## GREEN HOLOW LN

## Hancock, David

PIN: 8592-20-8681-000 File Name: Big Hill, Lot 133 Permit No.: 17-230

TRANSYLVANIA COUNTY DEPARTMENT OF PUBLIC HEALTH

| NewX Repair   | Addition/Expansion                                  |  |  |  |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|--|--|--|
| No. of Bdrms: 4 System Type:  | Proprietary Name: Infiltrator Quick 4               |  |  |  |  |  |  |  |  |  |
| Hancock, David  Owner's Name  System Installer  Authorized State Agent  Taylor Fowler  System Installer  Authorized State Agent  Date of Operation Permit Issuance  This system has been installed in compliance with applicable NC General Statutes, Rules for Sewage Treatment and Disposal conditions of the Improvement Permit and Construction Authorization |   |  |  |  |  |  |  |  |  |  |
| Septic Tank Manufacturer: Infiltrator 1060 Filter Brand: Polylok PL-68  | STB- 2071 Date of Manufacture: N/A                  |  |  |  |  |  |  |  |  |  |
| See "as built" drawing for system   | location and measurements.                          |  |  |  |  |  |  |  |  |  |
| Conditions/Comments: Clean and replace se   | ptic tank effluent filter as required.              |  |  |  |  |  |  |  |  |  |
| Subsurface system operator required? No X Yes _ conditions, maintenance and reporting.  | If yes, see attached sheet for additional operation |  |  |  |  |  |  |  |  |  |

The septic tank should have all compartments pumped out every 3-5 years, on average, or when the solids are more than 1/3 of the liquid depth in any compartment. Depending upon trench depth, maximum fill over the drainfield cannot exceed two feet. Establish cover over drainfield and divert surface waters to prevent erosion or degradation of the system. No part of the septic system should be subjected to: traffic or any other compaction; vegetation with aggressive and/or hydrophilic (water loving) root systems such as maples or willows; excessive fill or heavy landscaping materials such as rocks/boulders; or any other activities or circumstances that may alter site conditions and may cause problems with the initial system or the repair area as permitted.

Big Hill
L (33 11/22/17/18
"As Built #17-230 Drive House Cut PL-68 STB 2071 1 Post Post Infiltrator 1050 371 PIL 191 S.T. 90'L 110.0 ~401 90'1 Sm Hemlock Sour Corr. Step Big. Leaning Sour 210.0 = 72 Stream IPF Chambers PIL 1341

· **.** . . .

| PIN: 8592-20-8681-000 File Name: Hancock, David Permit No.: | 17-230 |
|---|--------|
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## TRANSYLVANIA COUNTY DEPARTMENT OF PUBLIC HEALTH

