

File Name: PISGAH FOREST FARMS

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

Pin #/Tax ID 9505-95-6325-000

Permit #: 99-475

Receipt No no charge - repair

Agent/Owner: COCHRAN, JOHN & CYNTHIA

Mailing Address: 76 Pisgah Forest Drive Pisgah Forest, NC 28769

Home Phone #: () 862-3436

Work Phone #: () _____

Proposed Buyer: _____

Mailing Address: _____

Home Phone #: () _____

Work Phone #: () _____

Property Location: 76 Pisgah Forest Drive Subdivision: Pisgah Forest Farms Phase/Sect.: _____ Lot #: _____
Road/Street

Directions to property: Hart Road to Pisgah Forest Farms - 5th house on left on paved road (.7 mile)

Flood Zone	
Is the property in a flood zone?	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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 crawl space No. Bedrooms: 2 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: ac. Date lot recorded: _____ Right of ways, easements, etc. none 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: _____ Date: 10-4-99 (taken by phone)

REPAIR

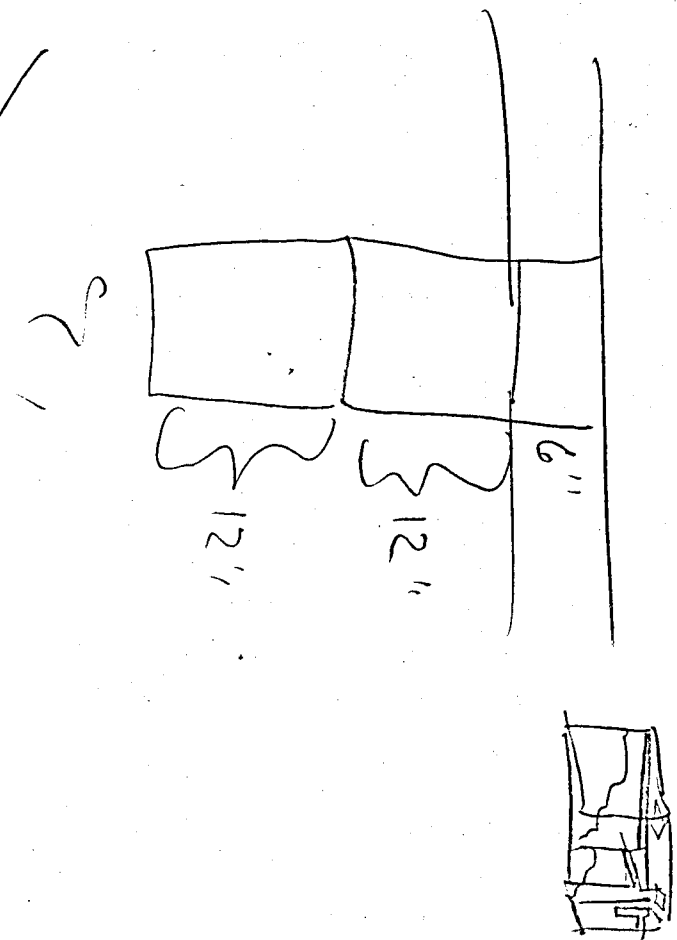
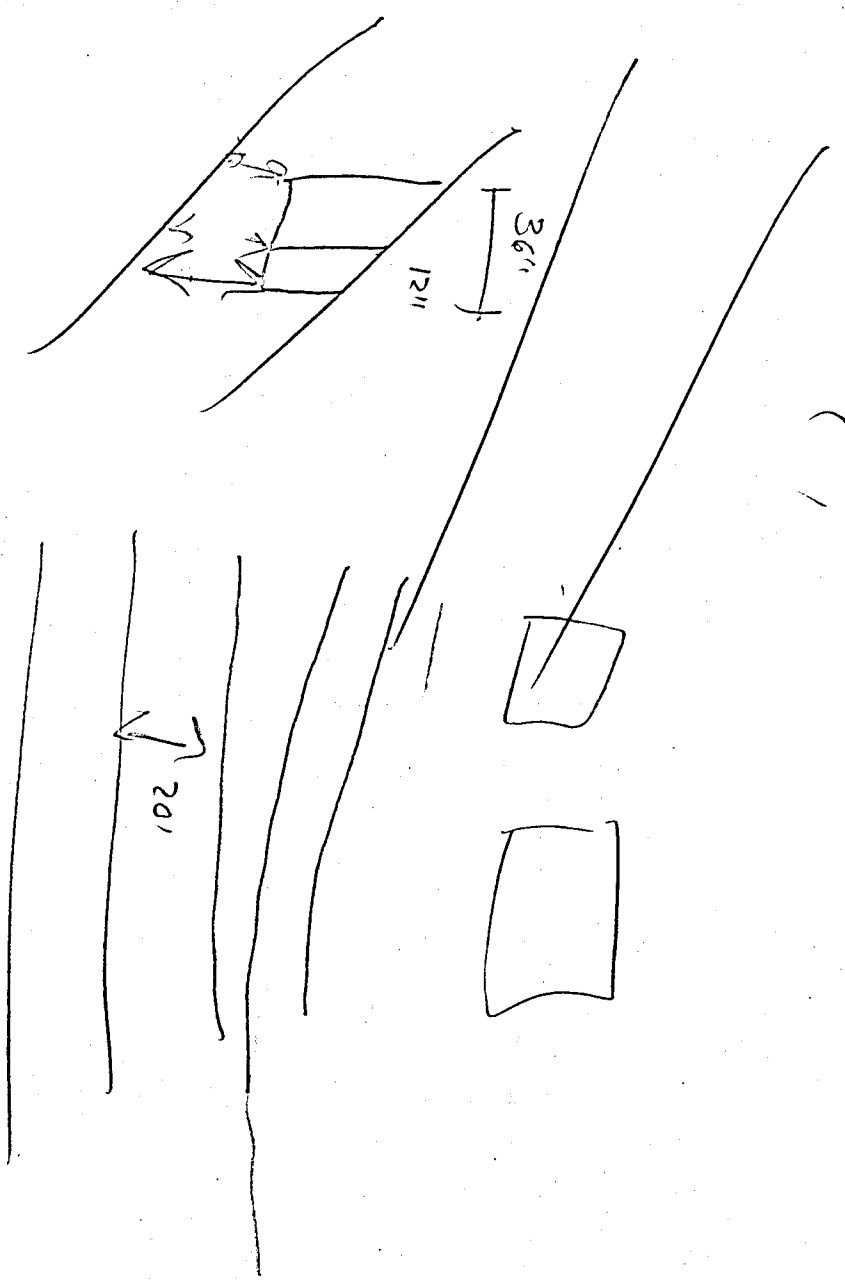
**ON-SITE WASTEWATER DISPOSAL SYSTEM
OPERATIONS PERMIT**

