

HTE# 06.50014695RR

Hamilton County Department of Public Health

23225

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: CAVINESS Land Dev.

PROPERTY LOCATION: 1125

SUBDIVISION FIRST OAKS

LOT # 60

NEW REPAIR EXPANSION

Site Improvements required prior to Construction Authorization Issuance:

Type of Structure: SFD (3BR 53x36)

Proposed Wastewater System Type: Pump to 25% Reduction SYSTEM

Projected Daily Flow: 360 GPD

Number of bedrooms: 3 Number of Occupants: 6 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: Meet with for final layout Maintain All Set Backs

Authorized State Agent: J. W. ...

Date: 09.25.06

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: CAVINESS Land Dev.

PROPERTY LOCATION: 1125

SUBDIVISION FIRST OAKS

LOT # 60

Facility Type: SFD (3BR 53x36) New Expansion Repair

Basement? Yes No Basement Fixtures? Yes No

Type of Wastewater System** Pump to 25% Red. SFD (Initial)

Wastewater Flow: 360 GPD

(See note below, if applicable)

LDP Ryan 290 LF (Repair)

Installation Requirements/Conditions

Septic Tank Size 1000 gallons

Pump Tank Size 1000 gallons

Line lengths to be determined at final layout

Exact length of each trench 1x 180 feet

Trench Spacing: 9 Feet on Center

Trenches shall be installed on contour at a

Soil Cover: 6 inches

Maximum Trench Depth of: 18.25 inches

(Maximum soil cover shall not exceed

(Trench bottoms shall be level to +/-1/4"

36" above the trench bottom)

in all directions)

Pump Requirements: _____ ft. TDH vs. _____ GPM

_____ inches below pipe

Aggregate Depth: _____ inches above pipe

Conditions: Meet with

_____ inches total

**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.

Authorized State Agent: J. W. ...

Date: 9.25.06

SEE ATTACHED SITE SKETCH

Construction Authorization Expiration Date: 9.25.2011

