

CEDAR CREEK SUBDIVISION

MCDUFFIE, AMY & ROBERT

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

~~9512-78-8535-000~~ lot 12 - JK

Pin #/Tax ID

9512-78-8771-000 lot 16

Receipt No

File Name:

Permit #:

Agent/Owner:

Home Phone #:

Proposed Buyer:

Home Phone #:

Property Location:

Road/Street

Subdivision:

Mailing Address:

Work Phone #:

Mailing Address:

Work Phone #:

Phase/Sec:

Lot #:

Directions to property:

Cedar Creek

GUY SMITH

MCDUFFIE, ROBERT & AMY

883-3470

Bunyon Gap Road

Cedar Creek

1500 Reasonover Rd. Cedar Mt. NC

JK & 16 to be  
combined

Hwy. 275 - left on Solomon Jones Rd. - left on Seldon Emerson Rd. - right  
into Cedar Creek - follow dirt road - sign on property that says Cedar Creek

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

Installation for: Mobile Home  Single  Double  House  No. Bedrooms: 3 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: 1.65 ac Date lot recorded: \_\_\_\_\_ Right of ways, easements, etc. NO 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: 4-29-04

**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: IIIg Management Entity:  Owner  Certified Operator Minimum inspection/maintenance review frequency N/A years.

Comments: Clean & replace septic tank effluent filter as req'd  
No vehicular traffic over system areas

Installed by: Robert Norton Final Inspection by: Jamesa Bayer, RS Date: 8/19/04

File Name: MCDUFFIE, AMY & ROBERT

TRANSYLVANIA COUNTY HEALTH DEPARTMENT ON-SITE WASTEWATER DISPOSAL APPLICATION

Pin #/Tax ID 9512-78-8771-000 lot 16

Permit #: 01-128

Receipt No

Agent/Owner: GUY SMITH

Mailing Address:

Home Phone #: ( )

Work Phone #: ( )

Proposed Buyer: MCDUFFIE, ROBERT & AMY

Mailing Address: 1500 Reasonover Rd. Cedar Mt. NC

Home Phone #: ( ) 883-3470

Work Phone #: ( )

Property Location: Bunyon Gap Road

Subdivision: Cedar Creek

Phase/Sec.: 12 & 16 to be combined Lot #:

Directions to property: Hwy. 276 - left on Solomon Jones Rd. - left on Seldon Emerson Rd. - right into Cedar Creek - follow dirt road - sign on property that says Cedar Creek

Flood Zone Inspections form with checkboxes for Flood Zone, Inspections, and Initials/Date.

Installation for: Mobile Home [ ] Single [ ] Double [ ] House [x] No. Bedrooms: 3 Basement: Yes [ ] No [x] 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: 1.65 ac Date lot recorded: Right of ways, easements, etc. no Water Supply: Private [ ] Spring [ ] Well [x] 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: 4-29-04

AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION (Diagram and Conditions Attached)

New Installation: [x] Repair/Addition: [ ] Original Permittee: Dated:

Design waste flow: 360 GPD LTAR: 5 Septic Tank Capacity: 1000 gal./min. Pump Tank Capacity: Proposed Wastewater System: E2flow

Drainfield: Total Trench Length: 180 ft. Square Footage: EQ. 720 Trench spacing: 9 ft. on ctr. Individual Trench Length: 60 ft. Maximum Trench Depth (Low Side): 12 in. Trench Width: 36 in.

Distribution Method: D-box Min. distance between system and nearest Well: 100 ft. Water line: 10 ft. Foundation: 5 ft. Property line: 10 ft. Vertical Cut: 15 ft.

Comments & Special Conditions: bring in 6"-12" suitable soil to cover drainfield - see other comments on permit drawing

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.

