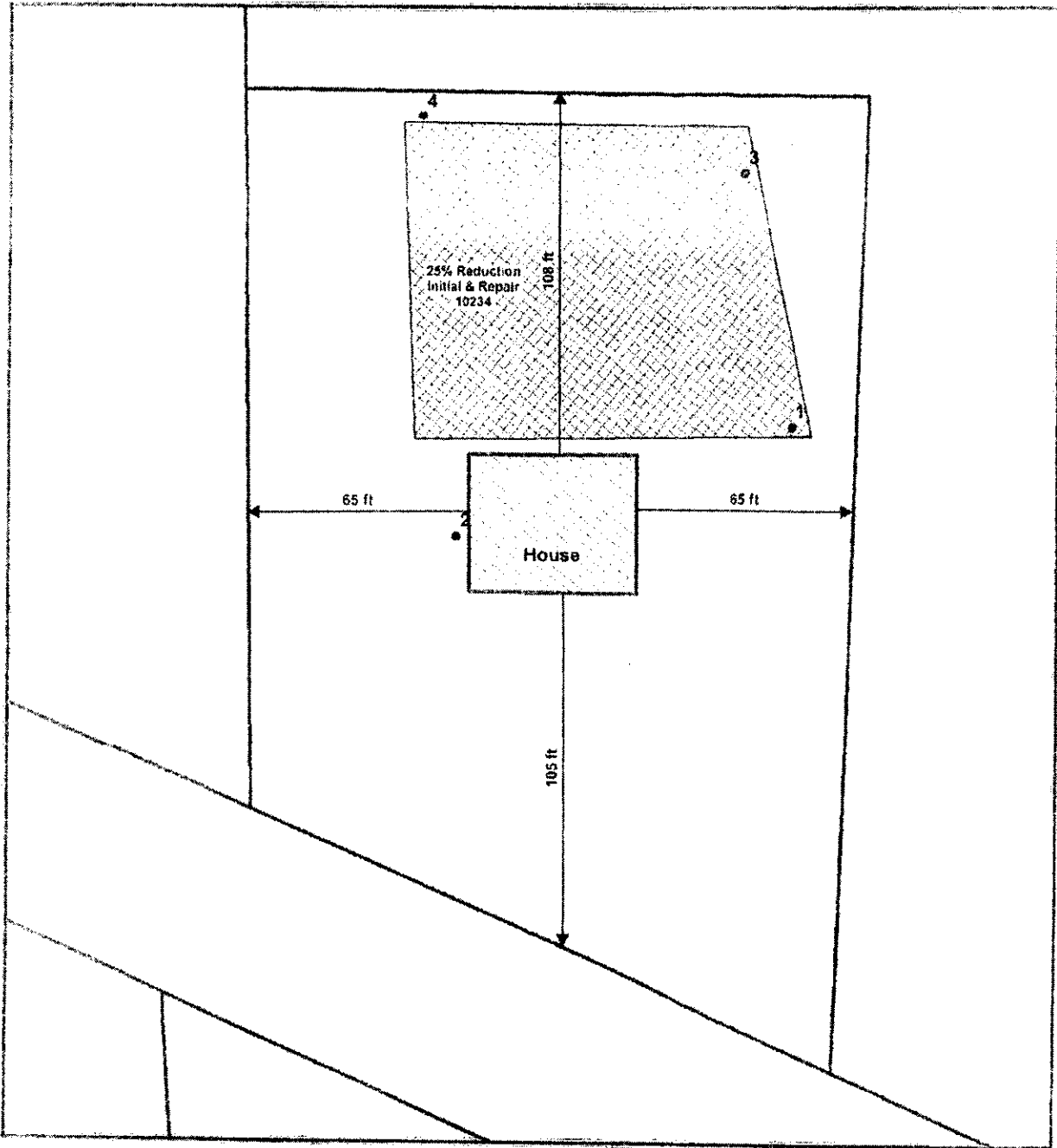
I have read this application and certify that the information provided herein is true, complete and correct and is given in good faith. Authorized County and State Officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules, understand 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 Owner's or Owner's Legal Representative\* Signature (Required) \_\_\_\_\_ Date 2/20/24  
 \* Must provide documentation to support claim as owner's legal representative.  
Hill Rd, lot on left past Houghton Rd. W Market St, H/L S. Bunker Hill Rd.



# Diagram

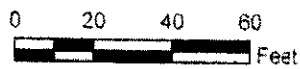


Address: 519 S Bunker Hill Rd.