## **Improvement Permit**

A building permit cannot be issued with only an Improvement Permit

| ISSUED TO: Hancock, David   | PROPERTY LOCATION: Green Hollow Road,  |
|---|--|
| ,   | Big Hill, Lot 133  |
| New □ Repair □ Expansion □ Type of Structure: 4 BR res.   | Site Improvements required prior to Construction Authorization Issuance:   |
| Proposed Wastewater System Type: IIezflow or chamber  | (25% red.)   |
| Projected Daily Flow: 480 GPD  Number of bedrooms: 4 Max. No. of Occupants: 8   |  |
|   | -  |
| Pump systems with an effluent pump must be designed by a Professi   | upon final location and elevations of facilities ional Engineer (P.E.) and plans submitted to the Environmental Health Section for approval.  Improvement Permit Expiration Date: 17-23-22   |
| Type of Water Supply: <u>future well</u>  | Improvement retaint Expiration Date. 17-23-22  |
| Permit conditions: see below  |  |
|   |  |
| $\sim$ $\sim$   |  |
| Authorized State Agent: Bua Frams REAS  | Date: 17-23-17 See Attached Permit Diagram   |
|   | Health Section in no way guarantees the issuance of other permits. The permit holder is  |
| responsible for checking with appropriate governing bodies in meeting t   | 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 owner<br>Sewage Treatment and Disposal and to conditions of this permit. | ership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for   |
|   | RMITTED - MUST USE CERTIFIED INSTALLER   |
|   | truction Authorization quired for Building Permit)   |
|   | 954, .1955, .1956, .1957, .1958, and .1959 are incorporated by reference into this permit and  |
| ISSUED TO: Hancock, David   | Facility Type: 4 BR res.   |
| Basement? ĎŸes □ No Base  | sement Plumbing Fixtures? ☐¥¥es ☐ No   |
| Type of Wastewater System** (See note below, if applicable $\square$ )  | er (25% red.) (Initial) Wastewater Flow: 480 GPD   |
| same  | (Repair) LTAR:45   |
| Installation Requirements/Conditions  |  |
|   | Trench Length: 270 feet Trench Spacing: 9 min Feet on Center   |
| Pump Tank Size gallons, minimum Tren  | nch Width: 3 feet Distribution Method: serial  |
| material and the bottom of the trench shall not be greater than 36" from t  | inches. There shall be a minimum of 6" of soil cover over the installed drainfield the surface of the ground at final grade.  shall be level to +/- '/4" in all directions)  |
| Min. distance between system and nearest: Well 100 ft. Water L  | 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 recommen   |
| •   | y flow and to accommodate possible space constraints.  |
| put in septite system and to use an extra   | , 10 m and 10 an |
|   |  |
| **If applicable:<br>KiMd&KiduWiN&XyXiYnY1YpYXYeZiNeVIXMJB&F&NYYONMyXiYpXXP&XiNeWJ   | An MAX And IX All X All  |
|   | Date: 10/26/17   |
| Owner/Legal Representative Signature:  This Construction Authorization is subject to reocation 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 Auth   | horization is subject to compliance with the provisions of the Laws and Rules for Sewage have the on-site wastewater system installed by an authorized installer in accordance with the  |
| Authorized State Agent: Sme Hoom  | NEHS Date of Issuance: 10-23-17  |
| See Attached Permit Diagram Construction  | n Authorization Expiration Date:10-23-22   |

