

File Name: CHASEWOOD

**TRANSYLVANIA COUNTY HEALTH DEPARTMENT
ON-SITE WASTEWATER DISPOSAL APPLICATION**

8574-63-5433-000
Pin #/Tax ID _____

Permit #: 03-514 Duckworth, Frank + Rosemary
Agent/Owner: CHASEWOOD CONSERVATION LLC
Home Phone #: () Greg Nelson 884-29378
Proposed Buyer: _____
Home Phone #: () _____
Property Location: Island Ford Subdivision: Chasewood Phase/Sect.: _____ Lot #: 27
Road/Street

Mailing Address: 30 Camptown Rd. Bravard, NC
Work Phone #: () John Winston 884-6993
Mailing Address: _____
Work Phone #: () _____

✓ 8574.
53 -
6327-000
9K
2016

Receipt No. 182240 \$250

Flood Zone
Is the property in a flood zone?
☐ Yes ☐ No ☐ Unknown

Flood Zone Inspections
☐ Yes ☐ No
☐ Approved ☐ Disapproved
Initials _____ Date _____

Installation for: Mobile Home ☐ Single ☐ Double ☐ House ☒ No. Bedrooms: 3 Basement: Yes ☒ No ☐ With Plumbing: Yes ☒ No ☐ Ind./Commercial ☐ Other ☐

If Indust./Commercial/Other: Number of employees: _____ Operation: (Describe) _____ Property contains designated wet lands: Yes ☐ No ☐

Lot size: 1.30 Date lot recorded: _____ Right of ways, easements, etc. _____ Water Supply: Private: ☐ Spring ☐ Well ☐ Shared Supply ☐ Public/Community

I certify the above to be correct to the best of my knowledge. Permission is hereby granted to perform a site/soil evaluation on the property described above. If the information submitted in this application is falsified or changed, the permit shall become void. I understand that it is my responsibility as the applicant/agent/owner to comply with all applicable ordinances, laws, and rules from other agencies that may affect the development of this property.

Applicant/Agent Signature: Greg Nelson Date: 1-26-07

**ON-SITE WASTEWATER DISPOSAL SYSTEM
OPERATIONS PERMIT**

The issuance of this operations permit certifies that the system described on the improvement permit and the construction authorization is properly installed or repaired and that the system is capable of being operated in accordance with the conditions of the improvement permit, Article 11 of Chapter 130A of the General Statutes of North Carolina and the rules adopted pursuant to this Article. This operation permit shall remain in effect as long as the system is operated and maintained as required by the Laws and Rules for Sewage Treatment and Disposal Systems as issued by the North Carolina Department of Environment and Natural Resources, Division of Environmental Health.

System Classification Type: III Management Entity: ☒ Owner ☐ Certified Operator Minimum inspection/maintenance review frequency N/A years.

Comments: Clean + replace septic tank effluent filter as req'd

Installed by: MS Cat + JB M + M Grading Final Inspection by: James A Bayer, RS Date: 6/21/07
Greg + David McCall

WINDOVER FARMS SUBDIVISION
SLIDE 196 & 961

S 00°13'40" W 182.77'

S 17°25'39" W 162.09'

TREE

S 86°39'13" E

121.25'

57'

424"

N 70°01'11" E
129.00'

'As Built'
6/21/07
JB

3/30/07
TC1000
STB192

Garage

(NTS)

bedroom
house

Proposed

Proposed
Drive

Shift

REPAIR
AREA-
Type IIa

Sycamore

D-Box

32' TOTAL
30" Deep

R-7-E

CS

Northampton
Southampton

Permit No.: 03-514

comments: house location is approximate and house is not to scale (NTS); house and drive may be relocated as needed as long as neither infringe upon any area of the approved septic system and gravity flow can be maintained;

File Name: Greg Nelson/Chasewood Lot 27
PIN: 8574-63-5433-000
Scale: 1" = 40'