Permit #: 23-09-SNHR-00744

Issuer's Initials: ELH

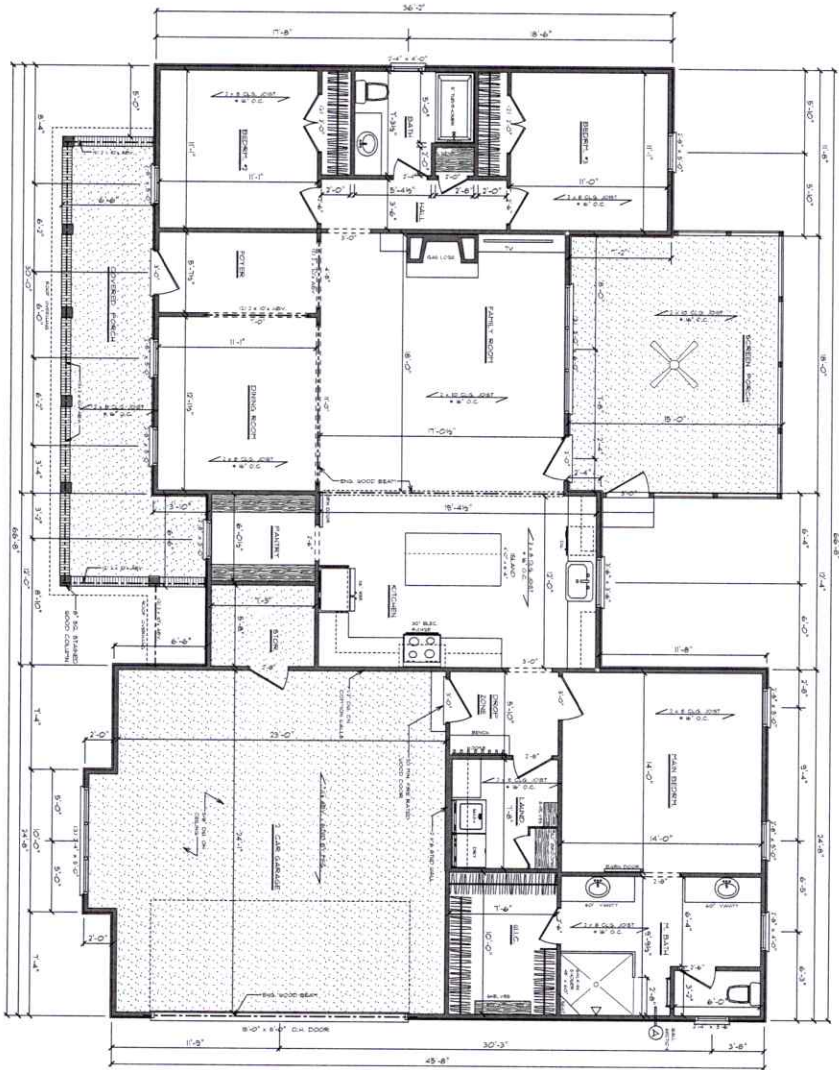
Date: 10/2/2023



1 inch = 40 feet

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**FIRST FLOOR PLAN**  
1920 SQ. FT. SCALE 1/4" = 1'-0"

NOTE CONTRACTOR OPTION TO USE ROOF TRUSSES.

THIS PLAN INCLUDES ITEMS THAT ARE ASSUMED TO COMPLY WITH ALL APPLICABLE LOCAL, STATE AND FEDERAL REQUIREMENTS. THE ARCHITECT ASSUMES NO LIABILITY FOR THE ACCURACY OF THE INFORMATION PROVIDED HEREON. THE ARCHITECT DOES NOT WARRANT OR REPRESENT THAT THE INFORMATION PROVIDED HEREON IS COMPLETE, ACCURATE, OR CURRENT. THE ARCHITECT ASSUMES NO LIABILITY FOR THE ACCURACY OF THE INFORMATION PROVIDED HEREON. THE ARCHITECT DOES NOT WARRANT OR REPRESENT THAT THE INFORMATION PROVIDED HEREON IS COMPLETE, ACCURATE, OR CURRENT.

I CERTIFY THAT I AM A PROFESSIONAL ENGINEER IN GOOD STANDING OF THE STATE OF NORTH CAROLINA AND THAT I AM THE DESIGNER OF THIS PLAN AND CONSTRUCTION FOR THE USE OF THIS LICENSED MATERIAL.