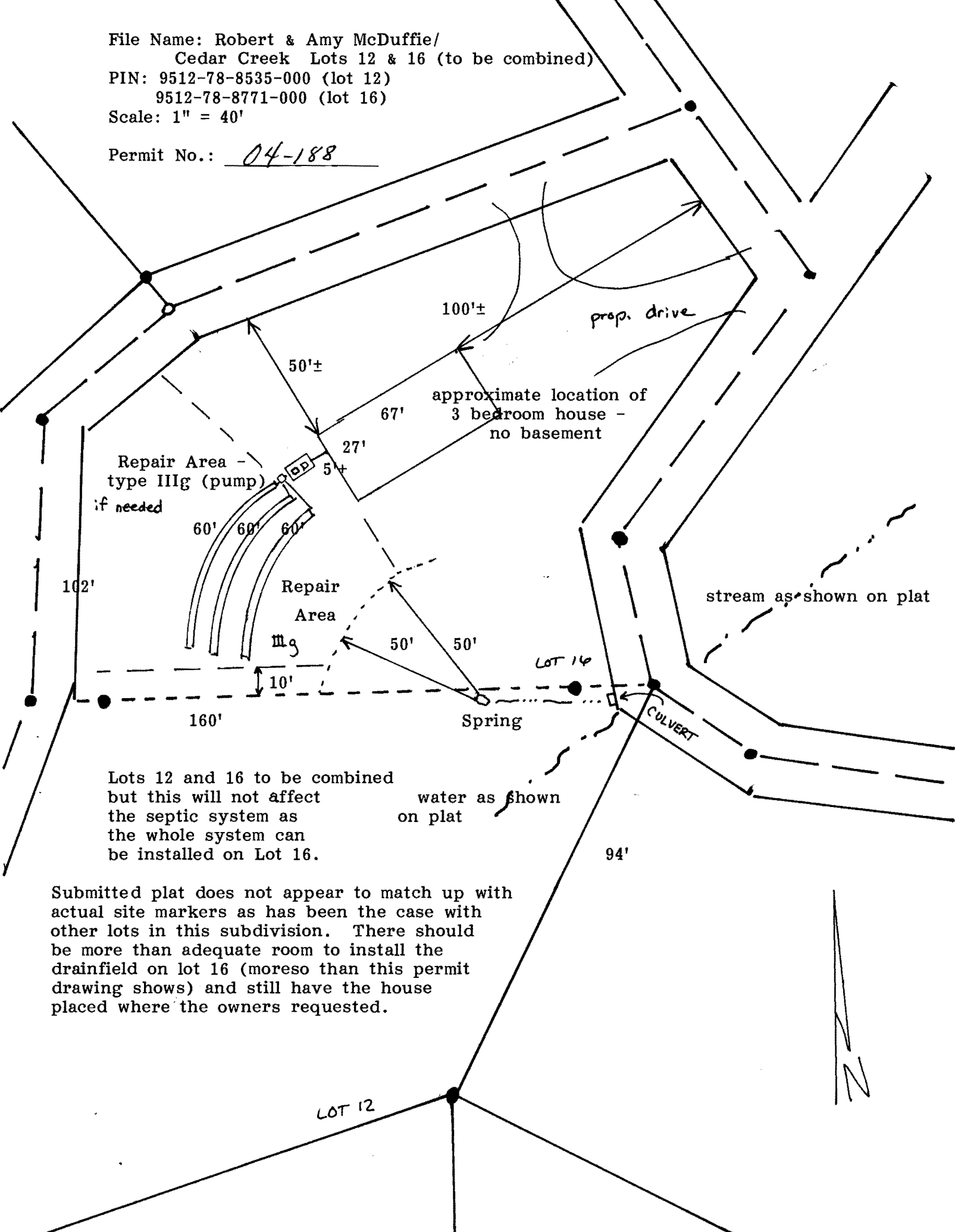
I agree to install the wastewater disposal system in accordance with the improvement permit, construction authorization and any conditions specified therein.

Signed: Amy McDuffie Date: 5/20/04 Construction Authorization prepared by: Alla Smith MS, RS Date: 5/19/04

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

File Name: Robert & Amy McDuffie/  
Cedar Creek Lots 12 & 16 (to be combined)  
PIN: 9512-78-8535-000 (lot 12)  
9512-78-8771-000 (lot 16)  
Scale: 1" = 40'

Permit No.: 04-188



Lots 12 and 16 to be combined but this will not affect the septic system as the whole system can be installed on Lot 16.

Submitted plat does not appear to match up with actual site markers as has been the case with other lots in this subdivision. There should be more than adequate room to install the drainfield on lot 16 (more so than this permit drawing shows) and still have the house placed where the owners requested.

LOT 12

Handwritten signature or initials.

