

- New
- Repair
- Addition

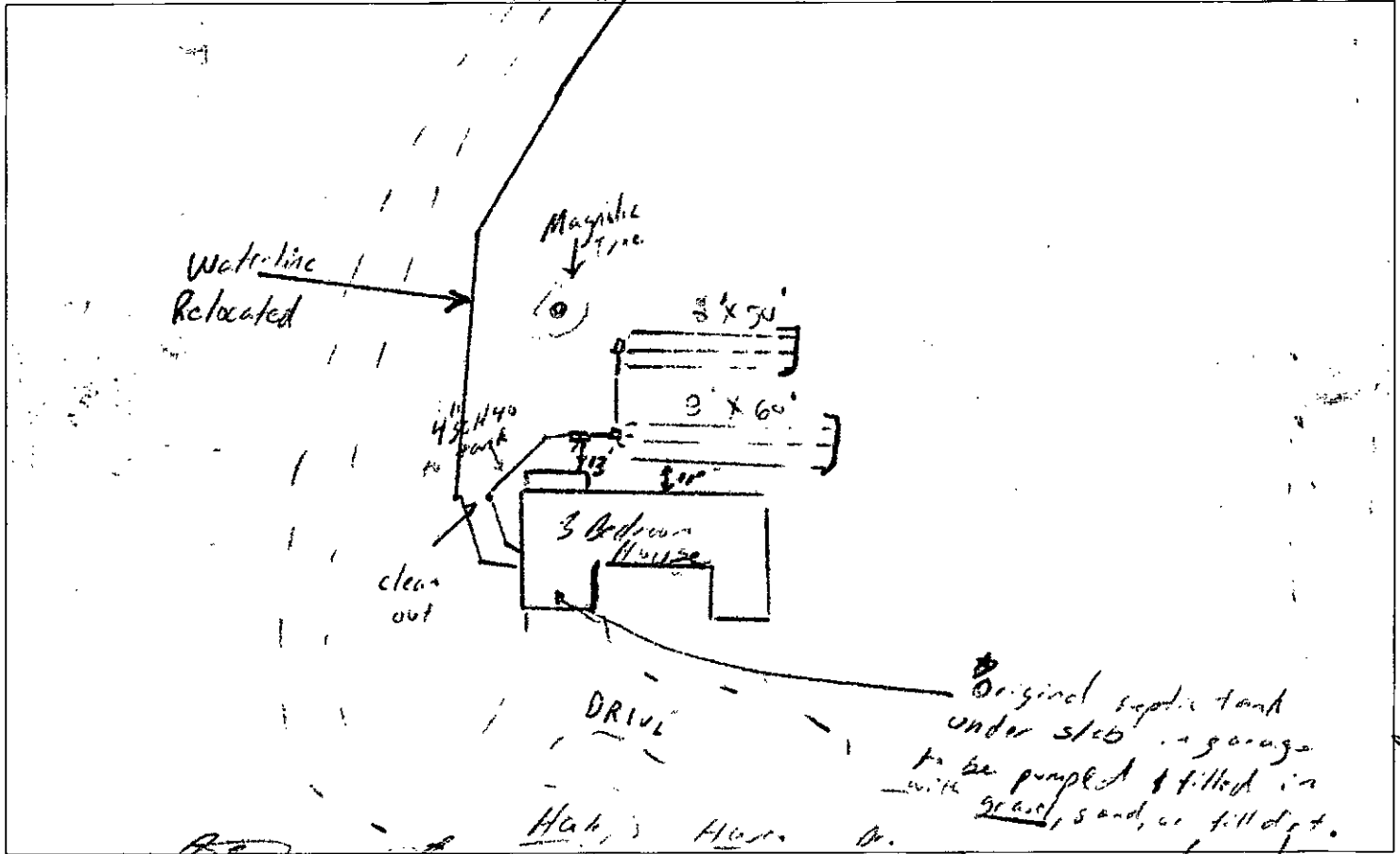
APPLICATION # _____

Rutherford-Polk-McDowell District Health Department Operation Permit

(Permit subject to revocation if site plans or intended use change)

Owner or Legal Agent: Mr. & Mrs. Santzen County: POLK
 No. of Trenches: 2 Trench Length: 110' (total) Trench Width: 8' each
 Type of system: Conventional Gravel System installed by: Terry Hayes
 Conditions/Comments: Kingsbury 1,000 gallon ST + 2' 8" x 30'
conventional gravel-bed drainfields. Recommend pumping
tank every 3 years

NOT DRAWN TO SCALE * *SITE PLAN WITH SYSTEM DETAILS*



Issued By: [Signature] Environmental Health Specialist Date: 12/31/01

COMPLETION OF THIS OPERATION PERMIT ALLOWS THE SYSTEM TO BE PLACED INTO USE. PROPER CARE OF YOUR SEPTIC SYSTEM REQUIRES MANAGEMENT AS WELL AS PERIODIC MAINTENANCE.