*Daniel H. Huckabee* 1/5/20

DATE	1/5/20
BY	DH
SCALE	1/4" = 1'-0"
NO.	2

PLANS FOR:  
**DARREN & LYNN BOWDER**  
515 SOUTH BUNKER HILL  
COLFAX, N.C.

**HUCKABEE AND ASSOCIATES**  
Custom Homes ■ Additions ■ Vacation Homes  
241-F Walters Street ■ Greensboro, NC 27408 ■ 336-282-3111

REVISIONS	BY



## Environmental Health Division Water Quality Section

400 W Market St.  
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(336) 641-7613

### Improvement Permit

---

**Address:** 519 S BUNKER HILL RD  
COLFAX, NC 27235

**Permit Number:** 23-09-SNHR-00744

This Improvement Permit shall be valid for 5 Years from the date issued upon a satisfactory showing to the health department that the site and soil conditions are unaltered, that the facility, design wastewater flow, and wastewater characteristics are not increased, and that the wastewater system can be installed to meet the following requirements that were in effect on the date the Improvement Permit was issued.

Design Flow: 360  
Bedrooms: 3  
Conditions: Approved for 3 bedroom single family residence.  
Initial and Repair: 25% Reduction

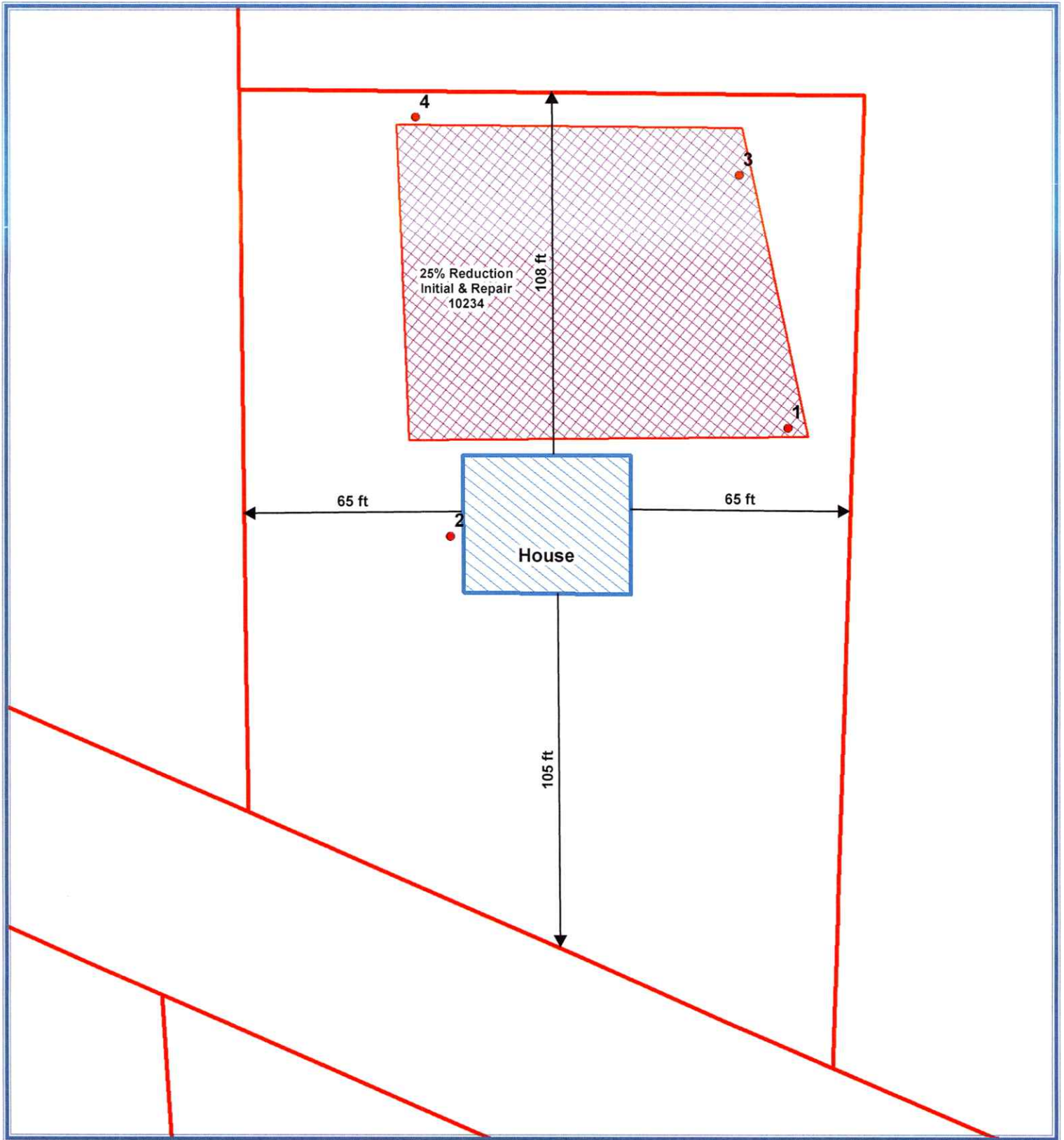
Do not grade or disturb the approved area. Disturbance of this area, change of site plan, or change of intended use could result in the suspension or revocation of this permit. This is not an Authorization to Construct a Wastewater System. The authorization for wastewater system construction with system specifications must be completed before any building permits or system installation can commence.

