

File Name: Idlewild

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

9527-4-1-1111-1111
Pin #/Tax ID _____

Permit #: 02-036

Receipt No: _____

Agent/Owner: LEE, JIM & HELEN

Mailing Address: c/o Ed Burdette

Home Phone #: () _____

Work Phone #: () 931-5359 421-1113

Proposed Buyer: _____

Mailing Address: 300-0092 pager

Home Phone #: () _____

Work Phone #: () _____

Property Location: Chestnut Lane
Road/Street

Subdivision: Idlewild Phase/Sect.: _____ Lot #: 11

Directions to property: Swy. 275 to left on Cascade Lake Rd. - right on Reasonover Rd.
approx 2 miles - end of Idlewild subdivision - go to top of sta
and bear left at fork - Chestnut Lane is next gravel road on left -
only house on right

| Flood Zone | | |
|-----------------------------------|--|----------------------------------|
| Is the property in a flood zone? | | |
| <input type="checkbox"/> Yes | <input checked="" 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 3 car garage with 2 bedroom apt. (total of 5 bedrooms) 2.5.02 E/B
No. Bedrooms: _____ 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: _____ 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: [Signature]

Date: 1-15-02

**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.

1-80' Gravel Line added to orig. system

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

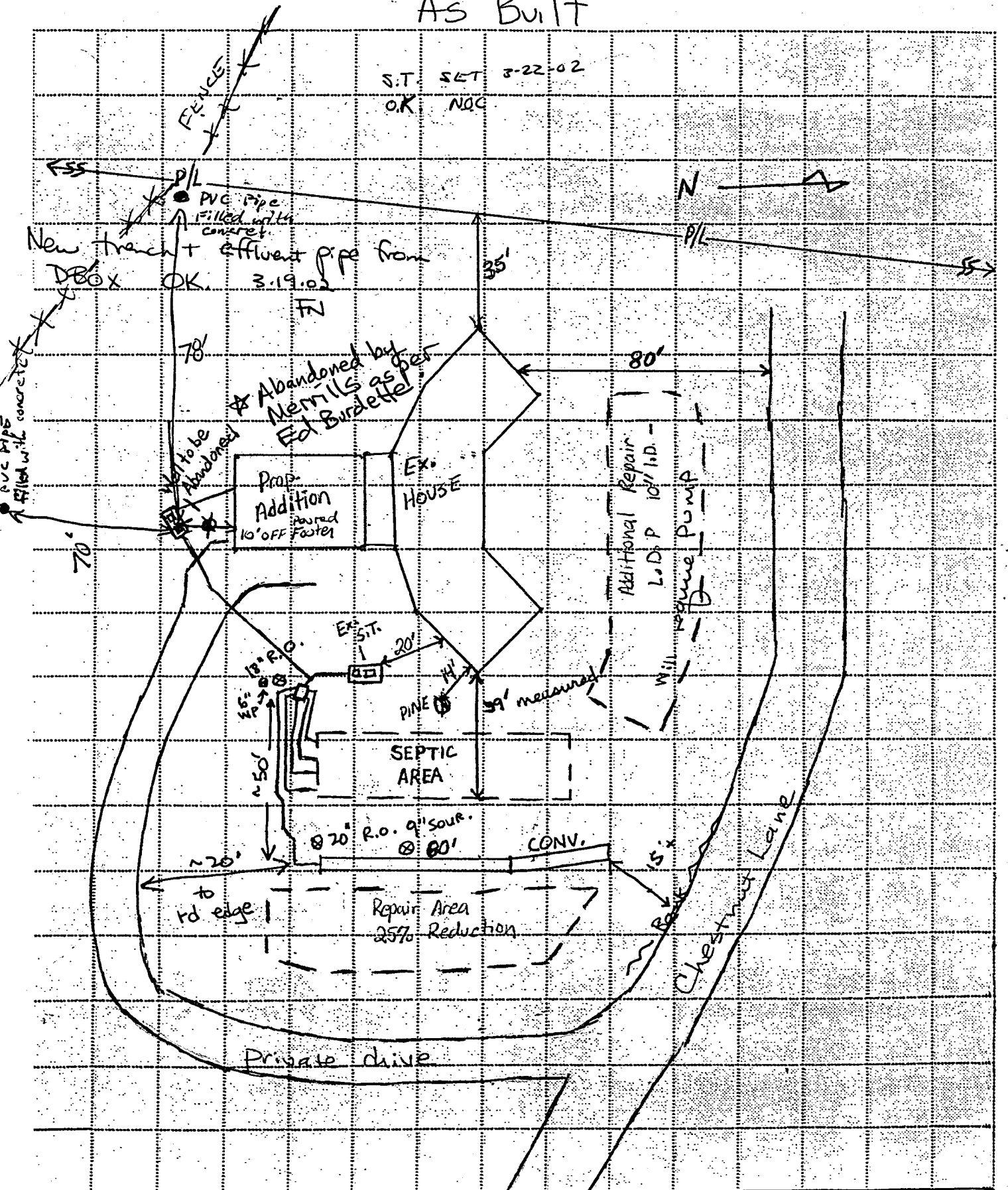
Comments: Abandoned well filled w/concrete by Merrill well + pump as per Ed Burdette