OPERATION AND MAINTENANCE RECOMMENDATIONS

- (1) The drainfield does not have unlimited capacity. Try to limit the volume of your wastewater and repair any dripping faucets or toilets. Be sure that the water from the roof gutters, foundation drains, and ground surface does not flow over the system.
- (2) Do not add materials such as hygiene products, cigarette butts, coffee grinds, disposable diapers, cooking oils or grease to the septic tank system and restrict the use of garbage disposals.
- (3) Maintain a grass vegetative cover over the drainfield to prevent soil erosion.
- (4) Avoid driveway construction or other over the system and repair area and keep autos and heavy equipment off the system. Do not cover with fill dirt.
- (5) Don't wait until your drainfield fails to have your tank pumped, by then the drainfield may be ruined. Have solids pumped out of the tank as needed, usually every 3-5 years.

LP-699

Owner or Legal Agent: **SANTZEN**
Hayes's Haven

- New
- Repair
- Addition

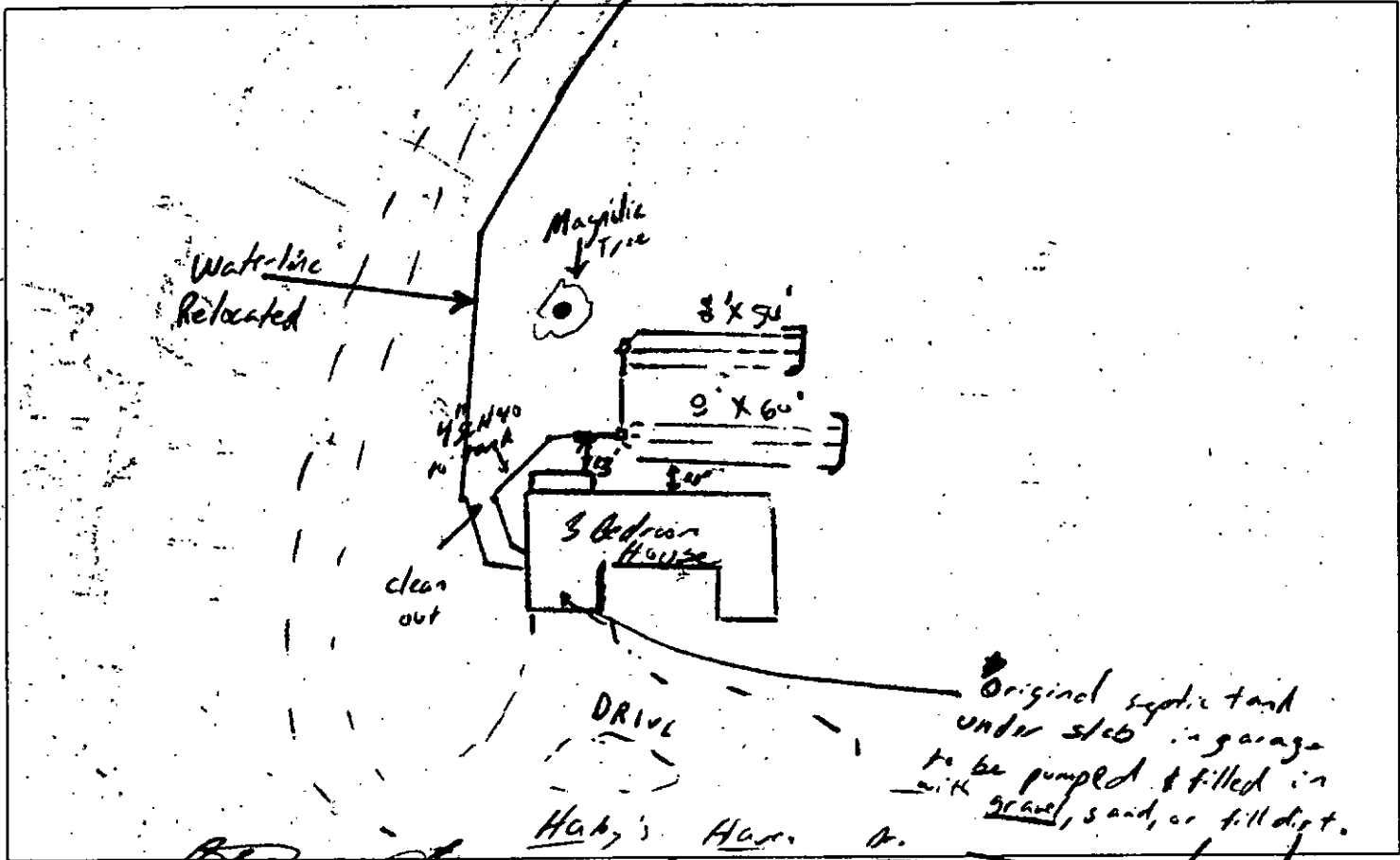
APPLICATION # _____

Rutherford-Polk-McDowell District Health Department Operation Permit

(Permit subject to revocation if site plans or intended use change)

Owner or Legal Agent: Mr. & Mrs. Santzen County: POLK
 No. of Trenches: 2 Trench Length: 110 (total) Trench Width: 8' each
 Type of system: Conventional Gravel System installed by: Terry Hayes
 Conditions/Comments: Kingsway 1,000 gallon S.T. to 2 8' x 50'
conventional gravel-bed drainfields. Recommend pumping
