

PIN: 8592-18-1959-000 File Name: Baltrusaitis, Ted Permit No.: 19-176

TRANSYLVANIA COUNTY DEPARTMENT OF PUBLIC HEALTH

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: Baltrusaitis, Ted PROPERTY LOCATION: Connestee Falls--U18, L21  
Soquili Drive

New ☒ Repair ☐ Expansion ☐ Site Improvements required prior to Construction Authorization Issuance:  
Type of Structure: 4 BR res. **NOT For Installation of Building Construction**  
Proposed Wastewater System Type: II--ezflow or chamber (25% red.)  
Projected Daily Flow: 480 GPD  
Number of bedrooms: 4 Max. No. of Occupants: 8

Pump Required: ☐ Yes ☐ No ☒ May be required based upon final location and elevations of facilities  
Pump systems with an effluent pump must be designed by a Professional Engineer (P.E.) and plans submitted to the Environmental Health Section for approval.  
Type of Water Supply: community wells Improvement Permit Expiration Date: 9-11-24

Permit conditions: Proposed location of house, drive, garage, etc., shall be verified by Health Department prior to issuance of Construction Authorization (AC). Also, septic and repair lines shall be flagged out on contour by certified installer prior to issuance of AC.

Authorized State Agent: BMC Lyons Date: 9-11-19 See Attached Permit Diagram

The issuance of this permit by the Transylvania County Environmental Health Section 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 permit 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.

**SELF-INSTALLATION NOT PERMITTED - MUST USE CERTIFIED INSTALLER**

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 reference into this permit and shall be met. Systems shall be installed in accordance with the attached system layout.

ISSUED TO: Baltrusaitis, Ted Facility Type: 4 BR res.

Basement? ☒ Yes ☐ No Basement Plumbing Fixtures? ☐ Yes ☐ No  
Type of Wastewater System\*\* II--ezflow or chamber (25% red.) (Initial) Wastewater Flow: 480 GPD  
(See note below, if applicable ☐) same or IIle (PPBPS)--pump req'd (Repair) LTAR: .50

Installation Requirements/Conditions

Septic Tank Size: 1000 gallons, minimum Total Trench Length: 240 feet Trench Spacing: 9 min. Feet on Center  
concrete only  
Pump Tank Size: -- gallons, minimum Trench Width: 3 feet Distribution Method: serial or d-box

Trenches shall be installed on contour at a maximum trench depth of: 24 MAX inches. There shall be a minimum of 6" of soil cover over the installed drainfield material and the bottom of the trench shall not be greater than 36" from the surface of the ground at final grade.  
(Trench bottoms shall be level to +/- 1/4" in all directions)

Min. distance between system and nearest: Well 100 ft. Water Line 10 ft Foundation 5/15 ft Property Line 10 ft Vertical Cut 15 ft

Permit Conditions: Any changes in location of house, drive, garage, etc., shall be approved by health dept. prior to grading. It is recommended to put in septic system first to assure gravity flow and to accommodate possible space constraints.

\*\*If applicable:  
Full details of the system shall be specified if different from the type specified on the application. I accept the specifications of this permit.

Owner/Legal Representative Signature: [Signature] Date: 9/23/19  
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. I agree to have the on-site wastewater system installed by an authorized installer in accordance with the Improvement Permit, Construction Authorization, permit diagram and any conditions specified therein.

Authorized State Agent: **NOT For Installation of Building Construction** Date of Issuance: 9/23/19  
See Attached Permit Diagram Construction Expiration Date: 9-11-24