Road

SCM-1040  
STR-318

Poplar Maple

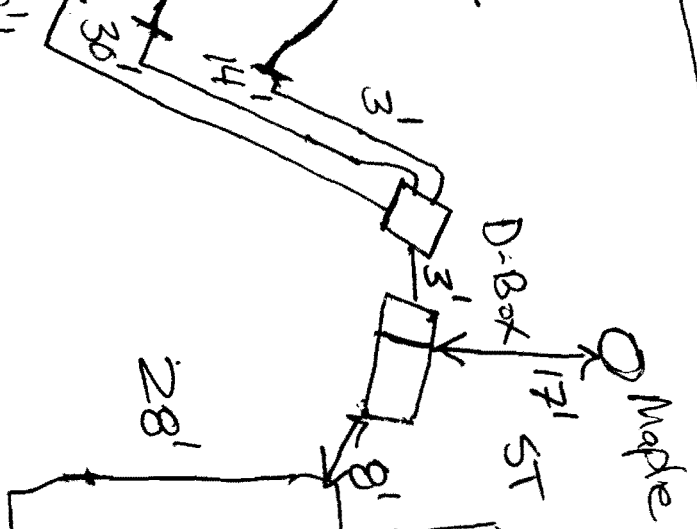
Hickory?

Sourwood

±9'0C

(3) ea @ 3'w x 60'L

EZ FLOW



6/28/04

Tank date

" As Built "

JB

8/19/04

~85'

~45'

PL

Spring head



Septic finished 8-19-04

9512-78-8535-000

9512-78-8771-000

SEPTIC PERMIT # 04-188

PROPERTY PIN # \_\_\_\_\_

ORIGINAL CERTIFICATE OF COMPLETION: File Name \_\_\_\_\_ Date \_\_\_\_\_

TRANSYLVANIA COUNTY HEALTH DEPARTMENT  
WELL CONSTRUCTION REPORT

DILLING CONTRACTOR: Clude Sawyer & Son DRILLER REGISTRATION NUMBER 2436

PROPERTY OWNER: Robert & Amy McDuffie

ADDRESS: 1500 Reasonover Road Cedar Mountain, NC 28719  
Street or Route No. City or Town State Zip Code

DATE DRILLED: 9-28-04 USE OF WELL Residential

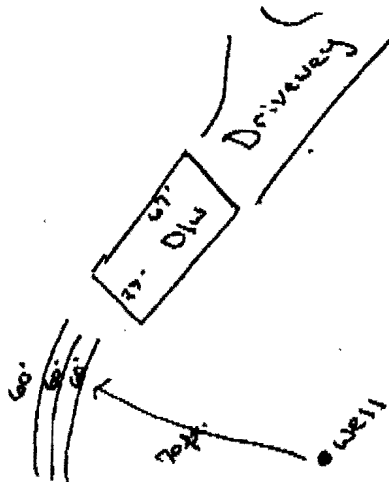
TOTAL DEPTH: 325 STATIC WATER LEVEL Below Top of Casing: \_\_\_\_\_ Ft. (Use "+" if Above Top of Casing)

YIELD (GPM): 15 METHOD OF TEST: Rig WATER ZONES (depth): \_\_\_\_\_

| SING:                           |               |                              |                | GROUT:                         |               |               |  |
|---------------------------------|---------------|------------------------------|----------------|--------------------------------|---------------|---------------|--|
| Depth                           | Diameter      | Wall Thickness Or Weight/Ft. | Material       | Depth                          | Material      | Method        |  |
| From <u>+1</u> To <u>21</u> Ft. | <u>6 1/2"</u> | <u>#21</u>                   | <u>plastic</u> | From <u>0</u> To <u>20</u> Ft. | <u>Cement</u> | <u>packed</u> |  |

REMARKS: \_\_\_\_\_

LOCATION SKETCH  
(Show direction and distance from at least two fixed reference points)  
(Indicate all septic systems within 100 feet of well)



Well Location may be indicated on original septic site plan when scale drawing is provided

I HEREBY CERTIFY THAT THIS WELL WAS CONSTRUCTED IN ACCORDANCE WITH 15A NCAC2C, WELL CONSTRUCTION STANDARDS.

Derrick Heath Sawyer 9-28-04  
Signature of Contractor or Agent Date

Notary Public For the State of North Carolina, County of Transylvania

My Commission Expires \_\_\_\_\_

McDuffie, Robert