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 _____ years.

Comments: (3) 60' 16" T.D LRP trenches (owner to install filter before covering tank - tank appears 'dead')

Installed by: Ronnie McGuire Final Inspection by: Ala Smith MS RS Date: 10-20-99



File Name: PISGAH FOREST FARMS

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

Pin #/Tax ID 9505-95-6825-000

Permit #: 99-475

Receipt No no charge - repair

Agent/Owner: COCHRAN, JOHN & CYNTHIA

Mailing Address: 76 Pisgah Forest Drive Pisgah Forest, NC 28758

Home Phone #: () 862-3436

Work Phone #: ()

Proposed Buyer:

Mailing Address:

Home Phone #: ()

Work Phone #: ()

Property Location: 76 Pisgah Forest Drive Subdivision: Pisgah Forest Farms Phase/Sect.: _____ Lot #: _____
Road/Street

Directions to property: Hart Road to Pisgah Forest Farms - 5th house on left on paved road (.7 mile)

Flood Zone	
Is the property in a flood zone?	
<input type="checkbox"/> Yes	<input checked="" 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 **crawl space** No. Bedrooms: 2 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: 20 house built approx 1974 Date lot recorded: _____ Right of ways, easements, etc. none 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: _____ Date: 10-4-99 (taken by phone)

**AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION
(Diagram and Conditions Attached)**

New Installation: Repair/Addition: Original Permittee: Bill Parker Dated: 9-16-74

Design waste flow: 240 GPD LTAR: _____ Septic Tank Capacity: EXISTING gal/min. Pump Tank Capacity: _____ gal/min. Proposed Wastewater System: 10" I.D. Large Dia. Pipe

Drainfield: Total Trench Length: 180 ft. Square Footage: 450 Trench spacing: 8 ft. on ctr. Individual Trench Length: 60 ft. Maximum Trench Depth (Low Side): 12 in. Trench Width: 12 in.

Distribution Method: D-box Min. distance between system and nearest Well: 50 ft. Water line: 10 ft. Foundation: 5 ft. Property line: 10 ft. Vertical Cut: 15 ft.

Comments & Special Conditions: install (3) 60' ultra shallow 10" I.D. large diameter pipe trenches; bring in 6" suitable soil to cover system; start system 20' off road bed/cut bank at bottom of property; block off old drainfield

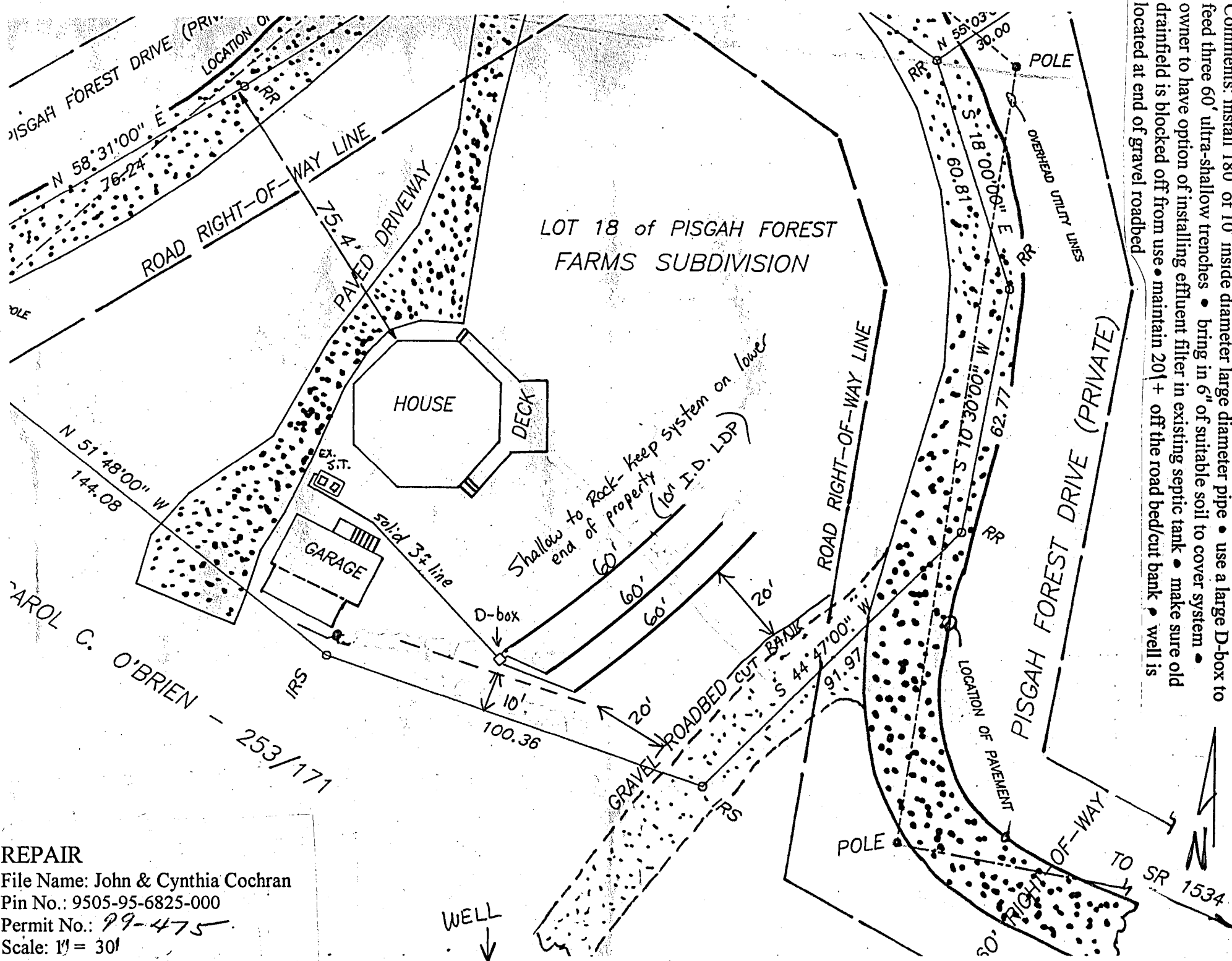
Construction of the wastewater system for the permit indicated is hereby authorized. The wastewater system described in the Improvement permit has been designed and can be installed and operated in compliance with Article 11 of Chapter 130A of the General Statutes of North Carolina and Rules adopted pursuant to this Article. This Construction Authorization is valid for a period of 5 years from the original date of issue. The Construction Authorization must be renewed upon expiration prior to the installation/repair of the wastewater system, or prior to the issuance of any required building permits. A pre-construction conference with the owner or developer, or an agent of the owner or developer, and the health department will be required for re-issuance of the Construction Authorization.