tank every 3 years.

NOT DRAWN TO SCALE *SITE PLAN WITH SYSTEM DETAILS*



Owner or Legal Agent: **SANTZEN**

Issued By: [Signature] Environmental Health Specialist Date: 12/31/01

COMPLETION OF THIS OPERATION PERMIT ALLOWS THE SYSTEM TO BE PLACED INTO USE. PROPER CARE OF YOUR SEPTIC SYSTEM REQUIRES MANAGEMENT AS WELL AS PERIODIC MAINTENANCE.

OPERATION AND MAINTENANCE RECOMMENDATIONS

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- (3) Maintain a grass vegetative cover over the drainfield to prevent soil erosion.
- (4) Avoid driveway construction or other over the system and repair area and keep autos and heavy equipment off the system. Do not cover with fill dirt.
- (5) Don't wait until your drainfield fails to have your tank pumped, by then the drainfield may be ruined. Have solids pumped out of the tank as needed, usually every 3-5 years.

- New
- Repair
- Addition
- Re-evaluation

PIN# _____

APPLICATION # _____

Rutherford-Polk-McDowell District Health Department

Improvement Permit (Expiration Date) _____

(Permit subject to revocation if sire plans or intended use change)

Owner: M. & Mrs. Jantzen County: POLK

Current Mailing Address: 1489 Lynn Rd. Columbus 28722

(Street/Develop. Name/Lot #/SR#)

Home Phone #: 859-6257 Work Phone #: _____ Agent's Name & Phone #: _____

Directions to property (main rd. to site): Columbus - Hy 108 TL on Haley's Haven to blue house on right

Water Supply: Private well Public Spring Type of Wastewater System: Conventional gravel or E.S.A.

