

File Name: CHASEWOOD

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

8574-63-5433-000  
Pin #/Tax ID

Permit #: 03-496  
Agent/Owner: CHASEWOOD CONSERVATION LLC

Mailing Address: 30 Camptown Rd. Brevard, NC

182040 \$250  
Receipt No

181765 \$50

Home Phone #: ( ) Greg Nelson 884-2937  
Proposed Buyer: Clayton Alon 2008  
Home Phone #: ( )

Work Phone #: ( )  
Mailing Address:  
Work Phone #: ( )

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 checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved
Initials _____	Date _____

Property Location: ISLAND FORD Subdivision: CHASEWOOD Phase/Sect.: \_\_\_\_\_ Lot #: 33  
Road/Street

Directions to property: COUNTRY CLUB TO ISLAND FORD INTERSECTION TURN RIGHT PROP ON RIGHT

Installation for: Mobile Home  Single  Double  House  No. Bedrooms: 5 Basement: Yes  No  With Plumbing: Yes  No  Ind./Commercial  Other

Indust./Commercial/Other: Number of employees: \_\_\_\_\_ Operation: (Describe) \_\_\_\_\_ Property contains designated wet lands: Yes  No

Lot size: 1.51 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: Greg Nelson

Date: 9-26-03

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

**IMPROVEMENT PERMIT**  
~~(Not Attached)~~

PERMIT EXPIRES: 12.5.08

This on-site wastewater treatment and disposal system improvement permit is issued in accordance with Article 11 of Chapter 130A of the General Statutes of North Carolina and the rules adopted pursuant to this Article. This improvement permit is issued for the property and is to serve the facility as described in the application above. The improvement permit must be accompanied by an "Authorization for Wastewater System Construction" prior to the installation or repair of the wastewater system or before any required building permits can be issued. This improvement permit is transferrable provided that both the site for the wastewater system and the facility the system serves are unchanged and remain under the ownership or control of the person owning the facility.

Wastewater System Design Flow: 480 GPD Proposed On-Site Wastewater Disposal System: Chambered Long Term Application Rate: .5 Max. Trench Depth: 24 in.

Comments and special conditions: "Ar" to be issued after a site review with the owner/builder or septic contractor after the house has been staked and the proposed drainfield area has been underbrushed.

Issued by: Chris R. Adkins - RS

Date: 12.5.03

Issued to: John [Signature]

Date: 12/5/03

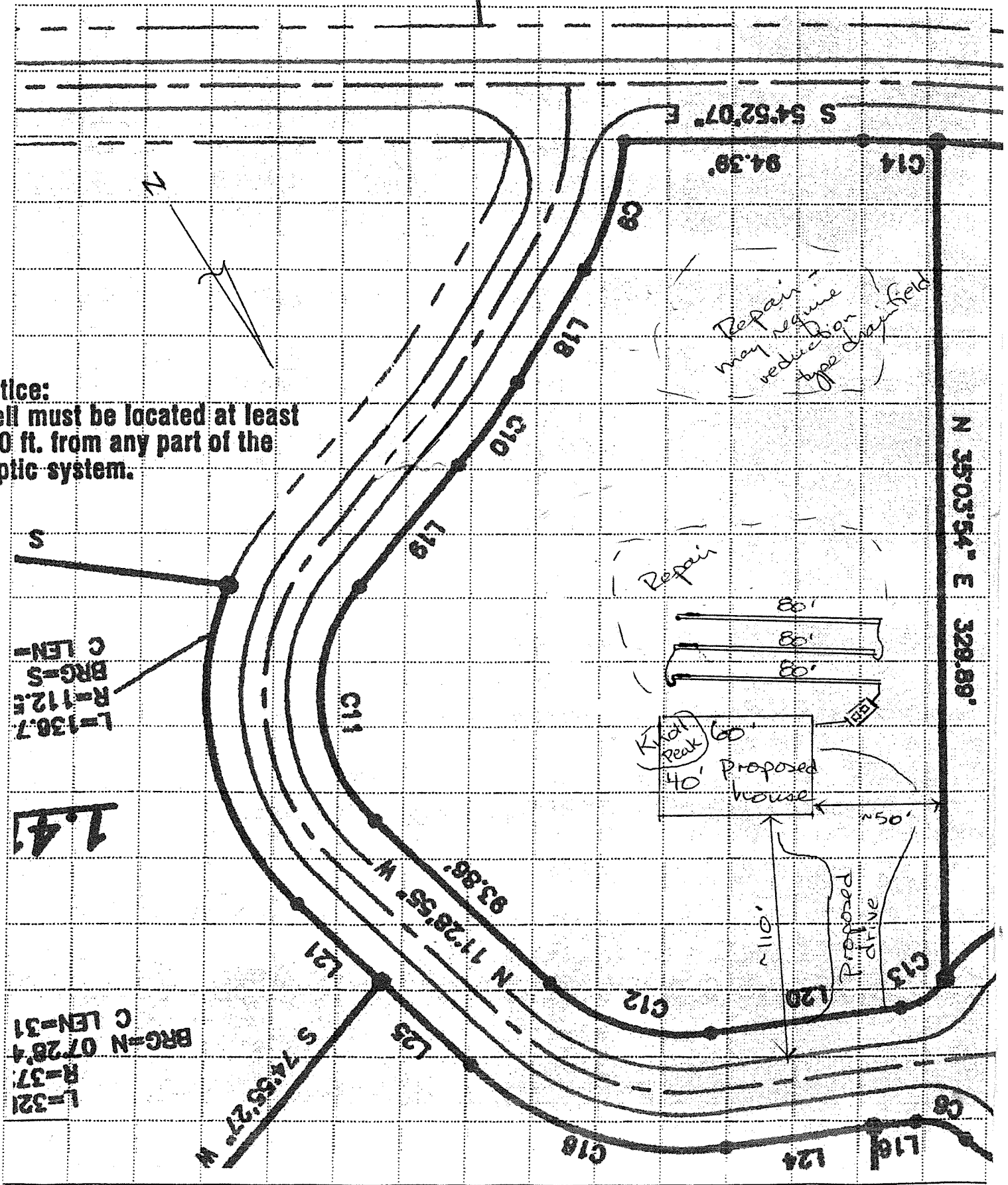
ANY ALTERATIONS OR MODIFICATIONS (MAN MADE OR NATURAL) TO THE SITE, SYSTEM DESIGN FLOW, OR CONDITIONS IN WHICH THE PERMIT WAS ISSUED WILL VOID THE PERMIT.

File Name: **91** Chasewood Subd.

Permit No.: **03-496**

Pin No.: **8574 635433 000**  
**63-4772-**

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



C LEN=  
BRG=S  
R=112.5  
L=138.7

**1.47**

C LEN=31  
BRG=N 07°28'4  
R=37  
L=321

SCALE: 1" = 50'