|          |   |                |   | '  | CITTUL IVO. | ·_/                                     |                  | PIN:_                                 | 8246                                    | <u> - 20 -</u>                         | 8681                                  | -000   |          |
|----------|---|----------------|---|--|-------------|---|------------------|---------------------------------------|---|--|---------------------------------------|--------|----------|
|          | GREEN                                   | Itollo         | w land                                    | =  |             |   |                  |                                       |   |  |                                       |        |          |
| <u>:</u> | ;                                       | •              | OT 133                                    | i  |             | ···                                     |                  |                                       | *************************************** | ······································ | · · · · · · · · · · · · · · · · · · · |        | ••••     |
|          |   |                |   |  |             |   |                  | SHT .                                 |   |  |                                       |        |          |
| * Fut    | RE W                                    | ELL A          | REA SI                                    | ו משטי                                   | FOR PI      | LELIMO                                  | NA SET           | ruit Pos                              | 45 ON                                   | 47 - M                                 | UST P                                 | AYWCI  | LPERM    |
|          |   |                |   |  |             |   |                  |                                       | 一                                       |  |                                       |        |          |
|          |   | <u>.</u>       |   |  |             |   |                  | + /                                   |   |  |                                       |        |          |
| +        |   |                |   |  |             |   | 1,51             | TURE                                  | 4                                       |  |                                       |        |          |
|          |   | GO             |   |  |             | ,                                       | MELL             | AREA                                  | ノ                                       |  |                                       |        | İ        |
|          |   | GRA            |   |  |             | <i>\frac{1}{2}</i>                      | .( <i>.2017.</i> | 257Zm)                                |   |  | <u> </u>                              |        | \        |
| 1        |   |                | , To                                      | LLOW                                     | LANE        |   |                  |                                       |   |  | cui                                   | 4      | 1        |
|          | ••••••••••                              |                |   |  | LANE        | /                                       |                  |                                       |   |  | ļ                                     |        | <u> </u> |
|          | P                                       | w_             |   |  |             |   | ,                |                                       |   |  | DE                                    | :      |          |
|          | 1~/                                     | <b>VV</b>      | $\downarrow I$                            |  |             | +                                       |                  | <del></del>                           |   | į                                      | SAC                                   | -      |          |
|          | CREEN                                   |                | 7   |  | 100'        | 30'                                     |                  | /                                     |   | 1                                      | <br>!                                 | ·      | <i>-</i> |
|          | SPACE                                   |                |   | 1  | MID         | 1                                       | /                |                                       |   | +-                                     |                                       |        |          |
|          | ••••••••••••••••••••••••••••••••••••••• | ************** | 140                                       | <i> /</i>                                | 4           |   |                  | /                                     |   | <del>- \</del>                         |                                       |        |          |
|          | NO<br>SEPTIC                            | 1              | P/W/                                      |  | /           |   |                  | 7                                     |   | 9-                                     |                                       |        | R/W      |
|          | <b>i</b>                                | 1/             |   |  |             |   | 131              |                                       |   |  |                                       |        |          |
|          | veus                                    |                | * YELL                                    |  | / _         |   | 8                | , , , , , , , , , , , , , , , , , , , |   | \                                      |                                       |        |          |
|          |   | A              | 25 × 25                                   |  | 1 //        | $\longrightarrow$                       | ķ. /             |                                       |   | \                                      |                                       |        |          |
|          |   |                | 7 min                                     | <i>'</i>                                 |             | 26                                      | <i></i>          |                                       | •••••••                                 |  | •••••••••                             | ļ      |          |
|          | İ                                       |                | T   |  | **          |   | /                |                                       |   | \                                      |                                       |        |          |
|          |   |                | S0"                                       |  | POSED       |   |                  |                                       |   |  | •••••                                 | ļ      |          |
|          |   |                | MIN                                       | 1 4                                      | BR W/       | : 1                                     |                  |                                       |   | . 1                                    |                                       |        |          |
|          |   | /              |   |  | BASEN       | ENT                                     |                  |                                       |   |  | 1                                     |        |          |
|          | Ĭ                                       |                |   | 5'N S                                    |             | -J                                      |                  |                                       | *************************************** |  | 1                                     |        |          |
|          | 10'-1                                   |                | 3×92                                      | $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $ | PRCH        |   |                  |                                       |   |  | 1                                     |        |          |
|          | Tum                                     |                | 3 × 90 × 10 × 10 × 10 × 10 × 10 × 10 × 10 |  | 20          | <u> </u>                                | <u>.</u>         |                                       |   |  |                                       |        |          |
| (N)      | / [                                     |                |   |  | CA W.       | ie.                                     |                  |                                       |   |  | \                                     |        |          |
|          |   |                |   |  | 77.0        | 2                                       | >                | Π                                     |   |  |                                       |        |          |
|          | / /                                     |                |   |  | CAN LES     |   | # <u> </u>       |                                       |   | į                                      | \                                     |        | >        |
|          | $L_{I}$                                 | R              | EPAIR                                     | 2  |             |   | Tago             | CIMIN                                 |   |  | <b>\</b>                              | IN     | EIGHRO   |
| 0        | 7                                       |                |   | ••••••                                   |             | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | -                | -                                     |   | Ì                                      | 1                                     | 1      | SEPTIC   |
| /        |   |                |   | Λ  | REA         | _                                       | TYP              | <b>)</b>                              |   | \                                      | \                                     | 1      | AND      |
| ф        |   |                |   |  | シーン         |   | , , ,            |                                       |   |  |                                       | -      | REPAIR   |
|          |   |                |   | _  |             |   |                  | I                                     |   | \                                      |                                       | 1 ; ;  |          |
|          |   |                |   |  | <u> </u>    |   |                  | _ ك                                   |   |  |                                       | 11     | <u> </u> |
|          |   |                | 13.                                       | 1.361                                    | 7           | 1                                       |                  |                                       | 4                                       |  |                                       |        |          |
|          |   |                |   | •  | <b>*</b>    |   | <u> </u>         |                                       |   |  |                                       | -0     |          |
|          |   |                |   | ••••••••                                 | 10'M        | N                                       | <b>\</b> 0-      |                                       | 98.                                     | Zr                                     |                                       | •••••• |          |
| · :      |   | Ci             |   | 1 -                                      |             |   | _                |                                       |   |  |                                       |        |          |
|          |   | 77             |   |  |             |   |                  | •                                     |   | -                                      |                                       |        | • :      |
| Sai      | (cr)<br>1-23                            |                | 257                                       | 160                                      | / S         |   |                  |                                       |   |  |                                       |        |          |

SCALE: 1" = 40'APPROX