

GLEN CANNON VIEWS

TRANSYLVANIA COUNTY HEALTH DEPARTMENT
ON-SITE WASTEWATER DISPOSAL APPLICATION

8595-73-9306-000

Pin #/Tax ID

File Name: _____

Permit #: 04-068

6870 3250
Receipt No

Agent/Owner: LOHRY, BRUCE & MARY JANE
616 676-2245

Mailing Address: 219 Greentree Court Ada, MI 49301
contact: Greg Hendrix 654-9290

Home Phone #: () _____

Work Phone #: () _____

Proposed Buyer: _____

Mailing Address: _____

Home Phone #: () _____

Work Phone #: () _____

Property Location: Dundee Lane Subdivision: Glen Cannon Views Phase/Sect.: _____ Lot # 3
Road/Street

Directions to property: Glen Cannon Drive - right on first Campbell - turn right on Dundee Lane, end of
cul-de-sac on right

Flood Zone	
Is the property in a flood zone?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Unknown
Inspections	
Flood Zone	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Approved	<input type="checkbox"/> 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: 1.5 Date lot recorded: 10/97 Right of ways, easements, etc. drive 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: [Signature] Date: 2-19-04

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

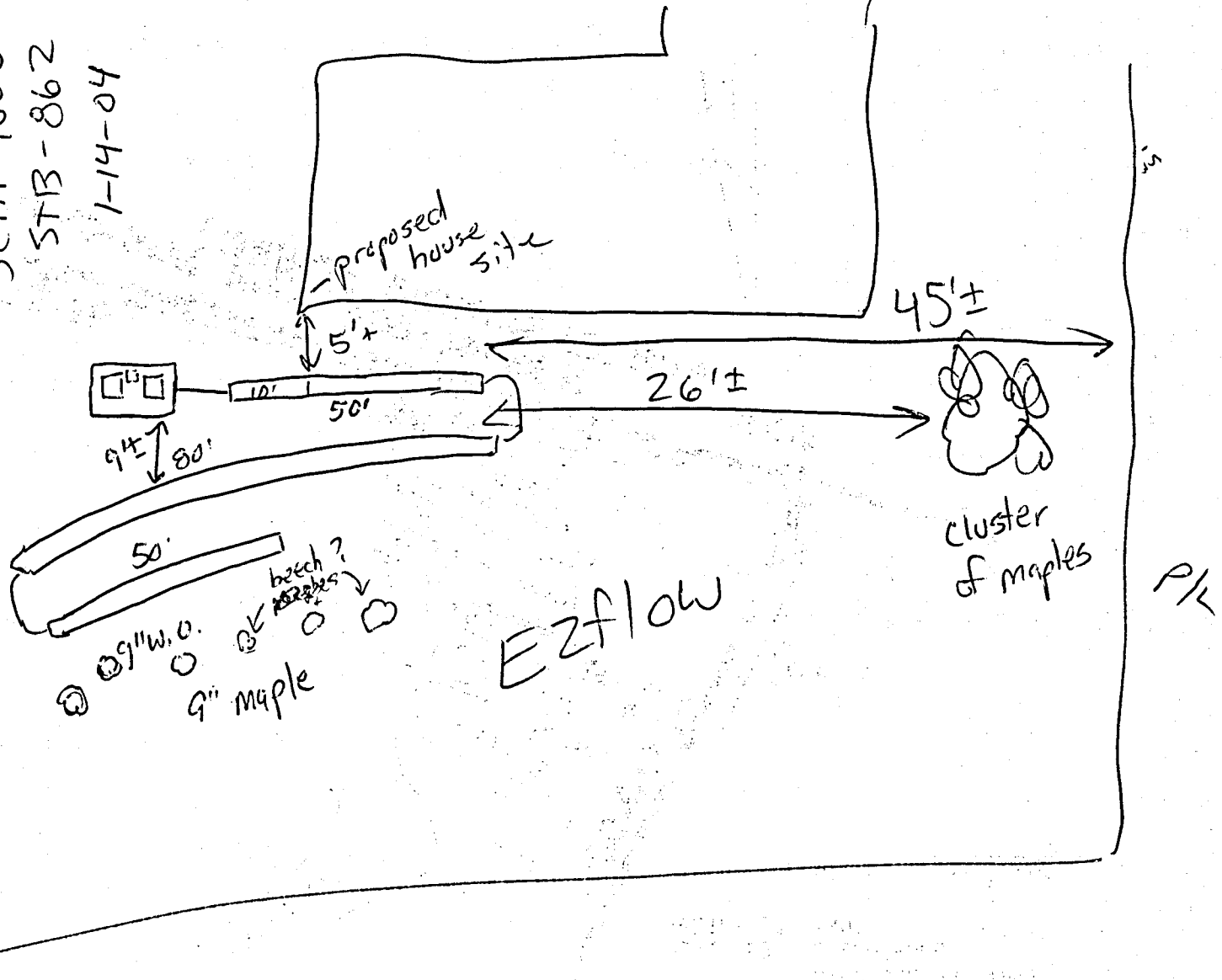
The issuance of this operations permit certifies that the system described on the improvement permit and the construction authorization is properly installed or repaired and that the system is capable of being operated in accordance with the conditions of the improvement permit, Article 11 of Chapter 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.

