

**RICHLAND RIDGE**

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

8533-77-5669-000  
Pin #/Tax ID ~~8533-66-7613-000~~

File Name: \_\_\_\_\_

Permit #: **99-082**

*John Winston*

**SAPROLITE SYSTEM**

Receipt No **08654 \$75**

Agent/Owner: **RICHLAND RIDGE PARTNERSHIP** Mailing Address: **33 West Main St. Brevard, NC**

Home Phone #: ( ) Work Phone #: ( ) **884-8993**

Proposed Buyer: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Home Phone #: ( ) Work Phone #: ( )

Property Location: **Richland Ridge Rd.** Subdivision: **RICHLAND RIDGE** Phase/Sec.: **SITE 11** Lot #: \_\_\_\_\_

Directions to property: **Hwy. 64 west - right at Thorpe's store - left on Richladd Ridge - take left up mountain - about 1 mile - property is on both sides of road - road dead ends.**

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

**Inspections**  
**Flood Zone**  
 Yes  No  
 Approved  Disapproved  
Initials \_\_\_\_\_ Date \_\_\_\_\_

Installation for: Mobile Home  Single  Double  House  No. Bedrooms: **4** 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: **252 ac.** Date lot recorded: **pro 1980** Right of ways, easements, etc.: **road/utilities** 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: *John Winston* Date: **3-17-98**

**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.

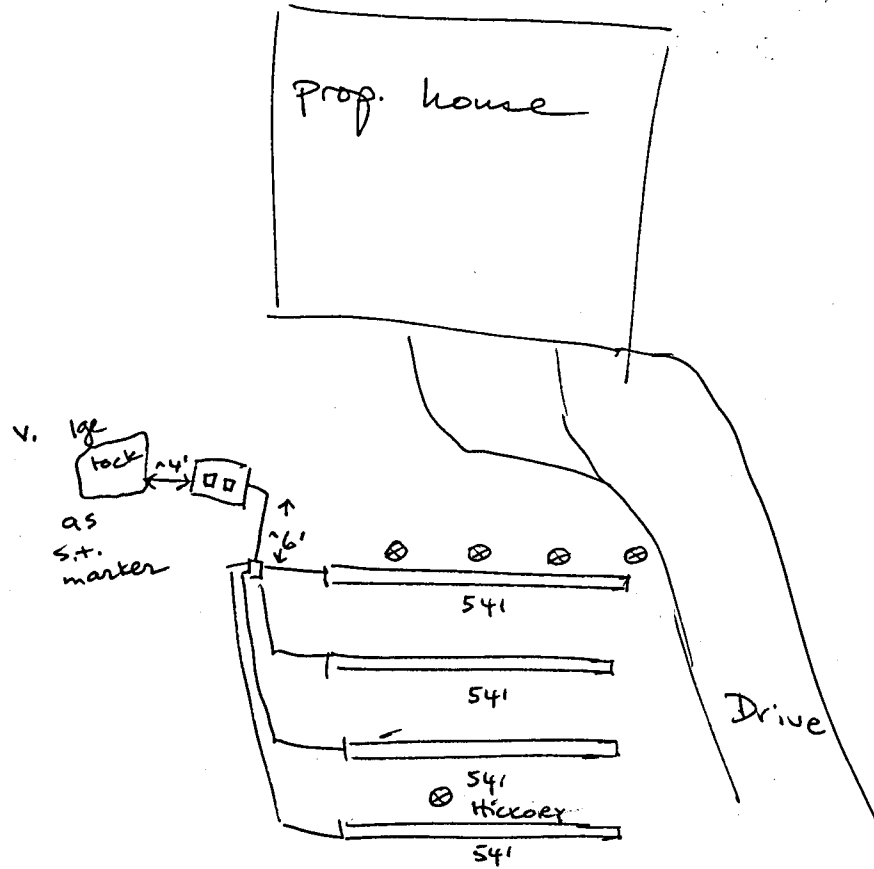
System Classification Type: III-g Management Entity:  Owner  Certified Operator Minimum inspection/maintenance review frequency \_\_\_\_\_ years.

Comments: \_\_\_\_\_

Installed by: Toxaway Grading Co. Final Inspection by: John R. Adams RS Date: 3-12-99