Installed by: Ronnie McGuire

Final Inspection by: James A Bayer, RS Date: 10/29/04

"As Built"

S.T. SET 3-22-02
O.K. NDC



SCALE: 1" = 40'

File Name: Idlewild

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

9523-1-6468-000
Pin #/Tax ID

Permit #: 02-036

Receipt No. 520049.250
Address

Agent/Owner: LEE, JIM & HELEN

Mailing Address: c/o Ed Burdette

Home Phone #: ()

Work Phone #: () 803-3359 421-1113

Proposed Buyer:

Mailing Address: 300-0092 pager

Home Phone #: ()

Work Phone #: ()

Property Location: Chestnut Lane
Road/Street

Subdivision: Idlewild Phase/Sect.: Lot #: 22

Directions to property: Buy. 275 to left on Cascade Lake Rd. - right on Reasonover Rd.
approx 2 miles - end of Idlewild subdivision - go to top of mtu
and bear left at fork - Chestnut Lane is next gravel road on left-
only house on right

| Flood Zone | | |
|-----------------------------------|--|----------------------------------|
| Is the property in a flood zone? | | |
| <input type="checkbox"/> Yes | <input checked="" 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 3 car garage with 2 bedroom apt. (total of 5 bedrooms)
No. Bedrooms: _____ 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: _____ 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: SOR...

Date: 1-15-02

**AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION
(Diagram and Conditions Attached)**

New Installation: Repair/Addition: Original Permittee: _____ Dated: _____
Design waste flow: 600 GPD LTAR: 5 Ex. 1000 gallon Septic Tank Capacity: _____ gal./min. Pump Tank Capacity: _____ gal./min. Proposed Wastewater System: EZ Flow
Drainfield: Total Trench Length: 60 ft. Square Footage: 240 set new 1000 gallon Trench spacing: 9 ft. on ctr. Individual Trench Length: 60 ft. Maximum Trench Depth (Low Side): 18 in. Trench Width: 36 in.
Distribution Method: D-Box Min. distance between system and nearest Well: 50 ft. Water line: 10 ft. Foundation: 5 ft. Property line: 10 ft. Vertical Cut: 15 ft.

Comments & Special Conditions: A well abandonment report will need to be submitted to the H.D. prior to issuing
the OP for this permit. May require setting a new D-Box with 5 outlets.

Construction of the wastewater system for the permit indicated is hereby authorized. The wastewater system described in the Improvement permit has been designed and can be installed and operated in compliance with Article 11 of Chapter 130A of the General Statutes of North Carolina and Rules adopted pursuant to this Article. This Construction Authorization is valid for a period of 5 years from the original date of issue. The Construction Authorization must be renewed upon expiration prior to the installation/repair of the wastewater system, or prior to the issuance of any required building permits. A pre-construction conference with the owner or developer, or an agent of the owner or developer, and the health department will be required for re-issuance of the Construction Authorization.

I agree to install the wastewater disposal system in accordance with the improvement permit, construction authorization and any conditions specified therein.

Signed: SOR... Date: 2/6/02 Construction Authorization prepared by: ... RS Date: 2-5-02

