

File Name: Timber Ridge

# TRANSYLVANIA COUNTY DEPARTMENT of PUBLIC HEALTH ON-SITE WASTEWATER DISPOSAL APPLICATION

Pin #/Tax ID: 8595-76-3132-000  
Receipt No: 253053 \$250.00

Permit #: 09-159

Agent/Owner: Arias, Jack - White Squirrel, LLC

Mailing Address: 1201 S. Ocean Blvd, Hollywood, FL 33019

Home Phone #: ( CONTACT: Jason Lorenz 243-0396 )

Work Phone #: ( )

Proposed Buyer: DeBoer, Emily (new owner)

Mailing Address: contact Bernie Dylchouse (616)291-1702

Home Phone #: ( )

Work Phone #: ( )

Property Location: Knob Road Subdivision: Timber Ridge Phase/Sect.: 2 Lot #: 16

Directions to property: Wilson Road to Williamson Creek Road; R on Knob Road to L at new drive;  
Drive before cul-de-sac on R. Lots 11, 13, 15, 16 combined

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: 3.18 acres 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: 6/26/09

## 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 F Management Entity:  Owner  Certified Operator Minimum inspection/maintenance review frequency 1 years.

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

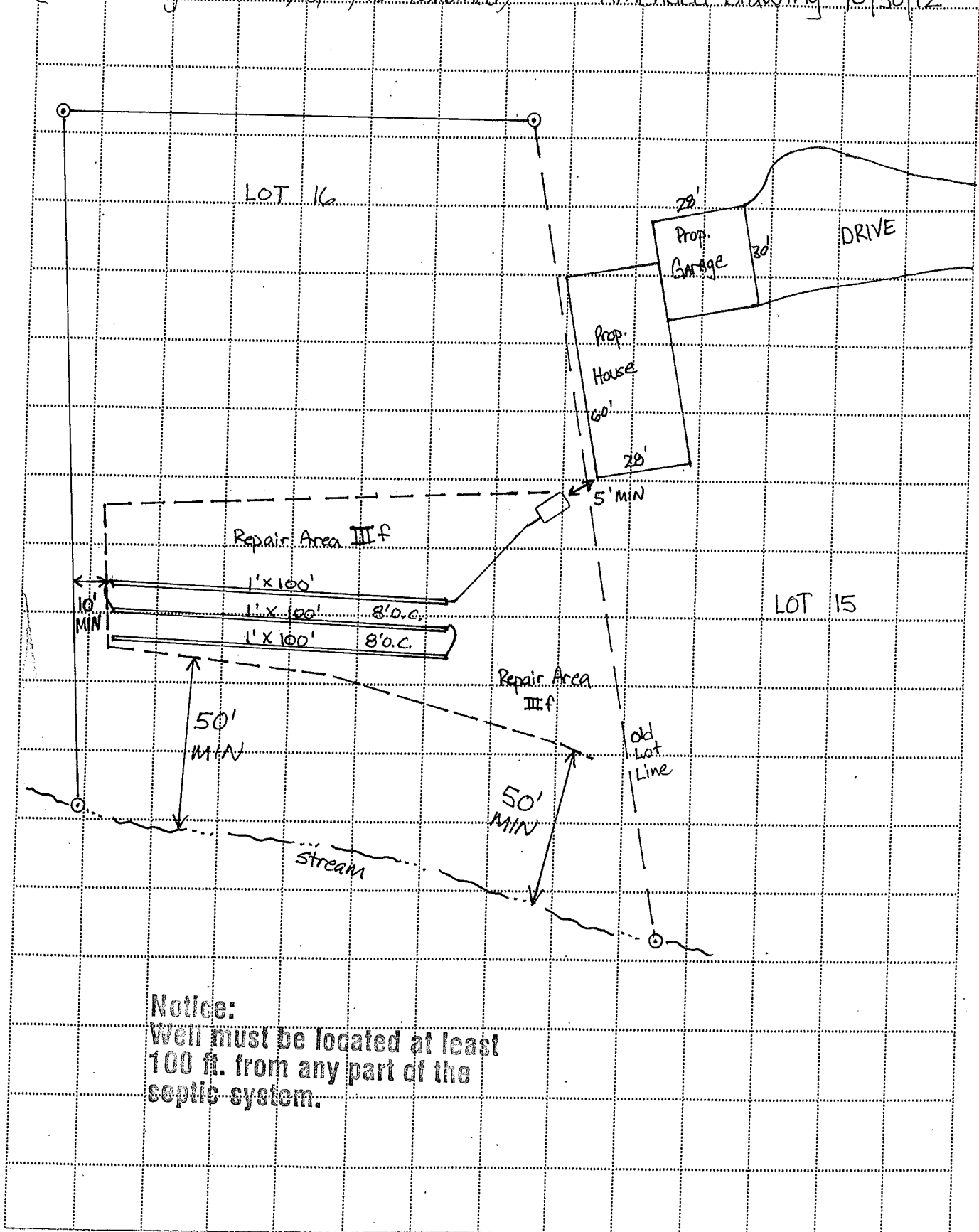
Installed by: Lerry Henderson (#2231) Final Inspection by: Neil O. Casby REKS Date: 10/31/12

TRANSYLVANIA COUNTY DEPARTMENT OF PUBLIC HEALTH IMPROVEMENT PERMIT DIAGRAM

File Name: Deboer, Emily (new owner) Permit No.: 09-159

Portion of:  
PIN: ~~8595-75-0897-000~~  
8595-76-3132-000  
Amended Drawing 10/30/12

(Timber Ridge Lots 11, 13, 15, 16 Combined)



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

SCALE: 1" = 40'

AS BUILT  
10" id L.D.P installed  
MOC

Polylock 36136

K-1000  
STB-141  
5/31/12