I agree to install the wastewater disposal system in accordance with the improvement permit, construction authorization and any conditions specified therein.

Signed: Carol Bucher Date: 10/21/99 Construction Authorization prepared by: Alex Smith Date: 10-12-99

PERMIT AND CONSTRUCTION AUTHORIZATION MUST BE ON SITE DURING ALL PHASES OF CONSTRUCTION/INSTALLATION AND INSPECTION

use completely; install effluent filter in existing septic tank if owner requests - shallow to ROCK - Keep system shallow !!



Comments: install 180' of 10" inside diameter large diameter pipe • use a large D-box to feed three 60' ultra-shallow trenches • bring in 6" of suitable soil to cover system • owner to have option of installing effluent filter in existing septic tank • make sure old drainfield is blocked off from use • maintain 20' + off the road bed/cut bank • well is located at end of gravel roadbed

REPAIR
 File Name: John & Cynthia Cochran
 Pin No.: 9505-95-6825-000
 Permit No.: 99-475
 Scale: 1" = 30'

WELL
 ↓



TO SR 1534

Transylvania County Health Department Certificate of Completion

The sewage disposal system described on the record below has been inspected and approved by an agent of the Transylvania County Health Department.

NEW HOME

Harold C. McDowell

Signed

Sewage Disposal Record

Occupant _____ Owner BILL PARKER

Location of Building Private Forest Farms Dev Lot # 18

Address RT 1, Pigeon Creek, N.C.

Contractor Stopp Ditching Address Etowah N.C.

Date of Inspection 9-16-74 No. of Bedrooms 2 Baths 2 No. of Users _____

Septic Tank Materials: Concrete Block (Size _____ in.) Poured Concrete Pre-Cast

Capacity 855 Gals. Single or Double Compartment

Adequate For: Garbage Grinder
Yes No

Nitrification Field Materials: Terra Cotta Concrete Perforated Plastic

Distribution Box Yes No. of Lines 3 Width 12 FT Length of Lines 30 FT

Stone 17 Tons Other _____

Adequate For: Washing Machine ? Moderate use + three users with
Yes No

Sand Filter No. of Lines _____ Width of Line _____ Length of Line _____ Approved Sand _____

Precolation Test
Yes No

NOTE: Adequate for three users

Sketch of System

