

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: NEW REPAIR EXPANSION PROPERTY LOCATION: SUBDIVISION LOT # Type of Structure: Proposed Wastewater System Type: Projected Daily Flow: GPD Number of bedrooms: Number of Occupants: max Basement Yes No Pump Required: Yes No May be required based on final location and elevations of facilities Type of Water Supply: Community Public Well Distance from well feet Permit valid for: Five years No expiration Permit conditions:

Authorized State Agent: Date: 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 site 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 Sewage Treatment and Disposal and to conditions of this permit.

Construction Authorization

(Required for Building Permit)

The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance with the attached system layout.

ISSUED TO: VUNCANNON CONCRETE PROPERTY LOCATION: 125 RIVER RD SUBDIVISION JOHN SMITH LOT # 4 Facility Type: EXIST. SFD New Expansion Repair Basement? Yes No Basement Fixtures? Yes No Type of Wastewater System** (Initial) Wastewater Flow: GPD (See note below, if applicable) (Repair)

Installation Requirements/Conditions Septic Tank Size 1000 gallons Pump Tank Size gallons Number of trenches Exact length of each trench feet Trench Spacing: Feet on Center Soil Cover: inches (Maximum soil cover shall not exceed 36" above the trench bottom) Pump Requirements: ft. TDH vs. GPM Conditions: REPLACE TANK AND SUPPLY LINE AS NEEDED Aggregate Depth: inches below pipe inches above pipe inches total

WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA. NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.

**If applicable: I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit.

Owner/Legal Representative Signature: Date:

This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH

Authorized State Agent: Date: 8/22/18 Construction Authorization Expiration Date: 8/22/22