PERMIT AND CONSTRUCTION AUTHORIZATION MUST BE ON SITE DURING ALL PHASES OF CONSTRUCTION/INSTALLATION AND INSPECTION

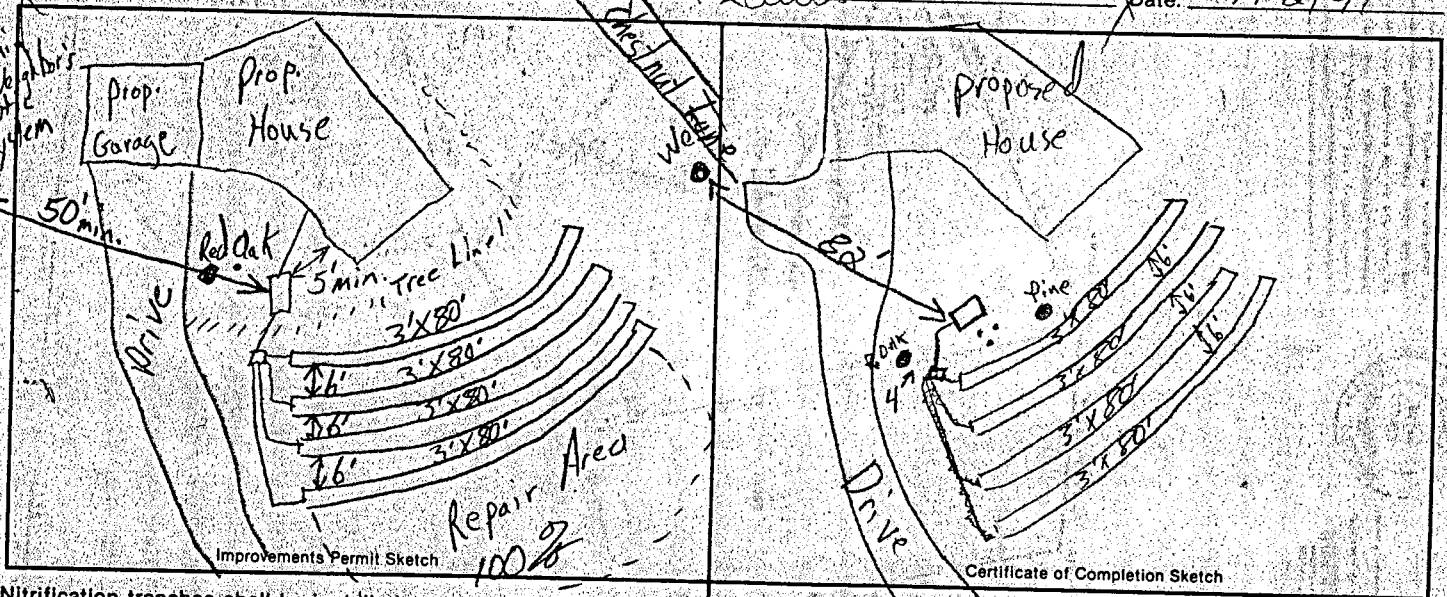
Tie the new septic tank effluent pipe into the pipe between the ex. tank and the D-Box.

TRANSYLVANIA COUNTY HEALTH DEPARTMENT
Sewage Disposal System Improvements Permit and Certificate of Completion Sewage Treatment
and Disposal Rules (Article 11 of Chapter 130A of the General Statutes of North Carolina)
 PERMIT VALID 5 YRS.
 FROM DATE OF ISSUANCE

Date: July 2, 1991 Receipt No.: 2398
 Owner/Agent: Helen R. Lee Phone No.: Patricia Travis 885-8457
 Address: 2320 Tangle Wood Dr. Vestavia, Alabama 35226
 Location of Property: Cedar Mtn, turn left at Post Office take immediated R on Reasonover Rd., located on R, turn R in to Idle Wild Dev. go to Chestnut Ln, Lot 22

Subdivision: Idle Wild Lot Number: 22 Section: _____ Plat of Property: Yes No
 Type of Facility: House Mobile Home Business Basement Yes No Basement Plumbing Yes No
 Number of Bedrooms: 4 Number of Bathrooms: 3 Estimated Sewage Flow: 480 gpd
 Lot Size: 1.5 acres Easements, Right-of-Ways, etc.: NA Date Lot Recorded: _____
 Type of Water Supply: Individual—Drilled Well Spring Public/Community

Signature/Authorized Agent: Patricia Travis Date: 7/2/91



Nitrification trenches shall be installed on level grade with contour. Stepdowns permitted only when indicated.

New System Repair Addition
 Size of Tank: 1000 Application Rate: 5 gpd/sq ft
 No. of Lines: 4 Width: 3' Linear Ft.: 80'
 Square Ft.: 960 sq ft Maximum Trench Depth: 12" Low Side

I understand and agree to install the septic tank system as specified on this Improvements Permit. Permit is void if any changes are made without consent of the Health Department Representative and/or if any false information is supplied in making Improvements Permit.

Signature/Authorized Agent: Patricia Travis Date: _____
 By: Jeff Parker EHS Int Date: 7-3-91

Building Contractor: _____
 System Installed by: Ron Maulve

This is to certify that system is installed according to Rules and Regulations but is not a guarantee that it will function satisfactorily for any given period of time.

By: Jeff Parker EHS Int Date: 12-9-92

EXISTING SYSTEM: Addition/Remodeling Relocation

System functioning properly at time of inspection and is approved for proposed additions/renovations.

By: _____ Date: _____

* System is to be installed Ultra Shallow - 12" trench Bottom.
 6" of fill dirt shall be placed over Drain lines.