

File Name: Reynoldswood

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

Pin #/Tax ID 8564213115000

Permit #: _____

Agent/Owner: Linda T. Whitmire

Mailing Address: 757 Catheys Creek Church Rd. Brevard

Home Phone #: () 883-3867

Work Phone #: () _____

Proposed Buyer: _____

Mailing Address: _____

Home Phone #: () _____

Work Phone #: () _____

Property Location: Reynolds Woods
Road/Street

Subdivision: Reynolds Woods Phase/Sect: A Lot #: 7

Directions to property: 64 W. to Morgan Hill Rd. 100' to Reynolds Woods go to top of Mtn. property
at the end

Receipt No _____

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 ☒ 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: 3.39 Date lot recorded: 1988 Right of ways, easements, etc. gravel 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: 7-28-97

**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, Health and Natural Resources, Division of Environmental Health.

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

Comments: _____

Installed by: Jerry Whitmire Final Inspection by: [Signature] Date: 7-28-97



prop.
house

FN

7.28.97



09

06

06

001

08

06 reached

File Name: _____

TRANSYLVANIA COUNTY HEALTH DEPARTMENT
ON-SITE WASTEWATER DISPOSAL APPLICATIONPin #/Tax ID 8564213115000

Permit #: _____

Receipt No 16656Agent/Owner: Linda T. WhitmireMailing Address: 757 Cathoys Creek Church Rd. BrevardHome Phone #: () 883-3867

Work Phone #: () _____

Proposed Buyer: _____

Mailing Address: _____

Home Phone #: () _____

Work Phone #: () _____

Property Location: Reynolds Woods
Road/StreetSubdivision: Reynolds WoodsPhase/Sec.: A Lot #: 7Directions to property: 64 W. to Morgan Mill Rd. 100' to Reynolds Woods go to top of Mtn. property
at the end

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 ☒ 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: 3.39 Date lot recorded: 1988 Right of ways, easements, etc. gravel 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: Linda T. WhitmireDate: 12-30-96AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION
(Diagram and Conditions Attached)New Installation: ☒ Repair/Addition: ☐ Original Permittee: _____ Dated: _____Design waste flow: 360 GPD LTAR: 45 Septic Tank Capacity: 1000 gal./min. Pump Tank Capacity: _____ gal./min. Proposed Wastewater System: 8" LVPDrainfield: Total Trench Length: 400 ft. Square Footage: 800 Trench spacing: 6 ft. on ctr. Individual Trench Length: See comment ft. Maximum Trench Depth (Low Side): 10" in. Trench Width: 10" in.Distribution Method: Serial 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 requires 6" additional backfill soil

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: Linda T. Whitmire Date: 4-28-97 Construction Authorization prepared by: [Signature] Date: 4/8/97

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

Permit No.:

Pin No.:

d) Individual line lengths may be varied to keep system on contour.

2) Maximum trench depth must not be exceeded.

③ House site may
be re-positioned to
achieve gravity flow

4) System requires additional backup

ridge

3a. House
50
Site

1000

Scale 1" = _____ ft.