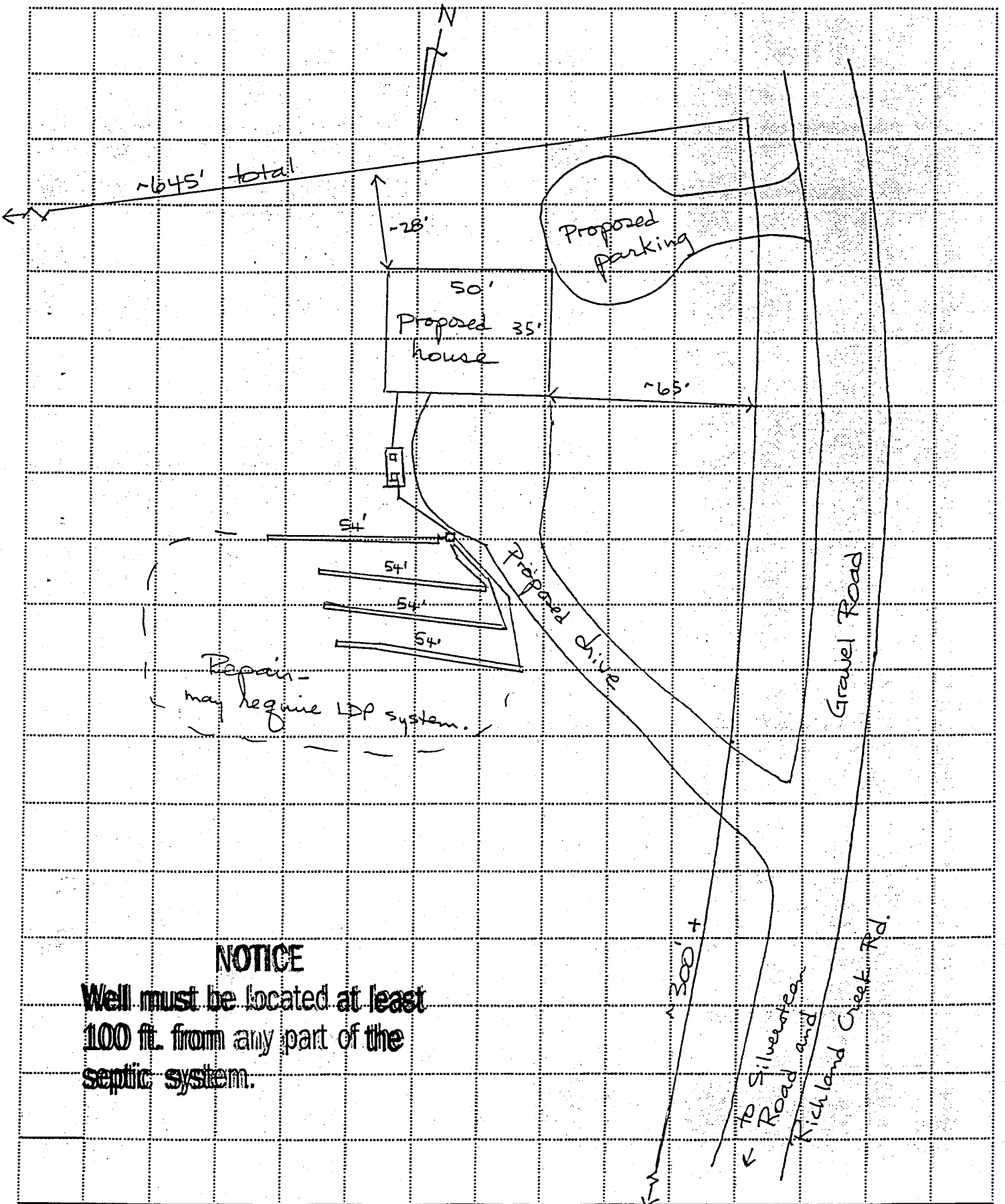
FN

3.12.99



TRANSYLVANIA COUNTY HEALTH DEPARTMENT IMPROVEMENT PERMIT DIAGRAM

File Name: Richland Ridge Subd Permit No.: 99-082 Pin No.: 8533 66 7613 000



**NOTICE**

Well must be located at least 100 ft. from any part of the septic system.

SCALE: 1" = 40'

RICHLAND RIDGE

TRANSYLVANIA COUNTY HEALTH DEPARTMENT  
ON-SITE WASTEWATER DISPOSAL APPLICATION

Pin #/Tax ID 8533-66-7613-000

File Name: \_\_\_\_\_

Permit #: 99-082

Receipt No 08654 \$75

Agent/Owner: RICHLAND RIDGE PARTNERSHIP

Mailing Address: 33 West Main St. Brevard, NC

Home Phone #: ( )

Work Phone #: 884-6993

Proposed Buyer: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Home Phone #: ( )

Work Phone #: ( )

Property Location: Richland Ridge Rd.

Subdivision: RICHLAND RIDGE

Phase/Sec.: \_\_\_\_\_ Lot #: SITE 11

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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  No. Bedrooms: 4 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

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Applicant/Agent Signature: John Winston

Date: 3-17-98

AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION  
(Diagram and Conditions Attached)

New Installation:  Repair/Addition:  Original Permittee: \_\_\_\_\_ Dated: \_\_\_\_\_

Design waste flow: 480 GPD LTAR: 16 Septic Tank Capacity: 1000 gal./min. Pump Tank Capacity: \_\_\_\_\_ gal./min. Proposed Wastewater System: 1NWS 93-2R (chambered)

Drainfield: Total Trench Length: 180 ft. Square Footage: 800 Trench spacing: 9 on ctr. Individual Trench Length: 54 ft. Maximum Trench Depth (Low Side): 12 in. Trench Width: 36 in.

Distribution Method: D-Box or serial feed 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: Drainfield to have 12" min. additional soil cover.

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: John Winston Date: 3/15/99 Construction Authorization prepared by: John R. Ralston Date: 3.2.99

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