Permit Issued:  REHS-I  
Environmental Health Specialist

Date Issued: 10-2-23



# Diagram

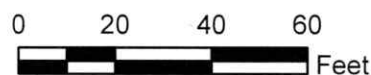


Address: 519 S Bunker Hill Rd.

Permit #: 23-09-SNHR-00744

Issuer's Initials: ELH

Date: 10/2/2023



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- Scaled site plan submitted - (Valid 60 Months)
- Unscaled site plan submitted - (Valid 60 months)
- Survey plat to scale\* submitted - (Valid without expiration)
- \* scale of 1" = no more than 60'

*Soil-IP*

Building Permit # \_\_\_\_\_ Septic Permit # 23-09-SNAR-00744 Well Permit # \_\_\_\_\_

Address 519<sup>S</sup> Bunker Hill Rd City COT/Fax Parcel REID # 168965  
 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 4/26/2007

**ZONING INFORMATION**

Zoning: AG Conditional Zoning (Describe): \_\_\_\_\_  
 Watershed: \_\_\_\_\_ Watershed Critical Area: \_\_\_\_\_  
 Building Setbacks (Zoning): Front Street: 50 Side Street: 15 Side Yard: 15 Rear: 30  
 Comments: Soil evaluation for 3 bedroom SFR

PLANNING DEPARTMENT OFFICIAL: \_\_\_\_\_

**APPLICANT INFORMATION**

Applicant Name: Darren Bowder Address: 1345 Land Grove Drive kville  
 Phone 1: 336-337-2782 Phone 2: \_\_\_\_\_ Email: DarrenandLynn@gmail.com  
 Owner Name: Jeralene H Loggins Address: 1120 Whispering Pines Dr kensville  
 Phone 1: \_\_\_\_\_ Phone 2: \_\_\_\_\_ Email: \_\_\_\_\_

**DEVELOPMENT INFORMATION**

NEW  ACCESSORY  SWMH  MULTIFAMILY/DUPLEX  ADDITION (TYPE) \_\_\_\_\_  
 HOUSE  MODULAR  DWMH  RENOVATION  OTHER TYPE \_\_\_\_\_  
 Residential Specifications: Max # of Bedrooms: 3 MAX. # of Occupants: \_\_\_\_\_ Total # of Rooms: 8 Size of Structure (sq ft): 1697  
 Basement:  Yes  No Basement Fixtures:  Yes  No  
 Non-Residential Type:  Commercial  Industrial  Other \_\_\_\_\_  
 Wastewater Strength:  Domestic  High Strength  Industrial Process  
 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 \_\_\_\_\_  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.

- |                              |  |   |
|------------------------------|--|---|
| <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO | Does the site contain any jurisdictional wetlands?                              |
| <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO | Does the site contain any existing wastewater systems?                          |
| <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO | Is any wastewater going to be generated on the site other than domestic sewage? |
| <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO | Is the site subject to approval by any other public agency?                     |
| <input type="checkbox"/> YES | <input checked="" type="checkbox"/> 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.

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Darren Bowder

Property Owner's or Owner's Legal Representative\* Signature (Required)