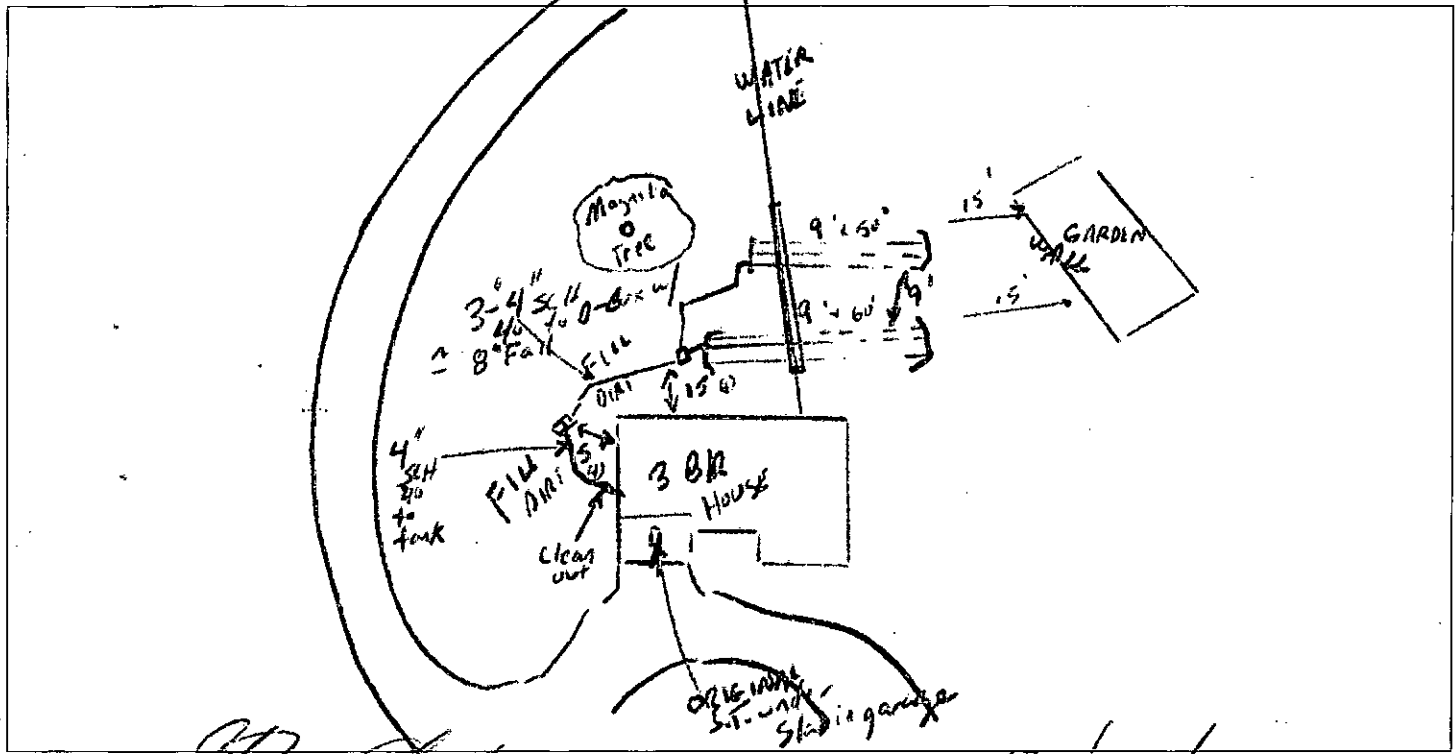
Type of Facility: 3 BR HOUSE Basement: Yes No With Plumbing: Yes No

Design Waste Flow: 360 G.P.D. L.T.A.R. 5 Tank Capacity (min.) 1,000 gallons

No. of Trenches 2 Trench Length 110 ^{total} Ft. Trench Width 9 Ft. Trench Depth 48" in.

Conditions/Comments: Pump old tank & fill in with fill dirt, concrete, sand, or gravel (on lower side wall)
May be necessary to relocate water line 10'(4) from system or sleeve with 3"-4" SCH 40 over fields May use gravel or E.S.A.

* NOT DRAWN TO SCALE * *SITE PLAN WITH SYSTEM DETAILS* LOT SIZE/ACRES: _____



Issued By: [Signature] Date: 12/17/01
 Environmental Health Specialist

AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION
 (VOID AFTER 5 YEARS)

Construction of the wastewater system for the improvement permit indicated above 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 N.C. and Rules adopted pursuant to this article. Any alteration of the site or soil-conditions, changes to the proposed facility to be served, or submission of false information may subject the permit and authorization to suspension or relocation.

Issued By: [Signature] Date: 12/17/01
 Environmental Health Specialist

Owner: SAUTZEN
S/D & Lot #:

RUTHERFORD-POLK-McDOWELL HEALTH DEPT.
APPLICATION FOR REPAIR PERMIT



OWNER/LEGAL AGENT: Jantzen

PROPERTY ADDRESS: 1489 Lynn Rd.
P.O. Box or Street City State Zip

COUNTY Polk HOME PHONE# 859-6257 WORK PHONE# _____

Directions to property- State Road # & Name: Lat Haley's Haven -
go up Haley's Haven - follow to blue house.

Type of Facility: House Mobile Home Other: _____

Lot Size: _____ Number of Bedrooms: 3 Number of Occupants: 2

Garbage Disposal: Yes No Basement with plumbing: Yes No

Type of water supply: Private well Public or community water system Spring

YEAR/NAME SEPTIC TANK INSTALLED: house is 50 yrs. old.

How long has the septic system been failing? _____

How often does it fail? all the time. when used a lot. when it rains

How is the septic system failing? (Check all that apply.) - coming up in stower - gurgling toilets,
 draining slowly. backing up in house. leaking on top of ground.

HAS SYSTEM EVER BEEN REPAIRED/PUMPED. WHEN: May 2001 & Dec. 2001.

SEPTIC TANK SYSTEM LOCATION (TANK & DRAINFIELD): _____

Well location: _____

Additional Comments: Tank is located ~~under~~ under garage.

Repair Application completed by: AS Date: 12-17-01

Information taken from: _____ Date: _____