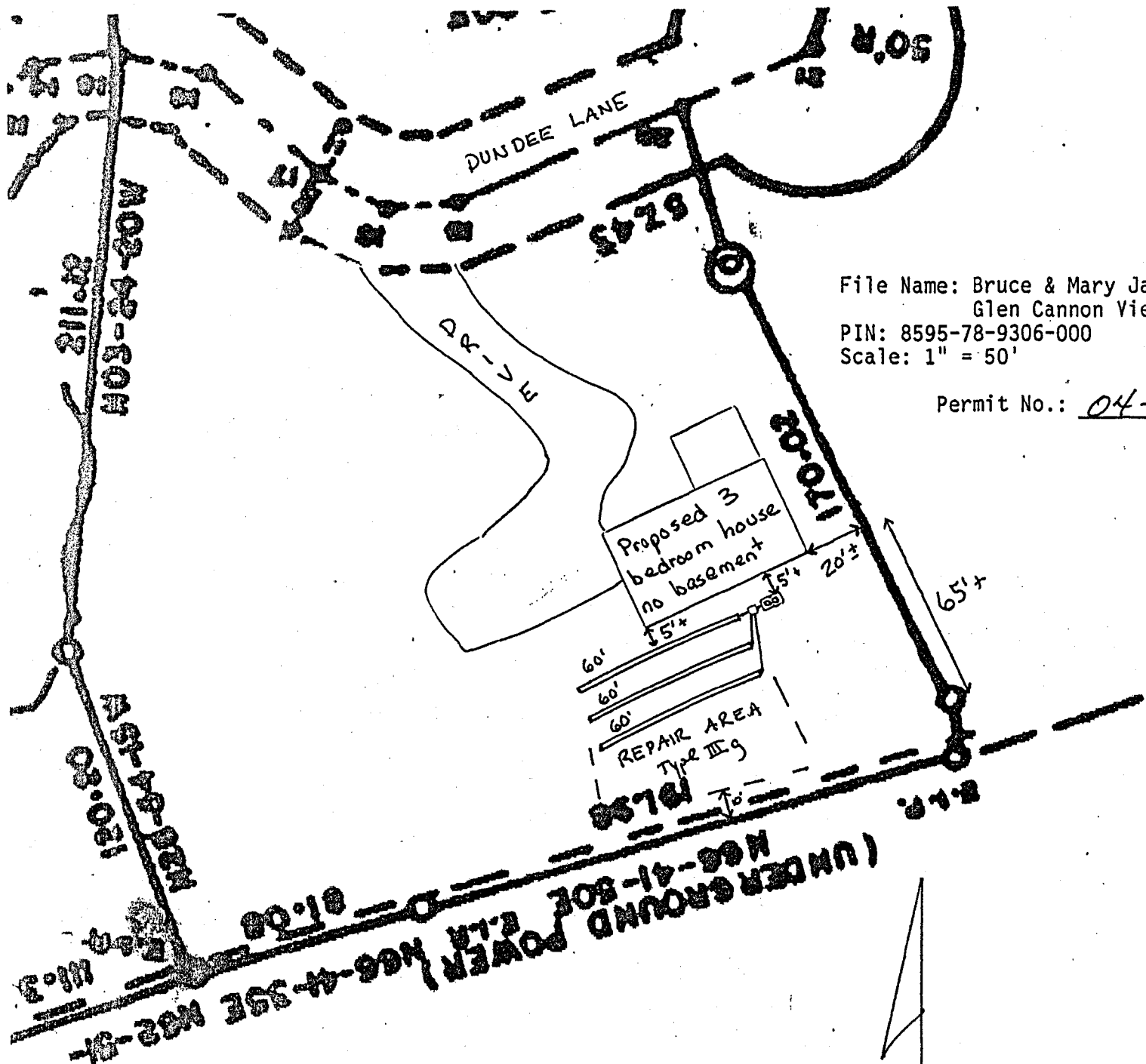
System Classification Type: IIIg Management Entity: Owner Certified Operator Minimum inspection/maintenance review frequency _____ years.

Comments: 50', 80', 50' EZflow trenches

Installed by: Dean Bishop Grading + Trucking Final Inspection by: Alla Smith ms, RS Date: 2/25/04

SCM-1000
STB-862
1-14-04





File Name: Bruce & Mary Jane Lowery
Glen Cannon Views
PIN: 8595-78-9306-000
Scale: 1" = 50'

Permit No.: 04-068

