	TO COMPONENT OF THE PARTY OF TH				
PIN: 8593-55-8318-000	File Name:	Sequoyah W	oods Lot J31	Permit No.: 19	<del>}-123</del>
TRANS		Improvement	Permit	BLIC HEALTH	
	A building permit ca	nnot be issued with	only an Improvemen	ut reimat	
ISSUED TO: William & Heather	r Compton	PROPERT	Y LOCATION: MU	ilberry Circle	
New A Repair	Expansion	Site Impr	ovements require	d prior to Construction Author	orization Issuance:
Type of Sudeture.					
Proposed Wastewater System Type: 1		_			
Projected Daily Flow: 480  Number of bedrooms: 480  Max. 1	GPD No. of Occupants: 8		,		
Pump Required: Yes No Pump systems with an effluent pump m	May be required bas ust be designed by a Profi	incipant Engineer (P	F ) and plans submitte	cilities ed to the Environmental Health S it Expiration Date: 6/26/2	Section for approval.
Type of Water Supply: Well (WP'		1111	provement rerm		
Permit conditions: See Permit Dia	gram				
				<del></del>	
Authorized State Agent: HeillO.	Pada REHE	Dete	6/26/2019	See Attached	1 Permit Diagram
The issuance of this permit by the Transylv responsible for checking with appropriate a changes. The Improvement Permit shall not b Sewage Treatment and Disposal and to condit	coverning bodies in meeti e affected by a change in o	ng their requirement	s. This permit is subject This permit is subject to	o compliance with the provisions of	of the Laws and Rules for
207			Se	ptic System to	be installed
		nstruction Aut	HOTIZATION	by a Certified	
The construction and installation requirem shall be met. Systems shall be installed in a	ents of Rules .1950, .1952	Required for Buildi L, .1954, .1955, .1956, thed system layout.	ng Permit) 1 .1957, .1958,and .1959	9 are incorporated by reference	into this permit and
ISSUED TO: William & Heather			Structure: Sing	le Family Residence	
	<b>4</b>			☐ Yes	
Basement?		Basement Plumb	ing rixtures:	☐ Yes	
Type of Wastewater System** (See note below, if applicable □)	25% Re		_(Initial)	Wastewater Flow:	480GPD
	Sar	ne	(Repair)	LTAR:	0.55
Installation Requirements/Condi	tions				
Septic Tank Size: 1000 gallons, mir	imum T	otal Trench Length:		Trench Spacing:	9 Feet on Center
Pump Tank Size <u>n/a</u> gallons, mir	i <b>mum</b> 7	French Width:		Distribution Method: d-box	
Trenches shall be installed on contour at a r material and the bottom of the trench shall t	not be greater than 36" fro	om the surface of the	There shall be a mine ground at final grade +/- 1/4" in all direction		e installed drainfield
Min. distance between system and nearest:	Well 50 ft. Wat	er Line10ft	Foundation5	ft Property Line 10 ft.	Vertical Cut 15 ft
Permit Conditions: See Permit Di	agram				1 20

I understand the system type specified is different from the tipe specified on the application. I accept the specifications of this permit. Owner/Legal Representative Signature: 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 pliagraph and any conditions specified therein.

Authorized State Agent:

Date of Issuance: 6/26/2019

See Attached Permit Diagram

\*\*If applicable:

Construction Authorization Expiration Date: 6/26/2024