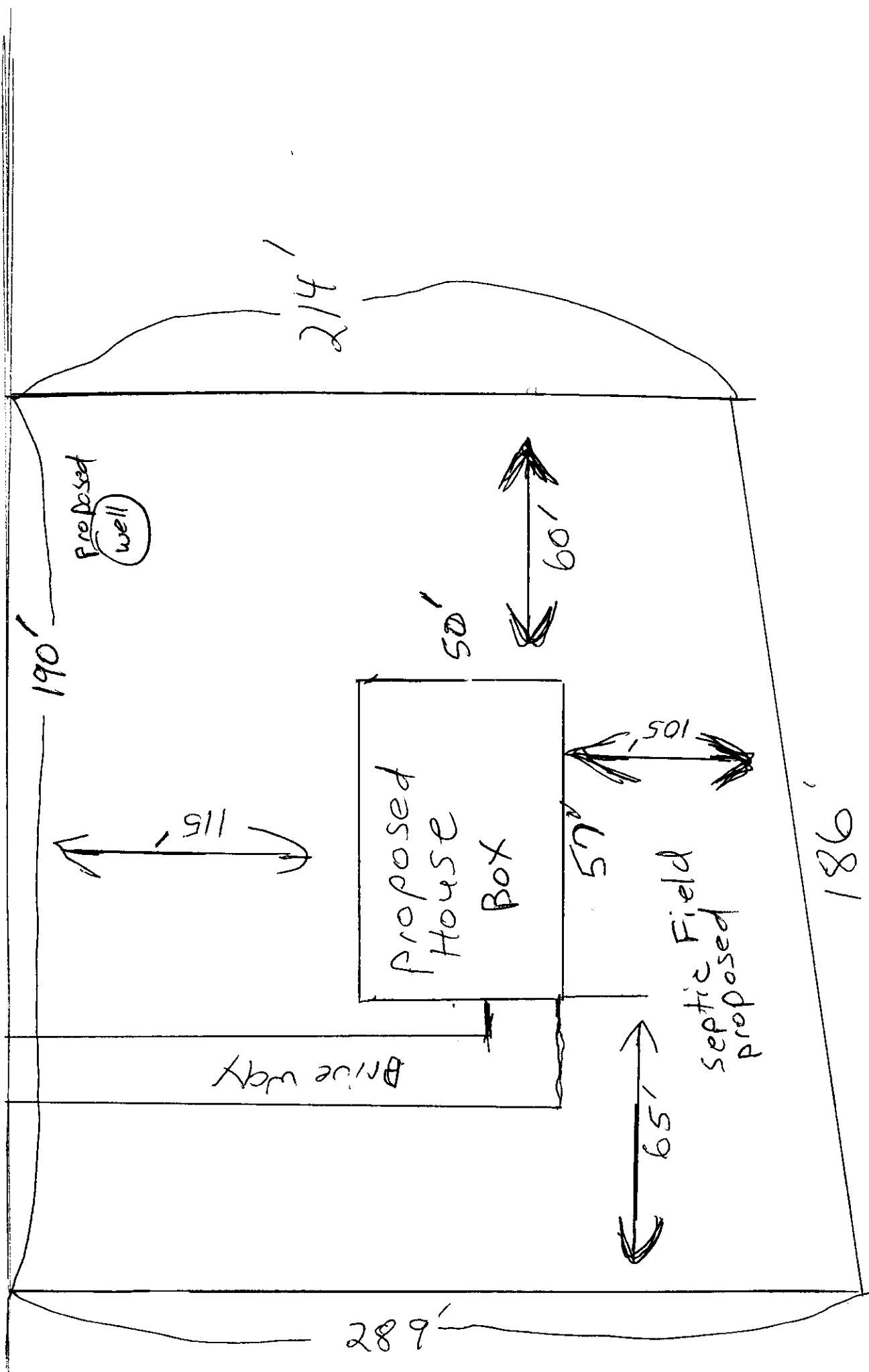
\* Must provide documentation to support claim as owner's legal representative.

9/19/23

W Market St, 1/2 S. Bunker Hill, lot on left past Houghton Rd

\* Permission verified by contract \*

S Bunker Hill



Proposed well

Proposed House Box

Proposed septic field

Driveway

214'

190'

115'

50'

60'

57'

65'

105'

186'

289'

## Guilford County, NC



Parcel Number	168965	Total Out Building Value	0
PIN	6895859003	Total Land Value	45000
Owner	LOGGINS, JERALENE H ESTATE	Total Deferred Value	0
Mail Address	1120 WHISPERING PINES DR	Bldg Card	
Mail City	KERNERSVILLE	Appraisal Model Code	
Mail State	NC	Deed Data	4/26/2007
Mail Zip	27284	Neighborhood	6895R01
Property Address	519 S BUNKER HILL RD	Property Type	RESIDENTIAL
Legal Description	.80 AC STACK BK2598-864 SR2007	Structure Size	
Deed	002598-00864	Lot Size	0.8
Plat		Year Built	
Condo		Bedrooms	
Total Assessed	45000	Bathrooms	
Total Building Value	0	Grade	



*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**  
 9/19/2023